



Preventing Suicide in Your Schools

Administrators' Guide to Addressing and Preventing Suicide

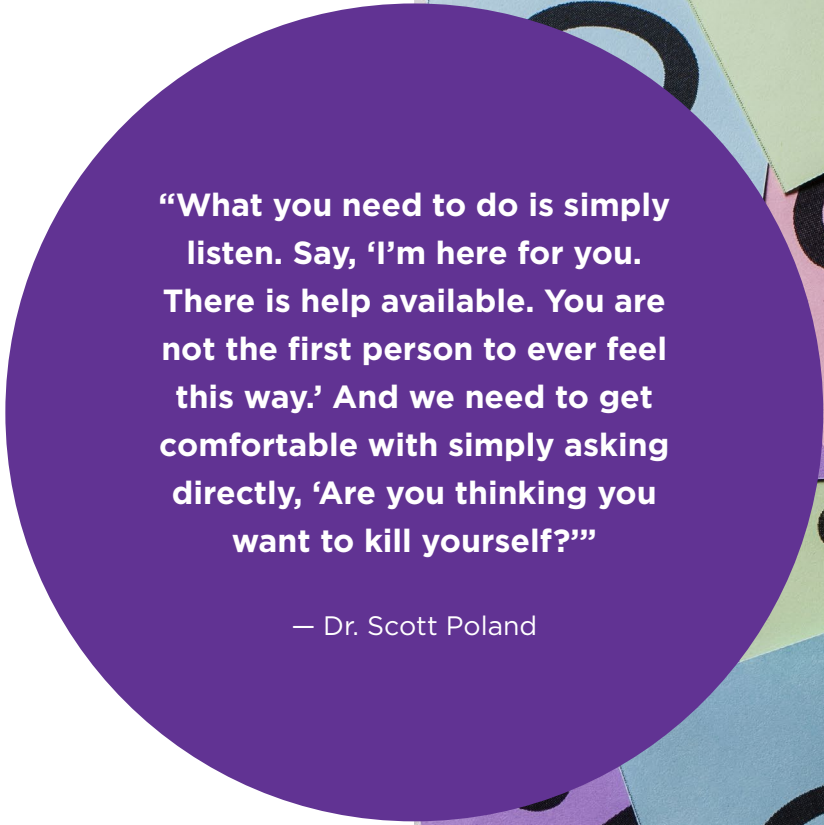


Introduction

No one wants to talk about suicide. It's an unpleasant topic that makes most people feel uncomfortable, especially those not trained in mental healthcare. Tragically, suicide is affecting our schools at alarming rates.

We want to start by applauding the courage and leadership you're taking right now as you read this guide. We'll look at some of the fears that school leaders have about suicide in their schools, as well as what we know about youth suicide and what you can do to lead your school to a healthier future. Thank you for joining us!





“What you need to do is simply listen. Say, ‘I’m here for you. There is help available. You are not the first person to ever feel this way.’ And we need to get comfortable with simply asking directly, ‘Are you thinking you want to kill yourself?’”

— Dr. Scott Poland

Overcoming Common Misconceptions

“I’m not an expert on suicide prevention. I don’t even know much about mental health at all.” We hear those words over and over when working with school personnel across the country. It’s true: educational leadership programs don’t prepare teachers and administrators to help students cope with mental health issues. In fact, most teachers have had little more than an introduction to psychology course. Yet, they are in schools every day with students who have experienced trauma, students who have mental health conditions, and students in despair. We all have the opportunity — and the obligation — to help them.

“I might make things worse!” That’s one of the biggest fears we hear educators express. In most cases, that is a myth. When students know that they have someone on their side, someone who cares about them, someone who wants to help them, they



are much more likely to ask for help. If you care enough to read this guide, you are that kind of person. You want to help, and that desire will help you avoid making things worse. In fact, students will see that caring in you and respond to it.

“I don’t want to give them the idea of suicide.” This is perhaps the greatest myth people have about suicide. However, talking with students about suicide has the opposite effect. When someone directly asks, “Are you thinking about suicide? Do you have a plan to die by suicide?” the person in crisis is reminded that they have someone who cares. Often, asking students about suicide opens the doors for them to get the help they may desperately need.

“Will I get sued?” It’s sad to say, but sometimes people fear asking about suicide because they’re afraid of their own consequences. The truth is, most lawsuits following suicide happened when a school **failed to act**, not when they took the initiative to get help for a student in need. Simply put, ignorance is not a defense against inaction when a student is expressing suicidal ideation.

You’re not an expert on suicide prevention, and that’s okay. You are an expert on your school, and you know and understand the demands of your school population better than any outsider could. That’s why it’s so important that you become informed about suicide. Look for warning signs (dark posts on social media, giving away prized possessions, talking about suicide) and learn how to respond if a student is considered at-risk, has suicidal ideation, has attempted suicide, or even if a student in your school dies by suicide. Let’s start that process by looking at what we already know.



“Do not be afraid of this word: Suicide. Do not be afraid to bring it up and talk about it. If a person is suicidal, it gives them a chance to unburden themselves, know that they’re not the only person to feel this way, and there is help available.”

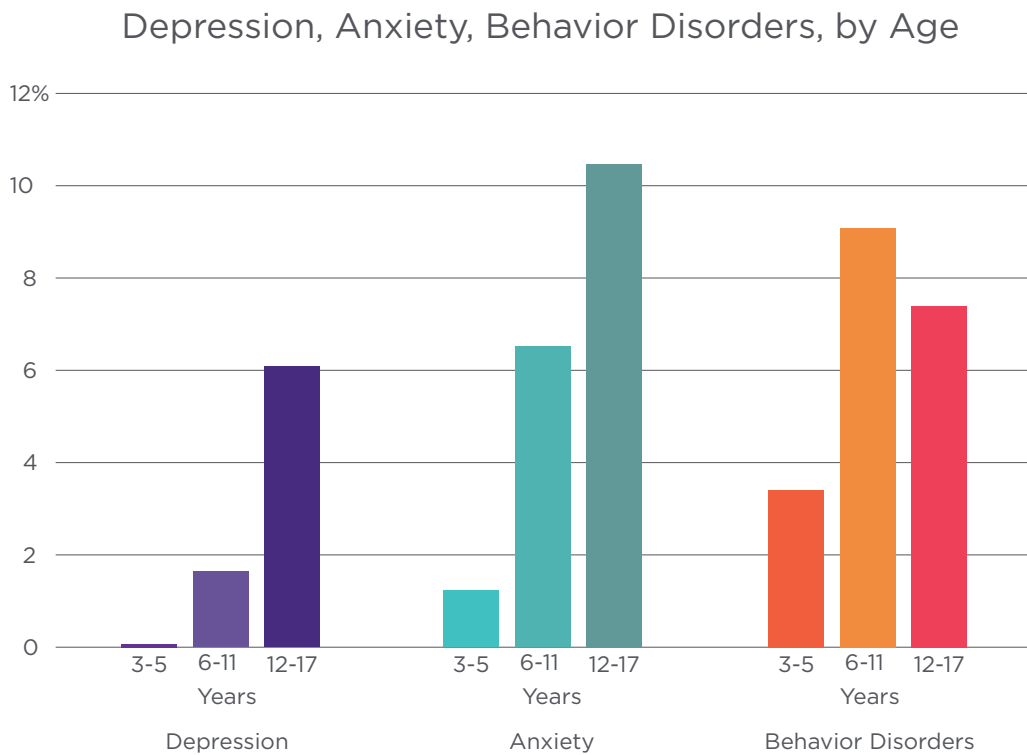
— Dr. Scott Poland



What Do We Know About Suicide?

According to the [Centers for Disease Control and Prevention \(CDC\)](#), mental health disorders among children were not uncommon even before the pandemic. Nearly 10% of school-aged children have been diagnosed with ADHD. Depression and anxiety are consistently increasing over time, yet many students don't have access to high-quality mental healthcare.

These issues aren't exclusive to older students. According to the [CDC](#), one in six U.S. children aged 2 to 8 years (17.4%) have a diagnosed mental, behavioral or developmental disorder. Mental health conditions like these can lead to suicide, but it's important to realize that someone doesn't have to be diagnosed with one of these conditions to choose suicide. Suicide affects people of all ages, all genders and all ethnicities, regardless of socioeconomic status.



<https://www.cdc.gov/childrensmentalhealth/data.html>



Thoughts of suicide can be frightening for those experiencing them as well as for caregivers, but we must face those fears. According to the National Alliance on Mental Illness (NAMI), **suicide is the second-leading cause of death** for people between the ages of 10 and 34 and the tenth leading cause of death for all ages across the United States.

Mental health experts across the country raised alarms about the effects of the pandemic on students' mental health and especially for their ability to manage suicidal thoughts. In fact, according to the [CDC](#), compared to 2019 statistics, the “proportion of mental health-related visits [to emergency departments] for children aged 5 to 11 and 12 to 17 years increased approximately 24% and 31%, respectively.” This highlights the growing need to address suicide prevention in schools.

We know that students of all ages struggled during the pandemic mentally, socially, emotionally, behaviorally and academically. The process of “catching up” is sure to add more stress and anxiety to students, teachers and caregivers for years to come. In fact, the U.S. Department of Education's [Institute for Education Sciences](#) was recently awarded \$100 million to help schools across the country learn more about learning loss throughout the pandemic, while states will receive billions of dollars to help students catch up from what some are calling a “lost year.”

“Suicide is usually the result of untreated, undertreated mental illness. Often in combination with adverse life experiences, we all simply need to know what to look for, what to do. We need to work as a team in our schools. Unfortunately, there’s still a lot of stigma attached to seeking mental health treatment.”

— Dr. Scott Poland



“It’s affected a lot of families. It’s affected a lot of students. And in some ways, Maslow was the guy who had it right.”

— Dr. Scott Poland

The effects on students’ social, emotional and mental health are significant. Hundreds of thousands of people have died. There’s a lot of anxiety about what’s yet to come. There’s hope for the future, but fears about how to get back to “normal” safely (or if we can even get back to normal at all) abound. Those thoughts are hard for adults to process. Children and teens are less equipped to deal with those thoughts in healthy or productive ways.

Maslow’s Hierarchy of Needs highlights five tiers of human needs. At the foundation of this hierarchy are physiological and safety needs. Those must be met before students are able to engage in higher learning tasks often outlined in Bloom’s Taxonomy.

Students have struggled with in-person learning, virtual learning and hybrid approaches that don’t look or feel like they have in the past. They’ve lost loved ones.

They’ve lost dreams.

They’ve lost learning opportunities, especially those with limited access to the Internet and related technologies and those whose parents’ ability to

help their children with schoolwork is limited. We need to take steps to help students

regain the physiological security needed to become more resilient learners in the aftermath of the pandemic.



We know that education helps. [**NAMI**](#) reported that “46% of people who die by suicide have a diagnosed mental health condition,” while “90% of people who die by suicide have experienced symptoms of a mental health condition.” At the same time, we know that mental health education helps students understand and apply positive mental healthcare skills that increase their overall wellbeing as they learn to manage stressors, making it an integral component of school-based health services ([**Bjornsen et al., 2017**](#)). As students learn more about mental health, they also become better able to help others because stigma is reduced and students have a more positive attitude toward people with mental health conditions ([**Lanfredi et al., 2019**](#)).

“Resiliency is really a learned behavior. When you’re surrounded by loving and caring family and friends, you do better when you’re optimistic about the future. When you utilize problem-solving skills, when you have the opportunity to vent strong emotions, those are the things that help us be resistant in the face of adversity.”

— Dr. Scott Poland



What Can I Do?

One of the first things you can do as a leader in your school is to work with a multidisciplinary team to set up a schoolwide suicide prevention program. This includes creating systems in which teachers learn to care for their own mental health as well as that of their students. As students and teachers learn about mental healthcare together, they will be able to identify positive mental healthcare skills, respond when someone is in a crisis, and be supportive of others coping with mental health conditions.

Planning is integral to a schoolwide suicide prevention initiative. Students, teachers, counselors and administrators need to have clear expectations about who to talk to and what will happen when they reach out for help, and they need to be able to count on others to work with them and get help to those in need as soon as possible.

Research shows that nine out of 10 individuals who attempt suicide have a history of mental illness or substance abuse, making these extremely important risk factors. Some warning signs of suicide include:

- Noticeable changes in eating or sleeping habits
- Unexplained or unusually severe, violent or rebellious behavior
- Withdrawal from family or friends
- Sexual promiscuity, truancy and vandalism
- Drastic personality change
- Agitation, restlessness, distress or panicky behavior
- Talking or writing about committing suicide, even jokingly
- Giving away prized possessions
- Doing worse in school



Source: <https://www.stanfordchildrens.org/en/topic/default?id=teen-suicide-learning-to-recognize-the-warning-signs-1-1696>



We must also directly teach students about mental healthcare and suicide prevention. Ask students if they have an adult they can talk to in case of an emergency. If they don't, that's already a red flag that the student needs additional support. Provide students with crisis telephone and text lines that are readily available if (and when) students need them. Provide ongoing mental health education scaffolded across grade levels to help minimize stigma, teach coping skills and teach students how to respond if they or someone else is considering suicide.

“I tried to look back on my extensive experience, responding, unfortunately, to tragedies like school shootings and clusters of youth suicide. And the main point is to be there to listen, help me to understand, you know, if there were magic words to say to somebody, I would certainly share them today, but it’s really as simple as, ‘I am here to listen.’”

— Dr. Scott Poland

Most importantly, make sure that everyone at your school knows that if they see symptoms of suicide in themselves or someone else, they should speak up immediately. Provide opportunities for students and staff to seek help in safe, supportive ways.



Provide ongoing mental health education scaffolded across grade levels to help minimize stigma, teach coping skills and teach students how to respond if they or someone else is considering suicide.



What's Next?

In the short-term, talk with your school mental health personnel about what can be done immediately to help students, teachers and other staff who may be struggling with mental health conditions or considering suicide. There may be things you can implement quickly and efficiently right now.

Summary

This fact is unfortunate but true: Suicide and suicidal ideation are on the rise in this nation's youth, and educators have the critical responsibility of helping these students in their greatest time of need. Knowing how to identify warning signs and help lead students off a path of self-harm is critical. Now is the time to provide students and staff with the mental healthcare and suicide training they need to effectively respond to suicidal ideation or attempted suicide. Having these plans in place now will help you continue to focus on what matters most: Building safe, healthy learning environments where everyone can reach their full potential and thrive.

“Do you know what my greatest hope would be? Future generations of Americans would learn the warning signs of suicide, how to get help for yourself or a friend. And they would learn it before they ever graduated from high school. Our surgeon general very simply said, ‘We’ve got to talk about suicide prevention, in our homes, our schools, and our places of worship.’”

— Dr. Scott Poland



Featured Subject Matter Expert

SCOTT POLAND, Ed.D.

Dr. Scott Poland is a professor at the College of Psychology and director of the Suicide and Violence Prevention Office at NSU Florida. He is a licensed psychologist and an internationally recognized expert on school safety, youth suicide, self-injury, bullying, school crisis prevention/intervention and threat assessment.

Dr. Poland recently helped Navigate360 develop a new suicide screening and case management solution featuring the Columbia Suicide Severity Rating Scale (C-SSRS), as well as a robust suicide prevention eLearning and training program available exclusively through Navigate360. Learn more about the most comprehensive suicide awareness & prevention program for schools [here](#).

We would love to partner with you as you develop and implement a strong suicide prevention program that keeps your students safe mentally, socially and emotionally.

Launch Your Suicide Prevention Program with Help from the Experts

Give us a call at
330-661-0106
to get started.

[Navigate360.com](#)



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