

# School Suicide Postvention:

## The School's Response to the Student Suicide

Stephen E. Brock, Ph.D., NCSP

California State University Sacramento



SACRAMENTO  
STATE

Shelley Hart, MA

Lodi Unified School District, Lodi, CA



A Mini-Skills Session

Annual NASP Convention, Anaheim, CA

March 29, 2006



# Workshop Outline

---

1. Introduction
2. Definitions
3. Special Suicide Postvention Issues
4. Suicide Postvention Protocol
5. Questions and Answers



# Workshop Goal

---

When you leave this workshop we hope that you will have increased your knowledge of how to respond to the aftermath of a completed suicide.



# Suicide Postvention Case Study

---

James was a well-liked high school junior. Active in after school sports, he was considered by many to be a “popular” student. However, over the course of the past year, James had developed a serious alcohol problem. In fact, his drinking at weekend parties had become something of a local legend. Friday after school, James’ girlfriend broke up with him claiming that she could no longer tolerate his drinking. Distraught, James went home, got drunk, found his father’s rifle and shot himself in the head. Quickly discovered by a classmate, who had stopped by for a visit, James was rushed to the hospital.



# Suicide Postvention Case Study

---

Tragically, however, he was declared dead upon arrival. In a suicide note, James declared that if he could not be with his girlfriend he did not want to live. By the start of school on the following Monday, this death had been classified a suicide by the coroner's office. Reacting to the social stigma surrounding suicide and fearing other such deaths, the school principal suggested that staff not talk "too much" about this tragedy. The stunned staff, anxious talking about suicide in the first place, took this as cue to try to deny the magnitude of this tragedy. Very little classroom discussion occurred.



# Definitions

---

## Suicide “Postvention” ...

- *Postvention is the provision of crisis intervention, support and assistance for those affected by a completed suicide.*

## “Affected” individuals...

- *“Affected” individuals may include classmates, friends, teachers, coworkers, and family members.*

## “Survivors” of Suicide...

- *Affected individuals are often referred to as “survivors” of suicide.*



# Special Issues

---

Suicide postvention is a unique crisis situation that must be prepared to operate in an environment that is not only suffering from a sudden and unexpected loss, but one that is also anxious talking openly about the death.



# Special Issues

---

## Suicide Contagion

- Avoid sensationalism of the suicide.
- Avoid glorification or vilification of the suicide victim.
- Do not provide excessive details.

## Emotional Reactions

- Traumatic stress.
- Grief.
- Guilt.
- Anger.
- Rejection/Abandonment.
- Shame/Isolation.





# Special Issues

---

## Social Stigma

- Both students and staff members may be uncomfortable talking about the death.
- Survivors may receive (and/or perceive) much less social support for their loss.
  - Viewed more negatively by others as well as themselves.
- There may exist a reluctance to provide postvention services.



# Special Issues

---

## Developmental Considerations

- Understanding of suicide and suicidal behaviors increases with age.
  - Primary grade children appear to understand the concept of “killing oneself,” they typically do not recognize the term “suicide” and generally do not understand the dynamics that lead to this behavior.
  - Around fifth grade that students have a clear understanding of what the term “suicide” means and are aware that it is a psychosocial dynamic that leads to suicidal behavior.
- The risk of suicidal ideation and behaviors increases as youth progress through the school years.



# Special Issues

---

## Cultural Considerations

- Attitudes toward suicidal behavior vary considerably from culture to culture.
- While some cultures may view suicide as appropriate under certain circumstances, other have strong sanctions against all such behavior.
- These cultural attitudes have important implications for both the bereavement process and suicide contagion.



# Special Issues

---

Given these special issues the goals of suicide postvention are to:

1. prevent other suicides.
2. reduce the onset and degree of debilitation by psychiatric disorders (e.g., PTSD).
3. reduce feelings of isolation among suicide survivors.



# Suicide Postvention Protocol

---

- Preparedness is an essential component of effective postvention.
- Make sure that a postvention is needed before initiating this intervention.



# Suicide Postvention Checklist

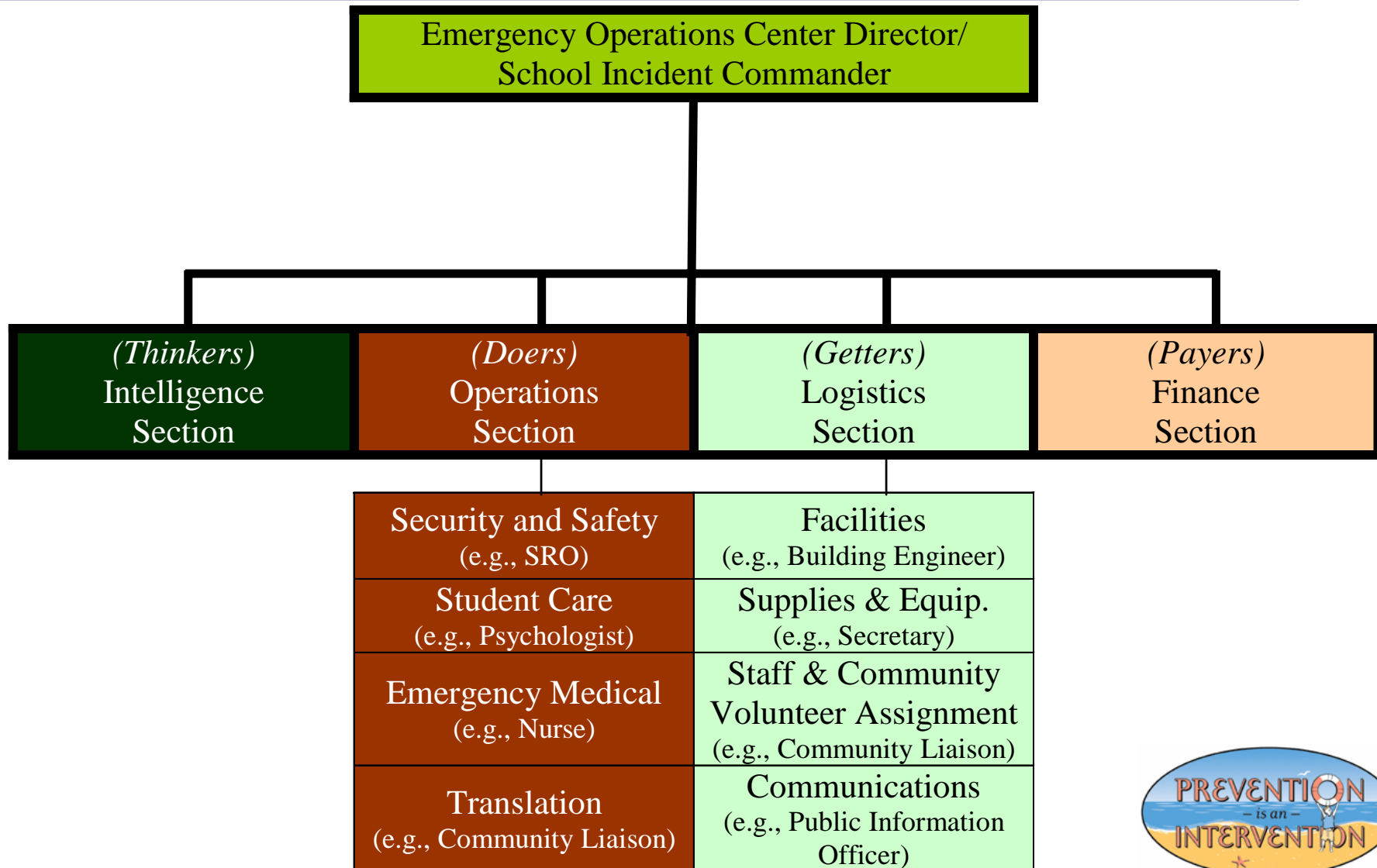
---

1. Verify that a death has occurred.
2. Mobilize the Crisis Response Team.
3. Assess the suicide's impact on the school and estimate the level of postvention response.
4. Notify other involved school personnel.
5. Contact the family of the suicide victim.
6. Determine what information to share about the death.
7. Determine how to share information about the death.
8. Identify students significantly affected by the suicide and initiate a referral mechanism.
9. Conduct a faculty planning session.
10. Initiate crisis intervention services.
11. Conduct daily planning sessions.
12. Memorials.
13. Debrief the postvention response.



# Item 2:

## Mobilize the Crisis Response Team (ICS)



# Item 2:

## Mobilize the Crisis Response Team

---

### Incident Commander

- Verifies that a death has occurred.
- Mobilizes the crisis response team.
- Oversees all postvention interventions.

### Student Care Coordinator and Crisis Intervention Specialist

- Identifies individuals in need of postvention assistance.
- Plans and implements interventions.
- Coordinates crisis intervention workers.





# Item 2:

## Mobilize the Crisis Response Team

---

### Public Information Officer

- Provides access to information.
- Controls rumors.
- Deals with the media.

### Emergency Medical Coordinator

- Keeps the crisis response team informed of victim's medical status.

### Security and Safety Coordinator/Officer

- Responsible for crowd control.
- Monitors common areas.
- Communicates with law enforcement.



# Item 3:

## Assess the Suicide's Impact on the School and Estimate the Level of Postvention Response

- ❑ The importance of accurate estimates.
- ❑ Temporal proximity to other traumatic events (especially suicides).
- ❑ Timing of the suicide.
- ❑ Physical and/or emotional proximity to the suicide.



# Item 5:

## Contact the Family of the Suicide Victim

---

- Contact should be made in person within 24 hours of the death.
- Purposes include...
  - Express sympathy.
  - Offer support.
  - Identify the victim's friends/siblings who may need assistance.
  - Discuss the school's postvention response.
  - Identify details about the death could be shared with outsiders.

Family members can be told that school staff will not discuss or speculate on family problems or other reasons why the individual committed suicide. However, even if a family requests it, it is typically not possible to keep the basic fact that the death was a suicide a secret and in most jurisdictions "cause of death" is a matter of public record.



# Item 6:

## Determine What Information to Share About the Death

---

- The longer the delay in sharing facts, the greater the likelihood of harmful rumors.
- Several different communications will likely need to be offered.
  - Before a death is certified as a suicide.
  - After a death is certified as a suicide.
  - Provide facts and dispel rumors.
  - Do not provide suicide method details.



# Item 7:

## Determine How to Share Information About the Death

---

### Reporting the death to students...

- Avoid sharing information about the death over a school's public address system.
- Avoid school wide assemblies.
- Provide information simultaneously in classrooms.

### Reporting the death to parents...

- Written memos.
- Personal or phone contacts.



# Item 7:

## Determine How to Share Information About the Death

---

### Working with the media...

- The Media Liaison should work with the press to down play the incident.
- It is essential that the media not romanticize the death.
- The media should be encouraged to acknowledge the pathological aspects of suicide.
- Photos of the suicide victim should not be used.
- "Suicide" should not be placed in the caption .
- Include information about the community resources.



# Item 7:

## Determine How to Share Information About the Death

---

### Working with the media...(continued)

- Guidelines from the World Health Organization

1. Suicide is never the result of a single incident
2. Avoid providing details of the method or the location a suicide victim uses that can be copied
3. Provide the appropriate vital statistics (i.e., as indicated provide information about the mental health challenges typically associated with suicide).
4. Provide information about resources that can help to address suicidal ideation.

- <http://cebmh.warne.ox.ac.uk/csr/images/WHO%20media%20guidelines.pdf>



# Item 8:

## Identify Students Significantly Affected by the Suicide and Initiate Referral Procedures

---

### Risk Factors for Imitative Behavior

- Facilitated the suicide.
- Failed to recognize the suicidal intent.
- Believe they may have caused the suicide.
- Had a relationship with the suicide victim.
- Identify with the suicide victim.
- Have a history of prior suicidal behavior.
- Have a history of psychopathology.
- Shows symptoms of helplessness and/or hopelessness.
- Have suffered significant life stressors or losses.
- Lack internal and external resources.

Note. Adapted from information provided by American Association of Suicidology (1998); Brent et al. (1989); Davidson (1989); Davidson, Rosenberg, Mercy, Franklin, & Simmons (1989); Gould (1992); O'Carroll et al. (1988); Ruof and Harris (1988); and Sandoval & Brock (1996).





# Item 9:

## Conduct a Staff Planning Session

---

### 1. Staff should be provided...

- current information regarding the death.
- an opportunity to ask questions and express feelings
- if available, news articles about the death.
- information about suicide contagion.
- suicide risk factors.
- an updated list of referral resources
- direction regarding how to interact with the media
  - typically involves referral to the media liaison
- plans for the provision of crisis intervention services.



# Item 9:

## Conduct a Staff Planning Session

---

### 2. Specific activities/responsibilities for teachers include...

- replacing rumors with facts.
- encouraging the ventilation of feelings.
- stressing the normality of grief and stress reactions.
- discouraging attempts to romanticize the suicide.
- identifying students at risk for an imitative response.
- knowing how to make the appropriate referrals.

### 3. Address staff reactions.

### 4. Staff members should be given permission to feel uncomfortable.



# Item 10:

## Initiate Crisis Intervention Services

---

1. Initial intervention options...
  - Individual psychological first aid.
  - Group psychological first aid.
  - Classroom activities and/or presentations.
  - Parent meetings.
  - Staff meetings.
2. Walk through the suicide victim's class schedule.
3. Meet separately with individuals who were proximal to the suicide.



# Item 10:

## Initiate Crisis Intervention Services

---

4. Identify severely traumatized and make appropriate referrals.
5. Facilitate dis-identification with the suicide victim...
  - Do not romanticize or glorify the victim's behavior or circumstances.
  - Point out how students are different from the victim.
6. Parental contact.
7. Psychotherapy Referrals.



# Crisis Intervention Procedures

## Following a Suicide

---

1. Without going into excessive detail, provide students with the facts about the suicide.
2. State that the only one ultimately responsible for the suicide is the victim.
3. Acknowledge that the suicide was an avoidable and poor choice. Portray the act as a permanent solution to temporary problems.
4. Discuss how the survivors are different from the suicide victim. Portray the suicide victim as very upset, disturbed, and as someone who had not found an effective way to work out problems. Help survivors to dis-identify with the suicide victim (without abusing the victim's character).
5. Facilitate the expression of feelings about the suicide.

Note. Adapted from information provided by American Association of Suicidology (1998); Berman & Jobes (1991); Davis & Sandoval (1991); O'Carroll et al. (1988); Poland & McCormick (1999); and Ruof and Harris (1988).



# Crisis Intervention Procedures Following a Suicide

---

6. State that there is no “right way” to feel after a suicide.
7. Point out that painful reactions to the suicide will be alleviated with time and talk.
8. Acknowledge that people may have suicidal thoughts following the suicide of a significant other.
9. Provide information about the warning signs of suicidal behavior and available mental health resources.
10. If appropriate, prepare students for the funeral.

Note. Adapted from information provided by American Association of Suicidology (1998); Berman & Jobes (1991); Davis & Sandoval (1991); O’Carroll et al. (1988); Poland & McCormick (1999); and Ruof and Harris (1988).



# Item 11:

## Conduct Daily Planning Sessions

---

### Goals of the planning sessions:

1. Plans should be made for the day.
2. Ongoing evaluation of the progress of the postvention.
3. Evaluate and address staff reactions/needs.



# Item 12:

## Memorials

---

“A delicate balance must be struck that creates opportunities for students to grieve but that does not increase suicide risk for other school students by glorifying, romanticizing or sensationalizing suicide.”

(Center for Suicide Prevention, 2004)





# Item 12:

## Memorials

---

### Do **NOT** . . .

- send all students from school to funerals, or stop classes for a funeral.
- have memorial or funeral services at school.
- establish permanent memorials such as plaques or dedicating yearbooks to the memory of suicide victims.
- dedicate songs or sporting events to the suicide victims.
- fly the flag at half staff.
- have assemblies focusing on the suicide victim, or have a moment of silence in all-school assemblies.

Note. From “Suicidal Ideation and Behaviors,” by S. E. Brock & J. Sandoval. In C. G. Bear, K. M. Minke, & A. Thomas, *Children’s Needs II: Development, Problems, and Alternatives*, 2006, Bethesda, MD: National Association of School Psychologists. Copyright 2006 by the National Association of School Psychologists.



# Item 12:

## Memorials

---

### DO . . .

- something to prevent other suicides (e.g., encourage crisis hotline volunteerism).
- develop living memorials, such as student assistance programs, that will help others cope with feelings and problems.
- allow students, with parental permission, to attend the funeral.
- Donate/Collect funds to help suicide prevention programs and/or to help families with funeral expenses
- encourage affected students, with parental permission, to attend the funeral.
- mention to families and ministers the need to distance the person who committed suicide from survivors and to avoid glorifying the suicidal act.

Note. From "Suicidal Ideation and Behaviors," by S. E. Brock & J. Sandoval. In C. G. Bear, K. M. Minke, & A. Thomas, *Children's Needs II: Development, Problems, and Alternatives*, 2006, Bethesda, MD: National Association of School Psychologists. Copyright 2006 by the National Association of School Psychologists.



# Item 13:

## Debrief the Postvention Response

---

Goals for debriefing will include...

- Review and evaluation of all crisis intervention activities.
- Making of plans for follow-up actions.
- Providing an opportunity to help intervenors cope.



# References and Resources

---

- Berman, A. L., Jobes, D. A., & Silverman, M. M. (2006). *Adolescent suicide: Assessment and intervention* (2<sup>nd</sup> ed.). Washington, DC: American Psychological Association.
- Brock, S. E. (2002). School suicide postvention. In S. E. Brock, P. J. Lazarus, & S. R. Jimerson (Eds.), *Best practices in school crisis prevention and intervention* (pp. 553-575). Bethesda, MD: National Association of School Psychologists.
- Brock, S. E. (2003, May). *Suicide postvention*. Paper presented at the DODEA Safe Schools Seminar. Retrieved March 10, 2006, from <http://www.dodea.edu/dodsafeschools/members/seminar/SuicidePrevention/generalreading.html#2>
- Brock, S. E., Sandoval, J., & Hart, S. R. (2006). Suicidal ideation and behaviors. In G Bear & K Minke (Eds.), *Children's needs III: Understanding and addressing the developmental needs of children* (pp. 187-197). Bethesda, MD: National Association of School Psychologists
- Center for Suicide Prevention. (2004, May). *School memorials after suicide: Helpful or harmful?* Retrieved January 15, 2006 from [www.suicideinfo.ca](http://www.suicideinfo.ca)



# References and Resources

---

- Davis, J. M., & Brock, S. E. (2002). Suicide. In J. Sandoval (Ed.), *Handbook of crisis counseling, intervention and prevention in the schools* (2nd ed., pp. 273-299). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Doan, J., Roggenbaum, S., & Lazear, K. (2003). *Youth suicide prevention school-based guide – Issue brief 7a: Preparing for and responding to a death by suicide: Steps for responding to a suicide crisis*. Tampa, FL: University of South Florida.
- U.S. Department of Homeland Security. (2004, March). *National incident management system*. Retrieved on September 9, 2005, from [www.fema.gov/pdf/nims/nims\\_doc\\_full.pdf](http://www.fema.gov/pdf/nims/nims_doc_full.pdf)
- Weekley, N., & Brock, S. E. (2004). Suicide: Postvention strategies for school personnel. In A. S. Canter, L. Z. Paige, M. E. Roth, I Romero, & S. A. Carroll (Eds.), *Helping children at home and school II: Handouts for families and educators* (pp. S9: 45-47). Bethesda, MD: National Association of School Psychologists.



# Concluding Comments Questions and Answers

---



## Stephen Brock

- California State University Sacramento
- [Department of Special Education, Rehabilitation, and School Psychology](#)
- (916) 278-5919
- <http://www.csus.edu/indiv/b/brocks/>
- [brock@csus.edu](mailto:brock@csus.edu)

## Shelley Hart

- [Lodi Unified School District](#)
- Support Services Department
- (209) 331-7085
- [shart@lodiUSD.k12.ca.us](mailto:shart@lodiUSD.k12.ca.us)

