timely techniques to help your child get through the school year

Threat and Suicide

Prevention, Intervention, and Assessment

THREATS

Types of Threats:

Direct: obvious, at a person (e.g. “I’m going to kill you”)

Indirect: the act could occur; vague, unclear and ambiguous (“If I wanted to, I could kill everyone in this school”)

Veiled: hints at possible violent act, open to interpretation (“I like you; take my advice and stay away from school tomorrow”)

Conditional: violent act will happen unless conditions are met (“If you don’t write this paper for me, I will hurt you”)

Each threat can also be considered…

Transient:

* Joking around
* Made a comment around heightened emotion
* Not likely to act on the comment, even if it’s aggressive
* Need to be supportive to ensure effective coping

OR

Substantive:

* Making a plan for redressing a perceived wrong by planning to harm someone or to damage property
* Must be thoroughly investigated

\*\*Targeted violence stems from an interaction between…

* Person
* Situation
* Setting
* Target
* When something changes in at least one of these four, the outcome changes…

Early Warning Signs:

* Feelings of being teased, bullied or picked on
* Social withdrawal
* Victim of violence (home, community)
* Low school interest, poor academic performance
* Feelings of rejection, isolation, being alone
* Aggressive and violent behavior
* Intolerance of differences and prejudicial attitudes
* Drug/alcohol use

Important Information for Teachers and Parents:

* If you are feeling as though a student is making a substantive threat, please contact an administrator and/or mental health provider immediately
* When a threat is determined as substantive, the assessment must be completed a team
  + The team **MUST** include a mental health provider, administrator, teacher and parent (if possible)
  + Question to determine is if the student poses a threat, not if one has been made
  + A Threat Assessment is a district document that is completed to answer the above question

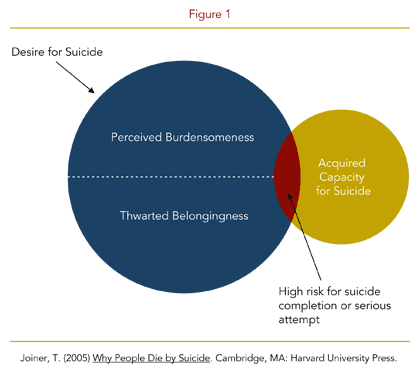
SUICIDE PREVENTION, INTERVENTION and ASSESSMENT

Suicide: the intentional act of taking one’s own life.

Statistics:

* In 2010, there were 867 deaths by suicide in Colorado; 190 of which were by students ages 10 – 18
  + This is compared to 171 homicides, 480 motor vehicle deaths, 549 influenza and pneumonia deaths, and 721 diabetes deaths
  + 7th leading cause of death in CO for all ages
  + 2nd leading cause of death for ages 10 – 24
* For ages 10 – 14 (2001 – 2010)
  + Overall suicide rate was 2.5/100,000
  + 83 total suicide deaths
  + 72% male
  + 29% by firearm
* For ages 15 – 18 (2001 – 2010)
  + Overall suicide rate 11.3/100,000
  + 301 total suicide deaths
  + 76% male
  + 40% by firearm
* Male youth die by suicide 5x more frequently than female youth
* Special populations are at greater risk; including LGBTQQ2-S students, students in the juvenile justice system and foster care, Latino students, and students with disabilities

Model of Suicide Risk:



Protective Factors:

* Social support
* Effective coping skills
* Policies and cultures that accept help seeking behavior
* Destigmatization of mental health problems

Risk Factors:

* Presence of a psychiatric disorder   
  (e.g., depression, drug or alcohol abuse, behavior disorders, conduct disorder)
* The expression/communication of thoughts of suicide, death, dying or the afterlife   
  (in a context of sadness, boredom, or negative feelings)
* Impulsive and aggressive behavior; frequent expressions of rage
* Previous exposure to others’ suicidality. Surviving family members not only suffer the trauma of losing a loved one to suicide, but also are themselves at higher risk for suicide and emotional problems
* Recent severe stressor  
  (e.g., difficulties in dealing with sexual orientation; unplanned pregnancy or other significant real or impending loss)
* Family loss or instability; significant family conflict
* Feelings of hopelessness (e.g., there is no solution to my problem)
* Being socially isolated

Warning Signs:

* Talk about suicide, death, and/or no reason to live
* Be preoccupied with death and dying
* Withdraw from friends and/or social activities
* Have a recent severe loss (especially relationship) or threat of a significant loss
* Experience drastic changes in behaviour
* Lose interest in hobbies, work, school, etc.
* Prepare for death by making out a will (unexpectedly) and final arrangements
* Give away prized possessions
* Have attempted suicide before
* Take unnecessary risks; be reckless, and/or impulsive
* Lose interest in their personal appearance
* Increase their use of alcohol or drugs
* Express a sense of hopelessness
* Be faced with a situation of humiliation or failure
* Be faced with a disciplinary crisis
* Have a history of violence or hostility
* Have been unwilling to “connect” with potential helpers

Interventions (As appropriate):

* Talking about suicide does not cause someone to be suicidal
* Be aware - Learn the warning signs
* Get involved - Become available and show interest and support
* Ask if he/she is thinking about suicide
* Be direct - Talk openly and freely about suicide
* Be willing to listen - Allow for expressions of feelings and accept the feelings
* Be non-judgmental - Don’t debate whether suicide is right or wrong, or feelings are good or bad
* Don’t lecture on the value of life
* Don’t dare him/her to do it
* Don’t ask “why” as this encourages defensiveness
* Offer empathy, not sympathy
* Don’t act shocked as this creates distance
* Don’t be sworn to secrecy and seek support
* Offer hope that alternatives are available
* Take action - Remove means such as available firearms or stockpiled pills
* Encourage them to talk to someone by contacting:
  + suicide prevention/crisis intervention center
  + private therapist
  + religious/spiritual leader
  + community mental health agency
  + school counselor or psychologist
  + family physician

Important information for Teachers and Students:

* If you have a legitimate concern that a student is thinking about suicide, please contact the school mental health provider immediately (e.g. school psychologist, school social worker, counselor, nurse)
* This person will then talk with the student to determine next steps.
* Often the mental health provider will initiate a Suicide Risk Assessment (SRA) which evaluates a students’ level of risk. It is completed in an interview format to determine students’ current feelings and behavior, previous history and level of coping skills.
* Also, important to read/use this information in conjunction with the Bullying/Cyberbullying and LGBTQQ2-S newsletters written by the School Psychologist.

Resources…

Websites 🡪

The Glendon Association: **The mission of The Glendon Association is to save lives and enhance mental health by addressing the social problems of suicide, child abuse, violence, and troubled interpersonal relationships.**

**Website:** [www.glendon.org](http://www.glendon.org)

**Second Wind Fund of Metro Denver: The mission of Second Wind Fund is to decrease the incidence of teen suicide by removing financial and social barriers to treatment for at-risk youth.**

**Website:** [www.swfmd.org](http://www.swfmd.org)

**The Office of Suicide Prevention:** Reviews trends, risk factors, methods, and demographics; Reviews and analyze suicide prevention plans in other states; Looks at existing strategies that recognize and respond to people who are at risk.

Website: [www.coosp.org](http://www.coosp.org)

Books For Kids 🡪

Requarth, M. (2008). *After a parents’ suicide: Helping children heal.* Healing Hearts Press: CA.

The Dougy Center. *After a suicide: An activity book for grieving kids.* The National Center for Grieving Children and Families.

Books For Teens 🡪

Hugus, C. S. (2008). *Crossing 13: Memoir of a father’s suicide.* Affirm Publications: CO.

Nelson, R., Galas, J., & Cobain, B. (2006). *The power to prevent suicide: A guide for teens helping teens.* FreeSpirit Publishing: MN.

Books For Parents 🡪

Cobain, B. & Larch, J. (2006). *Dying to be free: A healing guide for families after a suicide.* Hazelden: MN.

Fine, C. (1999). *No time to say goodbye: Surviving the suicide of a loved one.* Three Rivers Press: Random House: NY.

Joiner, T. (2007). *Why people die by suicide.* Presidents and Fellows of Harvard College.

Lucas, C. & Seiden, H. (2007). *Silent grief: Living in the wake of suicide.* Jessica Kingsley Publishers: PA.

Some information for this article was taken from:

Office of Suicide Prevention website: [www.coosp.org](http://www.coosp.org) on June 19, 2012.

Second Wind Fund website: [www.scfmd.org](http://www.scfmd.org) on June 19, 2012.

Suicide Prevention Symposium: June 4 and June 5, 2012. Temple Emanuel. Denver Public Schools.