

Suicide Prevention and Schools: Some Basic Information*

Suicide Prevalence Among the Adolescent Population in the U.S.A.

- Suicide is the second leading cause of death in youth ages 12-18
- Each day there are over 3,000 suicide attempts in high school youth
- Females attempt suicide at a rate two times that of males
- Males complete suicide at a rate 3.5 times higher than women

Commonly Stressed Warning Signs

- Depression (note that only 15% of depressed adolescents actually consider suicide)
- Low self-esteem
- Isolation from peers
- Abuse of drugs and alcohol
- Drastic changes in personality
- Significant drop in grades and careless attitude towards school assignments
- Verbal threats to end life
- Youth exposed to violence, life threatening events, or losses such as the death of a loved one

Types of Prevention Programs in Schools

Our Center at UCLA stresses that all efforts to address students' learning, behavior, and emotional problems be embedded in a unified, comprehensive, and equitable system of student/learning supports. Such a system encompasses a focus on primary, secondary, and tertiary prevention (see reference list).

- **Primary Prevention:** Everything a school does to address barriers to learning and teaching and re-engage disconnected students. Some schools include school-wide suicide prevention programs aimed at raising awareness of faculty and students about warning signs and risk factors. (Some research suggests that when peers, as contrasted with school staff, deliver the message it may be more effective.)
- **Secondary Prevention:** Interventions immediately after a problem occurs are designed to provide accurate information and resources to ensure all students and staff feel supported and safe. Procedures usually are in place to provide special assistance and mental health referrals for a student who has threatened or attempted suicide.
- **Tertiary Prevention:** The concern here is with minimizing the longer-term impact of problems. This involves special assistance for students who manifest chronic emotional problems, supports for others affected by a suicide, and efforts to counter phenomena such as suicide contagion.

Note: Behavioral contagion is defined as a situation where the same behavior spreads quickly and spontaneously through a group. Suicide contagion most commonly affects adolescents with psychiatric disorders, and these students should be monitored closely and supported after a suicide occurs. As described in the suicide literature, *mass* clusters of the same behavior are media related and can lead to suicidal ideation in media users. *Point* clusters occur locally and involve victims in close proximity with one another and are most common in school and hospital settings.

*The material in this document is an edited version of a project report by Samantha Scoppettone as part of her involvement with the national Center for M H in Schools & Student/Learning Supports at UCLA.

The center is co-directed by Howard Adelman and Linda Taylor in the Dept. of Psychology, UCLA,

Website: <http://smhp.psych.ucla.edu> Send comments to ltaylor@ucla.edu

The Role of the School Support Staff

- Support staff such as counselors, psychologists, social workers, and nurses can play a critical role in identifying youth at risk for suicide and determining the type of help they need. They also can take a proactive role in addressing factors that contribute to students' problems, such as bullying. (Too frequently, peer bullying is a significant factor leading to adolescent suicide ideation. This includes cyberbullying. Students who are bullied tend to feel isolated from peers and helpless to cope with the situation.)**
- So they can play an effective role, greater attention is needed to enhancing the capacity of support staff with respect to understanding the causes and correction of the overlapping learning, behavior, and emotional problems manifested at schools. Special attention is needed to increasing their leadership role and capabilities for developing a unified, comprehensive, and equitable system of interventions.

Unfortunately, many schools lack sufficient support staff.

**There is an ongoing debate about the role schools should play in with respect to suicide education and screening. For a discussion of both sides of the issue, see <http://smhp.psych.ucla.edu/pdfdocs/policyissues/suicide.pdf>

A Sample of References Used in Developing this Resource

- Adelman, H.S., & Taylor, L. (2010). *Mental health in schools: Engaging learners, preventing problems, improving schools*. Thousand Oaks, California: Corwin Press.
- Adelman, H.S., & Taylor, L. (2017). *Addressing barriers to learning: in the classroom and schoolwide*. Online at <http://smhp.psych.ucla.edu/pdfdocs/improve.pdf>
- Adelman, H.S., & Taylor, L. (2018). *Improving school improvement*. Online at <http://smhp.psych.ucla.edu/pdfdocs/improve.pdf>
- American Foundation for Suicide Prevention (2017). *Suicide statistics*. Online at <https://afsp.org/about-suicide/suicide-statistics/>
- Bauman, S., Toomey, R.B., & Walker, J.L., (2013). Associations among bullying, cyberbullying, and suicide in high school students. *Journal of Adolescents*, 36, 341-350. <https://www.sciencedirect.com/science/article/pii/S0140197112001819>
- Gould, M., Jamieson, P., & Romer, D., (2003). Media contagion and suicide among the young. *American Behavioral Scientist*, 46, 1269-1284. <https://journals.sagepub.com/doi/pdf/10.1177/0002764202250670>
- Hinduja, S. & Patchin, J.W., (2010). Bullying, cyberbullying, and suicide. *Archives of Suicide Research*, 14, 206-221. <https://www.tandfonline.com/doi/pdf/10.1080/13811118.2010.494133?needAccess=true>
- The Jason Foundation (2018). *Youth suicide statistics*. Online at <http://prp.jasonfoundation.com/facts/youth-suicide-statistics/>
- Joe, S. & Bryant, H., (2007). Evidence-based suicide prevention screening in schools, *Children and Schools*, 29, 219-227. <https://academic.oup.com/cs/article/29/4/219/552357>
- Joiner, T.E., (1999). The clustering and contagion of suicide, *American Psychological Society*, 8, 89-92. <https://journals.sagepub.com/doi/pdf/10.1111/1467-8721.00021>
- King, K.A., (2001). Developing a Comprehensive Suicide Prevention Program, *Journal of School Health*, 71 (4), 132-137. <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1746-1561.2001.tb01310.x>

- Klomek, A.B., Sourander, A., & Gould, M., (2010). The association of suicide and bullying in childhood to young adulthood: A review of cross-sectional and longitudinal research findings. *The Canadian Journal of Psychiatry*, 55, 282-288.
<https://journals.sagepub.com/doi/pdf/10.1177/070674371005500503>
- Mann, J.J., Apter, A., Bertolote, J., Beautrais, A., Currier, D., Haas, A., Hegerl, U., Lonnqvist, J., Malone, K., Marusic, A., Mehlum, L., Patton, G., Phillips, M., Rutz, W., Rhimer, Z., Schmidtke, A., Shaffer, D., Silverman, M., Takahashi, Y., Varnik, A., Wasserman, D., Yip, P., & Hendin, H., (2005). Suicide prevention strategies. *JAMA*, 294, 2064-2074.
<https://jamanetwork.com/journals/jama/article-abstract/201761>
- Nevada Division of Public and Behavioral Health Office of Suicide Prevention (n.d.). *Youth warning signs*. Online at http://suicideprevention.nv.gov/Youth/Warning_Signs
- Siehl, P.M., (1990). *Suicide postvention: a new disaster plan- What a school should do when faced with a suicide*. *The School Counselor*, 38, 52-57.
https://www.jstor.org/stable/23900854?seq=4#metadata_info_tab_contents
- Stanford Children' Health (2019). *Teen suicide: Learning to recognize the warning signs*. Online at <https://www.stanfordchildrens.org/en/topic/default?id=teen-suicide-learning-to-recognize-the-warning-signs-1-1696>
- The Trevor Project* (n.d). *Model school district policy on suicide prevention*. Online at https://afsp.org/wp-content/uploads/2016/01/Model-Policy_FINAL.pdf
- Winsper, C., Lereya, T.M., Zanarini, M.D., & Wolke, D., (2012). Involvement in bullying and suicide-related behavior at 11 years: A prospective birth cohort study. *Journal of the American Academy of Child & Adolescent Psychiatry*, 51, 271-282.
<https://www.sciencedirect.com/science/article/pii/S0890856712000020>
- Wyman, P.A., Brown, C.H., LoMurray, M., Schmeelk-Cone, K., Petrova, M., Yu, Q., Walsh, E., Tu, X., & Wang, W., (2011). An outcome evaluation of the sources of strength suicide prevention program delivered by adolescent peer leaders in high school. *American Public Health Association*, 100, 1653-1661. <https://doi.org/10.2105/AJPH.2009.190025>

For more information and intervention resources, see:

Our Center's Online Clearinghouse Quick Find on

> *Suicide Prevention* – http://smhp.psych.ucla.edu/qf/p3002_02.htm

The California Dept. of Education's online material for

> *Youth Suicide Prevention* – <https://www.cde.ca.gov/ls/cg/mh/suicideprevres.asp>