# A Student Commits Suicide: What Would—Could—Your School Do?

# by Emily Gamble

AS THE ADOLESCENT SUICIDE RATE climbs nationally, concern for the problem grows, especially within our schools. Between 1960 and 1987, the annual suicide rate for young Americans between the ages of fifteen and nineteen increased 186 percent (from 3.6 per 100,000 individuals to 10.3), while the rate for young adults between the ages of twenty and twenty-four increased 115 percent (from 7.1 to 15.3).<sup>1</sup>

North Carolina is by no means immune to the problem. Although the number of adolescent suicides nationally continues to be smaller than that of adults and senior citizens, suicide has become the second leading cause of death of young Americans and the third leading cause of death of young North Carolinians.<sup>2</sup> This growth in the rate of suicide among adolescents makes it important that North Carolina school officials take a look at their preparations to cope with—and perhaps thwart—the suicide or attempted suicide of a young student.

During October and November of 1998, as a student in the Master of Public Administration (MPA) program at The University of North Carolina at Chapel

Hill, I spoke with representatives of a dozen high schools and school districts across the state,<sup>3</sup> inquiring whether and to what extent their crisis preparedness plans addressed the potential event of a student's suicide, either on or away from school grounds. One of the many things I discovered was that this issue is as difficult for school personnel as it is for the public at large. While the schools seem prepared to handle emergencies involving acts of violence generally, most apparently do not have a plan to address the issue of self-violence or suicide. Many of the school officials I spoke to clearly were uncomfortable discussing the issue.

This article begins with a general discussion of school preparedness plans based on my conversations with school counselors, nurses, psychologists, attorneys, assistant superintendents, assistant principals, and clerical workers around the state. The total number of schools I contacted was small, and my inquiries were informal, yet the responses I received, in conjunction with basic research on the subject, enabled me to conclude the article with a consideration of the steps that North Carolina public schools might take toward addressing this issue.

The author, a 2000 graduate of the Master of Public Administration (MPA) program at The University of North Carolina at Chapel Hill, currently works for the U.S. General Accounting Office in the area of health policy.

<sup>1.</sup> Alan L. Berman & David A. Jobes, *Adolescent Suicide Assessment and Intervention* (Washington, D.C.: American Psychological Association, 1991), p. 19 [source: *Vital Statistics of the United States* (Hyattsville, Md.: National Center for Health Statistics, 1989)].

<sup>2.</sup> State Ctr. for Health Statistics, North Carolina Dep't of Health and Human Services, *North Carolina Detailed Mortality Statistics 1996* (Raleigh, N.C.: 1997).

<sup>3.</sup> I spoke with representatives of Ashbrook High School, Gastonia; Burke County Schools; Chapel Hill–Carrboro City Schools; Durham Public Schools; Elizabeth City–Pasquotank Schools; Franklin County Schools; Gaston County Schools; Grimsley High School, Greensboro; Alexander County Schools; Hickory High School, Hickory; Mitchell County Schools; Vance County Schools.

# **Does Your School Have a Crisis Management Policy Dealing Specifically with Student Suicide?**

Virtually every school official I spoke to reported that the school has a crisis management plan designed to help students and teachers cope with any foreseeable emergency, from natural disasters to school violence. Many of those plans have been implemented county- or districtwide. However, only two schools reported having plans that deal specifically with suicide or suicide prevention.

Gaston County was unusual in that its crisis management plan not only deals directly with suicide but also addresses the various warning signs of suicidal behavior in students. It also touches on how to help students go through the grieving process. Like several of the school districts I spoke to, Gaston County has set up a countywide support team that is available upon request. The crisis management plan instituted in the Chapel Hill-Carrboro City Schools district, which also deals specifically with the issue of suicide, enlists the assistance and cooperation of the local police department. Other districts with crisis or trauma management teams have established relationships with mental health departments. In addition to the schools, some county governments, including Wake County, have developed plans that deal specifically with the issue of suicide.<sup>4</sup>

### **How Is Your Plan Administered?**

The first concern I had as I called the various schools and school district offices was the apparent lack of knowledge on the part of the front-line staff regarding suicide issues. Several schools, including schools in Greensboro and Asheville, were able to direct me to the correct contact person immediately. But in most instances, I was transferred from person to person or directed to the office of the school superintendent. I could not help but wonder how quickly schools would be able to react to an actual suicide event.

Another concern was the general lack of uniformity among the plans, what the plans consist of and who is responsible for implementing them, as well as a lack of consistency in how they are organized, whether at the school or the district level. For example, one assistant principal I spoke to was able to outline the particulars of his school's plan, but because his understanding was that the plan was instituted on the county level, he recommended that I contact the district office for further information. When I called the central office, however, I was told that crisis management plans for dealing with student deaths were organized on a school-byschool basis. While it is true that each case must be dealt with in a way that is appropriate to that particular situation, it also is true that for greater school stability, as well as for the legal protection of all,<sup>5</sup> districts need a clear plan of action and good communication between school and district officials regarding the elements of and responsibility for that plan.

# What Prompted the Development of Your Policy? How Was It Developed? How Long Has It Been in Place?

Among the schools I contacted, those that had plans dealing directly with the issue of student suicide were prompted by an actual event involving some kind of violence, either at the school or at a nearby school. The catalyst in one county was a hostage and homicide situation. In another, it was the suicide of a student.

Most of the plans were developed as a team effort, pulling together school nurses and counselors and other personnel. As has been noted, some schools and districts have worked out arrangements with local police or local mental health departments. A few of the plans have been in place since the early 1990s, but most have been implemented more recently or are in the process of being implemented.

## **Does Your Policy Address Suicide Prevention and Intervention?**

In addition to a general lack of focus on the issue of suicide, most of the crisis management plans I learned about direct little if any effort toward suicide prevention, such as providing information to teachers, other school personnel, and students on how to recognize the warning signs of suicide and what to do if a person is feeling suicidal or has a friend in that situation. Two systems, Gaston County and Chapel Hill-Carrboro City Schools, have incorporated suicide education into the high school

<sup>4.</sup> Wake County, Suicide Containment: A Wake County Response (unpublished report) (on file with author).

<sup>5.</sup> For a full discussion of the school liability issues involved in student suicide, see Cindy Singer Cafaro's article in this issue of School Law Bulletin.

curriculum, as part of the health education or the health awareness program, but the vast majority of schools I spoke to have not.

One school counselor acknowledged what I suspect is a widely shared sentiment, the notion that suicide prevention in the school context is counter-productive specifically, that it might encourage students to consider or attempt suicide. This viewpoint—referred to in the literature as the "contagion theory"—is held by some researchers and school officials. However, a growing body of work supports the integration of some form of suicide prevention education into the school curriculum. By shining light on the patterns of behavior related to suicide, and by providing ways of coping with such behaviors, this kind of curriculum could discourage students who might be considering suicide as a possible solution to their problems.

One school counselor asked whether it is not best to cope with any incidents that happen on a case-bycase basis. On this point, most school administrators and the experts agree. By having a clear plan of action before a suicide takes place, schools can be sure that all staff, especially front-line staff, will know what is to be done and by whom: Who is to contact parents? Who is to meet with the faculty to provide information and organize the next steps? Who is to serve as case manager? Who is to meet with the students? Making these determinations in advance, and making sure that all concerned parties are aware of these issues, could help save a student's life. It also might help to prevent what is known as a suicide cluster, that is, "an excessive number of suicides occurring in close temporal or geographic proximity."6 Though not common, suicide clusters have occurred throughout the United States, including North Carolina.

The task of creating a comprehensive system to cope with adolescent suicide may seem daunting. However, as many of the school personnel I spoke to indicated, there are some basic steps that every school and school district, preferably in concert, can take to develop a strong system.

## Safe School Plans

In 1997, in an attempt to create a safe and orderly environment for student learning in the state, the North Carolina General Assembly enacted legislation calling for the formulation and implementation of a "safe school plan" in every school in every school district in

the state.7 These plans, which focus on identifying and addressing the needs of academically at-risk and/or disorderly students, have been developed by local boards of education with input from parents and citizens as well as school officials. In 1999, the legislature mandated that revised safe school plans were to be submitted to the State Board of Education by July 1, 2000.

The statutory language does not require safe school plans to specifically address the issue of student suicide, and of the several dozen I reviewed in November 1998, none did. The plan in Forsyth County addressed attempts to inflict violence on one's self by authorizing teachers to use reasonable force to "protect the teacher, the student, or others from harm. For example . . . to restrain a student who is threatening to harm himself or others." This provision was part of the plan's policy on corporal punishment, however, not suicide. In its Safe School Plan, Pamlico County referenced the need to maintain the emotional well being of students but did not make a specific reference to suicide. Nonetheless, the very existence of these safe school plans should make it easier for North Carolina schools to expand their plans to include the suicide or attempted suicide of a student. Those schools and school districts that have in some way addressed the suicide or attempted suicide of a student can serve as excellent sources of information and advice.

# Getting the Word Out

Once a plan has been implemented, the next step is to educate everyone at the school about it. Of course the school counselors, psychologists, nurses, and teachers are to be trained in the procedures, but what about the support staff: the school bus drivers, the janitorial staff, the lunch crew, and any others who have daily contact with students and their parents? Because students seek out support from a wide range of school personnel, it is important that everyone receive thorough training. A plan is only as good as the efforts of those who implement it.

Many school districts provide teachers with annual or biannual training on the school's crisis emergency plan. Some districts even provide training in how to recognize signs of suicide behavior in at-risk adolescents. However, in many cases the training is minimal or treated simply as a short topic to be included as part of in-service training. One safe schools coordinator

<sup>7.</sup> A new Article 8C was added to Chapter 115C of the General Statutes (hereinafter G.S.), codified as Sections 115C-105.45 through 105.48.

lamented that with the "crunch for all the basics: reading, writing, arithmetic," very little emphasis is placed on training staff in social issues, and what little training is given focuses solely on violence against others. Student suicide was of special concern to this safe schools coordinator because at the time we spoke, her district had already had one suicide attempt that school year.

## **Practice Makes Perfect**

The next step in creating a vital plan to cope with suicide is to ensure that it does not become just another document gathering dust. Once all staff have been trained in how to respond to a crisis situation, it is important that this training be repeated—and updated on a regular basis. Also, in order for the plan to remain dynamic, school personnel need to become familiar with the community resources that are available to them.

Stanley W. Johnson and L. J. Maile, two specialists in the field of suicide education, recommend "outreach networking."8 For example, a school might maintain a bulletin board that lists the names and telephone numbers of local professionals who are trained and willing to help students and staff in such a crisis. The bulletin board idea could be expanded to include reminders of what is to be done in the event of an actual or attempted student suicide. Placed in a prominent location, such as the school office or staff lounge, a bulletin board that presents clear and eye-catching explanations of the elements of the crisis plan, along with a flow chart of what steps are to be taken and who is to be contacted—in particular, the school's point person—is a nonintrusive means of communicating the plan to everyone on staff. The bulletin board could also be used to bolster the school's suicide prevention efforts by listing the various signs of suicidal behavior as well as methods of helping students deal with such thoughts.

## **Prevention Comes First**

Finally, there is the issue of including suicide prevention training in the schools, that is, presenting students with the warning signs of suicidal behavior and giving them resources to cope with stress, depression, and suicidal behavior. As has been mentioned, there is little consensus on this issue. One school administrator I spoke to in Gaston County described the training provided to students in that district as "fluff" and asserted the belief that along with suicide prevention, the curriculum should also include training in how to help students cope with death. This was in sharp contrast to the school administrator who believed that providing education on the subject would encourage the idea of suicide. Again, the experts are divided, but as the California State Department of Education has pointed out, in "the process of learning about suicide . . . suicidal feelings can be defused."9

According to Charlotte Ross, former director of the Youth Suicide National Center and an early supporter of student education on suicide prevention, young people are both "terribly attracted to and terribly repelled" by the idea of suicide but are definitely not ignorant on the subject.<sup>10</sup> Unfortunately, much of their "knowledge" is inaccurate and potentially harmful. Dealing with the subject directly would allow students to discuss the issue in a safe environment while also enabling teachers to dispel many of the romantic and false ideas that students have about suicide. Also, by training students to recognize the warning signs of suicidal behavior, and by encouraging them to let someone know if a friend seems suicidal, school personnel will establish a valuable ally in their efforts to keep their student body safe and healthy.

One school administrator I spoke to said that a school's primary goal is not only to educate, but also to "ensure a safe and orderly learning environment." By being prepared, a school can be sure it has done its best to fulfill this goal. The problem of adolescent suicide does not seem to be going away. While school personnel might not always be able to stop an individual case of suicide, by being prepared and trained, they can greatly help reduce the trauma that results as well as work to prevent future deaths. ■

<sup>8.</sup> Stanley W. Johnson & L. J. Maile, Suicide and the Schools: A Handbook for Prevention, Intervention, and Rehabilitation (Springfield, Ill.: Charles C. Thomas Publisher, 1987), p. 17.

<sup>9.</sup> Scott Poland, Suicide Intervention in the Schools (New York: Guilford Press, 1989), p. 157 (quoting California State Department of Education, "Suicide Prevention Program for the California Public Schools" (1987), p. 4).

<sup>10.</sup> Charlotte P. Ross, "Teaching Children the Facts of Life and Death: Suicide Prevention in the Schools," Chapter 10 of Michael L. Peck et al., eds., Youth Suicide (NYC: Springer Publishing Co., 1985), p. 156.

## Selected Bibliography on Student Suicide

Information on adolescent suicide has been produced in a variety of forms and media. A short list of references is presented here.

#### **Publications**

- · Adams, Cheryll M. "Adolescent Suicide: One School's Response." Journal of Secondary Gifted Education 7 (Spr. 1996): 410–17.
- Barish, Sidney. "Responding to Adolescent Suicide: A Multi-Faceted Plan." NASSP Bulletin 75 (Nov. 1991): 98–103.
- · Bjorklum, Eugene C. "School Liability for Student Suicides." West's Education Law Quarterly 5 (Apr. 1996): 339.
- · Capuzzi, Dave. Suicide Prevention in the Schools: Guidelines for Middle and High School Settings. Alexandria, Va.: American Counseling Association, 1994.
- · Centers for Disease Control and Prevention. "Programs for the Prevention of Suicide among Adolescents and Young Adults" and "Suicide Contagion and the Reporting of Suicide: Recommendations from a National Workshop." 43 Morbidity and Mortality Weekly Report No. RR-6 (22 Apr. 1994): 1-7 and 9-18.
- Coy, Doris Rhea. "The Need for a School Suicide Prevention Policy." NASSP Bulletin 79 (Apr. 1995): 1-9.
- · Decker, Robert H. When a Crisis Hits, Will Your School Be Ready? Thousand Oaks, Calif.: Corwin Press, 1997.
- · Dunne-Maxim, Karen, and Maureen Underwood. "Keeping Afloat in Suicide's Wake." School Administrator 48 (May-June 1991): 20-21,
- Miller, David N., and George J. Dupaul. "School-Based Prevention of Adolescent Suicide: Issues, Obstacles, and Recommendations for Practice." Journal of Emotional and Behavioral Disorders 4 (Oct. 1996): 221-30.
- Oaks-Davidson, Judy. "Suicide Prevention, Intervention, and Postvention: A Comprehensive Approach." National School Boards Association Updating School Board Policies 27 (Feb. 1996): 8-11.
- Poland, Scott. "The Role of School Crisis Intervention Teams to Prevent and Reduce School Violence and Trauma." School Psychology Review 23 (1994): 175-89.
- Roberts, Richard L., William J. Lepkowski, and Kimberly K. Davidson. "Dealing with the Aftermath of a Student Suicide: A T.E.A.M. Approach." NASSP Bulletin 82 (Apr. 1998): 53-59.
- · Texas Education Agency. Youth Suicide: A Prevention, Intervention, and Postvention Guide for Public Schools. Austin, Tex.: Texas Education Agency, 1991.

#### **Web Sites**

NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS (NASP) AND THE NASP'S NATIONAL MENTAL HEALTH AND EDUCATION CENTER FOR CHILDREN AND FAMILIES

#### www.naspweb.org

A good source for articles on school-based suicide prevention programs; congressional testimony on violent youth; and methods of helping young people cope with disaster.

#### NATIONAL SCHOOL SAFETY CENTER

#### www.nssc1.org

A good source of information on youth who are at-risk for suicide as well as the warning signs of violent or suicidal behavior.

#### U.S. DEPARTMENT OF EDUCATION

#### www.ed.gov

The federal Department of Education's annual report on school safety can be accessed through the agency's Web site.

## NATIONAL CENTER FOR EDUCATION STATISTICS (NCES)

#### www.nces.ed.gov

NCES, a branch of the U.S. Department of Education, is responsible for collecting and analyzing statistical data on education, including school violence and suicide.

#### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### · www.hhs.gov

The federal Department of Health and Human Services site provides information on a variety of health topics and includes links to various HHS subagencies, including the Centers for Disease Control and Prevention, the National Institutes of Health, and the Substance Abuse and Mental Health Administration.

#### CENTERS FOR DISEASE CONTROL AND PREVENTION, DIVISION OF ADOLESCENT AND SCHOOL HEALTH

#### · www.cdc.gov/nccdphp/dash

Provides information on the Centers for Disease Control and Prevention's work in adolescent and school health, including information on the 1999 Youth Risk Behavior Surveillance System (YRBSS).

CENTERS FOR DISEASE CONTROL AND PREVENTION, NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL (NCIPC)

#### www.cdc.gov/ncipc

An additional Centers for Disease Control and Prevention site that provides general information on suicide and suicide prevention programs.

#### SUICIDE PREVENTION ADVOCACY NETWORK (SPAN)

#### · www.spanusa.org/home.htm

This nonprofit group is dedicated to the development of an effective national suicide prevention strategy. Its Web site provides resources and information on suicide and suicide prevention.

#### AMERICAN ASSOCIATION OF SUICIDOLOGY (AAS)

#### · www.suicidology.org

This national association conducts research and provides data on suicide and suicide-related issues.