

Guidelines for schools responding to a death by suicide

These guidelines are designed to help school administrators, teachers, and crisis team members respond to the needs of students and staff after a suicide has impacted the school environment, as well as when an individual student's life may be impacted by a suicide within the family. Ideas are offered for addressing the issue of suicide, including how to talk to children about this difficult topic.

Death by suicide is the second leading cause of death for children 10-24 years of age; for every adolescent who dies by suicide, 50-100 have attempted suicide. Approximately 2-3% of high school students makes a serious attempt that requires medical treatment. Approximately one of every six high school students has seriously considered suicide. Suicide is believed to be widely underreported because many are classified as unintentional or accidental. Death by suicide of school personnel or family members may also touch the lives of children.

ACTIVATE THE SCHOOL CRISIS TEAM

As with any death or other crisis event, the school crisis team should be activated after a suicide has occurred.

1. Accurate information is important. Verify the information (e.g., from family members and/or local authorities).
2. Find out what the family would like shared and what has already been reported by the media and/or authorities.
3. Once the death has been verified, notify school personnel, students, and parents.
4. Determine if additional supports (e.g., grief counselors, community mental health providers) may be needed.

NOTIFICATION

1. Notify the School Crisis Team and develop a plan.

If initial notification occurs outside of school hours, this may require initiating the phone tree, email, or other means to notify the school staff and to have them meet before school to organize a unified plan and to brief school staff.

2. Involve the Public Information Office (PIO) for the school district as early in the process as possible.

It is important that a death by suicide not be sensationalized. If the media is involved, the PIO for the school should discuss coverage of the story with the media. Media coverage should acknowledge the loss, but not sensationalize it (e.g., avoid front page coverage or details about the means of suicide) or risk making suicide appear appealing to depressed or disenfranchised students. The focus of the message should be the importance of talking to someone when upset. Stress prevention and provide information about school- and/or community- sponsored programs for suicide prevention. Note that suicide is usually the result of underlying mental health problems (for which there are sometimes, but not always, observable signs) such that the individual is not thinking clearly and cannot effectively consider other solutions.

3. Notify teachers and staff prior to students when possible.

A meeting before school with teachers and other school personnel to discuss what is known about the death by suicide is one way to ensure everyone hears the same message and to quell rumors. It also allows teachers and other school personnel to ask questions and voice concerns before they face students. Openly discussing the death by suicide sends the message that it is "ok" to talk about the topic. For example, when addressing school personnel, the leader of the crisis team may say, "there has been a death by suicide of one of our students, John Smith." Then insert facts as they are known, but omit graphic details. It is important to directly address the death with students; if a teacher does not feel able to talk to his/her students about the death by suicide, a member of the crisis team should be available to assist with the notification.

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4. A staff member who is familiar with the students should share a prepared statement in person.

This should be done in small, naturally occurring groups such as homeroom or first period classes. Avoid the use of public address systems or large assemblies to make such announcements. Every effort should be made to ensure that all students are present at the time this information is shared so all students receive the same information simultaneously. Include information about the availability of mental health and support services and how students may access these services. If some students do not begin the day until second period, consider having these students meet with a familiar staff member in small groups upon their arrival to be informed and offered support.

5. Prepare a statement for parents.

Draft a letter to parents to notify them about the death by suicide and what services are being offered to students and families. Consider posting this on a parent section of the school website. Assure parents that crisis teams have been mobilized and support services are available. Provide information about plans for a meeting for parents to ask questions about what to expect and how to best support their children after a loss.

Template letters that schools can have in advance of a crisis, such as a death by suicide, for staff and parents so that notification statements can be quickly and easily prepared are available at schoolcrisiscenter.org/resources/samples-templates. A sample message for notification of students is also available.

EXPLAINING MENTAL HEALTH PROBLEMS AND SUICIDE

In the aftermath of a death by suicide, helping students understand the connection between mental health problems and suicidal actions is helpful. This is particularly true for young students who may not fully understand the cause of death. For example:

“Everyone feels sad sometimes. However, some people have a mental illness called depression. Most people never feel this sad. When people are depressed, they stop feeling happy about anything at all. They do not make good choices or good decisions. They feel so sad they may think the only way to stop feeling sad is to die; they cannot think of any other way to stop feeling so sad or depressed. They may not even ask for help to come up with another idea to stop feeling sad. When someone we love dies by suicide, we have many different feelings, including feeling very sad. Feeling sad after a death, though, does not mean that you are depressed. It is important to talk to someone about how you are feeling so that you can have some help to feel better and to answer any questions or worries that you may have about what happened.”

With older children and adolescents, talking to them about the connection between depression, substance abuse, and other mental health problems and suicide is important. Stress the fact that when depressed, people are not thinking clearly and cannot make good decisions. They may not identify any alternatives for helping themselves feel better other than death. Death by suicide is an act that is not logical, but one that often comes out of depression, substance abuse, or other mental illness, so others, especially friends and loved ones, may never be able to fully understand why it happened. Again, it is critical to stress the importance of always sharing suicidal thoughts or concerns, whether your own or those shared by others, with a trusted adult.

When informing students, it is important to use the phrase “death by suicide” to underscore that you are willing to discuss this difficult topic. It is preferable to avoid “committed suicide” (which may imply a criminal act). Included in the message should be the importance of sharing any concern for the safety of others with a trusted adult – no secrets about suicidal thoughts or intentions should be kept now or in the future.

TALKING ABOUT THE SUICIDE

When discussing death by suicide, listening is far more important than talking. Emotions can be intense and the listener should be compassionate, validating more than trying to solve the grief. Often children and adults raise the question of “why?” as well as “what could I have done to prevent the death?” There are no easy answers to these questions. In many cases, these questions are rhetorical and intended to voice feelings of helplessness or personal regrets. As these questions are raised, it is important to underscore the relationship between suicide and mental illness and/or substance abuse.

HOW TO ADDRESS SUICIDE WHEN CAUSE IS AN ISSUE

Suicide carries a stigma in society and leaves survivors often with strong feelings of guilt, regret and anger. It is, therefore, not uncommon that family members will ask that the school not disclose suicide as a likely cause of death, especially when the cause of death has not been confirmed by the medical examiner. This may be the case even when the circumstances (e.g., nature of death or presence of a note indicating it was a death by suicide) make it highly likely that the death was a result of suicide.

It is generally best to respect the family’s wishes, while still addressing the topic as it is raised by students. For example: “We are all saddened by John’s death. It is still under investigation [or the family does not agree with the media reports and feels it was an accident]. However, many of you have raised the question of death by suicide [and/or death by suicide has been discussed in the news], so let’s talk about suicide in general as it is an important topic.” In this way, the parents’ wishes can be respected, while attending to the students’ comments and addressing the topic.

Suicide, as difficult a topic as it may be, presents a “teachable moment.” It is a time to outline plans for handling suicidal ideations.

Any discussion of suicide should include:

- *Talk to someone*

If there is suicidal ideation or concern of such for others, it is important that this information be shared with a trusted adult. These thoughts and concerns should never be kept secret.

- *Identification of outside suicide resources*

These include websites for information as well as hotline numbers. The hotlines are staffed 24/7 and are available for adults and children. Following a suicide that impacts a school community (or ideally before a death by suicide occurs), resource information about such crisis hotlines and suicide prevention programs should be made available where students and staff gather (e.g., counselors’ office, main office, teachers’ lounge, or library); they can also be listed in school newsletters.

Make sure children appreciate that this advice is intended to help prevent future suicides, not to make people feel guilty if they were aware of depressive or suicidal thoughts or statements of someone who already died by suicide. Encourage students or staff who have guilt feelings to share them with a close family member or other trusted adult and provide access to school mental health providers where they can be shared and explored in private.

CRISIS AND GRIEF COUNSELING AND RELATED SUPPORT SERVICES AT SCHOOL

Availability of crisis, grief, and related support services after a death by suicide is important. They serve to support students and staff who are distressed. They can be an invaluable resource if students, staff, or parents are concerned about others contemplating suicide or if they, themselves, are considering such actions. Provide staff, students, and parents information about when and where the support is available. Outline procedures for students leaving class to access this support.

Remember that suicide is common – staff may have experienced losses due to suicide of family members or friends. Given the high incidence of suicidal attempts and ideation and depression, some staff may have struggled themselves with suicidal ideation or depression. Facilitating discussions with students about suicide after the death of a member of the school community in the context of these personal experiences can be particularly difficult. Let school personnel know how they may access support services, such as through the school's Employee Assistance Program or by talking with school mental health professionals, and provide them information about suicide hotlines and related resources. If a Staff Support Room is being used, address arrangements for teacher coverage such as by hiring one or two substitute teachers to provide rotating coverage so that teachers can access supportive services during the school day.

1. Help students learn coping behaviors to support and maintain their attendance and classroom learning.

Following a death by suicide, addressing the event with students directly may decrease the negative impact on school attendance and learning. This can be done individually and in group settings. The goal is to allow the expression of thoughts and feelings in a safe and non-judgmental environment and to provide ideas for positive coping with the loss. Acknowledging that loss was one of death by suicide gives students a message that you are available to help in the face of an uncomfortable topic of discussion.

2. Help students cope with difficult feelings.

After a death by suicide, students may have a myriad of feelings, including regret, guilt, and shame. These may be exacerbated if they were either close to the deceased or had mistreated the individual in the past. Feelings of guilt and shame may exist even if there is no logical reason. It is important to acknowledge that such feelings are common among survivors after a suicide.

3. Incorporate help from supportive school services.

School counselors, school nurses, school psychologists, and school social workers can help teachers identify risk

factors and signs of distress that may indicate the need for mental health services beyond what is offered at school. Parents may be concerned about the risk of suicide of their children. School-sponsored programs for parents outside of school hours which are led by school support services and/or bereavement specialists should be considered in the immediate aftermath of a death by suicide to allow for education and discussion of the topic, including suicide prevention.

INDIVIDUALS LIKELY TO BENEFIT FROM ADDITIONAL EMOTIONAL SUPPORT

After a death by suicide, there are groups of students who are more likely to benefit from additional emotional support.

These groups include:

- Close friends of the deceased
- Those who had a conflicted or strained relationship with the deceased (e.g., ex-girl/boyfriends or someone who bullied the deceased); the close friends of these individuals may also benefit from support.
- Individuals with a history of depression or similar problems
- Those who may have made a suicide attempt in the past
- Those who have experienced a death by suicide in their lives in the past
- If the deceased was a student:
 - Students who shared a class or extracurricular activity with the deceased
 - Teachers who had taught the student recently or in the past

It is important for school administrators to communicate with other school administrators in the area. Often siblings or close friends attend other schools or the student may have recently relocated to the present school. Furthermore, communication with other area schools can help to identify if there are similar deaths by suicide in the larger community.

PARTICIPATION OF STUDENTS IN FUNERALS AND MEMORIAL SERVICES

Students close to the deceased may wish to attend the funeral or memorial service. Talk to the family of the deceased to determine the plans and their wishes regarding student attendance. Ask if there is an option of visitation hours outside of school hours. A policy should be established for any death to allow students close to the deceased who wish to attend services to do so without consequences. Encourage parents to attend the service with their children. If a large group of students will be attending services, consider having counseling services available after school hours for those who may need additional support.

There is truly nothing anyone can say that will remove the grief, but talking about the death and listening to students as they share their feelings can be an important first step to healing.

MEMORIAL AND COMMEMORATIVE EVENTS

After any death, there is a desire to find some meaningful way to remember the deceased. All deaths that impact the school community should be treated consistently. Therefore, it is important to have plans in place to address memorials and commemorative events that can be applied to deaths by suicide.

In the aftermath of a death by suicide, the anxiety about the cause of death may overshadow the loss from the death. No matter how the death occurred, the sense of loss is present. Invite sharing of positive memories of the deceased.

With a death by suicide, avoid sensationalizing the cause of death or taking actions that make suicide seem like an appealing act to others who are depressed or feeling alienated by the school community to gain recognition (e.g., special assemblies). Permanent acts such as planting a tree or placing a plaque are not recommended. However, this does not mean that close friends and family of the deceased cannot acknowledge their loss. They should be actively involved in discussing ways to remember the deceased. After a suicide, they may consider doing something proactive such as participating in a suicide awareness walk or a suicide prevention campaign in the community or at school.

SPONTANEOUS MEMORIALS

Spontaneous memorials often “spring up” after any death of a student. Have a timeline and plan for what to do with flowers, notes, and stuffed animals that may be left. For example, items may be picked up every few days for a maximum of 5 days or until after the funeral. Items will be donated to some place of the family’s choosing and/or given to the family. Any notes, cards, and letters should be read by school staff to ensure that these are appropriate to share with family. It is important that there are no unmonitored sites for posting comments (e.g., large pieces of banner paper left unattended for students to write messages) as negative comments about the death by suicide may be written or children who may be contemplating suicide may post a message to this effect. An unsupervised or anonymous expression makes it nearly impossible to follow-up with students who may benefit from timely intervention. Similar issues may arise with the use of websites or postings on social media sites as a means of commemorating the death of a student. Talk with students about postings and other forms of social media communication, encouraging them to talk to a trusted adult about any inappropriate comments or statements of self-harm. Talk to close friends about alternative ways to remember their friend. These may include participation in a suicide awareness fundraiser or walk, volunteering at a local helpline, supporting a local program or charity related to an interest of the deceased (e.g., animal shelter or arts program), or participating in a campaign to reduce the stigma of mental health problems.

HANDLING THE STUDENT’S BELONGINGS

School desks and lockers may serve as uncomfortable reminders of the deceased student. Consider procedures for handling these with input from classmates. Talk to family members to identify a time for returning all personal belongings to the family. Ideally, this can be done after school hours and all belongings can be collected and made available in the front office so that family members are not required to clean out desks, lockers, etc., especially during school hours when other students may be present. Have a member of the school crisis team available for the family when they arrive as this will likely be an emotional

time for them. Newsletters and other school communications can also serve as traumatic reminders of the death; be sure that the name of the deceased is removed from any routine mailing lists, listservs, or phone trees.

ONGOING MONITORING

It is important to continue to monitor those impacted by the death. Maintain a close eye on students at risk. There will be events that may trigger the return of intense emotions such as special school events (e.g., homecoming, parent day, graduation) or special dates (e.g., birthday, death anniversary). Let students, families, and school personnel know that supportive services will be available as needed, especially at these times.

RISK FACTORS AFTER A SUICIDE

After a death by suicide, there are signs that indicate risk for extreme emotional distress. These can be shared with school personnel, families, and students as part of psycho-education and awareness related to suicide prevention.

These include:

- Presence of a psychiatric disorder, particularly depression
- Thoughts or talk about suicide or dying, especially after an exposure to a death by suicide
- Changes in behavior (e.g., extreme acting out or withdrawal from friends, family, and activities)
- Impulsive and high-risk behaviors (e.g., reckless driving, increased alcohol or substance abuse)
- Talk of a foreshortened future (i.e., cannot see participation in future events or their place in the future)

There are additional factors which increase the risk of a death by suicide.

These include:

- Access to firearms
- Significant family instability
- Recent severe stressor (perceived by the individual) such as:
 - End of a romantic relationship
 - Economic distress
 - Increased bullying or alienation

School counselors, psychologists, social workers, and nurses can help with identifying children who would benefit from additional evaluation or treatment and serve as a resource for staff concerns. Should risk factors be present, a referral for mental health services may be indicated. Similarly, if reactions to the death (e.g., continued decline in school performance, difficulty meeting demands at school, impaired functioning at home and with friends) persist without significant improvement, additional services may be warranted. Response to a death by suicide should not only include the immediate response, but also long-term follow-up and support.

Setting the tone

Be proactive and encourage students to seek out support if they are having troubling thoughts or are concerned about friends or loved ones in the aftermath of a death by suicide.