As Dr. Douglas Flemons explains in the Office of Suicide and Violence Prevention’s training video, “Suicide is the convergence of risk factors.” There are many factors in a person’s life that can contribute to the final result of ending one’s life. Due to the recent alleged suicide of Junior Seau, a former All-Pro linebacker in the National Football League (NFL), a risk factor that has come to the forefront of the national media is the effect of head injuries on future depression, suicidal ideation, and suicide attempts. Seau reportedly took his own life with a self-inflicted gunshot to the chest. Seau had reportedly been depressed since his retirement from NFL football. According to previous reports, Seau attempted to harm himself by driving his car off a cliff in the year prior to his death. His death mirrors the passing of Dave Deurson, a former All-Pro safety for the Chicago Bears. Deurson also died of a self-inflicted gunshot to his chest. Shortly before his death, Deurson sent a text message to his family asking that his brain be donated to the Brain Injury Research Institute (BIRI) at Boston University School of Medicine, which is conducting research into chronic traumatic encephalopathy (CTE). CTE is a progressive degenerative brain disease that can only be diagnosed after death.

Dr. Bennet Omalu, cofounder of BIRI, was the first to identify CTE as a factor in the deaths of former NFL players. Symptoms of CTE include dementia, memory loss, aggression, confusion, and depression. Research suggests that these indications can appear at any age. The suspected causes of CTE include repeated concussions or subconcussions, which are less severe head injuries that do not result in a concussion. Dr. Omalu has identified numerous cases of former NFL players with CTE. In 2005, Terry Long, who played in the NFL for eight season from 1984-1991, died by suicide as a result of drinking antifreeze. An increasing number of former, and possibly current, NFL players have experienced symptoms of depression, attempted to end their lives, and/or died by suicide.

Although danger exist at each level of the sport, from youth football to the professional football, the danger in the NFL game far exceeds all other levels of football due to the strength and speed of the players. The NFL’s rules have constantly evolved since the league’s inception in 1922. Player safety has been a specific concern within the past 10 years. For example, in the last two years, the league passed rules that prohibit hits on what are deemed “defenseless” players. At this point, the question remains: Has the NFL done enough to protect their players?

Seau’s alleged suicide has brought this issue back into the public eye. Drew Brees, a current NFL quarterback, and Kurt Warner, a former All-Pro NFL quarterback, were both quoted as saying that they do not want their children to play football. Seeing the effects that the sport may have on the human brain could make every parent question whether or not they should allow their children to play. Other football players, such as former running back Amani Toomer, disagreed with Warner and Brees. However, even with the changes in the NFL’s rules, the nature of the game is potentially hazardous on every level of play with cases of CTE being found in the amateur ranks, as well.

For example, Owen Thomas, a former captain of the University of Pennsylvania football team, died by suicide in 2010. It was determined after his death that he was in the initial stages of CTE. Additionally, the youngest reported case of CTE was found in an 18-year-old high school football player.

With all of the current research about the effects of concussions on the human brain, it is necessary for all levels of football to examine how their game is played. Does it matter what rule-changes are made or will danger always exist in football? The effects of contact injuries have been proven to exist. Depression, suicide attempts, and death by suicide have all been seen in former football players. The inevitable question persists: Is it possible to rid the game of these injuries or do we need to rid ourselves of the game?
Henderson Student Counseling Center

Henderson Student Counseling Services is the primary behavioral health resource for the campus community and students of Nova Southeastern University. Individual, family, and group counseling services are designed to provide students with an opportunity to develop personal insight, identify and solve problems, and implement positive strategies to better manage their lives both academically and personally.

The counseling center is staffed by licensed mental health professionals, a licensed psychologist, and a psychiatrist. In addition to free counseling, students can access psychiatric services for a nominal fee that is covered 100% if they have the school’s insurance.

What should every student know????

Student’s can participate in up to 10 sessions per year FOR FREE!

The counseling relationship is strictly confidential!

An on-call counselor is available after hours in times of crisis

Just call (954) 424-6911 to make an appointment!

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Traumatic Brain Injury (TBI) Resources

- Discusses current events pertaining to brain injuries
- Contains resources for individuals suffering from brain injuries
- Provides background information regarding functions of the brain and the effects of brain injuries

Brainline.org: [http://www.brainline.org/](http://www.brainline.org/)
- Contains testimonials from former brain injury patients
- Offers videos for individuals with brain injuries
- Presents education for friends and families of individuals with brain injuries

- Website of the BIRI Institute, prominent researchers of Chronic Traumatic Encephalopathy (CTE)
- Contains updates on the BIRI Institute’s current research.
- Offers contact information for the BIRI Institute

- Contains background information about Traumatic Brain Injury (TBI)
- Lists symptoms of TBI and ways to recognizes signs of TBI
- Offers links to website that pertain to TBI

- Website dedicated to children that have experienced a TBI
- Contains resources for parents and educators
- Lists “key terms” of TBI

- Contains articles pertaining to TBI and support for TBI
- Features “Chat with Pat,” a chat that answers questions about TBI
- Offers a catalogue of products to assist people have experienced a TBI
“Is he wearing a skirt?” I asked as an adolescent male passed the middle and upper school administration with a smirk on his face. “It must be part of the senior prank,” Charlie Phillips, the Upper School administrator, uttered as an adolescent female followed suit dressed in an ill-fitting tie. The mood switched from somber to light-hearted following an emotional discussion of the tragedy that transpired on school grounds nearly two months prior. The students were displaying some of the humor that Dale Regan, former Head of School, was infamous for exuding.

The shootings occurred on Tuesday, March 6th, following the dismissal of a disgruntled employee. The former teacher returned to school grounds and subsequently took his life and the life of the Head of School. Naturally, frenzy ensued, but the reactions following this tragic event were impressive. The school personnel ensured the safety of their students, faculty, and staff by dismissing them once the area was deemed safe. The school reopened the following day to allow for grief counseling and support by school administration and staff. Shortly thereafter, memorial services were held, in which an estimated 3,000 people attended. The school remained closed for the previously scheduled spring break until March 19th. However, the real question remained: “What will we do when the students return?”

It was the morning of Monday, March 19th, and the administration, faculty, and staff prepared for the arrival of the students. This was the first official day back to school. Members of the Episcopal School Community attempted to mentally prepare for the reactions of the students. As school personnel approached the drop-off area, they were surprised to see the upperclassmen unloading all of the students from the cars. They were welcoming their younger peers back to school, while asking them about their spring break vacations. The students reportedly utilized social media to organize this homecoming. The reopening of the school commenced on a high note and the students ceased to amaze in the following weeks. Chapel services and luncheon meetings were scheduled to discuss the losses and assist in processing feelings and emotions that resulted from that unforgettable day.

Students and the Episcopal Community decorated river rocks with personalized messages similar to the rocks Regan kept in her office that she distributed to individuals when they were making difficult decisions. Furthermore, the students were given the opportunity to create a memorial for the educator that was part of their community for over 30 years. These students created 63 ceramic fish, one for each year of her life, and placed their artwork in the pond that lies in the middle of campus. Pat Andrews, Head of the Middle School, indicated that lights were added to the memorial, so the reflections could be seen at night, as well. A common denominator seen within the Episcopal Community, as a whole, is a sense of resiliency. A feeling that “We must move on, and we will move on.”

Dr. Scott Poland, co-director of Nova Southeastern University’s (NSU) Office of Suicide and Violence Prevention (SVP), has been providing extensive consultation on postvention strategies to assist in the aftermath of this tragedy. Dr. Poland and I, SVP’s psychology resident, were scheduled to present to the faculty and staff of Episcopal School on April 30th. Approximately one week before our arrival, the official police report of the incident was released to the public, providing in-depth details about the events that transpired on April 6th. As expected, there was a reemergence of these intense feelings of grief and loss. Dr. Poland and I provided an opportunity to process the reactions of the faculty and staff. Additionally, Dr. Poland discussed typical reactions that students might experience and he provided techniques in helping support students. At the conclusion of the session, Charley Zimmer, active Head of School, arose and asked for input regarding the creation of an additional memorial for the beloved Dale Regan. From here, the faculty and staff left the auditorium in hopes of processing feelings, brainstorming novel ideas, and moving forward as a collective whole.

The future is looking bright for the Episcopal School of Jacksonville. It will be filled with mixed emotions, but there is a strong community working towards rebuilding the school and community that grew to be so accepting within the past 40+ years. Others will look at this school’s reactions in admiration for their strength and perseverance following a horrific tragedy, while emphasizing the necessity for suicide and violence throughout all communities.
ATTENTION Faculty, Staff, & Students at NSU Student Educational Centers or in Online Programs—

We need your help!

*Volunteers Needed* Expansion of Prevention Initiatives Off-Campus (EPIC) Project *Volunteers Needed*

Through our SAMHSA grant-funded Expanding Suicide Prevention Initiatives Off-Campus (EPIC) Project, we are working to extend the current suicide prevention efforts on the main campus to those at the Student Educational Centers and in online programs. To help meet this goal, the NSU Office of Suicide and Violence Prevention developed compelling web-based suicide prevention trainings, which include a combination of video and narration, interlaced with written text and music. We are conducting a study designed to develop and enhance these web-based suicide and violence prevention trainings and are asking NSU Faculty, Staff, and Students at NSU Student Educational Centers or in online programs to help the university as a whole by participating in a pilot training program. You will be asked to view the video training and complete surveys via the Blackboard platform. All of the information obtained in this study is strictly confidential.

An added bonus: students who are randomly selected out of those who volunteer will receive a $15 electronic gift card!!

Please email samhsa@nova.edu to get started! Thanks in advance for your participation.

SVP Co-Director Dr. Douglas Flemons Releases a New Book

Dr. Flemons, Professor of Family Therapy and Co-Director of the Suicide and Violence Prevention Office at NSU, has just completed a new book, co-authored with Dr. Leonard Gralnik, an Assistant Professor of Psychiatry at Florida International University. The book, Relational Suicide Assessment: Risks, Resources, and Possibilities for Safety, is being published by W. W. Norton and will be released in late 2012 or early 2013. It evolved out of trainings that Drs. Flemons and Gralnik developed for their staff when they served, for six years, as the director and medical director, respectively, of NSU’s Student Counseling Center. They recognized that given the high stakes involved in suicide assessments, it is easy for clinicians to develop tunnel vision, to find themselves focusing almost exclusively on a suicidal client’s overwhelming risks: hopelessness; a sense of being a burden to others; a history of trauma and previous suicide attempts; too-easy access to weapons or other lethal means; an overwhelming desire for relief; and an intent and/or a plan to die. In the book, Flemons and Gralnik argue that for an assessment to be reliable, it must be relationally balanced. The suicidal person’s risks must be understood in relation to his or her resources, and intrapersonal experience must be understood within the context of the interpersonal risks and resources contributed by significant others.

Flemons and Gralnik completed an extensive literature review to distill relevant risks and resources, and they array them throughout four categories of suicidal experience: Disruptions and Demands, Suffering, Troubling Behaviors, and Desperation. This was done in order to create an interview guide—a tool for clinicians to use to organize semi-structured interviews with suicidal clients. The book provides in-depth instruction in how to conduct these interviews, and, in a separate chapter, it delves into the issue of safety—how to come to a safety decision regarding the client and how, if it is warranted, to collaborate with him or her in developing a safety plan. The final chapter presents an annotated transcript of a relational suicide assessment, tying together the ideas and methods discussed throughout the book.
How do you Remember the Warning Signs of Suicide?
Here’s an Easy-to-Remember Mnemonic:

**IS PATH WARM?**

| I | Ideation        |
| S | Substance Abuse |
| P | Purposelessness |
| A | Anxiety         |
| T | Trapped         |
| H | Hopelessness    |
| W | Withdrawal      |
| A | Anger           |
| R | Recklessness    |
| M | Mood Change     |

Suicide Prevention Resources
National Suicide Prevention Lifelines
1-800-SUICIDE or 1-800-273-TALK (8255)

The Ganley Foundation
http://ganleyfoundation.org/

The Trevor Project
http://www.thetrevorproject.org

American Association of Suicidology
www.suicidology.org/

American Association for Suicide Prevention
www.afsp.org

Suicide Prevention Resource Center
www.sprc.org

Florida Office of Suicide Prevention
www.helppromotehope.com

Florida Initiative for Suicide Prevention
www.fisponline.com

Mobile Crisis Response Teams
Broward - Henderson:
954-463-0911
Palm Beach:
North: 561-383-5777
South: 561-637-2102
Miami-Dade - Miami Behavioral:
305-774-3627

If you or someone you know is in a crisis, do not wait to seek help! Call 9-1-1 and seek out additional help from resources on this page.

Henderson Student Counseling

Student counseling provides the opportunity for students to benefit from working on personal issues with experienced professionals.

The counseling center is staffed by licensed mental health professionals, a licensed psychologist, and a psychiatrist.

3538 S. University Drive Davie, FL 33328
Located at the University Park Plaza (Just east of the NSU Bookstore)

Phone (954) 424-6911 Fax: (954) 424-6915

Hours of Operation
Monday.......................... 9:00 am - 5:00 pm
Tuesday.......................... 9:00 am - 8:00 pm
Wednesday........................ 9:00 am - 8:00 pm
Thursday.......................... 9:00 am - 5:00 pm
Friday............................. 9:00 am - 5:00 pm