

## Office of Suicide and Violence Prevention

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## After a Suicide: Answering Student Questions

The aftermath of a youth suicide is a sad and challenging time for a school. Postvention is a term coined by Dr. Edwin Shneidman to describe helpful and appropriate acts after a dire event. The term has become synonymous with the challenging aftermath of suicide as few events are scarier for a school and community than the suicide of young person. The major tasks for suicide postvention are to help your students and fellow faculty to manage the understandable feelings of shock, grief and confusion. The major focus at this time should be grief resolution and prevention of further suicides.

The research literature estimates that once a suicide happens the chances of another death by suicide increases dramatically. The following suggestions are intended to guide staff during this difficult time:

- It is important to be honest with students about the scope of the problem of youth suicide and the key role that everyone (including the students) plays in **prevention**.
- It is important to balance being truthful and honest without violating the privacy of the suicide victim and his/her family and to take great care not to glorify their actions.
- It is important to have the facts of the incident, be alert to speculation and erroneous information that may be circulating, and assertively, yet kindly, redirect students toward productive, healthy conversation.
- Center for Disease Control research has found that the teenagers most susceptible to suicide contagion are those believed to be: students who backed out of a suicide pact, students who had a last very negative interaction with the victim, students who now realize they missed warning signs, and students with their own set of childhood adversities/previous suicidal behavior who need not have known the victim.

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# "One person can make a difference, and everyone should try."

John F. Kennedy

- It is important to balance being truthful and honest without violating the privacy of the suicide victim and his/her family and to take great
- Numerous professional associations caution that memorials not be dramatic and permanent and encourage activities that focus on living memorials such as funding suicide prevention.
- Suicide is always on the minds of numerous high school students and the National YRBSS survey for 2011 found 7.8% of high school students have made a suicide attempt in the last year and 15.8% seriously considered it.
- Schools are often reluctant to implement depression screening programs that are available for middle and high school students. My experience has been that often, multiple deaths have to occur before the administration is willing to investigate depression screening. Depression screening reaches students themselves and helps them to identify that they are suffering from symptoms of depression and encourages them to seek adult help. The SOS Signs of Suicide program includes empowering videos where students learn how to help themselves or their friends through ACT (Acknowledge, Care and Tell an adult). SOS is listed as evidence based on the Suicide Prevention Resource Center website www.sprc.org. Detailed information about SOS can be found at www.mentalhealthscreening.org.
- National research has found that talking with youth about suicide does not cause them to think of it and in fact provides the opportunity for them to unburden themselves.
- Major protective factors identified by the World Health Organization are the following: stable families, positive connections at school, good connections with other youth, religious involvement, lack of access to lethal weapons, access to mental health care and awareness of crisis hotline resources.

### How to Answer Commonly Asked Questions After a Youth Suicide

Why did he /she die by suicide? We are never going to know the answer to that question as the answer has died with him/her. The focus needs to be on helping students with their thoughts and feelings, as well as everyone in the school community working together to prevent future suicides.

What method did they use to end their life? Answer specifically with information as to the method such as he/she shot herself or died by hanging, but do not go into explicit details such as what was the type of gun or rope used or the condition of the body.

Why didn't God stop him/her? There are varying religious beliefs about suicide and you are all free to have your own beliefs. However, many religious leaders have used the expression "God sounded the alarm but could not stop him/her. God has embraced them yes, and he/she is in whatever afterlife you believe in, but God is actually saddened that he/she did not stay on this earth and do God's work over their natural lifetime."

What should I say about him/her now that they have made the choice to die by suicide? It is important that we remember the positive things about them and to respect their privacy and that of their family. Please be sensitive to the needs of their close friends and family members.

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Didn't he/she make a poor choice and is it okay to be angry with them? They did make a very poor choice and research has found that many young people who survived a suicide attempt are very glad to be alive and never attempted suicide again. You have permission for any and all of your feelings in the aftermath of suicide and it is okay to be angry with them. The suicide of a young person has been compared to throwing a rock into a pond with ripple effects in the school, church and the community, and there is often a search for a simple explanation. These ripple effects have never been greater with the existence of social networks (e.g., Facebook). It is recommended that school staff and parents monitor what is being posted on social networks sites in the aftermath of a suicide. Suicide is a multifaceted event and sociological, psychological, biological, and physiological elements were all present to some degree. The suicide is no one's fault but yet is everyone's fault and suicide prevention is everyone's responsibility. Many individuals who died by suicide had untreated mental illnesses and it is important that everyone is aware of resources that are available in their school and community so that needed treatment can be obtained. It is always important that everyone knows the warning signs of suicide and they are outlined in great detail on websites referenced in this newsletter.

**Isn't someone or something to blame for this suicide?** The suicide victim made a very poor choice and there is no one to blame. The decision to die by suicide involved every interaction and experience throughout the young person's entire life up until the moment they died and yet it did not have to happen. It is the fault of no one.

How can I cope with this suicide? It is important to remember what or who has helped you cope when you have had to deal with sad things in your life before. Please turn to the important adults in your life for help and share your feelings with them. It is important to maintain normal routines, proper sleeping and eating habits, and to engage in regular exercise. Please avoid drugs and alcohol. Resiliency, which is the ability to bounce back from adversity, is a learned behavior. Everyone does the best when surrounded by friends and family who care about us and by viewing the future in a positive manner.

How serious is the problem of youth suicide? It is the third leading cause of death for teenagers and the eleventh leading cause of death for all Americans. More than 33,000 Americans die by suicide each year.



What is an appropriate memorial to a suicide victim? The most appropriate memorial is a living one such as a scholarship fund or contributions to support suicide prevention. The American Foundation for Suicide Prevention <a href="https://www.asfsp.org">www.asfsp.org</a> and the Suicide Prevention Resource Center <a href="https://www.sprc.org">www.sprc.org</a>, an excellent guide published in 2011 for postvention entitled, After a Suicide: A Toolkit for Schools. This guide is available on both of their websites, and provides specific guidelines to balance the often-felt needs that students have to do something after a suicide without glorifying the suicide victim, which might contribute to other teenagers considering suicide.

What are the warning signs of suicide? The most common signs are the following: making a suicide attempt, verbal and written statements about death and suicide, fascination and preoccupation with death, giving away of prized possessions, saying goodbye to friends and family, making out wills, and dramatic changes in behavior and personality.

What should I do if I believe someone to be suicidal? Listen to them, support them and let them know that they are not the first person to feels this way. There is help available and mental health professionals such as counselors and psychologists have special training to help young people who are suicidal. Do not keep a secret about suicidal behavior and save a life by getting adult help as that is what a good friend does and someday your friend will thank you.

How does the crisis hotline work? We are very fortunate to have nationally certified crisis hotlines in many cities that are available 24 hours a day and manned by trained volunteers. There is also a 24 hour national suicide hotline and that can be reached via 1-800-Suicide or 1-800-273-8255.



How can I make a difference in suicide prevention? Know the warnings signs, listen to your friends carefully, do not hesitate to get adult help and, remember that most youth suicides can be prevented, and become aware of ways to get involved with suicide prevention. High school students can volunteer in some cities and be trained to answer the Teenline. Please, contact the local Crisis Hotline for more information. One person can make the difference and prevent a suicide!

Where can I go for more information about preventing suicide? Contact the American Association of Suicidology (AAS) at <a href="www.suicidology.org">www.suicidology.org</a> or the Yellow Ribbon Suicide Prevention Program at <a href="www.yellowribbon.org">www.yellowribbon.org</a> or the American Foundation for Suicide Prevention <a href="www.sprc.org">www.sprc.org</a>. You can also visit NSU's Suicide and Violence Prevention Office webpage at <a href="http://www.nova.edu/suicideprevention">http://www.nova.edu/suicideprevention</a>

#### **REQUEST AN SVP PRESENTATION**

To date SVP has provided **278** presentations to various departments of NSU. SVP has presented to over **6,100** faculty, staff and students of NSU. Presentation topics include suicide and violence training, stress management, and test taking anxiety. Use the link below to request a presentation!

http://nova.edu/suicideprevention/presentation\_requests.html

http://nova.edu/suicideprevention/presentation\_requests.htm

How well do families who lost a child to suicide cope with the loss? The literature well documents the devastating affect of suicide on the family and states that family members often feel isolated. Research studies conducted 15 months after the suicide indicate that the families have resumed normal functioning, however they are profoundly affected, especially when there is little explanation for the suicide of their loved one. Family members may experience anger towards those they believe are somehow responsible, loss of interest in their employment or school work, increased absences, disrupted sleeping and eating patterns, grief, helplessness, abandonment, isolation, loneliness, shame and guilt. Suicide survivors have more difficulty with the grieving process than survivors of losses from other causes than suicide. Survivors often reported feeling uncomfortable with the naturally occurring support systems, and school and community members often are unsure of what to say and how to reach out to those who lost a family member to suicide. If a family member has a pre-existing mental health condition it will likely be exacerbated and substance abuse will increase. Families reported receiving less support that they deemed necessary and what support they did receive was often poorly timed and especially ineffective for younger siblings. Research studies have also found that approximately 50% of the time children were not told the truth that the cause of death was suicide. Children often find out the truth at a latter date and are upset that they were not told the truth. Bereavement was complicated when family members had deeply religious beliefs and moral convictions against suicide. Family physicians and school personnel who are knowledgeable about helping survivors cope and available community resources can play a significant role in supporting the grieving family. Family members often receive comfort and find meaning in becoming involved in suicide prevention.

Scott Poland, Ed.D.

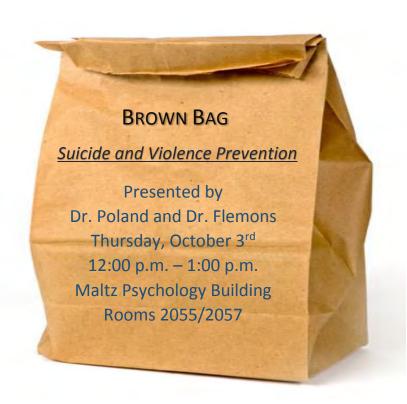
Co-Director

Office of Suicide and Violence Prevention

Nova Southeastern University



# SVP's Upcoming Events



## **NSPIRE**

Get involved with

NSU Students for Prevention, Intervention, and Response to Emergencies

Open to all NSU students!
Contact Laura Lundell, NSPIRE's
President for more information.
Il858@nova.edu

#### SCHOOL SHOOTERS: WHAT DO WE KNOW AND LESSONS FOR PREVENTION

FREE Webinar Presented by

#### Dr. Scott Poland

Wednesday, October 23, 2013 at 1:00 p.m. Link to web address T.B.A on SVP Website

Dr. Poland has been a responder to 13 different school shootings, including two in California. He is very dedicated to prevention and identifying the lessons that have been learned from school shootings. This webinar will provide invaluable insight on these topics:

- Prior concerning behaviors of the shooters and their mental health
- Prior knowledge that some peers had of the attacks
- A look at thought processes and motivations of school shooters
- Identify the warning signs that were missed by parents, school and community personnel in previous school shootings
- Understand the types of school shooters and learn strategies to prevent future shootings

Dr. Poland is the author of many Keenan SafeSchool and Keenan SafeCollege courses. He is a nationally recognized suicide prevention and response expert. He has presented well over 1,000 workshops in every state and numerous foreign countries. He served on the President's Roundtable for Youth Violence and has testified before congress regarding the safety of children four times.

Nova Southeastern University

NOVA SOUTHEASTERN UNIVERSITY

Issue 8, September 2013



#### WORKSHOP FEES

Professional: \$40 NSU Student: FREE Non-NSU Student: \$10

#### 4 CE CREDIT HOURS AVAILABLE

NSU is approved by the Florida
Department of Health as a provider
of Continuing Education for
Licensed Clinical Social Workers,
Marriage and Family Therapists and
Mental Health Counselors

Provider #: 50-11750 Expires: 3/31/2015

#### Psychologists:

Nova Southeastern University's Center for Psychological Studies is approved by the American Psychological Association to sponsor continuing education for psychologists. Nova Southeastern University maintains responsibility for this program and its content.

### **Relational Suicide Assessment:**

Risks, Resources, and Possibilities for Safety

Brief Therapy Institute's 2013 - 2014 Workshop Series

Presented by

Dr. Douglas Flemons, Ph.D., LMFT

Monday, October 28, 2013 9:00 a.m. – 1:00 p.m.

Nova Southeastern University Main Campus, DeSantis Building Room 1124 (Knight Auditorium)

Given the isolating nature of suicidal ideation and actions, it is not surprising that most suicide assessment instruments narrowly focus on the individual in crisis. And given the high stakes involved, it is common for the therapist conducting an evaluation to focus primarily on prevalent risks. However, to adequately assess the possibility of a client making an attempt on his or her life, we need to expand our focus. A balanced, comprehensive assessment requires you to undertake a variety of tasks: to engage with the client *empathically*; to thoroughly investigate the risks the client is facing *and* remain curious about his or her potential for resilience and change; to explore the complicating *and* ameliorative potential of significant others; to juxtapose information from a variety of sources in the process of making a clinical decision about hospitalization; and, if warranted, to work collaboratively with the client to co-construct a detailed safety plan.

Dr. Flemons will introduce participants to *relational suicide assessment*, a semi-structured interview method that he co-developed with Dr. Len Gralnik, a professor of psychiatry at FIU. Drawing on an extensive research literature on risk- and protective factors, as well as his and Dr. Gralnik's 50 years of combined clinical experience, Dr. Flemons will outline the essential topic areas to be addressed during a suicide assessment and will explain and demonstrate how to use his and Dr. Gralnik's *Risk and Resource Interview Guide* to organize the assessment. He will describe the process of making a safety decision and offer detailed guidelines for how to develop a safety plan with the client. The workshop will conclude with an explanation of how to document your assessment in a case note.



## New at NSU!

#### **SVP Training Workshops**

SVP is proud to announce that the SVP training is now required online for all new NSU employees. This is very exciting as it will result in us expanding our safety net across the NSU campuses. To view the training, please visit <a href="https://www.nova.edu/suicideprevention">www.nova.edu/suicideprevention</a>.

Click on "Training Videos" tab.

#### **Graduate Courses**

The Masters of Forensic Psychology Program has launched a brand new course during the fall 2013 semester, *Suicide Prevention and Crisis Intervention Skills*. This course will also be offered during the winter 2014 semester, to students in the Family Therapy Program.

# Meet the new members of the SVP Team



Office of Suicide and Violence Prevention Co-Directors, Dr. Douglas Flemons & Dr. Scott Poland, New members: Dr. Shannon Worton & Stephanie Guedj



# SVP > SPOTLIGHTS





Dr. Douglas Flemons

Dr. Scott Poland

# Dr. Poland Reaches Out to Our Community

Dr. Poland represented NSU and SVP this summer, presenting a number of lectures throughout Broward County. Dr. Poland's outreach events included:

- Several invited workshops on Bullying and Suicide Prevention at the National University of Taiwan in Taipei, Taiwan.
- Keynote addresses on Mental Health and School Crisis at the Great Lakes Homeland Security Conference in Grand Rapids, Michigan, the Arkansas School Safety Conference in Little Rock, Arkansas, and the National School Safety Council Conference in Las Vegas, Nevada.
- An invited workshop on Coping with Crisis for the National Center for Death Education in Boston, Massachusetts.
- Serving as a special guest at the Miramar Democratic Club's meeting, where he presented, "School Violence and Safeguarding Children in Today's World."

# Dr. Poland and Dr. Flemons Speak at the Faculty Symposium

Drs. Scott Poland and Douglas Flemons, Directors of NSU's Office of Suicide and Violence Prevention, spoke at the first Faculty Symposium of the 2013-2014 academic year on September 5, 2013, discussing the topic of School Safety and Violence Prevention. Their message was clear: "Prepared, not scared."

Though schools are among the safest places in our country, national media coverage of mass shootings has sensitized us to the possibility that an active shooter could bring death and chaos to any campus. While Congress is divided by conflicting visions of how to best ensure school and campus safety — "arm the good guys" to protect against "the bad guys" vs. restricting gun ownership — Drs. Poland and Flemons speak to the importance of gun control, especially throughout a college campus.

As collaboration is a key focus throughout NSU, President Hanbury reinforced this message by encouraging all faculty and staff to work together in an effort to maintain safety at NSU. Knowing that many students reach out (through messages, posts, actions, etc.) before acting on thoughts of harm to self or others, it is the responsibility of NSU's faculty and staff to reach out themselves when they come across a student who expresses something of concern.

Reaching out on the part of NSU faculty and staff can take place through consulting with department heads, supervisors, Deans, or the Henderson Student Counseling hotline (954-424-6911). Although hearing this type of information can evoke a sense of fear, a community is created when we all take a piece of responsibility to take action, helping not only the student, but the campus as a whole. If one final message can be taken from this discussion it could be this: "If you see/hear something — say something."



## Stressed? Let a Friend Help!

It's that time, again! As students, both new and returning, begin another semester of classes, feelings of stress and nervousness are inevitable. Everyone has different coping mechanisms and experiences stress differently, and some of us don't quite know how to handle our stress effectively. During my undergraduate career, I volunteered at my local crisis center answering calls from individuals presenting in crisis, so I have heard firsthand, as well as have experienced myself, the stressors that students feel in the beginning of a new semester.

From my experience at the crisis center, one thing I learned is the impact that a listening ear can have on an individual's mental health. Countless times at the end of a call, the client would thank me for listening to what they had to say and would tell me they felt understood and relieved after sharing. Our role as phone counselors was simply to listen. We were not to give any advice, disclose any personal information or give an opinion on whatever issue the client was calling for. We were to try to understand the client and whatever it was that they were thinking or feeling. Although we didn't provide any other therapy or counseling besides just being a listening ear for the client, the effect that our phone calls had on the callers was outstanding.

Applying what I learned at the crisis center to the stress caused by school, I always stress to my friends how relieving it can be to just vent about your stress and feelings to a friend. If you're feeling overwhelmed, call up a friend and tell them exactly how you feel. And if you're on the receiving end of one of these phone calls, be a non-judgmental listener and allow the person to vent their emotions. Allowing your stress to build up without release can be detrimental to your mental health and can lead to anxiety, depression and other mental health concerns. Hopefully these tactics will help us to enjoy a relatively stress-free fall semester!

Chelsea Bennett, B.S.
Psychology Trainee
Center for Psychological Studies
Nova Southeastern University



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?

Students 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!

#### **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

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#### SUICIDE PREVENTION RESOURCES

1-800-SUICIDE

- or -

1-800-273-TALK (8255)

The Ganley Foundation <a href="http://ganleyfoundation.org/">http://ganleyfoundation.org/</a>

The Trevor Project <a href="http://www.thetrevorproject.org">http://www.thetrevorproject.org</a>

American Association of Suicidology <a href="https://www.suicidology.org/">www.suicidology.org/</a>

American Association for Suicide Prevention www.afsp.org

Suicide Prevention Resource Center www.sprc.org

<u>Florida Office of Suicide Prevention</u> www.helppromotehope.com

Florida Initiative for Suicide Prevention www.fisponline.com

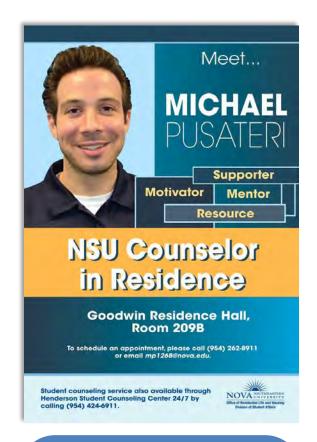
#### **Mobile Crisis Response Teams**

Broward - Henderson: 954-463-0911

Palm Beach: North: 561-383-5777 South: 561-637-2102

Miami-Dade - Miami Behavioral: 305-774-3627

## Nova's Counselor in Residence



Mike Pusateri, former SVP graduate assistant and doctoral student in clinical psychology, is the NSU Counselor in Residence. He holds weekly office hours and is available by appointment to meet with residential students.

#### **CONTACT INFORMATION**

Office: 209B Goodwin Hall

To schedule an appointment with Mike,
please call (954) 262-8911

or email him at mp1268@nova.edu