Interview with Nova Alert

The Office of Public Safety is responsible for maintaining the safety and security of students, faculty, staff, and personnel within the NSU community. SVP staff recently had the opportunity to meet with NOVALERT team members James Ewing, Director of Public Safety; Shane Lam, Associate Director of Field Operations; and James Lambe, Associate Director of Communications and Technology. This meeting was held to discuss the following questions related to campus safety and security operations at NSU.

How does NSU conceptualize campus safety?

Campus safety can be conceptualized as a participatory and collaborative endeavor that adheres to an it-takes-a-village mindset. This is exemplified by the Shark Watch Program, which encourages the entire NSU community to embrace campus safety by keeping an eye out for one another, identifying potential issues before they arise, and following the motto, “If you see something, say something.” A collaborative and proactive approach to campus safety is one of the key elements of crime prevention. At NSU, public safety officers serve as “protective caregivers” and are the primary personnel responsible for providing services related to safety and to security. Another important aspect of campus safety is fostering community relationships. This is demonstrated by the partnerships that have been created between public safety personnel and local law enforcement and fire rescue agencies.

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How can students become more involved in campus safety?

Students can become more involved in prevention efforts by embracing campus safety, participating in behaviors that promote the welfare of others, and engaging in safe and positive bystander intervention strategies. The bystander intervention trainings offered at NSU focus on education, engagement, and teaching safe and effective response options. Such responses include direct intervention, seeking assistance from authority figures, and/or notifying campus security and local law enforcement when campus security is at risk.

How have campus safety procedures changed over the last ten years?

Over the last ten years, paradigm shifts in campus safety have resulted in greater public awareness of, and involvement in, campus safety initiatives. These changes have also led to an increased focus on areas such as regulatory compliance and technological advancement. For example, the Security Operations Center (SOC) at NSU is an innovative dispatch command control center, housed within the Campus Support Building. This center operates 24 hours a day, serves as a centralized point of communication for the NOVALERT system, and monitors thousands of surveillance cameras and electronic access gates located throughout the university.

What is NOVALERT?

NOVALERT is a security awareness and communication program that facilitates instant contact with the public safety department through the operation of a 24-hour hotline (954-262-8999), which can be utilized during emergency and non-emergency situations, and blue-light telephones, which are located throughout the NSU campus. NSU’s Emergency Mass Notification System (NSU Alert) keeps the NSU community informed of potential emergency and crisis situations by disseminating this information through multiple notification channels, interior and exterior public address systems, electronic alerts (e.g., text, voicemail, email), Sharktube displays, and website notifications.

What are the most common calls to NOVALERT?

The Public Safety Office at NSU serves a variety of functions and provides services above and beyond those directly related to campus security and protection. The most common calls received by NOVALERT include requests for gate and building access, vehicle assistance, and lost and found. In addition to requests related to operational access and control, the blue-light telephones have also been utilized during emergency health situations, such as those requiring the assistance of AED/CPR certified public safety officers.
What types of safety trainings are offered to faculty, staff, and students?
A variety of safety drills are conducted at NSU, including fire drills, lockdown drills, evacuation drills, and active shooter drills. The Public Safety Office provides new-student and employee orientation training, refresher training, residential life training, and online instructional videos on topics related to emergency preparedness and response, safety and security, and crime prevention. Table-top exercises are held several times a year, the most recent of which focused on active shooter drills. Several additional training programs are offered in collaboration with the Public Safety Office, the Division of Student Affairs, the Office of Human Resources, and the Office of Residential Life and Housing. In accordance with Title IX, NSU provides educational awareness and prevention training related to dating violence, domestic violence, sexual assault, and stalking. Mandatory sexual harassment training is provided to all NSU faculty and staff and consists of a series of online training modules. Campus Clarity is an online educational training program that is prevention-oriented and mandatory for all students and employees, starting in 2017. Topics covered during this training include harmful attitudes and behavior, alcohol and drug use, sexual assault, and bystander intervention options.

What are some of the future plans for safety procedures at NSU?
As campus safety procedures continue to evolve, NSU aims to remain at the forefront of campus safety initiatives. Future plans at NSU include keeping pace with the growth of the university, investing in human resources, updating current systems, advancing alongside changes in technology, and continuing to implement and to engage in operations that promote the safety and security of the entire university.

Vehicle Safety Tips from Public Safety

* Make sure to close all windows
* Be sure to lock all doors
* Never leave your keys in the vehicle
* Never hide a second set of keys anywhere on your car
* Never leave your car’s engine running
* Park in well-lit areas
* Activate any anti-theft devices you have
* Push or recline your passenger seat forward. This will help you determine if someone has entered your vehicle.
* Have your keys ready and in your hand as you approach your vehicle
* Check with established companies to decide which level of security is right for you.

Campus Safety Resources at NSU

- Office of Public Safety: [Click here.](#)
- Campus Safety Handbook: [Click here.](#)
- Comprehensive Emergency Management Plans: [Click here.](#)
- Emergency Training Video: [Click here.](#)
SVP Spotlights

Dr. Douglas Flemons and Dr. Scott Poland are leading contributors to the area of suicide and violence awareness and prevention. Here are some recent updates of SVP’s recent work.

- In January, Dr. Hillary Becker, along with Dr. Courtney Cantrell, conducted a suicide prevention training at the Interdisciplinary Collaborative Divorce Training at Nova Southeastern University.
- In January, Dr. Hillary Becker provided a suicide awareness, prevention, and assessment training at for the Dade Association of School Psychologists (DASP) at Barry University.
- Dr. Douglas Flemons, along with his wife and colleague Dr. Shelley Green, just completed the manuscript for the second edition of their book, Quickies: The Handbook of Brief Sex Therapy. The book includes 15 chapters, eight of which are new. All but two chapters were substantially updated from their earlier, Revised Edition, published in 2007. Drs. Flemons and Green’s chapter, which was completely rewritten, elucidates their brief, relational approach to sex therapy. The publisher, W. W. Norton, will be realizing Quickies in late 2017.
- In February, Dr. Hillary Becker and Dr. Nicole Jimenez conducted a three-hour suicide awareness, prevention, and assessment training for first year clinical psychology students at Nova Southeastern University.
- Dr. Scott Poland continues to work with the Academy 20 schools in Colorado Springs in the aftermath of youth suicides and on March 1st presented a webinar with his colleague Richard Lieberman that was viewed by more than 700 parents. The webinar provided information about the warning signs of depression and suicidal behavioral and provided parents with the opportunity to ask questions about mental health and stress for teens.
- Dr. Scott Poland is also working with the organization Youth Life in Colorado to promote suicide prevention and to increase the connectedness of teens with trusted adults.

SVP Team Members:
Dr. Douglas Flemons, Dr. Scott Poland, Dr. Hillary Becker, Carlye Conte, and Jacklyn Stellway
Virginia Tech: 10 Years Later

By Carlye Conte, M.S.

The 2007 massacre at Virginia Tech (VT) remains the deadliest school shooting in U.S. history. This tragedy resulted in a total of 32 deaths and 17 non-fatal injuries of students and faculty as well as the death of the perpetrator, Seung-Hui Cho, by suicide (Langman, 2015). This incident sparked national dialogue surrounding campus safety and led to the organization of various state, government, and university task forces to review safety procedures across institutions of higher education. The ten-year anniversary of the VT massacre serves as a reminder of the profound impact this event had on procedures and initiatives related to campus safety, emergency preparedness, crisis response, and threat assessment as well as the availability of mental health services, not only at VT but also at colleges and universities across the nation (Deisinger & Simons, 2016).

Lessons Learned: The Virginia Tech Review Panel (2007)

The Virginia Tech Review Panel (VTRP) was appointed by Governor Timothy Kaine in 2007 and consisted of experts from a variety of fields, including law enforcement, the legal system, mental health, public policy, emergency care, and higher education. These professionals were tasked with analyzing the events that led up to this tragedy, identifying the lessons learned, and proposing recommendations for the future.

Major findings of the VTRP included:

* Cho had a well-documented history of mental health problems as well as disruptive and threatening behavior that concerned both students and faculty. He was ordered to attend outpatient treatment in 2005 after an evaluation determined he was mentally ill and an imminent danger to himself. However, his noncompliance with this order went unnoticed due to insufficient oversight and a lack of communication and information sharing across departments. A failure to intervene prior to the attack was further complicated by flawed mental health laws, confusion surrounding privacy laws such as Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act of 1996 (HIPAA), inadequate mental health services and resources, and a lack of authority for concerned individuals to intervene.

* Cho’s ability to purchase two guns in violation of federal law stemmed from ambiguity in Virginia legislature and a failure to submit Cho’s name to the federal database following his involuntary commitment.

* Further, the absence of stringent laws and policies regarding gun ownership on campus has created uncertainty for colleges regarding what they can do to ban guns on campus under existing state laws.

* VT’s Emergency Response Plan (ERP) was deficient, out of date, included an ineffectual emergency alert notification protocol, and did not include provisions for a campus shooting situation, a threat assessment team, or a central emergency operations center. During the event, the VT Police Department failed to request, and university administrators failed to issue, a campus-wide alert notification even though nearly two hours passed between the initial killing of two students at the residence hall and the subsequent killing of 30 students and faculty at Norris Hall.

* Factors that impeded the execution of a coordinated and effective response during and after the tragedy included insufficient communication across agencies, a lack of leadership and service provider role designation, ineffective deployment of trained professionals to provide crisis intervention and (continued on page 6)
Based on these findings, the VTRP recommended that all institutions of higher education implement a threat assessment team, create procedures for reporting disturbing student behavior, conducting annual emergency trainings, issuing immediate notifications related to safety and security, creating a unified and centralized emergency command post, promoting the internal and external sharing of student information, linking troubled students to appropriate mental health services, and improving crisis and recovery response plans.

Legislative Responses

The tragedy at VT drew attention to the various weaknesses of the mental health system in VA and led to prompt legislative changes to improve the emergency mental health evaluation process, to modify the involuntary commitment process, to create stricter procedures for outpatient treatment, and to increase funding for mental health services within the community (Sood & Cohen, 2014). Governor Kaine issued an executive order mandating that the names of individuals who have been found dangerous as a result of mental illness and involuntarily committed to an inpatient or outpatient facility be submitted to federal law enforcement authorities and prohibited from purchasing a gun (2007). Additional legislative action in VA included requiring institutes of higher education to establish violence prevention committees, crisis intervention teams, emergency notification systems, and written crisis and emergency policies, plans, and procedures. In 2013, VA became the first state to require the implementation of threat assessment teams across all levels of public education (Deisinger & Simons, 2016).

This event also led to legislative changes at the federal level. The National Instant Criminal Background Check System (NICS) Improvement Amendment Act of 2007 strengthened state reporting of mental illness to the federal database used for background checks. The Higher Education Opportunity Act of 2008 amended the Jeanne Clery Act to include the requirement that universities provide immediate notification to the campus community upon confirmation of a significant emergency or threat, publicize all emergency response and evacuation plans, and test these plans on an annual basis. FERPA was amended in 2009 to include school safety regulations that granted school administrators broader discretion in disclosing student information and greater flexibility in sharing this information with other parties, including parents, during a health or safety emergency situation (Rinehart-Thompson, 2009).

National Campus Safety Initiatives

In the aftermath of the VT shooting, several studies were conducted to determine the impact this event had on safety practices across colleges and universities. The Campus Safety Post-Virginia Tech Study (Hattersly, 2008) found that 64% of institutional respondents reported that greater attention

“The shooting revealed glaring weaknesses in campus security protocols at colleges and universities, in mental health standards, and in the system for background checks before gun purchases.”

- Tim Kaine (Time, 2016)

“Some mistaken politicians believe (or at least proclaim) that more guns distributed more widely will result in greater safety in all public spaces, including campuses. They couldn’t be more wrong. Restricting access to lethal weapons is the only sane way to limit violence against others and violence directed toward the self (i.e., suicide). This, of course, isn’t enough. But it establishes a context, a commitment, for safety by way of watching out and reaching out. NSU, under the leadership of Dr. Hanbury, and supported by our excellent Public Safety administrators and officers, have embraced an integrated, human-first approach to ensuring the safety of our campus community. The key to safety is the wide-spread distribution of caring vigilance, not the wide-spread arming of well-meaning vigilantes.”

- Dr. Douglas Flemons

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Campus safety requires a commitment from all students and staff and it’s important that everyone be alert and speak up when they see or hear something that is potentially dangerous.”

-Dr. Scott Poland

had been paid to campus safety, 88% reported that emergency plans had been revised or were in the process of being revised, 73% had purchased or planned to purchase mass notification systems, and 76% reported greater information sharing. Improvements to the quality and availability of campus mental health services was reported by 60% and 57%, respectively. A study by the Midwestern Higher Education Compact found that 87% of institutions had conducted a comprehensive review of policies, procedures, and safety systems and that as a result of these reviews, 90% had implemented safety and security changes, such as improving emergency notification systems, creating protocols for identifying and reporting threatening student behavior, allocating resources and staff to improve school safety, enhancing security systems and equipment, screening applicants for admission and employment, and implementing policies related to student mental health (Rasmussen & Johnson, 2008). The National Campus Safety and Security Project Survey (NACUBA, 2009) found that nearly all public and private four-year colleges and universities offered mental health services, two-thirds had behavioral assessment teams, 60% had a threat assessment team, and 60% had post-emergency counseling and support protocols. Various organizations and task forces, such as the International Association of Campus Law Enforcement Administrators (IACLEA, 2008) and Florida’s Gubernatorial Task Force for University Campus Safety (2007), developed prevention, intervention, and response recommendations to improve campus safety. The U.S. Department of Education published numerous resources including the Action Guide for Emergency Management at Institutions of Higher Education (2010), the Guide for Developing High Quality Emergency Operations Plans for Institutions of Higher Education (2013), and the Handbook for Campus Safety and Security Reporting (2016).

Spotlight on VT Campus Safety Initiatives

In the years following the 2007 tragedy, VT has revitalized its campus safety procedures, remained dedicated to its mission of promoting university resilience, departmental readiness, and individual preparedness, and implemented a variety of innovative practices related to emergency planning, mitigation, response, and recovery. In 2014, VT became the first university to receive accreditation from the Emergency Management Accreditation Program (VT News). In order to receive this accreditation, VT had to demonstrate significant dedication to safety and security and to meet 64 national standards related to emergency planning and procedures, prevention, risk assessment, training, and communications and warnings.

Highlights of VT campus safety resources and initiatives include:

* VT emergency alert notification system
* Multidisciplinary threat assessment team
* Building Emergency Coordinator Program
* Emergency management and preparedness plans, guides, toolkits, trainings and activities
* Suicide and violence prevention resources and trainings
* Campus and community mental health services
* Faculty guidelines for responding to disruptive behavior and non-emergency student referrals
* Student safety organizations (e.g. Emergency Management Student Advisory Board, Hokies United)

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For more information, visit: [emergency.vt.edu/](http://emergency.vt.edu/)

**Virginia Tech: Day of Remembrance**

The Virginia Tech’s *We Remember* website was created in honor and remembrance of the 32 victims who lost their lives in 2007. The website includes biographies, pictures of the campus memorial, resources for recovery and support, and a schedule of Remembrance Day events. The 2017 Day of Remembrance will include a performance, community picnic, 3.2-mile run, first responder appreciation, wreath laying and moment of silence, university commemoration, and candle light vigil. For more information: [click here](http://emergency.vt.edu/).

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The Virginia Tech Victims (VTV) Family Outreach Foundation was created by family members of victims and survivors to raise awareness and to advocate for campus safety, to provide support for victims of campus violence, and to deploy crisis response teams in the aftermath of a tragedy. The VTV foundation advocated for amendments to the Clery Act (2008) and passage of the Campus SaVE Act (2013), helped create the National Center for Campus Public Safety (2013), co-sponsored the Violence Prevention Conference (2015), and has funded initiatives to reduce the stigma of mental illness.

The 32 National Campus Safety Initiative (32 NCSI) was created by the VTV Foundation in 2015 and is a free online campus safety assessment tool based on best practices in the following areas:

1. Alcohol/drug use
2. Campus safety
3. Emergency management
4. Hazing
5. Mental health
6. Missing students
7. Physical security
8. Sexual violence
9. Threat assessment

The LiveSafe app was co-founded by Kristina Anderson, a survivor of the VT tragedy who has been dedicated to using technology to promote campus safety. This app allows students to access emergency alert notifications, response procedures, and a map of campus safety resources immediately. Students can submit crime-related tips to police and anonymously send crime-related audio, videos, or images tagged with their GPS location. The SafeWalk feature enables students to request a campus security escort or to use the peer to peer virtual escort service by sharing their location with contacts.

www.vtvfamilyfoundation.org/  www.32ncsi.org  www.livesafemobile.com
Book Review: *A Mother’s Reckoning, living in the aftermath of tragedy* By Sue Klebold

By Jacklyn Stellway, M.S.

In a powerful memoir, Sue Klebold told the story of her experience as the mother of a mass murder-suicide shooter. As Ms. and Mr. Klebold were blamed by many for raising a son who acted in catastrophic violence killed many people, Ms. Klebold decided to tell her story. Her book details her confusion and heartbreak through her attempts to find answers to why and how her son did what he did. She came to realize that there is not one specific answer. However, the information she learned in searching for the answers to her questions may help others, and, for that reason, she wrote *A Mother’s Reckoning*.

Sue Klebold is the mother of Dylan Klebold, one of the two shooters in the Columbine High School massacre that occurred in April, 1999. Much of *A Mother’s Reckoning* focuses on Ms. Klebold’s love for her son and her confusion as to how he was led to murder-suicide. She spent much of the book recognizing the pain Dylan caused for many families as well as for the nation and world. Throughout this book, the reader is touched by Ms. Klebold’s sincere expression of compassion and sympathy to those affected by Dylan’s actions. She explains that she continues her practice to not “minimize the magnitude of what Dylan did” and shared that she “will never, ever forget how [she] would feel if Dylan was one of the innocent people slaughtered or maimed that day” (p. 127). She goes on to say, “My intention here is to honor the precious children and the beloved teacher who were” slain (p. 127). She offered kind and compassionate words to the families who lost loved ones due to her son’s actions. She wrote letters to each family of the 13 killed despite the fact that she was not allowed to reach out to them in person due to law suits and the like.

Ms. Klebold voiced that the heart of her book is a discussion of the global issues surrounding suicide and violence. Another main point she conveyed throughout the book is that the “monster” that many referred to Dylan and Eric as was not in fact as obvious as critics say. At times, it can feel impossible to identify an individual at risk for suicidal or homicidal behaviors, and it is the job of family, friends, teachers, and the community to identify at-risk teens and to reach out to help them.

As the tragedy of the Columbine massacre slowly passed, and the facts of the event and its proceedings came to light, Ms. Klebold lost not only the son she thought she had raised, but also the person he had become. In attempts to understand how Dylan reached the point of suicide and murder, Ms. Klebold uncovered his diaries, videos he made with Eric, and information from his peers. All this information shed light on the depressed and mentally unstable state he had come to live in for years before the tragedy. Ms. Klebold offered statistics, interviews, and the most recent literature on adolescent mental illness, school violence, media portrayals of violence, and recommendations from experts on how communities and nations can best cope with such tragedies.

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As Klebold writes, it would be great if disturbed teens looked like the ones in the pamphlets for mental health services, staring out the window with sad eyes—but they don’t. She discusses how to identify disturbed teens from common characteristics such as moodiness, irritability, and pushing loved ones away. In her descriptions of Dylan and his behaviors during the months leading up to the massacre, she discloses that she and Mr. Klebold “attached value judgement” rather than wondering if something was wrong and reaching out to Dylan even when he assured his parents that he was alright. She affirms that while there is likely not one single answer as to why this tragedy occurred for Dylan, the one thing that provides the most support for her understanding is that Dylan was experiencing depression or another form of a “brain health crisis. These traits may be signals that a teen needs extra help and special attention from adults.

In discussing portrayals of such violence in the media, Ms. Klebold thoroughly researched and talked with professionals. “If these images and details accelerate and inspire violence, then they should not be endlessly repeated,” she explains, regarding the issues in poor, excessive, media coverage (p. 140). In reference to the Werther effect, a phenomenon in which publicized suicide becomes a trigger for additional suicides, Ms. Klebold points out that when the media acknowledges this effect it “unquestionably saved lives” (p. 139). Ms. and Mr. Klebold were persecuted when they refused to share video footage of the Columbine shooters in their preparation for the massacre. Ms. Klebold states that their exact fears were confirmed when Columbine became an inspiration for many, many more incidents of school violence. An investigation by ABC News found that “At least 17 attacks and another 36 alleged plots or serious threats against schools since the assault on Columbine High School can be tied to that very massacre in 1999” (ABC News). The “Curse of Columbine” became a reference in documents, audio recordings, and videos that ABC studied during their investigation.

Guidelines have been offered for how the media should go about reporting news on tragic events such as school violence. Specific recommendations include, “that media outlets avoid repetitive, glamorizing, or sensational coverage, and should not offer simplistic explanations for suicide. Methods should not be graphically discussed. Final notes should not be reprinted. Photographs of the location of the death, memorial sites, and of grieving family members may be inflammatory, and should be avoided. By agreeing to report on suicides not as if they were high-profile crimes, but as part of a massive public health problem, members of major media outlets have saved lives.” (p. 139). Additionally, Klebold shares about the many ways in which tragedies such as Columbine, Sandy Hook, and Virginia Tech can be covered more responsibly. One of the biggest improvements Klebold offers is simply refraining from jumping to conclusions, specifically in regards to oversimplified root causes. “School shooters don’t kill people ‘because’ of violent video games or techno music, and people don’t die by suicide ‘because’ they’ve lost a job or been dumped by a girlfriend,” rather, the “answer” is much more complicated (p. 140). Klebold goes on to explain that her hope is that the recommendations she offers are not seen as pro-censorship or as a threat to free speech, but as a call for ethical reporting.

In debunking myths about violence and our culture’s “automatic conflation of violence and ‘craziness’,” Klebold interviewed Dr. Jeffrey Swanson (who studies mental illness and violence), who confirmed that “serious mental illness by itself is a risk factor for violence in just 4% of incidences. It is only when mental illness appears in combination with other risk factors, primarily drug and alcohol abuse, that the numbers increase...Most people living with mood disorders are not dangers at all” (p. 152).

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Ms. Klebold offers many suggestions, professional recommendations, and resources for preventing similar tragedies, including identifying and intervening with potentially at-risk teens as well as how schools, families, and communities can respond in the aftermath. An additional resource can be accessed from the Bureau of Justice Assistance. They have recently published a Guide for Preventing and Responding to School Violence, 2nd Edition which can be accessed [here](#). This document provides information on responding after a crisis, broken down to the roles of school administrators, teachers, staff, school counselors, psychologists, social workers, parents/guardians, the community, and law enforcement. Additionally, it provides information on working with the media surrounding a tragedy, including their rights and obligations, recommendations, and planning for coverage.

Ms. Klebold also offers a reframe of the perspective and personal responses that we have to tragedies like school massacres. She explains that the first question people ask is ‘why?’ But, she elaborates, “Asking why only makes us feel hopeless…. Perhaps this is the wrong question. I have come to believe the better question is ‘how?’ Trying to explain why something happens is how we end up latching onto simple answers without actionable solutions. …Asking ‘how?’ instead of ‘why?’ allows us to frame the decent into self-destructive behavior as the process that it is… and [it] points the way forward and shows us what we must do” (p. 276).

**Tower, a Documentary Review**

By Somya Yeturo, M.A. & Jacklyn Stellway, M.S.

Deeply personal, scary, tragic, and courageous stories of the victims of a transformative 1966 mass shooting are depicted in the recently released documentary *Tower*, directed by Keith Maitland. The powerful, gripping, and dramatic reconstruction of the sniper shootings at the University of Texas at Austin are woven together through the creative and unique use of primarily rotoscopic animation, with archival footage and present-day interviews of survivors.

*Tower* is an aesthetically vivid documentary that recounts the mass shooting that took place on August 1st, 1966. The film focuses on the experiences of the victims, bystanders, and law enforcement personnel involved in the tragedy. This incident, which lasted 96 minutes, not only affected the families of those living in Austin, Texas but also Americans across the nation.

As described in the film, the morning began as any other with the Texas heat heavy on the August summer day. The shooter, Charles Whitman, took the elevator to the top of the tower on the University of Texas, Austin campus shortly before noon. He shot at random, circling around the tower to all viewpoints. Sixteen people were killed and 33 were injured in this sniper attack. The film engrossed its audience with key individuals who, despite the horror and confusion, switched into fight mode and helped those who had been shot and those who were stuck in open areas. The story progresses with animated scenes and descriptions from the victims. One of the first victims, Claire Wilson, was pregnant at the time of the shooting. She recounted that she was walking with her boyfriend, Tom Eckman, who

*(continued on page 12)*
was shot and died next to her. She laid on the hot concrete for an hour before two brave young men, Artly Snuff and James Love, ran to carry her to safety. A young boy, Aleck Hernandez, was another victim who was shot and fell from his bicycle while on his paper route. The stories of two police officers, Ramiro Martinez and Houston McCoy, are recounted as they made their way to the tower and eventually took down the sniper. Allen Crum, the University bookstore manager, assisted the officers by attending to Aleck and by providing them with access to the shooter.

Maitland captured the pain, fear, and strength of the Austin community members. Selfless acts of bravery were retold of these individuals who took matters into their own hands to help strangers in need. A young woman, Rita Starpattern, risked her own life by running to Claire and lying next to Claire to talk her so that Claire would remain conscious.

It is clear from the words of the survivors that the trauma and sadness of that day remains. In an NPR interview with Claire Wilson about the documentary, she explained that this tragedy was never discussed after the fact. It became a forbidden topic in the community, which likely did not allow the victims and their families to process their experiences fully. In the interview, Wilson said, “I laid there the 90..., but since I was the first one outside that was shot, I didn’t know what was happening. I didn’t see all that. I didn’t read anything. I couldn’t talk to anyone who had been there.” She goes on to explain how rewarding and fulfilling it has been to be a part of the documentary and to interact with other victims; including Snuff, Love, and Starpattern; who all played a part in saving her life. In describing the film, Wilson said, “every single time [I see the film], I learn something new about [that day], and it's really fascinating. I don't feel any kind of trauma” (NPR interview).

Many of the victims and survivors shared their feelings of guilt for not doing more. Perhaps the most touching piece was Wilson saying she forgives the sniper for the horrific damage he committed, because he was likely suffering himself. Two very important points are drawn from their accounts. One is the guilt experienced by those who were frozen by their fear in the moment and the other is of the strength that took over these individuals in the face of danger. In a brief clip of Walter Cronkite, a broadcast journalist, he said, “It seems likely that [the shooter]’s crime was society’s crime.”

A powerful statement calling for a deeper perspective of the role of our society in influencing the outcome of people who act with mass violence and murder. Although it was great to hear Cronkite’s comments regarding societal issues, these points were rushed and not elaborated in a way that supports spreading this important information and understanding. The film could have provided clear points about mental health, guns, coping with this type of tragedy, and efforts for violence prevention. The lack of support and limited processing that occurred after the attack was typical of the time in which it occurred. However, most similar events receive more support in the present day.

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In line with efforts to follow guidelines on best practices for media coverage of horrible violence, the sniper’s name is not mentioned until the end of the film. The film focuses on the victims of the violence, their experiences, and their stories. The NPR interview provided more details, including Wilson’s seven surgeries post-shooting and how the survivors, with support from the film makers, erected a monument at the UT campus for the victims, initiated after having been brought together for the making of the documentary.

The film only briefly touched upon efforts of mental health services offered, security measures, and prevention plans. A brief look into the shooter’s past reveals experiences of abuse, trauma, and battles with mental illness. Since 1966, poor mental health has been a recurrent theme in all perpetuators of mass shootings, and this issue has only recently received more attention. A 2016 article by Bushman and colleagues addressed some common risk and protective factors associated with the development of extreme violence (e.g., mass shootings) in individuals with mental illness. The article also offers suggestions for prevention and intervention methods targeting youth who show signs of aggression and violence. In the event that shootings do occur, mental health services need to be readily available to guide survivors in their processing of the trauma. An important take-away message is that rampage shooters generally share a common characteristic of being at risk for murder suicide. Identifying the interaction between hostile and suicidal ideation in youth may be a beneficial marker for rehabilitation interventions.

Additionally, the film failed to provide information on how rare shootings on college campuses are. College campuses are, in fact, very safe environments. College campuses employ public safety officers, offer counseling and support services, and have others who are trained in identifying and responding to people who may be of danger to themselves or to others.

**Update: Student Contributions**

Nova Students for the Prevention, Intervention, and Response to Emergencies (NSPIRE) is a student group within the NSU College of Psychology, in which graduate students contribute to research in suicidology and crisis response, hold community fundraisers for suicide and violence prevention efforts, and raise awareness in the community. This spring NSPIRE held a fundraiser for a local crisis support service, Broward 2-1-1, “the only 24/7 comprehensive agency in the county that provides individuals and families with all of the critical connections to health and human service agencies and programs they need in just one call.” Additionally, NSPIRE members will be presenting at the American Association of Suicidology (AAS) 2017 Annual Conference in Phoenix, AZ. The following projects were accepted and will be presented in April by the six NSPIRE psychology doctoral students:

- **Status of Suicide Prevention Legislation in K-12 Schools: existing requirements, continued barriers to implementation, and suggestions for improved efficacy in training school personnel** by Jacklyn Stellway, M.S. & Sarah Mitchell, B.S.
- **Clinical interventions with suicidal clients: Strategies to reduce suicide attempts with clients in a therapeutic setting** by Jacklyn Stellway, M.S.
- **Medical Students as an At-Risk Population for Suicide Ideation: A Review of Current Literature and Suggestions for Preventative Measures** by Samantha Weisman, B.A., B.S., and Jonathan Savini
- **Contributing Factors of Suicide in High Performance Schools** by Stephanie Wietrzychowski, B.A. and Vidhi Thakkar, B.A.
- **Middle School Programs for Suicide Prevention** by Vidhi Thakkar, B.A. & Stephanie Wietrzychowski, B.A.
Addressing School Violence: Everyone Plays a Part

By Debbie Manigat, M.S. & Hillary Becker, Psy.D.

Violence in schools is a serious issue at all levels of education as violence can occur in school at the primary, secondary, and post-secondary levels. While school shootings are largely publicized and traumatic, the risk of such an event is much lower than is believed by the general population. However, it is important to note that, overall, school violence generally consists of “physical attacks, fights (without a weapon), theft, larceny, or vandalism” (Juvonen, 2001). In other words, the impact of school shootings is generally greater than less severe violence on school campuses, but the risk of lesser violent crimes is greater. There are numerous steps schools take to ensure the safety of their students, including utilizing metal detectors to limit access to weapons on campus, employing security guards, enforcing “rules and regulations regarding student conduct and dress,” identifying students at risk early, incorporating “anti-bullying instructional programs, and counseling and mediation” (Juvonen, 2001).

The Center for Disease Control and Prevention (CDC) notes several risk factors that contribute to school violence. These risk factors include “prior history of violence; drug, alcohol, or tobacco use; association with delinquent peers; poor family functioning; poor grades in school; and poverty in the community” (CDC, 2016). The CDC states that school violence can be prevented though a number of avenues, including “universal, school-based prevention programs” that increase awareness of the issue and teach students in all grades skills to better manage their emotions (CDC, 2016). Additionally, they state that programs that target parents and families can reduce the risk of violence by educating parents about effective communication and child development. Lastly, they point to outreach programs that target and mediate youth violence. Thus, the CDC affirms that everyone has an important role in stopping youth violence before it starts.

Yet, reports on school violence in South Florida continue to make headlines. From headlines such as “17-year-old arrested after bringing a loaded gun to his former high school” (Miami Herald, October 26, 2016) to “Social media threat that leads to heightened security at a high school in Boca Raton” (Sun-Sentinel, February 22, 2017). Today, school and youth violence continue to cause alarm. The term “youth violence” is used to describe “when youth between the ages of 10 and 24 years intentionally use physical force or power to threaten or harm other people” (CDC, 2016). It refers to “harmful behaviors that can start early and [that can] continue into young adulthood” (CDC, 2015).

It is important to be aware and to be vigilant against school violence because it touches the lives of many of our youth. Children and adolescents can be a victim or a perpetrator of violence. Additionally, youth may not be the victim or the perpetrator, but they can witness violence perpetrated against peers. The negative (continued on page 15)
The impact of youth violence extends beyond young victims, as it can cause harm to the physical, mental, and economic health of all community residents.

According to the CDC, some violent acts (e.g., bullying, slapping, or hitting) can in fact inflict more emotional and psychological damage than observable, physical harm. Others violent acts, such as “robbery and assault (with or without weapons)” can result in serious injury and, if severe enough, can result in death (CDC, March 2016).

Therefore, the ultimate youth violence prevention goal for educational institutions and society in general, should be to stop youth violence from the outset rather than minimizing the harm after incidents of violence. Broward County Schools is leading the way locally by creating and implementing several prevention strategies.

One organization that is committed to school and youth violence prevention is the Choose Peace/Stop Violence initiative, a partnership between United Way of Broward County, Broward County Public Schools, and Children’s Services Council of Broward County. Choose Peace/Stop Violence states that the mission of their organization is “to educate, engage, inspire, and empower youth to take action and bring about positive change for the purpose of preventing youth crime and violence, and create safe, healthy and thriving environments for children and families.” Choose Peace/Stop Violence has joined forces with Rachel’s Challenge to bring the universal message of kindness and compassion to address bullying, student isolation, teen suicide, discrimination and school violence.

Rachel’s Challenge, a bullying and violence abatement program, is based on the life and writing of Rachel Joy Scott who was the first victim of the Columbine school shootings in 1999. Rachel’s inspiring story provides a simple yet powerful example to students of how small acts of kindness and acceptance motivates us to consider our relationships with the people we come in contact with daily. The organization provides presentations, student trainings, and professional development.

The Suicide and Violence Prevention Center at NSU is also adding to the change by working closely with other NSU schools/centers to prevent violence both within our student body and amongst our staff and faculty.

Palm Beach County is also striving to address youth and school violence. The Palm Beach County School Board in partnership with Career Source Palm Beach County, Children’s Services Council of Palm Beach County, Palm Beach County Youth Services Division, and many other community partners have created the Birth to 22 initiative. The Birth to 22 organization takes a “whole child approach” to their efforts. They focus on “six domains of child and youth development: physical health, behavioral health, academic readiness, social/emotional well-being, career readiness, and connection and contribution to community and society.” The mission of Birth to 22 is “to support the healthy growth, development and education of children and youth” (continued on page 16)
from conception through young adulthood. These efforts aim to ensure that youth will graduate from secondary school and ultimately lead successful lives.

The Mental Health Association of Palm Beach County (MHAPBC) also recognizes this adverse trend in school violence and hopes to bring together school officials, community leaders, and counselors to discuss these challenges as well as potential solutions at their upcoming conference entitled, “In an Age of Violence: Help Children and Families Cope”. The two-day conference will take place on April 20 & 21, 2017 at the Airport Hilton in West Palm Beach, FL.

One of the presenters that will lead the session on “Violence and Children: The Effects on a Community” at the MHAPBC conference is Mathew Jean, M.S., LMFT (Nova Southeastern MFT Graduate). At the February 2017 “Bowen and Business: Lunch & Learn” by the Broward Association of Marriage and Family Therapy at Nova Southeastern University, Mr. Jean took some time after the event to share his work on preventing school and racial violence.

Mr. Jean is the Founder of The Go to Therapists nonprofit organization, an organization that he created in response to community, school, and racial violence. The Go to Therapists mission is to change the relationship that the black community has with mental health. Through this organization, Mr. Jean created a cultural space called “The Vent”, which was an online forum for people to share frustrations and fears about violence against marginalized communities. Mr. Jean shares, “Our organizations mission is to educate this community through partnerships with schools and agencies, advocate to eliminate stigma, and focus on access to local black professionals in the mental health field.”

All in all, schools and social service community leaders in South Florida have taken steps that will make real and lasting differences in the lives of youth and that will to continue to take steps to reduce the prevalence and sequelae of school violence. The CDC’s Preventing Youth Violence: Opportunities for Action and its companion guide, Taking Action to Prevent Youth Violence, also provide information and action steps to help all community members like you and me to be part of the solution. The CDC’s charge is that community leaders and members; public health professionals, families, adults who work with youth; and young people can take steps today to stop youth violence before it starts. Below is how you can get involved:

- Community leaders and members can take steps, such as enhancing the skills of young people and using evidence-based prevention strategies.
- Public health professionals can strengthen their community’s ability to understand and prevent youth violence through sharing information, using data, and continuing research.
- Families and other adults who work with youth can be nonviolent role models, closely monitor youth’s activities, and seek out help when needed.
- Youth can make safe choices and help others be violence free.

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**AFSP 2017 Florida State Capitol Day**
**April 5-6, 2017**

Join the American Foundation for Suicide Prevention (AFSP) in Tallahassee, FL for an exciting day of suicide prevention advocacy. Meet with your state legislators to let them know why suicide prevention is important to you, advocate for public policies that improve mental health and saves lives, and deliver the message that suicide prevention is possible.

For more information, visit: [https://afsp.org/event/florida-day-capitol/](https://afsp.org/event/florida-day-capitol/)
Nova Southeastern University’s Counselor in Residence

Leonette Lee Provides on-call coverage to respond to emergency situations involving mental health issues, crisis situations, and emotional concerns of NSU’s residential population.

Residential students can schedule an appointment with Leonette by phone, (954) 262-8911, or by email, counselorinresidence@nova.edu.

Leonette also holds weekly office hours at Goodwin Residence Hall, Room 209B.

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!

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Graduate students looking to write articles on the topics of suicide and violence prevention are encouraged to contact us.

Email Dr. Hillary Becker at hb361@nova.edu

SVP Presentations

The Office of Suicide and Violence Prevention has provided over 300 presentations to various departments at NSU.

SVP has presented to more than 6,100 NSU faculty, staff, and students. Presentation topics include suicide and violence training, stress management, and test taking anxiety. Use the link below to request a presentation!

https://www.nova.edu/webforms/suicideprevention/presentation-requests/index.html
References for Article Virginia Tech: 10 Years Later


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