

The Role [and Toll] of Educators' Involvement in Suicide Prevention, Treatment and Postvention

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We hope you will be able to . . .

1. Explain an historical perspective on educators' involvement in suicide-related work.
2. Articulate what research has uncovered about educators' knowledge, roles, attitudes, and beliefs related to suicidal youth.
3. Identify preferred approaches for professional development, continuing education, and collaboration in mental health-education partnerships.



1. Once overlooked in the delivery of suicide-related services, K-12 educators now assume a more prominent role.

The Shift in Involvement: K-12 Educators

Then

- Teachers often excluded from professional development
- Referred suicidal student to someone else
- SAP teams focused primarily on drug and alcohol issues
- Rarely included in interventions
- Rarely included in research
- Role in treatment limited to a few teacher behavior checklists

Now

- Many US states (24) require suicide training for teachers
- Expected to play a role in prevention, which is sometimes linked to school safety
- May be a petitioner in a 302 process, work on a SAP team that includes mental health concerns
- Now included in research, some of which focuses on them specifically
- Role in treatment may still be limited due to system and insurance constraints

1986

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teacher suicide prevention

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2017

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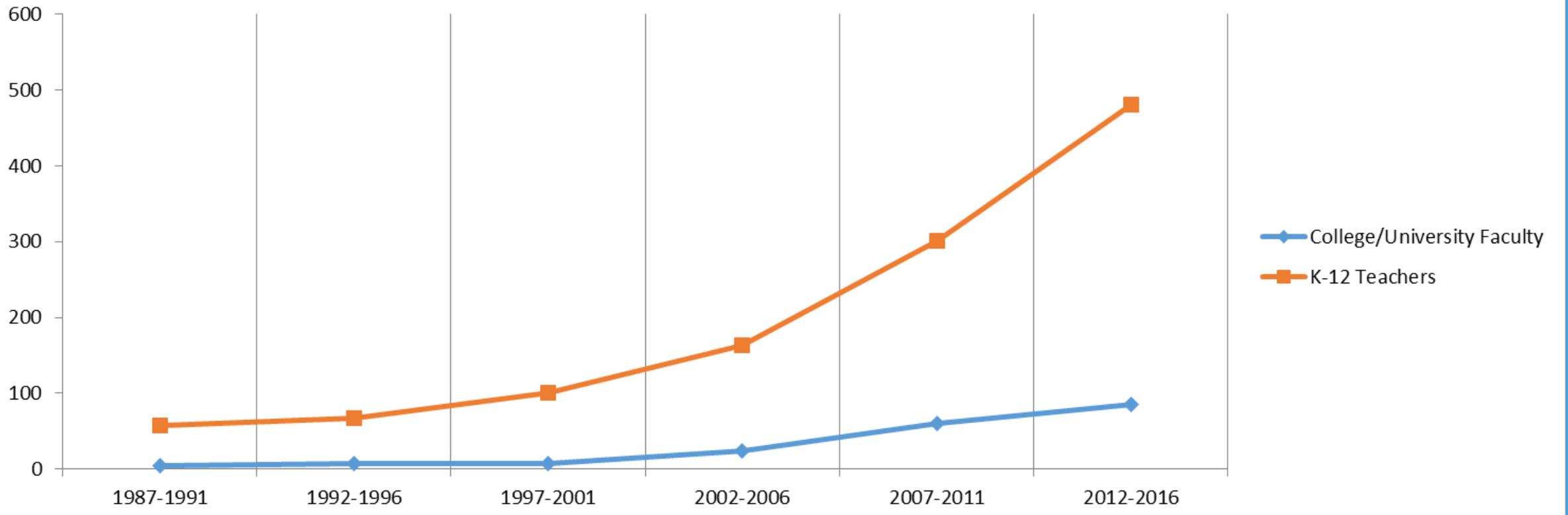
teacher suicide prevention

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Number of Peer-Reviewed Journals on Suicide Prevention, Broken Down into Five-Year Intervals by Educational Audience



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Today's teachers *do* encounter suicidal students.

Study	Participants	Encounters
Ross, Kolves, De Leo (2016)	229 Queensland, AU teachers, primary and secondary level	33.3 % exposed to a student suicide
Freedenthal & Breslin (2010)	120 US high school teachers	(58.8%) reported having a conversation with a student who disclosed suicidal ideation or attempt
Kolves, Ross, Hawgood, Spence, & De Leo (2017).	299 teachers in Australia	35.9% had been exposed to at least one student's suicide.



2. The role of teachers

How does research describe their involvement?

How Do Teachers View Their Involvement?

- Teachers feel a sense of responsibility to engage in prevention. (2, 4)
 - Teachers believe they can help children with their feelings and behavior but lack adequate training. (3)
 - Satisfaction with one's school predicts a positive belief about one's ability to help students with mental health problems. (3)
 - Teachers' psychological well-being contributes to their belief that they can help. (3)
 - Experience does not seem to influence self-efficacy.(4)
1. Freedenthal, S., & Breslin, L. (2010). High school teachers' experiences with suicidal students: A descriptive study. *Journal of Loss and Trauma, 15*(2), 83-92.
 2. Gould, M. S., Greenberg, T. E. D., Velting, D. M., & Shaffer, D. (2003). Youth suicide risk and preventive interventions: a review of the past 10 years. *Journal of the American Academy of Child & Adolescent Psychiatry, 42*(4), 386-405.
 3. Sisask, M., Värnik, P., Värnik, A., Apter, A., Balazs, J., Balint, M., ... & Feldman, D. (2014). Teacher satisfaction with school and psychological well-being affects their readiness to help children with mental health problems. *Health Education Journal, 73*(4), 382-393.
 4. Hatton, V., Heath, M. A., Gibb, G. S., Coyne, S., Hudnall, G., & Bledsoe, C. Secondary Teachers' Perceptions of their Role in Suicide Prevention and Intervention. *School Mental Health, 1-20*.



What do K-12 teachers know about suicide and suicide risk?

Studies that focused on teachers' knowledge

Scouller and Smith (2002)

- Scouller and Smith (2002) conducted an Australian study to examine whether physicians and teachers were knowledgeable about suicide.
- Studied 481 secondary school teachers in Australia; stratified random sample of public, Catholic, and independent schools.
- Note: Suicide training was not commonly available for teachers then.

- Teachers were poorly informed about risk factors for adolescent suicide, yet 99% had interacted with one student they deemed at risk for suicide.
 - Fewer than half identified correctly that a suicide attempt of high lethality increases the risk for suicide.
 - Only 47% of teachers identified specific behavioral warning signs.
 - Only 11% understood the link between psychiatric disorders and suicide; 73% *discounted* this connection.
 - Only 20% were informed about the contribution of family history to increased suicide risk.

Teachers still don't know when and what to do.

- Teachers are not always sure they can identify children who need help. (1) (4)
- Only 9% of high school health teachers thought they could identify a student at risk for suicide. (2)
- Teachers don't feel they know enough to help and want to know more. (1)
- Teachers are unaware of crisis procedures for suicidal students. (3) (5)

1. Sisask, M., Värnik, P., Värnik, A., Apter, A., Balazs, J., Balint, M., ... & Feldman, D. (2014). Teacher satisfaction with school and psychological well-being affects their readiness to help children with mental health problems. *Health Education Journal*, 73(4), 382-393.
2. King, K. A., Price, J. H., Telljohann, S. K., & Wahl, J. (1999). High School Health Teachers' Perceived Self-Efficacy in Identifying Students at Risk for Suicide. *Journal of School Health*, 69(5), 202-207.
3. Konopinski, B. (2011). *Teachers' knowledge of adolescent suicide* (Doctoral dissertation, Fairleigh Dickinson University).
4. Reinke, W. M., Stormont, M., Herman, K. C., Puri, R., & Goel, N. (2011). Supporting children's mental health in schools: Teacher perceptions of needs, roles, and barriers. *School Psychology Quarterly*, 26(1), 1.
5. Westefeld, J. S., Jenks Kettmann, J. D., Lovmo, C., & Hey, C. (2007). High school suicide: Knowledge and opinions of teachers. *Journal of Loss and Trauma*, 12(1), 33-44.



What about teacher training?

Studies of teachers' professional development

Teacher Perspectives on Training

- Teachers learn the *content* of suicide prevention training and can correctly answer knowledge questions. (1,2)
- Their knowledge may diminish within three months (3, 4)
- Teachers who had prior training are more likely to get involved. (5)
- Teachers are generally satisfied with suicide training. (6)
- Training sometimes comes in the context of *postvention*. (5)

1. Hatton, V., Heath, M. A., Gibb, G. S., Coyne, S., Hudnall, G., & Bledsoe, C. Secondary Teachers' Perceptions of their Role in Suicide Prevention and Intervention. *School Mental Health*, 1-20.

2. Reis, C., & Cornell, D. (2008). An evaluation of suicide gatekeeper training for school counselors and teachers. *Professional School Counseling*, 11(6), 386-394.

3. Ubido J, Scott-Samuel A. (2014) [Rapid Evidence Review Series: Suicide Prevention Training](#). London, UK: National Health Service

4. Cross, W. F., Seaburn, D., Gibbs, D., Schmeelk-Cone, K., White, A. M., & Caine, E. D. (2011). Does practice make perfect? A randomized control trial of behavioral rehearsal on suicide prevention gatekeeper skills. *The Journal of Primary Prevention*, 32(3-4), 195.

5. Freedenthal, S., & Breslin, L. (2010). High school teachers' experiences with suicidal students: A descriptive study. *Journal of Loss and Trauma*, 15(2), 83-92.

6. Gould, M. S., Greenberg, T. E. D., Velting, D. M., & Shaffer, D. (2003). Youth suicide risk and preventive interventions: a review of the past 10 years. *Journal of the American Academy of Child & Adolescent Psychiatry*, 42(4), 386-405.



What do educators want from suicide prevention programs?

Teachers want suicide prevention efforts to . . .

- Offer awareness and stigma reduction (about mental illness and suicide) education for pre-service and practicing teachers.
- Teach students about help-seeking and mental health.
- Give educators a protocol to follow when they are concerned.
- Help educators understand that suicidal behavior is not merely attention-seeking.
- Give teachers time to get to know their students.

Ross, V., Kolves, K., & De Leo, D. (2016). Teachers' Perspectives on Preventing Suicide in Children and Adolescents in Schools: A Qualitative Study. *Archives of Suicide Research*, 1-12.

What is the emotional toll on teachers working with at risk students?

- “It is not limited to occasional critical events, but occurs every day. Further compounding their emotional demands, teachers reported emotional stress from interactions not only with students but also with colleagues, supervisors, and parents. . . supports for teachers should address such moment-to-moment exchanges not only with their pupils but also with colleagues. . . To survive, teachers, particularly special educators, need stress management strategies they can implement *every day*, in interactions with adults as well as children and youth.” (p. 4)

Kerr, M. M., & Brown, E. L. (2016). Preventing school failure for teachers, revisited: Special educators explore their emotional labor. *Preventing School Failure: Alternative Education for Children and Youth*, 60(2), 143-151.



“Very little attention has been paid to problems within a school, descriptions of what these problems mean to teachers on a day-to-day basis, or how certain problems and issues contribute to decisions to leave over time. Future studies should address teachers’ perspectives, observations of their work lives, and revelations in teacher journals, to provide a better understanding of important contributors to job satisfaction, commitment, stress, and career decisions.” (p. 52)

Billingsley, B. S. (2004). Special education teacher retention and attrition: A critical analysis of the research literature. *The Journal of Special Education, 38*(1), 39–55.



3. What approaches can we recommend for professional development, collaboration, and evaluation in mental health-education partnerships?

See also: Valenti, M. W., Kerr, M. M., & King, G. (2016). Evidence informed suicide prevention in schools. In C. Massat, R. Constable, & M. Kelly (Eds.). *School Social Work, 8th Edition*. Chicago: Lyceum Books.

Suggestions for Professional Development

- Assess what school employees know.
- Correct misinformation. Provide the most current information on risk factors, warning signs, and school procedures for prevention, identification and referral, crisis, and postvention training.
- Require and standardize suicide-prevention training for all certified professionals. Use best models.
- Alert employees who interact directly with students to those at highest risk (males 16-19; teens with mental health or drug and alcohol problems; GLBT teens, those who have attempted, victims of bullying, those with a pending disciplinary incident who have other risk factors).

Suggestions for Continuing Education

- Practice, practice, practice: behavioral rehearsals and role plays, refreshers, phones or web-based interactive practice. (1, 2)
- Teach the school's crisis procedures and practice them in drills. (3)
- Provide step-by-step training that makes teachers more comfortable asking about suicide. Starting the conversation may be the biggest hurdle. (4)

1. Cross, W. F., Seaburn, D., Gibbs, D., Schmeelk-Cone, K., White, A. M., & Caine, E. D. (2011). Does practice make perfect? A randomized control trial of behavioral rehearsal on suicide prevention gatekeeper skills. *The journal of primary prevention, 32*(3-4), 195.
2. Hanauer, D. A., Wentzell, K., Laffel, N., & Laffel, L. M. (2009). Computerized automated reminder diabetes system (CARDS): E-mail and SMS cell phone text messaging reminders to support diabetes management. *Diabetes Technology & Therapeutics, 11*(2), 99–106.
3. Kerr, M. M. (2016). *School crisis prevention and intervention*. Waveland Press
4. Kerr, M. M., & Nelson, C. M. (2010). *Strategies for addressing behavior problems in the classroom*. Prentice Hall.

Suggestions for Collaborations

Do

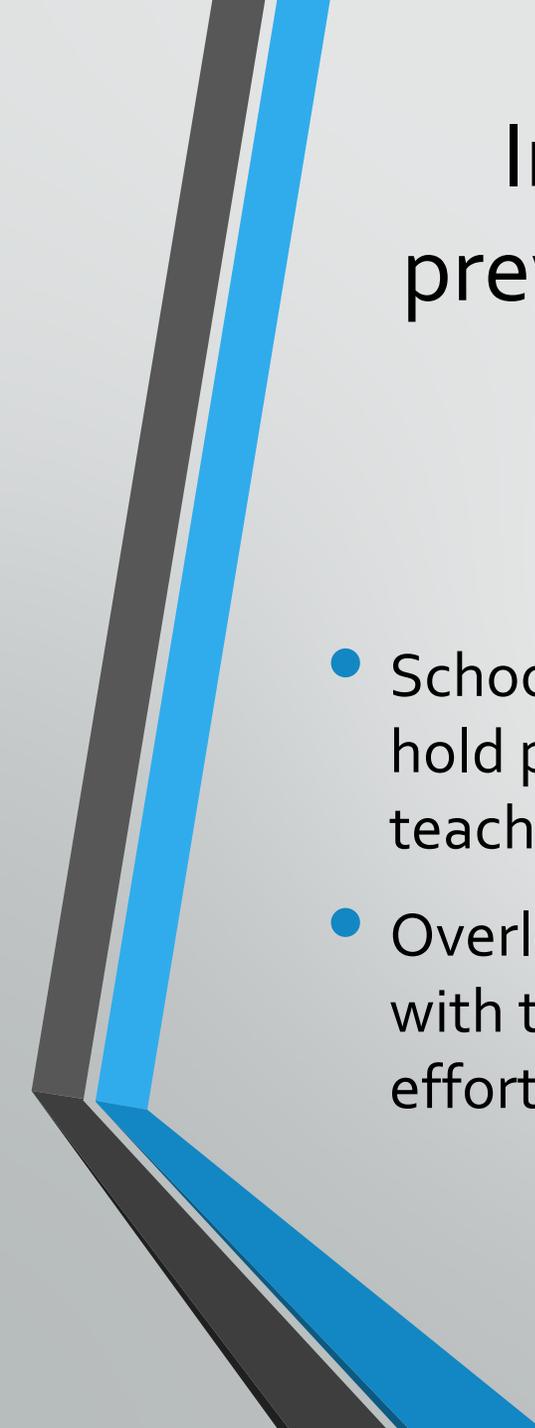
- Adopt whole-school approaches that promote employee and student health (1), such as those outlined in the School Health Index. (2)
- Do provide mental health back-up for teachers and other gatekeepers, 24/7.
- Provide on-site or readily accessible support after a suicide.

1. Kidger, J., Gunnell, D., Biddle, L., Campbell, R., & Donovan, J. (2009). Part and parcel of teaching? Secondary school staff's views on supporting student emotional health and well-being. *British Educational Research Journal*, 36(6), 919-935.

2. <https://www.cdc.gov/healthyschools/shi/index.htm>

Do Not

- Neglect teachers' own well-being and psychological supports. (1)
- Rely on teachers to write suicide-related curriculum
- Ask teachers to share their own suicide or mental health experiences with students



Incorporate teachers' views in assessing the prevention, intervention (crisis), and postvention processes in place at a school.

- School leaders often adopt programs, contract with service providers, and hold professional development programs without really understanding teachers' perspectives and experiences.
- Overlooking teachers' views contributes to their sense of dissatisfaction with their school, which has been shown to undermine suicide prevention efforts.