

After a Suicide: Answering Questions And Assisting Students

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Overview:

The aftermath of a youth suicide is a sad and challenging time for a school. 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 teachers 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 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 teenagers the most susceptible to suicide contagion are those believed to be most at risk in order are the following: Students who backed out of a suicide pact, students who had a last very negative interaction with the victim, students who know realize they missed warning signs and students with their own set of childhood adversities/previous suicidal behavior who need not have known the victim.
- 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 2005 found 8.4% of high school students have already made a suicide attempt.
- 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
- 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

Commonly Asked Questions and Appropriate Responses:

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 you with your thoughts and feelings and everyone working together to prevent future suicides rather than explaining “why”.

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 etc.

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.

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 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. 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. It is important that everyone know the warning signs of suicide and the importance of obtaining professional help for those who are suicidal.

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.

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 Association of Suicidology cautions that permanent markers or memorials such as plaques or trees planted in memory of the deceased dramatize and glorify their actions. Special pages in yearbooks or school activities dedicated to the suicide victim are also not recommended as anything that glorifies the suicide victim will contribute to other teenagers considering suicide. Reaching out to the victim's family and funeral attendance are also appropriate in coping with grief reactions.

How serious is the problem of youth suicide? It is the third leading cause of death for teenagers and the eighth leading cause of death for all Americans. Approximately 30,000 Americans die by suicide each year.

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 feel 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 in Miami to have a certified crisis hotline that is available 24 hours a day and manned by trained volunteers. There is also a national suicide hotline and that can be reached via 1-800-Suicide (Suicida for Spanish).

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. 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 at <http://suicidology.org>; the American Foundation for Suicide Prevention at <http://www.afsp.org/>; the Suicide Prevention Resource Center at <http://sprc.org/>; the Yellow Ribbon Suicide Prevention Program at <http://www.yellowribbon.org>; and the Suicide Prevention for Schools Web site at <http://preventsuicide.lacoe.edu>, a joint effort between the Los Angeles County Department of Mental Health, the Los Angeles County Office of Education and the Los Angeles Unified School District.

DR. SCOTT POLAND is a Past President of the National Association of School Psychologists and has over 25 years of school experience. He has personally led national crisis teams to assist school communities numerous times that experienced school shootings in locations such as Columbine. He has also worked in the aftermath of many youth suicides and has led national team after suicide clusters. He is the author of four books and numerous chapters and articles on the subjects of youth suicide and school crisis and has provided U.S. Congressional testimony on several occasions.

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