Comprehensive School-based Suicide Prevention within a Multi-Tiered Framework

Perri Rosen, PhD, NCSP
November 7, 2019
Presentation Objectives

- Discuss the key components of comprehensive school-based suicide prevention efforts, as well as the need for upstream approaches to suicide prevention among youth.

- Describe how school-based suicide prevention efforts may be integrated within a multi-tiered framework to provide a continuum of supports for students.

- Identify specific resources and best practices for staff training and student education in suicide awareness and prevention, as well as approaches to assessment and evaluation spanning multiple tiers.
Youth Suicide as a Public Health Problem

- Suicide is the 2nd leading cause of death for youth ages 10-24 years (CDC, 2017)

- Suicide is responsible for more deaths among 10-24 year-olds than all natural causes combined (Wyman et al., 2010)

- 6,252 youth ages 15-24 die by suicide each year, with an estimated 100-200 attempts for each death (CDC, 2017)
Comprehensive School-based Suicide Prevention

- Protocols for helping students at risk of suicide
- Protocols for responding to suicide death
- Staff education training
- Parent Education
- Student Education
- Screening

(SAMHSA, 2012)
Suicide Prevention Legislation in Schools

- 10 states **mandate** annual training for school personnel
- 17 states **mandate** non-annual training for school personnel
- 15 states **encourage** but do not mandate training
- 3 states have unique suicide prevention “statuses”
- 5 states have no mandates

(Kreuze, Stecker, & Ruggiero, 2017)
Upstream Approaches to Suicide Prevention

National Action Alliance for Suicide Prevention’s Prioritized Research Agenda, Aspirational Goal 11:

“Prevent the emergence of suicidal behavior by developing and delivering the most effective prevention programs to build resilience and reduce risk in broad-based populations.”

Childhood and adolescence are key suicide “prevention window” periods (Wyman, 2014)

Schools are a key context in which to implement upstream suicide prevention programs (Wyman & Upstream Suicide Prevention Workgroup, 2012)
Integration and Alignment of Suicide Prevention with the PBIS Framework

Prevention and skill building emphasizing social, emotional, and behavioral wellness

**PBIS Core Components**
- Evidence-based interventions and strategies.
- Data-informed decision making.
- System development to enable accurate and durable implementation.

**School-based Suicide Prevention**
- Policies and procedures for prevention, intervention, and postvention.
- Education for students, staff, and families.
- Screening and assessment.

**Approaches that create emotionally and physically safe environments for students**
- Gatekeeper training for staff, students, and families.
- Social-emotional learning interventions to enhance protective factors (e.g., healthy coping, help-seeking).
- School-wide initiatives to increase protective factors to reduce risk factors (e.g., bullying prevention, trauma-informed practices reflecting rapport, clarity of expectations, positive reinforcement).

**Strategies to support students known to be at higher risk of suicide**
- Individualized student interventions and supports.
- Crisis response and community partnerships.
- Ongoing program changes based on progress monitoring associated with students' response to intervention.

**Strategies to identify and support students that may be at risk of suicide**
- Targeted training for specialized staff (e.g., school mental health professionals, school nurses, administrators).
- Targeted small group interventions for students.
  - Suicide risk screening and/or assessment.
Administration and staff buy-in and capacity building
Establish personnel roles and teaming structures
Establish outcomes measures and data collection tools
Identify evidence-based and culturally-relevant practices (e.g., resource mapping)
Development of school or district-wide suicide prevention policies and procedures
# Policies and Procedures

<table>
<thead>
<tr>
<th>POLICY</th>
<th>PROCEDURES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention</td>
<td>Aware of a concern</td>
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<tr>
<td>Identification</td>
<td>Supervision/don’t leave alone</td>
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<tr>
<td>Intervention</td>
<td>Notify administrator (and/or Suicide Prevention Coordinator)</td>
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<tr>
<td>Postvention</td>
<td>Risk screening or assessment</td>
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<td>Safety planning</td>
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<td>Documentation</td>
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<td>Communicate results to parents</td>
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<td>Warm “hand-off”</td>
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<td>Re-entry and ongoing monitoring</td>
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</table>
Tier I - Universal Approaches

- Gatekeeper training for staff, students, and families
- Social-emotional learning programs and resilience education to support skill development (e.g., healthy coping, help-seeking)
- School-wide initiatives to increase protective factors and reduce risk factors (e.g., bullying prevention, trauma-informed practices)
- School-wide, classroom, and individual-level data collection
Gatekeeper Training
- Suicide myths
- Risk factors, protective factors, warning signs
- How to respond and refer

Social-emotional Learning
- Self-awareness
- Problem-solving and conflict resolution
- Coping strategies

Climate
- School connectedness
- Awareness and stigma reduction
- Mental health/wellness clubs
<table>
<thead>
<tr>
<th>Program</th>
<th>Format</th>
<th>Delivery Method</th>
<th>Target Audience</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal Level (e.g., whole district/school/</td>
<td>Training and education</td>
<td>Trained QPR Instructor</td>
<td>Middle and high school personnel</td>
<td>90 min</td>
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<td>classroom)</td>
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<tr>
<td>Applied Suicide Intervention Skills Training</td>
<td>Staff education and training</td>
<td>Certified ASIST Trainers</td>
<td>K-12 school personnel</td>
<td>2 days (14 h)</td>
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<td>(ASIST)</td>
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<tr>
<td>Kognito At-Risk for High School and Middle</td>
<td>Staff education and training</td>
<td>Online modules</td>
<td>Middle and high school personnel</td>
<td>50 min (middle school)</td>
</tr>
<tr>
<td>School Educators</td>
<td></td>
<td></td>
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<td>60 min (high school)</td>
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<tr>
<td>Good Behavior Game* (GBG)</td>
<td>Student education/programming</td>
<td>Teachers, with training</td>
<td>1st and 2nd grade students</td>
<td>10 min, 3x/week with</td>
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<td>increasing frequency and</td>
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<td>duration over a 2-year</td>
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<td>period</td>
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<tr>
<td>Signs of Suicide (SOS)*</td>
<td>Student education/programming; Screening</td>
<td>Trained school personnel</td>
<td>Middle and high school students</td>
<td>90-min all staff presentation; 60-min caregiver training; 1 class period session for students on two consecutive days</td>
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<tr>
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<td>(i.e., mental health professionals, health teachers)</td>
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<tr>
<td>Sources of Strength (SOS)*</td>
<td>Student education/programming</td>
<td>Certified SOS trainers</td>
<td>Middle and high school students</td>
<td>4-6 h of training for adult advisors; 4 h of training for peer leaders; 1 h of gatekeeper training/orientation for school staff; 4 months of school-wide messaging</td>
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<tr>
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<td>provide initial training to adult advisors and peer leaders; adult advisors then facilitate peer leader meetings</td>
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<tr>
<td>Youth Aware of Mental Health Programme (YAM)*</td>
<td>Student education/programming</td>
<td>Trained YAM Instructor</td>
<td>14-16 year-old students</td>
<td>5 h in 4 weeks (i.e., 3 h of role-play; 2 1-h interactive lectures)</td>
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<td></td>
<td>(Note: European study; does not use MS/HS)</td>
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<tr>
<td>The American Indian Life Skills Development</td>
<td>Student education/programming</td>
<td>Teachers working with community resource leaders and representatives of local service agencies</td>
<td>High school students</td>
<td>30 weeks, with lessons delivered 3x/week</td>
</tr>
<tr>
<td>curriculum (AILSD)</td>
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<tr>
<td>Linking Education and Awareness of Depression</td>
<td>Student education/programming</td>
<td>Teachers</td>
<td>High school students</td>
<td>3 h (one hour per day over 3 days)</td>
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<tr>
<td>and Suicide (LEADS)</td>
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<tr>
<td>Lifelines Curriculum</td>
<td>Student education/programming</td>
<td>Health teachers or school counselors</td>
<td>Middle and high school students</td>
<td>4 45-min lessons or 2 90-min lessons</td>
</tr>
</tbody>
</table>

(Singer et al., 2018)
Assessment and Evaluation at Tier 1

- Establishment of school-wide leadership team to evaluate the impact of universal strategies on student, classroom, and school-wide outcomes

- Utilization of multiple data sources

- Monitoring of the fidelity of implementation

- Dissemination and acknowledgement of outcomes and accomplishments
### Universal Screening

<table>
<thead>
<tr>
<th>Universal Screening for Behavior</th>
<th>Universal Behavioral Health Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify social-emotional and behavioral skill deficits.</td>
<td>Identify students potentially at-risk of suicide, mental health concerns, or other high risk behaviors.</td>
</tr>
<tr>
<td>Support student behavior interfering with academic or social gains.</td>
<td>Provide early intervention and access to care.</td>
</tr>
<tr>
<td>Focus on social-emotional and behavioral functioning.</td>
<td>Focus on symptom presentation.</td>
</tr>
</tbody>
</table>
Selecting a Measure

- Single-domain versus broad
- Psychometric properties (e.g., sensitivity/specificity)
- Culturally and developmentally appropriate
- Logistical considerations (e.g., cost, administration time)
- Technology
- Data outcomes (e.g., social-emotional skills, clinical symptoms)

**EXAMPLES OF BROAD-BASED MEASURES:**

- Strengths and Difficulties Questionnaire (SDQ; Goodman, 1998)
- Behavior Intervention Monitoring Assessment System (BIMAS; McDougal et al., 2011)
- Social, Academic, & Emotional Behavior Risk Screener (SAEBRS; Severson et al., 2007)
- Behavioral and Emotional Rating Scale (BESS; Kamphaus & Reynolds, 2007)
- Devereux Student Strengths Assessment (DESSA; LeBuffe et al., 2009)
- Social-emotional Health Survey (Furlong et al., 2014)
- Behavioral Health Screen (BHS; Diamond et al., 2010)
Tier II - Targeted Approaches

- Targeted training for specialized staff (e.g., school mental health professionals, school nurses, administrators)
- Targeted small group interventions for students
- Suicide risk screening and/or assessment
Tier 2 Student Supports and Interventions

- Coping and Support Training (Eggert et al., 2002)
- Reconnecting Youth (Eggert & Herting, 1991)
- DBT STEPS-A (Mazza et al., 2016)
- Adolescent Coping with Depression Course (Clark et al., 1995; 2001)
- Check-in/Check Out (Dart et al., 2012)
- Check and Connect/mentoring (Anderson et al., 2004)
- Social skills curricula
- Positive Family Support – Family Check-up (Connell & Dishion, 2008)
- Cognitive Behavioral Intervention for Trauma in Schools (CBITS; Stein et al., 2003)
<table>
<thead>
<tr>
<th>Evidence-based approach</th>
<th>Program type</th>
<th>Who implements?</th>
<th>Age range targeted</th>
<th>Settings for implementation</th>
<th>Timing of intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted Level (At-risk or sub-clinical)</td>
<td>Care, Assess, Respond, Empower/Coping and Support Training (CARE/CAST)</td>
<td>Student education/programming</td>
<td>School staff</td>
<td>High school students</td>
<td>School/small group setting with at-risk students</td>
</tr>
<tr>
<td></td>
<td>Reconnecting Youth (RY)</td>
<td>Student education/programming</td>
<td>Trained school staff</td>
<td>High school students</td>
<td>Schools/small group setting, may vary by school</td>
</tr>
<tr>
<td>Indicated Level (Students with targeted concern)</td>
<td>Attachment-Based Family Therapy*, Cognitive-behavioral therapy for suicide prevention*, Dialectical behavior therapy for adolescents*</td>
<td>Treatment</td>
<td>Outpatient therapist (not school staff)</td>
<td>Adolescents (Note: studies were conducted in community settings, therefore classified by age, not school level)</td>
<td>Community mental health clinic</td>
</tr>
<tr>
<td></td>
<td>PREPRe</td>
<td>Staff education and training</td>
<td>Trained staff (e.g., school psychologist and members of the school crisis team)</td>
<td>Standardized process for elementary, middle, and high school students; response is differentiated based on developmental level</td>
<td>Individual, class-wide, school-wide or district-wide as needed, with universal, secondary, and tertiary interventions</td>
</tr>
</tbody>
</table>

(Singer et al., 2018)
Suicide Risk Screening/Assessment

- Assessment of suicidal desire and ideation
  - Thoughts/images
  - Perceived burdensomeness
  - Thwarted belongingness
- Assessment of resolved plans and preparations
  - Duration
  - Intensity
  - Past suicidal behavior
  - Plan/means
- Assessment of other significant findings
  - Precipitant stressors
  - Hopelessness
  - Impulsivity

**EXAMPLES OF TOOLS:**

- Columbia – Suicide Severity Rating Scale (Posner et al., 2011)
- Suicide Assessment Five-Step Evaluation and Triage (SAFE-T; EDC, Inc. & Screening for Mental Health, Inc., 2009)
- ASK Suicide Screening Questions (ASQ; Horowitz, 2012)
- Behavioral Health Screen (BHS; Diamond et al., 2010)
- Youth Suicide Risk Screening Form/Youth Suicide Risk Assessment Form (Erbacher et al., 2015)

(Joiner, 2009)
Tier III - Indicated Approaches

- Individualized student interventions and supports
- Crisis response and community partnerships
- Ongoing monitoring of students
Specialized Training and Student Supports

Staff Training
- Interventions (e.g., safety planning)
- Crisis response, including postvention
- School reentry

Individual and Family Interventions
- Lethal means restriction
- Community-based treatment and resources
- Consideration of 504 plan or special education supports
### SAMPLE SAFETY PLAN

**Step 1:** Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:
1. 
2. 
3. 

**Step 2:** Internal coping strategies - Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):
1. 
2. 
3. 

**Step 3:** People and social settings that provide distraction:
1. Name __________________ Phone __________________
2. Name __________________ Phone __________________
3. Place ___________ 4. Place __________________

**Step 4:** People whom I can ask for help:
1. Name __________________ Phone __________________
2. Name __________________ Phone __________________
3. Name __________________ Phone __________________

**Step 5:** Professionals or agencies I can contact during a crisis:
1. Clinician Name __________________ Phone __________________
2. Clinician Name __________________ Phone __________________
3. Local Urgent Care Services __________________
   - Urgent Care Services Address __________________
   - Urgent Care Services Phone __________________
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

**Step 6:** Making the environment safe:
1. 
2. 

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_Safety Plan Treatment Manual to Reduce Suicide Risk: Veteran Version (Stanley & Brown, 2008)_

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The one thing that is most important to me and worth living for is: __________________________
Ongoing Monitoring of Students at Risk

How are you feeling?

Suicide Risk Monitoring Tool – Elementary/Middle School Version

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed by (name/title):</td>
<td></td>
</tr>
</tbody>
</table>

**I. IDEATION**
- Are you having thoughts of suicide?  
  - Yes  
  - No
- Right now  
  - Yes  
  - No
- Past 24 hours  
  - Yes  
  - No
- Past week  
  - Yes  
  - No
- Past month  
  - Yes  
  - No
- Please circle/check the most accurate response:
  - How often do you have these thoughts? (Frequency): less than weekly / weekly / daily / hourly / every minute
  - How long do these thoughts last? (Duration): a few seconds / minutes / hours / days / a week or more
  - How disruptive are these thoughts to your life (Intensity):  
    - not at all  
    - somewhat  
    - a great deal

**II. INTENT**
- How much do you want to die?  
  - not at all  
  - somewhat  
  - a great deal
- How much do you want to live?  
  - not at all  
  - somewhat  
  - a great deal

**III. PLAN**
- Do you have a plan?  
  - Yes  
  - No
- Have you written a suicide note?  
  - Yes  
  - No
- Have you identified a method?  
  - Yes  
  - No
- Do you have access to the method?  
  - Yes  
  - No  
  - N/A
- Have you identified when & where you'd carry out this plan?  
  - Yes  
  - No  
  - N/A
- Have you made a recent attempt?  
  - Yes  
  - No

**IV. WARNING SIGNS**
- How hopeless do you feel that things will get better?  
  - not at all  
  - somewhat  
  - a great deal

Erbacher, Singer, & Poland (2015)
Suicide Prevention Training Topics

- Cognitive-behavioral therapy for suicide prevention (CBT-SP)
- Attachment-based family therapy (ABFT)
- Suicide risk assessment
  - Safety Planning
  - Crisis
  - Response/Postvention
  - Family Engagement
- Myths
- Risk and protective factors
- Warning Signs
- How to respond to youth who may be suicidal
Suicide Prevention Online Learning Center

- Act 71 Policy Webinar
- Youth Suicide Prevention for Educators course (8 classes)

- Concussions, Depression, Suicidal Risk
- Integrating Behavioral Health Services with Primary Care
- Pharmacotherapy of Pediatric Anxiety and Depression
- Method Restriction: Primary Care and Public Health Approaches

- Assessment and Clinical Management of Suicidal Youth
- Effective Safety Plans
- Assessment and Intervention for School Mental Health Professionals

- In Search of a Safer World: How Can We Protect Our Youth from Gun Violence?
Partnerships and Integration

Integration and Alignment of Suicide Prevention with the PBIS Framework
Prevention and skill building emphasizing social, emotional, and behavioral wellness

**Who else?**
- Students
- Community behavioral health
- Parents and Families
- Student Assistance Program
- Crisis Response
- MTSS/ PBIS/ RtII

**Strategies to support students known to be at higher risk of suicide**
- Individual and student interventions (e.g., counseling, support)
- Crisis response and community partnerships
- Ongoing program changes based on program monitoring associated with student response to intervention

**Strategies to identify and support students that may be at risk of suicide**
- Targeted training for specialized staff (e.g., school mental health professionals, school nurses, administrators)
- Targeted small group interventions for students
- Suicide risk screening and/or assessment

**Approaches that create emotionally and physically safe environments for students**
- Classroom training for staff, students, and families
- Social-emotional learning interventions to enhance protective factors (e.g., healthy coping, self-advocacy)
- School-wide initiatives to increase protective factors or reduce risk factors (e.g., bullying prevention, crisis response, promoting support, clarity of expectations, positive reinforcement)
- School-wide, classroom, and individual-level data collection and analysis

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Suicide Prevention in Schools
- Staff Education Training
- Parent Education
- Screening
- Protocols to help students at risk of suicide
- Protocols for responding to a suicide death
First and Next Steps

- Resource mapping and needs assessment
  - Existing programs and interventions
  - Data collection tools and measures
  - Gaps/barriers

- Evaluating existing teaming structures

- Reviewing/updating existing policies and procedures

- Advocacy
Contact Information

Perri Rosen, PhD, NCSP
Garrett Lee Smith Youth Suicide Prevention Grant
Office of Mental Health and Substance Abuse Services

Office Phone: (717) 772-7858
Email: c-prosen@pa.gov
Resources

Suicide Prevention Online Learning Center: https://preventsuicidepalearning.com/

Alignment of the PBIS Framework and School-based Suicide Prevention -- guidance document available on the Pennsylvania Training and Technical Assistance Network (PaTTAN) website at


