

## Suicide Prevention Resources For Schools

### **General Information** (many with webinar sessions)

**PA Youth Suicide Prevention Initiative**      <http://www.paspi.org/>

**Mission** -The Pennsylvania Youth Suicide Prevention Initiative is a multi-system collaboration to reduce youth suicide.

**Vision** -Youth suicide prevention will be embraced and incorporated into the fabric of every community in Pennsylvania to address the social and emotional needs of youth at risk and survivors of suicide.

**Suicide Prevention Resource Center**      <http://www.sprc.org/>

SPRC is the nation's only federally supported resource center devoted to advancing the *National Strategy for Suicide Prevention*. They provide technical assistance, training, and materials to increase the knowledge and expertise of suicide prevention practitioners and other professionals serving people at risk for suicide. They also promote collaboration among a variety of organizations that play a role in developing the field of suicide prevention.

**Toolkit for High Schools**      <http://store.samhsa.gov/product/SMA12-4669>

Assists high schools and school districts in designing and implementing strategies to prevent suicide and promote behavioral health. Includes tools to implement a multi-faceted suicide prevention program that responds to the needs and cultures of students. Released in June 2012.

**American Foundation for Suicide Prevention**      <http://www.afsp.org/>

The American Foundation for Suicide Prevention has been at the forefront of a wide range of suicide prevention initiatives – each designed to reduce loss of life from suicide. They are investing in groundbreaking research, new educational campaigns, innovative demonstration projects and critical policy work. And they are expanding their assistance to people, whose lives have been affected by suicide, reaching out to offer support and offering opportunities to become involved in prevention.

**American Association of Suicidology**      <http://www.suicidology.org/home>

AAS is a membership organization for all those involved in suicide prevention and intervention, or touched by suicide. AAS is a leader in the advancement of scientific and programmatic efforts in suicide prevention through research, education and training, the development of standards and resources, and survivor support services.

7/08/12

### **Services for Teens At Risk (STAR Center)**

<http://www.starcenter.pitt.edu/>

Services for Teens At Risk (STAR-Center) is a comprehensive research, treatment, and training center. Funded by the State of Pennsylvania's General Assembly in 1986 to address adolescent suicide and depression, the program provides individual assessment and treatment to teens that are experiencing depression and suicidality. They also provide community education services about depression and suicidality to schools, social service agencies, churches and other organizations that request them.

### **The Trevor Project** <http://www.thetrevorproject.org/>

The Trevor Project is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, and questioning youth.

## **Comprehensive School Guide**

### **Youth Suicide Prevention School Based Guide**

<http://theguide.fmhi.usf.edu/>

The Youth Suicide Prevention School-Based Guide is designed to provide accurate, user-friendly information. The Guide is not a program but a tool that provides a framework for schools to assess their existing or proposed suicide prevention efforts (through a series of checklists) and provides resources and information that school administrators can use to enhance or add to their existing program. First, checklists can be completed to help evaluate the adequacy of the schools' suicide prevention programs. Second, information is offered in a series of issue briefs corresponding to a specific checklist. Each brief offers a rationale for the importance of the specific topic together with a brief overview of the key points. The briefs also offer specific strategies that have proven to work in reducing the incidence of suicide, with references that schools may then explore in greater detail. A resource section with helpful links is also included. The Guide provides information to schools to assist them in the development of a framework to work in partnership with community resources and families.

## **Training for School Staff**

### **Society for Prevention of Teen Suicide**

<http://www.sptsusa.org/>

The mission of the Society for the Prevention of Teen Suicide is to reduce the number of youth suicides and attempted suicides by encouraging overall public awareness through the development and promotion of educational training programs for teens, parents and educators.

The free, interactive series Making Educators Partners in Suicide Prevention is designed to be completed at the viewer's own pace. It provides two hours of professional development credit to New Jersey educators but is open to anyone who is interested in reviewing current strategies for youth suicide prevention in schools.

### **More Than Sad Program**

<http://www.morethansad.org/index.html>

7/08/12

The More Than Sad Program of the American Foundation for Suicide prevention provides education about factors that put youth at risk for suicide, in particular depression and other mental disorders. The program includes two sets of materials-one for teens and one for teachers and school personnel. Instructional materials accompany the More Than Sad Program, including a power point presentation - <http://www.morethansad.org/materialspts.html>

**American Foundation for Suicide Prevention**(<http://www.afsp.org/>) - PA AFSP chapters will make the "More Than Sad" DVD available **free** to all high and middle schools in PA that request one.

**Contact Pat Gainey to receive your copy.**

Patricia Gainey, Regional Director,American Foundation for Suicide Prevention, Greater Philadelphia Regional Office3535 Market Street, Suite 4047Philadelphia, PA 19104; Office: (215)-746-7256

### **Suicide Prevention Resource Center -Best Practice Registry** <http://www.sprc.org/bpr>

The purpose of the Best Practices Registry (BPR) is to identify, review, and disseminate information about best practices that address specific objectives of the *National Strategy for Suicide Prevention*. The BPR is a collaborative project of the Suicide Prevention Resource Center (SPRC) and the American Foundation for Suicide Prevention (AFSP). It is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Many of the best practice resources listed have to be purchased.

### **Well Aware** <http://www.wellawaresp.org/>

Well Aware has been actively involved in national suicide prevention efforts since 2003. Their work is centered on strategic communications, and applying this to advance awareness, knowledge and practice so as to reduce suicide in America. They offer free webinars on youth suicide and prevention. Many of their webinars such as "Cyberbullying and Suicide: What Schools Must Do to Protect Students and Districts, March 29, 2011" are archived.

## **Material for Students**

### **More Than Sad Program** <http://www.morethansad.org/index.html>

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**Postvention Assistance**

**Services for Teens At Risk (STAR Center)** <http://www.starcenter.pitt.edu/>

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**Suicide Prevention Resource Center Postvention Toolkit**

<http://www.sprc.org/sites/sprc.org/files/library/AfteraSuicideToolkitforSchools.pdf>

This toolkit is designed to assist schools in the aftermath of a suicide (or other death) in the school community. It is meant to serve as a practical resource for schools facing real-time crises to help them determine what to do, when, and how. The toolkit reflects consensus recommendations developed in consultation with a diverse group of national experts, including school-based personnel, clinicians, researchers, and crisis response professionals. It incorporates relevant existing material and research findings as well as references, templates, and links to additional information and assistance.

## Suicide Prevention in schools

Presented by: PA Youth Suicide  
Prevention Initiative

PASA-PSBA Conference  
Hershey, PA  
October 2012

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## PAYSPI – PA Youth Suicide Prevention Initiative

- **PAYSPI** - Multi-system collaboration to reduce youth suicide
- Administered by DPW Office of Mental Health and Substance Abuse Services (OMHSAS)
- **Vision**  
Youth suicide prevention will be embraced and incorporated into the fabric of every community in Pennsylvania to address the social and emotional needs of youth at risk and survivors of suicide.

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## What do we know about suicide?

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## Understanding the National Problem of Suicide

- In 2010, 38,357 people in the U.S. died by suicide.
- U.S. suicide rate = 12.4 (12.4 suicides for every 100,000 people)
- About every 13.7 minutes someone in this country intentionally ends his/her life.

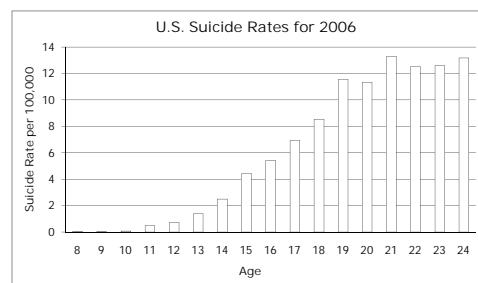
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## Understanding the National Problem of Suicide

- 4,874 people under age 25 died by suicide (12.7% of total).
- 1 young person dies by suicide every hour and 47 minutes.
- Suicide is the 3<sup>rd</sup> leading cause of death for youth ages 10-14 and young people ages 15–24 (CDC, 2010 data).
- In 2010, 274 children under the age of 15 died by suicide.

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## Youth Suicide Rates by Age (Ages 8-24)



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## U.S. Youth Suicide Rates by Race/Ethnicity (Ages 15-24)

Racial/Ethnic Group	Rate*
American Indians and Alaskan Natives	22.8
Whites	10.5
Asian and Pacific Islander	8.3
Hispanics	7.5
Blacks	6.3

\*Number of suicides per 100,000 population, 2006

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## Pennsylvania Statistics

- Ranked 33<sup>nd</sup> in the nation with 1,547 suicides (across all ages) in 2010
- Suicide is the third leading cause of death for youth ages 15-24, accounting for 206 deaths in 2010.
- The top three methods for suicide by young people are firearm (44%), suffocation (37%), and poisoning (8%).

(Pennsylvania Department of Health – Pennsylvania Vital Statistics 2009)

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## Pennsylvania Statistics

- In 2007, 14.5% of high school students seriously considered suicide, 11.3% had a suicide plan, 6.9% of youth attempted suicide, and 29% sometimes thought life was not worth living.

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## Suicide Attempts

- No official count; emergency room statistics underestimate extent of problem
- Among youth aged 10-24, 65-200 attempts for each suicide
- About 7% of students in grades 9-12 (1 of every 14) report making a suicide attempt in the past year. In a school of 1,000 students that equals 70 students or approximately 2 per week.
- Adolescent girls report twice as many suicide attempts as boys.

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## Suicidal Ideation

- "Ideation" – thinking about or planning for suicide
- About 14% of students in grades 9-12 (1 of every 7) report seriously considering suicide in the past year. In a school of 1,000 students that equals 140 students, approximately 4 new students per week.
- About 11% (1 of every 9) report making a suicide plan. In a school of 1,000 students, that equals 110 students, approximately 3 students per week.

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## Risk Factors for Youth Suicide...

- Key suicide risk factor for all age groups is an undiagnosed, untreated or ineffectively treated mental disorder.
- 90% of people who die by suicide have a mental disorder.
- In teens, suicide risk could be linked to other mental disorders, often with overlapping symptoms such as:

Major Depressive Disorder	Conduct Disorder
Bipolar Disorder	Eating Disorders
Generalized Anxiety Disorder	Schizophrenia
Substance Use Disorders	

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## Situational Factors that Increase Suicide Risk

- Although mental disorders are the most significant cause of suicide in teens and adults, stressful life events and other situational factors may trigger suicidal behavior.

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## Bottom Line:

- There are many youth with depression and suicidal thoughts who are not being identified and helped

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## Suicide Prevention and Schools

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## Why Schools Should Implement Suicide Prevention Programs

- Children and adolescents spend a significant amount of their lives in school.
- School personnel interact with children and adolescents on a daily basis.
- School personnel are in a prime position to recognize the signs of suicide and make the appropriate referrals for help.
- To intervene effectively with at-risk youth, school personnel will need training to understand suicide risk and the appropriate referral process.

(The Jason Foundation, American Foundation for Suicide Prevention) <sup>16</sup>

## Why Schools Should Implement Suicide Prevention Programs

- Goal 6 of the NSSP (National Strategy for Suicide Prevention) is to "Implement Training for Recognition of At-Risk Behavior and Delivery of Effective Treatment"
- Objective 6.5 of the NSSP is to "increase the proportion of educational faculty and staff who have received training on identifying and responding to children and adolescents at risk for suicide."

(The Jason Foundation, American Foundation for Suicide Prevention)

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## Why Schools Should Implement Suicide Prevention Programs

- The NSSP indicates teachers, school staff, and school health personnel as key gatekeepers.
- Gatekeeper definition – someone who "regularly comes into contact with individuals or families in distress," (U.S. Department of Health and Human Services U.S. Dept. of HHS], 2001)
- The NSSP asserts that these key gatekeepers "must be trained to recognize behavioral patterns and other factors that place individuals at risk for suicide and be equipped with effective strategies to intervene before the behaviors and early signs of risk evolve further." (U.S. Dept. of HHS, 2001).

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## Why Schools Should Implement Suicide Prevention Programs

- The NSSP clarifies that "school staff and faculty are not expected to make clinical diagnoses, but rather to be able to recognize developing signs and symptoms associated with mental disorders, substance abuse, or suicidal risk. Providing them with the vocabulary, techniques, and skills to be comfortable with these issues will enhance their ability to intervene effectively and make appropriate referrals," (U.S. Dept. of HHS, 2001).

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## A Vision for Suicide Prevention

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## Pennsylvania Youth Suicide Prevention Initiative (PAYSPI)

### Vision for Suicide Prevention in Schools

- Ensure that schools do all they can to prevent future suicides and make sure those who need help obtain it in a timely manner.

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## Common Myths

- Most teens will not reveal they are suicidal - myth
- Adolescents who talk about suicide do not attempt or complete suicide – myth
- Talking about suicide in the classroom will promote suicidal ideas and suicidal behavior – myth
- Parents are often aware of their child's suicidal behavior – myth
- Most adolescents who attempt suicide fully intend to die - myth

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## What is Needed in Our Schools?

1. Top down messaging
  - Written policies and procedures
2. Suicide prevention education for teachers
  - Debunking myths
  - How to respond
3. Positive messages for youth
  - Seeking help is a coping strength
  - Peer support and referral
4. Messaging to parents that school is a safe place to talk about emotional distress
  - Set up a non-punitive environment

## Conclusion

- Depression and Suicidal behavior is a major problem among our youth
- Many of these deaths are preventable
- Schools are in a unique position to make an impact on the mental health of our youth

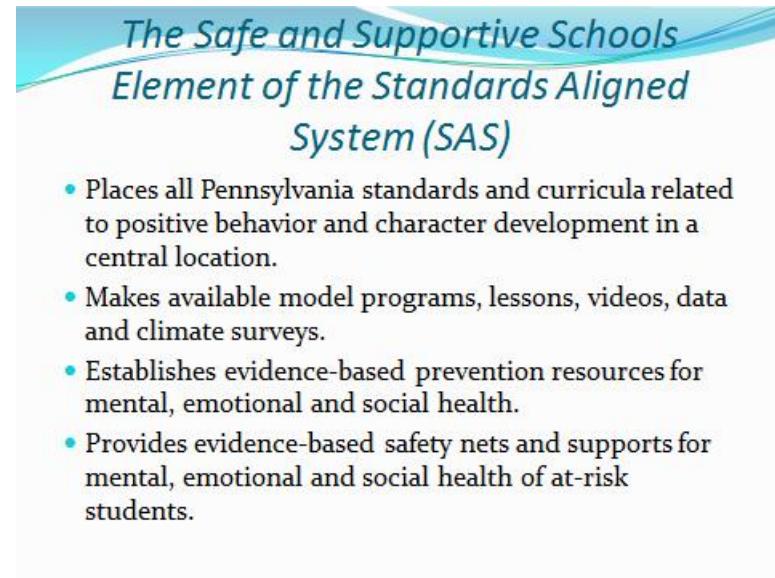
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## Thank You

- PAYSPI
  - PA Youth Suicide Prevention Initiative
  - [www.payspi.org](http://www.payspi.org)
  - Suicide prevention is everyone's business

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# SAS and Teen Suicide Prevention



The logo for The Safe and Supportive Schools Element of the Standards Aligned System (SAS) features a blue and white striped background. The text "The Safe and Supportive Schools" is in a blue script font, "Element of the Standards Aligned" is in a blue serif font, and "System (SAS)" is in a blue sans-serif font.

- Places all Pennsylvania standards and curricula related to positive behavior and character development in a central location.
- Makes available model programs, lessons, videos, data and climate surveys.
- Establishes evidence-based prevention resources for mental, emotional and social health.
- Provides evidence-based safety nets and supports for mental, emotional and social health of at-risk students.

## Example of Resources on SAS

This video provides parents with information about teen suicide that includes warning signs of suicide and suicide prevention resources.

Not My Child: What Every Parent  
Needs to Know About Teen Suicide      teen depression, suicide

5 to 12

The film features four character vignettes, each presenting a different manifestation of depression, and a different path to finding help.

More Than Sad      teen depression, suicide

5 to 12

This web based resource guide helps teens identify the warning signs of suicide and provides strategies and resources for suicide prevention.

The Role of Teens in Preventing Suicide

teen depression,suicide

5 to 12

Columbia University's Health Education Program, Go Ask Alice! provides information to help young people make better decisions concerning their health and well-being. Go Ask Alice! answers questions about relationships, sexuality, emotional health, alcohol and other drugs, and other topics. The addresses of e-mails sent to Go Ask Alice! are electronically scrambled to preserve the senders' confidentiality. Questions are answered by a team of Columbia University health educators and information and research specialists from other health-related organizations.

Go Ask Alice

teen health,mental health, depression

9 to 12

## Student Interpersonal Skills Standards

### Self Awareness and Self-Management

#### 16.1. GRADE PK-K

#### 16.1. GRADES 1-5

#### 16.1. GRADES 6-8

#### 16.1. GRADES 9-12

*Pennsylvania's public schools shall teach, challenge and support every student to realize his or her maximum potential and to acquire the knowledge and skills needed to:*

##### Resiliency

##### 16.1.K.C

Recognize that everyone makes mistakes and that using positive **coping skills** can result in learning from the experience.

##### 16.1.5.C

Identity adverse situations which all people encounter and healthy ways to address.

##### 16.1.8.C

Analyze adverse situations and identify appropriate **protective factors** and **coping skills**.

##### 16.1.12.C

Apply **protective factors** and healthy **coping skills** when encountered with adversity.

## **Where to find the resources:**

- [www.pde.sas.org](http://www.pde.sas.org)
- Student Interpersonal Skills
- Safety
- Emotional Safety

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## **Students' Involvement in Bullying and Risk of Suicide: Implications for Olweus Bullying Prevention Trainers and Coordinating Committees**

### **1. What does the OBPP have to say about bullying and suicide?**

#### **Background:**

According to the Centers for Disease Control (CDC, 2009), suicide is the third leading cause of death among 15- to 24-year olds. Fifteen percent of high school students seriously considered suicide in the previous 12 months, and 7% reported making at least one suicide attempt in the previous year. According to the CDC (n.d.), "a combination of individual, relational, community, and societal factors contribute to the risk of suicide," including a family history of suicide or child maltreatment, a history of mental disorders (especially depression) or alcohol and substance abuse, feelings of hopelessness, impulsive or aggressive tendencies, isolation, loss, physical illness, local epidemics of suicide, and easy access to lethal methods.

There is a growing body of research examining the association between involvement in bullying and suicide among children and youth. Most studies are correlation and show that children who are involved in bullying (as victims of bullying, perpetrators of bullying, or both) are more likely than those who are not to have depressive symptoms, high levels of suicidal thoughts, and attempted suicide (e.g., Annenberg Public Policy Center, 2010; Arseneault & Shakoor, 2010; Eisenberg, Newmark-Sztainer, & Story, 2003; Hinduja & Patchin, 2010; Kim, Leventhal, Koh, & Boyce, 2009; Klomek, Marrocco, Kleinman, Schoenfeld, & Gould, 2007, 2008; Pranjic & Bajraktarevic, 2010; Rigby & Slee, 1999; Roland, 2002; van der Wal, 2005). Children who bully and who also are bullied by peers (often referred to as "bully-victims") appear to be at the greatest risk for suicidal thoughts and behavior (see review by Kim et al., 2009). There are a number of important limits to these studies. First, several researchers note that children's experience with bullying explained only a very small amount of the variation in suicidality (e.g., Hinduja & Patchin, 2010). Second, correlation studies do not imply causation. Although involvement in bullying is related to suicidality, one cannot conclude from these studies that experience with bullying causes suicidality.

Very few studies have used longitudinal methodologies (i.e., measure participants over time), and those that do (e.g., Kim et al.'s study of 7<sup>th</sup> and 8<sup>th</sup> graders in Korea [Kim et al., 2009] or Klomek et al.'s studies of youth in Finland [Klomek, Sourander, Kumpulainen, Piha, Tamminen, Moilanen, Almqvist, & Gould, 2008; Klomek, Sourander, Niemela, Kumpulainen, Piha, Tamminen, Almqvist, & Gould, 2009] have sampled very specific populations and have

produced somewhat different findings depending on the sub-populations studied.

### **Conclusions from the research:**

***Suicide is one of the leading causes of death among young people in the U.S. Although children who are involved in bullying are at increased risk of suicidal thoughts and behavior, there are numerous individual, relational, community, and societal factors that contribute to youths' risk of suicide. The OBPP is a bullying prevention and intervention program that is designed to reduce bullying behavior, but it is not a suicide prevention program.***

### **2. What are the implications for training and consulting with schools?**

In other words, does OBPP have any expectations for trainers related to this issue?

Since many parents, educators, and members of the media may continue to connect bullying behavior and bullying prevention policies and practices in the schools directly to cases of student suicide. It is expected that OBPP trainers should be proactive in helping to clarify that bullying prevention is not synonymous with suicide prevention and that the OBPP is not a suicide prevention program.

1. OBPP trainers, in the pre-training consultation phase with the school leaders and as well as during the BPPC training, should communicate clearly that the OBPP is not a suicide prevention program. They should explain that bullying behaviors are related to increased depression in those who are being bullied, and that children who have been bullied do have more suicidal ideation than children who are not bullied and are more likely to have attempted suicide. However, suicide is a complex issue that typically involves far more than victimization from bullying. School personnel who actively work to prevent bullying, who are watchful for possible bullying, and who take quick actions to stop victimization are taking logical steps to help prevent suicide. However, these actions do not constitute comprehensive suicide prevention. In short, trainers need to give a clear message that "The OBPP is a bullying prevention and intervention program that is designed to reduce and address bullying behavior, but it is NOT a suicide prevention program."
2. Trainers should ask the school's administration and the BPCC members about what is in place in their schools to address suicide prevention specifically. Suicide issues are generally addressed by the school's Student Assistance Program and Student Services personnel. Trainers should find

out who has been given the responsibility to address suicide education, prevention and intervention in each of their schools. If no one is specifically responsible for suicide prevention issues, this finding should be communicated clearly to the school's top administrator immediately, making it clear that OBPP is NOT a suicide prevention program and that they may wish to take proactive steps to provide suicide prevention/support for educators and parents.

3. If a suicide prevention representative and/or crisis response expert for the school is identified, it may be wise to include this person in the BPCC membership. Alternatively, at minimum, BPCC members need to know WHO to contact should they be concerned about a student. The school's Bullying Prevention Coordinating Committee, the Student Assistance Program chairperson, and administrators should be clear as to how to communicate with each other about specific concerns regarding suicide prevention/intervention.
4. Suicide prevention requires a comprehensive effort to identify mental health resources for students within the school and the larger community, training for educators and parents about suicide, training about the behavioral indicators that a student may be considering suicide, how to intervene effectively, how to communicate concerns to those needing to know, and how to get immediate help. Research-based suicide prevention/intervention programs should be explored and implemented.
5. Trainers who are certified in the Olweus Bullying Prevention Program can be looked to as "in-house consultants" on bullying prevention/intervention issues but should NOT be considered to be an expert or consultant on suicide issues, unless they have specific professional training/credentials to do so. OBPP trainers should feel comfortable and encouraged to say "Suicide prevention is NOT my area of expertise. I don't know the answer to your question, but I can help you find the person who can answer it."
6. We ask that trainers refrain from using the term "bullycide." This term, which is frequently used in the popular press, implies a simplistic causal relationship between bullying and suicide that is not supported by research. As stated earlier, suicide is a highly complex, multi-faceted issue and there are often many factors involved. Just as it would be inappropriate to refer to "depressioncide", divorcecide" or "financialcide", it is inappropriate to use the term "bullycide". Bullying may be a trigger for a suicide attempt by a student who is struggling, but it is problematic when we specifically imply that bullying or cyber bullying causes youth suicide.

7. In planning the formal kick-off event or class meetings, educators should be cautioned against using role play scenarios or videos of bullying behaviors that depict the site or method of a completed suicide. The impact of these presentations may be harmful to students who are seriously considering suicide.

That is not to say that adults should not talk with students about suicide. In fact, it is a best practice to talk with students about suicide prevention. It is a myth that talking about suicide will put the idea in students' heads; not only are they already exposed to these concepts by peers and the media, there is no evidence of increased suicidal activity as a result of evidence-based suicide prevention programming.

8. If a suicide should occur, it is the responsibility of a district administrator or a designee to speak with the media, not the OBPP Trainer, the school's Bullying Prevention Coordinating Committee or BPCC Coordinator.

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## Spectrum of Suicide Prevention in Schools

- Suicide Awareness Curriculum
  - Teachers, All staff, Students
- Gatekeeper Training
- Skills Training for students
- Screening of students

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## Resources for Research-Based Programs

- American Foundation for Suicide Prevention  
[www.afsp.org](http://www.afsp.org)
- National Association of School Psychologists  
[www.nasponline.org](http://www.nasponline.org)
- Suicide Prevention Resource Center  
[www.sprc.orgnce](http://www.sprc.orgnce)
- Substance Abuse and Mental Health Services Administration  
[www.samhsa.gov](http://www.samhsa.gov)
- SAMHSA'S National Registry of Evidence-based Programs and Practices  
[www.nrepp.samhsa.gov](http://www.nrepp.samhsa.gov)

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## Research-Based Suicide Prevention Programs

Lifelines, A Suicide Prevention Program  
[www.hazelton.org/web/lifelines.page](http://www.hazelton.org/web/lifelines.page)

More Than Sad (suicide prevention education for teachers and other school personnel)  
[www.afsp.org](http://www.afsp.org), [www.morethansad.org](http://www.morethansad.org)

Preventing Suicide: A Toolkit for High Schools  
<http://store.samhsa.gov/product/SMA12-4669>

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## Research-Based Programs (cont'd)

- Signs of Self-Injury, ACT to Prevent Self-Injury  
[www.mentalhealthscreening.org](http://www.mentalhealthscreening.org)
- SOS Signs of Suicide Prevention Program – High School  
[www.mentalhealthscreening.org](http://www.mentalhealthscreening.org)
- SOS Signs of Suicide Prevention Program – Middle School  
[www.mentalhealthscreening.org](http://www.mentalhealthscreening.org)
- Teen Screen, National Center for Mental Health Checkups at Columbia University  
[www.teenscreen.org](http://www.teenscreen.org)

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## SOS Signs of Suicide

### Some Secrets Should be Shared

If a friend talks about hurting himself or someone else, it's important to  
**ACT<sup>®</sup>**

- A**cknowledge: Listen to your friend, don't ignore threats
- C**are: Let your friend know you care
- T**ell: Tell a trusted adult that you are worried about your friend

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## Additional Resources

Many FREE resources available

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## PA Department of Education [www.state.pa.us](http://www.state.pa.us)

- Standards Aligned System (SAS)
  - Safe and Supportive Schools
  - Emotional Safety

## Services for Teens at Risk (STAR-Center)

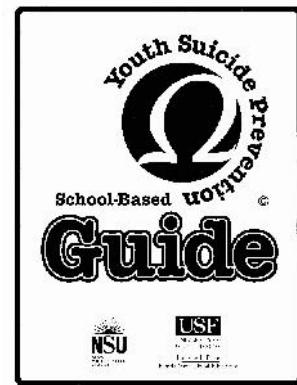
Directed by:

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Psychiatry  
UPMC Endowed Chair, Suicide Studies  
University of Pittsburgh  
School of Medicine

### STAR-CENTER (cont'd)

STAR-Center has developed numerous educational materials about teen depression and suicide for families, educators, and professionals

- Manuals are available on the STAR-Center web site
- Training opportunities are available via webcasts on the STAR-Center web site
- STAR-Center web site:  
[www.starcenter.pitt.edu](http://www.starcenter.pitt.edu)



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## Allentown School District Procedural Safeguards

- Emergency Operating Procedure Manual for all staff
- Suicide Assessment Interview
  - Training for all mental health staff
- Threat Assessment Interview
  - Training for all mental health staff
  - Suicide risk assessment component
- Postvention Procedures

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## Allentown School District

- Suicide Prevention Education
  - Classroom Lessons
  - Staff Inservice
  - Parent Education

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## Allentown School District Suicide Prevention Education

- Research-Based Programs
  - SOS Signs of Suicide Prevention Program
    - High School
    - Middle School
  - Signs of Self-Injury - High School
    - ACT to Prevent Self Injury
  - Lifelines
  - More Than Sad

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