

# CRISIS RESPONSE

SUICIDE PREVENTION AND POSTVENTION PROTOCOLS



MARIN COUNTY HEALTH AND HUMAN SERVICES  
KAISER PERMANENTE  
MARIN COUNTY OFFICE OF EDUCATION  
MARIN COUNTY SCHOOL DISTRICTS

VERSION 3.6





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# INTRODUCTION





# Overview

A crisis of any kind, but especially one that results in harm or the death of a young person, is exceptionally stressful and traumatic. Sadly Marin County, like innumerable communities across the country, has experienced the sudden and tragic loss of a student. It is impossible to overstate the long-term devastation these deaths have on the entire community.

This document is designed to be used by school officials. Our hope is that this resource will help guide schools by promoting thoughtful discussion about prevention, as well as careful planning and preparation to minimize stress and create conditions to keep people safe in the case of crisis. We also hope these protocols open discussion and provide reassurance to our parent/guardian/school community that the safety and well-being of children is our first priority.

The most relevant existing literature and resources related to suicide prevention and postvention have been reviewed and compiled to provide best practice guidance and practical tools for school officials. This document is designed to be dynamic and will be continually edited and updated to ensure the most current practices are in place. This work product would not have been possible without the collaborative efforts of concerned community organizations including Marin County schools, Department of Health and Human Services, and Kaiser Permanente.

## Acknowledgements

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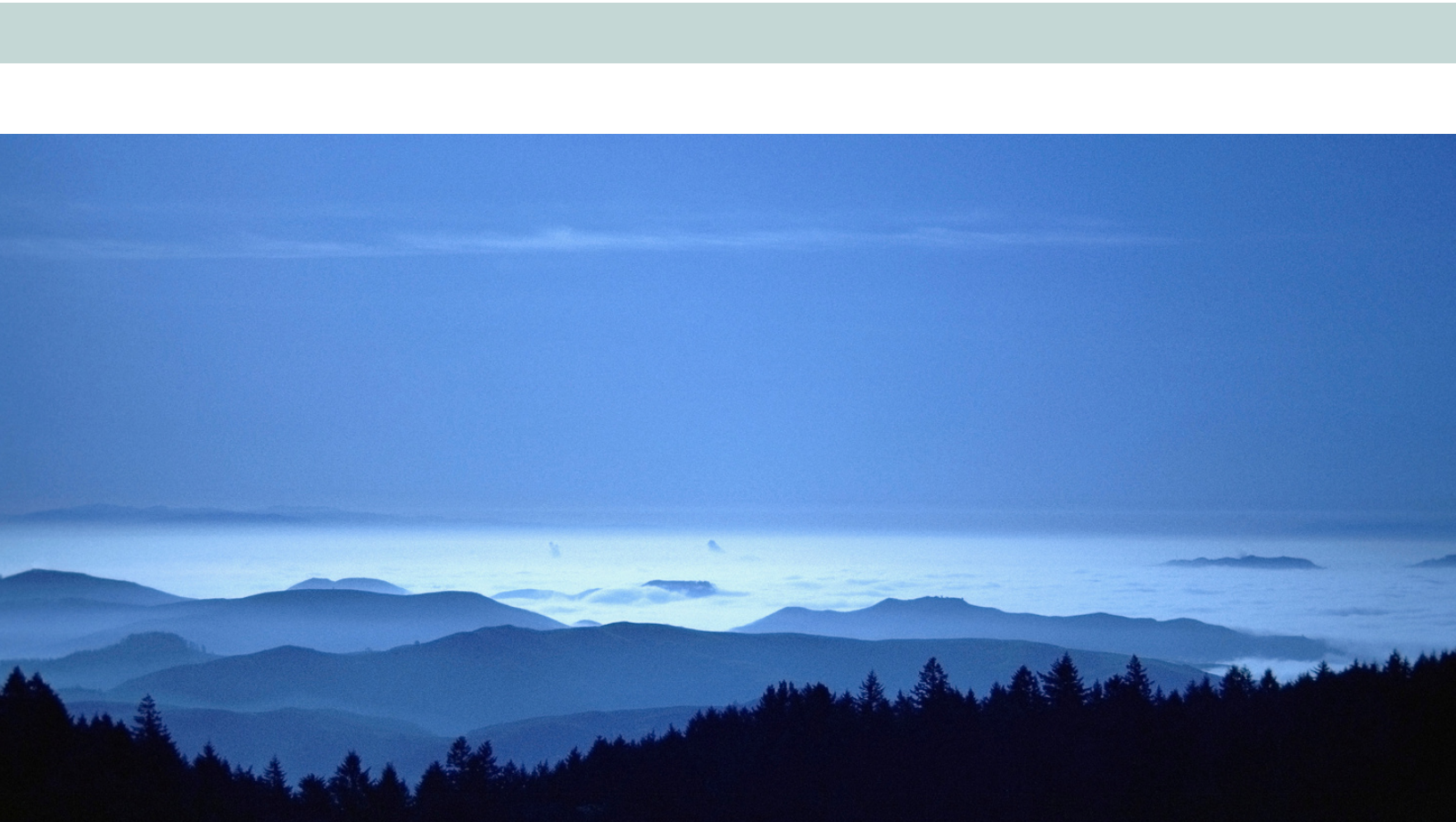


# Purpose

The purpose of the protocols in this document is to protect the health and well-being of all students by having procedures in place to prevent, assess the risk of, intervene in, and respond to suicide. This document has been developed under the following principles:

- Recognize that physical and mental health are integral components of student outcomes, both educationally and beyond graduation;
- Recognize that suicide is a leading cause of death among young people;
- Have an ethical responsibility to take a proactive approach in preventing deaths by suicide;
- Acknowledge the school's role in providing an environment that is sensitive to individual and societal factors that place youth at greater risk for suicide and helps to foster positive youth development and resilience; and
- Acknowledge that comprehensive suicide prevention policies include prevention, intervention, and postvention components.

These protocols are meant to be paired with other practices that support the overall emotional and behavioral health of students.



Taken from:

American Foundation for Suicide Prevention, American School Counselor Association, National Association of School Psychologists & The Trevor Project (2019). Model School District Policy on Suicide Prevention: Model Language, Commentary, and Resources (2nd ed.). New York: American Foundation for Suicide Prevention.



# Definitions

## Suicidal Behavior

Suicide attempts, injury to oneself associated with at least some level of intent, developing a plan or strategy for suicide, gathering the means for a suicide plan, or any other overt action or thought indicating intent to end one's life.

## Suicidal Ideation

Thinking about, considering, or planning for self-injurious behavior that may result in death. A desire to be dead without a plan or the intent to end one's life is still considered suicidal ideation and shall be taken seriously.

## Suicide Contagion

The process by which suicidal behavior or a suicide completion influences an increase in the suicide risk of others. Identification, modeling, and guilt are each thought to play a role in contagion. Although rare, suicide contagion can result in a cluster of suicides within a community.

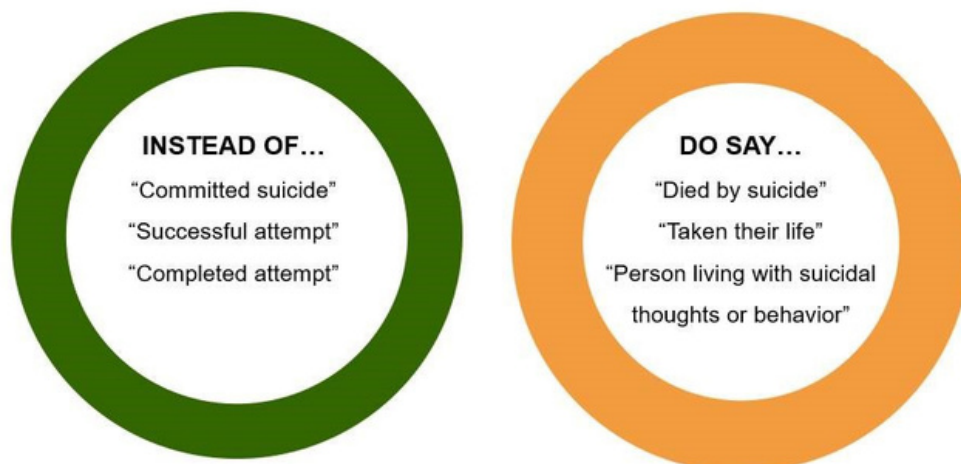
## Postvention

Suicide postvention is a crisis intervention strategy designed to assist with the grief process following suicide loss. This strategy, when used appropriately, reduces the risk of suicide contagion, provides the support needed to help survivors cope with a suicide death, addresses the social stigma associated with suicide, and disseminates factual information after the death of a member of the school community. Often a community or school's healthy postvention effort can lead to readiness to engage further with suicide prevention efforts and save lives.

# Terminology

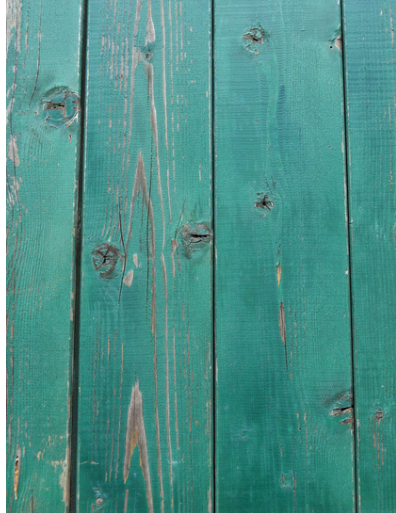
## Language Matters

To ensure safety and care for all, Marin County endorses the following terminology when discussing suicide:



# PREVENTION

## CORE COMPONENTS







# Prevention

## Overview

### Background

The entire school community of Marin County, along with our partners in the healthcare and mental health communities, are committed to keeping our young people safe and reducing the risk of suicide. As such, we recognize that the promotion of mental wellness and suicide prevention efforts form the bedrock of a comprehensive plan to reduce the risk of self-harm and suicide among our young people.

In September 2016, Governor Jerry Brown signed Assembly Bill (AB) 2246 into law. California Education Code Section 215, as added by 2246, (Chapter 642, Statutes of 2016) mandates that the Governing Board of any local educational agency (LEA) that serves pupils in grades seven to twelve, inclusive, adopt a policy on pupil suicide prevention, intervention, and postvention. AB 2246 requires LEAs to develop their policies in conjunction with suicide prevention experts, school and community stakeholders, and school mental health professionals.

In 2019, AB 2246 was expanded by AB 1767 to require all LEAs that serve pupils from kindergarten through sixth grade to also implement suicide prevention policies by the start of the 2020 school year. This is Education Code Section 215.

At the most basic level, all schools should have two essential components in place before implementing any additional suicide prevention activities:

- Protocols and procedures for helping students at possible risk of suicide; and
- Protocols and procedures for responding to a suicide death (and thus preventing additional suicides).

Once the two essential components are in place, schools should put into practice the following preventative activities, consistent with the mandates of AB 2246 and AB 1767. The core components are as follows.





# Prevention

## Core Components

### **Suicide Prevention Policy Grades K-12**

All school districts serving students in any grade K-12 are required to develop and adopt a policy on pupil suicide prevention. The policy needs to be developed in consultation with school and community stakeholders, the county mental health plan, school-employed mental health professionals, and suicide prevention experts to address the following:

- Procedures relating to suicide prevention, intervention and postvention;
- Steps/Means to identify appropriate mental health services, both at the school site and within the larger community;
- When and how to refer youth and their families to mental health services;
- Identify the needs of high-risk student groups; and
- For students in kindergarten and grades 1 to 6, inclusive, age appropriate strategies that are delivered and discussed in a manner that is sensitive to the needs of young students.

### **Model Youth Suicide Prevention Policy**

In collaboration with mental health professionals and the Student Mental Health Policy Working Group, the California Department of Education produced a Model Youth Suicide Prevention Policy to assist local districts and schools in developing a comprehensive plan to prevent, intervene, and react effectively to suicide in the school setting. A Model Youth Suicide Prevention Policy can be accessed at: <https://www.cde.ca.gov/ls/cg/mh/documents/modelpolicy.doc>. Information was retrieved from California Department of Education, Youth Suicide Prevention webpage located at: <https://www.cde.ca.gov/ls/cg/mh/suicideprevres.asp> where additional information can be found.







# Prevention

## Core Components Continued

### **Suicide Prevention Training & Education for *School Staff***

The school district's suicide prevention policy must address any training on suicide awareness and prevention to be provided to teachers of students in all of the grades served by the school district. This annual training will prepare staff to identify, support and refer students who may be experiencing thoughts of suicide. The following resources to support staff training regarding suicide prevention are available to Marin County School Districts:

- Kognito At-Risk for Early Childhood Educators
- Kognito At-Risk for Elementary Educators
- Kognito At-Risk for Middle School Educators
- Kognito At-Risk for High School Educators
  - Contact your district for access
- Signs of Suicide (SOS): Available for staff and students in grades 6-12
  - Contact the BHRSPreventionandOutreach@Marincounty.org for district access
- Keenan: Youth Suicide: Awareness and Prevention Training
  - Access is available to school districts through Personnel Departments that utilize Keenan
- LivingWorks offered by the California Department of Education is a 90-minute online suicide prevention skills training program available at no cost to CDE staff, teachers, and students through the 58 county offices of education.
  - Training can be accessed here: <https://www.lwyouthsummit.com/access-training>





# Prevention

## Core Components Continued

### Suicide Prevention Training & Education for Students

Suicide Prevention education should include the following:

- Information about how to recognize behaviors (warning signs) and life issues (risk factors) associated with suicide and mental health issues in oneself and others;
- Developing coping strategies for dealing with stress and trauma;
- Developing help-seeking strategies for oneself and others, including how to engage school-based and community resources and refer peers for help; and
- Stigma reduction surrounding mental health.

Student education surrounding suicide prevention should be integrated into other student health and wellness initiatives. Examples of national initiatives are National Suicide Prevention Month every September and Mental Health Awareness Month every May, both supported by local community agencies. Leveraging local community agency expertise and supportive platforms and resources are highly recommended.

LivingWorks offered by the California Department of Education is a 90-minute online suicide prevention skills training program available at no cost to CDE staff, teachers, and middle and high school students (ages 13+). Training can be accessed here:

<https://www.lwyouthsummit.com/access-training>.

### Suicide Prevention Hotlines | Student ID Cards

- All student IDs for students in grades 7-12 must have suicide prevention hotline information printed on either side of the ID. In 2021, Marin County implemented a local suicide prevention hotline that supplements existing national and state suicide prevention resources.
- The information included on the student ID must include the following:
  - National Suicide Prevention Life Line: 1-800-273-8255 (English);
  - Crisis Text Line: Text MARIN to 741741;
  - Trevor Project Hotline: 866-488-7386







# Prevention

## Core Components

(continued)

### **Suicide Prevention Training & Education for Parents/Guardians**

Parent/Guardian trainings on information about suicide related behavioral health issues, strategies to engage parents/guardians in suicide prevention programs and an explanation of district suicide prevention and policy procedures are essential. Meetings with parents/guardians can provide a helpful forum for disseminating information and answering questions. The Crisis Response Team coordinator and all other Crisis Response Team members, the superintendent, and the school principal should attend parent/guardian community meetings. Representatives from community resources, such as mental health providers and county crisis services, may also be invited to be present and provide information.

Additional resources from public agencies who may be able to support parent/guardian education follows:

- Talk Saves Lives: American Foundation for Suicide Prevention  
Link: <https://afsp.org/talk-saves-lives>
- Buckelew Programs - contact [info@buckelew.org](mailto:info@buckelew.org) to discuss parent/guardian focused training opportunities. Link: <https://buckelew.org/>
- Behavioral Health & Recovery Services provides suicide prevention resources. Link: <https://www.bhrsprevention.org/>

While not mandated, several districts in Marin County have provided opportunities for parents/guardians to engage in a Community Conversation about Suicide Prevention. These virtual conversations included students and experts in the field of suicide prevention.

**REFER TO THE LAST PAGE OF APPENDIX I (PAGE 72) FOR THREE EXAMPLES OF THESE PARENT/GUARDIAN COMMUNITY EVENTS**





# Prevention

## Core Components

(continued)

### **Screening (as appropriate, by qualified staff):**

Providing a safe, positive, and welcoming school climate and ensuring that students have trusting relationships with adults serves as the foundation for effective suicide prevention efforts. All school personnel have a legal and ethical responsibility to recognize and respond to suicidal thinking and behavior.

The Marin County Schools Wellness Collaborative in partnership with the Marin County Behavioral Health Department, Each Mind Matters, and the Marin County SELPA developed School-Based Risk Assessment Procedures to be applied within all public schools within Marin County. The procedures include the application of a suicide risk assessment tool that is grounded heavily in the Columbia-Suicide Severity Rating Scale. The procedures, suicide risk assessment tool and other applicable resources are available at the [Marin County Office of Education](https://www.marinschools.org/Page/268) website. Link Needed: <https://www.marinschools.org/Page/268>.

### **Develop and Prepare a Crisis Response Team:**

- Akin to staff preparing for a fire drill, school communities should proactively develop and prepare a Crisis Response Team (CRT) in the event there is a crisis.

**REFER TO SECTION "INTERVENTION: DEVELOPING A CRISIS RESPONSE TEAM" FOR PROTOCOLS SURROUNDING THIS (PAGES 13- 16)**

**REFER TO APPENDIX L (PAGES 76-78) FOR CRISIS RESPONSE FORMS**

### **Social Media:**

- Before a crisis takes place, schools can proactively set up guidelines and protocols surrounding the school's presence on social media;
- Guidelines can entail the following:
  - How social media is used (e.g., for broadcast, interaction, linkage);
  - Platform-specific templates that can be filled in and deployed rapidly in a crisis;
- Schools should determine which social media outlets to use based on the culture and school community; and
- Schools may also consider having a designated staff person to serve as a social media manager who can assist the school district's public information officer.



# INTERVENTION

## DEVELOPING A CRISIS RESPONSE TEAM





# Intervention

## Developing a Crisis Response Team (CRT)

### Summary

Assembling a functional and adaptable Crisis Response Team (CRT) with defined roles and responsibilities is critical. Effective crisis response does the following:

- Minimizes trauma and prevents further incidents through calmly and promptly addressing issues;
- Minimizes confusion; and
- Ensures individuals affected, directly or indirectly by the crisis receive the services and follow-up they need.

Building a CRT can also be an effective way to raise community awareness and build capacity in addressing mental health and suicide prevention.

### Objective

The objective of a CRT is to provide support and debrief those affected by suicide ideation, a threat, an attempt or a death. The CRT is responsible for developing and implementing suicide risk assessment, intervention and postvention policies and procedures. This team also reduces the possibility of other suicidal crises by increasing mental health awareness, suicide prevention education, referral for intervention and postvention activities.

### Membership

Possible members of the Crisis Response Team include, but are not limited to, a district office administrator, principal, assistant principal, school counselor, school psychologist, special education staff, outside agency therapist, teacher, law enforcement officer, school nurse, information technology staff, campus security staff and a member of the school office staff (secretary). **Alternates should be designated for key roles, such as the CRT Leader.**

Each school and system will have different CRT needs and resources to fill those needs depending on size, context, and capacity. Please use the following as a guide for best practices related to the development of a Crisis Response Team and adjust as necessary.





# Intervention

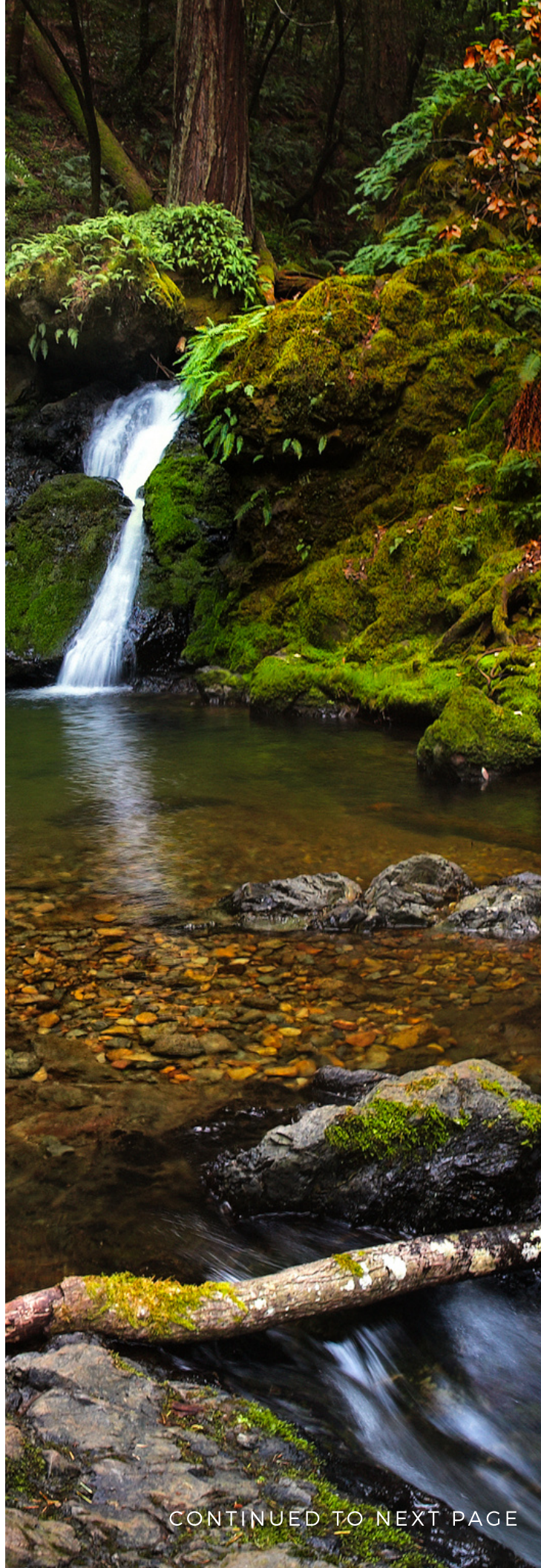
## Developing a Crisis Response Team Membership, Roles & Responsibilities

### **Crisis Response Team Leader**

- Coordinates annual training for the Crisis Response Team and for school faculty and staff;
- Mobilizes team members as needed;
- Coordinates team member assignments;
- Acts as the liaison between the school principal and district office when district support is deemed necessary; and
- Alerts Marin County Office of Education (MCOE) CRT Leader of district crisis response planning and needs.

### **All Members**

- Immediately respond to urgent situations when needed;
- Call 911/alert emergency personnel appropriately as needed;
- Inform CRT Leader regarding students of concern;
- Provide emergency first aid when needed; and
- Actively work to ensure the safety and well-being of all students.





# Intervention

## Developing a Crisis Response Team: Membership, Roles & Responsibilities

(continued)

### **Principal/Assistant Principal**

- Assumes responsibility for decisions made and actions taken;
- Briefs district office administration regarding status and ongoing needs;
- Acts as liaison with law enforcement or other authorized outside agencies;
- Notifies family members of crisis;
- Modifies school schedule as necessary;
- Works to resume normal scheduling/operation as soon as possible;
- Calls upon community resources for assistance as necessary;
- Secures campus;
- Communicates with other school sites as needed; and
- Evaluates school crisis response and revises as needed.

### **School Psychologist/Counselor**

- Conducts student interviews to assess for level of risk;
- Contacts and works with parents; and
- Documents all actions taken.

### **School Nurse or Health Technician**

- Administers first aid triage as appropriate; and
- Locates emergency contact information for student/s, as appropriate.

### **School Secretary**

- Maintains up-to-date contact information for all CRT members;
- Maintains consistent lines of communication with the principal; and
- Responds to crisis and all related inquiries

**REFER TO APPENDIX G (PAGE 65) FOR TALKING POINT  
GUIDE FOR ADDRESSING PUBLIC CALLS AND  
INQUIRIES FOR OFFICE STAFF**



# Intervention

## Developing a Crisis Response Team: Membership, Roles & Responsibilities

(continued)

### Teacher

- Monitors and responds to all warning signs;
- Ensures the safety of students during and after an emergency;
- If instructed to shelter in place, works to ensure that students do not enter or leave the classroom;
- Keeps students informed as directed by the principal;
- Works to control rumors with facts;
- Places focus of discussions on reactions students are having in the moment and how they can best support each other;
- Refers students in need to the Crisis Team Leaders; and
- Assures students the crisis is being handled and that they are safe.

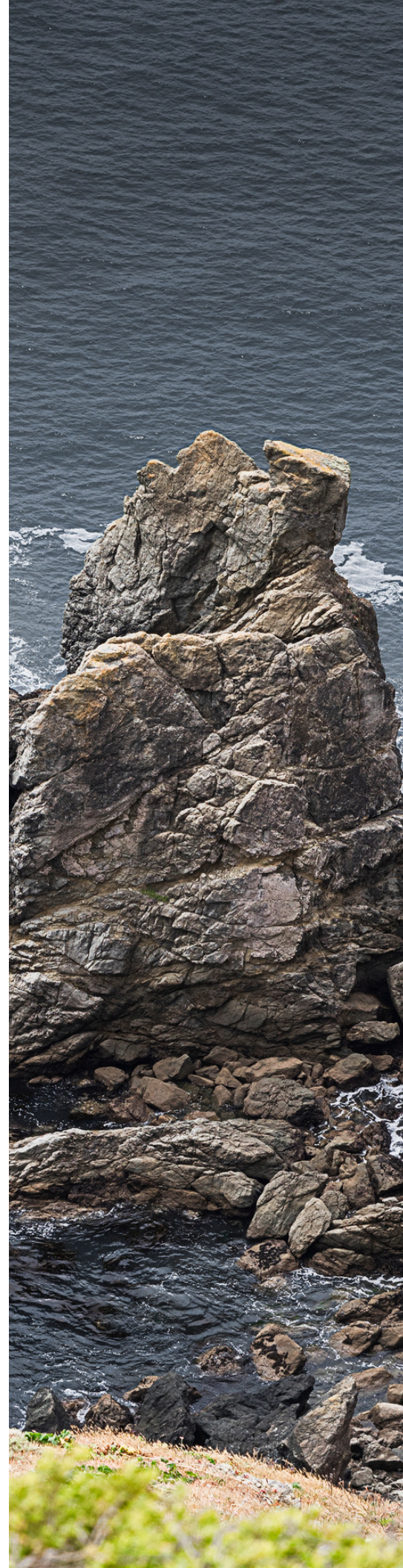
### Campus Security Staff/Law Enforcement

- Coordinates immediate securities and protections;
- Roams campus to help identify students in need; and
- Monitors any off-campus memorials or vigils if established.

### Media Spokesperson (Encouraged to Work with Law Enforcement)

[REFER TO APPENDIX R, S, AND T \(PAGES 94-99\) FOR SAMPLE MEDIA GUIDELINES, SAMPLE STATEMENTS AND KEY MESSAGES FOR MEDIA SPOKESPERSON.](#)

- Fields and responds to all media inquiries; and
- Coordinates with law enforcement on all media inquiries.







# POSTVENTION AS PREVENTION

## **Responding to a Suicide of a School Community Member**

Postvention (interventions conducted after a suicide) assists students in ways that promote the mental health of the entire school community and supports students experiencing a mental or suicidal crisis after the suicidal death of a school community member. The interventions are meant to help manage the various aspects of the crisis and prevent possible contagion. Support and resources are provided for students, staff, parents, and the entire community. All aspects of postvention strive to treat the loss in similar ways to that of other deaths within the school community and to return the school environment to its normal routine as soon as possible. **In this way, postvention is inextricably linked to prevention.**



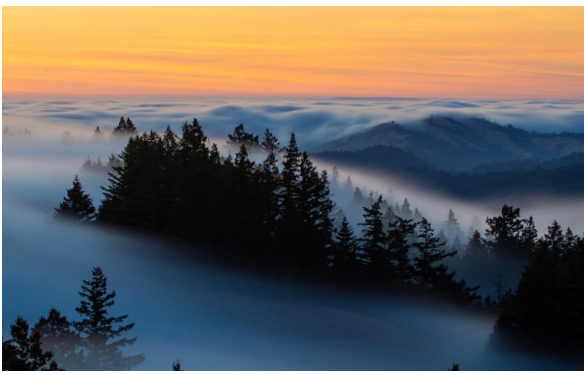
# POSTVENTION RESPONSE

STEPS TO TAKE IN THE IMMEDIATE AFTERMATH

## DAY ZERO - DAY OF EVENT







## Postvention

Day Zero - Day of Event

Step 1: Grounding

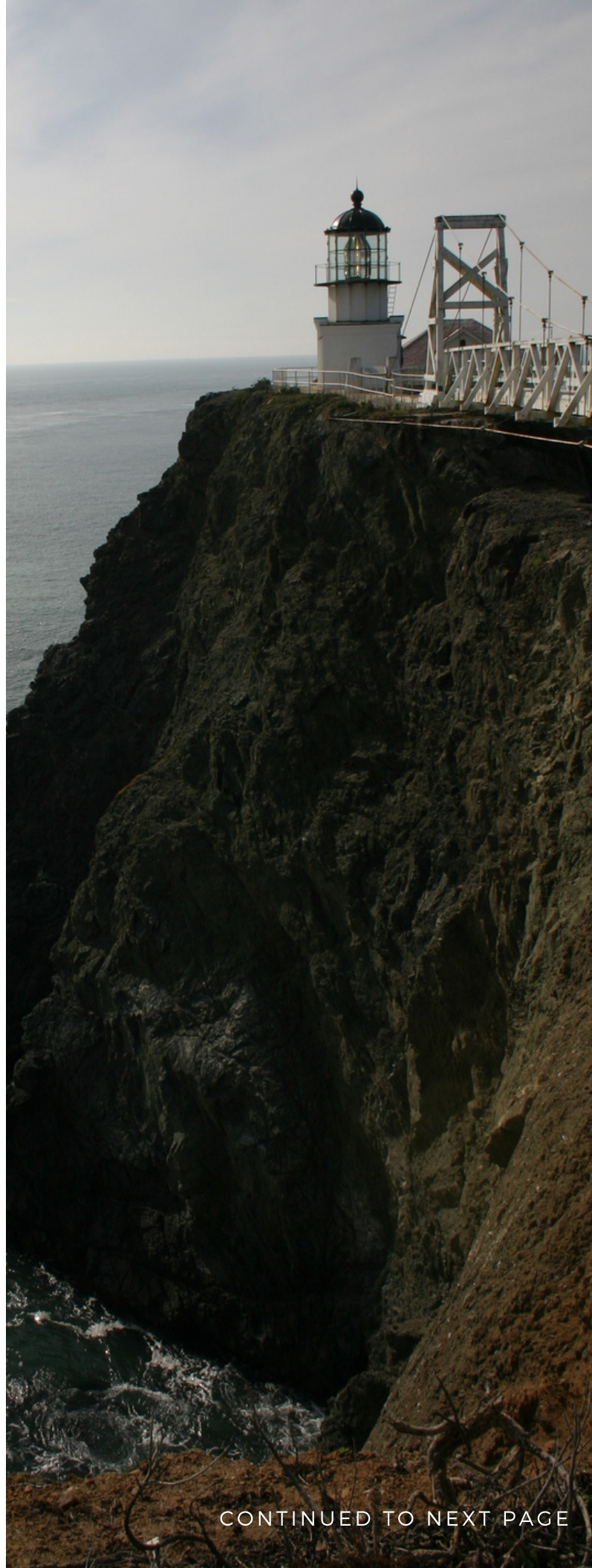
### 1.1 CRT Should Consider the Following

Take a moment to acknowledge your own fear, shock, confusion and concerns. Your attention will be pulled in different directions. You and your Crisis Response Team are the lighthouse in this storm. An organized and responsive implementation plan is a beacon of light and hope for those who are struggling. Remain focused on your plan and know that you are not alone. If at any point you have questions and/or require support, please contact the Marin County Office of Education Crisis Response Team Lead.

In the aftermath of a death by suicide, school communities must strike a delicate balance in their organized immediate short-term and long-term response strategies.

Postvention efforts should be long-term in nature. While it is crucial to swiftly respond to the needs of the school community, the response should be ongoing in scope and entail continuous effective support for the weeks, months and years to come.

What follows on the next several pages is guidance to developing an ongoing postvention strategic plan. Knowing that every school community is different, postvention strategies should be adapted to meet the school's unique needs at the time of the crisis.





# Postvention

Day Zero - Day of Event

## Step 2: Contact Key Individuals

### 2.1 Principal or Designee Verifies Death

- Verify details of death with law enforcement, coroner, or other local authority.

### 2.2 Principal Notifies Superintendent or Director of Student Services

- District Office staff notify schools where sibling/s and/or close relatives attend; and
- Turn off deceased student's record and his/her sibling/s in district attendance system - so as to eliminate any automated messages regarding the student's absence provided to the student's family.

### 2.3 Crisis Response Team (CRT) Leader Notified

- District's CRT is activated;
- CRT Leader from the Marin County Office of Education is notified of district's crisis response activities/needs; and
- CRT prepares resources and necessary forms to record provision of support and engages in triage to support students affected by the crisis.

**REFER TO APPENDIX L (PAGE 76) FOR CRISIS RESPONSE FORMS**



# Postvention

Day Zero - Day of Event

## Step 2: Contact Key Individuals (continued)

### **2.4 Principal or Designee Contacts Family**

- Collaboratively working with the family is the highest priority. They will often appreciate the support of the school community, and their cooperation can be valuable for effective postvention efforts. It is also important to consider and respect the cultural and religious traditions of the family related to suicide, death, grieving, and funeral ceremonies.

#### **REFER TO THE FOLLOWING APPENDICES FOR INFORMATION TO SUPPORT FAMILIES:**

- **APPENDIX N (PAGE 80): GRIEF AFTER SUICIDE**
- **APPENDIX O (PAGE 81) : RESOURCES FOR TEENS, FAMILIES AND STAFF BEREAVED BY SUICIDE**
- **APPENDIX P (PAGE 85) : SUPPORTING CHILDREN AND TEENS AFTER A SUICIDE DEATH**

- The CRT should identify which school professional should be requesting to meet with the family in their home. Typically, this is a principal and a school-based mental health professional. However, any individuals who have a pre-existing positive relationship with the family and/or have professional training in working with families in crisis may be utilized. If necessary, provide a translator (ideally one of the representatives speaks the language of the family).
- Allow the family to set the tone remembering the family is experiencing intense grief, shock and confusion;
- Take into consideration that not all suicides are clear. The family may not be able to initially accept the death as a suicide and may instruct the school not to disclose the death as a suicide;





# Postvention

## Day Zero - Day of Event

### Step 2: Contact Key Individuals (continued)

#### 2.4 Principal or Designee Contacts Family (continued)

- Sometimes the family's reaction to the death is contrary to the school's efforts to communicate utilizing suicide terminology. The school will need to respect the family's decision;
- Express sympathy as you would for any sudden death;
- Inquire about what the school can share about their loss;
- If the family is unwilling or not ready to share, help the family craft a message that they do want released in order to minimize rumors, misinformation, and speculation;
- Acknowledge that this is a significant tragedy and assist the family with understanding that crafting a message about the cause of death will help their child's friends who are struggling with the loss;
- Ask/Explain what the school can/will do to support siblings and the family;
- Ask if they know of any of their child's friends or girlfriend/boyfriend/partner who may need support;
- Briefly explain to the parent/s what the school is doing to support the school community during this time of loss;
- Inform the family that the school will be checking in with them in the upcoming days and weeks to determine what support the school can provide. Determine who is responsible to respond for the above and how this will be followed through;
- If appropriate, provide the parents/guardians of the deceased with information and resources about grief counseling ;

#### REFER TO THE FOLLOWING APPENDICES FOR INFORMATION TO SUPPORT FAMILIES:

- [APPENDIX N \(PAGE 80\): GRIEF AFTER SUICIDE](#)
  - [APPENDIX O \(PAGE 81\): RESOURCES FOR TEENS, FAMILIES AND STAFF BEREAVED BY SUICIDE](#)
  - [APPENDIX P \(PAGE 85\): SUPPORTING CHILDREN AND TEENS AFTER A SUICIDE DEATH](#)
- Identify the best person within the family to be the communication liaison with the school;
  - Make a note to follow-up with the family about funeral arrangements. Ask if the funeral will be private or if the family will allow students to attend;
  - In the event the family cannot be reached, use the deceased student's Emergency Contact information located in his/her file; and
  - Please be aware and ready that the family may change their mind on any of the above. Flexibility and understanding will be crucial.





# Postvention

Day Zero - Day of Event

Step 2: Contact Key Individuals (continued)

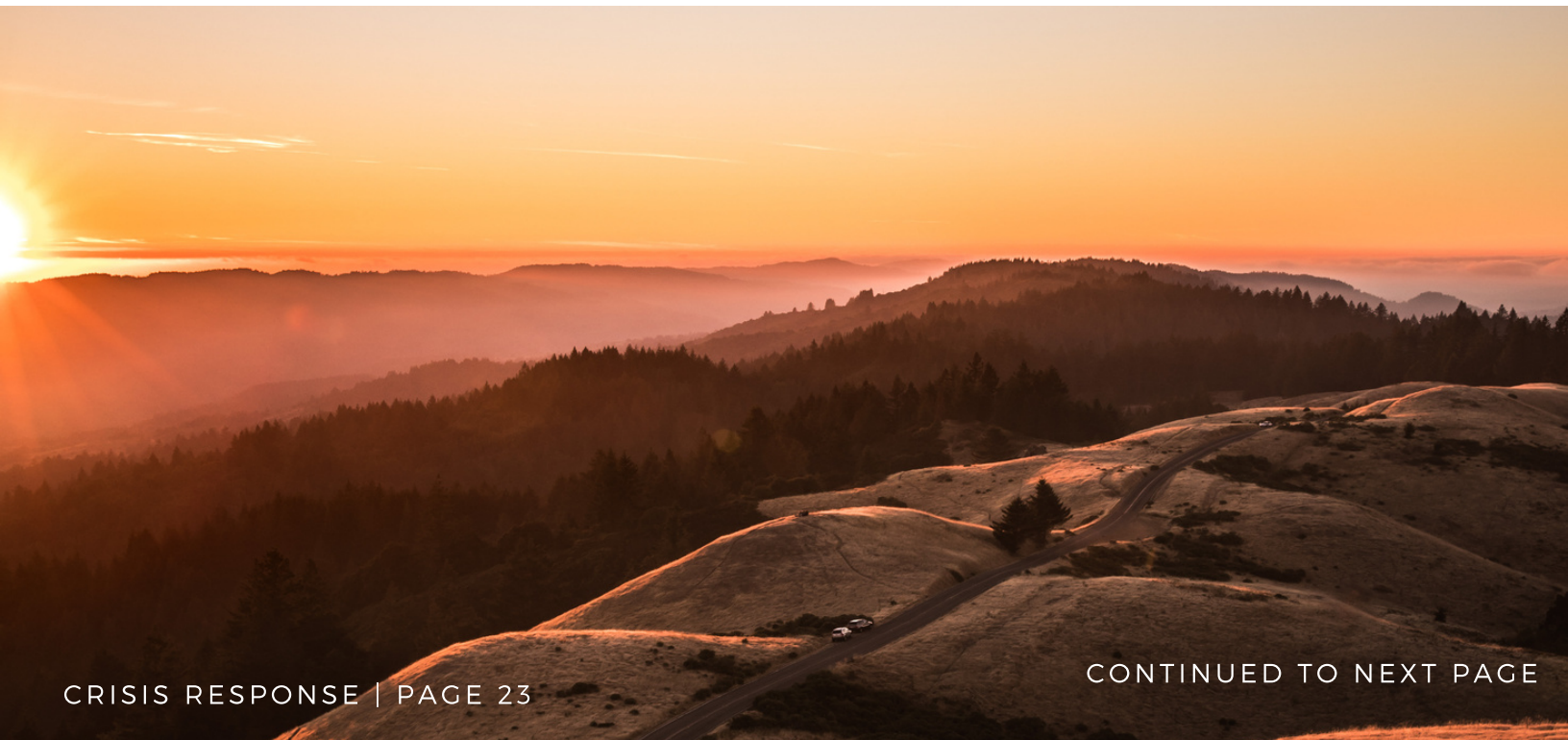
## 2.5 Notify Office Staff

- Ensure office staff are notified of all relevant elements and briefed regarding how to best respond to all inquiries.

[REFER TO APPENDIX G \(PAGE 65\) FOR GUIDE ON ADDRESSING PUBLIC CALLS & INQUIRIES FOR OFFICE STAFF](#)

## 2.6 Notify Community Based Organizations & Agencies

- Ensure organizations and agencies who support students before, during and/or after school are notified of all relevant elements.





# Postvention

## Day Zero - Day of Event

### Step 3: Notify School Community

#### **3.1 CRT Leader Notifies all Teachers, Staff, and School Officials**

[REFER TO APPENDIX H \(PAGE 66\) FOR SAMPLE AGENDA/GOALS FOR INITIAL STAFF MEETING](#)

- Hold a staff meeting before school opens to review the postvention process, if possible (see Day One Step 1);
- Provide teachers and staff with any information they may need to address the situation when students arrive. Provide careful attention and care to the student's current and former teachers and any other staff members who had a relationship with the deceased;
- Determine what CRT member(s) shall be responsible for notifying teachers and staff if the news of a suicide arrives while school is in session. All messaging to staff should be done in person;
- All announcements shall be made directly in the classrooms by staff. Announcements shall never be made over the school's public address system or during a school assembly;
- School staff familiar to the students shall make the announcement in the classroom. Following the announcement, respond to student concerns, provide support, and assess student reactions. Identify those students who may require additional support; and
- District crisis response activities shall be provided to designated Marin County school administrators in order to evaluate/determine communication and response needs within other school communities.

#### **3.2 Principal Notifies Families**

[REFER TO APPENDIX A - C \(PAGES 49-57\) FOR SAMPLE LETTERS TO FAMILIES](#)

[REFER TO APPENDIX I \(PAGE 70\) FOR SAMPLE AGENDA FOR PARENT/COMMUNITY MEETING](#)

- Principal to notify families regarding the student's death and the school's response;
- Provide communication to the families in the most expedient manner possible so families will know what conditions will be present within the school setting when the death is announced;
- Ensure the letter includes a list of local resources designed to help students and families cope with grief and loss;
- What is communicated with the school community will first be determined by the cause of death and then by how the family wishes to convey that information. Please consider that any letter disseminated to the broader community may be received by the media; and
- Consider holding a Parent/Community Meeting.



# POSTVENTION RESPONSE

STEPS TO TAKE IN THE IMMEDIATE AFTERMATH

## DAY ONE - FIRST SCHOOL DAY AFTER EVENT





# Postvention

## Day One - First School Day After Event

### Step 1: Hold Staff Meeting

#### 1.1 CRT Leader and Principal Conduct Staff Meeting

**REFER TO APPENDIX H (PAGE 66) FOR SAMPLE AGENDA/GOALS FOR INITIAL STAFF MEETING**

#### **Staff Meeting Goals:**

- Convey what information can be relayed to students. Avoid detailed descriptions of the suicide including specific method and location;
- Avoid oversimplifying the causes of suicide and presenting them as inexplicable or unavoidable. Do not use phrases "committed suicide" or "failed suicide";
- Emphasize recent treatment advances for depression and other mental illness;
- Prepare staff to inform students in first period classes;

**REFER TO APPENDICES D, E, & F ( PAGES 58-64) FOR TALKING POINT GUIDED NOTIFICATIONS TO STUDENTS**

- Identify staff uncomfortable notifying students of the death. Designate CRT members or counselors to support those staff members in their classrooms throughout the school day;
- Remind staff of the name of the district's designated media spokesperson. All outside requests for comments or information from various media outlets shall be directed to this individual;
- Work to control rumors and provide known facts;
- Provide necessary support to staff;
- Inform teachers that roving substitute teachers are available for those teachers who may need a break;
- Advise staff that extra support is available for those who need it;
- Announce the availability of an end-of-day meeting designed for staff to debrief and obtain any necessary support;

**REFER TO THE LAST PAGE OF APPENDIX H (PAGE 69) FOR SAMPLE AGENDA/GOALS FOR END-OF-DAY STAFF MEETING**

- Provide staff with district policy regarding unauthorized visitors on campus and how to best address the presence of unknown individuals during postvention response;
- Share location designated for parents who come to campus to ask questions and express concerns to congregate and to be addressed by identified CRT member;





# Postvention

## Day One - First School Day After Event

### Step 1: Hold Staff Meeting

(continued)

#### **1.1 CRT Leader and Principal Conduct Staff Meeting (continued)**

- Provide staff with resources to support their personal needs related to coping with grief and loss;

**REFER TO THE FOLLOWING APPENDICES FOR SUPPORT**  
**APPENDIX J (PAGE 73): TIPS FOR TALKING ABOUT SUICIDE**  
**APPENDIX K (PAGE 75): RESPONDING TO SUICIDE SURVIVORS**  
**APPENDIX M (PAGE 79): FACTS ABOUT SUICIDE IN ADOLESCENTS**  
**APPENDIX N (PAGE 80): GRIEF AFTER SUICIDE**  
**APPENDIX O (PAGE 81): RESOURCES FOR THOSE BEREAVED BY SUICIDE**

- Work to avoid tributes by friends, school wide assemblies and sharing any information over the school's PA system that may romanticize the death. Positive attention given to someone who has died (or attempted to die) by suicide can lead vulnerable individuals who desire such attention to take their own lives;
- Remind staff of risk factors and warning signs and to use Question, Persuade, Refer (QPR) protocols or its equivalent as situation warrants;
- Inform staff where services are available on campus for students who have been identified to be at risk;
- Remind staff that all students must be sent in pairs/groups or escorted by an adult. No students are to travel alone when seeking additional support services;

**REFER TO APPENDIX L (PAGE 76): CRISIS RESPONSE FORMS**

- Identify designated location/s on campus for students who would like to support one another with a trusted adult nearby. Determine who should monitor these stations. Provide snacks, if possible, along with art and writing supplies for creative expression that may later be preserved for the student's family;
- Send a follow-up email at the conclusion of the staff meeting that includes a summary of the information shared/discussed in the meeting and any additional details that were not available at the time of the meeting - such as a listing of local resources.





## Postvention

### Day One - First School Day After Event Step 2: Support Students During School

#### 2.1 Develop Appropriate Approach

- A school's approach is most effective when it provides different levels of support depending on student needs.
- It is critical that an opportunity to meet in smaller groups be given to students in need of more in-depth support, augmenting the support given to all students.
- If the deceased student participated in sports, clubs, or other extracurricular activities, the first practice, game, rehearsal, or meeting after the death may be difficult for the other students. These events are opportunities for the adults in the school community to support the students to appropriately acknowledge the loss.

[REFER TO APPENDIX D, E, F & G \(PAGES 58-65\) FOR SAMPLE TALKING POINT GUIDED NOTIFICATION TO STUDENTS AND PUBLIC AND APPENDIX J \(PAGE 73\) FOR TIPS FOR TALKING ABOUT SUICIDE](#)

#### 2.2 Counselors or CRT Members in Classrooms

- Counselors or CRT members follow deceased student's schedule to assess student needs and to assist teachers with presenting and processing the information with students.
- The presence of counselors or CRT members in classrooms provides opportunity to:
  - Share accurate information about suicide;
  - Prepare students for the kinds of reactions that can be expected after hearing about a peer's suicide death;
  - Provide students with safe coping strategies they can utilize to support them in the coming days and weeks; and
  - Answer questions to dispel any rumors.





## Postvention

Day One - First School Day After Event

Step 2: Support Students During School

(continued)

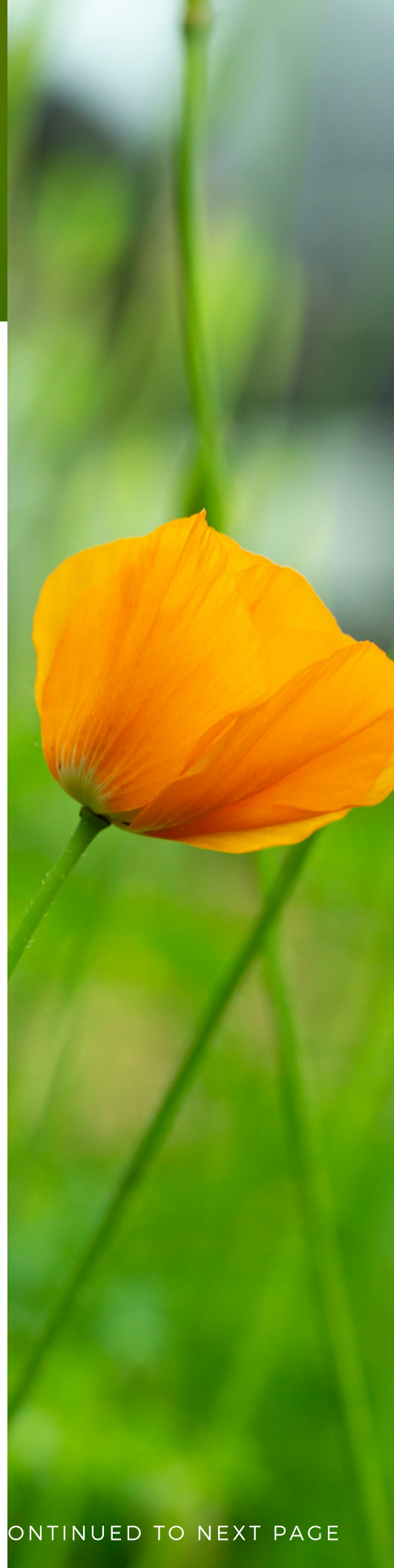
### 2.3 Identify, Monitor, and Support Students

REFER TO APPENDIX L (PAGE 76) FOR CRISIS RESPONSE FORMS

- Recognize that students who were close to the deceased student and known vulnerable students may be at risk for suicide. Assign a CRT member to develop a list of students of concern with input from others; and
- Meet with vulnerable students and document/follow-up as needed.
- If a student is deemed to be at risk for suicide, use the [School-Based Suicide Risk Assessment Protocol Toolkit](#). Link: <https://bit.ly/MarinSchoolsSuicideRiskAssessment>

### 2.4 Staff Circulate Campus

- Designate staff members to roam campus to determine who might be in need of support and to monitor for rumors; and
- Meet with students in small groups, including established groups of the deceased (e.g., sports teams, clubs, friend groups, etc.) to provide emotional support. Meeting should be facilitated by a mental health professional.







# Postvention

## Day One - First School Day After Event Step 3: Support Staff During & After School

### 3.1 Care for Faculty, Staff, & CRT Members

- The potential impact that a suicide can have on a staff or CRT member should be considered. School leaders should provide and promote a culture in which staff feel comfortable asking for help.
- Trained mental health professionals should intentionally seek out those faculty and staff who had direct or close contact with the deceased student to check-in;
- Provide counseling as necessary before, after and during school hours if possible;
- Provide roving substitute opportunities as necessary for teachers;
- Create a space and opportunity where all faculty and staff will be able to express concern and ask questions; and
- Provide contact information for local mental health resources to ensure staff impacted are aware of public and private agencies that are available to provide support.

**REFER TO APPENDIX O (PAGE 81) FOR RESOURCES FOR TEENS,  
FAMILIES AND STAFF BEREAVED BY SUICIDE**

- In some cases, school administrators turn to their mental health professionals to organize and support the school response. Often mental health professionals have never helped respond to a death by suicide before and may be working through their own grief. It can be helpful to contact an agency such as Marin County Behavioral Health and Recovery Services (BHRS), By the Bay Health, and Buckelew Programs who are available to help staff process during times of crisis.

**REFER TO PAGE 83 OF APPENDIX O FOR INFORMATION ON THE  
ABOVEMENTIONED RESOURCES**







# Postvention

## Day One - First School Day After Event

### Step 4: Hold End-of-Day Staff Meeting

#### **4.1 CRT Staff Conduct Staff Meeting After the School Day Ends**

**REFER TO THE LAST PAGE OF APPENDIX H (PAGE 69) FOR SAMPLE AGENDA/GOALS FOR END-OF-DAY STAFF MEETING**

- Acknowledge it has been a difficult day for everyone;
- Offer verbal appreciation; and
- The purpose of the meeting is to be an opportunity for staff to share experiences and challenges from the day as well as identify needs for support for the following school day, including any students of particular concern.

#### **4.2 Establish Ongoing Staff Support**

- Inform staff of the continued availability of roving substitute teachers and counselors; and
- Determine anticipated needs based upon expressed needs and experiences in the classroom during "day one."

#### **4.3 Staff Expression and Self-Care**

- Create conditions where staff can express concerns and ask questions. A CRT member may be designated as the point person to facilitate this process; and
- Emphasize the importance of self-care for all staff since they have been primarily focused on taking care of student needs thus far.

#### **4.4 Continuous Monitoring of Needs**

- Remind staff to continue to identify, monitor, and support students that may be vulnerable. Risk factors for imitative behavior include students physically proximal to the suicide, emotionally proximal to the victim, and/or psychologically vulnerable (history of depression, previous suicidal behavior, suicide in family, history of trauma or loss);
- Disseminate information regarding funeral arrangements if known;
- Review plans for the next day; and
- Remind staff of the importance of clear and careful documentation of all crisis response efforts for future planning.



# POSTVENTION RESPONSE

## MEMORIALIZATION & FUNERAL CONSIDERATIONS





# Postvention

## Appropriate Memorialization Considerations

[REFER TO APPENDIX Q \(PAGE 89\) FOR MEMORIALS AFTER A SUICIDE: GUIDELINES FOR SCHOOLS AND FAMILIES](#)

### **All student memorials should be considered as follows:**

- Any student memorial should have the goal of being life affirming, raising awareness, and reducing stigma;
- Encourage contributions to suicide prevention or mental health organizations such as American Foundation for Suicide Prevention (AFSP), or to any other local/national organization that supports youth mental health promotion or suicide prevention;
- District policy should provide ample guidance regarding student memorials. If silent, policy may need to be amended to include language regarding permissible materialization on school grounds or school-sponsored affairs. Strive to treat all student deaths the same way, regardless of the circumstances of the death. While it can be challenging to balance compassion with caution, it is important that the school develop a consistent policy that addresses all requests for memorials in the same way;
- Adolescents are especially vulnerable to the risk of suicide contagion; therefore, it is essential to memorialize the student in a way that does not inadvertently glamorize or romanticize either the student or the death;
- Seek all opportunities to emphasize the connection between suicide and underlying brain conditions such as depression or anxiety that can cause substantial psychological pain but not be apparent to others (or that may manifest as behavioral problems or substance abuse);
- Spontaneous memorials should be short-term in nature;
- Determine a date/time to gather and collect materials generated from spontaneous memorials so they can be organized and given to the family;
- Inform students and staff well in advance of the collection of spontaneous memorial materials when the memorial will be removed and provided to the family; and
- CRT members should be available to students concerned about rumors or social media postings regarding the student's death. Social media may be used to effectively disseminate accurate information and to promote suicide postvention efforts.



# Postvention

## Appropriate Memorialization Considerations

(continued)

If a memorial dramatizes, sensationalizes, or glamorizes the student, or creates an opportunity for continuing attention to the death, it is not recommended. To best address student memorials consider the following:

- Do not send all students from school to funeral or stop classes for a funeral;
- Do not conduct memorial or funeral services at school for the suicide victim;
- Do not establish permanent memorials such as plaques or dedicating yearbooks to the memory of suicide victim;
- Do not dedicate songs or sporting events to the suicide victim;
- Do not fly the flag at half-staff for the suicide victim;
- Do not hold assemblies focusing on the suicide victim, or have a moment of silence in all-school assemblies;
- Do not put a notice on the school's outdoor message board that are personalized to the suicide victim;
- Do not let students create and wear apparel like tee-shirts, sweatshirts or armbands that honor the suicide victim;
- Do not plant trees or gardens that honors the suicide victim;
- Do not place plaques in school corridors that are dedicated to the suicide victim;
- Do not name rooms or sports venues that honor the suicide victim;
- Do not create banners dedicated to the suicide victim;
- Do not make special acknowledgements at graduation ceremonies that honor the suicide victim; and
- Do not dedicate yearbooks, dances, sporting events to the suicide victim.



# Postvention

## Appropriate Memorialization Considerations

(continued)

An appropriate memorial is life-affirming and supports coping, resilience and awareness surrounding suicide prevention and mental health in general. What follows are considerations to memorialize the loss.

- Promote activities to prevent other suicides (e.g., encourage crisis hotline volunteerism);
- Encourage events and collaborate with community agencies that promote suicide prevention and mental health awareness such as events that National Alliance on Mental Health (NAMI) of Marin organizes for the school community;
- Develop living memorials, such as student assistance programs, that will help others develop effective coping skills;
- Encourage affected students, with parental permission, to attend the funeral;
- Donate/Collect funds to help suicide prevention programs, a local crisis center, and/or help the family with funeral expenses;
- Provide school newspaper coverage consistent with the media considerations identified in this document;
- Write notes to the family;
- Enhance literature or resources available to students that highlight mental health awareness, suicide prevention and resilience;
- Create community-based service activities in the school that emphasize the importance of students taking care of each other; provide opportunities for taking an active role in helping others;
- Utilize social media to share Crisis Text Line or Suicide Prevention contact numbers.

**REFER TO APPENDIX U (PAGE 100) FOR AN EXAMPLE OF A SCHOOL'S NEWSPAPER'S MEMORIALIZATION OF A DECEASED STUDENT.**





## Postvention

### Funeral/Memorial Service Considerations

- Discuss with the family the importance of informing the individual/s conducting the funeral about the risk of suicide contagion among adolescents;
- Communicate the importance of emphasizing the connection between suicide and underlying brain conditions (such as depression), as noted in the Appropriate Memorialization section (pages 33-35) of this document;
- Encourage the family to consider holding the funeral outside of school hours if at all possible. If the family asks, the principal should communicate with the funeral director regarding logistics, including the need for mental health professionals and/or grief counselors to be present at the funeral; and
- Depending on family wishes, the principal should disseminate information about the funeral to students, parents, and staff as soon as the information becomes available. Information shall include the following:
  1. Location of the funeral;
  2. Time of the funeral (keep school open if the funeral is held during school hours); and
  3. What to expect (e.g., whether there will be an open casket, etc.).
- Appropriate school personnel are encouraged to attend the funeral whether or not it is during or outside of school hours.





# POSTVENTION RESPONSE

LAW ENFORCEMENT, MEDIA & SOCIAL MEDIA

CONSIDERATIONS





# Postvention

## Working with Law Enforcement Considerations

- Law enforcement might be an important source of information about the death, particularly if there is an ongoing investigation (e.g., if the death has yet to be determined on whether or not it is a suicide or homicide);
- Should there be an ongoing investigation, the school needs to be in close communication with law enforcement to determine:
  - What the school district can and cannot say to the school community so as not to interfere with the investigation; and
  - Whether there are certain students or staff who must be interviewed by the police before the school can debrief or counsel them in any way. If school staff are to be interviewed, the school may want to consult its legal counsel prior to the interview/s.
- There may also be situations in which the school has information that is relevant to the ability of the police to keep students safe. For example, the school may become aware that students have established a memorial off-campus and may be engaging in unsafe behavior; and
- The school may also be in a unique position to brief the police (and even the family of the deceased student) about what to expect at the funeral or memorial service in terms of turnout and other safety concerns.



Taken From:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center. (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.



# Postvention

## Working with Media Considerations

A death by suicide of a school-age student has the ability to attract a high level of media attention. When multiple suicide deaths occur, media interest can be especially intense. To minimize contagion, it is imperative the school works directly with the media to develop safe, factual and concise messaging. Contagion is in part connected to the amount, duration, prominence, and content of media coverage.

- CRT member to liaise with the family to determine their wishes about communication within the school community and media outlets;
- CRT leader to direct all media inquiries to the district's media spokesperson;
- If appropriate, media spokesperson to liaise with law enforcement on communication with media;
- A statement should be prepared in advance and a hard copy provided to the identified media spokesperson when contacted by outside organizations for comments or information regarding the death;
- Provide media with media guidelines and sample media statement for reporting on suicide.

**REFER TO APPENDIX R, S & T (PAGES 94-99) FOR REPORTING ON SUICIDE: MEDIA GUIDELINES, KEY MESSAGES FOR MEDIA SPOKESPERSON AND SAMPLE MEDIA STATEMENT**





# Postvention

## Working with Media Considerations

(continued)

### Do Not:

- Do not glamorize or romanticize the victim or the suicide (this is essential);
- Do not permit the media to conduct interviews on school grounds or to attend parent and student group meetings in order to protect information shared;
- Do not oversimplify the causes of suicide;
- Do not describe the details of the method;
- Do not include photographs of devastated mourners or the location of the death, which can draw vulnerable youth who may be desperate for attention and recognition;
- Do not use language, such as "committed suicide." (This is a tragic event and not a crime); and
- Do not use graphic language of any kind.

### Do:

- Use safe reporting language, such as "died by suicide." or "took his/her own life."
- Include messages of hope and recovery;
- Consult suicide prevention experts;
- List the National Suicide Prevention Lifeline number (1-800-273-8255) and the Crisis Text Line: Text MARIN to 741741;
- Provide information regarding available community resources both locally and nationally;
- Encourage the media to acknowledge the pathological aspects of suicide; and
- Utilize World Health Organization guidelines for reporting death to the media;
  - Suicide is never the result of a single event;
  - Avoid providing details of the method or the location a suicide victim uses that can be copied;
  - Provide the appropriate vital statistics (i.e. as indicated provide information about the mental health challenges typically associated with suicide); and
  - Provide information about the resources that can help address suicidal ideation.



# Postvention

## Working with Social Media Considerations

[REFER TO APPENDIX V \(PAGE 101\) FOR INFORMATION THAT CAN BE DISSEMINATED ONLINE AND A SAMPLE SOCIAL MEDIA MESSAGE POST](#)

A suicide death can create an emotionally raw and intense atmosphere in the community where initially, schools may consider stifling students' use of Social Media, a task nearly impossible to manage. However, Social Media has the potential to be an effective, positive, and therapeutic tool that can empower teens. By collaborating with key students to determine and monitor the relevant social networking platforms, schools can methodically use social media in a positive and effective manner to do the following:

- Disseminate factual and accurate information;
- Promote prevention-oriented safe messaging minimizing suicide contagion;
- Share grief and mental health resources; and
- Identify, intervene and support students who may need additional support.

Following a crisis event, students are likely to be communicating about the event via social media sites. To reach as many students as possible, schools can also use the Internet as an effective tool for providing resources and support.

### **Rumor Control/Triage**

Students will likely be using technology to communicate following a crisis event. Social media sites can be monitored to determine if incorrect information is being distributed. Monitoring will help the school staff address rumors and provide students with factual information at school in the days following the event. The sites can also be monitored for threats and statements that may indicate that a student is in need of more intensive support.

### **Information and Resources**

Social tools such as texting, Twitter, Snapchat, YouTube, and Facebook can be used to provide factual information about the crisis event. Links to news stories, postvention activities planned by the school, memorial information, caregiver information (e.g., how to monitor children's reactions, how to talk about death), reporting procedures for students concerned about peers, and links to both local and national resources can be provided.



# Postvention

## Working with Social Media Considerations

(continued)

### **Suicide Postvention**

Following a suicide, an individual's social page may include messages from friends and family. It often becomes a place for people to memorialize and discuss the event. This exposure may increase risk of contagion, and individuals may express ideation. Schools can take steps to support students by considering the following:

- Find profiles of the student using a search engine like Google, Pipl, or Bing;
- If the profile is private, ask friends and family who may have access;
- Once access is available, post consistent local and national resources across profiles;
- Consider resource language such as: "The best way to honor [name] is to seek help if you or someone you know is struggling. If you are feeling lost, desperate, or alone, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255). The call is free and confidential, and crisis workers are available 24/7 to assist you. To learn more about Lifeline, visit [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org); and
- Contact site administrators and ask them to post resources and language similar to the above. Continue to monitor sites for harmful messages or ideation.

### **Involve Students**

Students are in the best position to assist in the school's social media efforts. Partnering a member of the Crisis Response Team who is familiar with social media with student leaders will enhance the credibility and effectiveness of the school's social media efforts.

Students recruited to help should be reassured that school staff are only interested in supporting a healthy response to their peer's death, not in thwarting communication. They should also be made aware that staff are available to provide support if they see a social media post that indicates someone may be at risk of suicide.

Students can also:

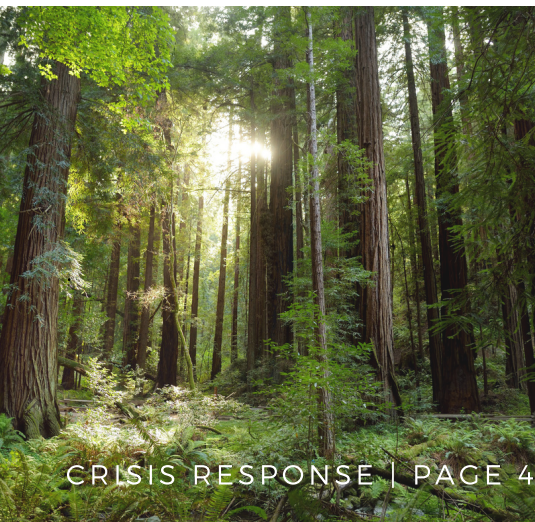
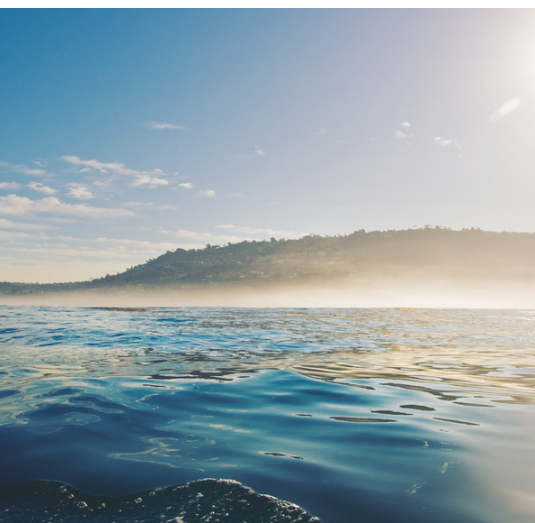
- Help identify the particular media favored by the student body;
- Engage their peers in honoring their friend's life appropriately and safely; and
- Inform school or other trusted adults about online communication that may be worrisome or inappropriate.



# LONG-TERM RESPONSE

STEPS TO TAKE IN LONG-TERM AFTERMATH

## CONSIDERATIONS





# Long-Term Response

## Step 1: Implement Long-Term Response Protocol

### 1.1 CRT Leader Oversees Coordination of Postvention Activities

- Partner with other schools who have experienced crisis to gain insight, support and learn from them;
- Schedule daily debriefs with the CRT while in initial assessment period to discuss vulnerable students who need follow-up, and review confidential student database to monitor student response to intervention/s;
- Discuss with the deceased student's family any concerns they may have for siblings, friends, partners, or acquaintances and follow-up accordingly. Counselor monitors and checks in with vulnerable students as long as needed to alleviate concerns. Documentation occurs regarding names of students, date/time of check-in, assessment of areas of concern, follow-up on referrals, and notifications on standardized forms;
- Send email updates to staff to keep them informed regarding funeral arrangements; mental health resources and supports available to them; physical, emotional, cognitive, and social manifestation of grief in students; and the referral process for students of concern;
- Develop prearranged protocol for removing personal items from the student's locker and/or desk/s, while respecting the family's wishes for privacy and/or support;
- Convene CRT and facilitate a tactical debriefing of what worked well and what could be improved upon during the initial assessment period (1-2 weeks postvention). CRT leader documents successes, challenges, and recommendations for improvement to be incorporated into the district's existing postvention protocols;
- Convene a debriefing with all agencies who provided crisis response support to evaluate current needs and engage in long-term planning; and
- Continue to monitor students for warning signs of suicide. Utilize the use of Question, Persuade, Refer (QPR) Gatekeeper techniques or its equivalent as needed. QPR is available by contacting [BHRSPreventionandOutreach@marincounty.org](mailto:BHRSPreventionandOutreach@marincounty.org).

### 1.2 Enhance Identification and Support of Vulnerable Students

- Identify students in need and refer to counselor;
- Attendance office shall alert administrator and/or counselor about increased student absences.
- Continue to monitor and address rumors;
- Campus supervisor to rove campus throughout the day and monitor the emotional climate on campus (e.g., an increase in student aggression, school delinquency, groups of students grieving, etc.);
- Continue to meet with students in small groups, especially those groups of which the deceased student was a member or who have been predetermined to be at risk; and
- Recommend and provide more individual supports for students, while making sure to offer and provide continued support to students if needed.



# Long-Term Response

## Step 1: Implement Long-Term Response Protocol

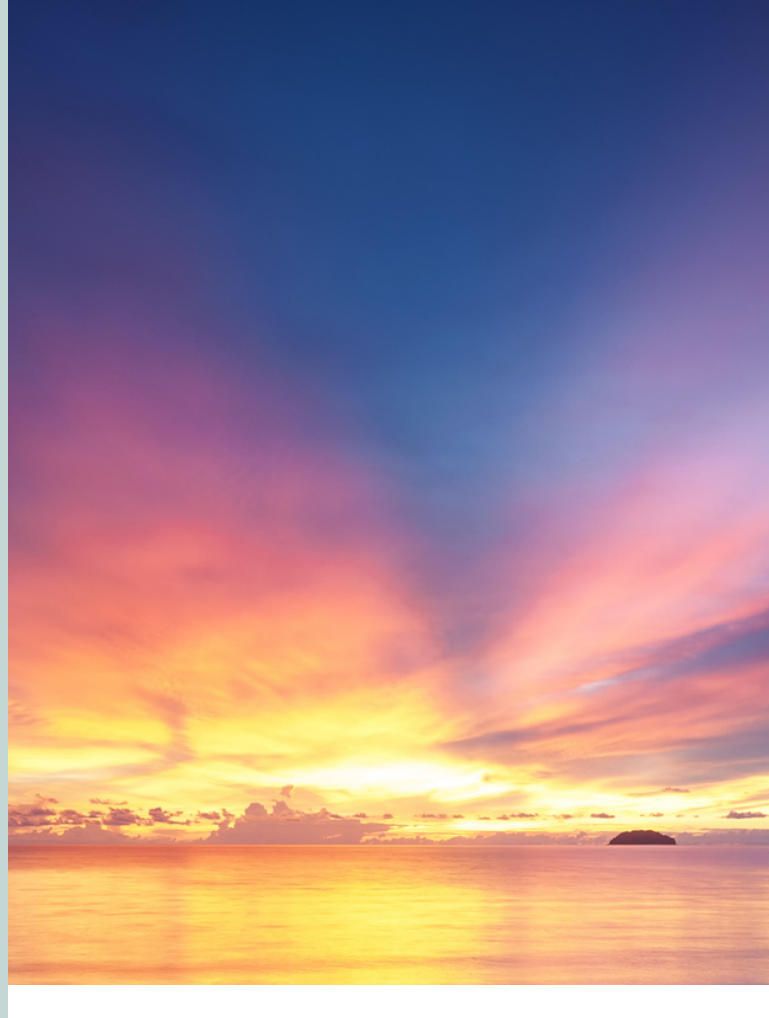
(continued)

### 1.3 Provide Long-Term Care for Faculty, Staff, & CRT Members

- Continue to provide ongoing support and resources to staff, mental health professionals and CRT members as they may be working through their own grief. It is crucial to have ongoing and long-term wellness support systems in place.
- Leverage the work of local public agencies such as Marin County Behavioral Health and Recovery Services (BHRS), By the Bay Health, and Buckelew Programs whose staff are experienced in working through a crisis and are able to provide support through the grieving process.
- Continue to have mental health professionals intentionally seek out and check-in with those staff who had direct or close connection with the deceased student;
- Continue to ensure the leads of the postvention process are cared for with resources and support systems; and

#### REFER TO THE THIRD PAGE OF APPENDIX O (PAGE 83) FOR WAYS TO CONNECT WITH OTHER LOSS SURVIVORS OR SUPPORT GROUPS

- Consider providing a forum for the school community that focuses on suicide prevention efforts. See the final page of Appendix I for examples of three forums provided to the school community.







## Long-Term Response

### Step 1: Implement Long-Term Response Protocol

(continued)

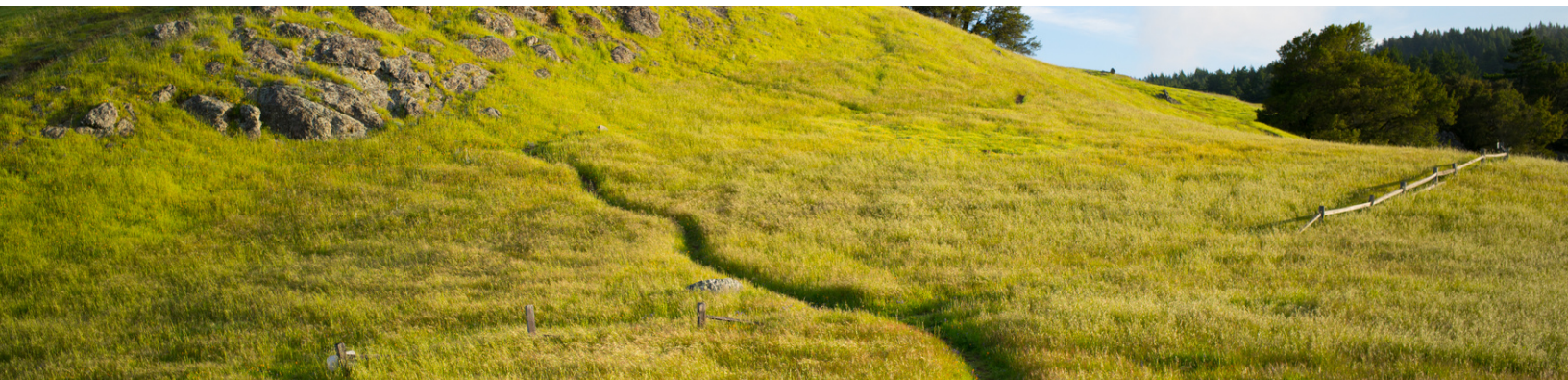
#### 1.4 Prepare for Anniversaries and Special Events

- Prior to graduation ceremonies for the deceased student's class, check with family regarding any requests;
- Acknowledgment of a student who has died by suicide should be consistent with acknowledgment of a student who has died by any other means. District policy shall guide response;
- Be acutely aware of special events (e.g., proms, birthdays, etc.), holidays, and anniversaries, as these may activate possible stress/grief responses (physical, emotional, cognitive) in students and/or staff; and
- The probability of contagion is heightened on the anniversary of the student's death as well as on other meaningful days.

[REFER TO APPENDIX Q \(PAGE 89\) FOR MEMORIALS AFTER A SUICIDE: GUIDELINES FOR SCHOOLS & FAMILIES](#)

#### 1.5 Continuously Monitor Desire for Long-Term Memorials

- Ensure office staff are notified of all relevant elements and briefed regarding how to best respond to all inquiries.





# Long-Term Response

## Step 1: Implement Long-Term Response Protocol

(continued)

### 1.6 Support Siblings

- Provide support for siblings of the deceased student; and
- Coordinate the provision of support with parents.

### 1.7 Support Girlfriend/Boyfriend/Partner

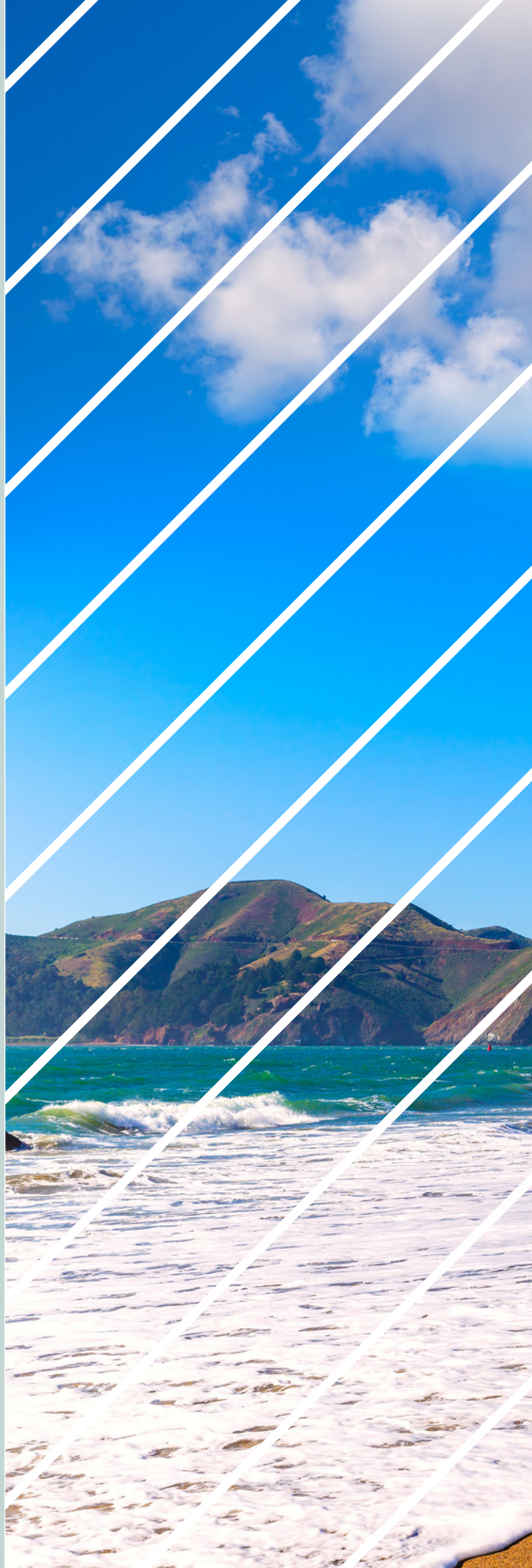
- If applicable, provide support for the girlfriend/boyfriend/Partner of the deceased student.

### 1.8 Remain in Contact with Family

- Principal shall remain in contact with the family throughout the long-term postvention protocols; and
- Regular contact should be made through the funeral and into the weeks following the student's death.

### 1.9 Support the Broader School Community

- Provide parent/community education about suicide, grief, and self-care within the first months following the death; and
- Provide staff and parents with information about the warning signs of suicide, risk and protective factors, importance of means restriction, supportive services, community resources, crisis lines, and helpful responses to student questions.





# APPENDICES

## RESOURCES





# Appendix A

## Sample Letter: Communicating Cause of Death

TO BE UTILIZED WHEN THE CAUSE OF DEATH HAS BEEN RULED A SUICIDE  
(TEMPLATE I of V)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am writing this letter with great sadness to inform you that one of our **[GRADE LEVEL]** students took **[HIS/HER]** life **[YESTERDAY/TODAY/SATURDAY/DURING THE HOLIDAYS]**. Our thoughts and sympathies go out to **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. I have included a copy of the statement that was read to them. Members of our crisis team met with students individually and in groups today and will be available to the students over the next days and weeks to help them cope with the death of their peer.

Information about funeral services will be given to the students once it has been made available to us. Students will be released to attend services only with parental permission and pick up, and we strongly encourage you to accompany your child to any services.

I am including information about suicide and some talking points that can be helpful to you in discussing this issue with your teen. I am also including strategies to consider to monitor social media communications and a list of school and community resources if your child is in need of further assistance. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Please contact me or one of the counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,

**[PRINCIPAL'S NAME]**

English and Spanish editable document available at: <https://www.marinschools.org/Page/268>



# Appendix A

## Sample Letter: Communicating Cause of Death

TO BE UTILIZED WHEN THE CAUSE OF DEATH HAS BEEN RULED A SUICIDE  
(TEMPLATE II of V)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am writing with great sadness to inform you that one of our students has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. I have included a copy of the statement that was read to them.

The cause of death was suicide. We want to take this opportunity to remind our community that suicide is a very complicated act. Although we may never know why **[NAME OF STUDENT]** ended **[HIS/HER]** life, we do know that suicide has multiple intersecting factors. In many cases, a treatable mental health condition is part of it. It is really important if you or your child are not feeling well in any way to reach out for help. Suicide should not be an option. I am including some information that may be helpful to you in discussing suicide with your child.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance. We have a list of school and community mental health resources. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

The school will be hosting a meeting for parents and others in the community on **[DATE/TIME/LOCATION]**. Members of our Crisis Response Team **[OR NAME SPECIFIC MENTAL HEALTH PROFESSIONAL/S]** will be present to provide information about common reactions following a suicide and how adults can help youths cope. They will also provide information about suicide and mental illness in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,

**[PRINCIPAL'S NAME]**

English and Spanish editable documents available at: <https://www.marinschools.org/Page/268>



# Appendix A

## Sample Letter: Communicating Cause of Death TO BE UTILIZED WHEN THE CAUSE OF DEATH HAS BEEN RULED A SUICIDE (TEMPLATE III of V)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. I have included a copy of the statement that was read to them.

The cause of death was suicide. Although we may never know why **[NAME OF STUDENT]** ended **[HIS/HER]** life, we do know suicide has multiple causes. In many cases, a treatable mental health condition is part of it. And sometimes it is not. If you or your child is not feeling well in any way, it is important to reach out for help. Suicide should never be an option. Also included is information that may be helpful to you in discussing suicide with your child.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance. We have a list of school and community mental health resources. Note that children who are already vulnerable may be at greater risk by exposure to the suicide of a peer. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

We are hosting a meeting for parents and others in the community on **[DATE/TIME/LOCATION]**. Members of our Crisis Response Team **[OR NAME SPECIFIC MENTAL HEALTH PROFESSIONAL/S]** will be present to provide information about common reactions following a suicide and how adults can help youths cope. They will also provide information about suicide and mental illness in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,  
**[PRINCIPAL'S NAME]**



# Appendix A

## Sample Letter: Communicating Cause of Death

### TO BE UTILIZED WHEN THE CAUSE OF DEATH HAS BEEN RULED A SUICIDE (TEMPLATE IV of V)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. I have included a copy of the statement that was read to them.

The cause of death was suicide. Although we may never know why **[NAME OF STUDENT]** ended **[HIS/HER]** life, we do know suicide has multiple causes. In many cases, a treatable mental health condition is part of it. If you or your child is not feeling well in any way, it is important to reach out for help. Suicide should never be an option. Also included is information that may be helpful to you in discussing suicide with your child.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance; we have a list of school and community mental health resources. Note that children who are already vulnerable may be at greater risk to exposure to the suicide of a peer. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

We are hosting a meeting for parents and others in the community on **[DATE/TIME/LOCATION]**. Members of our Crisis Response Team **[OR NAME SPECIFIC MENTAL HEALTH PROFESSIONAL/S]** will be present to provide information about common reactions following a suicide and how adults can help youths cope. They will also provide information about suicide and mental illness in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,  
**[PRINCIPAL'S NAME]**



# Appendix A

## Sample Letter: Communicating Cause of Death TO BE UTILIZED WHEN THE CAUSE OF DEATH HAS BEEN RULED A SUICIDE (TEMPLATE V of V)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am writing to you with some sad news about a member of our school community. One of our **[YEAR]** students died by suicide **[YESTERDAY/TODAY/SATURDAY/DURING THE HOLIDAYS]**. Our thoughts and sympathies are with the student's families and friends.

This morning, all of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]**. I have attached a copy of the statement that was read to them.

Today and over the coming weeks, you may be concerned about your child's reaction or expression of feelings about this news. These reactions and feelings may be part of the grieving process. Many students will wish to talk with their parents, so I have attached some general information which may assist you in those conversations. I also encourage you to let your child know that you are aware of this incident and that you will listen to their concerns at any time they wish to share them. Staying connected and engaged with your child is one of the best ways to support them. When talking about the issue of suicide, try to include discussion about positive strategies for managing problems. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Two important messages to promote are that all of us should seek help from others when we feel down or vulnerable, and that young people should tell an adult if they are worried about a friend hurting themselves.

Our school will be concentrating on supporting our students and staff over the next months. This means, among other things, returning the school to normal routines as soon as possible and recognizing that students can be affected by this event for many months to come. If your child is already using the services of a mental health professional, you should ensure this information is passed on to them.

The school will be hosting a meeting for parents and others in the community on **[DATE/TIME/LOCATION]**. Members of our Crisis Response Team **[OR NAME SPECIFIC MENTAL HEALTH PROFESSIONAL/S]** will be present to provide information about common reactions following a suicide and how adults can help you cope. They will also provide information about suicide and mental health conditions in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Yours sincerely,

**[PRINCIPAL'S NAME]**



# Appendix B

## Sample Letter: Communicating Cause of Death

### TO BE UTILIZED WHEN THE CAUSE OF DEATH IS UNCONFIRMED (TEMPLATE I of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am writing with great sadness to inform you that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

This morning, all of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]**. I have attached a copy of the statement that was read to them.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we have asked the students not to spread rumors since they may turn out to be inaccurate and can be hurtful and unfair to **[NAME OF STUDENT]** as well as to **[HIS/HER]** family and friends. We'll do our best to give you accurate information as it becomes known to us.

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance; we have a list of school and community mental health resources. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Yours sincerely,

**[PRINCIPAL'S NAME]**



# Appendix B

## Sample Letter: Communicating Cause of Death

TO BE UTILIZED WHEN THE CAUSE OF DEATH IS UNCONFIRMED  
(TEMPLATE II of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

The students received the message of the death from their teacher in **[ADVISORY/HOMEROOM]**. Included is a copy of the statement that was read to them.

The authorities have not yet determined the cause of death. It is our understanding that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate. We have asked the students not to spread rumors since they may turn out to be untrue and can be deeply painful and unfair to **[NAME OF STUDENT]** and to **[HIS/HER]** family and friends. We will do our best to communicate accurate information as we receive it.

Since the subject of suicide has been raised, we want to take this opportunity to remind our community that suicide, when it does occur, is a very complicated act. No one single thing causes it. But in many cases, a mental health condition is part of it. These conditions are treatable. It is really important that if you or your child is not feeling well in any way to reach out for help. Suicide should never be an option. I have included some information that may be helpful to you in discussing suicide with your child.

Please know, members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. If you feel your child is in need of additional assistance, please contact the school office. We have also included a list of school and community mental health resources. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Information about the funeral service will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please contact me or one of the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Yours sincerely,

**[PRINCIPAL'S NAME]**



# Appendix C

## Sample Letter: Communicating Cause of Death

TO BE UTILIZED WHEN THE FAMILY HAS REQUESTED THE CAUSE OF DEATH NOT BE DISCLOSED  
(TEMPLATE I of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am writing with great sadness to inform you that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. A copy of the statement that was read to them is included here.

The family has requested that information about the cause of death not be shared at this time. We are aware that there have been rumors that this was a suicide death. Since the subject has been raised, we want to take this opportunity to remind our community that suicide, when it does occur, is a very complicated act. It is usually caused by a mental health condition which can prevent a person from thinking clearly about the problems in his or her life and how to solve them. Sometimes these mental health conditions are not identified or noticed; other times, a person with a mental health condition will show obvious symptoms or signs. If you or your child is not feeling well in any way and you need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. Please contact the school office if you feel your child is in need of additional assistance. We have a list of additional school and community mental health resources.

Information about the funeral services will be made as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. If the funeral is scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please contact me or the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,  
**[PRINCIPAL'S NAME]**

English and Spanish editable documents available at: <https://www.marinschools.org/Page/268>



# Appendix C

## Sample Letter: Communicating Cause of Death

TO BE UTILIZED WHEN THE FAMILY HAS REQUESTED THE CAUSE OF DEATH NOT BE DISCLOSED  
(TEMPLATE II of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community;**
- **There is a chance that this letter might be shared in the local paper; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Dear Families,

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. Our thoughts and sympathies are with **[HIS/HER]** family and friends.

All of the students were given the message of the death by their teacher in **[ADVISORY/HOMEROOM]** this morning. I have included a copy of the statement that was read to them.

The family has requested that information surrounding the cause of death not be disclosed at this time. It is our understanding that there have been rumors that this was a suicide death. Since the subject has been brought up, we want to take this opportunity to remind our community that suicide, when it does occur, is very complicated. No one single thing causes it. But in many cases, a treatable mental health condition could be part of it. It is really important if you or your child is not feeling well in any way to reach out for help. Suicide should never be an option. I have included some information that may be helpful to you in discussing suicide with your child.

Please know, members of our Crisis Response Team are available to meet with students individually and in groups today as well as over the coming days and weeks. If you feel your child is in need of additional assistance, please contact the school office. Note that children who are already vulnerable may be at greater risk due to exposure of the death of a peer. If you or your child need immediate assistance, call the Marin County Crisis Stabilization Unit 24/7 at 1-415-473-6666 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255). We have included a list of additional school and community mental health resources.

Information about the funeral services will be made as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. Should the funeral be scheduled during school hours, students who wish to attend will need parental permission to be released from school.

Please contact me or the school counselors for any questions or concerns you may have. We can be reached by calling **[PHONE NUMBER]**.

Sincerely,

**[PRINCIPAL'S NAME]**

English and Spanish editable documents available at: <https://www.marinschools.org/Page/268>



# Appendix D

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: SUICIDE HAS OCCURRED (TEMPLATE I of III)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

It is with great sadness that I have to tell you that one of our students, **[NAME OF STUDENT]**, has taken **[HIS/HER]** own life. All of us want you to know that we are here to help you in any way we can.

A suicide death presents us with many questions that we may not be able to answer right away. Rumors may begin to circulate, and we ask that you not spread rumors you may hear. We'll do our best to give you accurate information as it becomes known to us.

Suicide is a very complicated act. It may be at times caused by a combination of factors that are not noticed; in other cases, a person may show obvious symptoms or signs. One thing is certain: there are treatments that can help. Suicide should never, ever be an option.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known **[NAME OF STUDENT]** very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction.

We have counselors available to help our school community deal with this sad loss and to enable us to understand more about suicide. If you'd like to talk to a counselor, please let your teachers know.

Please remember that we are all here for you.



# Appendix D

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: SUICIDE HAS OCCURRED (TEMPLATE II of III)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students.;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. I'm also very sorry to share that the cause of death was suicide.

Many of you may also feel very sad. Others may feel emotions such as anger or confusion. It's okay to feel whatever emotions you might be feeling. When someone takes their own life, it leads to a lot of questions, some of which may never be completely answered.

While we may never know why **[NAME OF STUDENT]** ended **[HIS/HER]** life, we do know that suicide has many causes. In many cases, a treatable mental health condition is part of it. And sometimes it is not. It is very important if you're not feeling well in any way to reach out for help. Suicide should never be an option.

Rumors may come out about what happened, but please don't spread them. They may turn out to be untrue and can be deeply painful and unfair to **[NAME OF STUDENT]** and **[HIS/HER]** family and friends. I'm going to do my best to give you the most accurate information as soon as I know it.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Some of us may have known **[NAME OF STUDENT]** well, and some of us may not. But either way, we may have strong feelings. You might find it difficult to concentrate on schoolwork for a little while. On the other hand, you might find that focusing on school helps take your mind off of what happened. Either way is okay.

I want you to know that your teachers and I are here for you. We also have counselors here to help us all cope with what happened. If you'd like to talk to one of them, just let me or one of your teachers know or look for the counselors in **[NOTE SPECIFIC LOCATION]** between classes or during lunch.

We are all here for you. We are all in this together, and the school staff will do whatever we can to help you get through this.

Editable document available at: <https://www.marinschools.org/Page/268>



# Appendix D

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: SUICIDE HAS OCCURRED

#### (TEMPLATE III of III)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. I'm also very sorry to share that the cause of death was suicide. All of us are thinking of **[HIS/HER]** family and friends.

Some students in our school, particularly **[HIS/HER]** friends will find this news very difficult to understand and accept. Other students, not just close friends, are also likely to be upset, perhaps because it reminds them of another sad event in their own life. Because of this, we have counselors available to support us located **[NOTE SPECIFIC LOCATION]** for any students to go to if you feel you cannot be in the classroom over the next few days. Someone will be available in the room at all times during the school day. As always, school counselors are available to see students, and we will have some extra counselors at school for a while.

A notice is going home today to inform your parents about the death, so they will understand if you want to talk with them today or sometime in the future.

Remember to use the normal signing out processes if you need to leave the school grounds. If you are approached by anyone from outside of the school asking for information about this death, please tell them they should speak to **[NAME OF PERSON OR MEDIA SPOKESPERSON]**.

We will keep you informed as much as possible over the next week. This is a time to be especially sensitive to each other's feelings and to look out for each other. Let a teacher or your parents know if you or your friends are worried about anything or anyone.

# Appendix E

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: CAUSE OF DEATH IS UNCONFIRMED (TEMPLATE I of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students.;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

It is with great sadness that I have to share with you that one of our students, **[NAME OF STUDENT]**, has died. All of us want you to know that we are here to help you in any way we can.

The cause of death has not yet been determined by the authorities. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we ask that you not spread rumors since they may turn out to be inaccurate and be deeply painful and unfair to **[NAME OF STUDENT]** and to **[HIS/HER]** family and friends. We will do our best to give you accurate information as it becomes known to us.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known **[NAME OF STUDENT]** very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you are having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community deal with this sad loss. If you'd like to talk to a counselor, please let me or one of your other teachers know.

Please remember that we are all here for you.



# Appendix E

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: CAUSE OF DEATH IS UNCONFIRMED (TEMPLATE II of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

I am so sorry to tell you all that one of our students, **[NAME OF STUDENT]**, has died. The cause of death has not yet been determined.

We are aware that there has been some talk that this might have been a suicide death. Rumors may begin to come out, but please don't spread them. They may turn out to be untrue and can be deeply hurtful and unfair to **[NAME OF STUDENT]** as well as to **[HIS/HER]** family and friends. I am going to do my best to give you the most accurate information as soon as I know it.

Since the subject has been raised, I do want to take this opportunity to remind you that suicide, when it does occur, is very complicated. No one single thing causes it. In many cases, a mental health condition is part of it, and these conditions are treatable. It's really important that if you are not feeling well in any way to reach out for help. Suicide should never be an option.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Right now, I'm feeling **[EMOTION]**, and many of you may feel **[EMOTION]** too. Others may feel angry or confused. It's okay to feel whatever emotions you might be feeling. Some of us may have known **[NAME OF STUDENT]** well, and some of us may not. But either way, we may have strong feelings. You might find it difficult to concentrate on schoolwork for a little while. On the other hand, you might find that focusing on school helps take your mind off of what has happened. Either is okay.

I want you to know that your teachers and I are here for you. We also have counselors here to help us all process our feelings relating to this loss. If you'd like to talk to one of them, please let me or one of your teachers know, or you can seek out the counselors in **[NAME SPECIFIC LOCATION]** between classes or during your lunch.

We are all here for you. We are all in this together, and the school staff will do whatever we can to help you get through this.

Editable document available at: <https://www.marinschools.org/Page/268>

# Appendix F

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: FAMILY HAS REQUESTED THE CAUSE OF DEATH NOT BE DISCLOSED (TEMPLATE I of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students;**
- **The talking points have the most impact if read and personalized with your own words;**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community; and**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

It is with great sadness that I have to tell you that one of our students, **[NAME OF STUDENT]**, has died. All of us want you to know that we are here to help you in any way we can.

The family has requested that information about the cause of death not be shared at this time. We are aware that there has been some talk about the possibility that this was a suicide death. Rumors may begin to circulate, and we ask that you not spread rumors since they may turn out to be inaccurate and can be extremely hurtful and unfair to **[NAME OF STUDENT]** as well as to **[HIS/HER]** family and friends. We'll do our best to give you accurate information as it becomes known to us.

Since the subject has been raised, we do want to take this opportunity to remind you that suicide, when it does occur, is a very complicated act. It is usually caused by a mental health condition such as depression, which can prevent a person from thinking clearly about his or her problems and how to solve them.

Sometimes these mental health conditions are not identified or noticed; in other cases, a person with a mental health condition will show obvious symptoms or signs. One thing is certain: there are treatments that can help. Suicide should never, ever be an option. If you are not feeling well in any way, please share this with an adult. Support can be received at **[LOCATION/TIME]**.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known **[NAME OF STUDENT]** very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community process our feelings surrounding this loss. If you'd like to talk to a counselor, just let your teachers know.

Please remember that we are all here for you.

Editable document available at: <https://www.marinschools.org/Page/268>



# Appendix F

## Talking Point Guided Notification To Students and Public

### MORNING OF DAY 1: FAMILY HAS REQUESTED THE CAUSE OF DEATH NOT BE DISCLOSED (TEMPLATE II of II)

- **Consent from parents must be given if the deceased student's name is used;**
- **This document is a guide with talking points to address with students.**
- **The talking points have the most impact if read and personalized with your own words.**
- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the school community.**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

I am so sorry to share with you that one of our students, **[NAME OF STUDENT]**, has died. All of us want you to know that we are here to help you in any way we can.

The family has requested that information surrounding the cause of death not be disclosed at this time. We are aware that there have been rumors that it was possibly a suicide death. We ask that you not spread rumors since they may turn out to be inaccurate and can be deeply painful and unfair to **[NAME OF STUDENT]** and to **[HIS/HER]** family and friends. We'll do our best to communicate accurate information as it becomes known to us.

Since the subject has been raised, we want to take this opportunity to remind you that suicide is a very complicated act. No one single thing causes it. In many cases, a treatable mental health condition is part of it. Sometimes it is not. However, suicide should never, ever be an option. It is really important that if you are not feeling well to share this with an adult. Support can be received at **[LOCATION/TIME]**.

Each of us will react to **[NAME OF STUDENT]**'s death in our own way, and we need to be respectful of each other. Feeling sad is a normal response to any loss. Some of you may not have known **[NAME OF STUDENT]** very well and may not be as affected, while others may experience a great deal of sadness. Some of you may find you're having difficulty concentrating on your schoolwork, and others may find that diving into your work is a good distraction. We have counselors available to help our school community process our feelings surrounding this loss. If you'd like to talk to a counselor, please let your teachers know.

Please remember that we are all here for you.

Editable document available at: <https://www.marinschools.org/Page/268>

# Appendix G

## Talking Point Guide for Addressing Public Calls and Inquiries for Office Staff

THE SCRIPT BELOW IS DESIGNED TO HELP RECEPTIONISTS OR OTHER INDIVIDUALS WHO ANSWER THE TELEPHONE TO RESPOND APPROPRIATELY TO TELEPHONE CALLS RECEIVED IN THE EARLY STAGES OF THE CRISIS.

- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

Hello, **[NAME OF SCHOOL]** School. May I help you?

Provide information/take messages for all non-crisis related calls.

For crisis-related calls, use the following general schema:

- **Police or Other Law Enforcement Agencies:** Immediately transfer to the principal.
- **Family Members of the Deceased:** Immediately transfer to the principal. If the principal is not available immediately, ask if they would like to speak to the school psychologist/counselor/social worker.
- **Other School Administrators:** Provide basic information regarding the death and crisis response. Offer to transfer the call to the principal or others as appropriate.
- **A Parent Regarding Concerns for Student Safety:** Reassure the parent if you are certain their child was not involved and outline how children are being supported. If their child may have been involved, transfer the call to a Crisis Response Team member who may have more information.
- **Individuals with Information about Vulnerable Students:** Take down all relevant information and immediately share it with a Crisis Response Team member. Obtain a phone number where a Crisis Response Team member can reach the caller.
- **Media:** Take a message and refer the call to the principal and/or media spokesperson.
- **Parent Questioning How to Best Respond:** Explain that children and staff are being supported. Take messages to give mental health/counseling staff for parents needing more detailed information.

A space should be identified for parents that arrive unannounced at the school. The space will serve as a location for parents to wait and receive all relevant information related to the crisis. Any person removing a student from school must be on the annual registration form as a parent or guardian. Records must be kept that clearly document who removed the student and at what time the student was released.

Editable document available at: <https://www.marinschools.org/Page/268>



# Appendix H

## Sample Agenda: Goals for Initial Staff Meeting

PROVIDE A MINIMUM OF ONE (1) HOUR TO ENGAGE IN THE FOLLOWING:

### Part 1 of 5: Sharing the Facts:

- Introduce Crisis Response Team members;
- Share accurate factual information about the death, honoring any requests for privacy from the family;
- Avoid oversimplifying the causes of suicide and presenting them as inexplicable or unavoidable. Do not use words "committed suicide" or "failed suicide." Mental health professionals request we say instead "died by suicide," "ended his/her life." "death by suicide". Suicide is a tragic event and not a crime;
- Emphasize recent treatment advances for depression and other mental illness;
- Explain plans for the day, including the locations where crisis counseling and other supports will be delivered. If possible, provide snacks along with art and writing supplies for creative expression that may be preserved for the student's family;
- Remind staff of student and staff dismissal protocols for the funeral;
- Remind staff of risk factors and warning signs and to use Question, Persuade, Refer (QPR) or its equivalent as situation warrants. Contact BHRS regarding QPR Training at [BHRSPreventionandOutreach@marincounty.org](mailto:BHRSPreventionandOutreach@marincounty.org);
- Inform staff of any outside agencies/individuals who will be providing support on campus;
- Inform staff where services are available on campus for students who have been identified to be at risk; and
- Announce the availability of an End-of-Day meeting designed for staff to debrief and obtain any necessary support;

# Appendix H

## Sample Agenda: Goals for Initial Staff Meeting (continued)

### **Part 2 of 5: Messaging to Students**

- Convey what information can be relayed to students. Avoid detailed descriptions of the suicide including specific method and location;
- Provide appropriate staff (e.g., homeroom teachers and/or advisers) with a Talking Point Guided Notification (Appendices D - F) and arrange coverage for any staff unable to effectively read the statement. Explain that the talking points have the most impact if read and personalized in their own words;
- Prepare staff for student reactions and questions by providing staff with "Tips for Talking About Suicide" (Appendix P | PAGES 85-88) and "Facts about Suicide in Adolescents" (Appendix Q | PAGE 89);
- Work to control rumors and provide known facts;
- Work to avoid tributes by friends, school wide assemblies and sharing information over school's PA system that may romanticize the death. Positive attention given to someone who has died (or attempted to die) by suicide can lead vulnerable individuals who desire such attention to take their own lives;
- Remind staff that all students must be sent in pairs/groups or escorted by an adult. No students are to travel alone when seeking additional support services;
- Remind staff that how they respond to the crisis can have a strong impact on students; therefore, they need to project that they are in control and are concerned about their students' mental health; and
- Remind staff that they can play an important role in identifying changes in students' behavior and work to develop a communication and documentation plan to alert support providers of students who are having difficulty.

### **Part 3 of 5: Provide Support to Staff**

- Allow staff an opportunity to express their own reactions and grief;
- Share that substitute teachers have been secured to replace any teacher/s too impacted by the loss to teach;
- Identify any staff member/s who may need additional support and refer them to appropriate resources;



# Appendix H

## Sample Agenda: Goals for Initial Staff Meeting (continued)

### **Part 3 of 5: Provide Support to Staff (continued)**

- Advise staff that trained professionals/counselors will intentionally seek out those faculty and staff who had direct or close contact with the deceased student to check-in;
- Again, identify staff uncomfortable notifying students of the death. Designate CRT members or counselors to support those staff members in their classrooms throughout the school day;
- Inform teachers that roving substitute teachers are available for those who may need a break. Identify protocol for requesting relief from a roving substitute;
- Emphasize that this will have an affect on the school community and to make sure teachers take care of themselves;
- Provide staff with resources to support their personal needs related to coping with grief and loss; and
- Ensure staff impacted are aware of local mental health resources provided through their public/private agencies.

### **Part 4 of 5: Interacting with Parents, Visitors, and the Media**

- Share with staff how to best handle parent inquiries and plans for communicating with parents, including who parents should contact for further information and resources;
- Share location designated for parents who come to campus to ask questions and express concerns to congregate and to be addressed by identified CRT member;
- Identify which Crisis Response Team member has been designated as the media spokesperson and instruct staff to refer media inquires to this team member; and
- Provide staff with district policy regarding unauthorized visitors on campus and how to best address the presence of unknown individuals during postvention response.

### **Part 5 of 5: Follow-up**

- Finally, send a follow-up email at the conclusion of the staff meeting that includes a summary of the information shared/discussed in the meeting and any additional details that were not available at the time of the meeting, such as a listing of local resources.

# Appendix H

## Sample Agenda: Goals for End-of-Day Staff Meeting

**It can also be helpful for the Principal and/or Crisis Response Team coordinator to have an all-staff meeting at the end of the first day. This meeting provides an opportunity to take the following steps:**

- Offer appreciation of the staff;
- Review the day's challenges, including any students of particular concern;
- Debrief, share experiences, express concerns, and ask questions;
- Check in with staff to assess whether any of them need additional support, and refer accordingly;
- Disseminate information regarding the death and/or funeral arrangements;
- Discuss plans for the next day;
- Remind staff of the importance of self-care; and
- Remind staff of the importance of documenting crisis response efforts for future planning.



# Appendix I

## Sample Agenda for Parent/Guardian/Community Meeting

### Overview

Meetings with parents can provide a helpful forum for disseminating information and answering questions. The Crisis Response Team coordinator and all other Crisis Response Team members, the superintendent, and the school principal should attend parent/community meetings. Representatives from community resources, such as mental health providers, county crisis services, and clergy, may also be invited to be present and provide information.

Be sure to consider the racial, ethnic, and religious backgrounds of students and parents:

- Address the language needs of parents who speak little or no English.
- Determine if there is any content or format that would feel uncomfortable or inappropriate for those who might attend the meeting. For example, if parents of the deceased are in attendance, how might discussing this in a group setting impact their experience?

Large, open-microphone meetings are not advised, since they can result in an unwieldy, unproductive session focused on scapegoating and blaming.

### Ideally, the meeting is broken up into two parts:

- PART I: Presented by school staff, the focus should be on dissemination of general information to parents, without opening the meeting to discussion; and
- PART II: Have parents meet in small groups with trained crisis counselors for questions and discussion.

### Part 1 of 2: General Information (45 - 60 minutes)

Crisis Response Team Coordinator, School Superintendent, or Principal:

- Welcomes all and expresses sympathy;
- Introduces the school administration and members of the Crisis Response Team;
- Expresses confidence in the staff's ability to assist the students;
- Encourages parent and school collaboration during this difficult time;
- Reassures attendees that there will be an opportunity for questions and discussion;
- States school's goal of treating this death as it would any other death, regardless of the cause, while remaining aware that adolescents can be vulnerable to the risk of imitative suicidal behavior; and
- States the importance of balancing the need to grieve with not inadvertently oversimplifying, glamorizing, or romanticizing suicide.

Taken from:

American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.

# Appendix I

## Sample Agenda for Parent/Guardian/Community Meeting (continued)

### **Part 1 of 2: General Information (continued)**

Principal or Crisis Response Team Coordinator:

- Outlines the purpose and structure of the meeting;
- Verifies the death;
- Discourages the spread of rumors;
- Informs parents about the school's responsive activities, including media requests; and
- Informs parents about the student release policy for funerals.

Crisis Response Team Coordinator, Assistant Coordinator, or other Designated Crisis Team Member:

- Shares how the school will help students cope;
- Shares that more information about bereavement after suicide is available on AFSP's Website.  
See: <https://afsp.org/>;
- Shares the handouts "Tips for Talking about Suicide" and "Facts about Suicide in Adolescents (Appendix P | PAGES 85-88 and Q | PAGE 89);
- Explains risk factors and warning signs;
- Reminds parents that help is available for any student who may be struggling with mental health issues, or suicidal thoughts or behaviors; and
- Provides contact information for mental health resources at the school and in the community, such as:
  - School mental health professionals;
  - Community mental health agencies;
  - Emergency psychiatric screening centers;
  - Children's mobile response program; and
  - National Suicide Prevention Lifeline: 1-800-273-TALK (8255)

### **Part 2 of 2: Small Group Meeting (1 Hour)**

- Ideally, each small group should have no more than 8 to 10 parents;
- Each group should be facilitated by at least two trained mental health professionals;
- Support staff should be available to direct parents to meeting rooms, distribute handouts, and make water and tissues available; and
- If possible, additional mental health professionals should be available to meet with parents individually as needed.

Taken from:

American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.



# Appendix I

## Sample Agenda for Parent/Guardian/Community Meeting (continued)


### Some Additional Considerations

- Since some parents may arrive with young children, provide onsite childcare;
- Some students may accompany their parents so provide separate discussion groups for them;
- Media should not be permitted access to the small groups. Arrange for the media spokesperson to meet with any media at a separate location away from parents and children; and
- In some cases (e.g., if the death has received a great deal of sensationalized media attention), security may be necessary to assist with traffic flow, media and crowd control.

### Sample Parent/Guardian/Community Meetings

- Several districts in Marin County provided opportunities for parents/guardians in a Community Conversation about Suicide Prevention. These virtual conversations included students and experts in the field of suicide prevention. Below are two examples of the details surrounding these events.






NOVATO UNIFIED SCHOOL DISTRICT

Novato Unified School District asks you to join us for:  
**A Community Conversation about Suicide Prevention**

Moderated by students from our high schools



As our students move through the school year, Novato Unified School District, in collaboration with community partners and county mental health experts, is deeply dedicated to the mental and physical health and wellness of our students.

We ask that you join us in a community conversation to collectively grow our understanding of how best to support our youth and families and develop strategies to discuss suicide prevention with empathy and openness.




**Date: September 30, 2021**  
**Time: 6:00pm-7:30pm**  
This event will take place via Zoom Webinar. Please follow this link to register for the event: <https://bit.ly/NUSDcommconv>

Our guest speakers include:

- Kara Connors, MPH, Senior Program Coordinator for Suicide Prevention, BHRS
- Tim Lea, MFA, Suicide Prevention Outreach Coordinator, Buckelew Programs
- Cecelia Luna, Community Grief Counselor, By the Bay Health

We would like your thoughts and questions! Our experts will address questions from the community. Please click on this link to begin the conversation:  
<https://bit.ly/QuestionsforSept30>

If you or someone you know is in distress, please contact the Marin Suicide Prevention Hotline: 415-499-1100. For grief support call: 415-499-1195.

## MARIN COUNTY COMMUNITY WEBINAR: SUICIDE PREVENTION



Presenters:  
Kara M. Connors, MPH, Marin County Behavioral Health and Recovery Services  
Stan Collins, Suicide Prevention Specialist, Each Mind Matters, Directing Change  
Cecelia Luna, Bereavement Training Coordinator & Grief Counselor, By the Bay Health (formerly Hospice by the Bay)  
Tim Lea, Community Outreach Coordinator for Suicide Prevention, Buckelew Programs  
Talia Harter, Student Moderator, San Rafael High School

APRIL 13, 2021 | 6:00 PM - 7:15 PM

A virtual community event for parents/guardians of students in elementary through high school, educators, and students in grades 6-12

Access the event using the following link: <http://bit.ly/MarinSP>  
Dial In: +1-669-900-6833 | Webinar ID: 849 5098 6883 | Passcode: 152505

Submit questions in advance: <http://bit.ly/April13CommunityEvent>  
Session Presented in English with Simultaneous Spanish Translation

If you or someone you know is in distress, please contact the 24/7 BHRIS Access Line: (888) 818-1115 or the Marin Suicide Prevention Hotline: (415) 499-1100.



The Marin County Suicide Prevention Collaborative

### MARIN OUTREACH & PREVENTION TEAM

**Finding the Words: Creating Conversation with Our Teens About Mental Health and Suicide Prevention**

September 21 at 7:00-8:30 pm

Join us for this September Suicide Prevention and Recovery Month event! We will come together as a community to learn ways to have a conversation with youth about suicide prevention and mental health. This presentation will focus on:



Jessica Colvin, MSW, MPH  
TUHSD Wellness Director  
Founder of SWELL Schools Well



Tim Lea  
Outreach and Education Coordinator for Suicide Prevention  
Buckelew Programs

- The teen brain in development
- Facts about suicide and mental health
- Warning signs and protective and risk factors unique to youth
- Ways to support a teen who might be in distress using helpful phrases that build connection
- Community resources

Join us!  
Tuesday September 21 at 7 pm  
[Register here](#)

Questions? Contact:  
[BHRSPreventionandoutreach@marincounty.org](mailto:BHRSPreventionandoutreach@marincounty.org)  
[BHRSPrevention.org](http://BHRSPrevention.org)



# Appendix J

## Tips for Talking About Suicide

### Tips for Talking about Suicide

Suicide is a difficult topic for most people to talk about. This tool suggests ways to talk about key issues that may come up when someone dies by suicide.

<b>Give accurate information about suicide.</b>	<b>By saying....</b>
<p>Suicide is a complicated behavior. It is not caused by a single event.</p> <p>In many cases, mental health conditions, such as depression, bipolar disorder, PTSD, or psychosis, or a substance use disorder are present leading up to a suicide. Mental health conditions affect how people feel and prevent them from thinking clearly. Having a mental health problem is actually common and nothing to be ashamed of. Help is available.</p> <p>Talking about suicide in a calm, straightforward way does not put the idea into people's minds.</p>	<p>"The cause of <b>[NAME]</b>'s death was suicide. Suicide is not caused by a single event. In many cases, the person has a mental health or substance use disorder and then other life issues occur at the same time leading to overwhelming mental and/or physical pain, distress, and hopelessness."</p> <p>"There are effective treatments to help people with mental health or substance abuse problems or who are having suicidal thoughts."</p> <p>"Mental health problems are not something to be ashamed of. They are a type of health issue."</p>
<b>Address blaming and scapegoating.</b>	<b>By saying....</b>
<p>It is common to try to answer the question "why?" after a suicide death. Sometimes this turns into blaming others for the death.</p>	<p>"Blaming others or the person who died does not consider the fact that the person was experiencing a lot of distress and pain. Blaming is not fair and can hurt another person deeply."</p>
<b>Do not focus on the method.</b>	<b>By saying....</b>
<p>Talking in detail about the method can create images that are upsetting and can increase the risk of imitative behavior by vulnerable individuals.</p> <p>The focus should not be on how someone killed themselves but rather on how to cope with feelings of sadness, loss, anger, etc.</p>	<p>"Let's talk about how <b>[NAME]</b>'s death has affected you and ways you can handle it."</p> <p>"How can you deal with your loss and grief?"</p>
<b>Address anger.</b>	<b>By saying....</b>
<p>Accept expressions of anger at the deceased and explain that these feelings are normal.</p>	<p>"It is okay to feel angry. These feelings are normal, and it doesn't mean that you didn't care about <b>[NAME]</b>. You can be angry at someone's behavior and still care deeply about that person."</p>

Taken from:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.).  
Waltham, MA: Education Development Center.



# Appendix J

## Tips for Talking About Suicide (continued)

Address feelings of responsibility.	By saying....
<p>Help students understand that they are not responsible for the suicide of the deceased.</p> <p>Reassure those who feel responsible or think they could have done something to save the deceased.</p>	<p>"This death is not your fault. We cannot always see the signs because a suicidal person may hide them."</p> <p>"We cannot always predict someone else's behavior."</p>
Promote help-seeking.	By saying....
<p>Encourage students to seek help from a trusted adult if they or a friend are feeling depressed.</p>	<p>"Seeking help is a sign of strength, not weakness."</p> <p>"We are always here to help you through any problem, no matter what. Who are the people you would go to if you or a friend were feeling worried or depressed or had thoughts of suicide?"</p> <p>"If you are concerned about yourself or a friend, talk with a trusted adult."</p>

Taken from:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.

# Appendix K

## Responding to Suicide Survivors

Retrieved from:

[https://save.org/wp-content/uploads/woocommerce\\_uploads/2018/05/Responding-to-Survivors.pdf](https://save.org/wp-content/uploads/woocommerce_uploads/2018/05/Responding-to-Survivors.pdf)



# Responding to Suicide Survivors

**Tell the survivor you are sorry for his or her loss.**

A simple heartfelt, "I am sorry for your loss," is an appropriate response. Do not make statements such as, "You're young, you'll marry again." Or, "At least you have other children." Or, "I know how you feel." These are not comforting statements.

**Understand that the survivor may be experiencing an overwhelming number of complicated emotions.**

Shock, anger, bewilderment, disbelief, yearning, anxiety, depression, sorrow and stress are emotions expressed by some but not all suicide survivors.

**Remember that grief is an intensely individualistic journey.**

Although you may have experienced grief in your life, suicide related grief is complex. Suicide is a death like no other and survivors are left to struggle with a pain like no other. You do not know how the survivor is feeling.

**Listen.**

If the survivor wishes to talk, be available. Listening can be the most comforting thing you can do for a suicide survivor.

**Be aware of the suicide survivor grief support groups in your community.**

Many survivors have found it very helpful to attend a suicide survivor support group where they can exchange support, information and encouragement. They need to know they are not alone. These groups are specific to grief from suicide.

**Suicide and the Stigma.**

Survivors must wade thru both the emotional devastation and the stigma that accompanies a suicide death. Do not judge. Be compassionate and offer support just like with any death. Think of suicide as the tragic result of an illness; the most misunderstood of illnesses. You can help erase stigma by your reaction to this tragic death.



# Appendix L

## Crisis Response Forms

### SAMPLE CRISIS RESPONSE SIGN-IN FORM

#### CRISIS RESPONSE SIGN-IN FORM

School:	
District:	

DATE	NAME	SCHOOL/ORGANIZATION / AGENCY	TRAINING/ EXPERTISE	LOCATION OF ASSISTANCE NEEDED	TIME IN	TIME OUT

Editable document available at: <https://www.marinschools.org/Page/268>

# Appendix L

## Crisis Response Forms

### SAMPLE CRISIS RESPONSE STUDENT LOG (TEMPLATE I OF III)

#### CRISIS COUNSELING LOG

School:	
Date:	
Counselor:	
Teacher/Administrator:	
Crisis Description:	

NAME OF STUDENT	GRADE	TEACHER/ PERIOD	COMMENTS	SENT HOME?		PARENT NOTIFIED?		FOLLOW-UP
				YES	NO	YES	NO	

#### (TEMPLATE II OF III)

What follows below is an example of a Google Doc that a district utilized to coordinate efficiently with school and outside mental health providers.

Name of Student	Date	Grade	Name of Crisis Counselor & Provider Contact Information	Concerns	Next Steps	Urgent Follow-Up Needed? (Y/N)	Rating 1=no follow up   2=follow up needed   3=MCU (Mobile Crisis Unit)	Notes



# Appendix L

## Crisis Response Forms

### SAMPLE CRISIS RESPONSE STUDENT LOG (TEMPLATE III OF III)

## WS2 Handout 15 (Slide 77): Psychological Triage Summary Sheet

(Confidential, for School Crisis Team use only)



School Crisis  
Prevention and  
Intervention  
Training  
Curriculum

**P** Prevent  
**R** Reaffirm  
**E** Evaluate  
**P** Provide and Respond  
**A** Assess  
**R** Respond  
**E** Examine

Date	Name	Teacher	Risk Rating <sup>a</sup>	Risk Category <sup>b</sup>	Crisis Intervener	Parental Contact <sup>c</sup>	Status <sup>d</sup>
	1.						
	2.						
	3.						
	4.						
	5.						
	6.						
	7.						
	8.						
	9.						
	10.						
	11.						
	12.						
	13.						
	14.						
	15.						
	16.						
	17.						
	18.						
	19.						
	20.						

Note: Adapted from *Preparing for Crises in the Schools* (2nd ed., p. 168), by S. E. Brock et al., 2001, New York, NY: Wiley. Adapted with permission.  
<sup>a</sup>Record initial risk screening rating from the *Primary Risk Screening* form.  
<sup>b</sup>Record the risk category or categories that are likely to have caused psychological trauma. Category codes: V = victim; I = directly involved; W = witness; F = familiarity with victim(s); MI = preexisting mental illness; Dim = developmental immaturity; TH = trauma history; R = lack of resources; Em = severe emotional reactions; PT = perceived threat.  
<sup>c</sup>Record information regarding parental contact. Parental contact codes: SM = attended school meeting; HV = home visit; Ph = phone contact.  
<sup>d</sup>Record information regarding the current need for crisis intervention services and support. Status codes: A = active (currently being seen); W/C = watch and consult (not currently being seen); F† = needs follow-up; I/A = inactive (not being seen and no follow-up is judged to be needed); PT = community-based psychotherapeutic treatment referral (immediate crisis intervention not sufficient).

# Appendix M

## Facts About Suicide in Adolescents

### Facts about Suicide in Adolescents

Suicide is complicated and involves the interplay of multiple risk factors. It is not simply the result of stress or difficult life circumstances. Many people who die by suicide have a mental health condition. In teens, the behavioral health conditions most closely linked to suicide risk are major depressive disorder, bipolar disorder, generalized anxiety disorder, conduct disorder, eating disorders, and substance abuse problems. Although in some cases these conditions may be precipitated by environmental stressors, they can also occur as a result of changes in brain chemistry, even in the absence of an identifiable or obvious “trigger.”

Other key risk factors for suicide include the following:

- Personality characteristics, such as hopelessness, low self-esteem, impulsivity, risk-taking, and poor problem-solving or coping skills
- Family characteristics, such as family history of suicidal behavior or mental health problems, death of a close family member, and problems in the parent-child relationship
- Childhood abuse, neglect, or trauma
- Stressful life circumstances, such as physical, sexual, and/or psychological abuse; breaking up of a romantic relationship; school problems; bullying by peers; trouble with the law; and suicide of a peer
- Access to lethal means, especially in the home

It is important to remember that the vast majority of teens who experience even very stressful life events do not become suicidal. But in some cases, such experiences can be a catalyst for suicidal behavior in teens who are already struggling with depression or other mental health problems. In others, traumatic experiences (such as prolonged bullying) can precipitate depression, anxiety, abuse of alcohol or drugs, or another mental health condition, which can increase suicide risk. Conversely, existing mental health conditions may also lead to stressful life experiences, which may then exacerbate the underlying illness and in turn increase suicide risk.

### Help Is Available

If there are concerns about a student’s emotional or mental health, a referral should be made to an appropriate mental health professional for assessment, diagnosis, and possible treatment. Mental health resources that may be available include the following:

- School-based mental health professionals
- Community mental health providers and clinics
- Emergency psychiatric screening centers
- Children’s mobile response programs

Pediatricians and primary care providers can also be a source of mental health referrals. Many of them are also well-versed in recognizing and treating certain mental health conditions like depression.

Information and referrals regarding treatment for mental and substance use disorders are available at SAMHSA’s National Helpline: 1-800-662-HELP (4357). This is a free, confidential service open 24/7.

Taken from:

American Foundation for Suicide Prevention & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed. Waltham, MA: Education Development Center.



# Appendix N

## Grief After Suicide

Retrieved from:

<https://save.org/wp-content/uploads/2018/03/Grief-After-Suicide.pdf>

# Grief After Suicide



## People Grieve Differently

- Know that you can survive. Though you may feel you cannot survive, you can.
- The intense feelings of grief can be overwhelming and frightening. This is normal. **You are not going crazy; you are grieving.**
- You may experience feelings of guilt, confusion, and anger, even fear. These are all common responses to grief.
- You may even have thoughts of suicide. This, too, is common. It does not mean you will act on those thoughts.
- Forgetfulness is a common, but temporary side effect. Grieving takes so much energy that other things will fade in importance.
- Grief also affects us physically. You may find that you are more accident-prone, that you get sick more easily, you feel fatigued and have more pain.

## Coping Strategies

- Keep asking “why” until you no longer need to ask.
- Healing takes time. Allow yourself the time you need to grieve.
- Grief has no predictable pattern or timetable. Though there are elements of commonality in grief, each person and each situation is unique.
- If you can delay making major decisions, do so.
- The path of grief is one of twists and turns and you may often feel you are getting nowhere. Remember that even setbacks are a kind of progress.
- Expect setbacks and occasional painful reminders. Some days are better than others and if you go about life with this mentality, you will be better prepared through the grieving process.
- This is the hardest thing you will ever do. Be patient with yourself.
- Seek out people who are willing to listen when you need to talk and who understand you may need to be silent.
- Give yourself permission to seek professional help.
- Avoid people who try to tell you what to feel and how to feel it and, in particular, those who think you should “be over it by now.”
- Find a support group for survivors that provide a safe place for you to express your feelings or simply a place to go to be with other survivors who are experiencing some of the same things you are going through .

# Appendix O

Resources for Teens, Families and Staff Bereaved by Suicide

## Beyond Surviving: Suggestions for Survivors

Reprinted with Permission by Iris M. Bolton

- **Know you can survive; you may not think so, but you can.**
- **Struggle with “why” it happened until you no longer need to know “why” or until you are satisfied with partial answers.**
- **Know you may feel overwhelmed by the intensity of your feelings but that all your feelings are normal.**
- **Anger, guilt, confusion, and forgetfulness are common responses. You are not crazy; you are in mourning.**
- **Be aware you may feel appropriate anger at the person, at the world, at God, at yourself. It’s O.K. to express it.**
- **You may feel guilty for what you think you did or did not do. Guilt can turn into regret, through forgiveness.**
- **Having suicidal thoughts is common. It does not mean that you will act on those thoughts.**
- **Remember to take one moment or one day at a time.**
- **Find a good listener with whom to share.**
- **Call someone if you need to talk.**
- **Don’t be afraid to cry. Tears are healing. Give yourself time to heal.**
- **Remember, the choice was not yours. No one is the sole influence on another’s life.**
- **Expect setbacks. If emotions return like a tidal wave, you may only be experiencing a remnant of grief, an unfinished piece.**
- **Try to put off major decisions.**
- **Give yourself permission to get professional help.**
- **Be aware of the pain in your family and friends.**
- **Be patient with yourself and others who may not understand.**



# Appendix O

Resources for Teens, Families and Staff Bereaved by Suicide  
(continued)

## Beyond Surviving: Suggestions for Survivors Continued

Reprinted with Permission by Iris M. Bolton

- **Set your own limits and learn to say no.**
- **Steer clear of people who want to tell you what or how to feel.**
- **Know that there are support groups that can be helpful, such as Buckelew Programs SOS Allies for Hope Loss Survivor's Support Group or Compassionate Friends or Survivors of Suicide groups.**
- **Call on your personal faith to help you through.**
- **It is common to experience physical reactions to your grief, such as headaches, loss of appetite, or inability to sleep.**
- **The willingness to laugh with others and at yourself is healing.**
- **Wear out your questions, anger, guilt, or other feelings until you can let them go. Letting go doesn't mean forgetting.**
- **Know that you will never be the same again, but you can survive and even go beyond just surviving.**

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### Book Suggestions

- **Auerbach, Susan. *I'll Write Your Name on Every Beach: A Mother's Quest for Comfort, Courage and Clarity after Suicide Loss.* Philadelphia: Jessica Kingsley, 2017.**
- **Bolton, Iris. *Voices of Healing and Hope: Conversations on Grief after Suicide.* Atlanta, GA: Bolton Press, 2017.**
- **Bolton, Iris. *My Son...My Son: A Guide to Healing After Death, Loss or Suicide* Atlanta, GA: Bolton Press, 1983.**
- **Rubel, Barbara. *But I Didn't Say Goodbye: For Parents and Professionals Helping Child Suicide Survivors.* Griefwork Center, Inc. 2000.**
- **Wittberger, P., & Wittberger, R. *When a child dies from drugs: Practical help for parents in bereavement.* Chula Vista, CA: Xlibris Corporation, 2004.**

# Appendix O

## Resources for Teens, Families and Staff Bereaved by Suicide (continued)

### Ways to Connect with Other Loss Survivors or Support Groups

#### Local

- **Behavioral Health and Recovery Services (BHRS):** Provides counseling services, support, and resources in Marin County.
  - <https://www.bhrsprevention.org/> | [BHRSPreventionandOutreach@marincounty.org](mailto:BHRSPreventionandOutreach@marincounty.org)
- **Buckelew Programs SOS Allies for Hope:** Meets the 2nd and 4th Wednesday of every month at 7-8:30 pm (Virtual).
  - <https://buckelew.org/event/survivors-of-suicide-bereavement-support-group-virtual/all/> | (415) 492-0614 | [SOSinfo@buckelew.org](mailto:SOSinfo@buckelew.org)
- **By the Bay (formerly Hospice By the Bay):** provides grief counseling and other services for families who have experienced the loss of a loved one.
  - <https://bythebayhealth.org/grief-support/> | (415) 526-5699
- **Josie's Place, Grief support for Children:** facilitated peer-support groups to children and teens in the San Francisco Bay Area who are grieving the death of a parent, sibling, close relative or friend.
  - <https://josiesplace.org/> | (415) 513-6343 | email: [info@josiesplace.org](mailto:info@josiesplace.org)
- **Pathways Bereavement Support:** Serves the San Francisco Bay Area providing grief counseling, support and workshops.
  - <https://pathwayshealth.org/grief-support/> | (888) 978-1306
- **Compassionate Friends of Marin:** provides friendship, understanding, and hope to those going through the natural grieving process.
  - <http://www.tcfmarin.org/home.aspx> | (415) 457-3123 | [nationaloffice@compassionatefriends.org](mailto:nationaloffice@compassionatefriends.org)

#### National

- **Uniting for Suicide Postvention (USPV)**
  - <https://www.mirecc.va.gov/visn19/postvention/>
- **American Foundation for Suicide Prevention (AFSP)**
  - <https://afsp.org/find-support/ive-lost-someone/>
- **American Association of Suicidology (AAS)**
  - <https://suicidology.org/resources/suicide-loss-survivors/>
- **Suicide Prevention Resource Center (SPRC)**
  - <https://www.sprc.org/>
- **Samaritans Grief Support Services**
  - <https://samaritanshope.org/our-services/grief-support/>
- **Alliance of Hope-Consultations/Counseling**
  - <https://allianceofhope.org/find-support/consultations/>



# Appendix O

## Resources for Teens, Families and Staff Bereaved by Suicide

(continued)

### Suicide Prevention & Crisis Response Resources

#### If you or someone you know needs support:

##### Emergency

- Call 911 immediately and stay with person in need of support until help arrives; or
- Proceed to the nearest Emergency Room.

##### Non-Emergency

- Marin Mobile Crisis Response Team (MCRT) (415) 473-6392
  - Monday through Friday 8 a.m. – 9 p.m.
  - Saturday from 11:00 a.m. - 9:00 p.m.
- Marin BHRS Access Team (24/7) (888) 818-1115
- Marin Crisis Stabilization Unit | Psychiatric Emergency Services (415) 473-6666
- Kaiser San Rafael Psychiatry Department (415) 491-3000
- Huckleberry Youth Programs Counseling (sliding scale) (415) 745-0867
- Trevor Project (LGBTQ+) (866) 488-7386

##### Crisis Hotlines

- Crisis Text Line Text MARIN to 741741
- Marin Suicide Prevention & Crisis Hotline (415) 499-1100
- California Youth Crisis Line 1-800-843-5200
- National Suicide Prevention Hotline 1-800-273-8255  
or Text ANSWER to 839863

##### Outside of the Bay Area

- Alliance of Hope for New Survivors
  - <https://allianceofhope.org/find-support/for-new-survivors/>
- Alliance of Hope Counseling & Consultation Services
  - <https://allianceofhope.org/find-support/consultations/>
- American Foundation for Suicide Prevention's Children, Teens and Suicide Loss
  - [https://4clhdy3kx49m20a5xz4504fl-wpengine.netdna-ssl.com/wp-content/uploads/2018/10/Children-Teens-and-Suicide\\_loss.pdf](https://4clhdy3kx49m20a5xz4504fl-wpengine.netdna-ssl.com/wp-content/uploads/2018/10/Children-Teens-and-Suicide_loss.pdf)

##### Other Resources for Families

- Returning to School After a Suicide Loss: for Younger Children
  - <https://afsp.org/story/returning-to-school-after-a-suicide-loss-for-younger-children>
- Returning to School After a Suicide: Loss for Teens
  - <https://afsp.org/story/returning-to-school-after-a-suicide-loss-for-teens>
- What To Do If Your Family Won't Talk About Your Suicide Loss
  - <https://afsp.org/story/what-to-do-if-your-family-won-t-talk-about-your-suicide-loss>
- How to Help your Teen Cope When Tragedy Hits
  - <https://www.teenlineonline.org/parents/95-2/>

# Appendix P

## Supporting Children and Teens after a Suicide Death

Retrieved from:

[https://www.dougy.org/assets/uploads/TDC\\_Supporting\\_Children\\_\\_Teens\\_After\\_a\\_Suicide\\_Death\\_2018.pdf](https://www.dougy.org/assets/uploads/TDC_Supporting_Children__Teens_After_a_Suicide_Death_2018.pdf)

## Supporting Children and Teens after a Suicide Death

from The Dougy Center: The National Center for Grieving Children & Families

Explaining suicide death to a child or teen can feel overwhelming and intimidating. As adults, we often want to protect them from the stigma and shame that can accompany such a death. Here are some tips for talking with children and teens about a suicide death and ways to support them in their grief.

### TALKING ABOUT SUICIDE DEATH

#### Tell the truth

How do I tell my child or teen? It's a question we hear a lot. Start with a short, simple explanation of what happened in language children can understand. Let their questions guide what else to share. You do not have to describe in detail what happened (unless they ask, and then you should answer honestly). You might say, "I have very sad news, Mommy died of something called suicide. She shot herself," or "Your dad died last night, he took too many pills." Avoid euphemisms such as passed away, went to sleep, crossed over, or lost (as in "we lost her"), as they can confuse children.



Children and teens might blame themselves and wonder if they could have done something to prevent the death.

Even though these discussions can be hard to have, being honest and open is an important first step in helping grieving children. It minimizes the confusion that comes from misinformation, and also keeps children from using their limited energy and inner resources to figure out what happened. Children who are not told the truth often fill in the blanks themselves, sometimes with a story that is worse than what actually happened. In fact, many children and teens come to believe that they somehow caused the death, especially if no one will tell them what happened. News also travels fast, and it is important for children to hear about the death from a caring adult rather than through social media or gossip.

#### The question "Why?"

"Why?" is often the first question everyone asks after someone dies of suicide. You can support children and teens by explaining there are many factors that can lead someone to die of suicide. A suicide death is not the result of a single event such as a break up, loss of a job, a death, or major disappointment, even though it may seem like that event was the cause of the death. Suicide death is a result of someone experiencing unbearable emotional pain, feeling hopeless about it ever getting better, and thinking death is the only way to stop that pain.

Children and teens might blame themselves and wonder if they could have done something to prevent the death. They may also fear they or someone else they care about will die of suicide. You can reassure them that the death was not their fault. You can also offer support by listening, encouraging them to come to you with questions and concerns, and helping them find ways to express their thoughts and emotions. Sharing with them about the ways you are seeking support for yourself can ease fears they may have about your health and safety.

### REACTIONS AND BEHAVIORS

#### Allow for a variety of emotional reactions

Children may experience many different emotions, including sadness, anger, frustration, fear, confusion, powerlessness, loneliness, shame, guilt, numbness, and relief. Their reactions may depend on their age, personality, experiences with



# Appendix P

## Supporting Children and Teens after a Suicide Death (continued)

### Supporting Children and Teens after a Suicide Death

*from The Dougy Center: The National Center for Grieving Children & Families*

death, and developmental level. Sometimes children don't show any visible reaction at all. There are no right or wrong feelings in grief, just individual experiences.

It is not uncommon for a child or teen to feel relief after the death, especially if mental health issues created turmoil. Some may feel the parent abandoned them, or that they were unlovable. Children tend to move quickly from one emotion to another, crying one minute and asking for a snack the next. With powerful emotions like anger and fear, consider finding ways for children to safely express them. Remind children that while it's okay to have big feelings, "You are really, really angry right now, and that's okay," it's not okay to hurt anyone or anything. "You can be really angry, but you can't kick me or throw your toys at the dog. You can punch the punching bag or stomp on the bubble wrap."

#### WHAT HELPS

##### Compassionate listening

When children and teens are grieving, people can be quick to offer advice and give opinions. What's most helpful is to listen without judging, interpreting, advising, or evaluating. It can be tempting to minimize their feelings, or convince them to think or feel differently than they do. If it's a case of misinformation, it's helpful to provide the correct details, but still allow them to express their take on things. Sometimes the best response is to validate their thoughts and feelings. For example, "You really get uncomfortable when kids at school talk about hating their mom. You wish they knew what it's like to have a mom die." Responding in this way helps children and teens trust that you will listen, leaving them more likely to come to you when they're hurting or needing advice. You don't have to have all of the answers. There are many questions surrounding a suicide death that do not have answers. It's okay to say you don't know.

##### Routines and consistency

Life is often in upheaval after a suicide death, so it's helpful to find ways to create predictability. Examples include: routines around breakfast, getting to school, after-school, chores, and bedtime. Children may also need some flexibility so they know what to expect, "Bedtime is at 7:30pm," but can trust that if they need something different ("Tonight we can read an extra story"), the people in their world will be responsive.

##### Choices

When someone dies, children can feel powerless and out of control. Giving children choices can help them regain a sense of power and control in their world and trust that they can have a say in their lives. Provide day to day choices that are in line with their developmental level. For example: "Would you like hot or cold cereal for breakfast?" "I need help with dinner, would you like to set the table or clear the dishes?" "The trash needs to go out today, would you rather take it out this morning or after school?"

It's also important to let children and teens make choices about issues directly related to the death and their grief. Examples include asking children and teens if they want to help with sorting the belongings of the person who died (and which items they would like to keep) and how they want to acknowledge significant days such as holidays, birthdays, and the anniversary of the death.

##### Space for play and creativity

Children and teens often turn to play, movement, and creativity to express themselves and make sense of their situation. Consider offering opportunities for playing with dolls and puppets; creating art of all kinds (remember the process is more important than the product); and writing, journaling, and making videos. Big energy play like running, punching

# Appendix P

## Supporting Children and Teens after a Suicide Death (continued)

### Supporting Children and Teens after a Suicide Death

from The Dougy Center: The National Center for Grieving Children & Families

a bag, shooting hoops, pounding on a drum, and sports can be safe ways to express strong emotions, as can playing an instrument, writing songs, or simply listening to music.

#### Remember the person who died

Remember and talk about how the person lived rather than just about how they died. Their life was unique and important. After a suicide death, people often avoid talking about the person who died because they don't know what to say. You can help by sharing pictures, stories, and details about the person's life: "Your daddy really liked going fishing with you," or "Your mom was a great cook, I know you loved her pancakes." Sometimes just remembering to say the person's name can be very meaningful to children and teens.



Children and teens often turn to play, movement, and creativity to express themselves and make sense of their situation.

#### Funerals, memorials, and celebration of life services

Many families who have experienced a suicide death wonder if they should hold a service and if children should be allowed to attend. Every family is different, but we've learned from children and teens that having some way of saying goodbye is important. Ask children and teens how much they want to be involved in the planning. They often have clear ideas about how they want to honor the person who died. For some families, choosing to have a service is another way of breaking down the stigma that can surround a suicide death.

#### Support at school

School can provide routine, familiarity, and consistency. It can also be a source of stress, depending on how understanding and flexible the school community is. Talk with teachers and other staff about the death and how they can be supportive. Ask your child what they would like to share with their classmates and others in the school, and help children plan how they will respond to questions. Here are some examples: "My brother died of suicide." "My mom died from taking too many pills." "My dad died, that is all I want to say right now." Sometimes families are surprised when members of the school community know more about the death than you and your children had planned to share. Consider preparing children for unexpected and sometimes unkind questions and comments.

#### Be aware of words

When talking about a suicide death the words you use matter. There are some ways of talking about it that can add to the shame and stigma surrounding suicide. For example, consider avoiding the phrase "committed suicide." Committed is a word associated with criminal behavior ("He committed a felony"). Instead, try saying "he died by suicide" or "she killed herself." Using this language decreases stigma and judgment by talking about suicide the way we would any other type of death ("She died of cancer"). Another challenging phrase is "successfully completed suicide." Remembering someone for being successful or unsuccessful at killing themselves adds to stigma. Negative comments such as, "That was such a selfish act," "He was so crazy, no wonder he killed himself," and "What a cowardly way to go," are not helpful. If questions come up, you can ask, "You're wondering if Daddy was being selfish. What do you think?" You can then add something to help them better understand how intense emotional pain can lead people to feel hopeless and think death is the only option to stop the pain they are in.



# Appendix P

## Supporting Children and Teens after a Suicide Death (continued)

### Supporting Children and Teens after a Suicide Death

from The Dougy Center: The National Center for Grieving Children & Families

#### Address the stigma

Talking openly and answering questions honestly is the one of the best ways to decrease stigma. It is often a shocking and uncomfortable topic and most people don't know what to say. By talking openly about it at home, you help children and teens feel less afraid of what has happened and more prepared to respond to the discomfort and judgment of others.



**When someone dies, children can feel powerless and out of control. Giving children choices can help them regain a sense of power and control in their world and trust that they can have a say in their lives.**

#### Get extra help if needed.

While most children and teens will ultimately return to their prior level of functioning following a death, some are potentially at risk for developing challenges such as depression, difficulties at school, or anxiety. Some families find it helpful to attend a support group where they can connect with others who are also grieving a suicide death. While friends, family, or a support group may be enough for most children, others may require additional assistance. If you notice ongoing behaviors that interfere with a child's daily life, seek the advice of a qualified mental health professional. Don't be afraid to ask about their experience and training in supporting children and teens after a suicide death. If you or a child you know is struggling with thoughts of suicide, please call The National Suicide Prevention Hotline 1-800-273-TALK (8255). They are available 24/7.

#### Find sources of support for yourself.

If you are parenting or supporting a grieving child, one of the best ways to help is to ensure that you are taking care of yourself. This doesn't mean hiding your grief from children and teens. Rather, it means ensuring that you have people and activities in your life that are sources of comfort and inspiration. By accessing support, you model for your children ways to take care of themselves, and you reassure them that you will have the energy and presence to be there for them. A great place to start is the American Foundation for Suicide Prevention. [<https://afsp.org/find-support/>]

These are just a few tips for supporting children and teens after a suicide death. Grief is unique to each person and every family, so adapt these suggestions as needed.

#### Our Mission

The Dougy Center provides support in a safe place where children, teens, young adults, and their families grieving a death can share their experiences.

#### The Dougy Center Bookstore/Resources

The Dougy Center has been helping children, teens, young adults and their parents cope with death since 1982. Our practical, easy-to-use materials are based on what we have learned from over 40,000 Dougy Center participants over the past three decades. To order online, visit [www.dougy.org](http://www.dougy.org) or [www.tdcbookstore.org](http://www.tdcbookstore.org) or call 503.775.5683.



The Dougy Center

The National Center for Grieving Children & Families

# Appendix Q

## Memorials After a Suicide: Guidelines for Schools and Families

Retrieved from: [http://www.sptsusa.org/wp-content/uploads/2015/05/Memorials\\_After\\_a\\_Suicide.pdf](http://www.sptsusa.org/wp-content/uploads/2015/05/Memorials_After_a_Suicide.pdf)



### MEMORIALS AFTER A SUICIDE: *Guidelines for Schools and Families*

When a school community experiences the death of a student, there is often the human tendency to want to do something in memory of the deceased student. These memorials can range from spontaneous tributes piled at lockers or parking space to more permanent, lasting tributes like placing plaques in halls or planting trees or garlands in the student's name. There may also be ceremonies or assemblies that bring together members of the school community to share memories and grieve together.

The one circumstance that may give schools pause in permitting these types of remembrances is when the death is by suicide. Currently, there is no specific research that addresses the connection between school-based memorials and copy-cat suicide contagion. There is research however about media coverage of suicides that found sensationalized news coverage contributed to copy-cat deaths. Experts in the field of postvention have reported anecdotal evidence to support the common-sense observation that vulnerable students who are at-risk for suicide may be affected by these memorials. The distorted thinking of someone who is suicidal can be hard for those of us who have never entertained thoughts about suicide to understand. There is an irrational quality in the mental state of someone who is contemplating intentional death that overrides the intrinsic survival instinct. While the logic of dying by suicide so that the school will put up a plaque or hold an assembly to acknowledge the death is almost impossible for most of us to comprehend, it is the way suicidal students can think.

And what is even more complicating, is the fact that suicide contagion or clusters are often instigated by a death that is not a suicide. The first death or what public health officials call the 'index event' in a suicide cluster is often an accidental death. This is why it's essential that memorials to every death in a school community be handled in thoughtful ways that consider their potential impact on at-risk students.

Potentially suicidal students are not the only members of the school community who may be affected by dramatic or permanent memorials. Students who were close friends of the deceased or even faculty and staff who knew the students may be retraumatized by reminders of the death. As one educator in a school where six students had died in a one-month period stated: "I would be having a good day until I saw a student wearing a shirt with a picture of one of those students...then all I could think about is how they weren't here anymore."

The task for schools, of course, is to develop a consistent policy that addresses requests for memorials in the same way, regardless of the circumstances of the death. It can be a challenge to balance compassion with caution, especially in the immediate aftermath of a sudden student death. And while this topic has received an increased amount of attention in recent years, even some of the most reputable sources provide information that is dated or somewhat inconsistent.



# Appendix Q

## Memorials After a Suicide: Guidelines for Schools and Families (continued)



Here are some of the common questions raised about memorials by administrators, faculty, and students. Both the questions and the responses can provide talking points for your school and assist as you proactively craft policies, procedures and protocols that guide your school in addressing this very important topic.

### *Don't memorials assist in the grieving process?*

Yes, for many people they are initiated as a way to honor the memory of the deceased and can reflect shared grief over a loss. They can also help to lessen some of the loneliness that can accompany the death of someone who was important by engaging groups of people in the planning and execution of the memorial itself. Cultural and religious rituals for death often incorporate a piece of that community healing into their ceremonies, and burial sites reflect the importance that some people place on having a lasting memorial to the deceased. What we sometimes forget, however, is that unlike in a family, not everyone in a school is affected by a death. Some students may not have even known the deceased, so have no need to be involved in the grieving process. This is why creating memorial guidelines can be so difficult - you want to help in the process of grief but not stigmatize those who were unaffected by the death. And again, remember that the student was also a member of the larger community, which generally is the more appropriate site for permanent memorials.

### *Should funeral activities ever be held in the school?*

Ideally funerals are best held in places other than the school, like religious settings. However, in some communities, especially those in rural areas, the school is the normal center of all activities and funerals are no exceptions. When it is a common practice to hold a funeral in the school gym or auditorium, students may be less unnerved by this custom than those who attend schools where an in-school funeral would be an exceptional event. It's a good idea, though, regardless of custom, to reach out to vulnerable students after a funeral to check-in on their reactions.

### *Can you hold memorials for some students and not for others?*

While it is certainly true that not every death has the same impact on the members of the school community, it is really important that the official policy of the school reflect a similar response to all deaths. When the approach is differential, it can be perceived that the school values the life of one student more than another or, even worse, that there is a stigma to deaths that occur under certain circumstances, like suicide.

### *Isn't it best to hold a memorial assembly for the entire school so you know everyone gets the same messages?*

Actually, the 'same messages' can be delivered more effectively in classroom formats. Teachers can read a prepared statement to students that is simple, direct and to the point: the school has lost a valuable member of its community to a sudden, tragic death. In a classroom, the teacher can eye-ball student reaction and identify students who may need additional support, which is impossible to do in a large assembly. There are also fewer opportunities for the situation to become intensely emotional and potentially out of control in the small group format of a classroom. In most places, it isn't the school's responsibility to hold a memorial service – it is really better handled in a community setting, like a house of worship.

# Appendix Q

## Memorials After a Suicide: Guidelines for Schools and Families (continued)



### *What do you do about 'spontaneous' memorials?*

As one of the immediate responses to the death of a peer, students may create spontaneous memorials at the locker or parking spot of the deceased. These are examples of what we call “passive grieving”- placing a picture, flower, or small object as a token of remembrance. It’s important to let the students have an opportunity to express their feelings by creating these mini-shrines, but make sure your school protocols addresses the following questions:

- What is the acceptable duration for these tributes?
- How will you communicate that information to the students?
- What will you do with the tributes after you remove them?
- What alternative activity can you provide for students who need to continue to express their grief?

An idea to consider: allow the tributes until the day after the funeral. Place a note on the locker or parking spot that says something like: “We appreciate your gestures of remembrance for NAME THE STUDENT. Your tokens will remain here until the day after the funeral. They will then be collected and given to his/her family, whom we know will appreciate your kindness and compassion. (Please remember to check with the family beforehand to make sure this will be okay with them.) If you would like to share other thoughts with the family, please come to the guidance office to write your personal thoughts in a memory book.”

This memory book encourages something we call ‘active grieving’. It requires students to share something about the deceased - their feelings, memories, whatever! - that can actually help them more personally deal with what the death means to them. Creating this kind of memory book also serves another very important function. What a family loses when one of its members dies is not just the life of that person but any chance to ever know the ways in which the deceased interacted with people outside the family. By encouraging students to share a story about the deceased, the family is actually gifted with a memory that might never have had.

Another type of spontaneous memorial that seems to be showing up with increasing frequency is the creation of wearing apparel like tee shirts or sweatshirts with a picture of the deceased. School officials are generally unaware that students are even planning this kind of tribute until students arrive at school wearing the shirts. For the students who create the shirts, of course, the intent is to honor their deceased peer. The last thing on their minds is the negative impact these shirts may have on other vulnerable students. In an attempt to contain these types of tributes, schools have identified the students who orchestrated the printing of the shirts, met with them and explained their inadvertent impact on other students. Students are asked not to wear the shirts to school and are invited to craft other, less dramatic ways to remember their deceased peer.

### *What other types of memorial activities inappropriate?*

Use this as your benchmark: if it dramatizes, sensationalizes, or glamorizes the student, or creates an opportunity for continuing attention to the death, it is probably not a good idea. Samples of inappropriate activities include:

- Flying the flag at half-staff
- Putting a notice on the school’s outdoor message board
- Letting students create and wearing apparel like tee-shirts, sweatshirts or armbands



# Appendix Q

## Memorials After a Suicide: Guidelines for Schools and Families



### *What other types of memorial activities inappropriate? (cont)*

- Planting trees or gardens
- Placing plaques in school corridors
- Naming rooms or sports venues
- Creating banners
- Dedicating yearbooks, dances, sporting events to the person
- Making special acknowledgements at graduation ceremonies

### *What kinds of memorials are 'appropriate'?*

The benchmark here is to create a memorial that is life-affirming and encourages coping skills and resilience, especially in the face of difficult life events. Samples of these types of activities include:

- Making donations to a local crisis center
- Participating in an event that raises awareness about suicide prevention
- Buying books for the school library or hosting school programs that highlight resilience
- Creating community based service activities in the school that emphasize the importance of student's taking care of each other and provide opportunities for taking an active role in helping others
- Writing notes to the family to encourage the 'gift of memories'
- Implementing a suicide prevention program in the school
- Collaborating with community agencies and groups that promote good mental health, such as the local chapter of the Mental Health Association

### *What can the school do about on-line memorials?*

This is a really important concern since this has become one of the more common ways today's youth honor a deceased peer. These sites usually appear within hours of the death. You certainly can't stop students from creating them, but you can try to monitor them. Many times the sites may be public which means you don't have to be a 'friend' to see them. Try to find someone who is savvy with online lingo and can translate postings to monitor the site activity. If there is anything of concern, make sure someone in the school is notified. When you are concerned about postings on the private Facebook page of the deceased, enlist other members of the school community who may have access to the site to help monitor what students are writing. For additional tips on how to monitor on-line postings, visit the National Suicide Prevention Lifeline website: [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org).

### *How do you handle issues like yearbook pages or graduation ceremonies?*

Carefully, with respect and in line with the school's established policies and procedures. It is important to recognize that yearbook tribute pages risk crossing the line of sensationalizing the deceased student, and may therefore pose a risk for those vulnerable students we mentioned earlier. To address this, some schools are adopting yearbook standards to make it clear that deceased students will be remembered in the same way as their living peers - with pictures, short quotes and acknowledgement of the contributions they have made to the school. Under no circumstances, should the circumstances of the death be highlighted. Yearbooks are tributes to the accomplish-

# Appendix Q

## Memorials After a Suicide: Guidelines for Schools and Families



ments students made during their academic careers, not to the way in which they died. Graduation ceremonies can follow the same guidelines - acknowledgement of the student as a member of the matriculating class.

### *How can schools implement memorial guidelines when they have established precedent that run counter to some of these suggestions?*

For most schools, the response to a student death is not specifically addressed in board-approved policies. It is an unwritten protocol that may have been used so often through the years that it seems to have become an established precedent. It is certainly appropriate, however, to consider revisiting your existing memorial precedents in light of the increasing body of knowledge about contagion and copy-cat behaviors in youth and making clear recommendations based on enhancing school safety for at-risk youth. Schools may also want to consider creating a committee to review all memorial requests. This committee could include a school board member, administrator, faculty and staff members, a parent and a student (in a high school setting). Armed with knowledge about the implications of memorials in suicide clusters or contagion, this committee can be charged with making the careful decisions about memorials that consider student safety.

### *How can you help students - or parents understand the potential risk presented by memorials to vulnerable students?*

This is a really important question that should ideally be considered in theory before a school is confronted with the fact of a student's death. Having a memorial committee that reviews all requests can be a helpful part of this process, especially if they are also able to meet with parents or students and explain the reasons behind the school's decision that reflect documented concerns about copy-cat suicides. This explanation, however, is only one part of the process. It is really important to not just discourage certain types of potentially dramatic memorials but also to encourage other memorials that emphasize life-affirming activities. It may take a little extra time to help direct parents or students to these other types of activities, but it can lessen or eliminate the contentiousness that can sometimes cloud this process when students and or parents feel their feelings are not being considered or respected.

Another effective strategy, especially when dealing with the parents of the deceased, is to engage a survivor parent (a parent who has lost a child to suicide) to help advocate for the school's position. The survivor parent can speak with a credibility and level of understanding that comes from shared experience. Your local chapter of the American Foundation for Suicide Prevention ([www.afsp.org](http://www.afsp.org)) may be helpful in identifying survivor parents to help your school with these delicate conversations.



# Appendix R

## Reporting on Suicide: Media Guidelines

Retrieved from: <https://reportingonsuicide.org/wp-content/themes/ros2015/assets/images/ROS-001-One-Pager-1.13.pdf>

reporting  
on suicide

### Best Practices and Recommendations for Reporting on Suicide

#### Media Plays an Important Role in Preventing Suicide










1. Over 100 studies worldwide have found that risk of contagion is real and responsible reporting can reduce the risk of additional suicides.
2. Research indicates duration, frequency, and prominence are the most influential factors that increase risk of suicide contagion.
3. Covering suicide carefully can change perceptions, dispel myths and inform the public on the complexities of the issue.
4. Media reports can result in help-seeking when they include helpful resources and messages of hope and recovery.

#### Partner Organizations

These recommendations were established using a consensus model developed by SAVE. The process was led by SAVE and included leading national and international suicide prevention, public health and communication's experts, news organizations, reporters, journalism schools and internet safety experts. Collaborating organizations include:

American Association of Suicidology • American Foundation for Suicide Prevention • American Psychoanalytic Association • Annenberg Public Policy Center • Associated Press Managing Editors • Canterbury Suicide Project – University of Otago, Christchurch, New Zealand • Centers for Disease Control and Prevention • Crisis Text Line • Columbia University Department of Psychiatry • ConnectSafely.org • International Association for Suicide Prevention Task Force on Media and Suicide • Medical University of Vienna • National Alliance on Mental Illness • National Institute of Mental Health • National Press Photographers Association • The Net Safety Collaborative • National Suicide Prevention Lifeline • New York State Psychiatric Institute • The Poynter Institute • Substance Abuse and Mental Health Services Administration • Suicide Awareness Voices of Education • Suicide Prevention Resource Center • Vibrant Emotional Health

**Recommendations:** Following these recommendations can assist in safe reporting on suicide.

AVOID...	INSTEAD...
 Describing or depicting the method and location of the suicide.	 Report the death as a suicide; keep information about the location general.
 Sharing the content of a suicide note.	 Report that a note was found and is under review.
 Describing personal details about the person who died.	 Keep information about the person general.
 Presenting suicide as a common or acceptable response to hardship.	 Report that coping skills, support, and treatment work for most people who have thoughts about suicide.
 Oversimplifying or speculating on the reason for the suicide.	 Describe suicide warning signs and risk factors (e.g. mental illness, relationship problems) that give suicide context.
 Sensationalizing details in the headline or story.	 Report on the death using facts and language that are sensitive to a grieving family.
 Glamorizing or romanticizing suicide.	 Provide context and facts to counter perceptions that the suicide was tied to heroism, honor, or loyalty to an individual or group.
 Overstating the problem of suicide by using descriptors like “epidemic” or “skyrocketing.”	 Research the best available data and use words like “increase” or “rise.”
 Prominent placement of stories related to a suicide death in print or in a newscast.	 Place a print article inside the paper or magazine and later in a newscast.

For more information and examples of best practices when reporting on suicide, visit [ReportingOnSuicide.org/Recommendations](https://reportingonsuicide.org/Recommendations)

# Appendix R

## Reporting on Suicide: Media Guidelines (continued)

### Checklist for Responsible Reporting

- ❑ **Report suicide as a public health issue.** Including stories on hope, healing, and recovery may reduce the risk of contagion.
- ❑ **Include Resources.** Provide information on warning signs of suicide risk as well as hotline and treatment resources. At a minimum, include the National Suicide Prevention Lifeline and Crisis Text Line (listed below) or local crisis phone numbers.
- ❑ **Use Appropriate Language.** Certain phrases and words can further stigmatize suicide, spread myths, and undermine suicide prevention objectives such as “committed suicide” or referring to suicide as “successful,” “unsuccessful” or a “failed attempt.” Instead use, “died by suicide” or “killed him/herself.”
- ❑ **Emphasize Help and Hope.** Stories of recovery through help-seeking and positive coping skills are powerful, especially when they come from people who have experienced suicide risk.
- ❑ **Ask an Expert.** Interview suicide prevention or mental health experts to validate your facts on suicide risk and mental illness.

### Reporting Under Unusual Circumstances

**A mass shooting** where a perpetrator takes his or her life is different from an isolated suicide. Recommendations for reporting on mass shootings can be found at [reportingonmassshootings.org](http://reportingonmassshootings.org).

**A homicide-suicide** is also different from an isolated suicide. The circumstances are often complex in these incidents, as they are in suicide. To minimize fear in the community, avoid speculation on motive and cite facts and statements that indicate that such events are rare. Show sensitivity to survivors in your interviews and reporting. Highlight research that shows most perpetrators of homicide-suicide have mental health or substance use problems, but remind readers that most people who experience mental illness are nonviolent.

### Crisis Resources to Include in Stories



**The National Suicide Prevention Lifeline** is a hotline for individuals in crisis or for those looking to help someone else. To speak with a certified listener, call **1-800-273-8255**.



**Crisis Text Line** is a texting service for emotional crisis support. To speak with a trained listener, text **HELLO to 741741**. It is free, available 24/7, and confidential.

### Helpful Side-Bar for Stories



#### Warning Signs Of Suicide

- Talking about wanting to die
- Looking for a way to kill oneself
- Talking about feeling hopeless or having no purpose
- Talking about feeling trapped or unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious, agitated or recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings



#### What to Do

- Do not leave the person alone
- Remove any firearms, alcohol, drugs, or sharp objects that could be used in a suicide attempt
- Call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)**
- Take the person to an emergency room, or seek help from a medical or mental health professional

For more information and examples of best practices when reporting on suicide, visit [ReportingonSuicide.org/Recommendations](http://ReportingonSuicide.org/Recommendations)



# Appendix S

## Key Messages for Media Spokesperson

THIS INFORMATION IS FOR USE BY THE PERSON DESIGNATED BY THE SCHOOL TO SPEAK WITH THE MEDIA

### School's Messages

- We are heartbroken over the death of one of our students. Our hearts and thoughts go out to **[HIS/HER]** family and friends and the entire community;
- We will be offering grief counseling for students and staff starting on **[DATE]** and lasting through **[DATE]** or as long as needed;
- We will be hosting an informational meeting for parents and the community regarding suicide prevention on **[DATE/TIME/LOCATION]**. Experts will be on hand to answer questions; and
- Absolutely No TV cameras or reporters will be allowed in the school or on school grounds.

### School's Response to Media

- The media are strongly encouraged to refer to the document Reporting on Suicide's **Best Practices and Recommendations for Reporting on Suicide** (Appendix R);
- Research has shown that graphic, sensationalized, or romanticized descriptions of suicide deaths in the news media can contribute to suicide contagion (i.e., copycat suicides), particularly among youth;
- Media coverage that details the location and manner of suicide with photos or video increases the risk of contagion;
- Media should also avoid oversimplifying the cause of a suicide (e.g., "student took his own life after breakup with girlfriend."). This gives the audience a simplistic understanding of a complicated issue;
- Remind the public that in a majority of suicide deaths, mental health conditions play an important role, underscoring the need to address mental health concerns proactively; and
- Media should include links to or information about helpful resources, such as local crisis hotlines and the National Suicide Prevention Lifeline: 800-273-TALK (8255).

### Information on Suicide

- Suicide is complicated and involves multiple risk factors. It is not simply the result of stress or difficult life circumstances. Many people who die by suicide have a mental health condition, the most common of which is depression;
- Mental health conditions and substance abuse problems are treatable; and
- The best way to prevent suicide is through early detection, diagnosis, and treatment of depression and other mental health conditions, including substance abuse problems.

Taken from:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.

# Appendix T

## Sample Media Statement

TO BE PROVIDED TO LOCAL MEDIA OUTLETS EITHER UPON REQUEST OR PROACTIVELY  
WHEN A SUICIDE HAS OCCURRED  
(TEMPLATE I of II)

- **It is important for a CRT member to liaise with the family to determine their wishes about communication within the media;**
- **Template should be adapted/modified to meet the district's unique needs at the time of the crisis.**

School personnel were informed by the coroner's office that a **[AGE OF STUDENT]** year-old student at **[SCHOOL NAME]** has died. The cause of death was suicide. Our thoughts and support go out to **[HIS/HER]** family and friends at this difficult time.

The school will be hosting a meeting for parents and others in the community at **[DATE/TIME/LOCATION]**. Members of the school's Crisis Response Team **[OR MENTAL HEALTH PROFESSIONALS]** will be present to provide information about common reactions following a suicide and how adults can help youths cope. They will also provide information about suicide and mental health conditions in adolescents, including risk factors and warning signs of suicide, and will address attendees' questions and concerns. A meeting announcement has been sent to parents, who can contact school administrators or counselors at **[CONTACT INFORMATION]** for more information.

Trained crisis counselors will be available to meet with students and staff starting tomorrow and continuing over the next few weeks as needed.

### SUICIDE WARNING SIGNS

These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has recently increased in frequency or intensity, and if it seems related to a painful event, loss, or change.

- Talking about wanting to die or kill oneself;
- Looking for ways to kill oneself, such as searching online or buying a gun;
- Talking about feeling hopeless or having no reason to live;
- Talking about feeling trapped or in unbearable pain;
- Talking about being a burden to others;
- Increasing the use of alcohol or drugs;
- Acting anxious or agitated, or behaving recklessly;
- Sleeping too little or too much;
- Withdrawing or feeling isolated;
- Showing rage or talking about seeking revenge; and/or
- Displaying extreme mood swings.

### RESOURCES

- National Suicide Prevention Lifeline, 1-800-273-TALK (8255)
- Marin County Crisis Hotline, 1-415-473-6666

### RECOMMENDATIONS FOR REPORTING ON SUICIDE

Research has shown that graphic, sensationalized, or romanticized descriptions of suicide deaths in the news media can contribute to suicide contagion ("copycat" suicides), particularly among youth.

Media are **strongly encouraged** to refer to the document AFSP's Media Guidelines: ***Recommendations for Reporting on Suicide*** (Appendix R) which is available at:

<https://reportingonsuicide.org/wp-content/themes/ros2015/assets/images/ROS-001-One-Pager-1.13.pdf>



# Appendix T

## Sample Media Statement (continued)

TO BE PROVIDED TO LOCAL MEDIA OUTLETS EITHER UPON REQUEST OR PROACTIVELY WHEN  
A SUICIDE HAS OCCURRED  
(TEMPLATE II of II)

- It is important for a CRT member to liaise with the family to determine their wishes about communication within the media;
- Template should be adapted/modified to meet the district's unique needs at the time of the crisis.

School staff were informed that a **[AGE OF STUDENT]** year-old student at **[SCHOOL NAME]** school has died. The cause of death was suicide. Our thoughts and support go out to **[HIS/HER]** family and friends at this difficult time.

The school will be hosting a meeting for parents and others in the community at **[NOTE SPECIFIC LOCATION]**. Members of the school's Crisis Response Team **[OR MENTAL HEALTH PROFESSIONALS]** will be present to provide information about common reactions following a suicide, how adults can help youth cope, the emotional needs of adolescents, and the risk factors and warning signs of suicide. They will also address attendees' questions and concerns. A meeting announcement has been sent to parents, who can contact school administrators or counselors at **[CONTACT INFORMATION]** or **[CONTACT INFORMATION]** for more information.

Trained crisis counselors will be available to meet with students and staff starting tomorrow and continuing over the next few weeks as needed.

Leaders in the suicide prevention field agree that the following warning signs indicate a young person may be at risk:

### YOUTH WARNING SIGNS

- Talking about or making plans for suicide;
- Expressing hopelessness about the future;
- Displaying severe/overwhelming emotional pain or distress.

### WHAT TO DO RIGHT AWAY

- Do not leave the student alone and unsupervised. Make sure the student is in a secure environment supervised by caring adults until he or she can be seen by the school mental health contact.
- Make sure the student is escorted to the school's mental health professional.
- Provide any additional information to the school's mental health professional.

- Withdrawal from or change in social connections or situations;
- Changes in sleep (increased or decreased);
- Anger or hostility that seems out of character or out of context;
- Recent increased agitation or irritability.

- Ask if the student is okay or if he or she is having thoughts of suicide;
- Express your concern about what you are observing in his/her behavior;
- Listen attentively and nonjudgmentally;
- Reflect what the student shares and let the student know he or she has been heard;
- Tell the student he or she is not alone;
- Let the student know there are treatments available that can help;
- If you or the student are concerned, guide him/her to additional professional help, or to call the National Suicide Prevention Lifeline 24 hours, 7 days a week: 1-800-273-TALK (8255)

Taken from:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.

# Appendix T

## Sample Media Statement (continued)

TO BE PROVIDED TO LOCAL MEDIA OUTLETS EITHER UPON REQUEST OR  
PROACTIVELY WHEN A SUICIDE HAS OCCURRED  
(TEMPLATE II of II continued)

- It is important for a CRT member to liaise with the family to determine their wishes about communication within the media;
- Template should be adapted/modified to meet the district's unique needs at the time of the crisis.

### RESOURCES

National Suicide Prevention Lifeline, 1-800-273-TALK (8255)

Marin County Crisis Hotline, 1-415-473-6666

### RECOMMENDATIONS FOR REPORTING ON SUICIDE

Research has shown that graphic, sensationalized, or romanticized descriptions of suicide deaths in the news media can contribute to suicide contagion ("copycat" suicides), particularly among youth.

### [SCHOOL] MEDIA SPOKERSPERSON CONTACT INFORMATION

[NAME]

[TITLE]

[PHONE]

[E-MAIL ADDRESS]

Media are **strongly encouraged** to refer to the document AFSP's Media Guidelines: **Best Practices and Recommendations for Reporting on Suicide** (Appendix R) which is available at:

<https://reportingonsuicide.org/wp-content/themes/ros2015/assets/images/ROS-001-One-Pager-1.13.pdf>

Editable document available at: <https://www.marinschools.org/Page/268>

Taken from:  
American Foundation for Suicide Prevention, & Suicide Prevention Resource Center (2018). "After a suicide: A toolkit for schools" (2nd ed.). Waltham, MA: Education Development Center.



# Appendix U

## Example of School Newspaper Reporting

THE NOVATO UNIFIED SCHOOL DISTRICT MEMORIALIZED A STUDENT IN A WAY THAT DEMONSTRATED SENSITIVITY TOWARDS THE FAMILY OF THE DECEASED AND HELPED THE STUDENT POPULATION PROCESS THE LOSS. THE SCHOOL'S FACULTY ADVISOR COLLABORATED WITH THE SCHOOL'S COUNSELING TEAM, STUDENTS AND THE FAMILY OF THE DECEASED STUDENT TO CREATE A PIECE IN THE SCHOOL'S NEWSPAPER THAT FOLLOWS HERE:

### **This message has been brought to you by the NUSD Behavioral Health Team**

Everyone moves at their own pace through the states of crisis and healing:

Give yourself permission to grieve in your own way and in your own time. Let the tears flow. Tears are a very natural and necessary part of grief. Tears help you express feelings that you may not have words for.

They are NOT a sign of weakness.

If you are experiencing feelings of anger, then give yourself permission to verbalize those feelings with someone you trust. You can also release anger by running, skating, lifting weights, writing in a journal, drawing, painting, or calling a friend. Let people know what you need.

It's also important to remember that if someone does ask you about your loss at a time when you don't feel like talking about it that it is okay to tell them you don't feel like talking about it right now.

Be good to yourself. Take time to get the rest you need. Balance that rest with regular periods of exercise and good diet; they are crucial to your physical and emotional well-being.

Don't compare your feelings of grief with how others are managing their grief. Others may appear fine, but privately they are hurting just like you. You have much to give. Even when we are in pain, we still have the ability to give to others. It may be hard to imagine, but giving to others will help you in your own healing process.

"See Something, Say Something". If you are concerned about a friend or classmate, please encourage him or her to seek help or share your concern with a trusted adult. NHS always has resources on campus every day, including our counselors, mental health clinicians, and school psychologist.

If you would like to access help outside of school, then you can use the following resources:

24/7 Text Line: 741741

Trevor Project Crisis Support 1-866-488-7386, 24 hours a day

Marin County Crisis Support 1-888-818-1115, 24 hours a day

# Appendix V

## Social Media/Technology Use in Crisis Response

### TO BE UTILIZED WHEN THE DEATH HAS BEEN RULED A SUICIDE

#### Information that can be Disseminated

Schools may already have a website and/or an online presence on one or more social media sites. These can be used to share information with students, teachers, and parents regarding the following:

- The funeral or memorial service (schools should check with the family before sharing information about the funeral);
- Where students can go for help or to meet with counselors;
- Facts related to mental illness and the warning signs of suicide;
- Local mental health resources;
- The National Suicide Prevention Lifeline: 800-273-TALK (8255) or [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org) for live chat;
- Other national suicide prevention organizations, such as American Foundation for Suicide Prevention (AFSP) and Suicide Prevention Resource Center (SPRC); and
- An emphasis on help-seeking and suicide prevention.

Students can also be enlisted to post this information on their own social media outlets as appropriate.

#### Sample Social Media Post

Following a suicide, students may use social media as a means to express their feelings about what has happened and give and receive emotional support. This exposure may cause some students to have feelings of harming themselves. These students may be supported by having students, staff, and the community post social media messages consistent with the following:

**"Suicide can best be prevented through treatment and support. You can honor [name] by seeking help if you or someone you know is struggling. If you are feeling lost, desperate, or alone - please call the National Suicide Prevention Lifeline: 1.800.273.TALK (8255). The call is free and confidential, and crisis workers are available 24/7 to assist you. To learn more about Lifeline, visit [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)."**

#### Please Note

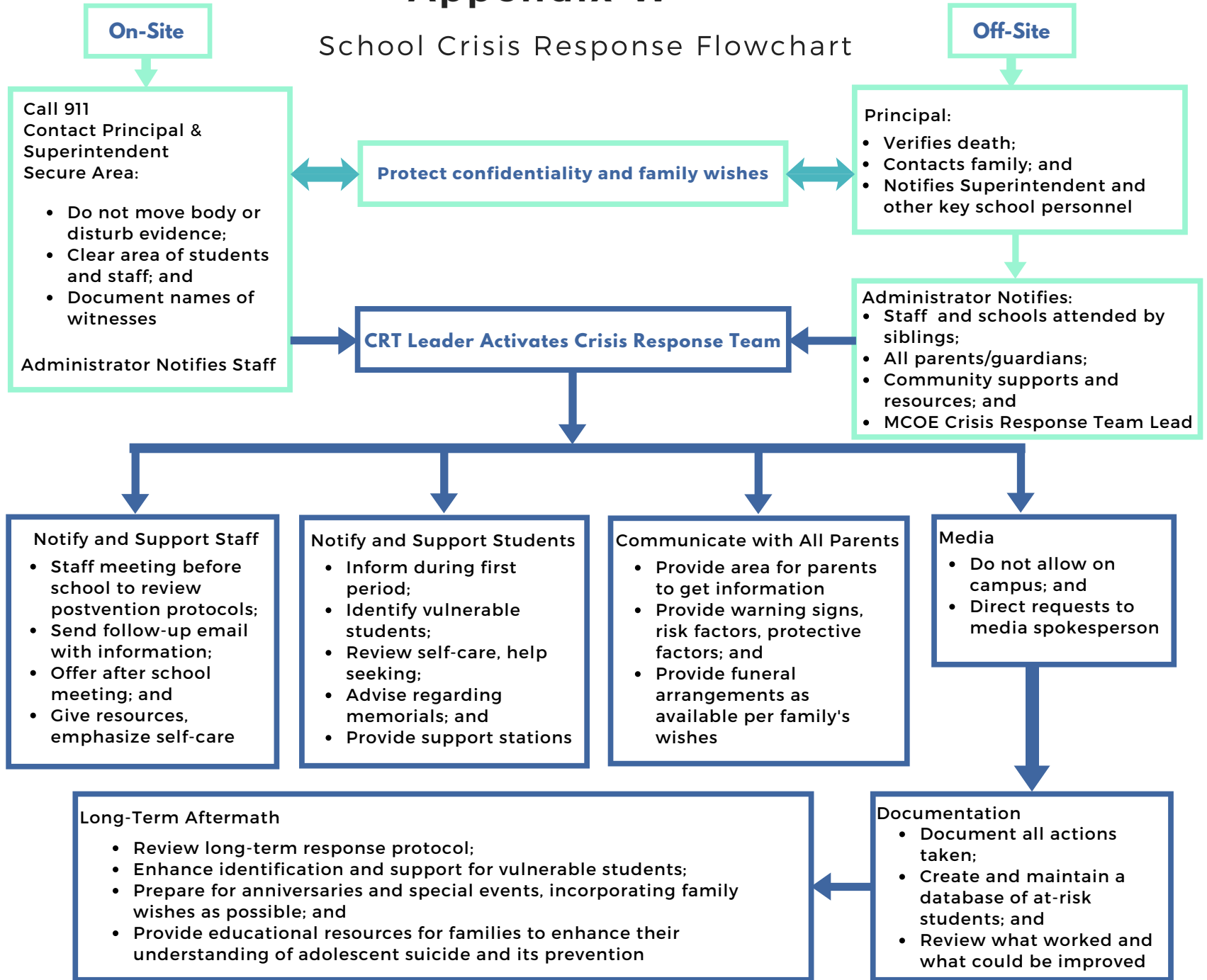
Messages posted online (e.g., social media profiles) following a suicide are important, as they can have a negative or positive effect and can help to prevent future tragedies. There is substantial evidence that certain messages (e.g., those that glamorize the suicide) and certain information (e.g., details regarding the method of suicide used) may contribute to contagion. While the messages posted online following a suicide should honor the person who died and comfort those impacted by the loss, it is important to make sure that those reading about the deceased online via Facebook, websites, etc. can understand that there are a number of measures that can be taken to help prevent suicide.

Lastly, when someone dies by suicide, the social media profiles of the deceased typically become hubs for conversation about the suicide. Therefore, the National Suicide Prevention Lifeline recommends that parent/s monitor their child's Internet use during this time. Doing so will help identify individuals who may be in need of additional support or further intervention.



# Appendix W

## School Crisis Response Flowchart



# References

## Source Documents

**The material presented within this document was taken and adapted from the following sources:**

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