

Risk Factors of Student Suicide

School Resources to Support Military-Connected Students is a project by the Clearinghouse for Military Family Readiness an applied research center at The Pennsylvania State University and is funded by the Department of Defense Education Activity Grant number HE1254-19-0009.

For more information click on the links below:

<https://schoolresources.militaryfamilies.psu.edu/>

<https://militaryfamilies.psu.edu/>

<https://www.psu.edu/>

<https://dodeagrants.org/>

Our goal is to provide school personnel with free, evidence-based resources to support military-connected students. This training is part of our Suicide Prevention series.

Important Reminders

Before starting this training, please read the items below carefully and check the box in front of each item to indicate your understanding.

- The following content discusses suicide and may be upsetting to some individuals.
- Follow all district, local, state, and federal regulations. This training is **NOT** intended to replace or override existing procedures or laws.

Introduction

What is the purpose of this training?

What may predispose a student to attempt or die by suicide? Risk factors differ from warning signs and range from individual to environmental factors. Knowing these risk factors provides a starting place for professionals to identify students who may need additional support. Remember that not all students with identified risk factors for suicide or self-harm will necessarily have all or any these thoughts or behaviors- this is just a starting point. Risk factors are important to be aware of but are not a diagnosis.

Objective

The goal of this training is to increase your confidence in your ability to:

Identify risk factors of student suicide.

How confident are you in your ability to do this now?

Please click on the link below to submit your response.

https://pennstate.qualtrics.com/jfe/form/SV_6Gp3iBHlvhcTluR?modulenumber=suicide10

Verify that you have completed each of the tasks below before proceeding with this training.

Answered the survey question in the link.

Clicked the arrow underneath the survey question to submit your response.

Recorded the ID number provided after you submitted your answer to the survey question. You will need it to complete the survey at the end of this training.

Research

What is most important for me to know?

Risk factors can be viewed from two perspectives: individual (those factors specific to or within the person) and environmental (aspects of the family, school, or community context). When thinking about a student's level of risk, it is important to consider both aspects because it is easy to overlook the environmental factors as they pertain to the individual. Student support personnel can impact environmental factors within both the home and school by addressing contextual factors with parents, other educators, and peers.

This information can also be found on a handout that you will be able to download at the end of this training.

Individual Risk Factors

Individual factors, or those that are inherent within the student, can vary.

Psychopathology

One of the most important and consistent risk factors for individuals is psychopathology, or a diagnosed mental illness. According to the American Foundation for Suicide Prevention, nine out of ten persons who die by suicide had a mental illness. Although the presence of psychopathology may seem intuitive in identifying students at risk, it has two important implications. First, given the increased risk of suicide for students with psychopathology, it is important for school psychologists to consider universal mental health screening as part of their prevention efforts. Second, when students have chronic mental health challenges, these conditions can become normalized and their increased risk can be ignored or minimized over time.

Previous suicide attempts and NSSIs

Other individual risk factors that seem obvious, but can be easy to minimize or ignore, are previous suicide attempts and non-suicidal self-injury (NSSIs) like cutting. Sometimes even experienced practitioners can begin to get a false sense of security when students have had previous attempts at self-harm—if these students have also displayed other behavior problems or attention-seeking tendencies. Although it is sometimes natural for previous attempts to be minimized, it is vital not to do so.

Sexual minority status

In addition to previous attempts, suicidal ideation, and plans for self-harm, students of sexual minority status (Lesbian, Gay, Bisexual, Transgender, Queer, or questioning youth) are also at increased risk of suicide.

Certain religious or cultural beliefs

Certain beliefs may also contribute to increased risk for suicide. Specifically, school professionals may have more cause for concern if a student has cultural or religious beliefs that include being reunited with loved ones after death, or suicide being viewed as noble or honorable

Poor coping skills

Youth that demonstrate poor coping and problem-solving skills for managing stress and other challenges may be at increased risk.

Isolation

Finally, students who are isolated from others or who are unwilling to seek help for their problems (due to stigma or other barriers) are also at higher risk for suicide.

Environmental Factors

Children exist in nested contexts (Bronfenbrenner & Morris, 2006), and their outcomes are affected by a variety of issues outside of their direct control. School culture can be a significant risk factor for students—especially in school communities that support or fail to deter peer victimization (Klomek, Marracco, Kleinman, Schonfeld, & Gould, 2008). If bullying, peer victimization, or other stressful school culture factors are at play, school providers may want to consider these issues as they identify appropriate prevention strategies for students in their charge.

Bullying

Bullying has been particularly highlighted as a risk factor that can increase the risk of suicide— even into the adult years. Bullying should not be overlooked. While it may be tempting to view being a victim of bullying as related to individual factors personal to the victim, the research suggests that victimization is primarily related to family factors (e.g., maltreatment, domestic violence, parent depression, etc.) and the school environment including a lack of sufficient adult supervision, poor school climate, and ineffective discipline practices. Thus, addressing bullying is a reasonable avenue for decreasing suicide risk through the creation of a supportive school environment. Students who are known to be victims of bullying should ALWAYS be asked directly about feelings of hopelessness and suicide.

Exposure to Suicide

Students who have experienced a death of a peer or family member by suicide are also at increased risk. There have been documented instances of a “contagion effect” in which a death by suicide can prompt other deaths by suicide in the same community. Although contagion effects may be thought of as a result of direct personal contact between survivors and those who died by suicide, other ways in which a contagion effect may be a risk is in the event of the influence of celebrities, or media coverage of deaths by suicide. Specifically, contagion effects are more likely when a student exposed to a suicide already has a mental illness rather than as a direct function of closeness to a victim of suicide alone.

Access to Means

Children and youth who live in homes or communities where they may have easy access to lethal methods such as weapons and medications are at increased risk for suicide.

Barriers to Treatment

Not only does stigma around help-seeking for mental health problems sometimes pervade families, but, depending on their location, mental health services may not be readily available. Care coordination and service provision are serious concerns for student support personnel in these settings.

Application

How might this look in my professional practice?

Remember that the goal of this training is to increase your confidence in your ability to:

Identify risk factors of student suicide.

Below is a vignette that will provide you with practice using the suicidal risk screening tool. Read the vignette and use the suicidal screening tool to evaluate the student and answer the question that follows the vignette. At the conclusion of this lesson you will be provided with a tool to use in your professional practice.

A fourteen-year-old female was reported by a peer's parent to have posted suicidal threats along with pictures of cutting on social media. The pictures indicated medium depth cuts on the child's arms. Recently in class, she had an incident where she began sobbing/panicking and she refused to speak with anyone when they asked her if she was OK.

When interviewed, she disclosed that she posted online to cope and that it marked the beginning of a new chapter of her life and the end of a depressed one. She said if she were going to kill herself she would have found a way, maybe pills or something. She denied that she would actually do something to hurt herself and that this was all a big mistake on the symbolism of her social media post. She was irritated that two of her peers commented on social media that this was all for attention.

She doesn't know anyone who has attempted suicide. She herself made a suicidal threat approximately two years prior, but she did not have specifics at that time either; however, based on a record review, she appeared far more desperate last time. She was able to identify music and friends as a way to cope, but when asked about who, she felt alienated by everyone except her little brother and two peers, although she felt that she could call her dad and he would come to get her immediately.

She has a diagnosis of anxiety and does have panic attacks on occasion. She was irritated by her peers and felt like sleeping all day. She had been dry heaving in the nurse's office earlier that week and reported ear and headaches as well.

She consistently reports difficulties with her two best friends and sometimes her mom. She reported several bullying events last school year and a couple at the beginning of this school year; however, none more recently. She has never reported issues with teachers and denies any substance use. She has a strong faith and practices her religious views at prayer group and chapel. She has one friend there and her family.

There are no known or identified significant stressors at this time, and no changes at home. Her grades are in the A/B range.

What risk factor can you identify in the vignette?

- a) Psychopathology
- b) Previous suicide attempt
- c) Exposure to suicide
- d) Specific religious beliefs that contribute to suicide
- e) NSSI
- f) History of bullying

Correct Answer(s): a) Psychopathology, b) Previous suicide attempt, e) NSSI, f) History of bullying

Implementation

How can I effectively implement this content in my professional practice?

Please review the considerations below regarding potential implementation strategies, barriers to implementation, and collaboration strategies related to this content. This will help you coordinate the next steps as you begin to incorporate the information presented in this training into your professional practice.

This information can also be found on a handout that you will be able to download at the end of this training.

Implementation Strategies

- Know the risk factors and educate colleagues about them. Sometimes the use of placards that are attached to ID badges during stressful times for students are useful ways for everyone to remember what to look for.
- Empower teachers to let crisis team members know which students may be showing signs of distress or have experienced recent problems.

Overcoming Barriers to Implementation

- Educate all staff regarding risk factors and offer direct consultation and support when needed.
- Be wary of talk of “drama” or “attention-seeking”. Although a student may be experiencing a stressor that feels (to an adult) as a routine part of growing up (e.g., breaking up with a significant other) or frequently be at the center of peer relationship problems, it is no less a concern for risk. Students seeking attention by threatening suicide are, in fact, in need of attention.

Collaboration Strategies

- Schedule regular opportunities for teachers and staff to refer students that are experiencing challenges (e.g., case meetings, grade level or department meetings).
- Make referrals and transmission of information easier for all members of the school community including anonymous tip lines, referral drop boxes, and easy email portals for risk can make it simpler for students to get help.

Resources

Are there any resources available to help me implement this content?

Click on the link below to download a tool that you can use to implement this content in your professional practice.

<https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:ecd8c78f-22ed-4d6c-8602-3600dfd0513b>

Feedback

How can I help improve this training?

The objective of this training was to increase your confidence in your ability to:

Identify risk factors of student suicide.

Answer the questions in the link below to let us know how well this training increased your confidence in your ability to accomplish this objective. Once you have answered all of the questions, click the blue arrow button underneath to submit your responses.

https://pennstate.qualtrics.com/jfe/form/SV_d771mLr9ZgW3kyx?modulenumber=suicide10

Verify that you have completed each of the tasks below.

- Answered all of the survey questions above. You may have to scroll to see all of the questions.
- Clicked the arrow underneath the last survey question to submit your responses.

Additional Readings

Where can I learn more about this content?

The following resources were used to create this training. If you would like more information about the information presented in this training, we encourage you to start here.

Bronfenbrenner, U., & Morris, P. A. (2006). The Bioecological Model of Human Development. In R. M. Lerner & W. Damon (Eds.), *Handbook of child psychology: Theoretical models of human development* (p. 793–828). John Wiley & Sons Inc.

Klomek, A. B., Marrocco, F., Kleinman, M., Schonfeld, I. S., & Gould, M. S. (2008). Peer victimization, depression, and suicidality in adolescents. *Suicide & life-threatening behavior*, 38(2), 166–180.
<https://doi.org/10.1521/suli.2008.38.2.166>

Suicide Prevention Resource Center., & Rodgers, P. (2011). *Understanding risk and protective factors for suicide: A primer for preventing suicide*. Education Development Center, Inc., 1–7.

Thank You!

Thank you for taking the time to complete this training. If you have any questions or comments, please email us at schoolresources@psu.edu.

Proceed to the next training

Click on the link below to move on to the next training titled *Warning Signs and Stressful Precipitating Events of Student Suicide*. In this training, you will increase your confidence in your ability to respond appropriately to the possible outcomes on the suicide risk screening tool.

https://learning.militaryfamilies.psu.edu/school-resources/modules/suicide_11-warning-signs-and-stressful-precipitating-events-of-student-suicide_201022/

Return to the module directory

Click on this button to return to the module directory.

<https://schoolresources.militaryfamilies.psu.edu/modules/>