TeachME Professional Development

Suicide Prevention Part 2: Staff Training, Parent Education, Student Programs, and Screening

Chapter 4: Staff Training- Steps for Choosing and Implementing Suicide Prevention Education and Training for Staff

- 1. When preparing to choose and implement staff suicide prevention education and training, the first step must be to provide all personnel with information and awareness about suicide and the school's role in suicide prevention.
- A. True
- B. False

Step 3: Gatekeeper Training

- 2. In addition to helping staff recognize and respond appropriately to students who may be at risk of suicide, gatekeeper training teaches additional skills, including how to do each of the following EXCEPT:
- A. Reduce a person's suicide risk by talking with them
- B. Keep a person at imminent risk of suicide safe until additional help can be found
- C. Reach out to the student's family in an appropriate, non-threatening way
- D. Facilitate referrals and increase the likelihood a person at risk will receive professional help

Adapt Gatekeeper Training For Your School

- 3. Experts recommend adapting a gatekeeper training program to meet the cultural needs of students and staff when appropriate, noting that any adaptation made for cultural reasons should take into account the diverse cultures of all students and should not rely on stereotypes or overly broad generalizations about a culture.
- A. True
- B. False

Step 4. Train Selected Mental Health Staff to Assess Suicide Risk in Individual Students

- 4. Which of the following is an accurate statement about training staff to assess the level of suicide risk beyond recognizing when a young person may be at immediate risk of suicide?
- A. Having mental health staff who have been trained to assess suicide risk in individual students must be an important component of a comprehensive suicide prevention program
- B. Only professionals with some background in mental health assessments should be trained to assess suicide risk
- C. If the school staff does not include a mental health professional who can be trained to assess suicide risk, the school district or mental health community should be consulted to find an appropriate person to perform these assessments
- D. All of the above

Chapter 5: Parent/Guardian Education and Outreach

- 5. Schools that implement programs to educate parents about suicide may experience an increase in the number of students who seek help for behavioral health and suicide-related problems, and they need to be prepared.
- A. True
- B. False

What Parents Need to Know

- 6. According to the authors, in order to be able to help their children who may be at risk, parents need information about the prevalence of suicide and suicide attempts among youth, the warning signs of suicide, how to respond when they recognize their child or another youth is at risk, and:
- A. Where to turn for help in the community
- B. Specific guidelines on how to talk to kids about suicide
- C. How to promote their child's positive behavioral health
- D. Ways to advocate for the at-risk child

Step 2: Select or Develop Parent Education and Outreach Programs

- 7. Although schools may choose to engage parents in a variety of ways, research indicates that a one-time event that specifically focuses on suicide prevention parent outreach will generally be the most effective.
- A. True
- B. False

Step 3: Identify Ways to Increase Participation Among Parents at Events and Activities

- 8. Which of the following is NOT recommended as a way to increase parent participation in suicide awareness activities and events?
- A. Give parents what they need while clarifying ways in which their privacy will be protected
- B. Make sure to use the words "suicide prevention" when publicizing the event as that will likely increase interest and attendance
- C. Accommodate language, culture, religion, and economic status of families
- D. Be willing to reach out to parents in other places, such as churches, pediatricians' offices, their children's sporting events, and continuing education classes in order to increase participation

Step 4: Integrate Parent Education Into Existing Programs

- 9. One way to integrate suicide prevention activities is to include them as part of freshman orientation, safety days, parenting classes, or other health events at the school that involve parents.
- A. True
- B. False

Tool 5.B: Suicide Prevention and Schools: Facts for Parents

- 10. According to the Centers for Disease Control and Prevention (CDC), each of the following is an accurate statement about high school students and suicide EXCEPT:
- A. Many high school students report that they have seriously considered suicide in the last year
- B. One out of every 53 high school students (1.9 percent) reported having made a suicide attempt that was serious enough to be treated by a doctor or a nurse

C. Suicide is the second leading cause of death among teenagers D. The toll among some groups, such as Native Americans, is even higher than for others
Why are Student Programs That Address Suicide Important?
11. Research indicates that while most youth who are suicidal talk with peers about their concerns rather than with adults, very few peer confidants tell an adult about their suicidal peer.
A. True B. False
12. In the school setting, peer leader programs are recommended to help protect at-risk students from suicide by building their coping, problem-solving, and cognitive skills and by addressing problems that can lead to suicide, such as depression, anger, and drug use.
A. True B. False
Examples of Peer Leader Programs
13. The peer led program,, incorporates students who are trained to help their classmates with a wide variety of youth issues by listening to them and assisting them in getting help from adults, while improving the school environment and increasing the connections between students and staff.
A. Students for Students B. Reconnecting Youth C. Project H.O.P.E. D. Natural Helpers

A Program Tailored for Latina Adolescents

- 14. Comunilife, a nonprofit organization in New York City providing health and social services to Latinos, found that Latina girls often did not talk with their parents about their problems because they were afraid everyone in their family would find out, and that traditional mental health services were perceived by Latinos as not responsive to their needs, not effective, and:
- A. Intrusive
- **B.** Unnecessary
- C. Objectionable
- D. Insensitive

Using Social Media for Suicide Prevention in a School-Based Program

- 15. Social media may be used to help suicidal youth by encouraging peers to pass on their concerns to a trusted adult who may be able to intervene when they read suicide-related comments in text messages or on Facebook.
- A. True
- B. False

Tool 6.A: Types of Student Programs Information Sheet: Skill-Building Programs for Students at Risk of Suicide

- 16. Skill-building programs typically include exercises and activities that increase problem-solving and coping skills, prevent or reduce self-destructive behavior, and:
- A. Dispel myths about suicide and destigmatize mental illness and help seeking
- B. Normalize health and behavioral problems, as well as other common issues teenagers face
- C. Improve resilience and interpersonal relationships
- D. Address intervention strategies related to suicide, depression, trauma, violence, and substance abuse

Tool 6.B: Matrix of Student Programs

- 17. Sources of Strength is a peer leader program for 6th-12th graders where students develop and deliver a three to six month campaign to promote mental wellness and improve social norms in school and the community.
- A. True

Chapter 7: Screening-Why is Screening Important

- 18. While schools should screen individual students who are thought to be at risk for suicide and/or other behavioral health problems, screening programs are generally not appropriate for the general student population.
- A. True
- B. False

Basic Information About Screening Programs

- 19. School administrators and staff may resist screening programs to identify students at risk for suicide, suicidal behaviors, and suicidal ideation because of the cost and logistics as well as:
- A. Lack of training on the benefits of such screening
- B. The stigma associated with suicide and other behavioral health issues
- C. Fear that families will oppose screening processes
- D. A concern that the school will not be able to handle the number of students identified as at risk

Step 2: Secure Support from Administrators and Staff for a Screening Program

- 20. Which of the following is NOT one of the suggestions for securing the support of administrators and staff for a screening program?
- A. Provide administrators and staff with information that describes the value of screening programs in high schools
- B. Present incentives to staff who successfully complete screening programs
- C. Discuss strategies for overcoming the challenges associated with the process
- D. Connect administrators with peers who have implemented screening

Alternative Approach to Identifying Students at Risk

21. Some schools may use an alternative approach to identifying students at risk by having school personnel rate them in the areas of attendance, conduct,

, negative report card comments, code of student violations,
and involvement with school police, and then referring them to the school counselor if needed.
A. Peer and adult relationships B. Social skills and school involvement C. Academic achievement and effort D. Mood disturbances or changes
Step 5: Engage Parents in the Screening Program
22. Although some parents may be resistant to having their children screened for behavioral problems, it may be helpful to inform them about the value of a screening program beforehand and provide them with the benefits of getting treatment when it is needed.
A. True B. False
Parental Consent
23. Unlike passive consent, where communication back to the school is only necessary if the parent does not want the student to participate, active consent requires the parent to give explicit permission, which must always be in a written form.
A. True B. False
Screening Programs
24. SOS (Signs of Suicide) is a 9-item paper and pencil questionnaire that includes which of the following characteristics?
A. Screening is the sole component, and it may take place during a class period or after school B. Active consent is required C. Those at risk meet with a mental health professional, and those not at risk have a debriefing interview that allows teens to ask questions D. A curriculum of 1-3 lessons is the primary component, and screening is the main
secondary component

Tool 7.B: Ideas for Maximizing Parental Response Rate

25. In order to help maximize the return rate of parental consent forms, school personnel can have parents sign the consent form at parent-teacher meetings or a school-based function, using a simple, easy-to-read, eye-catching, and culturally relevant letter and form.

A. True

B. False

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