The Stage School District experienced a series of suicides by three middle school students who hung themselves within a three-week time frame. Two of the students, both males, attended Light Middle School, and the third student, a female, attended Cushion Middle School. To help staff, students, their families and the surrounding communities cope with and recover from the suicides and to discourage copycat attempts, the Stage School District provided recovery services and resources to the affected school communities.

The Stage School District is part of a large Hispanic community. The suicides, all three of which were by Hispanic students, prompted district administrators and school personnel to be particularly sensitive to the cultural and linguistic needs of the community in forming their response strategies to help students, faculty and the community cope with and recover from the events. For example, personnel were made aware that Hispanics, no matter what their background, are not always open to speaking with individuals—particularly professionals—whom they do not know and trust. In addition, Hispanics who are Roman Catholic often view suicide as a sin, which may impede response and recovery efforts.

Finally, Hispanics tend to place a high value on acknowledging those who have died through various memorial activities, which may have a bearing on suicide recovery and prevention efforts.

The Incidents

Student 1: Esteban

Esteban, a 13-year-old Latino male at Light Middle School, was a likeable, athletic young man with a suspected learning disability who was often viewed as a class clown. His parents, undocumented immigrants, stressed academic success and good citizenship to all of their children. Prior to his death, Esteban was experiencing significant academic challenges and had been smoking marijuana with his friends. He was concerned that if his parents learned about his academic performance and the marijuana experimentation, they would be extremely disappointed.

Following these incidents, Esteban attempted suicide. He did not die instantly, but remained on a ventilator for three days, during which time a priest counseled the family. Esteban’s aunt notified his principal the day he died. The district’s public information officer (PIO) was notified and,
because of the district’s strong relationship with the media, when the PIO asked that the incident not be reported, the request was honored. The principal received permission from the district office to work with an internal school crisis response team—comprising four administrators, two counselors, the school resource officer, the librarian and the school social worker—to determine how best to inform students and faculty of the death and help them cope with it.

First, the principal met with the teachers to inform them of the student’s death and provided them with guidelines to respond to students’ questions honestly and briefly, without any unnecessary details. Second, the principal went to each classroom to announce the incident, dispel rumors and help students cope. She gathered Esteban’s baseball teammates together and informed them about his death. Then she visited Esteban’s first-period class, where she talked of his suicide and the importance of respecting an individual’s choices. The principal also offered students the opportunity to call their parents to take them home, or see counselors who were available in the media center. Finally, she went to other first-period classes and repeated her message, after which teachers were given the opportunity to talk more with students. Letters, written in both English and Spanish, also were sent home to families. Included in each was a list of suicide warning signs, prevention strategies and resources to help parents who suspected that their children might have suicidal tendencies. Students were encouraged to visit and revisit the counseling center.

Light Middle School’s Hispanic community honored Esteban in two ways: 1) by holding an all-day viewing at the funeral home; and 2) by wearing, for about two weeks, student-made T-shirts with his picture on them. The school crisis response team crafted guidance for teachers so they could effectively and appropriately respond to students’ questions about the viewing and other funeral arrangements. The school principal and teachers attended the viewing, as did many students.

**Student 2: Mariana**

Mariana was an eighth-grader at Cushion Middle School. Prior to attending Cushion, she was enrolled in an alternative school that specializes in providing services to students with emotional and behavioral disabilities. At Cushion Middle School, Mariana was placed in a full-day education program reserved for students with behavioral disabilities. Mariana was a friendly, outgoing young woman who also had a history of suicide attempts.

Six days after Esteban died, Mariana told the assistant principal she liked her new classes and then left the school at 3 p.m., electing to walk home instead of riding the bus. At 4:30 p.m. her mother found Mariana dead at home. Mariana had left a suicide note in which she stated that she was pregnant. Although Mariana knew Esteban and how
he died, the suicides apparently were unrelated. The morning after her death, Mariana’s mother called the school and informed the secretary of what had happened. A central office district administrator who heard the news immediately contacted the principal and offered support by way of the district’s counseling director. The principal notified the counseling director, who then assembled a district crisis response team consisting of elementary school counselors to help the Cushion Middle School community. The team e-mailed faculty informing them of Mariana’s death and included guidance for talking to their students. Modifying the letter disseminated earlier by the Light Middle School, the team drafted a letter for the Cushion Middle School principal to inform students’ families of Mariana’s death. The principal went to each first-period class to tell the students what had happened. The school’s guidance counselor met with a group of Mariana’s closest friends, who were then offered the opportunity to go home after their parents had been contacted and granted them permission to do so. Additionally, the principal and assistant principal met with staff from the high school that Mariana’s older siblings attended to alert their counselors and teachers of Mariana’s death.

The school and district crisis response team included a social worker from the local Department of Health Services, who had knowledge of and access to mental health treatment options and resources. The social worker also facilitated program support for the students. A community mental health agency that was already providing services at the school two days a week, also offered its support to the team.

Part of this support included the implementation of a suicide screening process. This process identified students who were having suicidal thoughts one week after Mariana’s death. The team developed a database of all students referred by teachers as needing immediate intervention, including the need to be seen by counselors. Any student who expressed thoughts of suicide on the screening tool was also seen by a counselor to determine if an additional referral was necessary, added to the database and monitored. Eleven students were hospitalized two weeks after Mariana’s death and approximately 34 students received community intake services within 24 hours after being screened by the crisis team.

Mariana’s mother scheduled the funeral over the weekend so that students could attend. School faculty attended the funeral to provide some support to students and to identify students who were particularly distressed (i.e., crying excessively, socially withdrawn, etc.) and who required additional support the following day.

The school and district crisis response teams worked with a community-based mental health agency, which Mariana’s family had utilized in the past, to help Mariana’s mother obtain funds for
funeral expenses, alternate housing—since her mother did not wish to stay in her home after her daughter’s death—and counseling services.

Student #3: Luis

Eighteen days after Mariana died, Luis, another male student at Light Middle School, committed suicide. Luis was a very popular young man, a good athlete and an honor student. Luis and his family were very involved in the Light Middle School community, and Luis and his siblings worked during the summers to help the school principal.

The night before he committed suicide, Luis and one of his friends smoked marijuana. Afraid that his parents would find out and punish him, the next morning he planned to commit suicide. Luis revealed his plan to three friends and wrote out the plan on the inside cover of his history textbook. Because his friends were certain they could dissuade Luis from following through with his plan, they did not tell an adult.

Luis’ father called the principal’s cell phone at 5:15 a.m., after discovering his body at home. Although the principal was in another state attending a professional development meeting, he alerted the director of Stage School District’s Counseling Services at the central office. A crisis response team comprising the district counseling supervisor, district crisis staff and staff from a community agency was activated and deployed to the school. The crisis response team used the library as a temporary counseling center. Since the suicide occurred on a Friday, the school and the temporary counseling center remained open all weekend to provide counseling support for the students and the community. Support provided by the community agency counselors focused on the importance of telling an adult about a friend’s suicidal thoughts or plans.

On Monday morning, the principal met with Luis’ classmates and conveyed the importance of talking to responsible adults about suicidal thoughts—either their own or those of their friends. She also convened specialized counseling sessions for the three friends who knew about Luis’ plans to help them manage their guilt and grief. Together with the three students and the counselor from the community agency, the principal convened a schoolwide assembly in which the three students talked about their friend. They also explained how important it is to tell adults about suicidal thoughts or plans and how to deal not only with personal problems, but also with friends’ problems.

Luis’ family shared with the school their plans for the viewing and funeral service. They did not want to memorialize their son’s death because they were afraid that another student would imitate Mariana’s, Luis’ and Esteban’s actions. Therefore, the family decided not to provide Luis’ friends with pictures that could be used for schoolwide memorial T-shirts similar to those worn after Esteban’s death. Instead, only the pall bearers were allowed to wear T-shirts depicting Luis’ image. To minimize the period of mourning, the family and
school response team decided to pass out stickers with a pink ribbon that students could wear just for the day of the funeral, in memory of Luis. At the principal’s suggestion, the family asked students who attended the funeral to join hands and circle Luis’ casket for a moment of silence.

For several months following Luis’ death, the principal monitored the physical and emotional health of Luis’ friends and discovered that one had high blood pressure. The student’s blood pressure was so high that the student was given prompt medical attention. The principal obtained pro bono services for the student from a local pediatric heart specialist. In addition, during the recovery period following Luis’ suicide, the principal worked with her faculty to demonstrate compassion and empathy for students so that they would develop more comfortable and trusting relationships with faculty members. During this time, the staff reevaluated the additional resources needed to support every aspect of the students’ academic, emotional and physical well-being.

**Lessons Learned**

The incidents described above demonstrate the extent to which student deaths present challenging times for an entire school community. These events underscore a school district’s need to:

- Implement prevention and intervention programs;
- Create confidential outlets of support;
- Collaborate with community partners, including mental and public health officials, to create an all-hazards emergency response plan;
- Provide for immediate, short-term and long-term response and recovery activities; and
- Address all four phases of emergency management (prevention-mitigation, preparedness, response and recovery) in those plans.

Although tragic, the Stage School District’s experience can provide valuable insight for school administrators nationwide as they work to create and implement comprehensive emergency management activities that include responses to student suicides by recognizing the following lessons learned.

**Lesson 1: Develop and activate districtwide response and recovery protocols.**

School districts should develop written response and recovery protocols prior to an emergency that outline how each school and school district will respond to all emergencies, including suicides. These same general protocols should be applied (and modified as needed) to each incident to promote effective, consistent responses and to avoid confusion. Once a death has been verified, school officials should follow the predetermined
protocols, such as activating the district crisis response team (including relevant community partners). The response plan should also address: communication with students, their families, school staff and the media; training for all school staff; guidance for responding to student questions about and reactions to the suicide; and availability of counseling services and resources in the school and community.

Lesson 2: Develop protocols for tributes and memorials.

Students need to be able to grieve and remember their friends. Activities such as conducting a memorial service, erecting a memorial or wearing a T-shirt with the deceased’s picture on it can have negative consequences if these actions are viewed by students as glorifying suicide or imply that suicide is a logical response to the challenges faced by adolescents.

Instead of holding formal memorial services, schools should assist students in identifying alternative ways for them to express their grief regarding the death of their peer. The school’s crisis response team should work closely with community mental health providers and other community-based public health organizations to ensure that the emotional needs of the school community can be met while at the same time restoring a sense of safety and normalcy to the learning environment. Opportunities for students to help others in the aftermath of a crisis, such as through community service projects, peer counseling or donating time to community agencies to assist the family members of the deceased, may provide students with structure and include life-affirming messages. Such activities should be planned so that they do not interfere with the teaching and learning process.

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Lesson 3: Understand the importance of cultural competence.

Cultural competence is the transformation of knowledge about individuals and groups of people into specific practices and attitudes. Cultural competence increases quality of service and often provides validation that influences the extent to which community members express reactions to and recover from a crisis or emergency. For example, students and families from one culture often prefer to work with professionals who understand their cultural values and who can relate to them in their own language. Therefore, school districts should collaborate with the appropriate cultural community groups when planning and conducting informational meetings and providing services following an emergency. School districts should also ensure that these services: are accessible; provided in a convenient and appropriate location; respect cultural traditions; and are relayed in the language of the recipient. Cultural perspectives regarding how a suicide will be viewed, what is considered an appropriate response and how offers of counseling will be
perceived and accepted should be understood and respected when planning suicide response and recovery activities.

Lesson 4: Plan responses with faculty members.

The school crisis response team should notify faculty and staff about the event as soon as possible. Individuals may be notified via e-mail, over the phone or face-to-face; however, direct, person-to-person communication when possible is the better option.

During the initial communication, faculty and staff should receive:

- Information about the incident;
- Guidelines for responding to students’ questions and reactions;
- Administrative support and assistance for dealing with students;
- Information about the availability of in-school and community counseling for students and staff;
- Release procedures for students needing to meet with a counselor; and
- A time for a follow-up staff meeting.

Follow-up meetings should relay information about the viewing and funeral service as well as about how the school will respond to memorials, signs and other tributes. It is important that faculty members learn how to support student-led discussions of the incident without glorifying the student’s actions.

Lesson 5: Support school personnel.

School faculty and staff will also need support as they care for the student community. This support may take the form of meeting their basic physiological, mental and emotional needs. The first can be met, for example, by providing snacks and refreshments in the staff lounge; the others can be met through counseling services. Staff and faculty should hold daily debriefings to assess the emotional state of both adults and students. Because of the likelihood of increased numbers of telephone calls and visitors to the school, faculty and other staff members may need to assume additional front-office responsibilities such as answering phones, greeting visitors and signing students in and out of school. School officials should also emphasize to parents or guardians that if students stay home from school to grieve, an adult should be with them at all times to help the students cope with the loss and prevent future suicide attempts.

Lesson 6: Talk with students.

School administrators should utilize the district’s predetermined plan for talking with students about the death of their classmate. The first group addressed should be those students who attend the Cultural perspectives regarding how a suicide will be viewed, what is considered an appropriate response and how offers of counseling will be perceived and accepted should be understood and respected when planning suicide response and recovery activities.
classes in which he or her siblings are enrolled should also be spoken to early on. One member of the school crisis team may be assigned to follow the deceased student’s class schedule to facilitate the dialogue. Additional one-on-one counseling services also need to be made available to those students.

When talking with students about suicide, a guiding principle is to balance: the truth of the event; what is known about the victim’s life; the family’s privacy; and students’ ability to process information about suicide. Staff must show respect for the victim without glorifying his or her action. Adults should take the time to listen to students’ feelings and reactions; hence, a small setting may be the best way to monitor students’ emotions. A key message to convey is that it is important for students to come forward with their concerns about the safety of their peers and not to keep secret the suicide plans of friends or family members. Adults also should emphasize that there are resources for helping students resolve problems as well as a variety of options for coping with difficult emotions and situations.

Talking with students may help them to: express their discomfort about death or the suicide; enhance their coping skills; reduce anxiety behaviors such as sleeplessness, depression or restlessness; express feelings of sadness, guilt or remorse; and discuss their own contemplations of suicide.

**Lesson 7: Obtain in-depth information about large-scale suicide screening tools.**

School and school district crisis response teams will want to carefully consider administering a screening tool to identify students with suicidal tendencies. Screening tools may be helpful for identifying students who may be at risk; however there also is the possibility that the screening may result in over-identification and the stigmatization of students. When using a screening tool, crisis response teams should confer with an experienced mental health professional to obtain background information about the tool, such as its intended screening age and developmental level, cultural appropriateness and validity and reliability. Also, if a screening tool is used, the crisis team should implement additional measures to provide immediate and appropriate follow-up counseling for students and their families. Prior to administering the screening tools, the team should explore the issues of parental consent and student confidentiality. Federal regulations such as the Family Educational Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA) clearly outline both parental and student rights regarding the administering of assessments and revealing the results to families, school staff and community service providers.

**Lesson 8: Communicate with the families.**

Using references, resources or templates from the school’s emergency management plan,
the school crisis response team should send a notification letter to students’ families soon after the emergency event. The message should include details of the incident, the school’s response, availability of in-school and community counseling, a point of contact at the school and resources on how to talk with children and young adults about suicide. The notice should also list suicide warning signs and the actions parents can take if their child displays those behaviors.

As soon as the information is available, the crisis response team should inform families of the dates and times for the viewing and funeral as well as the procedures for excusing students from school to attend the services. The letter can address additional considerations such as transportation guidelines to promote safety. For example, one principal evoked the “seat belt rule”: a parent would be given permission to transport students to the viewing only when there were a sufficient number of seat belts in the vehicle.

Another way to inform families of a student’s death is to use an automated call system. Light Middle School sent a message read by the principal to all students and their families between 5 and 9 p.m. the evening of Luis’ and Esteban’s deaths. Schools should know how to use the automated call system well in advance, because there will not be time to research the system during an emergency. School personnel also should determine in advance the period of time during which the message will be relayed so that it will not be repeatedly broadcasted.

**Lesson 9: Work with the media.**

A school emergency management plan should designate the district public information officer (PIO) who is responsible for communicating with the media. The PIO ensures that a timely and factual message is delivered to the media to dispel rumors. The PIO should work with the media to minimize, as much as possible, coverage about the suicide so as not to sensationalize the incident. The PIO also should provide the media with information about how the school is helping students through the crisis, available counseling resources, common suicidal tendency indicators and suggested suicide-prevention activities.

**Lesson 10: Provide support to schools where siblings or other relatives and friends of the deceased are enrolled.**

A student’s death will have an impact outside the immediate school community. School districts should take into consideration “feeder schools,” or the schools that friends or relatives of the deceased may be attending. These students also need information, support and someone to help them cope. Siblings may not always attend the same school; nevertheless, they will be highly impacted by the incident. The crisis response team should work with professionals at the siblings’ schools to ensure that they are receiving the appropriate support.
support. Districts that create formal partnership agreements enable their community agency staff to address the needs of students at other district schools.

**Lesson 11: Pre-negotiate contracts for counseling services.**

Student suicides can tax the resources of any school district and community to provide cohesive and comprehensive services to students, families, faculty, staff and community members. Obtaining additional services from the community may be necessary. A well-developed emergency management plan should include written guidelines or models for working with community partners and other agencies through memoranda of understanding (MOU). Pre-negotiated agreements and contracts for services may facilitate a rapid response and recovery from the events. For example, schools in the Stage School District received offers of services following each death, and would have benefited from a preexisting system for accepting and screening the offers.

**Conclusion**

The Stage School District’s experience can provide valuable insight for creating and implementing a comprehensive, all-hazards emergency management plan that includes suicide prevention and the appropriate responses to suicide attempts and occurrences. Schools play a key role in preventing suicide and identifying at-risk students. If a suicide occurs, it is important to minimize the trauma felt by the school community, reduce the likelihood of copycat or future suicide attempts, provide support to those having difficulty coping, and quickly restore the learning environment. An all-hazards emergency management plan not only will include a structure for working with community partners and the families of suicide victims, but also a structure for activating a crisis response team to provide immediate mental health services to the school community. By using the procedures outlined in the plan, the school and school district can foster a caring environment that emphasizes the need for intervention to work though loss and prevent future suicides.