

YOU MATTER.

How to Help Youth Returning to School After Hospitalization for a Suicide-Related Crisis



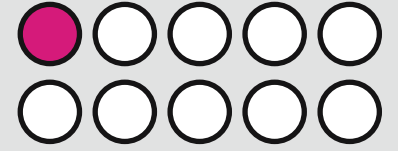
In the U.S., suicide, suicidal ideation, and self-harm are public health crises among not only adults, but children and teens. What happens to returning students after being hospitalized due to a suicide-related crisis? Little is known about the current practices schools use to support student reintegration. Researchers in the UNC School of Education and School of Medicine are looking into how school systems can help returning adolescents, in hopes of decreasing suicidal behaviors and ideation in students.

Suicidal ideation, often called suicidal thoughts, is a broad term used to describe a range of contemplations, wishes, & preoccupations with death & suicide.

47,511 people died by suicide in 2019

2,744 of those were aged 10 - 19

1 OUT OF 10 school risk assessments lead to hospitalization



Suicide was the **2nd** leading cause of death among ages 10 - 19 in 2019

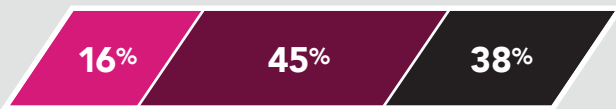


3.1 MILLION ADOLESCENTS in the U.S. received mental health services in educational settings in 2020

HAVING A PLAN

UNC researchers have found that many schools have no re-entry plan for returning students who have been hospitalized for a suicide-related crisis.

● Formal Plan ● Informal Plan ● No Plan



The period following hospitalization is a very sensitive time. Studies show increased risk for mental health crises and rehospitalization during that phase, making it extremely crucial for schools to have a re-entry plan for each individual student.



WARNING SIGNS

It is important to take any and all threats of suicide seriously. Know the suicide warning signs, including:

- 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 in unbearable pain
- talking about being a burden to others
- increasing the use of alcohol or drugs
- acting anxious, agitated, or reckless
- sleeping too little or too much
- withdrawing or feeling isolated
- showing rage or talking about seeking revenge
- displaying extreme mood swings

According to the American Foundation for Suicide Prevention, the more of these signs a person shows, the greater the risk. Warning signs are associated with suicide, but may not be what causes a suicide.

Universal

- Establish clear school reintegration procedures & disseminate to school staff, families, & clinicians.
- Provide psychoeducation about suicide-related risk & recovery from mental health crises to school community.
- Foster a positive school psychosocial climate.
- Build school-family-community partnerships.

CRISIS HAPPENS

During Hospitalization

- Offer gestures of support to hospitalized students & their families.
- Offer to meet with families to prepare students for their return.
- Prepare for re-entry meeting & begin to develop an individual re-entry plan.
- Communicate with clinical & medical providers, following HIPAA/FERPA & respecting family privacy.

Following Hospitalization

- Hold a re-entry meeting, involve interdisciplinary teams, and include the student, family, administration, support staff, & providers.
- Establish a re-entry plan that includes:
 - a procedure for assessing, continuing and/or modifying supports
 - the student's individual needs, strengths, skills, & goals
 - safety planning interventions
 - key individuals to support the student
 - school-related supports & interventions
 - identifying school-related stressors
- Consider recovery over the long-term. Recovery is not linear; establish a plan for continuing support of the student.

BEING PREPARED

Studies have found that kids who feel **connected** to school are about **half** as likely to report suicidal attempts or ideation. Researchers from UNC have provided this chart to help schools establish or improve upon procedures for supporting students returning from hospitalization, encouraging a student-centered, strengths-based, and trauma-informed approach to re-entry.

IF SOMEONE YOU KNOW EXHIBITS WARNING SIGNS OF SUICIDE...

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

THE NATIONAL SUICIDE PREVENTION LIFELINE
1-800-273-TALK (8255)

A free, 24/7 service that can provide suicidal persons or those around them with support, information, & local resources.