

A S C A W E B I N A R S E R I E S



Student Safety: Best Practices in the Virtual Environment

Webinar Presenters: Morgan Champion, Colleen Coirola, Jennifer Floersch, Karen Muston
Webinar Date: April 22, 2020



A S C A W E B I N A R S E R I E S

Learning outcomes:

- Discuss best practices for supporting students' welfare virtually
- Identify resources to aid you in supporting identified at-risk students
- Describe different scenarios addressing student welfare in a virtual setting.



This is unprecedented

- Virtual education
 - Tools and resources
- Offering best practices
 - Tailoring to B&M moving to at-home learning
- How to make it work
 - Acknowledging challenges and barriers
- Crisis situation
- Self-care



Students in Distress and Student Safety



What constitutes a student safety situation?

Any situation in which you feel that a person's well being is at risk

- Mental well being
- Physical well being
- Emotional well being

(Concerns for a student's family member or a staff member can be encompassed with these protocols)



What should I be looking for?



Recognizing signs and behaviors in the virtual environment

- Comments made during one-on-one conversations or chat features in a platform
- Conversations with parents about concerns
- Information disclosed in written assignments
- Overhearing fighting in the home
- A student's appearance or environment
- Posts on message/discussion boards



Imminent vs. Non-imminent



Imminent Danger

Immediate risk to a person's safety, including:

- Threats of suicide (having a plan)
- Ongoing abuse or neglect
- Threats of violence against others

Imminent danger situations are first-hand reported situations. (Not hearsay)



Imminent Danger

Student: Engaging in any sort of imminent danger/harm toward themselves

Another individual intends to cause great physical, mental, or emotional harm, death, or such danger exists which could reasonably be expected to cause death or serious physical injury to the student (or someone in the students immediate area).



Examples of Imminent Danger

1. Student states:

- They are being physically, sexually, or mentally abused.
- They are going to hurt themselves or recently hurt themselves.
- They are suicidal and have a plan to end their life.
- They have been left home alone for more than 2 days.

2. Student and Parent/Legal Guardian are physically fighting while on the phone.



Examples of Imminent Danger

3. Student or Parent/Legal Guardian reports that the student is using drugs and/or alcohol and has overdosed.

4. Parent/Legal Guardian reports that student has been kidnapped.



Imminent Danger Protocol

- Call 911 if student is in immediate danger
- Call CPS afterward to make a report
- Document the situation (alert stakeholders if family approves)



Non-Imminent Danger

Risk is NOT imminent, but of great concern

- Previous or current DIAGNOSED mental health issues such as Depression, Anxiety, Bipolar Disorder, ADD/ADHD, Emotional Disturbance, addiction, or eating disorders
- Previous suicidal thoughts, or attempts.

Non-imminent danger is concerning, but reported second-hand and/or hear-say.



Examples of Non-Imminent Danger

Student submitted some form of school work that indicates violence or mental health issue, etc.

2. Parent/Legal Guardian/Parent reports that student was bullied at current or previous school, student suffers from mental illness, student has been previously hospitalized due to illness (or mental illness).
3. Student is displaying defiant behavior with regard to schooling or homelife.



Examples of Non-Imminent Danger

4. Student has a close family member or friend who has a serious illness or has recently passed away.
5. Student was **recently** hospitalized.



Non-Imminent Protocol

- Evaluate the situation to see what action should be taken
- Consult with or alert the proper stakeholders
- Identify resources to help the student
- Document the situation (alert stakeholders if family approves)



Scenarios



Scenario #1

You have planned a virtual school counseling lesson to talk about coping skills (mainly due to COVID-19) and one of your frequent flyers posts something in the chat that is concerning. She states, “It doesn’t matter if I get coronavirus. I am going to die soon anyways.”



Scenario #1 Multiple Choice

- A. You contact the student and ask if they have a plan to end their life.
- B. You conduct a suicide risk assessment with the student.
- C. You ask the student if they are safe.
- D. All of the above.

***IMPORTANT: Be sure you actually speak to the student (phone or video call) to determine next steps.**



Scenario #2

A teacher reaches out to you and lets you know they had a one-on-one call with a student earlier that morning. They heard yelling in the background and the student kept putting the call on mute so the teacher could not hear the full conversation. The student started speaking again and the teacher heard a loud whack. When the teacher asked if the student was okay, the student responded with, “Yeah, I guess. I gotta go.”

The teacher asks you what to do. What do you tell her?



Scenario #2 Multiple Choice

- A. You tell the teacher if they have concerns, they are a mandated reporter and need to call CPS immediately, just as they would in brick and mortar situation.
- B. You let the teacher know they can let it go this time, but to let you know if it happens again.
- C. You tell the teacher to call the student back and try to speak the parent.
- D. You call CPS for the teacher.



Scenario #3


The Parent/Legal Guardian for one of your students requests a phone conference. She states that the student has occasionally been defiant when asked to work on her new virtual schoolwork. At the end of the day, the student does get things done, but the Parent/Legal Guardian is concerned about her attitude.

Is this situation imminent or non-imminent? What can you tell the Parent/Legal Guardian?



Scenario #3 Multiple Choice


- A. Non-imminent. Provide developmentally appropriate articles or resources about supporting students through the stress of this time
- B. Non-imminent. Provide hotline resources in case the situation escalates at home
- C. Non-imminent. Offer to include the student in small-group or individual counseling
- D. All of the above



AMERICAN
SCHOOL
COUNSELOR
ASSOCIATION

Documenting Student Safety Situations

A S C A W E B I N A R S E R I E S



AMERICAN
SCHOOL
COUNSELOR
ASSOCIATION

A S C A W E B I N A R S E R I E S

State/District Policies

Seek guidance from your principal or district counseling liaison to determine the expectations for tracking student safety situations

Questions to consider:

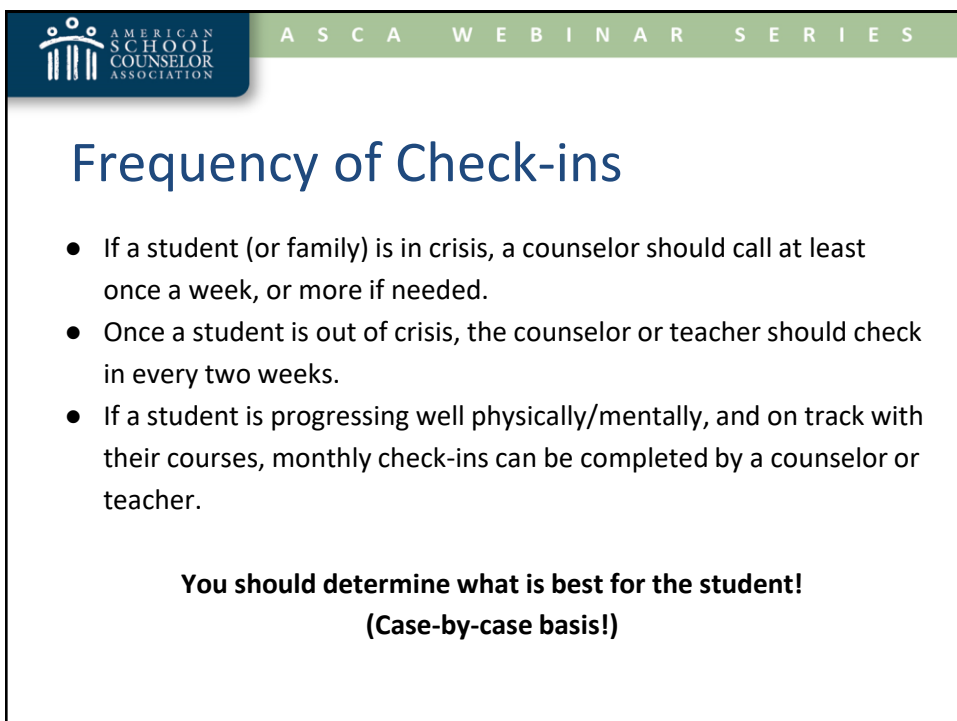
- How often should I check on these students?
- Where should I document my conversations/check-ins with students?
- Has the family granted permission? Ask permission from the family/student to share information with teachers to ensure they know the student is struggling. You do not need to share specifics if the family/student prefers not to, however, just letting teachers know general information is helpful.
- Are staff members aware of what to look for in the virtual environment? Ensure staff understand what they are looking for--this comes more naturally to counselors, but partnering with teachers/school staff who are interacting with students is equally important.


A green-themed title card for an ASCA webinar. The background features a faint image of a classical building with columns and circular motifs. A dark blue banner on the left contains the ASCA logo and name. A white rounded rectangle on the right contains the title text. At the bottom, the words 'ASCA WEBINAR SERIES' are written in a spaced-out font.

 AMERICAN SCHOOL COUNSELOR ASSOCIATION

Contact Recommendations

A S C A W E B I N A R S E R I E S

A white content card with a green header. The header contains the ASCA logo and name on the left and the text 'ASCA WEBINAR SERIES' on the right. The main content area has a title and a bulleted list. At the bottom, there is a bolded statement.

 AMERICAN SCHOOL COUNSELOR ASSOCIATION

A S C A W E B I N A R S E R I E S

Frequency of Check-ins

- If a student (or family) is in crisis, a counselor should call at least once a week, or more if needed.
- Once a student is out of crisis, the counselor or teacher should check in every two weeks.
- If a student is progressing well physically/mentally, and on track with their courses, monthly check-ins can be completed by a counselor or teacher.

You should determine what is best for the student!
(Case-by-case basis!)



Additional points to mention

- Collaboration between parties is extremely important and vital. If you have a situation you would normally discuss with another counselor or administration, you should continue that practice.
- Make sure you are documenting and taking the appropriate steps to protect students from harm.
- Remember that your gut is normally right. If you feel concern, you should call CPS.



Recommended Strategies



Strategies for creating a safe space

- **Counselor Confidentiality Policy:**
 - Explain to the student that whether you're on a video chat, on a phone call, or in another virtual classroom space, what they tell you will be confidential, unless someone wants to harm them or they want to harm themselves or others.
 - Posting this policy on your website or message board is a best practice.
- **Use a wall as the background when you meet with students. Having people walking behind you may distract students and they could not feel comfortable with opening up if they think others can hear you (even if you already have headphones in)**
 - Tip: Decorate the back wall as you would have your office decorated!
 - Decorate your virtual classroom platform room (if you're using one) using pictures/memes/**SAFE SPACE** sign



Strategies for creating a safe space

- **Suggest that students use their camera if they'd like, but also consider allowing them to use the fun or different backgrounds that are sometimes options in platforms like Zoom, Microsoft Teams, etc.**
 - (This could help them be more comfortable with being seen on camera.)
- **Allow students to share an object they have with them in their home to make them more comfortable.**
- **Allow/or suggest a student use a fidget spinner or something similar if they have one at home.**



Strategies for creating a safe space

- **Communicate**
 - Website, email, etc.
- **Office Hours**
 - Make sure you are accessible to students during specified times
 - Create boundaries for yourself
- **Partner with teachers**
 - Stay in close contact regarding students



Highlight Local & National resources

- Develop a one pager for families to showcase local resources
- Information to include:
 - Mental Health Resources
 - Food Banks
 - Clothing Resources
 - Updates


ASCA WEBINAR SERIES

Example resource

Texas Connections Academy COVID-19 Helpful Resources

Click the links for quick access to resources


Internet Resources


Meal School Feeder


CA Education Resources


Mental Health Resources


Houston ISD Updates


TEA COVID-19 Updates

United Way of Texas Resource Database

Call: 211
Visit: www.211Texas.org

Your counselor is here to support you. Please do not hesitate to reach out!



[TCAM Counseling Team Contact](#)



[Tips for Parents](#)

Need additional help with resources?

Contact Emmalea Bozone, LMSW (TCAH School Social Worker)

Text or call


ASCA WEBINAR SERIES

Resources in the handout

NATIONAL HOTLINES

These national hotlines can provide support and resources for students and caretakers by telephone call

<small>NATIONAL RUNAWAY SAFELINE</small> 1-800-RUNAWAY	<small>NATIONAL DOMESTIC VIOLENCE HOTLINE</small> 1-800-799-SAFE
<small>NATIONAL SEXUAL VIOLENCE HOTLINE</small> 1-800-656-HOPE	<small>THE TREVOR PROJECT/LGBTQIA+ YOUTH HOTLINE</small> 1-866-488-7386
<small>NATIONAL EATING DISORDERS ASSOCIATION</small> 1-800-931-2237 (limited hours)	<small>CHILDHELP NATIONAL CHILD ABUSE HOTLINE</small> 1-800-4-A-CHILD
<small>NATIONAL SUICIDE PREVENTION LIFELINE</small> 1-800-273-8255	

STUDENT SAFETY TIPS IN THE VIRTUAL ENVIRONMENT

EMERGENCY TIPS

- Try to find out the two-digit 911 numbers for the place your students are physically located - they often vary by county.
- If you need to call 911 for a welfare check, you'll need to reach out directly to emergency contacts where the student is located.

COMMUNICATE WITH CAREGIVERS

- It's essential that you collaborate closely with caretakers when working in the virtual environment.
- Have resources available such as national hotlines, local support services, and teletherapy options.

ATTEND TO BEHAVIOR AND MOOD

- Behavior can be challenging to monitor in a virtual environment, but is an important component of student safety.
- Be aware of dramatic changes such as lack of attendance in class sessions, lesson completion, or grades.
- Also be sure to attend to students' mood through discussions and submitted written assignments.
- Keep all work students do your side by maintaining records of student history and progress in a way that ensures student privacy.

COLLABORATION IS KEY

- Ensure relevant stakeholders, including your administration or teaching staff, know that you remain available to support students and their families.
- Continue to offer a comprehensive counseling program that follows the ASCA model, including guidance lessons and individual student support.
- Follow all district procedures regarding documentation that complies with FERPA.

TIPS PROVIDED BY THE COUNSELING CONSULTING TEAM, PEAPON ONLINE AND BLENDED LEARNING

18



Resources in the handout

Imminent Danger Protocol

School Staff should follow reporting protocols for imminent danger if a student or family member has an immediate risk to their personal safety. **All school staff are considered mandated reporters for any suspected child abuse or neglect.**

Imminent danger refers to first-hand, real-time reported information versus second-hand/ hearsay, and is an **immediate threat of harm.**

It is considered imminent danger when a student's apparent perpetrator intends to cause harm, or such danger exists which could reasonably be expected to cause death or serious physical harm.

Students can also engage in imminent danger towards themselves or others. The term imminent or its equivalent (e.g., immediate, threatening, emergent, crisis) is short-term, rather than long-term, danger to self or others. When deciding if a situation is imminent, consider the specific nature or conduct, magnitude, probability, or frequency of harm.

School Staff Responsibilities

1. Upon first hand receipt of the concern, the staff member will do one or both of the following:
 - a. Contact 911
 - Call 911, either locally or in the city and state, in which the situation is occurring. Have the student's name and address ready.

© 2019 Pearson Online & Blended Learning K-12 USA. All rights reserved.



Resources (direct link)

- National Hotline Resource
- Student Safety in the Virtual Environment
- Protocols
- Student Safety Plan
- Self-harm Threat assessment
- Suicide Intervention Flowchart
- Tips for dealing with self-harm
- Grief and loss
- Self-harm coping techniques
- Transition Meeting Talking Points



School Counseling Lesson Ideas

- Coping Skills
- Gratefulness
- Mindfulness
- Self-Care
- Circle of Control
- How to socialize safely
- Building self-esteem
- Chemistry of Emotions
- How to connect socially



Contact Resources

Morgan Champion

(morgan.champion@pearson.com)

Colleen Coirolo

(colleen.coirolo@pearson.com)

Karen Muston

(Karen.Muston@pearson.com)

Jenny Floersch

(jfloersch@coloca.connectionsacademy.org)

NATIONAL HOTLINES

These national hotlines can provide support and resources for students and caretakers by telephone call

**NATIONAL
RUNAWAY SAFELINE**

1-800-RUNAWAY

**NATIONAL DOMESTIC
VIOLENCE HOTLINE**

1-800-799-SAFE

**NATIONAL SEXUAL
VIOLENCE HOTLINE**

1-800-656-HOPE

**THE TREVOR
PROJECT/LGBTQIA+
YOUTH HOTLINE**

1-866-488-7386

**NATIONAL EATING
DISORDERS
ASSOCIATION**

**1-800-931-2237
(limited hours)**

**CHILDHELP
NATIONAL CHILD
ABUSE HOTLINE**

1-800-4-A-CHILD

**NATIONAL SUICIDE PREVENTION
LIFELINE**

1-800-273-8255

STUDENT SAFETY TIPS IN THE VIRTUAL ENVIRONMENT

EMERGENCY TIPS



- Try to find out the ten-digit 911 numbers for the place your students are physically located - they often vary by county.
- If you need to call 911 for a welfare check, you'll need to reach out directly to emergency contacts where the student is located.

COMMUNICATE WITH CAREGIVERS



- It's essential that you collaborate closely with caretakers when working in the virtual environment.
- Have resources available such as national hotlines, local support services, and teletherapy options.

ATTEND TO BEHAVIOR AND MOOD



- Behavior can be challenging to monitor in a virtual environment, but is an important component of student safety.
- Be aware of dramatic changes such as lack of attendance in class sessions, lesson completion, or grades.
- Also be sure to attend to students' mood through discussions and submitted written assignments.
- Keep at-risk students on your radar by maintaining records of student history and progress in a way that ensures student privacy

COLLABORATION IS KEY



- Ensure relevant stakeholders, including your administration and teaching staff, know that you remain available to support students and their families.
- Continue to offer a comprehensive counseling program that follows the ASCA model, including guidance lessons and individual student support.
- Follow all district procedures regarding documentation that complies with FERPA.

VIRTUAL SCHOOL COUNSELING REPORTING AND REFERRAL PROTOCOL

Outside Referrals

School Staff should follow referral protocol for students who may need to be referred to outside services (ie. Social Worker, Psychologist, Therapist)

1. The following are sample situations that would warrant a referral to local social worker or mental health counseling resources:

- a. The student mentions that the family is struggling financially
- b. The student mentions that they have not eaten
- c. The student has been abused in the past (mentioned by parent/caregiver or student)
- d. The student has mental health symptoms such as (but not limited to) anger, aggression, agitation, general anxiety symptoms, depression, and seems withdrawn from school work (failing grades, failure to contact).

In the virtual setting, we rely heavily on phone contacts, webmail responses, and virtual lesson participation. If you are concerned about a student's participation, academic performance, or any other aspect, please do not hesitate to determine whether additional services are necessary.

- 2. Be sure to review the ASCA Ethical Standards (Section A.6) on appropriate referrals and advocacy practices**
- 3. Work with Parent/Caregiver to obtain written/signed authorization to speak with the psychologist/therapist/social worker to ensure collaboration.**

4. Determine whether your services at the school level should be continued.

Imminent Danger Protocol

School Staff should follow reporting protocols for imminent danger if a student or family member has an immediate risk to their personal safety. **All school staff are considered mandated reporters for any suspected child abuse or neglect.**

Imminent danger refers to first-hand, real-time reported information versus second-hand/ hearsay, and is an **immediate threat of harm.**

It is considered imminent danger when a student's apparent perpetrator intends to cause harm, or such danger exists which could reasonably be expected to cause death or serious physical harm.

Students can also engage in imminent danger towards themselves or others. The term imminent or its equivalent (e.g., immediate, threatening, emergent, crisis) is short-term, rather than long-term, danger to self or others. When deciding if a situation is imminent, consider the specific nature or conduct, magnitude, probability, or frequency of harm.

School Staff Responsibilities

1. Upon first hand receipt of the concern, the staff member will do one or both of the following:
 - a. Contact 911
 - Call 911, either locally or in the city and state, in which the situation is occurring. Have the student's name and address ready.

- Keep the student engaged in conversation and confirm his or her address or other information that will assist emergency services in locating them.
 - Remain on the line with 911 until emergency personnel arrives at the student's location or as otherwise instructed by the 911 operator.
- b. Make a report with local children's services.
- Search online for "children's services in city/state" where the student lives.
 - Note the incident number and the agency actions, e.g. if they will open an investigation. Document this in whatever documentation protocol your school uses.
- c. Inform the school leader from a separate phone or via instant message.

Log the contact. Normal logging protocol should be followed. Due to the sensitive content, the Log should be marked as "Confidential."

2. Complete or update necessary documentation.

Non-Imminent Danger Protocol

School Staff should follow reporting protocols for non-imminent danger if there are concerns for students and there are no immediate risks for personal safety for them or their family members. **All school staff are considered mandated reporters for any suspected child abuse or neglect.**

Non-imminent danger situations are concerning, but the student is **not in immediate danger or in a life-threatening situation** that would require a call to emergency services.

Non-imminent danger situations could be discovered through submitted assignments, WebMail messages, or phone calls with students, or it may be second-hand or hearsay. Concerns of non-imminent danger require a follow-up from the counselor or school leader.

School Staff Responsibilities

1. Log the contact. Normal logging protocol should be followed. Due to the sensitive content, the Log should be marked as “Confidential.”
2. Inform the school leader or counselor from a separate phone or via instant message.
3. Follow your school’s protocol for documenting this issue as well as planning regular follow-up with the student.
4. The school leader and/or counselor will determine if the reporting staff member should make a report to children’s services.
 - a. If so, the reporting staff member should contact children’s services as the person who initiated the student concern.
 - b. Search online for “children’s services in city/state” where the student lives.
 - c. In the documentation of the issue, note the incident number and the agency actions, e.g. if they will open an investigation.
5. Make the School Leader and/or lead Counselor aware of your documentation and plan to follow through on next steps.

Student Safety Plan (STUDENT)

Step 1: Warning Signs

Warning Signs - thoughts, moods, feelings, situations, and behaviors that can activate a crisis

1. _____
2. _____
3. _____
4. _____

Step 2: Internal Coping Strategies

Internal Coping Strategies – things that can distract me from my crisis (breathing techniques, visualization, and physical activity)

1. _____
2. _____
3. _____
4. _____

Step 3: People I can contact and ask for help

1. Name: _____ Phone: _____
2. Name: _____ Phone: _____
3. Name: _____ Phone: _____

Step 4: Safe Places

Safe Places I can go for a positive distraction:

1. _____
2. _____
3. _____
4. _____

One thing that is the most important to me and worth living for is:

National Suicide Prevention Lifeline:

1-800-273-8255

<http://www.suicidepreventionlifeline.org/>

Student's Name Date

School Counselor's Name Date

Student Safety Plan & Self-harm Threat Assessment (STAFF)

Step 1:

Warning Signs – The thoughts, moods, feelings, situations, and behaviors that can activate a crisis. These signs are observable and indicate an increased risk for suicide for an individual in the immediate future.

Step 2:

Risk Factors – The perpetuating (unchangeable), predisposing (of serious concern), and precipitating (acute) “straw that breaks the camel’s back” conditions. Risk factors may increase the likelihood of a suicide attempt or death.

- Suicidal behavior
- Current/past psychiatric disorders
- Key symptoms
- Family History
- Stressors
- Change in treatment
- Access to pills, firearms, rope, etc.

Step 3:

Protective Factors – The positive internal and external conditions that promote resiliency. Protective factors may reduce the potential suicide act. These are the skills, purpose or value in life, personal characteristics, and an individual’s support system.

Step 4:

Suicide Inquiry – Discuss the suicidal thoughts, plans, behaviors, and intent of the student.

- Ideation
- Plan
- Behaviors
- Intent

Step 5:

Self-harm Threat Assessment – Please see chart below

- High
- Moderate
- Low

Risk Level	Risk/Protective Factor	Suicidality	Possible Interventions
High	Psychiatric diagnoses with severe symptoms or acute precipitating event; protective factors not relevant.	Potentially lethal suicide attempt or persistent ideation with strong intent or suicide rehearsal	Admission generally indicated unless a significant change reduces risk. Suicide precautions
Moderate	Multiple risk factors, few protective factors	Suicidal ideation with plan, but no intent or behavior	Admission may be necessary depending on risk factors. Develop crisis plan. Give emergency/crisis numbers
Low	Modifiable risk factors, strong protective factors.	Thoughts of death, no plan, intent, or behavior	Outpatient referral, symptom reduction. Give emergency/crisis numbers

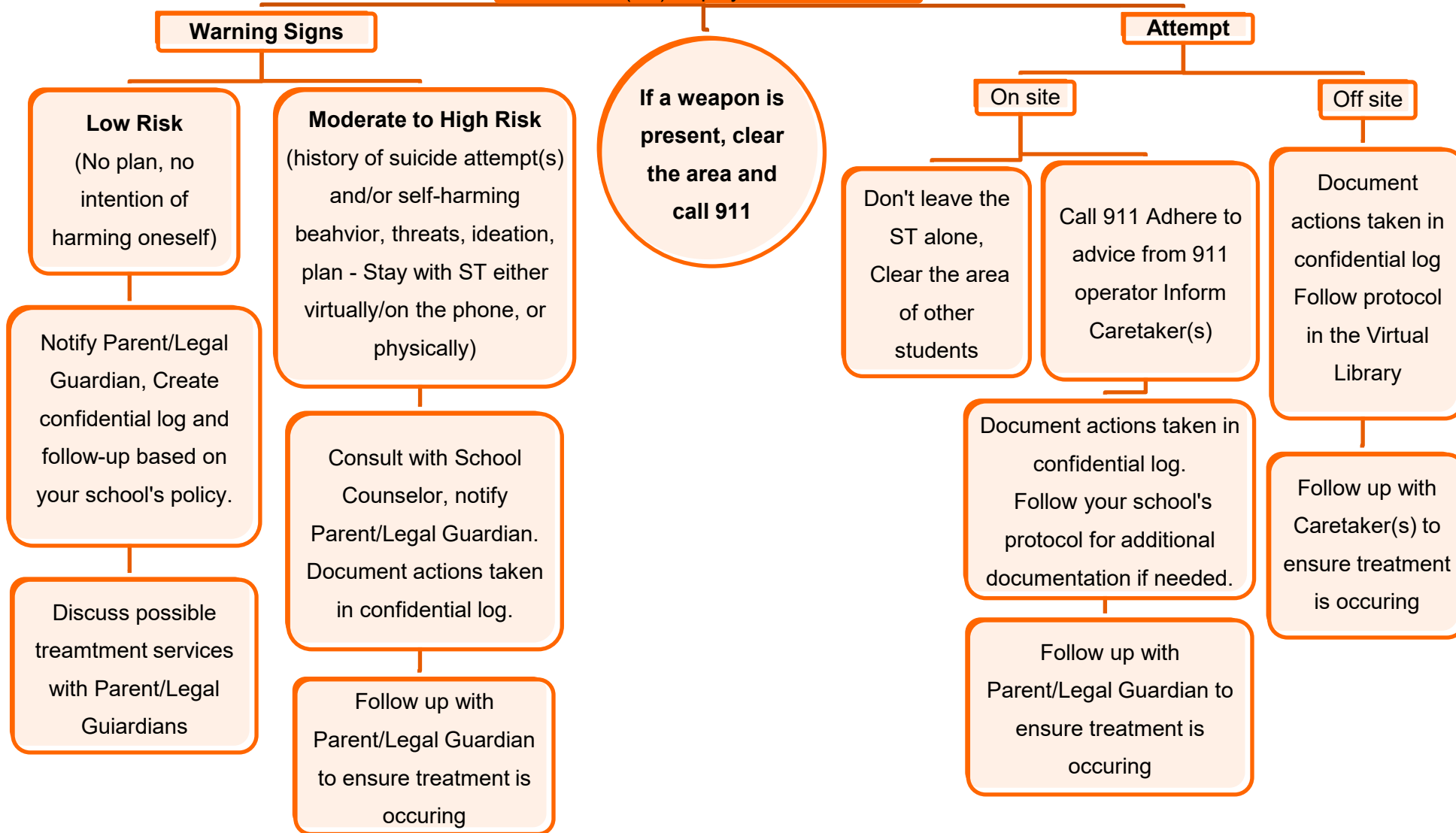
Source: <http://store.samhsa.gov/shin/content/SMA09-4432/SMA09-4432.pdf>

Step 6:

Documentation – Create and/or implement the following:

- Log (confidential)
- Private child welfare IA
- Action plans
- Interventions
- Contact with guardians (under 18)

A student (ST) displays risk of suicide



If a student displays a risk for suicide discuss this situation with your manager to ensure that the student and family receive guidance and support using a team approach.

Tips for speaking with children and young people about self-harm

Talking about self-harm is a big step for many children and young people, and can in itself be a great help.

- According to the Mayo Clinic, self-harm (or self-injury) is the act of deliberately harming your own body, such as cutting or burning yourself. It's typically not meant as a suicide attempt. Rather, self-injury is an unhealthy way to cope with emotional pain, intense anger and frustration.
(<http://www.mayoclinic.org/diseases-conditions/self-injury/basics/definition/con-20025897>)
- Be supportive: It is important that the person who self-harms knows they will be supported whether they self-harm or not. Being available is, in itself, an act of support,
- Discuss the limits of confidentiality with the student; be aware of when a caretaker must be informed about the self-harming behavior,
- Know that people do not harm themselves to be dramatic, annoy others, or to make a point,
- Get as much information about self-harm as you can. It will help to understand what the person is going through. There are many good books and websites addressing this issue (see below),
- Understand your own feelings: Be honest about the emotions which surface due to others' self-harm. It is ok to feel frightened, uncomfortable or provoked,
- Set aside your personal feelings about self-harm and focus on what's really going on for the person. You should always be honest and realistic about what you can and can't do,
- Practice self-care: Ensure that as a professional, consultation with supervisor or other counselors is a part of supporting students who self-harm,
- Be a good listener-allowing the other person to speak without interruption or judgement. If someone feels able to open up, this can be a huge breakthrough,
- Use open-ended questions such as, "When does it happen?", "How does it feel?" are useful", try to avoid "Why did it happen?" ,it may sound challenging and make the student defensive,
- Don't take it personally: Self-harm is about the individual, not about the people around them. Even if it feels like manipulation, it probably isn't,
- Don't assume that all people who self-harm are looking to commit suicide. Hurting can be a way of coping with pent up emotions,
- Don't expect a quick fix, self-harm is often a habitual way of responding to a range of underlying difficulties, including abuse or low self-esteem.
- Discuss self-harm situations with your manager to ensure that the student(s) and families are receiving guidance and support using a team approach.

Self-harm Resources:

Websites:

Crisis text line – What is Self-Harm?

<https://www.crisistextline.org/topics/self-harm/#what-is-self-harm-1>

National Alliance on Mental Illness: Self-Harm

<https://www.nami.org/About-Mental-Illness/Common-with-Mental-Illness/Self-harm>

Books:

Mindfulness Workbook for Teen Self-Harm: Skills to Help You Overcome Cutting and Self-Harming Behaviors, Thoughts, and Feelings.

Biegel, Gina M., Cooper, Stacie(2019) Mindfulness Workbook for Teen Self-Harm: Skills to Help You Overcome Cutting and Self-Harming Behaviors, Thoughts, and Feelings.

[Book Link](#)

Stopping the Pain: A Workbook for Teens Who Cut and Self-Injure

Shapiro, L. (2008) Stopping the pain: A workbook for teens who cut and self-injure. Oakland, CA: Instant help books.

[Book Link](#)

Bodily Harm: The Breakthrough Healing Program for Self-Injurers

Conterio, K., & Lader, W. (1998). Bodily harm: The breakthrough healing program for self-injurers. New York: Hyperion Press.

[Book Link](#)

Grief and Loss

Death is an uncomfortable situation for most of us. Whether it is the loss of someone we knew well or only knew of, it is realistic and appropriate to be affected to some degree. It can be confusing and sometimes frightening to experience the depth of these feelings. However, it is important to understand that grief is a normal process of reacting to loss.

Why I React the Way I Do and You React Differently

There are many factors that affect the way we respond to crises in general, and death in particular. **Past experiences** have a major influence on the way we react and perceive the situation. These circumstances may include the context and quality of the relationship with the person, our earlier experiences with death, and how we have struggled with other recent losses.

Way of looking at the world includes our religious beliefs and customs. It may also mean the strength with which we hold on to the “rules of living” that dictate who, when and how the world “should” go. The more we believe that this death “should not have occurred,” the more difficult it is to accept.

Physical status, including our health, has a significant impact on the amount of energy – both physically and psychologically – we can invest in dealing with the loss. Lastly, the availability of **social supports** has a big influence on our responses. Are there people with whom we can talk and share our reactions? Are others pretending that none of this is significant? Are there others who understand the special meaning of this death for us? Given these factors, there are a multitude of responses that we can have. While we usually believe that our reactions are justified, it is equally important to accept that others may react differently. We may mourn publicly, others privately. We may be able to see the person’s name calmly, while the sight of it causes someone else to get very upset. We may feel comfortable mentioning what the deceased had said, while another is upset by that reminder. We may want to keep the person’s memory in the present, but another may need to act as if nothing has happened. No one really has the one and only way to respond.

Phases of Coping

People who are adjusting to the loss of another go through some predictable stages. There is no right or wrong way to go through the process. People tend to skip back and forth between stages in a random fashion. Some get stuck at one phase while others may vacillate between two reactions. Sometimes it is frustrating and disappointing when you try to talk with someone who is in a different phase.

COMMON PHASES OF COPING CAN BE:

1. Shock and Denial – “No, it can’t be true!”

Often people need to use this phase to cushion the pain of the loss. It is characterized by a numbness, disbelief, and feelings of surrealism. Except for a rare few, people do not need to be confronted and will come out of the denial phase by themselves

2. Anger – “Why me? “Why them?”

This anger may be directed at the person who died, an event or other people. It is important to let the griever experience their anger without being critical or judging whether the anger is appropriate.

3. Bargaining – “Yes, it is true, but…”

This is the beginning of acceptance. The need here is to let the mourners make the agreements that they need with God, with the person who died, and with others. On their own, people will decide – when they are ready – if these promises can be fulfilled.

4. Depression – “Yes, it has happened to me (us).”

The mourning process is being worked through. The mourners begin to separate emotionally and may accept offerings of support. Usually, the griever rejects offers of reassurances.

5. Acceptance – “Yes, I am ready to face the world again.”

This is not a resignation but an acceptance of the realities and the need to pick up the pieces and move on.

Telling Children

Often times, adults try to protect children from knowledge of disaster and pain. However, children sense all of these feelings, as well as the message that it is not okay to ask about them. When children ask questions, it is important to explain things in a way that complements the children’s level of understanding. Children need reassurance that accidents are rare. The death of others often triggers the question, “What would happen to me if something happened to you?” If you have made any special plans for your children, this may be a good time to discuss them.

Why Am I So Affected by This?

Critical incidents – accidents, sudden deaths, injuries – often trigger feelings of vulnerability and upset that were dormant. Though the reason for the sensitivity may have nothing to do with the present event, it may initiate a chain reaction. Talking and thinking about current losses may trigger feelings of sadness about divorces, moves, lost friendships and illnesses, to name a few. This happens because there was not ample opportunity to deal with these feelings when the event occurred. We often discount the importance of these reactions because “that has nothing to do with this – I am over that!”

These reactions are a valuable sign for us to complete our unresolved feelings. Talking and sharing feelings with good friends or family can help. It may also be valuable to talk with an Employee Assistance Program (EAP) counselor who can assist you in defining the issues and can provide guidance in moving forward. Regardless of how you approach this, do not ignore it. Reburying it only means it will resurface again later.

Signs That You May Be Overly Stressed

Adults often show at least several of the following symptoms when an occurrence has been overly stressful:

- Headaches n Backaches n Outbursts
- Brooding lethargy
- Fatigue
- Feeling overwhelmed
- Sleep disruption
- Lack of concentration
- Making mistakes more than usual
- Disinterest in usual pleasures
- Increased use of alcohol/medications

If Someone You Care About is Grieving, You Can Help

Listen.

Offer advice only when asked. Allow the bereaved person to talk about the death and the dead person – the good and the bad. It is frustrating for them to be steered gently away from subjects you may think are “unhealthy”. They need to talk about their loss.

Give solid, practical help.

Offer to take care of children or occasionally cook a meal. Invite them to your home. Such simple gestures can have priceless value to a family in shock.

Don't offer false comfort.

Statements like “at least the suffering is over,” “you’ll get over it in time,” or “it’s God’s will,” may make you feel better, but they are unlikely to help the bereaved. While pity may be resented, a simple expression of a sorrow shared is usually appreciated.

Encourage professional help.

If, knowing what grief involves, you think their reactions are too extreme, encourage them to seek counseling assistance.

Self-harm Coping Techniques

It can often help students who self-harm to think about the emotions they feel when they want to engage in this behavior. Once they have identified the feelings or situations (triggers) that cause them to want to self-harm, they can be supported to create a personal list of distractions. It may be useful to share the information below and then develop the child or young person's own Student Safety Plan containing a list of distractions.

Below is a list of emotions that might be triggers for children or young people who self-harm, with possible distractions.

Feeling alone or isolated?

Possible distractions: talking to someone (identify person who can be trusted), writing down how you feel, walking the dog, wrapping a blanket around yourself, meeting a friend or doing some exercise.

Feeling angry?

Possible distractions: punching something like a pillow, running or other exercise, crunching up paper and throwing it, snapping twigs, squeezing clay, screaming, or having a cold shower.

Sadness and fear?

Possible distractions: spend time with an animal, write in your journal, walk in nature, listen to music, talking to someone about how you feel, or massage your hands.

Feeling out of control?

Possible distractions: write lists, write a letter saying what you are feeling and throw it away it, clench and relax all your muscles, practice deep breathing or meditation techniques, solve a puzzle or cleaning and tidying up.

Numb and disconnected?

Possible distractions: flick an elastic band on wrists, eat something with a strong taste, have a cold shower, focus on breathing, make a photo collage, doing craft activities or playing an instrument.

This list gives possibilities and is not exhaustive. No student will have the same methods of distraction. What is important is that possible options can be discussed and **choose what might work for them**. Ask students about times in the past when they have overcome these feelings. What coping mechanisms did they use? Encourage them to identify their own strengths and to use them in a positive manner.

This guidance can be used with the Student Safety Plan, as it may help in developing internal coping strategies for students.

Counselors and other school leaders should be used as resources if additional help is needed for a student. Be cautious to protect students' right to privacy, only discussing this issue with staff identified and only in a professional context, to protect student safety.

TRANSITION FROM RESIDENTIAL TREATMENT FACILITY

When a student returns to school after a period of time in a hospital or residential treatment facility (RTF), there are steps that will need to be taken to ensure a seamless transition back into the academic environment. These include communication, coordination, and care. These cases are often Child Find issues when the student has not yet been identified as eligible for special education services or a Section 504 plan.

1. Document the RTF stay

- Use your district's typical documentation portal.
- Be sure to make follow-up reminders for yourself to follow up with the student as you would normally do in the brick and mortar setting.

2. Obtain discharge documentation from the RTF and upload into your school's specific database if applicable.

- If student will be receiving ongoing counseling services in the community, receive parental consent to release information and establish communication with that facility/provider to be able to provide joint support of student goals. The community agency typically will provide a form for the parent to sign.

2. Follow the following steps:

- **Meet with the student's teachers to ensure that they are aware of any supports the student may need.**
 - Determine if any coursework may be prioritized without sacrificing course integrity.
 - Remind the teachers to pay attention to the student's behavior in virtual meetings, any sudden changes in grades, and to respond thoughtfully and intentionally to email correspondences with the student.
- **Talk with your Special Education director (or 504 Case Manager) if you feel that the student may need 504 accommodations or a revised 504 plan.**
 - If the issue substantially limits one or more major life activities, a 504 plan needs to be considered.

- o Collect medical documentation, discharge summary and any other relevant information.
- o If the issue is impacting the student's academic achievement and performance, an IEP team meeting should be considered.

3. Set up a phone meeting or video chat session with both the student and their caretaker.

- **During this meeting, it will be important to discuss how the student is feeling about his or her return to school.**
 - o If the student is anxious about the return, make sure to ask the student which parts of the return is causing anxiety and work on strategies to overcome these fears.
- **Discuss the student's chosen coping mechanisms.**
 - o If the student has learned some coping mechanisms such as deep breathing or visualization techniques, it will be helpful to discuss at which points in the day the student could use these techniques, if needed.
- **Discuss a realistic plan for completion of outstanding school work.**
 - o Discuss a time frame with teachers prior to the meeting so that these expectations can be used to establish expectations for completing assignments.
- **Explain to the student that you will set up weekly or biweekly meetings to check in.**
 - o This could be a simple phone call to the student. It may be wise to start off weekly, and then meet bi-weekly based on academic progress. The caretaker does not need to be present for these check-in meetings.
- **Ensure that the student knows the counselor's availability and has the contact information.**
 - o Agree to a backup plan if you are unavailable. For example, the student can send a email message to his or her homeroom teacher. Multiple supports are a key component to a positive transition.

DEATH OF A STUDENT:

PROTOCOLS FOR PRINCIPALS AND COUNSELORS

The principal and lead counselor should collaborate throughout this process. The principal or counselor could consult with the school district for additional resources or guidance.

School Communication Plan:

- The teacher or other staff member informs the principal.
- The school leader informs the Lead Counselor.
- The school leader should assemble all teachers/staff members connected to the family and determine appropriate steps for sharing the news. Care should be taken in notifying the staff about the incident in collaboration with the school counselor.
- If there are public inquiries about the incident, refer to the [Media Guidelines](#) below.
- If appropriate, the principal should contact the family to express sympathy and offer any assistance the school can provide at this time.

Logistical Information:

- Include appropriate stakeholders: school leadership staff (principal(s), lead counselor, special education, etc.), and any additional members the principal would like to include
- Consider any relevant information that needs to be obtained such as:
 - funeral arrangements
 - family dynamics/living situation
 - siblings
 - The principal will determine if there are materials that should be returned to the family and when the appropriate time would be to coordinate this effort.

Support Plan:

- **Support for the family:** The principal will identify the staff member who will follow-up with the family and the timeline for this contact. In most situations this should occur within 24 to 48 hours.
- **Support for siblings:** Principal/Lead Counselor will check the student information system to see if there are other enrolled students in the family. A plan to support other students in the family should be developed, as needed. If other students in the family remain enrolled, teachers should work with the family, at the direction of the principal/lead counselor, to re-engage them in school work.
- **Support for staff:** The school leader will contact Human Resources to engage counseling services that may be available through the Employee Assistance Program and consider time off requests from staff (if available within the school district).
- **Support for other students affected:** The principal will identify other students who have had contact with the student who has passed away (as appropriate). The principal will contact the parents, consult with the school counselor to assess any counseling needs of these students, and create a support plan for these students if needed.

Follow-up Support

- The school leader will determine whether additional follow-up contact with the family is necessary, and if so, assign the situation to a counselor to ensure that contact occurs. All school policies and procedures for logging contacts should be followed.

MEDIA GUIDELINES

If you are contacted by the media regarding a student death, the principal should consult with the school district to follow the appropriate guidelines.

NOTE: FERPA laws prohibit staff from discussing personal or academic information about any student with members of the media (including traditional and social media).

In the event the death IS NOT PUBLIC INFORMATION:

Often reporters are some of the first people to learn of tragedies. If you are contacted to CONFIRM a death please use the following guidelines:

Q – Can you confirm that NAME is a student at SCHOOL NAME? Are you aware that the student has died?

A – At SCHOOL NAME, we take the privacy of our students very seriously. Please submit a public records request (guidelines may be found on our website).

This response should provide you with enough time to learn more and prepare a comment if needed. Also, many families have opted out of directory information, so this will need to be checked prior to fulfilling any records requests for directory information.

In the event the death is PUBLIC INFORMATION and the school district has given permission to speak, sample language is listed below:

Death of a student - general statement #1

This is truly a tragic event. Our hearts and sympathies go out to the family and on behalf of the entire SCHOOL NAME community, I express our deepest condolences. School counselors are available to speak to any student and their family as needed regarding this sad event.

Death of a student - general statement #2

Our entire school community is deeply saddened by this event and our sympathies go out to the family. If any of our students or their family members wishes to speak to a school counselor about this event, school counselors are readily available and I encourage families to contact the school.

Completed suicide – if asked about indications:

Due to student privacy laws, I am unable to discuss personal or academic information about this student. What I can say is that our entire school community is deeply saddened by this event and our sympathies go out to the family. If any of our students or their family members wishes to speak to a school counselor about this event, school counselors are readily available and I encourage families to contact the school.