Collective Voice of Compassion and Care: The Stigma of Suicide

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Abstract

The term suicide has a prominent stigma associated with it in society. The facts however remain that most of us will experience, either personally or with someone close to us, the inability to cope with stressors and the feeling of being helpless. As these are precursors to possible suicides, more adults must be willing to challenge the stigma of speaking out about suicide in order to reduce the alarming youth statistics throughout the Nation. This article brings awareness to the current statistics, thus the gravity of the need to address the concern, and considerations when developing or assessing your current student program.

It is reported to have claimed more lives than war, murder, and natural disasters combined. It is the 10th leading cause of death in the United States. It’s time to start talking about it...Suicide. The services are minimal and the numbers are rising, 47,173 Americans died in 2017 as a result of suicide. Something that impacts so many of us deserves conversation and open discussion so that there can be support and help at the darkest of times.

The landscape of education has certainly begun to invest more time in speaking about social emotional learning and the Collaborative for Academic, Social, and Emotional Learning (CASEL) has used research and developed key areas such as; self-awareness, self-management, social awareness, relationship skills, and responsible decision-making to assist students receiving, and ultimately applying tools that help increase coping abilities, manage stress, and resist social pressures. While this work in education in certainly valuable it must also be coupled with specific Suicide Awareness, Suicide Prevention, and Suicide Support Services.

The Youth Risk Behaviors Survey of 2015 indicated that 8.6 percent of youth in grades 9-12 reported that they had made at least one suicide attempt in the past 12 months. The same survey showed girls attempts were twice as often as boys 11.6% vs. 5.5% and Hispanic teens were reported as the highest rate of suicide attempts 11.3%, with Hispanic females the highest at 15.1%. Nonetheless, the word “Suicide” alone still has such a stigma that we frequently avoid using the term.
Over the years I have seen and heard from other colleagues across multiple districts that parents and adults often times respond by marginalizing a youth’s suicide ideation by expressing comments along the lines of; “it gets better after high school”, “it’s not normal to think about suicide”, and “it can’t be that bad”. These types of statements are particularly distressing to hear.

Considering the historical statistics that indicate that either an adult themself or, an adult they know, at one point or another, has had the thought of suicide it remains unfortunate that so many adults are unwilling to acknowledge that there are points in life that our coping strategies are low and our feeling of helplessness is high. As adults do we not recall our former pain? Do we believe that as adults we must keep the appearance in front of our youth of “having always had it all together”? Do we not wish to acknowledge it because of the stigma it may have with other adults? Our youth who desperately need adult connection and support during this time cannot afford to be met with these types of responses and the appearance of detachment to the issue.

*Age 15-35 Suicide as Cause of Death ranking*

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<tr>
<th>STATE</th>
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<tr>
<td>New York</td>
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With statistics continuing to demonstrate that suicide is one of leading causes of death amongst our youth the time is long overdue to develop and put in place, in conjunction with Social-Emotional Learning, direct education with regard to Suicide Awareness, Suicide Prevention, and Suicide Support Services.

Consider when you develop, purchase, or assess your current student suicide awareness, prevention, and response systems, that programming will only be as effective as those carrying the message. Being trained or mandated to implement programming does not equate to success of supporting students if your carrier has preconceived notions of and acceptance of the prevalent stigma related to suicide. As demonstrated, our response as educators to Suicide, is in fact a true life or death situation and it deserves to have the intentionality of being built with the care our youth deserve. The Scottish author and theologian, Ian Maclaren, said it best, “Everyone you meet is fighting a battle you know nothing about.” As we move forward as educators let us be conscious of this and committed to being the voice of compassion, understanding, and care for those struggling with suicide ideations.

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