

December 2025

Supervising School Counselors through Student Suicide

Alexander T. Becnel
North Carolina State University

Joseph W. Pistorius

Follow this and additional works at: <https://trace.tennessee.edu/tsc>



Part of the [Counselor Education Commons](#)

Recommended Citation

Becnel, Alexander T. and Pistorius, Joseph W. (2025) "Supervising School Counselors through Student Suicide," *Teaching and Supervision in Counseling*: Vol. 7 : Iss. 3 , Article 8.

<https://doi.org/10.7290/tsc07aqdi>

Available at: <https://trace.tennessee.edu/tsc/vol7/iss3/8>

This article is brought to you freely and openly by Volunteer, Open-access, Library-hosted Journals (VOL Journals), published in partnership with The University of Tennessee (UT) University Libraries. This article has been accepted for inclusion in *Teaching and Supervision in Counseling* by an authorized editor. For more information, please visit <https://trace.tennessee.edu/tsc>.

Supervising School Counselors Through Student Suicide

Alexander T. Becnel , Joseph W. Pistorius

Received: 05/22/24
Revised: 12/13/24
Revised: 01/14/25
Accepted: 03/17/25
DOI: 10.7290/tsc07aqdi

Abstract

This phenomenological study explored the experiences of 11 school counselor supervisors whose supervisees were exposed to student suicide. The authors identified five themes: prioritizing emotional support, suicide self-efficacy, supervisors' reaction to suicide, identifying systemic issues in schools, and school counseling professional identity issues. Implications for counselor educators and supervisors are discussed.

Significance to the Public

This study advances the idea that school counselor supervisors need specific training to help them address their supervisees' needs during a student suicide event. It also suggests that school counselors need more opportunities to receive clinical supervision.

Keywords: counselor supervision, school counseling, suicide, crisis

Suicide continues to be a primary concern for youth in the United States. Suicide is the third-leading cause of death among school-aged youth, claiming the lives of 2,950 children and adolescents in 2021 alone (Centers for Disease Control and Prevention, 2023). Among high school students, 22.2% seriously considered attempting suicide, 17.6 % made a plan to attempt suicide, and 10.2% actually attempted suicide (Gaylor et al., 2023). As suicide rates have remained high (Curtin & Garnett, 2023), it is important to understand how mental health professionals (MHPs) who work with youth are impacted by suicide.

Given the amount of time that youth spend at school, school counselors are on the frontlines of youth suicide. Adolescents are just as likely to receive mental health treatment in school as they are in specialty mental health practices (Substance Abuse and Mental Health Services Administration, 2020). School counselors assess youth for suicide risk more often than any other mental health professional (Schmidt, 2016), and many school

counselors report interacting with suicidal youth while they are in practicum or internship courses and under clinical supervision (Allen et al., 2002). Multiple studies have demonstrated that school counselors are experiencing student suicides and suicidal ideation often. Nearly 80% of school counselors work with students who have a history of suicide attempts (Stickl Haugen et al., 2021), and between 28% and 37% of school counselors have experienced a student's death by suicide (Becnel et al., 2021; Stickl Haugen et al., 2021). Gallo (2018) found in a national sample that two-thirds of high school counselors completed multiple suicide assessments each month.

Impact of Suicide Exposures

Exposure to suicide has personal and professional impacts on MHPs. MHPs often experience sadness, anger, guilt, anxiety, and shame in the aftermath of a suicide (Gibbons et al., 2019; McAdams & Foster, 2002; Wilschke & Crepeau-Hobson, 2024). Some

Alexander T. Becnel, Department of Educational Leadership, Policy, and Human Development, North Carolina State University; **Joseph W. Pistorius**, Independent Researcher. Correspondence concerning this article should be addressed to Alexander T. Becnel, Department of Educational Leadership, Policy, and Human Development, North Carolina State University, Campus Box 7801, Raleigh, NC 27695 (email: atbecnel@ncsu.edu).

may consider changing careers or retiring early after they are exposed to a client's death by suicide (Sherba et al., 2019; Thomyangkoon & Leenars, 2008). They may also feel a sense of incompetence or self-doubt in their professional judgment (Finlayson & Graetz Simmonds, 2016; Jorgensen et al., 2021), or they may increase referrals for hospitalization when working with suicidal clients (Greenberg & Shefler, 2014; McAdams & Foster, 2002). MHPs who are exposed to suicide during their training programs have significantly higher levels of distress than those with more professional experience (Wurst et al., 2010), suggesting the need for more intentional training. Further, those who work with clients who have suicidal ideation and behaviors believe that supervision is essential for supporting practitioners (Levy et al., 2019).

Similarly, school counselors experience several professional impacts when they are exposed to student suicide. After a student's death by suicide, school counselors can experience professional incompetence (Carpenter, 2018). They may have heightened caution around students with suicidal ideation and increase their awareness of the risk factors for suicide among their students (Stickl Haugen et al., 2021). Some may question their actions in the aftermath of a suicide, experience hypervigilance around suicide, adjust their suicide risk assessment procedures, or become more adamant in their recommendations to parents following suicide risk assessments (Nichols, 2018). School counselors who were exposed to student suicide attempts had higher levels of suicide assessment self-efficacy than those who were not exposed (Becnel et al., 2021). The authors of this study theorized that exposure to student suicide attempts may have subsequently motivated school counselors to participate in further training on suicide. This idea is supported by several studies that have found that school counselors desire and seek additional training on suicide after they are exposed to student suicide (Christianson & Everall, 2008; Maples et al., 2005; Stickl Haugen et al., 2021).

In addition to these professional impacts, suicide has several personal impacts on school counselors.

Following a student's death by suicide, school counselors can experience a range of emotional responses, including shock, confusion, low mood, guilt, and shame (Maples et al., 2005; Nichols, 2018; Stickl Haugen et al., 2021). School counselors also reported difficulty in navigating their grief alone and felt a lack of personal support from their colleagues in the school system (Christianson & Everall, 2008). A qualitative study found that some may reexamine existential issues in the aftermath of a student's suicide, including the meaning of life and their purpose (Carpenter, 2018). Some of these counselors also believed that the exposure to suicide was traumatic and sought personal counseling. This finding echoes Stickl Haugen and colleagues' (2021) quantitative study, which found that some school counselors experienced trauma-related symptoms after a student suicide. School counselors who are exposed to student suicide attempts may also experience shock, guilt, anxiety, and anger (Levkovich & Vigdor, 2021). Numerous studies have noted the need for personal and professional support for school counselors following a suicide (Christianson & Everall, 2008; Mirick & Berkowitz, 2023; Stickl Haugen et al., 2023). Therefore, research must explore strategies to support school counselors who are exposed to youth suicide.

School Counseling and Clinical Supervision

School counselors and school counselors-in-training (SCITs) can be supported during a suicide event using supervision. In the broader counseling profession, clinical supervision focuses on the development of counseling skills and case conceptualization of clients (Bernard & Goodyear, 2019). Clinical supervision is often not required for professional school counseling certification or licensure, so school counselors may only receive administrative supervision (Havlik et al., 2019; Stickl Haugen et al., 2023). Administrative supervision primarily focuses on organizational procedures and policies (Monahan, 2018). However, clinical supervision significantly contributes to professional growth among early

career counselors (Bernard & Goodyear, 2019) and its use is often recommended for early career school counselors (Bledsoe et al., 2018; Evans Zalewski et al., 2024; Tang, 2020).

Nonetheless, clinical supervision continues to be underutilized in school counseling (Bledsoe et al., 2018; Dollarhide & Miller, 2006). Following a student's death by suicide, 19.6% of school counselors sought support from a supervisor. This lack of clinical supervision can lead to role ambiguity among early career school counselors (Chandler et al., 2018), who can become confused about their professional roles once they begin working in school systems (Cervoni & DeLucia-Waack, 2011). Further, the professional identity of school counselors continues to be debated among scholars and advocates (Better-Bubon et al., 2021; Lambie et al., 2019; Levy & Lemberger-Truelove, 2021), and schools receive conflicting messages about their role in working with suicidal youth (Gallo & Wachter Morris, 2022; Stone, 2022). Counselors who are exposed to crises desire supervision, as these cases are more complex and yield a greater emotional toll (Dupre et al., 2014; Wagner et al., 2020). Clinical supervision can be used to assist school counselors' understanding of their professional identity and role within a school (Luke & Bernard, 2006) as well as provide a space for them to process the complexities of a student suicide (Dupre et al., 2014).

When school counselors do utilize clinical supervision, it is often not tailored toward educational settings (Watkinson et al., 2018). Further, they may not have access to supervisors who are adequately trained to supervise school counselors (Bledsoe et al., 2021). Specialized training for supervisors of school counselors is critical, as it can increase their supervision self-efficacy (Brown et al., 2017) as well as the self-efficacy of their school counseling supervisees (Tang, 2020). However, the practice of school counseling supervision is not clearly defined (Bledsoe et al., 2018), so exploration of school counseling supervision is warranted.

There has been a limited amount of research on school counselor supervision and the roles and

characteristics of school counselor supervisors (Bledsoe et al., 2018). In addition, no study has explored how clinical supervisors may be impacted when their school counseling supervisees experience student suicide. Considering the potential for profound personal impacts of suicide on school counselors (Stickl Haugen et al., 2023) along with the notion that some level of attachment occurs between supervisors and supervisees (McKibben et al., 2023), school counselor supervisors may also experience personal and professional consequences when supervising school counselors through a student suicide. Therefore we explored the following research question: *What are the lived experiences of counselor supervisors when supervising a school counselor who was exposed to a suicide event?*



Method

We used transcendental phenomenological methodology, as described by Moustakas (1994), to explore the lived experiences of counselor supervisors who supervised school counselors or SCITs during a student suicide event. This approach is based on a philosophic system of subjective openness (Husserl, 1970) and requires the researcher to describe lived experiences while setting aside biases (Creswell & Poth, 2018). This methodology allowed us to capture the essence of the participants' experiences and derive knowledge while setting aside our preconceived notions about those experiences.

Procedure

Upon receiving approval from the first author's university institutional review board, we recruited participants using a purposive sampling procedure. This sampling procedure was necessary as we wanted to choose participants who could discuss information-rich cases to answer our research question (Hays & Singh, 2012). To find a diverse sample of counselor supervisors, we solicited participants on CESNET-L (Jencius, 2019), the listserv for counselor educators and supervisors. We

required two inclusion criteria. First, we asked if potential participants had ever provided clinical supervision to a school counselor or SCIT during a student suicide event, which included (a) a student death by suicide, (b) a student suicide attempt, and/or (c) a student who expressed suicidal ideation. Given the potential for impact across various suicide events (Levy et al., 2019; Levkovich & Vigdor, 2021; Stickl Haugen et al., 2021) and the limited opportunities for school counselors to receive supervision (Bledsoe et al., 2021; Watkinson et al., 2018), we determined that this range of suicide events was appropriate for our inclusion criteria. We also asked if they had at least 1 year of experience working as a counselor supervisor. As potential participants responded, we screened for these inclusion criteria via email confirmation. We selected participants on a first-response basis, first-selected basis.

After participants completed this screening, they were directed to our informed consent document. Upon reviewing the document and agreeing to participate in the study, we scheduled interviews and asked participants to complete a brief demographic survey. We recorded each interview using teleconferencing software and deleted any audio or video files upon completion of transcription. Each author transcribed and coded the interviews separately. After we completed an initial round of coding, we reviewed the transcripts, discussed the coding, and agreed on a single set of codes. Then, we applied the set of codes to all transcribed interviews. To maintain confidentiality, we assigned a pseudonym to each participant and removed any identifying details such as specific locations or workplaces. Following the recommendations by Moustakas (1994), we interviewed participants until interview data no longer yielded new insights.

Participants

Our participants were 11 counselor supervisors in the United States who supervised school counselors or SCITs during a suicide event. Ten participants were women, and one participant was a man. When we asked participants to describe their racial and

ethnic backgrounds, eight were White or Caucasian, one was Asian, one was Black or African-American, and one was Latino or Hispanic. Participants' ages ranged between 34 and 71, with a mean age of 46.5. Their years of experience as a supervisor ranged between 2 and 19, with a mean of 9.1 years. Four participants were in the South, four were in the Midwest, and three were in the Western United States.

We asked participants to identify the work setting of their supervisees, with the option to select more than one setting. Eight participants worked with supervisees in suburban areas, seven worked with supervisees in urban areas, and six worked with supervisees in rural areas. All 11 participants supervised a school counselor or SCIT who encountered a student with suicidal ideation. Eight participants had a supervisee who encountered a student suicide attempt, and four had a supervisee who was exposed to a student death by suicide.

Research Team Reflexivity

The research team consisted of two men who identify as White. The first author is a school counselor educator who was exposed to a student death by suicide while working as a school counselor. The second author is a mental health counselor supervisor with experience working in school settings. Given these experiences, we discussed how our familiarity with this topic might inform our assumptions. At the onset of the project, we discussed our positionality and identified four assumptions among the research team to be bracketed: (a) participants would be affected emotionally by the student suicide event, (b) participants would have limited training in supervising school counselors, (c) participants would have limited training in supervision during crisis events, and (d) the supervisee's work site would impact supervision. We also used reflexive journaling throughout the coding process to maintain our awareness of biases and assumptions (Creswell & Poth, 2018). Lastly, we utilized an external auditor who is a school counseling faculty member at a separate institution who has experience in phenomenological research to examine our

research process and findings. The auditor's external position allowed him to evaluate our findings and determine if our themes were supported by the data (Creswell & Poth, 2018).

Data Collection

Participants completed semi-structured interviews about their experiences supervising school counselors and SCITs during a student suicide event. Each interview was approximately 1 hour in length. We began by asking an open-ended question: What were your experiences as a supervisor when your school counseling supervisee was exposed to a student suicide event? We then asked participants to reflect on and discuss one or two specific supervision experiences related to the phenomenon. We asked the following questions if participants had not already addressed them: (a) What was your perception of your performance as a supervisor during the suicide event/s? (b) What was your perception of your supervisee's performance during the suicide event/s? (c) What was your perception of the supervisee's school and their preparedness for the suicide event/s? (d) What were the personal or professional consequences of the suicide event/s on you and your supervisee? (e) How, if at all, did these experiences impact how you conduct supervision?

Trustworthiness

We ascertained trustworthiness using credibility, transferability, dependability, and confirmability (Prosek & Gibson, 2021). We established credibility through member checking and triangulation. We conducted member checking by asking participants to review their interview transcripts and to provide us with any clarifications or revisions. Eight participants responded, and none provided clarification or revision. Additionally, we provided participants with a summary of our findings and invited them to review and provide feedback on initial themes. Four participants responded and agreed with our theming. For triangulation, each author analyzed the interview transcripts separately to formulate emerging themes. Then, the research

team met to discuss their analysis, clarify their findings, and confirm the themes. We established transferability by using rich, thick descriptions of the phenomenon and by clearly describing our research method and approach. We consulted with colleagues with extensive experience conducting qualitative research throughout the project's design phase (Levitt et al., 2017). We also disclosed discrepant information throughout our themes. These steps helped us to achieve dependability. Lastly, we established credibility through our use of reflexive journaling and our use of an external auditor to verify our research process (Creswell & Poth, 2018). Throughout the life of the project, we had discussions to resolve disagreements or confusion. These discussions led to a shared theme conception.

Data Analysis

We followed the process that Moustakas (1994) laid out for conducting transcendental phenomenological research. Throughout the data analysis process, we employed the concept of *epoche* to set aside our preconceived notions and biases about the phenomenon. We began by following the steps for a transcendental-phenomenological reduction to describe each individual experience using textual descriptions. Then, we used imaginative variation to take these textual descriptions and create structural essences of the participants' lived experiences. We read each participant's interview transcript several times to construct meaning units. Throughout this process, we utilized horizontalization to give equal value to all statements made by participants. We then organized our meaning units into these using individual and composite descriptions. Finally, we synthesized the textual and structural meanings and essences into themes.



Findings

Five themes emerged from our participant interviews: (a) prioritizing emotional support, (b) suicide self-efficacy, (c) supervisors' reaction to

suicide, (d) identifying systemic issues in schools, and (e) school counseling professional identity issues.

Prioritizing Emotional Support

Participants often described the intense emotional reactions of their supervisees during these suicide-related events. Many noticed fear, guilt, and panic among supervisees as they attempted to cope with youth suicide in their schools. “I think the initial reaction is panic and fear and making sure that they’ve checked all the boxes,” said Megan. “[The supervisee] was feeling guilty that he had not done enough. Very much in this space of what could I have done differently?” said Donna. Charlotte stated, “Even though they’ve had education and training, they still seem to panic.” Others noticed a deep sense of melancholy among their supervisees. “[The supervisee] was definitely sad ... she felt like [the student] was making really good progress and certainly didn’t see it coming,” said Allie.

As their supervisees brought up these intense emotions, participants discussed how they assumed a “caregiver” role and helped supervisees process their emotional reactions. “I can tell you the things that stood out to me. One was managing or helping support the supervisee through their own emotions and what they were experiencing,” said Cindy. Charlotte stated, “Seeing how they’re doing emotionally — I think that’s a really important piece. Making sure that they’re okay.” Many participants used the word “reassurance” to describe the process of walking through the steps that supervisees took and putting their minds at ease. Tiffany said, “A lot of my work in supervision was validating her. Yes, you did everything right.” Megan summarized the components of this theme best when she stated:

I think the initial reaction is panic and fear and making sure that they’ve checked all the boxes. So, as a supervisor, I think part of my role is to help them navigate those things.... Almost every single time, their initial reaction is that they have fear. They want to know that they did the right thing.

Suicide Self-Efficacy

As the participants tried to support the emotions of their supervisees, they had discussions around suicide self-efficacy and self-doubt. Participants, who often supervised inexperienced school counselors and SCITs, noted the dissonance that their supervisees experienced as they mistrusted their own skills for working with and managing suicidal youth. Penny stated, “I remember the student questioned whether grad school actually adequately prepared them.” Similarly, Megan said, “Definitely a questioning of skills, a questioning of abilities to see things.” Some participants, such as Donna and Charlotte, had supervision sessions in which the supervisee discussed leaving the profession of school counseling altogether, even at early stages in their careers. Tiffany summarized this experience stating, “Having to come face to face with the fact that you’re not confident is really painful, especially early in your professional development ... there was this sense of imposter syndrome and incompetence, which caused doubt and anxiety.”

While managing their supervisee’s sense of self-doubt, the participants also questioned themselves and their self-efficacy as supervisors. Colleen stated, “I had my own doubts about my abilities to help them in that process because it is a pretty scary process ... you feel a lot of responsibility for those students.” Penny also stated, “I found myself doing more reviewing and then also second guessing.” Many participants recognized that, irrespective of training and experience, suicide is a complex issue to manage and master as a supervisor of school counselors and SCITs.

Supervisors’ Reaction to Suicide

Even though they were not working directly with suicidal individuals, many participants discussed their personal reactions to the suicide and the efforts they took to manage those reactions. Several of the participants had either experienced a student suicide while working as school counselors in the past or even had personal experiences of suicide. “I can go back in time and think about when I was a school

counselor ... when [the supervisees] talk about kids that died by suicide, those emotions are still really there for me,” said Cindy. Similarly, Donna stated, “I wish I didn’t have those lived experiences ... when [the supervisee] described what it was like, I had a sense of what it feels like when you first hear the news.”

As a result, participants were more intentionally engaged in bracketing. They attempted to set aside personal experiences to focus on their supervisees’ needs. Megan stated, “I can’t think about my own past stuff, but rather kind of help the student navigate that process on their own. So, I definitely think that I am more aware of that supervision transference or countertransference possibilities.” Megan further noted that although these past experiences can be challenging to manage, they also “help tremendously” with the supervision process. Brian echoed this perspective, stating, “Some of the things that I bring in from my own experiences in the past ... help [me] to counsel or consult or teach what’s going on in the moment as well.”

In addition to bracketing these past experiences, the participants also discussed the need to monitor their levels of burnout. Several participants discussed how these supervision sessions were notably taxing. Amber addressed this concept when she stated, “I think that motivates me to make sure that on a personal level, when supervisors have to deal with [suicide], they’re taking care of themselves.” Charlotte also said, “As a supervisor, when I go through [suicide experiences] ... it’s exhausting. Because it takes it out of me emotionally as well. I know it takes it out of [the supervisees] but it takes it out of me.” Although most discussed personal reactions to suicide, one participant noted that she was not personally affected by her supervisee’s suicide experience. Allie reported, “It didn’t really impact me too much. It did give me the experience of having a supervisee who had gone through that. So now as a professor I think I’m able to use that experience in my teaching.”

Identifying Systemic Issues in Schools

Through their conversations with supervisees, the participants noticed several systemic issues in schools. One common problem was that the supervisees’ schools and school districts were unprepared to respond to student suicide events. Pam conveyed this idea by saying, “I feel like our counselors are far more prepared than the district is. A lot of the school districts are still in that denial mentality of like [suicide] does not happen here.” Likewise, Allie noted, “I feel like my supervisees are the ones that are preparing the school and not the other way around.” Many participants noticed that this lack of preparation frustrated supervisees, making the student suicide event even more difficult.

Further, some participants learned that their supervisees worked in schools and districts without appropriate policies in place for responding to suicide. When Tiffany discussed her supervisee’s school policy, she stated that the district had “absolutely nothing, zilch, zero.” Charlotte pointed out, “it’s amazing to me still the number of schools that don’t have those policies in place. They don’t have a written risk assessment or something that [the school counselors] can use.” Amber, who often worked with these districts, advised her supervisees, “wherever you go, make sure that you have procedures in place for threat assessments.”

Contrarily, some participants’ supervisees worked in districts where there were clear procedures for responding to suicides. These policies alleviated pressure from the supervisees and allowed the participants to focus more fully on individual supervision. Colleen noted, “Our students are placed in schools that we have a lot of trust with ... the school did what they were supposed to do ... it was adequately and thoroughly taken care of.” Megan also stated, “I’m able to focus more on my supervisees’ response, rather than trying to provide best practice in a crisis time.”

In addition to the systemic issues within schools and school districts, some participants also noticed problems with stigma related to suicide, especially among parents of their supervisee’s students.

“Unfortunately, the parent did not regard it as serious. So, [I worked] with the supervisee through how you navigate when the student is not getting the help that they need [from their parents],” said Megan. Discussing her supervisee’s experience, Allie said, “She would make recommendations to get outside counseling ... and there were a lot of parents who were like, yeah, we’re not going to do that. I know there was a lot of frustration.” These attitudes made the supervisees’ experiences more difficult, and in turn, required the participants to adjust their approach in supervision.

School Counseling Professional Identity Issues

Through these experiences, participants began to uncover several professional identity issues within the school counseling profession. First, participants noted that their supervisees were working with student suicide more frequently. Pam stated, “I have almost 30 [supervisees with student suicide experiences] each semester as of late.” Colleen stated, “I had so many students who [were] in their elementary school sites and kept talking about doing suicide risk assessments.” In response to this growing need, Charlotte discussed that she began prioritizing suicide risk assessment training with her supervisees. She said, “I start with suicide and suicide risk assessment. What that looks like, actions to take, consulting ... because my experience has been it’s going to happen within the first month, almost, if it’s not the first week.”

Participants also noted that there appears to be confusion among school counselors about their role in suicide assessment procedures and helping their school navigate the aftermath of suicide. Brian stated, “As school counselors, we have a tendency to be afraid of very difficult situations like suicide assessments. I chose at some point to say no, we have to change that perspective.” Tiffany said, “there seems to be quite a bit of role confusion related to, what am I allowed to do, versus what am I supposed to do, versus what do I want to do.”

These experiences left the participants believing that more clinical supervision is needed for school

counselors and SCITs. “This student continued to receive support through [university] supervision ... if he had graduated, and this was his first experience, he would only have his team and not a supervisor to call. Which is a gap in the school counseling profession,” said Donna. Colleen also suggested this issue when she stated, “The supervisor is obviously very important ... there’s a lot of students who graduate, never do anything, and they go out in the field. Then, we have all these people who are scared of [suicide assessment]. It worries me.”



Discussion

The purpose of this study was to explore the experiences of counselor supervisors when their school counseling supervisees were exposed to a student suicide event. Student suicide continues to be a primary issue for school counseling supervisees and supervisors alike. The participants in this study discussed how their school counseling supervisees experienced guilt, fear, and panic when they encountered student suicide. This finding concurs with several other studies (Gibbons et al., 2019; McAdams & Foster, 2002; Stickl Haugen et al., 2021; Wilschke & Crepeau-Hobson, 2024) and demonstrates the impact of suicide on school counselors.

In supervision sessions, the participants shifted into a caregiver role, allowing supervisees to process these emotions. This finding is novel when considered in the context of Bernard’s (1997) discrimination model of supervision. Although counseling is one of the supervisory roles in this model, this role is limited to interventions that help the supervisee reflect during a critical moment in case conceptualization (Bernard & Goodyear, 2019). Our finding differs from this role in that the supervisor acted more as a counselor, assisting the supervisee in processing the emotional content experiences. This finding suggests that the supervisee–supervisor relationship may become more personal, shifting closer to a counselor–client relationship. McKibben and colleagues (2023)

concluded that close bonds between clinical supervisors and their supervisees can form through the lifespan of the supervisory relationship. It is possible that the nature and closeness of these bonds could explain why the participants assumed caregiver roles.

In line with previous literature (Finlayson & Graetz Simmonds, 2016; Sherba et al., 2019), our participants noted that their school counseling supervisees questioned their skills and even considered leaving the counseling profession after a student suicide. In a parallel process, the participants themselves questioned their self-efficacy as supervisors. This finding suggests that school counselor supervisors may not be adequately prepared to assist their supervisees during a student suicide event. Our finding supports the argument for counselor education and supervision programs to incorporate more supervision training that is specific to school counseling and educational settings (Bledsoe et al., 2021).

While our participants listened to their supervisees' stories, they were often reminded of their experiences of suicide while working as counselors. These memories unearthed old emotions and unfinished business from their past professional lives. As a result, they engaged more intentionally in bracketing. This finding echoes a recent finding that student suicide exposures can cause trauma-like symptoms to school counselors (Stickl Haugen et al., 2023). Although our participants were not working directly with the suicidal student, they expressed feelings at times that mirrored secondary trauma. These participants may still be impacted by their own exposures to suicide.

In addition to these supervisory issues, participants noticed issues that are distinct to school systems. Notably, some school districts appeared to be unprepared to manage suicide-related crises, and others lacked necessary suicide-related policies. Districts that are unsuccessful at implementing these protocols are less able to connect suicidal students to necessary resources (Stein et al., 2010), which may further endanger suicidal youth. Conversely, the participants who supervised school counselors in well-prepared districts saw many

advantages and resources in place for students at those schools. This finding draws similarities to previous research that found that school districts with higher rates of implementation of suicide protocols were better able to effectively respond to at-risk students (Stein et al., 2010).

Although the participants noted that suicide related crises seem to be happening in schools more frequently, their supervisees continue to be unsure of their role in suicide assessment, intervention, and postvention. Some of the participants' supervisees dealt with conflicting messages from their school personnel. This finding is congruent with previous literature that found that principals and teachers do not understand the role of school counselors or hold views that conflict with school counselors (Havlik et al., 2019; Mau et al., 2016). This finding also supports the recent argument that the counselor identity needs to be more firmly planted within school counselors during their graduate training (Gibson et al., 2022).

Many participants also noted the lack of clinical supervision available for school counselors and recommended increased utilization of supervision. The need for more supervision opportunities for early career school counselors has been broadly recommended in the literature (Becnel et al., 2021; Bledsoe et al., 2021; Dollarhide & Miller, 2006; Wachter et al., 2008; Wachter Morris & Gallo, 2022). This recommendation is essential for school counselors because most only receive administrative supervision after graduate school (Havlik et al., 2019).

Implications for Counselor Educators and Supervisors

This study presents several important implications. First, more specific training and preparation is needed for counselor supervisors working with counselors in educational settings. Specifically, counselor supervisors must be prepared to guide school counselors through student suicide experiences because school counselors are often exposed to youth suicide. Even as youth suicide becomes more common and school counselors

appear to work with suicidal youth earlier in their careers, the supervisors in this study felt unprepared to guide their supervisees through these experiences. Counselor education programs must consider the specific needs of supervisors working with school counselors.

Additionally, this study demonstrates the need for more advocacy for schools to adopt policies, procedures, and protocols related to suicide. Supervisees who worked in schools without adequate preparation for student suicide felt unsupported and experienced more distress. In turn, supervisors had to support the emotional needs of supervisees rather than their clinical developmental needs. To address this issue, counselor educators and supervisors should work with schools and education departments to ensure that schools have the necessary policies and procedures in place. Implementing these protocols are in the interest of the schools, the school counselors, and the school counselor supervisors, as these measures can help ensure that school counselors are retained in their districts and that supervisors can focus on the development of adequate clinical skills among school counselors.

Similarly, counselor educators and supervisors need to advocate for clear, unified messaging on the school counselor's role in youth suicide. School counselors will likely work with suicidal youth (Stickl Haugen et al., 2021), so suicide-related responsibilities will continue to be a part of school counseling. When school counselors receive confusing and often conflicting messages on this role, they may not respond effectively to suicidal students, endangering youth. Leaders of school counseling programs, school districts, and professional school counseling organizations must agree on the vital role that school counselors play in protecting youth from suicide and sufficiently distribute that unified messaging.

Finally, this study demonstrates the need for more supervision opportunities among school counselors, echoing Evans Zalewski and colleagues' (2024) position. Many school counselors who are exposed to suicide are not adequately prepared to respond (Becnel et al.,

2021). Further, supervision is often not required for school counseling licensure or certification, so many do not receive supervision after they complete their entry-level school counseling degrees. Supervision can support the development of appropriate suicide skills for school counselors and enhance their ability to navigate these potentially impactful suicide events. If clinical supervision is not feasible, school counselors could engage in peer supervision models.

Limitations and Recommendations for the Future

This study used a single, hour-long semi-structured interview for each participant. Future studies could be strengthened by using multiple interviews over time or by utilizing a focus group in addition to the interviews. This study did not differentiate between school counselor supervisors who exclusively supervised SCITs, those who supervised professional school counselors, and those who supervised a blend of the two. Future studies may consider focusing on distinct groups to see if there is a difference between their experiences. Some characteristics about the participants, such as the number of supervisees with student suicide experiences, were not collected. Future studies could collect and analyze this data to further differentiate the experiences of school counselor supervisors. In addition, our participants supervised school counselors and SCITs who were exposed to a range of student suicide experiences (i.e., deaths by suicide, suicide attempts, and suicidal ideation). Although our study found common themes across these experiences, future studies could explore experiences within each type of student suicide event to scan for any differences. While this study was primarily focused on supervisors' experiences, future studies may consider observing supervisees' experiences to confirm or differ from these findings.

Conclusion

Youth suicide is a prominent issue for school counselors. As this study demonstrates, the impact of suicide permeates communities deeply, even affecting the supervisors of school counselors who are exposed to suicide. As school counselors and SCITs continue to experience suicide early in their careers, counselor supervisors must be prepared to support their needs.

References

- Allen, M., Burt, K., Bryan, E., Carter, D., Orsi, R., & Durkan, L. (2002). School counselors' preparation for and participation in crisis intervention. *Professional School Counseling, 6*(2), 96–102.
- Becnel, A. T., Range, L., & Remley, T. P. (2021). School counselors' exposure to student suicide, suicide assessment self-efficacy, and workplace anxiety: Implications for training, practice, and research. *The Professional Counselor, 11*(3), 327–339. <http://doi.org/10.15241/atb.11.3.327>
- Bernard, J. M. (1997). The discrimination model. In C. E. Watkins, Jr. (Ed.), *Handbook of Psychotherapy Supervision* (pp. 310–327). Wiley.
- Bernard, J., & Goodyear, R. (2019). *Fundamentals of clinical supervision* (6th ed.). Pearson.
- Bettters-Bubon, J., Goodman-Scott, E., & Bamgbose, O. (2021). School counselor educators' reactions to changes in the profession: Implications for policy, evaluation, and preparation. *Journal of School-Based Counseling Policy and Evaluation, 3*(2), 40–50. <https://doi.org/https://doi.org/10.25774/gkr1-j228>
- Bledsoe, K. G., Burnham, J. J., Cook, R. M., Clark, M., & Webb, A. L. (2021). A phenomenological study of early career school counselor clinical supervision experiences. *Professional School Counseling, 25*(1). <https://doi.org/10.1177/2156759X21997143>
- Bledsoe, K. G., Logan-McKibben, S., McKibben, W. B., & Cook, R. M. (2018). A content analysis of school counseling supervision. *Professional School Counseling, 22*(1). <https://doi.org/10.1177/2156759X19838454>
- Brown, C. H., Olivárez, A., Jr., & DeKruyf, L. (2017). The impact of the school counselor supervision model on the self-efficacy of school counselor site supervisors. *Professional School Counseling, 21*(1). <https://doi.org/10.5330/1096-2409-21.1.152>
- Carpenter, S. X. (2018). *How school counselors cope with student suicide: A qualitative study* [Unpublished doctoral dissertation]. University of Missouri–Saint Louis.
- Cervoni, A., & DeLucia-Waack, J. (2011). Role conflict and ambiguity as predictors of job satisfaction in high school counselors. *Journal of School Counseling, 9*(1). <https://jsc.montana.edu/articles/v9n1.pdf>
- Centers for Disease Control and Prevention. (2023). National vital statistics system, mortality 2018–2021. <http://wonder.cdc.gov/ucd-icd10-expanded.html>
- Chandler, J. W., Burnham, J. J., Riechel, M.E.K., Dahir, C. A., Stone, C. B., Oliver, D., Davis, A., & Bledsoe, K. G. (2018). Assessing the counseling and non-counseling roles of school counselors. *Journal of School Counseling, 16*(7). <https://files.eric.ed.gov/fulltext/EJ1182095.pdf>
- Christianson, C. L., & Everall, R. D. (2008). Constructing bridges of support: School counselors' experiences of student suicide. *Canadian Journal of Counseling, 42*, 209–221.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry & research design: Choosing among five approaches* (4th edition.). Sage.
- Curtin, S., & Garnett, M. (2023). *Suicide and homicide death rates among youth and young adults aged 10–24: United States, 2001–2021*. National Center for Health Statistics Data Brief, No. 471. <https://dx.doi.org/10.15620/cdc:128423>
- Dollarhide, C. T., & Miller, G. M. (2006). Supervision for preparation and practice of school counselors: Pathways to excellence. *Counselor Education and Supervision, 45*, 242–252. <https://doi.org/10.1002/j.1556-6978.2006.tb00001.x>
- Dupre, M., Echterling, L. G., Meixner, C., Anderson, R., & Kielty, M. (2014). Supervision experiences of professional counselors providing crisis counseling. *Counselor Education and Supervision, 53*, 82–96. <https://doi.org/10.1002/j.1556-6978.2014.00050.x>
- Evans Zalewski, S., Xiong, M., & Gilbert, R. (2024). The argument for clinical supervision for early career school counselors. *Journal of Counselor Preparation and Supervision, 18*(3), Article 3. <https://doi.org/10.70013/995mmjsb>
- Finlayson, M., & Graetz Simmonds, J. (2016). Impact of client suicide on psychologists in Australia. *Australian Psychologist, 53*, 23–32. <https://doi.org/10.1111/ap.12240>
- Gallo, L. L. (2018). The relationship between high school counselors' self-efficacy and conducting suicide risk assessments. *Journal of Child and Adolescent Counseling, 4*(3), 209–225. <https://doi.org/10.1080/23727810.2017.1422646>
- Gallo, L., & Wachter Morris, C. A. (2022). Suicide intervention in schools: If not school counselors, then who? *Teaching and Supervision in Counseling, 4*(2), Article 6. <https://doi.org/10.7290/tsc043z3v>
- Gaylor, E., Krause, K., Welder, L. E., Cooper, A., Ashley, C., Mack, K., Crosby, A., Trinh, E., Ivey-Stephenson, A., & Whittle, L. (2023). Suicidal thoughts and behaviors among high school students — Youth risk behavior survey, United States, 2021. *Morbidity and Mortality Weekly Report, Supplements 72*(1), 45–54. <http://doi.org/10.15585/mmwr.su7201a6>
- Gibbons, R., Brand, F., Carbonnier, A., Croft, A., Lascelles, K., Wolfart, G., & Hawton, K. (2019). Effects of patient suicide on psychiatrists: Survey of experiences and support required. *BJPsych Bulletin, 43*, 236–241. <https://doi.org/10.1192/bjb.2019.26>
- Gibson, D. (2022). Validating school counselor professional identity: Response to “Suicide intervention in schools.” *Teaching and Supervision in Counseling, 4*(2), Article 8. <https://doi.org/10.7290/tsc04edkk>
- Greenberg, D., & Shefler, G. (2014). Patient suicide. *Israel Journal of Psychiatry & Related Sciences, 51*(3), 193–198.
- Havlik, S., Ciarletta, M., & Crawford, E. (2019). “If we don’t define our roles, someone else will”: Professional advocacy in school counseling. *Professional School Counseling, 22*, 1–11. <https://journals.sagepub.com/doi/pdf/10.1177/2156759X19848331>

- Hays, D. G., & Singh, A. A. (2012). *Qualitative inquiry in clinical and educational settings*. Guilford.
- Husserl, E. (1970). *Logical investigations*. (J. N. Findlay, Trans.). Humanities.
- Jencius, M. (2019). CESNET-L, Counselor Education and Supervision Network listserv. <http://www.cesnet.online>
- Jorgensen, M. F., Bender, S., & McCutchen, A. (2021). "I'm haunted by it": Experiences of licensed counselors who had a client die by suicide. *Journal of Counselor Leadership and Advocacy*, 8(2), 100–115. <https://doi.org/10.1080/2326716X.2021.1916790>
- Lambie, G. W., Stickl Haugen, J., Borland, J. R., & Campbell, L. O. (2019). Who took "counseling" out of the role of professional school counselors in the United States? *Journal of School-Based Counseling Policy and Evaluation*, 1(3), 51–61. <https://doi.org/10.25774/7kjb-bt85>
- Levitt, H. M., Motulsky, S. L., Wertz, F. J., Morrow, S. L., & Ponterotto, J. G. (2017). Recommendations for designing and reviewing qualitative research in psychology: Promoting methodological integrity. *Qualitative Psychology*, 4(1), 2–22. <https://doi.org/10.1037/qup0000082>
- Levkovich, I., & Vigdor, I. (2021). How school counsellors cope with suicide attempts among adolescents — A qualitative study in Israel. *Journal of Psychologists and Counsellors in Schools*, 31(1), 63–75. <https://doi.org/10.1017/jgc.2020.14>
- Levy, I. P., & Lemberger-Truelove, M. E. (2021). Educator–counselor: A nondual identity for school counselors. *Professional School Counseling*, 24(1). <https://doi.org/10.1177/2156759X211007630>
- Levy, R. L., Koehler, A. N., & Hunt, Q. A. (2019). A phenomenological investigation of therapists' experiences when working with suicide. *Journal of Feminist Family Therapy: An International Forum*, 31(4), 147–164. <https://doi.org/10.1080/08952833.2019.1603922>
- Luke, M., & Bernard, J. M. (2006). The school counseling supervision model: An extension of the discrimination model. *Counselor Education and Supervision*, 45(4), 282–295. <https://doi.org/10.1002/j.1556-6978.2006.tb00004.x>
- Maples, M. F., Packman, J., Abney, P., Daugherty, R. F., Casey, J. A., & Pirtle, L. (2005). Suicide by teenagers in middle school: A postvention team approach. *Journal of Counseling & Development*, 83(4), 397–405. <https://doi.org/10.1002/j.1556-6678.2005.tb00361.x>
- Mau, W. J., Li, J. L., & Hoetmer, K. (2016). Transforming high school counseling: Counselors' roles, practices, and expectations for students' success. *Administrative Issues Journal: Connecting Education, Practice and Research*, 6(2), 83–95. <https://files.eric.ed.gov/fulltext/EJ1137537.pdf>
- McAdams, C. R., III., & Foster, V. A. (2002). An assessment of resources for counselor coping and recovery in the aftermath of client suicide. *Journal of Humanistic Counseling, Education and Development*, 41(2), 232–242.
- McKibben, W. B., Lenz, A. S., & Sheperis, D. (2023). A meta-analysis of supervisee attachment style and the supervisory relationship. *Journal of Counseling & Development*, 101, 323–333. <https://doi.org/10.1002/jcad.12476>
- Mirick, R. G., & Berkowitz, L. (2023). School-based postvention services: Exploring the perspectives of students. *Children & Schools*, 45(4), 233–242. <https://doi.org/10.1093/cs/cdad020>
- Monahan, K. L. (2018). Administrative supervision: Underdefined (and dangerous?) territory. *Communique*, 47(4).
- Moustakas, C. (1994). *Phenomenological research methods*. Sage.
- Nichols, S. L. (2018). *A phenomenological study of school counselors' experiences following student suicide* [Unpublished doctoral dissertation]. Liberty University.
- Prosek, E. A., & Gibson, D. M. (2021). Promoting rigorous research by examining lived experiences: A review of four qualitative traditions. *Journal of Counseling & Development*, 99(2), 167–177. <https://doi.org/10.1002/jcad.12364>
- Schmidt, R. C. (2016). Mental health practitioners' perceived levels of preparedness, levels of confidence and methods used in the assessment of youth suicide risk. *The Professional Counselor*, 6(1), 76–88. <https://doi.org/10.15241/rs.6.1.76>
- Sherba, R. T., Linley, J. V., Cox, K. A., & Gersper, B. E. (2019). Impact of client suicide on social workers and counselors. *Social Work in Mental Health*, 17(3), 279–301. <https://doi.org/10.1080/15332985.2018.1550028>
- Stein, B., Kataoka, S., Hamilton, A. B., Schultz, D., Ryan, G., Vona, P., & Wong, M. (2010). School personnel perspectives on their school's implementation of a school-based suicide prevention program. *The Journal of Behavioral Health Services & Research*, 37(3), 338–349. <https://doi.org/10.1007/s11414-009-9174-2>
- Stickl Haugen, J., Waalkes, P. L., & Lambie, G. W. (2021). A national survey of school counselors' experiences with student death by suicide. *Professional School Counseling*, 25(1). <https://doi.org/10.1177/2156759X21993804>
- Stickl Haugen, J., Waalkes, P. L., & Swindle, P. (2023). "It's like losing a family member": School counselors experience with student suicide. *Journal of Counseling & Development*, 101, 449–460. <https://doi.org/10.1002/jcad.12483>
- Stone, C. (2022). School counselors' vital role in suicide intervention: A response to Gallo and Wachter Morris. *Teaching and Supervision in Counseling*, 4(2), Article 7. <https://doi.org/10.7290/tsc04n2mz>
- Substance Abuse and Mental Health Services Administration. (2020). *Key substance use and mental health indicators in the United States: Results from the 2019 national survey on drug use and health*. HHS Publication No. PEP20-07-01-001, NSDUH Series H-55. <https://www.samhsa.gov/data/sites/default/files/reports/rpt29393/2019NSDUHFFRPDFWHTML/2019NSDUHFFR1PDFW090120.pdf>
- Tang, A. (2020). The impact of school counseling supervision on practicing school counselors' self-efficacy in building a comprehensive school counseling program. *Professional School Counseling*, 23(1). <https://doi.org/10.1177/2156759X20947723>
- Thomyangkoon, P., & Leenars, A. (2008). Impact of death by suicide of patients on Thai psychiatrists. *Suicide & Life-Threatening Behavior*, 38(6), 728–740. <https://doi.org/10.1521/suli.2008.38.6.728>
- Wachter, C. A., Barrio Minton, C. A., & Clemens, E. V. (2008). Crisis-specific peer supervision of school counselors: The PSAEF Model. *Journal of Professional Counseling: Practice, Theory & Research*, 36(2), 13–24. <https://doi.org/10.1080/15566382.2008.12033846>
- Wachter Morris, C. A., & Gallo, L. (2022). School counselor suicide response: A final rejoinder. *Teaching and Supervision in Counseling*, 4(2), Article 11. <https://doi.org/10.7290/tsc04w4be>
- Wagner, N. J., Grunhaus, C.M.L., & Tuazon, V. E. (2020). Agency responses to counselor survivors of client suicide. *The Professional Counselor*, 10(2), 251–265. <https://doi.org/10.15241/njw.10.2.251>

- Watkinson, J. S., Goodman-Scott, E. C., Martin, I., & Biles, K. (2018). Counselor educators' experiences preparing preservice school counselors: A phenomenological study. *Counselor Education and Supervision*, 57(3), 178–193. <https://doi.org/10.1002/ceas.12109>
- Wilschke, J., & Crepeau-Hobson, F. (2024). A phenomenological analysis of mental health providers' experience of client suicide. *Journal of Contemporary Psychotherapy: On the Cutting Edge of Modern Developments in Psychotherapy*, 54, 123–132. <https://doi.org/10.1007/s10879-023-09611-9>
- Wurst, F. M., Mueller, S., Petitjean, S., Euler, S., Thon, N., Wiesbeck, G., & Wolfersdorf, M. (2010). Patient suicide: A survey of therapists' reactions. *Suicide and Life-Threatening Behavior*, 40(4), 328–336. <https://doi.org/10.1521/suli.2010.40.4.328>

Author Information

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

The authors reported no financial support for the research, authorship, and/or publication of this article.

The authors have agreed to publish and distribute this article in *Teaching and Supervision in Counseling* as an open access article distributed

under the terms of the Creative Commons – Attribution License 4.0 International (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly attributed. The authors retain the copyright to this article.

Alexander T. Becnel, PhD, LCPC, NCC, is an assistant professor in the Department of Educational Leadership, Policy, and Human Development at North Carolina State University. His research interests are youth suicide, school counselor education, and counseling leadership issues. 

Joseph W. Pistorius, PhD, LPC-SA, NCC, is the director of a nonprofit counseling agency in New Orleans. His research interests are counselor supervision, termination, and legal and ethical issues related to counseling.

How to Cite this Article:

Becnel, A. T., & Pistorius, J. W. (2025). Supervising school counselors through student suicide. *Teaching and Supervision in Counseling*, 7(3), 1–13. <https://doi.org/10.7290/tsc07aqdi>