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Counselor Identity: A Critical Examination of
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Preparing School Counselors for Culturally Informed Suicide Response

Emily C. Brown

University of Missouri - St. Louis

Mary Edwin

University of Missouri - St. Louis

Lucy Purgason

Oregon State University - Cascades

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Preparing School Counselors for Culturally Informed Suicide Response

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Emily C. Brown , Mary Edwin , Lucy Purgason 

Abstract

The purpose of this article is to provide school counselor educators with strategies to effectively prepare school counselors to implement culturally responsive suicide intervention in their roles as educator-counselors. Informed by two theoretical models, the Attitudinal Components of Professional Development (Evans, 2002) and the Cultural Model of Suicide (Chu et al., 2010), the authors share strategies for building self-awareness, teaching about culturally responsive practices, using case studies, and delivering course-specific instruction in multiple classes: ethics, assessment, lifespan development, foundations of school counseling, and clinical courses. The provided strategies help school counselor educators promote reflection, increase knowledge, and enhance skill development to leverage the counselor and educator identity of school counselors to engage in culturally responsive suicide prevention and intervention work.

Significance to the Public

This article provides strategies that school counselor educators can use to intentionally train school counselors for culturally informed suicide response. School counselors need awareness, knowledge, and skills for suicide response in their role as educator-counselor to address the mental health needs of culturally diverse youth.

Keywords: school counselor, suicide, culture, school counselor education

Youth suicide is a public health concern; suicide was the second leading cause of death among individuals between 10 and 18 years old in 2019 (Centers for Disease Control and Prevention [CDC], 2020). Additionally, data shows that youth of color and LGBTQ youth may be at higher risk of suicidality than their peers (CDC, 2020). Furthermore, the COVID-19 pandemic and focus on racial injustice in the United States due to the killing of Breonna Taylor and the murder of George Floyd in 2020 disproportionately impacted youth from racially minoritized communities; we are yet to see the full effect of these events on youth mental health. These statistics about suicidality among culturally diverse youth point to the need for mental health professionals to account for cultural identity and intersectionality in suicide response. The

purpose of this article is to provide school counselor educators (SCEs) with strategies to effectively prepare school counselors-in-training (SCITs) to implement culturally responsive suicide intervention in their roles as educator-counselors in school buildings.

Indeed, the U.S. Department of Health and Human Services Office of the Surgeon General and the National Action Alliance for Suicide Prevention (2012) called for enhanced training for “school counselors ... and others who are on the frontlines of suicide prevention” (p. 46) and “cultural competency training components specifically focused on ethnic/racial identity formation and LGBT identity development” (p. 47) for working with people with suicide risk. Despite these recommendations, there are reported gaps in suicide

Emily C. Brown and Mary Edwin, Department of Education Sciences and Professional Programs, University of Missouri–St. Louis; **Lucy Purgason**, College of Education, Oregon State University–Cascades. Correspondence concerning this article should be addressed to Emily C. Brown, Department of Education Sciences and Professional Programs, University of Missouri–St. Louis, 1 University Blvd. St. Louis, MO 63121 (email: brownemily@umsl.edu).

prevention and risk assessment training for school counselors (Becnel et al., 2021; Stickl Haugen et al., 2020). For example, Stickl Haugen et al. (2020) reported that nearly a quarter of school counselors reported no training in suicide risk assessment, and a third felt somewhat unprepared for crisis response and postvention. Furthermore, there is a limited focus in the scholarship on the bridge between culturally informed school counselor preparation and suicide prevention training. Nevertheless, cultural competency is necessary as school counselors work with youth with various cultural identities. The gap in suicide response training is further compounded by conflict within the field of school counselor education, as recent scholarship has contested the role of school counselors in providing suicide assessments ethically (Stone, 2021).

However, school counselors are educators and counselors (Levy & Lemberger-Truelove, 2021), and suicide prevention is a dimension of professional practice that calls upon both identities. In line with Gallo and Wachter Morris (2022), we contest that it is incumbent upon SCEs to prepare SCITs for adequate suicide assessment and prevention — which involves an integration of the educator-counselor identity and culturally responsive practices in suicide response training. Emphasizing this unified school counselor identity in school counseling training is critical, considering recent research that SCEs expressed confusion about the professional identity of school counselors (Betters-Bubon et al., 2021). Betters-Bubon et al. (2021) reported that SCEs expressed confusion about which identity to prioritize in school counseling training — educator or counselor. To effectively prepare SCITs to respond to suicidality in developmentally and culturally responsive ways, SCEs must adopt a unified school counselor identity in training.

Educator-Counselor Identity in Suicide Response

School counselors play a critical role in suicide prevention; they often lead crisis teams, provide

suicide screenings and referrals, and collaborate with educators and caregivers for suicide prevention (ASCA, 2022). To effectively respond to suicide, school counselors must embrace their educator-counselor identity. This identity recognizes that school counselors are both educators and counselors and that these two roles are complementary. For example, school counselors leverage their educator identity in using data to inform practice (Wachter Morris et al., 2021) and teach students about suicide and mental health. They leverage their counselor identity when they build therapeutic relationships with students and respond to presenting student suicidality. Both counselor and educator identities are relevant in counselors' consultation with key stakeholders and in creating a supportive school climate. Levy and Lemberger-Truelove's (2021) argument that the two components of the educator-counselor identity are nonhierarchical and nondual is made clear in considering school counselors' roles in suicide response. Attempting to separate the educator identity from the counselor identity that school counselors hold can further impede SCEs' ability to effectively prepare SCITs to respond to youth suicidality. Wachter Morris et al. (2021) maintained that orienting school counselors as counseling professionals situated in an educational context is necessary for crisis prevention in school.

Theoretical Models for Suicide Response Training

Two theoretical models guide our recommendations for SCEs to train SCITs to implement culturally responsive suicide prevention and postvention in schools while embracing the educator-counselor identity — the Attitudinal Components of Professional Development (Evans, 2002) and Cultural Model of Suicide (Chu et al., 2010).

Attitudinal Components of Professional Development

We posit that graduate training is the first encounter with professional development for all counselors-in-training. In graduate programs, SCITs receive the education and support required to foster their

development as professionals. The Attitudinal Components of Professional Development highlights the importance of attitude adjustment for effective professional development. Evans (2002) maintained that effective professional development constitutes two elements — attitudinal development and functional development. Attitudinal development refers to the process through which a professional's attitudes about their work are modified, and functional development involves developing new ways of working and incorporating new processes into practice to improve performance (Evans, 2002, 2008). According to Evans, focusing on functional development without focusing on changing attitudes and beliefs is destined for limited success. Indeed, focusing on teaching SCITs the technical aspects of culturally informed suicide intervention without fostering a belief in the vital role that culture plays in suicidality is hardly likely to be effective. Unlike functional development, attitudinal development represents a commitment to change that cannot be imposed on an individual. In training SCITs to implement culturally informed suicide interventions, SCEs must intentionally foster a change in SCITs' attitudes and beliefs about the impact of culture on suicidality.

Cultural Theory and Model of Suicide

The Cultural Theory and Model of Suicide (CTMS) focuses on the ways cultural factors influence suicide and the cultural meaning of suicide. Chu et al. (2010) maintain that culture influences (a) which stressors lead to suicidal behavior, (b) the meaning individuals assign to developing suicidal ideation, (c) individuals' tolerance for pain and suicidal plans or behavior, and (d) the ways people express suicidal thoughts, plans, and behaviors. CTMS focuses on suicidality for individuals from racially and sexually minoritized backgrounds and highlights the important role culture plays in youth suicidality. SCEs can leverage this framework in guiding how they discuss the intersections of culture and suicide in training SCITs. CTMS points to a need to focus on how individuals interpret various life events, the roles of social support (or

lack thereof), and how suicide risk behaviors all differ based on the child's cultural background.

Culturally Sensitive Suicide Response Within School Counselor Preparation

In the following sections, we share strategies for incorporating culturally responsive suicide assessment and intervention training within school counselor preparation while emphasizing the educator-counselor identity in the following courses: ethics, assessment, lifespan development, foundations of school counseling, and clinical courses. For each course, we share strategies for (a) building SCITs' self-awareness, (b) teaching about culturally responsive practices in suicide prevention, (c) using case studies that align with the course content and are developmentally appropriate, and (d) delivering course-specific instructional strategies.

Ethics

Building Self-Awareness

Critical aspects of school counselors' ability to practice ethically include understanding and adhering to both the American School Counselor Association's (ASCA; 2022) Ethical Standards for School Counselors and the ACA Code of Ethics (American Counseling Association [ACA], 2014). Ethical and professional standards around suicide response can help introduce how school counselors leverage their counselor identity in suicide response. Additionally, SCEs can share local, state, and national references to school counselors' role in suicide response, which can help establish suicide response, particularly educational suicide response, as a part of school counselors' professional identity. For example, in the state of Missouri, school counselors are expected to provide education to all teachers, administrators, and other adults in the school building about suicide screening and referral procedures. To foster self-awareness, instructors can engage students in discussions and reflections that assess how suicide has been discussed in their

various cultural spheres. Questions can include: *How does your culture typically communicate about suicide? Are there specific words or phrases that are used or avoided when discussing suicide? Are there cultural attributions or explanations for why individuals may engage in suicidal behavior? How does your culture's approach to suicide prevention and mental health support impact individuals' help-seeking behavior? Are there cultural barriers or stigmas that discourage individuals from seeking help for mental health concerns or suicidal thoughts?* Students can also review and discuss research or other media about the differences in how various cultures present suicidal ideation.

Culturally Responsive Practice

Several ASCA Ethical standards (e.g., A.1.d, A.1.h, A.3.a) and ACA Code of Ethics (e.g., A.2.c, B.1.a, E.5.b, E.9.a) highlight the importance of both culturally responsive school counseling practice with all students and the importance of conducting and communicating results from risk assessments to parents and guardians. The first step in building SCITs' knowledge around culturally responsive practices in the ethics course is to help students understand why accounting for culture in all counseling practices is ethical (e.g., ASCA Ethical Standard A.1.e) and the importance of multicultural competence in counseling practice. Then, SCEs can make a connection between ethical standards that address culture and the various roles school counselors play in suicide response as educators and counselors. Case studies are an effective way to engage students in conversation and reflection on ethical and culturally relevant suicide responses. The next section includes a case study educators can use in the ethics course.

Case Study Activity

Your school counselor colleague, Alex, recently conducted a suicide screening with a student from a low-income family background. While Alex determined that the student was not at immediate risk for suicide, she decided not to conduct a full assessment per district protocol and did not notify

the student's parents about the initial screening. Alex explained her decision by stating that the student's parents work multiple jobs and are often unavailable by phone, stating, "*They never answer anyway, there was no point calling them*" and that as an Asian family, they "*don't believe in suicide*" so the parents either wouldn't believe her or the student wouldn't attempt suicide. Alex also expressed concerns that contacting the parents would only cause them unnecessary worry and stress, knowing that the student's family dynamics and socioeconomic status might make it difficult for them to access mental health resources to help the student.

Case Study Discussion. After introducing this case study, provide these discussion questions: What ethical dilemma(s) do you notice in this situation? What cultural factors might be influencing Alex's decision making? What are your next steps? How would you respond to Alex or handle this situation? Do you agree with Alex's reasoning for not contacting the family? SCEs can help SCITs consider the importance of following school protocols and ethical guidelines around suicide response with minors, even in challenging situations. SCITs may need support in identifying Alex's potential biases based on race and socioeconomic status (SES) and how those biases led her to behave unethically. Instructors should emphasize the importance of informing parents and guidance when screening or assessment is conducted with students. The *Eisel vs. Montgomery County BOE* (1991) case and ASCA Ethical Standard A.9.a can be used to highlight the court's stance on school counselors' duties in notifying parents and counselors' professional responsibilities. In this situation, the counselor can leverage their *educator* identity in teaching Alex about unconscious bias, ethical suicide response, and strategies for communicating with parents. The *counselor* identity is leveraged as the counselor navigates Alex's emotions during the conversation and considers their ethical responsibility to advocate for equitable and culturally sustaining interventions for students (ASCA Standard A.1.j).

School Counselor Preparation

According to the ACA Code of Ethics (ACA, 2014), counselors are expected to “engage in a carefully considered ethical decision-making process” when they are faced with an ethical dilemma. The Intercultural Model of Ethical Decision Making (IMDE; Luke et al., 2013) was developed for school counselors’ unique roles within K–12 schools, where intentional ethical decision making must account for value conflicts between the counselor, client, and the school system with awareness of cultural, religious, and worldview factors. SCEs can introduce the IMDE model to students within the presented case study and work through each step to address the ethical dilemmas. To prepare SCITs to engage in culturally relevant suicide response activities, the SCE, in collaboration with students, can create a comprehensive list of all the activities or steps the school counselor might take when responding to suicidal ideation. These steps can include talking to relevant students, talking to the classroom teacher, conducting a suicide screening, and so on. After compiling this list, students can be asked to identify the different ways culture shows up in each activity that the class listed. For example, in talking to the teacher, they can reflect on how the teacher’s cultural identities influence their perspective of the student. Then, students can consider what might happen if the school counselor fails to account for culture at each of the different steps to responding to identified suicidal ideation. This activity allows SCITs to note how culture is embedded in every activity school counselors engage in when responding to suicide. Finally, to emphasize the importance of culturally responsive practice, SCEs can ask students to identify every ethical standard that addresses culture in the ethics course — in both the ACA Codes and the ASCA Standards. At the end of this activity, SCEs can foster classroom discussion around why culturally responsive practice is an ethical obligation.

Assessment

Building Self-Awareness

Several CACREP (2023) foundational curriculum standards connect to culturally responsive suicide screening and assessment practices (e.g., 3.G.5, 3.G.10, 3.G.16–17). SCEs can help SCITs begin to build self-awareness for culturally responsive suicide assessment practices as they foster SCITs’ self-awareness through reflection and discussion. Asking questions such as “*What do you think about assessments?*” and “*Do you think assessments can be culturally responsive?*” can help SCITs reflect on their assumptions and beliefs about using assessments in counseling. SCITs need opportunities to think critically about how protocols are used in suicide screening and risk assessment in school settings and how assessment information is a component of holistic suicide screening and assessment. They need awareness of both the benefits and limitations of using assessments in suicide prevention. SCITs working with students in educational settings must also reflect on how information about student suicidality is shared with others (educator identity) and how much information is shared (counselor identity).

Culturally Responsive Practice

Building knowledge and skills for culturally responsive practice can include activities and discussions about assessment instruments and processes for school counselors. As SCEs introduce SCITs to commonly used suicide screening instruments (e.g., Ask Suicide-Screening Questions [ASQ; National Institute of Mental Health, 2023]; Columbia-Suicide Severity Rating Scale [C-SSRS; The Columbia Lighthouse Project, 2023]), they can examine the norming of these tools for diverse children and youth, including intersecting identities of age, disability, race, ethnicity, language, gender, sexual or affectional orientation. Additionally, SCITs can audit these assessments and identify potential gaps in how cultural identity and suicidality are considered. SCEs may ask SCITs to discuss how to supplement these tools with questions that explore cultural identities at different

developmental levels. These questions can include: *What is happening in your life right now? Do you feel supported by family and friends? Have you ever felt excluded based on how you look or who you like? Is there anything about you or in your life that family or friends do or would disapprove of?* These types of questions connect to some of the cultural risk factors for suicide identified by Chu et al. (2010) and can help explore minority stress, social discord, and idioms of distress. Finally, SCITs need to build knowledge and skills for culturally appropriate ways of sharing student suicide assessment results with administrators and families.

Case Study Activity

You are the school counselor for Maya, a Black transgender female high school junior (age 17) at your school. Maya lives with her mother (a physical therapist) and younger sister. Maya has a few close friends, although her best friend recently moved away, and she plays in the school marching band and loves music. Teachers describe her as creative, kind, and hardworking. Several teachers have expressed concerns to you as the school counselor about Maya's withdrawn and changed behavior over the past month. She has started wearing more long-sleeved shirts in warm weather, and a peer told a teacher she was cutting. Maya has a history of depression and suicidality and was sexually abused by a neighbor 8 years ago. As the school counselor, you've established a relationship with Maya during meetings for academic advising and postsecondary planning. Maya is not receiving other mental health treatment. Your school district policies require that parents are notified about any concerns for suicidality and administrators are notified if students need a suicide crisis team or hospital assessment.

Case Study Discussion. Provide the following discussion questions: *What do you notice about the student's risk factors and protective factors for suicide from a cultural lens? Discuss your approach and process for suicide screening and assessment in this case. What would you do to ensure your suicide assessment is culturally responsive? What would you pay attention to during*

the assessment to determine next steps? Discuss processes for referrals and consultation with family and/or other educators. SCEs guiding this discussion help SCITs consider connections between the student's cultural identities and both risk and protective factors. These factors can influence how the school counselor works with Maya and her mother. SCITs may need more support to conduct culturally relevant screenings; SCEs can use the discussion questions to support SCITs. SCEs help SCITs develop their *counselor* identity for conducting suicide assessments and collaborating with parents and their *educator* identity in following school district policies that require reporting suicide data to administrators. Ultimately, SCEs help SCITs consider ways to respect student and family privacy while fulfilling obligations for reporting.

School Counselor Preparation

SCEs should consult with colleagues teaching the assessment course to keep them informed about state and national school counselor recommendations and tools for suicide assessment. For example, other instructors may not be aware of the Information-Gathering Tool: Suicide Concern from ASCA (2023). Preparation for the use of suicide assessment tools can include having SCITs read the ASQ, C-SSRS, or Information-Gathering Tool aloud to a peer before spending time processing reactions and triggers. While such practices may trigger SCITs, this needs to be debriefed within the safety of the classroom before being used with students in schools. SCEs may role-play using these tools, portraying the youth while SCITs act as the school counselor. Role-playing delivering assessment results to parents and caregivers with diverse cultural identities can also further school counselor preparation.

Lifespan Development

Building Self-Awareness

Foundational CACREP curriculum standards covered in the lifespan development course connected to culturally informed suicide prevention

include 3.C.11 and 3.C.13. Building self-awareness about suicidality for diverse children and youth is a dimension of helping SCITs consider “systemic, cultural, and environmental factors that affect lifespan development, functioning, behavior, resilience, and overall wellness” (3.C.11, CACREP, 2023). SCEs can ask SCITs to reflect on their understanding and knowledge of suicide across their own lifespan development and ecological systems. For example, “How has suicide been viewed and/or discussed in your family, community, school, religious institutions, and society across your lifespan?” While teaching SCITs about frameworks for understanding factors that affect development, functioning, and resilience (e.g., Adverse Childhood Experiences [ACEs]; Felitti et al., 1998), Adverse Community Experiences (Ellis & Dietz, 2017), and social determinants of health (SDOH; Braveman et al., 2011), SCEs can include discussions about how these models aid awareness of cultural stressors and assets. SCITs should be able to consider how systems of oppression and discrimination are a component of understanding student suicidality and presenting behaviors. SCITs need to develop awareness of suicide within a broader systemic context rather than as individually situated to work with stakeholders for suicide prevention.

Culturally Responsive Practice

As SCITs develop knowledge and skills for culturally responsive practice, the aforementioned CTMS (Chu et al., 2010) can be introduced to SCITs to aid in understanding the impact of culture on suicidality. Additionally, SCEs can then help SCITs build skills for fostering resilience and wellness for culturally diverse youth as a component of suicide prevention and response. SCITs can examine various models of resilience and discuss the cultural responsiveness of these models. This can help SCITs begin to integrate cultural awareness and knowledge with resilience frameworks for culturally responsive practice with diverse students.

Case Study Activity

You are working as a school counselor at a rural middle school where the racial/ethnic identity of your student body includes about 20% of students who are Native American. Many of these students at your school have exposure to traumatic experiences, including intergenerational and racial trauma and oppression. As the school counselor, you recognize there are disproportionate rates of mental health concerns, including suicidality, among the Native American students. Teachers in the school are frequently coming to you for help in understanding and supporting students with emotional dysregulation and mental health needs.

Case Study Discussion. Provide the following discussion questions: *What are some of the environmental and cultural factors that may be affecting the development and behaviors of students in this school? How do each of the ACEs, Adverse Community Experiences, and SDOH frameworks help you understand student needs, including suicidality? What are potential cultural assets for these students? How does understanding cultural assets influence how you could support the teachers in the school? Based on these responses, what would be some of your priorities as a counselor supporting students and the school?* SCEs guiding this case study discussion can help SCITs recognize the systemic influences on youth mental health, particularly connections between emotional dysregulation and trauma while applying theories and models. SCITs can build awareness that supports their understanding of the ties between oppression and a sense of hopelessness. This case study discussion helps SCITs leverage their *counselor* identity in building conceptualization skills of culturally informed suicidality and their *educator* identity as they consider how to help teachers better recognize and understand these connections.

School Counselor Preparation

A critical task for SCEs teaching lifespan development is helping SCITs conceptualize client needs within developmental, cultural, systemic, and

ecological frameworks. One instructional strategy for this is to have SCIT sort a list of adolescent suicide risk factors (e.g., violence victimization, lack of access to mental health care, bullying, financial problems, substance use, isolation, death of a family member) into the most salient category for understanding each factor: cultural, environmental, or systemic. We posit that many risk factors would fit within all of these categories, and this activity could help students see the interconnectedness of suicide risk factors beyond the individual client. Additionally, we recommend supplemental readings such as Opara et al. (2020) or Wigglesworth et al. (2022) to help students better understand the connections between systems of oppression and suicidality.

Foundations of School Counseling

Building Self-Awareness

A consideration of how knowledge and skills in systems-level intervention delivery via a multitiered system of support (MTSS; *educator* identity) compliments micro-level counseling skill training (e.g., building rapport, conducting individual assessment, goal setting, and intervention selection; *counselor* identity) helps underscore the unique assets school counselors have within the counselor and educator identities to conduct suicide assessment and response. Within this course, SCITs learn how to use data to identify, assess, and deliver a culturally informed response to student mental health needs and an emphasis can be placed on the unique ability school counselors have to fulfill suicide prevention, intervention, and postvention work. Several applicable CACREP (2023) specialized practice area standards addressed include 5.H.6, 5.H.8–11, 5.H.13–14, and 5.H.19.

A key step in helping SCITs understand actions associated with both educator and counselor roles is to have them brainstorm how they have embodied the role of educator and counselor in previous helping-related experiences. An example prompt could include the following: *“Think of a time when a friend came to you with a problem. Brainstorm all the ways that you offered support to this person. If*

you can, remember specific things you did or said. Once you have constructed this list, go through and identify which of these actions align with a counselor role (e.g., providing emotional support, active listening) and which align with an educator role (e.g., sharing information related to the topic).” To facilitate this discussion, a Venn diagram can be used to illustrate the actions falling uniquely under the counselor and educator roles. Some of the actions may not be discrete and SCEs can connect school counselor actions related to suicide assessment and response, brainstorming ways that school counselors are involved in suicide prevention (e.g., delivering school counseling curriculum lessons on coping skills) and intervention (conducting a suicide screener) and identify how these actions fall under the educator, counselor, or dual roles.

Culturally Responsive Practice

Increasingly, PK–12 students, and especially students experiencing marginalization, have unmet mental health needs (Murthy, 2022). SCITs need to identify specific Tier 1, Tier 2, and Tier 3 interventions that can promote student well-being and facilitate positive identity development that is crucial to engaging in suicide prevention work (Goodman-Scott et al., 2022). In addition, SCITs can gain knowledge and skills in using data to advance equity in suicide assessment and response. For example, SCITs can learn how to notice trends in the number, frequency, and student demographic factors of the suicide assessments conducted. Disaggregating suicide data (i.e., assessments, referrals, attempts, and completions) can help identify the students who are more at risk and the potential contributing systemic factors (Wachter Morris et al., 2021). Then, SCITs can learn how to employ this data alongside other schoolwide data (e.g., school climate data on safety and belonging) to identify and deliver targeted school counseling interventions.

SCITs need to understand the importance of consulting with culturally diverse families and seeking out the expertise of family members when implementing tiered interventions (Goodman-Scott

et al., 2022). It is important for SCITs to be mindful that cultural values related to privacy might impact communication with families regarding these topics and that stigma can exist regarding talking about mental health concerns with individuals outside of the family. Increased transparency from the school counselor is important to build trust and increase understanding about the school counselor's role. It is imperative that SCITs be mindful of assumptions they may have when communicating with family members and bring intentionality to maintaining a strengths-based approach (Rhodes, 2023).

Case Study Activity

Sasha is a first-year elementary school counselor who recently met with a new student, Ali, a second-grade teacher referral. Ali and his mom are newcomer refugees from Syria. Ali's mom expressed hopefulness that this would be a fresh start for her and Ali, sharing gratitude that there is a mosque nearby, which might provide an opportunity for them to establish connections with the local Muslim community. Unfortunately, Ali shared with Sasha that he is experiencing significant amounts of bullying. Since starting school, he had been called names and experienced students making derogatory comments about his religion. He reported a great deal of stress from these encounters and shared with Sasha that he "just wants to disappear." Upon learning this, Sasha conducted a suicide assessment with Ali. He also invited Ali to share more information about when, where, and how often the bullying incidents were occurring, offering a map of the school and asking Ali if he could mark areas where this was more likely to occur. From this activity, Sasha learned that many of the incidents were happening in the bathroom, where there was less adult supervision.

Case Study Discussion. Discussion questions to activate the *counselor* identity can include: *In this case, how might Ali's intersecting identities as a newcomer refugee practicing the Muslim faith contribute to systemic factors and social justice issues experienced by Ali that are important to consider in suicide assessment and response? How might Sasha use the information he learned from Ali*

to inform Tier 1, Tier 2, and Tier 3 interventions? Discussion questions that would promote reflection on the *educator* identity include: *Upon hearing about the bullying incidents, what school climate considerations might be necessary that would help prevent other students from experiencing this? What type of data might Sasha collect that would help inform school-wide, classroom curriculum interventions?* SCEs can remind SCITs that what is learned from students during Tier 3 individual sessions can help inform Tier 1 school-wide interventions. For instance, SCITs can be reminded that information shared by Ali related to bullying may point to a need to revisit the bullying prevention classroom curriculum to incorporate a greater consideration for identity-based bullying. In addition, it points to the need for greater supervision or bystander/upstander involvement in school areas where this is occurring.

School Counselor Preparation

SCITs can experience anxiety and uncertainty regarding their role in suicide prevention and response. Reminding SCITs that suicide response builds off the same tiered-delivery approach introduced in their school counselor training might help activate prior knowledge and skills. For example, SCEs can share additional readings like Goodman-Scott et al. (2022) and Wachter Morris et al. (2021) to underscore the value of data to advance equity in suicide prevention.

Practicum and Internship

Building Self-Awareness

SCEs should acknowledge that conducting suicide assessments is an anxiety-inducing process. Devoting time in supervision to discussing SCITs' readiness, experiences, and reactions to conducting suicide assessments provides avenues for peer support and key vicarious learning opportunities. Questions for increasing SCITs' awareness of feelings about conducting suicide assessments can include: *On a scale of 1–5, with 1 (not nervous) to 5 (extremely nervous), what number would you rate yourself when you think about conducting a suicide*

assessment with a PK–12 student? What contributed to your rating? For those that rated themselves a 1–4, what would increase that rating?

Culturally Responsive Practice

SCITs' responses to the previous questions are likely impacted by their cultural backgrounds and life experiences, especially as it relates to personal experiences of having a family member or loved one contemplate or die by suicide. In addition, factors such as the SCIT's religious and cultural beliefs regarding suicide can impact their comfort with conducting suicide assessments (Rhodes, 2023). SCITs can be reminded of culturally based models of suicide (i.e., the CTMS; Chu et al., 2010) and skills such as broaching. For example, SCITs can be reminded that before conducting a suicide assessment, it is important to utilize skills that contribute to rapport building, including broaching regarding racial, ethnic, and cultural differences, as the importance of broaching extends to children as well as adults (Day-Vines et al., 2020).

School Counselor Preparation

Developmentally scaffolding suicide assessment practice is critical to ensure that SCITs are prepared to conduct interviews and are able to remain calm and within an appropriate window of emotional tolerance. Scaffolding can involve having SCITs watch suicide assessment interviews and audit them for strengths and areas for improvement, along with identification of which aspects of culturally responsive practice are integrated. At the beginning of each term of practicum/internship, SCITs can partner and practice a suicide assessment interview with time devoted to processing the experience.

Internship can be an opportunity for SCITs to involve themselves in all aspects of culturally responsive suicide prevention, intervention, and postvention. For example, a culminating assignment during internship might involve students analyzing the demographic data of their school and developing a proposal for a school-wide or classroom prevention activity that integrates what they have learned across courses about culturally

responsive suicide best practices. In addition, SCITs can become familiar with transition services for students returning after hospitalization and can advocate for students in transition planning that builds on their counselor identity.



Conclusion

The current surge in suicide rates among youth, especially for LGBTQ+ youth and youth of color, necessitates school counselors to be trained and effective in suicide prevention, intervention, and response. Given their professional training as educator-counselors, school counselors are uniquely positioned to lead the way in advancing a school-based, culturally responsive suicide prevention and intervention approach. Informed by the Attitudinal Components of Professional Development (Evans, 2002) and the Cultural Model of Suicide (Chu et al., 2010), the course strategies shared can be used by SCEs to promote reflection, increase knowledge, and enhance skill development to leverage SCITs' identities as counselors and educators to engage in culturally responsive suicide prevention and intervention work.



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Emily C. Brown, PhD, LPC, RPT-S, NCC is an associate professor at the University of Missouri–St. Louis. Her research interests include counseling for children experiencing loss, crisis, and trauma, particularly suicidality. 

Mary Edwin, PhD, LPC, NCC, CCTP, is an assistant professor at the University of Missouri–St. Louis. Her research interests include career development across the lifespan and school counselor development. 

Lucy Purgason, PhD, LSC, ACS is an assistant professor at Oregon State University–Cascades. Her research interests include recognizing and harnessing the cultural strengths of students and their families. In addition, she also pursues scholarship related to mentoring and supervision, with a specific emphasis on relational-cultural approaches. 

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