

AN INTERNSHIP IN GUIDANCE AND COUNSELLING
AT MOUNT PEARL SENIOR HIGH

CENTRE FOR NEWFOUNDLAND STUDIES

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AN INTERNSHIP IN GUIDANCE AND COUNSELLING AT MOUNT PEARL
SENIOR HIGH

by

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An internship report submitted to the School of Graduate Studies in partial fulfilment of
the requirements for the degree of Master of Education

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Abstract

This report describes an internship at Mount Pearl Senior High School in Mount Pearl, NF., from April 14th to June 23rd, 1997. The report details the internship and a research component which were completed at the internship site. The goals of the internship included the development of individual and group counselling skills, development of psycho educational assessment skills and report writing, experience in the outside referral process, development of competence in consultation, an increase knowledge of career awareness, and to conduct research on the topic of youth suicide.

During the placement, the intern worked primarily with one Guidance Counsellor/Registered Psychologist and gained insight into the varied theoretical perspective utilized at the high school level. He had the opportunity to work with the Vice-Principal who is also a Registered Psychologist and former guidance counsellor at the school. There was also extensive opportunity to meet with and learn from members of outside agencies throughout the city.

Much of the intern's time was devoted to counselling students from fifteen to nineteen years of age. An equal amount of time was spent researching and working with suicidal individuals. The research component focused on students attitude, opinions and experiences with suicide and suicidal behaviours. This research resulted in the implementation of the "Youth Suicide Awareness Program." A discussion of this research is presented in Part II of this report.

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PART I

Internship Component

Introduction

As part of the requirement for the completion of a graduate degree in Educational Psychology, the university allows students to elect to complete a thesis, internship, project, or paper folio. To fulfil this component the researcher has chosen to participate in the internship. Through this experience, the researcher has had the opportunity to exercise professional responsibilities in the area of guidance and counselling within the high school setting. An organized series of activities has been supervised and a research report has been developed on an area of study conducted at the internship site. This research component was in the area of youth suicide, and has been conducted as part of the overall objectives of the internship, thus assuring a wide range of experiences and development for the researcher.

The internship route was chosen because of the personal and professional experience that it provided. The internship developed a better understanding of working at the high school setting and the role and demands faced by the school counsellor. The practical experience received while at the internship site helped bridge the gap between the practical and course work material of the Educational Psychology Program. It is also felt that the research selected is of importance to the age group of adolescents, the setting, the staff and the intern. Due to the fact that the career plans of this intern are centered around working with adolescents at the high school setting, it was important that this practical experience is gained. There is not only a strong interest in the area of

suicide by the intern, but a perceived need for research and education with this age group. As a result, the internship component has been selected.

The faculty supervisor, who assisted the intern throughout the internship, has been Dr. William Kennedy. Dr. Kennedy holds a doctoral degree in the area of counselling and is currently the faculty head of the Educational Psychology Program at Memorial University. Dr. Kennedy provided guidance and encouragement throughout the process by reviewing sections of the internship report and providing feedback to the intern.

The intern's on-site supervisor throughout the internship was Mrs. Michelle Short. Mrs. Short holds a master's degree in Educational Psychology and is a registered psychologist. Although she has only recently begun working at Mount Pearl Senior High School, she has seven years experience with the Avalon School Boards, both as a school counsellor and education psychologist. The intern has had the advantage of doing a practicum at Mount Pearl Senior High this past semester, and therefore has already worked with Mrs. Short. Thus, we had both become aware of our responsibilities and developed a working relationship. As the on-site supervisor, Mrs. Short provided the intern with the opportunity to meet internship objectives, as well as enhance the intern's growth and development as a competent member of the counselling profession. The intern also had the advantage of having worked with Mr. David Cooper at Mount Pearl Senior High. Until recently, Mr. Cooper held the school counsellor position at the school, but has recently been promoted to Vice Principal. He also holds a master's

degree in Educational Psychology and is a registered psychologist. Mr. Cooper was available to provide the intern with a great deal of support, advice, and feedback during the internship.

The internship report consists of two components. The first part is the placement component with a reflective, critical discussion of the values of the activities experienced by the intern in meeting the specific objectives identified in this proposal. The second section is the research component that has been developed throughout the internship. The focus is on the education of youth on the topic of suicide.

Description of the Internship Site

The site for the internship was at Mount Pearl Senior High School in Mount Pearl, Newfoundland. This school houses approximately 718 students within the 10-12 grade level, with a diverse staff of varying levels of experience. The total number of full and part-time staff at the school was 36. Although space was limited in the school, Mr. Cooper was able to provide the intern with a room for counselling and assessment purposes. Areas primarily identified where students require assistance, centered around anger, test-anxiety, addictions, school absenteeism, and self-esteem.

The counselling program at Mount Pearl Senior High School attempts to assist students in achieving optimal, personal, social, educational, and vocational development. The program also helps students develop the knowledge and skills necessary to maintain life long adjustments in a response to the changing society. The program encourages parental involvement as the counsellor is available to meet with parents to discuss student issues, concerns and/or to monitor student progress. Students are encouraged through staff and newsletters to become acquainted with the counsellor prior to the development of problematic issues. Services available at the school to address students needs included:

Individual Counselling

Students who have personal concerns are encouraged to contact the school counsellor to make an appointment, or to drop into the counselling office.

Academic Counselling

The counsellor is available to assist students with course selection, study programs, and test taking skills.

Career Counselling

The counselling office contains a wide variety of information on careers, as well as information on colleges and universities across Canada and the United States. Students can select this information from college and university calendars, and by utilizing computerized career programs such as Choices and Discover.

Crisis Intervention

The counsellor often deals with serious issues which require immediate and/or special attention such as suicide, pregnancy, sexual abuse and/or assault.

Testing

The program accommodates students who request aptitude testing. The counsellor also deals with individual assessments of students when a referral from a parent or staff member is requested.

Peer Tutoring

A tutoring program is in place at Mount Pearl Senior High where students who were strong in a subject would help another who is experiencing difficulty.

Guidance News

This one page newsletter is published once a month and distributed to homeroom classes, to inform students about such items as scholarships, employment opportunities, counselling services, contests, and various services offered by the community.

Other services offered to students include referrals to outside agencies and consultation with staff and other professionals.

Internship Goals

The internship program allowed the intern to gain further experience and professional competence in the field of counselling. In the internship proposal the intern identified seven goals for the internship placement. The following is a statement of these goals along with a description of activities undertaken to meet these goals.

Goal: To educate students and staff in the area of suicide awareness.

Objective:

1. *To conduct research in the area of suicide awareness with students at Mount Pearl Senior High School to assess the need for education.*

This research was conducted through the use of a survey containing sixteen close-ended questions on students' attitude, experiences and opinions of suicide. In developing the survey, the intern contacted several experts in the area of adolescent suicide. These included Living Works Incorporated based in Calgary, Alberta; Mr. Gerry Dooley from Educational Services at the Waterford Hospital; and several suicide trainers within the St. John's area. The intern also carried out an extensive literature review on adolescent suicide and suicide related topics. Based on this research, the intern developed a questionnaire that would retrieve the most relevant information from high school adolescents on teen suicide. (A copy of this questionnaire can be found in appendix B).

2. *To implement a Youth Awareness Suicide Program for the students and the staff at Mount Pearl Senior High School.*

After the research results were gathered and analyzed, it was determined that there was a need for the implementation of the “Youth Suicide Awareness Program” at the school. This is a program developed by Living Works Incorporated (1990) and in the past several years have been introduced to youth all over North America. Over the past year, the intern has taken a number of suicide intervention courses and workshops and has become a certified suicide trainer. This, coupled with hands on experience, has enabled the intern to develop enough skills to successfully introduce such a program into the high school setting. The program provided adolescents with information on what suicide is, the magnitude of the problem, and on how to be a helper to a suicidal person. The students that attended found the workshop very informative and interesting. Many inquired about more workshops and programs on this topic and how they could become more involved in this area. A small segment of the students in attendance were known by the intern to have issues with suicide and found the workshop allowed them to know they were not alone in their feelings and were able to identify other choices during a crisis period.

Goal: To become more proficient in group counselling skills.

Objectives:

Due to the fact that the intern felt it important to further develop skills in group counselling before leading his own group, he participated in a Male Batterers Group at Her Majesty’s Penitentiary as a trainee/co-leader. The skills that the intern developed in

group counselling, while in the School Counselling Program, assisted in the co-leading of this group. Due to this learning experience, the intern was able to react to the phrases that the group members travelled through, to challenge the members and to ensure that all members participated and that none left out. This was a ten-week group, each session running for two hours in length, which was made up of inmates who volunteered. The group consisted of ten participants, two co-leaders and two trainees/co-leaders. During this experience the intern had the opportunity to work with Mr. Craig Pendergast, a Classification Officer at the Penitentiary, and Ms. Rhonda Fiander, a Social Worker from the Waterford Hospital. This experience proved to be invaluable for the intern. Much of the early part of the group was spent observing the two co-leaders and how they interacted with the group members. The intern was able to see how members were challenged, supported, and encouraged. The intern also observed the development of the group dynamics; which members formed bonds, which members experienced tension, and how each worked and related to the group leaders.

The intern began to take a more active role in the group as members and the intern felt more comfortable. This was accomplished through gaining clarification and at times challenging group members on their responses and reactions during a session. The intern was also given the opportunity to lead check-in and check out. This is where group members would relay how their week had gone at the beginning of the meeting (check-in) and how they felt about the session at the end of the meeting (check out).

During the eighth week, the intern was given the opportunity to co-lead a two-

hour session with the other trainee/co-leader. This involved leading the check-in/check-out, a guided imagery, a film on battering, and a group discussion. During another group the intern role-played positive and negative communication for the members of the group. The interns level of confidence was increased through this experience in terms of group counselling, as well as working with and learning from a co-leader.

Goal: To further develop skills and a level of competency in the area of assessment.

Objectives:

1. To administer various intelligent and educational tests.

To further develop assessment skills the intern administered standardized assessment tests previously used during the practicum (ie. WISC-III and WAIS-R), as well as those not previously administered. These included:

Kaufman Test of Educational Achievement (K-TEA), Wechsler Individual Achievement Test (WIAT), Piers Harris Children's Self Concept Scale, Test of Auditory Perceptual Skills-Upper Level (TAPS-UL), Test of Visual Perceptual Skills-Upper Level (TVPS-UL), Test of Mathematical Achievement-2 (TOMA-2), Wechsler Memory Scale-Revised (WMS-R), and the Beck Depression Inventory.

2. Complete at least two full assessments on students at the school

To meet this goal the intern completed four psycho educational assessments which consisted of a complete battery of tests to measure achievement and intelligence. The intern consulted with Ms. Michelle Short, the Guidance Counsellor at Mount Pearl

Senior High, on which tests should be administered for each assessment. Each report included recommendations and was forwarded to the referral source. This was accomplished through meeting with the parents and/or teacher and the referred student to discuss the report. Discussed in such a meeting were the testing results, and what they mean, what was expected of the student and what recommendations would best meet the student's needs

3. To practice and learn more about the interpretations and recommendations from standardized assessments.

The intern was given the opportunity to build on the skills learned while in the counselling program through practice during the internship. The intern consulted written work, dealing with assessment, by Sattler (1992) and Gipps (1994) to assist in the interpretation of various standardized tests administered throughout the internship. As well as meeting regularly with Ms. Michelle Short to discuss what the results suggested and what recommendations would best aid the student in the future. Teachers were also consulted as a means of determining what recommendations would best be suited for various students.

4. Practice in interviewing parents, students and teachers in terms of assessment needs of clients.

To receive the most relevant information about a student, the intern collected data by interviewing students, parents and teachers. This information assisted the intern in clearly identifying what weaknesses or strengths a student exhibited. Each student

referred for assessment was initially interviewed to help determine how they perceive their present issues such as parental relationship problems between a teen and her parent. Parents were also contacted and interviewed by phone in an attempt for the intern to further understand the student's strengths and weaknesses from the parents' point of view. A secondary goal which was achieved in calling home to the parents was an increased understanding of the student's home environment which, in two situations, contributed to problems at school. In one situation the mother of a student who had run away from home and dropped out of school spoke of how much she loved her daughter and wanted her to return home in one breath and in the other breath referred to her daughter in very derogative, cruel and demeaning words.

In each situation, teachers were consulted as a way of discovering student's classroom behaviour and attitude. Teachers supplied information on such things as student writing style, level of motivation, academic strength's and/or problem areas, and attitude toward school. This opened further communication between the intern and various teachers, enabling the teachers to feel comfortable to report concerns to the intern on various occasions. For example, the student who dropped out of school had a few teachers express a deep concern for her to the intern and had a chance to discuss openly both their feelings and fears in the situation. This information obtained from students, parent and teachers by way of interviews, along with testing results, was drawn together as a way of identifying students needs and how best to meet these needs.

Goal: To continue to develop my counselling skills.

Objectives:

1. To see a wide variety of clients, with a variety of differing issues, on a continual basis.

Throughout the internship, the intern had a caseload of 12 students. These students were seen on a regular weekly basis. At the end of each session, clients would schedule an appointment for the following week. These clients met with the intern for a variety of issues including: test anxiety, low self-esteem, depression, anger management, sexual assault, relationship issues, pregnancy, alcohol and drug use, parental pressures and teacher conflicts. The intern also met with different students requiring short term assistance who were referred by teachers, administration, or parents. These students were often referred because of their school and/or home behaviour. Several students, for example, met the intern because of missing classes/school, not doing class work or assignments, using inappropriate language with a teacher, and having home difficulties such as; not following parental rules or substance abuse. Finally the intern met with various students who would stop by the counselling office in a time of crisis. These students often needed to meet with someone as they had no where to turn and no one else that they could speak with. One student, for example, visited the intern because she had recently discovered she was pregnant. Another student came to the guidance office because he was suicidal and wanted to reach out to receive help, while another spoke to the intern because her boyfriend had just broken up with her. These above issues, with

such as wide variety of clients, enabled the intern to utilize many of the counselling skills such as; self-disclosure, empathy and challenges and crisis training skills in suicide intervention training that were learned over the past year during the School Counselling Program. The most important skills I learnt were empathy and listening because there is so much pain expressed in the sessions and I now realize how much it means to a student to feel not only heard but truly listened to.

2. Use a variety of theories and counselling techniques with students.

Working with individuals in a school setting enabled the intern to utilize counselling theory, which was learned over the past twelve months, in practice. The intern frequently utilized a Client-Centred approach when counselling students. Here the intern would actively listen and attend to students, empathically reflect their feelings, and clarify their statements for meaning. These techniques were used with most clients, coupled with other theories, depending on what technique's best served the individual being worked with. Utilizing other theories and techniques allowed the intern to develop and implement his own personal counselling style. Through individual counselling sessions, the intern gained experience using various counselling approaches. The intern, for example, used a Cognitive Behavioural approach with a student who had difficulty managing his anger and with a student who had low self-esteem. In both cases, the intern disputed and corrected the clients distorted reasoning through cognitive restructuring, and taught skills in self-observation and stress management. The intern also used a Behavioural Approach with a student who lacked assertiveness. Here the intern used social modelling, assertiveness training, relaxation training, and self-management as a

way to improve assertiveness skills. The intern also utilized techniques from Gestalt Theory (role play, role reversal and visual imagery), as well as treatment interventions such as, bibliotherapy (supplying students with reading material) and anxiety management.

3. To continue reading on counselling theories, techniques and new trends.

In an attempt to remain up to date in the latest counselling techniques, the intern continued reading popular counselling books and journals such as: Guidance and Counselling, NASSP Bulletin, Psychology in the Schools, Educational and Child Psychology, and the Prepared Curriculum, to name a few. These readings enabled the intern to continue building on the theories and techniques that he was introduced to in his counselling theory classes. Through these readings the intern gained further knowledge in the area of depression, suicide, anger management, self-esteem, and group dynamics.

Goal: To acquire a better understanding of the counsellor's role within the high school setting.

Objectives:

1. To work with staff, students and administration.

Since the guidance counsellor is a staff member of a school, s/he must be able to work cooperatively with staff, students, and administration. The intern accomplished this in a variety of ways. Teachers were often informed, consulted, and at times advised on a variety of differing student situations. These, for example, included difficulties in school, difficulties at home, or legal problems. Contact was usually kept between the student,

teacher and intern to ensure that the student was receiving the best possible assistance inside and outside the classroom. By doing this, a student was able to receive assistance from the guidance office while at the same time not missing any important class information. It was important that students recognize that although they are having difficulty they still must continue their daily routine. This included school and doing well therein. By having both the teacher(s) and the intern provide assistance, the student realized that s/he was not under any extra pressures, all parties were in sync and s/he was receiving twice the support. Some ways in which the intern and teacher(s) provided this assistance included: Scheduling counselling periods that did not conflict with tests or important class periods, providing alternative testing, altering the evaluation format and closely monitoring the student to ensure success. By having the student in sync with the intern and teacher(s), s/he knew what was expected if a successful outcome was to be reached.

Working with administration can be difficult. The guidance counsellor at a school can easily get put in a situation where they have to deal with discipline issues and office paper work. Therefore, having a good working relationship with the administration is very important. At Mount Pearl Senior High this task was made increasing easy as the administration was very supportive and helpful. The intern often met with the principal and vice-principal about student difficulties, administrative tasks, and school duties as well as consulting with them on various cases.

2. To work with parents and outside agencies.

The intern took part in several conferences to deal with the behaviour of a student who will be entering Mount Pearl Senior High in the fall. These meetings consisted of a guidance counsellor, educational therapist, social worker, behavioural management specialists, principals, parents, and doctors and psychologists from the Janeway hospital. The purpose of these meetings was to decide on whether this student should enter high school and if so what arrangements would be made for him. The intern also spoke with different social workers and psychologists throughout the internship. A social worker was called on an occasion to discuss an eighteen-year-old female who had been sexually assaulted. Here the intern attempted to have social services provide assistance so the student could leave her troubled home and find her own place. Social assistance was able to provide her this support and the student got her own apartment a few weeks later. On another occasion, a psychologist was contacted in reference to an assessment that was performed on a student who was having family difficulties and suicidal tendencies. The psychologist informed the intern that counselling would be beneficial for this student, but she did not feel it necessary that the young girl visit a psychiatrist, as her mother had requested. These experiences enabled the intern to understand how these outside agencies operate and to appreciate some the difficulties that are experienced when consulting with them.

The intern met with and/or contacted parents on various occasions throughout the internship. Parents, for example, often phoned the intern to discuss their son or daughters academic progress. These parents would normally inquire about course changes, study

skills or tutoring for their teenager. The intern also had several phone conversations with parents about their son/daughter's absenteeism. In many of these cases the parents were unaware of their teenager missing school and were very grateful that they were contacted. The intern met with parents to discuss three different assessment reports where findings were addressed and recommendations provided. The intern also met with a parent to discuss ways to deal with his suicidal teenager. On this occasion, the parent visited the school to learn some skills on how to react and talk to his daughter as she went through her difficult period.

Goal: To develop an increased understanding of the outside referral process.

Objectives:

1. *Develop contact with outside agencies.*

The intern was given the opportunity to make contact with outside agencies on several occasions throughout the internship. Contact was made with Child and Victim Services on three occasions where the intern spoke with different social workers concerning students from the senior and junior high. One of these cases dealt with a sister and brother concerning sexual assault/abuse. The intern contacted Child and Victim Services the first time in an attempt to get financial assistance so the sister could receive outside counselling, and then contacted them a second time to inform them that the younger brother may not be in a safe environment at home. After receiving this information, Child and Victim Services sent a social worker into the home to assess the boys home life. The intern spoke with staff from the Naomi Centre in an attempt to locate shelter

for a female student. The staff member informed the intern that they would allow the student to stay there no matter what the circumstances and would be able to provide the student with some short term counselling while at the centre if requested. The intern also contacted volunteers from the Mental Health Crisis Line to obtain information on some of the services that they have to offer. They informed the intern that they provide a walk-in service for emergency counselling, beds for high crisis situations, and a 24-hour phone service for all types of situations. The intern was also in regular contact with Mr. Gerry Dooley who works within the educational services section at the Waterford Hospital. Mr. Dooley was a tremendous help and support providing the intern with advice, encouragement and an array of resource materials in the area of mental health and suicide. Mr. Dooley also provided numerous community resources when he was unable to assist the intern such as the Adolescent Health Centre (provides individual and group counselling etc.) and Planned Parenthood (help females make choices with their pregnancy and provide counselling etc.)

2. Take a leading role in the referral of students at Mount Pearl Senior High.

Unfortunately, over the past nine months the Guidance Office at Mount Pearl Senior High had little involvement in referring students to outside agencies. The intern did, however, have the opportunity to play a significant role in the referral of two students. One student, which the intern worked with on a continuous basis and who has experienced some significant family difficulties over the past twelve months, was referred to a psychiatrist at Terrace Clinic in Churchill Square. Another student was referred to the Adolescent Health Counselling Service to join a group to discuss teen and

family issues. Throughout the internship, the intern gained a wealth of experience by interacting with other agencies. This experience has assisted him when making decisions pertaining to student referral by gaining exposure to how these different agencies operate in the community.

Goal: To develop competence in consultation.

Objectives:

1. Consult with other professionals in the area of guidance and counselling.

At Mount Pearl Senior High the intern had the benefit of working with two Guidance Counsellors/Registered Psychologists; one in the Guidance Counsellor position (Ms. Michelle Short), the other in the position of Vice-Principal (Mr. David Cooper). These professionals provided the intern with a great deal of expertise and support. Whenever needed, they were available to share their experiences, offer advice, provide constructive criticism, and often to just listen. The intern frequently consulted these individuals with ongoing cases and in crisis situations. For example, Mr. Cooper was consulted on two occasions on whether the intern should call a parent about a potentially suicidal teenager. Ms. Short helped the intern make decisions such as, calling Child and Victim Services about a student who was in an unsafe home and doing an assessment on an academically weak student. Their suggestions were greatly respected by the intern, and they in turn respected his opinions and beliefs. This made such consultation very natural and relaxing for all parties.

The intern was also in regular contact with Mr. Doug Wells, Guidance Counsellor

at Mount Pearl Junior High. Mr. Wells was often consulted pertaining to Level I and/or Level II students that he had worked with when they were in the junior high. Mr. Wells was able to provide family background information on two students and provided assessment results on another. He also provided suggestions on how best to work with a student who had a lengthy history with being in trouble with the law. Mr. Wells proved to be an asset during the internship making the intern's work with clients much easier and beneficial.

2. To meet and consult with students, school personnel and parents.

The intern feels strongly about consulting students, school personnel and parents when working with an individual. For this reason he made it a priority to consult with his clients whenever a decision was to be made that would affect them. In many cases the student makes the final decision. If a long-term plan is to be successful that student must be willing to commit to it. For this reason, a client was consulted before his/her parents, teachers, administration or outside agencies were contacted. This made for a better working relationship with students and a higher degree of success and growth.

Outside of Mr. David Cooper and Ms. Michelle Short, the intern consulted with many other staff at Mount Pearl Senior High. Ms. Janet Vivian-Walsh, the school Principal, was consulted on numerous occasions in an attempt to find the best solution when working with students who present some form of a disciplinary problem within the school. Her positive attitude and her willingness to help students made working with these clients more enjoyable and less stressful. Other staff members were also consulted to assist students in the areas of class behaviour, academic programming, alternative

testing, and personality development, just to name a few.

Consultation with parents was also a priority throughout the internship. The intern feels that in many cases a student's growth will depend on their parents support and positive attitude. Change is often more difficult without such support. The intern consulted parents on occasions where he felt that their involvement would be beneficial. This contact included obtaining parental input on student assessment, career choices and course selection, absenteeism, and student's academic progress. Parents were also consulted when a student was having difficulty at school or at home. Parents were informed that the school was aware of the problem and were willing to provide any assistance that was possible to improve the situation. On several occasions, the intern, Guidance counsellor and/or the Principal met with these parents what options were available for all parties.

3. Work with other team members such as; social workers, medical personnel and police.

The intern worked with and consulted police personnel while at Mount Pearl Senior High, as two episodes took place where RNC Officers were called to the school. During one incident, a student pressed charges against a fellow student for sexual advances and physical abuse. During another incident a student pressed charges against a family member for physical assault. On the first of these occasions, the intern, Guidance counsellor, and Principal were required to make written statements to the RNC. The intern has also had the opportunity to work with Constable Mike Oulette from the RCMP and Mr. Noel Brown from Her Majesty's Penitentiary. These gentlemen are suicide intervention trainers and were worked with on a few occasions throughout the internship.

Information on how the intern has worked with social workers and medical personnel has been provided earlier in this report and therefore will not be discussed in any more detail.

Goal: To work with students in the area of career guidance.

Objective:

1. *To become familiar with computer-assisted career guidance programs such as CHOICES and DISCOVER.*

Throughout the internship the intern worked in the area of career guidance on a regular basis. The intern worked with students on a one to one basis as they attempted to define their career interests, what post secondary school they would attend, what degree they would pursue and what financial assistance was available to them. Much of this information was found by utilizing the CHOICES program. Having the opportunity to work with numerous students the intern was able to become proficient in the application and use of this program. The DISCOVER career program was new at the school, thus the intern was not overly familiar with how it operated. For this reason, the intern attended an information session on the use of this program held at the Delta Hotel in April 1997. This session proved to be very informative and useful in becoming familiar with such a program, thus enabling the intern to effectively offer the DISCOVER program to several interested students at Mount Pearl Senior High.

2. *To familiarize myself with various post-secondary institutions and what programs they offer.*

Through working with career interested students the intern became familiar with

many of the more popular post-secondary institutions in Canada. The guidance office at the school has a well-organized and well-developed library of up-to-date university and training college calendars. The intern was able to refer to this information whenever a student wanted more material than one of the two computer-assisted career programs had to offer. Through constant use of these resources the intern learned many of the programs, requirements, costs and location of many post-secondary institutions.

The internship experience has been very positive and beneficial. The intern was able to take what was learned during the pre-practicum and practicum courses and use this information (ie., empathy, clarifying, challenges, etc.) in hands on situations. The intern was also given the opportunity to work with administration, parents and a wide variety of students and student issues. Drawing together what has been learned over the past year and during the internship has provided the intern with the confidence to work with adolescents in many different situations.

Part II

Research Component

Introduction

To fulfill the requirements for the research component of the internship, the intern developed and evaluated a descriptive study to assess the need for adolescent education in the area of suicide, at Mount Pearl Senior High School. The results of the study indicated a need for education on suicide at the school. Therefore, the “Youth Suicide Awareness Program” was presented to students at the school by the intern on May 22, 1997.

Purpose of study

Mr. David Cooper, the Vice-Principal at Mount Pearl Senior High, approached the intern (who is a certified suicide trainer) in March 1997 to implement the “Youth Suicide Awareness Program” for students at the school during the internship. After agreeing to this request, the intern felt that it would also be important to assess student views on this topic and to see if they felt the need to be educated in this area. Since support was established for the program, the intern immediately implemented it for all grade levels. It is hoped that the results of the information gathered and the response from the “Youth Suicide Awareness Program” will eventually lead to a more comprehensive suicide prevention program at Mount Pearl Senior High School.

Rationale for Research Component

In the recent past, Mount Pearl Senior High has had to deal with the suicidal death of a fellow student. The impact of this tragic event on students and staff has left

many individuals with a number of questions. Although a crisis team responded well to this fatal event, students did not understand what could bring someone to take their own life, while others felt that it was their fault. Still others thought that they had missed the warning signs revealed to them by this student. Unfortunately, because no prevention program exists at the school, many of these questions went unanswered. Even until recently, several months after the tragedy, students have had great difficulty dealing with this issue of suicide. With the exception of those individuals who later participated in the "Youth Suicide Awareness Program," students have received little information on this topic. From speaking to many of the students at Mount Pearl Senior High, the intern discovered several beliefs or myths that were being held. Many students believe the following myths; that those who discuss suicide will not complete suicide; there is often no warning of suicide; only a certain class of people commits suicide; suicidal people are insane; and people who attempt suicide, but do not complete, are attention-seekers.

Support for such beliefs does not exist in the literature. If suicidal behaviour is to be decreased at the school, education must be provided to youth. As a practicum student and intern counsellor at Mount Pearl Senior High, the intern has recognized the need for student education in this area.

Review of the Literature

Self-inflicted injury and death are part of the human condition. Suicide has been part of the history and literature of different cultures from ancient times. However, only in the 20th century has the prevention of suicide been identified as a specific area of study (Ramsay, Tanney, Tierney, & Lang, 1996). According to the Arizona State Department of Education (1992), Suicide among the young is a problem which has been steadily growing and shows no signs of going away. Often adolescent students are more vulnerable to suicidal behaviour, as they are going through so many changes so quickly that they may feel a loss of control over their lives. In Canada, suicide among adolescents is found to be the second leading cause of death, with some researchers reporting that suicide rates between 15-24 years of age have increased as much as 300 percent in the past thirty years (Cole & Siegal, 1990; Peach & Reddick, 1991; Ramsay et al., 1996). This trend in fatal behaviours, coupled with an alarmingly high estimate of the number of nonfatal suicidal behaviours, has led to the public perception of a youth suicide epidemic. Although suicide is a critical issue among youth, it is not so severe as to be an epidemic. (Ramsay, et al., 1996).

Nonetheless, adolescent suicide does warrant continuous attention and must be addressed to the young people. The National Institute of Mental Health (NIMH) estimates that for every high school of 2000 or more students in the United States, there are at least one successful suicide and 30 to 50 attempts each year (Arizona State Department of Education, 1992). Kalafat and Elias (1994) found, in a variety of anonymous surveys of adolescents in schools through the United States, that an average

of 10% of the respondents reported having made a suicide attempt. Community surveys have indicated similar results, as it was found that between 60-62% of high school students report having had some degree of suicidal ideation and approximately 9% have reported having made a suicide attempt at some point during their lives (Wetzler et al., 1996). These rates, according to Leenaars and Lester (1995), are even higher in Canada where “the suicide rate for youth rose to become almost as high as that for the elderly, traditionally the age group with the highest suicide rate” (p. 539). According to the authors, Canadian youth endorse the right to die more strongly and see suicide as a more normal way to cope with problems than do youth from the United States. This prevalence of suicidal behaviour among adolescents is such that all schools must be prepared to deal with this issue with its students.

School-based programs remain the centerpiece of youth suicide prevention efforts, because this is where students are. Although it is important to educate and train an entire school staff, including custodians, secretaries, and cafeteria workers, the intern contends that fellow students should become the first line of defence in the battle for the prevention of suicide. In a study conducted by Kalafat and Elias (1992) of 325 suburban high school students, 68% of females and 42.5% of males reported knowing a teen who had committed or attempted suicide, while 97% reported having talked to a peer who was seriously considering suicide. From this 97%: 63% spoke with their peer about his/her concern, 24.7% told an adult, and 12% did nothing. Surveys conducted by the National Youth Suicide Centre reveal that 77 percent of high school seniors have had at least one friend tell them that they were contemplating suicide (Schafer, 1989). Woodruff

(1987), found that 80 percent of adolescents who attempt suicide will tell someone about their manifestations before they make their attempt. Kalafat and Elias (1994, 1995), expand on these findings by discovering that young people do not usually disclose their suicidal feelings and thoughts to adults, but will often tell a friend who, because of a pledge of secrecy, is often reluctant to tell an adult who could help. These peers' confidants may play a pivotal role in the prevention of youth suicide if they take responsible action on behalf of their troubled peers. These above findings support the intern's belief that students need to be educated as to why people commit suicide. Students must also learn to recognize suicidal warning signs and be taught how they can seek out help for classmates who are at risk for suicide.

The above data indicates the importance of youth in the fight against adolescent suicide. They will often be the individuals who have first contact with suicidal peers, thus having the opportunity to have a positive influence on the situation. However, are these youths aware of what warning signs to look for? Do they know what to do once in the situation? Do they know how to act and respond once they have discovered the intentions of a fellow peer? Several surveys suggest that many youths are not yet prepared for such a frightening situation. According to Kalafat and Elias (1994), many adolescents do not respond in an empathic way to potentially or overtly suicidal peers. These researchers found that as few as one-fourth of the teens are likely to take the most responsible choice of action of telling an adult about a potentially suicidal peer. Also, as mentioned earlier, Kalafat and Elias (1992) found that out of the 97% of students who reported having talked to a peer who was seriously considering suicide, as many as 12%

reported doing nothing about their findings. Norton and Durlak (1989), in a study of 120 high school students, examined knowledge of risk factors of suicidal behaviour, attitudes toward suicidal peers, and ability to respond appropriately to suicidal messages from peers. They found that few adolescents possessed accurate information and many had misinformation concerning various warning signs. Furthermore, respondents expressed negative attitudes toward peers who attempted or completed suicide, and were generally unable to respond sensitively and appropriately to suicidal communications. A considerable number of adolescents fail to recognize potential suicidal behaviour and/or is unable to respond appropriately to their peers, many suicidal youth may remain unidentified and thus be more likely to initiate self-destructive behaviour.

The most compelling argument for providing suicide awareness education to young people is found from a 16-year-old Indiana boy's impression of youth suicide:

For each suicide or attempted one, there are many that go unseen, hidden beneath long-sleeved shirts and well-developed excuses. The threats, ideas and discussions are too numerous to mention. The best way to find out how common the thought of self-destruction is would be to ask the teenagers. They know, they can tell you and they need to talk, even if it means revealing their secrets. (Arizona State Department of Education, 1992).

Adolescents know themselves very well. They are aware of their difficulties, as well as those of their peers. Students can be taught the warning signs of suicide and appropriate interventions, such as what to do if a friend talks about suicide and how to use the resources available at the school. Due to the fact that most peers tend to discuss suicidal

thoughts first with a peer, student training is an essential part of the prevention program. Youth need to be educated so they can play an important role in combatting the problem of suicide.

Although more research still needs to be done in this area, many writers agree that school-based programs are important, and findings indicate that these programs are successful in educating misinformed youth. Cliffone (1993) assessed the impact of health class lessons aimed at increasing understanding of the nature of suicide, increasing the number of students who take suicidal threats seriously, and seeking adult help on behalf of a potentially suicidal peer. He found that exposure to the program resulted in shifts in responses from undesirable to desirable in 6 of 8 targeted areas that were significantly greater than comparison groups. In another evaluation of a similar curriculum comparable results were discovered. Kalafat and Elias (1994) studied the effects of suicide awareness lessons on 253 tenth-grade students. It was found that after the lessons there were an increased likelihood that students would take positive action in response to troubled peers. These students were more likely to ask troubled friends if something was bothering them, telling another friend what they had noticed and/or telling a trusted adult. These students also developed a more realistic assessment of youth suicide and the role of the suicide awareness classes. In fact, 64% of the students indicated that the classes will make it easier for them to deal with their friend's problems. These findings strengthen the argument for the use of school-based suicide programs.

The most controversial part of school-based suicide prevention programs is teaching prevention to students. However, as earlier discussed, students may be the first

to recognize that a friend is suicidal. If students know warning signs of self-destruction and know where to refer a friend, they can be a great resource in the suicide prevention effort. One school in Arizona, in an effort to educate its youth, developed peer support programs (peer counselling), suicide awareness presentations, a youth staff hotline and self-help groups for maltreated teenagers. They also developed a pamphlet for recognizing cues to suicide in their classmates, prepared school newspapers articles, and presented school plays and films on the problem of youth suicide. (Arizona State Department of Education, 1992). Another school in Dayton, Ohio felt that the concept of addressing youth crisis before they occurred is a sound one. As a result they had a suicide prevention team come to their school and make presentations on suicide to every grade level. They centred on managing stress and seeking help if a classmate talks of suicide. In fact, staff at the school hoped to make the program a part of their regular curriculum. (Johnson and Matczynski, 1993). Involving students in the development and implementation of a prevention program and delegating the implementation of the program to a trained crisis team is a good first step toward preventing youth suicide.

Most researchers believe that in the majority of cases, suicide is a preventable tragedy (Brent & Perper, 1995; Capuzzi & Golden, 1988; Morrow, 1987; Peach & Reddick, 1991). Morrow (1987), discovered that adolescents send out many distress signals that are more observable and identifiable by teachers and peers than by parents. For this reason, the school has a crucial role in changing the course of events that ultimately leads to a suicidal decision. One of the greatest myths about suicide is that nothing can be done to prevent it. According to Dineen (1990), providing people with

information about options for support and recovery programs is at the heart of suicide prevention. In fact, a past survey reveals that more than 70 percent of teens felt that suicide could be prevented through a suicide prevention/intervention program designed for youths, their parents, teachers and school counsellors (Grollman, 1988).

Despite the large amount of literature that stresses the importance of implementing a school-based suicide program for youth, parents and school staff, a recent survey found that many schools still did not have a present suicide prevention program. Kush and Mailley (1991), examined a 31-item questionnaire returned by school counsellors representing 325 school districts across the United States. They discovered that nearly one-half of the schools in this study did not have a formal suicide prevention/intervention program or policy. Obviously, many schools fail to recognize the importance of this issue. It is hoped that more research in this area will lead to more program development for parents, school personnel, and most importantly for adolescents.

Methodology

Data Collection

Optimally, there were three sources of data collection. These included, but were not limited to, the students, their parents, and the staff at Mount Pearl Senior High. It would have been beneficial to collect data from all sources, but for practical reasons and given the scope of the current resources, the intern resolved to collect data from only the students at Mount Pearl Senior High. A questionnaire consisting of forced choice items and close ended questions was given to the voluntary sample. This questionnaire addressed areas such as, thoughts of suicide, prior suicidal behaviour, education on the topic, experiences with suicidal individuals, feelings about the topic and questions to assess the students level of knowledge. Based on the questionnaire results, the “Youth Suicide Awareness Program” was implemented at Mount Pearl Senior High, for those students who decided to attend.

Sample

Gay (1992), refers to sampling as “the process of selecting a number of individuals for a study in such a way that the individuals represent the larger group from which they were selected” (P. 123). To ensure a random sample, *intact groups* of two randomly selected home room classes from each grade level were selected. Each of these classes contained students from Level I to IV; thus, the intern was able to obtain views from all age levels within the school. As a result, students with an age range from 15-19 years, were included in this study. In a two day period, the intern explained the purpose

of the research to these home room classes and asked for their participation. Students who were willing to participate in the study obtained a copy of the parental permission form and returned it one week later signed by their parent and/or guardian. Only those students who had returned a copy of the permission form were permitted to take part in the study (Copies of permissions form can be found in appendix A). The intern distributed 110 permission forms with 60 of them being returned, thus giving the intern a 54.5% return rate. One week after initial contact was made with the students, the intern distributed the questionnaires during home room period and allowed the participants fifteen minutes to complete them.

Data Analysis

The analysis consists of frequency data, as well as cross tabulation of the major independent variables of gender and education level around suicide. Data from the research questionnaire was entered into the Statistical Package for the Social Sciences (SPSS). This program was also utilized to analyse the data collected. This research and its findings are described in detail in the pages to follow.

Results and Finding

This section presents the data from the suicide awareness questionnaire, which includes demographic data on the sample of participants. The analysis of the data is presented in two sections. Section One describes the sample group and presents the data generated by the suicide awareness questionnaire. Section Two presents comparison information as a way to show that students have contact with suicidal individuals, but lack the education required to have a positive impact with the end result.

Suicide Awareness Questionnaire

Sixty students participated in the survey ranging in age from 15 to 19 years. Most of the students (31.7%) were 17 years of age, while there was one who was 19 years old (see Table 1a). There were more females (63.3%) who participated in the study than males (36.7%) (see Table 1b). When asked if anyone they had known died of suicide, 80% responded yes while 20% said no (see Table 1c). From those who responded yes, the majority (36.7%) revealed that the individual they knew was an acquaintance of theirs (see table 1c). There were 65% of students who noted knowing someone who had attempted suicide (see Table 1d). Most participants (25%) responded that this individual was a close friend (see Table 1d). When asked about formal learning experiences it was discovered that a majority of students (61.7%) had no formal learning or training experience at all (see Table 1e). Although it was found that 30% received a lecture on suicide, few individuals participated in a workshop or course (1.7% and 10% respectively) (see Table 1e). To find that 80% knew of a person who had died of suicide,

but more than 60% have no formal learning experiences in the area is an alarming statistic. This suggests that over 60% of youth would be unable to provide assistance to a suicidal peer.

The questionnaire found surveyed students' feelings on suicide came mostly from media programs (51.7%) and readings such as, books and newspapers (38.3%) (see Table 1f). It also showed that a considerably high number of students (38.3%) have feelings about suicide because of their own personal experiences with suicidal individuals (see Table 1f). These personal experiences show that youth are aware of suicidal individuals and that they must learn the tools necessary have a positive influence in their lives.

The next section of the questionnaire examined students own personal experiences with suicide. It was discovered that out of the sixty participants in the study, 51.7% have had thoughts of deliberately injuring themselves in the past twelve months (often=3.3%, occasionally=16.7%, and rarely=31.7%) (see Table 1g). This information is quite significant as even if an individual has thoughts of self-injury on rare occasions, it means that they have had these thoughts and that they could develop into something more serious if not addressed. When asked if participants had ever deliberately injured themselves, 16.7% responded that they had (see Table 1h). Although this may appear to be a low percentage, is quite significant. If this number is generalized to the rest of the population, it is discovered that 16,700 per 100,000 youth have deliberately attempted to injure themselves. When this data is viewed in terms of a country the size of Canada it can be seen that the problem of youth suicide is a very large and serious one.

Many researchers have noted that much of the general population believe that discussing the topic of suicide with youth will make them more likely to have thoughts of suicide and/or attempt an act of self-injury (Brent & Perper, 1995; Capuzzi & Golden, 1988; Johnson and Matczynski, 1993; Peach & Reddick, 1991). For this reason, those youth who participated in the study were directly asked questions around this belief. Who better to provide enlightenment to such beliefs than youths themselves? It was found that an overwhelming number of participants (93.3%) felt that talking about suicide in the classroom would not make them more likely to have thoughts of suicide (see Table 2). Strengthening this finding was the discovery that 95% of students who participated in the study believed suicide, death, and related topics should be discussed with youths (see Table 2). It was also discovered that a large number of participants (91.7%) felt that asking a person to discuss his/her suicidal thoughts will not cause an act of self-injury (see Table 2). What is being seen here is that students are wanting to discuss these issues in the classroom and earlier statistics have highlighted the need for them to be educated in this area due to the lack of knowledge.

The final section of the suicide awareness questionnaire was general information questions. These were included as a way to assess the level of knowledge that participants have on this topic. It was discovered that for many questions, students knew less than they should if they are going to be in contact with suicidal individuals. Over half (51.7%), for example, believed that there were no warning signs when a person is suicidal (see Table 2). If a person does not know the warning signs, along with not believing there is any, they will rarely have a positive impact on a suicidal person. As

mentioned earlier recognizing early warning signs is almost always a vital step in saving the life of a suicidal person. It's also important to note that 71.7% of participants feel that motives for suicide are not easily established (see Table 2). These students are saying that they do not know what would motivate a person to end their life. They do not realize that an individual's reason for suicide could be very large (physical and/or sexual abuse), or may be something smaller (death of a pet). A person's reasons will depend on how they react or are able to cope with stress in their lives. Students need to be taught such information so they will know what questions to ask in order to find out an individual's motive for suicide. Adolescents need to be aware of what would make a peer contemplate ending their life so that they can make a difference in the end result.

A final question asked of participants in this study was on the magnitude of the issue of youth suicide. It was found that 81.7% believed that youth suicide is a problem among youth (see Table 2). Who would know the extent of this issue better than youth? It appears that they realize that it is a problem, but for several reasons they still lack the knowledge and education that they need to combat this issue. Students are the ones on the front lines and they should be the first line of defence in dealing with teen suicide. Adolescents see the problem more than anyone and therefore, need to be educated so they will be able to deal with a peer directly and/or inform an adult of the situation (The following tables present a more detailed explanation of these results).

Demographics

Table 1a

Age of those students who participated in the study.

15 years	16 years	17 years	18 years	19 years
23.3%	28.3%	31.7%	15.0%	1.7%

Table 1b

Gender of those students who participated in the study.

Male	36.7%
Female	63.3%

Table 1c

Percentage of students who has known someone who has died of suicide and their relationship to that individual.

		Other	Acquaintance	Close Friend	Family Member
YES	80%	28.3%	36.7%	11.7%	3.3%
NO	20%				

Note. 80% of participants have known someone who has died of suicide.

Table 1d

Percentage of students who has known someone who has attempted suicide and their relationship to that individual.

		Other	Acquaintance	Close Friend	Family Member
YES	65%	18.3%	15.0%	25.0%	6.7%
NO	35%				

Note. 65% of participants have known someone who has attempted suicide.

Table 1e

Percentage of students who have formal learning experiences.

None	61.7%
Lecture	30%
Workshop	1.7%
Course	10%

Note. 61.7% have received no education in the area of suicide

Table 1f

This outlines where students feelings about suicide many come from.

Little or no Feelings	13.3%
Lectures, Workshops, Course, etc	6.7%
Readings - Books, Newspapers, etc.	38.3%
Media Programs	51.7%
Personal Experiences with Suicidal Persons	38.3%

Table 1gThose students who have thought of deliberately injuring themselves.

Often	Occasionally	Rarely	Never
3.3%	16.7%	31.7%	48.3%

Note. 51.7% of those students who participated in the study have had thoughts of deliberately injuring themselves in the past 12 months.

Table 1hThose students who have deliberately attempted self-injury.

Yes, with a Clear Wish to Die	Yes, but uncertain About Dying	Yes, but no Wish to Die	No
1.7%	6.7%	8.3%	83.3%

Note. 16.7% of those students who participated in the study have deliberately injured themselves at some point in their lives.

Table 2

Knowledge Assessment

Results of knowledge section of Suicide Awareness Questionnaire

	Yes	No
Talking about suicide in the classroom will make you more likely to have thoughts of suicide?	6.7%	93.3%
Suicide, death, and related topics should be discussed with youths.	95.0%	5.0%
Asking a person to discuss his/her suicidal thoughts is likely to cause an act of self-injury.	8.3%	91.7%
Suicide is generally committed without warning.	51.7%	48.3%
There is a very low relationship between alcohol abuse and suicide.	46.7%	53.3%
The motives for suicide are easily established.	28.3%	71.7%
Males have the highest rate of suicidal behaviour.	35.0%	63.3%
Suicide is a problem among youth	81.7%	18.3%

Comparison Information

Gender of Those who have Thought of, or Deliberately Injured themselves.

Research has shown that although males are more successful at completing suicide, females attempt more often. This information suggests that both males and females are at equal risk when it comes to suicidal behaviour (Ramsay et al., 1996). Although this is valuable information, it is not known if this also applies to adolescents. Though it is not possible to assess youth suicide completion in this study, it is valuable to compare suicidal thoughts and attempts to gender. When males and females who participated in the study were compared on thoughts of self-injury, it was discovered that females (55.2%) had a higher rate of suicidal thoughts than did males (45.4%) (see Table 3).

Table 3

Percentage of students who have had thoughts of suicide

	Male	Female
Thoughts of Deliberately Injuring Self	45.4%	55.2%
No Thoughts of Deliberately Injuring Self	54.2%	44.7%

Note. Female participants have thoughts of suicide at a higher rate than males

When these same participants were compared on deliberate acts of self-injury, a different result was found. Here it was discovered that youth males (27.3%) deliberately participated in acts of self-injury more often than youth females (10.5%) (see Table 4). This is very significant, as these results are in contrast with the results produced in other studies which find that adult females attempt more than adult males.

Table 4Percentage of students who have deliberately injured themselves

	Male	Female
Deliberately Injuring Self	45.4%	55.2%
Never Deliberately Injuring Self	54.2%	44.7%

Note. Females in the study have deliberately injured themselves more than males

in the study.

Level of Education of Those who know someone who has Attempted or Completed Suicide.

Among the sample of 60 students, 80% reported knowing someone who had died of suicide. By using a Chi-Square analysis it was discovered that of this 80%, 64.6% reported having no formal learning experiences on the topic of suicide (see Table 5). As a result, the vast majority of these students were not in a position to provide any assistance to a suicidal individual, nor pick up on any warning signs. reported having no formal learning experiences on the topic of suicide. It was also found that 75% of these same students had no formal learning experiences through lectures, 97.9% had none through workshops, and 89.6% had no education through courses in suicide (see Table 5).

Table 5

Percentage of students, with no formal learning experiences, who has known someone who has died of suicide.

	NO FORMAL LEARNING EXPERIENCES			
	None	Lecture	Workshop	Course
Known someone who died of suicide (80%)	64.7%	75%	97.9%	89.6%

Note. The majority of students from the study who has known someone who has died of suicide have no formal learning experiences with the topic in this area.

Further analysis showed similar results when the education level of students was compared with students who knew someone who had attempted suicide. Of those students who responded knowing someone who had attempted suicide (65%), 61.5%

reported having no formal learning experiences (see Table 6). Again from these same students, 69.2% revealed they had no education through lectures, 97.4% said they received none from workshops, while 89.7% had no formal learning experiences through any form of suicide course (see Table 6). What is even more alarming is that of the 65% of participants who reported knowing someone who had attempted suicide, 25% revealed that the attempter was a close friend (see Table 1d).

Table 6

Percentage of students, with no formal learning experiences, who has known someone who has attempted suicide.

NO FORMAL LEARNING EXPERIENCES				
	None	Lecture	Workshop	Course
Know someone who Attempted suicide (65%)	61.5%	69.2%	97.4%	89.7%

Note. The majority of students from the study who knows someone who has attempted suicide have no formal learning experiences with the topic in this area.

Level of Education of Those who had Thought or Deliberately Injured themselves.

By again using a Chi-Square analysis, it was discovered that those students (who participated in the study) who had their own personal experiences with suicidal thoughts and behaviours had a lesser degree of formal learning experiences. Of those students who admitted having thoughts of injuring themselves either often, occasionally, or rarely (51.7%), 59.4% reported having no suicide education, while only 39.1% revealed having some education in this area (see Table 7). Of those who said they have never thought of self-injury (48.3%), 60.9% revealed having some form of formal learning experience, while 40.5% reported having none (see Table 7). Based on this data, it appears that those individuals, who have some degree of education in suicide, have a greater opportunity of not going beyond their thoughts of suicide to an action phase. Individuals who learn about suicide realize that societal myths labelling them as crazy are inadequate and help them realize that many people have thoughts of suicide at some point in their life and learn of alternative routes.

Table 7

Percentage of students who have or have not thought of deliberately injuring themselves compared to the amount of learning experiences acquired.

	No Learning Experiences	Some Learning Experiences
Thoughts of Deliberately Injuring Self	59.4%	39.1%
No Thoughts of Deliberately Injuring Self	40.5%	60.9%

Note. Those students who have thought of deliberately injuring themselves have less learning experiences than those who have never thought of injuring self.

For those same students who reported having thoughts of deliberately injuring themselves a similar pattern was discovered when compared with the formal learning experience of lectures. From those individuals who thought about self-injury either often, occasionally, or rarely, 39.0% revealed having learning experiences on suicide through lectures, while 57.1% reported having none (see Table 8). The significance of these numbers is evident when compared with those students who reported not having thoughts of self-injury. Of these students, 61.1% revealed receiving education through lectures and only 42.9% reported receiving no lecture material (see Table 8).

Table 8

Percentage of students who have or have not thought of deliberately injuring themselves compared to the amount of learning acquired through lectures.

	Lectures	No Lectures
Thoughts of Deliberately Injuring Self	39.0%	57.1%
No Thoughts of Deliberately Injuring Self	61.1%	42.9%

Note. Those students who have never thought of deliberately injuring themselves have more lectures than those who have had thoughts of self-injury.

When those students who had thoughts of self-injury and participated in a course were examined, mixed results were found. It was discovered that 50.0% of those students who thought of self-injury either often, occasionally, or rarely also participated in a course; while 51.9% revealed having no course experience (see Table 9). Of those students who reported never having thoughts of self-injury, 50.0% reported attending a

course, with 48.1% having not attended (see Table 9). Although this is a marginal difference, it still identifies that education through courses is beneficial for over half of the participants.

Table 9

Percentage of students who have or have not thought of deliberately injuring themselves compared to the amount of learning acquired through courses.

	Course	No Course
Thoughts of Deliberately Injuring Self	50.0%	51.9%
No Thoughts of Deliberately Injuring Self	50.0%	48.1%

Note. Those students who have never thought of deliberately injuring themselves have slightly more courses than those who have had thoughts of self-injury.

The same pattern found in the previous pages of results is also found when the level of education is compared to those individuals who have actually acted on their thoughts of self-injury and have actually injured themselves. It was discovered, that of those students who deliberately injured themselves (with a clear wish to die, uncertain about dying, no wish to die) only 8.6% had formal learning experiences, while 21.6% revealed having no education (see Table 10). Of those students who have never had thoughts of deliberately injuring themselves, 91.3% admitted to receiving some form of education, with 78.4% saying they had not received any (see Table 10).

Table 10

Percentage of students who have or have not deliberately injured themselves compared to the amount of learning experiences acquired.

	No Formal Learning Experiences	Formal Learning Experiences
Deliberately Injuring Self	21.6%	8.6%
Never Deliberately Injuring Self	78.4%	91.3%

Note. Those students who have deliberately injured themselves have less learning experiences than those who have never injured themselves.

When learning experiences through the use of lectures is viewed it was found that of those students who deliberately injured themselves (with a clear wish to die, uncertain about dying, no wish to die) only 5.6% had these types of formal learning experiences, while 21.4% revealed receiving no lectures (see Table 11). Of those students who have never had thoughts of deliberately injuring themselves, 94.4% admitted to receiving some education through lectures, with 78.6% saying they had not received any(see Table 11). Although there was nothing significant discovered when learning experiences through workshops and courses were examined, it appears from the results that the more education a person receives the safer they are from acting upon thoughts and/or behaviours of suicide.

Table 11

Percentage of students who have and have not deliberately injured themselves compared to the amount of learning acquired through lectures.

	Lectures	No Lectures
Deliberately Injuring Self	5.6%	21.4%
Never Deliberately Injuring Self	94.4%	78.6%

Note. Those students who have never deliberately injured themselves have more lectures than those who have deliberately injured themselves.

Discussion

The major focus of this study was to assess the level of student suicide education and awareness and identify that there is a need for such education for high school students. On the basis of the analysis, the findings confirm that students are aware of the problem of teen suicide and that adolescent education is needed in the schools if this problem is to be combatted.

In an attempt to assess the level of suicidal risk for both male and female adolescents, and to see if findings are consistent to other research, suicidal thoughts and attempts of male and female participants were examined. When males and females who participated in the study were compared with thoughts of self-injury, it was discovered that females had a higher rate of suicidal thoughts than did males. This finding appears to support other research material (Kalafat and Elias, 1994, 1995; Ramsay et al., 1996). Different results, however, were found when these same participants were compared with deliberate acts of self-injury. Here, it was discovered that males deliberately participated in acts of self-injury at a much higher rate than did females. This result contradicts much of the other research as it has been shown in past studies that females attempt at a much higher rate than males (Ramsay et al., 1996). Although more research needs to be conducted, this result suggests that suicide trends and behaviours may be changing.

Further analysis found that of those students who reported knowing someone who had died of suicide, the vast majority had little or no education on this topic. A similar result was found with students who admitted knowing someone who had attempted

suicide. A majority of these students revealed having little education from either a lecture, course or workshop. The large percentage of participants reporting personal experiences with suicide individuals, coupled with the small amount of education they have received, is unsettling. In fact, 25% of those students who revealed knowing a person who attempted suicide noted that the individual was a close friend. Students clearly have interactions with suicidal peers, but lack the education they require to successfully help these peers through difficult periods in their lives. Most are unable to listen to, talk with or tell an adult because they do not recognize that their friend(s) is/are suicidal.

When participants own personal experiences with suicide were examined, more support that teenage education is warranted was found. It was discovered that those students who have never thought of deliberately injuring themselves have more formal learning experiences in suicide than those students who reported having such thoughts. In fact, it was found that those students who thought about suicide often, have less education than those who thought about it occasionally, who in turn have less education than those who thought about it rarely. A pattern appears to exist that suggests that formal learning experiences can provide a form of protection against following through to an action phase on thoughts of self-injury.

Similar results were discovered with those participants who reported never deliberately injuring themselves. A significant percentage of these students reported having formal learning experiences in the form of either a lecture on suicide, a course or a workshop. The findings indicate that a very small percentage of those students who

have deliberately injured themselves in their lifetime have some form of formal education on suicide. Again the same findings found on the previous page are also found here. That is, those students who have never deliberately injured themselves have more formal learning experiences in suicide than those students who reported deliberately participating in such an act. Also those students who deliberately injured themselves with a clear wish to die, had less education than those who deliberately injured themselves uncertain of dying, who in turn had less education than those who deliberately injured themselves with no wish to die. According to this data, the same pattern that formal learning experiences appear to provide a form of protection against deliberate acts of self-injury is evident.

Other significant findings which support student education in the area of youth suicide are found in students' own beliefs for such education. A significant majority felt that suicide and related topics should be discussed in the classroom and strongly believe that discussing this topic in the classroom would not make a person have thoughts of suicide. These findings suggest that students have strong opinions on suicide and are ready to receive more education and knowledge in this area. The majority of participants also believe that suicide is a problem among their age group. Often, society does not give adolescents enough recognition for the information they provide. No one is more aware of youth problems and issues than youths themselves. For such an overwhelming number of participants to view youth suicide as a problem, it has to be addressed. What better place to address such an issue than in schools?

The data from this research also suggests that students are not as informed as one

would hope on youth suicide issues. Mixed results were found on the knowledge base questions suggesting that many students need to learn more. More than half the students believe that suicide is committed without warning, nearly half felt that there was no correlation between alcohol abuse and suicide, while many were unsure about what gender had the highest suicide rate. Also a large number of the participants admitted to being unsure as to what motivates would lead a person to contemplate the act of suicide. Although reasons for such acts are not easily established, adolescents need to know what signs to look for and what questions to ask if they are to discover these motivations. If, for example, a student lost a pet and was suicidal, how would his/her peers know if they did not know what to ask or what to look for? Due to the fact that any number of things can motivate a person to become suicidal, adolescents must become aware of a person's coping abilities and in order to learn this they need to receive proper education.

The results of this study clearly indicate that youth suicide is an issue for many youth in the 1990s. Findings show that many of the students, who participated in the study, do come into contact with suicidal peers, but lack the education and knowledge needed to be successful helpers. Results also suggest that students who have some education on the topic have a lesser probability of having suicidal thoughts and/or behaviours. Finally, students in this study overwhelmingly believe that they should receive education on suicide, that it is a problem with youth, and showed through their responses that many have less knowledge than is required with such a high youth suicidal rate. These results indicate a strong need for suicide education in schools, so students can provide the first line of defence against such a difficult and frightening issue.

Implications

The researcher notes that the generalizing of the findings is limited given the relatively small sample. Despite this, it is believed that the results of this study can be generalized to high school students from 15 to 18 years of age in high schools within the St. John's, Newfoundland Region. However, further research needs to be completed with a much larger sample in order to affect a greater degree of sampling reliability.

It is believed, however, that the data does reveal that youth suicide is an issue that exists with a significant number of youths at Mount Pearl Senior High. For this reason, educational programs with specific suicide related content needs to be brought into the high school classroom and addressed with these adolescents.

Further Areas of Research

1. A larger study with a larger sample needs to be conducted involving high schools across Newfoundland or Canada to assess youth suicide experience, awareness and knowledge. This way it can be seen if larger results are consistent with the above findings.
2. A case study should be conducted with high school students to receive more information, opinions, and experiences on youth suicide. This information can help in making a clearer picture for youth suicide.
3. Research from parents and teachers should be conducted to assess how they view the issue of youth suicide and if they feel students should be educated in the schools.
4. A study needs to be conducted after students have been educated on this topic to

evaluate education programs and see if students are benefitting from them. Such information can help guide program implementation and curriculum.

Appendix “A”

April 14, 1997

Mr. Tim O'Reilly
Graduate Student
Masters of Educational Psychology Programme
Faculty of Education
Memorial University of Newfoundland
St. John's Campus
St. John's, NF.

Mrs. Janet Vivian-Walsh
Principal - Mount Pearl Senior High School
Mount Pearl, NF.

Dear Mrs. Vivian-Walsh,

Please accept this letter of request to distribute questionnaires to students at Mount Pearl senior High. I wish to include the results of these questionnaires in the research component of my Internship Report for the partial fulfilment of the requirement for a Masters' degree. The questionnaire will focus on students opinions, experience and knowledge in the area of suicide. The questionnaire will consist of forced choice items, and will take approximately ten to fifteen minutes to complete. Based on the results of the study, I will implement the "Youth Suicide Awareness Program" to students, staff and parents at Mount Pearl Senior High. This program will supply information about suicide such as; definition, warning signs, and magnitude of the problem. Student participation is voluntary and they may opt out at any time. Names of any student or parent will not be identified in the course of the research. If you have any questions or concerns, please do not hesitate to contact me at 739-5082. If you wish to speak to my advisor, you can contact Dr. William Kennedy at 737-7617, or if you would like to speak with someone not associated with the study, contact Dr. Linda Phillips, Associate Dean of Graduate Studies, at 737-8587. I thank you for your consideration in this matter.

Sincerely,

Tim O'Reilly

Dear Sir or Madame;

I am an Educational Psychology Graduate student in the Faculty of Education at Memorial University of Newfoundland. I am now doing an internship at Mount Pearl Senior High and with the Faculty of Education's approval, I will be conducting research on student suicide awareness and understanding. The data collected will be used to decide on the implementation of the "Youth Suicide Awareness Program" at the school for students, staff and parents.

Central to implementing the youth program is the level of students' education and/or their need for education on the topic of suicide. To collect this data, I wish to distribute a questionnaire to various students at Mount Pearl Senior High. The questionnaire, which will take approximately ten to fifteen minutes to complete, will focus on students opinions, experience and knowledge in the area of suicide. Upon completion of this research, the findings will be included in my Internship report. The information gathered at Mount Pearl Senior High will not identify any student or parent, nor are students expected to identify themselves on the questionnaire, thus keeping their responses private.

This letter is to ask you to allow your child to participate in this research by permitting him or her to complete a questionnaire. I would appreciate your help, but you are certainly not obligated to give your consent. Your child should be aware that participation is voluntary and s/he has the right to opt out at any time. The results of this study will be made available upon request. If you are in agreement to allow your child to participate, please sign below and return this form to myself at Mount Pearl Senior High School. If you have any questions or concerns, please do not hesitate to contact me at 739-5082. If you wish to speak to my advisor, you can contact Dr. William Kennedy at 737-7617, or if you would like to speak with someone not associated with the study, contact Dr. Linda Phillips, Associate Dean of Graduate Studies, at 737-8587.

Thank you for consideration of this request.

Sincerely,

Tim O'Reilly

I, _____, hereby agree to allow my child, _____, to complete a questionnaire for the research project on suicide awareness and understanding undertaken by Tim O'Reilly. I understand that participation is voluntary, and I or my child has the right to revoke permission at any time. I also understand that no individuals (except the researcher) will be identified in this research.

Date _____ Signature of Consenting Party _____

Appendix “B”

Please answer each question on this survey. Be as truthful as possible, keeping in mind that the results will be kept confidential. *Do not sign your name to this survey.* Thank-you for your time.

1. What is your age? ___

2. Gender Male ___ Female ___

3. Has anyone you've known died of suicide?

Yes ___ No ___ ___ Other
 ___ Acquaintance
 ___ Close Friend
 ___ Family Member

4. Has any one you know attempted suicide?

Yes ___ No ___ ___ Other
 ___ Acquaintance
 ___ Close Friend
 ___ Family Member

5. What formal learning experiences have you had about suicide?
(Check as many as apply)

None ___
Lecture ___
Workshop ___
Course ___

6. My feelings about suicide mostly come from.....
(check as many as apply).

- I have little or no feelings about suicide
- Lectures, workshops, course, etc.
- Readings (books, newspapers, etc.)
- Media programs about suicide
- Personal experiences with suicidal persons

7. How often have you thought of deliberately injuring yourself?
(Over past 12 months)

- Often
- Occasionally
- Rarely
- Never

8. Have you ever deliberately injured yourself?

- Yes, with a clear wish to die
- Yes, though uncertain about dying
- Yes, but no wish to die
- No

9. Talking about suicide in the classroom will make you more likely to have thoughts of suicide?

Yes ___ No ___

10. Suicide, death, and related topics should be discussed with youths.

Yes ___ No ___

11. Asking a person to discuss his/her suicidal thoughts is likely to cause an act of self-injury.

Yes ____ No ____

12. Suicide is generally committed without warning.

Yes ____ No ____

13. There is a very low relationship between alcohol abuse and suicide.

Yes ____ No ____

14. The motives for suicide are easily established.

Yes ____ No ____

15. Males have the highest rate of suicidal behavior.

Yes ____ No ____

16. Suicide is a problem among youth

Yes ____ No ____

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