

10 Key Points Assessing Violent Behavior in the School Setting

1 Incidents of violence at school are rarely impulsive acts. Thought processes and behavior may be discernable from observation and communication. The time frame may be short, so quick inquiry and intervention is needed.

2 Prior to most incidents, other people knew about the attacker's ideas or plans to attack. Students are an important part of prevention efforts. Schools must encourage reporting of potentially dangerous threats or behavior. Schools must ensure that they have a fair, thoughtful, and effective system to respond to information when it is brought forward.

3 Most attackers had access to and had used weapons prior to the attack. Schools should inquire about any efforts to acquire, prepare, or use weapons or ammunition, including bomb making materials. Pay attention to access to and communications about weapons.

4 Despite prompt law enforcement responses, most shooting incidents were stopped by means other than law enforcement interventions. Preventative measures and good emergency response planning are both needed. School must have protocols and procedures for responding to and managing threats and other behaviors of concern.

5 Prior to the incident, most attackers engaged in some behavior that caused concern or indicated a need for help. When behavior of concern is noticed, additional probing by caring adults may find cause for warning or referral to law enforcement or for mental health services. Inquiry may determine a more comprehensive picture of a student's past and current behavior and any indications that the student is planning an act of violence.

6 Most attackers were known to have difficulty coping with significant losses or personal failures. Many had attempted or considered suicide. Inquiry should include questions about recent losses or perceived failures and about feelings of hopelessness and desperation. Aspects of a student's life that may either increase or decrease the potential for violence must be considered. Screening for suicide risk is recommended.

7 In many cases, other students were involved in some capacity. Inquiry should include attention to the role that a student's friends or peers may be playing in the student's thinking and preparation for an act of violence. The climate of a school can help students see that adults can be called upon in times of need and that violence doesn't solve problems.

8 Most attackers did not threaten their targets directly prior to advancing the attack. Schools should not wait for a threat before beginning an inquiry. Schools should also inquire about behaviors and communications of concern.

9 Many attackers felt bullied, persecuted, or injured by others prior to the attack. Schools should support ongoing efforts to reduce bullying and harassment. Assessing a student's history of bullying and harassment should be part of the inquiry.

10 There is no accurate or useful "profile" of students who engage in targeted school violence. Schools should focus not on profiles of students, but rather on behavior and communication. Ask, "Is the student on a path toward violent action?"

"Threat assessment in the school setting involves law enforcement and school officials working collaboratively to determine risk."

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Contents

1 Threats by Children & Adolescents: When Are They Serious?

2 Children's Threats: When Are They Serious?...cont.

Meet A New Oakland Child Psychiatrist

3 Student Weapon & Physical Violence Survey Results

4 10 Key Points Assessing Violent Behavior in the School Setting

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1-800-395-FACE (3223)

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Threats by Children and Adolescents



When Are They Serious?

Article No. 65 from "Facts For Families", American Academy of Child & Adolescent Psychiatry.

Every year there are tragedies in which children shoot and kill individuals after making threats. When this occurs, everyone asks themselves, "How could this happen?" and "Why didn't we take the threat seriously?" Most threats made by children or adolescents are not carried out. Many such threats are the child's way of talking big or tough, or getting attention. Sometimes these threats are a reaction to a perceived hurt, rejection, or attack.

What threats should be taken seriously? Examples of potentially dangerous or emergency situations with a child or adolescent include:

- threats or warnings about hurting or killing someone
- threats or warnings about hurting or killing oneself

- threats to run away from home
- threats to damage or destroy property

Child and adolescent psychiatrists and other mental health professionals agree that it is very difficult to predict a child's future behavior with complete accuracy. A person's past behavior, however, is still one of the best predictors of future behavior. For example, a child with a history of violent or assaultive behavior is more likely to carry out his/her threats and be violent.

When is there more risk associated with threats from children and adolescents? The presence of one or more of the following increases the risk of violent or dangerous behavior: ...continued on page 2

Children's Threats: When Are They Serious?...continued

- past violent or aggressive behavior (including uncontrollable angry outbursts)
- access to guns or other weapons
- bringing a weapon to school
- past suicide attempts or threats
- family history of violent behavior or suicide attempts
- blaming others and/or unwilling to accept responsibility for one's own actions
- recent experience of humiliation, shame, loss, or rejection
- bullying or intimidating peers or younger children
- a pattern of threats
- being a victim of abuse or neglect (physical, sexual, or emotional)
- witnessing abuse or violence in the home
- use of alcohol or illicit drugs
- cruelty to animals
- firesetting behavior
- involvement with cults or gangs
- themes of death or depression repeatedly evident in conversation, written expressions, reading selections, or artwork
- preoccupation with themes and acts of violence in TV shows, movies, music, magazines, comics, books, video games, and Internet sites
- mental illness, such as depression, mania, psychosis, or bipolar disorder
- disciplinary problems at school or in the community (delinquent behavior)
- past destruction of property or vandalism
- poor peer relationships and/or social isolation
- little or no supervision or support from parents or other caring adults

What should be done if parents or others are concerned?

When a child makes a serious threat it should not be dismissed as just idle talk. Parents, teachers, or other adults should immediately talk with the child. If it is determined that the child is at risk and the child refuses to talk, is argumentative, responds defensively, or continues to express violent or dangerous thoughts or plans, arrangements should be made for an immediate evaluation by a mental health professional with experience evaluating children and adolescents. Immediate evaluation and appropriate ongoing treatment of youngsters who make serious threats can help the troubled child and reduce the risk of tragedy.

800-395-FACE (3223)

Meet a New Oakland Child Psychiatrist



Shama Patil, MD

Diplomat, American Board of Psychiatry and Nuerology

Presently, Dr. Patil is a treating psychiatrist across all New Oakland Facilities and works

providing services in both the outpatient and FACE to FACE Partial Hospital Program (PHP). Dr. Patil graduated from KLE University with her Doctorate in Medicine. Dr. Patil received her specialized training in child-adolescent psychiatry from the University of Michigan. Dr. Patil is a member of numerous Psychiatric Associations. Dr. Patil has near 15 years of experience in psychiatry, and provides treatment primarily to Child-Adolescent populations. In her free time Dr. Patil enjoys reading, traveling, exercise and spending time with her two children.

5 LOCATIONS TO SERVE YOU

Farmington Hills Center
32961 Middlebelt Road
Farmington Hills, MI 48334
(248) 855-1540

Livonia Center
31500 Schoolcraft Road
Livonia, MI 48150
(734) 422-9340

Clinton Township Center
42669 Garfield Road
Clinton Township, MI 48038
(586) 412-5321

Clarkston Center
6549 Town Center Drive
Clarkston, MI 48346
(248)-620-6400

Warren Center
26522 Van Dyke Ave.
Center Line, MI 48015
(586)-759-4400

KID'S ZONE!

Bullies & Violence Related Word Search

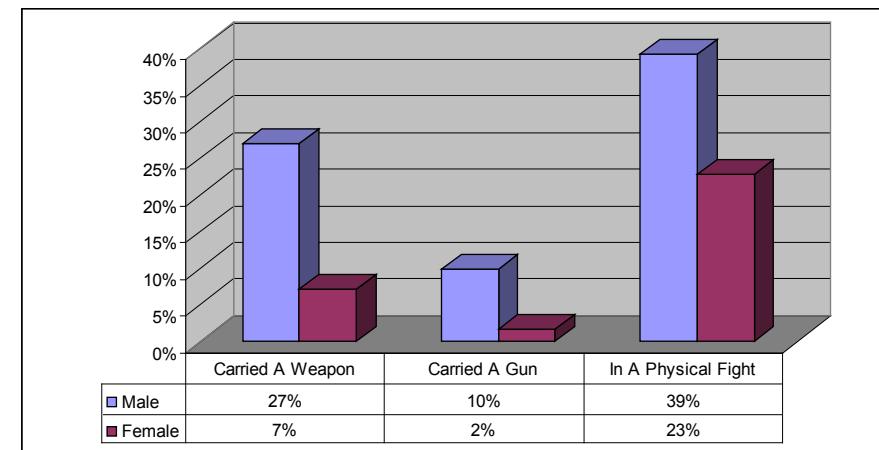
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- | | | | |
|------------|--------------|----------------|-----------|
| abusive | consequences | peer pressure | threaten |
| alienation | exclude | persecution | terrorize |
| bully | hostile | responsibility | tolerance |
| clique | loner | tease | |



FACE to FACE Crisis Intervention and Assessment Program 800-395-3223

Student Weapon & Physical Violence Survey Results



Percentage of students who carried a weapon¹ or a gun on at least 1 day during the 30 days before the survey or who had been in a physical fight one or more times during the 12 months before the survey, by sex.

¹ For example: a gun, knife or club. Differences between males and females are statistically significant based on the test analyses. Data Sources: Centers for Disease Control and Prevention, Youth Risk Behavior