

Student Perpetrators of School Violence – Brief Facts and Tips

Acts of violence at school, especially school shootings that involve fatalities, are perhaps the most potentially traumatic type of crisis that schools can experience. When the perpetrator of such violence is a student at the school, the needs of the school community and thus response and recovery efforts change and become more complex. Below are some considerations that go beyond standard crisis response and recovery interventions and procedures that may be helpful in these situations.

1. One of the most challenging aspects of student perpetrated school violence is the impact the incident can have on perceptions of safety and security at school. Students may begin to question the ability of the adults to keep them safe, as well as the potential for violence of their other peers.
Helpful strategies include:
 - a. Having increased security and adult presence at the school in the days and weeks after the crisis;
 - b. Ensuring that there are safe ways for students to report threats, concerns, and information they have regarding potential violence and ensuring that students are aware of these procedures;
 - c. Explaining to the students that a safety/crisis plan is in place and providing concrete examples of the steps that school personnel are taking to ensure/increase safety and security;
 - d. Providing opportunities for students to discuss these feelings and concerns and have them normalized.
2. Friends of the perpetrator often struggle with the fact that someone they knew and cared about did something so terrible. Empathy and acknowledgement of both their feelings and the fact that they may feel quite conflicted can be helpful. Let them know that you understand and that what they are feeling is normal. Let them know that it's okay to still love the person and that it's okay to grieve their loss.
3. Friends of the perpetrator will also likely need a safe space where they can process their feelings and experiences. They often feel very isolated and may even be targets of the anger of others. Conducting group crisis intervention and group counseling with these peers can provide them with an opportunity to share with others who have similar concerns. Doing these interventions with naturally occurring groups can be especially helpful (e.g., if the perpetrator was on the swim team, a group can be done with the other swim team members).
4. It is important to emphasize tolerance among the students, staff, and parents for the different levels of emotions and different expressions of grief. These types of incidences can increase the likelihood of community divisions so it is especially important to attend to conversations and activities that bring together a community.
5. Once school resumes, it can be incredibly helpful to have a mental health professional or crisis responder follow the class schedules of both the perpetrator and the victim(s) for a few days. This allows for group interventions and processing and is a nice way to provide support to classmates who saw these individuals every day, as well as to address the proverbial elephant in the room of the student's absence.
6. While supporting the student body following a student perpetrated act of school violence is obviously a priority, it is important to remember that the adults in the school community will also be affected. It is especially vital to consider the needs of teachers, coaches, counselors and other individuals who may have had a close relationship with the student. These individuals may have similar feelings and issues as the perpetrator's friends and may need some time and additional support to address their grief and trauma.
7. Finally, keep in mind that with time, the school community will heal. Remind each other that things will get better and celebrate the school's spirit and resilience.

References:

Crepeau-Hobson, F., Sievering, K., Armstrong, C., & Stonis, J. (2012). A coordinated mental health crisis response: Lessons learned from three Colorado school shootings. *Journal of School Violence* 11(3), 207-225.