



ACT To Save Life

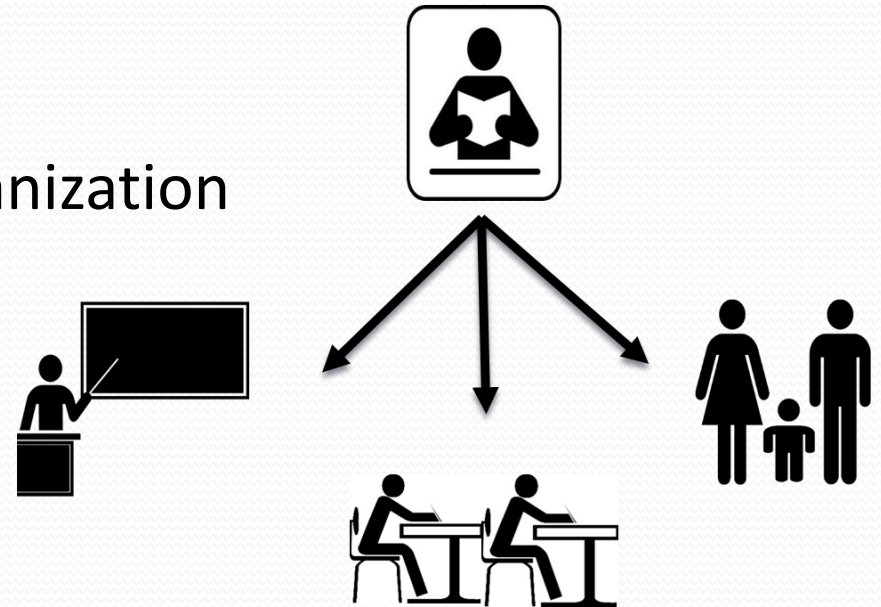
Engaging your school community in implementing a universal, evidence-based suicide prevention program

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NV Department of health and Human Services

Learning Objectives:

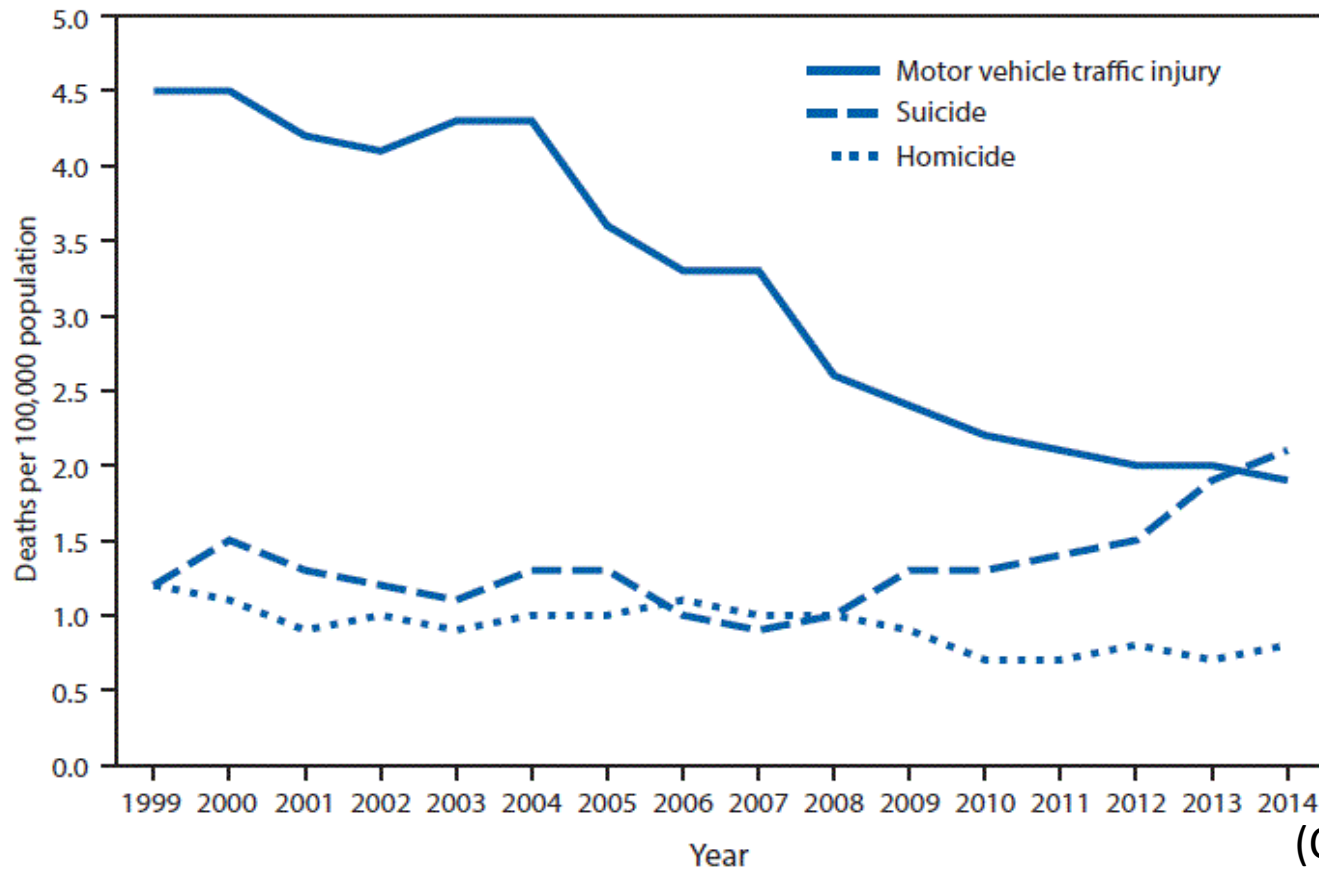
1. Implementing universal suicide prevention for students
2. Training faculty and staff in youth suicide prevention
3. Reaching out to parents
4. Building a Suicide Safer Organization and Community



The Facts

- The prevalence of teens reporting a major depressive episode increased by 37% from 2005 to 2014 (Mojtabai et al., 2016)
- The number of students hospitalized for thinking about or attempting suicide doubled between 2008 and 2015 (Plemmons et al., 2018)
- Suicide is the second leading cause of death for 11-17 year-olds (CDC, 2016)
- Talking about suicide **will not** plant the idea

Suicide Risk for Children 10-14



(CDC, 2016)

Why Universal Prevention?

- Target the entire population, such as a school or grade, so that all students learn lifesaving skills
- Overrides adults' assumptions about who may be most at risk so that no student flies under the radar
- Focus on risk reduction and health promotion, reducing stigma across the whole population
- Promotes learning and resiliency in all students so that peers can help each other

Why Signs of Suicide (SOS)?

- Only universal school-based suicide prevention program that has shown a reduction in self-reported suicide attempts in randomized controlled trials
- Compared with students in the control group, students who received SOS:
 - Were 64% less likely to report a suicide attempt in the next 3 months
 - Reported more favorable attitudes toward getting help for themselves or friends for depression and/or suicidal thoughts

Schilling et al., 2016

SOS Components

**Suicide prevention education:
video and guided discussion**

Friends for Life

Utilize the [discussion guide](#) to facilitate a conversation with students in response to the video. The discussion guide contains talking points for concepts to emphasize and questions to ask. Feel free to expand upon the talking points and encourage your students to share their own observations.



SOS Signs of Suicide® Prevention Program

Student Screening Form

- Age: _____
- Ethnicity: Hispanic/Latino Not Hispanic/Latino
- Grade: _____
- Race: (Check all that apply)
 - American Indian/Alaska Native
 - Black/African American
 - White
 - Female
 - Male
 - Transgender
 - Native Hawaiian/Other Pacific Islander
 - Other/Multicultural
 - Asian
- Are you currently being treated for depression? Yes No

Brief Screen for Adolescent Depression (BSAD)*

Please answer the following questions as honestly as possible by circling the "Yes" or "No" response.

In the last four weeks...

- | | | |
|--|-----|----|
| 1. Have you felt like nothing is fun for you and you just aren't interested in anything? | Yes | No |
| 2. Have you had less energy than you usually do? | Yes | No |
| 3. Have you felt you couldn't do anything well or that you weren't as good-looking or as smart as most other people? | Yes | No |
| 4. Have you thought seriously about killing yourself? | Yes | No |
| 5. Have you EVER, in your WHOLE LIFE, tried to kill yourself or made a suicide attempt? | Yes | No |
| 6. Has doing even little things made you feel really tired? | Yes | No |
| 7. Has it seemed like you couldn't think as clearly or as fast as usual? | Yes | No |

Identifying Trusted Adults

List a trusted adult you could turn to if you need help for yourself or a friend (example: "My English teacher," "counselor," "my mother," "uncle," etc.)

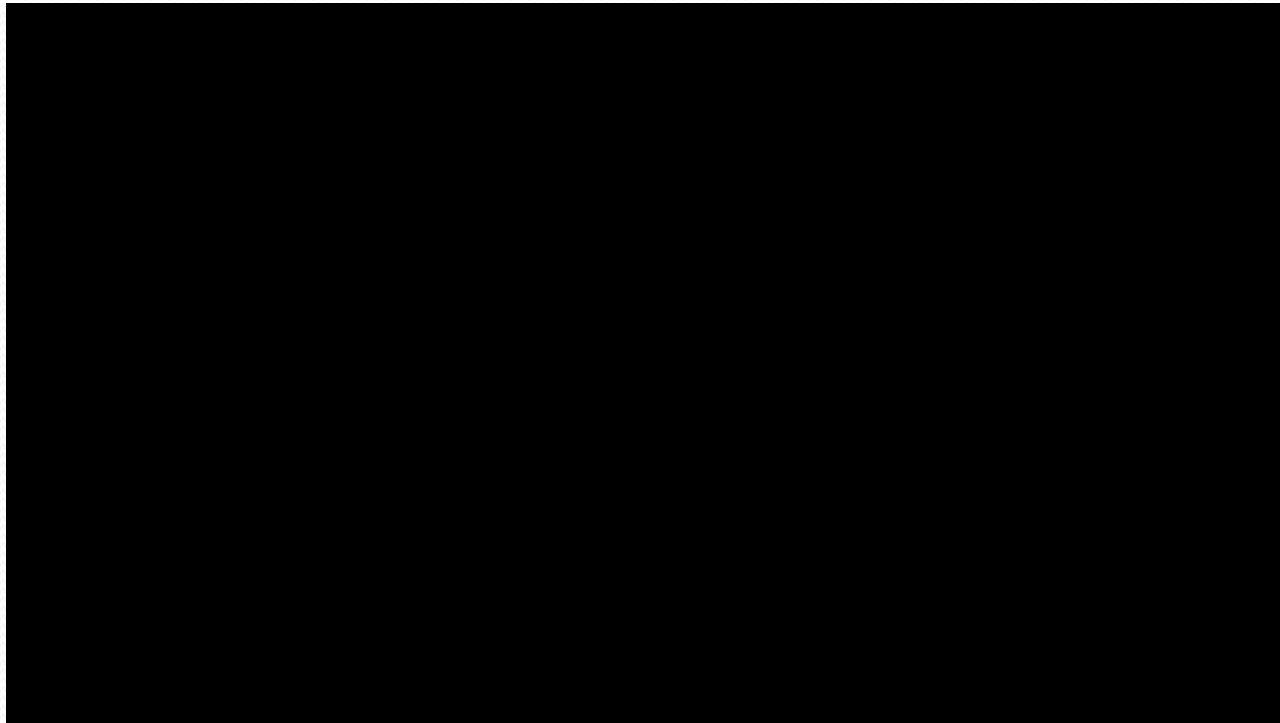
In school _____

Out of school _____

**Mental health screening:
depression and signs of suicide**



Suicide Prevention Education



Identifying Students In Need

Students are identified in 3 ways:

- Help-seeking: students ACT and tell a trusted adult
- Self-referral slip
- Screening

BASED ON THE VIDEO AND/OR SCREENING, I FEEL THAT:

- I need to talk to someone ...
- I do not need to talk to someone ...

ABOUT MYSELF OR A FRIEND.

NAME(PRINT): _____

HOMEROOM SECTION: _____

TEACHER: _____

IF YOU WISH TO SPEAK WITH SOMEONE, YOU WILL BE CONTACTED WITHIN 48 HOURS. IF YOU WISH TO SPEAK WITH SOMEONE SOONER, PLEASE APPROACH STAFF IMMEDIATELY.

Brief Screen for Adolescent Depression (BSAD)

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 In school _____
 Out of school _____

SOS Signs of Suicide® Program - Your BSAD Score and What It Means

The BSAD (Brief Screen for Adolescent Depression) is a self-survey so you can check yourself for depression and suicide risk. Your BSAD survey score will tell you whether you should see a school health professional (psychologist, nurse, counselor or social worker) for a follow-up discussion.

To find out your BSAD score, add up the number of "Yes" answers to questions 1-7. Use the table below to find out what your score means and what you should do.

SCORE	MEANING
0-2	It is <i>unlikely</i> that you have depression. However, if you often have feelings of sadness you should talk to a trusted adult (parents/guardians/school staff person) to try to figure out what you should do. Even though your score says that you are not depressed you might still want to talk to a healthcare professional if your feelings of sadness do not go away.
3	It is <i>possible</i> that you have depression. You <i>should talk with a healthcare professional</i> . Tell a trusted adult (parent/guardian/school staff person) your concerns and ask if they could help you connect with a mental health professional. If it makes you feel more comfortable, bring a friend with you. Tell the adult that you <i>may be</i> clinically depressed and that you might need to see a mental health professional.
4-7	It is <i>likely</i> that you have depression. You probably have some significant symptoms of depression and you <i>should talk to a mental health professional</i> about these feelings. Tell a trusted adult (parent/guardian/school staff person) about your feelings and ask if they could help you see a mental health professional.

Questions 4 and 5 These two questions are about *suicidal* thoughts and behaviors. If you answered "Yes" to either question 4 or 5, you should see a mental health professional immediately - *regardless of your total BSAD score*.

Identifying Trusted Adults

Concerned about yourself or a friend? It's important to know who you can turn to if need to talk. If you had trouble identifying a trusted adult, ask to speak with the person implementing the SOS Program. Let someone know you need help building this important connection. If you are worried about your friend but your friend refuses to speak to someone, ask your trusted adult to help get your friend the assistance he or she needs.

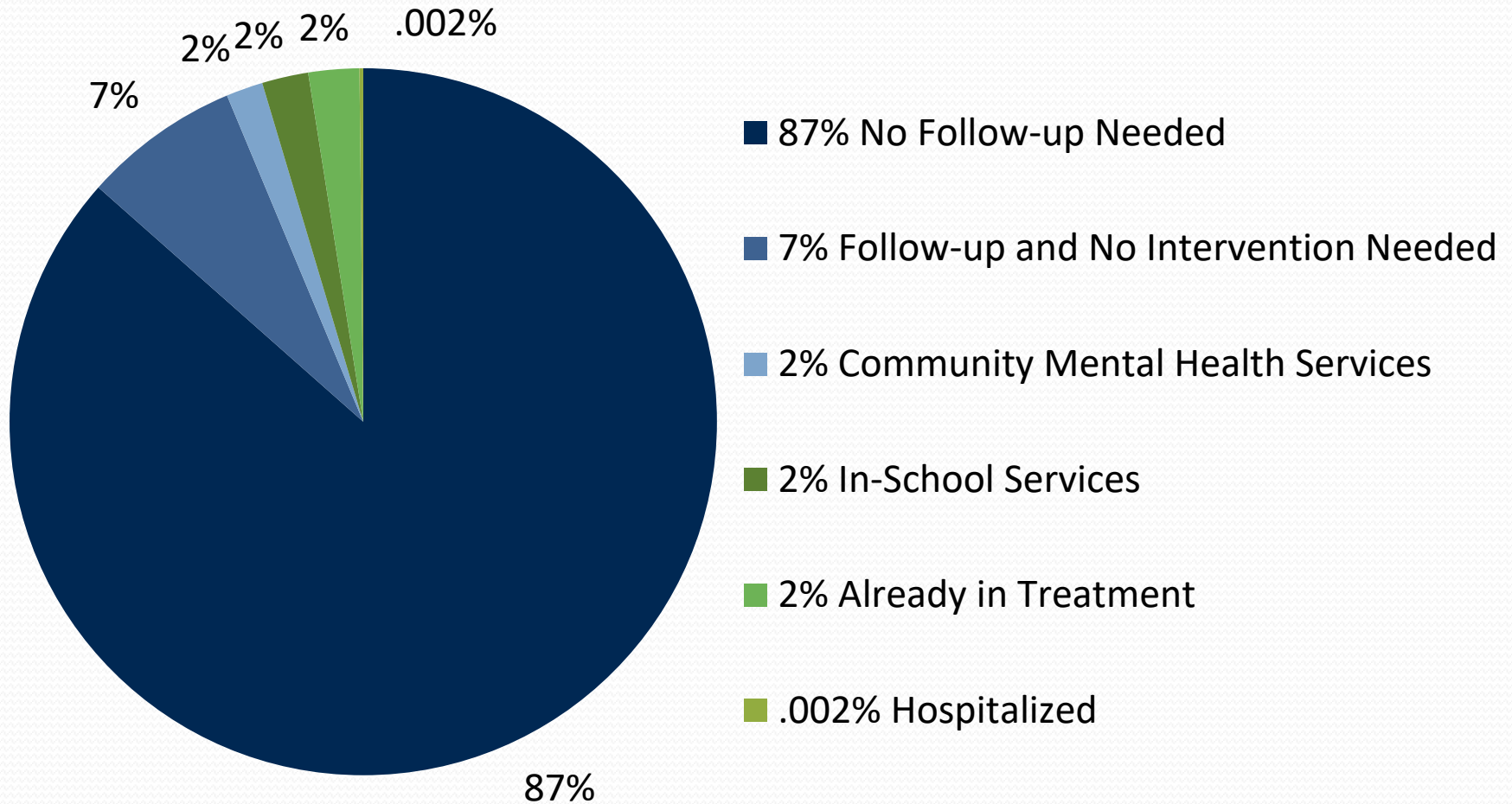
Bottom line: Take these screening results seriously and get help. You or your friend deserves to feel better, and help and support are available to you. **If you are worried about yourself or someone else, call the National Suicide Prevention Lifeline, at 1-800-273-TALK (8255).**

Copyright © 2013 Screening for Mental Health, Inc. All rights reserved.
 This instrument is designed for screening purposes only and is not to be used as a diagnostic tool.

Students Receiving Follow-Up

- Data collected from schools around the country have shown similar follow-up rates for all schools (whether they conduct anonymous or identified screening)
- **Anonymous screening:** CHADS Coalition has served over 100,000 St. Louis area students and reports an average follow-up rate of 12%
- **Identified screening:** Elyssa's Mission has served over 300,000 Chicago area students and reports an average follow-up rate of 13%
 - Approximately 50% of these students (6-7% of total population receiving SOS) were referred for additional evaluation/services

Type of Intervention



Logistics: Who?

- Key staff roles
 - Who will implement in the classroom?
 - Who will handle emergencies?
 - Who will provide non-emergency follow-up on the day of the program and weeks following?
- What additional staff should you engage?
- Student population
 - Pilot with a few classrooms first
 - Universal prevention rather than targeted approach

Logistics: When and Where?

- Dates/times for SOS program
- Locations
 - Avoid large assemblies/presentations
 - Provide alternate setting for those not participating
 - SOS can be integrated into the curriculum of science, health class, life skills, etc.
 - SOS can be implemented in any class setting (ex. 9th grade English) without a direct correlation to the curriculum



Engaging Trusted Adults

Best practices and new tools

Training Faculty and Staff

Faculty and Staff Training

The SOS Program encourages students to seek help from trusted adults. It is important for adults to receive suicide prevention training so that they are equipped to respond to students in need. Utilize the Training Trusted Adults video, accompanying [PowerPoint](#), and [handouts](#) to help familiarize staff with suicide prevention and the SOS Program.



Handouts/Resources for Faculty and Staff Training

Resources

- 📄 FACULTY AND STAFF TRAINING POWERPOINT
- 📄 STAFF TRAINING CHECKLIST
- 📄 TURN THEM AROUND: 10 STEPS TO TEACHER BUY-IN

Training Handouts

- 📄 YOUR ROLE IN PREVENTING YOUTH SUICIDE
- 📄 ACT FOR FACULTY AND STAFF
- 📄 YOUTH SUICIDE: POPULATIONS AT ELEVATED RISK
- 📄 RISK FACTORS, WARNING SIGNS, PRECIPITATING EVENTS

Student Bio: Jane

Jane, a very friendly and social 8th grade student recently lost her aunt to suicide and has been treated for anxiety in the past. She is very active and competitive with the debate team. In the last month you've seen her grades drop dramatically, she's missed 3 days of school (which is unusual) and she's been seen crying in the bathroom. Today you just found out that her boyfriend broke up with her. She's sitting in the back of your classroom between classes.

Risk Factors

- Aunt's death by suicide
- Mental health concerns (anxiety)

Warning Signs

- Grades dropping
- Missing school
- Crying in the bathroom

Protective Factors

- Social
- Actively involved in school activities

Precipitating Event

- Breakup

ACT To Help a Student In Need

Acknowledge that you are seeing signs of depression or suicide in a student and that it is serious

Care: Let the student know you **care** about them and you can help

Tell: Follow your school protocol and **tell** your mental health staff

Key Message for Faculty/Staff

1. Reach out to students if you are concerned
2. Connect students to mental health staff/administrator
3. Provide ongoing support:
 - Continue to check in with student
 - Talk to the school's mental health staff/administrator about any concerns
 - Stay in touch with the school's mental health staff/administrator

Engaging Parents

- Thoughts of suicide are often hidden because youth are confused, embarrassed or ashamed
- Research shows:
 - 50-90% of parents were unaware of their child's suicidal thoughts
 - 60-95% of parents were unaware of suicide attempts reported by their child
- By raising parental awareness, schools partner with parents to watch for warning signs in their children and instill confidence to seek help for their child

Warning Signs: Watch and Listen

- **Watch** for significant changes in behavior, particularly:
 - Extreme withdrawal
 - Increased or decreased sleep
 - Anger or hostility that is out of character or out of context
 - Increased agitation or irritability
- **Listen** for:
 - Talk about suicide
 - Sounding hopeless
 - Sounding overwhelmed by emotional pain or distress

Reduce Risk

- Open up a conversation about mental health
 - Over 90% of people who die by suicide have a mental health disorder (most commonly depression)
 - Depression is treatable but without treatment, a teen may begin to feel so hopeless that they consider suicide
- Do not store guns in your home
 - Suicide crises are often short-term but having access to a gun makes it easier to carry out the act in an instant
- Respond immediately if your child is showing warning signs

Parent Access to SOS Portal

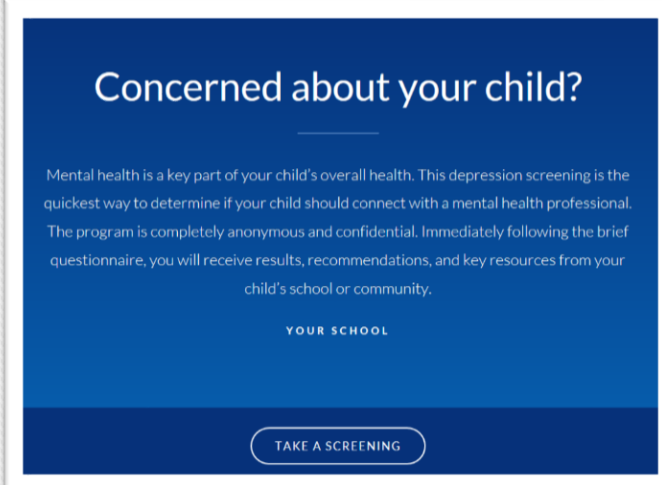


Welcome!

SOS Signs of Suicide Prevention Program

Our school is participating in the SOS Signs of Suicide Prevention Program. This portal is designed to provide parents with information about our suicide prevention efforts and helpful tools for supporting your child's mental health.

[LEARN MORE](#) [WATCH VIDEO](#)

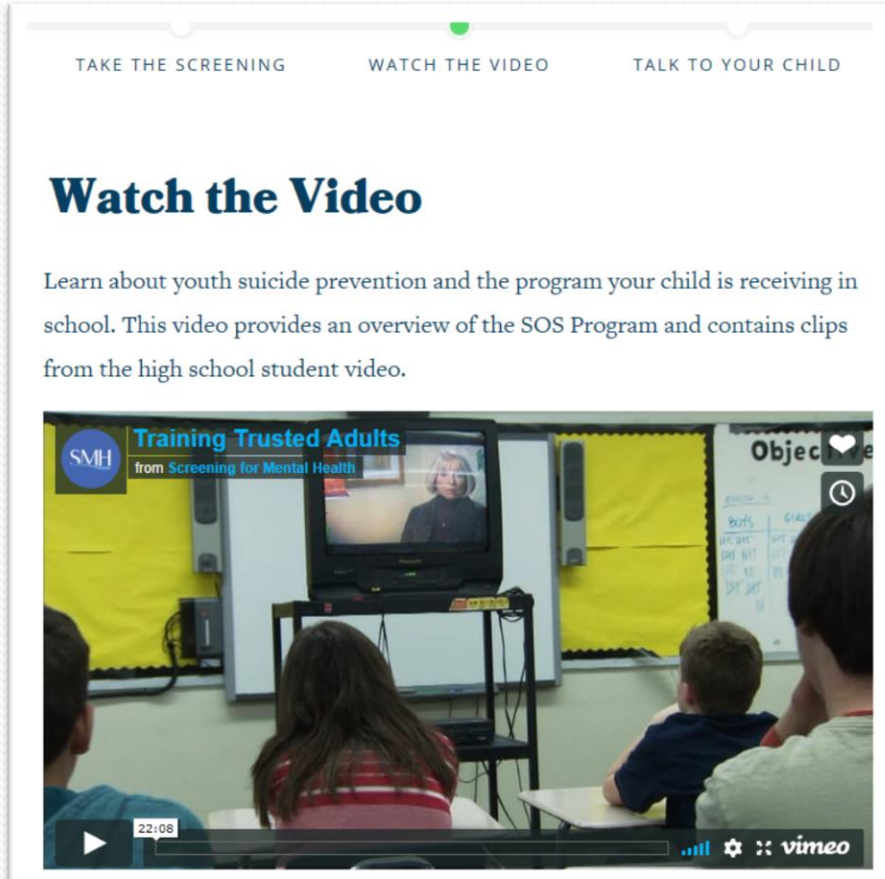


Concerned about your child?

Mental health is a key part of your child's overall health. This depression screening is the quickest way to determine if your child should connect with a mental health professional. The program is completely anonymous and confidential. Immediately following the brief questionnaire, you will receive results, recommendations, and key resources from your child's school or community.

YOUR SCHOOL

[TAKE A SCREENING](#)



TAKE THE SCREENING WATCH THE VIDEO TALK TO YOUR CHILD

Watch the Video

Learn about youth suicide prevention and the program your child is receiving in school. This video provides an overview of the SOS Program and contains clips from the high school student video.

Training Trusted Adults
from Screening for Mental Health

SMH

Object

22:08

vimeo

Let's Review- SOS in 10 Steps

1. Implementation team prep
2. Work with administration to update policies and schedule program
3. Work with community partners to gather referral resources
4. Train faculty and staff as trusted adults
5. Reach out to parents
6. Implement SOS with students
 - Video and discussion/BSAD screening and self-referral slip
7. Follow up with students requesting help/ screening in
8. Contact parents, refer for further assessment, etc. as needed
9. Document all suicide prevention/intervention activities
10. Plan for next time

For More Information Contact:

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www.MentalHealthScreening.org

NV Suicide Prevention

A Basic Overview of NV Suicide Prevention, Intervention and Postvention



A Program of the
Nevada Office of Suicide Prevention

History of Suicide Prevention Efforts in Nevada

- 2003 Suicide prevention legislation (SB49, SB36, SCR 3, 4, & 5) adopted in Nevada
- 2005 Nevada Coalition for Suicide Prevention established; State of Nevada receives Cohort 1 Garrett Lee Smith grant \$1.2 million;
- 2005 Nevada Office of Suicide Prevention established;
- 2007 Nevada Suicide Prevention Plan released;
- 2008-2011 Three Garrett Lee Smith Awards come to Nevada (ITCN/IHBN, OSP and Pyramid Lake Paiute Tribe; 4 MSPI grants awarded to NV tribes;
- 2009 State of Nevada awarded Garrett Lee Smith grant for \$1.5 million, funding ended June 2013;
- 2013 Fund for a Healthy Nevada funds office and two state positions added;
- 2014 SAMHSA grants impacting mental health, safe and healthy learning environments, youth suicide prevention (Project Aware: school-based mental health and YMHFA)
- 2015 TMCC Awarded Campus Suicide Prevention grant;
AB 93, MH/BH suicide prevention training
- 2015 CVE Counter Violence Extremism
- 2016 CRSF Report recommendations implementation plan; 10 year anniversary
- 2017 State plan updated AB 105 passed;

Suicide Statistics

United States, 2016

- Over 44,965 deaths
- Firearms used in over 51.1% of suicides (NV 51.3%)
- 3.7 male deaths to every female death
- A suicide every 11.7 minutes
- 123 Suicides a day

Nevada, 2016

- 5th highest rate
- 2nd leading cause of death 18-44, 1st for youth 8-17 years of age
- Nevada's Elderly have highest rates 65+
- More suicides than homicides (211), motor vehicle accidents (359)

References: Depression & Suicide

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QuickStats: Death Rates for Motor Vehicle Traffic Injury, Suicide, and Homicide Among Children and Adolescents aged 10–14 Years — United States, 1999–2014. *MMWR Morbidity & Mortality Weekly Report* 2016;65:1203. DOI: <http://dx.doi.org/10.15585/mmwr.mm6543a8>

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Office of Suicide Prevention Training Opportunities

- **Resource Introduction (15 – 30 minutes)**
- **Suicide Prevention Training:**
 - **Nevada Gatekeeper for Specialized Training Environments**
 - **Nevada Gatekeeper Train the Trainer for FSAs (4 hours)**
 - **suicideTALK, (Suicide Awareness) 1.5 hours**
 - **Signs of Suicide Middle and High School programs and screenings**
 - **safeTALK: (Suicide Alertness) 4 hours**
 - **Youth Mental Health First Aid 8 Hours**
 - **ASIST: (Applied Suicide Intervention Skills Training)**
Two day workshop

Office of Suicide Prevention

Suicide Prevention Coordinator, Misty Vaughan Allen, MA
4150 Technology Way Suite 101, Carson City, NV 89706
Phone: (775) 684-2236, E-mail: mvalLEN@health.nv.gov

**Suicide Prevention Trainer
and Outreach Facilitator**

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