Preventing Youth Suicide: Using Non-Traditional Methods to Create Community Change and Program Sustainability

Stephana Sidberry, MPH
2010 Joint Annual Meeting of STIPDA and CDC Core I & II State Injury Grantees
April 15, 2010
Suicide Prevention: A National Perspective

- Suicide is the third leading cause of death among those aged 15-24
  - Motor vehicle accidents (31%)
  - Homicides (15%)
  - Suicidess (11%)

- More than 4,000 adolescents and young adults die by suicide each year

- President’s New Freedom Commission on Mental Health (2003) recognized youth suicide prevention as a major priority
### Suicide Prevention: A North Carolina Perspective

#### Suicides and Suicidal Behavior in 2006

<table>
<thead>
<tr>
<th>Age Group</th>
<th>10-14 year olds</th>
<th>15-19 year olds</th>
<th>20-24 year olds</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Suicides</strong></td>
<td>*</td>
<td>28</td>
<td>81</td>
</tr>
<tr>
<td><strong>Hospitalizations</strong></td>
<td>66</td>
<td>487</td>
<td>509</td>
</tr>
<tr>
<td><strong>ED Visits</strong></td>
<td>131</td>
<td>1104</td>
<td>828</td>
</tr>
</tbody>
</table>

### 2007 High School YRBS

- 12.5% considered suicide in the past 12 months
- 9.5% planned suicide in the past 12 months
- 13.3% attempted suicide in the past 12 months
Youth Suicide Prevention

Garrett Lee Smith Memorial Act (GLSMA) goals:

- Build statewide, interagency coalitions to address suicide prevention;
- Promote awareness of suicide as a public health problem;
- Implement evidence-based programs focused on early identification and referral;
- Improve access to appropriate mental health or support services for at-risk youth; and
- Improve the collection and reporting of data to support program efforts.
North Carolina’s Original Grant Design

- Comprehensive Media Campaign based on feedback from 8 youth focus groups.

- Master Trainers in Living Works’ Applied Suicide Intervention Skills Training (ASIST) and safeTALK T4T to train ASIST and safeTALK gatekeepers.

- RFA for School-Based School-Linked Health Centers (SBSLHC) fund up to 8 out of 56.
  - Train 15 staff in ASIST
  - Train 30 staff in safeTALK
  - Implement RESPONSE or Lifelines youth suicide prevention curriculum
Living Works Education, Inc.

- Based in Canada, only US office located in Fayetteville, NC.

- LivingWorks has been helping communities become suicide-safer since 1983.

- Developed using Rothman’s social research and development (R&D) model.

- Their programs prepare community helpers to intervene and prevent suicide.

- The learning experiences are interactive, practical, regularly updated and customizable.
SafeTALK Gatekeeper

- About three-hours in duration

- Prepares anyone over the age of 15 to identify persons with thoughts of suicide and connect them to suicide first aid resources.

- safeTALK-trained suicide alert helper will be better able to:
  - move beyond common tendencies to miss, dismiss or avoid suicide
  - apply the TALK steps (Tell, Ask, Listen and KeepSafe) to connect a person with suicide thoughts to suicide first aid, intervention caregivers.
ASIST Gatekeeper

- A two-day, skills-building workshop that prepares caregivers to provide suicide first aid interventions.

- ASIST-trained first aid intervention caregivers will be better able to:
  
  - identify people who have thoughts of suicide;
  
  - review current risk and develop a plan to increase safety from suicidal behavior for an agreed amount of time
  
  - follow up on all safety commitments, accessing further help as needed.
Lifelines Suicide Prevention Program

- A comprehensive suicide prevention program that educates students in grades 8-10 about suicide and students’ role in suicide prevention.

- Provides information on where to find suicide prevention resources in the school and community.

- Materials also provides trainers information on identifying and referring students who might be at risk for suicide.

- Includes a presentation for parents that answers questions about youth suicide and prevention, and it involves them in the school’s suicide prevention activities.

- It fits easily into health class programming and lesson plans.
Barriers in Original Design

- Only one SBSSLHC applied for RFA
  - Did not understand the relationship between the SBSSLHCs and the school systems
    - Required Superintendents approval
    - Required SBSSLHCs to implement student curriculum
    - SBSSLHCs operate like “mini” hospitals

- Timing of RFA conflicted with major state funding application

- Sent out requests during Spring Break
School Based/Linked Health Centers 2010

• 56 Health Centers in 22 counties
Revised Grant Design

- Expanded comprehensive Media Campaign
- Master trainers in ASIST and safeTalk
- Provide ASIST training to all Child and Family Support Teams (CFSTs)
- Provide safeTalk gatekeeper training to staff that work directly with students, such as teachers, coaches, bus drivers, in schools that have ASIST trained staff.
- Trainings also available to SBSLHCs.
Rationale for New Grant Design

- CFSTs are located in the 100 schools that have the highest risk for students with academic failure or out of home placement.

- CFSTs consist of one social worker and one school nurse.

- Purpose of the teams is to provide comprehensive, family centered, school and community coordinated resources for at risk students.
Benefits of New Grant Design

- CFSTs already work with students that are at high risk for suicide.
- CFSTs already have established relationships with community resources.
- CFSTs model has already demonstrated improvements in student academic and health outcomes.
- CFSTs position have low turn over which provides sustainability to the program.
Old vs. New Design Comparison

Old
- Train 45 school staff.
- Contracts with up to 8 SBSSLHCs
- Only reach youth in only 8 counties.

New
- Trained/training 437 CFSTs, health center and school staff.
- Contract with the NC School Health Training Center only.
- Reaching youth in 39 counties.
Training Coverage with Revised Program Plan

Now reaching 39 counties!
Expectations for School Systems

- Identify school staff for trainings in winter 2009/2010

- Identify a lead person
  - Coordinate media campaign
  - Collect data for evaluation

- Track referrals for students identified as at risk for suicide
Cross Site/National Evaluation

- GLSMA addresses the national need for research and evaluation
  - Ability to do large sample comparisons of early intervention activities
  - Gather information on the utilization and outcome of best and promising practices
- Has resulted in one of the largest databases of
  - Early intervention activity proximal outcomes
  - Provider training experiences
  - Referral Network processes and agency interactions
Cross Site/National Evaluation

- National cross site evaluation being conducted by MACRO International
- Training Exit Survey
- Early Identification, Referral and Follow-Up
Training Exit Survey

**Purpose**
- Assesses the type of interaction the participant has with youth

**Content**
- The training activities
- The participants’ intended use of the skills and knowledge learned
- Participants satisfaction with the training
Early Identification, Referral & Follow-Up

**Purpose**
- To track program activity related to early identification of youth at risk for suicide, referral for services, and linkages to those services.

**Content**
- Demographic information (i.e., age, race, gender)
- Referral information (i.e., whether a mental health or non-mental health referral was made, the date and type of referral)
- Follow-up to referral information (i.e., whether the youth received services, and the date and type of the service received if received a mental health service)
Early Identification, Referral & Follow-Up

**School Trainings**

- All students identified for referral by trainees of ASIST and safeTalk must be tracked (student tracking is done by NC Wise number **NOT** name).

- One contact person will be identified at each school system who will be responsible for assigning and tracking student ID numbers.

- Any trainee that identifies a student at risk for suicide must share the information with the contact person to receive a student ID number.
North Carolina/Local Evaluation

- University of North Carolina Injury Prevention Research Center:
  - Evaluation of ASIST training of trainers (T4T)
  - Evaluation of safeTALK training of trainers (T4T)
  - Evaluation of pre and post test knowledge and skills for ASIST and safeTALK training participants
  - 3 month and one year follow-up with ASIST training participants
“Thanks for such an excellent training. I am weary of so many mediocre workshops and trainings and greatly appreciate attending events that matter.

-P. Etzold
Bill McCullough from the Cleveland County School System reported that a staff member saved a student’s life by preventing a suicide attempt the week after she attended the ASIST training.

Since January 2010, 28 suicide prevention student referrals have been made as a result of the trainings from this grant.
Lessons Learned

- Have/hire knowledgeable staff.

- You not only need have the right community people at the table, you have to ask the right questions.

- SBLHC operate like mini hospitals and are incapable of implementing prevention programs.

- Creating Master T4T trainers creates sustainability that can continue to create gatekeepers and prevent suicide indefinitely.
North Carolina Contact Information

Jane Ann Miller, Program Manager
NCDHHS Division of Public Health
Injury and Violence Prevention
1915 Mail Service Center
Raleigh, NC 27699-1915
919.707.5430
Jane.miller@dhhs.nc.gov

Sherry Lehman, School Specialist
NCDHHS Division of Public Health
Injury and Violence Prevention
1915 Mail Service Center
Raleigh, NC 27699-1915
919.707.5349
Sherry.lehman@dhhs.nc.gov
Living Works Contact Information

Living Works
P.O. Box 9607
Fayetteville, North Carolina 28311

(888)733-5484 or (910) 867-8822
Fax: (910) 867-8832

Email: usa@livingworks.net

Web: http://www.livingworks.net
Lifelines Contact Information

Hazelden Publishing
15251 Pleasant Valley Road
P.O. Box 176
Center City, MN 55012-0176

(800)328-9000 or (651)213-4200
Fax: (651) 213-4590

Email: customersupport@hazelden.org