



Response

Second Edition

RESPONSE Overview



A Comprehensive High School Based Youth Suicide Prevention Program

You Can Help Prevent the Risk of Suicide

“Suicide is the third leading cause of death among youth aged 15-24 in the United States.”



“Over 80% of parents are unaware of their child’s suicide ideation. For this reason and many others, schools are the best possible setting for prevention efforts.”



“Addressing depression and suicidal behavior directly and responding immediately will help reduce the risk of suicide.”

For more information about RESPONSE,
Visit ColumbiaCare Services Inc.’s
Center for Suicide Prevention at
www.columbiacare.org

or

ColumbiaCare Services, Inc.
3587 Heathrow Way
Medford, OR 97504
541.858.8170

Overview

The Need

Why should suicide prevention be a priority when there are so many other pressing demands of a school? Shouldn't this be the responsibility of the parents?

If parents were aware of their child's suicidal behavior, most would do their part to prevent it, however, studies have shown that, as much as 86% of parents were unaware of their child's suicidal behavior. Even if they were aware, peers often know much more about the details of suicidal ideation and behavior than adults.

Suicidal thoughts can emerge in other ways in the school environment – journal entries, comments to teachers and counselors, and notes – are just a few examples of communication beyond the parent's purview, but can be addressed by those within the school. How they are addressed depends on the sensitivity of staff and students to these signs and their willingness to do something about it.

Introduction

RESPONSE is a comprehensive high school-based program designed to increase awareness, heighten sensitivity to depression and suicidal ideation, change attitudes, and offer response procedures to refer a student at risk for suicide.

The program is delivered in a school kit, which includes an Implementation Manual with step-by-step instructions for busy administrators; a Student Component with four 50-minute lesson plans; and an In-Service Manual with complete instructions on delivering a 2-hour staff training. The Student Component and In-Service Manual come with PowerPoint™ presentations and compelling suicide prevention videos (DVDs) that encourage help-seeking behavior. A Parent Component is available for purchase separately.

An effective suicide prevention program requires systemic changes that allow for sustainability. This program includes technical assistance for key staff to ensure that suicide prevention efforts are sustained at your school.

RESPONSE also provides sample guidelines for suicide prevention, intervention and postvention. It is recommended that these guidelines are integrated into the school's crisis response plan. If a school district does not require a drafted policy for suicide prevention, a school may choose to adopt guidelines as an alternative.

Program Development, Review and Evaluation

Developed in collaboration with schools, RESPONSE is based on current research on effective school-based suicide prevention programs [Kalafat 2003, Lazear & Ketal 2003, Miller & DuPaul 1996, Poland & Lieberman 2002].

This program is also a recognized Best Practice listed with the SPRC/AFSP Best Practices Registry for Suicide Prevention (BPR). The content has been reviewed by a panel of suicide prevention experts for accuracy, safety, likelihood of meeting goals and objectives, and adherence to prevention program guidelines.

In an evaluation of RESPONSE conducted by the Regional Research Institute at Portland State University, knowledge of suicide prevention was tested with 5 items before and after the training. A statistically significant increase in knowledge was observed, with a Glass' Δ of .78 **a large effect**. This means that the average trainee at post-test had a higher knowledge score than 77% of the trainees pre-test.

Preparation and readiness to intervene with an at-risk youth were measured with 6 Likert scaled item at pre and post - test. For example, participants were asked to rate how prepared they feel: to ask appropriate questions and suicide; identify suicide risk indicators; and, persuade a youth to seek help. A statistically significant increase in preparation and readiness was found at post-test, with a **very-large effect size** (Glass' $\Delta = 1.33$). This size difference means that the average post-test trainee had higher preparation/readiness than 89% of the trainees at pre-test.

Attitudes about suicide were measured with three Likert scaled items that tapped comfort with discussions of suicide, knowledge of key staff members to help with an at-risk youth, and awareness of the warning signs of suicide. There were statistically significant increases in these key suicide prevention and intervention variables, with a **very-large effect** (Glass' $\Delta = 1.27$). The average post-training score was higher than 88% of the pre-training scores.

To summarize, those who were trained in RESPONSE demonstrated large changes from pre-training to post-training in the three knowledge and attitude variables.

Program Implementation

Before implementing the awareness components, the program requires that administrative staff identify key staff to serve on a suicide prevention team. Key school-based staff will include the principal or vice-principal, a school-based RESPONSE Coordinator, 2 "suicide contacts," responsible for handling referrals, and counselor(s).

If a school district is implementing RESPONSE rather than an individual school, a school district RESPONSE coordinator will also be a member of the team; his/her role is to oversee the implementation of RESPONSE on a district level. This team will meet quarterly during the first year of implementation. After the first year, the suicide prevention team will meet as needed to debrief suicide-related incidents. The team will meet at least twice during the school year to assess the progress of the program.

The following is information on laying the foundation of RESPONSE and an overview of awareness components. Specific responsibilities of key staff and step-by-step implementation procedures are provided in the RESPONSE Implementation Manual.

Disclaimer

No suicide prevention program can guarantee that it will prevent all suicides. Adherence to the activities in RESPONSE will not ensure a successful outcome for every individual, nor should RESPONSE be construed as including all proper methods of care or serve as a standard of care. Accordingly, this program is not to be considered as a suicide "cure" or a definitive preventative set of measures.

Foundation

Preparing Your School or District

A wide body of research indicates that schools must take a comprehensive approach to suicide prevention and maintain prevention efforts over time. RESPONSE is designed to assist schools in the process of laying a strong foundation before the awareness components are implemented. In addition, the program provides technical assistance and tools to maintain the program. Doing this groundwork insures that referrals from students and staff will be handled efficiently.

Implementation Strategies

There are 2 ways to implement the program: school wide or district wide.

The following is a guide to determine whether a district-wide approach will be possible. If you agree with these statements, you may want to consider this approach.

1. You want to harness local resources to handle referrals and crisis situations from your school.
2. You want to maximize the impact of suicide prevention district wide.
3. You want the district to establish clear protocols/policy and consistency among schools.
4. You have more than 3 high schools in your county.

The following is a guide to determine whether a school approach will be possible. If you agree with these statements, you may want to consider this approach.

1. You have exhausted the options to implement RESPONSE on a district level.
2. You live in a small county with limited referral resources.
3. Your school district does not have the resources to devote FTE or stipend to a District RESPONSE Coordinator.

Key Staff

Administration
RESPONSE Coordinator (school level)
RESPONSE Coordinator (district level)
Suicide Contacts
Counselors
The Suicide Prevention Team

Responsibilities

Adopts guidelines, oversees program (global)
Oversees implementation at school level
Oversees implementation at district level
Serve as “go to staff” for referrals
Work with suicide contacts to insure follow-up
Can work at school or district level to harness community partners for referral support

Awareness Components

Staff In-Service Training



The purpose of the staff in-service for RESPONSE is to heighten sensitivity and awareness of depression as well as suicidal ideation among the entire school staff. Staff are also provided with clear steps to respond to a student at risk.

This goal is accomplished by:

- Educating staff about the signs of depression and suicidal ideation.
- Conveying 5 simple steps staff take in handling a student at risk.
- Emphasizing the need to refer a student displaying signs of depression.
- Identifying the suicide contact(s) to staff for follow up.

Staff will also learn:

- Protective factors against suicide.
- Reasons students may not seek help.
- Common missteps that school staff take in handling a student at risk.
- How to talk with a student who is demonstrating signs of suicide.
- Consensus warning signs developed by the American Association of Suicidology.

During the staff in-service training, staff will also have the opportunity to explore their attitudes and behaviors as they pertain to suicide. Research demonstrates that imparting knowledge is beneficial, but through the examination of attitudes and behaviors, staff and students are more likely to change how they would respond to suicide.

This 2½-hour in-service includes clear instructions on how to deliver the training and includes a PowerPoint™ presentation

Staff will leave the training with the knowledge to effectively refer a student at risk for suicide.

Student Component



RESPONSE Lesson Plans

Topic: Youth Suicide Risk Reduction

Curriculum Area: Health

Instructional Level: Grades 9 or 10

Time Per Lesson: 50

Number of Lessons: 4

National Health Education Standards Alignment: 1.12.5, 2.12.3, 2.12.9, 3.12.4, 3.12.5, 4.12.1, 4.12.3, 4.12.4, 5.12.1, 5.12.4, 7.12.3, 8.12.2

Prerequisites: Provided only after other components of RESPONSE are implemented. Deliver student component in context with a related topic such as depression or stress.

The student component consists of 4-50 minute lessons, but can be modified to fit into shorter or longer class periods. It is strongly recommended, however, that the content remains unchanged. In preparation for the student component, it is recommended that the health teacher review the lesson plans, as some preparation is required. The student component should be offered in a health class and offered in context of a related topic such as depression or stress.

The first day of the student training focuses on the person at risk.

Objectives:

- Students will learn signs of depression and suicide.
- Students will learn myths about suicide.
- Students will analyze media to identify signs of depression and suicide in a video.

The second day focuses on attitudes and behaviors that might interfere with getting help.

Objectives:

- Students will analyze a true story to determine *attitudes* that interfere with getting help.
- Students will analyze a true story to determine *behavior* that interferes with getting help.
- Students will analyze attitudes that they hold or have observed that interfere with getting help
- Students will analyze behaviors that they hold or have observed that interfere with getting help.

The third day focuses on helping behavior.

Objectives:

- Students will learn specific steps to help someone at risk for suicide.
- Students will learn who the “suicide contacts” (key staff trained in suicide intervention) are at the school.
- Students will analyze media to identify helping behavior in a video.

The fourth day focuses on skills practice and resources.

Objectives:

- Students will practice intervening with another student exhibiting signs of depression.
- Students will meet the “suicide contact(s)” at the school and learn what to expect when seeking help.
- Students will learn how to respond when someone reveals they are suicidal on the Internet or through other technology.

Parent Mailing

The parent mailing consist of information regarding the program, a flyer with much more detail on depression and suicide, and (an optional) passive or active permission slip for their son/daughter to participate in the RESPONS student component. It is required that the parent mailing go out each year to parents of incoming freshman.

Parent Workshop

Research in the field indicates a clear need for parents to be educated on the signs of depression and suicidal ideation as well as the need to seek treatment; however, the most common strategy for parent involvement—offering a workshop on depression and suicide—has not been successful with other suicide prevention programs regardless of program quality. Attendance at these workshops typically peaks only after a suicide has occurred. The parent workshop is optional, but strongly recommended for schools that can integrate the workshop with another school event.

Contact Information

Center for Suicide Prevention
ColumbiaCare Services, Inc.
3587 Heathrow Way
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541.858.8170

RESPONSE ORDER FORM



ORDER FORM

NAME _____ Phone _____

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SCHOOL OR ORGANIZATION _____

ADDRESS Line 1 _____

ADDRESS Line 2 _____

CITY _____ STATE _____ ZIP _____

Quantity	Description	Unit Price	Total
	High School Edition School Kit - Includes Implementation Manual, Student Awareness Component, In-Service Component, PowerPoint™ presentations and DVD's. Parent workshop purchased separately.	\$425.00	
	High School Edition Parent Workshop - Includes workshop instructions, PowerPoint™ presentation and <i>Never Enough: Parent Companion</i> .	\$175.00	
	High School Edition Extra Teacher Manual - Includes PowerPoint™ presentation and <i>Never Enough</i> DVD.	\$137.50	
	High School Edition Extra In-Service Manual - Includes PowerPoint™ presentation and <i>Never Enough: In-Service</i> DVD.	\$137.50	
	Juvenile Justice Edition Youth Component - Includes PowerPoint™ presentation and <i>Never Enough</i> DVD.	\$150.00	

Note: Your order will not be processed without shipping.

Within the United States:

\$150 - \$375 = \$15.00

\$376 - \$400 = \$17.00

\$400 - \$700 = \$19.00

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3587 Heathrow Way

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Or fax your order to: 541.858.8167 with payment to the address above.

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The Never Enough films were written and directed by Emmy Nominated Writer-filmmaker, Richard T. Wilson of Outreach Arts, Inc.

Founded by Wilson, OutreachArts, Inc. is a nationally recognized educational film company that works with various non-profits and their funders to help provide an innovative educational approach to help increase awareness about crucial health and social issues. For nearly a decade now, the Wilson-penned productions have not only successfully reached into communities nationwide but also to those in need around the world.

The company is probably best known for its critical acclaimed television/video series, MAPLE AVE. which focuses on the everyday issues/struggles of teens and their parents, and currently airs on select PBS stations nationwide. The Emmy Nominated, Telly & Remi Award-Winning series currently reaches millions of North American viewers via PBS and the classroom every year, regularly "telling stories" and "changing lives".

For more information, please visit www.outreacharts.com.