

CONNECTICUT Suicide Advisory Board

Heather Spada, M.A., LPC Suicide Prevention System Manager United Way of CT

Gizmo's Pawesome Guide to Mental Health: An Upstream Approach to Mental Health & Suicide Prevention for Elementary Youth

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Disclaimers

- I deny having at present and/or having had within the past 12 months relevant financial relationships with a commercial interest.
- The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services, the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services.





CT Networks of Care for Suicide Prevention Initiative 2015-2020

Overall purpose:

Reduce suicide attempts and deaths among youth age 10-24 in CT.

Goal 1:

Strengthen CT's support of mental health promotion, suicide prevention, intervention and response using effective strategies.

Goal 2:

Develop, enhance, implement and sustain evidence-based, culturally competent suicide prevention, intervention and response practices through an intensive community-based effort for youth age 10-24 in the Town of Manchester, CT.





Networks of Care for Suicide Prevention continued

Primary Objective: Integrate and coordinate suicide prevention, intervention and response activities across multiple sectors and settings through state and community networks.

Co-Directors: The CT Departments of Mental Health and Addiction Services (DMHAS), Children and Families (DCF), and Public Health (DPH)

Advising Body: Connecticut Suicide Advisory Board (CTSAB)

Partners: Community Health Resources; United Way of CT-National Suicide Prevention Lifeline Provider; Manchester-Public Schools, Police Department, Community College; Eastern CT Health Network

Evaluators: UConn Health, Programs in Public Health and Health Policy

Funder: The federal Substance Abuse and Mental Health Services

Connecticular (SM 062916)



Strategic Evidence-Based Approaches



SAMHSA Strategic Prevention Framework (SPF)

https://www.samhsa.gov/capt/applyingstrategic-prevention-framework

National Suicide Prevention Resource Center Comprehensive Approach to Suicide Prevention

http://www.sprc.org/effective-prevention/comprehensive-approach







CT School Health Survey 2017 of 9th-12th graders

- Felt Sad or Hopeless 26.9% (more than 1 in 4) of students felt so sad or hopeless almost every day for two or more weeks in a row that they stopped doing some usual activities. (Past 12 mos. Linear increase over 10 years from 22.8% in 2007, but no statistical change) (31.5% US)
- Adult support 31% (almost 1 in 3) of high school students reported that they could not identify even one teacher or other adult in their school to talk to if they have a problem.
- Get the Help They Need When Feeling Sad, Empty, Hopeless, Angry, or Anxious Only 24.5% (about 1 in 4) of students most of the time or always get the kind of help they need when they feel sad, empty, hopeless, angry, or anxious. (Statistical decrease since 2009 from 44%)

Source: DPH, 2018 https://portal.ct.gov/dph/Health-Information-Systems--Reporting/Hisrhome/Connecticut-School-Health-Survey%20





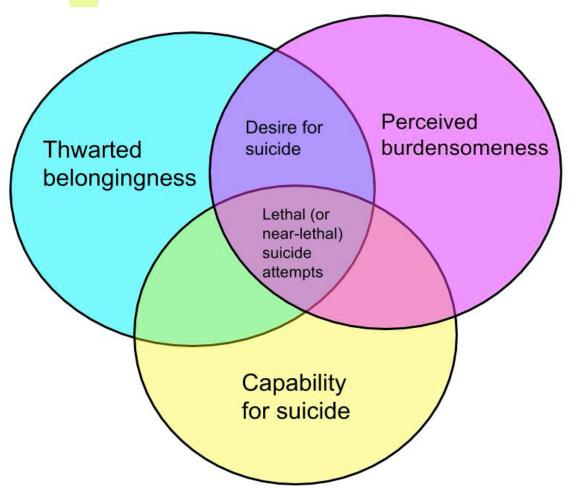
CT School Health Survey 2017 of 9th-12th graders

- Inflicted Self-Injury 18.4% (almost 1 in 5) of students did something to purposely hurt themselves, such as cutting or burning themselves on purpose, without wanting to die, one or more times during the past 12 months (i.e., inflicted self-injury).
- Seriously Considered Attempting Suicide 13.5% (almost 1 in 7) of students seriously considered attempting suicide. (Past 12 mos. 17.2 US).
- Attempted Suicide 8.1% (almost 1 in 12) of students attempted suicide one or more times. (Past 12 mos. 7.4 US)





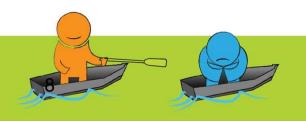
Joiner's Interpersonal Theory of Suicide



- Thwarted belongingness +
 perceived burdensomeness
 = Desire for suicide.
- *However*, a desire for suicide alone is <u>not enough</u> to result in death by suicide.
- One must also have acquired capability (ie. acquired ability to overcome one's natural fear of self harm and risk of death).

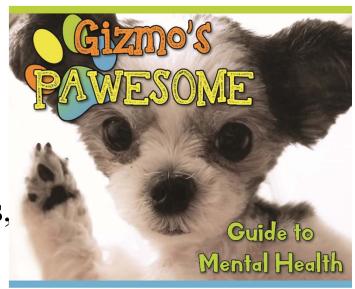
Suicide 5/12/2020 visory

Joiner, T. E. (2005). *Why People Die By Suicide*. Cambridge, MA: Harvard University Press



Guide Development

- Upstream approach to support the mental health and wellness of youth.
- Data-driven and evidence-informed.
- * Introduces mental health and wellness, mental health self-care, encourages self-identification of warning signs and when to apply the use of internal and external healthy coping strategies to help reduce risk.







Safety Plan

(Brown & Stanley)

- The Safety Planning Intervention provides people who are experiencing suicidal ideation with a specific set of concrete strategies to use in order to decrease the risk of suicidal behavior. It may also be used as a mental health crisis plan.
- It includes coping strategies that may be used and individuals or agencies that may be contacted during a crisis, and making the environment safe.

Cognitive and Behavioral Practice (2012). Safety Planning Intervention: A Brief Intervention to Mitigate Suicide Risk

JAMA (2018). Comparison of the Safety Planning Intervention With Follow-up vs Usual Care of Suicidal Patients Treated in the Emergency Department



Patient Safety Plan Template

Warning signs (thoughts, images, modeveloping:	od, situation, behavior) that a crisis may be
	<u> </u>
	an do to take my mind off my problems elaxation technique, physical activity):
People and social settings that provide	le distraction:
	Phone
	Phone
	4. Place
People whom I can ask for help:	
	Phone
Professionals or agencies I can contac	t during a crisis:
an Name	Phone
an Pager or Emergency Contact #	
	Phone
an Pager or Emergency Contact #	
Jrgent Care Services	01 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -
t Care Services Address	
t Care Services Phone	1 80 % 82 197 177 50 56 39 50 60 39
e Prevention Lifeline Phone: 1-800-273-TALK	(8255)
Making the environment safe:	
	Internal coping strategies – Things I c without contacting another person (r People and social settings that provice People whom I can ask for help: Professionals or agencies I can contact an Name_ an Pager or Emergency Contact #_ an Name_ an Pager or Emergency Contact #_ an Care Services Address_ t Care Services Phone_ e Prevention Lifeline Phone: 1-800-273-TALK

The one thing that is most important to me and worth living for is:

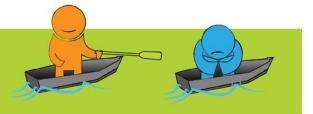
Guide Development continued

- * Introduces the characteristics of trusted adults, who may be one, how to practice talking with a trusted adult, and promotes proactive communication, social emotional learning, self advocacy, and community connectedness.
- Youth create a personal mental health plan (of action) that can be used daily, and in a time of need that can help them avert crisis.









Curriculum Development

- * Book was in high demand.
- There was a program and service gap for elementary youth.
- Need to address gap and develop guidance for high utilizing sites.
- Developed with guidance from high utilizing sites via survey and key informant interviews.
- Lessons learned and evidence provided a foundation for safety, effectiveness and fidelity.





Feasibility Study

- 6 public schools; spring 2018
 - Suburban and rural
- 150 youth participants
 - 2nd grade through 5th grade (ages 7-11)
- 3 alternative settings





Pilot Evaluation

- Year 1: October 2018-June 2019
- 20 public schools
 - Suburban and rural
 - 1,582 youth participants
 - 1st through 5th grade (ages 6-11)
 - 1 afterschool program setting (Grades 4 & 5)





Segment 1: Introduction to mental health and self-care



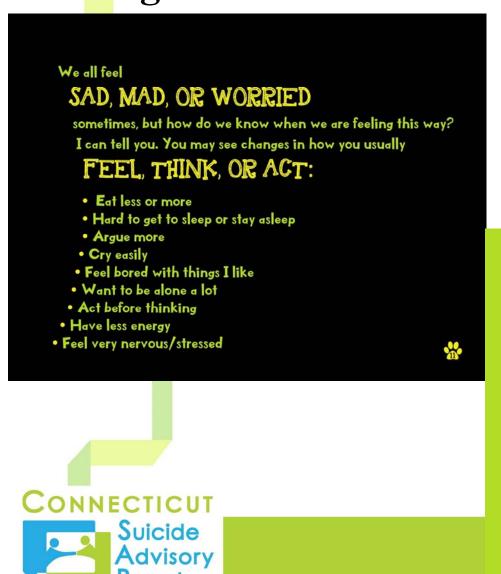


Here are some things you can do every day to take care of your mental health —

YOUR
FEELINGS,
THOUGHTS,
AND
ACTIONS.



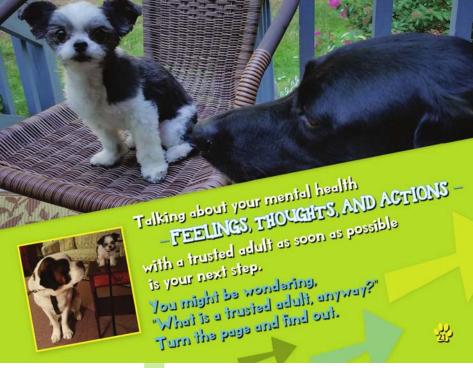
Segment 2: Self-identification of warning signs and use of healthy coping strategies.





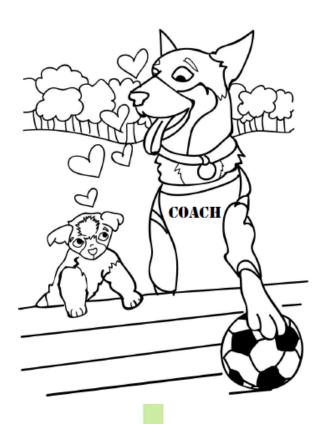


Segment 3: Identification of and connecting to trusted adults









Doar_



I am giving you this valentine because you are my trusted adult. This means that I will come to you when I need

thoughts and actions.

to talk about my feelings,

RESOURCES FOR TRUSTED ADULTS

If you have been identified as a trusted adult and would like more information...

- www.preventsuicidect.org
- www.211ct.org
- www.empsct.org
- www.gizmo4mentalhealth.org
- · www.suicidepreventionlifeline.org
- If you are interested in learning more about how you can help children contact:

In a crisis contact:

- Mobile Crisis Intervention Services for Youth: Call 2-1-1
- Crisis Line: 1-800-273-8255 (TALK) or in CT Call 2-1-1
- · Crisis Text Line: Text your message to 741741

In an emergency call 9-1-1

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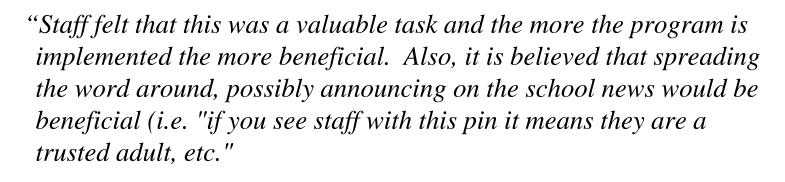


Trusted Adults

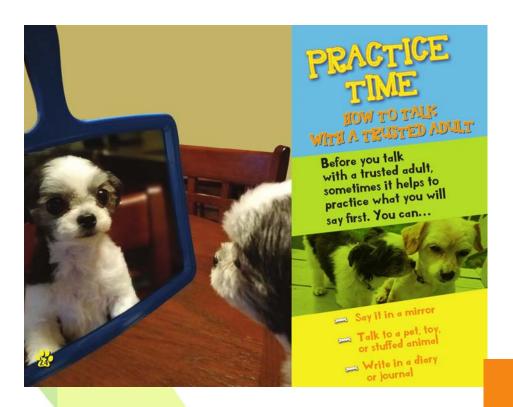
- 1,495 youth completed Valentines for a trusted adult at school.
- 732 different trusted adults at school received Valentines.

								School	
Trusted				Vice		School	School	Social	School
Adult	Teacher	Paraprofessional	Principal	Principal	Coach	Psychologist	Counselor	Worker	Nurse
#									
Valentines	395	63	71	10	6	48	64	33	41

"The faculty/staff thought this was a very useful activity. Staff became aware of two students who appeared to need immediate services. Prior to this activity staff was unaware of the degree of need."







If you do not want to say out loud how you are FEELING, THINKING. OR ACTING

you can write a note instead and give it to a trusted adult.









Check-in Slip

- Practice talking to a trusted adult
 - Mirror: 24%
 - Pet/Stuffed animal: 40%
 - Diary/Journal: 32%



Name:_____

To practice talking to a trusted adult about my feelings and thoughts I would:





- Say it in a mirror
- Talk to a pet, toy or stuffed animal
 - Write in a diary or journal





- I need to talk to the school/agency trusted adult about my feelings and thoughts soon.
- I do not need to talk to the school/agency trusted adult about my feelings and thoughts soon.

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Check-in Slip

- 10.7% of youth indicated they needed to talk to a trusted adult about their feelings and thoughts soon.
- 92% of these youth received follow-up within 24 hours.
- Follow-up was performed predominantly by clinicians within the school.





Segment 4: Completion of Mental Health Plan

		TAR IG				
	MY MENTAL HEALTH	LRAM -				
-13	Name:					
	1. Things I can do to take care of my mental health: 4. Things I	can do with Others to				
		Help Me Feel Better				
	Breathe slowly Ride a bike Play Listen to music Play outside Tell Play an instrument Read Go for Draw or paint Play with toys Go for Take a nap Do a puzzle Go to Blow bubbles Sew or knit Go to Play with a pinwheel Smile or laugh Play dress-up Take a walk	Go to lunch play outside Giveand get hugs or a hike or the store or the library ch a movie a sport				
	Play with pets 5. My trusto	for mental hearing				
	Eat less or more Hard to get to sleep or stay asleep Act before thinking Have less energy Cry easily Feel bored with things you like Relig	des/Aunts er Brothers/Sisters chers				
		ol Counselors				
	Grandparents Family member's house Doct Aunt or Uncle Faith Community Cam Parents Course Community Cam	ool Social Workers ool Nurses dors op Counselors Others?				

Mental Health Plan

- 1,554 youth completed a Mental Health Plan.
- Youth took av. 14 minutes to complete their Mental Health Plan.
- 75% of 4th & 5th graders (61% all grades) used their mental health plan within the 6-weeks following at home and/or at school.

"All students liked the mental health plan, but some enjoyed it very much! One student even told me he would hang it above his bed."

"I found this to be especially helpful. The students enjoyed it, and could bring it home to their families to explain what they learned. Some families told me that their children had hung the posters on their walls at home as visual reminders."





Resources for Trusted Adults

RESOURCES FOR TRUSTED ADULTS

In a crisis contact:

- Mobile Crisis Intervention Services for Youth: Call 2-1-1
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- Crisis Text Line: Text your message to 741741





In an emergency call 9-1-1

Other resources for mental health services:

- School counselors, social workers, psychologists
- Community-based counselors
- Pediatricians





www.preventsuicidect.org

tsuicidect.org www.211ct.org

www.empsct.org

www.gizmo4mentalhealth.org

www.suicidepreventionlifeline.org

WORD VOICE LIFE
the on Gizmo

This guide is not a substitute for treatment.



Segment 5: Use of mindfulness exercise and other optional activities

GIZMO CAN HELP YOU with Mindfulness Exercises tool

Meditation is doing nothing AND listening to your own thoughts at the same time. It can help you with your feelings, thoughts and actions. Sometimes, meditation is hard at first, but once you get the hang of it, you will LOVE it!





Sit comfortably in a chair or cross-legged on the floor.
 Keep your back straight, and let your shoulders relax.
 Take a deep breath, and close your eyes, if you want.



2. Focus on how the air feels as it moves in and out of your nose.



3. Sometimes thoughts will come into your mind and distract you from paying attention to your breathing. That's ok - just refocus on how the airs feels as it moves in and out of your nose, and how it fills your chest and then leaves with every breath.



4. Try to meditate for 5 to 10 minutes every day, just like brushing your teeth. If you meditate every day you will find it easier and easier to do and it will help your feelings, thoughts and actions.





Adapted from "Full Catastrophie Living," 2nd edition, by Jon Kabat-Zin

CONNECTICUT





Connecting with <u>Trusted Adults</u>

- "The staff identified as trusted adults reacted with pride, pleasure, happiness that they were seen that way by the students."
- "I think it has had a great impact on youth/school climate so students feel comfortable reaching out to trusted adults and likely feel the trusted adults are approachable."

Parental Support for the Curriculum

— "I am so happy to see this being addressed for our kids. We don't have health class for our kids until middle school, but to tell you the truth, I think this is better than any health class that I ever took."





- Staff Support for the Curriculum
- "Of the many pilot curriculums we have been exposed too, Gizmo's is one we are very excited to bring into the school on a permanent basis."
- "I would say the Gizmo curriculum, and the messages it portrays are both powerful and empowering to students, and helping them to take perhaps, the first footsteps in knowing how to take care of their mental health!"





- Staff Support for the Curriculum
 - "Great program to instill in children while they are young that they will benefit from their whole lives. Excellent way to identify children that need support."
 - "Teachers have been thrilled to have this type of curriculum taught to students. We are using Gizmo with our third graders. We have other SEL programs in our building but the mental health focus of Gizmo focuses more on getting rid of stigma and teaching it's okay to ask for help."





- Youth Support for the Curriculum
- "All of the grades should be here to learn about Gizmo, this is awesome!"
- "I put my Gizmo guide to mental health book in my pillowcase and I read it when I am sad or worried."
- "I learned how to better take care of my mental health and if I need help I will speak to a trusted adult."
- "I had a difficult day and Gizmo (the class stuffed animal) sat on my desk all day and helped me remember to use my coping strategies."





ACKNOWLEDGEMENTS

Contributors/Reviewers

Jenifer Adams, M.A., Special Educator and Psychological Trauma Responder, K-9 First Responders

Kristen Akeley, Special Education Para-Educator

Laura Bush, M.A., Elementary Educator, Andover Elementary School

Andrea Iger Duarte, M.S.W., M.P.H., L.C.S.W., Suicide Prevention Director, Connecticut Department of Mental Health and Addiction Services

Amy Evison, L.M.F.T., Youth Service Director, Community Health Resources

Amy James, Ph.D., L.P.C., Mental Health and Suicide Prevention Specialist

Scott Newgass, M.S.W., L.C.S.W., Education Consultant, Connecticut State Department of Education

Sarah Schlegel, M.D., Behavioral Pediatrician, Connecticut Children's Medical Center

Heather Spada, Suicide Prevention System Manager, United Way of Connecticut

Kenyatta Thompson, Masters Candidate, University of Connecticut School of Social Work

Steven A. Weisblatt, M.D., F.A.P.A., Psychiatrist

Abigail Wood, Masters Candidate, University of Connecticut School of Social Work

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Thank you!

- CT Department of Public Health (2015). CT School Health Survey. http://www.ct.gov/dph/lib/dph/hisr/pdf/cshs_ybc2015_report.pdf
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Contact Information

Heather Spada, M.A., LPC Suicide Prevention System Manager United Way of CT Heather.spada@ctunitedway.org (860) 372-4240







