Issues in Mental Health: Suicide Prevention Grades 7-12

Building Knowledge and Skills to Prevent Suicide in Adolescents and Young Adults

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Introduction

This unit of instruction is designed to help teachers and pupil services personnel implement a set of lessons that build on the essential knowledge and skills related to suicide prevention. In order to implement this set of lessons you will need to use the middle school or high school DVD included in the "S.O.S: Signs of Suicide" curriculum.

There are five lessons with accompanying assessment components within this unit. Some lessons have multiple parts and can be delivered in a manner that meets your school's class schedule. These lessons are:

1. Part 1: "What is Your Depression/Suicide IQ?" This lesson presents Wisconsin norms related to depression and suicide from the 2013 Youth Risk Behavior Survey (YRBS).
2. Part 2: "What is Your Depression/Suicide IQ?" This lesson is based on discussion that gives students the opportunity to reflect on the YRBS data for Wisconsin and how it connects with their own school and community.
3. "Tech Messages & Social Media: Scripts, Tweets, and Pings Related to Suicide Warning Signs." This lesson asks students to identify and use the warning signs of suicidal thoughts.
4. "S.O.S.—It's Time to A.C.T." This lesson uses the S.O.S.* DVD (appropriate for students' grade level) to present information on warning signs of suicide and develop skills to handle these warning signs.
5. "Mirror…Mirror…" This lesson has students work in small groups to discuss the concepts of loss and coping. Students will compose an individual reflection illustrating their thoughts and feelings.
6. Part 1: "Lights! Camera! Action!" This lesson has students develop suicide prevention stories using their choice of media images.

   Part 2: "Crisis Card" This lesson has students find community resources that will help them address issues surrounding depression and suicide.

Unit Learning Objectives for Issues in Mental Health: Suicide Prevention Grades 7-12

Following the completion of this unit, the student will be able to:

1. Evaluate perceptions of depression and suicide.
2. Identify warning signs, risk factors, and protective factors of depression and suicide.
3. Demonstrate problem-solving and help-seeking behaviors (ACT: acknowledge, care, tell).
4. Demonstrate the ability to find suicide prevention resources.

* The program entitled "S.O.S.: Signs of Suicide" can be ordered from:
Screening for Mental Health
One Washington Street, Suite 304
Wellesley Hills, MA 02841
Phone: 781-239-0071
www.mentalhealthscreening.org

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Educator Preparation Before the Delivery of the Suicide Prevention Curriculum

This section provides information regarding Wisconsin Statutes and Administrative Rules Related to School-Based Suicide Prevention, issues, cautions, and resources to help you successfully deliver this unit of instruction.

Suicide is preventable: There are many evidence-based strategies that schools can utilize to prevent suicide among students. The Department of Public Instruction (DPI) offers a single-day training to help schools build a comprehensive, multi-strategy, school-based suicide prevention program. Suicide is a sensitive topic. Therefore, educators are strongly encouraged to attend one of these trainings prior to utilizing DPI's curriculum. More information about the suicide prevention training, strategies, and resources is available at http://dpi.wi.gov/sspw/mental-health/youth-suicide-prevention.

The team approach: For any topics that deal with the potential for other- or self-directed harm (i.e., mental health, suicide, child abuse, bullying, dating violence), the DPI believes it is important to have a pupil services professional partner with the classroom teacher to deliver the curriculum. The pupil services professional may serve mainly in the role of observer or present one or more lessons. Both the teacher and the pupil services professional should look for non-verbal cues, as well as verbal responses of any student that may warrant contact with the student outside of the classroom. It is important for the pupil services professional to share with students at the beginning of the unit that he/she is willing to help with any concerns students might have on suicide-related issues.

High risk students: We know from data related to suicide attempts and deaths (including data from the WI Department of Health Services, the Center for Disease Control and Prevention, and the Youth Risk Behavior Survey) that students in some groups are statistically at higher risk for suicide than other students. These groups include, but are not limited to:

- students with mental illness;
- students who have previously attempted suicide or who know someone who completed a suicide;
- victims of harassment, abuse, or victimization (including bullying);
- students who are gay, lesbian, bisexual, transgender, or questioning their sexual orientation or gender identity (especially if their families are not accepting of them);
- perfectionists;
- American Indian and white students;
- students at-risk of not graduating from high school;
- students who are highly aggressive or impulsive;

- students who self-harm; and
- students who abuse alcohol or other drugs.

You may know students in your classroom that fall into one or more of these groups, but it is likely that some are unknown to you. These students may withdraw from class discussions or make sarcastic or off-topic comments about suicide. Through prior discussion with and participation by a member of your pupil services staff, you can be prepared for a range of student responses. If a student seems upset or angry, a referral to an appropriate pupil services professional is in order.

Co-occurring suicide risk and substance abuse: Alcohol and other drug abuse may increase the risk for suicide attempts. We have not included comprehensive information on the effects of substance abuse in combination with a suicide risk in this curriculum. If you wish to address this issue in conjunction with suicide prevention, we recommend you consult with a pupil services professional in your school, a substance abuse counselor in your community, or the DPI AODA webpage: http://dpi.wi.gov/sspw/aoda.

Systematic delivery of the knowledge and skills presented in this curriculum: Suicide prevention is a critical health issue and, therefore, it is of great value to share this unit with school staff and community agencies connected to youth suicide prevention and intervention services. It is critical that everyone working in a school understand the content knowledge and skills students will be learning. Suicide prevention can be enhanced through common language, effective intervention strategies, and community commitment from all people/groups invested in the process.

Parental support can be beneficial on this issue: Suicide is a sensitive subject. It is critical to make parents aware of the unit before it is implemented. This can be done in a variety of ways to give parents information to increase their awareness of the knowledge and skills students are learning. Among ways to reach out to parents are a letter/email or a parental meeting to discuss the learning goals and objectives of the unit.

Addressing cultural competence: Suicide affects both genders and all races and ethnicities. It is important to include the contributions, images, and experiences of diverse cultural groups in this unit of instruction. For information specific to cultural competence in suicide preventions, please see the resources from the Suicide Prevention Resource Center: http://www.sprc.org/library_resources/sprc/listing?tid_2=209.

Addressing active classrooms: Support the Physical Activity Guidelines for Americans physical activity recommendations to increase opportunities for students to meet the recommended 60 minutes of moderate to vigorous activity every day. Incorporate into the lesson plans more daily physical activity by incorporating classroom activity breaks. Active Classroom ideas can be found via this link: http://dpi.wi.gov/sspw/physical-education.

Addressing literacy in all subjects: In Wisconsin, disciplinary literacy is defined as the confluence of content knowledge, experiences, and skills merged with the ability to read, write, listen, speak, think critically, and perform in a way that is meaningful within the context of a given field. Disciplinary literacy resources can be found via this link: http://dpi.wi.gov/standards/literacy-all-subjects.

Addressing Wisconsin State Standards for Health Education: This curriculum is aligned to 2011 Wisconsin Health Education Standards and emphasizes skill practice as an essential component of effective teaching and student learning. The standards can be found via this link: http://dpi.wi.gov/sspw/health-education.

Additional resources available: There are a number of high-quality resources available to support school-based suicide prevention. Some of these include:

Screening for Mental Health: www.mentalhealthscreening.org

Suicide Prevention Resource Center: www.sprc.org

Substance Abuse and Mental Health Administration: www.samhsa.gov

School-Based Youth Suicide Prevention Guide: http://theguide.fmhi.usf.edu/

American Association of Suicidology: www.suicidology.org

Gay Straight Alliance for Safe Schools: www.gsaforsafeschools.org

Means Matter: www.hsph.harvard.edu/means-matter

What is Your Depression/ Suicide IQ?—Part 1

1

Teacher Information

Suicide is not an everyday occurrence. However, Wisconsin has the 14th highest youth suicide rates; and suicide is the second leading cause of death for youth ages 5-19 in our state. (Accidental death is the leading cause.)

Learning Objectives

The student will be able to:

1. Identify the percentage and proportion of Wisconsin high school students who report experiencing depression, have suicidal thoughts, or who have engaged in suicidal behaviors.
2. Identify the prevalence of depression and possible suicidal thoughts among their peers.

Answers (From the 2013 Wisconsin Youth Risk Behavior Survey)

1. 25% Q23 (sad, hopeless) 1 in 4 students
2. 13%* Q24 (seriously considered) 1 in 8 students
3. 16%** Q24 1 in 6 females; 10% of males 1 in 10
4. 12%*** Q25 (made a suicide plan) 1 in 8 students
5. 6% Q26 (actual attempt) 1 in 16 students
6. 33% Q27 (injury resulted in 2% of the 6% who reported an actual attempt)—1 in 50 students
7. 14th in the country (2013 CDC state data on youth who died by suicide)

* Significant decrease between 2001 and 2013, 20% vs. 13%.

** Females are significantly more likely to have seriously considered attempting suicide in the past twelve months than males.

*** Statistically significant difference between genders; female students higher.

Note: *Twenty-five percent of high school students felt sad/hopeless, but a lot fewer attempted suicide. Depression is common when going through a troubled time or crisis. Suicide is not a common response to depression. Suicide is a permanent solution to a temporary problem. When someone talks about suicide, take it seriously. Follow the steps presented later in this lesson and know how to respond. Adding your school/local YRBS or other data on suicide, if available, would be helpful to discuss here.*

Student Instructions

Students should make their best guess as to the percentage of Wisconsin high school students who have reported they have engaged in the following:

1. During the past twelve months, _____% of Wisconsin high school students (grades 9-12) felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

2. During the past twelve months, _____% of Wisconsin high school students seriously considered attempting suicide.

3. During the past twelve months, _____% of Wisconsin high school females (while _____% of males) seriously considered attempting suicide.

4. During the past twelve months, _____% of Wisconsin high school students made a plan to end their life.

5. _____% of students report actually attempting suicide.

6. Of those students who attempted suicide in the past twelve months as reported in the previous statement, _____% of the students report their attempts resulted in injury, poisoning, or overdose that was treated by a doctor or nurse.

7. Where does Wisconsin rank nationally in youth suicide rate? ____

Check your answers with those given by your teacher.

Department of Public Instruction
Wisconsin Youth Risk Behavior Survey 2013

What is Your Depression/Suicide IQ? Part 2

2

Teacher Information

Part 1 of this lesson explored the norms related to suicide and depression in Wisconsin and the United States for Q23 through Q27 from the 2013 Youth Risk Behavior Survey.

Emphasize that death by suicide is much higher in Wisconsin than in thirty-six other states. Tell students that studies have pointed out four hypotheses for this difference: 1) access to firearms (highly lethal means), 2) binge drinking (increases risk-taking behavior and impulsivity), 3) stigma or the negative thoughts/feelings around talking about mental illness/suicide, and 4) lack of access to appropriate mental health services.

An interesting personal reflection followed by small or large group discussion could revolve around students' perceptions of these four suggested hypotheses. Examples of reflection prompts and discussion starters:

- Ask students, "What do you think of the reasons presented?"
- Ask, "How are the four reasons connected to Wisconsin's diverse geography and communities or cultures?"
- Have students discuss the ways these represent (or not) what's happening in our school and/or community?
- Assign students to rank these four, and identify which they think is the most important for our school to address and why?
- Ask, "Do these four reasons leave out anything you feel is important? What is something you think should be included?

Tech Messages and Social Media: Scripts, Tweets, and Pings Related to Suicide Warning Signs

The goal of this lesson is to provide practice in recognizing suicidal warning signs.

Teacher Information

Learning Objectives

The student will be able to:

1. Identify warning signs of a possible suicide as they relate to real life situations.
2. Create scenarios that have warning signs related to suicide (FACT).
3. Demonstrate appropriate intervention skills (A.C.T.)

Curriculum Connections

Social Studies, Health, Family and Consumer Education

Overview

Students partner to develop a script where a student contacts a suicide prevention crisis line, messages a friend, or uses social media to communicate warning signs that could lead to a suicide attempt. Students will assess the level of risk using a checklist provided in this activity. (Possible scenarios include: a student messaging another student, a parent, another adult, or posting something to their social media account)

Requirements

The students will be working in pairs and will create a role-play script where 4-6 warning signs are brought out in the script.

They can use the "Warning Signs" information sheet to help guide the development of the script.

The rest of the class will use the warning sign worksheet to see how many signs are mentioned in the script.

Emphasize to your students that each warning sign is a possible message that a student may be experiencing mental health or emotional problems. Though it may not lead to a suicide plan or attempt, you need to communicate to your students that they should consider applying A.C.T. to handling the situation.

Time

This activity will take two class periods for development, presentations, class discussion, and to learn and understand the F.A.C.T. and A.C.T. acronyms.

Materials

Checklists, writing utensil, and handouts (paper or electronic version), electronic device

Instruction

Preliminary classroom activities will include lessons on the A.C.T. process and the warning signs of suicide. Ensure that students have been provided adequate time for students to become familiar with and understand the FACT acronym. Utilize age-appropriate strategies that address individual student needs.

NOTE: When forming student pairs, teachers should be aware of the possibility of students' prior history regarding exposure or experience with suicide. Teachers need to have a plan for assisting students who appear sensitive to this activity. (i.e., refer to pupil services staff)

Assessment Criteria

Answers can be scored on the following:

1. How well the student understands health concepts as they relate to suicide warning signs.
2. How well the student incorporates A.C.T. (acknowledge, care, tell) into their script.
3. How well the student uses interpersonal communication to enhance health.

	Alignment to Wisconsin Health Education Standards
1	*Core Concepts:* Students will comprehend concepts related to health promotion and disease prevention to enhance health
8	*Advocacy*: Students will demonstrate the ability to advocate for personal, family, and community health

Sample Response

Text Messages Related to Suicide Behaviors and Warnings

Role Players: This scenario is an exchange of texts between friends.

Scene Set-up: Sam is struggling in school and at home. A six-month dating relationship just ended, and Sam is going to fail four classes. Last week Sam got suspended for coming to school under the influence of alcohol. After school on Friday, Sam texts Pat:

Sam: So that week really sucked

Pat: IKR

Sam: No. I mean it REALLY sucked. Failing bio, comp, civix, & PE. Cali started dating Phil. Grounded for life from last week. I need a drink and a gun.

Pat: WTH? Don't even joke about that. Haha

Sam: Im not jokng. Last summer I ODd and nearly died, but I thought life was OK til this week. Now its worse than ever

Pat: Seriously? U never told me that. R u gonna b OK?

Sam: Ill be fine. Don't worry.

Pat: Let's go shoot hoops. You love killin it on the court.

Sam: Nah. I don't feel like it.

Pat: Where u at? Lets chat.

Sam: K. Im chillin at home cmon over

Pat: C u in 10.

Sample Answers (underlined are FACTs)

Sam: So that week really sucked

Pat: IKR

Sam: No. I mean it REALLY sucked. <u>Failing bio, comp, civix, & PE. Cali started dating Phil. Grounded for life from last week. I need a drink and a gun.</u>

Pat: WTH? Don't even joke about that. Haha

Sam: Im not jokng. <u>Last summer I ODd and nearly died, but I thought life was OK til this week. Now its worse than ever</u>

Pat: Seriously? U never told me that. R u gonna b OK?

Sam: Ill be fine. Don't worry.

Pat: Sounds like your still upset. I get it. I'd be upset to. Let's go shoot hoops and talk more.

Sam: Nah. I don't feel like it.

Pat: Where u at? Lets chat.

Sam: K. Im chillin at home cmon over

Pat: C u in 10.

Student Instructions

Many suicidal individuals talk about their suicidal feelings or plans before they attempt the suicidal act. It is important to listen to these "cries for help" by practicing the A.C.T. (acknowledge, care, tell) technique discussed in this unit.

Individuals who work at phone-based or messaging-based suicide crisis centers are given information regarding common myths about suicide. An example of a myth is that if you talk about suicide, you are more likely to attempt suicide. This is a common misconception because most people who are suicidal will show signs that friends may be able to see. Suicide crisis center workers use the Warning Signs of Suicide lists to help them determine the level of risk for attempting suicide of the person who contacts them.

Your task is to work in pairs to develop and write a script where a student contacts the suicide crisis center or another person by phone or other electronic device. The center worker or other person is trying to communicate with the student and help them address the problems presented. Once your scenario is created, your group will turn it in to the teacher.

Using copies of the warning signs "checklist," you will practice identifying suicide warning signs as you read other group's scenarios, determining what signs are present in their script, recording your findings on the checklist, and turning it in to the teacher.

Assessment Criteria

Answers may be scored on the following:

1. How well you understand suicide warning signs (identifying FACT).
2. How well you incorporate A.C.T. (acknowledge, care, tell) into your script.
3. How well you use interpersonal communication to enhance health.

Warning Signs of Suicide

Suicide is a relatively rare event. It is hard to predict who will attempt suicide. However, there are some urgent warning signs. Warning signs are observable changes, behaviors, or statements that indicate directly or indirectly that an individual is contemplating suicide.

Urgent Warning Signs

If you see or hear one of these, talk with a responsible adult right away, call 9 1 1, or seek immediate help from a mental health provider:

- Someone **threatening** to hurt or kill themselves;
- Someone **looking for ways to kill themselves**: seeking access to pills, weapons, or other means; or
- Someone **talking or writing about death**, dying, or suicide in a way that is not "typical" for them.

General Warning Signs

Warning signs can be organized around the acronym **"FACTs**." Some of these signs are not as urgent, but can still give important clues about someone's suicidal intent. Pay attention if you see, hear, or know of anyone exhibiting any one or more of these behaviors, and ACT. If you see or hear about someone exhibiting one or more of these, TELL a responsible adult, contact a mental health professional, or call 1-800-273-TALK (1-800-273-8255) for a referral. Place a mark by those that are in the script or are URGENT.

We want you to "ACT on the FACTs"

Take the following warning signs chart and make copies OR make it accessible via electronic device.

F.A.C.T.s

Warning Signs	Mentioned in Script
FEELINGS	
• Hopeless—"Things will never get better." "There's no point in trying."	
• Helpless—"There's nothing I can do about it." "I can't do anything right."	
• Worthless—"Everyone would be better off without me." "I have no reason to live."	
• Guilt, shame, self-hatred—"What I did was unforgivable." "I'm useless."	
• Pervasive sadness.	
• Persistent anxiety or agitation.	
• Feeling trapped—like there's no way out.	
• Persistent, uncharacteristic anger, hostility, or irritability.	
• Confusion—can't think straight, make decisions.	
ACTIONS	
• Uncharacteristic aggression, rage, seeking revenge.	
• Uncharacteristic risk taking, recklessness without thinking.	
• Withdraw from friends/activities, family or society.	
• Becoming accident prone.	
• Recent losses—death, divorce, relationship, job, status, self-esteem.	
• Getting into trouble, discipline problems.	
• Increasing drug or alcohol use.	
• Themes of death or destruction in talking, texting, or social media.	
CHANGES	
• Personality—acting opposite of what's "normal" for them (i.e., more withdrawn, low energy, "don't care" attitude or more boisterous, talkative, outgoing.)	
• Can't concentrate on school, work, or routine tasks.	
• Loss of interest in hobbies or work.	
• Marked decrease in school or work performance.	
• Unable to eat/sleep, or sleeping/eating all the time.	
• Sudden improvement after being down or withdrawn.	

Warning Signs	Mentioned in Script
• Dramatic mood change.	
THREATS	
• Statements—talking about suicide directly or indirectly, written themes of death, preoccupation with death.	
• Threats—"I won't be around much longer," writing suicide note, making a direct threat.	
• Plans—giving away prized possessions, making arrangements for a funeral, studying drug effects, obtaining a weapon.	

S.O.S.—It's Time to A.C.T.

3

The goal of this lesson is to demonstrate suicide warning signs and skills youth can apply to prevent suicide.

Teacher Information

Learning Objectives

The student will be able to:

1. List warning signs related to suicide prevention.
2. Analyze the use of the skill A.C.T. in life-like scenarios.
3. Analyze the decisions portrayed in the scenarios.

Curriculum Connections

Family and Consumer Education, Social Studies, Peer Mediation

Overview

This assessment could be used as an introductory or culminating activity. The students will view the S.O.S. video and answer the questions on the worksheet. You may want to have them jot down ideas while watching a vignette. Stop the video when the vignette is complete, and then have the students write down their answers.

Requirements

The following situations from the video entitled *S.O.S.* describe potential suicide situations. The student's tasks are to answer the questions on the worksheet using the A.C.T. process and to engage in a discussion of decision making. Students should then discuss both their answers to the worksheet questions and their perceptions of the decisions made by the students in the scenarios with a partner and/or the whole class.

*NOTE: Being able to empathize with another is a skill that can be taught here and utilized as a fundamental base for acknowledging the issue and demonstrating care.

A.C.T. Process

1. **A**cknowledge that your friend has a problem and that the symptoms are important to them and serious.
2. **C**are about your friend by letting them know that you recognize the seriousness of their situation and that you want to help them.
3. **T**ell a trusted adult about your concerns. Telling the right person can make all the difference.

Time

This activity can take one to two class periods (45 minutes per period). The DVD can take between 30 – 45 minutes; depending on the depth of discussions.

Materials

Signs of Suicide DVDs for high school and/or middle school. The program entitled *S.O.S.—Get into the A.C.T.* can be ordered from:

Screening for Mental Health
One Washington Street, Suite 304
Wellesley Hills, MA 02481
Phone: 781-239-0071
www.mentalhealthscreening.org

Student worksheet

Teacher Prompts

This activity could be used as a pre- or post-unit activity. You should discuss the warning signs and whether the person applied A.C.T. to help the person in need.

Assessment Criteria

Answers can be scored on the following:

1. How completely and correctly the students demonstrate an understanding of health concepts related to suicide prevention and the use of the A.C.T. process.

2. How well the students effectively communicate their answers.

Alignment to Wisconsin Standards for Health Education	
1	*Core Concepts:* Students will comprehend concepts related to health promotion and disease prevention to enhance health.
4	*Interpersonal Communication*: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
5	*Decision Making:* Students will demonstrate the ability to use decision-making skills to enhance health.

Sample Response

The answers need to include the components of A.C.T. (acknowledge, care, tell) in each of the answers and the warning signs demonstrated in each scenario.

Student Instructions

The following situations from the *S.O.S.* video describe potential suicide situations. Answer the questions on the *S.O.S.* worksheet using the A.C.T. process, discuss your answer with a partner, and be ready to discuss your answer with the class.

What is A.C.T.?

1. **A**cknowledge that your friend has a problem and that the symptoms are serious.
2. **C**are about your friend by letting them know that you care about them and that you want to help them.
3. **T**ell a trusted adult about your concerns, or take your friend to a trusted adult. Telling the right person can make all the difference.

Assessment Criteria

Answers may be scored on the following:

1. How completely and correctly you demonstrate an understanding of health concepts related to suicide prevention, and use the A.C.T. process.
2. How well you effectively communicate your answers to your partner.

S.O.S. Signs of Suicide: Friends for Life Video—Worksheet

Vignette 1: Friends discussing college entrance scores

What are the signs that this student is depressed and/or suicidal?

How did his friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

Vignette 2: Girl struggles with the breakup with her boyfriend.

What are the signs that this student is depressed and/or suicidal?

How did her friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

Vignette 3: Boy who is always being picked on.

What are the signs that this student is depressed and/or suicidal?

How did his friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

Vignette 4: Boy lying on bed who has stopped interacting with friends.

What are the signs that this student is depressed and/or suicidal?

How did his friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

S.O.S. Signs of Suicide: Time to ACT Video—Worksheet

Vignette 1: Sisters talking in the bedroom. Younger sister is depressed.

What are the signs that the younger sister is depressed and/or suicidal?

How did the older sister use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

If you had a younger sibling you felt was depressed, what would you do?

Vignette 2: Two boys in the hallway at school. One is angry.

What are the signs that this student is depressed and/or suicidal?

How did his friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

Have you ever felt like the student who was angry? What did you do?

Vignette 3: Two girls in the bathroom at school. One is being bullied.

What are the signs that the bullied student is depressed and/or at risk for suicide?

How did the friend use the A.C.T. process?

A

C

T

What factors went into the decision to tell a trusted adult or keep the situation secret?

What positive and negative consequences could be predicted for each decision?

Have you ever had a friend who was bullied? How did you react?

Mirror… Mirror…

4

The goal of this activity is for students to reflect on concepts related to loss, suicide, coping skills, and suicide prevention; making connections to people or events in their own lives.

Teacher Instructions

The teacher will lead a large group discussion on the topics of personal loss and how it can affect how people think, feel, and act. Examples of loss could be losing a favorite item, having something damaged or destroyed, a friend or family member moving away, losing a pet, or the death of someone or something. The teacher should also lead a conversation about the variety of ways people cope with loss, including the healthy and unhealthy strategies people use. During this conversation, the teacher should contrast a variety of healthy coping strategies with unhealthy activities. These might include talking to a friend, family member or other trusted person, exercise, cognitive/behavioral strategies (counting to ten, taking deep breaths, playing with a pet, etc.), helping someone else, or seeking counseling.

The teacher should also present some information about how individuals might cope with loss by suicide differently than other loss. Losing someone to suicide can produce feelings of anger, guilt, embarrassment, and/or shame that are difficult to understand; including the stigma associated to death by suicide and the variables that contribute to suicide. Family members who have experienced a death by suicide may have unresolved questions about the death and need a chance to process them.

Following the large group discussion, students should be broken into smaller groups. The teacher will facilitate small group discussions centering on the similarities and differences between various types of loss, compared with loss by suicide. Conversation starters for the small group are:

- In what ways are the types of loss similar? (such as a friend leaving town or the death of a pet)
- How are the types of loss different?
- How are the coping skills of general loss similar to or different than what we use for losing someone to suicide?

After students have had their small group discussions, the teacher will ask students to bring closure to this topic by writing a short, reflective paragraph that identifies how they feel about and cope with personal loss of any type. A stem for this reflection might be “Tell about a time that you experienced a personal loss. What did you lose? Why was it important? How did you feel about the loss? How did you cope with the loss?”

Teacher Information

Learning Objectives for Mirror…Mirror…

The student will be able to:

1. Identify their feelings of loss.
2. Identify healthy and unhealthy coping strategies.

Curriculum Connections

Family and Consumer Science, Language Arts

Lights! Camera! Action!

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Part 1

The goal of this lesson is to provide practice in a literacy format to recognize warning signs and apply A.C.T. to save a person's life.

Teacher Information

Learning Objective

The students will be able to:

1. Apply suicide warning FACTs (feelings, actions, changes, threats) and ACT (acknowledge, care, tell) intervention through the creation of a media product. Examples may include but not limited to a film storyboard, public service announcement, video broadcast, podcast, etc.

Curriculum Connections

Language Arts, Social Studies, Family and Consumer Education

Overview

The students will demonstrate their knowledge of ACT and FACT using media/technology to create a presentation illustrating their understanding of the health concepts related to suicide and suicide prevention.

Requirements

Using the suggestions, resources, and materials you provide, the students will produce a short media product.

Time

This activity requires two class periods (approximately 90 minutes) for the research, creation, and sharing of the presentation.

Materials

List of possible "Lights, Camera, Action" story components.

Instruction

Classroom discussion on suicide warning signs, protective factors, and suicide prevention should be done prior to this activity.

Assessment Criteria

Answers can be scored on the following:

1. How completely and correctly the students demonstrate an understanding of health concepts related to suicide prevention.

	Alignment to Wisconsin Health Education Standards
1	*Core Concepts:* Students will comprehend concepts related to health promotion, and disease prevention to enhance health.
4	*Interpersonal Communication:* Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks

Student Instructions

Middle School

As a team of approximately five students, your task is to develop a film storyboard or produce a media product (i.e., video or PowerPoint) that is based on your understanding of the health concepts and skills related to suicide and suicide prevention. You will use available technology at the discretion and direction of the teacher to create your storyboard or video production.

Middle School Assessment Criteria

Answers may be scored on the following:

> The storyboard or media product must include at least one warning sign (FACT), the reaction represented in the acronym A.C.T., and a collaborative work effort that includes all team members.

High School

As a team of approximately three students, your task is to create a media product that demonstrates your understanding of the health concepts and skills related to suicide and suicide prevention. The media product you create will connect the warning signs of potential suicide ideation to a successful intervention, resulting in a safe resolution to the situation.

High School Assessment Criteria

Answers may be scored on the following:

> The storyboard or media product must include at least three warning signs (FACTs), the reaction represented in the acronym A.C.T., and a collaborative work effort that includes all team members.

Lights! Camera! Action! Story Components

Attention

School Counselor

Principal's Office

Alcohol

Principal

Family Myth or Fact

Sadness or Crying

Ambulance

Gun

Stress

Frustration

Kill

Drugs

Attempt

Gossiping or Rumor Spreading

Ups and Downs

Knife

Friend(s)

Secrets

Anger or Rage

Risk-taking

Family Time or Happy Family

Help

Scared

Tunnel Vision

Upset

Bully or Bully Victim

Funeral

Angry Parent

Low Interest

Confused

Moody

Depressed or Depression

Sleeping (too much or too little)

Grades Going Down

Giving Away Possessions

Problem-solving

Bad/Positive Attitude

Mad

Plan

Intervention

Respond

Caring

Friendship

The Crisis Card

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Part 2

The goal for this lesson is to have students find prevention resources in their school and community.

Teacher Information

Learning Objectives

The student will be able to:

1. Access accurate information about school/community resources to prevent suicide.
2. Demonstrate the ability to find qualified suicide prevention services in the community.

Curriculum Connections

Language Arts, Social Studies, Peer Mediation, Family and Consumer Education, At-Risk Groups or Classes

Overview

The student will create a physical or electronic crisis information card. One side will present information on Warning Signs of Suicide and positive ways of handling a suicide threat. The other side will include key organizations and their contact information or website that provide suicide crisis assistance.

Requirements

This product will be done on a white card stock or electronic device. Students who create their resource on card stock should be invited to store contact information about their identified organizations on their electronic device.

Time

This activity will take one class period (45 minutes).

Materials

White card stock paper, computer or other electronic device (or pen if computers are not available), brochures, and/or electronic search engines can be used to access information about organizations, contact information, or websites.

Instruction

A discussion of key community mental health resources should be included. Key people could include the crisis counselor from the community and pupil services professionals in the school. In addition, students will do a search for accurate and reliable suicide prevention contact information and websites. Following the student searches, teachers can refer to the resources listed at the end of this section to compliment the list generated by the students. Classroom instruction should include a discussion of the warning signs of suicide (F.A.C.T.), the meaning of A.C.T. (acknowledge, care, tell), and how to determine the appropriateness of resources.

Assessment Criteria

Answers can be scored on the following:

1. How well the student demonstrates knowledge and skills on concepts as they relate to suicide prevention.

2. How well the student accesses accurate information regarding teen crises.

	Alignment to Wisconsin Health Education Standards
1	*Core Concepts*: Students will comprehend concepts related to health promotion and disease prevention to enhance health
3	*Accessing Information*: Students will demonstrate the ability to access valid health information and products and services to enhance health
4	*Interpersonal Communication:* Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks
7	*Self-Management:* Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce risks

Sample Response

Warning Signs	**What To Do**
Warning Signs of Suicide Verbal suicide threats Previous suicide attempts Depression Giving away possessions Change in attitude (moods)	What to do when faced with a suicide threat: 1. Acknowledge threats are real. 2. Show care for the person you are concerned about. 3. Get help by immediately telling a relative or other responsible adult about the person threatening suicide.

Name(s) of Organization(s)	Contact Information or Website
Nat'l Suicide Prev. Lifeline	1-800-273-TALK (8255)
WI Hopeline (text-based)	www.suicidepreventionlifeline.org
Emergency Services	text "hopeline" to 741741
Prevent Suicide Wisconsin	www.preventsuicidewi.org

Student Instructions

Many young people are faced with crises every day that could be helped with the assistance of a trained, licensed professional in suicide prevention. Your task is to develop a physical or electronic crisis emergency card that is accessible 24/7.

Your crisis card will consist of specific pieces of information. The front side of the card will list the following:

Warning Signs	What To Do

The back side of the card will include:

Name(s) of Organization(S)	Contact Information or Website
1.	

Assessment Criteria

Answers may be scored on the following:

1. Demonstration of your ability to access accurate teen crises information.

Additional Suicide Prevention Resources

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National Resources

American Association of Suicidology

AAS promotes research, public awareness programs, public education, and training for mental health professionals, researchers, suicide prevention/crisis intervention centers, school districts, survivors of suicide, and a variety of lay persons who have an interest in suicide prevention.

www.suicidology.org
(202) 237-2280
info@suicidology.org

American Foundation for Suicide Prevention

The only national not-for-profit organization exclusively dedicated to funding research, developing prevention initiatives, and offering educational programs and conferences for survivors, mental health professionals, physicians, and the public.

www.afsp.org
(888) 333-AFSP (2377)
inquiry@afsp.org

Gay, Lesbian and Straight Education Network (GLSEN)

The mission of GLSEN is to assure that each member of every school community is valued and respected regardless of sexual orientation or gender identity/expression.

http://www.glsen.org

Jed Foundation

The Jed Foundation is committed to reducing the young adult suicide rate by furthering understanding of the underlying causes of suicide, by increasing awareness of the issue of college student mental health and suicide, and by creating effective prevention programs on college campuses.

www.jedfoundation.org/
(212) 647-7544
emailus@jedfoundation.org

Means Matter

The mission of the Means Matter Campaign is to increase the proportion of suicide prevention groups who promote activities that reduce a suicidal person's access to lethal means of suicide.

www.hsph.harvard.edu/means-matter/

National Alliance on Mental Illness (NAMI)

The nation's largest grassroots mental health organization comprised of chapters in every state and many local communities. Programs and activities including public education and information; family and consumer peer education and support; advocacy; and public events.

www.nami.org
(800) 950-NAMI (6264)

www.namiwisconsin.org
(800) 236-2988

nami@namiwisconsin.org

National Association of School Psychologists

Go to National Association for School Psychologists website, www.nasponline.org, and do a search on the term "Suicide" or "Self-Mutilation" to link to useful handouts on each of these:

Times of Tragedy: Preventing Suicide in Troubled Children and Youth, 2 Parts

Save a Friend: Tips for Teens to Prevent Suicide

Questions and Answers: Suicide Intervention in Schools

After a Suicide: Answering Questions for Students

Understanding and Responding to Students Who Self-Mutilate

Understanding Students Who Self-Mutilate: Information for Educators

National Suicide Prevention Lifeline

Crisis centers in the network are equipped to take a wide range of calls from immediate suicidal crisis to information about mental health and referrals.

www.suicidepreventionlifeline.org
1-800-273-TALK (8255)

School-based Youth Suicide Prevention Guide

The Youth Suicide Prevention School-Based Guide is designed to provide accurate, user-friendly information. The Guide is not a program but a tool that provides a framework for schools to assess their existing or proposed suicide prevention efforts (through a series of checklists) and provides resources and information that school administrators can use to enhance or add to their existing program.

theguide.fmhi.usf.edu/

Screening for Mental Health

Screening for Mental Health is an organization that creates resources for instruction in issues that deal with mental health, including suicide prevention. They have created videos for middle school and high school to use within their suicide prevention curriculums.

mentalhealthscreening.org/

Substance Abuse and Mental Health Services Administration (SAMHSA)
This U.S. Department of Health and Human Services agency is focused on building resilience and facilitating recovery for people with or at risk for mental or substance use disorders with resources including programs, policies, and grants.

www.samhsa.gov/
(877) 696-6775

Suicide Awareness/Voices of Education (SAVE)
Committed to the education of the general public about the depressive brain diseases that, if left untreated, may result in suicide and to reduce the stigma associated with these diseases.

www.save.org
(888) 511- SAVE (7283)

Suicide Prevention Resource Center (SPRC)
"The best of science, skills and practice, prevention support, training, and informational materials" to strengthen suicide prevention networks and advance the National Strategy for Suicide Prevention. Includes a library of evidence-based practices.

www.sprc.org
(877) GET–SPRC (438-7772)

info@sprc.org

The Trevor Project
Suicide hotline for gay and questioning teens.

www.thetrevorproject.org
866-4-U-TREVOR (866) 488-7386

State Resources

Department of Public Instruction (DPI)
Student Services/Prevention and Wellness Team
Provides technical assistance, training, and resources, and facilitates school-district and community efforts to meet specific needs of students.

dpi.wi.gov/sspw/mental-health/youth-suicide-prevention
(608) 266-3960

GSA for Safe Schools
GSA is committed to safe middle schools and high schools for lesbian, gay, bisexual, transgender youths and all students.

www.gsaforsafeschools.org

Prevent Suicide Wisconsin
The mission of Prevent Suicide Wisconsin is to reduce the number of suicides that take place in our state each year.

www.preventsuicidewi.org

Wisconsin Department of Health Services

The Wisconsin Department of Health Services - Division of Care and Treatment Services provides funding and support for counties and tribes in Wisconsin to develop and sustain Coordinated Services Team Initiatives.

http://www.wicollaborative.org/

Wisconsin Family Ties

A statewide organization run by and for families that include children and adolescents who have emotional, behavioral, and mental disorders. Programs and services include advocacy, support groups, information and referral, and education.

www.wifamilyties.org
(608) 261-8773