NASP (Stockholm)

NASP is the National Prevention of Suicide and Mental III-Health at Karolinska Institutet and Stockholm County Council's Centre for Suicide Research and Prevention of Mental III-Health (Sweden).

The mission of NASP is delineated in the following manner:

- NASP in Sweden

NASP is to hold an expert position as Sweden's and Stockholm County Council's centre of Expertise for research into Suicide and the Prevention of Mental III-Health.

- NASP in Europe

In association with the World Health Organisation (WHO) NASP is the WHO Lead Collaborating Centre of Mental Health Problems and Suicide across Europe.

- NASP worldwide

Swedish expertise follows and supports the work of NASP outside Europe. NASP works in collaboration with professors, researchers, doctors, and dedicated students throughout the world in various projects, research and education study programmes. A large library is available.

Head of NASP is Prof. Danuta Wasserman, Professor of Psychiatry and Suicidology at the Karolinska Institute and Director of the WHO Lead Collaborating Centre of Mental Health Problems and Suicide across Europe.

NASP Karolinska Institutet Granitsväg, 4, Solna SE-171 77 Stockholm, Sweden

Phone: + 46 8 52 48 69 35 Phone Karolinska Institutet: + 46 8-524 800 00

Fax : + 46 8 34 78 63

E-mail : <u>danuta.wasserman@ki.se</u>

Website: <u>http://www.ki.se/suicide</u>

The JED Foundation Framework for Developing Institutional Protocols for the Acutely Distressed or Suicidal College Student

The JED Foundation was founded in 2000 by Phil and Donna Satow after they sadly lost their 20-year-old son, Jed, to suicide. The Jed Foundation is a New York-based charitable organization with a mission to reduce the suicide rate among college students.

As a comprehensive suicide prevention and mental health promotion framework for colleges and universities, the program, informed by both clinical and public health perspectives, targets the full range of audiences who can influence college mental health.

The Framework is divided into the following three sections, each of which is structured as a series of questions:

- Developing a safety protocol
- Developing an emergency contact notification protocol
- Developing a leave of absence and re-entry protocol

Other programs of The Jed Foundation include:

- Ulifeline
- The Suicide Prevention Pilot Program
- Understanding Depressive and Bipolar Disorders
- Transition Year Project
- MtvU Campaign.

The JED Foundation Joanna Locke, MD, MPH, Program Director <u>jlocke@jedfoundation.org</u>

583 Broadway, Suite 8B -New York, NY 10012, USA Phone: + 1 212 647-7544 Fax : + 1 320 210-6089

E-mail : see 'Contact Us' Website: <u>http://www.jedfoundation.org/framework.php</u> SUPRE Suicide Prevention Programme of the World Health Organisation (WHO, Geneva)

WHO is the directing and coordinating authority for health within the United Nations system.

In the 21st century, health is a shared responsibility which means ensuring equitable access to essential care and enforcing collective defence against transnational threats.

The Department of Mental Health and Substance Abuse (MSD) of WHO has developed a programme on suicide prevention. Launched by WHO in 1999, SUPRE provides:

- National and global reports
- Research publications
- Prevention and Intervention Programmes and projects
- World Suicide Prevention Day

The World Suicide Prevention Day is an opportunity for people worldwide to unite and commit against suicide. The World Suicide Prevention Day seeks to bring attention to the deleterious consequences of suicide in hope that suicides are prevented, that people affected by a mental illness receive adequate treatment which might involve community-based care and close follow-up. The World Suicide Prevention Day brings awareness on suicidality, advocates for the restriction of common methods of suicide as well as ensures that media reports of suicides are more measured.

WHO's role is to build political commitment and leadership in national responses to suicide prevention, strengthen national planning capacity to build the core building blocks of a national response, and help establish national capacities to implement these responses.

Department of Mental Health and Substance Abuse (MSD) World Health Organization Avenue Appia 20 - CH - 1211 Geneva 27 - Switzerland

Phone : + 41 22 791 2111 Fax : + 41 22 791 3111

E-mail MSD: funkm@who.int

E-mail Mental Health Evidence and Research: <u>saxenas@who.int</u> Website:

http://www.who.int/mental_health/prevention/suicide/suicideprevent/en

Air Force Suicide Prevention Program (AFSPP)

U.S. Air Force established in 1996 the Air Force Suicide Prevention Program (AFSPP) designed to provide information and tools to members of the Air Force community (Suicide Prevention Program Managers, commanders, gatekeepers, IDS members, etc.) in their efforts to help reduce Air Force suicides.

AFSPP advocates a community approach to suicide prevention and implements 11 far-reaching initiatives:

- 1. Marketing Community Awareness
- 2. Leadership Involvement
- 3. Investigative Interview Policy
- 4. Professional Military Education
- 5. Epidemiological Database for tracking fatal and nonfatal self-injuries
- 6. Delivery of Community Preventive Services
- 7. Community Education and Training
- 8. Critical Incident Stress Management, by multidisciplinary teams
- 9. Integrated Delivery System and Community Action Information Board
- 10. Limited Patient-Psychotherapist Privilege
- 11. Unit Risk Factor Assessment, with the Behavioral Health Survey

AFSPP offers suicide prevention teaching products (such as Leaders Guide for Managing Personnel in Distress, Frontline Supervisors Training).

The website also refers to the U.S. Army, Navy, and Marine Corps suicide prevention programs.

Air Force Surgeon General Mailing Address: HQ USAF/SG 1780 Air Force Pentagon, Washington DC 20330-1780, USA

Office of the Surgeon General of the Air Force, Department of Defence HQ USAF/SGI, 110 Luke Avenue, Suite 400, Bolling AFB, DC 20332-7050, USA

Phone: + 1 202-767-4797 Fax : + 1 202-767-1456

E-mail: see : Feedback : <u>steven.pflanz@pentagon.af.mil</u>

Website: http://afspp.afms.mil

Samaritans

Samaritans was started in 1953 in London by a young vicar called Chad Varah, who during his career had offered counselling to his parishioners,

Samaritans is a national charity and the co-ordinating body for the 202 Samaritans branches in the UK and Ireland.

The branches are organised and work together in 13 geographic regions. (The website offers a full list of branches).

Samaritans provides completely confidential emotional support from appropriately trained Samaritans, 24 hours a day by telephone, personal visit, email, and letter, through its branch network - support that includes outreach activity at festivals and in prisons, hospitals, schools, the workplace and with homeless people.

Samaritans' values are based on the following beliefs:

- Having the opportunity to explore difficult feelings positive affects mental health and allows for a better understanding of suicide
- Being listened to, in confidence and accepted without prejudice, can alleviate despair and suicidal feelings
- Everyone has the right to make fundamental decisions about their own life, including the decision to die by suicide.

In 2003, Samaritans (UK & Ireland) took on the former Befrienders International (now called Befrienders Worldwide) network of over 400 volunteer centres in 39 countries, across 6 continents <u>http://www.befrienders.org</u>

General Office Samaritans The Upper Mill, Kingston Road, Ewell-Surrey, KT17 2AF, United Kingdom

Phone: + 44 20 8394 8300

Fax : + 44 20 8394 8301

E-mail: <u>admin@samaritans.org</u>

Website: <u>http://www.samaritans.org.uk/</u>

European Commission Health Strategy

Public authorities in the EU member states have the responsibility to sustain and promote the health of European citizens. Health is an important priority for Europeans. EU actions also complement and support Member States' national health policies.

Examples of action submitted by Member States, successfully implemented policies or initiatives, can be accessed on the website.

An important component of the EU health strategy is the public health programme of the Health and Consumer Protection Directorate General (DG SANCO). Sanco Search Engine allows retrieval of all resourceful documents on youth suicide prevention.

Following the consultation on the European Commission's Green Paper 'Promoting the Mental Health of the Population: Towards a Strategy on Mental health for the European Union' (2005), the Commissioner for Health announced the launch of a European Pact for Mental Health. Preliminary proposals of this pact seek action within the following areas:

- Prevention of Depression and Suicide
- Youth, Education and Mental Health
- Mental Health and Older People
- Mental Health in Workplace Settings.

A 5th strand, Combating Stigma and Social Exclusion, will be incorporated within all four thematic areas.

This work is facilitated by the Public Health Executive Agency (PHEA) <u>http://ec.europa.eu/phea/index_en.html</u> and by a contracted Coordinating Consortium <u>http://www.ec-mental-health-process.net</u>

Jurgen Scheftlein, Health determinants officer Jurgen.Scheftlein@ec.europa.eu European Commission DG SANCO, 1049 Brussels, Belgium

Phone: + 352 430136643 Fax: + 352 430134975

http://ec.europa.eu/health/ph_determinants/life_style/mental/mental_he_alth_en.htm

Choose Life: a national strategy and action plan to prevent suicide in Scotland

In 2002, the Scottish Government launched Choose Life, a ten-year strategy and action plan to reduce suicide in Scotland.

The plan plays a key part of the National Programme for Improving Mental Health and Well-Being Action Plan in Scotland.

Choose Life sets out objectives, priority groups (particularly children and young people) and a framework to ensure that action is taken nationally and locally.

In preparing the national framework the Scottish Development Centre made a report on suicide prevention best practices, called 'Laying the Foundations: Identifying Practice Examples'.

Many Scots find it difficult to talk about the problems and challenges they face in their lives. This can lead to an escalation of their problems. Through a 'Suicide Prevention Pledge,' Choose Life encourages Scots to lift the lid on their emotions and sign a pledge to be more open about their and others feelings in a bid to improve the nation's mental health and help prevent suicide.

Other programmes include:

- local action plans
- suicide prevention week, seminars and road shows
- resource data base
- a range of training activities workshops for practitioners
- Suicide Information Research and Evidence Network (SIREN) with workshops for practitioners and a Who's Who of members and their suicide-related interests and research.

Several evaluation reports are also available, such as:

- 'Community Planning Partnerships : First Annual Reports' (2006)
- 'Choose Life National Evaluation Roadshows' (2007).

Dougie Paterson, national operations manager Choose Life Europa Building, 450 Argyle Street, Glasgow G2 8 LG, United Kingdom

Phone : + 44 141 240 7796

E-mail : <u>Dougie.Paterson@scotland.gsi.gov.uk</u> Website : <u>http://www.chooselife.net</u> American Foundation for Suicide Prevention (AFSP)

The American Foundation for Suicide Prevention (AFSP), formed in 1987 is the leading not-for-profit organization exclusively dedicated to understanding and preventing suicide through research and education, and to reaching out to people with mood disorders and those impacted by suicide.

AFSP engages in the following activities:

- supporting research
- providing education and information to professionals, the media and the public through workshops, trainings, the AFSP website, videos, publications, brochures and public service announcements
- publicizing the magnitude of the problems of depression and suicide, advocating for policies and legislation that can help prevent suicide and working to eliminate the stigma
- offering programs for survivors of suicide loss that can be of assistance and involving survivors in suicide prevention (such as the National Survivors of Suicide Day, the Survivor e-Network and trainings for survivor support group facilitators).

Recent initiatives include:

- AFSP's PSA, "Suicide Shouldn't be a Secret", reaching 90 million television viewers
- Live Webcast educating primary care physicians about depression and their contribution on reducing suicide rates
- A multimedia project in cooperation with New York State Office of Mental Health consisting of two educational films with Internet and collateral materials.

American Foundation for Suicide Prevention 120 Wall Street, 22nd Floor - New York, NY 10005 - USA

Phone : + 1 212 363 3500 Fax : + 1 212 363 6237

E-mail : <u>inquiry@afsp.org</u>

Website: <u>www.afsp.org</u>

DGS (German Society of Suicide Prevention)

The German Society of Suicide Prevention (Deutsche Gesellschaft für Suizidprävention - Hilfe in Lebenskrisen e.V.) is a scientific association from Germany and German speaking countries, created in 1972.

Functioning as a 'bundesweite Vereinigung für Suizidprävention und Krisenintervention', DGS is dedicated to the 'Nationales Suizidpräventionsprogramm für Deutschland'. <u>www.suizidpraevention-deutschland.de</u> See: Prof. Dr. Armin Schmidtke Phone: + 49 931 201 76670 <u>clips-psychiatry@mail.uni-wuerzburg.de</u>

DGS has multiple working groups and guidelines on research, policy and practice of suicide prevention. It publishes the journal 'Suizidprophylaxe': www.suizidprophylaxe.de

The Working Group of Research on Suicidal Behavior (Arbeitsgemeinschaft zur Erforschung suizidalen Verhaltens) offers official support and organizational prerequisites for collaboration of scientists, for research projects and meetings, for international collaboration, for public information, and for education of successors in the area of suicide research.

DGS has interesting contacts and links including:

- a website involving young persons: <u>www.u25-freiburg.de</u>
- on line crisis intervention: <u>www.das-beratungsnetz.de</u>
- a website on depression and suicide: <u>www.frnd.de</u>
- a chat box for mutual support of youngsters: <u>www.youth-life-line.de</u>
- SEKIS, Self-Help Contact & Information Center: <u>www.sekis-berlin.de</u>
- Dresden Library on the history of suicidology 16th-19th century: <u>werner.felber@mailbox.tu-dresden.de</u>
- the European Network for Suicidology (ENS): <u>www.uke.uni-hamburg.de/extern/ens</u>
- the European Alliance Against Depression (EAAD): www.eaad.net/esn/wuerzburg.php

Univ. Doz. Dr. med. Elmar Etzersdorfer, Chair DGS Furtbachkrankenhaus, Furtbachstraße 6, 70178 Stuttgart, Germany

Phone: + 49 711 6465 126 Fax: + 49 711 6465 155 E- mail: <u>etzersdorfer@fbkh.org</u> Website: <u>http://www.suizidprophylaxe.de</u>

Befrienders Worldwide

In 2003, Samaritans (UK & Ireland) took on the former Befrienders International (now called Befrienders Worldwide) network of over 400 volunteer centres in 39 countries, across 6 continents.

To reduce the number of people who due by suicide, these centres provide help to those in need of emotional support and enable people to explore their feelings in an anonymous, confidential and non-judgmental environment. 'Befrienders listen to people who are lonely, despairing or considering suicide. We don't judge them or tell them what to do - we listen. It can make the difference between life and death. By listening to a suicidal person, a befriender helps them to listen to themselves.'

The website gives general information on the Befrienders Worldwide Charter including aims, mission, vision, values and guiding principles and practices. It also offers information in alternative languages on members, events and newsletters. The website also provides resourceful guidelines for people interested in setting up a volunteer service for distressed and suicidal individuals.

Befrienders Worldwide works in partnership with other networks to share respective experiences and conduct joint initiatives, such as brochures, platforms at international conferences, and linkage with the World Health Organisation (WHO) and the International Association for Suicide Prevention (IASP).

Other links on the website cover

- IFOTES (International Federation of Telephonic Emergency Services) <u>http://www.ifotes.org</u>
- LifeLine International http://www.lifeline-international.org/

International Officer Samaritans The Upper Mill, Kingston Road, Ewell - Surrey KT17 2AF - U.K.

Phone : + 44 20 8394 8300

E-mail : <u>webmaster@samaritans.org</u>.

Website: <u>http://www.befrienders.org</u>

Depressedteens.com (Rodwell Dart Memorial Foundation)

Depressedteens.com was established to provide valuable information and educational resources that will help teenagers, their parents, and educators understand the signs and symptoms of teenage depression and get help when needed.

The initiative came from Hailey Dart (who lost her son Roddy, a sufferer of manic depression, on his 22nd birthday) and includes:

- 'Day for Night : Recognizing Teenage Depression'

A 26-minute DVD that takes a deep look into teenage depression, its symptoms and its treatment. (This film is only an exploration of depression and is therefore not intended for use in Suicide Prevention Programming.)

- 'Flipswitch show'

A fast-paced weekly 30-minute program on teens with mood disorders brought by depressed teens.com Podcast.

Talking directly to teens, it covers issues such as:

- transition to college
- family therapy
- cognitive-behavioural therapy

Rodwell Dart Memorial Foundation

633 West Main St - Aspen, CO 81611, USA

E-mail : <u>flipswitch@bpkids.org</u>

Website: http://depressedteens.podbean.com

International Academy of Suicide Research (IASR)

The objectives of the Academy, established in 1990, are the promotion of high standards of research and scholarship in the field of suicidal behaviour by fostering communication and cooperation among scholars engaged in such research.

This is being achieved by

- the publication of the Academy's Journal 'Archives of Suicide Research'

archives@pi.cpmc.columbia.edu

journalsubmissions@iasronline.org

- regular scientific meetings usually each year in conjunction with conferences such as the International Association for Suicide Prevention, the European Symposium on Suicide and Suicidal Behaviour, and the American Association of Suicidology
- the Morselli Medal awarded every two years by IASR to an individual who has made an outstanding and important lifetime contribution to the study of suicidal behaviour and/or suicide prevention
- increase in well-qualified membership

bronisch@mpipsykl.mpg.de

Prof. J. John Mann, M.D. President of the International Academy of Suicide Research NYS Psychiatric Institute 1051 Riverside Drive New York, NY 10032 USA

Phone: + 1 212 543 5000

E-mail: jjm@Columbia.edu

Website: http://www.depts.ttu.edu/psy/iasronline /

Centre for Suicide Prevention (CSP) Canada

The Centre for Suicide Prevention, a charitable organisation in Alberta, Canada, is composed of three main branches:

- The Suicide Information & Education Collection (SIEC), a special library and resource centre providing information on suicide and suicidal behaviour
- The Suicide Prevention Training Programs (SPTP) branch providing caregiver training in suicide intervention, awareness, bereavement, crisis management and related topics.
- The Suicide Prevention Research Projects (SPRP), advocating for, and supporting research on suicide and suicidal behaviour.

Primary areas of interest include:

- 'Youth at Risk of Suicide' A program which targets youth, their parents, guardians, and people working with them.
- 'White Stone'

An Aboriginal Youth Suicide Prevention Program, developed in partnership with the Royal Canadian Mounted Police (RCMP) National Aboriginal Policing Services.

SIEC Alert is a quarterly online quick reference guide to some of the newest resources in the field of suicide prevention.

Centre for Suicide Prevention Suite 320, 1202 Centre Street S.E. Calgary, AB T2G 5A5, Canada

Phone: + 1 403-245-3900 Fax : + 1 403-245-0299

E-mail : <u>sptp@suicideinfo.ca</u>

Website: http://www.suicideinfo.ca/

Centre for Suicide Research - University of Oxford

The research consists of epidemiological studies which centre on the investigation of the full range of the causes of suicidal behaviour, the development and evaluation of effective methods of treating people after suicide attempts, the prevention of suicidal behaviour, and the amelioration of care for bereaved relatives.

Topics of current and recent research projects include:

- Deliberate self harm and suicide in adolescents
- Community study self harm and associated factors in adolescents
- Adolescents' views on prevention of suicide
- Suicide in young people

Oxford is the UK centre in the Child and Adolescent Self-harm in Europe (CASE) Study. It provides training opportunities for research workers and students who wish to develop research experience and skills relevant to suicide prevention.

The centre collaborates with other major centres in the UK and internationally.

It has established a group of international experts within the Cochrane Collaboration to conduct systematic reviews of research trials on treatment and prevention of suicidal behaviour that can inform strategies for prevention on a worldwide basis.

Professor Keith Hawton, director <u>keith.hawton@psych.ox.ac.uk</u> Centre for Suicide Research University of Oxford Department of Psychiatry Warneford Hospital Headington Oxford OX3 7JX - United Kingdom

Phone : + 44 1865 226258 Fax : + 44 1865 223933

E-mail : <u>csr@psych.ox.ac.uk</u>

Website: http://cebmh.warne.ox.ac.uk/csr

WHO European Ministerial Conference on Mental Health (Helsinki 2005)

Suicide is not only a personal tragedy, it represents a major public health problem, particularly in the WHO European Region, where in the age group 15-35 years, suicide is the second most common cause of death after traffic accidents.

In response to this serious public health problem, substantial efforts have been made in many countries to prevent suicide. WHO has produced an updated inventory of national strategies for suicide prevention in WHO's European Member States.

At a WHO meeting on suicide prevention strategies in Europe (Brussels, 2004), health policy-makers and experts in mental health and suicide behaviour from 36 Member States in the European Region discussed current evidence and practices in suicide prevention and formulated recommendations for suicide prevention strategies. This document is identified as EUR/04/5047810/B7.

The Action Plan 'Facing the Challenges, Building Solutions', adopted at the WHO European Ministerial Conference on Mental Health (Helsinki, 2005) proposes a number of specific measures, including :

- identifying groups at risk
- targeting marginalized groups with support programmes
- establishing self-help groups, phone help lines and websites for people in crisis situations.

The Plan recommends 11 actions to consider for the well being of European citizens. Action 5 covers the prevention of mental health problems and suicide. Document: EUR/04/5047810/7.

Member States are committed, through the Mental Health Declaration for Europe and this Action Plan, to face the challenges by moving (between 2005 and 2010) towards 12 specific milestones, the 3rd milestone being the inclusion of the prevention of mental health problems and suicide in national policies.

World Health Organization - Regional Office for Europe Scherfigsvej 8, 2100 Copenhagen, Denmark

Tina Kiaer, Mental Health Information Officer Phone: + 45 39 17 12 50

E-mail: tki@euro.who.int

Website: http://www.euro.who.int/mentalhealth

American Association of Suicidology (AAS)

The American Association of Suicidology (AAS) is a not-for-profit education, advocacy and resource organization dedicated to the understanding and prevention of suicide.

In order to strengthen the interaction of research and crisis counselling, Edwin S. Shneidman, PhD founded in 1968 AAS. AAS promotes research, public awareness programs, public education and training for professionals and volunteers.

AAS has developed a variety of programmes including:

- a national clearinghouse for information on suicide
- networking opportunities with the world's leading suicidologists
- the publications 'Suicide and Life-Threatening Behavior', 'Newslink' and 'Surviving Suicide'
- a Survivors Division
- a Million Voices Campaign
- a Student Division, dedicated to increasing, encouraging and supporting student involvement in the AAS mission.

Flagship training programs (prevention principles, best and evidence-based practices, postvention models, liability issues, contagion prevention) are delineated into two sub-programs:

- 'Recognizing and Responding to Suicide Risk: Essential Skills for Clinicians' (RRSR) for crisis centre employees
- 'School Suicide Prevention Accreditation Program' for the suicide prevention specialists in schools.

AAS holds an official website which offers various links on suicidality and mental health (research, training, prevention, professional, etc).

American Association of Suicidology (AAS) 5221 Wisconsin Avenue, NW - Washington, DC 20015 - USA

Phone : + 1 202 237-2280

Fax : + 1 202 237-2282

E-mail : <u>info@suicidology.org</u>

Website : <u>www.suicidology.org</u>

Trieste Mental Health Department

The Trieste Mental Health Department is a public, community-based mental healthcare service which evolved directly from the pioneering deinstitutionalisation experiences of Franco Basaglia and his collaborators in the 1970's.

Recognised for years as one of the most advanced public mental healthcare services in the world and as a leading WHO Collaborating Centre, the Trieste MHD continues to remain a leader in innovative approaches to mental healthcare and is aimed at the emancipation and social reintegration of persons suffering from mental disorders.

The website includes a presentation of the values, principles and user rights which have guided the transformation process in Trieste over many years and continue to sustain it today, as well as a description of the legal framework for psychiatry in Italy.

Suicide prevention is an integrated part of the structure, functions, operating units and programmes of the Trieste MHD. Examples of such programmes are:

- children and adolescents
- GPs as "health tutors"
- work with families
- "Amalia Special Phone" Project
- "Radio Fragola" Social Communication Project
- self-help groups, associations.

DSM Trieste (dipartimento di salute mentale) Via Weiss 5 - 34127 Trieste - Italy

Phone : + 39 40 399 7360 Fax : + 39 40 399 7363

E-mail : <u>dsm@ass1.sanita.fvg.it</u>

Website : <u>http://www.triestesalutementale.it</u>

The Suicide Research and Prevention Unit (Oslo)

The Suicide Research and Prevention Unit was established in 1996 at the University of Oslo, Norway. The unit is a national resource centre in suicidology, with three main fields of suicide-preventive work in Norway: research, dissemination of knowledge and counselling.

The national centre runs, initiates, and supervises research projects all over the country. The unit also has multiple publications on diverse topics such as:

- Suicide and suicide prevention activities among children and young people in Norway
- A comprehensive education programme in suicide prevention
- VIVAT First aid for suicide risk
- Suicide in peacekeepers: risk factors for suicide versus accidental death

In order to spread information widely the Suicide Research and Prevention Unit publishes a Norwegian journal called 'Suicidologi' and recommends the following suicide prevention resources:

- The Norwegian Organisation for Suicide Survivors (LEVE) <u>http://www.med.uio.no/ipsy/ssff/english/survivors.html</u>
- Young people, crises and suicidal behaviour through the eyes of the researcher and Henrik Ibsen <u>http://www.med.uio.no/ipsy/ssff/english/youth.html</u>

Lars Mehlum, professor of suicidology at the University of Oslo Head, Suicide Research and Prevention Unit

Sognsvannsvn. 21, Bygning 12, N-0320 Oslo, Norway

Phone: + 47 22 92 34 73 Fax: + 47 22 92 39 58

E-mail: <u>ssff-post@medisin.uio.no</u>

Website: <u>http://www.med.uio.no/ipsy/ssff/english/index_english.html</u>

Institute of Medicine (IOM) USA

Established in 1970 as a component of the National Academy of Sciences, the Institute of Medicine (IOM) provides independent, objective, evidencebased advice to policymakers, health professionals, the private sector, and the public.

The IOM's mission is to serve as adviser to the nation to improve health.

IOM presented the 2006 Gustav O. Lienhard Award for the advancement of personal health services to Aaron T. Beck, University Professor of Psychiatry at the University of Pennsylvania. The award honours Beck for developing the theory and practice of cognitive therapy. He has focused a significant portion of his work on suicide prevention. His studies provided the first rational basis for the classification and assessment of suicidal behaviours and made it possible to identify individuals at a high risk for suicide. He has identified clinical and psychological variables, such as hopelessness, that are better predictors of suicide than clinical depression, and found them to be very responsive to cognitive therapy.

All reports from the Institute of Medicine and the National Academies are available to read and order online at the National Academies Press (NAP) website: <u>http://www.nap.edu</u>

NAP has published the reports issued by the IOM on adult and adolescent suicide and suicide prevention, which includes:

- Suicide Prevention and Intervention: Summary of a Workshop (2001)
- Risk Factors for Suicide: Summary of a Workshop (2001)
- Reducing Suicide: A National Imperative (2002).

Institute of Medicine 500 Fifth Street NW, Washington DC 20001, USA

Phone : + 1 202 334 2352

Fax : + 1 202 334 1412

E-mail : <u>iomwww@nas.edu</u>

Website : <u>http://www.iom.edu</u>

Trimbos Institute (Utrecht)

The Netherlands Institute of Mental Health and Addiction (Trimbos Institute) has conducted a Mental Health Survey and Incidence Study (NEMESIS) to assess mental health problems in the Dutch population aged between 18 to 64 years old. Results of the study are described in the 2007 report 'Suicidality in the general population: ideation and attempts' (article number AF0712).

The report has contributed to a basis for new policy (requested by the Ministry of Health, Welfare and Sports) from the Trimbos Institute in which the existing recommendations of the Health Council of the Netherlands on suicide prevention dating from 1986 are evaluated and updated.

The Trimbos Quarterly provides an e-overview of current developments in the area of mental health care prevention and promotion in the Netherlands. The subscription is free.

The Trimbos Institute works in close collaboration with the WHO Europe Mental Health Department (Copenhagen) and a large number of partner countries. It collaborates also with the 'Ivonne van de Ven Stichting' (Amsterdam), a Dutch foundation for suicide prevention. <u>info@ivonnevandevenstichting.nl</u> <u>http://www.ivonnevandevenstichting.nl</u>

The suicide prevention activities of this foundation include:

- a proposal for a national plan of action
- guidelines for suicide in the media
- collaboration with the Dutch Railways (ProRail).

Trimbos Institute Netherlands Institute of Mental Health and Addiction

Da Costakade 45, P.O. Box 725, 3500 AS Utrecht, The Netherlands

Phone : + 31 30 2971100 Fax : + 31 30 2971111

E_ mail : <u>info@trimbos.nl</u>

Website : <u>http://www.trimbos.nl/default37.html</u>

SPAN USA - Suicide Prevention Action Network

The Suicide Prevention Action Network (SPAN USA) is dedicated to preventing suicide through public education and awareness, community action and federal, state and local grassroots advocacy. The organization was founded in 1996 by Gerald and Elsie Weyrauch of Marietta, Georgia, survivors of the suicide of their 34-year-old physician daughter, Terri. Their goal was to create a way for survivors of suicide - those who have lost someone to suicide - to transform their grief into positive action to prevent future tragedies.

As part of its mission, SPAN USA continues to develop a Field Liaison Program across the country—one in every Congressional district in the United States.

Other programs include:

- State Information
- Network News
- Annual Event
- Lifekeeper Memory products
- Legislative Action Center
- Teachable Moments campaign.

Jason H. Padgett, MPA, Field Development Coordinator Suicide Prevention Action Network USA (SPAN USA)

1025 Vermont Avenue, NW, Suite 1066 - Washington, DC 20005 - USA

Phone : + 1 202 449-3600 Fax : + 1 202 449-3601

E-mail : <u>info@spanusa.org</u>

Website : <u>http://www.spanusa.org</u>

King's College London: International Mental Health

The Institute of Psychiatry (IoP) at the Maudsley is a postgraduate research and teaching institution of the University of London and a school of King's College London, and has a strong 'International Mental Health' programme.

The World Health Organisation recommended that member states develop national suicide prevention programmes, whose missions would be to create links with other public health policies and establish national co-ordinating committees. It also recommended identification of groups at risk and restriction of access to means of suicide.

The United Nations has acknowledged suicide as a global tragedy, noting that comprehensive national strategies had only been implemented in a few countries. Little is being done, however, to address the issue in countries of the developing world where a substantial numbers of suicides take place.

IoP has surfaced to increase research capacity in mental health in low and middle-income countries. IoP serves as a pioneer institution of best research practice in treatment approaches. IoP has developed many mental health measures due to its investigations of individuals affected by suicide.

Cultural sensitivity, especially attention to local idioms of expression of distress, has been particularly taken into consideration in IoP research. Importing treatment approaches that have been shown to work in the West may not be enough; these approaches may need to be adjusted in order to be applicable to different cultural settings. IoP therefore undertakes community-based research around the world, in countries such as Pakistan, Ethiopia, Taiwan, and Sri Lanka.

Institute of Psychiatry, King's College London Louise Pratt, communications officer, Mental Health Knowledge Centre De Crespigny Park, London - United Kingdom, SE5 8AF

Phone : + 44 20 7836 5454 (general) or + 44 20 7848 5377 Fax : + 44 20 7848 5387

E-mail : <u>louise.pratt@iop.kcl.ac.uk</u>

Website : <u>http://www.iop.kcl.ac.uk/international/?theme_id=15</u>

National Center for Suicide Prevention Training (NCSPT)

The National Center for Suicide Prevention Training (NCSPT) is a collaborative project between the Harvard University Injury Control Research Center (HICRC), the Education Development Center (EDC) and the US Northeast Injury Prevention Network.

NCSPT was established in June 2001 in direct response to identified training needs. Its mission is to provide educational resources to help public officials, service providers, and community-based coalitions develop effective suicide prevention programs and policies.

NCSPT has recently joined with the Suicide Prevention Resource Center (SPRC) to provide a comprehensive listing of resources on suicide prevention.

NCSPT has also developed a series of workshops on youth suicide prevention which are currently being administered by SPRC. Although targeting youngsters, much of the course content is applicable to at risk individuals across the lifespan. The four workshops are available free of charge and to be completed at your own pace. The workshops seek to:

1. Define, Understand, and Present Youth Suicide Data

2. Plan and Evaluate Youth Suicide Prevention programs

3. Review 'Youth Suicide Prevention : An Introduction to Gatekeeping'

4. Provide research evidence of Suicide as it is a preventable public health problem

For information on continuing education units available for social workers and health educators, please go to: <u>http://www.ncspt.org/info.asp</u>

SPRC 55 Chapel St. - Newton, MA 02458, USA

Phone : + 1 617- 964-5448 Fax : + 1 617- 969-9186

E-mail : <u>ncspt@sprc.org</u> Website : <u>http://www.ncspt.org</u> American Psychiatric Association (APA)

The American Psychiatric Association (APA) is a medical health society recognized worldwide. Its vision is to promote and actively advocate for a society that has available, accessible quality psychiatric diagnosis and treatment.

APA developed a resourceful online program called PsychiatryOnline Lifelong Learning in Psychiatry. PsychiatryOnline Lifelong Learning in Psychiatry is a powerful web-based portal that features DSM-IV-TR®—the most widely used psychiatric reference in the world—and The American Journal of Psychiatry as cornerstones.

PsychiatryOnline includes:

- Evaluation on Suicidality
- Indications of Suicide Assessment
- Risk Factors
- Protective Factors
- Helpful Questions to Uncover Suicidal Thoughts, Plans, and Behaviors
- Decision Tree for Suicidal Ideation or Attempt
- Guidelines for Selecting a Treatment Setting
- Risk Management and Documentation Considerations

The APA also offers practice guidelines and evidence-based recommendations for the assessment and treatment of psychiatric disorders. Example of these guidelines:

- Helping Residents Cope with a Patient Suicide-terms; Organizations and Terms that you will likely encounter after a Patient Suicide
- Practice Guideline for Assessment and Treatment of Patients with Suicidal Behaviors
- Assessing And Treating Suicidal Behaviors: A Quick Reference Guide

APA has also published a brochure that covers suicide prevention: 'Let's Talk Facts About Teen Suicide' provides helpful information on teen suicide.

American Psychiatric Association 1000 Wilson Boulevard, Suite 1825, Arlington, VA. 22209-3901, USA

Phone: + 1 703-907-7300 E-mail: <u>apa@psych.org</u> Website: <u>http://www.psychiatryonline.com/pracGuide/pracGuidehome.aspx</u> Preventing suicide: a resource for teachers and other school staff (WHO SUPRE)

WHO SUPRE is a document that is part of a series of suicide prevention resources for specific social and professional groups. It has been prepared by the Department of Mental Health as part of SUPRE, the WHO worldwide initiative for the prevention of suicide.

Suicide is among the top five causes of mortality in the 15- to 19- year age group worldwide. In many countries, it ranks first or second as a cause of death among both boys and girls in this age group. Suicide prevention among children and adolescents is therefore of high significance.

Given the fact that in many countries and regions most people in this age group attend school, this appears to be an excellent place to develop appropriate preventive action. This document is therefore primarily aimed at school teachers and other school staff, such as school counsellors, school doctors, nurses and social workers, and members of school boards of governors. However, public health professionals and other groups interested in suicide prevention programmes will also find the information provided useful.

The document briefly describes the dimension of suicidal behaviour in adolescence, presents the main protective and risk factors behind this behaviour, and indicates how to identify, manage, and act when suicide is attempted or committed in the school community.

This document is identified as: WHO/MNH/MBD/00.3

World Health Organization Avenue Appia 20 - CH - 1211 Geneva 27 - Switzerland

Phone : + 41 22 791 2111

Fax : + 41 22 791 3111

E-mail MSD: <u>funkm@who.int</u> E-mail Mental Health Evidence and Research: saxenas@who.int

Website : <u>http://www.who.int/mental_health/resources/suicide/en</u>

Yellow Ribbon Suicide Prevention Program of Minnesota

The Yellow Ribbon Suicide Prevention Program is an outreach program embedded within Light for Life Foundation of Minnesota.

The foundation works to save and enrich lives through suicide prevention efforts using education, advocacy and support strategies.

Its work targets entire communities and seeks participation and organization of activities by the community for the community. In this way, high-risk populations are addressed and program sustainability is built.

The program includes activities such as:

- youth development, mentoring and asset building opportunities through a special youth program, the Yellow Ribbon Youth Boards
- the Yellow Ribbon Ask4Help card, a series of cards that can be beneficial to those who don't have the words to express themselves
- teaching life skills on how to handle an imminent suicidal situation through "Stay, Listen, Get Help" and learning how to ask a suicide question.

The program strongly refers to an award winning website of Mayo Clinic offering information on issues such as:

- Antidepressants for children: Explore the pros and cons http://www.mayoclinic.com/health/antidepressants/MH00059

- Depression in children: How is it treated ? <u>http://www.mayoclinic.com/health/depression-treatment/AN00685</u>

- Depression (major depression) http://www.mayoclinic.com/health/depression/DS00175

Marissa Lachmiller, Youth & Community Project Coordinator

12 Civic Center Plaza, Suite 2085, North Mankaton, MN, USA

Phone: + 1 507-387-5020

E-mail : <u>yr.marissa@gmail.com</u>

Website : <u>http://www.yellowribbonmn.org/</u>

Centre for Suicide Research (Odense)

The Centre for Suicide Research (Odense, 1989) was established as a selfgoverning institution under the Danish Ministry of Social Affairs and as of 1999, is under the siege of the Ministry of Welfare. In 1995, the Centre was also designated as the WHO Collaborating Centre for Prevention of Suicide.

The Centre keeps two public registers:

- Register for Suicides
- Register for Suicide Attempts.

The Centre does epidemiological and cause-orientated research concerning suicidal behaviour. The Centre has established, collaborated in, and been involved with a variety of research projects, such as the following:

- The Life Style and Personal Welfare of Young People.
- Suicide Prevention Program for Children and Young adults in Danish Municipalities.
- SAYLE, Saving Young Lives Everywhere, is a research-based intervention for high school students which identifies youngsters with poor self welfare and involves them in the programme Travellers
- Travellers for Vulnerable Young People is a mental health related program impacting youngsters from different ethnic and cultural backgrounds

Travellers for Vulnerable Young People does not focus on problems or diminished mental health capacities; Travellers for Vulnerable Young People emphasizes personal well-being, development of strength and resources, and a broad view of the world. The project is carried out in certain public schools in Odense, Copenhagen and Aarhus in which 50 per cent of the pupils are from a different ethnic background than Danish. The target group is pupils from 7th to 10th grade.

Lilian Zøllner, PhD, Director <u>lz@cfsmail.dk</u> Centre for Suicide Research Søndergade 17, DK-5000 Odense C, Denmark

Phone : + 45 66 13 88 11 Fax : + 45 65 90 81 74

E-mail : info@cfsmail

Website : <u>http://www.selvmordsforskning.dk/Web/English</u>

Action Plan for Preventing Suicidal Behaviour in Estonia

Judging from the effectiveness of suicide prevention by suicide rates and trends, it is no surprise that suicide rates in Estonia have decreased steadily since 1995. It is now the lowest among the Baltic States and Russia, having been on a par with these neighbouring countries' rates just a few years ago.

The Action Plan for Preventing Suicidal Behaviour in Estonia is structured on a detailed matrix of different strategies for specific groups. Monitoring of attempted suicide events and recording of individuals at risk who require preventive interventions are key elements in the project. This plan consists of detailed objectives, programmes, timing, categories of people involved in the project, expected results, risks, etc. The plan includes information regarding setting up a national centre; official mandate and funds for coordinating and developing suicide prevention work in the country are also described.

Suicidology in Estonia today has been made possible by supportive partnerships in Sweden, WHO, European Commission and other key projects. Since 1993, the Estonian-Swedish Mental Health and Suicidology Institute (ERSI) has also been collaborating with NASP at the Karolinska Institute.

The Estonian-Swedish Suicidology Institute (ESSI) developed a suicide project called Project "Estonia Free from Depression". This project provides training programs for school personnel on suicidality and depression of children and adolescents and on suicide prevention. The program also includes info-materials for family members and friends.

Estonia also partners with the European Alliance against Depression (EAAD), an international network of experts with the aim to promote the care of depressed and suicidal patients by initiating community-based intervention programmes in European countries.

http://www.eaad.net/index.php

Prof. Airi Värnik, Professor of Tartu University Phone: + 372 56 215580 Fax: + 372 6 973154 E-mail: airiv@online.ee

Estonian-Swedish Mental Health and Suicidology Institute (ERSI) Õie 39, EST - 11615 Tallinn, Estonia

Phone/Fax: +372 651 6550 E-mail suicidology@suicidology.ee Website: http://www.suicidology.ee/index.php?page=3 Florida Youth Suicide Prevention Gatekeeper (The Beth Foundation)

With financial support from the Department of Children and Families in the United States, The Beth Foundation developed the Florida Suicide Prevention Gatekeeper Training Program to conduct educational programs throughout the state of Florida.

The Beth Foundation was founded in memory of Elizabeth Harrington (1981 - 1997).

Keeping in mind that suicide prevention has always been an issue in search of leadership, a meeting with Elizabeth's parents in 2000 and Florida Governor Jeb Bush resulted in his making the prevention of suicide a state priority.

The objective of the Florida Youth Suicide Prevention Gatekeeper Training Program is to establish a network of adults trained to recognize, respond appropriately and refer our young people for help.

gatekeeper@thebethfoundation.com

A training workshop, developed under this program, targets key gatekeepers - teachers, school nurses, school personnel, police officers, mental health care providers, and emergency health care personnel - and other adults who interact with youngsters.

The 1-day training workshop focuses on the attitudes, knowledge and skills needed to address suicide prevention.

The Beth Foundation

2869 S. Ponte Vedra Blvd - Ponte Vedra Beach, FL 32082 - USA

E-mail : pam@thebethfoundation.com

Website : http://www.thebethfoundation.com/index.html

Australian Institute for Suicide Research and Prevention (AISRAP)

The aim of the Australian Institute for Suicide Research and Prevention (AISRAP), part of Griffith University, is to promote, conduct, and support comprehensive intersectoral programs of research activities for the prevention of suicidal behaviours in Australia.

AISRAP promotes and conducts research in all aspects of suicide prevention. It is active in suicide prevention strategy development and provides education and training for professionals and volunteers. It also serves as a national clearinghouse for information on suicide.

AISRAP is a WHO Collaborating Centre for Training and Research in Suicide Prevention. The centre provides:

- postgraduate programs, including a masters in suicidology
- suicide prevention skills training workshops for professionals and consumers
- e-suicide prevention skills training (currently closed)

Professor Diego De Leo, director Australian Institute for Suicide Research and Prevention, Mt Gravatt campus, Griffith University, 170 Kessels Road, Nathan - Brisbane, QLD 4111, Australia

Phone : + 61 7 373 53377 Fax : + 61 7 387 53450

E-mail : <u>aisrap@griffith.edu.au</u>

Website : <u>http://www.gu.edu.au/aisrap</u>

United Nations Children's Fund (UNICEF)

UNICEF has developed a framework of rights-based and child-friendly educational systems and schools that are recognized as health-focused, effective, protective of children, and involving families, communities and children.

UNICEF has recently launched A Web Toolkit on Violence against Children, a resource-based program whose mission is to help combat violence against children in the home/family, in schools and educational settings, in a local community, in the judicial system, and in other miscellaneous work setting. This resource-based program has been sponsored by several partner organizations which have been closely involved in the preparation of the UN Secretary-General's study on Violence against Children. The Web Toolkit on Violence against Children is set to be comprehensive and detailed-oriented; however, it still provides an overview of a variety of tools/tips to prevent and intervene when violence against children occurs.

WHO, UNICEF, UNESCO, EDC, World Bank, PCD and Education International have all agreed upon a group of standard and cost-effective components of a school health, which includes among others the establishment of a hygiene and nutrition programme. Discussions with these primary organizations have also led to the establishment of Focus Resources for Effective School Health (FRESH), a joint action project against violence perpetrated to children. FRESH promotes the presence in a child's life of a positive psycho-social environment that discourages all types of school violence such as the abuse of students, sexual harassment and bullying. Among programs under FRESH, The Psycho-Social Environment (PSE) Profile, a tool identifying and changing conditions that can increase the school's capacity to be supportive and caring.

Information with regards to these joint ventures is provided in Document 10 of the WHO's Information Series On School Health: 'Creating an Environment for Emotional and Social Well-Being: An Important Responsibility of a Health-Promoting and Child-Friendly School' (WHO/MNH and WHO/NPH, Geneva, 2003) http://www.who.int/school_youth_health/resources/information_series/en

UNICEF House 3 United Nations Plaza, New York, NY 10017, USA

Phone: + 1 212 326 7000 Fax: + 1 212 887 7465

E-mail : <u>secretariat@sgsvac.org</u> Website: http://www.unviolencestudy.org/ Center for Suicide Risk Assessment, Columbia University

The mission of the Center for Suicide Risk Assessment (CSRA) is to enhance and promote the assessment of suicide risk in clinical and research settings through the application of the Columbia-Suicide Severity Rating Scale (C-SSRS) and consultation and training on suicidality, assessment and management in clinical and research settings.

Suicide prevention efforts depend upon appropriate identification and screening. Treatment, management, and understanding of suicidality depend upon adequate assessment and identification. In this context CSRA developed the C-SSRS, a brief standardized measure that uniquely assesses the essential information (behavior, ideation, lethality and severity) and distinguishes between suicidal occurrences and non-suicidal self-injury.

The C-SSRS has been mandated or recommended by various international drug regulatory agencies. It has been used in a multitude of settings with adolescents and adults including to assess outcomes and safety in clinical trials, the assessment of suicide risk in community clinics and clinical practice, and quantification for surveillance efforts. Importantly, the definitions used in the Centers for Disease Control (CDC) are rooted in the Columbia nomenclature and entirely consistent with the C-SSRS.

It has been translated into over 90 languages and is being used globally in clinical and research settings. It is free of charge for use in clinical settings and on-line training is available. A risk assessment version, which also includes evidenced-based risk and protective factors, is available, as well as a self-report version and interactive-voice response versions.

The CSRA also offers a 'Safety Planning' intervention to manage suicidal individuals in emergency hospital settings. Contact: Dr. Barabara Stanley at bhs2@columbia.edu

Kelly Posner, Ph.D., director Center for Suicide Risk Assessment (CSRA) Columbia University Department of Psychiatry, NYS Psychiatric Institute, 1051 Riverside Drive, Unit 74, New York, NY 10032, USA

Phone: +1 212 543 5940 E-mail: posnerk@childpsych.columbia.edu

Website: <u>http://childpsych.columbia.edu/s_training_02_b.html</u> <u>http://www.mentalhelp.net/poc/view_doc.php?type=weblog&wlid=6&id=35</u> <u>4&cn=9</u> The Jason Foundation, Inc. (JFI)

The Jason Foundation was established in 1997 as a response to the loss of Jason Flatt - age 16. The Jason Foundation, Inc. (JFI) is a nationally recognized provider of educational curricula and training programs for students, educators/youth workers and parents.

JFI's programs build an awareness of the national health problem of youth suicide, educate participants in recognizing the "warning signs or signs of concern", provide information on identifying at-risk behaviors and elevated risk groups, and direct participants to local resources to deal with possible suicidal ideation.

JFI uses the triangle of prevention model that includes all three areas of young peoples' lives: Youth, Educators & Parents. JFI's programs target each of these groups.

JFI's student curriculums are presented in the "third-person" perspective how to help a friend. For example, "if, after talking, you are still concerned - ask your friend to go with you to a responsible adult. If your friend will not go, go yourself and ask for help for your friend. Never keep a secret of a friend's thoughts of self-harming - act - tell an adult."

JFI also collaborated with A Community Assistance Resource Line (CARL), a program that allows youngsters to speak to a caring experienced clinical specialist.

The Jason Foundation, Inc. (JFI) Mr Clark Flatt - President 181 East Main Street. Jefferson Building, Suite 5 Hendersonville, TN 37075, USA

Phone: + 1 615 264-2323

Fax : + 1 615 264-0188

E-mail : info@jasonfoundation.com

Website : <u>http://www.jasonfoundation.com</u>

Social, Personal and Health Education (Ireland)

The Education Act (Ireland, 1998) places an obligation on schools to promote the social and personal development of students and to provide health education for them.

Social, personal and health education, as part of the curriculum, supports the personal development, health and well-being of young people and helps them create and maintain supportive relationships.

The Department of Education has approved a syllabus for Social, Personal and Health Education (SPHE) at Junior Cycle level, in post-primary schools. SPHE is successfully being introduced in all post-primary schools on a phased basis from September 2000. It builds on the experience of all children at Primary level, where SPHE is a core part of the Primary school curriculum.

A committee manages a SPHE Support service with representation from the Department of Education and Science, the Department of Health and Children, Health Boards and Marino Institute of Education.

The National Support Centre for the SPHE Support Service is based in Marino Institute of Education. Its site is divided into sections so that students, teachers and parents can all find information relevant to their needs.

Sharon McGrath, National Co-ordinator

SPHE Support Service (Post-Primary) Marino Institute of Education, Griffith Avenue, Dublin 9, Ireland

Phone: + 353 1 8057718

Fax : + 353 1 8535113

E- mail : <u>sphe@mie.ie</u>

Website : <u>http://www.sphe.ie</u>

Public Health Agency of Canada (PHAC)

The Government of Canada established the Public Health Agency of Canada (PHAC) in 2004. PHAC mission is to promote and protect the health of Canadians through leadership, partnership, innovation and action in relation to public health.

Canadian research has provided significant empirical foundation for designing prevention and intervention programs as they have helped to draw attention to the groups at statistically highest risk to die by suicide. Canadian researchers are considered to be leaders in advancing our understanding of the genetic and biomedical contributions to suicide.

The resources, strengths and gaps in the field of suicide prevention in Canada are discussed in a paper (prepared by Jennifer White) linked to the Workshop on Suicide-Related Research in Montréal, 2003: 'Suicide-Related Research in Canada: A Descriptive Overview'.

A summary of related national efforts, good practices and key milestones in the history of the suicide prevention movement in Canada is given. Updated bibliographies provide a gateway to research on suicide in Canada published during the period 1985 through 2003.

Public Health Agency of Canada 130 Colonnade Road A.L. 6501H Ottawa, Ontario K1A 0K9, Canada

Public Health Agency of Canada 1015 Arlington Street Winnipeg, Manitoba R3E 3R2, Canada

Phone : + 1 204 789-2000 Fax : + 1 204 789-7878

E-mail : see : 'Contact Us'

Website : <u>http://www.phac-aspc.gc.ca/publicat/mh-sm/suicide-research/index.html</u>

NASP Master Programme and International Research Course (Stockholm)

NASP (National Prevention of Suicide and Mental III-Health at Karolinska Institutet and Stockholm County Council's Centre for Suicide Research and Prevention of Mental III-Health) drives an extensive education programme that involves people who work with suicidal persons, with researchers in mental health and suicide prevention.

The primary strategy involves educating key people who in turn are teachers and mentors for their own workplaces, for example, in adult psychiatry, child and adolescent psychiatry and staff in the school environment.

NASP has a permanent 2-year Mental Health and Suicide Prevention Master Programme incorporating mental health and suicide prevention.

Since 2001, NASP has also organised an annual international research course with the Department of Public Health. The course, in collaboration with the division for International Health (IHCAR), reflects back with senior lecturers and other researchers participating in suicide prevention and mental health work. The key focus of the course is to look at evidence-based evaluation of interventions and programmes in hope improving mental health and reducing suicide risk and behaviours.

The course, which is offered every year, includes around 25 delegates from the whole world, who air their thoughts about the evaluations of their planned or operational work with experienced researchers in the same area.

Professor David Titelman, Head of Education at NASP

Karolinska Institutet, SE-171 77 Stockholm, Sweden

Phone: + 46 8-524 800 00

Fax : + 46 8-31 11 01

E-mail : <u>David.Titelman@ki.se</u>

Website: http://ki.se/ki/jsp/polopoly.jsp?d=17405&a=41917&l=en

Links : <u>http://www.ki.se/suicide</u>

Pennsylvania Youth Suicide Prevention Plan

Since the 1980's, Pennsylvania has made strong efforts toward the prevention of youth suicide through programs such as the Commonwealth Student Assistance Program (SAP), Services for Teens at Risk (STAR-Centre), the Yellow Ribbon Program and a variety of other approaches in local areas.

In 2001, a workgroup of about 50 stakeholders from across the Commonwealth formalized a plan that includes not only what already exists in Pennsylvania, but also a strategy to address the possible gaps in suicide prevention.

The workgroup decided to use the "National Strategy for Suicide Prevention: Goals and Objectives for Action" as a template to begin its work. The Goals and Objectives for Action articulates a set of 11 goals and 68 objectives, and provides a blueprint for action. Pennsylvania has borrowed generously from the national strategy by adopting the 11 national goals, where applicable, and adapting the objectives to fit Pennsylvania's needs. What follows is a summary from the national strategy, Pennsylvania's goals and objectives, and a 5-year work plan to begin to address the objectives.

The Pennsylvania Strategy for Youth Suicide Prevention creates a framework for youth suicide prevention for Pennsylvania. It is designed to encourage and empower groups and individuals to work together. The stronger and broader the support and collaboration on youth suicide prevention, the greater the chance for the success of this public health initiative.

The Pennsylvania Strategy is comprehensive and sufficiently broad so that individuals and groups can select and adapt those objectives and activities that best correspond to their responsibilities and resources.

Pennsylvania Department of Public Welfare (DPW)

Health & Welfare Building, PO Box 2675, Harrisburg, PA, USA

Phone : + 1 717 787-4592 DPW Press and Communications Office + 1 800 692-7462 DPW HelpLine

E-mail : see : Contact Us

Website : <u>http://www.dpw.state.pa.us/003670494.aspx</u>

Transition Year Project of The JED Foundation and the American Psychiatric Foundation

The transition from high school to college is a critical juncture for all teenagers. For the majority, college represents a new stage of independence, exploration, growth and opportunity. For students who are dealing with pre-existing or newly-emerging mental health problems, it can be a difficult and dangerous time.

These topics are rarely addressed together in a comprehensive manner.

The JED Foundation and the American Psychiatric Foundation are launching a new initiative to help ensure the smooth, safe and healthy transition of teenagers from high school to college, laying the groundwork for healthy and productive college years and beyond.

The program covers :

- research : literature review and comprehensive survey of parents and children
- resources : Parents Resource Guide Students Resource Guide
- awareness campaign.

The Jed Foundation 583 Broadway, Suite 8B New York, NY 10012, USA

Phone : + 1 212 647-7544 Fax : + 1 320 210-6089

E-mail : transitionyear@ulifeline.org.

Website : http://www.jedfoundation.org/transitionproject.php

Valuing young lives (Australian Institute of Family Studies)

The Australian Institute of Family Studies was commissioned by the Commonwealth Department of Health and Aged Care to evaluate the National Youth Suicide Prevention Strategy, which ran from 1995 to 1999.

The evaluation is published in five separate reports:

- The main report, 'Valuing Young Lives: Evaluation of the National Youth Suicide Prevention Strategy'
- Four supplementary technical reports.

These reports also provide an evaluating section of the primary plans of action and a summary of major achievements and good practice findings. Five major themes emerged concerning principles of good practice in prevention of suicide among young people:

- Provision of multidimensional approach
- Access to resources
- Active Engagement in suicide prevention
- Effective intervention
- Strong capacity building.

Two future strategies are suggested: first, the development of organisations which will provide didactic learning on suicide and suicide prevention; and second, the creation of systematic policy frameworks capable of supporting intersectoral partnerships and developing social capital.

Another project, the Suicide Prevention Communications Project, of the Australian Institute of Family Studies has produced a report on 'Commonwealth Government policies and programs relevant to the mental health and wellbeing of young people'. The report puts emphasis on intersectoral collaboration and partnership and on improved communication between different sectors.

http://www.aifs.gov.au/institute/pubs/ysp/policy.html

Australian Institute of Family Studies Level 20, 485 La Trobe Street, Melbourne, Vic 3000, Australia.

Phone: + 61 3 9214 7888 Fax: + 61 3 9214 7839

E-mail : <u>library@aifs.gov.au</u>

Website : <u>http://www.aifs.gov.au/institute/pubs/ysp/ysppubs.html</u>

Mindfulness Education Program (The Hawn Foundation)

The Mindfulness Education Program (ME) is developed by the Hawn Foundation (founded in 2003 by award winning actress, director and producer Goldie Hawn) and author Nancy Fischer.

When kids learn, both in and outside of school, simple mindfulness-based techniques (also called attention training), they gain critical skills to understand their own thoughts and feelings, and behave in healthier, responsive ways. The M. E. Program teaches children a skill set and some strategies to support other ways of learning. This program is not intended as therapy.

In 2005, researcher Kimberly Schonert-Reichl (<u>kimberly.schonert-reichl@ubc.ca</u>), Associate Professor of Education at the University of British Columbia conducted a pilot research study on ME.

The study indicated that children who were administered activities in the ME program, in contrast to other children in their classrooms, increased significantly in the following areas:

- optimism
- positive and negative emotions
- self-concept (younger adolescents only)
- mindful awareness (girls only)

In addition, children who participated in the ME program showed improvements in their teachers' ratings for the following:

- social-emotional competence
- attention
- behaviour
- aggression

ME also developed a curriculum for teachers called the 'M. E. Program (Mindfulness Education): A Resource Guide' which provides a detailed guide on how to train and implement the ME program.

The Hawn Foundation, 220 26th Street, Santa Monica, California 90402, USA

Phone : + 1 310 393 7870

E-mail : See 'Contact Us' Website : <u>http://www.thehawnfoundation.org/</u> Building Awareness - Reducing Risk: Mental Illness and Suicide (WFMH)

The World Federation for Mental Health (WFMH) is an international membership organization founded in 1948 to advance, among all peoples and nations, the prevention of mental and emotional disorders, the proper treatment and care of those with such disorders, and the promotion of mental health.

Its 2006 World Mental Health Day Campaign, "Building Awareness - Reducing Risk: Mental Illness and Suicide" (observed on October 10) marked the launch of a year-long, global awareness campaign.

The campaign will provide an in-depth look at the role that mental illnesses plays in suicide. It will serve as a powerful strategy to counter the commonly held perception that mental illnesses are a secondary health concern that can be delayed until more immediate and pressing healthcare concerns have been addressed. (In the United Kingdom, 50% of all suicide cases occur in current or former diagnosed psychiatric patients.)

A monograph 'Building Awareness - Reducing Risk: Mental Illness and Suicide' summarises the proceedings of the WFMH International Experts Forum on Mental Illness and Suicide (March 30-31, 2006, Dulles, Virginia):

- Key messages
- The relationship between suicide and mental illness
- Mental illness and suicide across the life span
- How suicide risk can be reduced for people with mental illness
- Mental health in the media
- Cultural and religious issues influencing suicide and mental illness.

http://www.wfmh.org/PDF/wmhd2006%20ENG%20RIGHT.pdf

Secretariat WFMH 6564 Loisdale Court, Suite 301, Springfield, VA 22150-1812, USA

Phone: + 1 703 313 8680 Fax: + 1 703 313 8683

E-mail: <u>info@wfmh.com</u>

Website : http://www.wfmh.org

National Strategy for Suicide Prevention in Finland

The National Strategy for Suicide Prevention in Finland (1986-1996) was implemented throughout the country, with arrangements for local, regional and national application.

The strategy targeted the public educational system and sought to improve access to mental health services, implement crisis intervention, reduce access to means of suicide, train health professionals, bring awareness of co-morbidity factors, monitor attempted suicide, and record individuals at risk requiring preventive intervention. The programme incorporated interventions from professionals, social services and statutory agencies, and not specifically from people bereaved by suicide.

The implementation led to the creation of over 40 sub-programmes and other innovative developmental work on suicide from several fields of study. Implementation was assessed through an internal evaluative process and a nationwide survey. The evaluative process concluded that this program was a success.

The collaborative approach of the project, especially the so-called cooperative process model and networking, turned out to be promising interventions <u>http://www.stakes.fi/EN/Julkaisut/online/Mu161.htm</u>

The goal of developing practical activities instead of just training or exploring suicide prevention was instrumental. This goal helped to implement these activities in day-to-day life and in everyday situations. It also became clear that the development of these operations is a timeconsuming process, process which depends on a variety of contextual and pragmatic factors:

- the time allotted to any project is indeed limited in order for extensive changes to occur
- support from the community is essential in any preventive interventions: this program was well welcome due to Finnish citizens' acknowledgement of the significant of suicide.

STAKES National Research and Development Centre for Welfare and Health Vappu Taipale, Director General Lintulahdenkuja 4, P.O. Box 220, FIN-00531 Helsinki, Finland

Phone: +358 9 39 671 Fax: +358 9 761 307

E-mail: kirjaamo@stakes.fi Website : http://www.stakes.fi/EN/index.htm National Strategy for Suicide Prevention (USA)

The National Strategy for Suicide Prevention (NSSP) represents the combined work of advocates, clinicians, researchers and survivors around the nation.

It lays out a framework for action to prevent suicide and guides development of an array of services and programs that must be developed. It is designed to be a catalyst for social change with the power to transform attitudes, policies, and services.

The NSSP Goals and Objectives for Action was published by the U.S. Department of Health and Human Services in May of 2001, with leadership from the Surgeon General.

NSSP is a collaborative effort of

- Substance Abuse and Mental Health Services Administration (SAMHSA) http://www.samhsa.gov
- Centers for Disease Control and Prevention (CDC) <u>http://www.cdc.gov</u>
- National Institutes of Health (NIH) <u>http://www.nih.gov</u>
- Health Resources and Services Administration (HRSA) <u>http://www.hrsa.gov</u>
- Indian Health Service (HIS) <u>http://www.ihs.gov</u>

SAMHSA's National Mental Health Information Center is developed for users of mental health services and their families, the general public, policy makers, providers, and the media.

Its 'Around the World' database gives a selective overview of

- National Suicide Prevention Plans
- National and International Suicide Prevention Organizations
- International Resource Documents
- Suicide Prevention Services Worldwide
- Suicide Reports Worldwide

SAMHSA National Mental Health Information Center P.O. Box 42557, Washington, DC 20015, USA Phone: + 1 240 221 4021 Fax: + 1 240 221 4295

E-mail: see 'Contact Us'

website: http://mentalhealth.samhsa.gov/suicideprevention/world.asp

Preventing suicide: a resource for media professionals. (WHO SUPRE)

This document is one of a series of resources addressed to specific social and professional groups particularly relevant to the prevention of suicide. It has been prepared by the Department of Mental Health as part of SUPRE, the WHO worldwide initiative for the prevention of suicide.

Media plays a significant role in today's society by providing a very wide range of information in a variety of ways. They strongly influence community attitudes, beliefs and behaviour, and play a vital role in politics, economics and social practice. Because of that influence, media can also play an active role in the prevention of suicide.

Suicide is perhaps the most tragic way of ending one's life. The majority of people who consider suicide are ambivalent. They are not sure that they want to die. One of the many factors that may lead a vulnerable individual to suicide could be publicity on suicides in the media. How the media report suicide cases can influence other suicides.

The following document seeks to outline the impact of media reporting on suicide, indicate sources of reliable information, suggest how to report on suicide in both general and specific circumstances, and highlight pitfalls to be avoided in media suicide reports.

This document is identified as: WHO/MNH/MBD/00.2

World Health Organization Avenue Appia 20 - CH - 1211 Geneva 27 - Switzerland

Phone : + 41 22 791 2111

Fax : + 41 22 791 3111

E-mail MSD : <u>funkm@who.int</u> E-mail Mental Health Evidence and Research : saxenas@who.int

Website : <u>http://www.who.int/mental_health/resources/suicide/en</u>

Columbia University TeenScreen Program

The mission of the Columbia University TeenScreen Program is to ensure that every parent is offered the opportunity to have their teenagers receive a voluntary mental health check-up. The program's primary objective is to help adolescents and their parents through the early identification of mental health problems, such as depression and risk factors for suicide.

TeenScreen asks teens to answer a short set of questions regarding different symptoms that occur in depressed or suicidal youth. This questionnaire is just the first stage of the screening process and is designed to assess and track any youth that might have a problem. Teens that answer yes to more than a certain number of these questions advance to a short one-on-one interview with a mental health professional to follow-up on the symptoms the teen endorsed and determine if they are experiencing any impairment as a result of the symptoms. This second step of the program is most helpful to parents, because that is where they can find out if their teen might benefit from a more in-depth assessment.

Only teens that indicate they might have a problem on the screening questionnaire and are deemed to be at risk by a mental health professional are considered to have "screened positive." The parents of these teens are informed of the results and are offered a referral for a complete mental health evaluation.

It is critical to remember that research on screening as a method of suicide prevention has shown that asking about suicide does not encourage teens to attempt suicide.

The program is currently offered in local communities in over 450 locations in 43 states and offers a variety of other resources such as TeenScreen's E-Newsletter which features top news, research, profile stories, tips, and best practices from the mental health community and local TeenScreen affiliates across the country.

Laurie Flynn, executive director Columbia University TeenScreen Program 1775 Broadway, Suite 610 - New York, NY 10019, USA

Phone : + 1 212 265-4453 Fax : + 1 212 265-4454

E-mail : see : Contact Us

Website : <u>http://www.teenscreen.org</u>

The Trevor Project

The cornerstone of The Trevor Project is a 18-minute film on Trevor, a comedy/drama about a gay 13-year old boy named Trevor who, when rejected by friends and peers because of his sexuality, makes an attempt to take his life. The film won the 1994 Academy Award for Best Live Action Short Film.

The Trevor Project programs include:

- a nationwide, around-the-clock suicide prevention helpline for gay and questioning youth
- The Trevor Survival Kit, containing a copy of the film and educational information
- Dear Trevor, an anonymous online Question & Answer forum where young people can ask non-urgent questions about issues related to sexual orientation and identity
- multimedia materials
- press kit and press releases
- outreach efforts to schools, educators and organizations
- internship

The Trevor Project is associated with strategic partners, offering support to lesbian, gay, bisexual, and transgender (LGBT) students as fully included and affirmed in an environment where justice, equality, and respect for all prevail.

The Trevor Project, administrative offices Charles Robbins, executive director 9056 Santa Monica Blvd., Ste. 208 West Hollywood, CA 90069, USA

Phone : + 1 310 271 8845 Fax : + 1 310 271 8846

E-mail : <u>info@thetrevorproject.org</u>

Website : <u>http://www.thetrevorproject.org/home1.aspx</u>

New Zealand Suicide Prevention Strategy

The New Zealand Suicide Prevention Strategy 2006-2016 was launched in June 2006 to provide an all-ages approach to suicide prevention. It builds on the gains made by the New Zealand Youth Suicide Prevention Strategy which was released in 1998.

The New Zealand Suicide Prevention Strategy provides a framework for suicide prevention efforts over the next 10 years. Its overarching aim is to reduce the rate of suicidal behaviour and its effects on the lives of New Zealanders, while taking into account that suicide affects certain groups more than others.

To achieve this aim, five year Action Plans will be developed to provide the detail about what specific initiatives will be implemented, by when and by whom. A Ministerial Committee on Suicide Prevention was also established to direct the implementation of the Strategy. The Ministerial Committee is made up of Ministers with portfolios that are relevant to suicide prevention. The Ministerial Committee is supported by an Inter Agency Committee on Suicide Prevention, which co-ordinates and supports suicide prevention at a government agency level.

The Action Plan is made up of two companion documents:

- the Summary for Action, providing detailed tables outlining outcomes, actions, milestones, 'whãnau ora' considerations (paying particular attention to the Mãori population group), timeframes, and agencies responsible for implementing the actions
- the Evidence for Action, providing detail about the evidence, rationale and context underlying the actions.

Ministry of Health PO Box 5013 Wellington, New Zealand

Phone : + 64 4 496 2000 Fax : + 64 4 496 2340

E-mail : <u>MOH@moh.govt.nz</u>

Website : <u>www.moh.govt.nz</u>

Centre for Reviews and Dissemination (CRD)

The Centre for Reviews and Dissemination (CRD) was established in 1994 and is now the largest group in the world engaged exclusively in evidence synthesis in the health field.

Implemented in the department of the University of York, U.K., the centre has played a leading role in the development and promotion of evidence informed decision-making in health policy and practice. The findings of CRD reviews are widely disseminated and have impacted on the quality of health care delivered.

CRD also has close links with a number of other health, social research and information organisations as well as the international Cochrane and Campbell Collaborations. The Centre is, for example, a member of the International Network of Agencies for Health Technology Assessment (INAHTA).

CRD is also a member of the Public Health Research Consortium (PHRC) which is funded by the Department of Health Policy Research Programme. The PHRC aims to strengthen the evidence base for public health, with a strong emphasis on tackling socioeconomic inequalities in health.

CDR database contains documents on:

- The efficacy of suicide prevention programmes for children and youth (2002)
- Youth suicide prevention by primary healthcare professionals: a critical appraisal of the literature (1998)
- Screening as an approach for adolescent suicide prevention (2006)
- Psychosocial treatment of youth suicide: a systematic review of the research (2004)

Centre for Reviews and Dissemination University of York York, UK, YO10 5DD, United Kingdom

Phone : + 44 1904 321040 Fax : + 44 1904 321041

E-mail : <u>crd@york.ac.uk</u>

Website : http://www.york.ac.uk/inst/crd/index.htm

HandsOnScotland Toolkit

The HandsOnScotland Toolkit (2007) is an online resource for anybody working with children and young people.

The Toolkit was commissioned by HeadsUpScotland, the National Project for children and young people's mental health, in response to recommendations from the SNAP (Scottish Needs Assessment Programme) report on Child and Adolescent Mental Health (2003).

SNAP report found that many frontline workers from all agencies feel they lack the practical skills and confidence to help children and young people who have troubling behaviour. To help these key gatekeepers, the Toolkit was developed by Playfield Institute (NHS Fife) in partnership with Barnardo's and the University of Dundee.

Among topics in the ToolKit, there are a series of video clips of specialist workers speaking about a particular mental health-related behaviour or incident in order to increase viewers' awareness of these issues. Toolkit topics focused on the following:

- Confidence/Self-esteem
- Life events
 - Bereavement/Divorce/Separation
 - Trauma/Illness/Accident
- Sadness and Fear
- Self-harm
 - Managing risk and confidentiality
 - When to contact a mental health specialist
- Suicidal thoughts (self-harm, depression)

In this context, suicide is viewed as a way of ending all feeling, whereas self-harm is often more about coping with and living with difficult feelings.

Graham Buchanan, Manager Child and Adolescent Mental Health Service (CAMHS) Scotland

Mental Health Division, Scottish Executive Health Department 3EN, St Andrew's House, Edinburgh, EH1 3DG, United Kingdom Phone : + 44 131 244 5207 Fax : + 44 131 244 5076

E-mail : <u>handson@nhs.net</u>

Website : http://www.handsonscotland.co.uk/index.html

E. P. S. M. Suicide prevention programme (Lille)

Suicide prevention is an integral part of the community based mental health care programme of E.P.S.M. (Etablissements Publics de Santé Mentale) of the Lille Métropole region in the North of France.

The French appellation of this programme is 'Une Psychiatrie Contemporaine': travail en réseaux'.

The suicide prevention component is based on a randomised controlled study of the effect of telephone contact on further suicide attempts in patients discharged from emergency departments in the North of France after admission for deliberate self-poisoning. The intervention consisted of contacting discharged patients by telephone to determine treatment compliance and undertake brief crisis intervention if needed. The study concluded that contacting patients by telephone one month after discharge from an emergency department may help reduce the number of reattempted suicides over one year.

The follow up strategy is not limited to mentally ill patients hospitalised for deliberate self-poisoning but can apply to all suicidal persons in the Lille Métropole region known by E.P.S.M.

Professeur Guillaume Vaiva Département Universitaire de Psychiatrie & Pôle des Urgences

CHRU de Lille - Hôpital Michel Fontan rue André Verhaeghe 59037 LILLE cedex, France

Phone : + 33 3 20 44 43 83 Fax : + 33 3 20 44 63 96 Cell : + 33 6 11 26 26 00

E-mail : <u>gvaiva@chru-lille.fr</u>

Website : <u>www.epsm-lille-metropole.fr</u>

Guidelines for Suicide Prevention in Schools (NASP)

The Swedish National Centre for Suicide Research and Prevention of Mental Ill-Health (NASP) has published a document, intended as a framework for Suicide Prevention in Schools.

It should be adapted locally because of cultural and socio-economic disparities as well as variations in education and healthcare systems. Moreover, ranges of initiatives (national and voluntary) are now under way throughout the world, and programmes for suicide prevention are at varying stages of development.

This document should be used only as a general framework, to be applied by individual countries once the material has been adjusted to local conditions and supplemented to fit local needs.

Suicide-prevention programmes should be tailored in close collaboration with field workers, parents (the bottom-up approach), and experts.

Although this paper is directed at schools and pupils, it is important to consider how to reach adolescents who are outside the education system. Guidelines for prevention seem helpful to children and adolescents in good health and those capable of utilising the information provided. The same is true of adult programmes.

We therefore need to reach out to children and adolescents who are at risk for suicidal behaviour. This can be done by focusing on specific suicide prevention projects, such as those among school pupils, and integrating them with general strategies of public-health promotion.

Results from an evaluation of "Love is the best kick", a Swedish video project, indicate that for adolescents talking about suicide is not taboo. Another important factor to remember when dealing with young people is their propensity for trying out new experiences.

Professor Danuta Wasserman, NASP Karolinska Institutet, Granitsväg, 4, Solna, SE-171 77 Stockholm, Sweden

Phone : + 46 8 52 48 69 35 Fax : + 46 8 34 78 63 Phone Karolinska Institutet : + 46 8-524 800 00

E-mail : <u>danuta.wasserman@ki.se</u>

Website : <u>http://www.ki.se/suicide</u>

Oregon Youth Suicide Prevention Program

The Oregon Department of Human Services has developed the Oregon Youth Suicide Prevention Plan with 15 strategies for communities to use to reduce youth suicide (the second leading cause of death among Oregonians aged 10 to 24).

The strategies presented below are derived from evidence-based research, public input on draft strategies, and recommendations from the Governor's Task Force on Youth Suicide Prevention:

- 1. develop and implement public education campaigns
- 2. promote efforts to reduce access to lethal means of self-harm
- 3. educate youth and young adults about suicide prevention
- 4. reduce harassment in schools and communities
- 5. provide media education and guidelines
- 6. provide education for professionals
- 7. provide gatekeeper training (suicide intervention training)
- 8. implement screening and referral services
- 9. increase effectiveness of crisis hotlines
- 10. enhance crisis services
- 11. establish and maintain crisis response teams
- 12. improve access to affordable behavioural health care
- 13. provide skill-building support groups for youth
- 14. support suicide survivors
- 15. improve follow-up services for suicide temper.

The appendices to this plan contain information and tools that may be useful for planning and evaluation of prevention activities (such as an intervention decision matrix).

Efforts to reduce suicide rates show the most promise when multiple strategies are implemented simultaneously.

Youth Suicide Prevention Program 800 N.E. Oregon St. Suite #772 - Portland, OR 97232 - USA

Phone : + 1 971-673-1023 Fax : + 1 503-373-7622

E-mail : <u>donna.noonan@state.or.us</u>

Website : http://oregon.gov/DHS/ph/ipe/ysp/index.shtml

Reach Out (Ireland)

The Health Service Executive (HSE), the National Suicide Review Group and the Department of Health and Children developed 'Reach Out', the Irish National Strategy for Action on Suicide Prevention 2005-2014.

Four levels of action comprise the main body of the strategy:

- General population approach
- Targeted approach
- Responding to suicide
- Information and research

The Action Table comprises of:

- Phase 1 Actions (Short-term priorities for immediate start-up)
- Phase 2 Actions (Start-up pending partnership commitment)
- Phase 3 Actions (Follow-on actions linked to Phase 1 and Phase 2)

In the context of the present strategy, emphasis is put on families, schools and youth organisations and services, and also on topics such as:

- the increased vulnerability associated with being young and male in Ireland today, compared with the past, sometimes manifests in unhealthy, anti-social and self-destructive behaviours

- the need to support the Gardaí (Irish police force) who are often likely to be involved in breaking the tragic news to relatives and friends, in times of inquest, and in issues about the safety of someone who is threatening selfharm or suicide. They can be well placed to identify adults in the local community who may be vulnerable or at risk while vulnerable young people might be identified through the work of Garda Juvenile Liaison Officers.

The National Office for Suicide Prevention (NOSP) oversees and coordinates the implementation of Reach Out and works closely with the HSE Resource Officers for Suicide Prevention. <u>http://www.nosp.ie/index.html</u>

Department of Health and Children, Hawkins House, Hawkins Street, Dublin 2, Ireland

Phone: +353 1 6354000 Fax : +353 1 6354001

E-mail : <u>info@health.gov.ie</u>

Website : <u>http://www.dohc.ie/publications/reach_out.html</u>

European Network of Schools for Health (SHE)

SHE network is the European platform for school health promotion. The network is coordinated by NIGZ (Nationaal Instituut voor Gezondheidsbevordering en Ziektepreventie), the Dutch WHO Collaborating Centre for School Health Promotion.

The 'good and healthy school' framework addresses each of the following five major components inherent to pupils' successful learning and positive mental health:

- fulfilment of educational tasks: e.g. completing the required learning curriculum in order to achieve success after graduation
- learning and teaching process: e.g. teachers take care that neither too much nor too little is asked of pupils
- leadership and management: e.g. the school head is aware of the psychological pressures that teachers come under in their profession and takes measures to reduce them
- culture and climate: e.g. rules of behaviour, applicable to all, are developed by the school and pupils together
- satisfaction with school: e.g. children's wellbeing is a priority for the school as a whole.

Countries that are members of SHE network have already integrated this framework approach to a certain extent into their school educational policies.

One example of integrating mental health promotion in school activity is the new "Curriculum for excellence" approach from Scotland. <u>http://www.curriculumforexcellencescotland.gov.uk</u>

Another example is the 'Social and Emotional Aspects of Learning (SEAL)' programme, which is offered in England. <u>http://www.bandapilot.org.uk/</u>

NIGZ (Nationaal Instituut voor Gezondheidsbevordering en Ziektepreventie) De Bleek 13, 3447 GV Woerden, Nederland

Phone : + 31 348 43 76 00 Fax : + 31 348 43 76 66

E-mail : <u>info@nigz.nl</u>

Website : <u>http://www.schoolsforhealth.nl/index.cfm</u>

International Association for Suicide Prevention (IASP)

The International Association for Suicide Prevention (IASP), founded by Professor Erwin Ringel in 1960, is a non-governmental organization that holds an official relationship with the World Health Organization.

IASP provides a forum for national and local suicide prevention organizations, researchers, volunteers, suicide survivors, clinicians and professionals to share knowledge, provide support and collaborate in suicide prevention around the world.

Its current strategic priorities involve:

- Increase visibility
- Improve transfer of systematic knowledge
- Strengthen the organization overall.

IASP is in charge of:

- the management of international and regional congresses
- Crisis, The Journal of Crisis Intervention and Suicide Prevention
- September 10, the World Suicide Prevention Day
- task forces (such as Suicide and the Media, Postvention, Suicide in the Elderly, Suicide in Prisons)
- suicide related resources (journals, papers, etc.).

Emphasis is put on the IASP Guidelines for suicide prevention.

Professor Brian L. Mishara, Ph.D., President of IASP Director, Centre for Research and Intervention on Suicide and Euthanasia University of Quebec at Montreal, Canada E-mail : <u>mishara.brian@uqam.ca</u> Phone : +1 514 987 4832 Fax : +1 514 987 0350

Associate professor Annette Beautrais, General Secretary of IASP University of Otago, PO Box 4345 Christchurch, New Zealand E-mail : <u>annette.beautrais@chmeds.ac.nz</u> Phone : + 61 3 372 0408 Fax : + 61 3 372 0407

I .A.S.P. Central Administrative Office Le Barade, 32330 - Gondrin - France Phone : +33 562 29 19 47 Fax : +33 562 29 19 47 E-mail : <u>iasp1960@aol.com</u> Website : <u>http://www.med.uio.no/iasp/</u> Effectiveness of Strategies of Suicide Prevention (HEN-WHO)

The Health Evidence Network (HEN), initiated and coordinated by the WHO Regional Office for Europe, is an information service for public health and health care decision-makers in the WHO European Region.

In 2004, HEN was commissioned to prepare an evidence report on: 'For which strategies of suicide prevention is there evidence of effectiveness?' <u>http://www.euro.who.int/Document/E83583.pdf</u>

The report notes that suicide rates among adolescents and young adults have increased considerably over the last decades. In addition, many widely used suicide prevention programmes have never been scientifically assessed, thus making it uncertain about which ones are effective.

Due to the limited evidence and the heterogeneity of the interventions, it is not possible to determine if one single intervention was more effective than another.

A broad array of suicide preventive interventions addressing different risk factors at various levels will therefore be required.

In the general school population, suicide prevention programmes based on behavioural change and coping strategies have been found to be effective.

In adolescents at high risk, school-based suicide prevention programmes with emphasis on skill training and social support appeared to be effective in reducing risk factors and enhancing protective factors.

Matthias Muyen, mental health officer

WHO Regional Office for Europe Scherfigsvej 8 DK-2100 Copenhagen Ø, Denmark

Phone: + 45 39 17 13 91

Fax : + 45 39 17 18 18

E-mail : <u>mentalhealth@euro.who.int</u>

Website : http://www.euro.who.int/mentalhealth

FRIENDS for Life: Preventing and Treating Anxiety in Children and Youth

The prevalence of anxiety among children in many developed nations seems to be rising: it is estimated that between 15 and 20 % of kids feel anxious and believe that anxiety affects the quality of their lives. Living with fear clearly wears down the will to live. Kids may resort to avoidance in order to not deal with emotionally unpleasant things. While this approach offers some short-term relief, it eventually makes the child feel isolated and helpless. It is believed that untreated childhood anxiety tends to morph into adolescent depression, a strong risk factor for suicide.

'FRIENDS for Life' helps children and teenagers cope with their fear, worry, and depression through the application of cognitive behavioural principles and the building of emotional resilience.

FRIENDS for Life consists of two primary programmes for each of the following age levels: FRIENDS for Children (ages 7-11) and FRIENDS for Youth (ages 12-16).

Implemented in schools and clinics throughout the world, FRIENDS is a school-based anxiety prevention program acknowledged and supported by the World Health Organization. It consists of 10 sessions and two complementary sessions designed to fit well with most school syllabuses. It has been proven effective for up to 6 years after initial exposure to the intervention, and appears to be a cost-effective and efficient mental health intervention.

The program is currently used in Australia, New Zealand, Canada, the United Kingdom, Germany, the Netherlands, the United States, Mexico, Norway, and Portugal.

Professor Paula Barrett, director Pathways Health and Research Centre 7 / 88 Boundary Street, West End QLD 4101 PO Box 5699, West End QLD 4101, Australia

Phone : + 61 7 3846 4443 Fax : + 61 7 3846 4435

E-mail : info@pathwayshrc.com.au

Website : <u>http://www.friendsinfo.net</u>

Maine Youth Suicide Prevention Program

The Maine Youth Suicide Prevention Program (MYSPP), in existence since 1998, is a collaborative initiative among the agencies of the State of Maine. The Program goals are to:

- increase public awareness about suicide prevention
- reduce the incidence of suicide behaviour among youth aged 10-24
- improve youth access to prevention and intervention services.

MYSPP strongly believes that it is essential to train adults in specific suicide prevention knowledge and skills before teaching youth about suicide prevention. This is necessary so that, when youth seek help from adults, the adults are trained to respond effectively and are familiar with referral procedures and available helping resources.

Components of the MYSPP are, among others:

- the Maine Youth Suicide Information Booklet
- Gatekeeper Training and Gatekeeper Training Resource Book
- Maine's Best Practices in Bullying and Harassment Prevention, a Guide for Schools and Communities.

The Maine Youth Action Network (MYAN) worked with the MYSPP from 2000-2007. During that time, MYAN partnered with youth from all over the state to create products and materials and to conduct research to help reduce youth suicide in Maine. Inquiries on this initiative must be addressed to deb@propeople.org.

MYAN has accumulated some remarkable results, some of which on:

- research conducted by youth on where youth and adults get information on youth suicide
- the implementation of realistic role plays for Lifelines (the state-wide youth suicide prevention curriculum that is used in high school health classes).

Office of Substance Abuse, Information and Resource Center A.M.H.I. Complex, Marquardt Bldg., 11 State House Station, Augusta, ME 04333-0011, Maine, USA

Phone: + 1 207 287 8900 Fax: + 1 207 287 8910

E-mail: <u>Cheryl.M.Dicara@maine.gov</u> <u>Lauren.Sterling@maine.gov</u> Website: <u>http://www.maine.gov/suicide/index.htm</u> Living Is For Everyone (LIFE), Australia

LIFE (Living Is For Everyone) Communications is a National Suicide Prevention Strategy project, managed by Crisis Support Services on behalf of the Australian Department of Health and Ageing.

The National Suicide Prevention Strategy (NSPS) is implemented by the Mental Health and Suicide Prevention Branch of the Australian Government Department of Health and Ageing, supported by the National Advisory Council for Suicide Prevention (NACSP) Secretariat. NACSPSecretariat@health.gov.au

LIFE Communications aims to improve communication between suicide and self-harm prevention stakeholders in Australia.

The project achieves this by providing access to a range of resources and research, including the latest information from National Suicide Prevention Strategy (NSPS) projects in prevention, intervention and postvention.

Examples are:

- the LIFE library catalogue
- current national projects
- current community projects
- 'beyondblue' a National Depression Initiative
- Professional Development Network
- Reporting Suicide and Mental Illness, a resource for media professionals'
- Research and Evidence in Suicide Prevention
- Program of Assistance for the Survivors of Torture and Trauma
- Children of Parents with a Mental Illness
- Aboriginal and Torres Strait Islander Peoples <u>auseinet@flinders.edu.au</u> <u>http://auseinet.com/index.php</u>

LIFE Communications c/o Crisis Support Services, PO Box 2335, Footscray VIC 3011, Australia

Phone: + 61 3 8398 8408 Fax: + 61 3 9362 0247

E-mail: <u>life@crisissupport.org.au</u>

Website: http://www.livingisforeveryone.com.au/

ULifeline The JED Foundation's website for college students and counselors

ULifeline is an online resource center of The JED Foundation (New York) for college student mental health and emotional well being.

- Students
- Learn more about mental health, take a mental health screening, ask questions, find answers, seek help for yourself or someone you care about, and recommend your school to join the Ulifeline Network
- Campus Professionals
- Connect with your colleagues at other colleges, customize your ULifeline site, and access ULifeline's information and tools
- Congratulations to Innovation Grants Recipients
- Learn more about programs that received funding from The JED Foundation in 2007
- Half of Us.com
- Half of us struggle with depression, and all of us have the power to help others and ourselves by fighting the stigma around mental health and speaking up when we need support.

The JED Foundation

Joanna Locke, MD, MPH, Program Director <u>jlocke@jedfoundation.org</u>

583 Broadway, Suite 8B -New York, NY 10012, USA

Phone: + 1 212 647-7544

Fax : + 1 320 210-6089

E-mail : see 'Contact Us'

Website : <u>http://ulifeline.com/main/Home.html</u>

National Institute for Mental Health in England (NIMHE)

Working beyond the National Health Service (NHS), NIMHE helps all those involved in mental health to implement positive change, providing a gateway to learning and development, offering new opportunities to share experiences and one place to find information, and forging new partnerships at a national and international level.

Its work includes:

- National Suicide Prevention Strategy for England Annual Reports on Progress (setting out what has been achieved and what further actions are proposed to take in the medium and longer term)
- Evidence Briefing on Youth Suicide Prevention (reviewing the effectiveness of preventive strategies for youth suicide)
- Preventing Suicide Toolkit (providing a simple way for services to measure existing standards against the recommendations outlined in the report by the National Confidential Inquiry into Suicide and Homicide by People with Mental Illness)
- Mental disorders, suicide, and deliberate self harm in lesbian, gay and bisexual people; a systematic review
- Sensitive Coverage Saves Lives Improving media portrayal of suicidal behaviour (Action by the media that avoids excessive detail about methods used in suicides can only discourage copycat suicides and thus save lives. In addition, sensitive coverage of such tragic incidents will help avoid further needless distress to the family and friends of someone who has died in this way.)
- Reaching Out: A report of mental health promotion pilots aimed at young men.

NIMHE, Room 8E44, Quarry House, Quarry Hill, Leeds, LS2 7UE, U.K.

Phone: + 44 113 2545127

E-mail: <u>ask@csip.org.uk</u>

Website: <u>http://www.nimhe.csip.org.uk</u>

Olweus Bullying Prevention Programme (BPP)

The first and best-known intervention to reduce bullying among schoolchildren had been launched by Prof. Dan Olweus in Norway.

Inspired by the suicides of several severely victimized children, the government supported the development and implementation of a comprehensive programme to address bullying among school children aged six to fifteen years old. The four goals of the programme were:

- to increase awareness and knowledge of the violence problem
- to achieve active involvement on the part of parents and teachers
- to develop clear school rules and procedures against bullying
- to provide support and protection for the victims.

The programme attempts to create safe and positive learning environments and involves interventions at multiple levels: school-wide, classroom, individual. For example, school-wide components include the administration of an anonymous questionnaire to assess the nature and prevalence of bullying at each school.

One program that has been implemented, the Olweus Bullying Prevention Programme, has been shown to result in:

- a substantial reduction in reports of bullying and victimization
- a significant reduction in students' reports of antisocial behaviour.

Evaluative results of the Olweus Bullying Prevention Programme has been hallmarked as an evidence-based 'Blueprints Model Program'. http://www.colorado.edu/cspv/blueprints/

Prof. Dan Olweus, Ph.D., Research Center for Health Promotion (HEMIL) University of Bergen, Christies gt. 13, N-5015, Bergen, Norway Phone : + 47 55 58 23 27 Fax : + 47 55 58 84 22 E-mail : olweus@psych.uib.no

Marlene Snyder, PhD, Institute on Family & Neighborhood Life, 158 Poole Agricultural Center at Clemson University, Clemson, SC 29634 USA Phone : + 1 864 710 4562 E-mail : <u>nobully@clemson.edu</u>

Website : : <u>www.clemson.edu/olweus</u>

CDC: Youth Suicide Database

Centers for Disease Control and Prevention (CDC), created in 1946, is one of the major operating components of the U.S. Department of Health and Human Services (HHS).

Today, CDC is the nation's premiere health promotion, prevention, and preparedness agency and a global leader in public health.

It remains at the forefront of public health efforts to prevent and control infectious and chronic diseases, injuries, workplace hazards, disabilities, and environmental health threats.

CDC works with states and other partners to provide a system of health surveillance to monitor and prevent disease outbreaks, implement disease prevention strategies, and maintain national health statistics.

CDC collaborates with Prevention Research Centers, a network of academic researchers, public health agencies, and community members that conducts applied research in disease prevention and control.

Prevention targets include youth suicide, youth violence, and traumarelated injuries and fatalities.

CDC provides 'Your Online Source for Credible Health Information', maintained by the National Center for Public Health Informatics and allowing extensive searches for (best practices of) youth suicide prevention.

Centers for Disease Control and Prevention

1600 Clifton Rd, Atlanta, GA 30333, USA

Phone: + 1 404 498 1515

E-mail: <u>cdcinfo@cdc.gov</u>

Website:

http://www.cdc.gov/search.do?queryText=best+practices+suicide&se archButton.x=0&searchButton.y=0&sort=date%3AD%3AL%3Ad1&ud=1&o e=utf8&ie=utf8

SPAN USA Legislative Action Center

SPAN USA is about turning awareness to action!

The Suicide Prevention Action Network (SPAN USA) is an organization dedicated to preventing suicide through public education and awareness, community action and federal, state and local grassroots advocacy.

SPAN's official message:

"There are many things you can do to make a difference in helping to prevent future suicides in America - even things you can do right this minute. There are thousands of lives at stake - and simply no time to waste.

Your voice is crucial in advocating for suicide prevention and mental health issues. Take action quickly and easily with the SPAN USA Legislative Action Center, which allows you to:

- identify top issues of interest to you and to SPAN USA
- find your elected officials and key government decision makers
- wage a successful campaign with e-mail and fax with one click
- keep current on bills and votes
- speak out to your local press."

SPAN USA is developing a Field Liaison Program across the country—one in every Congressional district in the United States. When this is achieved, SPAN USA could spread the vision of suicide prevention to each and every member of Congress through one of their constituents in the network.

Jason H. Padgett, MPA, Field Development Coordinator Suicide Prevention Action Network USA (SPAN USA) 1025 Vermont Avenue, NW, Suite 1066 - Washington, DC 20005 - USA

Phone : + 1 202 449-3600

Fax : + 1 202 449-3601

E-mail : <u>info@spanusa.org</u>

Website : <u>http://capwiz.com/spanusa/home</u>

Young People and Self-harm (National Children's Bureau)

The National Children's Bureau (NCB), founded in 1963 is a charitable organisation that acts as an umbrella body for organisations working with children and young people in England and Northern Ireland. It provides essential information on policy, research and best practice for its members and other instrumental partners.

Young NCB is NCB's free membership network for all children and young people under 18 years of age. Young NCB members speak out on issues they feel are important to them, such as safety, sex and relationships, education, bullying, drugs, media and smacking. NCB is a key information resource for at risk and self-harming young people, their friends and families, and professionals working with them.

'Truth Hurts', a report of the National Inquiry on self-harm among youngsters, has confirmed that young people are more likely to turn to their friends for help than to relatives, teachers or GPs. The inquiry found that professionals and adults tend to react inappropriately to the at-risk individual and seem to focus on the at-risk behaviour rather than the cause of the behaviour. The report also highlights the lack of training and support for professionals.

Talking or reading about self-harm can sometimes become confusing as selfharm is often labelled as a deliberate self-harm, attempted suicide, parasuicide, self-mutilation and/or self-injury. However, it is clear that a few young people who self-harm may go on to commit suicide. Henceforth, further disclosure and prevention of suicide can only benefit youngsters at risk of ending their life. With this though in mind, NCB recommends the following material to professionals and gatekeepers who are in the life of a youngster at risk of suicide:

Teenage Suicide & Self-Harm Training Pack with audio CD

http://www.studyofadolescence.org.uk/publications/acatalog/Publications Suicide Self_Harm_14.html

National Children's Bureau 8 Wakley Street, London EC1V 7QE, United Kingdom

Phone: + 44 20 7843 6000 Fax: + 44 20 7278 9512

E-mail : <u>ncbni@ncb.org.uk</u>

Website : <u>http://www.selfharm.org.uk/default.aspa</u>

Child and Family Studies of the University of South Florida

The Department of Child & Family Studies (CFS) is one of four departments within the Louis de la Parte Florida Mental Health Institute of the University of South Florida. CFS is committed to improving the wellbeing of individuals, children, and families within communities across the country through promoting respect, inclusion, development, achievement, mental health, and an optimum quality of life.

The Youth Suicide Prevention School-Based Guide (2004) is 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.

Ongoing projects include:

- 'Decreasing Adolescent Suicidality through a Multiple Component Suicide Prevention Program: Linking Adolescents at Risk to Mental Health Services', which involves participation of large urban schools with Hispanic and Native American populations (two groups at very high risk of adolescent suicidality in Albuquerque)
- 'Evaluation of the BETH (Become Educated To Help) Program', with two main components : the Florida Suicide Prevention Gatekeeper Training and the Public Awareness Plan
- 'Statewide Suicide Prevention Implementation Program', aiming at the development, in close coordination with the newly created Office of Suicide Prevention, of a comprehensive suicide prevention program in order to locally implement the State Suicide Prevention strategy in Florida.

Steve Roggenbaum, Department of Child and Family Studies Louis de la Parte Florida Mental Health Institute 13301 Bruce B. Downs Blvd., MHC 2321, Florida, USA

Phone: + 1 813 974 4640 Fax: + 1 813 974 7743 E-mail : <u>roggenbaum@fmhi.usf.edu</u>

Website: <u>http://cfs.fmhi.usf.edu/searchresults.cfm?topicfind=suicide&menu=searchr</u> <u>esults.cfm</u>

IASP Taskforce Postvention

IASP (International Association for Suicide Prevention) Taskforce Postvention was established in 1999.

The aim of the Taskforce is to increase the awareness of issues concerning suicide survivors and postvention activities within IASP, its members and affiliations.

Its objectives include:

- to make available directories and data bases of services for suicide survivor support
- to increase awareness in the general public, the (mental) health professionals, caregivers and policy makers of the necessity of support for suicide survivors, and their possible contribution in suicide prevention
- to hold (open) meetings to discuss postvention issues and to facilitate communication in this field
- to examine components such as distribution and type of services, population served, group format, leadership and facilitators, funding, use of newsletters and Internet.

To enable maximum development of suicide survivor activities, it seems beneficial (1) to develop a national suicide survivor network linked with community resources, (2) to link with contacts in other countries and (3) to sustain suicide survivor activities within a national policy.

Comparison of the availability of suicide survivor services and the degree of network development with the actual suicide rates in IASP member countries indicates there is no relation between the two.

Karl Andriessen, Chair IASP Taskforce Postvention

p/a Suicide Prevention Project Martelaarslaan 204b, 9000 Gent, Belgium

Phone: + 32 9 233 5099 Fax: + 32 9 233 3589

E-mail: <u>iasp-tf-postvention@pandora.be</u>

Website: http://iasp.info/postvention.php

National School Boards Association (NSBA)

The National School Boards Association is a not-for-profit Federation of state associations of school boards across the United States. Its mission is to foster excellence and equity in public education through school board leadership for student achievement.

Founded in 1940, NSBA now represents 95,000 local school board members, virtually all of whom are elected. These local officials govern 14,890 local school districts serving the nation's more than 47 million public school students.

NSBA recognizes the critical link between health and learning and the role of schools in promoting life-long health and preventing health risk behaviours.

American School Health Programs department have supported this commitment to school leadership.

The School Health Resource Database offers information about NSBA's work on school health issues, including key topics, such as:

- Screening aimed at preventing youth suicide
- School liability for student suicides
- A Lifeline for Troubled Students
- Sexual Orientation and Gender Identity
- Up Front newsletter

National School Boards Association 1680 Duke Street, Alexandria, VA 22314, USA

Phone : + 1 703 838 6722

Fax : + 1 703 6837590

E-mail : <u>schoolhealth@nsba.org</u>.

Website : <u>http://www.nsba.org/</u>

The Sibling Connection

The death of a brother or sister at any age profoundly changes the lives of surviving siblings. The impact of loss will inherently be felt most by the brother or sister who shared the most "lifespace" with the one who died. Research shows that the death of a child adversely affects surviving children's health, behavior, schoolwork, self-esteem, and development. It is crucial that siblings seek help to work through their feelings.

The Sibling Connection has been created to provide resources to grieving siblings. Counseling, the Sibling Connection website, education, research, writing, and raising public awareness about the profound impact of sibling loss are among services provided by the Sibling Connection.

Sibling Connection also offers a series of evaluations on written materials on suicide: Descriptions on books, articles and movies related to sibling loss (as a child, as an adolescent, as a college student, as an adult) is found in the following links:

info@counselingstlouis.net

http://www.counselingstlouis.net/index.html

Sibling also recommends many organisations whose the mission is to assist bereaved parents and siblings toward the positive resolution of grief and to provide information to help others be supportive. Examples of such organisations are:

- SiblingSurvivors michelle@siblingsurvivors.com http://www.siblingsurvivors.com

- The Gift of Keith (with a survivor's cyber friends project) <u>Alosssogreat@aol.com</u> <u>http://www.thegiftofkeith.org</u>

- The Compassionate Friends (a self-help support organization that offers friendship, understanding, and hope to bereaved parents, grandparents and siblings).

nationaloffice@compassionatefriends.org http://www.compassionatefriends.org/ Academic postgraduate educational intervention programme in suicide prevention (Karolinska Institute, Stockholm)

The programme was developed and implemented by the Swedish National Centre for Suicide Research and Prevention of Mental III-Health (NASP) for key employees in mental healthcare.

The programme was evaluated by Inga-Lill Ramberg, in her PhD thesis, 'Promoting Suicide Prevention. An evaluation of a programme for training trainers in psychiatric clinical work', Karolinska, Stockholm, 2003 (ISBN 91-7349-649-9).

This educational program follows a training-of-trainers model as it appears to be an effective way to disseminate knowledge of suicide prevention from suicidologists to a small number of key stakeholders and subsequently to a large number of their colleagues in mental healthcare.

An abstract of this thesis can be found at http://diss.kib.ki.se/2003/91-7349-649-9/.

Inga-Lill Ramberg, PhD, senior researcher, NASP, Department of Public Health Sciences,

Karolinska Institutet, SE-171 77 Stockholm, Sweden

Phone : + 46-702983111

Fax : + 46 8-31 11 01

E-mail : Inga-Lill.Ramberg@ki.se

Website : www.ki.se/suicide

National Suicide Prevention Strategy (NSPS), Australia

The National Suicide Prevention Strategy (NSPS) is implemented by the Mental Health and Suicide Prevention Branch of the Australian Government Department of Health and Ageing.

NSPS mission is referenced from the following document:

'Living is for Everyone (LIFE): a framework for prevention of suicide and self-harm in Australia' (material on the Department of Health and Ageing web site is being reviewed following the federal election on 24 November 2007).

Youth suicide prevention funding has been granted for the following projects:

- MindMatters: a mental health promotion, prevention and early intervention initiative for Australian secondary schools
- KidsMatter: an Australian national primary school mental health promotion, prevention and early intervention initiative
- Response Ability Education Initiative: designed to increase the coverage of suicide prevention in pre-service tertiary education of secondary school teachers
- Kids Help Line (KHL): a free 24 hour national telephone and online counselling service for children and young people aged 5 to 18
- National General Practice Youth Suicide Prevention Project
- Suicide Bereavement Support Group Standards and Practice

These projects include assistance to Indigenous communities and people from culturally and linguistically diverse backgrounds.

Suicide Prevention strategy also includes participation of the media: Mindframe National Media Initiative, and the StigmaWatch program seek to influence the media industry. Both programs provides sensitive, accurate, and respectful reports on mental illness and suicide issues.

Lifeline Australia coordinates the Lifeline Centres around the country.

Suicide Prevention Branch, Department of Health and Ageing (MDP 37) GPO Box 9848, Canberra ACT 2601, Australia Phone : + 61 2 6289 1555 Fax : + 61 2 6281 6946

E-mail : <u>NACSPSecretariat@health.gov.au</u>

Website: <u>http://www.health.gov.au/internet/wcms/publishing.nsf/content/mental-</u> suicide

AFCA JFI Ambassadors

In 2003, The Jason Foundation, Inc. (JFI) and The American Football Coaches Association (AFCA) joined together in an affiliation to confront the silent epidemic of youth suicide.

The AFCA represents over 10,000 high school, college and professional coaches in the United States. If you are a member, you are invited to join the growing number of high profile coaches that have enthusiastically agreed to be JFI ambassadors in their states. Each coach is unique in the strengths that they can bring to the JFI team.

In a recent survey, a coach or educator was named, as the number one person young people would choose to help them in a time of crisis. As State Ambassadors, coaches are very helpful in public awareness programs and in opening important doors of opportunity.

The JFI is a nationally recognized provider of educational curriculums and training programs for students, educators/youth workers and parents. Therefore, it is important that every key stakeholder educates himself/herself about youth suicide prevention and the local resources available.

In working with coaches (at the collegiate and secondary schools level) JFI is sensitive to the time restraints that coaches are faced with. JFI is also well aware of rules and regulations that must be strictly adhered to when working in youth prevention projects. Having worked so closely with many coaches, we are also conscious that each personality brings a different talent to our team.

Philip Fulmer - JFI National Spokesperson 181 East Main Street. Jefferson Bldg., Suite 5 Hendersonville, TN 37075, USA

Phone : Direct Line : + 1 615 264-2323 Toll Free : + 1-877-778-2275 or + 1-888-881-2323

Fax : + 1 615 264-0188

E-mail : <u>info@jasonfoundation.com</u>

Website : <u>http://www.jasonfoundation.com/educators.html</u>

Preventing suicide: how to start a survivor' group (WHO-SUPRE)

This document is one in a series of resources for social and professional groups committed to the prevention of suicide. It has been prepared by the Department of Mental Health as part of SUPRE, the WHO worldwide initiative for the prevention of suicide.

Research has demonstrated that the mode of death differentially affects grief reactions. Survivors of suicide are therefore believed to deal differently with the loss of loved one(s).

Grief reactions are indeed intensified when the loss occurred by suicide. Many taboos plague discussion on suicide: suicide is a traumatic experience for family members and friends. The universal assumption that parents are responsible for their children's actions places parents who have lost a child by suicide in a situation of internal, moral, and social dilemma.

Those bereaved by suicide often find it very difficult to admit that the death of their loved one was by suicide, and many may often feel uncomfortable talking about suicide. A support group can greatly assist survivors of suicide, as a lack of communication can delay the healing process. Evidence strongly suggests that self-help support groups are a powerful and constructive means for people to help themselves and each other.

This report reiterates that there are no predetermined rules for support groups and no guarantees of success. It however highlights:

- how to begin and develop a set of operational guidelines and framework for operating a support group
- Resources that can be implemented in a group agenda
- Potential success and risk factors for the group
- Available information on survivor's support in developing countries and rural areas
- Available information on survivor's support through "involvement therapy" or participating in other social activities.

This document is identified as: WHO/MNH/MBD/00.6

World Health Organization Avenue Appia 20 - CH - 1211 Geneva 27 - Switzerland

Phone : + 41 22 791 2111Fax : + 41 22 791 3111E-mail MSD: funkm@who.intE-mail Mental Health Evidence and Research : saxenas@who.intWebsite : http://www.who.int/mental_health/resources/suicide/en

Northern Ireland Suicide Prevention Strategy

Following an extensive consultation process, including engagement with bereaved families, community and voluntary groups, political parties, local church, etc, the Northern Ireland Suicide Prevention Strategy, 'Protect Life - A Shared Vision' was launched in 2006. The aim of this Strategy is to reduce Northern Ireland high suicide rate, by taking a dual population and targeted approach, with actions targeting both the general population and those individuals and communities most at risk, such as young people.

In Northern Ireland, there is evidence that suicide rate is rising significantly and just over 40% of these are young men who are under 35 years of age. The current pace of modernisation and fragmentation of communities, as well as alcohol misuse, have been identified as factors in the rising rates.

In 2007 the Department of Health, Social Services and Public Safety (DHSSPS) launched a literature review on the effect of the troubles on mental health and well-being, and particularly in relation to levels of suicide. The general conclusion of the report is that the Northern Ireland conflict significantly impacted suicide behaviours and that its legacy continues to influence the challenge of reducing suicide in the future. In particular, the report suggests that changes in the relationship between state bodies and communities have mostly affected individual citizens and have impacted perception and recognition of suicide as well as the rapidity and type of response to suicide rates.

A regional 24/7 helpline for people in crisis is now available throughout Northern Ireland. Other vital work is underway including the establishment of crisis intervention teams, research into the underlying causes of suicide, GP training and ensuring that internet providers, and especially social networking sites, use their pages in a responsible way.

Suicide Prevention Strategy Department of Health for Northern Ireland Castle Buildings, Stormont Estate, Belfast, BT4 3SQ, Northern Ireland, U.K.

Phone : + 44 28 9052 2133 or + 44 28 9052 0270

E-mail : <u>publichealth@dhsspsni.gov.uk</u> Website : <u>http://www.dhsspsni.gov.uk/</u> EPPI Report: Effectiveness of health promotion interventions of relevance to suicide prevention in young men

The Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI-Centre) is part of the Social Science Research Unit at the Institute of Education, University of London. It is at the forefront of carrying out research synthesis and developing review methods in social science and public policy, and dedicated to making reliable research findings accessible to the people who need them, whether they are making policy, practice or personal decisions.

EPPI reports on 'A scoping exercise for a review of the effectiveness of health promotion interventions of relevance to suicide prevention in young men (aged 19 to 34)'.

No specific recommendations could be made about the effectiveness of health promotion interventions with this group. Any review, however, needs to consider the possibility of finding a paucity of rigorous evaluation research to inform UK mental health promotion policy and practice. New reviews also need to consider the inclusion of international studies that rigorously evaluate the effectiveness of interventions, alongside other types of UK based studies.

The inclusion of UK studies can also help understand contextual factors to consider when interpreting findings from international studies. They can help to set, in a transparent way, a future agenda for the development and evaluation of health promotion interventions.

There is a strong rationale for developing health promotion interventions on the basis of what people say. This is often referred to as 'felt need'. Basing interventions on 'felt need' is also a much wider goal across public services. The report therefore emphasises the need to develop and tailor interventions according to the views and experiences of young people.

EPPI-Centre, Social Science Research Unit Institute of Education 18 Woburn Square, London WC1H ONR, United Kingdom

Phone : + 44 20 7612 6391 or + 44 20 7612 6816 Fax : + 44 20 7612 6126 E-mail : <u>info@ioe.ac.uk</u> or 'See Contact' Website : <u>http://eppi.ioe.ac.uk/cms/Default.aspx?tabid=53</u>

Youth Suicide Prevention Program (YSPP)

In 1992, a 16-year old student and athlete named Trevor Simpson died by suicide. His parents began advocating for resources and programs that could help prevent other young people from dying. Their efforts resulted in funding from the Washington State Legislature to write a youth suicide prevention plan.

In 2001, the Youth Suicide Prevention Program (YSPP) was incorporated as a private, not-for-profit organization.

YSPP envisions a state where youth suicide is a rare event, where young people are nurtured and supported, where individuals and families are aware of risk factors for suicide, and actively seek help from accessible, effective community resources.

To that end, YSPP focuses on public awareness, training, and developing communities in action.

Its resources include:

- YSPP Suicide Prevention Materials
- Toolkit Workshops
- Gatekeeper Training
- 2-day ASIST curriculum
- On-site Training for Groups
- Community Action Toolkit
- School Campaigns
- Student Voices
- Parent Awareness
- Student-run Prevention Campaigns in Schools.

Sue Eastgard, MSW, Director E- mail : <u>suee@yspp.org</u> Youth Suicide Prevention Program 444 N.E. Ravenna Blvd., Suite 401 - Seattle, WA 98115 - USA

Phone : + 1 206 297-5922 Fax : + 1 206 297-0818

E-mail : <u>info@yspp.org</u>

Website : <u>http://www.yspp.org/index.htm</u>

Adolescent Coping With Depression Course

The Adolescent Coping with Depression Course (CWD-A) is a skills-based small-group treatment program for actively depressed adolescents.

The CWD-A course combines cognitive and behavioral strategies that address the types of problems that commonly characterize depressed individuals (e.g., pessimism, low self-esteem, infrequent engagement in pleasant activities, social withdrawal, anxiety and tension, low social support, and increased conflict).

CWD-A is based on the premise that teaching adolescents a variety of coping skills and strategies allows them to counteract the various factors that contribute to their depressive episodes and helps them deal more effectively with the problems they encounter.

The intervention consists of 16 two-hour sessions delivered over a period of eight weeks. Adolescents are taught several skills hypothesized to relieve depression. Sessions provide assistance on assertiveness, relaxation skills, cognitive restructuring techniques, mood monitoring, increasing pleasant activities, and communication and conflict-resolution techniques. A parent component helps keep parents aware of what their teens are learning in the program, regarding general topics discussed, skills taught, and the rationale for their use. Individualized booster sessions are also offered at four-month intervals for a two-year period after treatment in an effort to prevent recurrence of depression.

This educational intervention/course has been screened by the Promising Practices Network (PPN). PPN is dedicated to providing quality evidencebased information about what works to improve the lives of children, youth, and families.

Probable implementers may be public and private middle and high schools, community-based organizations, hospitals, clinics, after-school programs, and departments of correction.

Gregory N. Clarke, Ph.D., Kaiser Permanente Center for Health Research 3800 N. Kaiser Center Dr., Portland, OR 97227, USA

Phone : + 1 503 335-6673 E-mail : greg.clarke@kpchr.org

Website : <u>http://www.promisingpractices.net/program.asp?programid=152</u>

Centre for Suicide Prevention (University of Manchester)

The Centre for Suicide Prevention at the University of Manchester brings together a number of projects that aim to inform future policy and service planning. It is one of the United Kingdom's foremost research centres in the field of suicidal behaviour.

Since the collapse of Communism, many countries in Eastern Europe have experienced major societal upheaval. Hungary has previously reported some of the highest suicide rates in the world. Suicide rates in Hungary now appear to be falling and ecological studies have suggested an association between societal changes since 1990 and suicide. Still, to maintain this decrease, the Centre for Suicide Prevention at the University of Manchester is working tirelessly in research projects aimed at suicide prevention.

Research projects within the centre include:

- The National Confidential Inquiry into Suicide and Homicide (collecting information on the activities of clinical services prior to suicide and homicide and on patterns of events leading to these incident) e-mail : <u>nci@manchester.ac.uk</u> phone : + 44 161 27 50700/1
- Manchester Self-Harm (MaSH) Project
- Suicide in offenders and prisoners
- Coroners' investigation of the methods for suicide
- Women Offenders Repeated Self-Harm Intervention Pilot (Worship) Study
- Risk factors for suicide in a society in transition.

The aim of the last aforementioned project was to identify the antecedents of suicide in Hungary and to use these findings to suggest suicide prevention measures, which might also be applicable to other countries in Eastern Europe. In addition, the afore-stated case control psychological autopsy study in Hungary was effectuated in collaboration with the National Institute for Psychiatry and Neurology, Budapest.

Dr Alyson Ashton, Deputy Project Manager Centre for Suicide Prevention Williamson Building, University of Manchester Oxford Road, Manchester, M13 9PL, United Kingdom

Phone : + 44 161 275 0702

E-mail : <u>alyson.c.ashton@manchester.ac.uk</u> Website : <u>http://www.medicine.manchester.ac.uk/suicideprevention</u> MHE - Guidelines for Country-based Programmes of Suicide Prevention

Mental Health Europe (MHE) is a non-governmental organization committed to collaborations on European projects with member organisations which want to contribute to the building of a Europe that acknowledges the importance of mental health in our daily life as well as the need for prevention and promotion and the value of accessible and high quality mental health care and services.

Objective of the Guidelines project:

To expand the scope of knowledge on current activities in the WHO/EURO Region and help promote country-based programmes on suicide prevention, not only at national level, but also at the regional and local levels.

Methodology:

A questionnaire was circulated to all the members (national and regional) of the WHO EURO Network for Suicide Prevention and Research and to members of the Steering Group of the Mental Health Project - "Enhancing Social Cohesion through Strengthening Community Mental Health Services" of the South Eastern Europe Stability Pact. Replies were received from 25 out of 32 countries.

Results from the study emanated the following guidelines:

- provide information on principles needed to create effective suicide prevention strategies, at country, regional and local level
- give examples of national and regional strategies of suicide prevention in the WHO European Region
- take into consideration the conclusions and recommendations of the conference "Suicide Prevention Strategies in Europe" hosted by the Belgian Federal Public Service for Health, in Brussels, 2004.

Mental Health Europe 7, Boulevard Clovis B-1000 Brussels, Belgium

Phone : +32-2-280.04.68 Fax : +32-2-280.16.04

E-mail : info@mhe-sme.org

Website : <u>http://www.mhe-sme.org/en/european-projects/guidelines-for-</u> <u>country-based-programmes-of-suicide-prevention.html</u> Social and Emotional Aspects of Learning (SEAL)

Social and Emotional Aspects of Learning for secondary schools (Secondary SEAL) is a whole-school skills-based programme that promotes social and emotional skills and aims, when fully implemented, to involve all members of the school and all aspects of school life.

SEAL undertakes interventions that explicitly promote positive social, emotional and behavioural skills (SEBS). Interventions are expected to show progression at each school grade. A pilot of the SEBS project was implemented in schools from 2005 to 2007. Currently, two thirds of primary schools in England employ SEBS and it is set to be offered to all secondary schools by 2010.

SEAL maintains a website, where questions are classified in 5 primary sections :

- introduction to the concepts underpinning SEAL
- the impact on educational developments and outcomes
- the practicalities of implementing SEAL in school
- professional development
- learning and teaching.

SEAL also offers a booklet of helpful resources. The guidance booklet provides an overview of the key aims, principles and essential components of SEAL in secondary school. The guidance booklet is designed to facilitate a systematic and spiral approach to learning. It should be seen as a stimulus or starting point, rather than a finished product. It is hoped that it will be a foundation/structure support for schools that wish to implement similar creative initiatives.

Primary and Secondary National Strategies Helpline : + 44 845 850 1444

E- mail : <u>secondary@capita.co.uk</u> Website: <u>http://www.bandapilot.org.uk/</u>

DfES Publications Centre PO Box 5050, Annesley,Nottingham, NG15 0DJ, United Kingdom Phone : + 44 845 60 222 60 Fax : + 44 845 60 333 60

E- mail : <u>dfes@prolog.uk.com</u> Website : <u>www.dfes.gov.uk</u> Lex Maria (Sweden)

The Act on Professional Activity in Health and Medical Services was amended to ensure that all suicides occurring while under the care of a health professional or four months after contact with the health care system should be recorded by those providing health care (Lex, Maria).

Reporting any suicides occurring within or associated with a health care system to the National Board of Health and Welfare (NBHW) became valid February 1st 2006. The act requires that all suicides within care, or associated with health care services, must be followed by a comprehensive, documented internal investigation with factors identifying future preventive strategies. Documentations of future strategies and precipitating events in a separate database allows for a systematic and national analysis of suicide.

This database will bring further awareness on suicide prevention in the workplace. NBHW may review this information to reinforce patient safety and therefore increase quality of care. Shortfalls in the systems can therefore be monitored via visits to the workplace. These visits and national follow up procedures may be partially implemented by NBHW and the internal care system.

The NBHW have also planned to provide recommendations with regards to the collection of information on health care systems in hope of improving the Lex Maria system.

The National Board of Health and Welfare Rålambsvägen 3, Socialstyrelsen, SE-106 30 Stockholm, Sweden

Phone : + 46 75 247 30 00 Fax : + 46 75 247 32 52

E-mail : <u>socialstyrelsen@socialstyrelsen.se</u>

Website: http://www.socialstyrelsen.se/en/startpage.htm

Canadian Association for Suicide Prevention (CASP)

The Canadian Association for Suicide Prevention (CASP) or L'association canadienne pour la prévention du suicide (ACPS) was incorporated in 1985 by a group of professionals, working towards reducing the suicide rate and minimizing the harmful consequences of suicide by advocating, supporting and educating Canadian constituents.

To achieve its purpose, CASP will perform three core functions:

- 1. Facilitation of information sharing on intervention and research:
 - Annual national conference
 - Newsletter on CASP issues and Canadian suicide prevention
 - Service and/or research networks, directories, etc.
- 2. Advocacy for policy development on federal, provincial, territorial level:
 - Press releases on matters of emergent and national interest
 - Correspondence to national political and/or organizational leaders
 - Development and administration of guidelines for use in other jurisdictions (e.g. "Schools' Policy")
- 3. Development of excellence in research and service in Canada:
 - Via annual national awards for outstanding contributions in research and service
 - Development of funds for specific projects (e.g. The CASP "Sharing the Healing Fund," and the Network Fund to increase the availability of "Grieving groups")
 - Development of standards/certification for service or research organizations

CASP prepares a Blueprint for a Canadian National Suicide Prevention Strategy, with a Business and Implementation Plan.

Joan Wright, executive director Canadian Association for Suicide Prevention 400 - 10025 106 Street Edmonton, AB, T5J 1G4, Canada

Phone : + 1 780 482-0198 Fax : + 1 780 488-1495

E-mail : <u>casp@casp-acps.ca</u> Website: <u>http://www.casp-acps.ca/</u> or <u>www.suicideprevention.ca</u> National Governors Association (NGA) Center for Best Practices

Founded in 1908, the U.S. National Governors Association (NGA) is the bipartisan, collective voice of the nation's governors. NGA provides management and technical assistance to both new and incumbent governors.

The NGA Center for Best Practices focuses on state innovations and best practices on issues that range from education and health to technology and environment. It develops innovative solutions to today's most pressing public policy challenges and is the only research and development firm that directly serves the nation's governors. Its Health Division covers a broad range of health financing, service delivery, and public policy issues, including suicide prevention.

The NGA Center for Best Practices is involved in a number of initiatives to help states raise awareness of this issue and to improve states ability to prevent and respond to these tragedies. The Center participates in State Suicide Prevention Regional Meetings focusing on Collaboration around Youth Suicide Prevention.

Its publications cover Youth Suicide Prevention: Strengthening State Policies and School-Based Strategies.

The Suicide Prevention Resource Center (SPRC) links to state suicide prevention plans, state suicide data (fact sheets), and suicide prevention state contact information.

John Thomasian, Director NGA Center for Best Practices, Hall of the States, 444 North Capitol Street, Suite 267, Washington, DC 20001-1512, USA

Phone : + 1 202-624-5300 Fax : + 1 202 624-5313

E- mail : joconnor@nga.org Website: http://www.nga.org/portal/site/nga/menuitem.b14a675ba7f89cf9e8ebb856 a11010a0 MtvU and The JED Foundation National Campaign (USA)

In 2006, mtvU and The JED Foundation launched a national campaign to prevent student suicides and fight mental health stigma on college campuses.

Suicide is the second leading cause of death among college students in the USA.

The JED Foundation is the leading non-profit college suicide-prevention charity.

MtvU is the largest, most comprehensive television network just for college students (24 hours a day, 7 days a week, on-air, online and on campus) broadcasting to 750 colleges across the country, with a combined enrolment of over seven million.

MtvU conducted extensive research on how stress and depression are affecting college students nationwide, and reported the findings in the 2006 'mtvU College Mental Health Study: Stress, Depression, Stigma & Students.' Among the top findings: 1 in 5 college seniors say they have considered suicide, nearly triple the number of college freshmen.

The aim of the campaign is to raise awareness about the prevalence of mental health issues and suicide on campus and connect students to the appropriate resources to get help.

The campaign is supported by a charitable contribution from AstraZeneca.

In 2007, the campaign entered a new phase with video interviews of students and artists available online and featured in a groundbreaking on-air series.

The JED Foundation

Joanna Locke, MD, MPH, Program Director <u>jlocke@jedfoundation.org</u>

583 Broadway, Suite 8B -New York, NY 10012, USA

Phone : + 1 212 647-7544 Fax : + 1 320 210-6089

E-mail : see 'Contact Us' Website: <u>http://www.jedfoundation.org/mtvucampaign.php</u> Incredible Years Series (IYS)

The Incredible Years (IYS) programs were developed by Carolyn Webster-Stratton, Professor and Director of the Parenting Clinic at the University of Washington (Seattle).

The Incredible Years are research-based proven effective programs for reducing children's aggression and behaviour problems and increasing social competence at home and at school.

IYS programs directly or indirectly contribute to suicide prevention by implementing procedures and interventions to reduce self-destructive behaviour in school-aged children.

The interventions are guided by developmental theory which highlights the multiple interacting role of risk and protective factors (child, family, and school) in the development of conduct problem.

IYS programs offer a series of training for parents, teachers, and children. Each Parent, teacher, and children Training Series has two long-term based goals:

- to develop comprehensive treatment programs for young children with early onset conduct problems
- to develop cost-effective, community-based, universal prevention programs.

Through two primary short-term goals, IYS hopes to:

- to reduce disruptive behaviours, non-compliance and peer aggression problems in children, at home and in the classroom
- to promote social, emotional, and academic competence in children.

IYS Programs have been selected as evidence based best practice by the U.S. Office of Juvenile Justice and Delinquency Prevention, by the Center for Substance Abuse Prevention, and by the Blueprints Models Programs.

Incredible Years 1411 8th Avenue West, Seattle, WA 98119, USA

Phone: + 1 888 506 3562 or + 1 206 285 7565 Fax : + 1 888 506 3562

E-mail: <u>info@incredibleyears.com</u>

Website: <u>http://www.incredibleyears.com</u>

Parents Against Teen Suicide (PATS)

Working his way through grief after the suicide of their daughter, Lea Ann (1970-1986), State Trooper Fred Davis and his wife Joyce took the initiative to create Parents Against Teen Suicide (PATS) in 1987. PATS mission is to serve North Carolina's youth who are at risk for drug use/abuse, domestic violence, and suicide by providing education in prevention and intervention activities for youngsters and their parents.

Awareness and Education Classes are conducted in schools, colleges, universities, churches, and civic groups in North Carolina. PATS follows the systematic procedures set forth in their program called TEACH LIFELINES which focuses on the involvement of an entire community.

The Teen Education and Crisis Hotline (TEACH) is one among many projects founded by PATS in 1990. TEACH provides education, intervention and assistance in obtaining help for youth who are being abused or in suicidal situations.

PATS collaborates with Mountain Youth Resources, an agency whose role is to provide specialized services to address the needs of troubled children, youth, and their families.

http://www.mountainyouthresources.org/index.html

Smoky Mountain Center is another agency located in North Carolina which maintains strong ties with PATS. Smoky Mountain Center seeks to develop collaborative partnerships with community stakeholders. Such partnerships will help promote an environment that offers high quality services, supports and resources and enhance an individual's ability to reach their full potential and live as valued members of the community.

http://www.smokymountaincenter.org/default.asp

TEACH 81 Main Street, Clyde, NC 28716, USA

Phone: + 1 828 627 1001

E-mail: see 'Contact Us'

Website: http://www.teachhotline.org

The Aeschi Working Group - Meeting the Suicidal Person

The Aeschi Working Group represents a movement that wishes to improve the therapeutic treatment available to the suicidal person by offering new treatment perspectives for health professionals.

The group believes that suicide research has largely neglected the therapeutic relationship between suicidal patient and medical professional, whereas a necessary prerequisite for the prevention of suicide is a good and trusting patient-doctor relationship. Only then can the communication of suicide intent be expected or the physician's enquiring about suicidal thoughts become possible. This does in no way diminish the importance of medical competence in the assessment of the mental state and in establishing a psychiatric diagnosis; however a strong therapeutic relationship ensures more disclosure and compliance with the treatment.

In order to improve the approach toward the patient who attempted or considers suicide, the programme 'Meeting the Suicidal Person' proposes guidelines for clinicians and factors to take into consideration in a clinical dyad, such as:

- Clinicians' attitudes
- Patients' dissatisfaction
- Non-attendance in aftercare

The group emphasises that one prerequisite of treatment is the patientclinician shared understanding how suicidal intentions develop. The patient's narrative serves as the basis of a shared understanding.

Suicide-specific assessment and treatment approaches such as the Collaborative Assessment and Management of Suicidality (CAMS) are also discussed in this programme.

Although not specifically focussed on suicide prevention in youngsters the work of the group can be helpful for this purpose.

Konrad Michel, M.D. University Psychiatric Services (UPD) Murtenstrasse 21, CH-3010 Bern, Switzerland E-mail: <u>konrad.michel@spk.unibe.ch</u>

Ladislav Valach, Ph.D., Div. of Psychopathology, Faculty of Philosophy University of Zurich, Lenggstrasse 31, CH-8029 Zürich, Switzerland E-mail : <u>ladislav.valach@bli.unizh.ch</u> Website: <u>http://www.aeschiconference.unibe.ch</u> Infosuicide (France)

'Infosuicide' is a joint effort by:

- 'Centre Thérapeutique Recherche et Rencontres de Paris' (Therapeutic Center of Research and Professional Meetings of Paris)
- 'Union des Centres Recherche et Rencontres' (Union of Research Centers and Professional Meetings)
- 'Union Nationale pour la Prévention du Suicide' (UNPS; the National Union for the Prevention of Suicide)

The association provides information on:

- suicide and suicidal behaviour
- support and help centres
- suicide prevention programmes (European, national, regional)
- contact forum (open to all parties concerned)
- newsletter.

UNPS collaborates with 'Le Comité Ethique et Scientifique' (French Committee of Ethics and Science) that offers its viewpoint on suicide related issues. The committee is composed of professionals with high ethical, scientific and public status.

The official website of InfoSuicide covers decisions critical ethical issues as well as provides responses to ethical questions concerning suicide prevention and suicide intervention.

Additional resources:

- A related association, the association 'Prevention Suicide Languedoc Roussillon' (P.S.L.R.), provides an interesting overview of regional activities, common in France. Website : <u>http://www.pslr.org</u>
- An example of postvention action in France is given by 'Association Parents Brisés'. Website : <u>http://www.parents-brises.org</u>

Union Nationale des Centres Recherche et Rencontres Centre Popincourt 6, rue de l'Asile Popincourt- 75011 Paris, France

Phone : + 33 1 42 78 19 87 Fax : + 33 1 42 78 32 44

E- mail : <u>centrepopincourt@orange.fr</u> website: <u>http://www.infosuicide.org</u> The Irish Association of Suicidology (I.A.S.)

The Irish Association of Suicidology was founded in 1996 in response to concerns about the rising suicide rates in Ireland and the grief and suffering caused to families and communities by these unnecessary deaths.

The IAS sets out to be a forum for all individuals and voluntary groups involved in any aspect of suicidology. No group voluntary or professional has a monopoly of wisdom or expertise about suicide.

IAS aims and objectives are as followed:

- to facilitate communication between clinicians, volunteers, survivors and researchers in all matters relating to suicide and suicidal behaviour
- to promote awareness of the problems of suicide and suicidal behaviour in the general public by holding conferences and workshops and by communication of relevant material through the media
- to ensure that the public are better informed about suicide prevention
- to support and encourage relevant research
- to encourage and support the formation of groups to help those bereaved by suicide
- to make the IAS an all Ireland organisation.

The IAS recommends and seeks response from the website of the National Suicide Research Foundation Ireland (NSRF) <u>http://www.nsrf.ie/index.htm</u>. The NSRF consists of a multi-disciplinary team from a broad range of disciplines. The foundation has been recognised by the Department of Health and Children as an official research unit to contribute to the prevention of suicidal behaviour in Ireland, and also by the WHO as the centre of excellence and the Irish focal point for information regarding suicide and its prevention.

The Irish Association of Suicidology (I.A.S.)

16, New Antrim Str. Castlebar, Co. Mayo, Ireland Phone : + 353 94 9250858 Fax : + 353 94 9250859

E-mail : <u>info@ias.ie</u>

Website : <u>http://www.ias.ie/</u>

Technical Assistance Partnership for Child and Family Mental Health (TA Partnership) USA

The Technical Assistance Partnership for Child and Family Mental Health (TA Partnership) operates under contract with the federal Center for Mental Health Services to provide technical assistance to system of care communities.

The TA Partnership emerges from the collaboration between two missiondriven organizations:

- The American Institutes for Research (AIR), committed to improvement in the lives of families and communities through the translation of research into best practice and policy <u>http://www.air.org</u>
- The Federation of Families for Children's Mental Health (FFCMH), dedicated to effective family leadership and advocacy to improve the quality of life of children with mental health needs and their families <u>http://www.ffcmh.org/</u>

This partnership exemplifies the family-professional relationship as an essential value. Families must share a leadership role in planning, implementing, and evaluating systems of care in their community.

TA Partnership website includes Special Topics and Youth Involvement Resources such as:

- Preventing Tragedy : Bringing an End to Youth Suicide (2004)
- Parents with Depression and Child Outcomes (2004)
- A Framework for Understanding "Evidence" in Prevention Research and Programs (2003)
- Students Against Destructive Decisions (SADD)
- Research-Based Youth Engagement Strategies
- No Longer Alone Resources for Rural Sexual Minority Youth
- Adolescent Risk Behavior Screen (ARBS).

Technical Assistance Partnership for Child and Family Mental Health 1000 Thomas Jefferson St., NW, Suite 400, Washington, DC 20007-3835, USA

Phone : + 1 202 403 6827 Fax : + 1 202 403 5007

E-mail : <u>tapartnership@air.org</u>

Website : http://www.tapartnership.org/default.asp

Suicide Prevention Program, University of Illinois

The Suicide Prevention Program on the University of Illinois at Urbana Champaign campus is a joint undertaking of the Counseling Center and McKinley Health Center.

The program began in 1984, with the aim of reducing the risk of suicide in the UIUC student community.

Any individual (friend, relative, faculty, or residence hall staff) can notify the Suicide Prevention Team if a student they know makes a suicidal threat or gesture.

At the core of the program is a "mandated assessment" policy. It requires any student who threatens or attempts suicide to attend four professional assessment sessions.

In the assessment sessions, the counselor strongly contests the idea that it is a student's right to end his or her life.

Failing to complete the four sessions can result in expulsion from the University.

Over the last 24 years, only one potentially suicidal student has refused mandated assessment and been expelled.

The program is controversial because instead of solely offering sympathy and support, it confronts and challenges.

However, students' safety has become the primary concern for those involved with the program (review the following link http://www.counselingcenter.uiuc.edu/?page_id=53).

The program is deemed successful, as it has strived for a decrease in suicidality on campus. Between 1984 and 2004, only 26 first attempt suicides were reported. In addition, suicide rate declined from almost seven per 100,000 students in the eight years prior to 1984 to under four per 100,000 in the next 21 years, a 45 percent reduction.

Joffe, Paul, Chair, Suicide Prevention Program University of Illinois Counseling Center, 610 E John St., Urbana-Champaign, USA

Phone : + 1 217 333 3704

E-mail : <u>p-joffe@uiuc.edu</u>

Website :<u>http://www.counselingcenter.uiuc.edu/?page_id=148</u>

Preventing suicide: a resource for counsellors (SUPRE WHO)

This document is one of a series of resources addressed to specific social and professional groups particularly relevant to the prevention of suicide. It has been prepared in 2006 by the Department of Mental Health as part of SUPRE, the WHO worldwide initiative for the prevention of suicide.

More people commit suicide each year than die in all the world's combined conflicts. The assistance of counselling professionals in the prevention of suicide, on a world-wide scale, is critical and clearly needed.

The practice of professional counselling is defined as the application of mental health, psychological or human development principles, through the use of cognitive, affective, behavioural or systemic intervention strategies. By using these strategies, professional counsellors address wellness, personal growth, and career development issues, as well as mental health pathology. Counsellors have graduate training and education and often work in schools, colleges and universities, career agencies, substance abuse facilities, and clinics and hospitals.

Client suicide is considered an 'occupational hazard' in the counselling profession. It is estimated that about 25 % of counsellors have had a client commit suicide. Suicide can have a potentially negative effect on practicing counsellors as well as those in training.

The need for a clear set of guidelines for counsellors, guidelines that are practical, accessible, and informative in dealing with suicide crises is clearly apparent.

World Health Organization Avenue Appia 20 - CH - 1211 Geneva 27 - Switzerland

Phone : + 41 22 791 2111 Fax : + 41 22 791 3111

E-mail MSD : <u>funkm@who.int</u>

E-mail Mental Health Evidence and Research : <u>saxenas@who.int</u>

Website : <u>http://www.who.int/mental_health/resources/suicide/en</u>

New York State Office of Mental Health

The Office of Mental Health (OMH) is committed to making suicide prevention a priority across New York State.

To this end, OMH provides a Suicide Prevention Education Awareness Kit (SPEAK), an information kit for the public, health care providers and educators to help them understand the sad frequency and toll of suicide, and to discover ways and methods to aid in preventing it.

SPEAK offers helpful resources on:

- Teens : depression and suicide
- Children in college.

In addition, in order to reach out to minority communities, OMH awards grants to programmes for Latina adolescents.

OMH has also begun a partnership with the American Foundation for Suicide Prevention (AFSP; e-mail : <u>inquiry@afsp.org</u>) in hope of educating students, teachers, and parents on this issue. AFSP and OHM are collaborating on a new film project created specifically to reduce suicide among middle and high school students. The project consists of two separate 20-minute films that will include Internet and collateral materials. The first film will give adolescents a recognizable picture of depression, reduce fears and misconceptions about treatment, and promote help-seeking behaviour. A similar but complimentary film will educate teachers, other school personnel and parents about the causes of youth suicide, warning signs and steps they can take to get help for students.

New York State Office of Mental Health 44 Holland Avenue Albany, New York 12229, USA

Phone : + 1 800 5978481 (toll-free) Fax : + 1 518 473 3456

E-mail : see : Freedom of Information Request

Website : <u>http://www.omh.state.ny.us</u>

Promoting the Sense of Coherence in Parasuicidal Patients (Göteborg)

Patients who have attempted suicide are at increased risk of further suicide attempts. Parasuicidal patients are cared for in both psychiatric and somatic wards in Sweden. It is therefore likely that nurses will care for them.

Researchers at Göteborg University, interested in how the sense of coherence (SOC) concept of Antonovsky can be used as a framework for nursing care in enabling parasuicidal patients to live through their suffering, performed a literature review coordinated by Prof. Bodil Augustsson.

The literature review was aimed at illuminating nursing actions that could help parasuicidal patients strengthen their SOC in order to endure their suffering and stay in treatment. The review was based on 11 qualitative studies (7 from Scandinavia, 2 from the U.K. and 2 from Taiwan). A deductive method was used. All articles were screened for nursing actions relating to Travelbee's concept of suffering.

The result was presented in terms of comprehensibility, manageability and meaningfulness, the three components of the SOC concept.

- Comprehensibility increased when nurses were radiating and installing hope, being honest and open in dialogues, and acknowledged the parasuicidal patient as a responsible and autonomous human being.
- Manageability increased when nurses created a non-judgmental atmosphere and emphasised the seriousness in a suicide attempt. Nurses have to take basic nursing needs and narrative input into consideration when planning care together with parasuicidal patients.
- Meaningfulness increased when nurses confirmed and recognised the parasuicidal patient as a suffering and valuable human being.

Nursing parasuicidal patients takes courage. Nursing actions were mostly aimed towards strengthening the parasuicidal patient's sense of comprehensibility and manageability in order for the patient to stay in treatment to create feelings of meaningfulness.

Prof. Bodil Augustsson <u>bodil.augustsson@fhs.gu.se</u> Institute of Health and Care Sciences, Göteborg University Box 457 405 30 Göteborg, Sweden Phone: + 46 31 786 6076 Fax: + 46 31 786 6110

Website:

http://gupea.ub.gu.se/dspace/bitstream/2077/2523/1/opponentex.pdf

UCLA School Mental Health Project - Center for Mental Health in Schools

The School Mental Health Project (SMHP) was created in 1986 to pursue theory, research, practice and training related to addressing mental health and psychosocial concerns through school-based interventions.

To these ends, SMHP works closely with school districts, local and state agencies, special initiatives, and organizations and colleagues across the country.

In 1995 the project established its national Center for Mental Health in Schools, an assistance center of the Federal Mental Health in Schools Program (in collaboration with the Center for School Mental Health Analysis and Action at the University of Maryland, Baltimore).

Particular attention is given to prevention and responding early after the onset of problems as critical facets of reducing the prevalence of problems. School Interventions to Prevent Youth Suicide are among the main concerns. The following resources are relevant to SMHP effort in suicide prevention:

- Recent empirical studies to guide school-based suicide prevention are available at the following link: http://smhp.psych.ucla.edu/netexchange.aspx?tag=125
- A Quick Find On-line Clearinghouse also identifies and provides relevant resources. <u>http://smhp.psych.ucla.edu/qf/p3002_02.htm</u>
- A brief on 'Suicide Prevention in Schools' highlights the following critical questions to ponder:
 - should schools play an institutionalized role in preventing student suicide and in monitoring students identified as suicidal risks?
 - does suicide education stigmatize some students and increase the risk of suicide ideation ?
 - o <u>http://smhp.psych.ucla.edu/pdfdocs/policyissues/suicide.pdf</u>

H. Adelman and L. Taylor, co-directors School Mental Health Project-UCLA Center for Mental Health in Schools - Department of Psychology P.O. Box 951563 - Los Angeles, CA 90095-1563 - USA

Phone : + 1 310 825-3634 Fax : + 1 310 206-8716 E-mail : <u>smhp@ucla.edu</u> Website : <u>http://smhp.psych.ucla.edu</u> Blueprints for Violence Prevention

In 1996, the Center for the Study and Prevention of Violence (CSPV), at the University of Colorado at Boulder, designed and launched a national violence prevention initiative to identify effective violence prevention programs that may serve its population.

To date, the project called Blueprints for Violence Prevention, has identified 11 prevention and intervention programs that meet a strict scientific standard of program effectiveness. The 11 model programs, renamed Blueprints, have been effective in reducing adolescent violent crime, aggression, delinquency, and substance abuse. Another 18 programs have also been identified as promising programs.

More than 600 programs have so far been reviewed, and the Center continues to look for programs that meet the selection criteria. As a result, Blueprints has evolved into a large-scale prevention initiative: it identifies model programs. It also provides training and technical assistance to help sites choose and implement a set of demonstrated effective and renowned intervention programs.

The work that is being conducted will help to bridge the gap between knowledge (research) and practice and inform the users of programs of the barriers that must be overcome in order to achieve maximum success.

Directly and indirectly Blueprints for Violence Prevention support programs, such as

- Anger Coping Program
- Albuquerque Victim-Offender Mediation Program
- Aggressors, Victims and Bystanders
- Incredible Years Series (IYS)

These programs may decrease potential risk factors and contribute to youth suicide prevention and intervention programs.

Center for the Study and Prevention of Violence Institute of Behavioural Science, University of Colorado at Boulder 1877 Broadway, Suite 601, Boulder, CO 80302, USA

Phone: + 1 303 492 1032 Fax: + 1 303 443 3297

Email: <u>Blueprints@colorado.edu</u>

Website: http://www.colorado.edu/cspv/blueprints/

European Pact for Mental Health and Well-being (EU)

The European Union (EU) High-Level Conference "Together for Mental Health and Well-being" which was held June 13th 2008 in Brussels, Belgium, opened the door to the establishment of the "European Pact for Mental Health and Well-being". This Pact on mental health and well-being focuses on four primary themes:

- Prevention of Suicide and Depression
- Mental Health in Youth and Education
- Mental Health in Workplace Settings
- Mental Health in Older People.

Combating Stigma and Social Exclusion is another priority topic embedded within the four aforementioned thematic areas.

The Pact will be implemented through a series of conferences on each of the aforementioned priorities during the 2009-2010 year period.

The EU invites:

- EU Member States and international organizations with emphasis on mental health and well-being to adhere to the Pact and ensure its implementation in relevant sectors of civil society
- The European Commission, Member States, relevant international organisations, and stakeholders :
 - \circ to establish a mechanism for the exchange of information
 - to work together to identify best practices and successful interventions of benefits in addressing the priority themes of the Pact
 - to develop appropriate recommendations and action plans based on renowned best practices and interventions
 - To communicate and evaluate the execution of the Pact through a series of conferences on the priority themes over the coming years.

Jurgen Scheftlein, DG SANCO Health and Consumer Protection HITECH Building 11, rue Eugène Ruppert, L-2920 Luxembourg

Phone: + 352 430136643 Fax : + 352 430132059 E-mail : <u>Jurgen.Scheftlein@ec.europa.eu</u> Website: http://ec.europa.eu/health/ph_determinants/life_style/mental/mental_he alth_en.htm Suicide Prevention Resource Center (SPRC)

The Suicide Prevention Resource Center (SPRC), established in 2002 and federally funded, supports suicide prevention with the best of science, skills and practice to advance the National Strategy for Suicide Prevention (NSSP).

SPRC believes that suicide prevention practice is best supported by the following core values:

- A public health approach to prevention
- Prevention through collaborative, non-competitive partnership
- Evidence-based practices
- Sensitivity to cultural context
- Seamless prevention services.

SPRC official website includes individual state suicide prevention pages, news and events, an online library, training, and links to other web sites.

The SPRC Training Institute offers an array of training programs, including a series of self-paced online workshops about youth suicide prevention. In addition, SPRC works in collaboration with prevention specialists who assist the suicide prevention efforts of state suicide prevention coalitions and other agencies and organizations.

The report 'Best Practices Registry' (BPR) for suicide prevention is the product of collaboration between SPRC and the American Foundation for Suicide Prevention (AFSP).

In collaboration with the Suicide Prevention Action Network USA (SPAN USA) SPRC has developed the following document: 'Help at Hand - Supporting Survivors of Suicide Loss : A Guide for Funeral Directors'.

The Weekly Spark e-newsletter published by SPRC also gives a compilation of news, funding opportunities, and abstracts of selected research articles.

Newton, Massachusetts office Suicide Prevention Resource Center Education Development Center, Inc. 55 Chapel Street, Newton, MA 02458-1060, USA

Phone : + 1 617-964-5448

Fax: + 1 617-969-9186

E-mail : <u>info@sprc.org</u>. Website : <u>http://www.sprc.org</u> Consensus Paper on Youth and Education (EC)

Enabling young people to have a successful start in life is a key objective of Member States and EU-policies, and it is a precondition for Europe's sustainable success as a social entity, knowledge society and economy.

The renewed Lisbon strategy (2005) triggered two important developments:

- the establishment of the European Youth Pact
- the inclusion of educational targets into the Lisbon process.

One contribution to support progress towards these targets was the Reference Framework on Key Competences for Lifelong Learning (2006). It stressed the importance of maintaining mental health and well-being ('constructive management of feelings') for a successful educational, social and civic performance.

Other EU documents focus on the promotion of social inclusion. Youngsters are also identified as a priority target group in the Commission's White Paper on Health (2007).

The provision of activities for youngsters is strengthened by a Commission initiative (2006) in charge of developing a comprehensive strategy to promote and safeguard the rights of children. This initiative is highlighted in the 2007 Commission Communication 'Promoting young people's full participation in education, employment and society'.

In 2008, the European Commission has organised an "EU High-Level Conference on Mental Health', a follow-up to the consultation on the Commission's Green Paper on Mental Health of 2005. This conference is facilitated by a contracted Consortium composed of the Department of Health, Government of Catalonia, Spain, STAKES, the London School of Economics and the Scottish Development Centre for Mental Health. The Consortium will develop a consensus paper on 'Healthy Children and Young People : Laying the Foundation for Lifelong Wellbeing'.

Dr. Eva Jané-Llopis, coordinator, Consortium project office Government of Catalonia, Dept. of Health, ES - 08028 Barcelona, Spain

Phone: +34 93 551 3589 / 3590 E-mail : <u>EC-MentalHealthProcess@gencat.cat</u> Website: <u>http://www.ec-mental-health-process.net</u> Suicide Prevention Help - Global Web Directory

In 1998, Kenneth Hemmerick, a Canadian artist, posted a letter, The Friendship Letter, on the Web because he was shocked to find so many online sites that encouraged people to kill themselves.

In 2006, he began creating a global web directory of suicide prevention resources for those who are despairing and thinking about suicide, and also for people who are concerned that a loved one may be suicidal.

This Directory collects and summarizes many useful suicide and suicide prevention resources found on the Internet, including information for Groups at Risk (such as teens and young adults, the elderly, the military, law enforcement, First Nations, LGBT, the bullied, people suffering with addiction and more).

This important website calls for suicide prevention sites to include themselves within the directory. Currently, the online directory consists of:

- The Friendship Letter
- Helpful Suggestions
- Helping Someone, resources about what to do when a friend or family member is suicidal
- Personal Testimonies
- Feeling Suicidal? Learning how to cope with suicidal thoughts and feelings
- Mental Health Issues
- Crisis centres and suicide prevention hotlines anywhere in the world
- 'A Guide in Humane Awareness', an e-book course about kindness, cruelty and humane living www.humaneguide.com

Kenneth Hemmerick, Montreal, Canada

E-mail : see : Suicide Prevention Help - Contact

Website : <u>http://www.suicidepreventionhelp.com</u>