



CONNECTICUT Suicide Advisory Board

The logo for the Connecticut Suicide Advisory Board consists of two stylized human figures, one blue and one green, shaking hands inside a white square. This square is set within a larger blue speech bubble on the left and a green speech bubble on the right.

Andrea Iger Duarte, MSW, MPH, LCSW
Suicide Prevention Project Director,
CT Department of Mental Health and Addiction Services /
Tri-Chair, CT Suicide Advisory Board

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

National Dialogues School Mental Health, Prevention, Early
Intervention & Safety
New Orleans, LA
November 3, 2019



Disclaimers

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



CT Networks of Care for Suicide Prevention Initiative 2015-2020

Overall purpose:

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

Goal 1:

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

Goal 2:

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



Networks of Care for Suicide Prevention *continued*

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

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

Advising Body: Connecticut Suicide Advisory Board (CTSAB)

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

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

Funder: The federal Substance Abuse and Mental Health Services Administration (SM 062916)



Strategic Evidence-Based Approaches

National Suicide Prevention Resource Center Comprehensive Approach to Suicide Prevention

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



SAMHSA Strategic Prevention Framework (SPF)

<https://www.samhsa.gov/capt/applying-strategic-prevention-framework>



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

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

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



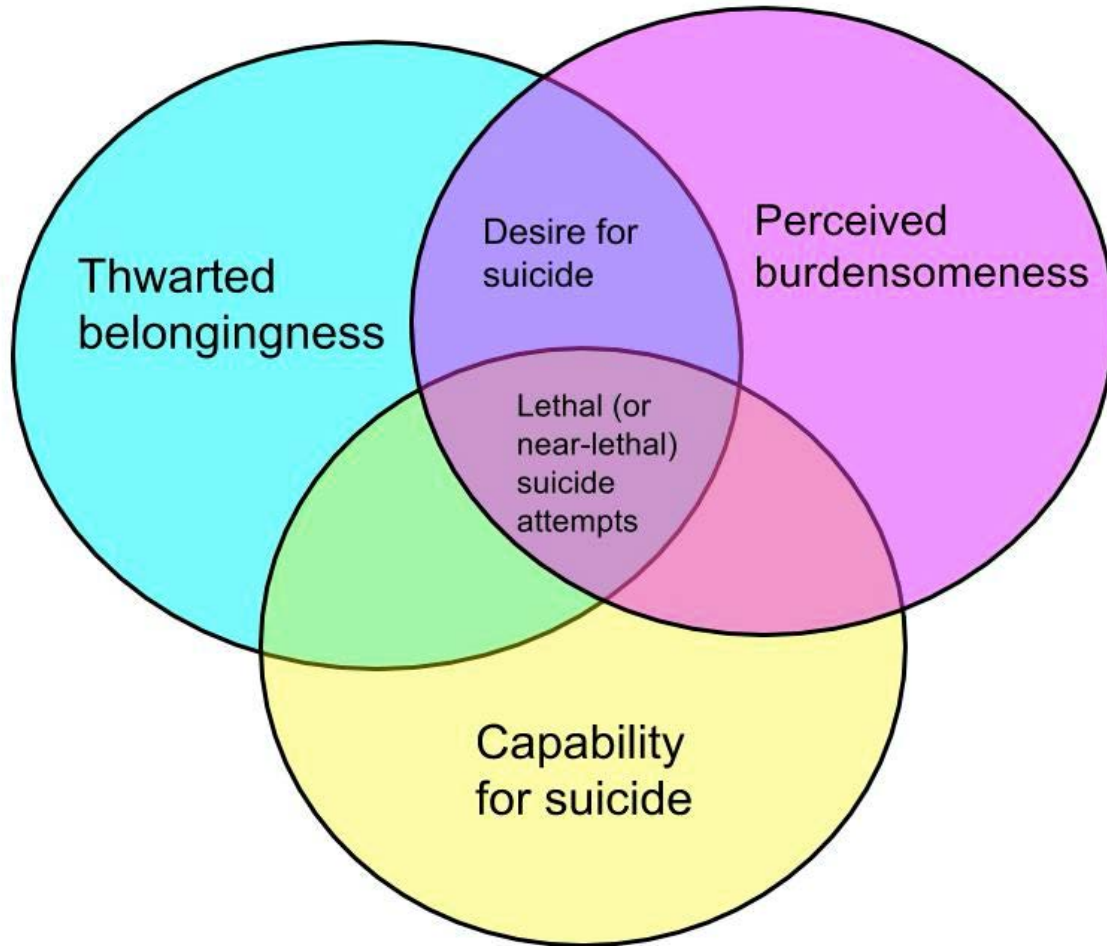
CT School Health Survey 2017 of 9th-12th graders

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

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



Joiner's Interpersonal Theory of Suicide



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



Guide Development

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



Safety Plan

(Brown & Stanley)

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

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

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



Patient Safety Plan Template

Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. _____
 2. _____
 3. _____

Step 2: Internal coping strategies - Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. _____
 2. _____
 3. _____

Step 3: People and social settings that provide distraction:

1. Name _____ Phone _____
 2. Name _____ Phone _____
 3. Place _____ 4. Place _____

Step 4: People whom I can ask for help:

1. Name _____ Phone _____
 2. Name _____ Phone _____
 3. Name _____ Phone _____

Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name _____ Phone _____
 Clinician Pager or Emergency Contact # _____
 2. Clinician Name _____ Phone _____
 Clinician Pager or Emergency Contact # _____
 3. Local Urgent Care Services _____
 Urgent Care Services Address _____
 Urgent Care Services Phone _____
 4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

Step 6: Making the environment safe:

1. _____
 2. _____

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of the Safety Plan Template may be reproduced without their express, written permission. You can contact the authors at bhs2@columbia.edu or gregkrow@mail.med.upenn.edu.

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

Guide Development *continued*

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



Curriculum Development

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



Feasibility Study

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



Pilot Evaluation

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



Segment 1: Introduction to mental health and self-care

This is called mental health.

Mental health is your

FEELINGS,
THOUGHTS,
AND ACTIONS...



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

YOUR
FEELINGS,
THOUGHTS,
AND
ACTIONS.



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

We all feel

SAD, MAD, OR WORRIED

sometimes, but how do we know when we are feeling this way?

I can tell you. You may see changes in how you usually

FEEL, THINK, OR ACT:

- Eat less or more
- Hard to get to sleep or stay asleep
- Argue more
- Cry easily
- Feel bored with things I like
- Want to be alone a lot
- Act before thinking
- Have less energy
- Feel very nervous/stressed



WHEN YOU FEEL **SAD, MAD, OR WORRIED**
sometimes you can do things on your own to take your
mind off of these feelings.

DO YOU REMEMBER WHAT YOU CAN DO
TO KEEP YOUR FEELINGS, THOUGHTS,
and **ACTIONS** healthy? ? ? ? ?

Turn back to pages 6 through 9 and
READ THE LISTS AGAIN.



...if you try these things on your own and they do not seem to help, try doing them with other people.

People I can Do Things With

- 🐾 Parents
- 🐾 Grandparents
- 🐾 Aunt or Uncle
- 🐾 Brother, Sister, Cousin
- 🐾 Friends



ANY OTHERS?



PLACES WE CAN GO TOGETHER



THINGS TO DO WITH OTHERS TO HELP YOU FEEL BETTER

- 🐾 Play a game
- 🐾 Tell jokes
- 🐾 Go for a bike ride
- 🐾 Go for a hike
- 🐾 Go to the store
- 🐾 Go to the library
- 🐾 Watch a movie
- 🐾 Play a sport
- 🐾 Go to lunch
- 🐾 Give and get hugs
- 🐾 Dance and sing

Segment 3: Identification of and connecting to trusted adults



Talking about your mental health
- **FEELINGS, THOUGHTS, AND ACTIONS** -
with a trusted adult as soon as possible
is your next step.

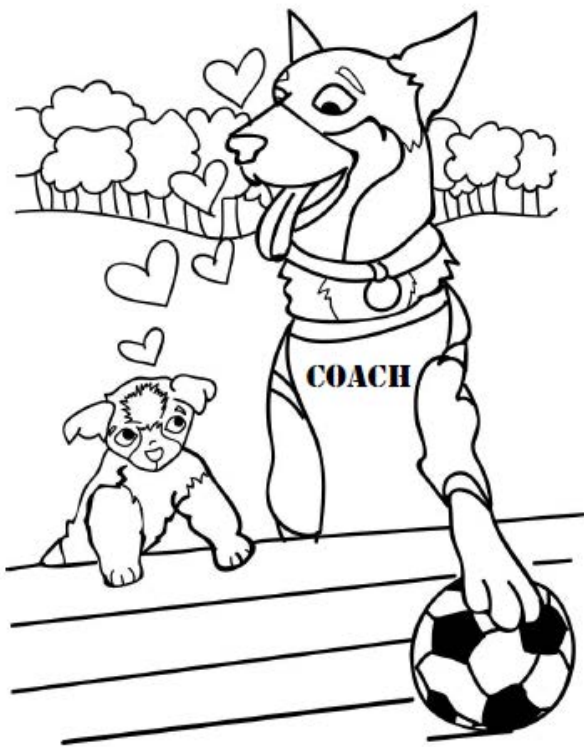
You might be wondering,
"What is a trusted adult, anyway?"
Turn the page and find out.



A Trusted Adult is someone Who

- Helps YOU
- Makes YOU feel safe
- Is patient with YOU
- Listens to YOU
- Cares about YOU
- Spends time with YOU





Dear _____

I am giving you this valentine
because you are my trusted
adult. This means that I will
come to you when I need
to talk about my feelings,
thoughts and actions.



RESOURCES FOR TRUSTED ADULTS

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

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

A Trusted Adult is someone Who

- Helps YOU
- Makes YOU feel safe
- Is patient with YOU
- Listens to YOU
- Cares about YOU
- Spends time with YOU

In a crisis contact:

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

In an emergency call 9-1-1

© 2017 Gizmo's Pawesome Guide to Mental Health



Trusted Adults

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

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

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

“Staff felt that this was a valuable task and the more the program is implemented the more beneficial. Also, it is believed that spreading the word around, possibly announcing on the school news would be beneficial (i.e. "if you see staff with this pin it means they are a trusted adult, etc."



PRACTICE TIME

HOW TO TALK WITH A TRUSTED ADULT

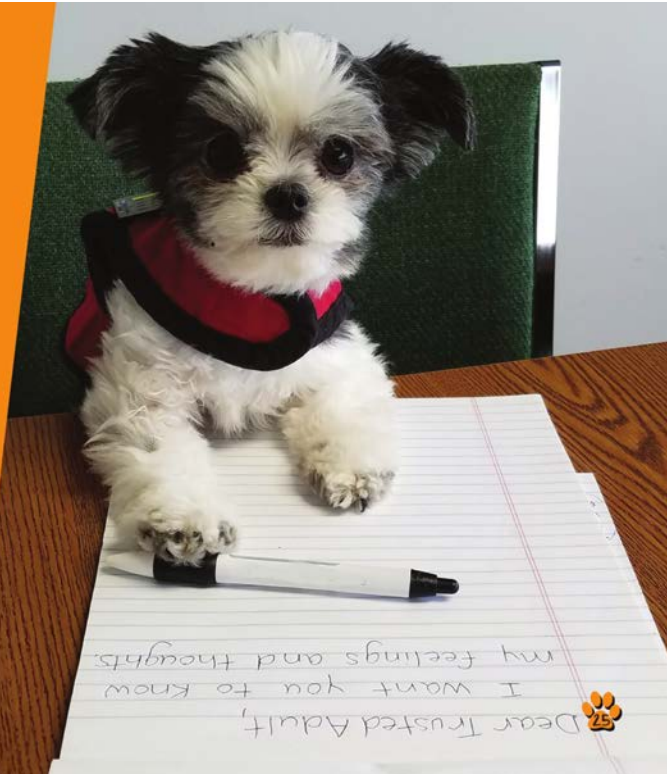
Before you talk with a trusted adult, sometimes it helps to practice what you will say first. You can...



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



If you do not want to say out loud how you are **FEELING, THINKING, OR ACTING** you can write a note instead and give it to a trusted adult.



Dear Trusted Adult,
I want you to know
my feelings and thoughts.



Check-in Slip

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



Name: _____

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



Say it in a mirror

Talk to a pet, toy or stuffed animal

Write in a diary or journal



I need to talk to the school/agency trusted adult about my feelings and thoughts soon.

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



Check-in Slip

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



Segment 4: Completion of Mental Health Plan

MY MENTAL HEALTH PLAN

Name: _____

1. Things I can do to take care of my mental health: feelings, thoughts, and actions

- | | |
|---|---|
| <input type="checkbox"/> Breathe slowly | <input type="checkbox"/> Ride a bike |
| <input type="checkbox"/> Listen to music | <input type="checkbox"/> Play outside |
| <input type="checkbox"/> Play an instrument | <input type="checkbox"/> Read |
| <input type="checkbox"/> Draw or paint | <input type="checkbox"/> Play with toys |
| <input type="checkbox"/> Take a nap | <input type="checkbox"/> Do a puzzle |
| <input type="checkbox"/> Blow bubbles | <input type="checkbox"/> Sew or knit |
| <input type="checkbox"/> Play with a pinwheel | <input type="checkbox"/> Smile or laugh |
| <input type="checkbox"/> Play dress-up | <input type="checkbox"/> Take a walk |
| <input type="checkbox"/> Write a story | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Play with pets | <input type="checkbox"/> _____ |

2. How to know if I feel mad, sad, or worried

- | | |
|--|--|
| <input type="checkbox"/> Eat less or more | <input type="checkbox"/> Want to be alone a lot |
| <input type="checkbox"/> Hard to get to sleep or stay asleep | <input type="checkbox"/> Act before thinking |
| <input type="checkbox"/> Argue more | <input type="checkbox"/> Have less energy |
| <input type="checkbox"/> Cry easily | <input type="checkbox"/> Feeling very nervous/stressed |
| <input type="checkbox"/> Feel bored with things you like | <input type="checkbox"/> _____ |
| | <input type="checkbox"/> _____ |

3. People and places that can help me think of other things

- | | |
|--|---|
| <input type="checkbox"/> Parents | <input type="checkbox"/> Friends house |
| <input type="checkbox"/> Grandparents | <input type="checkbox"/> Family member's house |
| <input type="checkbox"/> Aunt or Uncle | <input type="checkbox"/> Faith Community |
| <input type="checkbox"/> Brother, Sister, Cousin | <input type="checkbox"/> Community center or youth center |
| <input type="checkbox"/> My friends | <input type="checkbox"/> Park |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Library |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

4. Things I can do with Others to Help Me Feel Better

- | | |
|---|--|
| <input type="checkbox"/> Play a game | <input type="checkbox"/> Go to lunch |
| <input type="checkbox"/> Tell jokes | <input type="checkbox"/> Play outside |
| <input type="checkbox"/> Go for a bike ride | <input type="checkbox"/> Give and get hugs |
| <input type="checkbox"/> Go for a hike | <input type="checkbox"/> Dance and sing |
| <input type="checkbox"/> Go to the store | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Go to the library | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Watch a movie | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Play a sport | |

5. My trusted adults

- | |
|---|
| <input type="checkbox"/> Parents |
| <input type="checkbox"/> Grandparents |
| <input type="checkbox"/> Uncles/Aunts |
| <input type="checkbox"/> Older Brothers/Sisters |
| <input type="checkbox"/> Teachers |
| <input type="checkbox"/> Coaches |
| <input type="checkbox"/> Religious Leaders |
| <input type="checkbox"/> Scout Leaders |
| <input type="checkbox"/> School Counselors |
| <input type="checkbox"/> School Social Workers |
| <input type="checkbox"/> School Nurses |
| <input type="checkbox"/> Doctors |
| <input type="checkbox"/> Camp Counselors |
| <input type="checkbox"/> Any Others? |
| <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ |

PAWS UP
for mental health



Mental Health Plan

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

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

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



Resources for Trusted Adults

RESOURCES FOR TRUSTED ADULTS

In a crisis contact:

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



In an emergency call 9-1-1

Other resources for mental health services:

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



Be the 1 to start the conversation

www.preventsuicidect.org

www.empsct.org

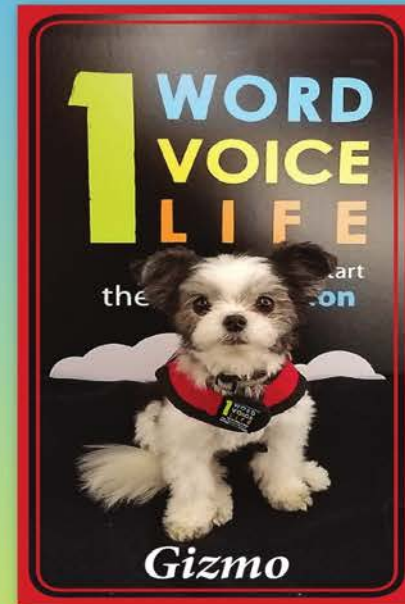
www.gizmo4mentalhealth.org

www.suicidepreventionlifeline.org



Get Connected. Get Answers.

www.211ct.org



This guide is not a substitute for treatment.



Segment 5: Use of mindfulness exercise and other optional activities

GIZMO CAN HELP YOU with Mindfulness Exercises too!

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

HERE'S HOW YOU DO IT



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



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



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



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



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

COLOR GIZMO



Curriculum Feedback

- Connecting with Trusted Adults
 - “The staff identified as trusted adults reacted with pride, pleasure, happiness that they were seen that way by the students.”
 - “I think it has had a great impact on youth/school climate so students feel comfortable reaching out to trusted adults and likely feel the trusted adults are approachable.”
- Parental Support for the Curriculum
 - “I am so happy to see this being addressed for our kids. We don't have health class for our kids until middle school, but to tell you the truth, I think this is better than any health class that I ever took.”



Curriculum Feedback

- Staff Support for the Curriculum
 - “Of the many pilot curriculums we have been exposed too, Gizmo's is one we are very excited to bring into the school on a permanent basis.”
- Youth Support for the Curriculum
 - “All of the grades should be here to learn about Gizmo, this is awesome!”

“Great program to instill in children while they are young that they will benefit from their whole lives. Excellent way to identify children that need support.”



ACKNOWLEDGEMENTS

Contributors/Reviewers

Jenifer Adams, M.A., Special Educator and Psychological Trauma Responder, K-9 First Responders
Kristen Akeley, Special Education Para-Educator
Laura Bush, M.A., Elementary Educator, Andover Elementary School
Andrea Iger Duarte, M.S.W., M.P.H., L.C.S.W., Suicide Prevention Director, Connecticut Department of Mental Health and Addiction Services
Amy Evison, L.M.F.T., Youth Service Director, Community Health Resources
Amy James, Ph.D., L.P.C., Mental Health and Suicide Prevention Specialist
Scott Newgass, M.S.W., L.C.S.W., Education Consultant, Connecticut State Department of Education
Sarah Schlegel, M.D., Behavioral Pediatrician, Connecticut Children's Medical Center
Heather Spada, Suicide Prevention System Manager, United Way of Connecticut
Kenyatta Thompson, Masters Candidate, University of Connecticut School of Social Work
Steven A. Weisblatt, M.D., F.A.P.A., Psychiatrist
Abigail Wood, Masters Candidate, University of Connecticut School of Social Work

Therapy Dog Handlers/Dog Owners:

Jenifer Adams
Kristen Akeley
Laura Bush
Ofc. Laura Gordon
Lt. William Gordon
Jennifer Johnston
Barbara Polinsky
Lisa "Sid" Sidella
Julie Stevens
Michelle White

Thanks to:

Anytime Fitness, Manchester, CT
Gregory K. Brown, Ph.D.
Connecticut Department of Children and Families
Connecticut Department of Mental Health and Addiction Services
Connecticut Department of Public Health
Connecticut Suicide Advisory Board/1 Word Campaign
Barbara Stanley, Ph.D.
Substance Abuse and Mental Health Services Administration/Center for Mental Health Services
United Way of Connecticut, Inc./2-1-1
Vanguard Direct

© 2017 Gizmo's Pawesome Guide to Mental Health

Thank you!

- CT Department of Public Health (2015). CT School Health Survey. http://www.ct.gov/dph/lib/dph/hisr/pdf/cshs_ybc2015_report.pdf
- Stanley, B. & Brown, G. K. (2012). Safety Planning Intervention: A Brief Intervention to Mitigate Suicide Risk. Cognitive and Behavioral Practice, 19, 256-266. http://suicidesafetyplan.com/uploads/Safety_Planning_-_Cog__Beh_Practice.pdf

The views, opinions, and content expressed in this book do not necessarily reflect the views, opinions, or policies of the Substance Abuse and Mental Health Services Administration/U.S. Department of Health and Human Services.

This guide was developed by the CT Suicide Advisory Board in partnership with the CT Networks of Care for Suicide Prevention Initiative, administered by the CT Departments of Mental Health and Addiction Services, Children and Families and Public Health, and the United Way of Connecticut/2-1-1. Funding was provided by the federal Substance Abuse and Mental Health Services Administration via the State Youth Suicide Prevention Cooperative Agreement Grant (SM 062916), and the Children's Mental Health Block Grant.



Contact Information

Andrea Iger Duarte, MSW, MPH, LCSW

Suicide Prevention Project Director

Department of Mental Health & Addiction Services

Andrea.Duarte@ct.gov

(860) 418-6801

