988
SUICIDE
& CRISIS
LIFELINE
MISSOURI

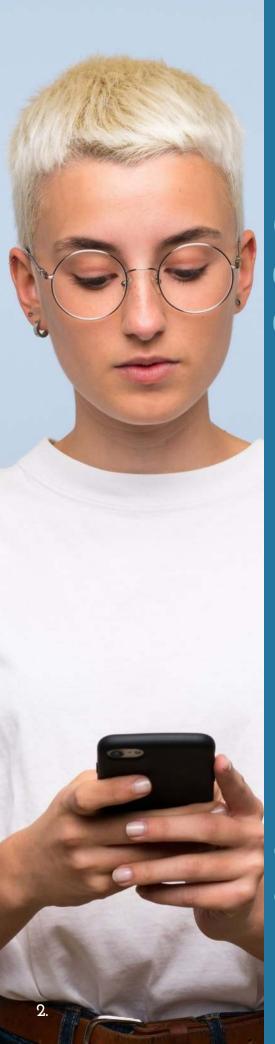
SUICIDE
PREVENTION



988

GUIDE FOR SCHOOLS

JANUARY 2023



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The Missouri Suicide Prevention Network (MSPN) is comprised of and working with several state partners from the public and private sectors to coordinate and develop implementation of the Missouri Suicide Prevention Plan, based on the National Strategy for Suicide Prevention. One of MSPN's committees is the Suicide Prevention in Schools Committee. The purpose of this committee is to reflect on current data trends, formulate plans, and take the steps needed to be a vital resource for Missouri schools and youth-serving organizations to help reduce suicide amongst one of our state's most vulnerable populations, our youth and young adults. We are focused on assessing the needs of Missouri schools and filling gaps by providing resources when and where needed. It was identified that Missouri has an abundance of resources available to schools, including the Department of Elementary and Secondary Education's (DESE) Youth Suicide Awareness and Prevention Model Policy and the Missouri School Counselor Association (MSCA) Crisis Manual. However, it can be unclear to schools on how to implement these resources into their protocols and practices. To address this need, MSPN is proud to launch the Suicide Prevention & 988 Guide for Schools. This guide is intended for school personnel to utilize suicide prevention, intervention and crisis response services, and postvention resources to better address and meet the needs of schools across the state. While the guide is most applicable to middle and high school settings, elementary and higher education considerations are included as well.

In addition to the guide, the Missouri Department of Mental Health (DMH) is making available 988 Suicide & Crisis Lifeline materials for schools to promote this resource on their campuses and encourage help seeking among students. Schools will have access to the Suicide Prevention & 988 Guide, a virtual 988 social media toolkit, and a physical 988 toolkit.

MSPN Executive Committee







Suicide is a critical public health issue that affects individuals, families, schools, and communities. Missouri's suicide rate is consistently higher than the national average. Preventing suicide requires everyone's commitment, from the individuals struggling with their own thoughts of suicide to the systems and communities that support them. A strategic approach that engages everyone at every level is our best hope to prevent suicides in Missouri.

MISSOURI DATA

In 2020, suicide was the 11th leading cause of death for all ages and the 3rd leading cause of death among 10-24 year olds.

(CDC WISQARS, 2020)

In 2020, 25% of college students, 10% of high school students, and 12% of middle school students experienced serious thoughts of suicide in the past year.

(DHSS, 2022)

75% of all transgender college students have seriously considered suicide in the past year.

(MACHB, 2020)

52% of youth aged 10-17 who died by suicide used a firearm to kill themselves.

(CDC WISQARS, 2020)

These statistics can be daunting, however, there is a lot that can be done, and many are willing to learn how to help prevent suicide.

HELP PREVENT SUICIDE

94% of people believe that suicide can be prevented, at least sometimes.

(Harris Poll. 2022)

66% of adults believe they don't have enough knowledge to tell if someone is considering suicide.

(Harris Poll, 2022)

8 out of 10 adults are open to learning how they can do more to help someone in need.

(Harris Poll, 2022)

IN-PERSON SCHOOLING AND YOUTH SUICIDE: EVIDENCE FROM SCHOOL CALENDARS AND PANDEMIC SCHOOL CLOSURES

Benjamin Hansen, Joseph J. Sabia, & Jessamyn Schaller Working Paper 30795 | http://www.nber.org/papers/w30795

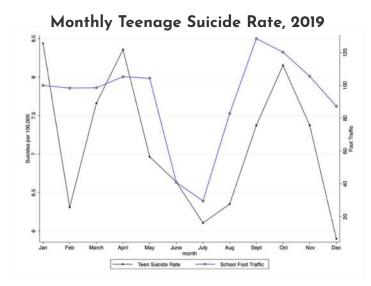
December 2022

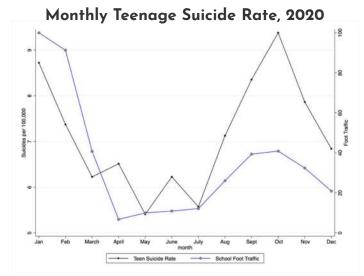
KEY TAKEAWAYS

Dr. Bart Andrews, Chief Clinical Officer of Behavioral Health Response

- This study explores the effects of in-person schooling on youth suicide.
- 1990 2019 suicide data is used to document the historic relationship between teen suicide and the school calendar, noting suicide rates are highest for teens from September - May and lowest from June - August.
- Areas with schools starting in August start to see suicide increase in August while areas where schools don't start until September don't see increases until September.
- This pattern was disrupted in March 2020 following the beginning of the COVID-19 pandemic with teen suicides plummeting and remaining low throughout summer before rising again in Fall 2020.

- Using county-level variation of school re-openings in Fall 2020 and Spring 2021, findings show a return to school (whether in Fall 2020 or Spring 2021) was associated with a 12-18 percent increase in teen suicide.
- In those same areas, suicide did not increase in ages 19 to 25.
- Also noted is some support for connection with return to school, increased google searches for bullying, and increased suicide in teens.
- Findings did not support access to firearms or reduction in parental exposure being related to the increase in teen suicides.





CALL TO ACTION

Suicide Prevention for Schools

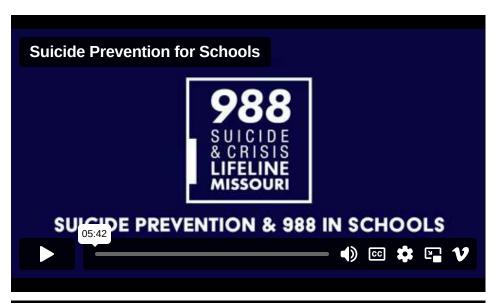
This video explains why suicide is a serious public health issue. Suicide affects youth and young adults more often than others in our community.

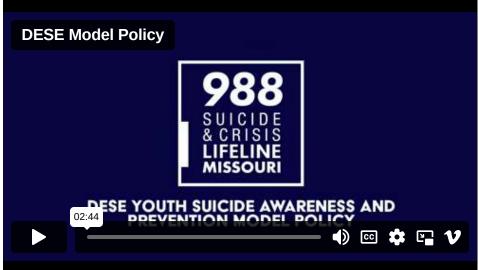
DESE Model Policy

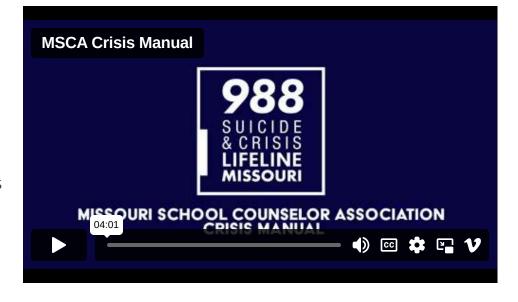
This video provides more information about the Youth Suicide Awareness and Prevention Model Policy. The Model Policy serves as a template for districts in developing suicide prevention policies.

MSCA Crisis Manual

This video describes the MSCA Crisis Manual. It was written as a guideline to help educators and administrators think ahead and plan for crisis situations before they arise.







PREVENTION

Suicide prevention is a collection of efforts to reduce factors that increase risk of suicide and increase factors that promote resilience. It requires a combination of efforts that work together to address different aspects of the problem for youth and young adults. Suicide is rarely caused by a single circumstance or event. Instead, a range of factors—at the individual, relationship, community, and societal levels—can increase risk. To help understand how to prevent suicide for students, it's important to look at warning signs, risk factors, and protective factors.

Warning Signs

Warning signs are behaviors that may indicate that a person is at immediate risk for suicide. The following should prompt you to immediately call, text, or chat 988 to speak to a trained crisis specialist.

WARNING SIGNS

- Talking about being a burden
- Being isolated
- Increased anxiety
- Talking about feeling trapped or in unbearable pain
- Increased substance use

- Looking for a way to access lethal means
- Increased anger or rage
- Extreme mood swings
- Expressing hopelessness

- Sleeping too little or too much
- Talking or posting about wanting to die
- Making plans for suicide



Risk Factors

Risk factors are situations or problems that can increase the possibility that a person will attempt suicide.

Protective Factors

Protective factors, similar to risk factors, are a range of factors that can protect people from suicide. We can take action in communities and as a society to support people and help protect them from suicidal thoughts and behavior.

Below are some common risk and protective factors for youth and young adults:

Category	Protective Factors	Risk Factors
Individual	 Reasons for living (e.g., family, friends, pets) Effective coping & problem-solving skills Strong cultural identity 	 Previous suicide attempt History of depression and other mental illnesses Serious illness such as chronic pain Criminal/legal problems Job/financial problems or loss Impulsive or aggressive tendencies Substance use Current or prior history of adverse childhood experiences Sense of hopelessness Violence victimization and/or perpetration
Relationship	 Support from partners, friends, and family Feeling connected to others 	 Bullying Family/loved one's history of suicide Loss of relationships High conflict or violent relationships Social isolation
Community	 Feeling connected to school, community, and other social institutions Availability of high- quality and consistent behavioral healthcare 	 Lack of access to healthcare Suicide cluster in the community Stress of acculturation Community violence Historical trauma Discrimination
Societal	 Reduced access to lethal means Cultural, religious, or moral objections to suicide 	 Stigma associated with help-seeking and mental illness Easy access to lethal means of suicide among people at risk Unsafe media portrayals of suicide

DESE Model Policy

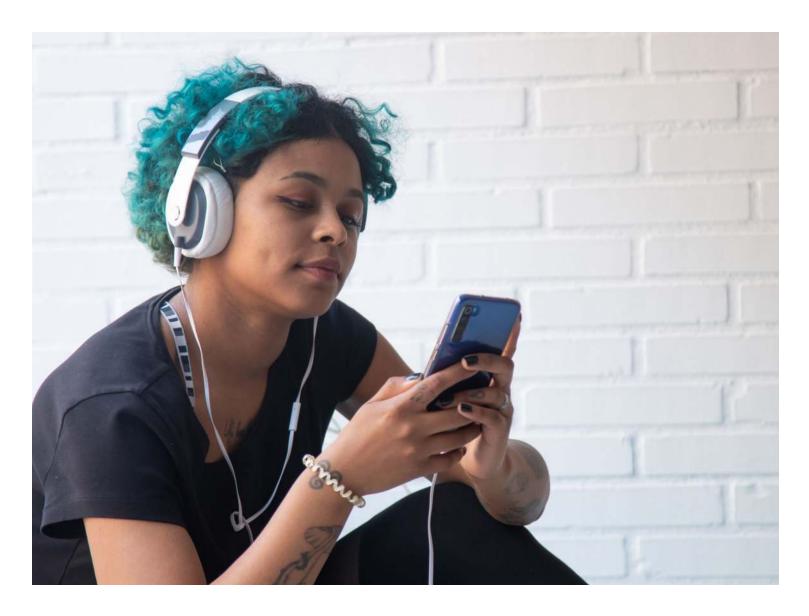
<u>The DESE Model Policy</u> provides guidance for schools on key suicide prevention and awareness protocols and procedures and steps that can be taken to prevent it. The following sections of the DESE Model Policy provide information on suicide prevention protocol requirements and training that schools could apply to a suicide prevention protocol:

P. 7, Suicide Prevention & Response Protocol Education for Staff

• This section outlines suicide prevention policy education requirements and information about suicide prevention & awareness training.

P. 8, Suicide Prevention & Response Protocol Education for Students

• This section outlines requirements for and information on suicide prevention & awareness training.



SUICIDE PREVENTION PROGRAMMING FOR SCHOOLS

Students spend a significant amount of their lives in school, and school personnel are in a prime position to help students develop protective factors and foster social and emotional competencies and well-being. School suicide prevention programming is available to help educate students and staff on how to identify warning signs, risk factors, and protective factors of suicide and how to reach out for help when they need it.

Through funding provided by DMH, ten Prevention Resource Centers (PRCs) cover the entire state, providing technical assistance and support to community coalitions in their service areas. Schools can reach out to their local PRCs for free suicide prevention programming for schools, training, support, and resources. In addition to suicide prevention assistance, PRCs also offer other prevention support.

You can find your local PRC here.



If viewing this video from a PDF file, please click the title "Missouri Prevention Resource Centers" or "vimeo" in the bottom right corner to view.

Name	Description	Audience	Link
Signs of Suicide (SOS)	SOS is an evidence-based youth suicide prevention program that has demonstrated an improvement in students' knowledge and adaptive attitudes about suicide risk and depression.	Grades 6-12	https://www.mindwise.or g/sos-signs-of-suicide/
Question, Persuade, Refer (QPR) Gatekeeper Training	Students trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help.	Students in middle school and up Youth serving adults	https://qprinstitute.com/
Youth Mental Health First Aid	Youth Mental Health First Aid is a skills-based training that teaches youth-serving individuals how to identify, understand and respond to an adolescent (ages 12-18) who may be experiencing a mental health or substance use challenge.	Youth- serving individuals	http://mhfamissouri.org/ mental-health-first- aider/
Teen Mental Health First Aid	Teen MHFA teaches teens how to identify, understand, and respond to signs of mental health and substance use challenges among their friends and peers.	Teens ages 15-18	http://mhfamissouri.org/ tmhfa/
Hope Squad	Hope Squad is a peer-to-peer suicide prevention program. Hope Squad members are nominated by their classmates as trustworthy peers and trained by advisors.	Elementary, middle, and high school students	https://hopesquad.com/
NAMI Ending the Silence	NAMI Ending the Silence is an evidence-based engaging presentation that helps middle and high school aged youth learn about the warning signs of mental health conditions and what steps to take if you or a loved one are showing symptoms of a mental health condition.	Middle and high school students	https://ets.nami.org/

988 FOR SCHOOLS

One of the most widely available suicide prevention resources is the 988 Suicide & Crisis Lifeline. 988 is a 3-digit phone number available 24/7 that offers free and confidential access to compassionate care and support for anyone, including students experiencing a mental health, suicide, or substance use crisis. If you are worried about a student, call or text 988 or chat at 988lifeline.org and a trained crisis specialist will help walk you through navigating the situation.

While 988 is a national initiative, it is up to each state to implement 988 into existing services and systems. As part of Missouri's suicide prevention and crisis response efforts, DMH is leading 988 implementation for the state. In a coordinated effort to ensure schools understand what 988 is, how to access it, and its connection to the larger crisis system, DMH and partners have created several 988 resources and materials for schools that are referenced throughout this guide. Below is a 988 infographic for Missouri schools.

This infographic is available for download <u>here</u>.





INTERVENTION AND CRISIS RESPONSE

Intervention and crisis response services are designed to interrupt and/or reduce the severity of a mental health, suicide, or substance use crisis. The goal of intervention and crisis response services is symptom reduction, stabilization, and restoration to a previous level of functioning. This can be provided in any setting, including schools. Intervention and crisis response practices for youth should aim to make every effort to help them stay in their current living environment, with family or other natural supports actively participating in the young person's care and stabilization.

To successfully navigate a crisis, schools need protocols that detail how to contain the crisis, minimize subsequent trauma, and restore equanimity of the school environment. As outlined in Section 170.048, RSMo, all Missouri school districts are required to have a protocol for helping students at possible risk of suicide and for responding to a suicide death. To help schools navigate a current crisis and be prepared for future crises, schools should have a comprehensive crisis response protocol. The MSCA developed a Crisis Manual to help educators and administrators think ahead and plan for crisis situations before they arise. The suggestions included in the manual are thorough, as well as flexible, and adaptable. This manual has information and guidance to help schools be as prepared as possible should a crisis occur.



MISSOURI'S CRISIS CONTINUUM

Missouri is following national best practices to create a comprehensive crisis continuum that includes three core elements:

SOMEONE TO TALK TO



988 Suicide & Crisis Lifeline

SOMEONE TO RESPOND



Mobile Crisis Response Team

SOMEWHERE TO GO



Behavioral Health Crisis Centers

Someone to Talk to

988 Suicide & Crisis Lifeline: call, text, or chat the 988 Suicide & Crisis Lifeline for free and confidential crisis support available 24/7. Data shows 90% of all contacts made to crisis lines are able to be resolved over the phone.

Someone to Respond

Mobile Crisis Response: if the crisis is not able to be resolved over the phone, mobile crisis response teams led by behavioral health professionals are available to respond to an individual in crisis wherever they may be in the community, including in schools.

Somewhere to Go

Behavioral Health Crisis Centers (BHCCs): walk-in crisis receiving and stabilization facilities that triage, assess, provide immediate care, and stabilize a mental health, suicide, substance use crisis for anyone including youth. BHCCs provide a trauma-informed space to receive services from a multi-disciplinary team specializing in mental health and substance use related crises.

NEED HELP NOW?



If you are thinking about suicide, are experiencing a mental health or substance use crisis, or are worried about a student, friend, or loved one, reach out to the 988 Suicide & Crisis Lifeline for free and confidential support by calling or texting 988, or chatting at 988lifeline.org/chat.

If you or someone you know is needing crisis assistance at school or in the community, you can access mobile crisis response teams by first contacting 988 and connecting with a crisis specialist.

If you or someone you know needs walk-in crisis support, you can go to one of the below youth serving BHCCs.

YOUTH SERVING BEHAVIORAL HEALTH CRISIS CENTERS		
St. Louis	SSM Behavioral Health Urgent Care (5 years old and up)	
Joplin	Ozark Center Urgent Behavioral Solutions (16 years old and up)	
Poplar Bluff	Family Counseling Center (12 years old and up) (not yet open)	
St. Joseph	Family Guidance Center (5 years old and up) (not yet open)	

MSCA Crisis Manual

The MSCA Crisis Manual provides guidelines for school crisis teams to operate effectively in crisis situations. One of the most important steps in preparing for a crisis is creating a comprehensive and thorough response plan. The time to start planning is before a crisis, not during it. Creating an effective plan requires careful pre-planning and consideration of what's best for the school community. The following sections of the MSCA Crisis Manual provide information on important crisis intervention components that could be applied to a school crisis response protocol:

P. 7-10, Crisis Intervention Worksheet

• This document may be helpful to schools compiling their school crisis response protocol and identifying steps needed to respond effectively.

P. 11-15, Administrator's Checklist for Responding to an Emergency/Crisis

 This checklist outlines key considerations for responding to a crisis including when to take immediate action, school personnel responsibilities, and responding to families, the media, and the community.

P. 16-35, Chapter 2: Crisis Interventions

- Guidelines for Understanding and Responding to a Crisis.
- Suggestions for School Crisis Team Members Visiting Classrooms.
- Good Tips for School Counselors to Remember (Crisis Do's and Don'ts).
- Tips for Students in Crisis, Teachers, School Crisis Team Members, and Parents.

P. 45-48, Handling Crises from Virtual Platforms

P. 49-50, How to Handle a Potentially Suicidal Student

• Step-by-step guidance on how to respond to a student who is suicidal.

DESE Model Policy

<u>The DESE Model Policy</u> also provides guidance for schools on crisis response procedures. The following sections of the DESE Model Policy provide information on important crisis intervention components that could be applied to a school crisis response protocol:

P. 2-3, Sample Policy Language for School Crisis Teams

P. 3-4, Crisis Response Procedures

P. 5-7, Responding to Suicide Crises

P. 4-7, Responding to Incidents Impacting the School

• This section includes a crisis response workflow, procedures for parent involvement, and school and community resources.

988 TOOLKITS FOR SCHOOLS

VIRTUAL TOOLKIT



Schools can access virtual 988 materials to promote on their school website, social media, or elsewhere. Virtual materials include graphics, videos, and infographics.

MISSOURI 988 TOOLKIT

The 988 Suicide & Crisis Lifeline is a 3-digit phone number that can connect anyone experiencing a mental health, suicide, or substance use crisis to free and confidential support anytime they need it. The Missouri Department of Mental Health has launched a statewide campaign to spread avareness and educate Missourians on this life saving service. Within this toolidity out lift indig raphics, videos, print materials, and more. These available for you to share with friends, family, local organizations, and anyone else who may need it. Help us spread the word about 988 and save lives.







BRANDING

SOCIAL MEDIA ASSETS

View and download digital graphics and/or videos to share on your social sites.

PRINT MATERIALS

View and download various print materials for use within your organization. View the branding logo variations for

PHYSICAL TOOLKIT



Schools can order physical 988 items to promote the number on their campuses. Items for schools include yard signs, stencils, posters, wallet cards, magnets, notebooks, pens, and stickers. Materials are free of charge. Items are available while supplies last.



POSTVENTION

According to the national Survivors of Suicide Loss Task Force, postvention is an organized response in the aftermath of a suicide to accomplish any one or more of the following:

- To facilitate the healing of individuals from the grief and distress of suicide loss.
- To mitigate other negative effects of exposure to suicide.
- To prevent suicide among people who are at high risk after exposure to suicide.

Any death can have a profound effect on young people, especially the unexpected death of a peer. When someone dies by suicide, the impact can be profound for friends, family, loved ones, and others close to the individual. This impact can present as grief, guilt, and the concerning phenomenon known as suicide contagion, a relatively rare but real occurrence whereby one suicide death influences another. When the suicide survivor is a school-aged youth, these mental health impacts can be more difficult to overcome as children and youth have brains that are still developing, and they often have limited coping skills. Addressing the mental health needs of students following the death of a school peer by suicide reduces the incidence of suicide contagion and long-term mental health struggles.

In addition to the impact a suicide can have on the survivors, it can also leave schools faced with distressed parents and community members, media attention, and communication from others seeking information about what happened and why. In these instances, it is important that schools have an active model for postvention in place to be able to provide immediate support and necessary referrals to services in a timely manner. It is also crucial to have a pragmatic plan for communicating with the public on necessary information regarding the incident.

Protecting the health and well-being of students is of the utmost importance to schools. Well-implemented postvention protocols will enable school personnel to respond in the immediate aftermath of a suicide death of a student in an organized and effective manner. The most effective response to a school community suicide will be one in which steps are taken in advance to prepare. These steps include:

FORMING A
SCHOOL CRISIS
TEAM

HAVING DEATH NOTIFICATION TEMPLATES ON HAND IDENTIFYING AND ENGAGING WITH COMMUNITY PARTNERS TO ASSIST WITH STUDENT NEEDS

CREATING A PLAN
FOR REFERRING
STUDENTS TO
MENTAL HEALTH
SERVICES

How a school responds to a suicide can prevent suicide contagion. Schools should be prepared to support the emotional needs of the students affected by the suicide by taking immediate action to respond as well as the long-term effects and risks that may be associated with the incident.

DESE Model Policy

As outlined in Section 170.048, RSMo, all Missouri school districts are required to have a protocol for responding to a suicide death, or postvention protocol. <u>The DESE Model Policy</u> provides guidance for Missouri school districts regarding a suicide death in the school community. The following sections of the DESE Model Policy provide information on postvention considerations for schools:

P. 4-7, Response to Incidents Impacting the School

• This section highlights potential postvention procedures.

MSCA Crisis Manual

<u>The MSCA Crisis Manual</u> has detailed information on how to respond following a student death. The following sections of the MSCA Crisis Manual provide information on important postvention components that could be applied to a school postvention protocol (NOTE: The MSCA Crisis Manual does not define this information as "postvention", however, the information is applicable):

- P. 51, Handling the death of a student or staff member
- P. 41-43, School Crisis Team Roles and Procedures in the Event of a Student/Staff Death
- P. 7-10, Crisis Intervention Worksheet
 - This document is designed to organize personnel prior to, during, and after a crisis to minimize the trauma and focus resources.
- P. 16-17, Understanding emotions and behaviors following a death
- P. 18, Suggestions for School Crisis Team Members Visiting Classrooms
- P. 26, Handling Crisis Situations: Tips for Teachers (7-11)
- P. 34-35, How to Help a Young Person Experiencing Grief
- P. 44, Crisis Plan/Memorials & Services, Sample Policy

After a Suicide: A Toolkit for Schools

After a Suicide: A Toolkit for Schools addresses Objective 10.1 of the National Strategy for Suicide Prevention (2012): "Develop guidelines for effective comprehensive support programs for individuals bereaved by suicide and promote the full implementation of these guidelines at the state/territorial, tribal, and community levels". The following sections of the toolkit provide information on important postvention components that could be applied to a school postvention protocol:

P. 4-12, Crisis Response Section

• Information on how to immediately respond following a suicide death.

P. 13-16, Helping Students Cope

P. 17-20, Working with the community

P. 23-24 and P. 32-36, Working with the media and social media

P. 25-31, Memorialization

P. 37-39, Suicide Contagion (when to bring in outside help)



ELEMENTARY AND HIGHER EDUCATION PROGRAMMING CONSIDERATIONS

This document primarily focuses on suicide prevention, intervention and crisis response services, and postvention for middle and high school settings as there are fewer national resources available for elementary schools and higher education settings on these topics. While advancements in suicide prevention research continue, there is not currently broad evidence-based information available on elementary school and higher education suicide prevention efforts. However, Partners in Prevention, a higher education prevention consortium in Missouri, plans to convene a statewide workgroup to develop a toolkit on suicide prevention for higher education settings.

While there may be limited information regarding suicide prevention programming for elementary school and higher education settings, the 988 Suicide & Crisis Lifeline is available to all ages.

ELEMENTARY SCHOOL CONSIDERATIONS

Universal programing is recommended for elementary school settings as upstream prevention efforts include awareness and education that integrates Social Emotional Learning (SEL) into the curriculum and emphasizes strengthening protective factors and fostering connectedness with others.

Programming

- <u>SEL</u> is a systemic framework that can be integrated across classrooms. SEL is the process through which young people acquire and apply the knowledge, skills, and attitudes to develop healthy identities, manage emotions and achieve personal and collective goals, feel and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions.
- <u>The Good Behavior Game (GBG)</u> is a team-based classroom behavior management strategy designed for early grades. Studies have found that students who play the GBG are less likely to need behavioral health services and have lower rates of suicide in adulthood.
- <u>Gizmo's Pawesome Guide to Mental Health</u> is a guide that strives to help youth, trusted adults, and the settings in which they live support their mental health and SEL and create a greater sense of individual and community connectedness thereby reducing their risk of negative mental health outcomes such as suicide.

HIGHER EDUCATION CONSIDERATIONS

Approximately 75% of all mental health conditions appear and are established by age 24, so colleges are uniquely situated to help these young people. Suicide prevention efforts for college students should focus on the unique experiences and needs of this population. The best way to prevent suicide in college-aged individuals is to use a comprehensive approach that promotes social networks and connectedness, improves access to mental health services on and off campus, identifies and assists students who may be at risk for suicide, and is prepared to respond when a suicide death occurs.

Programming

- <u>Partners in Prevention</u> provides information on how to implement a comprehensive approach to suicide prevention on college campuses.
- Missouri Ask. Listen. Refer. (MO ALR) is an online suicide prevention training program
 for students, faculty, and staff at colleges and universities. This recognition and referral skills
 training focuses on identifying individuals at risk for suicide, recognizing risk and protective
 factors and warning signs of suicide, and getting help for someone in need. The training is free
 and available to any institution of higher education in Missouri. Visit asklistenrefer.org to learn
 more.
- The Higher Education Mental Health Alliance (HEMHA) has developed a Postvention Guide for Responses to Suicide on College Campuses. This guide covers the actions to take following a suicide, how to develop and implement a sensitive response plan, and steps to limit the risk of future suicides.
- Mental Health First Aid (MHFA) for Higher Education teaches you how to identify, understand
 and respond to signs of mental illnesses and substance use disorders. This training which
 focuses on the unique experiences and needs of college students gives you the skills you
 need to reach out and provide initial support to someone who may be developing a mental
 health or substance use problem and help connect them to the appropriate care.
- <u>Active Minds</u> is a non-profit organization dedicated to promoting mental health among young adults via peer-to-peer dialogue and interaction. Active Minds facilitates awareness campaigns, events, advocacy, outreach, and more.

ACKNOWLEDGEMENTS

The Missouri Suicide Prevention Network (MSPN) is working with several state partners from the public and private sectors to coordinate and develop implementation of the Missouri Suicide Prevention Plan, based on the National Strategy for Suicide Prevention. MSPN is proud to launch the Suicide Prevention & 988 Guide for Schools.

The Missouri Suicide Prevention Network thanks all Executive Committee members, Committee Chairs & Co-Chairs, and members who contribute their time, efforts, and resources to this important work. We also want to thank all of the organizations and individuals supporting the implementation of this important work to help Missouri's youth.

Special thanks to the following contributing members for their work and dedication in developing this important resource:

Name	Title	Organization
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RESOURCES

DEPARTMENT OF ELEMENTARY & SECONDARY EDUCATION (DESE)

Youth Suicide Awareness and Prevention Model Policy

MISSOURI SCHOOL COUNSELOR ASSOCIATION (MSCA)

Crisis Manual

<u>American Foundation for Suicide Prevention (AFSP) Model Policy</u> is a national resource for schools that provides a plan for school districts to implement suicide prevention policies. This resource supplements information provided throughout the DESE Model Policy.

<u>Certified Community Behavioral Health Organizations (CCBHOs)</u> exist to expand access to mental health and substance use care as well as school-based services in community and school-based settings. Services include individual and group evidence-based practices, care coordination, and integration with physical health care for all ages including children, adolescents, and transition age youth.

<u>Youth Behavioral Health Liaisons (YBHLs)</u> are mental health professionals who form local community partnerships with various youth-serving organizations to address specific behavioral health needs of vulnerable children and youth. YBHLs function as service connectors for youth with co-occurring mental illness, substance use and/or developmental disability to link youth to services available through community partners. A primary goal of YBHLs is to form better community partnerships between state departments, behavioral health providers, developmental disability providers, juvenile offices and family courts, schools, and hospitals to help improve outcomes for youth with behavioral health issues.

<u>Recommendations for Reporting on Suicide</u> was developed by experts in suicide prevention based on more than 50 international studies on suicide contagion. Responsible reporting can reduce the risk of additional suicides.

<u>The Preventing Suicide: A Toolkit for High Schools</u> was developed to help high schools, school districts, and their partners design and implement strategies to prevention suicide and promote behavioral health amount their students. This resource has information on building a district-wide postvention policy and convening a school crisis team.

<u>Youth Suicide Prevention and Intervention, Best Practices & Policy Implications</u> provides a review of suicide prevention research and practices as it relates to youth suicide. It is formatted so that individuals could pick a topic and quickly understand what subject matter experts deem to be the most pressing issues with perspective on how to meaningfully advance youth suicide prevention efforts.

<u>The Trevor Project</u> is a non-profit organization focused on suicide prevention efforts for lesbian, gay, bisexual, transgender, queer, and questioning youth.

<u>The JED Foundation</u> is a nonprofit that protects emotional health and prevents suicide among teens and young adults. Their resource center offers tools for both individuals in crisis/emergency situations as well as those looking to support others.

CONTACT INFORMATION

For questions about this guide, or if you have a resource to share that is not included in this document, please contact:

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