



Healthy Education for Life (HELP)

Setting
Schools

Type of Program
Education & Training

NSSP Goals Addressed
1.0, 8.4

Program Description

Developed by Heartline Oklahoma, *HELP* is a suicide awareness program that targets youth 14-19 years of age. The purpose of *HELP* is to educate youth on the warning signs of depression and suicide, and empower them to get help for themselves or someone they know who may be suffering from depression or is feeling suicidal. The program uses two teaching techniques: a didactic presentation by trained educator and a 12-minute video, which shows the wrong way and correct way for intervention. The *HELP* checklist, administered at the end of classroom instruction, is a 9-question screening tool that reinforces the information students receive regarding suicide and depression and helps identify students who are currently at risk for suicide or who are feeling depressed. Students who may be at-risk are referred to the school counselors for follow up. This is combined with a three point action plan of Ask, Listen and Tell.

Program Objectives

After training, *HELP* participants will have increased:

1. Knowledge of facts related to youth suicide.
2. Understanding of the causes of suicide.
3. Ability to recognize the three Signals of Suicide.
4. Understanding of the three steps to help a suicidal youth.
5. Understanding of the limits of their responsibility to a suicidal youth.

Implementation Essentials

- Schools are required to complete a 12-item assessment of their readiness to implement the *HELP* program prior to program start.
- Schools must have a crisis management plan, such as the Maine Youth Suicide Prevention, Intervention, and Postvention guidelines (found in Section III of the BPR), implemented prior to the start of the *HELP* program.

Contact Information

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Costs

HELP is available for free in Oklahoma; contact Heartline Oklahoma for more information. *HELP* is currently not available outside of Oklahoma.

*The content of practices listed in Section III (Adherence to Standards) of the SPRC/AFSP Best Practices Registry address specific goals of the *National Strategy for Suicide Prevention* and have been reviewed by a panel of three suicide prevention experts and found to meet standards of accuracy, safety, and programmatic guidelines. Practices were not reviewed for evidence of effectiveness. Additional information about the Best Practices Registry can be found at www.sprc.org.

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