

Suicide Prevention Resource Center:  
Your New Partner  
Westminster, CO  
October, 2003



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### SPRC Vision

Widespread implementation of the National Strategy for Suicide Prevention through informed and empowered Prevention Networks\*.

\*Prevention Networks are coalitions of change-oriented organizations and individuals working together to promote suicide prevention. Prevention Networks might include statewide coalitions, community task forces, regional alliances, or professional groups.



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### SPRC Mission

The Suicide Prevention Resource Center supports suicide prevention with the best of science, skills and practice.



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## SPRC

- Supported by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- Based at Education Development Center, Inc., (EDC)
- With 10 national partner organizations



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## SPRC Partners

- American Association of Suicidology (AAS)
- American Foundation for Suicide Prevention (AFSP)
- Critical Illness and Trauma Foundation (CITF)
- National Alliance for the Mentally Ill (NAMI)
- National Mental Health Association (NMHA)
- National Organization of People of Color Against Suicide (NOPCAS)
- National Resource Center for Suicide Prevention and Aftercare (NRCSPA)
- Pacific Institute for Research and Evaluation (PIRE)
- Suicide Prevention Action Network (SPAN USA)



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## SPRC Core Values

To promote suicide prevention at every level of society, the Suicide Prevention Resource Center values:

- A public health approach to prevention
- Prevention through collaborative, non-competitive partnerships
- Evidence-based practices
- Sensitivity to cultural context
- Seamless prevention services
- The National Strategy for Suicide Prevention, the Institute of Medicine Report on Reducing Suicide: a National Imperative, and the President's New Freedom Commission on Mental Health



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## SPRC Strategic Goals

- Goal 1. Develop the suicide prevention workforce
- Goal 2. Strengthen prevention networks into a national web of communities of practice
- Goal 3. Disseminate resource materials
- Goal 4. Support mechanisms for implementing the public health approach (e.g., data-driven decision-making and evidence-based practice (EBP))
- Goal 5. Broaden participation in suicide prevention; integrate suicide prevention into existing organization's activities



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## NSSP—New Momentum for Suicide Prevention

- Congressional Resolutions – 1997, 1998
- Reno Conference - 1998
- Surgeon General's Call to Action – 1999
- Federal Steering Group for the National Strategy
- NSSP Goals and Objectives for Action - 2001



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## NSSP Objective 4.8

- By 2005, develop one or more training and technical resource centers to build capacity for States and communities to implement and evaluate suicide prevention programs



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## Since the NSSP...

- The Institute of Medicine Report on Reducing Suicide: a National Imperative, 2002
- The Report of the President's New Freedom Commission on Mental Health, 2003



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## EDC

- Nonprofit organization for health, education, and human services
- Founded in 1958 based on moving science into practice
- More than 500 employees worldwide



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## Health and Human Development Programs at EDC

- More than 130 professionals
- Seven national resource centers
- Multiple areas of focus
  - Violence, suicide, and injury prevention
  - Mental health
  - HIV/AIDS and other sexually transmitted diseases
  - Alcohol, tobacco, and other drug prevention
  - Reproductive health
  - Nutrition and physical activity



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## SPRC Serves All PHS Regions



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## Evidence Based Practices Directory

- Developing through partnership with AFSP
- Evaluating interventions with uniform criteria
- Identifying what is known about effectiveness
  - A spectrum from proven, to promising, to no effect known
- Will eventually reside on the SPRC website



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## Training

- Objectives met primarily through partnerships
- AAS - 10 modules on core suicide prevention training
    - Understanding prevention, what works, effective partnerships, etc.
  - SPAN USA - advocacy training
    - Social marketing, planning awareness events
  - Training / outreach to communities of practice



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## Consultation / Technical Assistance

- Encourages a public health model and a coalition approach to planning
- Specialists assigned geographically and by priority populations – *call or email*
- Primarily serving prevention networks and communities of practice
- Developing capacity to prevent suicide and inform on evidence based practices



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## Resource Materials

- Identify, develop and disseminate evidence-based materials
- Field requests for information
  - Identify research articles
  - Help access articles through libraries
- Library collection being developed and catalogued
- TA materials have been collected and created, w/ more in development
- Materials are housed on the website



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## Website: [www.sprc.org](http://www.sprc.org)

- Both a resource and a means of delivering services
- Launched early October
  - Added to incrementally
- General information, policy and news developments, calendar of events, links
- Will eventually host web-based training and the EBP directory



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## Regional Conferences

- For stakeholders from participating states and territories
- Shared learning, technical assistance, and targeted planning
  - First right here serving Public Health Regions VII & VIII
  - Regions IV & VI in December
- More conferences if funding allows



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## Partner Activities

- AAS - Curriculum development
  - Core Competencies in SP Series
- AFSP - Evidence-based practices registry
- SPAN USA –
  - Technical assistance
  - Curriculum development
    - Social Marketing
    - Organizing and organizational development
  - Grass-roots leadership development



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## Partner Activities

- CITE – Workgroup to complete standard glossary of suicide terms; materials advancing practice in rural communities
- KBHC – TBD
- NRCSPA – Postvention services guide; National survivor directory
- NAMI – Protocol for emergency departments to support better follow-up care and outcomes for persons who have attempted suicide
- NMHA – Brochure on awareness of suicidal behavior for consumers
- NOPCAS – Manual: *Cultural Competency: Strategies for Engaging Diverse Populations in Suicide Prevention*
- PIRE – Economic and data analysis by state across life course



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## SPRC Do's

- We DO provide research-based information for practical applications in suicide prevention
- We DO support professional and clinical organizations in providing suicide prevention education and training to their members
- We DO provide sound, non-partisan information for decision makers in public and private policy related to suicide prevention



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## SPRC Don'ts

- We DON'T conduct direct research (student's papers)
- We DON'T provide legal or clinical advice on treatments
- We DON'T engage in political debate or lobbying



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## Prevention Network Examples

- State, territory, tribe, community
  - Coalitions
  - Planning groups
- Regional
  - The Northeast Injury Prevention Network
  - Other regional networks
- Professional and service networks
  - Issue-based coalitions
  - Professional organizations



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## What happens when you contact SPRC?

- Asked for intake information
  - Name and contact information
  - What state, organization, coalition are you from?
  - What can we help you with?
- Routed to the appropriate specialist or provided with information
  - TA specialists assigned by region / issue
  - Information specialist
- Contacted within two working days



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## What happens next?

- Re-group with your coalition / planning group
- Take the learning back
  - Share with those who couldn't attend
- Focus on 'next steps' identified at conference
  - Develop and implement
- Stay in touch with SPRC / we'll stay in touch with you



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## Outcome

- States and communities will demonstrate measurable progress in advancing the NSSP through empowered prevention networks



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## Contact SPRC

- Phone: 877-GET-SPRC (438-7772)
- TTY: 617-964-5448
- Web: [www.sprc.org](http://www.sprc.org)
- Email: [info@sprc.org](mailto:info@sprc.org)
- Mail: SPRC  
55 Chapel Street  
Newton, MA 02158-1060



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