

Suicide Prevention With “Out-Of-School” Youth

in Staunton, Waynesboro and Augusta County, Virginia



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Proposal Goal:

To reduce risk for suicide among older (18-24) “out of school” youth within the Staunton, Augusta, Waynesboro area of Virginia.

Objective 1: Create a broad base of active support

The Task Force

Bring together key people:

- Law enforcement
- Business community
- Mental health/Substance Abuse Treatment
- Media
- Medical care
- Faith community
- Youth service agencies
- Youth
- Suicide survivors
- Community Networkers

Council's job:

- Facilitate training for people who come in regular contact with out-of-school youth.
 - Best connections in the SAW area?
 - Links and incentives to employers
 - Advertising and promoting trainings
 - Setting up trainings (locating sites, meals donated)
- Prepare for public education
 - Links to media
 - Adapt print materials for local use
 - Create new materials as needed
- Explore funding options for sustainable programming

Objective 2: Strengthen the Safety Net



- By promoting:
- early identification
- effective intervention
- successful treatment

3 Strategies:

- Awareness Programs
- Gatekeeper Training
- Clinician Training

Awareness Programs

- Myths and Facts
- Red Flags and Warning Signs
- Take all signs seriously
- Get help

Gatekeeper Training Programs

safeTALK: A 3-hour workshop that teaches basic identification and intervention skills.

ASIST: Applied Suicide Intervention Skills Training:

An intensive 2-day training for 'front-liners'. ASIST teaches identification, risk assessment and in-depth intervention skills.

Training clinicians

**Assessing and Managing Suicide Risk:
Competencies for Behavioral Health Professionals
AAS/SPRC**

- Clinicians are ultimate "go to" people
- Little training in graduate programs
- Assessment/management skills necessary for successful treatment
- "State-of-the-Art" curriculum, designed by team of experts

Objective 3:

Public Education

- ❖ Raise awareness: Risk and protective factors
- ❖ Stigma as a barrier; "What a difference.."
- ❖ Mental health as an important part of physical well-being.
- ❖ Promote local resources

Timeline

- Year 1: Create task force
 - Awareness programs
 - Gatekeeper training
 - Training for clinicians
- Year 2: Public education
 - Continue community trainings
- Year 3: Continue community trainings
 - Continue public education
 - Option for second clinician training

Evaluation:

Gatekeeper Training

- Training Exit Survey:
 - Demographics (role, age, gender)
 - Satisfaction?
 - How will information be used?
 - Confidence and willingness to help?
- 10 interviews per year (two months after training)

Evaluation:

Clinician Training:

- ✓ Demographic information
- ✓ Program satisfaction
- ✓ Reported increase in skills

Partners and Roles

- **JMU and OCY:**
Office space, program supervision, fiscal management
- **CSHD Office on Youth:**
Task force development, program set-up/marketing
- **Valley CSB:**
Support for coordinating clinician training
- **Mental Health Assn. Augusta:**
Task force development, program set-up/marketing,
links to media

Partners and Roles (cont.)

- **WHSV TV3:**
Match spending on air time for public education
- **Center for Injury and Violence Prevention of the VDH**
Training materials for awareness and gatekeeper trainings
- **The Ad Council and SAMHSA**
TV, radio and print materials necessary for
public education

In Summary...

We want to increase the chances that:

- ❖ People who work, play, worship and socialize with out-of-school youth will be better prepared to identify and intervene with a person at risk.
- ❖ People (including youth) will recognize and get treatment for depression and related disorders
- ❖ Treatment will be effective in reducing suicidality

QUESTIONS?

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