



Community Resources

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State Suicide Prevention Plans



As of 1 October, 2005, **28** U.S. States have implemented state suicide prevention plans and **20** more have plans in development. Eighty-three (83%) of these are "moving" and 17% are "stalled."

National Strategy for Suicide Prevention, 2001

"...much of the work of suicide prevention must occur at the community level, where human relationships breathe life into public policy."

- David Satcher, M.D., Ph.D.
Surgeon General

Core Competencies for Suicide Prevention: Stages of Development

1. Needs assessment process to identify competencies
 - Reviewed key documents to insure consistency with recommendations of the *NSSP* and those of the *SPRC*
 - Consulted with suicide prevention experts with experience implementing community programs
 - Reviewed existing educational materials
 - Conducted needs assessment survey of participants at 1st *SPRC* Regional conference in Colorado

Core Competencies for Suicide Prevention: Stages of Development

2. Choose initial planning team
 - Julie Chambliss, Ph.D. (Atlanta)
 - Program evaluation
 - Patti Horgas, R.N., M.Sc.N. (Johns Hopkins)
 - Public health education
 - Kim Obbink, Ed.D. (Montana State)
 - Instructional design
 - Maureen Underwood, ACSW (New Jersey)
 - School and community prevention
 - Michelle Moskos, Ph.D. (Utah Dept. of Health)
 - Public health research/epidemiologist

Core Competencies for Suicide Prevention: Stages of Development

3. Stages of Development
 - Initial Planning Meeting – Chicago, March 17, 2003
 - Define essential course content
 - Draft course outline/sequence of modules
 - Create detailed draft content outline
 - Define learning objectives
 - Define standardized format
 - Create reasonable timeline for production
 - Identify module writers

Core Competencies for Suicide Prevention

- Ten, 60-90' instructional modules, linked and synthesized
- Standardized format
- Each with stand alone learning objectives

Core Competencies for Suicide Prevention

- Standardized format of modules
 - Title
 - Duration
 - Target Audience
 - Terminal Objective
 - Enabling Learning Objectives
 - Trainee Preparation
 - Instructional Procedures
 - Proposed PowerPoint Slides
 - Handouts
 - Instructor Notes

Core Competencies for Suicide Prevention – *Draft Course Outline*

1. The Concept of Prevention
2. Prevention Network Development
3. Prevention Principles
4. Risk and Protective Factors
5. Defining the Scope of Your Problem
 - Defining and Taking Inventory of Your Capacity
6. Developing Collaborative Partnerships
7. What Works?
8. Prioritizing and Choosing/Identifying Resources
9. Logic Models for Planning, Implementation, and Evaluation in Public Health
10. Implementation

Core Competencies for Suicide Prevention: Stages of Development

4. Timeline: April – August, 2003

- Identify and contract with content-expert/writers (Julie Chambliss
 - Patti Horgas; Lanny Berman; Michelle Moskos; Kami Greenhagen; Teri Sanddal
- Hire Instructional Designer
 - Sandy Lundahl
- Create module drafts –July
- Circulate drafts to second readers for critical review
- Refine to 2nd drafts –
- Content-expert team meeting – August, Deer Valley, UT

Core Competencies for Suicide Prevention: Stages of Development

5. Final Phases

- Field testing
 - October and December, 2004 Regional SPRC Conferences
- Revisions and Final Formatting
 - December, 2004
- Pilot Testing – Schuylkill County, PA,
 - May, 2005

Intended Audience

- People who will provide leadership and promote collaboration in their communities
- People who are motivated to prevent suicides and want effective programs to be implemented

Overall Goal of the Course

Participants will enhance their leadership and collaboration skills and be able to:

- Collect suicide-related data and information
- Implement effective suicide prevention programs in their communities
- Determine the effectiveness of the programs they implement

Objectives of Curriculum

- Get planning group members on “same page” regarding basic information, understanding of prevention concepts and frameworks, definitions, etc.
- To enhance skills
- Provide technical assistance to communities and States regarding how to develop and implement an effective plan based on the science of prevention

Learning Approach

- Pre-reading and assignments
- Mixture of presentations, discussions, and activities that allow time to learn and practice leadership and collaboration skills
- Follow-up reading and continuing education

Core Competencies

- **Knowledge:** Increasing knowledge of key terms, concepts, and data
- **Perspective:** Shifting perspective to a public health approach to prevention
- **Skills:** Building leadership and collaboration skills

Increasing Knowledge

- Key terms
- Current suicide-related data and research
- Prevention principles
- Best practices and model programs
- Where to obtain additional resources

Shifting Perspectives

- Suicide can be prevented
- National Strategy for Suicide Prevention
- Public health approach to prevention
- Collaborative approach to prevention
- Vision for their community

Building Leadership and Collaboration Skills

- Planning and evaluation
- Communication
- Decision-making
- Facilitation
- Networking

Core Competencies for Suicide Prevention – *Final Course Outline*

1. Scope of the problem
2. Understanding prevention
3. Doing what works
4. Working together and building partnerships
5. Understanding and presenting data
6. Prioritizing and making decisions
7. Creating a logic model
8. Action planning
9. Maximizing effectiveness
10. Problem solving

Community Core Competencies Curriculum

Intended Audience

- Community Coalitions
- State Planning Group
- Coalitions focused on specific populations

Training Benefits

- Have the same basic information
- Provide training and technical assistance to communities
- Improve coalition's effectiveness
- Strengthen coalition
- Acquire skills necessary for suicide prevention planning and implementation
- Strategic planning

Modules Overview

Module 1: Scope of the Problem – Definitions and Data

GOAL: Participants will understand and be able to communicate about basic definitions, suicide-related data, and suicide-related risk and protective factors.

Module 2: Taking a Public Health Approach to Prevention

GOAL: Participants will understand the public health approach to prevention and basic prevention principles, which will guide them in developing comprehensive suicide prevention programs.

Module 3: Understanding and Using Data

Understand and use suicide-related data to document the need for suicide prevention in their community, and motivate funding sources to provide resources.

Module 4: Doing What Works

Understand the recommendations of *The National Strategy for Suicide Prevention*, as well as examples of evidence-based practices and how they may be replicated or adapted for their communities.

Module 5: Creating a Logic Model and a Framework for Evaluation

Understand the importance of creating a logic model as a component of an overall framework for evaluation.

Module 6: Action Planning

Create a vision and construct an action plan for implementing suicide prevention activities.

Module 7: Working Together and Building Partnerships

Consider what type of suicide prevention partnerships may be appropriate for their community.

Module 8: Building and Maintaining a Coalition

Learn the steps necessary to build and maintain a coalition.

Training Implementation

- Conducted by 2 SPRC staff and 1 local trainer
- Customized to the length suitable for your group
 - Recommend no less than 2.5 days
- Participants agree to contribute to curriculum evaluation

Coalitions

Coalitions

- Represent a diverse, multidisciplinary body of individuals who agree to “partner” to address an issue of concern
- Statewide or Network of multiple local entities
- Many have influenced change and progress on the macro and micro level

Coalitions

- The Importance of Coalitions

“Problems are complex and go beyond the capacity, resources, or jurisdiction for any single person, program, organization, or sector to change or control.”

Lasker R., Weiss E., Broadening Participation in Community Problem Solving: A Multidisciplinary Model to Support Collaborative Practice and Research. Journal of Urban Health: Bulletin of the New York Academy of Medicine, Vol 80, No 1. March 2003. p.5.

Meeting of the Minds/Efforts

- The Coalition is valuable to the Project
- The Project is valuable to the Coalition



Partnership with Coalitions

- II Types of Partnership
 - COLLABORATION
 - ADVISORY

Contact SPRC

- Phone: 877-GET-SPRC (438-7772)
- TTY: 617-964-5448
- Web: www.sprc.org
- Email: info@sprc.org
- Mail: Suicide Prevention Resource Center
55 Chapel Street
Newton, MA 02458-1060
