Take Home Messages

• You can do this!
• Planning and preparation are critical
• A well designed program that incorporates feasible (low cost) evaluation along the way.
• “Lack of evaluation research is the single biggest obstacle to improving current efforts to prevent suicide (MMWR, 1994; SPAN, 2001)
## Grant Activities by Objective: (insert your region here)

<p>| Goal 1: Implement sustainable, replicable, and evidence-based training programs in recognizing, referring and treating suicidal behavior |</p>
<table>
<thead>
<tr>
<th>Grant year 1 (8/12-7/13)</th>
<th>Grant year 2 (8/13-7/14)</th>
<th>Grant year 3 (8/14-7/15)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective 1:</strong> 1000 staff (200 yr 1, 400 yr 2, 400 yr 3) at the following locations will be trained and report increased knowledge and skills in early identification and referral of youth at risk for suicide. Target populations for this objective include:</td>
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<tr>
<td>1.1a. 6 school based health centers (2 per yr) in the cities of Holyoke (with a high population of Latina youth) and Springfield (with a high population of minority youth) and the 6 schools connected with those centers and their schools in Springfield and Holyoke will report increased knowledge and proficiency in early identification and referral of youth at risk</td>
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<tr>
<td>DPH with coordinator TBD</td>
<td>DPH with coordinator TBD</td>
<td>DPH with coordinator TBD</td>
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<tr>
<td>1.1b 9 youth serving organizations in Springfield and Holyoke (3 per yr) including Girls’ Inc, Boys and Girls Club, YWCA, and AWAKE, Inc. will report increased knowledge and proficiency in early identification and referral of youth at risk</td>
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<tr>
<td>DPH with coordinator TBD</td>
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</table>
Alaska SEARHC Suicide Prevention Plan

Southeast Alaska Regional Task Force - "1 is 2 Many" on Suicide Prevention

Mission: To save Lives
Vision: "1 is 2 Many"

"SE Regional Task Force Members"

The SE Alaska Regional Suicide Prevention Task force understands that Suicide disproportionately affects Alaskans and Alaska Natives and has dramatic reverberating affects in our rural communities. We are all painfully aware that even one suicide reverberates through the entire community and some would even argue with the closeness of our communities and even that it reverberates through the entire region of Southeast Alaska. Our communities are often left feeling like there is no recourse or places to turn to when a tragedy like this happens, they are left feeling the guilt, dealing with the pain of loss and at times hopelessness that survivors feel when left behind.

Creation and Development of a Regional Suicide Prevention Team (RSPT)

The following news release was sent out to media groups in SE Alaska: "A new Southeast Alaska Suicide Prevention Task Force met for the first time on Thursday and Friday, April 29-30, at the Sheet'ká Kwaan Naa Kahidi in Sitka. The task force will develop a regional suicide prevention plan that can be taken back to each of the communities for implementation. The task force is hosted by the SouthEast Alaska Regional Health Consortium (SEARHC) Behavioral Health Division as part of the Alaska Youth Suicide Prevention Project. In addition to representatives from the SEARHC Behavioral Health Division,
Fairbanks Suicide Prevention Strategic Plan

Fairbanks Region Suicide Prevention Task Force:
Coordinated by:
Fairbanks Behavioral Health Community Action Planning Committee and
Fairbanks Counseling & Adoption

Fairbanks Counseling & Adoption
912 Barnette Street
Fairbanks, AK 99709
907 456-4729
907 456-4623
6/27/2011

The only truly effective way to prevent youth suicide is for people from every walk of life, every faith, every ethnic background, every culture and every age to work together.
Macomb County Sub-grantee Logic Model

Program: Holding On To Life Logic Model

**Inputs**
- Crisis Center Staff
- MISD
- Grant Budget
- Coalition Volunteers
- Time

**Activities**
- Train Harbor Oaks staff in Means Restriction Education
- Develop and distribute Holding On To Life toolkit
- Develop Holding On To Life educational/supplemental group
- Conduct group sessions
- Make follow-up contacts

**Outputs**
- Harbor Oaks staff
- Family members of at-risk youth (ages 15-24)

**Participation**
- Hospital staff is more aware of the importance of means restriction
- Hospital staff educates families about means restriction
- Families of at-risk youth are more aware of means restriction
- Families of at-risk youth are more aware of community resources and helpful techniques
- Families of at-risk youth use community resources and helpful techniques
- At-risk youth receive assistance from home and community resources

**Short**
- Reduced incidence of suicidal behavior in youth ages 15-24

**Outcomes**
- Medium
- Long

**External Factors**

**Assumptions**
1. Restricting access to means will lower the incidence of suicidal behavior in at-risk youth.
2. Hospitals and other agencies are not routinely teaching means restriction.
# Macomb County Sub-grantee Evaluation Plan

## Holding On To Life

### Evaluation Plan

<table>
<thead>
<tr>
<th>Program Component</th>
<th>Measurement Tool / Method</th>
<th>Information Collected Before &amp; After</th>
<th>Positive Change Measured</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Toolkit</td>
<td>1. Materials utilized</td>
<td>What information was is being distributed to families</td>
<td>Behavior</td>
</tr>
<tr>
<td></td>
<td>2. Follow-up calls: 1, 3, and 6 months (?) and Survey Monkey?</td>
<td>After Only: Did you receive/read the information? Did you find it helpful? Did you remove means? What have you done differently? (etc.)</td>
<td>Behavior</td>
</tr>
<tr>
<td></td>
<td>3. Telephone survey of chosen police department</td>
<td>How many requests to store firearms?</td>
<td>Behavior</td>
</tr>
<tr>
<td>2. Training</td>
<td>1. Observation</td>
<td>Suicide risk assessment instruments utilized: How often is means restriction discussed? (etc.)</td>
<td>Behavior</td>
</tr>
<tr>
<td></td>
<td>2. Training Exit Survey</td>
<td>After Only: Programs reached and degree of satisfaction with training</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>3. Pre/post Test</td>
<td>Pertinent program knowledge</td>
<td>Knowledge, Attitudes</td>
</tr>
<tr>
<td></td>
<td>4. Materials utilized</td>
<td>Intake and SP Screening/Assessment Forms and procedures used</td>
<td>Behavior</td>
</tr>
<tr>
<td>3. Follow-up</td>
<td>1. Hospital records</td>
<td>How many people were offered follow-up service vs. how many people agreed?</td>
<td>Behavior</td>
</tr>
<tr>
<td></td>
<td>2. Telephone follow-up logs</td>
<td>How many follow-up calls were placed?</td>
<td>Behavior</td>
</tr>
<tr>
<td>4. Family Groups</td>
<td>1. Hospital records</td>
<td>How many people were offered family support group vs. how many people agreed?</td>
<td>Behavior</td>
</tr>
<tr>
<td></td>
<td>2. Pre/post Test</td>
<td>What pertinent knowledge is known?</td>
<td>Knowledge, Attitudes</td>
</tr>
<tr>
<td></td>
<td>3. Survey Monkey</td>
<td>After Only: Was the group helpful? What was learned? What have you done differently? (etc.)</td>
<td>Knowledge, Attitudes, Behaviors</td>
</tr>
<tr>
<td>5. Data Surveillance</td>
<td>ME Stats; death certificates, hospital data</td>
<td>Suicide statistics w/ age, gender, race, place, means, date of death, etc.</td>
<td>Human &amp; Community Health</td>
</tr>
<tr>
<td>6. Overall Project</td>
<td>YSPC Log of Lessons Learned</td>
<td>What barriers inhibited implementation; how such barriers were resolved; and what should be done differently in the future to effect improvements?</td>
<td>Knowledge, Attitudes, Behaviors</td>
</tr>
</tbody>
</table>

Revised 6-16-10
Middle Kuskokwim Healing & Wellness Journey

Kuethlak
Kuethlak's community care team has identified that suicide is a top priority and volunteers are the key individuals who must lead the suicide prevention efforts in the village. The school is also included as a central partner in meeting with children and youth to talk about grief, loss, relationships, sex education, suicide, and cultural programs that support traditional values, language, and Native arts, crafts, and subsistence practices. Activities include:

- Have Elders meet with youth and encourage school assemblies on the grief process
- Talk to our youth/children often in Yupik if possible to preserve their language
- Identify and work with agencies/service providers in our own community/better
- Present classes, council talks on tribal laws/tribal customs
- Yuk/Yupik/Swiss aid suicide education programs
- Have Elders/volunteers teach cultural classes at the schools
- Continue general assemblies with the school with Elders doing the bicultural presentations
- Identify who in the region can train community members on how to become suicide guards for their villages
- Hold monthly meetings at school with suicide prevention teams doing presentations
- Hold monthly meetings not directly addressing suicide prevention

Abiak
Abiak's plan is to break the silence of suicide. For too long suicide has been allowed to plague the region. New efforts are needed to talk openly about suicide, promote awareness, and increase opportunities for youth to seek help for themselves or their friends. If they realize they are in crisis, they must learn about the issue of suicide and how they can help prevent it. Activities planned include:

- Open communication on suicide prevention and awareness
- Promote awareness to reduce suicide stigma and suicide attempts
- Promote positive messages that help are available, where to go or who to contact. Also Alaska Careline 1-888-205-1000 also use radio, posters, UW.
- Organize emergency response/community care team
- Identify agencies to help with youth in community with support from regional and state levels.
- Subeakers trainings
- Support youth in activities
- Conference gathering with youth and elders
- Teen dances and motivational speakers to talk to youth
- Talking circles
- Youth sing operations/church rallies

Abia
Abia's had their first gathering to address suicide in the early summer of 2018. A suicide tragedy had occurred just 10 days earlier that had left the community raw and shaken. Despite this tragedy, the community decided to step forward to address suicide knowing very well if left unaddressed, suicides will no doubt continue unless something is done about it. Since that time, healing circles have begun and several key leaders, clergy, and school representatives are eager to work with youth to combat the problem. Activities planned include:

- Continue talking circles, traditional healing and grief support groups.
- School-based projects involving Elders
- Seek out grant for including Elders and local leaders to help support children, parents, and community.
- After-school activities at the Local Hot Boys and Girls Club
- Out-of-school community activities, sewing, dancing, socializing, and play games.
- Alliance with Office on Violence Against Women (OVW)

Tukulsak
Tukulsak's plan is to break the silence of suicide. For too long suicide has been allowed to plague the region. New efforts are needed to talk openly about suicide, promote awareness, and increase opportunities for youth to seek help for themselves or their friends. If they realize they are in crisis, they must learn about the issue of suicide and how they can help prevent it. Activities planned include:

- Community family involved in traditional graining process by providing emotional and spiritual support. Have church Elders, lay pastor and church members talk to youth and community members
- Cultural crafts and art such as Drum and making, etc.
- School-based projects involving Elders
- Seek out grant for including Elders and local leaders to help support children, parents, and community.
- Traditional healing and grief support groups
- After-school activities at the Local Hot Boys and Girls Club
- Out-of-school community activities, sewing, dancing, socializing, and play games.
- Alliance with Office on Violence Against Women (OVW)

For emergencies, please go to the Emergency Room.

YKHC patient care systems: 990-943-6500 or www.ykhc.org

Alaska State Troopers: 990-943-9953

Alaska Careline, suicide crisis hotline: 1-888-288-HELP (4357)

Abiak Project Coordinator: Lillian M. Alise - 907-825-1471 Cell 907-825-2230
Alaska: 907-825-4181

Kuethlak Coordinator: Liz Dillon / 757-2079
Elena Alise - 757-6627

Abia Coordinator: Alisia Jones - 785-2078
Darby Andrews - 785-9025

Tukulsak Coordinator: Moses K. Pater - 895-8420
Markita Napoka - 895-8391