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June 2017 Newsletter

FLORIDA SUICIDE PREVENTION COALITION

*A statewide, grassroots organization
of survivors, crisis centers, & interested citizens*

FSPC NEWSLETTER SIGN-UP

Don't miss the latest updates. FSPC encourages you to sign up with your email address to receive an email announcement directly to your inbox when each Newsletter is posted on the FSPC website. Email Steve Roggenbaum, Vice Chair, to register at roggenba@usf.edu

ARE YOU A FSPC MEMBER? JOIN TODAY!

Never joined, your membership lapsed, didn't know you could join!! FSPC encourages you to join a statewide, grassroots organization of survivors, crisis centers, and interested individuals. Collaborate with others to advocate for suicide prevention in larger numbers, get involved and vote in annual elections, obtain reduced or free registration at FSPC events such as *2018 Florida Taking Action for Suicide Prevention 3rd Annual Mini-Conference*. Membership information at <http://www.floridasuicideprevention.org/membership.htm>

NEWSWORTHY

Article from Suicide Prevention Resource Center (SPRC), by Judge Ginger Lerner-Wren (3/31/17).

Mental Health Courts: Raising the Bar for Suicide Prevention

In this SPRC Director's Corner, Judge Ginger Lerner-Wren reflects on her experience with mental health courts and the role of the Zero Suicide approach in the judicial system.

In 1994, an 85-year-old woman fell and ultimately died after being pushed by a man outside a supermarket in

Fort Lauderdale, Florida. The 25-year-old man arrested for the assault had been periodically involved with both the legal and mental health systems since suffering a motorcycle-related brain injury in 1986. He was declared incompetent to stand trial and awarded almost \$18 million to cover medical care and past abuse and ineffective treatment at two state-run mental hospitals.

This tragedy was the latest and most serious of a number of criminal cases in Broward County involving persons suffering from mental health problems. Related public outcry prompted a grand jury investigation of the disposition of offenders suffering from mental illness who came before the court, including several who died by suicide while in jail. The investigation found that there was a critical shortage of mental health treatment for people involved with the justice system.

In response to this finding, a county circuit court judge convened a Criminal Justice Mental Health Task Force that included representatives from the public defender's office, state attorney's office, sheriff's office, county government, social service organizations, and the National Alliance on Mental Illness. The work of this task force led to the creation of the Broward County Mental Health Court, the nation's first mental health court, which was established by an administrative order from the chief circuit judge in 1997. The mental health court received no funding, but drew on existing resources from the court and social service systems. Judges who were already serving in the 17th circuit volunteered to preside on the mental health court over and above their regular duties.



The Broward County Mental Health Court is a voluntary program that allows people with mental illnesses or developmental disabilities to be diverted to treatment rather than tried and, if found guilty, fined or sent to jail. People arrested for misdemeanors are screened by advanced clinical doctoral students from Nova Southeastern University, who are assigned to the Broward County public defender's office. Judges from other Broward County courts can also refer defendants to the mental health court. The court's goal is to break the cycle of crime, court involvement, and imprisonment—which is costly for the public, defendants, and the community. As of this writing, the mental health court has diverted more than 20,000 people from county jails and significantly decreased recidivism, compared to people arrested and jailed. It has also inspired many other court systems to establish similar diversionary programs.

Judge Ginger Lerner-Wren, the first judge to preside over the mental health court, understood the association between mental illness, involvement in the criminal justice system, and suicide. She began to integrate suicide prevention activities into the program, eventually adapting the Zero Suicide approach as a core component of the court. In 2016, Judge Lerner-Wren became a member of the Executive Committee of the National Action Alliance for Suicide Prevention.

For more information:

[Emerging Judicial Strategies for the Mentally Ill in the Criminal Caseload: Mental Health Courts in Fort Lauderdale, Seattle, San Bernardino, and Anchorage](#) – A comprehensive description of the Broward County Mental Health Court can be found in Chapter two of this U.S. Department of Justice monograph.

Article link: <http://www.sprc.org/news/florida-broward-county-mental-health-court>

IN FOCUS

Get to know a Regional Director or Officer a little better in each newsletter.



Tara Sullivan: FSPC Region 7 Director (Brevard, Orange, Osceola, Seminole).

Tara is a native Floridian (how many native Floridians do you know?! She was born in Gainesville and enjoys spending time with pets, friends, and family. In addition to being FSPC Region 7 Director, Tara also currently serves as the Central and Northern Florida Area Director, American Foundation for Suicide Prevention (AFSP).

Tara became involved with FSPC after meeting Betsey Westuba (current FSPC Chair) at a Tampa Suicide Prevention Task Force Meeting. FSPC, Yellow Ribbon, and AFSP collaborated together to bring a Night of Hope to the students and friends of Mitchell High School in Pasco County at the Growth and Recovery Center. Tara got involved with FSPC because she is passionate about providing resources and educational programming specifically geared towards suicide prevention and mental health. Tara hopes to collaborate with as many agencies as possible to bring mental health education and resources to those in crisis and to support to those that are healing from a loss.

CRISIS CENTER NEWS

NATIONAL SUICIDE PREVENTION LIFELINE HAS 11 FLORIDA CALL CENTERS

The National Suicide Prevention Lifeline is “a national network of over 160 local crisis centers, allowing the Lifeline to provide local resources with innovative best practices and quality care across the United States. Calls to 1-800-273-TALK are routed to the nearest crisis center. Counselors at these centers can then provide appropriate local resources if needed.” (<https://suicidepreventionlifeline.org/our-network/>)

There are 11 call centers in Florida (see list below) that participate in the National Lifeline network and provide valuable and readily available services to Floridians (and the nation). The 11 call centers responded to 10,290 Florida calls in the first three months of 2017. Additionally, all 11 centers were Accredited Crisis Centers by the American Association of Suicidology (AAS) as of last year, 2106.

The Lifeline website also presents information on a service that many Florida call centers offer. “Research indicates that follow-up with hotline callers and people recently discharged from an emergency department or inpatient setting has positive results for both consumers and providers of mental health services. Given that suicide risk is highest one week after discharge from an inpatient setting, the 24/7 availability of crisis centers’ services are invaluable. For medium to high-risk callers, studies show that centers help to minimize ideation, hopelessness,



suicidepreventionlifeline.org

and psychological pain. Further, crisis center follow-up before a service appointment is associated with improved motivation, a reduction in barriers to accessing services, improved adherence to medication, reduced symptoms of depression and higher attendance rates. Follow-up by crisis centers is also cost effective; it reduces utilization of emergency services and offers diversion to more appropriate services for patients who do not require admission to the hospital.”

“In a 2015 review of crisis center practices, of 134 centers sampled, 91% (122) provided some form of follow-up service. Programs ranged from follow-up services for frequent callers, monthly check-ins for high-risk callers, ED/inpatient discharges, high-risk callers, and third party calls.”

The Lifeline continues to assess and improve services. About 10 years ago, the Substance Abuse, Mental Health Services Administration (SAMHSA) funded an evaluation of some of the call centers participating in the National Lifeline network. The National Suicide Prevention Lifeline (Lifeline) responded to the identified need for more consistent, uniform suicide risk assessment practices for crisis call centers.

The Lifeline assembled its Standards, Training & Practices Subcommittee of nationally and internationally recognized experts in suicide prevention and tasked this group with developing policies, standards, guidelines and recommended practices for its network of crisis centers.

In 2006, this subcommittee crafted evidence-informed Suicide Risk Assessment Standards that focused on four core principles: Suicidal Desire, Suicidal Capability, Suicidal Intent, and Buffers along with the subcomponents for each. Lifeline adopted these standards as policy, and verified full network membership adherence with these standards in September 2007.

Florida’s National Lifeline Call Centers

2-1-1 Big Bend	Tallahassee, FL, 32302
211 Brevard	Rockledge, FL, 32956
2-1-1 Broward	Oakland Park, FL, 33334
2-1-1 Heart of Florida United Way	Orlando, FL, 32804
211 Palm Beach/ Treasure Coast	Lantana, FL, 33462
2-1-1 Tampa Bay Cares	Clearwater, FL, 33760
Alachua County Crisis Center	Gainesville, FL, 32641
Crisis Center of Tampa Bay Inc.	Tampa, FL, 33613
Personal Enrichment through Mental Health Services (PEMHS)	Pinellas Park, FL, 33782
Switchboard 211	Miami, FL, 33161
United Way 211	Jacksonville, FL, 32202

Truly, Florida and our citizens are fortunate to have easy access to such a wonderful national network with 11 in-state call centers that have well-trained staff in crisis response and who are

knowledgeable regarding local resources at the ready for callers in distress. If you're thinking about suicide, are worried about a friend or loved one, or would like emotional support, the Lifeline network is available 24/7 across the United States. Please call 1-800-273-8255.

RESEARCH FOR THE REST OF US



Sometimes important research is filled with jargon, is hard to understand, or doesn't seem to make sense. We've tried to summarize research in common English language.

Therapeutic Evaluative Conditioning (TEC) Mobile App Has Effect on Individuals Regularly Engaging in Non-suicidal and Suicidal Self-Injury

Suicidal ideation and actions, including self-injurious thoughts and behaviors (SITB) are significant problems in society. Franklin, Fox, Franklin, Kleinman, Ribeiro, Jaroszewski, Hooley, and Nock (2016) created a game-like app, Therapeutic Evaluative Conditioning (TEC), to decrease self-injurious thoughts and behaviors (SITB). TEC is designed to increase aversion to SITB-related items (e.g., blood, knives) while improve reactions to self-liking words (pairing positive words about the individual with pleasant stimuli). Researchers conducted three randomly-controlled studies to assess TEC's impact – one study involving 114 individuals with a recent history of non-suicidal self-injury (NSSI), one involving 131 participants with a recent history of NSSI, but with a more fear-inducing application model, and one involving 163 individuals with a recent history of NSSI, but with an application model designed specifically for suicide. The studies were completed by making the mobile app, Therapeutic Evaluative Conditioning (TEC) available to the intervention group participants any time for one month and allowed the same level of access to a neutral app for the control groups.

Table I: Results from Each Sub-study

	Study 1	Study 2	Study 3
Self-cutting Episodes	Significantly Fewer	Significantly Fewer	Significantly Fewer
Self-cutting Events	Significantly Fewer	No Significant Change	Significantly Fewer
NSSI Episodes	Significantly Fewer	No Significant Change	Significantly Fewer
NSSI Events	Significantly Fewer	No Significant Change	Significantly Fewer
Suicidal Ideation	No Significant Change	No Significant Change	No Significant Change
Suicidal Plans	No Significant Change	No Significant Change	Significantly Fewer

Researchers measured the TEC's effect through the Self-Injurious Thoughts and Behaviors Interview. The results varied across the three sub-studies, with Study 3 showing the most significant changes in self-cutting, NSSI, and suicidal plans (Table I). Although ideation was not significantly reduced in any of the studies, the researchers found NSSI to be reduced by 32-40%, suicide plans to show a reduction of up to 59%, and suicidal behavior to decrease by 33-77% (Table II). The researchers estimate future app versions could have a higher probability of reducing suicidal ideation, plans, and behaviors on a much larger scale.

Table II: Cumulative Results of Three Sub-studies

Self-cutting Decrease	Suicidal Plan Reduction	Suicidal Behavior Reduction
32-40%	21-59%	33-77%

Mobile apps discouraging suicidal behaviors could be an essential prevention tool in the near future. The potential to be readily and broadly available is appealing. The sample size of each sub-study was relatively small (i.e., 114, 131, & 163 participants) but combined results seem promising. Since all three of the randomized-controlled studies resulted in similar statistics regarding self-injury and NSSI, data regarding effectiveness of the app is promising. (Summary by Mathew Carmody & Stephen Roggenbaum)

Franklin, J.C., Fox, K.R., Franklin, C.R., Kleinman, E.M., Ribeiro, J.D., Jaroszewski, A.C., Hooley, J.M., & Nock, M.K. (2016). A brief mobile app reduces nonsuicidal and suicidal self-injury: Evidence from three randomized controlled trials. *Journal of Consulting and Clinical Psychology, 84*(6), 10.1037/ccp0000093

WHAT'S HAPPENING



August 16 – 18, 2017. *Florida Behavioral Health Conference* at the Hilton Orlando Bonnet Creek. For more information: <https://www.bhcon.org/>

September 8-11, 2017. *Tragedy Assistance Program for Survivors (TAPS) Tampa Survivor Seminar and Good Grief Camp* at TradeWinds Resort, St. Pete Beach. More information: <https://www.taps.org/seminars/2017/tampa>

February 21, 2018. *Suicide Prevention Day at the Capitol*. This advocacy event is in Tallahassee.

SAVE THE DATE: February 19 & 20, 2018. *FSPC 2018 Third Annual Florida Taking Action for Suicide Prevention Mini-Conference*. A two-half day mini-conference in Tallahassee.

RESOURCES



If you or someone you know is in crisis, please call **1-800-273- 8255** (*National Suicide Prevention Lifeline*)

Crisis Text Line – text “start” to **741-741**

Veteran’s Crisis Line **1-800-273- 8255, press 1** & <https://www.veteranscrisisline.net/>

Resources for Survivors of Suicide Loss. SAVE. Suicide Awareness Voices for Education maintains a resource list at: <http://suicidegrief.save.org/ResourceLibrary>

Suicide Loss Survivors. The American Association of Suicidology (AAS) hosts a webpage with listed resources for survivors of suicide loss at <http://www.suicidology.org/suicide-survivors/suicide-loss-survivors>

Suicide Grief Resources. Helpful information, tools, and links for people bereaved by suicide at <http://suicidegriefresources.org/>

STOP Suicide Northeast Indiana. (2016). *Help & Hope: For Survivors of Suicide Loss*. Retrieved from <http://www.stopsuicidenow.org/toolkits-now-available/>

Project ChildSafe® is committed to promoting firearms safety among firearms owners through the distribution of safety education messages and free firearm [Safety Kits](#) [cable-style gun-locking device and an informational [brochure](#) (also in [Spanish](#))]. Find Florida Law Enforcement partners to inquire about a free Safety Kit from Project ChildSafe.

<http://www.projectchildsafef.org/safety/safety-kit/Florida>

Harvard's Means Matter is part of the Harvard Injury Control Research Center (Harvard School of Public Health), dedicated to reducing injury through training, research, intervention, evaluation, and dissemination. The Center has published hundreds of studies on injury topics ranging from motor vehicle crashes to alcohol use to youth violence and suicide.

<https://www.hsph.harvard.edu/means-matter/means-matter/>

Florida's Statewide Office of Suicide Prevention (DCF):

<http://www.myflfamilies.com/service-programs/mental-health/suicide-prevention>

National Action Alliance for Suicide Prevention: The Public-Private Partnership Advancing the National Strategy for Suicide Prevention:

<http://actionallianceforsuicideprevention.org/resources>

Is there a local NAMI Chapter in my area? <http://www.nami.org/Local-NAMI?state=FL>

Controlled Substance Public Disposal Locations. Proper disposal of expired drugs or unused medications can be an effective suicide prevention tool by eliminating access to lethal means. Many community-based drug *take-back* programs offer the best option for disposal. For disposal locations

<https://www.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s3>

AN EXTRA HELPING . . .

Article from *Open to Hope: Finding Hope After Loss* website By Megan Aronson (5/21/17).

So Much More than 5 Stages of Grief

Please, right this very moment, if you are reading this trying to figure out where the catastrophe of your grief fits in a little box, STOP.

The truth is, there are no five stages. Or ten, or twenty, or ninety-five. There is no one way to grieve, only your way. There may be characteristic emotional experiences such as anger, denial, bargaining, depression and acceptance, but there is far more to the experience of grief than just those five pieces.

Could you categorize a wave in five stages? Maybe. Rise, break, crash, fall, recede. Sounds a lot like the experience of grief, doesn't it? But, no wave is the same as the next, and each one brings with it different force, sweeping undercurrents and ebb tide flows. Some pool around your feet, some throw you to the bottom of the ocean gasping for air, wondering which way is up or down. So it goes with grief.

I nicknamed myself "The Grim Reaper Girl" after the deaths of twenty-one people in my life in five years because I felt like such a leper in my grief. No one prepared me for the isolation of grief – how the world was inadequate to my pain. I remember searching out the five stages and

trying to figure out where I fit into them and how they could help me heal. I also remember reading just about every book on grief I could get my hands on. But, none of them told me how to “do grief.”

So, I kind of figured it out on my own. I found that grief is very personal, as personal and intimate

to each of us as the relationships we held with the loved ones we buried. Grief, to me, is the cutting and re-stringing of 3,000 different threads between that person and I in the aftermath of their death. Each string represents a memory, a hope, a joy, an experience, a piece of my life that they fit into perfectly. Unraveling those strings that are cut instantly the moment someone passes, that is the work of grief, and the only “healing” I truly find is stringing my way from the sorrow I feel back to the joy that preceded it; the joy that person gave me.

I have found with each person I lost there was one reason in particular why I loved them so much, one primary need they filled for me. My friend Mike was a *shower-upper* – first one to be there for wall painting, moving, babysitting, cooking a meal, fixing a bad pipe. He died from an “unknown cancer” one week before his 40th birthday, three months after his diagnosis. In his honor, I show up now for others, and in doing so, I feel his presence in my life.

My Grandma Annette was also a *shower-upper*, but in a different way. She was one of few people in my life who picked up the phone and called after every single devastation we experienced. For her, I pick up the phone, too, even when I’m uncomfortable, even when I don’t know what to say, whenever there is a death or a loss.

The five stages may be initial reactions that many people have to bad news, devastation or loss of any kind. But, grief itself is like a life form, like a wave. It ebbs and flows. It stays with you forever, even if all you feel is the last drops of the wave reaching your bare feet. It’s always there, and loud, crashing waves can seize you unexpectedly at any time in the rest of your remaining days on Earth.

They say time heals. I think time just teaches us how to dance with the waves. Because the truth of life is “the promise of sickness, aging and death,” as the Buddha put it. None of us are immune, in fact we are united in our grief. Life is the getting back up part. It is the brutality of heart break in so many different forms, and it is the powerful love that precedes it. We are always on one side or the other of that string. Our life’s work is allowing ourselves to feel the sorrow while somehow braiding the strings back together to joy. There is no right way, no one way, only *your* way to honor the death *and the life* of the person you miss. May your tribute be as unique as you are.

Article link: <http://www.opentohope.com/much-5-stages-grief/>

FSPC MEMBERSHIP

New FSPC Membership or Renewal information available online at:
<http://www.floridasuicideprevention.org/membership.htm>