March 2017 Newsletter

FLORIDA SUICIDE PREVENTION COALITION
A statewide, grassroots organization of survivors, crisis centers, & interested citizens

WHAT DID HE SAY?

“It is critically important to be thoughtful and informed about implementing suicide prevention activities or publicizing information about suicide. Effective programs supported by evaluation and research can prevent us from re-inventing the wheel and help us be more effective. Being careful in crafting our suicide prevention messages can help prevent increasing the suicide risk of others.” Stephen Roggenbaum, FSPC Vice Chair & Newsletter Editor

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

FSPC MINI-CONFERENCE

FSPC encourages you to make plans to attend FSPC’s 2017 Florida Taking Action for Suicide Prevention 2nd Annual Mini-Conference. The event will be held April 4th (pm) and 5th (am), 2017 at Florida's Department of Children and Families (DCF) in Tallahassee.

FSPC has reserved a limited block of rooms at a nearby Best Western (2016 Apalachee Parkway, Tallahassee, Florida 32301 for about $97 per night) near DFC, location of the mini-conference. Call soon to reserve a room 850-656-6312.
NEWSWORTHY  
Article from The Daily Utah Chronicle, by Connor Richards (2/22/17).

Veteran Suicides Can be Reduced Through a Simpler Technique, New Study Shows.

Research from the University of Utah psychology department discovered a simpler and more efficient way to prevent suicide attempts from veterans and Post-Traumatic Stress Disorder patients. In the study “Effect of crisis response planning vs. contracts for safety on suicide risk in U.S. Army Soldiers,” Dr. Craig J. Bryan, Jim Mintz, Dr. Tracy A. Clemans and others found that crisis response planning, a form of planned intervention, can significantly reduce suicide attempts among those suffering from PTSD.

Crisis response planning (CRP) is a method used to predict and prevent suicidal behavior by “identifying one’s personal warning signs, using coping strategies, activating social support and accessing professional services,” according to the study. The alternative method which is a contract for safety, requires veterans to sign a form in which they agree “that [they] will not harm [themselves] in any way, attempt suicide, or die by suicide.” The study found that of the two methods, CRP was “associated with significantly faster decline in suicide ideation” and found to be more effective than contracts for safety.

Out of a sample of 97 participants, five of those who received contracts for safety, attempted suicide compared to only three who received CRP. This, the authors say, suggests a “76 [percent] reduction in suicide attempts.”

Contracts for safety are less effective than CRP because they are not dynamic or interactive, according to Bryan, an associate professor in the U’s Department of Psychology, as well as the Executive Director of the National Center for Veterans Studies. “The biggest flaw is the absence of an actual intervention,” Bryan said. “In the contract for safety, the suicidal individual is asked to make a commitment to not engage in suicidal behavior, but they aren’t given any instruction about how to do this. As a result, they are essentially asked to not do something without being told how to do [it].”

Crisis response planning, on the other hand, is more individualized: “It isn’t a ‘one size fits all’ approach,” said Bryan. People who suffer from post-traumatic stress can benefit from CRP because it is a “simple and straightforward strategy that is customized to their needs,” Bryan said. “That seems to be why it’s so useful: it is personally tailored to each individual person.”

Crisis response planning is “not widely” used by clinicians and practitioners, Bryan said. Even when it is used, it is often done so incorrectly. To address this, Bryan suggests “working on conducting trainings to make sure clinicians really know how to do this intervention well.”

Research has consistently shown that those suffering from PTSD are an at-risk population for attempting or committing suicide. There are an estimated 5.2 million people in the U.S. who are diagnosed with PTSD. Of those, hundreds of thousands are veterans. A limitation of the study is that it looked at a small sample size that could be non-representative of larger populations.
“This study is only the first step,” Bryan said. “We’ll continue to research the crisis response plan to see if it works with different groups of people, and to see if we can make it work even better.”

c.richards@dailyutahchronicle.com

Article link: http://dailyutahchronicle.com/2017/02/22/veteran-suicides-can-reduced-simpler-technique-new-study-shows/

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

Betsey Westuba is FSPC Chair, Region 6 Director (Hillsborough, Manatee, Pasco), and Region 14 Director (Hardee, Highlands, Polk).

Betsey is the Owner/Executive Director of the Suncoast Yellow Ribbon Suicide Prevention Project. She also works at Suncoast Kids Place serving as Senior Facilitator for loss and grieving support groups and a HALOS (Healing After the Loss of a Loved One to Suicide) support group. Betsey also volunteers as Cabin Leader for Camp Erin, which is a weekend grieving camp for youth hosted by the Suncoast Kids Place.

Betsey truly believes that pets can change people’s lives by providing love and hope when an individual feels helpless and hopeless. She is continuously amazed at the intuition that her therapy dog, Archie (corgi mix), shows when someone is in need of comfort during her HALOS support group. Archie’s unconditional love has helped many, including herself.

Previously, Betsey earned her Registered Health Information Technician National Certification and did medical coding, billing, and office management for physicians’ offices and hospitals. She is a member of the Van Dyke Church, the Tampa Bay Suicide Prevention Task Force and is a Certified Peer Support Specialist. Betsey came to Florida after living in Maryland and Connecticut. She enjoys swimming, biking, walking, and jewelry making.

Betsey’s brother Don took his own life in April of 2007 at the age of 53 after a lifetime battle with depression. Betsey’s uncle also killed himself many years earlier. Through hospice therapy and her church she was able to get help through her grieving process and learn to live life again. There is a strong history of depression and verbal abuse in Betsey’s family and as a teenager, she struggled with suicidality.

Two years following her brother’s death Betsey felt a strong “calling” to help others with suicidal thoughts and those that had lost someone to suicide. She became an American Foundation for Suicide Prevention (AFSP) field advocate and attended AFSP’s annual Legislative Institute in Washington, DC. In DC, Betsey met Bonnie McClelland, Marlene Jehs, and Marie Dudek who had all been very involved with suicide prevention as loss survivors, each loosing a child to suicide. Through these women, Betsey was encouraged to get involved with FSPC and eventually became FSPC Chairperson.

Betsey hopes to help eliminate suicide through her FSPC involvement with statewide suicide prevention and awareness education, legislative policy change, and implementation of programs that encourage empowerment and acceptance of all individuals.
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.

Internet use potentially yields positive and negative outcomes suggesting clinical assessments of youth should routinely include a robust inquiry regarding Internet use.

From 2000 to 2012, global Internet usage increased by 566.4%. The purpose of this study was to assess the potential influence of Internet use on the risk of self-harm or suicide in young adults under 25 years old.

The researchers selected and reviewed 14 studies with one criteria of Internet use by youth people who experienced suicidal thoughts, engaged in self-harm, or were suicidal. The study data was from self-reports and interviews. Findings and outcomes were generally sorted into those providing a positive influence or those providing a negative influence. Individuals experiencing a positive influence reported a sense of relief from psychological distress (e.g., reduced suicidal ideation and lower actual/attempted self-harm) while those studies grouped into negative influences yielded study indicating any psychological distress, self-harm, or suicide ideation. Researchers defined Internet use as “use of Internet forums, or general Internet use including information websites, media articles, blogs, and static non-interactive media.”

Internet forums are popular among young adults because they give people a sense of connectedness through posted discussions. Users of Internet forums often seek support from others dealing with similar problems. The researchers found that good behaviors, such as not self-harming and seeking help, were often praised. It’s important to note that there was no evidence to support a direct relationship between forum use and a reduction in self-harm or forum use and an increase in self-harm.

A negative influence trend was the potential normalization of suicide ideation in certain forums. Feeling hopeless often leads to an increase in forum use. One study found a relationship between sharing ways to self-harm and a harsh outlook on their secret being revealed. Forums permitting discussion of how people feel was associated with thoughts about suicide. Two of the studies focused on cyber-bullying and reported that it has an influence on the act of harming oneself and attempted suicide. Several studies showed that apart from forums, other websites also provided a negative influence towards suicide and self-harm. The researchers found that adolescent who harm themselves tend to use the Internet more often than their peers.

The authors concluded that Internet use potentially yields positive and negative outcomes. Therefore, clinical assessments of youth should routinely include a robust inquiry regarding Internet use particularly given that exposure to self-harming is a significant risk factor in engaging in self-harming behavior. (Summary by Stephen Roggenbaum & Yaritza Carmona)

WHAT'S HAPPENING

Save the Date: Suicide Prevention Day at the Capitol. This advocacy event will be April 6, 2017 (Tallahassee).

Save the Date: FSPC 2017 Second Annual Florida Taking Action for Suicide Prevention Mini-Conference. The two-half day mini-conference occurs on April 4 & 5, 2017 (Tallahassee).


7th Annual National LOSS Team Conference a two-day conference on suicide postvention being held the same week as the 50th Annual AAS Conference - at the Hyatt Regency in Phoenix, April 24 – 25, 2017. https://lossconference.gbump.com/

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


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.projectchildsafe.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 . . .
The following is an excerpt from STOP Suicide Northeast Indiana’s Help & Hope: For Survivors of Suicide Loss resource (with permission from Colleen Carpenter, Suicide Prevention Trainer & Consultant).

**TALKING TO CHILDREN/YOUTH ABOUT SUICIDE**
You and your children are beginning a journey together. You may be wondering what to tell your children—be honest. If you lie, they may hear the truth from someone else, which may cause confusion, anger, distrust, or the belief it was their fault.

**Here are some guidelines for talking about suicide to children and youth:**
- Use direct and simple language that is appropriate to the child’s age. Use words such as died, death, and suicide. With younger children, explain that suicide is when a person ends their life.
- Answer questions as best you can. It is okay to say “I don’t know.” Some questions will not have answers. Children may continually ask questions to try to make sense of what happened, and this is normal.
- Do more listening than talking, and reassure them that it was not their fault or anyone else’s fault. Nothing they did, or didn’t do, caused the suicide death.
- Listen to and respect their feelings, whether you agree with their feelings or not; it’s important that they express their feelings openly without being judged. They need to know you are there to support them emotionally during this time.
- Explain that there is always a better way to solve problems and help them to seek help whenever they are struggling with this death or other issues. Have them identify at least 3 trusted adults they could turn to when they are struggling.

**How Children/Youth Grieve**
Children and teens may not know how to make sense of, understand, or express their feelings about death. Depending on their age, children and youth may show grief in different ways. They may be **irritable, withdrawn, angry, clingy, have physical complaints (headaches, stomach aches), cry easily, or overreact** to small or minor things. They may go back to child-like behaviors. These are normal reactions to traumatic loss. It’s important to:
- Keep them informed of changes that occur because of the death.
- Keep up their regular schedule, including meals, sleep, school, and exercise. This helps children/youth cope, control, and/or reduce confusing or frightening feelings.
- Help them return to routine activities with their peers.
- Plan family time together.
- Involve them in youth focused support services e.g. Erin’s House for Grieving Children

Retrieved from [http://www.stopsuicidenow.org/toolkits-now-available/]
FSPC MEMBERSHIP
New FSPC Membership or Renewal information available online at:
http://www.floridasuicideprevention.org/membership.htm