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June 2020 Newsletter

## FLORIDA SUICIDE PREVENTION COALITION

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

### JOIN OR RENEW FSPC MEMBERSHIP!

Join FSPC, a statewide, grassroots organization of survivors, crisis centers, & interested individuals. Collaborate to advance suicide prevention efforts in larger numbers; get involved, volunteer with local & state FSPC activities; & obtain reduced registration at FSPC events. Not sure when your renewal is due, please contact Rene Favreau, FSPC Treasurer ([rene.favreau@gmail.com](mailto:rene.favreau@gmail.com)) to find out when. Membership info: <http://floridasuicideprevention.org/membership/>



### AN EXTRA HELPING . . .

#### WHY JOIN A SUPPORT GROUP?

By Survivors of Suicide Loss Support Group - Madison, NJ  
Link: <https://www.sosmadison.com/meeting-info/why-join-a-support-group>

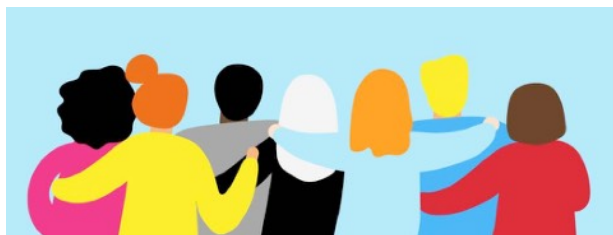
Many suicide loss survivors are confused about the grief they are feeling after losing someone to suicide. It is difficult to speak with family and friends about how intense the feelings are. It is common to think that there is no one who would possibly understand how you feel and that you would never discuss your feelings in public.

A suicide loss support group is where people who have all lost someone to suicide gather and discuss those exact feeling you have about suicide loss. It is a compassionate group who are seeking healing. There is no right and no wrong in a support group. Everyone is entitled to their own feelings. Many people's eyes open up and they realize that they are not alone. There is healing in conversation with others.

A recent medical study that examined what suicide survivors

found most helpful to their healing, rated "Talking one-to-one with another suicide survivor" (100%) and participating in a "Suicide grief support group" (94%) as the two most helpful activities for survivors. Participating in a suicide support group allows you the opportunity to experience both of these activities at once.

The World Health Organization stresses the importance of self-help support groups for those bereaved by suicide. "Suicide survivors report more frequent feelings of responsibility for the death, rejection and abandonment than those who have lost someone from natural causes. Feelings of stigmatization, shame and embarrassment set them apart from those who grieve a non-suicidal death. The survivor is more likely to spend a greater proportion of time pondering on the motives of the person who committed suicide, the question "why" being continually present. The universal assumption that parents are responsible for their children's actions can also place parents who have lost a child by suicide in a situation of moral and social dilemma. There are more taboos attached to the discussion of suicide than to



any other form of death. Those bereaved by suicide often find it very difficult to admit that the death of their loved one was by suicide, and people often feel talking about the suicide with them. Those bereaved by suicide therefore have less opportunity to talk about their grief than other bereaved people. A support group can assist greatly, as a lack of communication can delay the healing process.

The coming together of those bereaved by suicide can provide the opportunity to be with other people who can really understand, because they have been through the same experience; to gain strength and understanding from the individuals within the group, but also to provide the same to others. "

The group can offer:

- a sense of community and support;
- an empathetic environment and give a sense of belonging when the bereaved person feels disassociated from the rest of the world;
- the hope that "normality" can be reached eventually;
- experience in dealing with difficult anniversaries or special occasions;
- opportunities to learn new ways of approaching problems;
- a sounding board to discuss fears and concerns;
- a setting where free expression of grief is acceptable, confidentiality is observed, and compassion and non-judgemental attitudes prevail.

The group may also take on an educational role, providing information on the grief process, on facts relating to suicide, and on the roles of various health professionals. Another major function is that of empowerment - of providing a positive focus enabling the individuals to regain some control over their lives. One of the most devastating aspects of a suicidal or accidental death is that there is invariably much unfinished business and many unanswered questions, and yet the individual can see no way of resolving the situation. The support of a group can often gradually dissolve the feelings of hopelessness and provide the means whereby control can be regained."

The American Foundation for Suicide Prevention has the following ideas about attending suicide support groups:

- "If you have lost a loved one to suicide, you may find it helpful to connect with others who have also experienced a suicide loss. It can be a relief to talk openly about suicide with people who share a similar experience.
- Groups provide a "safe place" where those who have been touched by suicide loss can share their thoughts and feelings, and offer one another support.

*What to Expect:*

- It is natural to feel unsure about going to your first support group meeting. It may take a few meetings before you feel comfortable.
- Some people attend a support group almost immediately after their loss, while others wait for years. Do what you feel is best for you .
- Some survivors attend regularly for a year or two, then continue to go only occasionally.
- If you attend a group and feel it's not right for you, consider trying a different group. We all cope differently and draw strength from different various kinds of support."

## NEWSWORTHY

### RESPONDING TO GLOBAL SUICIDE-RELATED THREATS ARISING FROM THE COVID-19 PANDEMIC - Statement from the Executive Committee of the International Association for Suicide Prevention

On 11 March 2020, the WHO declared the COVID-19 virus a global pandemic. To help reduce the spread of the disease, governments have adopted a variety of community-wide measures, including social distancing and household lockdowns, quarantine of infected and exposed individuals, restrictions on international and domestic travel, closure of schools and ‘non-essential’ workplaces, and cancellation of all large-scale public events. At present there is a lack of robust evidence about the impact of the pandemic and of these governmental responses to the pandemic on suicidal behaviour. However, evidence relating to previous public health emergencies, while limited, gives reason for concern. Deaths by suicide increased in the USA during the 1918–19 influenza pandemic (Wasserman 1992), and studies on Severe Acute Respiratory Syndrome (SARS) found an increase of suicide among the elderly (Cheung et al, 2008; Yip et al, 2010, Chan et al, 2006), associated with social disengagement, mental stress, anxiety, and fears of being a burden on the family. Recent informed commentaries suggest that the COVID-19 pandemic may lead to an increase in suicidal behaviour due to the development or exacerbation of known risk factors for self-harm such as mental ill-health, social isolation, entrapment, grieving, loneliness, hopelessness, unresolved anger, stigma, unemployment, financial strain, domestic violence, and excessive alcohol consumption (Holmes et al, 2020; Gunnell et al, 2020).



The International Association for Suicide Prevention, in collaboration with national and international organisations, intends to play a leading role in responding to global suicide-related threats arising from the COVID-19 pandemic and other future public health emergencies. The IASP urgently needs your help to develop and implement a strategic plan to reduce COVID-19-related suicidal behaviour. We call upon you to work in collaboration with the IASP, sharing research and other evidence from your country about the impact of the pandemic on suicidal behaviour so that we can collectively integrate sources of key information and insights from your membership, from external stakeholders and, wherever possible, from governments.

IASP is building a central pool of resources (expertise, research, guidelines for good practice) which will be available to support your organisation in its important work to mitigate the potentially damaging impact of the pandemic on population mental health and suicidal behaviour. If you need assistance or wish to collaborate with us, please contact us directly at [admin@iasp.info](mailto:admin@iasp.info) Together we can deliver our suicide prevention work more effectively both during the pandemic and during its aftermath.

IASP Executive Committee

14 May 2020

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## YET ANOTHER NEWSWORTHY ITEM

### ***FLORIDA COLLEGE & UNIVERSITY SUICIDE PREVENTION GRANTS IN ACTION***

Florida is fortunate to have a number of superb institutions of higher learning. Some of the entities have secured suicide prevention funding through the Substance Abuse, Mental Health and Services Administration's (SAMHSA) Garrett Lee Smith three-year grants. FSPC is highlighting two grants (recently awarded in 2020) below:

INDIAN RIVER STATE COLLEGE, FORT PIERCE, Patricia Corey-Souza;

The goal of the propose PEACE (Promoting Education and Awareness about Campus Emotional Health) program is to create a cohesive educational and crisis intervention plan at Indian River State College (IRSC) regarding the risk factors for suicide and suicide prevention including alcohol/substance abuse, domestic violence, and sexual violence. Using standardized assessment tools and college-wide mental health training, high-risk students will be identified and referred for treatment. Services and programs will be provided for students, faculty, and staff such as gatekeeper training programs, educational seminars, suicide prevention awareness informational materials, and suicide postvention. The efficacy of these programs will be reflected by the development of a wide networking infrastructure that will link IRSC with resources and health care providers from the surrounding community. Ensuring the safety and wellbeing of students is the ultimate goal of the PEACE program. Enhanced student-based outcomes are expected to be consistent with program-related education, identification of at-risk students, and assessment that incorporates treatment referrals based on psychological and behavioral needs. PEACE personnel intend to market the program to 26,867 students and employees both annually and for the lifetime of the project. Throughout the project, they will educate and screen 3,000-3,500 individuals per year. This student population includes, but is not limited to, our underserved, LGBT, military, and 180 residential students living at the college dormitory. IRSC is a community/state college serving the multicultural region of Indian River, Martin, Okeechobee, and St. Lucie counties. Many of our students meet the criteria of first-generation, low-income, or disabled. These students encounter unique problems including: basic skill deficiencies, little or no time management, research, or study skills, lack of role models. and unfamiliarity with academic dialogue while simultaneously dealing with personal issues and struggles outside of college. Any of these problems can potentially cause overwhelming feelings of stress, anxiety, and/or depression. IRSC is also experiencing



an increase in enrollment of returning veterans who often require specialized services to manage multiple barriers related to conditions such as Post-Traumatic Stress Disorder and/or Traumatic Brain Injury. Education and training efforts will focus on topics such as identifying at-risk students, developing an awareness of potential behavioral warning signs in the classroom, taking the appropriate steps in safely assisting students, and learning how to make a referral. By strengthening the College's ability to identify and fill existing behavioral health service gaps, provide improved health assessment, to offer more diverse training, and link at-risk students with the appropriate intervention(s), student success opportunities and the overall health of IRSC will be substantially enhanced.



PENSACOLA STATE COLLEGE, PENSACOLA: Pensacola State Crisis Action Referral Effort for Students (CARES), serves all Pensacola State College (PSC) students in Escambia and Santa Rosa counties in NW Florida, including First-Generation-in-College (FGIC) and athletes, but targets military veterans, their family members, and the LGBTQ+ population. The College's diverse population of students, faculty, and staff will benefit from increased collaboration resulting in the development and delivery of education and awareness materials, and an

enhancement of the referral mechanism for at-risk individuals to receive quality treatment services. The overarching goal of the proposed project is to prevent suicide of students attending Pensacola State College and their family members. The objectives of this project are to: 1) update the Crisis Response Protocol; 2) provide clinical services through an on-campus provider, as well as developing clear referral protocols with at least three local mental health providers through Memorandums of Understanding; 3) engage at least 10 community agencies to strengthen the Escarosa Suicide Prevention Coalition and complete a community-wide strategic plan; 4) provide at least 200 (600 over three years) PSC students, faculty and staff each year with training on suicide prevention, mental health and/or substance use disorders; 5) increase in-person opportunities for student to participate in online mental health screenings, as well as promote remote access to such screenings; 6) disseminate awareness and educational information about mental health, substance use disorders, and suicide prevention at no less than 15 on-campus events, reaching at least 500 faculty, staff, and students per year (1,500 over three years); 7) provide on-campus trauma-informed clinical services to at least 50 students each year (150 over 3 years); 8) develop a Student Peer Support Network, training at least five students as peer support specialists; and 9) participate in the JED Campus consultation process, resulting in additional measurable objectives applied within a strategic plan to propel the project beyond the grant cycle, with fully sustainable goals within a comprehensive, collaborative, well-coordinated, evidence-based plan. This project will allow PSC to enhance and increase the capacity of an infrastructure that will promote education and awareness. It is estimated that a minimum of 2,250 students, faculty, and staff, in addition to family and community members will receive formal education/training annually on suicide prevention and mental health and substance abuse issues through print materials, seminars/workshops, guest speakers, and social media.

## **AVAILABLE RESOURCE**

### **REPORTING ON SUICIDE DURING THE COVID-19 PANDEMIC**

SAVE: Suicide Awareness Voice of Education; & IASP: International Association for Suicide Prevention

Link: <https://save.org/wp-content/uploads/2020/04/Reporting-on-Suicide-During-COVID19-Pandemic-Apr20.pdf>

It is well-documented that the way media report on suicide can impact risk of suicide and increased contagion. The World Health Organization and a variety of organizations have developed media recommendations to aid journalists on best practices for covering suicide and self-harm related behaviors. With the world facing the COVID - 19 health crisis and unremitting emergency health reporting, it is more important than ever for the media to be able to quickly understand and consider these best practices as it relates to suicide. Media reporting that is accurate, factual, fair, evidence-based and non-sensational is critical, in particular around the issue of suicide. At all times media are encouraged to report on the topic of suicide and below are tips that support and supplement existing media recommendations (best

practice links can be found below) with the goal here to provide guidance on how to report about suicide specifically during a pandemic.

Please check link for material. Sample portion below.

**Reporting on suicide data:** *Use caution when reporting on data released in the midst of a current health crisis. To ensure appropriate context when reporting on suicide data, separate current statistics from historical numbers. We also do not have enough data on the prior pandemics to compare to annual suicide data, nor do we have enough data to*

*compare natural disasters and suicide to annual suicide rates, however there is some data on disasters such as 9/11. Thus helping your audience understand the data in perspective is important.*

- *Tip: In all reports on suicide data clearly state that there is minimal data on suicide being correlated with pandemics.*
- *Tip: In all reports on suicide data clearly state that annualized data should not be measured against suicides during a pandemic. Further, use caution when reporting on annualized data during a pandemic.*
- *Tip: Be careful when reporting on data for special populations during a pandemic.*



## WHAT'S HAPPENING



August 19-21, 2020. *Florida Behavioral Health Conference 2020 conference* at Hilton Orlando Bonnet Creek.

April 22-24, 2021 (*next year*). American Association of Suicidology's (AAS) 54th Annual Conference. Hilton Orlando Lake Buena Vista, Orlando, Florida. Information later at: <https://suicidology.org>

## 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://suicidgrief.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://suicidgriefresources.org/>

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

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

<http://www.myflfamilies.com/service-programs/samh/prevention/suicide-prevention/index.shtml>

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

*National Strategy for Suicide Prevention:* <http://actionallianceforsuicideprevention.org/resources>

*Coping After Suicide Loss: Tips for Grieving Adults, Children, and Schools.* The American Psychological Association tip sheet. <http://www.apa.org/helpcenter/suicide-coping-tips.pdf>

*The Steve Fund.* Dedicated to the mental health and emotional well-being of students of color. <https://www.stevfund.org/>

### **SUPPORT FSPC WHEN YOU SHOP**

Amazon donates to FSPC, when you make an online Amazon purchase. Support FSPC by going to [smile.amazon.com](https://smile.amazon.com) (you must start here and begin shopping from here to have your selected charity receive an Amazon donation) and register the *Florida Suicide Prevention Coalition* (FSPC) as your chosen charity. Then start shopping on Amazon ([smile.amazon.com](https://smile.amazon.com)) & support suicide prevention.



### **FSPC NEWSLETTER SUBMISSIONS**

Submit news, events, poems, reviews, & writings for FSPC Newsletter inclusion consideration. Be sure to follow safe messaging guidelines. Email Steve Roggenbaum, Vice Chair, at [roggenba@usf.edu](mailto:roggenba@usf.edu)

### **FSPC MEMBERSHIP**

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