

# Suicide Prevention, Intervention & Postvention

## *From Policy to Practice*

**Mara Madrigal-Weiss**, Director and **Heather Nemour**, Program Specialist

Student Support Services: Student Wellness & Positive School Climate

September 14, 2019

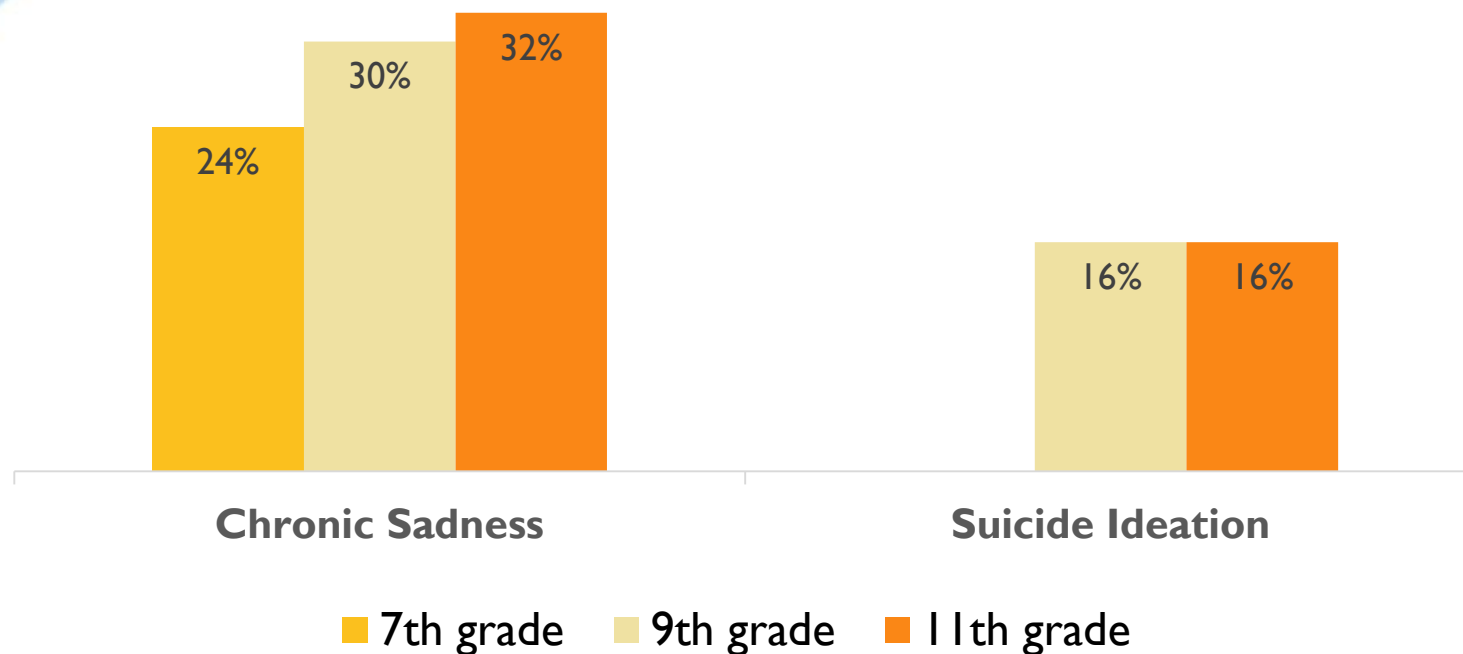
# Learning Objectives

1. Identify key components of a comprehensive suicide prevention policy
2. Know where to access resources, trainings and tools to move from policy to practice in schools
3. Learn about statewide initiatives and policies to support suicide prevention

# Youth Suicide in the U.S.

- Suicide is the 2<sup>nd</sup> leading cause of death for ages 10-24
- 50% of students ages 14 and older with a mental illness drop out of high school
- Almost 4,000 people ages 14 to 24 die by suicide in the U.S. annually
- Over 90 percent of children/youth who die by suicide have a mental health disorder

# California CHKS Student Data



Source: 2015-17 *California Healthy Kids Survey*

- Chronic Sadness: During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more that you stopped doing some usual activities?
- Suicide Ideation: During the past 12 months, did you ever seriously consider attempting suicide?

# Why AB2246 Was Enacted:

As children and teens spend a significant amount of their young lives in school, **the personnel who interact with them on a daily basis are in a prime position to recognize the warning signs of suicide and make the appropriate referrals for help**

# AB2246 Requirements

Education Code section 215 (a)  
(1)

The governing board or body of a local educational agency that serves pupils in grades 7 to 12, inclusive, shall, before the beginning of the 2017-18 school year, adopt, at a regularly scheduled meeting, a policy on pupil suicide prevention in grades 7 to 12, inclusive. The policy shall be developed in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts and shall, at a minimum, address procedures relating to suicide prevention, intervention, and postvention.

# AB2246 Requirements

## Education Code section 215 (a) (3)

The policy shall also address any training to be provided to teachers of pupils in grades 7 to 12, inclusive, on suicide awareness and prevention

AB 2246 require policies to specifically address the needs of certain high-risk groups that are disproportionately affected by suicide

Education Code section 215  
(a) (2)

The policy shall specifically address the needs of high-risk groups, including, but not limited to, all of the following:

Youth bereaved by suicide.

Youth with disabilities, mental illness, or substance use disorders.

Youth experiencing homelessness or in out-of-home settings, such as foster care.

Lesbian, gay, bisexual, transgender, or questioning youth.



# AB2246 Requirements

- At least two staff members shall be designated as the primary and secondary point of contact regarding potential suicidal intentions
- A referral process should be prominently disseminated to all staff members, so they know how to respond to a crisis and be knowledgeable of the school and community- based resources
- Additional professional development in risk assessment and crisis intervention will be provided to school employed mental health professionals and school nurses

Education Code section 215  
(a)  
(4) The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee's credential or license. Nothing in this section shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.



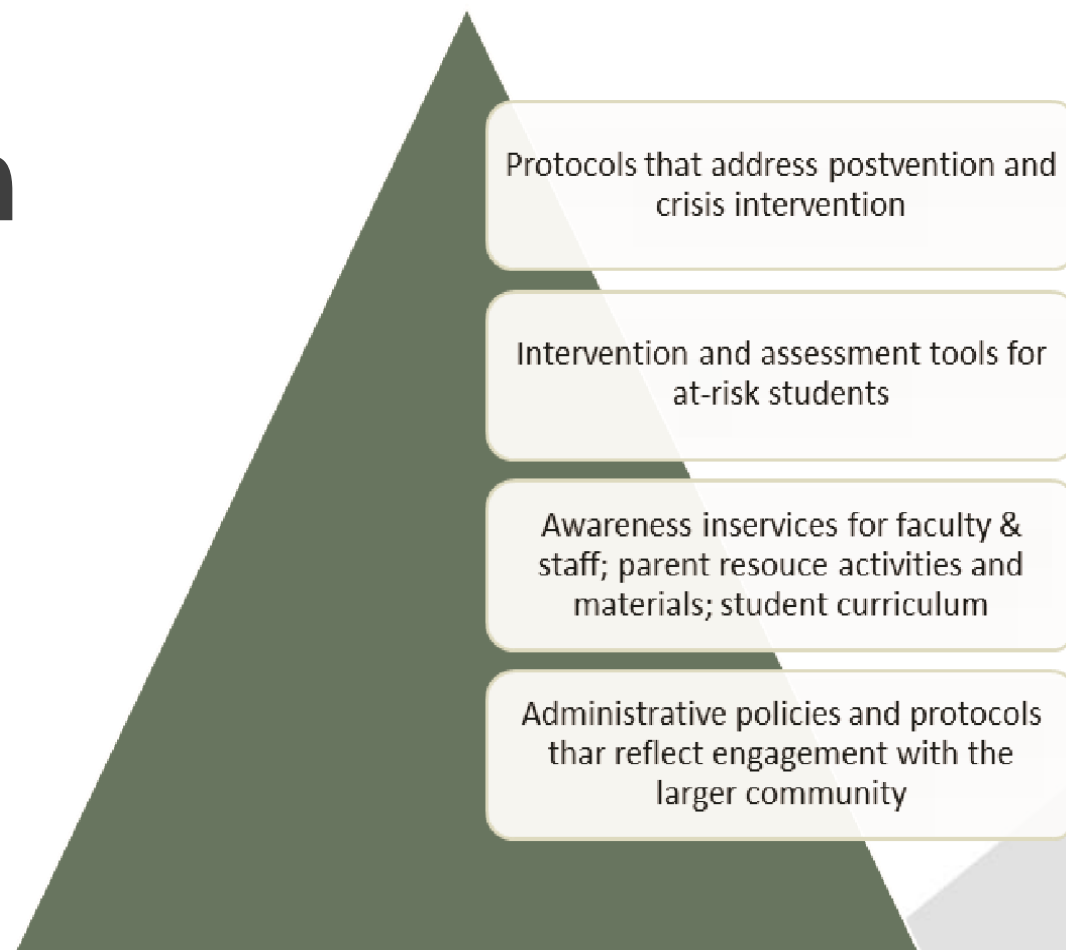
# Key Components of a Comprehensive Suicide Prevention Policy

# Building a Strong Foundation



# Suicide Prevention in Schools

Grounding in school culture that supports enhancement of protective factors



# Prevention: Key Tasks for Schools

- Adopt comprehensive policies and procedures on suicide prevention, intervention, and postvention to support personnel and to provide them with a clear roadmap, accessible year-round, for how to prevent, intervene in, and respond to student suicidal behavior.
- School staff members, should be trained on suicide risk factors, warning signs and how to address and respond to suicidal behavior
- Suicide prevention should be integrated into the values, culture, leadership, and work of schools
- Students, parents and guardians should be included in all aspects of suicide prevention

# Suicide Prevention in San Diego County

- AB2246 Preparing for Policy Change: Suicide Prevention, Intervention & Postvention workshops
- Youth Mental Health First Aid certification trainings
- Positive school climate trainings
- NAMI On Campus trainings, Walk in our Shoes, Say Something
- Ninth District PTA, Migrant Education

# SDCOE Suicide Prevention

## Administrative Regulation

## Board Policy

SAN DIEGO COUNTY OFFICE OF EDUCATION ADMINISTRATIVE  
REGULATION NO. 5141.3

CLASSIFICATION: Students ADOPTED: 3/1/18

SUBJECT: Suicide Prevention PAGE: 1 of 7

The County Superintendent of Schools establishes this administrative regulation to provide measures and strategies for suicide prevention, intervention, and postvention for students who are at high risk of suicide, including, but not limited to, students who are bereaved by suicide, students with disabilities, mental illness, or substance use disorders, students who are experiencing homelessness or who are in out-of-home settings such as foster care, and students who are lesbian, gay, bisexual, transgender, or questioning youth pursuant to Education Code 215, as added by AB 2246 (Ch. 642, Statutes of 2016).

The measures and strategies established in this administrative regulation shall apply to students, teachers, and other employees at any school or in any school program under the jurisdiction of the County Superintendent of Schools.

The responsibility for implementation and maintenance of this administrative regulation shall be assigned to the assistant superintendent, Student Services and Programs, or his/her designee(s).

#### Staff Development

Suicide prevention training shall be provided to teachers, counselors, and other employees at any school or in any school program under the jurisdiction of the County Superintendent of Schools who interact with students at the secondary level. Additional professional development in suicide risk assessment and crisis intervention (suicide intervention) shall be provided to school-employed mental health professionals (e.g., school counselors, psychologists, or social workers) at any school or in any school program under the jurisdiction of the County Superintendent of Schools. Staff training can be adjusted year-to-year based on previous professional development activities and emerging best practices.

Materials for training shall include how to identify appropriate mental health services at the school site and within the community, and when and how to refer youth and their families to those services. Materials shall also include programs that can be completed through self-review of suitable suicide prevention materials.

Staff development shall include research and information related to the following topics:

SAN DIEGO COUNTY OFFICE OF EDUCATION POLICY NO. 5141.3

CLASSIFICATION: Students ADOPTED: 05/09/18

SUBJECT: Suicide Prevention PAGE: 1 of 2

The County Board of Education and the County Superintendent of Schools recognizes that suicide is a leading cause of death among youth and that school personnel who regularly interact with students are often in a position to recognize the warning signs of suicide and to offer appropriate referral and/or assistance. In an attempt to reduce suicidal behavior and its impact on students and families, the County Superintendent of Schools or his/her designee(s) shall develop measures and strategies for suicide prevention, intervention, and postvention pursuant to Education Code 215, as added by AB 2246 (Ch. 642, Statutes of 2016).

In developing measures and strategies for use by the schools or school activities under the jurisdiction of the County Superintendent of Schools, the County Superintendent of Schools or his/her designee(s) may consult with school health professionals, school counselors, school psychologists, school social workers, administrators, other staff, parents/guardians, students, local health agencies, mental health professionals, and community organizations.

Such measures and strategies shall include, but are not limited to:

1. Staff development on suicide awareness and prevention for teachers, school counselors, and other County Superintendent of Schools employees who interact with students in the secondary grades
2. Instruction to students in problem-solving and coping skills to promote students' mental, emotional, and social health and well-being, as well as instruction in recognizing and appropriately responding to warning signs of suicidal intent in others
3. Methods for promoting a positive school climate that enhances students' feelings of connectedness with the school and that is characterized by caring staff and harmonious interrelationships among students
4. The provision of information to parents/guardians regarding risk factors and warning signs of suicide, the severity of the youth suicide problem, the County Superintendent of Schools' suicide prevention curriculum, basic steps for helping suicidal youth, and/or school and community resources that can help youth in crisis
5. Encouragement for students to notify appropriate school personnel or other adults when they are experiencing thoughts of suicide or when they suspect or have

file:///C:/Users/heather.nemour/Documents/SDCOE/JCCS/  
5141.3AdminReg.pdf

<https://www.sdcoe.net/Board/Documents/bp/5141.3.pdf>





## **San Diego County Suicide Prevention Council** **Suicide Prevention: Resource Guide for Schools**



Resources	Local	National
School Support	<b>HERE Now School Based PEI and Anti-BIAS Program Countywide</b> San Diego Youth Services, Spring Valley and East Communities Campus Tel. 619 258-6877 ext. 3274 Cell. 619-405-8340 Fax. 619 258-0678 <a href="mailto:jpark@sdyouthservices.org">jpark@sdyouthservices.org</a> <a href="http://www.sdyouthservices.org">www.sdyouthservices.org</a> Introduction to Services: The HERE Now Project focuses on preventing suicide by educating youth and their families on the risk factors of suicide and reducing the stigma around seeking help for themselves or others. In addition, the HERE Now program is working to support the school culture and environment to be preventive and proactive in educating all members of the school community (teachers, students, parents) regarding suicide prevention, as well as identifying and working with individual and groups of students who may be struggling emotionally and/or engaging in self-destructive or otherwise risky behaviors.	<b>The K-12 Toolkit for Mental Health Promotion and Suicide Prevention</b> The K-12 Toolkit for Mental Health Promotion and Suicide Prevention has been created to help schools comply with and implement AB 2246; the Pupil Suicide Prevention Policies. The Toolkit includes resources for schools as they promote youth mental wellness, intervene in a mental health crisis, and support members of a school community after the loss of someone to suicide. Additional information about this Toolkit for schools can be accessed on the Heard Alliance website at <a href="http://www.heardalliance.org/">http://www.heardalliance.org/</a>
	<b>San Diego County Office of Education</b> The San Diego County Office of Education (SDCOE) is committed to supporting schools, students and families with resources to address suicide prevention for our students. They provide consultation, trainings and technical assistance to the 42 School Districts to implement AB2246. <a href="http://www.sdcoc.net/student-services/student-support/Pages/Suicide-Prevention.aspx">http://www.sdcoc.net/student-services/student-support/Pages/Suicide-Prevention.aspx</a>	<b>Preventing Suicide: A Toolkit for High Schools 2012 by SAMHSA</b> This toolkit assists high schools and school districts in designing and implementing strategies to prevent suicide and promote behavioral health. The toolkit includes tools to implement a multifaceted suicide prevention program that responds to the needs and cultures of students. <a href="https://www.samhsa.gov/capt/tools-learning-resources/preventing-suicide-toolkit">https://www.samhsa.gov/capt/tools-learning-resources/preventing-suicide-toolkit</a>
		<b>After a Suicide: A Toolkit for School</b> After a Suicide: A Toolkit for School is a comprehensive guide that will assist schools on what to do if a suicide death takes place in the school community. See the Suicide Prevention Resource Center web page at <a href="http://www.sprc.org/comprehensive-approach/postvention">http://www.sprc.org/comprehensive-approach/postvention</a>



***“students school climate perceptions are associated with suicide ideation... feelings of belonging to the school and adult support are associated with lower rates of suicide ideation”***

(Benbenishty, Astor, and Roziner 2018)

## Tiered Professional Development for Student Wellness & Positive School Climate



ALL

### Universal, Tier I

- Youth Mental Health First Aid
- Best Practices for Creating Inclusive Environments
- Building Asset Based Relationships with Youth
- GLSEN 1.0
- Introduction to Restorative Practices
- Trauma Informed Practices in Schools

***“Research has shown that feelings of connectedness are specifically related to reductions in suicidal thoughts and attempts and are a protective factor for youth”***

CDC. Adolescent and School Health 2018

# Peer Lead Suicide Prevention

- NAMI on Campus and Ending the Silence Presentations
- The Directing Change Program and Film Contest •
- More Than Sad (American Foundation for Suicide Prevention)
- LEADS for Youth: Linking Education and Awareness of Depression and Suicide
- Kognito (Peer-to-Peer)
- Living Works

## Directing Change Program & Film Contest

Youth and young adults submit 60 second films in suicide prevention, mental health matters, and explore these topics through the lens of diverse cultures.



**Submission Deadline: March 1, 20**

**Open to students ages 14-25**


**Red Carpet Award Ceremony**  
**Cash prizes for winning teams and schools**



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# Parent Information



Nevada Division of Public Health (DPH)  
**Office of Suicide Prevention**

NVHP Agency Mail  
 Custom Search  
 Search The Site Search All Sites  
 NCHA Assessment **PRINT**

## WHAT CAN PARENTS DO TO PREVENT YOUTH SUICIDE?

If you or someone you know is in crisis, please call:

**1-800-273-TALK (8255)**  
[suicidprevention@lifeline.org](http://suicidprevention@lifeline.org)  
 Click here to visit the National Suicide Prevention Lifeline website.

**Notice:** The Office of Suicide Prevention website is informational and not intended as a crisis response or hotline. Local crisis hotline numbers can be found in the front of your local phone book or call 911.

### What Can Parents Do to Prevent Youth Suicide?

There are several things that parents can do to prevent youth suicides. Some of these are general in nature while others are more specific.

#### Form a Good Relationship with your Youth

During early childhood development, children generally bond with their parents and they have a good and trusting relationship. They grow up trusting their outside world and see it as a safe place where they can continue to grow and develop. This growth usually is peak during adolescence. This youth needs to come to terms with the emotional growth, growth between parent and new values and beliefs, emotions and physicality may with the opposite sex and the uncertainty about his/her future career. These developmental tasks often generate a great deal of pressure but most young people cope with them successfully without too much difficulty.

Despite popular belief in the culture, most teenagers do want a close relationship with their parents even though they may not admit it openly. The relationship with their parents may have changed in form and content but it is in fact a continuum of their past relationship. Parents have to grow and change in parallel with their teenagers. It is a two-way process. If the relationship is strong, teenagers generally seek knowledge and respect their parents' values and they want their advice and support, especially at times of stress.

A good relationship will open up communication between the youth and their parents. This can be a life saving safety valve to the distressed and troubled teenager. Support and early intervention can be effected before the youth contemplates suicide as an option.

Relationship between teenagers and their parents can be improved by:

- Providing a stable, safe physical and emotional home environment.
- It has never been obvious but unfortunately this is not always the case as exemplified by the problem of "problem" youths. With many families breaking up and divorce over the custody and access of children, the teenager may become the "pivot" of the parental split.
- Spending quality time with young people.
- "Quality time" is a cliché frequently used in child-rearing literature and it is true to a certain degree of course. However, a good relationship between a youth and his/her parents is one, in which they spend time together. It is common for teen parents and teenagers to talk about their constant arguments about everything. The amount of time spent in conflict is huge. Why not spend some of this time having fun together?
- LISTENING to teenagers, not only to what is being said, but also to the covert messages. Teenagers commonly complain that their parents are eager to give advice but they don't listen to their points of view. Messages sent by teenagers may at times be tangential, contradictory and confusing. Parents will need to "de-code" these sometimes messages to get in touch with their children's feelings. In many instances this may mean an interpretation of the "body language. Non-verbal action or "talk" much louder than conversational language.

## PARENT CONTACT ACKNOWLEDGEMENT FORM

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

This is to verify that I have spoken with a member of the school's mental health staff

(name) on \_\_\_\_\_ (date) concerning my child's suicidal risk. I have been advised to seek the services of a mental health agency or therapist immediately.

I understand that \_\_\_\_\_ (name of staff member) will follow up with me, my child, and the mental health care provider to whom my child has been referred for services within two weeks.

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent Contact Information:

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School Staff Member Signature:

Date: \_\_\_\_\_

<http://suicidprevention.nv.gov/Youth/WhatYouCanDo/>  
 (Multiple languages)



# Intervention: Key Tasks for Schools

- Key school and community based mental health service providers are identified and trained in suicide risk assessment, safety planning and monitoring
- Policies and procedures include measures to ensure that key staff have explicit protocols and guidance to support and intervene with at risk students

# Suicide Intervention in San Diego County

Provided deeper trainings for district/school teams:

- Assessing Suicidal Students
- Question, Persuade & Refer (QPR)
- Applied Suicide Intervention Skills Training (ASIST)
- Developed comprehensive suicide prevention & intervention protocols and procedures for districts

## Tiered Professional Development for Student Wellness & Positive School Climate



### Individualized, Tier III

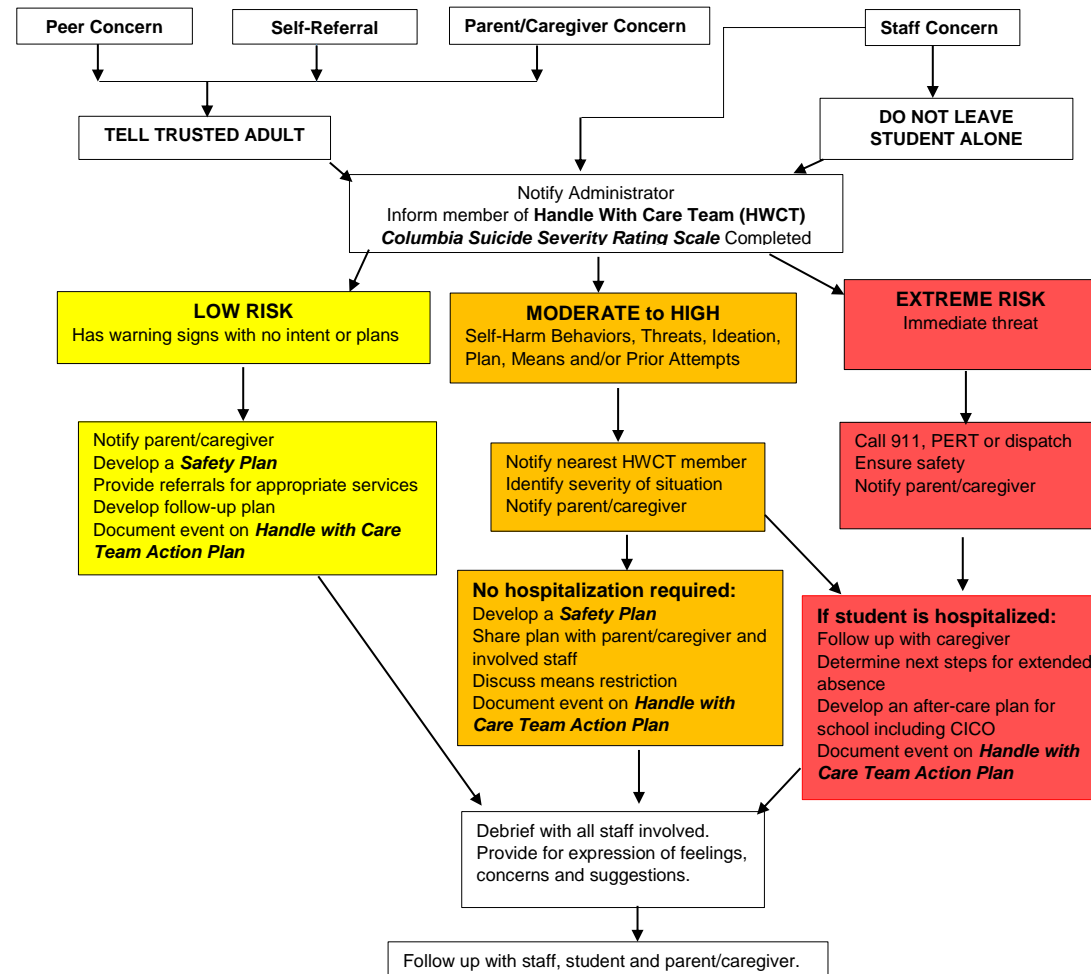
- Applied Suicide Intervention Skills Training
- Engaging Students Involved in CSEC 102
- Managing Students who Self Injure
- Question, Persuade & Refer
- Restorative Conferences
- Assessing Suicidal Students

### Targeted, Tier II

- Anxiety in Young People
- Gender & Sexuality Alliances
- GLSEN 2.0
- Restorative Practices Circles
- Trauma Informed Classroom Strategies

# Protocols for Suicide Intervention

## Protocols for Suicide Intervention (Low, Moderate-High and Extreme Risk)



# Columbia Severity Rating Scale Pre-Screener



THE COLUMBIA  
**LIGHTHOUSE**  
**PROJECT**  
IDENTIFY RISK. PREVENT SUICIDE.

<https://cssrs.columbia.edu/the-scale-in-action/schools/>

SUICIDE IDEATION DEFINITIONS AND PROMPTS		Since Last Contact	
Ask questions that are bold and <u>underlined</u>		YES	NO
Ask Questions 1 and 2			
1) <b><u>Have you wished you were dead or wished you could go to sleep and not wake up?</u></b>			
2) <b><u>Have you actually had any thoughts of killing yourself?</u></b>			
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6			
3) <b><u>Have you been thinking about how you might do this?</u></b> E.g. "I thought about taking an overdose but I never made a specific plan as to when where or how I would actually do it....and I would never go through with it."			
4) <b><u>Have you had these thoughts and had some intention of acting on them?</u></b> As opposed to "I have the thoughts but I definitely will not do anything about them."			
5) <b><u>Have you started to work out or worked out the details of how to kill yourself and do you intend to carry out this plan?</u></b>			
6) <b><u>Have you done anything, started to do anything, or prepared to do anything to end your life?</u></b>  Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc.			

■ Low Risk  
■ Moderate Risk  
■ High Risk

# Action Plan and Documentation Form

Determined <i>Low Risk</i> based on CSSRS Screening			
<ul style="list-style-type: none"> <li>• Suicidal ideation with low frequency, intensity and duration</li> <li>• No intent (degree to which student has planned suicidal behavior)</li> <li>• No plans</li> </ul>		<ul style="list-style-type: none"> <li>• Few risk factors</li> <li>• Good self-control</li> <li>• Presence of protective factors</li> </ul>	
<b>Date:</b>	<b>Student:</b>	<b>School:</b>	<b>Grade:</b>
<b>Action Plan Checklist</b>	<b>Responsible Staff</b>	<b>External Contacts</b>	<b>Phone Number</b>
<input type="checkbox"/> Take every warning sign seriously			
<input type="checkbox"/> Notify admin			
<input type="checkbox"/> Notify parent/caregiver with student present if appropriate			
<input type="checkbox"/> Complete <b>Parent/Caregiver Notification Form</b>			
<input type="checkbox"/> Develop <b>Safety Plan</b> with student and parents if necessary			
<input type="checkbox"/> Refer to primary care or mental health services if necessary			
<input type="checkbox"/> Get parent signature on <b>Authorization for Release and/or Disclosure of Information Form</b> if necessary			
<input type="checkbox"/> Communicate to appropriate staff and rest of HWCT and document			
<input type="checkbox"/> Provide copy of Safety Plan with parents and involved staff			
<input type="checkbox"/> Follow up with student and family as often as necessary until student is stable			
<input type="checkbox"/> Debrief with involved staff to assisted with the intervention, provide for expression of feelings, concerns and suggestions			
Who identified student as being at risk:  Reason for concern:  Staff notified:  Additional Information:			

# Sample Student Safety Plan

## Step 1: Warning Signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Step 3: People and social settings that provide distraction:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Phone \_\_\_\_\_
3. Place \_\_\_\_\_ 4. Place \_\_\_\_\_

## Step 4: People whom I can ask for help:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Phone \_\_\_\_\_
3. Name \_\_\_\_\_ Phone \_\_\_\_\_

## Step 5: Professionals or agencies I can contact during a crisis:

1. Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_
2. SD Access & Crisis Line 1-888-724-7240
3. National Suicide Prevention Lifeline 1-800-273-8255
4. TrevorLifeLine (LGBTQ) 1-866-488-7386
5. Crisis Text Line – Text “Courage” to 741741

## Step 6: Making the environment safe:

1. \_\_\_\_\_
2. \_\_\_\_\_

## The one thing that is most important to me and worth living for is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# Suicide Risk Assessment Template Packet

- Protocol for Suicide Intervention
- Student Safety Plan
- Columbia Suicide Severity Rating Scale
- Action Plan and Documentation
- Parent Acknowledgement Form
- What Can Parents Do To Prevent Youth Suicide?
- Handle With Care Memo
- Web of Support Diagram

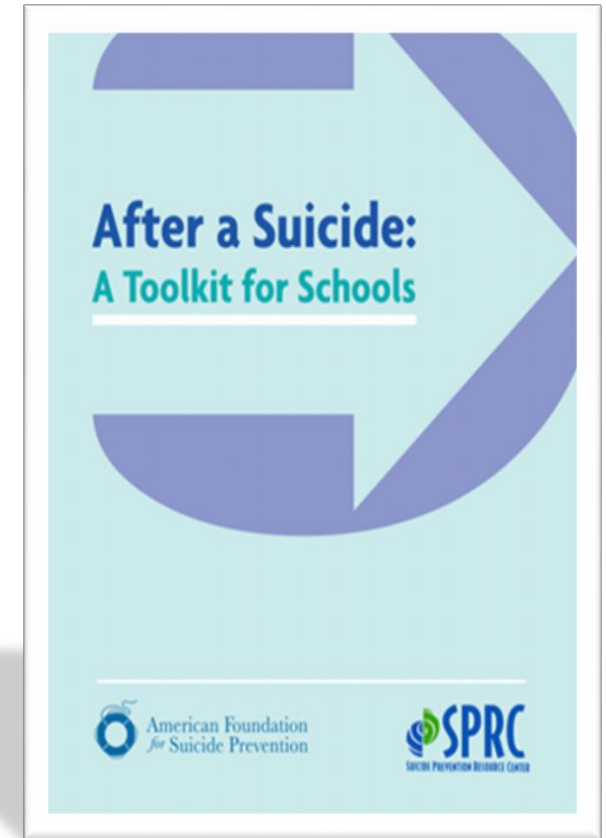
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# Postvention: Key Tasks for Schools

- Schools need concrete, pragmatic guidance on how to support both students and staff – *before* a crisis occurs
- A comprehensive school policy that incorporates methods of postvention will ensure that educators know how to respond safely when a suicide occurs in the school community, avoiding suicide contagion and that educators are equipped to support affected students and their families as well as fellow school staff

# Postvention in San Diego County

- AB2246 Workshops included postvention planning
- Suicide Prevention Resource Guide for Schools includes postvention
- After a Suicide: Toolkit for Schools



# Postvention Checklist

Included in Suicide Prevention Protocols & Procedures template packet

Steps to Take in Immediate Aftermath	Staff Responsible	External Contacts (Phone Numbers)	Tools
Notify key individuals			
1. Verify death	Lead: Backup:	Police: Medical examiner:	
2. Ensure that staff know how to respond to inquiries and manage the campus for safety	Lead: Backup:		Tool 3.A.1: Sample Script for Office Staff
3. Notify superintendent's office	Lead: Backup:	Superintendent : . Backup/weekends:	
4. Notify district crisis team*	Lead: Backup:	District crisis team:  Weekend/vacation/late night contacts:	
5. Notify schools attended by family members of the deceased	Lead: Backup:	Other schools in district: .	
6. Contact and coordinate with external mental health professionals	Lead: Backup:	Community mental health providers:  External crisis response professionals:	Tool 3.A.2: Sources of Postvention Consultation
7. Reach out to and work with the family of the deceased	Lead: Backup:		Tool 3.A.3: Guidelines for Working with the Family
*In tribal communities, Bureau of Indian Education schools notify the main office and tribal schools notify the principal.			

# Next Steps

# Suicide Risk Assessment Pilot Project














- Several K-12 districts participating
- Report monthly suicide risk assessments
- Demographics
- Identify Trends
- Inform local and state funding and policy recommendations

# Online Suicide Prevention Training Grant

- EC Section 215
- Provide access to an online suicide prevention training program through Living Works
- All middle and high schools in the state of California
- Train students and school staff

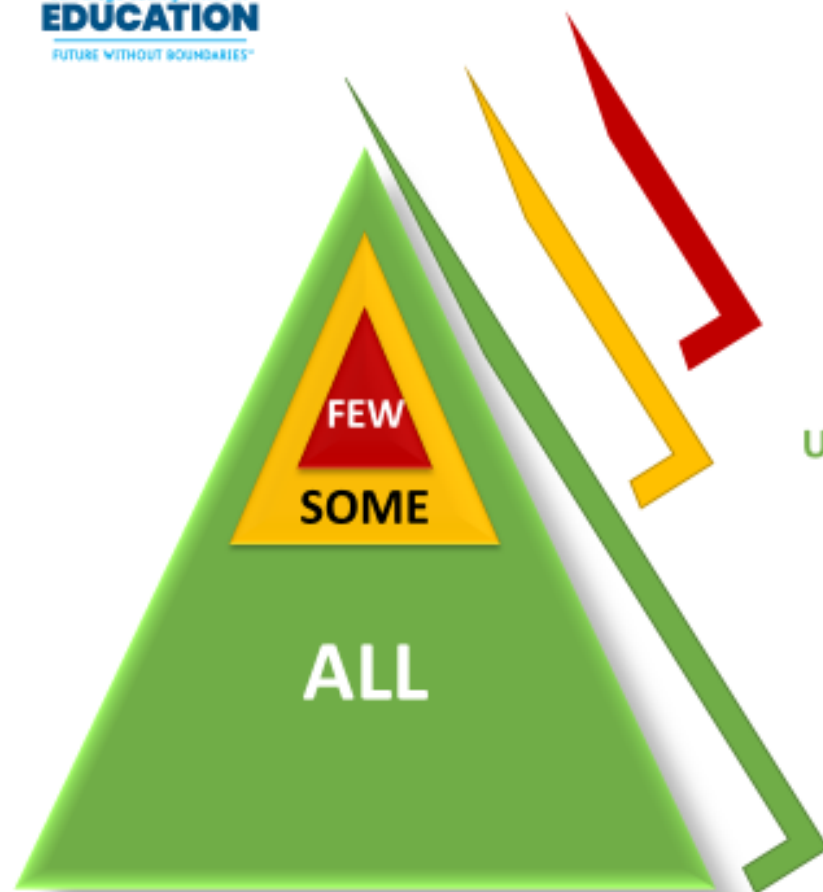


# Continuum of Trauma Informed Care Trainings

	TIPS PREREQUISITE	INDIVIDUAL PRACTICE	WHOLE SCHOOL PRACTICE
			
	<b>Trauma Informed Practice in Schools (TIPS) Prerequisite:</b> <i>Participant must attend this training to learn the impact of trauma on students.</i>	Any school or district employee can attend individually and incorporate in their own daily practice.	Requires a school or district leadership team of 3 or more to lead the schoolwide implementation efforts.
<b>Compassionate Schools</b> <i>Deep understanding of learning and teaching as well as concepts of compassion, resiliency, and school-community partnerships.</i>			
<b>Trauma Sensitive Schools</b> <i>Trauma sensitive approaches to promote fundamental change in education culture.</i>			
<b>Cultivating Emotional Resilience</b> <i>Practical resources for cultivating resilience and healthy habits in educators that is based on research in emotional resilience, psychology, systems thinking and change management.</i>			
<b>Trauma Informed Classroom Strategies for Teachers</b> <i>Hands on strategies and approaches to utilize in the classroom.</i>			
<b>Self-Care for Educators</b> <i>Benefits of self-care, assessing individual's self-care practices and creating a self-care plan.</i>			

# As a Result..

## Tiered Professional Development for Student Wellness & Positive School Climate



### Individualized, Tier III

- Applied Suicide Intervention Skills Training
- Engaging Students Involved in CSEC 102
- Managing Students who Self Injure
- Question, Persuade & Refer
- Restorative Conferences

### Targeted, Tier II

- Anxiety in Young People
- Bullying Prevention in the Classroom
- Drug Impairment Training for Educational Professional
- Engaging Students in Foster Care or Experiencing Homelessness
- Gender & Sexuality Alliances
- GLSEN 2.0
- Restorative Practices Circles
- Special Populations: Unaccompanied Homeless Youth
- Trauma Informed Classroom Strategies

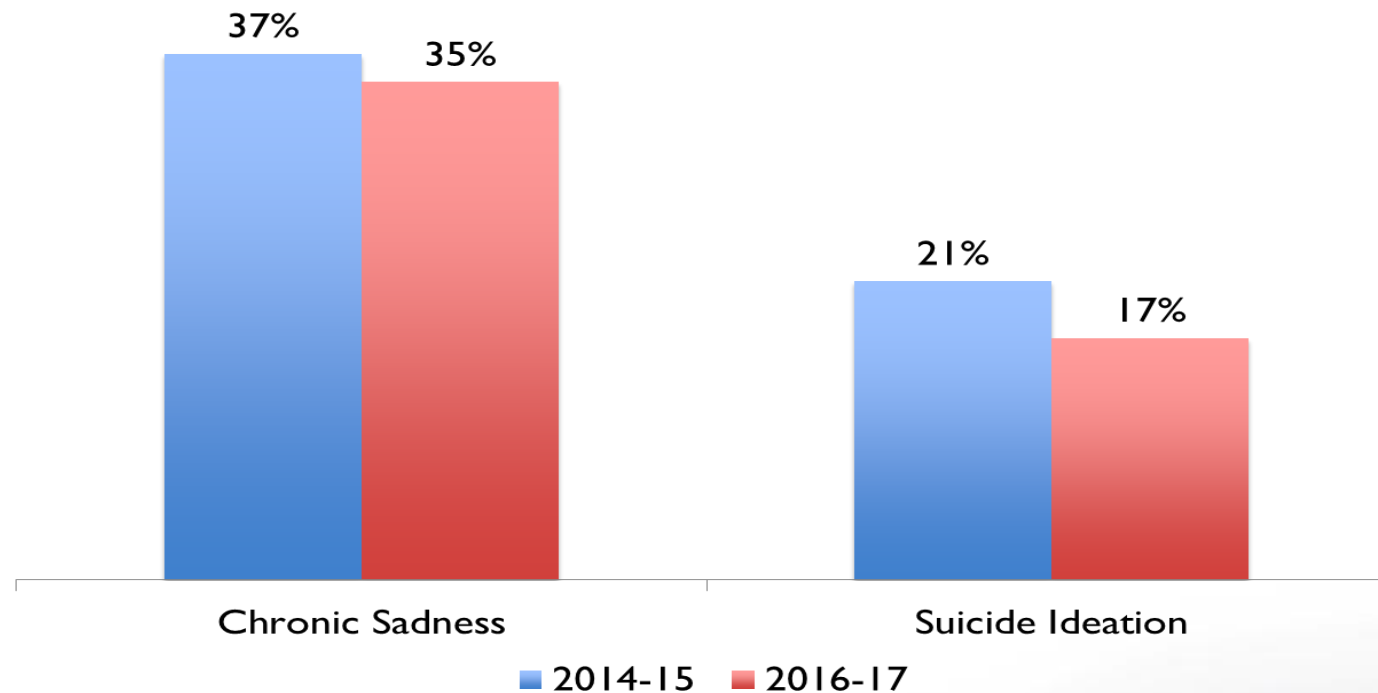
### Universal, Tier I

- Best Practices for Creating Inclusive Environments
- Building Asset Based Relationships with Youth
- Bullying Prevention Whole School
- CSEC Awareness 101
- Compassionate Schools
- Cultivating Emotional Resilience
- Educating Students Experiencing Homelessness
- Educating Students in Foster Care
- GLSEN 1.0
- Introduction to Restorative Practices
- Managing Students with Seizures
- Self-Care for Educators
- Standards of Quality for Family Strengthening & Support
- Stop the Bleed
- Strengthening Family Assets & Relationships
- Trauma Informed Practices in Schools
- Youth Mental Health First Aid

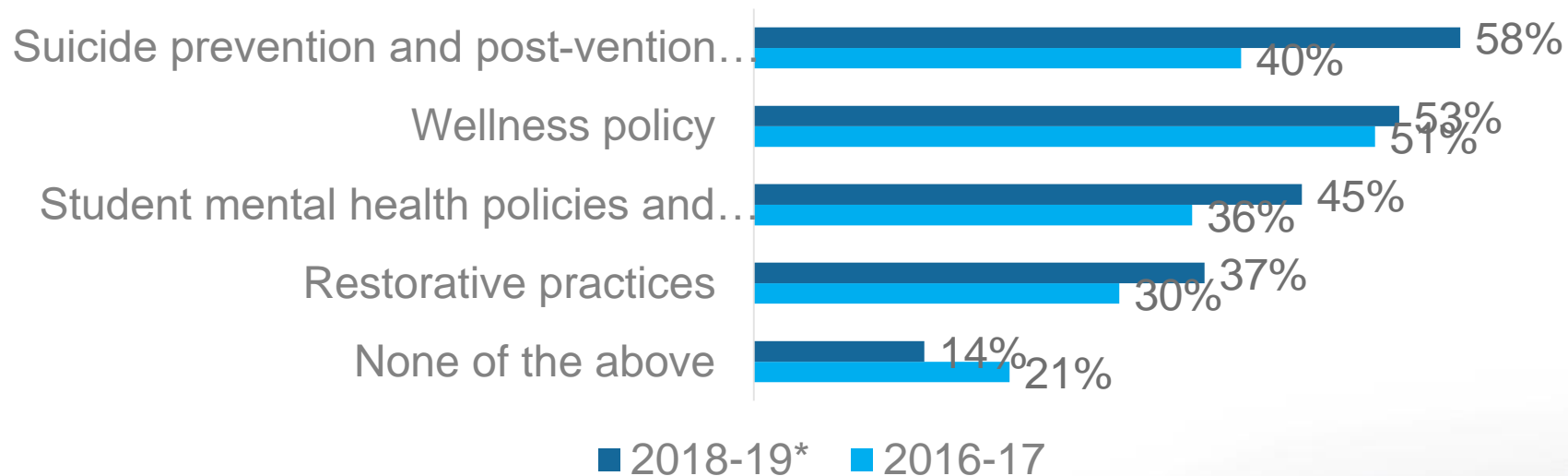
# San Diego School Climate Trends

California Healthy Kids Survey			
7 <sup>th</sup> , 9 <sup>th</sup> and 11 <sup>th</sup> Grade Students Who Scored Their School Environment High			
	2014-15	2016-17	Cal-Well Outcome
<b>Total School Supports</b>	29%	32%	<b>+3%</b>
Caring Adults in School	33%	35%	<b>+2%</b>
High Expectations-Adults in Schools	41%	43%	<b>+2%</b>
Meaningful Participation at School	11%	14%	<b>+3%</b>
School Connectedness	42%	49%	<b>+7%</b>
Academic Motivation	22%	24%	<b>+2%</b>

# San Diego CHKS Survey Data Trends for High School Students



## % Principals reporting that the following topics were outlined in their school's Comprehensive School Safety Plan



Source: Project Cal-Well Principal Survey; \*2018-19 data are preliminary



# Student Mental Health Policy Workgroup (SMHPWG)

- SB 972- Student ID Cards
- AB 2022- Pupil Mental Health Services School Notification

# Thank You

Mara Madrigal-Weiss: [mmadrigal@sdcoe.net](mailto:mmadrigal@sdcoe.net)  
(858) 292-3569

Heather Nemour: [heather.nemour@sdcoe.net](mailto:heather.nemour@sdcoe.net)  
(858) 569-5489