

Mental Health & Suicide Prevention K-12 Professional Development Program Chart

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Welcome to the Mental Health & Suicide Prevention K-12 Professional Development Program Chart, a resource schools can use to help advance student mental health and suicide prevention education efforts. Based on increasing demand from schools for a tool to assess the myriad training program options, the chart was created to be an easy-to-read overview and comparison of in-person and online professional development training programs for educators.

Background

LEGISLATION FROM CALIFORNIA and other states require training teachers and others in the school community on student mental health and suicide prevention. In California, Assembly Bill 2246, which passed in 2016, requires all school districts serving grades 7-12 to develop and implement a suicide prevention policy which includes suicide prevention (and mental health) training for staff. California AB-2639 legislation, passed in 2018, requires updating those policies every five years. Other school climate and social and emotional learning efforts also include advancing mental health education and training.

SO HOW DO SCHOOLS CHOOSE WHICH PROGRAM TO IMPLEMENT? THIS CHART CAN HELP.

The chart provides information important to schools when selecting programs: the underlying research or evidence for the program; the length

of time it takes to implement; whether it includes pre and post evaluations to measure and report impact; the number of people who can be trained at a time; and other critical factors. The chart does not endorse any program. The methodology and definition sections which follows the chart outlines the review process and what program elements were considered. The chart was developed and carefully reviewed by a diverse group of student mental health experts from California mental health and education organizations including: Anaheim Union High School District, Mental Health America of California, Placer County Office of Education, and The Trevor Project. In addition, representatives from the vendors and organizations who developed the programs noted in the chart had the opportunity to review their program information to ensure accuracy. We hope this chart can serve as a helpful resource for schools and districts seeking to advance student mental health and well-being.

In-Person Programs

Online Programs	Evidence-Based Research Citations Listed	Content	Duration	Grade	Pre / Post Evaluation	System Aggregate Data & Track Usage	Participant Limit	Listed in 2017 CDE Model Suicide Prevention Policy for PD	Information Confirmed by Developer / Organization
Applied Suicide Intervention Skills Training (ASIST) (LivingWorks)	✓ U.S. school setting 1, 2	Suicide prevention	2 days	Ages 16 & up	✓	Manual	30	✓	✓
Mental Health First Aid (National Council for Behavioral Health- NCBH)	✓ U.S. school setting 1, 3	Mental health, Substance use	8 hours	No grade specified	✓	Manual	25-30	✗	✓
Question, Persuade, Refer (QPR) Gatekeeper Training for Suicide Prevention (QPR)	✓ U.S. school setting 1, 4	Mental health Suicide prevention	1-2 hours training, 3-4 hours specialized training	No grade specified	✓	Manual	35	✓	✓

In-Person Programs Continued

Online Programs	Evidence-Based Research Citations Listed	Content	Duration	Grade	Pre / Post Evaluation	System Aggregate Data & Track Usage	Participant Limit	Listed in 2017 CDE Model Suicide Prevention Policy for PD	Information Confirmed by Developer / Organization
SafeTALK (LivingWorks)	✓ Non-U.S. school setting 5	Suicide prevention	Half-day	Ages 15+	✓	Manual	30	✓	✓
Youth Mental Health First Aid (NCBH)	✓ U.S. school setting 6	Mental health Substance use	6-8 hours	Ages 12-25	✓	Manual	30	✓	✓

Online Programs

Online Programs	Evidence-Based Research Citations Listed	Content	Duration	Grade	Pre / Post Evaluation	System Aggregate Data & Track Usage	Participant Limit	Listed in 2017 CDE Model Suicide Prevention Policy for PD	Information Confirmed by Developer / Organization
At-Risk Suite for Educators (Kognito)	✓ U.S. school setting 1, 7	Mental health Suicide prevention	60/120 minute versions	PK-12	✓	✓	None	✓	✓
Making Educators Partners in Youth Suicide Prevention: ACT on FACTS (Society for the Prevention of Teen Suicide)	✓ U.S. school setting 8	Mental health Substance use	2 hours or more	No grade specified	✓	✓	None	✗	✓
Signs of Suicide: Plan, Prepare, Prevent: Online Gatekeeper Training - (Screening for Mental Health, Inc.)	✗ 9	Mental health Suicide prevention	90 minutes specialized training	6-12	✗	✗	None	✗	✓

Online Programs Continued

Online Programs	Evidence-Based Research Citations Listed	Content	Duration	Grade	Pre / Post Evaluation	System Aggregate Data & Track Usage	Participant Limit	Listed in 2017 CDE Model Suicide Prevention Policy for PD	Information Confirmed by Developer / Organization
Question, Persuade, Refer Online Gatekeeper Training (QPR Institute)	✓ Non-U.S. school setting 1,10	Mental health Suicide prevention	60 minutes	No grade specified	✓	✓	None	✓	✓
Keenan SafeSchools (KSS)	✗ U.S. school setting 11	Mental health Suicide prevention	40 minutes & 2 hours	K-12	✗	✓	None	✗	✓
Step In, Speak Up! (Kognito)	✓ 1,12	LGBTQ - Bullying prevention Suicide prevention	30 minutes	7-12	✓	✓	None	✗	✓
TeachStar Online Academy (Los Angeles County Office of Education)	✗ 13	Mental health Bullying prevention Suicide prevention LGBTQ	4 hours	K-12	✗	✗	None	✗	✗

Methodology

Schools and districts are looking for ways to compare and evaluate the myriad of suicide prevention and mental health awareness training programs available for training staff and adults in the school community. In developing the chart, rigorous analysis was applied to understand which programs included components important to suicide prevention efforts and a school's selection process. The methodology involved analyzing each training program and reviewing the following:

1. Information and research articles listed on SAMHSA's National Registry for Evidence-Based Programs and Practices. NREPP is a database that assesses effectiveness of interventions related to mental health and substance use and provides links to published research articles. Research was reviewed on NREPP in May through July 2018 prior to it going offline (August 2018).
2. Organizations and program websites for posted information about research on the program.
3. Published and peer-reviewed articles listed as the source of evidence and the origin of the evidence (U.S. or non-U.S., school setting, or other setting such as community organization).
4. In cases where information was not available online, contacting the organization and obtaining the evidence research and/or other information.
5. All program developers were contacted to review and confirm the accuracy of their program information in the chart.

Methodology Continued

PROGRAM ELEMENTS INCLUDED IN THE CHART:

EVIDENCE-BASED:

Programs with published research are noted with a check mark

- Citation 1 refers to having been listed on NREPP
- Additional citations link to the published research (noted below) or the organization's website for more information

CONTENT: Content orientation such as suicide prevention and mental health

DURATION: Length of time to implement the program

GRADE: Appropriate for adults working with specific ages/grade levels

EVALUATION: Pre and post evaluation to assess knowledge and other factors from training and whether evaluations are manually collected or tracked online

AGGREGATE: Ability to collect information on usage, aggregate and summarize usage and evaluations

PARTICIPANT LIMIT: The number of people that can be trained in a session as designated by the developer. We assume online programs have an unlimited number of simultaneous users

LISTED IN CALIFORNIA DEPARTMENT OF EDUCATION MODEL POLICY: Identifies if program is listed in California Department of Education (CDE) model suicide prevention policy for professional development. CA CDE Model Suicide Prevention Policy

Considerations

ADDRESSING GROUPS AT HIGH-RISK FOR SUICIDE: The training programs included in the chart primarily target educating teachers and other adults who work with youth in school settings. According to model suicide prevention policies, suicide prevention training should also consider the importance of providing information on youth at higher risk, especially vulnerable youth who are homeless, in foster care, and LGBTQ youth.

LGBTQ youth are more than three times as likely to attempt suicide than their heterosexual peers. The Trevor Project, the world's largest suicide prevention and crisis intervention organization for LGBTQ youth, has created resources and programs that address LGBTQ youth concerns. Programs created in partnership with The Trevor Project or that incorporate its recommendations and resources will help to fulfill important elements of model suicide prevention policies. The Trevor Project recommends suicide prevention trainings in schools include the following information: review of specific risk factors for LGBTQ youth, use of appropriate terminology, steps to building resilience, and address protective factors for LGBTQ students.

COST: The chart does not include the cost of programs due to the in-depth research required when factoring in the various associated fees. However, there are a few elements to consider related to costs. With all training modalities, there will be staff time needed to coordinate the logistics of training across the district, at the school level, or both. Other costs can include the cost of the materials/workbooks, trainer fees (or training of trainers, where district or school staff are trainers), and release time or substitute teachers that allow school personnel to participate. The cost of a substitute teacher should be considered when determining overall training costs since it could add anywhere from \$100 to \$300, per teacher, depending on the length of the program and the district policy, unless the training is incorporated into paid professional development time. Online programs generally include technical set-up costs and the cost of licensing the program for a specific period. There are generally no costs for materials, trainer fees, or staff release time needed for online programs.

Definitions

EVIDENCE-BASED An evidence-based training means that the program has been empirically tested, peer-reviewed, and demonstrated to be effective in achieving the desired outcomes. An evidence-based mental health intervention for use in schools should be empirically tested in a (school) setting with a large sample size. Ideally, the data are not only representative of effectiveness under “laboratory” conditions, but also as implemented in the field. The level of evidence and whether the evidence is Emerging, Strong, or Very Strong is an additional factor to consider but is beyond the scope of this chart.

EVALUATION, TRACKING USAGE, AGGREGATING DATA: Schools are looking for PD programs to deliver and evaluate a program’s effectiveness and usage in a timely and cost-effective manner. Data collection is essential to measuring outcomes, impact, and determining future training needs. The chart addresses whether a program can evaluate the effectiveness of the training efforts pre and post, the number of individuals trained and learning outcomes, as well as aggregate school, district, county, or state-wide data for reporting purposes. The chart notes whether evaluations and data are tracked online or require manual collection and reporting.

PARTICIPANT LIMIT: Included in the chart is an assessment of how many staff can be trained at a time either online or in-person. Some in-person trainings limit the number of those trained, require location set up, scheduling, and ensuring trainers are available. Online training can generally accommodate an unlimited number of simultaneous participants. Online can be implemented to school staff across urban, rural, and suburban regions, and county and statewide and is generally available 24/7 throughout the year.

DURATION: For some schools, the duration or how long a program takes to deliver can be important in choosing a training program given competing priorities and limited professional development time. Allocating a large portion of professional development hours to mental health may be unrealistic for teacher training in districts, despite the importance of the topic. Therefore, the chart outlines programs and the length which ranges from one to eight hours, and in one case two full business days.

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Citations & Notes

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Disclaimer

This chart should be used strictly for educational and informational purposes only. The chart does not endorse any program. It provides information and links to school-based programs and research related to the programs and organization website. All information, whether publicly posted or privately transmitted, are the sole responsibility of the individual source of said content. Program vendors and organizations were contacted, and every attempt has been made to ensure the information presented is accurate and timely; however, the information is presented “as is” and without warranties. Independent providers maintain resources linked from the chart. Although that content is reviewed, ideas and opinions included in an independent provider’s material are strictly those of the authors. Under no circumstances are the reviewers responsible for content that includes errors or omissions, or for loss or damage of any kind incurred as a result of using the program chart’s content or content linked from these pages.

About Our Partners



The mission of [Mental Health America of California](#) is to ensure that people of all ages, sexual orientation, gender, ethnicity, and others who require mental health services and supports are able to live full and productive lives, receive the mental health services and other services that they need, and are not denied any other benefits, services, rights, or opportunities based on their need for mental health services. Through advocacy and education, we strive to achieve these goals. The organization and affiliates provide a conduit through which statewide coalitions on mental health are maintained and work together to promote these values.



[Placer County Office of Education](#) is an educational leader and a valuable and respected resource in fiscal practices, educational programs, and student services. The Office provides successful educational programs designed to educate a wide variety of students with diverse needs, birth through adult. The Office monitors the fiscal health of districts and provides support services to insure availability and appropriate use of resources to students served by school districts. The Office offers its technical and professional expertise to partnering agencies. The Office collaborates with school districts, governmental agencies, and community-based organizations to increase student achievement and to enhance the development of youth in our county.



[The Trevor Project](#) is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender and questioning (LGBTQ) young people ages 13-24. Every day, The Trevor Project saves young lives through its accredited, free and confidential phone, text and instant message crisis intervention services. A leader and innovator in suicide prevention, The Trevor Project offers the largest safe social networking community for LGBTQ youth, best practice suicide prevention educational trainings, resources for youth and adults, and advocacy initiatives.



[Anaheim Union High School District](#) is a partnership of students, parents, staff, and community providing all students with a high quality, well-rounded educational program in a safe and nurturing learning environment that promotes:

HIGH ACADEMIC EXPECTATIONS for all students and employees

21ST CENTURY LEARNING SKILLS for students to act as problem solvers and critical thinkers

READINESS FOR POST-SECONDARY EDUCATION, career options, and civic and social responsibility.



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