

HLTH 4000-001/HLTH 6000-001 Topics in Public Health: Interprofessional Approaches to Suicide Prevention

Credits, Days/Time, Location: 3 credits;

Faculty Information:

Teaching Assistant:

Course Description:

Using readings and interactive case studies from health sciences, public health, law and psychology, the course addresses multi-level influences on suicide and its prevention. Topics covered include suicide prevention- related ethical issues, terminology, attitudes and social norms, vulnerable populations, risk/protective factors, and mental health services and public health approaches to suicide prevention.

Pre-Requisites:

Permission of the instructor.

Required Text and Materials:

There are no required texts. The course professor has provided weekly pdf and web-based readings, as well as additional course handouts, via Canvas (see course schedule for required and recommended readings).

Recommended web resources:

[American Foundation for Suicide Prevention \(AFSP\)](#)

[American Association of Suicidology \(AAS\)](#)

[Centers for Disease Control and Prevention \(CDC\) suicide prevention resources](#)

[Crisis Text Line \(Text 'Home' to 741741\)](#)

[National Suicide Prevention Lifeline \(1-800-273-Talk\)](#)

[Ohio Suicide Prevention Foundation](#)

[Suicide Prevention Resource Center \(SPRC\)](#)

[World Health Organization \(WHO\) suicide prevention resources](#)

[World Health Organization \(WHO\) interprofessional education and collaborative practice](#)

Course Objectives: This course is organized around the following sets of competencies.

Suicide Prevention Competencies by Multi-Level Framing (Cramer et al., 2019)

Foundational Competencies in Suicide Prevention

Competency 1: Using contemporary suicide prevention-related terminology

Competency 2: Managing personal attitudes, reactions, and social norms concerning suicide

Competency 3: Knowing evidence-based risk and protective factors, and theories of suicide

Competency 4: Recognizing legal and ethical considerations concerning suicide

Clinical/Individual (Tertiary Prevention)

Competency 5: Developing and maintaining a collaborative, empathic stand toward persons experiencing suicidality

Competency 6: Conducting and documenting a clinical risk assessment

Including: focusing on suicide content, determining risk level, and documentation standards

Competency 7: Understanding mental health service approaches to suicide prevention

Social/Interpersonal & At-risk Group Competencies (Secondary Prevention)

Competency 8: Enacting a collaborative evidence-based plan
Competency 9: Comprehending social support approaches to suicide prevention
Including: Engaging in debriefing and self-care

Community-Based Competencies (Primary Prevention & Postvention)

Competency 10: Knowing public health approaches to suicide prevention
To include gate-keeper trainings, public awareness campaigns, survivor support groups, etc.
Competency 11: Articulating community organizing and advocacy-based approaches to suicide prevention
Competency 12: Adapting suicide prevention to special population needs (e.g., military, LGBTQ, adolescents)
Competency 13: Framing suicide prevention within a strategic plan

Interprofessional Education (IPE) competencies (WHO, 2010):

IPEC competency #1: Ethical approach and respect for mutual contribution to provision of care
IPEC competency #2: Roles and responsibilities
IPEC competency #3: Interprofessional communication
IPEC Competency #4: Teams and team work
IPE Competency #5: Ability to transfer interprofessional learning to the work setting

By the end of this course, the **undergraduate** student will be able to:

1. Discuss current terminology and cultural considerations in suicide prevention.
2. Articulate mental health services and clinical care considerations in suicide prevention.
3. Apply public health models to suicide prevention.
4. Demonstrate the ability to ***work in*** an interprofessional team.

By the end of this course, the **graduate** student will be able to:

1. Discuss current terminology and cultural considerations in suicide prevention.
2. Articulate mental health services and clinical care considerations in suicide prevention.
3. Apply public health models to suicide prevention.
4. Demonstrate the ability to ***lead*** an interprofessional team.

Teaching Strategies:

The course format is a combination of in-person lecture, Canvas assignments, independent reading, IPE team-based learning and project development, short individual writing assignments, and publicly available exercises. Using both empirical peer-reviewed journal articles and publicly available public health resources, the course covers comprehensive knowledge necessary for a beginning health professional to be competent in the domain of suicide prevention.

Evaluation Methods:

Introduction	____/10 (3%)
Quizzes	____/70 (23%)
Case Studies	____/20 (7%)
IPE Suicide Prevention Project	____/100 (33%)
Online Case Simulation	____/20 (7%)
IPE Journal/Reflection	____/30 (10%)
Suicide Prevention Resource Center Training	____/50 (17%)
Total*	____/300 (100%)

*Students completing HLTH 4000 as an Honors College course must also complete an article critique. Please see supplemental syllabus document entitled “HLTH4000 Honors Requirement.”

1. Introduction (Due Week 1; 10 points): Prepare a 2-3 minute summary introducing yourself to your class. Tell us your name, why you're in your field, and what your professional/academic course interests are (why do you want to take a suicide prevention course?). Also, tell us one other interesting thing about you.

2. Quizzes (5 points each; 70 points total): Each week's module includes a 5-question knowledge check (1 point per question) on Canvas. Quiz question content is drawn from PowerPoint Lecture and required (but not recommended) readings from that week's module. Each quiz must be completed by the end of that respective week (Sunday midnight). Quizzes must be taken until all questions are answered correctly and all points are awarded.

3. Case study group activity video report outs (two) (Due Weeks 4 and 5, 20 total points): During weeks 4 and 5, your groups will be assigned a case study to process. You will need to find some time either virtually or in-person as a group to process the case. Then, as a team, you will create a report out video synthesizing your processing of each case.

4. IPE Suicide Prevention Project (Due in various steps; total 100 points)

The major IPE team-based project this semester is a literature-supported public health or health promotion work product. It includes the following components:

(a) Topic (due week 5; 10 points). The suicide prevention health promotion/education topic must be approved by the course professor. Therefore, starting a conversation with the professor early is recommended. In selecting your group topic, consider the various aspects of suicide prevention we cover this semester (e.g., policy, competency, risk/protective factors, vulnerable populations) or your own professional disciplines (e.g., counseling, health services administration, social work). Your chosen topic should specify the:

(a) suicide prevention promotion topic (e.g., warning signs/risk factors for a specific population; 2 points)

(b) type of work product (e.g., fact/information sheet, pamphlet, PPT slides for an educational intervention, website; 3 points)

(c) population of the audience (e.g., type of healthcare provider, teachers, defined patient population; 2 points)

(d) setting of dissemination (e.g., primary care clinic, crisis call center, social media platform[s], college campus; 3 point)

Example topics may look like:

1. A fact sheet on statistics and warning signs for peri- and post-partum depression and suicide for expectant mothers to be distributed in OB/GYN clinics.

2. A logical model or framework for design of a campus suicide prevention program to be disseminated to campus health staff at the annual conference of the American College Health Association.

3. A pamphlet concerning the benefits of mental health screening or testing for urban-dwelling outpatients in a community health center.

4. A set of PPT slides concerning traumatic brain injury, trauma and suicide to be used as part of a presentation/training for new healthcare providers working in the Veterans Affairs Medical Center.

Notes: (1) You must select a topic that can be supported by a literature review. Therefore, you may want to do some searching ahead of time. Depending on your topic, it may be advisable to search a range of search engines including, but not limited to, Medline, PubMed, PyscArticles, Psychinfo, PublicAffairs, ERIC, SocIndex, GoogleScholar, and others. Relevant professional organizations are also acceptable sources, but should not be the only ones you use.

(b) **Introduction section (i.e., literature review; draft due week 8 for feedback; 25 points).** Your group introduction section should provide the necessary detail to inform your health promotion/education work product. As such, it should contain between five (5) and ten (10) peer-reviewed journal articles or other expert sources (e.g., government or professional organization reports). The total length of the introduction section should be three (3) to five (5) double-spaced pages 12-point Times New Roman font. Your group will provide a cover page, introduction section (using APA or AMA format), and full APA or AMA reference section. The group paper will be submitted under course assignments, subject to plagiarism software checking. You may also [create and post to a group created weebly page](#).

This portion of the project will be graded as follows:

Sufficient number of sources and page length satisfied: _____/5
 Literature review addresses aspects of proposed topic: _____/10
 Writing style (i.e., APA style, grammar, organization, etc.): _____/10

(c) **Health Promotion/Education Work Product Visual (due week 11; 25 points).** The group Suicide Prevention Health Promotion/Education Work Product will vary in length and format depending on the topic details. However, [PiktoChart](#) can accommodate a wide range of work products. There is a PiktoChart instructions document and example picture in the course handouts folder. Your group can use another presentation venue (e.g., PowerPoint; Video); please consult with the course professor early on in the process to get this approved. The work product should demonstrate the following: (a) incorporation of relevant empirical and/or expert resource content from your literature review, and (b) application of example course concept(s).

This portion of the project will be graded as follows:

Work product addresses details from proposed topic: _____/5
 Work product incorporates literature review content: _____/10
 Work product applies course concept(s): _____/10

(d) **Suicide Prevention Project Team Presentation (week 17; 40 points).** Each team will prepare a 10-15 minute presentation of their whole IPE team suicide prevention project. The presentation should involve active participation of each student team member. Each team presentation should include the following in their presentation:

Overview of the topic _____/5
 Summary of the literature review _____/10
 Example work product _____/10
 Reflections on what the team learned about interprofessional teams and teamwork _____/10
 Professional attire _____/5

Note: Teams may, but are not required to, use Kaltura/other Canvas video, Weebly.com pages, FlipGrid.com videos, or other such resources in their presentation.

5. Online case simulation (Due Week 12; 20 points, all or nothing for completion). In order to gain expertise in first-hand community gate-keeper, clinical care, or healthcare skills, each student will select one of three possible online case simulations. You will complete these online via the Canvas module.

6. Individual IPE journaling/reflection (2-3 pages, Due Week 14, 30 total points): Each student will complete a 2-3 page double-spaced end-of-semester IPE journal/reflection paper addressing (10 points each): (1) lessons learned from IPE content and team-based learning, (2) summary and assessment of your role and contribution to the team-based project, and (3) challenges and benefits of participating in the IPE team.

7. Suicide Prevention Resource Center Free Online Training (Due Week 15; 50 points, all or nothing for completion). An overt goal of this course is to aid the health professions student in their independent learning toward building skills and their résumé. In order to obtain a practical credential, and

build on course content, each student will be required to complete the Suicide Prevention Resource Center (SPRC) free online training “[A Strategic Planning Approach to Suicide Prevention](#)”. Successful completion of this assignment will be scored all or nothing out of 20 points; that is, upon completion of the course, the student receives a certificate of completion. To receive credit, the student must email a copy of the certificate to the course professor and teaching assistant no later than 5:00 p.m. the last day of the week the assignment is due (see course schedule). To complete the free training, follow these steps:

1. First go to the SPRC free online training homepage: <http://training.sprc.org/>
 2. Click register
 3. Using your University email, create a login ID and password
 4. The system should send you an email to confirm your account – click that link and return to the homepage
 5. Click on the link for “A Strategic Planning Approach to Suicide Prevention”, and complete the course
- The course will take approximately 3 to 3.5 hours to complete, so plan ahead. You can complete the training at one time, or at different times as your schedule allows.

Feedback to students: The SPRC training requires an 80% passing on questions at the end of each module. Students receive immediate feedback on correct answers and explanations.

Missed assignments: The late penalty for any assignment is 10% of the total grade per day, including weekend days. Written assignment extensions will be allowed for ONLY four situations: 1) severe personal illness that is medically documented; 2) documented participation as an authorized University representative in a previously scheduled out-of-town event; 3) a documented death in the family, or 4) military service.

Attendance: Students are expected to attend every class and to remain in class for the duration of the session. Students are also expected to be on time. It is important to be aware that an absence does not relieve a student of any course requirement(s). Regular class attendance is a student’s obligation, as is all the work of class meetings, including tests and written tasks.

NOTES for written assignments:

A. All major writing assignments will be turned in via Canvas. A good publically available resource for questions about plagiarism can be found here: <https://www.plagiarism.org/>.

B. Free resources are available on the web for [APA](#) and [AMA](#) formats.

Grading Scale:

A standard full letter grade system will be used for **undergraduate** student grading:

- A = 90-100%
- B = 80 - 89%
- C = 70 - 79%
- D = 60 - 69%
- F = below 60

Note: Total percentages will be rounded to the nearest point. For instance, an overall average of 89.56 or higher will be rounded to 90, whereas an 89.55 or less will be rounded to an 89.

A standard full letter grade system will be used for **graduate** student grading:

- A = 90-100%
- B = 80 - 89%
- C = 70 - 79%
- U = Under 70%

Note: Total percentages will be rounded to the nearest point. For instance, an overall average of 89.56 or higher will be rounded to 90, whereas an 89.55 or less will be rounded to an 89.

Course Schedule:

Week	Topics & Competencies	Assignments Due
<u>Foundational Competencies in Suicide Prevention</u>		
<p>Week 1 1/8</p>	<p><u>Topics:</u> Course Overview & Introductions Competency 1: Using contemporary suicide prevention-related terminology Competency 2: Managing personal attitudes, reactions, and social norms concerning suicide</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • CDC, Definitions of self-directed violence. • Addy, C. L., Browne, T., Blake, E. W., & Bailey, J. (2015). Enhancing interprofessional education: Integrating public health and social work perspectives. <i>American Journal of Public Health, 105</i>, S106-S108. • Silverman, M. M. & De Leo, D. (2016). <i>Nomenclature and classification system for suicide</i> <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • World Health Organization: Introduction to suicide. • Botega et al. (2007). Maintained attitudinal changes in nursing personnel after a brief training on suicide prevention. <i>Suicide and Life-Threatening Behavior, 37</i>, 145-153. • Saunders, K. E. A, Hawton, K., Fortune, S., & Farrell, S. (2012). Attitudes and knowledge of clinical staff regarding people who self-harm: A systematic review. <i>Journal of Affective Disorders, 139</i>, 205-216. 	<ol style="list-style-type: none"> 1. Course research pre-test (you will get an email with a study information sheet/invitation and a link to take the survey- it's completely voluntary) 2. Introductions 3. Quiz 1
<p>Week 2 1/15</p>	<p><u>Topics:</u> Competency 3: Knowing evidence-based risk and protective factors, and theories of suicide</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Cramer, R. J., & Kapusta, N. D. (2017). A social-ecological framework of theory, assessment, and prevention of suicide, <i>Frontiers in Psychology, 8</i>, 1756. • American Psychological Association. (2009). IPTS Science Brief. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Troister, T., Davis, M.P., Lowndes, A., & Holden, R.R. (2013). A Five-Month Longitudinal Study of Psychache and Suicide Ideation: Replication in General and High-Risk University Students. <i>Suicide and Life-Threatening Behavior, 43</i>, 611-620. 	<ol style="list-style-type: none"> 1. Quiz 2 2. Assign IPE teams in class

	<ul style="list-style-type: none"> American Foundation for Suicide Prevention. Survivor Day Documentations. O'Connor, R. (2011). The Integrated Motivational-Volitional Model of Suicidal Behavior. <i>Crisis</i>, 32, 295-298. Nock, M.K., & Prinstein, M.J. (2004). A functional approach to the assessment of self-mutilative behavior. <i>Journal of Clinical and Consulting Psychology</i>, 72, 885-890. 	
Week 3 1/22	<p><u>Topics:</u> Competency 4: Recognizing legal and ethical considerations concerning suicide IPEC competency #1: Ethical approach and respect for mutual contribution to provision of care</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> Lee, J.B., & Bartlett, M.L. (2005). Suicide prevention: Critical elements for managing suicidal clients and counselor liability without the use of a no-suicide contract. <i>Death Studies</i>, 29, 847-865. Clark, P. G., Cott, C. & Drinka, T. J. K. (2007). Theory and practice in interprofessional ethics: A framework for understanding ethical issues in healthcare teams, <i>Journal of Interprofessional Care</i>, 21(6), 591-603. <p><u>Recommended Readings:</u> Example Health Professions Ethics Codes. Examples: American Nurses Association Ethics Code American Psychological Association Ethics Code American Counseling Association Code of Ethics National Association of Social Workers Code of Ethics Public Health Leadership Society Principles of Ethical Practice in Public Health</p> <p>*You can also Google for your discipline-specific ethics codes</p>	1. Quiz 3
<u>Clinical/Individual Competencies (Tertiary Prevention)</u>		
Week 4 1/29	<p><u>Topics:</u> IPEC competency #2: Roles and responsibilities IPEC competency #3: Interprofessional communication</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> WHO. (2016). Core Competencies for Interprofessional Collaborative Practice. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> Lutfiyya, M.N., Brandt, B.F., & Cerra, F. (2016). Reflections from the Intersection of Health Professions Education and Clinical Practice: The State 	1. Quiz 4 2. Case Study Group Video Report Out 1

	of the Science of Interprofessional Education and Collaborative Practice. <i>Academic Medicine</i> , 91, 766-771.	
Week 5 2/5	<p><u>Topics:</u> Competency 5: Developing and maintaining a collaborative, empathic stance toward persons experiencing suicidality IPEC Competency #4: Teams and teamwork</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Burns, S.T. (2014) Mental health counselors' use of the Transtheoretical Model in interprofessional collaboration, <i>Journal of Counselor Leadership and Advocacy</i>, 1(2), 152-165, <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • King, R., Lloyd, C., Meehan, T., O'Neill, K., & Wilesmith, C. (2006). Development and evaluation of the Clinician Suicide Risk Assessment Checklist. <i>Australian e-Journal for the Advancement of Mental Health</i>, 5, 1-14. 	<p>1. Quiz 5</p> <p>2. Case Study Group Video Report Out 2</p> <p>3. Project topic due</p>
Week 6 2/12	<p><u>Topics:</u> Competency 6: Conducting and documenting a clinical risk assessment</p> <ul style="list-style-type: none"> • Including: focusing on suicide content, determining risk level, and documentation standards <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Bryan & Rudd, D. M. (2006). Advances in the assessment of suicide risk, <i>Journal of Clinical Psychology: In Session</i>, 62(2), 185-200. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • American Psychiatric Association. (2009). Practice Guideline for the Assessment and Treatment of Patients with Suicidal Behaviors. • Van Orden, K.A., Witte, T.K., Cukrowicz, K.C., Braithwaite, S.R., Selby, E.A., & Joiner, T.E. (2010). The Interpersonal Theory of Suicide. <i>Psychological Review</i>, 117, 575-600. 	<p>1. Quiz 6</p>
Week 7 2/19	<p><u>Topics:</u> Competency 7: Understanding mental health service approaches to suicide prevention</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Jobes, D. A. (2009). The CAMS approach to suicide risk: Philosophy and clinical procedures, <i>Suicidology</i>, 14(1), 1-7. • Johnson, Frank, Ciocca, Barber, (2011). Training mental health care providers to reduce at-risk patients' 	<p>1. Quiz 7</p>

	<p>access to lethal means of suicide: Evaluation of the CALM project. <i>Archives of Suicide Research</i>, 15, 259-264.</p> <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Suicide Prevention Resource Center: CALM: Counseling on Access to Lethal Means. • Comtois, K.A., & Linehan, M.M. (2006). Psychosocial treatments for suicidal behaviors: A practice friendly review. <i>Journal of Clinical Psychology: In Session</i>, 62, 161-170. 	
<p><u>Social/Interpersonal & At-risk Group Competencies</u> <u>(Secondary Prevention)</u></p>		
<p>Week 8 2/26</p>	<p><u>Topics:</u> Competency 8: Enacting a collaborative evidence-based plan</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Van Orden, et al. (2008). Suicidal desire and the capability for suicide: Tests of the Interpersonal Psychological Theory of Suicidal Behavior among adults, <i>Journal of Consulting and Clinical Psychology</i>, 76(1), 72-83. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Jobes, D.A. (2012). The Collaborative Assessment and Management of Suicide (CAMS): An evolving evidence-based clinical approach to suicidal risk. <i>Suicide and Life-Threatening Behavior</i>, 42, 640-653. 	<p>1. Quiz 8</p> <p>2. Literature review due</p>
<p>Week 9 3/4</p>	<p>No Class: Spring Break</p>	<p>None</p>
<p>Week 10 3/11</p>	<p><u>Topics:</u> Competency 9: Comprehending social support approaches to suicide prevention</p> <ul style="list-style-type: none"> • Including: Engaging in debriefing and self-care <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Whitlock, J., Wyman, P. A., Moore, S. R. (2014). Connectedness and suicide prevention in adolescents: Pathways and implications, <i>Suicide Life Threat Behavior</i>, 44(3), 246-272. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • CDC. Promoting Individual, Family, and Community Connectedness to Prevent Suicidal Behavior. 	<p>1. Quiz 9</p>
<p><u>Community-Based Competencies</u> <u>(Primary Prevention & Postvention)</u></p>		
<p>Week 11 3/18</p>	<p><u>Topics:</u> IPE Competency #5: Ability to transfer interprofessional learning to the work setting</p>	<p>1. Quiz 10</p>

	<p>IPE Competency #6: Community engagement and centeredness</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Patient, Family, and Community Partnerships: Using a Framework Driven Approach • Fulmer, T & Gaines, M. (2014). <i>Partnering with Patients, Families, and Communities to Link Interprofessional Practice and Education. Proceedings of a conference sponsored by the Josiah Macy Jr. Foundation.</i> New York, NY: Josiah Macy Jr. Foundation. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Nierenberg, S., Hughes, L.P., Warunek, M., et al. (2018). Nursing and Dental Students' Reflections on Interprofessional Practice After a Service-Learning Experience in Appalachia. <i>Journal of Dental Education</i>, 82, 454-461. 	
<p>Week 12 3/25</p>	<p><u>Topics:</u> Competency 10: Knowing public health approaches to suicide prevention</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • CDC, The Social-Ecological Model: A Framework for Prevention • Pullen, J. M., Gilje, F., & Tesar, E. (2016). A descriptive study of baccalaureate nursing students' responses to suicide prevention education, <i>Nurse Education in Practice</i>, 16, 104-110. <p><u>Recommended Readings:</u> QPR Institute Website</p> <ul style="list-style-type: none"> • Anestis, M.D., & Anestis, J.C. (2015). Suicide rates and state laws regulating access and exposure to handguns. <i>American Journal of Public Health</i>, 105, 2049-2058. • Silk, K.J., Perrault, E.K., Nazione, S.A., Pace, K., & Collins-Eaglin, J. (2017). Evaluation of a social norms approach to a suicide campaign. <i>Journal of Health Communication</i>, 22, 135-142. 	<p>1. Complete one IPE suicide prevention case simulation (online)</p> <p>2. Quiz 11</p> <p>3. Team-based Health promotion/education work product.</p>
<p>Week 13 4/1</p>	<p><u>Topics:</u> Competency 11: Articulating community organizing and advocacy-based approaches to suicide prevention</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Christens, B. D., & Speer, P. W. (2015). Community organizing: Practice, research, and policy implications. <i>Social Issues And Policy Review</i>, 9(1), 193-222. 	<p>1. Quiz 12</p>

	<p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Facebook Suicide Prevention Group 	
<p>Week 14 4/8</p>	<p><u>Topics:</u> Competency 12: Adapting suicide prevention to special population needs</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • Rudd, M. D. (2012). Brief Cognitive Behavioral Therapy (BCBT) for suicidality in military populations. <i>Military Psychology, 24</i>, 592-603. • Teo, A.R., et al. (2016). Brief gatekeeper training for suicide prevention in an ethnic minority population: A controlled intervention. <i>BMC Psychiatry, 16</i>, 211. <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • Duncan, D.T. & Hatzenbuehler, M.L. (2014). Lesbian, gay, bisexual, transgender hate crimes and suicidality among a population-based sample of sexual minority adolescents in Boston. <i>American Journal of Public Health, 104</i>, 272-278. • VanSickle, M., Tucker, J., Daruwala, S., & Ghahramanlou-Holloway, M. (2016). Development and psychometric evaluation of the Military Suicide Attitudes Questionnaire (MSAQ). <i>Journal of Affective Disorders, 203</i>, 158-165. 	<p>1. Quiz 13</p> <p>2. IPE journal/reflection</p>
<p>Week 15 4/15</p>	<p><u>Topics:</u> Competency 13: Framing suicide prevention within a strategic plan</p> <p><u>Required Readings:</u></p> <ul style="list-style-type: none"> • U.S. Surgeon General, 2012 National Strategy for Suicide Prevention: Goals and Objectives for Action (Overview) • Jed Foundation Campus Strategic Planning <p><u>Recommended Readings:</u></p> <ul style="list-style-type: none"> • School Counseling NSSI Protocol • UC Taskforce for Suicide Prevention 	<p>1. Quiz 14</p> <p>2. Presentation check-in</p>
<p>Week 16 4/22</p>	<p><u>Topics:</u> Suicide Prevention Strategic Planning</p> <p><u>Required Readings:</u> None</p> <p>No in-person meeting: Complete Suicide Prevention Resource Center (SPRC) Suicide Prevention Training Certificate – “A Strategic Planning Approach to Suicide Prevention”</p>	<p>1. SPRC Suicide Prevention Training (certificate)</p>
<p>Week 17 5/6</p>	<p>Final Exam: May 6, 2019 2:00-4:30pm</p> <p><u>Topics:</u></p>	<p>1. Course research post-test</p>

	Final Team-Based IPE Suicide Prevention Presentations	2. Final team presentations
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Appropriate Self-Disclosure: The content of this course can be challenging. The overall focus of the course, and therefore every assignment and discussion, concerns professional matters related to suicide prevention. Students should exercise sound judgment concerning appropriate self-disclosure in class, group discussions, written work products, and so forth. If a student has a question regarding the appropriate self-disclosure, you may consult the course professor.

University takes student health and well-being very seriously. The campus has available resources for students. If a student experiences mental health concerns or any related difficulties, you are encouraged to use University and related resources below.

INSERT University Counseling Info

INSERT University Student Health Info

[National Suicide Prevention Lifeline:](#) 1-800-273-8825

[Crisis Text Line:](#) Text HELP to 741741