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\textsuperscript{nd} 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

- **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?

**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.
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.
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

- A strong suicide prevention policy
- Protocols for helping students at risk
- Staff education and training
- Parent education and training
- Student education and engagement
Suicide Prevention in Schools

Grounding in school culture that supports enhancement of protective factors

Protocols that address postvention and crisis intervention

Intervention and assessment tools for at-risk students

Awareness inservices for faculty & staff; parent resource activities and materials; student curriculum

Administrative policies and protocols that reflect engagement with the larger community

SAMSHA Issue Brief 2019
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
# San Diego County Suicide Prevention Council

## Suicide Prevention: Resource Guide for Schools

### Resources

<table>
<thead>
<tr>
<th>School Support</th>
<th>Local</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HERE Now School Based PEI and Anti-BIAS Program Countywide</strong>&lt;br&gt;San Diego Youth Services, Spring Valley and East Communities Campus&lt;br&gt;Tel: 619-720-6677 ext. 3274&lt;br&gt;Cell: 619-405-8340&lt;br&gt;Fax: 619-258-0070&lt;br&gt;<a href="mailto:park@sdyouthservices.org">park@sdyouthservices.org</a>&lt;br&gt;www.sdycyouthservices.org&lt;br&gt;Introduction to Services:&lt;br&gt;The HEREx 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 building and working with individuals and groups of students who may be struggling emotionally and/or engaging in self-destructive or otherwise risky behaviors.</td>
<td><strong>The K-12 Toolkit for Mental Health Promotion and Suicide Prevention</strong>&lt;br&gt;The K-12 Toolkit for Mental Health Promotion and Suicide Prevention has been created to help schools comply with and implement AB 3294e: 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 Hoard Alliance website at <a href="http://www.hoardalliance.org/">http://www.hoardalliance.org/</a>.</td>
<td><strong>Preventing Suicide: A Toolkit for High Schools 2012 by SAMHSA</strong>&lt;br&gt;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.surfrhsa.gov/tools/learn-more/resources/preventing-suicide-toolkit">https://www.surfrhsa.gov/tools/learn-more/resources/preventing-suicide-toolkit</a></td>
</tr>
</tbody>
</table>

**San Diego County Office of Education**<br>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, training and technical assistance to the 42 School Districts to implement AB 3294e: [http://www.sdcde.org/boards/programs/studentsupport/Resources/SuicidePrevention.aspx](http://www.sdcde.org/boards/programs/studentsupport/Resources/SuicidePrevention.aspx) | **After a Suicide: A Toolkit for School**<br>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 webpage at [http://www.sprcenter.org/newResources/ApproachInvention](http://www.sprcenter.org/newResources/ApproachInvention) |
“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

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
Parent Information

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: ___________________________ Date ___________________________

Phone: ___________________________

Email: ___________________________

School Staff Member Signature: ___________________________

Date: ___________________________

http://suicideprevention.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
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 (Low, Moderate-High and Extreme Risk)

**LOW RISK**
- Has warning signs with no intent or plans
  - Notify parent/caregiver
  - Develop a Safety Plan
  - Provide referrals for appropriate services
  - Develop follow-up plan
  - Document event on Handle with Care Team Action Plan

**MODERATE to HIGH**
- Self-Harm Behaviors, Threats, Ideation, Plan, Means and/or Prior Attempts
  - Notify nearest HWCT member
  - Identify severity of situation
  - Notify parent/caregiver
  - No hospitalization required:
    - Develop a Safety Plan
    - Share plan with parent/caregiver and involved staff
    - Discuss means restriction
    - Document event on Handle with Care Team Action Plan
    - Debrief with all staff involved.
    - Provide for expression of feelings, concerns and suggestions.

**EXTREME RISK**
- Immediate threat
  - Call 911, PERT or dispatch
  - Ensure safety
  - Notify parent/caregiver
  - If student is hospitalized:
    - Follow up with caregiver
    - Determine next steps for extended absence
    - Develop an after-care plan for school including CICO
    - Document event on Handle with Care Team Action Plan

**DO NOT LEAVE STUDENT ALONE**

**TELL TRUSTED ADULT**
- Notify Administrator
- Inform member of Handle With Care Team (HWCT)
- Columbia Suicide Severity Rating Scale Completed

Follow up with staff, student and parent/caregiver.
**SUICIDE IDEATION DEFINITIONS AND PROMPTS**

<table>
<thead>
<tr>
<th>Since Last Contact</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ask questions that are bold and underlined</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ask Questions 1 and 2</strong></td>
<td></td>
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</tr>
<tr>
<td>1) <em>Have you wished you were dead or wished you could go to sleep and not wake up?</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2) <em>Have you actually had any thoughts of killing yourself?</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 3) *Have you been thinking about how you might do this?*  
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) *Have you had these thoughts and had some intention of acting on them?*  
As opposed to “I have the thoughts but I definitely will not do anything about them.” |     |    |
| 5) *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?* |     |    |
| 6) *Have you done anything, started to do anything, or prepared to do anything to end your life?*  
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. |     |    |

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**Columbia Severity Rating Scale**

**Pre-Screener**

[https://cssrs.columbia.edu/the-scale-in-action/schools/](https://cssrs.columbia.edu/the-scale-in-action/schools/)
Action Plan and Documentation Form

**Determined Low Risk based on CSSRS Screening**

- Suicidal ideation with low frequency, intensity and duration
- No intent (degree to which student has planned suicidal behavior)
- No plans
- Few risk factors
- Good self-control
- Presence of protective factors

<table>
<thead>
<tr>
<th>Date:</th>
<th>Student:</th>
<th>School:</th>
<th>Grade:</th>
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<tbody>
<tr>
<td></td>
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</table>

**Action Plan Checklist**

- Take every warning sign seriously
- Notify admin
- Notify parent/caregiver with student present if appropriate
- Complete Parent/Caregiver Notification Form
- Develop Safety Plan with student and parents if necessary
- Refer to primary care or mental health services if necessary
- Get parent signature on Authorization for Release and/or Disclosure of Information Form if necessary
- Communicate to appropriate staff and rest of HWCT and document
- Provide copy of Safety Plan with parents and involved staff
- Follow up with student and family as often as necessary until student is stable
- 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:
Student Safety Plan

Adapted from Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of

<table>
<thead>
<tr>
<th>Step 1: Warning Signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ____________________________________________________________________________________</td>
</tr>
<tr>
<td>2. ____________________________________________________________________________________</td>
</tr>
<tr>
<td>3. ____________________________________________________________________________________</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ____________________________________________________________________________________</td>
</tr>
<tr>
<td>2. ____________________________________________________________________________________</td>
</tr>
<tr>
<td>3. ____________________________________________________________________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step 3: People and social settings that provide distraction:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name_________________________________ Phone________________</td>
</tr>
<tr>
<td>2. Name_________________________________ Phone________________</td>
</tr>
<tr>
<td>3. Place______________________________ 4. Place________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step 4: People whom I can ask for help:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name_________________________ Phone________________</td>
</tr>
<tr>
<td>2. Name_________________________ Phone________________</td>
</tr>
<tr>
<td>3. Name_________________________ Phone________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step 5: Professionals or agencies I can contact during a crisis:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Contact Name____________________ Phone______________</td>
</tr>
<tr>
<td>2. SD Access &amp; Crisis Line 1-888-724-7240</td>
</tr>
<tr>
<td>3. National Suicide Prevention Lifeline 1-800-273-8255</td>
</tr>
<tr>
<td>4. TrevorLifeLine (LGBTQ) 1-866-488-7386</td>
</tr>
<tr>
<td>5. Crisis Text Line – Text “Courage” to 741741</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step 6: Making the environment safe:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ____________________________________________________________________________________</td>
</tr>
<tr>
<td>2. ____________________________________________________________________________________</td>
</tr>
</tbody>
</table>

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

https://drive.google.com/drive/folders/1HBV7VkBpZXusQp3UUve08-bOi6HJBnS
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

<table>
<thead>
<tr>
<th>Steps to Take in Immediate Aftermath</th>
<th>Staff Responsible</th>
<th>External Contacts (Phone Numbers)</th>
<th>Tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notify key individuals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Verify death</td>
<td>Lead:</td>
<td>Police:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Ensure that staff know how to respond to injuries and manage the campus for safety</td>
<td>Lead:</td>
<td>Medical examiner:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Notify superintendent's office</td>
<td>Lead:</td>
<td>Superintendent:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Notify district crisis team</td>
<td>Lead:</td>
<td>District crisis team:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td>Weekend/counselor/late night officers:</td>
<td></td>
</tr>
<tr>
<td>5. Notify schools attended by family members of the deceased</td>
<td>Lead:</td>
<td>Other schools in district:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Contact and coordinate with external mental health professionals</td>
<td>Lead:</td>
<td>Community mental health provider:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td>External crisis response professionals:</td>
<td></td>
</tr>
<tr>
<td>7. Reach out to and work with the family of the deceased</td>
<td>Lead:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Backup:</td>
<td></td>
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<tr>
<td>8. Initiate communication. Honor of Indian Education authorities notify the main office and initial authorities notify the principal.</td>
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</tbody>
</table>
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

<table>
<thead>
<tr>
<th>TIPS PREREQUISITE</th>
<th>INDIVIDUAL PRACTICE</th>
<th>WHOLE SCHOOL PRACTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trauma Informed Practice in Schools (TIPS) Prerequisite: Participant must attend this training to learn the impact of trauma on students.</td>
<td>Any school or district employee can attend individually and incorporate in their own daily practice.</td>
<td>Requires a school or district leadership team of 3 or more to lead the schoolwide implementation efforts.</td>
</tr>
</tbody>
</table>

- **Compassionate Schools**
  Deep understanding of learning and teaching as well as concepts of compassion, resiliency, and school-community partnerships.

- **Trauma Sensitive Schools**
  Trauma sensitive approaches to promote fundamental change in education culture.

- **Cultivating Emotional Resilience**
  Practical resources for cultivating resilience and healthy habits in educators that is based on research in emotional resilience, psychology, systems thinking and change management.

- **Trauma Informed Classroom Strategies for Teachers**
  Hands on strategies and approaches to utilize in the classroom.

- **Self-Care for Educators**
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
## California Healthy Kids Survey

### 7th, 9th and 11th Grade Students Who Scored Their School Environment High

<table>
<thead>
<tr>
<th></th>
<th>2014-15</th>
<th>2016-17</th>
<th>Cal-Well Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total School Supports</strong></td>
<td>29%</td>
<td>32%</td>
<td>+3%</td>
</tr>
<tr>
<td><strong>Caring Adults in School</strong></td>
<td>33%</td>
<td>35%</td>
<td>+2%</td>
</tr>
<tr>
<td><strong>High Expectations-Adults in Schools</strong></td>
<td>41%</td>
<td>43%</td>
<td>+2%</td>
</tr>
<tr>
<td><strong>Meaningful Participation at School</strong></td>
<td>11%</td>
<td>14%</td>
<td>+3%</td>
</tr>
<tr>
<td><strong>School Connectedness</strong></td>
<td>42%</td>
<td>49%</td>
<td>+7%</td>
</tr>
<tr>
<td><strong>Academic Motivation</strong></td>
<td>22%</td>
<td>24%</td>
<td>+2%</td>
</tr>
</tbody>
</table>
San Diego CHKS Survey Data  Trends for High School Students

- Chronic Sadness: 37% (2014-15), 35% (2016-17)
- Suicide Ideation: 21% (2014-15), 17% (2016-17)
% Principals reporting that the following topics were outlined in their school’s Comprehensive School Safety Plan

- Suicide prevention and post-vention: 58% (2018-19), 40% (2016-17)
- Wellness policy: 51% (2018-19), 53% (2016-17)
- Student mental health policies and…: 45% (2018-19), 36% (2016-17)
- Restorative practices: 37% (2018-19), 30% (2016-17)
- None of the above: 21% (2018-19), 14% (2016-17)

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

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                             (858) 569-5489