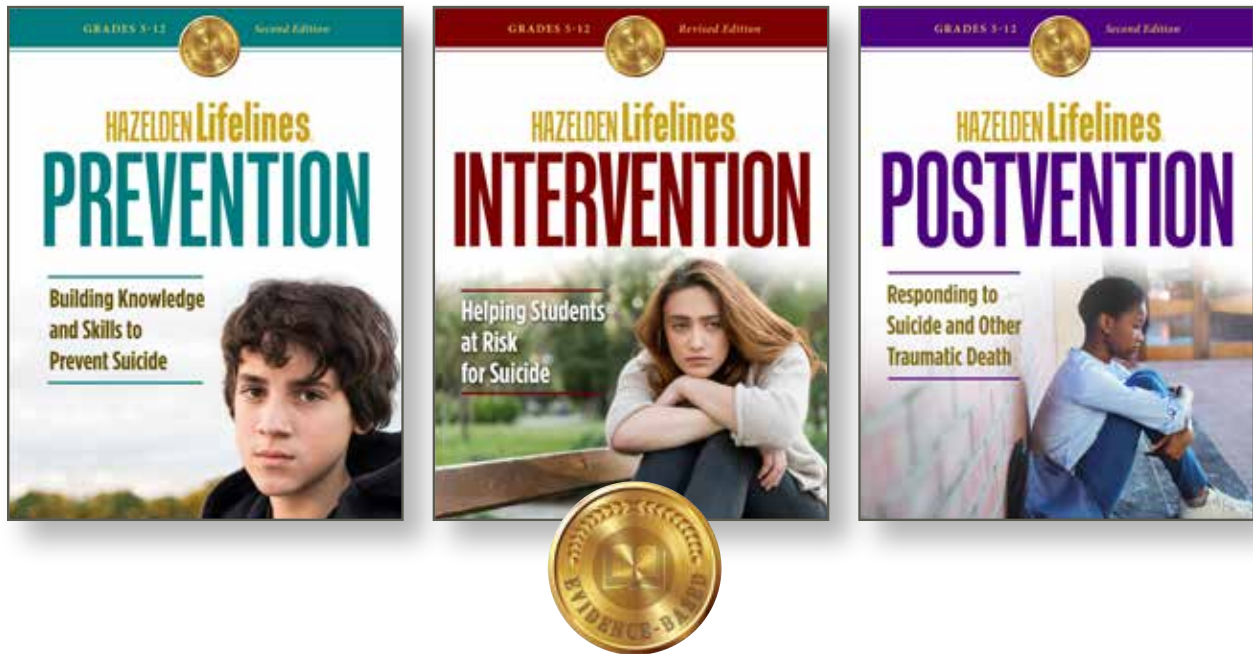


HAZELDEN LIFELINES®



SCOPE AND SEQUENCE



For more information about this program,
visit hazelden.org/bookstore or call 800-328-9000.

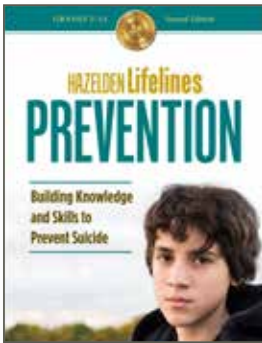
April 2018

What Is the Hazelden Lifelines Program?

The Hazelden Lifelines® trilogy—*Lifelines Prevention*, *Lifelines Intervention*, and *Lifelines Postvention*—is a comprehensive school-based suicide prevention program whose components address youth suicide from a three-pronged perspective. With the ultimate goal of creating a safe learning environment where all suicide is prevented, Hazelden Lifelines also recognizes that school staff need to be trained to identify and respond to potentially at-risk students and respond in the event a suicide does occur.

Here is a brief description of each of the three Hazelden Lifelines components:

Lifelines Prevention: Building Knowledge and Skills to Prevent Suicide

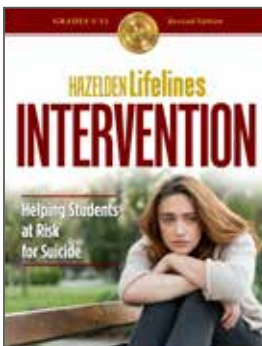


Designed for implementation in late elementary schools, middle schools, and high schools, *Lifelines Prevention* addresses the whole school community by providing suicide awareness resources for administrators, faculty and staff, parents and guardians, and students. The evidence-based curriculum portion of this program fits easily into health class programming and lesson plans.

Lifelines Prevention educates students on the facts about suicide and students' role in suicide prevention. It provides information about where to find suicide prevention resources in the school and community. Training materials are included for faculty and staff that provide accurate and practical information on identifying and referring students who might be at risk for suicide. *Lifelines Prevention* also includes a presentation for parents and guardians that answers questions about youth suicide and prevention and involves them in the school's suicide prevention activities.

Lifelines Intervention: Helping Students at Risk for Suicide

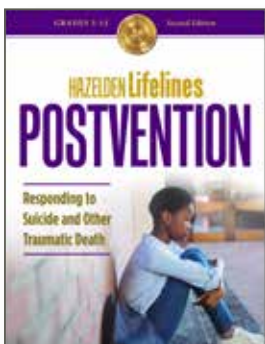
The *Lifelines Intervention* program is based on a four-tiered approach:



1. Addressing early identification and assessment of at-risk students
2. Making referrals to community resources for additional services
3. Considering what resources need to be in place for students returning to school after a suicide-related absence
4. Enhancing the protective factors that increase resilience and provide buffers from stress

Hazelden Lifelines’s authors firmly believe that schools are not mental health centers; the schools simply take the first step in helping direct students to the care they need through community mental health resources. Intended for school resource staff, the Lifelines Intervention program reviews a protocol for an assessment interview, outlines and demonstrates specific strategies for engaging students and their parents and guardians in the assessment process, and calls attention to special categories of students who might be at elevated suicide risk. It also provides direction for the establishment of programs that enhance student resilience.

Lifelines Postvention: Responding to Suicide and Other Traumatic Death



Lifelines Postvention is a comprehensive whole-school best-practices program specifically designed for primary and secondary school communities. This unique program educates everyone in the school community about how to successfully address and respond not only to suicide, but to any type of traumatic death that profoundly affects the school population. With in-depth references and detailed plans, this resource outlines a response strategy that reflects the challenges schools face in dealing with a death. Also included are references and support materials that allow school leaders to recognize and reduce the risk of suicide contagion (or “copycat”) behavior within the school.

**What Is the Process for Implementing
the Three-Part Hazelden Lifelines Program in Schools?**

Each component of the Hazelden Lifelines program can be purchased separately, but implementing all three components provides a more comprehensive approach. Just as the content of the three-part Hazelden Lifelines program is presented in a structured manner, the order for implementing the three components is clearly delineated. Implementation training from Hazelden Publishing trainers, *although not required*, is highly recommended. Training in the trilogy of *Lifelines Prevention*, *Lifelines Intervention*, and *Lifelines Postvention* generally occurs during the course of an academic year, although the schedule of training can be adjusted to an individual school’s needs. For more information on how to receive training for your school, contact Hazelden Publishing at 800-328-9000 or visit www.hazelden.org/lifelines_national_training.page.

Both the full program and training are rolled out in the following order:

1. *Lifelines Postvention* is the initial six-hour training day that includes selected administrators and staff who have been designated to be a part of the school's crisis team. This training reviews current school protocols for responding to traumatic deaths including suicide, outlines a best-practices model, and provides specific tools to assist a school in model implementation. This training is presented first because of its focus on the tangible policies and protocols that need to be in place to ensure administrative commitment to a comprehensive approach to suicide prevention. In a school that has recently experienced a traumatic loss event, starting with *Lifelines Postvention* can also be especially helpful.
2. *Lifelines Intervention* is scheduled next, primarily because schools usually see an increase in referrals to school resource staff after the *Lifelines Prevention* curriculum is implemented. *Lifelines Intervention* training is done over one to one-and-a-half days and is directed toward school mental health staff such as counselors, psychologists, and social workers. Additional staff may also be included at the discretion of school administration. This training reviews the implications of developmental issues on intervention techniques and provides an age-appropriate, conversational model for assessing suicide risk, engaging parents and guardians in the process, and making referrals.
3. Training for *Lifelines Prevention* is also presented over one to one-and-a-half days to selected school staff who will teach the *Lifelines Prevention* curriculum to late elementary, middle school, or high school students. In addition, content for suicide awareness presentations to school faculty and staff and for parents and guardians is reviewed. The process of curriculum implementation is also discussed.

Is Hazelden Lifelines an Evidence-based Program?

Hazelden Lifelines is an evidence-based program. It has been identified as a promising program by the Suicide Prevention Resource Center (SPRC) and is included in the National Registry of Evidence-based Programs and Practices (NREPP). One of the first school-based suicide prevention programs in the country, Lifelines has been adapted and changed to reflect both program evaluation and increased knowledge about youth attitudes toward seeking help.

Lifelines' content is grounded in several areas of research related to adolescent suicide prevention. It reflects research that determined most suicidal youths confide their concerns more often to peers than to adults and that some adolescents,

particularly males, do not respond to troubled peers in empathic or helpful ways. It also addresses the reality that as few as 25 percent of peer confidants tell an adult about a troubled or suicidal peer and that school-based adults are often adolescents' last choice as confidants for personal concerns.¹

Why Should Schools Address the Issue of Teen Suicide?

For many students, suicide is not something that happens to other people—they are extremely familiar with its unfortunate reality, even as early as elementary school.

Since the field of youth suicide research began in the 1980s, when the rate of suicide for ten- to twenty-four-year-olds jumped almost 300 percent from what it had been in the 1950s, systematic attempts have been made to collect accurate data about what is a significant public health problem.² The primary source of national data collection is the Centers for Disease Control and Prevention (CDC, www.cdc.gov). The CDC reports that suicide in the United States in 2015 was the second leading cause of death for young people ages ten to twenty-four, following accidents.³ But data about deaths by suicide only tell a small part of the story. Everyone hopes a school will not lose a member of their community to suicide, but that doesn't mean that suicide isn't a problem. Let's look at some other data.

The CDC distributes its Youth Risk Behavior Surveillance Survey (YRBSS) to middle schools and high schools every two years. Data related to suicide risk comes from responses to the following five questions; the percentage listed after the question is the percentage of ninth- through twelfth-grade students in the sample of more than 15,000 who answered that question positively:⁴

- During the past twelve months, did you feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities? (29.9 percent)
- During the past twelve months, did you ever **seriously** consider attempting suicide? (17.7 percent)
- During the past twelve months, did you **make a plan** about how you would attempt suicide? (14.6 percent)
- During the past twelve months, how many times did you **actually attempt** suicide? (8.6 percent responded that they attempted one or more times)
- **If you attempted suicide** during the past twelve months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or a nurse? (2.8 percent)

Extrapolating these percentages to a typical school population provides a clearer picture of how much suicide risk affects schools. Remember, since most suicide attempts by youth remain private, only a very small percentage—2.8 percent in this instance—actually get any treatment.

Unfortunately, the news about middle school students isn't much better. Since 1999, there has been an almost 25 percent increase in suicide attempts among middle school students. And it is a growing problem for children in elementary school as well.⁵

As national data clearly demonstrate, these at-risk youths are sitting in classrooms all over the country. Ignoring their presence does not make them go away. Nor will doing so help their peers who may realize something is wrong but don't know how to help. Pretending the problem doesn't exist will not provide support or direction to their teachers, who also sense there is a problem but are uncertain whether to intervene. Although there may be a lot about suicide that we don't understand, what we can say for sure is that students who are thinking about dying are not concentrating on academic studies.

Very few suicides or suicide attempts take place in schools. But many young people who are at risk for suicide exhibit warning signs in school, and the ability to recognize and act on these warning signs could prevent death or injuries and reduce emotional suffering.

A suicide prevention education program is a pragmatic, proactive approach that supports the prevention of self-destructive behavior by students. It is grounded in the perspective of the school as a competent community where school officials clearly and consistently convey the vision that all members of the school care deeply about the safety and positive development of each other.

As stated by the Carnegie Task Force on Education, "School systems are not responsible for meeting every need of their students, but when the need directly affects learning, the school must meet the challenge."⁶ By addressing teen suicide in a focused but comprehensive way, a school system can meet this challenge without overstepping its boundaries and becoming a mental health clinic. It can stand as a resource to potentially at-risk students by letting them know that the entire school community takes the problem of suicide seriously and has committed staff time and resources to addressing suicidal behavior.

Can Talking about Suicide in a School Cause More Suicides?

Absolutely not! There are four main arguments against the myth that talking with young people about suicide will “plant” the idea:

1. Students are already well aware of suicide from their experience with suicidal peers and the media.⁷
2. In the authors’ thirty years of hotline experience and twenty years of school-based suicide prevention programming, there has never been a case of planting the idea. The facts about stimulation of suicidal behavior are best summarized by the following quotes from the Centers for Disease Control and Prevention: “There is no evidence of increased suicidal ideation or behavior among program participants”⁸ and “Furthermore, numerous research and intervention efforts have been completed without any reports of harm.”⁹
3. Several evaluations of school-based programs show increased likelihood that program participants will tell an adult about a suicidal peer as opposed to keeping that information to themselves.¹⁰
4. Two long-term follow-up studies in counties where suicide prevention programs were provided show reductions in youth suicide rates in the county, although state rates remained unchanged or increased for the same period of time.¹¹

Remember, best-practice educational programs are not aimed at suicidal feelings per se, but instead emphasize knowing the warning signs, taking action, and obtaining help.

Can Lifelines Be Implemented in a Non-School Setting?

Components of Hazelden Lifelines can be used in non-school settings. The faculty and staff presentation has been adapted for use with caregivers in youth-based organizations such as Boy Scouts or Girl Scouts or in faith-based youth groups. It has also been delivered at meetings of school principals and other school administrative personnel as part of a general community education process or as part of an effort to inform school personnel of the need for and the availability of comprehensive suicide education programs.

The student curriculum can also be used with young people in community groups and organizations. The caveat with such adaptations, however, is that when curriculum activities are altered, they may not meet criteria for either impact or effectiveness.

Lifelines Prevention Curriculum

Grade 5-6 Scope and Sequence

By the end of each session, students will be able to do the following:

<p>Session 1: Suicide Isn't Silly</p>	<p>Session 2: Friends Help Friends</p>	<p>Session 3: Asking for Help Takes Courage</p>	<p>Session 4: Practicing What We've Learned</p>
<ul style="list-style-type: none"> • Explain the reasons for a unit on suicide • Explain the way the assumptions we make about suicide affect our problem-solving • Identify basic facts about suicide • Identify types of helpful versus unhelpful problem-solving 	<ul style="list-style-type: none"> • Identify the reasons for not keeping suicide a secret • Describe the difference in reactions to online posts or texts versus in-person interactions • Explain why a person should take any communication about suicide—whether in person or online—seriously • Explain the importance of involving a trusted adult in the help-seeking process 	<ul style="list-style-type: none"> • Identify caring behaviors • Interpret help-seeking as a courageous act • Describe the characteristics of helpful people • Identify in-school support resources 	<ul style="list-style-type: none"> • Identify at least one trusted adult • Demonstrate willingness to help themselves or a peer by signing a help-seeking pledge • Explain the purpose of the Lifelines Card

Grade 7-10 Scope and Sequence

By the end of each session, students will be able to do the following:

Session 1: When Is a Friend in Trouble?	Session 2: How Do I Help a Friend?	Session 3: Where Can I Go to Get Help?	Session 4: How Can I Use What I've Learned?
<ul style="list-style-type: none"> • Explain the reasons for participating in a unit on suicide • Identify possible personal reactions to a situation involving a peer's suicidal behavior • Explain the ways in which our feelings about suicide influence our actions • Identify basic facts about suicide 	<ul style="list-style-type: none"> • Identify specific warning signs of suicide in themselves and others • Organize warning signs around the FACTS acronym • Explain the three basic suicide intervention steps • Describe how to ask someone about suicide 	<ul style="list-style-type: none"> • Describe how to implement the steps of a successful peer intervention • Define traits of helpful people • Identify school resources and procedures for responding to suicidal students 	<ul style="list-style-type: none"> • Demonstrate the ability to help a troubled friend through scripted role plays • Demonstrate a willingness to help themselves or a troubled friend by signing a help-seeking pledge • Explain the purpose of the Lifelines Card

Grade 11-12 Scope and Sequence

By the end of each session, students will be able to do the following:

Session 1: Do You Need a Crystal Ball to See the Future?	Session 2: How to Get from Here to There
<ul style="list-style-type: none"> • Explain the reasons for a unit on the transition after high school • Identify the key intervention steps from the grades 7–10 Lifelines Prevention curriculum • Identify their assumptions about the transition after high school 	<ul style="list-style-type: none"> • Explain how their expectations about life after high school may be unrealistic • Assess the extent of their current support system • Identify where to find resources for help after high school

Related National Academic Standards

Grade 5

Students will

- Describe the relationship between healthy behaviors and personal health
- Identify examples of emotional, intellectual, physical, and social health
- Describe ways in which safe and healthy school and community environments can promote personal health
- Describe ways to prevent common childhood injuries and health problems
- Identify how peers can influence healthy and unhealthy behaviors
- Describe how the school and community can support personal health practices and behaviors
- Locate resources from home, school, and community that provide valid health information
- Demonstrate effective verbal and nonverbal communication skills to enhance health
- Demonstrate refusal skills that avoid or reduce health risks
- Demonstrate nonviolent strategies to manage or resolve conflict
- Demonstrate how to ask for assistance to enhance personal health
- Identify health-related situations that might require a thoughtful decision
- Analyze when assistance is needed in making a health-related decision
- List healthy options to health-related issues or problems
- Predict the potential outcomes of each option when making a health-related decision
- Choose a healthy option when making a decision
- Describe the outcomes of a health-related decision
- Demonstrate a variety of healthy practices and behaviors to maintain or improve personal health
- Demonstrate a variety of behaviors to avoid or reduce health risks
- Encourage others to make positive health choices

Grade 6

Students will

- Analyze the relationship between healthy behaviors and personal health
- Describe the interrelationships of emotional, intellectual, physical, and social health in adolescence
- Describe ways to reduce or prevent injuries and other adolescent health problems
- Examine the likelihood of injury or illness if engaging in unhealthy behaviors
- Examine the potential seriousness of injury or illness if engaging in unhealthy behaviors
- Describe how peers influence healthy and unhealthy behaviors
- Analyze how the school and community can affect personal health practices and behaviors
- Determine the accessibility of products that enhance health
- Describe situations that may require professional health services
- Locate valid and reliable health products and services
- Apply effective verbal and nonverbal communication skills to enhance health
- Demonstrate refusal or negotiation skills that avoid or reduce health risks
- Demonstrate effective conflict management or resolution strategies
- Demonstrate how to ask for assistance to enhance the health of self or others
- Identify circumstances that can help or hinder healthy decision-making
- Determine when health-related situations require the application of a thoughtful decision-making process
- Distinguish when individual or collaborative decision-making is appropriate
- Distinguish between healthy and unhealthy alternatives to health-related issues or problems
- Predict the potential short-term impact of each alternative on self or others
- Analyze the outcomes of a health-related decision
- Demonstrate a variety of healthy practices and behaviors that will maintain or improve personal health
- Demonstrate a variety of behaviors to avoid or reduce health risks
- State a health-enhancing position on a topic and support it with accurate information
- Demonstrate how to influence and support others to make positive health choices
- Work cooperatively to advocate for healthy individuals, families, and schools

Grade 6-8

Students will

- Analyze the relationship between healthy behaviors and personal health
- Describe the interrelationships of emotional, intellectual, physical, and social health in adolescence
- Describe ways to reduce or prevent injuries and other adolescent health problems
- Examine the likelihood of injury or illness if engaging in unhealthy behaviors
- Examine the potential seriousness of injury or illness if engaging in unhealthy behaviors
- Describe how peers influence healthy and unhealthy behaviors
- Analyze how the school and community can affect personal health practices and behaviors
- Determine the accessibility of products that enhance health
- Describe situations that may require professional health services
- Locate valid and reliable health products and services
- Apply effective verbal and nonverbal communication skills to enhance health
- Demonstrate refusal or negotiation skills that avoid or reduce health risks
- Demonstrate effective conflict management or resolution strategies
- Demonstrate how to ask for assistance to enhance the health of self or others
- Identify circumstances that can help or hinder healthy decision-making
- Determine when health-related situations require the application of a thoughtful decision-making-process
- Distinguish when individual or collaborative decision-making is appropriate
- Distinguish between healthy and unhealthy alternatives to health-related issues or problems
- Predict the potential short-term impact of each alternative on self or others
- Analyze the outcomes of a health-related decision
- Demonstrate a variety of healthy practices and behaviors that will maintain or improve personal health
- Demonstrate a variety of behaviors to avoid or reduce health risks
- State a health-enhancing position on a topic and support it with accurate information
- Demonstrate how to influence and support others to make positive health choices
- Work cooperatively to advocate for healthy individuals, families, and schools

Grades 9-10

Students will

- Predict how healthy behaviors can affect health status
- Describe the interrelationships of emotional, intellectual, physical, and social health
- Propose ways to reduce or prevent injuries and health problems
- Analyze personal susceptibility to injury, illness, or death if engaging in unhealthy behaviors
- Analyze the potential severity of injury or illness if engaging in unhealthy behaviors
- Analyze how peers influence healthy and unhealthy behaviors
- Analyze the influence of technology on personal and family health
- Evaluate how the school and community can affect personal health practice and behaviors
- Use resources from home, school, and community that provide valid health information
- Determine when professional health services may be required
- Access valid and reliable health products and services
- Use skills for communicating effectively with family, peers, and others to enhance health
- Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks
- Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others
- Demonstrate how to ask for and offer assistance to enhance the health of self and others
- Examine barriers that can hinder healthy decision-making
- Determine the value of applying a thoughtful decision-making process in health-related situations
- Justify when individual or collaborative decision-making is appropriate
- Generate alternatives to health-related issues or problems
- Predict the potential short-term and long-term impact of each alternative on self and others
- Defend the healthy choice when making decisions
- Evaluate the effectiveness of health-related decisions

- Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others
- Demonstrate a variety of behaviors to avoid or reduce health risks to self and others
- Demonstrate how to influence and support others to make positive health choices

Grades 11-12

Students will

- Predict how healthy behaviors can affect health status
- Describe the interrelationships of emotional, intellectual, physical, and social health
- Propose ways to reduce or prevent injuries and health problems
- Analyze personal susceptibility to injury, illness, or death if engaging in unhealthy behaviors
- Analyze the potential severity of injury or illness if engaging in unhealthy behaviors
- Analyze how peers influence healthy and unhealthy behaviors
- Evaluate how the school and community can affect personal health practice and behaviors
- Use resources from home, school, and community that provide valid health information
- Determine when professional health services may be required
- Access valid and reliable health products and services
- Use skills for communicating effectively with family, peers, and others to enhance health
- Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks
- Demonstrate strategies to prevent, manage, or resolve interpersonal conflicts without harming self or others
- Demonstrate how to ask for and offer assistance to enhance the health of self and others
- Examine barriers that can hinder healthy decision-making
- Determine the value of applying a thoughtful decision-making process in health-related situations
- Justify when individual or collaborative decision-making is appropriate
- Generate alternatives to health-related issues or problems

- Predict the potential short-term and long-term impact of each alternative on self and others
- Defend the healthy choice when making decisions
- Evaluate the effectiveness of health-related decisions
- Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others
- Demonstrate a variety of behaviors to avoid or reduce health risks to self and others
- Demonstrate how to influence and support others to make positive health choices

Source: *National Health Education Standards—Achieving Excellence*, Joint Commission on National Health Education Standards, 2004. <https://www.cdc.gov/healthyschools/sher/standards/index.htm>.

Notes

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