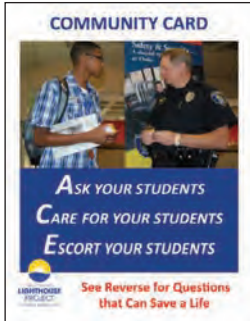


THE COLUMBIA IN ACTION

Reducing Liability & Workload While Saving Lives

Why C-SSRS?

- Reduce Suicide
- Reduce Workload
- Reduce Liability



The C-SSRS provides valuable risk identification, protecting both students and universities against liability. Recently, the **Massachusetts Supreme Court** determined that schools are legally required to protect students when they express intent to act on suicidal thoughts (C-SSRS Questions 4 or 5) or if there has been a suicide attempt at school or soon before matriculation that they have knowledge of (Question 6).

Previously, it was "simply an officer, ambulance relying on their gut feeling and maybe sometimes transporting somebody to the emergency because of liability reasons. We don't want to leave somebody. [The C-SSRS] changes the game to the extent that now they have something to hang their hat on."

Rory Beil, Project Manager, ReThink Mental Health and Clay County Public Health

The C-SSRS as policy has been successfully implemented in many schools and systems across all 50 states, many with top-down policy (e.g. every teacher in Tennessee) and is an integral piece of suicide prevention programs internationally (e.g. teachers in Israel).

Follow this link or scan this code to watch a short demonstration of how to ask questions with the C-SSRS screener:

<https://tinyurl.com/CSSRSDemoVideo>



At Centerstone, one of the largest behavioral healthcare providers in the United States, the suicide rate among its Tennessee patients was lowered by 65% within the first 20 months of implementation.

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After putting the C-SSRS in everybody's hands, the U.S. Marine Corps saw a 22% reduction in the number of service member suicides.

.....

Utah reversed an almost decade-long increase in suicide deaths.

The Columbia is the nationally adopted common language for talking about suicide, fostering an essential protective and promotive factor for all youth: “the belief held by students that adults and peers in the school care about their learning as well as about them as individuals...” (CDC, 2009)

Build Connections by Simply Asking

Just asking the questions is a positive action. When we ask a student or a friend how they’re doing, it signals that someone cares about them. This simple action promotes connectedness – a critical protective factor against suicide and violence.



The Columbia Protocol creates a common language. Having a common language with clear definitions of suicidal thoughts and behaviors is critical for developing school safety and response protocols. Schools distribute the Columbia Community Cards to teachers, coaches, parents and students, so that **everyone is empowered to ask about suicide**.

THE POWER OF ASKING

High-risk students who get screened are less distressed and suicidal than high-risk students who do not receive screening. (Gould et al, 2005)



MYTHS vs. FACTS

“Asking a depressed person about suicide may put the idea in their heads”

- ▶ Asking does **not** suggest suicide, or make it more likely.
- ▶ Open discussion is more likely to be experienced as relief than intrusion.
- ▶ Depressed students who get screened are less distressed and suicidal than high-risk students who are not screened (Gould et al, 2005).

“There’s no point in asking about suicidal thoughts... if someone is going to do it, they won’t tell you”

- ▶ Many people will be honest when asked, even if they would never bring it up themselves.
- ▶ Many give hints to friends or family, even if they don’t tell a counselor or clinician.
- ▶ Ambivalence, contradictory statements and behavior are common.

“Someone that makes suicidal threats won’t really do it, they’re just looking for attention”

- ▶ Those who talk about suicide or express thoughts about wanting to die are most at risk of a real suicide attempt.
- ▶ 80% of people who die by suicide gave some indication or warning first.

Suicide & Youth in the U.S.

- Approximately 17% of high school students (2015) and 13% of college students (2018) reported seriously considering suicide within the prior year (CDC)
- Each year, 8% of high school students (2015) and 2% of college students (2018) make one or more suicide attempts (CDC)
- An estimated 51,518 adolescents are hospitalized each year for self-inflicted injuries, resulting in total annual costs of approximately \$477,580,000 (CDC 2010)
- Fewer than 20% of students who die by suicide received any campus-based mental health services