



Wisdom2Action  
La jeunesse au  
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# YOUTH LED SUICIDE PREVENTION STRATEGIES

## WISDOM2ACTION

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# 1. EXECUTIVE SUMMARY

Suicide is one of the leading causes of death among young people in Canada and beyond (Kutcher & Szumilas, 2008), equating to more deaths among youth than from AIDS, cancer, and all other natural causes combined (Canadian Association for Suicide Prevention [CASP], 2004). Many youth suicide prevention programs have been developed in response to this concerning trend, ranging in focus from school-based curriculum and awareness campaigns for all youth, to those that focus specifically on high-risk groups. Many of these programs are intended to strengthen protective factors, which are those that reduce the risk of suicide, such as social connectedness, self-esteem, ability to adapt to changing environments, and problem-solving skills, to name but a few (Suicide Prevention Resource Centre [SPRC], 2011). However, the majority of these programs to date have been developed and delivered to youth, rather than by youth (Lindquist-Grantz, 2018).

A growing evidence base suggests that engaging youth as meaningful and active partners in program development helps to strengthen the protective factors mentioned above, for being valued contributors and decision makers is in and of itself empowering (Checkoway, 2011). Furthermore, the benefits of youth engagement reach beyond those youth involved in the development and implementation of suicide prevention initiatives, extending to the youth for whom those programs serve. This is in part because youth are best positioned to respond to the complex realities of their peers (Chung-Do et al., 2011), and because youth are more likely to approach a peer than an adult when experiencing thoughts of suicide (Together to Live, 2016). Of particular value to First Nations, Inuit and Metis communities are those youth-driven prevention programs that leverage culture, language, and traditional practices. Suicide prevention programs that are conceptualized, developed and prioritized by Indigenous communities, including youth, ensure that the programs are responsive to local cultural meanings, and adaptive to local historical, community, and cultural practices (Wexler & Gone, 2012).

With the increasing recognition of the potential for youth-driven suicide prevention initiatives, the purpose of this document is to present a compendium of youth-led and/or youth co-created suicide prevention initiatives for service providers, researchers, and youth, so they can glean insights from current examples of youth-driven work. To do so, we conducted an environmental scan of suicide prevention strategies that are encompassed by four broad categories: (1) peer-led suicide prevention; (2) suicide prevention or intervention training, either for or by youth; (3) online resources; and (4) prevention strategies with a focus on embracing life, language, and culture.

A search of peer-reviewed and grey literature was conducted, in addition to key informant interviews, and two consultations with the Wisdom2Action Planning Committee, a multi-disciplinary and inter-sectoral group of stakeholders. The document will undergo further review at the national forum on youth-led suicide prevention that Wisdom2Action is currently planning, titled W2A Vancouver: Embrace Life, and will remain active until partners and stakeholders are satisfied with the final product. With this in mind, thirty-nine relevant resources have been identified thus far, a number which will likely increase with ongoing consultations. This number includes 14 youth-led and/or youth-co-created programs; 5 programs that are centred on the concept of embracing life, culture, and language; 13 suicide prevention training programs that are either for youth, and/or are developed or delivered by youth; and 7 online resources that were co-created by youth.

**Results (in more detail, when applicable)**

**Recommendations (when applicable)**

## 2. INTRODUCTION

### YOUTH SUICIDE: A SNAPSHOT

With suicide being one of the leading causes of death among youth worldwide, and second only to unintentional injuries in Canada (Statistics Canada, 2013), it is a significant and ever-increasing concern for young people, youth serving agencies, governments, and others who support youth through policy and programs. In Canada alone, suicides accounted for just under a quarter of all deaths in people between the ages of 15-24 in 2015 (Findlay, 2017). These rates tend to increase dramatically in the years following puberty (Kutcher, Wei, & Behzadi, 2017), as youth are often exposed to an overwhelming number of stressors that can manifest as risk factors, making youth vulnerable to suicide ideation (SPRC, 2011). Such risk factors may be born out of school pressures, experience being bullied, from social isolation, family challenges, histories of abuse, and experiences of discrimination, to name but a few (Healthy Child Manitoba, 2014; White, 2016). The high suicide rates may also be attributed to historical trauma and a loss of culture and identity, particularly among Indigenous youth (Barker, Goodman, & DeBec, 2017; Kral, 2016), who experience a disproportionately high rate of suicide compared to the general population both in Canada and around the world (White, 2016;

Kral, 2016).

Indeed, the rate of suicide among First Nations, Inuit, and Métis persons between the ages of 10-29 in Canada is five to six times greater than in non-Indigenous youth (White, 2016). For more granularity, statistics from the 2012 Aboriginal Peoples Survey indicate that suicide rates are highest among Canada's Inuit population (up to 11 times the national rate), followed by First Nations (five to six times the national rate), and then Métis (two times the national rate) (Statistics Canada, 2016; Parachute Canada, 2016; Crawford, 2016). While the prevalence of lifetime suicidal thoughts has not proven statistically different between young men and young women, there is a trend towards a higher prevalence of suicidal thoughts in Indigenous women between the ages of 18-25 (Kumar & Nahwegahbow, 2016). This is consistent with the general Canadian population, for while approximately three quarters of youth suicides occur in males aged 15-24 (Rhodes, 2013), girls are twice as likely to consider suicide than boys (Kids Help Phone, 2016), and are more likely to exhibit non-fatal suicidal behaviours (Rhodes, 2013).

### THE TRADITIONAL FOCUS OF SUICIDE PREVENTION INITIATIVES

In response to the growing number of youth suicides, a variety of suicide prevention strategies and intervention training programs have been developed over recent decades, many of which are based within schools and communities. These programs typically fall within three overarching categories, the first being universal programs, or population-based prevention programs that focus on increasing knowledge and behaviours, and reducing barriers to care (Institute of Medicine, 2002). These include such initiatives as restricting means to suicide through policy (e.g. weapons), implementing messaging campaigns, or embedding suicide prevention into school curriculum (Institute of Medicine, 2002). Secondly, there are selective strategies, which address groups at high risk of suicide (Institute of Medicine, 2002). These interventions often involve

'gatekeeper training' for adults, to strengthen their ability to recognize youth at risk of suicide, and refer them to appropriate care (Sareen et al., 2013). Finally, indicated strategies are those that target individuals who are showing early signs of suicide potential (Together to Live, n.d.).

Many of these developments focus on fortifying the protective factors for suicide in youth, such as their social connectedness; their problem-solving skills, coping skills, and adaptability to changing environments; and their self-esteem and sense of self-identity, among others (SPRC, 2011). However, they have to date been predominantly delivered to youth, by adults, and youth have largely been excluded from suicide program development and implementation (Lindquist-Grantz, 2018).

## THE VALUE OF PEER-LED AND/OR CO-CREATED INITIATIVES

As was previously mentioned, many suicide prevention programs aim to bolster protective factors against suicide in youth, such as problem-solving skills, self-esteem, and relationship building with family, friends, and the community (SPRC, 2011). One of the benefits of meaningfully engaging youth in either the design or implementation of programs, or having them initiate programs on their own, is that the process of their engagement is in and of itself empowering (Checkoway, 2011). Meaningful youth engagement can be defined as that which promotes success, is challenging, is believed to be important, and is experienced as fun (Armstrong & Manion, 2015), and which incorporates sustained involvement of young people in an activity that has a focus beyond themselves (Pancer, Rose-Kransnor, & Loiselle, 2002). The result of said engagement, is that youth have the opportunity to build their confidence and self-esteem, to reflect on their own strengths and those of their community, and to build relationships with staff, volunteers, and community members (Hoffman & Staniforth, 2007). Those suicide protective factors therefore become strengthened by way of having youth as valued contributors and decision-makers, as opposed to mere recipients of information.

Youth-led and co-created suicide prevention initiatives adhere to the theory of Positive Youth Development (PYD), an approach that suggests youth engagement activities ought to foster their physical, social, intellectual, emotional, and spiritual development (Region of Waterloo Public Health and Emergency Services [RWPHE] n.d.). Utilization of the theory ensures that the programs, services, resources, trainings, or otherwise, are addressing issues that youth identify as important and meaningful, and which provide practical skill-building opportunities to help them flourish into healthy adults (RWPHE, n.d.). Engaging youth in the development of suicide prevention strategies in partnership with adults, also serves to dismantle imbalances of power between youth and adults, bolstering their autonomy and again, strengthening protective factors for suicide (Registered Nurses Association of Ontario, 2010). Beyond the direct benefits to the youth involved with creating and/or leading these programs, there is also a growing acknowledgement that their engagement can increase the effectiveness of youth suicide prevention initiatives (Wyman et al., 2010). As youth themselves, they are best

positioned to know how to respond to the complex realities faced by their peers, and to know what suicide prevention activities youth would be most interested in participating in (Chung-Do et al., 2011). Furthermore, youth are more likely to confide in their peers when experiencing thoughts of suicide than they are to approach an adult (Together to Live, 2016), which is yet another impetus to enhance not only youth-developed, but youth-led suicide prevention initiatives.

Of particular value to First Nations, Inuit and Métis communities are those youth-driven prevention programs that leverage culture, language, and traditional practices. Rather than only addressing the 'problems' that have led youth to consider suicide, initiatives that focus on embracing life reflect a strengths-based approach, whereby prevention strategies focus on the strengths and resources at the individual and community level, allowing youth to identify opportunities and discover hope (Hammond & Zimmerman, 2012). An emerging evidence base suggests that culture can be leveraged to mitigate the high suicide rates seen in First Nations, Inuit and Métis youth, in what is increasingly being referred to as "culture as treatment" (Barker et al., 2017). This paradigm encourages the reclamation of Indigenous culture through exploring, re-connecting, or re-creating Indigenous identities, as a way to reduce suicides among Indigenous youth, and to promote their mental health and wellbeing (Baker et al., 2017).

Suicide prevention programs that are conceptualized, developed and prioritized by Indigenous communities, including youth, are particularly important processes of cultural reclamation and healing. This is largely because conventional Western approaches to Indigenous mental health have often assumed that suicide is a clinical outcome to a mental illness, rather than an undesired social consequence of the cultural disruptions introduced by colonialism (Wexler & Gone, 2012). Thus, conventional programs can implicitly perpetuate neocolonial practices, whereas having Indigenous communities take ownership over their own suicide prevention programming allows said programming to be responsive to local cultural meanings, and adaptive to local historical, community, and cultural practices (Wexler & Gone, 2012).

## SUICIDE CONTAGION

Suicide contagion is an important concept in suicide prevention initiatives. It is the influencing of suicidal ideation or attempts by individuals that is linked to exposure to another person's death by suicide. Adolescents seem more susceptible to this phenomenon, with 1% to 5% of adolescent suicides possibly being linked to suicide contagion (Gould et al., 1990; O'Carroll & Mercy, 1990; Mercy et al., 2001). The reasons for this effect are many, and include increased attention by media and on social media, imitation, community awareness, and glorification of suicide and the specific death (O'Carroll, Crosby, Mercy, Lee, & Simon, 2001; CDC, 1988; Pirkis, Blood, Beautrais, Burgess, & Skehan, 2006).

In the development of this report, there has been discussion about the issue of suicide contagion

when looking at engaging youth in suicide prevention work, and the need to address the risk of suicide contagion. There is also potential for looking at how youth engagement can mitigate the risk of suicide contagion by empowering young people to create change in their communities. There has been limited research on the effect of youth or community engagement in suicide prevention and its effect on contagion. In Ireland, researchers measured the effect of large-scale public participation in suicide prevention and awareness activities, and suggest that the creation of a group identity around the issue of suicide can reduce isolation and stigma (Kearns, Muldoon, Msetfi & Surgenor, 2017). Other research has indicated that youth engagement can mitigate suicidal risk (Armstrong & Manion, 2006).

## PURPOSE OF DOCUMENT

Given the increasing recognition of the potential of youth-driven suicide prevention initiatives, we conducted an environmental scan to identify youth-led and/or co-created suicide prevention practices and resources both within Canada and internationally. Of particular interest were suicide prevention strategies that are encompassed by four broad categories: (1) peer-led suicide prevention; (2) suicide prevention or intervention training, either for or by youth; (3) online resources; and (4) prevention strategies with a focus on embracing life, language, and culture. It should be noted that there are likely a number of health promotion and mental wellness programs that prioritize youth engagement, and which undoubtedly contribute to youth suicide prevention. However, for the purposes of this report, we have chosen to specifically focus on those programs, trainings, and resources that give explicit mention to suicide prevention, either as an impetus for its development, or as an element of its implementation.

Thus, the purpose of this document is to present a compendium of youth-led and/or youth co-created suicide prevention initiatives for service providers, researchers, and youth, so they can glean insights from current examples of youth-driven work. By doing so, the aim is to increase the number of youth-led and/or co-created suicide prevention programs, resources, and trainings offered in communities, so that more youth can be empowered as peer and community leaders in suicide prevention.

### 3. METHODOLOGY

A preliminary Internet search was performed to identify the nature of available resources, and the direction to take this environmental scan to ensure its utility for youth-facing organizations and sectors. Through a consultation with the Wisdom2Action Planning Committee, the purpose and scope of this scan was refined and approved. The Wisdom2Action Planning Committee is a large, interdisciplinary, cross-sectoral committee from a number of different stakeholder groups, who then also reviewed the initial themes in this report and provided feedback. This discussion is to be revisited in further consultations moving forward, including at the national forum on youth-led suicide prevention that Wisdom2Action is currently planning, titled W2A Vancouver: Embrace Life. The event will bring together youth, youth serving agencies, national mental health organizations, researchers, and governments, who will provide further input into the development of this resource guide, as it is an iterative and ongoing process.

To locate relevant initiatives, a search of peer-reviewed and grey literature was conducted, in addition to key informant interviews. The databases searched include Ovid MEDLINE, Scopus, PsychINFO, and Cochrane Library. The criteria for inclusion included the following: (1) that the articles focused on initiatives that draw a clear link to suicide prevention and/or intervention training, (2) that the programs, trainings, or resources were facilitated or co-facilitated by youth, and/or created or co-created by youth, (3) that said programs, trainings, and resources were being implemented after the year 2000, and (4) that the articles and resources consulted were written

in English. For the purposes of this document, 'youth' was considered a dynamic concept, and in accordance with the values of Wisdom2Action, 'youth' is regarded as a developmental stage as opposed to a mere number. Thus, articles and resources were fit for inclusion as long as they were identified as targeting youth; no matter what age they considered youth to be.

The concepts searched include "youth-led" and its related terms, "youth created" and its related terms, "community-led" and its related terms, and "suicide prevention". To see the full search queries used for the aforementioned databases, see Appendix 1. These database searches were supplemented by a grey literature search of the Canadian Electronic Library: Canadian Public Documents Collection, in addition to targeted searches of known organizations and programs; scans of the reference lists in relevant articles; and searches of both prominent mental health organization websites, and Canadian federal and provincial government websites and documents. Key informants were initially identified through their connections with Wisdom2Action, and were further expanded through a snowball sampling technique. Conversations with eight key informants supplemented the search of secondary sources.

# 4. RESULTS

(when applicable)

## 5. LIMITATIONS

Recognizing that this is an active document and there is more work to be done, there are limitations in the methods to date. Firstly, while the database searches yielded 452 articles, of which 25 were fit for inclusion, there are likely many relevant programs that have not yet undergone a published evaluation, and were therefore missing from the literature. Similarly, those programs may not have been captured in a grey literature search, as most reports also include only those programs that have undergone an evaluation. Key informant interviews were also limited in their scope, in part because there was only eight conducted, but also because seven of which were located in Canada, and the scope of this review goes beyond Canadian borders.

Finally, to ensure feasibility, this review focused on only those programs that have at least some explicit focus on suicide prevention. However, there are many existing health promotion programs and resources that may be effective in preventing youth suicide, and are either youth-led or co-created, but are not outwardly stated as suicide prevention programs. As a result, there may be useful programs, trainings, and resources from which we can learn, but that are not captured in this document.



## 6. RECOMMENDATIONS (PENDING)

This section will be further developed at the W2A Embrace Life event in February, 2018. The intent is to develop a list of recommendations that reflecting promising practices and can be used in policy and program development, and also as points for advocacy by youth and service users.

Some suggested categories of recommendations include the following:

### **ORGANIZATIONAL GOVERNANCE & STRUCTURE**

- For instance, this section could include recommendations on Board and committee structure, commitment to anti-oppression policies and principles and other issues.

### **YOUTH ENGAGEMENT**

- This section could how to address youth engagement best practices in policies and programs.

### **PROGRAM DEVELOPMENT**

### **RECONCILIATION**

### **MONITORING & EVALUATION**

Other categories and recommendations to be added.

## 7. RESOURCES

### Youth-Led/Co-Created Suicide Prevention Programs

#### Sources of Strength

<p><b>Purpose</b></p>	<p>Sources of Strength is a universal suicide prevention program to build socio-ecological protective influences around youth and to reduce the likelihood that vulnerable youth will become suicidal (Sources of Strength, n.d.).</p> <p>The program promotes help-seeking for suicide by youth, by changing norms and negative beliefs about seeking professional help; reducing shame and self-stigma, and fears of disclosure; enhancing trust in others; and by discouraging self-reliance (Calear et al., 2016).</p> <p>It prepares student leaders to conduct public health messaging and activities with peers to increase school-wide positive coping norms and communication with trusted adults, and encourage suicidal peers to seek help from trusted adults (Thiha et al., 2016)</p>
<p><b>Who it's for</b></p>	<p>Students and adults</p>
<p><b>Role of youth</b></p>	<p>Youth as peer leaders, who leverage their leadership qualities to create culture change campaigns using strength-based messaging (Sources of Strength, n.d.). Student peer leaders participate in a 4-hour training session, after which they have biweekly meetings where adult advisors give them opportunities to practice and receive feedback (Thiha et al., 2016).</p>
<p><b>What's involved</b></p>	<p>Peer leaders develop strength-based campaigns and messages to promote protective factors for youth suicide, and encourage help-seeking (Calear et al., 2016)</p>
<p><b>Location of implementation</b></p>	<p>School-based program</p>
<p><b>Country of implementation</b></p>	<p>USA, Australia</p>
<p><b>Who developed the program?</b></p>	<p>Mark LoMurray founded the program in 1998, partnership with rural North Dakota communities and several Northern Plains tribes, developed it in 1998. It then evolved into a involving the North Dakota Adolescent Suicide Prevention Task Force, Mental Health America of North Dakota, and the North Dakota Department of Health (Sources of Strength, n.d.).</p>

<b>Evaluation Findings</b>	<ul style="list-style-type: none"> <li>• Increases peer leaders' connectedness to adults</li> <li>• Increases peer leaders' school engagement</li> <li>• Peer leaders in larger schools were four times more likely to refer a suicidal friend to an adult</li> <li>• The program increased positive perceptions of adult support for suicidal youth and the acceptability of seeking help among the general student population</li> <li>• The positive perceptions of seeking adult support increased most in students with a history of suicidal thoughts (Wyman et al., 2010)</li> </ul>
<b>Friends Helping Friends</b>	
<b>Purpose</b>	<p>To improve the help-seeking behaviour of students in distress and those with potential suicide ideation. The program trains student volunteers as peer educators to increase knowledge and awareness about mental health issues, and suicide warning signs on campus. It helps reduce stigmas associated with mental health and the utilization of professional counseling; it encourages the use of healthy strategies for managing mental health challenges; and promotes the University of North Carolina Greensboro's Counseling &amp; Testing Center and Wellness Center with both direct and indirect outreach initiatives (NASPA, n.d)</p>
<b>Who it's for</b>	<p>College students at the University of North Carolina at Greensboro</p>
<b>Role of youth</b>	<p>Peer educators, who help students identify and refer at-risk peers to helping professionals. They take on the role of gatekeepers, while also hosting outreach events and presentations (NASPA, n.d.)</p>
<b>What's involved</b>	<p>Peer educators receive training for peer counselling, outreach activities (e.g. events and presentations), and a two-level peer-led gatekeeper training called I.C.A.R.E. (Identify, Connect, Ask, Refer, Encourage), which teaches participants how to intervene and support a student demonstrating warning signs of suicide. (NASPA, n.d.). Peer educators also get a FHF Handbook.</p>
<b>Location of implementation</b>	<p>College campus</p>
<b>Country of implementation</b>	<p>USA</p>
<b>Who developed the program?</b>	<p>It is a collaborative effort between the Wellness Center, the Counseling &amp; Testing Center, Student Affairs, peer educators, faculty, staff, and the student body</p>
<b>Evaluation Findings</b>	<p>After the implementation of I.C.A.R.E. II:</p> <ul style="list-style-type: none"> <li>• 78% respondents found the training useful in increasing their overall knowledge of suicide</li> <li>• 86% indicated that the training increased their knowledge of referral resources</li> <li>• 93% indicated that the training increased their knowledge of how to refer at-risk students</li> <li>• 78% would recommend the training to others</li> </ul>

### Initiative to Create Awareness, Recognition, and Education (iCARE)

<b>Purpose</b>	To increase awareness about suicide and suicide risk among students in crisis, promote help seeking, develop and review campus suicide prevention policies and procedures, and develop a formal crisis management plan (SPRC, 2016)
<b>Who it's for</b>	College students, faculty, and staff
<b>Role of youth</b>	Recipients of the iCARE training, and student advisors to the iCARE project
<b>What's involved</b>	Student-driven outreach strategies, and gatekeeper trainings for students, faculty, and staff. (SPRC, 2016)
<b>Location of implementation</b>	College campus: Southern Illinois University Edwardsville
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Southern Illinois University Edwardsville (SIUE) Schools of Pharmacy and Nursing, and SIUE Counseling Services (SPRC, 2016)  Students will also be engaged to assist in the planning, implementation, and evaluation of the initiative (SPRC, 2016)
<b>Evaluation Findings</b>	N/A

### Entrepreneurship Education (Arrowhead Business Group- Apache Youth Entrepreneurship Program (ABG))

<b>Purpose</b>	This youth entrepreneurship education model to promote culturally based protective factors for substance use and suicide prevention (Tingey et al., 2016).
<b>Who it's for</b>	Apache Tribe youth ages 13-16, from White Mountain Apache community (Tingey et al., 2016)
<b>Role of youth</b>	Youth were involved in the development of the intervention, by way of being part of a Community Advisory Board. Working from a positive youth development framework, the CAB and research partners established key goals for the intervention: 1) to teach entrepreneurship education blended with life skills, 2) to promote school connectedness (e.g., a commitment to school, attachment to pro-social peers, belief in schools norms about positive behavior), and 3) to foster supportive relationships between youth, positive peers, and caring adults. A pilot cohort of youth also participated in the program, and inputted feedback on the curriculum content, method, and schedule of delivery (Tingey et al., 2016).

<b>What's involved</b>	It is a 16-lesson curriculum taught via discussion, games, hands-on learning, and multimedia. Its focus is on entrepreneurship and business development, life skills self-efficacy, and finance. Many lessons also incorporate presentations by Apache entrepreneurs and community business leaders as well as Elders, who reinforce aspects of Apache culture that promote entrepreneurship and connectedness to positive Apache identity. Youth practice public presentations and social networking skills. They map community assets with a focus on gaps in the local economy and identify opportunities for new businesses. Youth conduct market research and learn branding, marketing, and basic accounting concepts, which are then applied to a hands-on community-based selling event. At the last lesson, youth present their business plans and can be awarded funding for small business start-up. Youth who start businesses are then assigned a community-based mentor for continued support. (Tingey et al., 2016).
<b>Location of implementation</b>	The first 10 lessons are taught during a 5-day residential summer camp; the last 6 lessons are taught through workshops during the academic year. (Tingey et al., 2016).
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Research partners and community collaborators.
<b>Evaluation Findings</b>	Evaluated ABG's impact on psychosocial, behavioural, health, educational, and economic outcomes (Tingey et al., 2016), but results have not yet been analyzed.
<b>Peer Leadership Training</b>	
<b>Purpose</b>	To: <ul style="list-style-type: none"> <li>• Strengthen youth's understanding of Inuit culture and history, trauma, and resilience</li> <li>• Strengthen the safety of peer disclosures of abuse and distress</li> <li>• Increase awareness of services and supports</li> <li>• Increase youth's self-care practices (A. Akpik, personal communication, December 21, 2018)</li> </ul>
<b>Who it's for</b>	Youth in Nunavut
<b>Role of youth</b>	Youth co-created the training in collaboration with the Arctic Children and Youth Foundation (A. Akpik, personal communication, January 4, 2018)
<b>What's involved</b>	3-day module (condensed from a 5-day module), which will be piloted shortly. The modules are focused on the following: <ul style="list-style-type: none"> <li>• Day 1: Grounding in Inuit culture and resilience</li> <li>• Day 2: Trauma</li> <li>• Day 3: Youth leader think-tank conference (includes community asset mapping, working together to identify community resources, etc.) (A. Akpik, personal communication, December 21, 2018)</li> </ul>

<b>Location of implementation</b>	Communities in Nunavut
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Arctic Children and Youth Foundation, in collaboration with youth (A. Akpik, personal communication, December 21, 2017)
<b>Evaluation Findings</b>	N/A
<b>GPS (Getting Possibilities Started)</b>	
<b>Purpose</b>	To provide the following for youth: <ul style="list-style-type: none"> <li>• Empowerment</li> <li>• Opportunities to express their opinions</li> <li>• Opportunities to initiate positive change</li> <li>• Leadership skills</li> <li>• Positive adult allies</li> <li>• Opportunities to meet amazing people (Sarnia Lampton Rebound, n.d.)</li> </ul>
<b>Who it's for</b>	Youth ages 13-25
<b>Role of youth</b>	Youth facilitate the forum; it is a youth-led group, with one adult ally (SLR, personal communication, January 4, 2018)
<b>What's involved</b>	A forum for youth to provide thoughts and ideas about the organization and the community, including about suicide prevention as they are in partnership with the Youth Suicide Prevention Committee (SLR, personal communication, January 4, 2018)
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Sarnia Lampton Rebound
<b>Evaluation Findings</b>	N/A

## Life is Precious

<b>Purpose</b>	The program aims to reduce suicidal behaviour in Latina adolescents by: <ul style="list-style-type: none"> <li>• Helping them learn to communicate with their families to overcome acculturation gaps.</li> <li>• Providing academic support (e.g. tutoring, assistance with homework completion)</li> <li>• Helping them express their feelings with the support of licensed art, music, and dance therapists</li> <li>• Providing wellness support (e.g. how to cook healthy food and pursue available exercise options) (Humensky et al., 2017)</li> </ul>
<b>Who it's for</b>	Latina youth in New York (Bronx, Brooklyn, and Queens)
<b>Role of youth</b>	Youth were involved in the development of the program. Comunilife conducted focus groups with Latina adolescents and their mothers to learn what it was they thought would be most helpful to them, and so the program was designed with community-led participation (Humensky et al., 2017).
<b>What's involved</b>	The program runs as an after-school program on weekdays and on Saturday mornings. Participants come on a drop-in basis and can use any or all of the services offered by LIP; there is no set curriculum or sequence in which services must be received. (Humensky et al., 2017).
<b>Location of implementation</b>	Schools (afterschool program)
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Rosa M. Gil, president and CEO of Comunilife, Inc.
<b>Evaluation Findings</b>	<ul style="list-style-type: none"> <li>• Decrease in attempted suicides of participants</li> <li>• Decrease in suicide ideation among participants</li> <li>• Decrease in depressive symptoms and anger</li> <li>• Worsening of family adaptability (Humensky et al., 2017)</li> </ul>

## Let's Talk

<b>Purpose</b>	Let's Talk is a community-based, peer-to-peer, theater-centered suicide-prevention program. By having youth put on a performance for their peers, informed by their own personal experiences, the goal is to increase suicide awareness, stigma, and where to go in a crisis amongst both themselves and the audience members (Keller, Austin, & McNeil, 2017).
<b>Who it's for</b>	High school and college students

<b>Role of youth</b>	Youth are participants in this program, as well as facilitators. As writers and/or actors, they facilitate a Q&A with the audience about their performance on suicide prevention after its conclusion. A trained volunteer and a psychiatrist accompany the students, but the youth also lead the discussion as facilitators (Keller et al., 2017).
<b>What's involved</b>	Each writer-actor group meets for 12 weeks to share their personal experiences with suicide and/or major depression via journal entries, stories, songs, and poetry, and to collaboratively write a unique theatrical performance based on their experiences. At the end of the writing-rehearsal period, the writer-actors staged performances for their peers, after which they held discussions with audience members. Each performance is designed to model: (1) adaptive decision-making strategies in times of stress, (2) accessing emergency help, (3) providing ongoing support to peers during a crisis, and (4) identifying at least one caring adult in the school or community from whom to seek help (Keller et al., 2017).
<b>Location of implementation</b>	Theatres (community theatres, university theatres, and high school theatres)
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Not explicitly stated, but authors are as follows: Department of Communication and Theatre, Montana State University Billings; Jake Jabs College of Business & Entrepreneurship, Montana State University; Department of Psychology, Montana State University Billings
<b>Evaluation Findings</b>	The perceived efficacy of communicating with teachers, high school counsellors and social workers about suicidal risks (among one-self or others) increased after the Let's Talk theatre intervention. (Keller & Wilkinson, 2018). In terms of understanding their threat of susceptibility to suicide, the results depended on the participants' prior knowledge, although those students with a prior history of suicidal loss and/or depressions demonstrated a greater perceived self-efficacy after Let's Talk (Keller et al., 2017).
<b>Active Minds</b>	
<b>Purpose</b>	To help students establish networks on campuses and across the country to normalize, or de-stigmatize, mental health concerns and help peers identify professional resources as needed. (Walther et al., 2014).
<b>Who it's for</b>	College/university students
<b>Role of youth</b>	Students were the initial developers of the idea and program, and now university students lead all chapters, with adult professionals serving only as supports. Students also serve on the Board of Directors of the national organization, via a student advisory committee (Walther et al., 2014).



<b>What's involved</b>	Active Minds uses a student-led, staff-advised chapter model that seeks to draw on the benefits of peer-to-peer connections. Students serve as advocates, educators, and supporters for a number of issues, and through their chapters, they host events (e.g. panel discussions, stress relief days, music events, races, video displays, etc.), advocate for institutional and policy change, and help connect students to resources (Walther et al., 2014).
<b>Location of implementation</b>	College campuses: peer groups may be housed in the counseling center, the health center, or through a course or department (Walther et al., 2014)
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Established in 2003 by Alison Malmon, then an undergraduate student at the University of Pennsylvania, after she lost her only sibling, Brian, to suicide. Today, the Active Minds Inc. national office is based in Washington, DC (Walther et al., 2014)
<b>Evaluation Findings</b>	Students involved in the organization showed a significant reduction in stigma if they had a history of mental illness in their families. However, willingness to seek psychological help was unaffected. The program's partial success is viewed in terms of empowerment and recovery. The peer support provided through Active Minds may help change people's negative attitudes about mental illness and encourage students to help one another in coping with their diagnoses. (McKinney, 2009)

**BRAVEHEART (Building Resistance Against Violent Environments thru Honorable, Empowered And Resilient Teens)**

<b>Purpose</b>	To empower young people and help them to collaborate with their schools, local agencies and community organizations in the stand against social issues. The goal of BRAVEHEART is to train the young people in our community to become peer educators and advocates for healthier communities (HCCI, n.d.).
<b>Who it's for</b>	Middle or high school-aged youth who reside on the Windward side of O'ahu, Hawai'i. The program is open to youth of any class, sexual orientation, disability, or ethnicity, however most are Native Hawaiian and/or Waim nalo residents. (HCCI, n.d.)
<b>Role of youth</b>	Youth develop and implement community activities/awareness campaigns of a topic of their choosing (for instance, they focused on suicide in 2009-2010) (HCCI, n.d.)

<b>What's involved</b>	Youth are trained as youth leaders, who choose a different each year on which to focus. Once the topic is chosen, youth leaders seek and receive training from various organizations to guide them in developing and implementing advocacy activities. Training and program activities focus on empowering and building youth to be emerging community leaders. Advocacy activities are youth-led with the guidance of an adult facilitator (Chung-Do et al., 2011). At the end of each school year, the BRAVEHEART youth organize, plan and host the annual Find Your Voice Youth Summit where youth and community members come together to identify solutions for the selected social issue (e.g. after focusing on suicide prevention, the youth took part in safeTALK training to bring awareness to their peers, organized a t-shirt campaign, and participated in local television and radio shows (HCCI, n.d.).
<b>Location of implementation</b>	In schools and community
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Grassroots youth program, partnered with Hawaii's Caring Communities Initiative.
<b>Evaluation Findings</b>	N/A
<b>Hawai'i's Caring Communities Initiative: Youth Leadership Model</b>	
<b>Purpose</b>	To train and mobilize youth leaders and community members in suicide prevention, and to develop community awareness activities. HCCI for Youth Suicide Prevention was implemented through two strategic youth suicide prevention and early intervention projects entitled Enhancing the State-Wide Trauma Network and Mobilizing Communities At-Risk (MCAR). The goal of these two projects was to positively impact at-risk youth and communities across Hawai'i, as well as the State-wide suicide crisis infrastructure, through community partnerships (Chung-Do et al., 2011)
<b>Who it's for</b>	Rural and ethnic minority youth in Hawaii
<b>Role of youth</b>	To develop and implement community suicide awareness/advocacy activities and events (Chung-Do et al., 2011).
<b>What's involved</b>	HCCI involves team-building activities, youth empowerment strategies, and evidence-based suicide prevention training (CONNECT) and safe messaging training. Youth leaders then apply their new training and skills to develop and implement community-responsive suicide prevention awareness activities and events (Chung-Do et al., 2011).

<b>Location of implementation</b>	In community
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	This project has been developed in partnership with the Hawai'i State Department of Health, Emergency Medical Services and Injury Prevention System Branch (HCCI, n.d.)
<b>Evaluation Findings</b>	During HCCI's three-year project period, a total of 79 Connect trainings were conducted throughout the State of Hawai'i, resulting in 1,192 youth and 586 adult community members being trained in suicide prevention. Figure 4 illustrates the rippling effects of these efforts, which have led to 41 youth being screened for suicide risk, 24 youth being identified as potentially at-risk for suicide, and 18 of those youth being connected to appropriate mental health services. The six youth leader groups developed and implemented a total of 31 community awareness activities. By counting the number of people in attendance at their events and estimating media readership and listenership, HCCI staff estimated that these youth-led awareness activities have reached over 643,000 people throughout the State of Hawai'i (Chung-Do et al., 2011).
<b>Teens on Preventing Suicide (TOPS)</b>	
<b>Purpose</b>	TOPS youth leaders educated the public in Hawaii about the importance of preventing suicide among youth, and were inspired to begin doing so based on the statistics from Hawai'i's Youth Risk Behaviour Survey (Chung-do et al., 2016).
<b>Who it's for</b>	General community,
<b>Role of youth</b>	Youth take the lead in running awareness campaigns.
<b>What's involved</b>	The youth designed t-shirts that featured helpline numbers, the statistics of Hawai'i's youth who had ever considered suicide, and the statistics of those youth considering suicide that would tell someone, to send the message that there's hope for intervening. They were spreading the message of "100% care", to communicate that the community cares about its members. The youth also organized events for the community and school (Chung-do et al., 2016).
<b>Location of implementation</b>	In community and schools
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Youth in the Kahuku community on Oahu

<b>Evaluation Findings</b>	-
<b>SPAM (Suicide Preventers Around Molokai (SPAM))</b>	
<b>Purpose</b>	Born out of Hawaii's Caring Communities Initiative (HCCI), SPAM is a youth-led leadership and advocacy group that focuses on suicide prevention in the community of Molokai, Hawaii (Chung-Do et al., 2014).
<b>Who it's for</b>	The community (youth leaders raise awareness for everyone)
<b>Role of youth</b>	Youth run the program, and develop events and campaigns to raise awareness on suicide prevention.
<b>What's involved</b>	The youth have developed 10 community awareness events and community trainings that have reached over 500 people on the island thus far and have involved collaborations with at least 5 other community agencies in Molokai. For example, they coordinated a family-friendly event called the Mixed Plate Festival for Mental Wellness, where they invited cultural practitioners from the island to host workshops on lei making, basket weaving, fishing, and traditional and modern crafts. The purpose of this event was to promote mental wellness by recognizing and promoting the strengths and gifts that reside in the community. In addition, SPAM youth leaders have coordinated multiple sign-waving events and have written articles in the local newspaper about the importance of suicide prevention (Chung-Do et al., 2014).
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Molokai Community Health Center (MCHC) staff members recruited youth to have an opportunity to meet with other young people in their community, to become trained in the Connect Program, and to apply their training to organize community awareness campaigns using safe messaging-guidelines, and to gain valuable leadership skills. The group of youth then ended up taking on their own identity, and called themselves the Suicide Preventers Around Molokai (SPAM) (Chung-Do et al., 2014).
<b>Evaluation Findings</b>	By focusing on relationship-building opportunities, both among youth leaders in SPAM and out in the community, preliminary evaluation findings show that SPAM youth leaders' sense of community connectedness is being enhanced, which is a protective factor for suicide (Chung-Do et al., 2014).

## WAYVE (Wellness Acceptance Youth Voices Empowerment)

<b>Purpose</b>	WAYVE is a mental health awareness and bullying prevention group focusing on youth leadership and community building in the Waterloo Region. It is based on youth ideas to address a number of issues (including suicide), while promoting youth-adult partnerships (WAYVE, n.d.)
<b>Who it's for</b>	Grade school-aged youth
<b>Role of youth</b>	WAYVE takes a peer-led focus. Youth are empowered to manage the program, and they decide what conversations they want to have based on the difficulties they see young people facing. Youth volunteers help support the WAYVE team at weekly meetings, mentor students, provide coaching and presentations, and help with requests from the community. There are also youth Empowerment Teams who operate within their local schools (WAYVE, n.d.).
<b>What's involved</b>	In local schools, youth Empowerment Teams create and conduct awareness-raising activities for their peers on a number of youth issues (e.g. poster campaigns, t-shirt design contests, special awareness days, presentations, announcements, and more). Throughout their activities, youth are supported by Child and Youth Workers, Guidance counsellors, and other school staff (WAYVE, n.d.).
<b>Location of implementation</b>	High schools and Senior Elementary Schools
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	WAYVE is a program of the Canadian Mental Health Association Waterloo Wellington Dufferin
<b>Evaluation Findings</b>	-

## Embrace Life

### Blueprint for Life

<b>Purpose</b>	To empower youth to face adverse challenges, and engage in positive healing methods at the individual level, and through intergenerational and community healing (Blueprint Pathways, 2015). They offer a number of programs, all of which can be modified to incorporate suicide prevention. These programs include Social Work Through Hip Hop, Healing Through Hip Hop, Leadership Through Hip Hop, Empowerment Through Hip Hop, etc. It is founded on the belief Hip Hop arts practices (including breakdancing, rapping, DJing, and graffiti arts) coupled with social work can enhance the health and well-being of youth (Forneris, 2009)
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<b>Who it's for</b>	Indigenous youth, immigrant youth, incarcerated youth, and other youth who have experienced trauma
<b>Role of youth</b>	The majority of Blueprint for Life staff are between the ages of 20-30, many of whom have been previously been participants of the program.
<b>How does it embrace life?</b>	It incorporates cultural traditions, music, and ceremony into the programs, as a way of healing and empowering individuals and communities (S. Leafloor, personal communication, January 9, 2018).
<b>What's involved</b>	It is a structured 5-day 9am-5pm intensive program, which youth receive school credit for (S. Leafloor, personal communication, January 9, 2018). Each day is centered around 1-2 topics (e.g. suicide, bullying, drug use, paths to healing etc.), using dancing, traditional drumming, singing, story telling, and games. Elders, parents, and teachers are also invited to participate to reorient relationships and re-build trust and communication (Blueprint Pathways, 2015; (S. Leafloor, personal communication, January 9, 2018).
<b>Location of implementation</b>	In schools, community centers, or out on the land
<b>Country of implementation</b>	Canada and Greenland
<b>Who developed the program?</b>	Stephen Leafloor (founder) and Blueprint staff
<b>Evaluation Findings</b>	From an evaluation of two of Blueprint For Life's programs ("Hip Hop and You Don't Stop" and "Leadership Youth Hip Hop Summit"), the youth and the community members perceived the Hip Hop projects positively and believe that projects such as these provide important opportunities for youth. It was believed that the projects had a positive impact on the development of youth. More specifically, it was perceived that the projects helped youth gain a sense of self and identity, increase their confidence and self-esteem, communicate more effectively, express emotion, develop as leaders, and to have a more positive future outlook (Forneris, 2009).
<b>Makimautiksat Wellness and Empowerment Camp for Nunavut Youth</b>	
<b>Purpose</b>	This culturally relevant youth intervention camp has been developed to promote mental health and wellness among children and youth in Nunavut, in response to the needs of communities (Mearns & Healey, 2015).
<b>Who it's for</b>	Nunavut youth
<b>Role of youth</b>	Two older youth mentors/peer leaders have been encouraged to join the intervention leadership team, acting as role models and supporting the implementation of the intervention (Healey et al., 2016).

<p><b>How does it embrace life?</b></p>	<p>The curriculum includes celebrating the arts and creativity, teachings from Elders, practicing of skills, and, having fun. The spirit of the camp is one of inclusion, acceptance, the celebration of diversity, and the empowerment of youth. The land camp program focuses on celebrating Inuit culture and the campers learn about harvesting foods, living on the land and learning from elders and community members about local and regional history (Qaujigiartiit Health Research Centre, 2014).</p>
<p><b>What's involved</b></p>	<p>It is a 10-day camp that includes both community-based components (7 days) and on-the-land components (2 days), and is built around the eight ujarait (rocks) model (Healey, Noah, &amp; Mearns, 2016). It incorporates group discussions, individual reflection, observational learning, activity-based learning, and role-playing (Qaujigiartiit Health Research Centre, 2014). The eight modules include the following: (1) strengthening coping skills, (2) building healthy and harmonious relationships, (3) nurturing awareness of the body, movement, and nutrition, (4) crafting and exploring creativity, (5) fostering personal and community wellness, (6) self-discovery and future planning, (7) understanding informed choices and peer pressure, and (8) connection knowledge and skills on the land (Healey et al., 2016).</p>
<p><b>Location of implementation</b></p>	<p>In community and on the land</p>
<p><b>Country of implementation</b></p>	<p>Canada</p>
<p><b>Who developed the program?</b></p>	<p>Qaujigiartiit Health Research Centre, and funded by PHAC (Qaujigiartiit Health Research Centre, 2014). The program was developed by Nunavummiut for Nunavut youth (Mearns &amp; Healey, 2015).</p>
<p><b>Evaluation Findings</b></p>	<p>The data on wellness outcomes for campers who participated suggest:</p> <ul style="list-style-type: none"> <li>• Youth who participated reported feeling less anger, fear, or sadness than they felt before attending the camp.</li> <li>• Youth reported a greater interest in harvesting, sewing, and other community and land-based activities than before camp.</li> <li>• In general, youth reported feeling happy and excited both before and after participation in the camp.</li> <li>• After participating in the camp, youth reported an increased likelihood of reaching out to a parent or a friend when faced with a problem, than before participating in the camp.</li> <li>• Going on the land and learning about Inuit culture was a highlight for every participant in the camp program.</li> <li>• Youth were asked what skills they learned at camp, and responses included "problem solving", "communication", "ability to make friends", "learn to do new things", "healthy relationships" and "having fun". (QHRC, 2014).</li> </ul>

### Kts'iıhtła: "We Light the Fire"

<b>Purpose</b>	Kts'iıhtła stemmed from the need address high suicide rates in northern Indigenous communities, and is a community-led, youth-driven model to strengthen resiliency through youth engagement in the arts in circumpolar regions. The purpose is to (1) to engage and empower youth to explore critical issues in their communities and lives, and to find solutions together using creative arts, and (2) to build resiliency amongst youth and promote healthy minds, bodies, and spirits through the arts (Fanian et al., 2015).
<b>Who it's for</b>	Youth in northern Indigenous communities
<b>Role of youth</b>	Youth have ownership of the workshop and its outcomes. Youth are given the opportunity to identify topics or issues they wanted to address based on what was important to them. (Fenian et al., 2015)
<b>How does it embrace life?</b>	The workshop takes a strengths-based approach by focusing on empowering and building capacity amongst youth by building a culturally relevant space for youth to engage in the creative arts. It celebrates Tł ıch ı culture, and is delivered by Indigenous facilitators (Fenian et al., 2015).
<b>What's involved</b>	A 5-day creative arts and music workshop for youth (Fenian et al., 2015).
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	The project was hosted by the Tł ıch ı Community Action Research Team (CART) in Behchok, Northwest Territories
<b>Evaluation Findings</b>	Youth reported gaining confidence and new skills, both artistic and personal. Many youth found the workshop to be engaging, enjoyable and culturally relevant. Youth expressed an interest in continuing their involvement with the arts and spreading their messages through art to other youth and others in their communities. (Fanian et al., 2015).

### Digital Storytelling

<b>Purpose</b>	The project's intention was to use digital storytelling as a health promotion strategy within a Positive Youth Development approach. Digital storytelling provided youth a means to express themselves, to highlight the strengths in their lives, to develop a sense of mastery as they gained technical skills, and to share their stories with peers and family members through a community screening (Wexler et al., 2013).
<b>Who it's for</b>	Inupiat young people (elementary through to high school)



<b>Role of youth</b>	Students were instructed on how to technically make the short digital productions but not given directions about the content, and on their own accord, the youth participants produced digital stories that were essentially “Hope Kits,” a cognitive behavioral suicide prevention strategy (Wexler et al., 2013).
<b>How does it embrace life?</b>	It helps unpack how young people adopt and adapt traditional values, roles, and practices in their everyday lives to bolster resilience (Wexler et al., 2014). It also allows youth to define their identities in ways that emphasize the positive aspects of their lives (Wexler et al., 2013).
<b>What’s involved</b>	3-hour after school digital storytelling workshops were conducted in 12 rural schools in a predominantly Alaska Native region. In these workshops, students developed 3-5 minute visual narratives that synthesize images, video, audio recordings of voice, background music, and text to create personal stories (Wexler et al., 2014).
<b>Location of implementation</b>	In schools
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Project Life
<b>Evaluation Findings</b>	‘Sites of achievement’, ‘self-representation’, and ‘important relationships’ are the themes that emerged from a qualitative evaluation. These themes allude to the need for researchers and practitioners to focus on youth’s social worlds and their varied contexts, as opposed to individual attitudes, beliefs, and behaviours (Wexler et al., 2014).
<b>Qungasvik (“Toolbox”)</b>	
<b>Purpose</b>	Qungasvik is a toolbox that communities can draw upon for designing suicide prevention programs. The Qungasvik is not a prescriptive intervention manual, but instead lays out a process for adapting each activity to reflect local customs and circumstances, the current season and the advice of Elders and other community members (Allen et al., 2009).
<b>Who it’s for</b>	Rural Yup’ik Alaska Native youth (Mohatt et al., 2014)
<b>Role of youth</b>	Youth were involved in the development of the intervention, as they were a part of the Community Planning Groups in each community where Qungasvik was implemented, along with elders, parents, service providers, community leadership, church representatives, and university researchers (Henry et al., 2012).

<b>How does it embrace life?</b>	The intervention uses “culture as intervention” to promote reasons for life and sobriety in young people using local expertise, high levels of community direction, and community based staff. The intervention is grounded in local practices and adaptive to local cultural differences distinctive to rural Yup’ik communities. (Allen et al., 2017)
<b>What’s involved</b>	The Qungasvik intervention toolbox is organized into 36 modules (which take approximately 1-3 hours), and each module addresses 1 or more of 12 protective factors at the individual, family, and community level (Henry et al., 2012).
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	It was a collaborative effort between Alaska Native community co-researchers and investigators from the Center for Alaska Native Health Research (CANHR) at the University of Alaska Fairbanks (UAF) (Henry et al., 2012).
<b>Evaluation Findings</b>	When comparing the effectiveness of a high-intensity intervention (i.e. a high number of intervention activities or modules, implemented and attended by youth) in one community, to a lower intensity intervention (i.e. fewer modules) in a second community, there were significant intervention effects on Reasons for Life (Elements that youth identify provide meaning in life, including culture-specific beliefs and experiences that make life enjoyable and worthwhile within a rural Yup’ik context), but not for Reflective Processes ( youth reflection on potential negative consequences from drinking alcohol that have elements of culture-specific meaning) (Allen et al., 2017).
<b>We Matter</b>	
<b>Purpose</b>	We Matter is an Indigenous-led and nationally registered non-profit organization that is committed to Indigenous youth empowerment, hope and life promotion. Our key project is the We Matter Campaign – a national multi-media campaign in which Indigenous role models and allies from across Canada submit short video, written and artistic messages sharing their own experiences of overcoming hardships, and communicating with Indigenous youth that no matter how hopeless life can feel, there is always a way forward.
<b>Who’s it for?</b>	First Nations, Metis and Inuit youth
<b>Role of youth</b>	Youth-led
<b>How does it embrace life?</b>	Promotes Indigenous youth organizing and Indigenous role models

<b>What's involved</b>	Lesson plans #we matter campaign Hope Forum Hope Pact Advocacy and public relations
<b>Location of implementation</b>	National(Canada)
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Indigenous youth
<b>Evaluation</b>	

## Suicide Prevention Training

### ASIST (Applied Suicide Intervention Skills Training)

<b>Purpose</b>	ASIST is a two-day interactive workshop in suicide first aid. It teaches participants to recognize when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety (LivingWorks, 2016). In the course of the two-day workshop, ASIST participants learn to: <ul style="list-style-type: none"> <li>• Understand the ways personal and societal attitudes affect views on suicide and interventions</li> <li>• Provide guidance and suicide first-aid to a person at risk in ways that meet their individual safety needs</li> <li>• Identify the key elements of an effective suicide safety plan and the actions required to implement it</li> <li>• Appreciate the value of improving and integrating suicide prevention resources in the community at large</li> <li>• Recognize other important aspects of suicide prevention including life-promotion and self-care (LivingWorks, 2016)</li> </ul>
<b>Who it's for</b>	Anyone over the age of 16
<b>Role of youth</b>	Youth as participants in training
<b>What's involved</b>	The two-day workshop involves: <ul style="list-style-type: none"> <li>• Presentations and guidance from two LivingWorks registered trainers</li> <li>• Delivery of a scientifically proven intervention model</li> <li>• Audio-visual learning aids</li> <li>• Group discussions</li> <li>• Skills practice and development (LivingWorks, 2016)</li> </ul>

<b>Location of implementation</b>	In community
<b>Country of implementation</b>	Australia, Canada, United Kingdom (England, Northern Ireland, Wales, Scotland), Isle of Man, Ireland, Denmark, Germany, Italy, South Korea, USA, China, New Zealand, Singapore, Norway, Sri Lanka, Switzerland
<b>Who developed the program?</b>	LivingWorks
<b>Evaluation Findings</b>	The ASIST program is supported by a number of evaluations including independent and peer-reviewed studies. Results demonstrate that ASIST helps participants become more willing, ready, and able to intervene with someone at risk of suicide. ASIST is also proven to reduce suicidal thoughts for those at risk. (LivingWorks, 2016)
<b>safeTALK</b>	
<b>Purpose</b>	safeTALK is a half-day alertness training that prepares individuals, regardless of prior experience or training, to become a suicide-alert helper. safeTALK-trained helpers can recognize invitations for help by those experiencing thoughts of suicide, and take action by connecting them with life-saving intervention resources, such as caregivers trained in ASIST (LivingWorks, 2016). Throughout the training, participants learn to: <ul style="list-style-type: none"> <li>• Notice and respond to situations where suicide thoughts might be present</li> <li>• Recognize that invitations for help are often overlooked</li> <li>• Move beyond the common tendency to miss, dismiss, and avoid suicide</li> <li>• Apply the TALK steps: Tell, Ask, Listen, and Keep Safe</li> </ul> Know community resources and how to connect someone with thoughts of suicide to them for further help (LivingWorks, 2016)
<b>Who it's for</b>	Anyone over the age of 15
<b>Role of youth</b>	Youth as participants in training
<b>What's involved</b>	Training involves: <ul style="list-style-type: none"> <li>• Presentations and guidance from a LivingWorks registered trainer</li> <li>• Access to support from a local community resource person</li> <li>• Audio-visual learning aids</li> <li>• The TALK steps: Tell, Ask, Listen, and Keep Safe</li> </ul> Hands-on skills practice and development (LivingWorks, 2016)
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	Canada, Australia, USA, United Kingdom (England, Wales, Scotland, Northern Ireland), Ireland, South Korea, New Zealand, Norway, South Africa, Sri Lanka

<b>Who developed the program?</b>	LivingWorks
<b>Evaluation Findings</b>	There have been a number of evaluations, the most recent of which examined the impact of safeTALK training for high school students in Australia. The results indicated an increase in knowledge about suicide, confidence in talking about issues related to suicide, willingness to talk about suicide, and likelihood of offering and seeking help. The study also found that safeTALK was safe for the school students and that it had no ill effects on their mental health (Bailey, Spittal, Pirkis, Gould, & Robinson, 2017).
<b>Project Pairs-Aidants'</b>	
<b>Purpose</b>	Project Pairs-Aidants' is an adapted form of ASIST, with the following objectives: <ul style="list-style-type: none"> <li>• To train peer helpers and community professionals</li> <li>• To develop knowledge and skills to recognize and respond to calls for help</li> <li>• To increase confidence in providing care and applying intervention knowledge and skills</li> </ul> To identify youth groups at risk (Public Health Agency of Canada, 2016)
<b>Who it's for</b>	It is designed for (1) youth wanting to engage in youth suicide prevention, and (2) community 'gatekeepers' or professionals/service providers working within communities
<b>Role of youth</b>	Participants in the training
<b>What's involved</b>	The training is delivered in a two-day format, and is led by a trainer from the community, under the supervision from an ASIST trainer from outside the community. It focuses on building knowledge and awareness of those at risk of suicide, as well as intervention applications. The intervention was tailored to the Uashat mak Mani-utenam community in the northeastern region of Quebec, with the addition of a sharing day and resource day, and integration of the mother tongue of participants wherever possible.
<b>Location of implementation</b>	In schools and communities
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	LivingWorks
<b>Evaluation Findings</b>	-

## SOS: Signs of Suicide

<b>Purpose</b>	SOS is a universal, school-based depression awareness and suicide prevention program, with the goals of 1) decreasing suicide and suicide attempts by increasing student knowledge and adaptive attitudes about depression, 2) encouraging personal help-seeking and/or help-seeking on behalf of a friend, 3) reducing the stigma of mental illness and acknowledging the importance of seeking help or treatment, 4) engaging parents and school staff as partners in prevention through “gatekeeper” education, and 5) encouraging schools to develop community-based partnerships to support student mental health (Suicide Prevention Resource Centre, 2018).
<b>Who it’s for</b>	Middle and high school students
<b>Role of youth</b>	Youth pare participants in the training
<b>What’s involved</b>	The program involves age-appropriate, educational DVDs for school staff to play for students. The middle school video (Time to ACT) and the high school video (Friends for Life) inform students how to ACT (Acknowledge, Care and Tell), demonstrate the right and wrong ways to help, and show a student talking with a school counsellor. The program includes an optional student screening that assesses for depression and suicide risk and identifies students to refer for professional help as indicated. The program also includes a video, Training Trusted Adults, to engage staff, parents, or community members in the program’s objectives and prevention efforts (Suicide Prevention Resource Centre, 2018)
<b>Location of implementation</b>	In schools
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Screening for Mental Health Inc.
<b>Evaluation Findings</b>	<ul style="list-style-type: none"> <li>• Reduces suicidal thoughts and behaviour of youth</li> <li>• Improves knowledge, attitudes, and beliefs about mental health</li> <li>• The program is ineffective for increasing the receipts of mental health and/or substance use treatment</li> <li>• The program is ineffective for increasing social competence related to help-seeking behaviours (Aseltine et al., 2007; Shilling et al., 2014; Schilling et al., 2016)</li> </ul> <p>It was noted that there could be a high risk of bias in these evaluations (Kutcher, Wei, &amp; Behzadi)</p>

## The Ohio State University Suicide Prevention: “Peers REACHing Out”

<b>Purpose</b>	To promote campus education about mental health and suicide prevention. (Ohio State University Suicide Prevention [OSUSP], 2017)
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<b>Who it's for</b>	College students, faculty, and staff
<b>Role of youth</b>	Students are trained to deliver REACH to their peers, a gatekeeper training program to help the OSU community prevent suicide by teaching faculty, staff, and students how to (R) Recognize warning signs, (E) engage with empathy, (A) Ask directly about suicide, (c) Communicate hope, and (H) Help suicidal individuals access care and treatment. Student peers will also participate in campus advocacy and outreach initiatives (OSUSP, 2017).
<b>What's involved</b>	<p>Students work with The Ohio State University's Suicide Prevention program to:</p> <ul style="list-style-type: none"> <li>• Educate our student peers on suicide prevention through REACH trainings;</li> <li>• Increase awareness and understanding of suicide and its prevention at outreach events; and</li> <li>• Advocate for suicide prevention and ending the stigma of mental illness. (Fullen, 2017)</li> </ul> <p>The training for peer educators involves the following:</p> <ul style="list-style-type: none"> <li>• Students apply to be a part of the "PROs" program</li> <li>• Officers lead weekly meetings that focus on learning how to provide the REACH gatekeeper training, safe messaging, public speaking, campus outreach strategies, and key advocacy issues</li> <li>• Training provided by OSU Suicide Prevention Program</li> </ul> <p>Ongoing mentorship provided by Graduate Associate who is a PhD student in Counselor Education at OSU (Fullen, 2017)</p>
<b>Location of implementation</b>	College campus
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Ohio State University Suicide Prevention Program
<b>Evaluation Findings</b>	<p>Benefits from the OSU Suicide Prevention Program:</p> <ul style="list-style-type: none"> <li>• Knowledge and education about how to help peers</li> <li>• Strong sense of community</li> <li>• Guidance and mentorship from advisors</li> <li>• Awareness of making a difference in the campus community</li> <li>• Being valued for their efforts</li> <li>• Support from and connection with other like-minded students</li> <li>• Experience being strategic through planning outreach activities, and targeting certain groups (Fallen, 2017)</li> </ul> <p>Next Steps: To compare gatekeeper training outcomes based on presenter type (peer trainer vs. OSU staff trainer) (Fallen, 2017)</p>

## Worcester Polytechnic Institute's Student Support Network (SSN) Program

<b>Purpose</b>	The SSN is a training course for students, who may find themselves in the role of trusted listener or helper for their peers, and provides them with knowledge, skills, de-stigmatizing perspectives, and connection capabilities. It is designed to enhance student well-being and safety on campus (Worcester Polytechnic Institute [WPI], n.d.).
<b>Who it's for</b>	College students
<b>Role of youth</b>	Participants in training to help them be peer leaders in improving support among students (WPI, n.d.)
<b>What's involved</b>	<p>The Student Support Network (SSN) program trains selected students to identify, support, and refer peers who may be struggling with significant mental and behavioral health concerns. Core training components include:</p> <ul style="list-style-type: none"> <li>• Knowledge of mental/behavioral health issues and campus/community resources</li> <li>• Intervention skills, including empathic responding and working with resistance</li> <li>• Connecting identified students with a wide range of student helpers</li> <li>• Promoting attitudes which de-stigmatize mental health help-seeking (Suicide Prevention Resource Centre, 2017)</li> </ul>
<b>Location of implementation</b>	Various college campus
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Worcester Polytechnic Institute's (WPI) Student Development and Counselling Center (SDCC).
<b>Evaluation Findings</b>	TBC, but the SSN program is a Suicide Prevention Resource Center Best Practice (WPI, n.d.)

### Connect (Including Connect Youth Leaders)

<b>Purpose</b>	<p>The goal of the program is to reduce the number of youth suicides by improving community members' knowledge about youth suicide and preparing them to recognize youth at risk. The trainings seek to reduce stigma among program participants and thus modify the larger social environment (Bean &amp; Baber, 2011).</p> <p>Connect Youth Leaders engages a core group of youth leaders to co-facilitate the Connect curriculum with a trained adult for a high school audience. Youth trainers learn to co-facilitate Connect training through activities and rehearsing sections of the training. Connect staff observe, interact, and provide coaching (Connect, n.d.).</p>
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<b>Who it's for</b>	Along with educators, community members, faith leaders, hospital emergency departments, law enforcement, mental and health and substance abuse providers, military, primary care providers, and social services (Connect, 2018), the program also provides high school-aged youth with training to identify peers who are at risk, and to increase the likelihood that they will approach an adult if they are concerned about themselves or another young person (Bean & Baber, 2011).
<b>Role of youth</b>	Youth as participants (Connect), and youth (9 <sup>th</sup> grade or older) as suicide prevention trainers (Connect Youth Leaders).
<b>What's involved</b>	<p>In the Connect suicide prevention/intervention training: (youth as participants), youth learn:</p> <ul style="list-style-type: none"> <li>• National Best Practices for identifying and responding to other youth at risk for suicide, (2) the important role youth play in preventing suicide, (3) skills and confidence to recognize warning signs for suicide in a friend or family member, (4) why it is important to involve a trusted adult immediately when concerned about someone at risk, (5) resources and increased comfort to connect an at risk person with help, (6) suicide statistics and the influence of gender, culture, electronic communication and social networking on suicide risk and prevention, (7) individual, family, school and community risk and protective factors and ways to strengthen the positive influences that prevent suicide and other risky behaviors, and (8) self-care skills (Connect, n.d.).</li> </ul> <p>The Connect Youth Leaders (youth as suicide prevention leaders) involves the following:</p> <ul style="list-style-type: none"> <li>• Day one - adults only: Adults (1) gain an understanding of suicide as a public health issue and its impact on communities, families, friends, (2) gain insights into suicide data and how age, gender, culture and other factors impact suicide risk, (3) learn techniques to communicate with parents, guardians, family members or others in crisis situations, and (4) learn the best practices on restricting access to lethal means, safe messaging, and communicating about suicide, and how these differ when working with youth</li> <li>• Day Two - adults and youth together: You gain an understanding of suicide risk and protective factors and warning signs, (2) improve their skills and confidence to recognize warning signs and why involving an adult immediately is crucial, (3) increase their knowledge of resources and comfort level for connecting a person with help, and (4) learn how to decreased stigma about help-seeking and enhanced awareness of the benefits of treatment for mental health and substance abuse (Connect, n.d.)</li> </ul>
<b>Location of implementation</b>	In community
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	The National Alliance on Mental Illness chapter in New Hampshire, and the Substance Abuse and Mental Health Services Administration's (SAMHSA) Strategic Prevention Framework

<b>Evaluation Findings</b>	Evaluations show that youth trained by Connect show a statistically significant increase in knowledge and positive attitude towards suicide prevention and a decrease in stigma regarding seeking help. (Connect, n.d.)
<b>Light for Life Foundation Int'l/ Yellow Ribbon Suicide Prevention Program</b>	
<b>Purpose</b>	The Yellow Ribbon Suicide Prevention Program is dedicated to preventing suicide and attempts by making suicide prevention accessible to everyone and removing barriers to help by: (1) empowering individuals and communities through leadership, awareness and education; and (2) by collaborating and partnering with support networks to reduce stigma and help save lives (Yellow Ribbon Suicide Prevention Program, 2018). The overriding message of the Yellow Ribbon programming is that youth should tell an adult if somebody they know is suicidal, and that's okay for them to ask for help when they need it (Freedenthal, 2010).
<b>Who it's for</b>	High school students
<b>Role of youth</b>	Youth are participants in training programs to become peer leaders, and can then distribute materials at their school (e.g. ribbons, brochures, etc.), give presentations and trainings to students etc. (Yellow Ribbon Suicide Prevention Program, 2018).
<b>What's involved</b>	Programming includes school assemblies, peer leadership training for students, staff training for adult gatekeepers, community presentations, and local chapters that provide outreach and education. Yellow Ribbon programming includes distribution of the "Ask4Help" card, which contains suicide hotline numbers, instructions to youth to give the card to somebody who can help, and directions to potential helpers on how to proceed (Freedenthal, 2010).
<b>Location of implementation</b>	Within schools and communities
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Dale and Dar Emme
<b>Evaluation Findings</b>	No significant increase in help-seeking behaviour after the intervention, however there was a small increase (of 4.7%) in the number of youth who called a crisis hotline for help (Freedenthal, 2010)
<b>SKO (Samaritans, KELY Support Group, and Outward Bound)</b>	
<b>Purpose</b>	The aim of the project is to train young students to work within their own schools to support peers experiencing distress, and to teach others how to recognize and respond to people in distress and despair (Kumaria, 2001).
<b>Who it's for</b>	School-aged youth

<b>Role of youth</b>	Participants in training, and peer leaders (they develop their own peer support programs in their schools).
<b>What's involved</b>	Participating schools nominate two students who have demonstrated leadership potential, and commitment to helping fellow students. There is then a 4-month training program that takes place over evening, weekend, and a 7-day residential program. The students then go back to their schools and develop a peer support system in their own creative way (Kumaria, 2001).
<b>Location of implementation</b>	Training camps, and within schools
<b>Country of implementation</b>	China (Hong Kong)
<b>Who developed the program?</b>	SKO is a collaborative effort between three organizations: Samaritans, KELY Support Group (focuses per support in local schools and in the community, to fight drug abuse by young people), and Outward Bound (focus on developing self-confidence, leadership, and teamwork) (Kumaria, 2001).
<b>Evaluation Findings</b>	-
<b>Frameworks Youth Suicide Prevention Project</b>	
<b>Purpose</b>	The Frameworks project seeks to build community competence for identifying youth at risk for suicide and connecting these youth to appropriate resources and services. The primary goals of the training for youth include: (1) ensuring that youth have the knowledge to identify peers who are at risk of suicide, and (2) to increase the likelihood that they will seek the assistance of an adult if they are concerned about a peer (Baber & Bean, 2009).
<b>Who it's for</b>	Community professionals and youth
<b>Role of youth</b>	Youth are participants in the training.
<b>What's involved</b>	The Frameworks Youth Suicide Prevention Project uses the ecological model, intervening at multiple levels to reduce risk factors and enhance protective factors (Baber & Bean, 2009).
<b>Location of implementation</b>	In schools and communities
<b>Country of implementation</b>	USA

<b>Who developed the program?</b>	Developed and implemented by the New Hampshire chapter of the National Alliance on Mental Illness (NAMI-NH).
<b>Evaluation Findings</b>	This project is listed in the National Best Practices Registry by the American Foundation for Suicide Prevention (AFSP) and the Suicide Prevention Resource Center (SPRC) as a program designed according to current standards in the field, but has not yet been evaluated to document its effectiveness (Baber & Bean, 2009).
<b>Zuni Life Skills Curriculum for preventing suicidal behaviour</b>	
<b>Purpose</b>	Zuni Life Skills Curriculum is a community-initiated, high school suicide prevention program designed to provide peer intervention strategies for youth, which are consistent with cultural and community values and strengths (LaFromboise & Lewis, 2008).
<b>Who it's for</b>	Zuni youth
<b>Role of youth</b>	Participants in training
<b>What's involved</b>	The curriculum involves a 30-week course, taking place three times/week, and focused on building self-esteem, helping youth identify feelings of stress, improving communication and problem-solving skills, decreasing self-destructive behaviour, setting goals, and providing information about suicide and intervention training (Evans, Foa, & Gur, 2014). The seven units of the curriculum include: (1) building self-esteem, (2) identifying emotions and stress, (3) increasing communication and problem-solving skills, (4) recognizing and eliminating self-destructive behaviour, (5) learning about current knowledge on the variable rates of suicide across tribes, on risk factors for American Indian adolescent suicidal behaviour, on the warning signs of suicide, and on facts and myths about suicide, (6) receiving suicide crisis intervention training, and (7) engaging in individual and collective goal-setting (LaFromboise et al., 2008).
<b>Location of implementation</b>	In schools
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	Zuni-Stanford Committee, which was initiated as a result of a formal agreement between Stanford University, the Zuni Board of Education, and the Zuni Tribal Council (LaFromboise et al., 2008)

<b>Evaluation Findings</b>	The intervention was found to have a positive impact on hopelessness, suicidal ideation, and students' ability to intervene in a peer suicidal crisis situation (LaFromboise et al., 2008). It did not, however, decrease feelings of depression, and youth reported little change in social functioning (Evans et al., 2014).
<b>Reaching Out – Youth Suicide Alertness Training</b>	
<b>Purpose</b>	Reaching Out teaches youth how to build protective factors against suicide, how to recognize the signs a person at risk of suicide might display, and how and why one might choose to reach out for help. The overarching tone of the workshop is intended to be hopeful; to inspire teens to consider reaching out to friends or peers who may be thinking of suicide while also encouraging them to also seek out support for themselves should they need it (Anti-bullying Nova Scotia, n.d.)
<b>Who it's for</b>	Youth
<b>Role of youth</b>	Participants in training
<b>What's involved</b>	<ul style="list-style-type: none"> <li>• The session is one hour</li> <li>• The training aims to break the silence that surrounds suicide by creating a supportive learning environment and by fostering dialogue regarding the beliefs, challenges, fears and hopes associated with youth suicide prevention.</li> </ul>
<b>Location of implementation</b>	Junior high and high schools
<b>Country of implementation</b>	Canada-based program; module could be purchased worldwide
<b>Who developed the program?</b>	Crisis Intervention and Suicide Prevention Centre of British Columbia
<b>Evaluation Findings</b>	
<b>Healthy Relationships Plus Program (HRPP)</b>	
<b>Purpose</b>	HRPP targets the prevention of violence through the promotion of positive, healthy relationships, with a strengthened focus on mental health and suicide prevention, and drug and alcohol use (The Fourth R, n.d.). The program was designed to build strengths, resilience, and coping skills among youth as a way of enhancing interpersonal functioning, and to model the appropriate use of power and respectful relationships, and support youth empowerment (T. Marriott, personal communication, January 9, 2018).

<b>Who it's for</b>	Youth between the ages of 12-18
<b>Role of youth</b>	Youth as participants in training, and youth can be facilitators. For example, 24-year old is currently being trained to facilitate the program in Nova Scotia (T. Marriott, personal communication, January 9, 2018).
<b>What's involved</b>	The HRPP is a small groups program of 6-25 youth, with sessions that cover the following topics: friendships/relationships, influences on relationships, early warning signs of dating violence, communication styles, standing up for what is right, when friendships and relationships end, shaping our view, healthy relationships, knowing your values and boundaries, taking responsibility for emotions, and emotional health and well-being (The Fourth R, n.d.).
<b>Location of implementation</b>	In schools, in either a classroom-based curriculum, or as a stand-alone program in schools or communities (T. Marriott, personal communication, January 9, 2018).
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Developed by The Fourth R, and will soon also be hosted by the Canadian Mental Health Association in Nova Scotia
<b>Evaluation Findings</b>	-

### Online Resources

#### StoryPRIME (Stories of Personal Resilience in Managing Emotions)

<b>Purpose</b>	StoryPRIME is a web-based interface designed to guide peer leaders through the process of remembering, sharing, and condensing personal stories into text message testimonials that are interesting, personal, and credible to ninth graders. These texts are a part of Text4Strength, a text messaging extension of Sources of Strength, which is currently under development. Text4Strength uses text-based peer testimonials to introduce high school students to Sources of Strength concepts, and extends Sources of Strength by introducing emotional skills associated with decreased depressive symptoms and lower suicide risk (Thiha et al., 2016).
<b>Who it's for</b>	High school students
<b>Role of youth</b>	Youth assisted with the design and development of the interface. They took part in a participatory design session with high school peer leaders, to offer their feedback about the design for the StoryPRIME interface, and for the Text4Strength program (Thiha et al., 2016).

<b>What's involved</b>	Students provide testimonials of their experiences as a resource for other students. The StoryPRIME interface prompts writers to describe how they applied some common coping strategies—such as family support, mentors, and positive friends (Thiha et al., 2016). From StoryPRIME, peer leaders generate engaging testimonials suitable for use in text messaging (Thiha et al., 2016).
<b>Location of implementation</b>	In school
<b>Country of implementation</b>	USA
<b>Who developed the program?</b>	It was born out of Sources of Strength in trying to improve the Text4Strength program under development, and funded by the National Institute of Mental Health. (Thiha et al., 2016)
<b>Evaluation Findings</b>	Testimonials written with the StoryPRIME interface were rated as more relatable, useful/relevant, intriguing, and likable than testimonials written without StoryPRIME (Thiha et al., 2016).
<b>“Be Safe” App</b>	
<b>Purpose</b>	Be Safe is a mobile app that aims to help young adults make a decision about seeking help in a crisis. It is a systems navigation tool that helps youth find help when they need it, and supports them through the process of reaching out. It is an easy to use, accessible tool available 24/7 on Apple or Android devices, or as a pocket guide. It is meant to compliment a helping relationship and is not a substitute for professional, clinical services (Be Safe, n.d.).
<b>Who it's for</b>	Young people experiencing a mental health or emotional crisis.
<b>Role of youth</b>	Be Safe was developed in full partnership with youth, alongside mindyourmind tech staff and an external developer. They were involved in the conceptualization and development of the app, with mutual decision-making power. Youth were also involved in consultations with community clinicians to ensure that Be Safe provides accurate information and is aligned with evidence-based practices, to provide input on Be Safe's evaluation plan, and to contribute to ongoing design updates. Youth are paid for their contributions (Be Safe, n.d.).
<b>What's involved</b>	<p>The app offers the following:</p> <ul style="list-style-type: none"> <li>• It allows users to create a digital safety plan</li> <li>• It informs users about mental health and addiction resources in their local community</li> <li>• It directs users to the best options for their needs through a decision-making aid</li> <li>• It creates a personal 'get help script' that helps users find the words to reach out</li> </ul> <p>It empowers the user to reach out safely (Be Safe, n.d.)</p>

<b>Location of implementation</b>	Delivered via mobile phone
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	It was developed in partnership between CAMH's Service Collaboratives Initiative and mindyourmind.
<b>Evaluation Findings</b>	-

### E-learning Module on Suicide Awareness

<b>Purpose</b>	This E-learning Module is intended to raise awareness and provide resources on suicide prevention, intervention, and postvention (A. Kirkham, personal communication, January 2, 2018).
<b>Who it's for</b>	Youth
<b>Role of youth</b>	Youth assisted in building the initial framework for the suicide awareness module (i.e. what information should be included)
<b>What's involved</b>	It offers information about suicide prevention, intervention, and postvention, using interactive elements, tools, and videos. They also offered feedback on the initial drafts of the modules A. Kirkham, personal communication, January 2, 2018).
<b>Location of implementation</b>	Online module
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Mindyourmind
<b>Evaluation Findings</b>	N/A (the online module is currently under development)

### Help Pages, mindyourmind

<b>Purpose</b>	To provide resources for individuals who themselves need help in crisis, who need to talk to a professional (e.g. a doctor, therapist, or counselor), or who has a friend needing help (mindyourmind, n.d.).
<b>Who it's for</b>	Youth



<b>Role of youth</b>	The Help pages are all co-developed with young people
<b>What's involved</b>	<p>Online resources/tools are provided, that fall under some of the following headings:</p> <ul style="list-style-type: none"> <li>• I'm in crisis</li> <li>• I don't know what's wrong</li> <li>• I need to talk to someone</li> <li>• Talk to a doctor</li> <li>• Talk to a counselor</li> <li>• Talk to a therapist</li> <li>• My friend is in crisis</li> <li>• What's wrong with my friend?</li> <li>• How can I help my friend?</li> <li>• Get ready for your appointment</li> <li>• Self care while helping a friend</li> </ul> <p>Where to call (mindyourmind, n.d.)</p>
<b>Location of implementation</b>	Online resource
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	Mindyourmind
<b>Evaluation Findings</b>	<p>Results from an evaluation of the mindyourmind website:</p> <ul style="list-style-type: none"> <li>• 65% of repeat users with self-reported mental health issues accessed supports as a result of using the website</li> <li>• 65% of online survey respondents reported having had or currently having a mental health or emotional health issue</li> <li>• The longer youth used the website, the more likely they were to recommend tools to friends and family</li> <li>• They are also more likely to help friends and family with mental health concerns because of what they have learned</li> </ul> <p>Results from an evaluation of the volunteer program where youth co-develop the online tools:</p> <ul style="list-style-type: none"> <li>• Feedback from youth participants showed a significantly high level of involvement that increased over time</li> <li>• Many reported that being involved in the project gave their life meaning, and reported it would be very difficult to give up their involvement</li> </ul> <p>Youth volunteer participants reported significant improvement in knowledge of mental illness and how to help others with mental health concerns (Garinger, 2010)</p>

Indigenous Peer Mentoring: Help Seeking	
<b>Purpose</b>	There is a wide range of clips to choose from that address a variety of youth issues such as: dating violence, bullying, substance use, suicide, and teen pregnancy (The Fourth R, n.d.)
<b>Who it's for</b>	Indigenous youth
<b>Role of youth</b>	Indigenous youth as recipients of the resources, and as actors in the video modules
<b>What's involved</b>	A number of help-seeking video clips are offered online, to be used in a classroom setting up to the educator's discretion (The Fourth R., n.d.)
<b>Location of implementation</b>	In schools
<b>Country of implementation</b>	Canada
<b>Who developed the program?</b>	The Fourth R
<b>Evaluation Findings</b>	–
Chat Safe	
<b>Purpose</b>	Chat Safe will be an online platform to prevent suicide in youth, and is currently under development. It is expected to be rolled out in 2019 (M. Lamblin, personal communication, January 17, 2018).
<b>Who it's for</b>	Youth ages 12-25
<b>Role of youth</b>	Youth, including you with lived experience of suicide attempts and self harm, are helping to design and develop the online tool, from determining what the online tool will be (e.g. a series of videos, a chat app, etc.), to what it will look like. This involves full-day focus groups with 10-12 youth for each stage of the tool's development (M. Lamblin, personal communication, January 17, 2018).
<b>What's involved</b>	The online tool is currently under development
<b>Location of implementation</b>	Online

<b>Country of implementation</b>	Australia
<b>Who developed the program?</b>	Orygen, in partnership with Facebook and Portable (a digital design and technology company based in Melbourne) (M. Lamblin, personal communication, January 17, 2018).
<b>Evaluation Findings</b>	N/A
<b>Coping with Self Harm: A Guide for Parent and Carers</b>	
<b>Purpose</b>	Coping with Self Harm is a pamphlet, available in physical copies and online, that provides information for parents and families about self-harm and its causes and effects. It is based on current research on self-harm and on the interviews with parents whose children self-harmed. It contains quotes from them with advice for other parents as well as evidence-based information and links to sources of help (University of Oxford Medical Sciences Division, 2018).
<b>Who it's for</b>	Parents, caregivers, and other family members and friends of youth engaging in self-harm (University of Oxford Medical Sciences Division, 2018).
<b>Role of youth</b>	In the adapted version of this resource, soon to be developed by Orygen, they will be engaging young people in its development to ensure that the resource includes what youth believe to be important for their parents and caregivers to know about self harm, and to make sure it is appealing to a young Australian audience. Orygen will also be expanding the resource to be accessible in a variety of different languages, and to a number of different cultural groups represented in Australia (M. Lamblin, personal communication, January 17, 2018).
<b>What's involved</b>	It is a pamphlet available in both a physical copy and online, that provides information on self-harm, how to support youth who self-harm, who to speak to about concerns, how to manage injuries, the importance of attending to caregivers' own needs, and more (University of Oxford Medical Sciences Division, 2018).
<b>Location of implementation</b>	Online
<b>Country of implementation</b>	United Kingdom, and soon to be redeveloped by Orygen in Australia
<b>Who developed the program?</b>	Originally developed by researchers at the University of Oxford, and soon to be adapted by Orygen
<b>Evaluation Findings</b>	-

## 8. RESOURCES

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## SCOPUS SEARCH

Scopus	Searches	Results
1	(youth W/3 led) or (youth W/3 facilitat*) or (youth W/3 creat*) or (youth W/3 develop*) or (youth W/3 run) or (adolescen* W/3 led) or (adolescen* W/3 facilitat*) or (adolescen* W/3 creat*) or (adolsecen* W/3 develop*) or (adolescen* W/3 run) or (teen* W/3 led) or (teen* W/3 facilitat*) or (teen* W/3 creat*) or (teen* W/3 develop*) or (teen* W/3 run) or (peer* W/3 led) or (peer* W/3 facilitat*) or (peer* W/3 creat*) or (peer* W/3 develop*) or (peer* W/3 run) or (youth* W/3 driv*) or (youth* W/3 develop*) or (peer* W/3 driv*) or (peer* W/3 develop*)	19,755
2	"communit*-led" or "communit*-base*" or (communit* W/3 led) or (communit* W/3 based) or (communit* W/3 driv*) or (communit* W/3 developed)	105,027
3	1 OR 2	123,902
4	"suicide prevention" or (suicide adj3 prevent*)	4,694
5	3 AND 4	188

## OID MEDLINE

Medline	Searches	Results
96	("communit*-led" or "communit*-base*" or (communit* adj3 led)).mp. or (communit* adj3 based).tw,kf. [mp=title, abstract, original title, name of substance word, subject heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	62577
97	94 or 96	69160
98	("suicide prevention" or (suicide adj3 prevent*)).mp. [mp=title, abstract, original title, name of substance word, subject heading word, keyword heading word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms]	5505
99	97 and 98	191
100	("communit*-led" or "communit*-base*" or (communit* adj3 led) or (communit* adj3 based) or (communit* adj3 driv*) or (communit* adj3 developed)).tw,kf.	63884

101	((youth adj3 led) or (youth adj3 facilitat*) or (youth adj3 creat*) or (youth adj3 develop*) or (youth adj3 run) or (adolescen* adj3 led) or (adolescen* adj3 facilitat*) or (adolescen* adj3 creat*) or (adolsecen* adj3 develop*) or (adolescen* adj3 run) or (teen* adj3 led) or (teen* adj3 facilitat*) or (teen* adj3 creat*) or teen*adj3 develop* or (teen* adj3 run) or (peer* adj3 led) or (peer* adj3 facilitat*) or (peer* adj3 creat*) or (peer* adj3 develop*) or (peer* adj3 run) or (youth* adj3 driv*) or (youth* adj3 develop*) or (peer* adj3 driv*) or (peer* adj3 develop*)).tw,kf.	7527
102	100 or 101	70971
103	98 and 102	195
104	103 not 99	8

## PsychINFO

PsychINFO (04/01/2018)	Searches	Results
1	((youth NEAR/3 led) OR (youth NEAR/3 facilitat*) OR (youth NEAR/3 creat*) OR (youth NEAR/3 develop*) OR (youth NEAR/3 run) OR (adolescen* NEAR/3 led) OR (adolescen* NEAR/3 facilitat*) OR (adolescen* NEAR/3 creat*) OR (adolsecen* NEAR/3 develop*) OR (adolescen* NEAR/3 run) OR (teen* NEAR/3 led) OR (teen* NEAR/3 facilitat*) OR (teen* NEAR/3 creat*) OR (teen* NEAR/3 develop*) OR (teen* NEAR/3 run) OR (peer* NEAR/3 led) OR (peer* NEAR/3 facilitat*) OR (peer* NEAR/3 creat*) OR (peer* NEAR/3 develop*) OR (peer* NEAR/3 run) OR (youth* NEAR/3 driv*) OR (youth* NEAR/3 develop*) OR (peer* NEAR/3 driv*) OR (peer* NEAR/3 develop*) OR "communit*-led" OR "communit*-base*" OR (communit* NEAR/3 led) OR (communit* NEAR/3 based) OR (communit* NEAR/3 driv*) OR (communit* NEAR/3 developed)) AND ("suicide prevention" OR (suicide NEAR/3 prevent*))	292

Cochrane Library (04/01/2018)	Searches	Results
1	((youth NEAR/3 led) OR (youth NEAR/3 facilitat*) OR (youth NEAR/3 creat*) OR (youth NEAR/3 develop*) OR (youth NEAR/3 run) OR (adolescen* NEAR/3 led) OR (adolescen* NEAR/3 facilitat*) OR (adolescen* NEAR/3 creat*) OR (adolsecen* NEAR/3 develop*) OR (adolescen* NEAR/3 run) OR (teen* NEAR/3 led) OR (teen* NEAR/3 facilitat*) OR (teen* NEAR/3 creat*) OR (teen* NEAR/3 develop*) OR (teen* NEAR/3 run) OR (peer* NEAR/3 led) OR (peer* NEAR/3 facilitat*) OR (peer* NEAR/3 creat*) OR (peer* NEAR/3 develop*) OR (peer* NEAR/3 run) OR (youth* NEAR/3 driv*) OR (youth* NEAR/3 develop*) OR (peer* NEAR/3 driv*) OR (peer* NEAR/3 develop*) OR "communit*-led" OR "communit*-base*" OR (communit* NEAR/3 led) OR (communit* NEAR/3 based) OR (communit* NEAR/3 driv*) OR (communit* NEAR/3 developed)) AND ("suicide prevention" OR (suicide NEAR/3 prevent*))	14