Réconciliation honoring
the other

Canadian Association for Suicide Prevention National Conference

Congrès national de l'Association canadienne pour la prévention du suicide

16 - 18 Oct 2019
Edmonton, Alberta
Partners

This conference could not have been made possible without the generosity of our Partners!

PLATINUM PARTNER

SILVER PARTNER

BRONZE PARTNER

ARTIST, SPEAKER AND VENUE PARTNERS
HEALING DAY

Wednesday

BREAKFAST
7:30-8:30AM

OPENING
8:30-9:15AM

KEYNOTE
9:15-10:00AM
Clem Martini - Coming to terms: How I reconciled with the matters of my brother’s suicide

BREAK
10:00-10:15AM

BREAKOUT SESSION 1
10:15-11:15AM

BREAK
11:15-11:30AM

BREAKOUT SESSION 2
11:30-12:30AM

LUNCH AND POSTER DISPLAYS
12:30PM-1:15PM

KEYNOTE
1:15-2:00PM
Dr. Mark Kaplan - Suicide in Older Age: Why are men more vulnerable?

BREAK
2:00-2:15PM

BREAKOUT SESSION 3
2:15-3:15PM

BREAK
3:15-3:30PM

BREAKOUT SESSION 4
3:30-4:30PM

GALA
6:00-9:00PM

Thursday

SUNRISE WALK
7:30-8:30AM

BREAKFAST
8:00-9:30AM

PEOPLE IMPACTED BY SUICIDE BREAKFAST
8:15-9:30AM

KEYNOTE
9:30-10:15AM
Jorgen Gullestrup - A different approach to suicide prevention from the Australian construction, mining and energy industries

BREAK
10:15-10:30AM

BREAKOUT SESSION 5
10:30-11:30AM

BREAK
11:30-11:45AM

BREAKOUT SESSION 6
11:45-12:45AM

LUNCH AND POSTER DISPLAYS
12:45AM-1:30PM

PLENARY SPEAKER
1:30-2:15PM
Dr. David Gardner and Dr. Andrea Murphy - The role of community pharmacy in suicide prevention

BREAK
2:15-2:30AM

BREAKOUT SESSION 7
2:30-3:30AM

BREAK
3:30-3:45AM

DEBATE
3:45-4:45PM
Dr. Zachary Kaminsky and Dr. Simon Hatcher - Risk assessments and how they influence our approach to suicide prevention

Thursday Cont'

CASP AGM
5:00-6:00PM

THE GRIZZLIES: FILM AND MODERATED DISCUSSION
7:30-10:00PM

Friday

BREAKFAST
7:30-8:30AM

PLENARY
8:30-9:15AM
Canadian Journalism Forum - Taking suicide reporting guidelines to the next level

BREAK
9:15-9:30AM

BREAKOUT SESSION 8
9:30-10:30AM

BREAK
10:30-10:45AM

BREAKOUT SESSION 9
10:45-11:45AM

BREAK
11:45AM-12:00PM

LUNCH AND AB SHOWCASE
12:00PM-1:00PM

CLOSING KEYNOTE
1:00-1:45PM
Senator LaBoucane-Benson - Historic trauma, healing and reconciliation
The conference may be emotional, therefore, counsellors will be available throughout. The executive board room is a designated quiet room.

CMHA Edmonton’s distress line is available 24/7 at 1 (780) 482-4357.

We encourage you to share your conference experience using the hashtag #CASP2019. Follow the hashtag for information about the conference and conference sessions on Twitter.

During the conference, we will be selling raffle tickets for two roundtrip tickets to anywhere WestJet flies. Raffle tickets are available at the registration desk.

Committees

CONFERENCE PLANNING COMMITTEE

Dammy Albach, Canadian Mental Health Association – British Columbia Division
Julie-Kathleen Campbell, Canadian Association for Suicide Prevention
Ione Challborn, Canadian Mental Health Association – Edmonton-Region
Lianna Chondo, City of Edmonton
Mara Grunau, Centre for Suicide Prevention
Karen Letofsky, Canadian Association for Suicide Prevention
Karla Thorpe, Mental Health Commission of Canada

SCIENTIFIC REVIEW COMMITTEE

Michael Trew, MD FRCPC – Chair, Alberta Health Services
Yvonne Bergmans, PhD, Unity Health Toronto
Julie-Kathleen Campbell, MPs, Canadian Association for Suicide Prevention
Rebecca Sanford, PhD, Thompson Rivers University
Paul Links, MD FRCPC, London Health Sciences Centre
John Oliffe, PhD, University of British Columbia
Richard Ramsay MSW, LivingWorks Education Inc.
Suzanne McLeod, PhD, Centre for Suicide Prevention
Robert Olson, MLIS, Centre for Suicide Prevention
Gabby Galley, MSc, Mental Health Commission of Canada

The organization of this conference was made possible by our committees, as well as by support from the staff members of Canadian Association for Suicide Prevention, Canadian Mental Health Association – Edmonton Region and Centre for Suicide Prevention.
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CANADIAN ASSOCIATION FOR SUICIDE PREVENTION

The Canadian Association for Suicide Prevention (CASP) was launched in 1985 by a group who saw the need to provide information and resources to communities to reduce the suicide rate and minimize the harmful consequences of suicidal behaviour. Like many others, CASP envisions a world in which people enjoy an optimal quality of life, are long-living, socially responsible, and optimistic about the future. CASP’s ultimate purpose is to reduce the suicide rate and minimize the harmful consequences of suicidal behaviour. We continue to be a touchstone for everyday Canadians and members of the media who want resources, guidance and education.

www.suicideprevention.ca

@CASP_CA
@CanadianAssociationforSuicidePrevention
@canadianassociationsuicideprev

CENTRE FOR SUICIDE PREVENTION

Centre for Suicide Prevention is an education centre, a centre of excellence, based in Calgary, Alberta. We are a branch of the Canadian Mental Health Association. We are educators. For over 35 years, we’ve been equipping Canadians with the information, knowledge and skills necessary to respond to people at risk of suicide. We educate online, in print, and interactively. Our library of over 45,000 suicide-specific items, the largest English-language collection of its kind, informs the work we do.

www.suicideinfo.ca

@ CSPYyc

CO-HOST ORGANIZATIONS

CANADIAN MENTAL HEALTH ASSOCIATION – EDMONTON REGION

The Canadian Mental Health Association (CMHA), founded in 1918, is one of the oldest voluntary organizations in Canada. CMHA Edmonton Region is a non-profit volunteer agency. It functions as a community centre promoting mental health. It works in partnership with other community agencies to educate about mental health and illness, to advocate for better conditions in the community and to help people build strong supports for community life.

edmonton.cmha.ca

@CMHAEdmonton
Message from the Mayor of Edmonton

I’m pleased to welcome you to Edmonton, Alberta for the 30th Annual Canadian Association for Suicide Prevention Conference.

By bringing people together for this conference, we are showcasing Edmonton as a diverse and beautiful city, and as a leader in suicide prevention.

Last year, the City of Edmonton began implementation of Living Hope: A Community Plan to Prevent Suicide in Edmonton, developed by a diverse group of community, governmental and private sector stakeholders. Most recently, Living Hope’s suicide prevention awareness campaign, 11 of Us, was launched on September 10, World Suicide Prevention Day. The campaign’s name is taken from the number of Edmontonians who attempt or die by suicide every day.

This is a heartbreaking statistic to know, but I’m hopeful that through initiatives like the 11 of Us awareness campaign — which includes a sponsored training framework that aims to enhance the community’s ability to identify and respond effectively to those who may be at risk of suicide — we’re able to decrease that number.

The Living Hope implementation plan highlights the issue of suicide in our city, and recognizes that a comprehensive plan involves not only health care providers, but the community at large. Everyone must work together to prevent suicide.

The issue of suicide prevention has been of concern for The City of Edmonton for some time now and we continue to be deeply invested in saving lives. Some of our preliminary efforts began with installing barriers on the High Level Bridge, a suicide hotspot in our city, as well as installing emergency phones on the bridge for individuals in crisis and for bystanders to use if they see someone in distress. Since the installation of the barriers and phones, suicides from the bridge have significantly decreased.

We are also a proud participant of the Mental Health Commission of Canada’s Roots of Hope community-based suicide prevention demonstration project, which dovetails seamlessly with the initiatives of Living Hope.

As you attend the conference, with the theme of Reconciliation: Honouring the other, I encourage you to keep in mind how we can all work together to prevent suicide — because everyone can play a part in suicide prevention.

MAYOR DON IVESON
CITY OF EDMONTON
On behalf of the Canadian Association for Suicide Prevention (CASP), I would like to warmly welcome you to the dynamic city of Edmonton for our annual national suicide prevention conference. We are pleased to be partnering this year with our co-hosts, the Centre for Suicide Prevention and the Canadian Mental Health Association—Edmonton Region. They have been hard at work to ensure that the 2019 Conference is both engaging and impactful. We are also grateful to our sponsors, presenters and the volunteers whose contributions have supported our joint efforts in bringing you this event.

This national conference is committed to providing a forum in which a broad range of stakeholders can come together to learn, share, network and question in their pursuit of reducing the impact of suicide and supporting life promotion. This year’s theme of Reconciliation is intended to encourage and honour open dialogue, reflection and the inclusion of multiple, diverse perspectives. The Program Committee has built a rich and comprehensive schedule of speakers, workshops and other types of presentations. We are also pleased this year to introduce our first Healing Day for persons with lived experience.

Our hope is that every participant will leave the conference feeling both informed and inspired. Thank you for your participation, as we work together to make a difference.

KAREN LETOFSKY, C.M.
President of the Board, CASP
Président du conseil, ACSP
Welcome to the 30th annual Canadian Association for Suicide Prevention Conference.
Our conference theme is Reconciliation: Honouring the Other. This theme forefronts the need to heal relationships to drive connectedness, a key underpinning of suicide prevention. Whether we are focused on individual relationships, engaging with priority populations or fueling the suicide prevention network across Canada, reconciliation and honouring is needed.

We have an opportunity while we are all gathered here together to learn from one another, and to share our knowledge.

Ingrid Betancourt said that, “Reconciliation is a decision you take into your heart.” We hope that you will take this incredibly rich learning experience into your heart, and back to your community to share with others.

Suicide prevention is everyone's business, and everyone has a role to play.

Message from CMHA-Edmonton Region and Centre for Suicide Prevention Executive Directors

**Message des Directrices exécutives de L’ACSM de la région d’Edmonton et du Centre pour la Prévention du Suicide**

**Bienvenue au 30ème Congrès national de l’Association canadienne pour la prevention du suicide.**

**Le thème de notre congrès est la réconciliation: Honorer l’autre. Ce thème met à l’avant plan le besoin de guérir les relations afin de créer des liens, une des clés de voute de la prevention du suicide. Que nous soyons concentrés sur les relations individuelles, l’engagement avec des populations prioritaires ou l’alimentation du réseau contre la prevention du suicide partout au Canada, la réconciliation et honorer l’autre sont des éléments essentiels.**

Nous avons une opportunité, pendant que nous sommes tous rassemblés ici pour apprendre les uns des autres, et de partager nos connaissances.

Ingrid Betancourt a dit que: ‘la réconciliation est une décision qui se prend avec le coeur’.

Nous espérons que vous aliez prendre cette expérience et cet apprentissage incroyablement riches dans votre cœur, et la ramener dans vos communautés respectives où vous pourrez la partager avec d’autres.

La prévention du suicide est le travail et la responsabilité de tous et tout le monde a un rôle à jouer.

**MARA GRUNAU**
EXECUTIVE DIRECTOR,
CENTRE FOR SUICIDE PREVENTION

**IONE CHALLBORN**
EXECUTIVE DIRECTOR, CANADIAN MENTAL HEALTH ASSOCIATION – EDMONTON REGION

**Directrice exécutive, L’Association canadienne pour la santé mentale – région d’Edmonton**
Events schedule of
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>7:30-8:30 AM</td>
<td><strong>BREAKFAST</strong></td>
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<tr>
<td>8:30-9:15 AM</td>
<td><strong>OPENING</strong></td>
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<tr>
<td>9:15-10:00 AM</td>
<td><strong>KEYNOTE</strong></td>
<td>Clem Martini</td>
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<tr>
<td></td>
<td><strong>Coming to terms: How I reconciled</strong></td>
<td>with the matters of my brother's suicide</td>
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<tr>
<td>10:00-10:15 AM</td>
<td><strong>BREAK</strong></td>
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<tr>
<td>10:15-11:15 AM</td>
<td><strong>SESSION 1</strong></td>
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<td></td>
<td>Post-secondary suicide postvention: addressing the unique needs of a community</td>
<td>Kevin Friese with Sarah Wolgemut, Debbie Bruckner</td>
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<td>690</td>
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<td></td>
<td>Indigenous lifeway: a healing way of life</td>
<td>Gloria Kejick with Janet Head</td>
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<tr>
<td></td>
<td>800 Part 1 of 2</td>
<td>Workshop Knowledge to Action</td>
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<tr>
<td></td>
<td>A proposed framework for long-term prediction, program development and evaluation</td>
<td>Angus Thompson</td>
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<tr>
<td></td>
<td>570</td>
<td>Research People at Risk</td>
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<tr>
<td></td>
<td>Equipping healthcare professionals in the assessment and intervention of suicidal patients</td>
<td>Karla Thorpe</td>
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<tr>
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<td>680</td>
<td>Research Wellness</td>
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<tr>
<td></td>
<td>Promoting life together collaborative: Wise practices and lessons learned in our journey together</td>
<td>Carol Fancott with Albert Dumont, Denise McCuaig, Nancy Parker, Despina Papadopoulos</td>
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<tr>
<td></td>
<td>410 Part 1 of 2</td>
<td>Workshop Knowledge to Action</td>
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<tr>
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<td>#Txting for mental health: Launching a national texting service</td>
<td>Alisa Simon</td>
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<td>630</td>
<td>Practice People at Risk</td>
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<td></td>
<td>Online crisis support</td>
<td>Robyn Romano with Ashley De Vera Macayan</td>
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<td></td>
<td>820</td>
<td>Practice People at Risk</td>
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<tr>
<td>11:15-11:30 AM</td>
<td><strong>BREAK</strong></td>
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# SESSION 2

<table>
<thead>
<tr>
<th>Session Title</th>
<th>Presenter(s)</th>
<th>Type</th>
<th>Room</th>
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<tbody>
<tr>
<td>Post-secondary suicide postvention: Addressing the unique needs of a community</td>
<td>Kevin Friese with Sarah Wolgemut, Debbie Bruckner</td>
<td>Practice</td>
<td>Winterlake</td>
</tr>
<tr>
<td>Indigenous lifeway: A healing way of life</td>
<td>Gloria Kejick with Janet Head</td>
<td>Workshop</td>
<td>Rutherford</td>
</tr>
<tr>
<td>Conducting community-based research to inform local suicide prevention services and supports</td>
<td>Amanda Demmer with Jessica Deming</td>
<td>Practice</td>
<td>Vintage</td>
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<tr>
<td>Dreamweaving</td>
<td>Michelle Budiwski</td>
<td>Workshop</td>
<td>Rowand</td>
</tr>
<tr>
<td>Promoting life together collaborative: wise practices and lessons learned in our journey together</td>
<td>Carol Fancott with Albert Dumont, Denise McCuaig, Nancy Parker, Despina Papadopoulos</td>
<td>Workshop</td>
<td>Northcote</td>
</tr>
<tr>
<td>Reducing suicide ideation online: support for a dynamic process model</td>
<td>Daniel W. Cox</td>
<td>Research</td>
<td>Emily Murphy</td>
</tr>
<tr>
<td>Reconciling aspiration and reality: launching a pioneer national helpline service</td>
<td>Jason Chare with Stephanie MacKendrick</td>
<td>Research</td>
<td>Knowledge to Action</td>
</tr>
<tr>
<td>Evidence review of school-based suicide prevention programs: Preliminary findings</td>
<td>Ashlee Mulligan with Gabrielle Galley</td>
<td>Research</td>
<td>Rundle</td>
</tr>
<tr>
<td>An observational study of suicidality in middle schoolers in Eastern Ontario</td>
<td>Mark Sinyor</td>
<td>Research</td>
<td>People at Risk</td>
</tr>
</tbody>
</table>

## 1:15-2:00 PM KEYNOTE

**Suicide in older age: Why are men more vulnerable?**

Dr. Mark Kaplan
### SESSION 3

<table>
<thead>
<tr>
<th>Topic</th>
<th>Presenter(s)</th>
<th>Session Type</th>
<th>Location</th>
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</thead>
<tbody>
<tr>
<td>Suicide risk assessment and safety planning - current research, best practices and emerging conversations</td>
<td>Akhila Blaise with Liz Robbins</td>
<td>Workshop</td>
<td>Rutherford</td>
</tr>
<tr>
<td>Running a suicide bereavement support group: A dissection of CMHA Edmonton's strategy</td>
<td>Peris Wasonga with Jonathan Dubue &amp; Garima Khatri</td>
<td>Practice</td>
<td>Vintage</td>
</tr>
<tr>
<td>From colourblind to colourfull: an asset-based model for life-promotion</td>
<td>Amelia Gamvrelis with Jason Klainchar</td>
<td>Workshop</td>
<td>Rowand</td>
</tr>
<tr>
<td>Feather carriers leadership for life promotion</td>
<td>Dr. Ed Connors with John Rice</td>
<td>Workshop</td>
<td>Northcote</td>
</tr>
<tr>
<td>Identify and discuss research priorities in suicide prevention and information and communication technologies (ICT)</td>
<td>Cécile Bardon with Laurent Corthésy-Blondin</td>
<td>Research</td>
<td>Emily Murphy</td>
</tr>
<tr>
<td>Do initial cognitive and affective factors predict outcomes in a chat-based crisis intervention service? An exploratory study</td>
<td>Katharine D. Wojcik</td>
<td>Research</td>
<td>Emily Murphy</td>
</tr>
<tr>
<td>HEADSTRONG - Life promotion through youth leadership. Empowering Canadian youth to be brave, reach out and speak up!</td>
<td>Fiona Hayes with Nathan Ip</td>
<td>Workshop</td>
<td>Rundle</td>
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### 2:00-2:15 PM

**BREAK**

### 3:30-4:30 PM

<table>
<thead>
<tr>
<th>Topic</th>
<th>Presenter(s)</th>
<th>Session Type</th>
<th>Location</th>
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<tbody>
<tr>
<td>Housing programs and suicide</td>
<td>Erik Mohns with Danby Felker, Cindy Glover</td>
<td>Practice</td>
<td>Winterlake</td>
</tr>
<tr>
<td>Meeting the unique mental health needs of boys and men - weaving adventure, expressive and experiential modalities</td>
<td>Nick Cardone</td>
<td>Workshop</td>
<td>Rutherford</td>
</tr>
<tr>
<td>Running a suicide bereavement support group: A Dissection of CMHA Edmonton's strategy</td>
<td>Peris Wasonga with Jonathan Dubue &amp; Garima Khatri</td>
<td>Practice</td>
<td>Vintage</td>
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</tbody>
</table>
Crisis link subway suicide prevention
290
Melissa Bosman Practice People at Risk Rowand

Feather carriers leadership for life promotion
390 Part 2 of 2
Dr. Ed Connors with John Rice Workshop Knowledge to Action Northcote

Suicide, substance use deaths and stigma: call for a unified approach to prevention
600
Lorna Thomas with Philip Haug & Heather Morris Research Knowledge to Action Emily Murphy

Predictors of suicide ideation among clients enrolled in a methadone recovery program
140
Maeve McLean Research People at Risk

HEADSTRONG - life promotion through youth leadership. Empowering Canadian youth to be brave, reach out and speak up!
120 Part 2 of 2
Fiona Hayes with Nathan Ip Workshop Wellness Rundle

6:00-9:00 PM GALA Winterlake

6:00PM Cash bar and silent auction
6:45PM Mysterious Barricades concert segment
7:00PM Dinner

We need to honour and respect our Mother Earth. She is the source of all life. The sun shines life to the earth, then the earth produces life in all forms and in a balanced way. Everything is here to serve everything else...

- AUDREY SHENANDAH
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Details</th>
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<tbody>
<tr>
<td>7:30-8:30 AM</td>
<td>SUNRISE WALK</td>
<td>Meet in hotel lobby at 7:25 am</td>
</tr>
<tr>
<td>8:15-9:30 AM</td>
<td>BREAKFAST</td>
<td>People impacted by suicide</td>
</tr>
<tr>
<td></td>
<td></td>
<td>breakfast</td>
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<tr>
<td>8:00-9:30 AM</td>
<td>BREAKFAST</td>
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<tr>
<td>9:30-10:15 AM</td>
<td>KEYNOTE</td>
<td>Jorgen Gullestrup</td>
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<tr>
<td></td>
<td>A different approach to suicide prevention from the Australian construction, mining and energy industries</td>
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<tr>
<td>10:15-10:30 AM</td>
<td>BREAK</td>
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<tr>
<td>10:30-11:30 AM</td>
<td>SESSION 5</td>
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<tr>
<td></td>
<td>Design with the end in mind</td>
<td>Jorgen Gullestrup</td>
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<tr>
<td></td>
<td>810</td>
<td>Practice Knowledge to Action</td>
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<tr>
<td></td>
<td>Mysterious barricades: Honouring the other through the healing power of music</td>
<td>Kimberly Barber with Elizabeth Turnbull</td>
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<tr>
<td></td>
<td>580</td>
<td>Practice Wellness</td>
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<tr>
<td></td>
<td>Transgenerational aspects of suicide among indigenous peoples</td>
<td>Normand D'Aragon</td>
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<tr>
<td></td>
<td>250 Part 1 of 2</td>
<td>Practice People at Risk</td>
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<tr>
<td></td>
<td>Using Forum theatre to promote mental wellness for indigenous youth</td>
<td>Cindy Jardine with Laurie-Ann Lines, Margaret Erasmus, Ali Abel</td>
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<tr>
<td></td>
<td>170 Part 1 of 2</td>
<td>Practice Wellness</td>
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<td></td>
<td>Caring for our inner self first: A focus on staff wellness using an indigenous cultural approach</td>
<td>Bill Hill with Katerina Barton</td>
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<td></td>
<td>370 Part 1 of 2</td>
<td>Practice Wellness</td>
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<tr>
<td></td>
<td>Suicidal crisis intervention: back to basics</td>
<td>Julie Kathleen Campbell with Amelie Gauthier, Yvonne Bergmans</td>
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<tr>
<td></td>
<td>770 Part 1 of 2</td>
<td>Workshop People at Risk</td>
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<tr>
<td>11:30-11:45 AM</td>
<td>BREAK</td>
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### SESSION 6

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:45-12:45</td>
<td>Addiction Crisis Team (ACT) - A collaboration between Medicine Hat Police Service and Canadian Mental Health Association</td>
<td>Constable Travis Funk with Ryan Oscar</td>
<td>Winterlake</td>
</tr>
<tr>
<td></td>
<td>Creative interventions in suicide postvention</td>
<td>Maureen Pollard</td>
<td>Rutherford</td>
</tr>
<tr>
<td></td>
<td>Suicidal crisis intervention: Back to basics</td>
<td>Julie Kathleen Campbell with Amelie Gauthier, Yvonne Bergmans</td>
<td>Rowand</td>
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<td></td>
<td>Transgenerational aspects of suicide among indigenous peoples</td>
<td>Normand D’Aragon</td>
<td>Vintage</td>
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<tr>
<td></td>
<td>Using forum theatre to promote mental wellness for indigenous youth</td>
<td>Cindy Jardine with Laurie-Ann Lines, Margaret Erasmus, Ali Abel</td>
<td>Northcote</td>
</tr>
<tr>
<td></td>
<td>Suicide risk assessment: a call for disruptive change</td>
<td>Jonathan Dubue</td>
<td>Emily Murphy</td>
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<td></td>
<td>The opportunities and challenges of fitting artificial intelligence in to national suicide surveillance</td>
<td>Melissa Baker</td>
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<tr>
<td></td>
<td>Caring for our inner self first: a focus on staff wellness using an indigenous cultural approach</td>
<td>Bill Hill with Katerina Barton</td>
<td>Rundle</td>
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</tbody>
</table>

#### LUNCH

**12:45-1:30 PM**

**POSTER SESSION**

**1:30-2:15 PM**

**KEYNOTE**

Dr. David Gardner and Dr. Andrea Murphy

The role of community pharmacy in suicide prevention

**BREAK**

**2:15-2:30 PM**

**SESSION 7**

<table>
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<tr>
<th>Time</th>
<th>Event</th>
<th>Speaker(s)</th>
<th>Location</th>
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<tbody>
<tr>
<td>2:30-3:30</td>
<td>Expanding suicide prevention strategies by integrating community pharmacies: An exploration of roles and opportunities</td>
<td>Dr. Andrea Murphy with Dr. David Gardner</td>
<td>Winterlake</td>
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<td>Time</td>
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<td>8:30-9:15 AM</td>
<td>PLENARY</td>
<td>Taking suicide reporting guidelines to the next level</td>
<td>Canadian Journalism Forum on Violence and Trauma</td>
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<tr>
<td>9:15-9:30 AM</td>
<td>BREAK</td>
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<td>7:30-8:30 AM</td>
<td>BREAKFAST</td>
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<td>3:30-3:45 PM</td>
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<tr>
<td>3:45-4:45 PM</td>
<td>DEBATE</td>
<td>Risk assessments and how they influence our approach to suicide prevention</td>
<td>Dr. Zachary Kaminsky and Dr. Simon Hatcher</td>
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<tr>
<td>5:00-6:00 PM</td>
<td>CASP AGM</td>
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<tr>
<td>7:30-10:00 PM</td>
<td>THE GRIZZLIES</td>
<td>Film and Moderated Discussion (Ticketed event)</td>
<td>MacEwan University</td>
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<td>Friday</td>
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<td>7:30-8:30 AM</td>
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<td>8:30-9:15 AM</td>
<td>PLENARY</td>
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<td>Canadian Journalism Forum on Violence and Trauma</td>
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<td>9:15-9:30 AM</td>
<td>BREAK</td>
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### Session 8

#### 9:30-10:30 AM

<table>
<thead>
<tr>
<th>Topic</th>
<th>Presenter</th>
<th>Type</th>
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</thead>
<tbody>
<tr>
<td>“Naakenasli” be happy: promoting life together collaborative: Building partnerships with first nations communities to co-design a community strength based sustainable life promotion project for youth</td>
<td>Donna Matier (with Shannon Dunfield, and Liane Mercredi)</td>
<td>Practice</td>
<td>Rutherford</td>
</tr>
<tr>
<td>Zero suicide: An aspirational program application for the University of Calgary</td>
<td>Debbie Bruckner (with Andrew Szeto, Mara Grunau, Susan Barker)</td>
<td>Practice</td>
<td>Vintage</td>
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<tr>
<td>Instead of “I” moving to “we”. Combining social media research, cultural approaches and psychological interventions to prevent deaths by suicide</td>
<td>Peter Glossop (with Yolanda YoungPine, Shainen Davidson)</td>
<td>Workshop</td>
<td>Rowand</td>
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<tr>
<td>Resilience in action: small steps on the path</td>
<td>Maureen Pollard</td>
<td>Workshop</td>
<td>Northcote</td>
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<tr>
<td>Social action and political organizing as life promotion practices: Lessons from the Yúusnewas Youth Program Partnership</td>
<td>Jeffrey Anслоos</td>
<td>Research</td>
<td>Emily Murphy</td>
</tr>
<tr>
<td>Life promotion for all our relations: a youth-led suicide prevention and wellness promotion initiative</td>
<td>Ryan Moyer (with Shannon Laflamme)</td>
<td>Research</td>
<td>Rundle</td>
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<tr>
<td>Public safety personnel: Particular groups to consider in suicide prevention and postvention</td>
<td>Laurent Cortèsey-Blondin (with Christine Genest, Rosemary Ricciardelli, &amp; Simon Hatcher)</td>
<td>Research</td>
<td>Rundle</td>
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#### 10:30-10:45 AM

**Break**
## SESSION 9

**Canadian Journalism Forum:**
Taking suicide reporting guidelines to the next level
780 Part 2 of 2

- **Cliff Lonsdale**
  - with Renata D'Aliesio, Omar Mouallem, Stephen Ward, Rob Whitley, Ionna Roumeliotis & Rachel Ward
  - Practice Knowledge to Action
  - Winterlake

**A community approach to developing a suicide prevention plan**
210

- **Lianna Chondo**
  - with Lahn Jones
  - Practice Knowledge to Action
  - Vintage

**Instead of “I” moving to “we”**.
Combining social media research, cultural approaches and psychological interventions to prevent deaths by suicide
230 Part 2 of 2

- **Peter Glossop**
  - with Yolanda YoungPine-Crowchild, Shainen Davidson
  - Workshop Knowledge to Action
  - Rowand

**CMHA NB Collaborative approach to life promotion**
590

- **Kristen Barnes**
  - Practice Knowledge to Action
  - Northcote

**Reasons why not: A critical review of 13 reasons why**
620

- **Emily Cruikshank**
  - Research People at Risk
  - Emily Murphy

**Motivational interviewing for self harm and suicidal thoughts in adolescence**
180

- **Saeed Momtazi**
  - Research People at Risk

**Public safety personnel: Particular groups to consider in suicide prevention and postvention**
850 Part 2 of 2

- **Laurent Corthésy-Blondin**
  - with Christine Genest, Rosemary Ricciardelli, & Simon Hatcher
  - Research People at Risk
  - Rundle

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**10:45-11:45 AM**

**BREAK**

**11:45-12:00 PM**

**ALBERTA SHOWCASE**

**12:00-1:00 PM**

**LUNCH**

**12:00-1:00 PM**

**KEYNOTE**

**Historic Trauma, healing and reconciliation**

- **Senator LaBoucane-Benson**

**1:00-1:45 PM**

**END**
Dr. Mark Kaplan

*Mark S. Kaplan is Professor of Social Welfare at the UCLA Luskin School of Public Affairs.*

He received his doctorate in public health from the University of California, Berkeley and holds master’s degrees in social work and public health with postdoctoral training in preventive medicine at the University of Southern California. For over two decades his research, funded by the National Institutes of Health and private foundations, has focused on using population-wide data to understand suicide risk factors among veterans, seniors, and other vulnerable populations. Recently, Dr. Kaplan was principal investigator on two National Institute on Alcohol Abuse and Alcoholism grants that examined the role of acute alcohol use in suicide. Dr. Kaplan is the recipient of a Distinguished Investigator Award from the American Foundation for Suicide Prevention (AFSP). He served on the American Association of Suicidology Council of Delegates and on the VA Blue Ribbon Work Group on Suicide Prevention in the Veteran Population Expert Panel. He currently is a member of the AFSP Scientific Advisory Committee and the CDC National Center for Injury Prevention and Control Board of Scientific Counselors.

Dr. David Gardner & Dr. Andrea Murphy

*Dr. David Gardner’s research covers pharmacoepidemiology, safe and effective use of psychotropic medications, and program development and implementation in mental health and addictions services in primary care with a focus on pharmacists’ roles and services.*

With Dr. Andrea Murphy, he has co-developed More Than Meds, the Bloom Program, Headstrong – Taking Things Head-On, and Sleepwell. They are investigating the role of community pharmacies in suicide prevention strategies. He has 100 peer reviewed publications and is the author of Antipsychotics and Their Side Effects. Recognitions include multiple teaching awards, the 2012 Canadian Pharmacists Association Pharmacist of the Year award, and in 2017 was identified as a CAMH Difference Maker in its 150 Leading Canadians for Mental Health campaign. Dr. Gardner balances his scholarly work with regular community outreach, advocacy, and clinical activities.

*Dr. Andrea Murphy is an Associate Professor, College of Pharmacy, Dalhousie. She is cross appointed to Nursing and Psychiatry at Dalhousie.*

Dr. Andrea Murphy is an Associate Professor, College of Pharmacy, Dalhousie. She is cross appointed to Nursing and Psychiatry at Dalhousie. Dr. Murphy’s program of research primarily focuses on the development, implementation, and evaluation of interventions to change behaviour in mental illness and addictions care. She has used both quantitative and qualitative approaches to intervention design, implementation, and evaluation. Dr. Murphy maintains a practice license and works clinically with an interdisciplinary team as a clinic pharmacist at the Dalhousie School of Social Work Community Clinic. Reconciliation dialogue is the way forward in Canada, with focus on surfacing the common ground between Western and Indigenous people. The best, most useful policy and legislation will reflect this shared space that unites us as a society.
Professor Clem Martini

Professor Clem Martini is a celebrated playwright, novelist, and screenwriter with over thirty plays, and twelve books of fiction and nonfiction to his credit.

His books include Upside Down: A Family’s Journey Through Mental Illness, the W.O. Mitchell Award-winning Bitter Medicine: A Graphic Memoir of Mental Illness and the Alberta Trade Non-Fiction Book of the Year Award-winning, The Unravelling. A passionate advocate on behalf of issues associated with suicide, mental-illness-related-stigma, and family caregiving, Clem Martini has been an invited speaker at a number of conferences, symposia and health related gatherings. He is a recipient of the ATB Financial Healing through the Arts Award. He currently teaches in the School of Creative and Performing Arts at the University of Calgary.

Senator Patti LaBoucane-Benson

Senator Patti LaBoucane-Benson is a Métis from Treaty 6 territory in Alberta. She was appointed to the Senate in October 2018.

Dr. Patti LaBoucane-Benson is a Metis Ukrainian Senator who grew up on Treaty Six Territory. Patti previously worked for Native Counselling Services of Alberta (NCSA) for 23 years leading research projects, video productions, historic trauma-informed service delivery.

Dr. LaBoucane-Benson was recently a mentor and lecturer for the Peter Lougheed Leadership College, a lecturer for the University of Alberta Executive Education, and the Conference Director and Lead Facilitator for the Nelson Mandela Dialogues, Canada 2017. She recently sat on the Ministerial Panel on Child Intervention for the province of Alberta.

Based on her PhD research, her first novel The Outside Circle is a work of creative non-fiction about healing and reconciliation for an inner-city Aboriginal family. The Outside Circle was on the Globe and Mail’s Top Ten Canadian books and was named a CBC “Best Books of 2015”, an Outstanding International Books 2016 by the United States Board on Books for Young People, and winner of the Burt Award for First Nations and Metis Literature.

Patti has been awarded the Alberta Aboriginal Role Model Award for Education, the Legal Aid Access to Justice Award and the Rotary Paul Harris Fellow.

Jorgen Gullestrup

Jorgen Gullestrup is founder and head of Mates in Construction, Australia’s ground-breaking mental health campaign in the construction industry. Mates in Construction has reduced suicide deaths in the construction industry from over two times the national average.

Gullestrup advocates a strengths-based approach that has resulted in a program with wide acceptance across the industry. He is a passionate voice for co-design that starts with listening to the audience. “I am first and foremost a plumber, and my qualifications to do this work are that I am a plumber,” says Gullestrup. The project has drawn from extensive qualitative and quantitative research, with powerful results.

A licensed plumber by trade, Jorgen migrated to Australia in 1988. He was an elected official of the Plumbers union for 13 years, six as the Queensland state secretary. In 2007 he became the founding CEO of MATES in Construction.

He holds a Master’s in Suicidology, Grad Certificate in Suicide Prevention, a Diploma in Community Welfare and Development and an Associate Diploma in Labour Studies.
MODERATOR

Cliff Lonsdale

Cliff Lonsdale taught for 13 years in the Graduate Program in Journalism at Western University, after more than 40 years as a reporter, editor, producer and news executive around the world.

He is a co-founder, with Jane Hawkes, of the Canadian Journalism Forum on Violence and Trauma, and president of the board of directors.

Lonsdale reported on the 1960 civil war in Congo and Zambia’s transition to independence in 1964, and worked in Rhodesia, now known as Zimbabwe, as the producer and host of a nightly radio program, Newreel. Lonsdale worked for many years as the Chief News Editor for CBC Television, the Head of Production in Europe, as well as the Head of Production for CBC News, Current Affairs and Newsworld. After leaving CBC in 1993, he made independent documentaries, filmed and distributed worldwide.

He began teaching television journalism at Western University in 2003 and continued to teach international reporting after retiring in 2012. In 2010, he was an inaugural Dart Academic Fellow at the Columbia Journalism School.

PLENARY

Canadian Journalism Forum on Violence and Trauma: Taking suicide reporting recommendations to the next level

A panel chosen by the authors of the journalist-to-journalist guide Mindset - Reporting on Mental Health presents the case for more nuanced recommendations for reporting about suicide, tailored for different categories of stories and taking account of the benefits of journalistic enquiry as well as the dangers. This plenary introduction will set the stage for two hours of breakout interchange helping to inform an expansion of Mindset’s chapter on suicide reporting.

All sessions will be videotaped.

Renata D’Aliesio

Leader of the Globe and Mail team on the Unremembered series, winner of the inaugural Mindset Award for Workplace Mental Health Reporting in 2016.

Omar Mouallem

Freelance journalist and winner of the 2017 Mindset Award.

Stephen Ward

PhD, journalism ethicist, educator and author.

Rob Whitley

PhD, Principal Investigator, Social Psychiatry Research and Interest Group, Douglas Hospital, Montreal.

Ioanna Roumeliotis

Reporter with CBC News.

Rachel Ward

Reporter with CBC News.
DEBATE

Risk assessments & how they influence our approach to suicide prevention

This house believes that risk assessment tools have an important role to play in suicide prevention. Come hear Drs. Zachary Kaminsky and Simon Hatcher debate the efficacies, contexts, pros and cons of risk assessments and how they influence our approach to suicide prevention.

Dr. Zachary Kaminsky

Dr. Kaminsky received his PhD from the University of Toronto in 2008 and trained in one of the first labs studying epigenetics in psychiatry. In 2010, he developed a research program at Johns Hopkins using genome-wide DNA methylation microarrays to study brain and peripheral samples in PPD, suicide, and PTSD, generating some of the first epigenetic biomarkers in psychiatry. As Chair of Suicide Prevention Research at The Royal's IMHR, Dr. Kaminsky studies human populations in attempts to better understand both the molecular epigenetic underpinnings of psychiatric phenotypes and environmental stressors influencing their development in order to enable the generation of true “bench to bedside” translational findings. New directions involve the development of artificial intelligence techniques with social media data to predict future risk to suicidal thoughts and behaviours.

Dr. Simon Hatcher

Simon Hatcher is a Full Professor of Psychiatry at The University of Ottawa where he has been since May 2012. His research interests include suicide, self-harm, psychotherapies, psychiatry in the general hospital setting and e-therapies. He is based clinically at the Ottawa Hospital providing services in the downtown homeless shelters, working in the Liaison Psychiatry service at The Ottawa General Hospital and leading a First responder Occupational Stress Injury Clinic.

MODERATOR

Dr. Michael Trew

Dr. Michael Trew was educated in medicine and psychiatry at the Universities of Saskatchewan, Calgary and Manchester (UK), and achieved the designation as a Certified Physician Executive in 2013. He led the Consultation-Liaison Psychiatry Service in Foothills Medical Centre from 1984 through 2009 during which time he was active in undergraduate medical education and residency training. Starting from an interest in safety and quality in mental health, he has developed a long-standing interest in the tragedy of suicide within the healthcare system and beyond. Dr. Trew has held leadership appointments with Alberta Health Services for more than 20 years, and from 2013 – 15 served as the Chief Addiction and Mental Health Officer for Alberta in response to the southern Alberta flood of 2013. In keeping with a long-standing interest in ethics in psychiatry, he chaired the AHS Expert Panel regarding Medical Assistance in Dying for Non-Life-Limiting Conditions. In addition to clinical work, he continues to be an active leader in the response to the opioid crisis, and is the Knowledge Lead for Psychiatry in background work for the provincial Connect Care electronic medical record. He is married with 6 children and 4 grandchildren.
Presentations
**HEADSTRONG Life Promotion through Youth Leadership. Empowering Canadian Youth to Be Brave, Reach Out and Speak Up!**

This workshop will actively engage delegates to demonstrate the effectiveness of the HEADSTRONG program with youth and how reconciliation and partnership have brought hope to communities across Canada and created opportunities for youth to connect with their culture and knowledge-keepers. Belief in recovery and the reduction of shame are key findings from HEADSTRONG with Indigenous youth and will be shared through this workshop. HEADSTRONG First Nations and HEADSTRONG Metis were launched in 2016 and 2018 respectively and is Canada’s only evidence-based youth mental health leadership program. Designed for youth aged 12 and up, it empowers them to recognize their influence on their peers, schools, families and communities and to use that influence to eliminate stigma, reduce crisis, and promote a kinder, more accepting environment for all. HEADSTRONG with Indigenous youth has spread rapidly across Canada and is reaching thousands of young people with a message of hope and community strength.

**Predictors of suicide ideation among clients enrolled in a methadone recovery program**

The purpose of this study was to profile clients who had suicidal ideation and identify its predictors. Electronic medical record (EMR) data was obtained from 101 clients attending a methadone recovery program in Central Saskatchewan. Data collected include demographics, treatment history, health status, presenting complaints and program progression. Predictors of suicidal ideation was performed using a logistic regression.

**Presented by**

Maeve McLean is a graduate student in the School of Public Health at the University of Saskatchewan. Her interests centre around understanding and addressing rising rates of mood disorders in industrialized countries. Presently, Maeve is working with the Saskatchewan Health Authority, and the Mental Health Commission of Canada on the Roots of Hope Suicide Prevention Initiative in Northern Saskatchewan.

**& Co-Presented by**

Geoffrey Maina PhD, College of Nursing, University of Saskatchewan, Canada.

Alexander M. Crizzle PhD, MPH, CE, School of Public Health, University of Saskatchewan, Canada.
The Strength Within: Suicide prevention and wellness promotion in Northern BC First Nations communities

The Strength Within uses a community based approach to support community wellness and suicide prevention among First Nation adults (25-45 years old) living on reserves in Northern BC. In the context of reconciliation, our project builds relationships with Dakelh (Carrier) First Nation communities in order to develop effective suicide prevention and wellness promotion programming. We will present on community engagement strategies, the development of a wellness promotion and suicide prevention intervention based on Dakelh values, intervention implementation, and participant perspectives. The Strength Within has demonstrated promise as a culturally appropriate community wellness and suicide prevention intervention that honours the strengths within self, family, community, nation, and land of First Nations to take preventative action at a local level. This project is funded by CIHR.

Presented by

DR. HENRY HARDER

Dr. Henry G. Harder is an Indigenous Scholar and is Professor and past Chair of the School of Health Sciences at the University of Northern British Columbia. He currently holds the Dr. Donald B. Rix BC Leadership Chair in Aboriginal Environmental Health. He is a registered psychologist. Dr. Harder has been in the fields of mental health, rehabilitation and disability management for over 30 years.

& Co-Presented by

TRAVIS HOLYK

Dr. Travis Holyk, Beeskih, is the Executive Director of Research, Primary Care and Strategic Services at Carrier Sekani Family Services, an organization responsible for health and social programing for eleven member First Nations in North Central BC. Travis has been a leader in developing and administering innovative health and social programs that continue to have a positive and lasting effect in First Nations communities.

Using Forum Theatre to promote mental wellness for Indigenous youth

This workshop will demonstrate the use of Forum Theatre as a primary mental wellness (suicide prevention) intervention with Indigenous youth and their communities. Forum Theatre involves communities in identifying issues of concern, analyzing current conditions and causes of a situation, and collectively exploring solutions for change. It is distinguished by the interactive participation of the audience, who function as ‘spectators’ in seeking alternative outcomes to the play, thus providing a means for participants to ‘unpack’ issues of concern and collectively explore what is required for reconciliation. The process begins with games to build trust and a sense of community, and imaging exercises to explore issues. As a strength-based approach, these also promote mental wellness and function as an upstream intervention. We will further demonstrate means of decolonizing and Indigenizing the Forum Theatre approach, as determined through our collective work with various Indigenous communities in Alberta and the Northwest Territories.

Presented by

CINDY JARDINE

Cindy Jardine is a Professor and Tier 1 Canada Research Chair in Health and Community at the University of the Fraser Valley. She has been conducting strength-based, participatory research with Indigenous communities for more than 20 years.

& Co-Presented by

LAURIE-ANN LINES

Laurie-Ann Lines is a PhD Candidate in the School of Public Health at the University of Alberta, and a member of the Yellowknives Dene First Nation in the Northwest Territories.

MARGARET ERASMUS

Margaret Erasmus is a member of the Yellowknives Dene First Nation, and Director of the Dechįta Nāowo Program
Motivational interviewing for self harm and suicidal thoughts in adolescence

In this study we aimed to assess motivational interviewing techniques for a group of adolescents with a history of self-harm and who were at risk for suicide. Our group included 15 adolescents with age ranging between 13 and 18. It included 9 girls and 6 boys. We used motivational interviewing techniques including expressing empathy, supporting self-efficacy, rolling with resistance, developing discrepancy, and avoiding argument for a group of depressed adolescents with self-harm behaviour and suicidal thoughts. They were reluctant to get professional help and selected as a group who were in the pre-contemplation stage according to transtheoretical model of stages of change. We followed the group for 3 months after the last session.

Presented by
SAEED MOMTAZI
Dr. Saeed Momtazi is a psychiatrist with 25 years of academic and clinical practice. He has worked as an attending psychiatrist and assistant professor of psychiatry in Zanjan University of Medical Sciences in Iran since 1994 and completed a one-year addiction psychiatry fellowship at UCLA. In 2015 Dr. Momtazi founded Iranian Canadian Mental Health and has practiced in Canada and Iran since. Dr. Momtazi has lectured in many countries including Iran, Canada, United States, Italy, England, Hong Kong, Malaysia, France, Germany, The Netherlands and South Africa. He has conducted research in both Iran and the United States and published papers, books and textbook chapters internationally. In 2017 he was the recipient of the “Award of Achievement in Motivational Interviewing” from University of British Columbia.

Housing programs and suicide

Suicide is a complex and multifaceted issue, resulting from many overlapping factors. Working in a Housing First Program, we have clients from all walks of life. Some of our clients have been, are, or could experience suicidal behaviors. Given the complexity of suicide, there are multiple strategies used at the Buffalo to support our clients. We use a number of preventive measures such as: crisis planning, wellness checks, and building relationships. Community is also an important part of suicide prevention at the Buffalo. It gives clients peers to talk to and a sense of family and belonging. Staff are also trained in applied suicide intervention, are comfortable with having conversations about suicide, and provide a safe place for clients to come to when in crisis.

Presented by
ERIK MOHNS
Erik Mohns is a graduate student at the University of Calgary in Sociology. He has worked with Canadian Mental Health Association for two years at the Buffalo which is a housing first program. His current work is focused on community integration of safe consumption sites.
A community approach to developing a suicide prevention plan

Living Hope: A Community Plan to Prevent Suicide in Edmonton promotes a preventative approach by enhancing access to the protective factors that decrease the risk of suicide. The three overarching goals are to: increase awareness and education, enhance accessibility to the full continuum of services, and address the specific needs of populations that experience higher risk of suicide. A foundational principle is that suicide prevention requires a comprehensive, multifaceted public health approach that considers the systemic factors that comprise the social determinants of health. Living Hope takes a step towards Reconciliation by creating opportunities to seek the direction of members of Indigenous communities so that the ‘cultural continuity’ factors that are protective against suicide can be further advanced in Edmonton. The implementation plan is designed for service delivery in a wide variety of settings. Suicide prevention, however, is the responsibility of the community and Living Hope supports Edmontonians to become more compassionate and knowledgeable about suicide and its prevention so they can contribute to a culture of support and help-seeking.

Presented by
LIANNA CHONDO
Lianna Chondo of the City of Edmonton is the Co-Project Manager of Living Hope: A Community Plan to Prevent Suicide in Edmonton. She commenced this role during the development of the preceding Edmonton Suicide Prevention Strategy. In her 18 years as a Social Worker with The City, she has engaged in counselling and a variety of projects and initiatives concerned with addressing the needs of marginalized populations.

& Co-Presented by
LAHN JONES
Lahn Jones of Alberta Health Services is the Project Coordinator for the Living Hope Suicide Prevention Plan. He is a Child and Youth Care Counsellor with a history of providing support to higher risk populations through youth work, family preservation and counselling. He has also engaged in advocacy, education and project management initiatives involving collaborative community and capacity building stakeholders.

Community, land based wellness and suicide prevention

This presentation focuses on research that involves youth in wellness work, and primary prevention of suicide. As Indigenous and non-Indigenous peoples, we present a working model for working together to support Indigenous communities, families and youth through ‘two-eyed seeing’. The work that we are doing has engaged youth in their culture, connection, and reconnection to the land of the Fraser Valley known as Sóhl Téméxw. Youth strengthen their context of culture, and Indigenous identity by connecting with community leaders, chiefs, and elders, and by finding support among youth peers. Youth find their own voice by learning how to tell and share stories. Activities are planned that expose youth to traditional teachings/activities as well as land stewardship responsibilities that are required for the continued existence of the Nation. Reconciliation occurs when there is a place and space for healing and wellness and when understanding the past helps to promote a future that is healthy.

Presented by
ADRIENNE CHAN
Adrienne Chan, PhD, is a Professor in the School of Social Work at the University of the Fraser Valley (Abbotsford, BC) and Principal Investigator of this research project engaging youth in land based resilience activities as a means for suicide prevention. Adrienne acknowledges that as a non-Indigenous person, she is guided by Indigenous ways of knowing. Adrienne works with Indigenous communities to ensure the research is guided by relationships and trust.

& Co-Presented by
NIKKI LAROCK
Nikki LaRock is a youth worker, researcher and Council member of Yakweekwoose First Nation in Chilliwack, BC. Nikki began her healing journey of
Presented by

PETER GLOSSOP

Peter Glossop, R. Psych, is a Clinical Psychologist working as part of the Healthy Living team. His focus is in integrating western research and interventions with traditional healing approaches to decrease suicides. Peter has over 25 years experience in suicide prevention, community, family and individual interventions. He has 15 years experience embedded within Alberta First Nation communities.

& Co-Presented by

YOLANDA YOUNGPINE-CROWCHILD

Yolanda YoungPine-Crowchild is director of a cultural based wellness and day treatment centre. YoungPine-Crowchild is a band member of the Blood tribe and works from an Indigenous strength based approach. She has considerable experience in suicide prevention, postvention, child welfare, human services management and cultural community interventions.

SHAINEN DAVIDSON

Shainen Davidson, PhD, is a Senior AI Scientist at Advanced Symbolics. He is a researcher of human behaviors, utilizing both his background in quantum mechanics and mathematical models into understanding more about the underlying predictors of human behavior. Shainen is excited about utilizing these skills with the populations struggling with causal and correlational factors relating to suicide. Dr. Davidson works to increase accuracy in predictions of future individual and group behaviors.

Reconciling aspiration and reality: Launching a pioneer national helpline service

Over a period of 10 years, the Canadian Distress Line Network, a collaborative of crisis/distress centres representing the Provinces and Territories of Canada, planned and sought funding for the creation of a single, nationally available, locally delivered crisis intervention/suicide prevention service that would bring Canada in line with...
services available in the UK, the US, Australia, and elsewhere. With funding from the Public Health Agency of Canada, the project was propelled from aspiration to reality and an ambitious timeline set to launch the service with four clear objectives in service delivery, standards of practice, knowledge exchange and networking. This presentation will outline the objectives, solution design, and launch of the Canada Suicide Prevention Service. It will share service use statistics from its first 2 years of service and outline the successes and challenges as the service works towards meeting its initial objectives.

Presented by
JASON CHARE

Jason Chare, BSc, MA, is the Director of Clinical Operations with the Canada Suicide Prevention Service. He leads the continuing development of service and evaluation standards, through policies and procedures that are culturally appropriate, evidence-based, and allow for equitable service delivery. Jason has a long history working in the non-profit sector and has been involved in international projects working in collaboration with branches of the United Nations. Jason spent 7 years working as Director of Tokyo English Life Line, and after moving to Canada worked as Provincial Network Manager for the Crisis Line Association of BC’s 1800SUICIDE and 310Mental Health Support networks and sat as BC representative on the Canadian Distress Line Network. Jason received an excellence and innovation award for his work as Standards of Practice and Service Implementation Manager in the development and launch of the Canada Suicide Prevention Service and is the presenter of a 2013 TED Talk on “A Case for Active Listening”.

& Co-Presented by
STEPHANIE MACKENDRICK

Stephanie MacKendrick, Interim CEO at Crisis Services Canada, has a career spanning journalism, corporate communications, not for profit leadership and most recently, author of a non-fiction book to encourage young women to consider running for elected office. After 16 years as President of Canadian Women in Communications, Stephanie ran a consulting and coaching practice combining career transition coaching and gender diversity strategies for corporations. Stephanie currently sits as Vice-Chair of the Board for Samara Canada, and was a founding co-chair of the 30% Club Canada steering committee. Stephanie served as President of the Board of The International Alliance for Women (TIAW) in 2006 and 2007. In 2008 she co-founded the TIAW World of Difference 100 Award which has recognized close to 500 recipients internationally. Stephanie has received numerous awards; WXN’s Most Powerful Women: Canada’s Top 100 in 2005 and 2012, Canada’s Telecom Hall of Fame (Advocate) for promoting women’s advancement, the Innoversity Angel Award for promoting diversity, 2012 Women of Influence Diversity Champion and in 2010 was admitted to the freedom of the City of London (UK).

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Transgenerational aspects of suicide among Indigenous Peoples

This presentation reflects over two decades of a journey with several First Nations and Inuit families touched by suicide, sharing a common quest for understanding and healing. There is consensus that there are different types of suicide and that there is always a combination of different factors involved. Our main theory has been that some suicides in one generation might happen because of a never resolved traumatic loss one, two, three or more generations before. This presentation will offer an occasion to look at a few family trees wounded by losses related to systemic perpetra-tions, trying to visualize and understand the psychological pathway between an unresolved loss in the prior generation(s) and its reenactment through self-destruction and suicide today. This presentation will also offer participants an occasion to discuss the following question: How can the intergenerational transmission of trauma perspective contribute to the conversation about Reconciliation?

Presented by
NORMAND D’ARAGON

Normand D’Aragon has worked as a psychologist since 1983. He has been involved as a practitioner and trainer in several First Nations and Inuit communities of Northern Quebec for the last 25 years. From 2001 to 2012, he co-founded and
directed the First Nations and Inuit Suicide Prevention Association of Quebec and Labrador. For 10 years he coordinated the organization of the annual conference Dialogue for Life in Quebec. Over time, cultural practices and teachings by the Elders became the most important part of the learning and healing activities of the gatherings. In his clinical practice, he utilizes an integrative intergenerational family approach, considering the family history in its social, cultural and political context. Through his commitment to life protection and promotion in partnership with several Indigenous communities, he tries to honour the memory and the legacy of the First Nations ancestors who are part of his genealogy. He has the great privilege to be adopted in the Innu Nation in Quebec and in the Maori Nation of Aotearoa New Zealand.

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How did we do and what can we do better? Caregiver perspectives of patient interactions with healthcare systems prior to dying by suicide

Suicide is a major cause of preventable death globally and leading cause of death by injury in Canada. In order to support people who experience suicidal thoughts and behaviors and to ultimately prevent people from dying by suicide, it is important to understand the individual, and familial experiences with the health care system. We invited family members of 6 to 8 suicide victims to participate in the study by sharing their perspectives on both their relative’s and their own interactions with the health system. Interviews were done in-person, audio-recorded, transcribed and analyzed thematically.

Presented by
LAURA FRIESEN
Laura Friesen is a PhD student at the University of Alberta specializing in Counselling Psychology. She is also a research coordinator with Alberta Health Services coordinating and taking lead roles in research studies. Some of her specialties include qualitative inquiry research, severe mental illness, and psychological assessment. Her own research focuses on rural cultural experiences of psychology including problems related to ethics and the accessibility and acceptability of services.

Co-authors
ERIN BRYKSA, REHAM SHALABY, LAURA FRIESEN, KRISTEN KLINGLE, GRAHAM GAINE, SHIREEN SUROOD, LIANA URICHUK, VINCENT I.O. AGYAPONG

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Life promotion for all our relations: A youth-led suicide prevention and wellness promotion initiative

First Nations in BC are facing increasingly complex challenges with suicide and suicide ideation. Suicide prevention/life promotion has been identified as a priority in all five First Nations Health Authority (FNHA) health regions in BC. The recent BC Coroners Service and FNHA Death Review Panel report (2017) made several recommendations, the first of which was to bring youth together to increase connectedness, wellness, safety, and resilience in their communities. Recognizing that this complex crisis requires innovative solutions, the FNHA, in partnership with Fraser Health Authority (FHA) and the Canadian Foundation for Health Improvement (CFHI), recently brought together a group of Indigenous youth leaders, named the Youth Leading Youth Advisory Committee for Life Promotion (YLYAC-LP), to steer and strategically advise the FNHA and FHA’s work in Life Promotion. Now, as the program comes to a close, selected youth from the YLYAC-LP are excited to share their successes and learning outcomes with a wider audience and speak to the power of allowing those personally affected by suicide to steer policy and programming.

Presented by
RYAN MOYER
Ryan Moyer, MA, is a Program Consultant at the First Nations Health Authority working primarily on suicide prevention. He is a PhD candidate at UBC
Crisis Link was launched in 2011 as a pioneering initiative with a goal to help prevent subway suicides and offer hope to those at-risk on Toronto’s subway system. Distress Centres of the greater Toronto area provides a direct link for passengers to connect with help and hope. This program and the experience gained is being used as a model in other cities.

Presented by
MELISSA BOSMAN | @BOSMAN_MELISSA
With 19 years of experience in suicide prevention program management, Melissa regularly shares her passion, expertise and knowledge of leading practice with community partners and stakeholders by supporting program development, training and providing consultation in crisis response and suicide prevention. Melissa participates in several Toronto suicide prevention advisory groups and is a program leader at Distress Centres of the greater Toronto area.

Addiction Crisis Team (ACT) - A collaboration between Medicine Hat Police Service and Canadian Mental Health Association

Formed in early 2018, the Addiction Crisis Team is a new approach to meeting individuals where they are at. The team responds to individuals who are experiencing crisis behavior due to addiction with the goal of stabilization through brief counselling along with streamlined access to a vast variety of resources. The collaboration between the Medicine Hat Police Service and Canadian Mental Health Association allows the team unique access to individuals in holding cells who are often in their most susceptible state. The team then fosters the therapeutic relationship as they piece together the individual’s support needs. The ACT team will present a case study, along with various local data, to illustrate the impact ACT is having within this vulnerable population. Throughout the presentation, one member of the ACT team will cover lived experiences of his battle with addiction and a suicide attempt. The lived experience demonstrates his innate ability to form bonds with clients.

Presented by
CONSTABLE TRAVIS FUNK
Cst Funk has spent the last 3.5 of his 16 years working on the Medicine Hat Police Service’s Police and Crisis Team (PACT) and the last year on the newly formed Addiction Crisis Team (ACT). These teams work closely together with clients both supporting and advocating for them. Cst Funk built both teams and has worked hard in developing and fostering important community partnerships along the way.

& Co-Presented by
RYAN OSCAR
Ryan Oscar is a graduate of the Medicine Hat College’s Addiction Counselling program. He has been part of multidisciplinary teams in the Regina Qu’Appelle Health Region with direct experience at the Regina Drug Treatment Court and the Regina Provincial Correction Centre - Dedicated Substance Abuse Treatment Unit. He has experience working with outpatient and inpatient treatment along with a strong working knowledge of the Alcoholics Anonymous and Narcotics Anonymous programs.
From colourblind to colourfull: An asset-based model for life-promotion

This presentation will describe the techniques, lessons, challenges, and learnings from an innovative community engagement project that has culminated into the expansion of self-determined life-promotion activities. Churchill, Manitoba is located along the Western Hudson Bay and is Manitoba’s most northern and remote community, only accessible by rail or air. Churchill has not experienced a suicide in 20 years.

Presented by
AMELIA GAMVRELIS | @AMELIAGAMVRELIS

Amelia Gamvrelis is the Manager, Community Services and Health Information at the Churchill Health Centre, an operating division of the Winnipeg Regional Health Authority located on Treaty 5 Territory. She has a Master’s in Public Administration and Bachelor’s in Community Development. Amelia’s previous experiences include being a Policy Analyst with The Province of Manitoba, adult education with University College of the North, and a Board Member of a second-stage housing facility.

& Co-Presented by
JASON KLAINCHAR

Jason is the COO of the Churchill Health Centre, an operating division of the Winnipeg Regional Health Authority (WRHA) on Treaty 5 Territory. He has a Bachelor’s degree in Nursing, a certificate in public sector management, and is currently in the process of completing his Master’s degree in Public Administration. Jason’s previous experience includes clinical and leadership roles in psychiatry at the Selkirk Mental Health Centre.

Social action and political organizing as life promotion practices: lessons from the Yúusnewas youth program partnership

While the effects structural violence in Indigenous Peoples’ mental health, particularly, on suicidality among Indigenous youth are being acknowledged in reference to social determinants of health, there remains a need to organize and implement structural reforms to promote life and enhance conditions for livability within Indigenous communities. Both the TRC Calls to Action and UNDRIP stress the importance of ground-up, community-based change processes led by Indigenous communities, drawing on local strengths and enhancing community capacity. While the life promotion paradigm is often described in terms of culturally grounded and contextually informed approaches to intervention, this presentation considers the role of youth-led social actions and political organizing as life promotion practices. Drawing on a community-based participatory action research partnership with the Yúusnewas program—an Indigenous youth led wellness initiative working across urban and rural First Nations throughout British Columbia—this presentation highlights youth envisioned strategies for social action and political organizing around social issues that critically intersect with suicide, including the challenges of racism, climate change and environmental toxicity, homelessness and socioeconomic status.

Presented by
JEFFREY ANSLOOS | @JEFFERYANSLOOS

Dr. Jeffrey Ansloos (Nehiyaw Ochekwi-Sipi; Treaty 5) is a Psychologist and Assistant Professor of Indigenous Mental Health and Social Policy at OISE–University of Toronto, where he directs the Indigenous Life Promotion & Social Action Labs which partners with Indigenous communities in research focused on youth mental health and suicide prevention. He is the current chair for Indigenous Peoples’ Psychology in the Canadian Psychological Association.
An observational study of suicidality in middle schoolers in Eastern Ontario

This study aimed to characterize suicidality (ideation and attempts) in a cohort of middle school students in Eastern Ontario. This work represents a baseline sub-analysis derived from a larger study examining whether a teacher-led cognitive behavioural therapy (CBT) intervention embedded within an English literacy novel study curriculum could diminish suicidality and presentations to emergency services for self-harm/suicide attempts in middle schoolers. As part of that study, 85 grade 7 and 8 students at a large public schoolboard in Eastern Ontario were given the Life Problem Inventory (LPI) and Revised Children's Anxiety and Depression Scale (RCADS), validated 5 and 4 point Likert Scales respectively.

Presented by
MARK SINYOR
Dr. Sinyor is an Associate Scientist at Sunnybrook Research Institute, an Assistant Professor of psychiatry at the University of Toronto and a member of the CASP board of director. His research focuses on mood disorders and suicide with an emphasis on population-level prevention initiatives including responsible public messaging and means restriction. He founded PROGRESS (Program of Research and Education to Stop Suicide) at Sunnybrook.

Identify and discuss research priorities in suicide prevention and information and communication technologies (ICT)

Information and communication technologies (ICT) are currently playing a larger role in suicide prevention strategies. Both research and intervention projects are being carried out to understand the part ICT plays in suicide and to use their potential strengths to support suicide prevention. ICT can prove very useful to work with varied communities, support knowledge exchanges, identify and support suicidal or vulnerable individuals. However, we still are lacking scientific data to support these emerging practices in the context of an emerging field. This project identifies research priorities in suicide prevention using ICT (CIRH funding, 2017-2019).

Presented by
CÉCILE BARDON
Cécile Bardon, PhD, is professor at the department of psychology, UQAM, and researcher at CRISE. She works on the development and evaluation of adapted suicide prevention practices for individuals with an intellectual disability (ID) or an autism spectrum disorder (ASD), on psychosocial programme evaluation and on the impact of information technologies (IT) on suicide prevention.

& Co-Presented by
LAURENT CORTHÉSY-BLONDIN
Laurent Corthesy-Blondin is a fourth year PhD student in the community psychology programme at UQAM, under Brian Mishara and Cécile Bardon’s supervision. He works on understanding and preventing suicidal behaviours in first responders and on the use of information technologies (IT) in suicide prevention.

Caring for our inner self first: A focus on staff wellness using an Indigenous cultural approach

This workshop will allow those individuals who care for suicidal patients to recognize and first accept what they are bringing to the therapeutic relationship in order to be more spiritually aware and able to care for their patients in a holistic manner. Caring for staff is equally important as caring for patients, and often we forget to look inwards before diving into the psychologically demanding work of caring for those with suicidal
ideation and behaviours. Using Indigenous teachings, including embracing our spiritual connection to nature, we will offer a safe space for mental health clinicians to better understand themselves. This will include the opportunity to take part in smudging to help cleanse our minds and spirits. Traditional medicine and methods of patient care have value, but can be enhanced by a deeper connection to the individuals as a whole.

Presented by
BILL HILL
Bill is a Mohawk from Six Nations who lives near London with his family. He has worked at Parkwood Institute Mental Health since 1982 as a nurse, a social worker, and now the Project leader for Biigajiiskaan: Indigenous Pathways to Mental Wellness. He brings the love of his culture, healing, and music to his clients and colleagues, by providing holistic teachings and learning to individuals from every walk of life.

& Co-Presented by
KATERINA BARTON | @KATERINALBARTON
Katerina Barton is the Project Director at Parkwood Institute Mental Health where she has been leading the implementation of Canada’s first Zero Suicide Initiative. Katerina has over 10 years of experience in pharmacy, clinical informatics, project leadership, and mental health. She is currently a PhD candidate at Western University where she studies the clinical outcomes and effective elements of suicide prevention programs, as well as shifting culture around suicide care.

Feather Carriers Leadership for Life Promotion

The Feather Carriers Leadership for Life Promotion was envisioned by Ed Connors and John Rice as an Anishinaabe alternative to mainstream suicide prevention programs. Critiques from Indigenous community members indicated that mainstream suicide prevention trainings were not addressing suicide from an Indigenous perspective and did not provide sufficient pre training assessment of readiness or followup support to trainees. These concerns led to the creation of the Feather Carriers training which is organic, flexible and wholistic in nature. The training engages participants in a paradigm shift from suicide prevention to life promotion. This process supports participants to reflect on Mino Bimaadisiwin (living a good life) over their year long learning journey.

Presented by
DR. ED CONNORS
Dr. Ed Connors is a psychologist who is of Mohawk and Irish ancestry. He is from Kahnawake Mohawk Territory. Dr. Connors is a member of the CASP Board and vice chair of the First Peoples Wellness Circle. He practices from the Simcoe Muskoka region of Ontario.

& Co-Presented by
JOHN RICE
John Rice is a traditional healer/social worker who is of Anishinaabe ancestry from Wasauksing First Nation. John works with Mamaway Wiidokaadwin Primary Health Care Team in the Simcoe Muskoka region. He is educated in Indigenous knowledge and health care practices.

Suicide risk assessment and safety planning-current research, best practices and emerging conversations

This Workshop will present the rationale and context of revision of Suicide Risk Assessment and Safety Planning Framework at the Vancouver Crisis Centre. The theoretical underpinnings of Ideation to Action Framework and the current Suicide Risk Assessment and Safety Planning Framework will be discussed. There will also be discussion on current language of Suicide Risk Assessment and safety planning facilitated by the presenters.

Presented by
AKHILA BLAISE
Akhila Blaise, MA, PGD, is the Director of Training and Quality Assurance, Crisis Centre. Akhila has her Master’s in Psychology and Post Graduate Diploma in Counselling. She has over 20 years of experience working in the mental health and suicide prevention areas in different capacities.
One of her specializations is curriculum development including designing and delivery of training programs within the framework of inquiry based approach. Akhila brings in her knowledge and understanding of diversity, cultural differences and post-colonial issues surrounding the phenomena of suicide to the work at the Centre.

& Co-Presented by
LIZ ROBBINS
Liz Robbins, MA, RCC, is the Director of Crisis Response and Operations, Crisis Centre. Liz has her Master’s in Clinical Counselling from the University of Southern Maine. She was a Licensed Clinical Professional Counsellor (LCPC) in the State of Maine and is a Registered Clinical Counsellor with over twenty-two years of crisis intervention and suicide prevention experience with a focus on assessment of mental health emergencies and suicide as well as clinical supervision. She is President for the Crisis Line Association of BC (CLABC) and is a site examiner for the American Association of Suicidology Accreditation Program.

Promoting Life Together Collaborative: Wise practices and lessons learned in our journey together

The Promoting Life Together Collaborative (PLT) brings together teams from across northern, rural and remote parts of Canada and supports the development of meaningful partnerships between non-Indigenous health authorities/organizations and Indigenous communities. PLT provides learning opportunities for understanding and application of Indigenous knowledge, particularly as it relates to wise practices for life promotion, Indigenous mental wellness frameworks, and culturally safe practices. Collaborative teams design, implement, and evaluate improvement initiatives for life promotion alongside their communities. This workshop will demonstrate how partnerships enable the work of teams and the collaborative overall to put reconciliation into action. This workshop will discuss elements of relationship building and partnerships between mainstream health organizations and Indigenous organizations/communities to work together on life promotion and community wellness initiatives. We will explore how the way in which we work honours CFHI’s organizational commitment to reconciliation as well as how health authorities/organizations and teams within the PLT collaborative are exploring their personal and organizational journeys to reconciliation with the guidance of Indigenous mentors and allies.

Presented by
CAROL FANCOTT
Carol Fancott is the Director of Patient and Citizen Engagement and Northern and Indigenous Health at the Canadian Foundation for Healthcare Improvement. She leads programs that aim to hold true to values of relationship-building, collaboration and partnership. Carol’s career in healthcare has spanned many roles - as a clinician at the point of care, educator, researcher, and healthcare leader. Prior to joining CFHI, Carol led the design, development, implementation, and evaluation of a number of patient engagement projects within a large academic health sciences centre in Toronto.

& Co-Presented by
ALBERT DUMONT
Albert Dumont, “South Wind”, is a Poet, Storyteller, Speaker, and an Algonquin Traditional Teacher. He was born and raised in traditional Algonquin territory (Kitigan Zibi). He has been walking the “Red Road” since commencing his sobriety in 1988. He has published four books of poetry and short stories and one children’s book, written in three languages. Several organizations, both native and non-native, are currently featuring his poetry in their promotions, among them are the Wabano Centre for Aboriginal Health and the Native Veterans Association. Albert has dedicated his life to promoting Aboriginal spirituality and healing and to protecting the rights of Aboriginal peoples, particularly the young.

DENISE MCCUAIG
Denise McCuaig is an accomplished Métis woman with an excellent knowledge and background in Aboriginal health and mental health and addictions. Denise has accomplished many things while living with Bipolar, diagnosed in her early twenties. Denise has been an Indigenous Advisor on Aboriginal mental health and addictions through a
number of boards and committees and has worked as a Director, Mental Health and Addictions for Interior Health Authority. Denise’s greatest accomplishment and honour has always been her family. She is proud of her husband, their combined family of four children and their 6 grandchildren.

NANCY PARKER

Nancy Parker has worked with children through to older adults in a variety of clinical settings: private and state inpatient hospitals, residential and day treatment settings, private practice and outpatient services. In her administrative roles she has served both as the Clinical Director and CEO of a large private behavioral health care organization in Clark County, Washington; Director of Community Mental Health- Crisis Services for the Winnipeg Regional Health Authority; and currently is the CEO of Marymound, Inc.

DESPINA PAPADOPOULOS

Despina Papadopoulos is the Senior Improvement Lead for the Northern and Indigenous Health team at the Canadian Foundation for Healthcare Improvement. In this position, she supports the Promoting Life Together Collaborative and the Canadian Northern and Remote Health Network. Much of Despina’s work experience has centred on prioritizing and supporting National mental health and wellness initiatives, focused on child and youth mental health and mental health literacy. She is passionate about listening to and amplifying youth voices and working in relational and collaborative ways.

Collaboratively developing a community profile on the prevalence of suicide and self-harm in a local context

Beginning in 2017, the Waterloo Region Suicide Prevention Council (WRSPC) made research a strategic priority, with a goal to address existing data gaps locally to determine how to best support community suicide prevention efforts. For the first time, several community stakeholders contributed to the most comprehensive report on the prevalence of suicide and self-harm in Waterloo Region. The report was led in partnership by WRSPC and Region of Waterloo Public Health and Emergency Services and sought to overcome data gaps by collaboratively developing a community profile of suicide and self-harm for Waterloo Region. The purpose of the project was to explore community data to shed light on who is dying by suicide and who is attempting suicide, reconcile community results with broader research where possible, and highlight gaps in knowledge to explore through future research. Several organizations agreed to contribute data for the community profile.

Presented by

JESSICA DEMING | @JESSDEMING

Jessica Deming is an epidemiologist with Region of Waterloo Public Health and Emergency Services. In this role for 10 years, she has had the privilege of working in many areas of public health, from breastfeeding and reproductive health, to infectious diseases to chronic disease prevention. She has a particular passion for suicide prevention work. Jessica holds an MSc in Epidemiology and Biostatistics from Western University.

& Co-Presented by

AMANDA DEMMER

Amanda Demmer is the Program Coordinator for the Waterloo Region Suicide Prevention Council. Her Master’s degree in Community Psychology, passion for suicide prevention, and lived experience of suicidal thoughts and behaviours shape her multi-faceted perspective. Amanda has worked in various research and education roles, specializing in mental health promotion and suicide prevention. She advocates for upstream, community-level mental health promotion and suicide prevention initiatives.
National Inuit Suicide Prevention Strategy: Implementation at a national and regional level

The presentation will provide an overview of the development of the National Inuit Suicide Prevention Strategy (NISPS), progress to date based on the ongoing developmental evaluation, and will include an in depth look at regional specific projects that were NISPS funded through two funding streams - the Mental Wellness Enhancement Fund (MWEF) and the Regional Innovation Fund (RIF). The purpose of the MWEF is to contribute to enhancing mental health services in each region, and the purpose of the RIF is to strengthen each region’s efforts in nurturing healthy Inuit children, in alignment with Priority Area 3 of NISPS. The presentation will also highlight other NISPS activities including Prevention of Child Sexual Abuse in Inuit Nunangat, Mental Health First Aid Inuit, Monitoring, Evaluation and Learning and The creation of the NISPS Working Group.

Presented by

JENNY TIERNEY | @JENNYTIERNEY

Jenny Tierney is the Manager of Health and Social Development within the Policy Advancement Department at Inuit Tapiriit Kanatami (ITK). She is the lead on the implementation of the National Inuit Suicide Prevention Strategy. Prior to her work at ITK, Jenny spent 10 years living and working in Iqaluit, NU where she held various roles with the Government of Nunavut, the Embrace Life Council, and Nunavut Tunngavik Incorporated.

Running a suicide bereavement support group: A dissection of CMHA Edmonton’s strategy

The Canadian Mental Health Association - Edmonton Region hosts weekly psycho-educational and support groups for individuals grieving a loss to suicide. The group has attracted participants from diverse faith, culture and loss backgrounds due to its inclusive structure. Groups are facilitated by a trained mental health practitioner and participants engage with therapeutic material divided into three modules: emotional regulation; self-compassion, guilt, and shame; beliefs and values. Through each module, participants share their experiences of grief as they relate to the module topic across four scaffolded sessions. New participants are invited to join at the beginning of a module only and all participants attend an intake session. Bi-weekly drop-in support sessions are held for continued support either to those looking for more support or to those waiting to join a group. The program has reached the required accreditation standards of the American Association of Suicidology.

Presented by

PERIS WASONGA

Peris holds a Master of Arts Degree in Counselling and is also a Certified Canadian Counsellor. She is the Team Lead of the Suicide Grief Support Services at the CMHA-Edmonton. She co-facilitates the Adult Suicide Bereavement Support groups. Peris has an experience of over 8 years working with suicide loss survivors.

& Co-Presented by

JONATHAN DUBUE | @JONATHANDUBUE

Jonathan is a PhD Counselling Psychology student at the University of Alberta studying how psychologists and other mental health professionals practice and experience suicide risk assess-
Do initial cognitive and affective factors predict outcomes in a chat-based crisis intervention service? An exploratory study

The present study explored if cognitive and affective factors are associated with impeded outcomes in a text-based crisis chat context. To evaluate our research questions, 360 crisis chats from 2015-2017 were analyzed. Inclusion criteria were: client was acutely suicidal, had not previously used the service, and was 18-years or older. Participants were 57.5% female, 68.3% under the age of 30, 24.2% Caucasian, and 30.8% were partnered. We adapted an outcome coding scheme from Mikkelstorm et al. (2016) in which outcomes were categorized as resolved, referred, and unresolved/unreferred. A chi-square test of independence was performed to examine the association between cognitive and affective factors and chat outcomes.

Presented by
KATHARINE D. WOJCICK, MS; E. DAVID KLONKSY, PhD; MINJEONG PARK, MA; JOHANNA MICKELSON, BA; KELLEY CHO, BA; GABRIEL MUTC, BA; & CLAIRE KIMBLEY, BA
Conducting community-based research to inform local suicide prevention services and supports

In recent years, the WRSPC identified research as a priority and partnered with Region of Waterloo Public Health and Emergency Services and the Centre for Community Based Research to investigate who is dying by suicide and who is attempting suicide in our Region, and to apply these findings to inform local services and supports available. This presentation will share insights, learnings, and practical suggestions from the Waterloo Region Suicide Prevention Council (WRSPC) – Research Priority. It will also explore why doing local research in communities is important to inform suicide prevention efforts, how this community-based research can be done, and how each community can build the capacity for this work. This type of community-based research encourages collaboration and knowledge sharing between partners to break down silos and to shrink the knowledge-to-action gap. We will share our process and provide practical coaching for building community capacity to do similar community-based research, while encouraging brainstorming and dialogue to explore how others could engage in this within their own communities.

Presented by
AMANDA DEMMER
Amanda Demmer is the Program Coordinator for the Waterloo Region Suicide Prevention Council. Her Master’s degree in Community Psychology, passion for suicide prevention, and lived experience of suicidal thoughts and behaviours shape her multi-faceted perspective. Amanda has worked in various research and education roles, specializing in mental health promotion and suicide prevention. She advocates for upstream, community-level mental health promotion and suicide prevention initiatives.

& Co-Presented by
JESSICA DEMING | @JESSDEMING
Jessica Deming is an epidemiologist with Region of Waterloo Public Health and Emergency Services. In this role for 10 years, she has had the privilege of working in many areas of public health, from breastfeeding and reproductive health, to infectious diseases to chronic disease prevention. She has a particular passion for suicide prevention work. Jessica holds an MSc in Epidemiology and Biostatistics from Western University.

Meeting the unique mental health needs of boys and men - weaving adventure, expressive and experiential modalities

Many men and boys have unique needs when it comes to therapy. With staggeringly high rates of deaths by suicide or overdose, combined with poor help seeking behaviours and high dropout rates in therapy, the mental health realities of men and male youth are at crisis levels. And while masculine gender-norms contribute to these statistics, is it possible the traditional therapy options do not align with how men and boys are wired? Research tells us that other ways of ‘doing’ therapy have greater resonance for some men and boys in distress or living with mental illness. In this workshop, clinicians are invited explore and expand how and where therapy happens and align the therapy with ways that men and boys tend to explore their inner and outer worlds. Sharing techniques, data and experiences from The TONE Project (an adventure/experience-based group therapy initiative for adult men), as well as individual therapy in a private practice setting, participants will examine more deeply the world of therapy through a gendered lens.

Presented by
NICK CARDONE
Nick Cardone is a Registered Counselling Therapist in Nova Scotia. He is also the Owner and Lead Clinician at Free Range Therapy – a private therapy clinic specialized in working with men and adolescent boys. Nick invites his clients to explore
new ways of ‘doing’ therapy. Utilizing evidence-based modalities like adventure-based therapy, exercise, creative expression or exposure to nature, clients engage while on a hike, shooting hoops, rock climbing, playing guitar or using a mousetrap!

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Zero Suicide: An aspirational program application for the University of Calgary

The Zero Suicide Movement is bold and aspirational and based on the belief that suicide is preventable. With origins in the 1999 Institute of Medicine declaration on improving quality and safety through a healthcare re-design, the Zero Suicide Initiative was established by the National Alliance for Suicide Prevention in 2012, and furthered in 2016 with the International Declaration of Zero Suicide. Georgia Tech and partners of the Mersey Initiative in the UK have endorsed these initiatives or post-secondary institutions. Canadian post-secondary institutions are actively considering adoption. This presentation examines the journey undertaken by the University of Calgary, in collaboration with the Centre for Suicide Prevention, to adopt the Zero Suicide Initiative. Under the umbrella of our Campus Mental Health Strategy, and using a socio-ecological approach, we are engaging the entire community in implementing a system wide transformation toward safe care. A comprehensive approach to suicide prevention includes an intercultural focus for international students and our Indigenous population.

Presented by
DEBBIE BRUCKNER
Debbie is the Senior Director of Student Wellness, Access & Support at the University of Calgary since 2006. She was active in developing and implementing the Campus Mental Health Strategy. Debbie has been a sessional instructor in social work and women’s students and worked at Bow Valley College. Previous to entry into post-secondary employment, Debbie was Executive Director of the Calgary Sexual Assault Centre for 10 years.

& Co-Presented by
ANDREW SZETO
Dr. Andrew Szeto is the Director of the Campus Mental Health Strategy at the University of Calgary responsible for guiding the implementation of the 28 recommendations within the strategy. He is also an Associate Professor in the Department of Psychology at the University of Calgary. Dr. Szeto’s research involves the development, implementation, and evaluation of mental illness stigma reduction and mental health promotion programs for various audiences across Canada.

MARA GRUNAU | @MARAGRUNAU
Mara Grunau is the Executive Director of the Centre for Suicide Prevention, a branch of the Canadian Mental Health Association. Established in 1981, Centre for Suicide Prevention equips Canadians to respond to people at risk of suicide. Suicide prevention is everyone’s responsibility and once we are equipped with knowledge and skills, we are better prepared to support someone in crisis. She holds a Bachelor of Education and a Master of Public Policy and Administration.

DR. SUSAN BARKER
Dr. Susan Barker is Vice-Provost (Student Experience) at the University of Calgary responsible for a large portfolio which includes a variety of student support and wellness services and the Office of the Registrar. She has had an academic career in the UK and Canada with senior administration experience both at the University of Alberta and the University of Calgary.
“Naakenasli” Be Happy: Promoting Life Together Collaborative: Building partnerships with First Nations communities to co-design a community strength based sustainable life promotion project for youth

The Promoting Life Together Collaborative brings together teams from across northern, rural and remote parts of Canada. The collaborative supports the development of meaningful partnerships between health authorities/organizations and Indigenous communities and provides learning opportunities for understanding and applying wise practices for life promotion, Indigenous mental wellness frameworks, and culturally safe practices. Together, collaborative teams design, implement, and evaluate improvement initiatives on life promotion alongside their communities. This workshop will discuss how using the ‘Promoting Life Together’ collaborative approach supported by the Canadian Foundation for Healthcare Improvement (CFHI), helped us to create a partnership with the Beaver First Nation community to co-design a life promotion project founded on the strengths of the community. Through the development of a respectful partnership we utilized strength-based approaches that fostered connection to culture, increased hope, and strengthened identity in youth to promote life and wellbeing. We will describe how this walk together with the community, using a cultural safe and reconciliation approach, enhanced our way of knowing and working as a health organization that provides service to First Nation communities through partnership.

Presented by
DONNA MATIER
Donna Matier is the Director for Population, Public, and Indigenous Health in Alberta Health Services North Zone. Donna has worked in Public Health for 30 years and has a Master of Nursing from the University of Victoria.

A proposed framework for long-term prediction, program development and evaluation

The “suicidal process” reflects findings strongly suggestive of an “orderly progression along a single continuum” from occasional thoughts of death through ideation, plans, and attempts, to completed suicide. If the conjectures from this are correct, interpretation of the data suggests that (1) seriousness increases with movement along the continuum, (2) depression is a risk factor, and the earlier its onset the further the progression along the suicidal process, and (3) lower ages of the first death wish are associated with increases in suicidal intent – irrespective of depression. Furthermore, nearly all of those who have shown a particular level of suicidal behaviour have experienced the level below it on this continuum of suicidal propensities. This suggests that those not showing death wishes at some early, but unknown, age are unlikely to ever become seriously suicidal. To the extent that this conceptualization has validity, it is thus amenable to a systems theory approach to health promotion, social restructuring, and treatment interventions, as well as evaluation.

Presented by
ANGUS THOMPSON
Angus Thompson served as a clinician, executive, and researcher. Doctorate in psychology (Institute of Psychiatry). Activities: CASP Vice-President; member, WPA Anti Stigma Campaign; Director,
Mysterious Barricades: Honouring the other through the healing power of music

Mysterious Barricades is an annual, nationwide, live-streamed concert event that began in 2016 as a personal response to the loss that is suicide. It has become a movement that joins musical artists, dancers, poets and others in a sharing of talents that crosses barriers of language, culture and artistic practice across Canada. Our aim is to raise awareness, create understanding and sow compassion for those who grapple with mental health and suicide themselves, or care for loved ones who do, bringing hope and healing through music. Through intensive collaboration the team creating these concerts works each year to ensure the message reaches more people effectively and inclusively. We partner with Indigenous and migrant artists and musicians to ensure their voices and stories are heard alongside those of settler people. Kimberly Barber and Elizabeth Turnbull wish to share their experiences of this extraordinary labour of love in hope that others may be inspired to create their own events that “honour the other” in meaningful ways for suicide prevention and life affirmation.

Presented by

KIMBERLY BARBER | @THISISLANDCANADA

Kimberly Barber is a Professor of Voice at Wilfrid Laurier University and is active internationally as both an operatic and concert performer. An advocate for mental health and suicide prevention and awareness, she has been concert lead and performer in the Waterloo segment of the Mysterious Barricades concerts, which have been nationally live streamed coast-to-coast since their 2016 inception.

& Co-Presented by

ELIZABETH TURNBULL

Elizabeth Turnbull is the founder of the Mysterious Barricades Concert Society and is an instructor of voice at the University of Alberta, as well as being a beloved fixture in opera houses and concert halls across North America. After losing her husband tragically to suicide in 2015, she spearheaded this live-streamed nationwide series of concerts to bring healing and hope to those struggling with mental health and to raise awareness for suicide prevention.

CMHA NB collaborative approach to life promotion

Canadian Mental Health Association of New Brunswick (CMHA NB) has worked to enhance our workshops related to suicide prevention in order to collaborate with many stakeholders and community groups, as well as meet the needs of diverse populations within the province. Our new Suicide Prevention 1.5 hour Gatekeeper training was done in collaboration with the Department of Health and is offered free of charge to all individuals across New Brunswick. CMHA of New Brunswick has built strong relationships with the Government of New Brunswick and last year, over 500 employees of GNB participated in the workshop, organized collaboratively in each region of the province with government officials. CMHA NB has additionally been working with many community partners around the province and offer this program to not only urban but also rural community members. The workshop has also been shared with other provinces and is now being used in other areas of Canada as well.

Presented by

KRISTEN BARNES

Kristen Barnes works as the Director of Operations with the Canadian Mental Health Association of New Brunswick (CMHA NB). A graduate of UNB, Kristen has also worked as a crisis and suicide helpline intervener, Community Connections Coordinator in the multicultural sector, as well as a Family Violence & Sexual Assault Crisis Intervener. Kristen is a recipient of the Terry Fox Humanitarian Award as well as chosen through 21 Inc as one of
Suicide, substance use deaths and stigma: Call for a unified approach to prevention

Lorna Thomas and Phil Haug lost their son Alex, who died by drug-related suicide. The mental health and social risk factors preceding suicidal behaviors and substance overdose or poisonings are largely overlapping. This presentation is a call to action for public health strategies, research and education aimed at preventing both suicide and substance-related deaths. Discussion will center around the work of Moms Stop The Harm (MSTH), which was co-founded by Lorna in 2016, and the Seeing Beyond the Numbers video project. MSTH is an advocacy group calling for changes to our Canadian drug policies, given that many of our current policies view drug use as a criminal rather than a health problem. Seeing Beyond the Numbers is a public education campaign that developed out of the findings from research conducted by the U of A, U of C and UBC. Heather and Phil will speak about being part of this research and one of the videos, which features Phil reading a letter he wrote to Alex, will be shown as part of the session.

Presented by
LORNA THOMAS
Lorna Thomas is an educator, filmmaker, and activist. Lorna’s son Alex, a welder and snowboarder died by suicide in 2012. In response to his death Lorna co-founded Moms Stop The Harm, a network of Canadian mothers, their families, and health professionals, whose lives have been impacted by substance use. The group has grown from 3 to 800 members in a very short time. Many families have lost loved ones to drug-related death and suicide.

& Co-Presented by
PHILIP HAUG
Phil Haug is a retired engineer, father, volunteer. and is the husband of co-presenter Lorna Thomas.

Reasons why not: A critical review of 13 Reasons Why

There has been growing concern regarding the influence of media content on the public’s behaviours and opinions on sensitive topics such as mental illness (Carmichael & Whitley, 2018). The release of the popular Netflix show “13 Reasons Why” was followed by much debate among mental health professionals and the public alike (Notre-dame, Grandgenèvre, Vaiva, Séguin, 2018). In a study by Ayers and colleagues (2017) they found an increased number of suicide-related Google-searches following the show’s release. In the present study, a literature review was conducted to consolidate the data surrounding possible influences of “13 Reasons Why”, including suicide contagion. The show highlights the crippling effect that broken relationships can have on an individual, thus emphasizing the need for reconciliation to promote well-being. By encouraging healthy connections with others, counsellors, suicide prevention workers, and mental health advocates alike can help strengthen at-risk individuals and survivors of suicide attempts.

Presented by
HEATHER MORRIS
Heather Morris, MN RN, is a PhD student at the School of Public Health, University of Alberta. As a former public health nurse, her research interests center around public health advocacy and how individuals with lived experience, bereaved mothers in particular, shape drug policy reform in Canada. Heather is currently a research trainee with the Inner City Health and Wellness Program, Royal Alexandra Hospital, Edmonton.
services, which supported young people over 1.6 million times in 2018. Alisa is instrumental in championing innovative services, such as launching Canada’s first national chat counselling service, the Kids Help Phone mobile app and Crisis Text Line powered by Kids Help Phone.

The opportunities and challenges of fitting artificial intelligence in to national suicide surveillance

Many factors make it difficult to identify populations who have an increased risk for suicidal behaviours (ideation, planning, and attempts) and associated risk and protective factors. The Public Health Agency of Canada (PHAC) relies on national population survey and administrative data to identify suicidal behaviours and associated risk and protective factors among populations in Canada; these data are often problematic. Populations that are the most under-represented in data are often the most at risk for suicidal behaviours. Considering these data challenges and taking a long-term look at how society is increasingly technologically connected, in August 2018, PHAC initiated a pilot project using artificial intelligence (AI) and social media data to generate more real-time estimates of the upstream risk and protective factors and patterns of suicidal verbalization among diverse populations in Canada. This presentation will describe how PHAC is rethinking suicide surveillance to create a more equitable and stable foundation for suicide prevention policies and programs, present preliminary data from the AI pilot project, and discuss whether AI and social media data can transform national suicide surveillance.

Presented by

MELISSA BAKER
Dr. Melissa Baker is a Senior Epidemiologist and the Acting Team Lead of the Suicide and Positive Mental Health Surveillance Team at the Public Health Agency of Canada (PHAC). She is co-lead of the PHAC Artificial Intelligence (AI) Pilot Project for Surveillance of Suicide-related Verbalization on...
Social Media. Prior to joining PHAC, Melissa worked as an Epidemiologist on multiple Ebola Virus Disease response and prevention projects with Njala University and the University of Sonfonia-Conakry, as an Evaluation Consultant for Population Services International in Pakistan and Tanzania, and an Intern at the United Nations Educational Scientific and Cultural Organization in Bangkok. Melissa holds a Ph.D. in Public Health from Chulalongkorn University with a focus on parental monitoring, STD prevention and adolescent sexual health outcomes. She also completed a postdoctoral fellowship at the Graduate Institute of International and Development Studies in Switzerland, and was the Principal Investigator leading HIV research projects in the Netherlands among populations from countries where HIV is endemic.

Assessing suicide is a stressful and complicated process, one that health professionals often list as their greatest clinical difficulty. Recent literature suggests that health professionals have diverse suicide risk assessment (SRA) practices, the study of which has led to better training and less patient suicide. However, no such research has been conducted for psychologists, despite regularly treating suicidal clients. As part of a master’s thesis, an interpretative phenomenological analysis study was completed with five registered Canadian psychologists examining their experience of conducting SRA. This presentation will cover the described study in depth, summarizing the suicide risk assessment field and implications for SRA practice across mental health professionals and settings. Furthermore, this presentation will touch on the intersection of SRA and reconciliation, through the promotion of SRA methods that are more collaborative, person-centered, and cross-cultural.

Presented by
JONATHAN DUBUE | @JONATHANDUBUE

Jonathan is a PhD Counselling Psychology student at the University of Alberta studying how psychologists and other mental health professionals practice and experience suicide risk assessment. He is also the lead co-facilitator of CMHA Edmonton’s evening suicide bereavement support group and is part of multiple municipal and provincial suicide prevention boards and strategies.

Co-Authors
DR. WILLIAM HANSON, DEPARTMENT OF EDUCATIONAL PSYCHOLOGY (UNIVERSITY OF ALBERTA)

Patient and family engagement in suicide prevention initiatives

At St. Joseph’s Health Care London, we are the first to implement the Zero Suicide initiative in Canada. A vital but sometimes overlooked part of the Zero Suicide program is the involvement of patients and families in all aspects of planning and implementation. The Zero Suicide work at St. Joseph’s was recently recognized by HealthCare CAN and the Canadian Patient Safety Institute as leaders in patient engagement for patient safety. We would like to share our work - what we have learned, how we have benefitted from patient and family engagement, and how we hope to improve upon this work. Health care initiatives have traditionally been implemented without this important consideration, but there is now a movement towards reconciling that connection with patients and families, and involving them in system changes meant to improve their care. We wish to highlight the importance of this relationship in suicide prevention initiatives specifically, and how we can go about repairing the disconnection between patients and mental health care providers.

Presented by
KATERINA BARTON

Katerina Barton is the Project Director at St. Joseph’s Mental Health Care London where she has been leading the implementation of Canada’s first Zero Suicide Initiative. Katerina has over 10 years of experience in pharmacy, clinical informatics, project leadership, and mental health. She is currently a PhD candidate at Western University where she studies the clinical outcomes and effective elements of suicide prevention programs, with a focus on Zero Suicide.
Equipping healthcare professionals in the assessment and intervention of suicidal patients

As a vital member of the healthcare team, family physicians and nurses are well positioned to identify and intervene with those who may be at risk for suicide. The Mental Health Commission of Canada and the CASP partnered with mdBriefCase to develop two online learning programs that address suicide prevention for family physicians and nurses. The self-directed modules are designed to increase their understanding of suicide in Canada, suicide risk assessment, intervention, safety planning, available tools and resources, and follow-up care. The modules will help physicians and nurses gain the confidence needed to connect with their patients, build trust and ultimately, strengthen their care relationship, which is a key underpinning of suicide prevention. Since launching in May 2017, over 5,100 professionals have completed the program. Results from pre-test and post-test data; pre-course and post-course survey; and initial evaluation reveal that physicians and nurses had increased awareness of the possible risk and protective factors for suicide as well as increased comfort in addressing the topic of suicide safely with patients.

Presented by
KARLA THORPE
Karla Thorpe is currently the Director of Prevention and Promotion Initiatives at the Mental Health Commission of Canada. In this role, she leads the Commission’s work in suicide prevention. This includes building awareness around the importance of suicide prevention, mental wellness, and life promotion; leading grass-roots projects; developing evidence-informed training; and establishing networks with key partners to identify, share, and develop best practices related to suicide and its prevention. Karla has earned a Master of Science in Statistics from Queen’s University as well as a Bachelor of Commerce from Carleton University.

Post-secondary suicide postvention: Addressing the unique needs of a community

According to the 2016 National College Health Assessment, 13% of Canadian Post-secondary students contemplated suicide at some point in the last twelve months with 2.1% (43,000 students) having attempted suicide. As post-secondary institutions grapple with supporting the mental health of our students, we are seeking to develop and improve suicide prevention, intervention and postvention strategies that meet the unique contexts of our campus communities. Using key learnings from the University of Alberta and University of Calgary, this presentation will present a death by suicide postvention response framework that is grounded in current research and gives particular attention to communication tools and timelines, support options, challenges, and the critical value of collaborating with campus stakeholders.

Presented by
KEVIN FRIESE
Kevin Friese is the Assistant Dean of Students, Health and Wellness at the University of Alberta. With over nineteen years of experience in the field of health and wellness, Kevin has the privilege of leading a multidisciplinary team of health professionals that support a holistic approach to the wellbeing of students, their families, faculty, and staff at the U of A. Kevin has a passion for supporting the health and wellbeing of students with a vision of creating communities in which each person is empowered to thrive and achieve their full academic and life potential. He sits as a member on the Healthy Campus Alberta Design Team, and is the Incoming Chair of the Edmonton Regional Post-Secondary Mental Health Committee.

& Co-Presented by
SARAH WOLGEMUTH | @SGARSKEY13
Sarah has been the Assistant Dean, Student Life in the Office of the Dean of Students since 2016. Prior to that, she has served at the U of A as Director of Student Services, Faculty of Law; and

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Evidence review of school-based suicide prevention programs: Preliminary findings

Roots of Hope, a five-year, multi-site project led by the Mental Health Commission of Canada (MHCC) aims to reduce the impacts of suicide in communities across Canada. The project offers an evidence-informed suicide prevention model and supports for communities to tailor interventions to their local context. The Roots of Hope project connects communities across Canada through a Community of Practice. The goal of this network is for communities to share best practices and evidence-informed tools and resources related to suicide prevention and life promotion. Communities have identified a pressing need for trusted information about school-based suicide prevention programs they can implement locally. To address this, the MHCC is leading an evidence review of school-based suicide prevention programs available in Canada and internationally. Guided by a committee of experts from across Canada, the MHCC is synthesizing the evidence and identifying core components of school-based programs. In this presentation, we will share preliminary findings, their application to attendees’ communities, and strategies for mobilizing this knowledge.

Creative interventions in suicide postvention

Creative expression may help mourners access deep emotions that can be difficult to put into words. This interactive workshop will introduce theory that supports creative therapeutic interventions and will explore the value of including expressive art activities in suicide postvention. Participants will learn 6 creative interventions that can be used with adults or teens, and with individuals or groups including Healing Hearts, Playlists for Healing, Grief Collage, Keys to Self-Care, Self-Talk Rocks, and Memory Lanterns. Each activity has a primary focus of grief expression and/or self-care for healing. Each activity shared will include detailed instructions and supply lists. Participants will be provided with supplies and invited to try several of these activities as they learn.

Presented by
MAUREEN POLLARD
Maureen is a registered social worker, with 27 years of experience working with individuals,
families and groups. One of the primary focus areas in her private practice is providing compassionate support for the bereaved, particularly those who have experienced traumatic loss. Maureen currently works in partnership with local organizations to provide information and support groups for survivors of suicide loss, as well as offering suicide prevention seminars throughout her community.

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Resilience in action: Small steps on the path

Resilience is defined as the ability to adapt to adversity, trauma and stress. Resilience involves a variety of skills and activities. This interactive workshop will introduce 14 factors research has related to personal resilience. Participants will learn simple, practical steps anyone can take to support wellness, demonstrated through interactive exercises designed to strengthen personal resilience. By the end of the workshop, participants will have the tools to create a personalized plan to improve coping skills and self-care strategies.

Presented by
MAUREEN POLLARD
Maureen is a registered social worker, with 27 years of experience working with individuals, families and groups. One of the primary focus areas in her private practice is providing compassionate support for the bereaved, particularly those who have experienced traumatic loss. Maureen currently works in partnership with local organizations to provide information and support groups for survivors of suicide loss, as well as offering suicide prevention seminars throughout her community.

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Suicidal crisis intervention: Back to basics

Caplan (1964) defined the Crisis as a relatively short period of psychological unbalance for a person confronted to an event, perceived as dangerous, that s/he/they can’t avoid nor resolve with their habitual problem-solving resources. The workshop will offer an opportunity to re-center the Suicidal Crisis intervention to the Basic concept of Crisis and re-visit the possible strategies of intervention associated with different levels of suicidality. Intervening at any level, permits a de-escalation of the situation and offers alternatives to crisis resolution other than being sent to the hospital.

Presented by
JULIE KATHLEEN CAMPBELL
Julie Kathleen Campbell is the founder of the suicide prevention centre le Faubourg in the Laurentians (Quebec) and was the Executive Director and Clinical Supervisor for over 20 years. She is also a Past President of the Quebec Suicide Prevention Association. She is now a Quebec Clinical Psychologist, a Suicide Prevention Consultant mainly working with the northern Quebec inuit communities and the Executive Director of CASP.

& Co-Presented by
AMELIE GAUTHIER
A seasoned clinician, accredited trainer and experienced speaker, Amélie Gauthier has been working in the field of suicide prevention since 1997. With 21 years of experience in working with suicidal people and those bereaved by suicide she first held the position of Clinical Coordinator at the Suicide Prevention Center le Faubourg, before being appointed executive director in 2012.

YVONNE BERGMANS
Yvonne Bergmans has led the development, co-ordination, and facilitation of the 20 week Skills for Safer Living/PISA intervention for people with recurrent suicide attempts at the Suicide Studies Research Unit at St. Michael’s Hospital in Toronto. Yvonne is actively involved in clinical, research and education activities. Her primary research focus has been understanding and responding to recurrent suicide attempts.
Taking suicide reporting recommendations to the next level

Just as the causes of suicide are complex, so now is media attention. It increasingly extends to in-depth exploration of underlying factors, preventative measures, interventions and treatments as well as investigation of shortcomings on the part of authorities. Yet current recommendations for media work still primarily relate to reporting deaths responsibly and demonstrating the existence of hope. Important as these are, the authors of Mindset: Reporting on Mental Health and its French counterpart En-Tête : reportage et santé mentale want to expand the conversation. This unprecedented session, sponsored by the Mental Health Commission of Canada invites your input as journalists prepare new versions of their suicide chapters.

**Panel Members**

**RENATA D’ALIESIO** | @RENATADALIESIO
Leader of the Globe and Mail team on the Unremembered series that exposed the true extent of suicide among military veterans, winning many prizes including the inaugural Mindset Award for Workplace Mental Health Reporting in 2016.

**OMAR MOUALLEM** | @OMAR_AOK
Freelance journalist and winner of the 2017 Mindset Award.

**STEPHEN WARD**
PhD, Journalism ethicist, educator and author.

**ROB WHITLEY**
PhD, Principal Investigator, Social Psychiatry Research and Interest Group, Douglas Hospital, Montreal.

**IOANNA ROUMELIOTIS** | @IOANNACBC
Reporters with CBC News.

**Moderated by**

**CLIFF LONSDALE**
Cliff Lonsdale taught for 13 years in the Graduate Program in Journalism at Western University, after more than 40 years as a reporter, editor, producer and news executive around the world. He is a co-founder, with Jane Hawkes, of the Canadian Journalism Forum on Violence and Trauma, and president of the board of directors. Lonsdale reported on the 1960 civil war in Congo and Zambia’s transition to independence in 1964, and worked in Rhodesia, now known as Zimbabwe, as the producer and host of a nightly radio program, Newreel. Lonsdale worked for many years as the Chief News Editor for CBC Television, the Head of Production in Europe, as well as the Head of Production for CBC News, Current Affairs and Newsworld. After leaving CBC in 1993, he made independent documentaries, filmed and distributed worldwide. He began teaching television journalism at Western University in 2003 and continued to teach international reporting after retiring in 2012. In 2010, he was an inaugural Dart Academic Fellow at the Columbia Journalism School.

Walk With Me: Indigenous suicide bereavement

This overview will include how bringing community members together for a day of hope and healing builds understanding and strength. Using the Medicine Wheel, this presentation will describe the journey from the past, to the present and looks to the future; it creates a context for workshop participants to examine where they are in the grief cycle, issues related to suicide grief and how they can move forward to hope. While there are some overarching best practices in suicide prevention, specific suicide prevention initiatives are best undertaken by community members, friends, and family who understand the social context of their own community: strategies must be created in response to local cultural meanings and practices. To accommodate the cultural distinctiveness of each Indigenous community, the learning material must be flexible. Walk With Me provides a framework that allows for the individual aspects of each community to be incorporated and recognized; which in turn builds community strengths. Cultural recognition is vital to healing and resiliency.
Indigenous Lifeway: A healing way of life

The Healing Cycle is from 36 Life Cycles and Healing Wheels that are part of a Medicine Wheel, it is an Indigenous Holistic Healing Process that involves: Recovery to process causes and effects; Resolving effects and impacts; Evolving with change of choices and behaviors; Growth with self-renewal, enlightenment and lightness of spirit and heart. This process addresses the past/history, event and effects from trauma, crisis and addictions that are associated with unresolved emotions and behaviors from suicide, loss, violence, abuse, sexual violence and conflict, missing persons (unresolved), harming self and/or others. This is a healing process from the Ancestral Indigenous Healing Way of Life.

Presented by
GLORIA KEJICK
Gloria Kejick is an Indigenous woman from Grassy Narrows, Ontario, with 40 years of experience with suicide as a survivor, helper and teacher of healing from suicide through the teachings of the Indigenous Lifeway: A Healing Way of Life. Her first suicide intervention was at 18 years old and then again at 26 years old when her brother died by suicide. Gloria works with suicide as a Mobile Crisis Response Team member. Her work is healing focused as per the Healing Wheel process.

Design with the end in mind

With MATES in Construction as the starting point this presentation will explore program design from an end user perspective. While programs and interventions ideally should be evidence based or informed, they should always first and foremost be informed by the community in which they are to be applied. This approach was key to the design for the MATES in Construction program and it drove several key differences to conventional programs as developed in the late 2000s. It will be argued that it is the community which must define the problem the intervention is to solve and preferably own the intervention rather than being the subject of other’s interventions or research.

Presented by
JORGEN GULLESTRUP | @GULLESTRUPJ
Jorgen Gullestrup is a proud father of four and the founding CEO of the charity MATES in Construction. He is a qualified plumber and holds a Master of Suicidology Recipient of Suicide Prevention Australia’s 2018 LIFE Award for suicide prevention sector leadership. He is a 2017 Churchill Fellow studying workplace approaches to mental health and suicide globally. MATES in Construction is one of the best evaluated workplace suicide prevention programs globally, designed entirely from a construction worker’s perspective.
Online crisis support

Communication patterns are constantly evolving and changing, and so are the ways the people are reaching out for support. Providing crisis support online has opened the doors to serving new demographics of service users and those who may not reach out for traditional supports such as counselling or crisis lines. Although a benefit to service users, providing online services does not come without its complexities to navigate in providing quality crisis service. In this presentation participants will learn from Distress Centre Calgary's experience in the implementation and ongoing development of providing online crisis support through chat and text modalities.

Presented by
ROBYN ROMANO

Robyn Romano is the Director of Operations with Distress Centre Calgary. She has worked in many different roles supporting the ongoing development and support of Distress Centre’s core crisis services. Having been with the agency since the incorporation of online services she holds a vast amount of knowledge and experience with the complexities of online support.

& Co-Presented by
ASHLEY DE VERA MACAYAN

Ashley De Vera Macayan is one of Distress Centre Calgary’s Youth Program Coordinators. Ashley has been with Distress Centre since 2015 when she started as a volunteer on the ConnecTeen services, which are mostly provided online. Ashley has taken her passion for supporting those in crisis online and continues to now develop and support volunteers in doing the same. Ashley brings a wealth of practice experience in supporting clients online.

Expanding suicide prevention strategies by integrating community pharmacies: an exploration of roles and opportunities

Research by our group verifies that pharmacists are routinely involved in the care of people at risk of suicide and recent statements from the UK and Australia indicate a burgeoning recognition of the potential role and opportunities of integrating community pharmacy into efforts to reduce suicide, suicide attempts, and self-harm. The need for training is obvious, as is the need to include the community pharmacy and its staff within a suicide prevention strategy. In this workshop, using participatory action research methods, we will: 1) explore opportunities of how pharmacies and their professional staff can reduce suicide risk; 2) generate ideas for how to integrate the community pharmacy into a multicomponent suicide prevention strategy; and 3) discuss how pharmacy staff can contribute meaningfully and positively to relationship building, connectedness, healing, and reconciliation in their communities.

Presented by
DR. ANDREA MURPHY | @MURPHYAL

Dr. Andrea Murphy is an Associate Professor, College of Pharmacy, Dalhousie. She is cross-appointed to Nursing and Psychiatry at Dalhousie University. Dr. Murphy’s program of research primarily focuses on the development, implementation, and evaluation of interventions to change behaviour in mental illness and addictions care. She has used both quantitative and qualitative approaches to intervention design, implementation, and evaluation. Dr. Murphy maintains a practice license and works clinically with an interdisciplinary team as a clinic pharmacist at the Dalhousie School of Social Work Community Clinic.

& Co-Presented by
DR. DAVID GARDNER

Dr. David Gardner’s research covers pharmacoepidemiology, safe and effective use of psychotropic medications, and program development and implementation in mental health and addictions
services in primary care with a focus on pharmacists’ roles and services. With Dr. Andrea Murphy, he has co-developed More Than Meds, the Bloom Program, Headstrong – Taking Things Head-On, and Sleepwell. They are investigating the role of community pharmacies in suicide prevention strategies. He has 100 peer reviewed publications and is the author of Antipsychotics and Their Side Effects. His recognitions include multiple teaching awards, the 2012 Canadian Pharmacists Association Pharmacist of the Year award, and in 2017 was identified as a CAMH Difference Maker in its 150 Leading Canadians for Mental Health campaign. Dr. Gardner balances his scholarly work with regular community outreach, advocacy, and clinical activities.

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Stories of survivorship: The place and purpose of stories in making sense and meaning after suicide attempt and suicide loss

After difficult experiences, such as surviving a suicide attempt or suicide loss, we embark on a process to sort through and make sense of it. A primary purpose of this process is to find a way to reinterpret the world and beliefs that accords with this experience, ideally coming to terms with a story that is not so disruptive to everyday life. Sharing the story with others is important, as it allows a person to give words to the experience and receive recognition and validation. Through meaningful engagement our stories of survival can be used to help us navigate a way forward and be used as a signal of hope for others. This panel will briefly discuss the role of stories in the journey after suicide attempt or loss. Suicide attempt and loss survivors will share narratives of their experience and stories of survival with an emphasis on meaning making. The panel will conclude with ideas for exploration for participants who are interested in sharing their personal story of survivorship.

To serve each other, to respect to each other, to trust each other, to honour each other to care for each other, to forgive one another, to focus on people’s good... these are all acts of love.

– FOOLS CROW
Public safety personnel: Particular groups to consider in suicide prevention and postvention

Canadian public safety personnel provide services that are crucial to maintaining safety and security among Canadian individuals and society in general. These workers include, but are not limited to, police officers, firefighters, paramedics, emergency dispatchers and correctional officers. Stress is high in these work settings where threats to one's physical and psychological integrity are frequent. Public safety personnel show an increased risk of suicide and epidemiological data indicate high rates of suicidal behaviours and suicide deaths among these populations. This symposium presents characteristics specific to public safety personnel that make them a particular group to consider for suicide prevention and postvention.

Presented by
LAURENT CORThÉSY-BLONDIN
Laurent Corthésy-Blondin is a graduate student in the Community Psychology program at the Université du Québec à Montréal. The research to which he contributes focuses on suicide prevention among public safety personnel and the use of information and communication technologies in suicide prevention.

& Co-Presented by
CHRISTINE GENEST
Christine Genest is an assistant professor in the Faculty of Nursing at the University of Montreal. Her research focuses on suicide postvention, resilience and the impact of exposure to potentially traumatic events on public safety personnel. She is a research member at the Centre for research and intervention on suicide, ethical issues and end-of-life practices which is based at the Université du Québec à Montréal.

ROSEMARY RICCIARDELLI, PH.D.
Rosemary Ricciardelli is a Professor of Sociology at Memorial University and an Associate Scientific Director for the Canadian Institute for Public Safety Research and Treatment. Her research is centered on evolving understandings of gender, vulnerabilities, risk, and experiences and issues within different facets of the criminal justice system. Her current work includes a focus on the experiences of correctional officers and police officers given the potential for compromised psychological, physical, and social health inherent to the occupations.

SIMON HATCHER | @SHATCHERNZ
Simon Hatcher is a Full Professor of Psychiatry at the University of Ottawa where he has been since May 2012. His research interests include suicide, self-harm, psychotherapies, psychiatry in the general hospital setting and e-therapies. He is based clinically at The Ottawa Hospital providing services in the downtown homeless shelters, working in the Liaison Psychiatry service at The Ottawa General Hospital and leading a First responder Occupational Stress Injury Clinic.

I remain convinced that most human conflicts can be solved through genuine dialogue conducted with a spirit of openness and reconciliation.

– DALAI LAMA
Suicide and mental illness are deeply connected.

Suicide is a serious public health issue that impacts individuals, families, and communities. It is one of the top 10 causes of death in Canada, and among youth, it is the second leading cause of death after car accidents. Yet suicide is preventable through community action, education, increased awareness and sharing hope.

The MHCC is uniquely positioned to champion mental health issues and also to support others who take up the call. As part of our commitment, we will continue to develop a suite of resources on life promotion and suicide prevention, including:

- Online modules for family physicians and nurses
- Webinar series and helpful toolkits
- #ShareHope, an online platform for the public to share positive messages
- Roots of Hope: A community suicide prevention project that aims to reduce the impacts of suicide across Canada

Together, we accelerate change. Learn more, visit: mentalhealthcommission.ca

Ensemble, nous accélérerons le changement. En savoir plus : commissionsante mentale.ca

Financial contribution from
Health Canada Santé Canada

Suicide et la maladie mentale sont étroit ment liés.

Grave problème de santé publique, le suicide affecte les individus, les familles et les communautés. Il représente l’une des 10 principales causes de décès au Canada et, chez les jeunes, la 2e cause de décès après un accident de voiture. Pourtant, le suicide peut être évité grâce à l’action communautaire, à l’éducation, à la sensibilisation accrue et au partage de l’espoir.

La CSMC est dans une position unique pour promouvoir les questions de santé mentale et soutenir ceux qui viennent en aide aux autres. Dans le cadre de notre engagement, nous continuerons à élaborer un éventail de ressources sur la promotion de la vie et la prévention du suicide, notamment:

- Modules en ligne pour les médecins de famille et le personnel infirmier
- Série de webinaires et trousses d’outils
- #PartagezEspoir, une plateforme en ligne permettant au public de partager des messages positifs
- Enraciner l’espoir : un projet communautaire de prévention du suicide visant à réduire les effets du suicide au Canada

Mental Health Commission of Canada
Commission de la santé mentale du Canada

Financial contribution from
Health Canada Santé Canada
Reconciliation is a deep practice that we can do with our listening and our mindful speech. To reconcile means to bring peace and happiness to nations, people, and members of our family... In order to reconcile, you have to possess the art of deep listening.

– NHAT HANH
In the end, reconciliation is a spiritual process, which requires more than just a legal framework. It has to happen in the hearts and minds of people.

—NELSON MANDELA