GLS Youth Suicide Prevention

Implementation Team - Be the 1 Carroll County - December 16, 2024, 12:00-1:30pm

Register in advance for this meeting:

https://us02web.zoom.us/meeting/register/tZMscumvpzsoH9fCbMtMlsm7ce7NPMn74aDy

NAMI-NH, Northern Human Services & Carroll County Coalition for Public Health Garett Lee Smith Grant – NH Nexus Project 2.0

Agenda

-Introductions of team members around the table

This may be the last official grant-funded meeting of our Youth Suicide Prevention Team. Our Garrett Lee Smith Grant with NAMI NH, known also as the NH Nexus Project 2.0 began in 2020.

Today's meeting, we aim to give a broad overview of:

- 1. Where we have been and what we have accomplished.
- 2. Where we would like to go from here.

Mckenzie Webb	Care Liaison for the Garrett Lee Smith Grant,
	Northern Human Services, mwebb@northernhs.org
Susan Ward	Manages the Garrett Lee Smith Grant, NAMI NH, sward@naminh.org
Brianna Valdepena	Family Liaison at Paul School and District Suicide Prevention Coordinator for SAU 101, Brianna.valdepena@sau101.org
Heather Souther	Wellness Counselor, Brewster Academy, hsouther@brewsteracademy.org
Pete Ntourntourekas	Community Engagement- Children's Behavioral Health,
	New Futures - <u>peter@new-futures.org</u>
Amanda Goddu	Outpatient LCSW, Huggins Hospital, agoddu@hugginshospital.org
Julie Lanoie	Executive Director, Tamworth Community Nurse Association,
	jlanoie@tamworthnurses.org
Caleb Gilbert	Director of Public Health, C3PH, caleb.gilbert@graniteuw.org
Jen Thomas	Prevention Coordinator, C3PH, jennifer.thomas@graniteuw.org
Emily McArdle	Young Adult Outreach, C3PH, <u>u25carrollcounty@outlook.com</u>

We set out to help our community to	Highlights	Next steps beyond the grant?
1. Recognize Risk Factors and Warning Signs. a. CONNECT Trainings b. Distribute Information c. Awareness Activities d. Connect individuals to the Care Liaison, McKenzie Webb e. Other suicide prevention trainings	 a. Over 600 trained in 2024, many more over the life of the grant. Carroll County now has CONNECT Trainers moving forward. b. Many public events, health fairs, school open houses, Pride Festivals, email blasts, social media campaigns. Creation of resource guides, www.c3ph.org c. See above. d. McKenzie Webb built referral networks and connections McKenzie is not currently taking referrals. If the grant receives an extension, her work will continue. e. Social media f. Resource table events at schools and youth service organizations 	a. E-learning slots – Last chance to access CONNECT eLearning modules, no cost self-paced course. Different versions are available, can be done over the course of 2 weeks. See attached flyer and please share. Reach out to Jen/Catalina if you or an organization you know are interested. The slots will be available until Jan. 14 (if you begin it before Jan. 14, you will still be able to complete it after Jan 14). Susan does not believe it provides CEUs. b. Many people on this call were trained in CONNECT and can provide it to others.
2. Increase Knowledge and Use of Evidence Based Practices a. CALM Training b. Update organization protocols c. Screenings d. Safety Planning e. Compassionate care and follow up in youth serving organizations	 a. CALM training October 2024. We have access to CALM trainers forward. b. Protocol updates documented at SAU 9, SAU 45, SAU 49, SAU 101, Brewster Academy, Memorial Hospital, Northern Human Services Mobile Crisis Team c. Screenings happening at primary care offices, other? d. Safety planning is part of CALM training e. Ask the Question- To identify and provide appropriate practices 	
Collaborations with Stakeholders a. Promote 988 NHRRAP b. Promote peer support opportunities c. Collaborate with regional Mobile Crisis Team at NHS	 a. Regular distribution and promotion of 988, NHRRAP b. Peer Support: Nov 23 Survivors of Suicide Loss Event, and start-up of a support group in Tamworth c. Rich Melillo, Mobile Crisis Team has been active in 	

d. Strengthen community and natural supports for youth.	communications and collaborations with our team. d. Strong access to caring adults in school settings, primary care, youth serving organizations	
4. Create a culture of Hope and Help Seeking a. Safety in media messaging b. Events to promote Mental Health and stigma reduction c. Elevate lived experience voices	 a. Conway Daily Sun has communicated commitment to safe messaging b. Kennett High School Mental Health Fairs, White Mountains Pride Festivals, White Horse events. Various guest speakers at Be the 1 Team Meetings. c. Nov 23 Survivors of Suicide Loss Event. 	
5. Next Steps for the Implementation Team- Group decision regarding future meetings? Jennifer Thomas Jennifer.thomas@graniteuw.org Catalina Kirsch catalina.kirsch@graniteuw.org	 a. Discussion about the group continuing to meet as a standalone meeting for youth suicide prevention or combining this group with some of our other stakeholder meetings (e.g. Carroll County Responds to SUD or Youth Substance Misuse Prevention Subcommittee). b. We will continue with the ISOSL Day event on the Saturday before Thanksgiving with help from AFSP- this group could work together on this. c. Capital Region has a Community Action Leadership Team which is an established group that has similar objectives/goals as the GLS grant (along with goals relating to substance misuse prevention). They are planning on morphing their GLS implementation team into that group. C3PH has CC Responds to SUD meeting and Youth Substance Misuse Prevention Subcommittee- We could add objectives about youth suicide prevention into those meetings and include the people who have been 	The group agrees that these meetings are helpful and to meet in February (Wednesday, February 19, 12pm) to brainstorm ideas about how to keep these meetings going and what to do with them. We will discuss how to include youth suicide prevention in our other work/meetings, what goals and objectives we'd like to work on, who to get involved, and how we can continue to promote suicide prevention within our capacity (without the grant). Register for Feb 19 meeting

involved in Be the 1 in those meetings.

- d. Feedback/ideas from the group:
 - These meetings are helpful to get together to hear what's going on in the community and what community partners are doing.
 - 2. Could work together to organize broader community events.
 - These meetings are important to provide spaces where organizations can collaborate and stay connected in a unified way.
 - 4. The emails from
 Catalina with all the
 events happening
 around the area were
 very helpful and made
 it easy to share events,
 information, and
 resources.
 - Could bring in different stakeholders- e.g.
 Rapid Response,
 Recovery Centers, etc.
 - Could connect with Getting to Y groups, e.g. at Moultonborough.
- e. Feedback/ideas from Susan:
 - 1. Brainstorm different goals and objectives.
 - Brainstorm different collaborators- e.g. first responders, clergy, faith leaders.
 - Postvention- There is a need for postvention trainings and plans/procedures with best practices, e.g. for schools and for the whole state (what to

Jen will send Amanda info about Alternative Peer Groups. Flyer is also attached below.

Brianna will reach out to C3PH about the Community Helpers training.

do after a suicide, memorial guidelines, etc.) Could reach out to Elaine or Anne at NAMI NH or DBHRT. The Suicide Prevention Council (quarterly meetings, open to anyone) is talking about creating a Suicide Postvention Workgroup. Funeral directors and faith leaders are often involved in postvention.

- 4. Young adults are a high-risk group. Training with Apprenticeship NH had to be cancelled, but hoping for the extension to reschedule it. (Idea to connect this age group with peer support agencies. Amanda would like more info about Alternative Peer Groups.)
- 5. Carroll County now has a lot of great trainers- Would be great to keep providing these trainings (Connect, Mental Health First Aid, CALM, etc.). NAMI NH is working on a Training Community of Practice.
- f. Brianna- Jan or Feb.- Planning on holding a Community Helpers training with the Rec Program in Wakefield, administrators were talking about making this an annual training event to invite stakeholders to. C3PH is happy to help/support this in any way.

- g. Susan's position- Susan will transition to a role more involved with trainings at NAMI NH.
- h. Julie- Tamworth Community
 Nurse Association has a brand
 new and accessible space that
 can be used for
 events/trainings for free, can
 comfortably hold around 20
 people. Located centrally in
 Carroll County, in Tamworth.
 FMI:

jlanoie@tamworthnurses.org

Awareness Campaigns

December

- Seasonal Depression Awareness
- Holiday Season support and self-care
- Dec 3 Int'l Day of Disability

January

- Mental Wellness Month
- Jan 3 Mind-Body Awareness Day
- Jan 15 MLK Jr Day, justice, equity, service
- Jan 27 Holocaust Remembrance Day

February

- Black History Month
- National Eating Disorder Awareness Feb 26- Mar 1

March

- Self Harm Awareness Month
- Disability Awareness Month
- World Teen Mental Wellness Day
- Transgender Day of Visibility

April

- National Counseling Awareness Month
- Stress Awareness Month
- April 16 World Semicolon Day

May

Mental Health Awareness Month

Find more online at https://my.nami.org/NAMI/media/NAMInet/Outreach-Partnerships/Awareness-Calendar-2024-25.pdf

https://www.samhsa.gov/newsroom/observances/suicide-prevention-month

https://988lifeline.org/promote-national-suicide-prevention-month/

health literacy resources for health professionals Resources attached to share: 1. CONNECT eLearning Offer Flyer. 2. PTSD and Secondary Trauma Dec 19 3. NH MHCAP Educators Wellness ECHO. See flyer. 4. NH LSW/LSWA LSW and LSW-A Information (behavioral health workforce pathway) 5. Alternative Peer Groups 6. Veterans Food Assistance Program 7. Online Narcan training and distribution order 8. Keep Moving NH – Carroll County Mobility Management resources 9. YRBS Infographics, for school leadership 2 pages, for parents/public 2 pages 10. Naloxbox Installation 11. Foster Parent Support Group 12. Kinship Caregiver Support Group 13. Anti Oppressive Practices Child Behavioral Health ECHO 14. New Futures Advocacy Trainings Winter 2024-2025 15. See list of resources at https://www.c3ph.org/resource-center/resource- guides 16. See list of resources at https://linktr.ee/c3phnh

Next meeting

You are invited to a Zoom meeting.

When: Feb 19, 2025 12:00 PM Eastern Time (US and Canada)

Register in advance for this meeting:

https://us02web.zoom.us/meeting/register/tZMscumvpzsoH9fCbMtMlsm7ce7NPMn74aDy

After registering, you will receive a confirmation email containing information about joining the meeting.

BE THE 1 CARROLL COUNTY NH

CONNECT™ ONLINE SUICIDE PREVENTION TRAINING AVAILABLE THROUGH JAN 10 2025









SIGN UP FOR A NO-COST SELF-PACED ONLINE TRAINING DESIGNED FOR

- 1. <u>Gatekeeper anyone who may have</u> contact with youth/young adults
- 2. School Personnel
- 3. Healthcare Workers
- 4. Mental Health Providers

contact: Jennifer Thomas,

jennifer.thomas@graniteuw.org, 603-301-1252 or Catalina Kirsch, catalina.kirsch@graniteuw.org

<u>This opportunity is made possible with grant funding and support from the Department of Health and Human Services Substance Abuse and Mental Health Services Administration</u>



RECOMMENDED AUDIENCE: YOUTH-SERVING ORGANIZATIONS,
PUBLIC SAFETY/FIRST RESPONDERS, HEALTHCARE PROVIDERS,
MENTAL HEALTH PROVIDERS, SCHOOL PERSONNEL, DHHS
WORKERS, SEASONAL EMPLOYERS OF YOUTH, SCHOOL SUPPORT
STAFF, PEER RECOVERY COACHES, ATHLETIC COACHES, CHURCH
YOUTH GROUP LEADERS, FOSTER PARENTS, GRANDPARENTS.
FMI - WWW.C3PH.ORG/INITIATIVES/YOUTH-SUICIDE-PREVENTION





PTSD and Secondary Trauma

Objectives

- To learn what they are
- To learn what impact they have
- To learn how to recognize signs
- To learn how to support and provide resources

When:

December 19th, 2024 1100- 1300 Hours

Location: Hybrid

Zoom



or

Tamworth Visiting Nurses

86 Main St., Tamworth, NH (behind town hall)

Register here:



https://forms.gle/fr6UqrzPMAHA3Gvq7

Light snacks and drinks available!!



Appropriate for general public, organizations that provide services, service members, veterans, and their families, school staff, and first responders.

Dr. Maisley Jones and Justin Moeling LICSW

Manchester VA



For more information: jennifer.thomas@graniteuw.org or 603.515.6544



(603) 650-4741

Provider-to-provider child psychiatry support

Dartmouth Health Children's. Consults are available to primary care providers that care for children NH MCAP is your connection to provider-to-provider support from the Child Psychiatry team at and adolescents in NH and are provided by phone, during regular business hours.

HOW IT WORKS



PCP needs support managing a pediatric behavioral health concern

Support needs may
be patient-specific or more
general and include diagnosis,
medication, and other
treatment options.



PCP or support staff
call the Access Line at
(603) 650-4741 to schedule
a provider to provider
phone consultation

Be prepared to provide patient



Child & Adolescent
Psychiatrist returns call
at scheduled time to
complete consult

Most consults are scheduled within 1-3 business days and last about 15 minutes. PCPs can bill for time spent preparing and completing the consult.

demographic data, a direct line to

the PCP (back office or cell), and

scheduling availability.



Consult recommendations are e-faxed to PCP

A summary of the consult is sent to include in the patient chart.

















Frequently Asked Questions

Q. What kind of questions can providers call NH MCAP Access Line about?

A. The Dartmouth Health Children's Child and Adolescent Psychiatrist that supports the Access Line can answer mental health questions about assessment, diagnosis, and treatment planning including medication management or other treatments. Examples include questions about specific medication dosing or side effects and help with differential diagnoses or appropriate levels of care.

Q. What's the best way to frame my question?

A. Prior to speaking with the Dartmouth Health Children's Child and Adolescent Psychiatrist we will collect some basic intake data. During the consultation, it is helpful to understand what you are looking for help with and what you have tried so far.

Q. What is the average wait time to speak with a Child and Adolescent Psychiatrist?

A. Most consults are available within 2 days of request, depending on the overall volume of requests.

Q. How long will a call take?

A. The average consultation takes about 15 minutes, but you will get as much consultation as you need.

Q. What if I need a response right away?

A. The NH MCAP Access Line is not a crisis service, but NH does have resources to help! NH Rapid Response Access Point (833-710-6477) is a 24-hour service that can help you and your patient determine next steps which may include phone support, dispatch of a Rapid Response Team, or referral to an Emergency Department. More information can be found here:

**Acute Crisis Care | Children's Behavioral Health Resource Center (nh.gov)

Q. How do I bill for this?

A. Interprofessional telephone/internet Electronic Health Record Consultation code 99452 may be reported by the treating/requesting physician, NP, or PA for 16-30 minutes in a service day preparing for the referral and/or communicating with the consultant.

Q. How does NH MCAP manage patient data?

A. Patient data and recommendations made during the consultation are recorded in Dartmouth Health's secure, HIPAA protected electronic health record and e-faxed to the requesting provider following the consult. All data used by NH MCAP for program evaluation is de-identified.







NH LSW/LSWA LSW and LSW-A Information (click here to download the info sheet)

July 2024 This video can answer many of your questions about LSW and LSW-A

Why tiered licensure?

Billing requirements from insurance providers for licensure	Professional development & career ladder
to provide/receive care	

• LSW covers primarily case management and counseling: Psychotherapy, top signature on treatment plans, differential diagnosis are NOT in the scope of practice for LSW's

LSW (Licensed Social Worker)

Attend and graduate from an accredited BSW program	2 years/100 hours of supervision	
UNH and Plymouth State (St. Anselm College working	ASWB BSW Exam required	
towards this also)		
Supervision agreement on file and approved by Board of	You can sit for the exam once you've been supervised	
Mental Health Practice	for 18 months	
Supervision Agreement in on OPLC website under	You can find the request to sit for the exam on the	
"Education"	OPLC website under "Education"	
Can be someone outside the organization (off-site	Application for the full license at the end of the two	
supervisor)	years	
You will receive your LSW-C (Licensed Social Worker - Conditional) once the supervision agreement is on file		

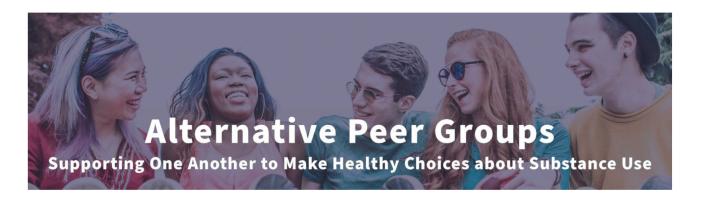
LSWA (Licensed Social Work Associate)

Conditional licenses can only be renewed once

For people who have attended a program other than a BSW (AA, BA, BS) with courses in human services	You will receive your LSWA-C (Licensed Social Work Associate - Conditional) once the supervision			
(psychology, addiction, etc.)	agreement is on file			
Supervision agreement on file	ASWB BSW Exam (ASWB might be able to offer			
	an associate's exam, stay tuned)			
Supervision Agreement in on OPLC website under	You can sit for the exam once you've been supervised			
"Education"	for 18 months			
Can be someone outside the organization (off-site	You can find the request to sit for the exam on the			
supervisor)	OPLC website under "Education"			
If Bachelors (BA/BS degree): 2 years/100 supervision hours	Bachelor's degree - 4000 hours of work, no fewer			
(from an LICSW, LCMHC, LMFT)	than 2 years			
If Associates (AA) degree: 3 years/150 supervision hours	Associate's degree - 6000 hours of work, no fewer			
(from an LICSW, LCMHC, LMFT)	than 3 years			
Sometime between when your supervision agreement is on fi	le and when you complete the required supervision			
hours, you will need to complete a 30-hour training (prior to full licensure)				
What if I've been practicing for 10 years and have already have supervision but no supervision agreement on file?				
Submit a request to the Board for a waiver				
If you are in between your MSW and LICSW with a supervision agreement on file, you will have your LICSW-C				
(Conditional)				
_	·			

You can find the rules, application, and supervision agreement information on the NH Board of Mental Health Practice website. https://www.oplc.nh.gov/board-mental-health-practice

You can find the application here. On the top of the form where it says "Profession for which application is being filed" you will put "Conditional Social Work License". Some parts of this application will not apply to you and you can leave those parts blank.



What Are Alternative Peer Groups?

Creating Connections NH is building supportive recovery communities called Alternative Peer Groups (APGs) for youth and young adults with substance use challenges. APGs offer young people a chance to connect at least once a week with peers in an environment that is fun, safe, substance-free, and recovery-focused.

APGs Provide...

- Connection through a supportive peer environment
- Fun, substance free activities
- Sense of belonging
- Focus on health and wellness

More Than Just Meeting Up

- APG Facilitators are trained recovery support professionals
- Youth help choose fun group activities that match their interests
- Opportunities for family/ caregiver involvement

Connect with a Group Near You

Southern NH

Revive Recovery (Nashua) reviverecovery.org | 888.317.8312

Seacoast Area

Safe Harbor Recovery Center (Portsmouth) granitepathwaysnh.org | ph. 603.570.9444

Live Free Recovery (Dover, Somersworth) livefreerecovery.com | ph. 603.702.2461

Franklin/ Tilton/ Concord/ Plymouth Archways of Greater Franklin and Plymouth archwaysnh.com | ph. 603.286.4255

Carroll County

Kingswood Youth Center (Carroll Cty. South) zachary.porter@thekyc.org | ph. 603.569.5949

Terra Equine Center (Carroll County North) ph. 603.487.6745





☑ IOD.CBH@unh.edu

iod.unh.edu/creating-connections-nh

Creating Connections NH is a project of the UNH Institute on Disability (IOD).

The IOD promotes full access, equal opportunities, and participation for all persons by strengthening communities and advancing policy and systems change, promising practices, education, and research. Supported by funding from the NH Department of Health and Human Services.





Veterans Food Assistance Program



What?

Starting October 1st DVNF will be offering a one-time grant per veteran household to support their nutritional needs.

How to Apply

We have an online application that will need to be completed by the Veteran. The application can be found at https://www.grantinterface.com/ sl/dl4NjA. The link will be open starting October 1st, 2024.

Veteran Qualifications

- Must have a DD214 or Veteran ID
- Was discharged or released under conditions other than dishonorable
- A letter of reference from a case worker or advocate may make the application more favorable.

Other Details

- · This is not a monthly grant.
- The groceries will be delivered directly to the Veteran using Walmart or grocery store delivery service.
- Veterans can receive up to \$450 worth of groceries



For more information, please contact us: (202) 737-0522 - info@dvnf.org www.dvnf.org

HELP CREATE A SAFER COMMUNITY LEARN ABOUT THE OPIOID EPIDEMIC

FREE ONLINE MODULE

Opioid Use Disorder
Education
Overdose Response
Resources
for rural
New England

Free online training on how to recognize and respond to an overdose



Option to receive free naloxone (Narcan) nasal spray by mail



Invitation to complete an anonymous 5-minute research survey







This research has been approved By The University of Rhode Island Institutional Review Board



This project was supported by the Substance Abuse and Mental Health Services Administration of the National Institutes of Health under award number 1H79Tl085612-01. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the NIH.

Working together to create a regional transportation network for everyone.

About Carroll County Regional Coordination Council

The Carroll County Regional Coordination Council, or CCRCC, is a group of transportation and human service providers, municipal officials, businesses, and citizens who seek to develop diverse transportation options to serve the needs of residents of all ages and abilities in the Carroll County region.

Service Area

Ossipee, Effingham, Tamworth, Madison, Tuftonboro, Albany, Conway, Bartlett, Moultonborough, Freedom, Wolfeboro, Hart's Location, Sandwich, Eaton, Chatham, Jackson, Hale's Location

The Role of the Carroll County RCC is to:

- Guide the development and coordination of community transportation services and information within the CCRCC area,
- Collaborate with and support regional transportation coordinators and/or mobility managers in the delivery of community transportation services,
- Advise community officials, philanthropic organizations, business leaders, and institutional leaders of the need for a coordinated approach to community transportation services,
- Monitor the implementation of a regional system of coordinated transportation services that provide all citizens access to services within the region and surrounding areas,
- Seek out additional public and private funding sources to support mobility management and transportation coordination efforts,
- Communicate with the State Coordinating Council for Community Transportation (SCC) on existing and future policies affecting community transportation services, and
- Assist in the selection and guidance of a regional Mobility Manager who will be responsible for increasing coordination of services and improving the quality of services available within the region.

Mobility Manager

Scott Boisvert
Mobility Manager, Region 2
(Carroll County)

Phone: (603) 723-4318 Email: sboisvert@tccap.org

FMI

https://keepnhmoving.com/

and

Carroll County Transportation
Guide 2021

Carroll County (Region 2)
Transportation

Members

- Carroll County Coalition for Public Health
- North Country Council
- MWV Economic Council
- Adult Day Center
- The Gibson Center for Senior Services
- CCRVSP

- Tri-County CAP
 Carroll County Adult

 Education
- Maine Health
- Ossipee Concerned Citizens
- White Horse Recovery
- NH Community CareGivers
- Interlakes Community CareGivers

WHAT IS CARROLL COUNTY'S

2021 YRBS

TELLING US?

CARROLL COUNTY COALITION EPUBLIC HEALTH



Most Carroll County youth
DO NOT use alcohol or tobacco

In the past 30 days...

85%

of students **did not** binge drink **85%**

of students **did not** use marijuana

72%

of students have **never used** an electronic vapor product

Most Carroll County youth DO NOT take illicit drugs

97%

of students have **never** used ecstasy

90%

of students have **never** taken prescription pain medication without a doctor's prescription

What increases students' chances of substance use?

Students who reported...

Ease of Access

...higher perceived ease of obtaining marijuana had up to 13 times greater likelihood of more frequent marijuana use in the past 30 days.

...higher perceived ease of obtaining prescription drugs without a prescription had up to 40.35 times greater likelihood of ever having used ecstasy.

Violent Relationships

...being forced by a dating partner to engage in unwanted sexual activities one or more times in the past 12 months are 22.2 times more likely to have vaped in the past 30 days.

...experiencing more instances of physical harm from a parent or other adult at home had up to 12 times higher likelihood of using a prescription drug without a prescription in the past 30 days.

Poor Mental Health

...more frequent days of poor mental health are associated with up to 7.2 times higher likelihood of using prescription pain medicine without a prescription or contrary to a doctor's instructions.

...missing more days of school due to feeling unsafe are up to 31 times more likely to have ever used ecstasy.

How do schools and communities use YRBS data?

- + School guidance counselors and principals use YRBS data during back-to-school nights.
- + School districts use YRBS data to develop appropriate educational health initiatives and establish curriculum objectives.
- + Teachers use YRBS data to teach students data interpretation and critical thinking by analyzing trends, comparing years, and evaluating intervention effectiveness.
- + Health education teachers use YRBS data to discuss current health issues facing youth and to compare current levels of healthy and unhealthy behaviors.
- + Schools and communities can use YRBS data to develop and strengthen health promotion and disease prevention programs and access funding for grants.

What is the Youth Risk Behavior Survey?

The Youth Risk Behavior Survey (YRBS) asks students about risky behaviors and those behaviors that keep them safe. YRBS data is used to enhance state and local grant applications, develop more effective youth prevention programs, and offer a consistent long-term tool for measuring progress in reducing youth health risk behaviors.



For more resources, go here











What is the Youth Risk Behavior Survey?

The Youth Risk Behavior Survey (YRBS) asks students about risky behaviors and those behaviors that keep them safe. Data from the YRBS helps pinpoint health issues that are common among students so that schools and communities can create programs to help students make safer and healthier choices.



YRBS data is **completely anonymous**; it isn't linked to individual students or classes. The data from the YRBS is analyzed to understand patterns and trends in behavior over time. The data doesn't point out causes, but it does help schools understand links between conditions in students' lives and the behaviors they engage in.



CARROLL COUNTY COALITION

EPUBLIC HEALTH

Protective Factors

Protective factors are traits or conditions that make positive outcomes more likely or lessen the impact of risk factors. Things like sleeping at home most nights, feeling safe going to and from school, and having friends who disapprove of smoking are all protective factors. For Carrol County youth, an important protective factor was being able to talk to a caring adult about their feelings.

Students who reported increased levels of being able to talk to an adult in their family or to another caring adult about their feelings have up to . . .

... 2.7 times reduced odds of having poor mental health most of the time during the past 30 days.

... 12.6 times greater odds of getting the help they need when they feel sad, hopeless, angry, or anxious. ... 5.1 times greater odds of reporting not getting sad, hopeless, angry, or anxious.

... 4.2 times reduced odds of having made a plan about how they would attempt suicide during the past 12 months, compared to students who never had a caring adult to talk to about their feelings.

... up to 5.1 times reduced odds of having seriously considered attempting suicide during the past 12 months, compared with students who reported never having a caring adult to talk to about their feelings.

Risk Factors

Think of risk factors as stumbling blocks on the way to positive outcomes. YRBS data shows us that some of the strongest risk factors Carroll County youth face are at home.

Students who reported increased lifetime instances of parents or other adults in their homes slapping, hitting, kicking, punching, or beating each other up have up to 55.6 times greater odds of ever using ecstasy.

Students who usually slept away from home during the past 30 days have 29.7 times greater odds of having had a suicide attempt during the past 12 months that resulted in treatment by a doctor.

How To Be a Caring Adult

Having a caring adult to whom they can talk is a powerful protective factor for Carroll County youth. Being a caring adult who reaches out and shows support is a simple way to help teens and the whole community thrive.

Here are five critical aspects of a caring relationship that can support youth:

- 1. Showing students you care about them.
- 2. Challenging students to become their best selves.
- 3. Providing ongoing support.
- 4. Sharing power and showing respect.
- 5. Expanding their sense of possibilities and opportunities.



Teens who have stronger relationships with non-family adults (e.g., through involvement in volunteer work, youth programs, religious organizations) have higher levels of positive support, engage in less risky behavior, and have increased levels of overall well-being.

SOURCE: Scales, P., Benson, P., & Mannes, M. (2006). The contribution to adolescent well-being by nonfamily adults: An examination of developmental assets as contexts and processes. *Journal of Community Psychology*. 34:401-413. 10. 1002/jcop.20106.

How Adults Can Support Youth



SOURCE: The Search Institute. Developmental Relationships: The Framework. https://d2pck61xhq74q6. cloudfront.net/Resources-Hub/Beyond-the-Classroom/DevRelationships_framework_english-1.pdf

Being Electronically

Sleeping Away from Home

Ran Away, **Abandoned**







For more resources, go here





NALOXBOX Indoor Overdose Rescue Station

What were the circumstances surrounding overdose deaths in 2022, New Hampshire?



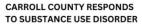
Opportunity for Change

Potential opportunities for intervention include linkage to care or life-saving actions at the time of the overdose

- 73.4% of drug overdose deaths had at least one potential opportunity for intervention
- 60.6% potential bystander present

*https://www.cdc.gov/drugoverdose/fatal/dashboard/index.html





fmi: continuum@c3ph.org





Mission

To improve the capacity of bystander rescuers to save the lives of victims of opioid overdose with overdose response tools, including naloxone.

Benefits



- Increase access to publicly available overdose response tools
- Provide technical assistance for naloxone storage
- Improve the capacity of bystander rescuers
- Reduce stigma associated with substance use disorders
- Reduce morbidity and mortality from opioid overdose

COMMUNITY-BASED SOLUTION TO A NATIONWIDE EPIDEMIC

"Opioid overdose can quickly lead to death if no intervention is made. If we begin to treat opioid overdose like any other bystander enabled medical response, we will begin to reduce the stigma often associated with opioid overdose."

NaloxBox units are installed in many public-facing spaces including city and state offices, libraries, universities, public housing authorities, recovery centers, and more.

FOSTER PARENT SUPPORT GROUP

Join us for an in person or virtual support group for foster and adoptive parents. Discuss with others who have similar circumstances, learn about community resources and build connections.



THIRD MONDAY OF EACH MONTH

IN PERSON @ POPE MEMORIAL LIBRARY, NORTH CONWAY 10:15am-11:15am

VIRTUAL VIA ZOOM 6:00pm-7:00pm

PLEASE CALL/TEXT OR EMAIL FOR LINK!



SAMANTHA JONES 603.651.7480

SJONES@CHILDRENUNLIMITEDINC.ORG

JACKIE DIFONZO 603.960.2942 JDIFONZO@CHILDRENUNLIMITEDINC.ORG

REGISTER NOW





ARE YOU HELPING TO RAISE A CHILD THAT IS NOT BIOLGOICALLY YOURS? ARE YOU INTERESTED IN LEARNING ABOUT RESOURCES IN YOUR COMMUNITY AND MAKE CONNECTIONS? JOIN A KINSHIP SUPPORT GROUP TODAY!

In Person Support Groups:

3rd Tuesday of each month at Conway Public Library 9:15am-10:15am

3rd Wednesday of each month at First Congregational Church of Ossipee 1:30pm-2:30pm

Virtual Support Group:

3rd Thursday of each month via zoom 6:00pm-7:00pm Email sjones@childrenunlimitedinc.org for link

FOR MORE INFORMATION PLEASE CONTACT

JACKIE DIFONZO: JDIFONZO @ CHILDRENUNLIMITEDINC.ORG

SAMANTHA JONES: SJONES @ CHILDRENUNLIMITEDINC.ORG

CHILDREN UNLIMITED

Anti-Oppressive Practices in Behavioral Health for Children, Adolescents, and Youth ECHO

Series Topics:

- Overview of power, privilege, and oppression
- Power dynamics within practice
- Beyond stereotypes: deepening understanding of personal and cultural diversity

And more!

Audience:

Social workers, occupational therapists, nurses, clinical supervisors, students, and all behavioral health professionals



Tuesdays 12:30pm - 1:30pm via Zoom

October 29th
November 12th
December 3rd
February 11th
March 11th
April 8th

Register Here

Questions?

Please contact: Cait.mcallister@unh.edu







Upcoming Trainingsnewfutures>>>

WINTER 2024-25



ADVOCACY 101 WEBINARS

Wednesday, December 18 | 12:00 - 1:00 PM Thursday, January 16 | 4:00 - 5:00 PM Tuesday, February 18 | 12:00 - 1:00 PM

Join us for an overview of the NH state legislature and how a bill becomes a law, and learn when and how to get involved by participating in public hearings, reaching out to legislators, and using other advocacy strategies.



ADVOCACY 101 FULL DAY TRAININGS

Wednesday, January 29 | 9:00 AM - 4:00 PM Friday, March 7 | 9:00 AM - 4:00 PM

Join us for a full-day session in our office in Concord! Our in-person Advocacy 101 trainings provide an indepth look into the NH state legislature and how a bill becomes a law followed by a tour of the state house! The day also includes a session on the power of a personal story and working sessions where you craft your advocacy message. Lunch is provided!



ALL ABOUT THE STATE BUDGET

Friday, February 7 | 1:30 PM - 2:30 PM

This one-hour webinar will provide an overview of the budget process in New Hampshire and when to advocate for policies that you care about.



New Futures trainings are offered at no cost.

Register at new-futures.org/trainings

