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December 2018

Hon. Derek Schmidt
Kansas Attorney General
120 SW 10th Ave., 2nd Fl.
Topeka, KS 66612

Dr. Walter Menninger, Chair
Tower Foundation
120 SW 10th Ave., 2nd Fl.
Topeka, KS 66612

Dear Attorney General Schmidt and Dr. Menninger:

We first want to say thanks for allowing us to serve on this important Task Force to study the issue of youth suicide prevention in Kansas. We have taken your charge seriously and visited with a variety of people from Kansas and across the nation who have an interest in and experience with this topic. Obviously, during the six months that we had to respond to your request, we have not been able to visit with everyone who might be able to contribute to our knowledge of the issue, but we have visited with a large cross section of people in our seven sessions.

We hope you will find this report helpful in getting a sense of what is currently being done to address the issue and providing some recommendations on what we believe would be useful to pursue to enhance efforts to eliminate youth suicide in Kansas. The report includes a summary of what we learned at each session and a list of all presenters and others who addressed the Task Force. It also includes copies of written testimony that was received.

All of us on the Task Force have come to more fully understand how timely and difficult a topic this is to address. Therefore, we are hopeful this report will serve as a call to further study and action which will increase the likelihood of eliminating youth suicide in Kansas.

On behalf of the Task Force, we sincerely appreciate your interest and leadership on this issue.

Respectfully Submitted,

Jennifer Schmidt, Co-chair

Andy Tompkins, Co-chair
Task Force Members

Prof. Jennifer Schmidt (co-chair), Clinical Associate Professor of Law, University of Kansas

Dr. Andy Tompkins (co-chair), Retired Educator

Senator Molly Baumgardner, Chair, Senate Education Committee

Deputy Randy Combs, Kearny County Deputy Sheriff, and Past President, Kansas Juvenile Officers Assn.

Dr. Leo Herrman, Associate Professor of Psychology, Ft. Hays State University

Representative Russ Jennings, Chair, House Corrections and Juvenile Justice Committee

Kathryn Mosher, MS; MBA, Executive Director, Central Kansas Mental Health Center

Dorthy Stucky Halley, LMSW, Director of Victims Services, Office of the Attorney General

Dr. Randy Watson, Commissioner of Education

OFFICE OF THE ATTORNEY GENERAL STAFF SUPPORT

Jane Weiler, Assistant Attorney General

Crystal Moe, Administrative Operations Director

Sara Hortenstine, Executive Director, State Child Death Review Board
Executive Summary

In late spring of 2018, Attorney General Derek Schmidt, in response to an increasing youth suicide rate and in cooperation with the Tower Mental Health Foundation, created the Youth Suicide Prevention Task Force. The Attorney General gave the Task Force three charges:

1. Survey ongoing local and state efforts to combat youth suicide through the state of Kansas.
2. Review the Safe2Tell phone application and similar methods aimed at increasing communication with youth needing assistance and effective reporting of stressors on young people.
3. Make recommendations for changes in practice, policy or law aimed at preventing youth suicide in Kansas.

The Task Force held its first meeting in Topeka on June 29, 2018, and agreed to hold monthly meetings in locations throughout the state. These included Salina, Iola, Wichita, Overland Park, and Dodge City with a final meeting held in Topeka in December. The Task Force heard presentations from individuals and groups working on this issue in Kansas and in other parts of the United States. A summary of these meetings, a listing of those who either made a presentation or submitted testimony, and a link to the materials presented to the Task Force is included in this report.

The Task Force learned that Kansas students, parents, professionals, and interested parties are working hard to address this issue. It also accumulated a wealth of information not only about what was being done in Kansas, but also efforts in other states to address this concern. It became clear to the Task Force that youth suicide is a major state public health issue that needs a more thorough response. Therefore, the recommendations of the Task Force are aimed at a more comprehensive approach to the issue of youth suicide prevention.

A summary of the Task Force recommendations is as follows:

1. The state should set zero youth suicides as an aspirational goal.
2. The state needs to continue efforts to identify and publish local and state efforts and contacts to promote coordination and communication.
3. The development of an app as a communication tool for youth has promise as long as it fully staffed with licensed mental health providers linked to law enforcement, available for students transitioning to post-secondary education, multi-dimensional, and actively promoted in school and communities.
4. The state should gather accurate and complete data on the prevalence of anxiety, depression, and suicide ideation among youth in Kansas.
5. Communication and collaboration and sharing of data across various parties involved in addressing this issue needs to be improved.
6. Access to mental health services needs to be improved to include increased availability and shorter wait times for accessing mental health services, increased access to psychiatrists especially in rural areas, increased inpatient youth psychiatric hospital beds, increased availability of mental health professionals in schools throughout Kansas, and the offering of scholarships to students in higher education to become licensed mental health providers who will work in rural areas.
7. Integrate and support youth suicide prevention in the schools by making students aware of available resources, encouraging youth-driven suicide prevention groups, and offering evidence based youth suicide prevention training such as the Applied Suicide Intervention Skills and Training (ASIST) to parents.
8. Create a full-time position in the Attorney General’s office to be the Kansas Youth Suicide Prevention Coordinator, and a volunteer advisory board in order to help create and support youth-driven suicide awareness and prevention efforts, lead the development and implementation of an app for Kansas, work to improve collaboration and communication efforts, organize a summit to raise awareness and to engage students in addressing this issue, and to spearhead other efforts included in this report.

The Youth Suicide Prevention Task Force believes that these recommendations represent some good first steps to help Kansas pursue its goal of eliminating youth suicides.
In Spring 2018, the Tower Mental Health Foundation and Attorney General Derek Schmidt created the Youth Suicide Prevention Task Force (YSPTF) in response to rising numbers of Kansas youth attempting and dying by suicide. The number of suicides by Kansans 18 years of age and younger more than doubled in the decade between 2005 and 2015.\(^1\)

This increase coincides with an alarming increase of death by suicide across all age groups. Kansas is fifth in the nation in the rise of its per capita rate of death by suicide over the last 17 years.\(^2\) Death by suicide increased 45 percent in Kansas over that time period, compared with the national average increase of 25.4 percent.

The rate of suicide deaths among Kansas youth continues to climb despite a decline in the overall rate of child deaths in this state. In 2016, the Kansas Death Review Board reported that 20 Kansas youth died by suicide, seven of who were age 14 or younger.\(^3\) Their Board report went on to recommend that Kansans would be better equipped to understand and prevent youth suicides if we better understand the precipitating events leading to them.

The Kansas Child Death Review Board report was a driving force in the creation of this Task Force. Specifically, this Task Force was charged to:

1. Survey ongoing local and state efforts to combat youth suicide through the state of Kansas;
2. Review the Safe2Tell phone application and similar methods aimed at increasing communication with youth needing assistance and effective reporting of stressors on young people;
3. Make recommendations for changes in practice, policy or law aimed at preventing Youth suicide in Kansas.

This Task Force took its charge seriously. We traveled throughout the state and heard from a wide range of people affected by youth suicide and working in youth suicide prevention and response. We learned from local school counselors, principles, coaches, ministers, and so many others working tirelessly in their communities. We learned from foundations, associations, and federal and state government entities working to prevent youth suicide. We learned from other states, a social app company, and a national social media company. Most importantly, we heard from parents who had lost a child, and from students working to help their classmates.

This Task Force is unique. None of the members work exclusively in youth suicide prevention. Rather, this Task Force

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2 Suicide rising across the US, More than a mental health concern. CDC's National Vital Statistics System; CDC Vital Signs, June 2018.
was designed to bring diverse specialties and specialists to the table. It was also designed to be finite. The hope is that these recommendations will contribute to eliminating youth suicide in Kansas, create and invigorate work on this issue, supplement work already being done, bring diverse interests together to work for this cause, and help childhood to be a positive time for all Kansas youth.

Taking to heart the words of Dr. Karl A. Menninger, “Hope is a necessity for normal life and the major weapon against the suicide impulse,” this Task Force encourages the State of Kansas to take prompt action to ensure all Kansas children have this hope.
Survey ongoing local and state efforts to combat youth suicide through the State of Kansas.

The Task Force received testimony in person and in writing describing efforts to combat youth suicide. Written testimony was submitted in person at our field hearings and by email and online submission to AG staff assisting the Task Force. The Task Force conducted seven field hearings across the state and encouraged the public to attend and share their testimony and recommendations to the Task Force. The following is a summary of the testimony heard at each of the seven field hearings. Comprehensive information regarding the field hearings and written testimony is provided in Appendix A.

TESTIMONY PROVIDED AT FIELD HEARINGS

Topeka

At the initial meeting held in Topeka on June 29, 2018, Sara Hortenstine, Executive Director of the State Child Death Review Board, shared data from recent annual reports regarding youth suicide in Kansas. Daina Zolck with the Kansas Department of Health and Environment’s Violent Death Reporting System spoke about data that is available in Kansas and through KDHE. The Task Force also heard from Kimi Gardner, the State Suicide Prevention Coordinator, and Kent Reed, the School Climate/Culture and Integration Specialist from the Kansas Department of Education. Lauren Mendoza from the Kansas Legislature Research Department briefed the Task Force on recent legislation that has been adopted and considered.

Salina

The second meeting was held in Salina on July 19, 2018. Presenters included Crystal Moe from the Kansas Attorney General’s office who spoke about what other states are doing to enhance ways for students to communicate concerns about themselves or others anonymously. Joe and Mary Beth Karlin spoke about the work of the Tom Karlin Foundation to improve the quality of teens’ lives and reduce teen suicides through education and awareness of depression, suicide prevention and mental wellness. They do so by being teen-led, and teen-focused and by involving teens in all aspects of planning, execution and messaging. Monica Kurz, the Director of the Kansas Suicide Prevention Resource Center, spoke to the work of Kansas’ Headquarters as well as the ASIST training program. The Resource Center offers extensive training, resources, data, guidelines, toolkits, materials and information about local suicide coalitions.

Iola

The third meeting was held in Iola on August 31, 2018. Presenters included Lisa Chaney from Greenbush – The Southeast Kansas Education Service Center who shared information about the Communities that Care Survey administered to Kansas children each year. Chris Maxwell from the American Association of Suicidology presented about their work to promote the understanding and prevention of suicide and support for those who have been affected by it. Dr. Judy Hughey from the Kansas School Counselor Association and the Kansas Association for Counselor Education and Supervision presented about delivering comprehensive school counseling programs that promote student achievement. Andy Martin from the National Alliance on Mental Illness (NAMI) Kansas shared the ways that this state-wide organization provides leadership and works in partnership with local affiliates to ensure peer support, advocacy, and education.

Wichita

The fourth meeting was held in Wichita on September 25, 2018. The Task Force heard from Antigone Davis, the Director and Global Head of Safety for Facebook, who spoke about the resources that Facebook offers on their platform for both someone in crisis as well as a friend of someone who may see a concerning post. She discussed their efforts globally
working with experts in the field to provide culturally-appropriate, as well as timely, responses to risks. Kimberly Nelson, Regional Administrator (Region VII), for the Substance Abuse and Mental Health Services Administration (SAMHSA), shared information on grant funding and support provided by this organization to states and communities wanting to also reduce the impact of substance abuse and mental illness in communities. Andy Brown, the Prevention Program Manager at the Kansas Department for Aging and Disability Services, discussed the links between substance abuse and suicide rates and advocated for more statewide sustained funding. Chad Childs with the Governor’s Behavioral Health Services Planning Council, Prevention Subcommittee, explained that the Prevention Subcommittee was established in an effort to strengthen collaboration and partnership opportunities, ensure alignment of processes and outcomes, and to increase the effectiveness of state and local efforts to address prevention issues. The Prevention Subcommittee serves as the Advisory Council for Kansas Behavioral Health Prevention Initiatives, and Mr. Childs shared some the recommendations being made by the subcommittee in their upcoming report. The Task Force also heard testimony from Jason Miller, Jessica Provines and Terry Miller, people directly affected by suicide.

**Johnson County**

The fifth meeting was held in Johnson County on October 18, 2018. The Task Force heard from Clark Flatt, the President of The Jason Foundation, Inc. regarding prevention efforts at a national level and through his foundation. Superintendents and students from the Johnson County School districts presented a panel to discuss the challenges and successes they have seen in their school district related to youth suicide and accessibility to services. Video footage and campaign materials created by students were shared by Steff Hedenkamp and Shane Brethowr from the #ZeroReasonsWhy campaign. The Task Force also heard from Rennie Shuler-McKinney with the Shawnee Mission Medical Center, Jennifer Savner Levinson with SPEAK UP-Suicide Prevention Education Awareness for Kids United as Partners, Karen Mulligan, Manager of the School Based Social Worker collaboration through Children’s Mercy Kansas City as well as a presentation from Joe Kordalski from the Johnson County Suicide Prevention Coalition.

**Dodge City**

The sixth meeting was held in Dodge City on November 9, 2018. The Task Force heard from Utah State Rep. Steve Eliason regarding efforts and successes through legislation and policy aimed to address youth suicide prevention including options for reporting tools. Kearny County Hospital CEO Benjamin Anderson presented on his experiences with youth suicides from a hospital perspective while Joshua Tanguay, an instructor at Fort Hays State University presented on the PREPaRE School Crisis Prevention and Intervention Training Curriculum. Lakin USD 215 school administrators, Cody Calkins (Principal) and Mike Beitz (Counselor), gave a joint presentation regarding their concerns and recommendations from an educator’s perspective in western Kansas. The Task Force also heard from Richard Falcon who is a representative with the International Yellow Ribbon organization, followed by a presentation from Greg Valdez, who serves on the Yellow Ribbon International Teen Board. Students from the Dodge City High School, Talk, Acknowledge, Listen and Care (TALC) program spoke about their efforts to address and support students in following multiple student deaths by suicide. Melanie Scott, Dodge City High School Counselor and Ford County Suicide Prevention Coalition member, provided testimony as well as Youth Pastor Josh Smith, Kathy Busch, Kansas State Board of Education member and Chair of the School Mental Health Advisory Council, and Steve Birdsall, CEO with Capsol, LLC.

**Topeka**

The seventh meeting was held in Topeka on December 10, 2018. The Task Force heard from the Rock Creek Yellow Ribbon Student Organization regarding their efforts and successes with peer-led school initiatives. The Task Force discussed recommendations to be included in the final report.
Review the Safe2Tell phone application and similar methods aimed at increasing communication with youth needing assistance and effective reporting of stressors on young people.

The Task Force heard testimony from several sources regarding Internet and mobile applications (apps) aimed at providing youth a resource for submitting tips and reaching out for help. Conferees, including Crystal Moe, Utah State Rep. Steve Eliason, Joe Karlin from the Tom Karlin Foundation, and Steve Birdsall from Capsol, LLC, provided testimony. In addition, students at several field hearings testified that an Internet and mobile app would be a helpful mental health resource and tool for preventing youth suicide. Not all testimony heard was in full support of app use, however the majority of testimony and especially the results seen by states that are using one, were compelling to the Task Force to support the use.

One underlying issue regarding whether an Internet and mobile app for all Kansas youth would be an effective tool for suicide prevention is whether they would use it. According to a 2018 Pew Research Center report, 95 percent of teens report owning a smartphone or having access to one. Additionally, 45 percent report being online “on a near-constant basis.”

Several other states already use mobile apps to reach youth for mental health, suicide prevention, and school safety purposes. Colorado’s Safe2Tell App was the first resource of this kind. It began in the wake of the 1999 Columbine school shooting and was expanded statewide in 2004. Of the more than 16,000 tips submitted to Safe2Tell during the 2017-2018 school year, the most common, 2,786 in total, were suicide threats. Additionally, Utah State Rep. Steve Eliason testified to the Task Force that Utah’s SafeUT App prevented at least 189 students from taking their own lives through “active rescues” resulting from contacts through SafeUT between July 2017 and June 2018.

Other states have followed suit and established crisis and safety tip apps. These states include Wyoming, Michigan, Nevada, Oregon, Kentucky, and Maryland. Further, Congress passed federal legislation addressing such apps, and has authorized grants to help establish them.

For these reasons, the Task Force believes that apps that can be installed on both cellphones and computers have promise in helping to prevent youth suicide in Kansas.

We also believe that while an app has promise, a poorly created or unsupported app will do more harm than good. To this end, we recommend the use of an app that:

- Has an adequate number of licensed social workers available to immediately respond all hours or all days;
- Has a system to immediately refer any threat tips to law enforcement;
- Reaches statewide so that youth who move within Kansas or transition to attend a tech school, junior college, or university will have continuity and ease of use during these sometimes difficult transitions;
- Is created with the input of Kansas youth so that it is multi-dimensional and has aspects in addition to reaching out for help, such as mental health tips of the day, etc. that keep it fresh and increase the likelihood that youth in crisis will reach out through it when needed; and
- Is actively and consistently promoted in schools and communities.

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5 Id.
Charge III

Make recommendations for changes in practice, policy or law aimed at preventing youth suicide in Kansas.

We find that youth suicide has reached epidemic proportions in Kansas. According to the 2018 Kansas Communities That Care survey, in the last year 29 percent of students reported depression symptoms\(^8\), 18 percent considered suicide\(^9\), 12 percent went so far as to make a suicide plan\(^10\), and five percent reported attempting suicide.\(^11\)

Therefore, our additional recommendations are, as follows:

1. **Set zero youth suicides as an aspirational goal for the state.**
   To this end, we encourage every organization, association, facet of government, parent group, professional organization, youth athletic league, and anyone who works with or interacts with youth to consider what it can do to be part of the team effort to reach and maintain the goal of zero youth suicides. This crisis is not caused by one factor, nor can it be solved by one sector. No single entity – government, mental health providers, schools, teachers, students, law enforcement – will solve this problem acting alone.

2. **Gather accurate and complete data.**
   It is vital that youth suicide prevention plans and efforts be based on accurate data. Currently, there is no statistically significant and complete data regarding the suicide risk and mental health of Kansas youth. This dearth of useful data makes it difficult if not impossible to combat the epidemic of youth suicide. A process should be initiated to collect geographically complete, timely, and useful data to assist with prevention of youth suicide at the state, school district, and local levels.

3. **Improve communication.**
   The Task Force heard repeatedly that, though the system is filled with good people making excellent efforts, communication between mental health professionals, schools, and communities is often disjointed and incomplete due to privacy and other concerns. For example, a student who is released from inpatient psychiatric care may be returned to classrooms where teachers are unaware of recent treatment. We urge mental health centers, mental health professionals, schools, coaches, and others who interact with youth to make a concerted effort within the bounds of privacy and other applicable laws to communicate on an ongoing basis to insure that the needs of youth are met concurrently in all sectors of the community.

4. **Improve access to mental health services.**
   The Task Force heard testimony that students who requested mental health services often had dangerously long waits before receiving these services due to the lack of available resources. Specifically, we see a need for:
   a. Increased availability and significantly shorter wait times for access to mental health services;
   b. Increased access to all levels of Licensed Mental Health Professionals, particularly in rural areas to include the appropriate use of telemedicine.
   c. More inpatient youth psychiatric hospital beds. The Task Force heard testimony that the number of available in-patient resources is insufficient in number, availability, and geographical convenience;
   d. Dramatically improve the availability of mental health professionals for schools. The Task Force learned about some excellent efforts and partnerships between mental health centers or hospitals and schools. If the current pilot program effort returns good results, and we expect it will, we believe it should be expanded to reach all students. Mental health centers and schools should be encouraged and incentivized to partner to meet the needs of Kansas students.
   e. Provide scholarship incentives to higher education students to become Kansas Licensed Mental Health Professionals if they commit to practice in community mental health centers, rural areas or schools.

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5. **Integrate and support suicide prevention in our schools.**
   a. We urge each school and school district to undertake an effort to make students aware of specific youth suicide prevention resources, mental health resources, and crisis resources;
   b. We urge schools to recognize, encourage, and support youth-driven suicide prevention groups, organizations and efforts;
   c. We further urge each school and school district to undertake youth suicide awareness and prevention parent education.

6. **Create a 1.0 FTE position of Kansas Youth Suicide Prevention Coordinator, to be located in the Office of the Attorney General.** This position should be supported by a volunteer advisory board comprised of experts and stakeholders, also appointed by the Attorney General. The Kansas Youth Suicide Prevention Coordinator should:
   a. Help create and support youth-driven suicide awareness and prevention efforts;
   b. Lead the development, implementation, and marketing of an Internet and mobile app, as discussed in Charge II of this report;
   c. Develop and promote multi-disciplinary and interagency strategies such as ASIST training to help community leaders, schools, community mental health centers and practitioners, law enforcement, hospitals, clergy, coaches, and others to work together and combine efforts to prevent and address youth suicide in their communities;
   d. Organize an annual summit that brings youth, educators and community members from across the state together to seek input from, as well as train them to prevent and address youth suicide in their communities;
   e. Spearhead and advocate for the recommended efforts in this report; and,
   f. Disseminate and promote best practices, data driven information and services from other recognized national and regional organizations, institutions and agencies focused on suicide reduction, and continue to identify and publish local and state efforts and contacts to promote coordination and communication.
Appendix A

WRITTEN TESTIMONY PRESENTED IN-PERSON AT HEARINGS

Documents listed in the appendicies are available online at www.ag.ks.gov/ysptf.

Topeka, June 29, 2018

Hearing Summary
Kansas State Department of Education, Kent Reed
State Child Death Review Board, Sara Hortenstine
Kansas Legislative Research Department, Lauren Mendoza
Kansas Violent Death Reporting System, Daina Zolck

Salina, July 19, 2018

Hearing Summary
Reporting Options for Kansas Kids, Crystal Moe
Tom Karlin Foundation Presentation, Joe and Mary-Beth Karlin
Tom Karlin Foundation Organizational Worksheet
Headquarters Counseling Center
Suicide Prevention Resource Center, Monica Kurz
SuicideTALK
Applied Suicide Intervition Skills Training (ASIST)
Central Kansas Mental Health Center-Kathryn Mosher

Iola, August 31, 2018

Hearing Summary
Greenbush Presentation, Lisa Chenay
Greenbush Organizational Worksheet
Kansas Strategic Prevention Framework State Incentive Grant Final Evaluation Report
Kansas School Counselor Association and Kansas Association of Counselor Education and Supervision Organizational Worksheet
Maps of Communities that Care Survey Results
American Association of Suicidology-Chris Maxwell
American Association of Suicidology Organizational Worksheet
Kansas School Counselor Association and Kansas Association of Counselor Education and Supervision Presentation, Dr. Judy Hughey

National Alliance on Mental Illness Materials, Andy Martin

National Alliance on Mental Illness Organizational Worksheet

Wichita, September 25, 2018

Hearing Summary

Substance Abuse and Mental Health Service Administration Presentation, Kimberly L. Nelson

Substance Abuse and Mental Health Service Administration Resources

Substance Abuse and Mental Health Service Administration Organizational Worksheet

Kansas Department for Aging and Disability Services Presentation, Andy Brown

Governor’s Behavioral Health Services Planning Council Prevention Subcommittee Presentation, Chad Childs

Governor’s Behavioral Health Services Planning Council Prevention Subcommittee Organizational Worksheet

Overland Park, October 18, 2018

Hearing Summary

The Jason Foundation, Inc., Presentation, Clark Flatt

#ZeroReasonsWhy Campaign Organizational Worksheet, Steff Hedenkamp and Shane Brethowr

SpeakUp, Organizational Worksheet and Presentation, Jennifer Savner Levinson

School-Based Social Workers, Children’s Mercy Kansas City, Karen Mulligan

Johnson County Suicide Prevention Coalition Presentation, Joe Kordalski

Johnson County Suicide Prevention Coalition Organizational Worksheet

Dodge City, November 9, 2018

Hearing Summary

SafeUT Presentation- Representative Steve Eliason

Summary of Utah Legislation

PREPaRE, Josh Tanguay Presentation

Rob Boyd, Fort County Fire and EMS Chief Organizational Worksheet

Vulnerability Assessment Handout

Dodge City High School TALC Presentation

Dodge City High School TALC Organizational Worksheet
Melanie Scott, Dodge City High School and Ford County Suicide Prevention Coalition Organizational Worksheet

Kathy Busch, School Mental Health Advisory Council Presentation

Steve Birdsall, Capsol Presentation

Steve Birdsall, Capsol Organizational Worksheet

Topeka, December 10, 2018

Hearing Summary

Rock Creek Yellow Ribbon Presentation

Rock Creek Yellow Ribbon Student Testimony
Biedenbender, Sadie

Cruse, Claudia

Cunningham, Tina

Family Service and Guidance Center

Haswood, Christina

Kessler, Kyle

Keys for Networking, Jane Adams

Klaassen, Hannah (Miss Kansas)

Klaus, Nicole

Perez, Alexandra

Sass–MoKan (Suicide Awareness Survivor Support), Bonnie Swade

Tallman, Norma
Appendix C

RESOURCES PROVIDED TO TASK FORCE

2018 State Child Death Review Board Annual Report

As Safe As Possible

ASIST Trainer Registry

Centers for Disease Control Suicide Mortality Data Brief

Jason Foundation Brochure

Kansas Department of Health and Environment News Release: CDC Report Outlines State Suicide Rates

Kansas Educator Preparation Program Standards for Professional Education

Kansas Prevention Conference Brochure

Mental Health Block Grant Program Information

QPR HopeSquad

State Mortality Supplement – Kansas

Suicide Attempt Prevention

Suicide in Prepubescent Children in the United States

Vital Signs, June 2018

Vital Signs, Trends in State Suicide Rates

Why Are Death Rates Rising in the White Population of Kansas?

Yellow Ribbon Resources