



Cognitive Behavioral Therapy for Suicide Prevention

This intensive two-day module provides training in the assessment and treatment of suicidal ideation and behavior. Participants will receive in-depth training in cognitive-behavioral therapy for suicide prevention and will have the opportunity to practice assessment and intervention strategies. Video demonstrations and participant role-plays will be used in class to practice key assessment and treatment techniques. The module lays the foundation for working with suicidal patients by providing a detailed review of the epidemiology of suicide both in the civilian population and within the military/Veteran community. Participants will be introduced to the Self-Directed Violence Classification System (SDVCS), a nomenclature supported by the DoD/VA for self-directed violence and suicidal behavior. In addition, a review of several theories of suicide will be covered, as well as risk and protective factors for suicidal behavior. The module is designed for behavioral health providers working with Service members and Veterans who are seeking in-depth training in empirically supported treatment options they can immediately incorporate into their clinical practice. The training will provide hands-on practice activities and is geared toward an actively involved audience through discussion and in workshop activities. Participants must attend both days, as the course material is cumulative. Participants must attend using a separate computer rather than joining a group of people viewing via one computer.

Target Audience: For behavioral health providers who treat military personnel, veterans, and their families.

Instructional Level: Intermediate

Learning Objectives:

Following the training, providers will be able to:

1. Differentiate between rates of suicide in civilian and military populations and identify the clinical implications of these differences.
2. Categorize suicidal and non-suicidal thoughts and behaviors in relation to clinical assessment.
3. Communicate several warning signs for suicide that inform decisions about clinical interventions.
4. Apply at least one psychological theory of suicide to the process of clinical assessment and treatment planning.
5. Incorporate suicide risk and protective factors unique to military populations into overall risk assessment for suicide.
6. Scrutinize unique challenges associated with suicide risk assessment and prediction in the clinical setting.
7. Assess risk for suicide in a manner that is sensitive to both proximal and distal risk factors.
8. Collaborate with a patient to complete a safety plan.
9. Use means safety counseling in patient interactions to improve clinical outcomes.



10. Create a timeline of a patient's suicidal crisis for use in treatment.
11. Evaluate key negative thoughts associated with the intent to die by suicide as related to clinical practice.
12. Apply CBT formulation of suicide using the expanded case conceptualization model of the suicidal crisis.
13. Implement cognitive, behavioral, and affective coping strategies utilized in CBT-SP to help patients cope with suicide urges.
14. Characterize the modifications to standard behavioral activation when applied within the CBT-SP protocol.
15. Utilize the guided imagery exercise as part of the relapse prevention protocol for CBT-SP.

Agenda:

Day 1:

0900 – 0930 Introduction & Course Overview

0930 – 0950 Epidemiology of Suicide

0950 – 0930 Nomenclature

0930 – 1100 Risk and Protective Factors

1100 – 1120 Theoretical Underpinnings: Interpersonal Psychological Theory of Suicide Risk – Dr. Thomas Joiner

1120 – 1140 Theoretical Underpinnings: Three-Step Theory of Suicide –

Drs. David Klonsky and Alexis May

1140 – 1155 Break

1155 – 1215 Cognitive Therapy for Suicide Prevention –

Empirical support for CBT

1215 – 1300 Intro to Cognitive Therapy for Suicide Prevention

Theory of CBT

Structure of treatment

Session structure

1300 – 1320 CBT for Suicide Prevention, Early Phase of Treatment – Overview

1320 – 1420 Lunch



1420 – 1455 Fluid Vulnerability Theory

1455 – 1625 CBT for Suicide Prevention, Early Phase of Treatment –

Conducting a suicide risk assessment

Suicide risk continuum

Suicide risk assessment role play

1625 – 1640 Break

1640 – 1710 Narrative Description

1710 – 1745 Constructing a Timeline

1745 – 1800 Questions and Wrap-up

1800 Adjourn

Day Two

0900 – 1000 Nomenclature Homework Review

1000 – 1100 Crisis Intervention

Hospitalization Safety planning

Crisis response plan

Hope Box

1100 – 1115 Break

1115 – 1245 Means Safety Counseling

Means Safety Counseling Role Play

1245 – 1330 Treatment Planning and Cognitive Case Conceptualization

1330 – 1430 Lunch

1430 – 1545 Intermediate Phase of Treatment

Behavioral strategies

Coping strategies

1545 – 1600 Break



1600 – 1645 Intermediate Phase of Treatment Continued

Cognitive strategies

1645 – 1745 Later Phase of Treatment –

Review and consolidation of skills Relapse prevention

Review of goals and treatment planning

1745 – 1800 Questions

1800 Adjourn

Please note that break times are approximate and subject to change.

0900 - 1800 minus 2 hours = 7 hours per day

Wednesday, December 9th, 2020 from 0900 ET- 1800 ET

Thursday, December 10th, 2020 from 0900 ET- 1800 ET

Location Information

This training will be held online via **Zoom Video Communications**.

Wednesday, December 9th, 2020 from 0900 ET - 2000 ET

Thursday, December 10th, 2020 from 0900 ET - 2000 ET

A functioning microphone is MANDATORY to attend, in order to hear the presenters and participate in the role-play sessions. Headphones are HIGHLY RECOMMENDED to reduce audio feedback and echoing effects.

Participate

Registration Information:

Participants are able to find registration information for this training on the CDP website:

<https://deploymentpsych.org/training>. Registration is done through an event management system CE 21.

Direct registration link:

<https://deploymentpsych.ce21.com/item/cognitive-behavioral-therapy-suicide-prevention-cbtsp-zoom-66204>



Cost/Refunds: Price: \$45

Registration fees will be refunded to participants who send a written cancellation via email to aric.bowie.ctr@ushuhs.edu, or christopher.adams.ctr@usuhs.edu. If cancelled by November 25th, 2020, registrants can receive a full refund. If cancelled by December 2nd, 2020, registrants can receive a partial refund for \$22.50. Refunds will not be available for cancellations after 5:00 PM EST, December 2nd, 2020. Attendees who do not attend any of the four scheduled open houses will not be available for refunds.

Special Accommodations:

If you require special accommodations due to a disability, please contact Aric Bowie (aric.bowie.ctr@usuhs.edu) 4 weeks prior to the training so that we may provide you with appropriate service.

Presenters

Lisa French, Psy.D., is the Chief of Staff at the Center for Deployment Psychology (CDP) at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. She joined the CDP in 2011 as a deployment behavioral health psychologist at Wilford Hall Ambulatory Surgical Center. Prior to joining the CDP, Dr. French served on active duty as a psychologist in the United States Air Force (USAF) from 2002-2011. In 2006, she deployed to Afghanistan in support of Operation Enduring Freedom.

Dr. French received her bachelor's degree in psychology from Oregon State University and her master's and doctorate degrees in clinical psychology from Pacific University in Forest Grove, Oregon. She is a 2003 graduate of the Wright-Patterson USAF Medical Center Psychology Residency Program.

As a military spouse, Dr. French continues to experience military life daily and has first-hand understanding of the demands of military service on the family. Her professional interests include dissemination and implementation of evidence-based treatment approaches, the impact of military life on the family, and suicide prevention and treatment.

Erin Frick, Psy.D. is a clinical psychologist and Military Behavioral Health Psychologist at the Center for Deployment Psychology (CDP) at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. In this role, she provides EBP trainings, and assists in the development of EBP trainings and research. Dr. Frick graduated with her master's degree in mental health counseling from Purdue University in West Lafayette, IN and her doctorate in Clinical Psychology from Wright State University in Dayton, OH.



She earned her bachelor's degree in psychology from Manchester University (formerly Manchester College) in Indiana.

Dr. Frick first joined CDP in 2014 as an Evidence-Based Psychotherapy (EBP) Champion-Consultant working at Travis AFB in Fairfield, California, where she served as an advocate for evidence-based mental health treatment utilization, provided consultation services, engaged in clinic process improvement, and developed toolkits designed to expand access to and availability of evidence-based psychotherapies. Prior to coming to CDP, she worked as a contract psychologist treating active duty military members at Travis AFB utilizing EBPs to include Cognitive Behavioral Therapy for Depression, Cognitive Behavioral Therapy for Insomnia, Cognitive Processing Therapy, Prolonged Exposure (including the use of Virtual Reality Therapy), and Cognitive Behavioral Couples Therapy for PTSD. Before this, she worked primarily in university counseling and community mental health centers.

Over the course of her career, Dr. Frick's clinical work has focused on dissemination and implementation of EBPs, developing group therapy services in mental health clinics, training and supervising staff, mindfulness-based treatment, and the assessment and treatment of trauma-related mental health conditions.

Continuing Education

The Center for Deployment Psychology is approved by the American Psychological Association to sponsor continuing education for psychologists. The Center for Deployment Psychology maintains responsibility for this program and its content.

The Center for Deployment Psychology offers attendees 14 credit hours for participation in this training. Participants attending events in person are required to sign-in at the start of the training and sign-out at the conclusion of the training in order to attain CE credit. Participant attendance data will be collected electronically during webinars. There is a 30-day time limit post-training to complete all CE requirements. Partial credits cannot be issued. Inquiries regarding CE credits may be directed via email to Aric Bowie at aric.bowie.ctr@usuhs.edu.

The CEs provided by the American Psychological Association are acceptable for most licensed professionals when renewing their license and it is our experience that APA CE credits have been recognized by most professional state license boards. However, please check with your board regarding the acceptability of APA CE credits for this activity.