

# Cognitive Behavioral Therapy for Suicide Prevention (CBT-SP)

---

This intensive 2-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. Video demonstrations and participant role-plays will be used in class to practice key treatment techniques. In addition to treatment interventions, this workshop lays the foundation by providing a brief review of the following: 1) epidemiology of military suicide; 2) theories of suicide; and 3) suicide risk assessment. The module integrates relevant information from the Air Force Zero Suicide Systems Approach Pilot Project. The module is designed for behavioral health providers working with Service members who are seeking in-depth training in empirically supported treatment options they can immediately incorporate into their clinical practice. The training is geared towards an actively involved audience and participants must attend both days, as the course material is cumulative. Attendance on both days is required. There is a 30-day post-training time period to complete CE requirements.

**Target Audience:** For behavioral health providers who treat military personnel, veterans, and their families. Specifically, this workshop is for Active Duty, GS-DoD, and contractor-DoD behavioral health providers who provide psychotherapy to Service members at a military facility. Nurses and nurse practitioners are also welcome as long as they meet those requirements.

**Instructional Level:** Intermediate

## Learning Objectives:

Attendees 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.

## **TWO-DAY TRAINING AGENDA**

### **Day One**

0730 – 0745	Check-In
0745 – 0800	Introduction & Course Overview
0800 – 0820	Epidemiology of Suicide
0820 – 0900	Nomenclature
0900 – 0930	Risk and Protective Factors
0930 – 0950	Theoretical Underpinnings: Interpersonal Psychological Theory of Suicide Risk – Dr. Thomas Joiner
0950 – 1010	Theoretical Underpinnings: Three-Step Theory of Suicide – Drs. David Klonsky and Alexis May
1010 – 1025	Break
1025 – 1045	Cognitive Therapy for Suicide Prevention – Empirical support for CBT
1045 – 1130	Intro to Cognitive Therapy for Suicide Prevention Theory of CBT Structure of treatment Session structure
1130 – 1150	CBT for Suicide Prevention, Early Phase of Treatment – Overview
1150 – 1250	Lunch
1250 – 1325	Fluid Vulnerability Theory
1325 – 1455	CBT for Suicide Prevention, Early Phase of Treatment – Conducting a suicide risk assessment Suicide risk continuum Suicide risk assessment role play
1455 – 1510	Break
1510 – 1540	Narrative Description
1540 – 1615	Constructing a Timeline
1615 – 1630	Questions and Wrap-up
1630	Adjourn

## Day Two

0730 – 0800	Check-In
0800 – 0830	Nomenclature Homework Review
0830 – 0930	Crisis Intervention Hospitalization Safety planning Crisis response plan Hope Box
0930 – 0945	Break
0945 – 1115	Means Safety Counseling Means Safety Counseling Role Play
1115 – 1200	Treatment Planning and Cognitive Case Conceptualization
1200 – 1300	Lunch
1300 – 1415	Intermediate Phase of Treatment Behavioral strategies Coping strategies
1415 – 1430	Break
1430 – 1515	Intermediate Phase of Treatment Continued Cognitive strategies
1515 – 1615	Later Phase of Treatment – Review and consolidation of skills Relapse prevention Review of goals and treatment planning
1615 – 1630	Questions
1630	Adjourn

---

## Location Information

**Address:**

Via Zoom webinar for Camp Lejeune, NC

**Date:**

22-23 October 2020 from 0800-1630 EST

---

## Participate

**Registration Information:**

This workshop is for Active Duty, GS-DoD, and contractor-DoD behavioral health providers who provide psychotherapy to Service members at a military facility. Nurses and nurse practitioners are also welcome as long as they meet those requirements. Non-DoD seats will not be available for this training. For registration and logistics, please contact Corinne Smith at [corinne.smith@usmc.mil](mailto:corinne.smith@usmc.mil).

**Cost/Refunds:** Free

**Special Accommodations:**

If you require special accommodations due to a disability, please contact Ms. Kris Hannah at [kristin.hannah.ctr@usuhs.edu](mailto:kristin.hannah.ctr@usuhs.edu) at least 4 weeks prior to the training so that we may provide you with appropriate service.

---

## Presenters

---

**Erin Frick, Psy.D.** is a clinical psychologist serving as a Senior 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 Evidence-Based Psychotherapy (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 EBP Champion-Consultant working at Travis AFB in Fairfield, California, where she served as an advocate and consultant for EBPs, engaged in clinic process improvement, and developed toolkits designed to expand access to and availability of EBPs. Prior to coming to CDP, she worked as a contract psychologist treating active duty military members at Travis AFB utilizing multiple EBPs. 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.

**Libby Parins, Psy.D.**, is the Assistant Director of Training and Education at the Center for Deployment Psychology (CDP). Dr. Parins has worked at CDP since 2007, serving in many different capacities including as a faculty member on APA-accredited psychology internship programs, and as a project developer and trainer in military and civilian programs. She began her professional career as a Naval Officer where she served in San Diego, California and Bremerton, Washington as a psychologist. Her clinical expertise is military psychology with foci on depression, anxiety, suicide, and trauma. Dr. Parins clinical career has focused on treating active duty Service members as a clinician in military hospitals.

As a CDP faculty member Dr. Parins has traveled widely across the United States, Europe, and Asia providing continuing education to civilian and military behavioral health providers. The courses she teaches include Prolonged Exposure Therapy for PTSD, Cognitive Therapy for Suicide Prevention, ethics, depression, TBI, sleep disorders, substance abuse in military populations, Military Culture and the Deployment Cycle. Currently, she is based in North Carolina.



---

## 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 Ms. Kris Hannah at [kristin.hannah.ctr@usuhs.edu](mailto:kristin.hannah.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.