



Online Tier Three (CBT-SP) 22–23 February 2021

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.

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

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.



**Star Behavioral Health Providers
Tier Three (CBT-SP) Training
2-Day CBT for Suicide Prevention
AGENDA
22-23 February 2021**

Day One

- 0900 – 0930 Epidemiology of Suicide
- 0930 – 1010 Nomenclature
- 1010 – 1040 Risk and Protective Factors
- 1040 – 1055 Theoretical Underpinnings: Interpersonal Psychological Theory of Suicide Risk – Dr. Thomas Joiner
- 1055 – 1110 Theoretical Underpinnings: Three-Step Theory of Suicide – Drs. David Klonsky and Alexis May
- 1110 – 1125 Break
- 1125 – 1145 Cognitive Therapy for Suicide Prevention – Empirical support for CBT
- 1145 – 1230 Intro to Cognitive Therapy for Suicide Prevention
Theory of CBT
Structure of treatment
Session structure
- 1230 – 1300 CBT for Suicide Prevention, Early Phase of Treatment – Overview
- 1300 – 1400 Lunch
- 1400 – 1425 Fluid Vulnerability Theory
- 1425 – 1555 CBT for Suicide Prevention, Early Phase of Treatment –
Conducting a suicide risk assessment
Suicide risk continuum
Suicide risk assessment role play
- 1555 – 1610 Break
- 1610 – 1640 Narrative Description
- 1640 – 1715 Constructing a Timeline
- 1715 – 1730 Questions and Wrap-up
- 1730 Adjourn



Day Two

- 0900 – 0930 Nomenclature Homework Review
- 0930 – 1030 Crisis Intervention
Safety planning
Crisis response plan
Hope Box
- 1030 – 1045 Break
- 1045 – 1215 Means Safety Counseling
Means Safety Counseling Role Play
- 1215 – 1300 Treatment Planning and Cognitive Case Conceptualization
- 1300 – 1400 Lunch
- 1400 – 1535 Intermediate Phase of Treatment
Behavioral strategies Coping
strategies
Cognitive strategies
- 1535 – 1550 Break
- 1550 – 1720 Later Phase of Treatment –
Review and consolidation of skills Relapse
prevention
Review of goals and treatment planning
- 1720 – 1730 Questions
- 1730 Adjourn



Location Information

Location Platform: Online via Zoom

Zoom Date: 22-23 February 2021

Time: 9:00am – 5:30pm Eastern

Participate

Registration Information:

<https://militaryfamily.secure.force.com/Tier3RegistrationForm?sState=Online>

Cost/Refunds: Free

Special Accommodations:

If you require special accommodations due to a disability, please contact Katie Medina at katie.medina.ctr@usuhs.edu 4 weeks prior to the training so that we may provide you with appropriate service.

Special Note:

A functioning microphone is **MANDATORY** to attend, in order to participate in the role-play sessions. Headphones are also **HIGHLY** recommended to provide the optimal experience.



Presenters

Sharon Birman, Psy.D. is a Military Behavioral Health Psychologist working with the Military Training Programs at the Center for Deployment Psychology (CDP) at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. In this capacity, she develops and presents trainings on a variety of EBPs and deployment-related topics, as well as providing consultation services. She has traveled widely across the United States and OCONUS providing continuing education to civilian and military behavioral health providers teaching a variety of courses including Cognitive Therapy for Suicide Prevention, Cognitive Behavioral Therapy for Depression, Cognitive Behavioral Therapy for Chronic Pain, Assessment of PTSD, Traumatic Brain Injury, Military Sexual Assault and Military Family Resilience.

She joined the CDP in 2014 after completing her postdoctoral fellowship at Harbor-UCLA Medical Center, where she was actively involved in CBT and DBT intervention, supervision and education. She completed her predoctoral internship at Didi Hirsch Mental Health Center, focusing her training suicide prevention and evidence-based interventions for the treatment of individuals with severe, chronic mental illness. Dr. Birman received her bachelor's degree in psychology from the University of Southern California and her master's and doctorate degrees in clinical psychology from Pepperdine University.

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 Katie Medina at katie.medina.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.