# Grant Us Hope

May 2019

Ohio and Northern Kentucky's provider of Hope Squad

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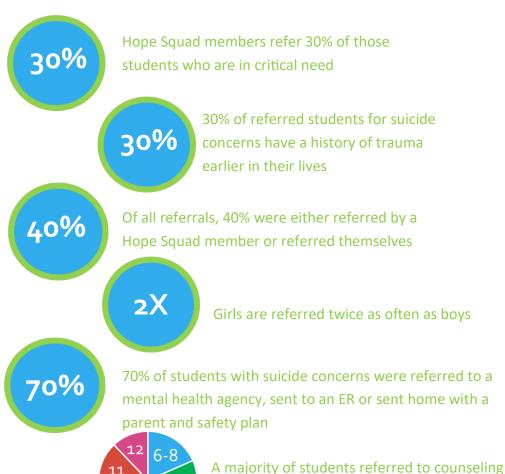


because **YOUR** life matters

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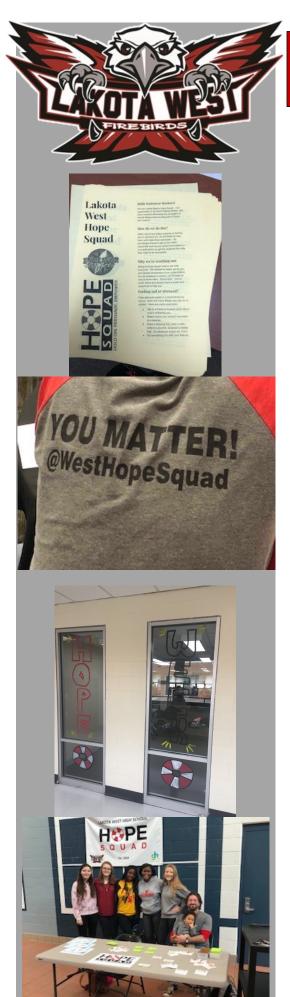
## The Results Are Coming In

One year after Hope Squads began work in Ohio, we are beginning to see how members are changing the culture of their schools and saving lives. Thanks to diligent advisors and Grant Us Hope Director of Research, Dr. Jennifer Wright-Berryman, we are gathering data that tells us more about youth suicide in our region. Here are the preliminary results from the 2018-2019 school year.





A majority of students referred to counseling centers with suicidal thoughts and behaviors are 9th and 10th graders



#### Ohio Hope Squad of the Month:

## **LAKOTA WEST HIGH SCHOOL**

The Lakota Local School District is enormous – one of the largest by population in the state of Ohio. At both Lakota East and Lakota West high schools, this can be both an advantage and a disadvantage. We're able to offer plenty of clubs and extracurricular activities for our students, we're able to have an educational presence in the state, but we certainly don't want any of our students to feel lost or overlooked in a high school with nearly 2,000 students in grades 10-12. All of our children, from the preschoolers to the adolescents, deserve to feel we care about them. And we do! We love them all, which is why Lakota West is proud to have been one of the first schools in Ohio to form a Hope Squad.

West's Hope Squad has been actively busy throughout the 2018-19 school year in building a foundation for encouraging healthy mental habits in our student population, and, most importantly, simply being there to listen when one of our fellow Firebirds needs it. Our Hope Squad kicked off the year with a mini-retreat at the West Main Campus that culminated in the Squad writing messages of hope on balloons and releasing them into the evening sky over West Chester. We spent the first semester of school learning how to listen to friends and classmates who need help and how to be the best providers of support that we can. Now that we're well into our second semester, we've been planning our Hope Week, which will, as of this writing, begin on April 23. The Squad came up with an "H-O-P-E' letter theme for each day of the week and activities for the whole student body correlated with that letter:

H = Health O = Openness P = Positivity E = Encouragement Should be a great week!

The Lakota West Hope Squad has also been highly active in getting our message of hope out to the local community, the Cincinnati area, and the entire state of Ohio. Lead advisor Mr. Anderson has discussed Hope Squad in interviews on local radio station 89.3 WMKV, on Cincinnati's channel 5 WLWT, and on Spectrum News 1, which was broadcast throughout Ohio. Seniors Byron Lopez and Courtney Powless were guests at the West Chester/Liberty Chamber Alliance Luncheon; seniors Campbell Bostick and Logan Grimes attended the Rotary Club of West Chester breakfast; juniors Anna Huston and Lindsey Speed were special guests at Grant Us Hope's Butterfly Bash; and Anna was also a guest panelist at the Ohio State School Board's positivity and suicide prevention conference. Senior Amitoj Kaur has been highly active in getting the word out about Hope Squad: she was the Butterfly Bash Keynote Speaker, the keynote speaker at the Lakota District's "State of the Schools" event, has appeared in a WLWT interview and in a Hope Squad promotional video, was an OSBA conference presenter. Along with Mr. Anderson, she made a presentation for the Lakota Optimist Club; and along with senior Charlie Hall was the co-keynote speaker at Ohio's first annual Hope Squad Conference.

A LONG list of activities! But all the appearances of West's Hope Squad around the community and around the state give us a chance to show the public how proud we are to have such a positive group of students starting something great here at West. The Squad is here to care for everyone at our school, and we are fortunate to have the chance to spread our positivity state-wide.

### Experts explain how to talk about suicide with kids by age

Talking about suicide can be difficult for parents. Mental health and parenting experts explain how to address the subject to kids of every age.

Source: TODAY By Meghan Holohan

With the news of two students from Marjory Stoneman Douglas High School dying by <u>apparent suicide</u>, it seems inevitable that children will hear the word <u>suicide</u>. While parents may feel wary about talking about <u>mental health</u> and suicide with their children, experts say it's important. Death by <u>suicide</u> has increased every year since 1999 in people age 10 to 74. Talking about it makes a huge difference. "It can go a long way to feel supported by other people," Thea Gallagher, clinic director at the Center for Treatment and Study of Anxiety in the Perelman School of Medicine at the University of Pennsylvania, told TODAY.

What's more, discussing suicide doesn't encourage it. "You can't prompt suicide by talking about it or asking about it," Gallagher said. How parents address suicide with their children varies by age. The American Academy of Pediatrics and the American Psychiatric Association recommend that parents do not talk about tragedies until children are 8 years old. "If this isn't going to touch your kids, you don't need to address it," Dr. Deborah Gilboa, a parenting expert, told TODAY. "If you think they are going to hear about it — even with the youngest kids — then you should talk about it."

Parents shouldn't avoid this conversation just because it is tough. "It is incredibly important because of the stigma around mental health; it is a reason people give for not getting help," she said. Talking about suicide with children is important for three reasons, said Gilboa.

- 1. Children deserve the truth: Lying or hiding the truth from children often backfires. What's more, it can ruin the relationship between child and parent.
- 2. Mental health is genetic: Mental illness runs in families and affects almost every family. Sharing accurate information about mental health and suicide gives children information accurate information about it. Even if it doesn't happen in your family, hearing about it provides parents a good starting point for having a candid talk about suicide and its impact on others.

#### PRESCHOOL-KINDERGARTEN: STICK TO THE BASICS.

If a young child asks about suicide, Gilboa recommends keeping it simple. "You could say 'This person died and it is really sad," she said. "They had a bad disease and it just took over.' Just exactly like you would talk to your kids if someone had cancer." Gallagher agrees that giving children basics works best. "Follow the lead of the child," she said. "Gauge where they are developmentally and cognitively."

#### AGES 7 TO 10: GIVE SHORT, TRUE ANSWERS.

From 7 to 10, it's still important for parents to emphasize the death is sad and that the person died from a disease. "With any scary topic we are going to give short true answers and see if the child asks follow-up questions," Gilboa said. Parents could say something like: "Uncle Tom had an illness called depression for many years. He died from his illness, but I wish he had been able to get more help." But Gilboa says it is preferable that children guide the conversation with their questions. That way parents don't provide too much information children might not want. "Then you are not overwhelming them," she said.

#### **AGES 11-14: BE MORE CONCRETE.**

"You have to be more concrete," Gilboa said. "We must be talking to our pre-teens about the warning signs of suicidality." By middle school, one in three children have experienced mood dysregulation that scares them, Gilboa said. This doesn't mean that pre-teens will go on to experience a mental health condition. But it does show that at a young age, children are grappling with complicated emotions.

Start the conversation with questions. "The best entry way is to ask them what they heard. 'What have you heard about this person? What have you heard about suicide? What are your beliefs?" Gilboa explained. Gathering information allows parents to be on the same page as their children. Most people tune out conversations that are too basic for them and providing too much information could be too stressful. "Enter the conversation where they are," she said. This also gives parents the chance to correct any misinformation their children might have heard. If your pre-teen says, 'Weak people die by suicide,' then a parent can explain that the person died because of an illness, not weakness. "Someone dying of a heart attack isn't the person's fault. The disease was stronger than the treatment," Gilboa said. "People who have depression sometimes die." Parents should ask their children if they have thought about suicide or if any of their friends have. "Ask clear questions and don't dance around it so they know it is a safe place," she said.

(Story continued on page 4)

## Experts explain how to talk about suicide with kids by age (con't.)

#### HIGH SCHOOL: NOT IF. WHEN.

Parents of high school students can have the exact same conversation with their teens as they would with middle schoolers with one notable difference. Instead of asking *if* their teens or their friends have experienced mental health conditions or thought of suicide ask *when*. "We are not going to say 'if.' Not 'What would you do *if* you were worried about this.' But, 'What will you do *when* you are worried about yourself or your friends?" Gilboa said. "It is nearly impossible for a child to get through high school without knowing someone with a mental health condition."

Gilboa recommends that parents address this with teens as if they would talk about suicide with another adult because teens want to be addressed like an adult. It's also important that parents reassure teens that having a mental health condition is perfectly normal and they should ask for help. Gilboa suggested saying: "I am not going to consider it a fail if you have mental health problems."

#### **COLLEGE: CHECK-IN.**

Parents should touch base with young adults, too, especially if they experienced suicidal ideation or know someone who has died by apparent suicide. "This can be a trigger," Gilboa said. If they respond that they are fine, Gilboa urges parents to press them. "I would suggest they would reach back one more time: 'I am glad to hear that. That answer is you supporting me. Is there anything I can do to support you?" she said. "Call it out in the nicest way possible."





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**Training Dates** 

June 4, 2019

September 25-26, 2019

October 9-10, 2019

November 13-14, 2019

December 2-3, 2019