

Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada



Roots of Hope

A Community Suicide
Prevention Project



Roots of Hope
Promising Practice Exchange Case Studies

Spotlight on Burin Peninsula, Newfoundland and Labrador

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INTRODUCTION

The Promising Practice Exchange Case Studies bring to light success stories from local communities that are implementing Roots of Hope. The studies are meant to show the model's standard framework in a range of local contexts and highlight how unique results in each community have shaped the program.

Each case study is guided by four key principles:

1. **Community Success.** Document and highlight community success stories.
2. **Focus on Place.** Illustrate how each local context guides Roots of Hope implementation.
3. **The Importance of Pillars.** Emphasize Roots of Hope's 5 pillars: means safety, public awareness, research, specialized supports, training and networks.
4. **Quality Improvement Opportunities.** Invite communities to talk about training tools or resources from the Mental Health Commission of Canada (MHCC) and partner organizations to encourage improvement for other communities across the country.

ROOTS OF HOPE

Roots of Hope is a community-based model that supports populations across Canada in reducing the impact of suicide in their local context. The model builds on community expertise as it implements suicide prevention and life promotion interventions.

In the first Roots of Hope cohort in 2018, eight communities across Canada became part of a research demonstration project. The aim was to support them as they built their capacity to reduce the impact of suicide and to gather evidence on the model's effectiveness with an eye to establishing best and promising practices for wider adoption in the future.

In the Roots of Hope model, communities tailor their suicide prevention efforts around its 5 pillars:

1. **Means Safety.** Identify “hot spots” and implement measures to limit access to the suicide methods being used.
2. **Public Awareness.** Create local educational campaigns (e.g., posters, brochures, social media).
3. **Research.** Set research priorities, surveillance, and monitoring and evaluation to increase the suicide prevention evidence base.
4. **Specialized Supports.** Develop a range of possible prevention, intervention, and postvention services (e.g., peer support, support groups, workplace interventions, and coordinated planning and access to services).
5. **Training and Networks.** Provide training and learning opportunities for community gatekeepers (e.g., physicians, first responders, nurses, HR staff and managers, and teachers).

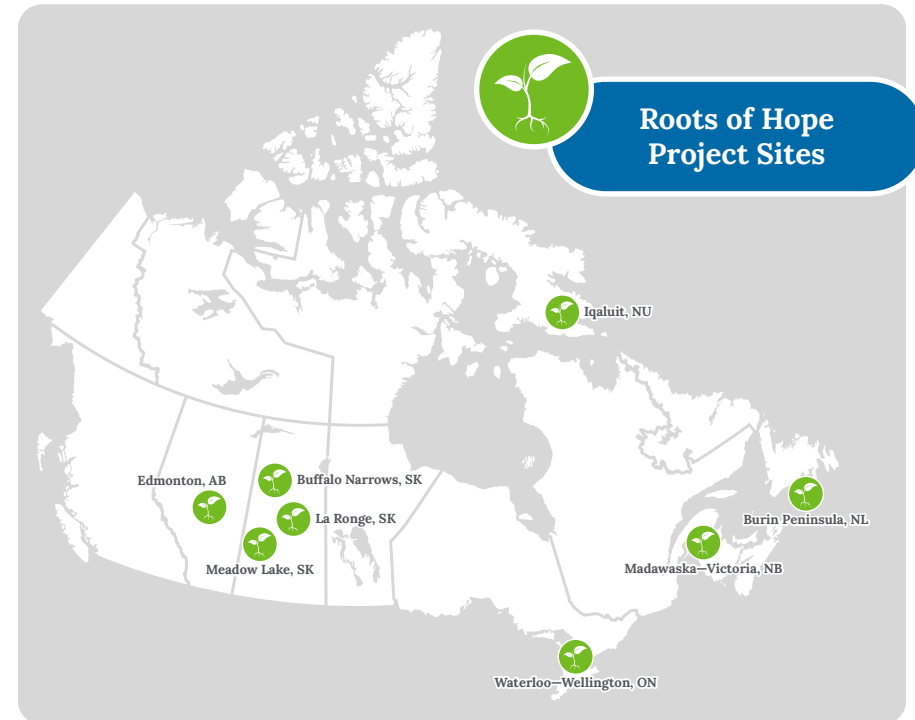


COMMUNITY OF PRACTICE

The Roots of Hope community of practice (CoP) is a way for coordinators, researchers, and other regional stakeholders to connect with an organization overseeing and delivering an action plan. Participants use its quarterly discussions to identify challenges and emerging issues, review successes, introduce best practices, and track the progress of a project. They also use CoP meetings to share information with communities about upcoming Roots of Hope events, webinars, and other items.

CoP Goals:

- Support the transfer of knowledge on ways to implement, adapt, and sustain the Roots of Hope model, both nationally and within each local context
- Establish a network of members who can connect and resolve issues.
- Create a pathway for sharing information, best and promising practices, and other strategic advice related to implementation.
- Provide a platform to recognize the contributions of project coordinators.



PROMISING PRACTICE EXCHANGE

The Promising Practice Exchange gives coordinators the chance to show their implementation progress with CoP members. These (virtual) monthly presentations also foster an exchange of best practices and key lessons learned among community coordinators, research coordinators, and key regional Roots of Hope stakeholders.

Promising Practice Exchange Goals:

- Support the transfer of knowledge on ways to implement, adapt, and sustain the Roots of Hope model, as well as topics relating to suicide prevention and life promotion,
- Create a means of connecting with coordinators between CoP quarterly meetings.
- Provide a platform to recognize the contributions of project coordinators.



THE COMMUNITY OF BURIN PENINSULA

The Burin Peninsula, an area that stretches southwest from the main island for some 130 km, has a population of about [19,000](#), spread across several towns and villages. Since signing on as the first Roots of Hope demonstration project community, it has been providing ongoing support for first responders, offering ASIST (Applied Suicide Intervention Skills Training) to key target groups, along with other training to community members, and focusing on harm reduction (alcohol) as part of the **means safety** pillar.

In 2019, its focus group findings highlighted the considerable influence stigma was having on access to mental health services and resources on the peninsula. To address the issue, the community team's action plan set out to provide training and educational opportunities to groups that included community members, first responders, and health-care professionals. The priority populations they identified were first responders, males ages 40-59, youth, and community members at large.



COMMUNITY ACTIVITIES AND ACHIEVEMENTS

Suicide awareness presentations

A warm-up to ASIST and SafeTALK training, we designed these for all community members with a vested interest in learning more about suicide. The topics covered included provincial and national suicide statistics, warning signs for suicide, stigma reduction, how to help someone who may be considering suicide, self-care, and local/provincial/national resources available to help. Based on community need, we added two additional adaptations: Suicide Awareness for Youth and Suicide Awareness for First Responders.

HEADSTRONG

In October 2019, the Burin Peninsula hosted its first HEADSTRONG summit, welcoming 88 students, staff, and community members

from eight of its high schools. HEADSTRONG is geared toward reducing the stigma around mental illness among youth. The summit included stories from inspirational speakers, stigma-reducing activities, prize draws, and student presentations. Several schools have since developed HEADSTRONG student committees and implemented stigma reduction activities.

Hope and recovery initiative (“I’m Here” Campaign)

The mandate of this campaign is to create awareness about suicide prevention by promoting the resources available in Newfoundland and Labrador. We are planning a suicide awareness campaign, based on a collection of “I’m Here” video statements, that will be widely circulated on social media.



COMMUNITY IMPACT

All three activities have helped start the conversation about suicide on the Burin Peninsula. By taking a community-focused, collaborative approach and promoting open dialogue, our communities have seen a positive shift in attitudes about suicide, along with an emergence of hope about suicide prevention.

These activities have also encouraged participation across diverse age groups — from youth to older adults. Although our target group continues to be men ages 40 to 59, we believe that suicide prevention involves a collaborative community effort — which is why we designed our activities to fit a wider audience.

Stigma reduction around suicide has always been a huge focus for the Roots of Hope Burin Peninsula team, so we are proud that our work has been able to reduce stigma in our communities.

The feedback from individuals who took part in our suicide awareness presentations, and in HEADSTRONG, have been overwhelmingly positive. People recognize the importance of this work and are asking for more. These responses have been encouraging and amazing.



TESTIMONIALS AND STORIES

Suicide awareness for first responders:

“To say the presentation was good or great would be an understatement. It was fantastic. The amount of information and knowledge was very helpful. Our community has had some very rough times with suicide in recent years, and the timing of this presentation was perfect and eye-opening. The biggest thing I took from this presentation was, if we as first responders don’t look after ourselves, then how can we do our jobs and look after the public? This presentation gave all who attended a variety of local resources, available to whoever needed them. Shortly after the presentation, myself and my co-workers thought that maybe we weren’t protecting ourselves as best as we could. Because of this presentation, there are now more conversations about calls and regular check-ins from other staff members when a terrible call happens, and I can see a major difference from our staff when it comes to communication and not being afraid or shy of talking about a call that may have affected them. I think it is very important for other first responder agencies to take part in a presentation like this to eliminate the stigma of getting help when needed and let other first responders know they are not alone.”

— Justin Green, Marystown Volunteer Fire Department

Suicide awareness for community members:

“The suicide presentation was very helpful! I did ASIST training last year, and I found it was a great recap of how to ask tough questions related to suicide. The info on feelings and signs to look for were very helpful as well. I found that when I did ASIST the toughest part was asking the questions out loud, but it made a big difference with feeling comfortable asking those questions in the future.”

— Natasha Parsons

HEADSTRONG:

“A feeling of hope and a lot of education on how to help others struggling and how to help myself.”

— Grade 12 student, female

“After today I’m more comfortable to put down my walls and be open about my feelings instead of hiding behind a mask.”

— Grade 11 student, female

“How to help a friend suffering, it’s okay to reach out, and possible ways to integrate wellness in school.”

— Grade 12 student, trans/non-binary

“I got a new perspective about what I can do to improve/reduce mental health stigma.”

— Grade 12 student, male

“I learned that you shouldn’t be ashamed if you have a mental illness and to ask for help if you need it.”

— Grade 10 student, female





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