

Level III

Depression Education& Suicide Awareness

In alignment with the National Health Education Standards



Erika's Lighthouse is a not-for-profit depression and mental health education organization that educates middle school and high school communities about teen depression, eliminates the stigma associated with mental health issues and empowers teens to take charge of their mental health.

For more information and other programs and resources, go to www.erikaslighthouse.org.

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This program was written for educators, professionals and other adults working with adolescents to educate them regarding the issues surrounding depression. While Erika's Lighthouse consults with clinical, therapeutic, legal, and child development experts, nothing in this program should be construed as specific or general medical or psychological advice. Erika's Lighthouse assumes no responsibility for any actions taken as a result of the material or information contained in the program. Every child's and family's situation is unique, and Erika's Lighthouse urges children, adolescents, parents, and educators to seek and find competent professional advice appropriate for specific individuals and actions.

Welcome to Level III: Depression Education and Suicide Awareness.

Maintaining good mental health is among the most challenging issues affecting today's youth, and the stressors young people face can be intense. Depression and suicide are important—and often required—topics for schools to address with their students. At Erika's Lighthouse, we have a strong track record of creating depression and suicide awareness classroom programs that are teen-centered, effective, impactful and hopeful.

This program was inspired by a young person named Erika.

Erika was a bright light who, sadly, lost her battle with depression in 2004 at age 14. Erika's Lighthouse was founded in her honor and is dedicated to helping other young people learn about depression and overcome the stigma surrounding mental health disorders.

This Erika's Lighthouse program was designed for grades 8-12, led either by a teacher and/or a school mental health professional. The lessons provide opportunities for students and staff to engage in open and safe conversations about depression and good mental health.

THIS PROGRAM CONSISTS OF FOUR 45-MINUTE ENGAGING AND INTERACTIVE LESSONS THAT ARE DESIGNED TO PROVIDE STUDENTS WITH:

- Increased knowledge of key concepts related to depression and suicide
- Increased empathy and understanding toward young people with depression
- Increased self-advocacy and peer-to-peer intervention
- Increased ability to identify and access valid and reliable sources of information
- Increased awareness of how they can support their own mental health and well-being and contribute to a positive mental health culture in their school and community.

ADDITIONAL DATA ABOUT SOME OF THE EMOTIONAL AND MENTAL HEALTH CHALLENGES TEENS FACE INCLUDE:

70% of teens viewed **anxiety & depression** as a "major problem" among their peers. (Pew Research Center, 2019)



Suicide is the second leading cause of death among young people ages 10-24.



Up to 20% of young people will experience a major depressive episode before age 20. (National Institute of Mental Health)

Level III is a flexible and easy to implement program.

Since the first three lessons build upon each other with knowledge and skills, we suggest you teach all three. The fourth lesson is optional and includes four different performance assessments including a rubric to assess students' knowledge and skill gain.

At the core of this program is a depression and suicide awareness video, meant to be viewed in sections, featuring 7 young people sharing their diverse stories and experiences. We believe that it is important that high school students have the opportunity to hear about depression directly from young people of similar age and to hear from students from a variety of backgrounds.

After watching the video portions, students are provided with opportunities to discuss and think critically about the information and perspectives shared in the video. The instructor is also asked to educate students about school and community resources should they need to get help for themselves or help for a friend.

This program can serve as your school's primary depression and suicide awareness teaching tool or can be used to supplement the education you're already providing your students through your own lesson plans, textbooks, other curricula and/or guest speakers.

We are committed to partnering with you as you teach this program. Please let us know how we can best support you. We also welcome any feedback, suggestions and ideas you have about how we can improve the resources we offer to schools.

Lesson Overview

Each lesson is 45 minutes in length and includes facilitator's instructions, a slide presentation, and handouts if applicable. Students are provided with a student packet and/or worksheets for each lesson.

LESSON 1

Lesson 1 is the core lesson of Level III and is designed to raise students' awareness and knowledge of key concepts related to depression, suicide and help-seeking.

Students will watch the first portion of the Level III video, which teaches key concepts about depression and suicide through student stories, narration and graphics.

The lesson concludes by educating students on where and how to access help should they need it for themselves or a friend.

LESSON 2

Lesson 2 of Level III is designed to increase students' empathy and understanding of what it might be like to experience depression as a high school student.

The class will break into small groups. Each small group will read about the experiences of one of the primary students featured in the video.

They will learn more about risk factors that might contribute to depression, challenges a student with depression might encounter, people and activities that can be helpful when you have depression and what young people say they have learned from their experiences with depression.

LESSON 3

Lesson 3 of Level III is designed to raise students' awareness of what might help them when they're having a difficult time, including what kinds of people they find supportive during times of stress.

This lesson begins with a review of the answers to the stories on the video. It gives students the opportunity to listen to a variety of students from different backgrounds and the similar and sometimes different experiences they have with depression.

Students will learn more about self-harm and suicide during this lesson with reinforced opportunities to seek a trusted adult when they or someone they know might need it.

LESSON 4

Lesson 4 is designed to assess students' knowledge and accessing information skill gain from the previous 3 lessons. It is up to the teacher whether students will work individually, in pairs or groups on this assignment. It has been developed for student choice. However, a teacher might select one of the four options to assign to students. Students should receive the description or prompt of the assessment/product they will turn in as well as the rubrics that accompany them.

THESE LESSONS ARE:

- 1. **Skills-Based:** Students learn, practice, and apply skills.
- **2. Learner Centered:** Students apply relevant health information facilitated by the teacher.
- **3. Strengths Based:** Students build on their prior knowledge, skills, and strengths.
- **4. Authentic and Relevant:** Students apply real-life learning experiences and skills

If students have practiced the skill of accessing resources in prior units, the focus on the skill practice might be more of a reinforcement and demonstration of proficiency rather than an introduction to the skills of defining validity and reliability and describing how and why to access resources locally, regionally or nationally.

KEY LESSON FEATURES

- Total Instruction Time: 45 minutes per lesson
- Teaching Strategy: What teaching and learning strategies are used in the lesson
- Equipment, Materials and Preparation: A description of what equipment, materials and teacher prep are needed to implement lesson
- Lesson Objectives: What students will learn/demonstrate

- Outline: Step-by-step description of how to use the slide presentation to guide the lesson, model skills, facilitate activities, and lead discussions
- The lessons are aligned to the National Health Education Standards. Two of the eight National Health Education Standards are addressed:
 - Standard 1–Concepts: Students will comprehend concepts related to health promotion and disease prevention to enhance health.
 - Standard 3 Accessing Information: Students will demonstrate the ability to access valid information, products, and services to enhance health.
- **Engaging Activities**: These lessons are meant to support differentiated learning. This means there is an assortment of different strategies used to engage a variety of learning styles.

CLASS NORMS / GROUP AGREEMENTS

If this program is being offered as part of an existing health education program, you will probably already have established classroom norms or group agreements. If this is the case, this is a good time to review existing group norms with your students and refine them in preparation for this curriculum.

This curriculum addresses sensitive topics. In order for students to feel safe and be fully engaged in the lessons, it is important to establish group norms and/or agreements. Group norms are ways that groups of people can work together in a thoughtful, respectful, safe and productive way. If you have already established group norms, be sure that each of the following guidelines have been addressed.

If you have not developed group norms, here are some guidelines you may find useful in helping students come up with them:

- Everyone should be involved in creating the group norms.
- Use guiding questions to help students identify the norms that will achieve a safe and caring classroom:
 - How can we be sure that people will be able to safely share private information and feelings?
 - How can we be sure that everyone has a chance to freely share and that they are heard?
 - How can we be sure that people are not forced to say or do something that makes them feel uncomfortable or unsafe?

Some examples of group norms that are brainstormed may include:

- Listen to others' perspectives
- Maintain confidentiality
- Participate
- Right to pass
- Respect differences

HOW TO ANSWER DIFFICULT QUESTIONS PROTOCOL

Sometimes when covering sensitive content such as emotions, social influences, and personal topics, questions may arise that are difficult to answer. Sometimes, the question may relate to personal values that are not universally shared. Or the question might have more than one answer depending on a person's values, beliefs, and personal history.

It may be helpful to follow this protocol when responding to difficult questions:

- 1. Affirm that the student's question is legitimate. Restate it for clarification and acknowledge that others might also wonder about this. "Thanks for asking that. I am sure other people would like to know about..."
- 2. Identify if there is a belief/value that is inherent in the question. Point out anything about the question that might be opinion-related. It is important to express the range of opinions without identifying that any single opinion is the right one.
 - "Some people might believe...while others believe..."
- 3. Answer the factual part of the question.

"Here is what is known to be true..."

4. Refer to a trusted adult.

"This would be a great question to ask your (aunt, dad, caregiver, etc.)"

5. Check back.

"Did I answer your question?"

6. Leave the door open.

"If you have any other related questions, I hope you will feel free to ask."

SENSITIVE AND PERSONAL ISSUES

Any time a sensitive topic is addressed in the classroom, it is important to ensure that all students are protected from potential trauma, particularly those who may have had adverse childhood experiences (ACEs). Social, emotional and mental health education may deal with issues of interpersonal relationships, suicide and substance use.

The teacher's capacity to listen non-judgmentally, with empathy, and to demonstrate a comfortable attitude in dealing with students' beliefs and feelings associated with mental health and emotions is crucial to the curriculum's successful implementation. Students come to the classroom with many different values, cultural and religious beliefs, and ideas about these topics. Teachers should keep in mind that because their students come from many backgrounds and traditions, some may have difficulty sharing ideas and discussing these issues with their peers.

When a student has experienced trauma of some sort in their life, it may have an impact on their ability to thrive and be healthy. These resources will provide guidelines and suggestions for helping to avoid further trauma to students affected by ACEs.

https://www.weareteachers.com/10-things-about-childhood-trauma-every-teacher-needs-to-know/https://www.weareteachers.com/video-every-teacher-needs-know-childhood-trauma/

Teachers can go a long way towards helping a student who has depression by noting what they see, consulting with the school's health staff, and treating the student with respect and sensitivity.

But it is important to note that teachers are not responsible for either diagnosing or treating someone who has depression. Only a trained mental health professional can do that.

FOR PARENTS

This parent-to-parent guide contains ideas and information that will be helpful when dealing with this difficult time in your family.

https://www.erikaslighthouse.org/the-parent-handbook-on-childhood-and-teen-depression-1/

ADAPTATION/MODIFICATIONS

You are encouraged to make this curriculum culturally responsive to your students. Feel free to adapt based on classroom size, student maturity, culture, values, and beliefs.

We have developed the curriculum with specific behavioral outcomes, so know that any adaptations that change the outcomes of the lesson objectives might change the fidelity of the curriculum.

HEALTH EDUCATION EFFECTIVE PRACTICES

The Characteristics of Effective Health Education Curriculum were utilized while creating this curriculum. The curriculum incorporates these characteristics as follows:

- Teaching functional health information. Lessons provide basic information that is relevant to students' daily lives. The lessons are not content-heavy. Rather, essential information is presented in engaging, real-world scenarios and through practical application.
- Shaping personal values and beliefs that support healthy behaviors. Students are engaged in group discussions, scenarios, and simulation activities that allow them to explore their own experiences.
- Shaping group norms that value a healthy lifestyle. Over the course of the program, students learn the beliefs and behaviors around emotions, accessing information, self-care, and help-giving that contribute to a healthy lifestyle
- Developing the essential health skills necessary to adopt, practice, and maintain health-enhancing behaviors. This program focuses on National Health Education Standards 1 and 3; Concepts and Accessing Resources. Great care has been made to model, provide opportunities to practice and demonstrate proficiency in the skill standard of Accessing Resources (3) in a logical progression that builds from the start of the program, and culminates with assessment of the skill in Lesson 4.

TEACHING THIS PROGRAM

Erika's Lighthouse wants educators to be successful when teaching this program. Here are a few suggestions to ensure that:

- Review all of the materials before teaching: it is suggested that each teacher reviews all four lessons and the accompanying materials before teaching Lesson 1.
- 2. While teaching the program, take notes on how each lesson went in different classes. Take notes on how you might adapt the lesson in the future. If you have a suggestion for an edit or adaptation, feel free to share with Erika's Lighthouse staff.
- 3. If you have student work samples from the assessments (Lesson 4), feel free to share with Erika's Lighthouse as examples of student work!
- 4. If any of the content leads to a high level of distress or emotional discomfort, please reach out to a mental health clinician.

PROGRAM EVALUATION

Our pre/post program evaluations are designed to capture a well-rounded perspective of school mental health efforts and the Erika's Lighthouse classroom education's role in supporting inclusive school cultures. Links and QR codes are available at the start of Lesson 1 and end of Lesson 3. Pre and post tests are available for students, while post-evaluations are for educators and the school mental health professionals involved in facilitating these lessons.

Please note we can only provide data collected for schools that have at least 100 pre- and/or 100 post-surveys completed.

Crisis Text Line
(text HELP to 741741)

National Suicide Prevention Lifeline
(dial 1-800-273-8255)

PLEASE CONTACT US AT ANY TIME AT info@erikaslighthouse.org

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Lesson l Overview and Objectives

Lesson 1 is the core lesson of the Erika's Lighthouse Level III program and is designed to raise students' awareness and knowledge of key concepts related to depression, suicide and help-seeking.

Students watch the first video segment, which teaches key concepts about depression and suicide through student stories, narration and graphics.

The lesson concludes by educating students on where and how to access help should they need it for themselves or a friend.

NATIONAL HEALTH EDUCATION STANDARDS ALIGNMENT **STANDARD 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

STANDARD 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

LEARNING OBJECTIVES

Students will be able to:

- Define depression as a common mood disorder with specific changes in moods, thoughts and behaviors.
- Explain that depression can happen to anyone, anywhere.
- Explain that there's not one reason someone has depression.
- Recognize that depression can get better and you can find support.
- · Access information on depression.

TOTAL INSTRUCTION TIME
45 minutes

TEACHING STRATEGIES
Video
Discussion
Accessing Information Activity

LESSON 1 FACILITATOR INSTRUCTIONS

TEACHING SUGGESTIONS

If mental health staff in your school are available, including representatives from your school's mental health or counseling staff (*preferable*), or representatives from your school's Erika's Lighthouse Teen Empowerment Club, encourage them to co-teach and/or be available when teaching this lesson.

EQUIPMENT, MATERIALS & PREPARATION

- Audio/visual equipment
- Dry erase board or chart paper/markers
- The Level III Lesson 1 video segment
- Student Packet, one for each student
- Term and Definitions cut, enough for each student to receive one term or one definition
- Self-Referral Cards, copied and cut (optional)
- Evaluation link or QR code (to use before Lesson 1 and/or after Lesson3)



PRE-TEST

Take 3 to 5 minutes to

have students fill out the survey through

the QR code or share

this link:

http://elhhs.info/

PREPARATION REQUIREMENTS

Exit Tickets: Self-Referral Cards

- Print and cut out
- Communicate with school mental health staff to ensure a process is in place.

Terms and Definitions

Print and cut out

LESSON 1 OUTLINE

STEP 1 5 minutes

5 minutes **Definition activity.** Hand out the terms and definitions cards, one to each student. Have students move around the room to the best of their ability and find their match—either the definition to their term card or vice versa. There will be multiple pairs with the same term/definition. Once all have paired, as students are still with their pair, go through each term and ask for volunteers to read the definition out loud.

Adaptation: If students aren't able to move around the room, you may adapt this activity by creating a set of the term/definition cards per group of 4-6 students. Have them match the cards up as a group on a desk/table.

STEP 2 5 minutes

5 minutes Pass out student packets and read program introduction aloud, including objectives.

STEP 3 21 minutes

21 minutes Play the Level III Lesson 1 video segment

After you play the 11 minutes of video, ask these questions as a large class.

Questions:	Possible student responses:
What words or themes stood out for you?	Mood disorder. Sad. Not feeling right/feeling off.
What information concerned you about what you heard?	15-20% of teens have depression. Sometimes episodic, Genetic. Can happen to anyone. Risk factors— poor health, divorce, violence, gender/sexuality, pressure/stress
Do you think there are students here in our school community that have depression?	No. Yes.
How do you think students with depression might be taking care of themselves?	They might not be. They might be working with a trusted adult, like a school counselor, psychologist or social worker.

LESSON 1 FACILITATOR INSTRUCTIONS

Questions:	Possible student responses:
Knowing that students in	I can help,
our school may have depression,	I can identify warning signs
what does that mean for our	in others/myself,
school community?	l can be an upstander.
What are some mental health	School nurse, counselor,
resources (meaning information)	psychologist, coach, friend,
or people in our community that	clergy, support group,
can help someone that is	pamphlet, websites.
	• •

Teacher note regarding this last question: As students respond, write their answers down and post on a dry erase board or chart paper to have as a visual reminder for the remainder of the program.

If you teach multiple class periods, do this for each class and compile at the end of day to have a complete list posted.

STEP 4

12 minutes **Explain:** The video states that some adults are not comfortable talking about depression. So, next we are going to discuss how someone knows who to talk to and if they are a good resource.

> Ask students to refer to their student packet and look at page 4 with the Access Valid & Reliable Resources Skill Model on it. Explain to the students that they learned the definition of accessing information earlier in class. It is one of the national skill-standards in health education.

Ask different students to read the steps below out loud.

- Step 1: Identify When You Need Help & Information
- Step 2: Evaluate the Validity of Help & Information
- Step 3: Locate Valid Help & Information
- Step 4: Make a Plan to Access Valid Help & Information
- Step 5: Reflect

ACCESS VALID & RELIABLE RESOURCES

This skill model was developed by RMC Health. For additional information and resources on the Health Skills Models, visit: https://www.rmc.org/healthskills

LESSON 1 FACILITATOR INSTRUCTIONS

STEP 4 (continued)

Say: Let's take a look at Steps 3 and 4 in more depth. These include the skill of determining if information, people, services and/or resources are strong and truthful. You can use two criteria; validity and reliability. In your packet, look at the bottom of the graphic organizer.

Say: "In order to know if you or someone you know is accessing valid and reliable resources, professionals or even information, you can use these criteria/questions."

Ask students in pairs or groups of 3 to read through these two definitions with criteria below.

Validity: *Is the resource truthful?*

- Is the site or resource from a respected organization (.gov, .edu, or .org)?
- Is the site or resources current?
- Is there data that supports claims?
- Can you find the same information in another resource?

Reliability: Is the resource trustworthy and dependable?

- Will you be able to access this resource when you need it?
- Is this resource free? If not, do you have the money you need to pay for this resource?
- Do you need/have permission to use this resource?
- Do you need transportation to access this resource? If so, do you have transportation?
- Are there any potential barriers to accessing this resource that need to be considered?

As a class, review the Erika's Lighthouse web page, or show the screenshot in the slideshow. As a whole class, go through the graphic organizer questions for validity and reliability and discuss. Come up with some answers as to why source is valid and reliable. Some answers can be found on slide #11.

STEP 5 2 minutes Closure slide and Self-Referral Cards: If your school can support the Self-Referral Card process, pass out Self-Referral Cards, provide instructions for filling it out and confidentially collect a card from every student.

> Make sure cards are delivered to the appropriate mental health staff members in your school in a timely fashion.

(if applicable) If you have an Erika's Lighthouse Teen Club at your school, students and/or adult sponsors can tell the class about their activities and how students can get involved with the club.

Terms and Definitions Template

DIRECTIONS

COPY, CUT AND HAND OUT. Shuffle once cut. Each student receives one card.

The term is across the row from its answer, so this sheet can serve as an answer sheet for the teacher.

Exit Ticket: Self-Referral Card Template

It is important to make help available to students who may need it. Before using the Self-Referral Cards, please ensure the following:

- There is mental health support in the school.
- Your school mental health staff supports the Self-Referral Card process.
- School mental health staff has set time aside to manage student self-referrals.

DIRECTIONS

READ THE INSTRUCTIONS ON THE CARD OUT LOUD and reinforce to students that if they check one of the boxes requesting a follow up with a school mental health professional, that action will be taken to connect them with a school mental health professional.

Instruct the students to **FILL OUT THE ENTIRE CARD AND FOLD IT IN HALF.** Everyone should fill out a card to ensure student confidentiality. Have each student hand in his/her card individually. Once the cards are collected, pass the cards on to the school mental health staff immediately for follow-up.

NOTE

The Self-Referral Cards may be utilized in Lesson 1, 2, 3 and/or 4. Teachers should feel free to reinforce the opportunity throughout the program if they feel the need.

mental health	A person's condition with regard to their psychological and emotional well-being.
mood disorder	A psychological disorder that impacts a person's mood substantially; such as depression or bipolar disorder.
depression	A common mood disorder with specific changes in moods, thoughts and behaviors.
referral	Directing someone in need of something for a review, further support or help.
mental health resource	Services, people, information, treatment, counseling that assist an individual or group of people with mental or emotional illnesses.
mental health provider	A professional who diagnoses mental health conditions and provides treatment.
accessing information	Ability to identify, obtain and make use of information effectively.

SELF-REFERRAL CARD

Please fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.

Name	
Classro Teache	
Period	
	After hearing the presentation, ☐ I would like to talk to a mental health worker in the next 24 hours. ☐ I would like to talk to a mental health worker in the next week. ☐ I would not like to talk to a mental health worker.
	SELF-REFERRAL CARD
Ple	ease fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.
Name Classro Teache	
Period	
	After hearing the presentation, ☐ I would like to talk to a mental health worker in the next 24 hours.
	☐ I would like to talk to a mental health worker in the next week.
	☐ I would <u>not</u> like to talk to a mental health worker.
	SELF-REFERRAL CARD
Ple	ease fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.
Name Classro Teache	
Period	
	After hearing the presentation, ☐ I would like to talk to a mental health worker in the next 24 hours.
	☐ I would like to talk to a mental health worker in the next week.
	☐ I would <u>not</u> like to talk to a mental health worker.

SELF-REFERRAL CARD

Please fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.

and turn it in to your teacher.		
Name Classro Teacher		
Period		
	After hearing the presentation, ☐ I would like to talk to a mental health worker in the next 24 hours.	
	☐ I would like to talk to a mental health worker in the next week.	
	☐ I would <u>not</u> like to talk to a mental health worker.	
	SELF-REFERRAL CARD	
Ple	ease fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.	
Name Classro Teache		
Period		
	After hearing the presentation, ☐ I would like to talk to a mental health worker in the next 24 hours.	
	I would like to talk to a mental health worker in the next week.	
	☐ I would <u>not</u> like to talk to a mental health worker.	
	SELF-REFERRAL CARD	
Ple	ease fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.	
Name Classro Teache		
Period		
	After hearing the presentation	

After hearing the presentation,

- ☐ I would like to talk to a mental health worker in the next 24 hours.
- ☐ I would like to talk to a mental health worker in the next week.
- ☐ I would <u>not</u> like to talk to a mental health worker.

LESSON 1 STUDENT PACKET

Welcome to Erika's Lighthouse Level III:

Depression Education and Suicide Awareness.

This program was inspired by a young person named Erika. Erika was a bright light who, sadly, lost her battle with depression in 2004 at age 14. Erika's Lighthouse was founded in her honor and is dedicated to helping other young people learn about depression and overcome the stigma surrounding mental health disorders.

This program will teach you the following information and help you develop the skill of accessing information. This means you will be able to access valid and reliable health information (*example*: a website), resources (*example*: a self-assessment, book or pamphlet), products (*example*: yoga mat, eye pillow) and people (counselor or therapist) when you or someone you know needs them.

BY THE END OF THIS 4 LESSON PROGRAM, I WILL BE ABLE TO:

- Define that depression is a common mood disorder with specific changes in moods, thoughts and behaviors.
- Explain that depression can happen to anyone, anywhere.
- Explain that there is not one reason someone has depression.
- Recognize that depression can get better and you can find support.
- Explain that good self-care is a key piece to managing depression.
- Describe that self-harm and suicidal thoughts are symptoms of depression that we must take very seriously.
- Practice accessing valid and reliable information to support a friend who has depression.

LESSON 1 STUDENT PACKET

TERMS AND DEFINITIONS

Here are the terms/definitions from the matching activity we just did. We will refer to these terms throughout the lessons.

depression A common mood disorder with specific changes

in moods, thoughts and behaviors.

mental health A person's condition with regard to their

psychological and emotional well-being.

mood disorder A psychological disorder that impacts a person's

mood substantially; such as depression or

bipolar disorder.

accessing information Ability to identify, obtain and make use

of information effectively.

referral Directing someone in need of something

for a review, further support or help.

mental health resource Services, people, information, treatment,

counseling that assist an individual or group of people with mental or emotional illnesses.

mental health provider A professional who diagnoses mental health

conditions and provides treatment.

THE ERIKA'S LIGHTHOUSE LEVEL III VIDEO

As you watch the video, please feel free to doodle or take notes next to the learning goals. Otherwise, feel free to just watch the video if that's how you learn best.

As you watch the video, pay attention to your thoughts and feelings. The video might remind you of things that have happened in your life or in the lives of people you know. You might find that there's a particular story you connect with or a story that really affects you.

If <u>anything</u> today prompts a feeling that you need to talk to someone, please let your teacher or another trusted adult at school know. At the end of today's lesson, you will also be informed of how to connect with help at school should you ever be concerned about yourself or a friend.

CLASS DISCUSSION

(Write notes below as the class discusses these answers)

- What words or themes stood out for you?
- What information concerned you about what you heard?
- Do you think there are students here in our school community that have depression?
- How do you think students with depression might be taking care of themselves?
- Knowing that students in our school may have depression, what does that mean for our school community?
- What are some mental health resources (meaning information) and people in our community that can help someone who is feeling depressed?

LESSON 1 STUDENT PACKET



ACCESS VALID & RELIABLE RESOURCES

The video states that some adults are not comfortable talking about depression. So, next we are going to discuss how someone knows who to talk to and if they are a good resource.



Validity: Is the resource truthful?

- Is the site or resource from a respected organization (.gov, .edu, or .org)?
- Is the site or resources current?
- Is there data that supports claims?
- Can you find the same information in another resource?

Reliability: Is the resource trustworthy and dependable?

- Will you be able to access this resource when you need it?
- Is this resource free? If not, do you have the money you need to pay for this resource?
- Do you need/have permission to use this resource?
- Do you need transportation to access this resource? If so, do you have transportation?
- Are there any potential barriers to accessing this resource that need to be considered?



ACCESS VALID & RELIABLE RESOURCES

RESOURCE	VALIDITY (why)		RELIABILITY (why)	
		YES		YES
		NO		NO
		YES		YES
		NO		NO
		YES		YES
		NO		NO
		YES		YES
		NO		NO



Validity: Is the resource truthful?



- Is the site or resource from a respected organization (.gov, .edu, or .org)?
- Is the site or resources current?
- Is there data that supports claims?
- Can you find the same information in another resource?

Reliability: Is the resource trustworthy and dependable?

- Will you be able to access this resource when you need it?
- Is this resource free? If not, do you have the money you need to pay for this resource?
- Do you need/have permission to use this resource?
- Do you need transportation to access this resource? If so, do you have transportation?
- Are there any potential barriers to accessing this resource that need to be considered?

2

Lesson 2 Overview and Objectives

Lesson 2 of the Erika's Lighthouse program is designed to increase students' empathy and understanding of what it might be like to experience depression as a high school student.

The class will break into small groups. Each small group will read about the experiences of one of the primary students featured in the video.

They will learn more about risk factors that might contribute to depression, challenges a student with depression might encounter, people and activities that can be helpful when you have depression and what young people say they have learned from their experiences with depression.

NATIONAL HEALTH EDUCATION STANDARDS ALIGNMENT **STANDARD 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

STANDARD 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

LEARNING OBJECTIVES

Students will be able to:

- Read and process stories from the video to learn more about each student's experience with depression; and
- List valid and reliable resources for peers to go to when needing support.

TOTAL INSTRUCTION TIME
45 minutes

TEACHING STRATEGIES

Review

Video

Discussion

Small Group Story Activity

EQUIPMENT, MATERIALS & PREPARATION

- Audio/visual equipment
- Chart paper/markers
- Lesson 2 slideshow and a way to show it
 Note: on slide 12, type in the name(s) of the school counselor,
 social worker and/or psychologist students can go to.

 The valid and reliable trusted adults in our school are:
 Place your school counselor, social worker and/or psychologist's names here.
- The Level III Lesson 2 video segment on self-care
- · Student Packet, one for each student
- There are 6 different stories for this lesson, one for each of the primary students featured in the video (Callie, Mason, Alan, Jasmine, Edgar, Mac). Have enough copies so each student has one of the documents.
 - For this lesson, you will break your class into 6 small groups, one for each student in the video. Each small group will focus on one of the students in the video.
- Create 6 stations around the room, assigned to each student in the video (Callie, Mason, Alan, Jasmine, Edgar, Mac).
 Each station will have:
 - Chart paper
 - Marker
 - Posted questions related to that student in the video
- Self-Referral Cards, copied and cut (optional)

LESSON 2 OUTLINE

STEP 1

5 minutes Introduce two new terms: self-care and stigma. Explain that a lot of times people do not seek help because they believe they just need to be happy.

> **Self-Care** is the practice of taking action to improve one's health. This includes physical, social and emotional health.

Stigma is the belief that if you share that you need help, you will be disrespected or disgraced.

Use slide #3 to review content from the lesson prior.

Prompts include:

- Who can define self-care and share what they do for self-care?
- What is a warning sign of depression?
- What is a cause for depression?
- Who is a trusted adult in the school (name)? How do you know they are a trusted adult?
- What does it mean when a resource is valid?
- What does it mean when a resource is reliable?

STEP 2

5 minutes View the Level III Lesson 2 video segment

Before you have students watch these few minutes, ask them to keep the two questions in their student packet in mind.

- What are two self-care examples you heard?
- What are two self-care strategies you use for stress or strong emotions? Watch the video on self-care. Have students write down their answers in their packet. Debrief the first question as a class.

STEP 3

33 minutes Split class into 6 groups. Hand out story packets (printed front and back) for each student associated to the group they are assigned to. Students read their handout individually, in pairs, or in a group.

> Once read, students go to their assigned station and answer the posted questions on chart paper. Explain that in the next lesson, they should be prepared to share their answers written on the chart paper and share the valid and reliable resource they suggest. Tell them to be prepared to share how they know that resource is valid and reliable.

STEP 4

2 minutes **Closure.** Share the information on the final slide with students.

Optional: Teacher has the option to assign students Extension Questions to answer/consider to discuss and review in Lesson 3.

STUDENT STORIES

	Questions:	Possible student responses:	
Callie	What was going on in her life when she was experiencing depression? Why was it so hard for her to talk about those feelings?	Callie was bullied. Her parents divorced. She lost a friend to suicide. She really didn't know what she was feeling. She couldn't identify her feelings.	
	When she told her mom about her depression, how did her mom react?	Her mom didn't want to believe Callie was experiencing depression. She was defensive. Callie said her mom really didn't understand depression.	
	Who was the second person she talked to?	School Counselor.	
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.		
Mason	What was going on in his life when he was experiencing depression?	Mason experienced anxiety because of the pressure to achieve placed on him by himself and others. He felt pressure to be the best at everything.	
	Why was it so hard for him to talk about those feelings?	A lot of people at school did not understand depression. He had to find a therapist with whom he worked well.	
	What has he learned in therapy?	In therapy Mason learned coping mechanisms for anxiety and he learned where his anxiety came from.	
	What self-care strategies does Mason participate in?	Mason played sports and made music with his friends. He surrounded himself with friends who didn't treat him differently when he was anxious or depressed.	

If a friend at your high school felt depressed... List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.

LESSON 2 FACILITATOR INSTRUCTIONS

	Questions:	Possible student responses:	
Alan	What was going on in his life when he was experiencing depression?	Alan experienced the demise of his parents' relationship which eventually ended in divorce. He saw his dad less and less and worried about not having a family anymore.	
	How did it impact his daily life?	He didn't do well in school, which caused his Dad to be very hard on him. He felt like a failure and thought of self-harm and suicide at times.	
	What self-care strategies does Alan use?	He practiced mindfulness strategies such as self- talk and deep breathing to help him be in the moment and not think about the past.	
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.		
Jasmine	What was going on in her life to trigger the depression? What was going on in her life when she was experiencing depression?	Jasmine's mom was a single mother who experienced depression so Jasmine faced some challenges due to the impact of a parent who experienced depression. But what mostly triggered her depression was witnessing a traumatic, violent event in her community. (In the video she mention her dad having to go away)	
	Why was it so hard for her to talk about her feelings?	Jasmine didn't understand her feelings. She couldn't describe them. She felt confused.	
	How did it impact her daily life?	She shut everyone out because she didn't want anyone to know she was going through a hard time because of the stigma related to her community.	
	How does Jasmine explain stigma? What is stigma?	Stigma is a negative belief. In her community, Jasmine described that there was a stigma around depression. The community expected the members to be strong and independent. People couldn't talk about depression.	
	What self-care strategies does Jasmine use?	Her spirituality and people in her church gave her hope. She learned to take care of her body by eating healthfully and exercising. She also found that sharing her story helped her feel better.	
	If a friend at your high school felt depressed List two people or resources		

(websites, organizations, books, etc.) that would be a valid/reliable resource.

LESSON 2 FACILITATOR INSTRUCTIONS

	Questions:	Possible student responses:	
Edgar	What was going on in his life when he was experiencing depression?	Edgar moved from Mexico to the U.S. and had to leave some of his family behind. He also went through a breakup.	
	Why was it so hard for him to talk about those feelings?	He felt like he had no one to talk to after leaving his family. He also felt like someone like him wouldn't experience depression.	
	How did it impact his daily life?	He had no energy, he felt like he was moving in slow motion. He couldn't think clearly, and his sports performance dwindled.	
	Who did he seek support from?	Edgar sought support from his therapist. His coach was also a main supporter	
	What self-care strategies did Edgar use?	He focused on his goals, reached out to his family, used his desire to learn new things to keep his mind occupied.	
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.		
Mac	What was going on in his life when he was experiencing depression?	Mac struggled with gender identity. His family didn't communicate about feelings.	
	How might stigma (a negative belief) around the LGBTQ community impact Mac's daily life?	The stigma around LGBTQ could isolate Mac. Mac had no one to turn to because there were few people who understood what he was going through. The stigma made it hard for him to ask questions or seek advice.	
	Who did he seek support from?	Mac sought support from teachers, social workers, therapists, and an organization	
	Was it a positive experience?	The social workers were not a positive experience because they didn't understand him and he felt alienated. The organization was a positive experience because he found a group of people he could relate to.	
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.		

Extension Questions

- **1.** What were some of the signs and symptoms the students talked about in the video that clued you in that they were experiencing depression?
- **2.** What stood out to you from each student's experience or story? Was there any particular story that stood out to you the most?
- **3.** Which students reminded you the most of students at your school or in your community?
- **4.** The video only provided a glimpse into the lives of these 6 students. What kinds of follow-up questions would you want to ask these students about their experiences if you happened to run into them on the street?
- 5. What would you do if a friend was feeling suicidal and turned to you for help? If you think a friend is showing signs of suicide or hinting at suicide, you should know that it is okay to ask them, "Are you talking about suicide?" or "Are you hinting at suicide?"
 This will not put the idea in their head. It will actually help them feel cared for because you are showing them that you are paying attention and that you want them to feel better. Just know that you should always get additional help from an adult if a friend tells you they're feeling suicidal.
- **6.** Did any of the experiences the students talked about in the video remind you of things that have happened in your own life or in the lives of people you know?

CALLIE

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills

Callie experienced bullying and her parents' divorce also had an impact on her. She also lost a friend to suicide, which was something that contributed to her depression. Callie learned about the self-care strategies that work best for her when she is experiencing depression.





RECOGNIZING DEPRESSION My depression comes from a lot of different situations that piled up on top of each other. My parents' divorce was a main factor in my depression. I think a big part of that was I felt like an item, going back and forth between house to house.

I had some bad experiences with peers and people I thought were friends at the time. They were really mean to me and pushed me away and ostracized me. Something that's important to know is that bullying can look like a lot of different things, it's not necessarily what you imagine, like a kid getting picked on in the hallway or books being shoved down. Especially now with technology, a lot of it is behind screens and people just being mean and manipulative.



When I was a freshman in high school, I had a really good friend who was a senior. I really looked up to her. It was Thanksgiving and I was with my family, and I got a call from another friend telling me that my friend had taken her own life. The first thing I experienced with that was just shock.

For a while, I had depression but wasn't familiar with what it was, I didn't really have a name for it. I had some symptoms of depression, but I didn't know what it was or how to classify it.

IMPACTING DAILY LIFE I lost my passion for things I really cared about. [My depression] also definitely impacted school. I felt like I was sitting in class, trying to do a math problem, but I had so much more on my plate and so much more to deal with.

SEEKING HELP The first person I went to was my mom. I said, "Hey, this is what I'm feeling" and she kind of shut me down a little bit. She was a little defensive, she didn't want to believe that I was dealing with depression so she was kind of like "Nope!" I think inside she did really understand it, but she shut it down to me. I was a little discouraged, and was like "Is this not how I'm feeling or am I mislabeling how I'm feeling?"

I finally decided to go talk to someone else and I decided to talk to our school counselor, and she was awesome, so finally I was like, "Good. I can actually use this to get better." I talked to her about everything, and that was an amazing experience to be able to open up and have someone really say, "The way you feel is not your fault, and we're going to help you get better from here." So therapy was definitely really big for me.



FINDING SUPPORT School was [also] an incredibly supportive environment. I found love and peace and comfort in my teachers and coaches. I felt that I was in a safe haven within the walls of my high school, and I am incredibly grateful for that. I found support in my friends and I did find support in my family. My mom is definitely supermom. Sometimes this support was confusing and not exactly how it was needed, but I know that everyone around me meant well.

COPING SKILLS I love running. Running just kinds of brings me away from all the struggles that I'm dealing with and lets me get away from it. When I'm running, I'm not thinking about how hard of a day I had, I'm thinking about how great it feels to be out there running. It kind of just lets me connect with myself and turn inward and just exist

[My friend's suicide] kind of taught me that we don't know how much time we have left, so to make the best of the time that we do have. I decided to make sure I took advantage of all the time that I have because she doesn't have any time left, and I can't bring her back, but I can live the best life that I can, to try to take advantage of that time.

[Because of my depression] I definitely learned about myself that I'm a lot stronger than I thought I was. I'm learning that I'm capable of getting through a lot. I think the capability to deal with difficult situations has always been there, I just didn't know it. It's important for us all to know that we are capable of overcoming and that we will overcome.

It can be really scary to open up to someone. Telling someone that you have depression makes it more real, it makes



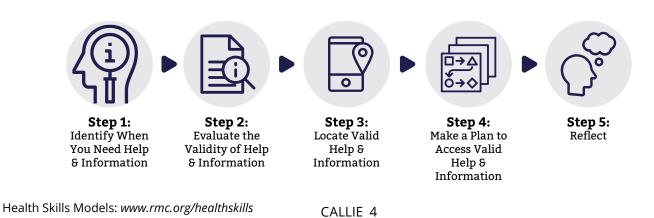
it difficult to say to someone that you are depressed because that makes it a really real thing. But if you're feeling scared or worried about it, I think it's really important to know that there are so many people around you that care about you, whether it's parents, teachers, a coach, a relative, there are a lot of adults who can help and want to help. It's all about taking the first step and deciding you are going to get help.

LOOKING FORWARD My depression does not define me. No one's mental health struggles define them. We are all more than our struggles. We all have stories to tell.



Reflection Questions

- 1. What was going on in her life when she was experiencing depression?
- **2.** Why was it so hard for her to talk about those feelings?
- **3.** When she told her mom about her depression, how did her mom react?
- **4.** Who was the second person she talked to?
- **5.** If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



MASON

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills



Mason experienced depression and anxiety while in high school. He also learned that depression runs in his family. He found comfort in knowing his friends stood by him and never judged him for his depression. Mason shares how finding the right fit in a therapist and having a plan after hospitalization is important.



RECOGNIZING DEPRESSION My depression comes from overwhelming amounts of anxiety and pressures put on me by myself and others. Pressure to achieve was a lot on myself as well as a lot on my family. I think I assumed it was a lot more [from] my family than they really expected me to do. I mean I always wanted to be the best in sports, school, everything, so I always felt the need to do better and be better, and be the best.

With school and sports, I would be overwhelmed and because of that I created anxiety for myself. And all that anxiety building up led to me being too overwhelmed and leading toward my depression, I would say.

Anxiety feels like your body is moving really fast, internally, like you have all these thoughts racing through. When I feel anxiety, I can almost visually see my head spinning at times. [Depression feels like] being really down at times, not necessarily being down 24/7, but a sense of hopelessness and feeling like you're never going to be happy again at times.

IMPACTING DAILY LIFE My depression definitely affected my school life the most, socially and academically. It became a lot harder to focus or do anything. A lot of people at school still don't really understand what depression is and that was definitely a challenge.

SEEKING HELP I've gone through a few therapists. When I had my first big depressive episode, I was on my second therapist and I quickly realized after being hospitalized that she was not necessarily [the best fit], so I found a new therapist.

The most important things I've learned in therapy are my coping mechanisms, and also figuring out where my anxiety was coming from. I had so much anxiety I wasn't able to tell what caused it. A big part of therapy was figuring out what this anxiety was building off of and why, and how to reduce it. Sometimes it takes longer to find someone who will work out and be a good match with you.

became depressed around my freshman year of high school, my dad sat me down and really told me what his depression was like. My dad is [very] supportive and he can sense when I'm feeling down, he reminds me to see my therapist.



MASON 2



COPING TOOLS My friends were a big part in my return to being healthy, just helping me cope with everything. They weren't necessarily a support [that] I talked to about my depression, but the fact that they were always there and never looked at me differently or treated me differently.

I feel most happy when I'm doing something that I love, when I lose time doing something because I'm having so much fun. For example, like playing sports or making music with my friends really puts me in a happy spot. It almost puts you in a different mindset where you're not processing what's happening in the outside world, you're just focused on what's happening right there, and when you're in that state of mind, that's the happiest.

[When I was feeling suicidal] I thought about how [suicide] would affect everyone. And even though I was extremely down, I realized it would affect so many different people in so many different ways. I thought about my close family, my sister, and how it wouldn't just affect her for a couple years but for her entire life.

The purpose of being hospitalized is to find a plan for the future because usually when you're hospitalized you're at your lowest point. When you're at your lowest point, you want a plan to get back to being healthy again. It's mainly to get that process started and figure out a way to keep getting treatment after you get out of the hospital.

Going through depression you assume you're weak because you're going through that, but afterwards, you learn that, one, it's not your fault, and two, that you're pretty strong that you went through depression. You're pretty cool.

LOOKING FORWARD I'm ready for so many more things in the future, I know how to handle myself in situations. I learned that I'm capable of doing a lot more than [I think] I'm capable of. Now I know that life isn't smooth sailing, but that I know how to handle those situations when they arrive.

[When you're going through depression] make sure you keep up with friends and socialize and don't put so much pressure on your school life. School is important, but having friends and being social and being able to get out and talk to people is just as important as learning in the classroom.

What I would recommend if I had a friend going through what I had gone through, I would say treat them how you've always treated them because they don't want to feel like they're any different. Don't feel like you have to be a therapist to them, they just want you to be there as a friend, to have someone to hang out with and do fun things with.



Reflection Questions

- 1. What was going on in his life when he was experiencing depression?
- 2. Why was it so hard for him to talk about those feelings?
- **3.** What has he learned in therapy?
- 4. What self-care strategies does Mason participate in?
- **5.** If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



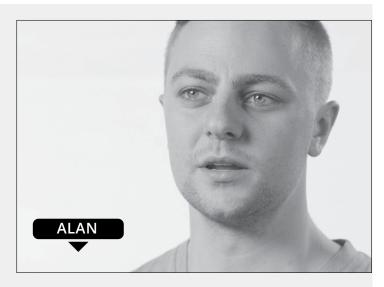
ALAN

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills

Alan's story involves his parents' divorce and the impact it had on him. His experience helps us understand what it might feel like when someone is experiencing depression. He learned a lot about the power within himself and relies on practicing mindfulness to help cope with his depression and suicidal thoughts.





RECOGNIZING DEPRESSION When I was really young (between kindergarten and 5th grade), I had probably the ideal life as a young child. There were some dysfunctionalities, like there are with every family, but I wasn't really aware of them.

Once I got into 6th grade, everything started to really fall apart. My parents began to fight, and my brother and I were often brought in as ammunition for our parents to use against each other in arguments. With all of this, my mom primarily raised me. My dad was around a little but he was around less and less as my parents' relationship worsened. I was also worrying about not having a family anymore, that's what it felt like.

IMPACTING DAILY LIFE In 7th grade, when I didn't do well in my classes, my dad would get really hard on me. My parents, they were experiencing their own battle. They weren't really attentive to what I was going through and I don't blame them for that in any way. But because of that, if I didn't do well in school, my dad thought his role was to crack down really hard.

There's not a single good thing I can say about myself when I'm experiencing depression in its heaviest wave. Like "I'm a failure."

I did have moments of thinking about suicide and self-harm. You have to understand, that's a really distorted place to be. There's nothing logical about that.

SEEKING HELP AND FINDING SUPPORT [Therapy for me] looked like a psychologist, a therapist, who helped me notice how I was feeling and what was going on—becoming aware of myself and what was going on. I like to look at psychologists or therapists as teachers, someone who is there to coach you.

In getting better, it's not everybody's responsibility to get you better. In the end, it's in your head, it's in your experience, your own reflection of yourself, your self-talk, and for a long time, I think I just wanted other things or other people, like the medication or the therapist or people around me [to fix everything for me],

and that was a barrier for a long time.

COPING SKILLS The things that I do personally to help manage my depression, the first one is mindfulness. I do a lot of deep breathing, centering into the moment. A lot of fear in general, depression comes a lot from thinking about the past, the future, interchangeably, and mindfulness is a great way to bring you right back into this moment. I couple mindfulness and gratitude together, if I'm sitting there, breathing, centering myself in the moment.

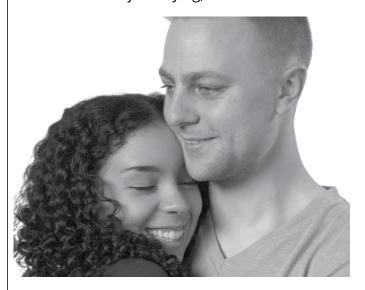




I love [my girlfriend] Amanda—someone who is really close to me and understands me on a level a lot of people don't. I [also] found a lot of indirect support from my best friend and his family. I spent a lot of time over at his house and it served as a safe haven for me when I was in really bad binds. I also found help from other friends, and my brother and I became close.

The most difficult thing about being a male with depression is that you're not allowed to have it [as a male]. In our society, it's very important to "be a man," to not have feelings. There's a lot of pressure on men to be that way.

Some people would argue that emotions can get in the way of productivity or get in the way of whatever, but I think that regardless of whether they get in the way of anything, it's still real, and it's still there. Instead of saying "You should just shove it under the rug and stop thinking about it and block it out," I think we should at the very least say, "Tell me everything about how you're feeling. Great, now how do we want to deal with it?" Instead of just saying, "Let's kick it under the rug."



The biggest way that depression has changed the way that I look at the world is that people are often going through a lot more than you think they are.

I want to help people who may be experiencing what I have experienced in the past or what I'm experiencing on a daily basis, help them to see the light at the end of the tunnel and not feel trapped and lost—to feel encouraged. To give them hope that it isn't all bad, it doesn't last forever.

I would tell someone who is having suicidal thoughts or impulses that they are worth keeping around. I would tell them that everything is going to be okay, that there are people who love you and care about you, that want you here. Even if you don't want you here right now, you will find later in life that it was a lot better to stick around.

LOOKING FORWARD The biggest thing I learned about myself through depression was that I'm awesome. But in that everybody's awesome. That we have so much more power than we give ourselves credit for. One of the things that depression really attacks is our vision of ourselves and our vision of what we can and cannot do. And what I have learned is that we can do anything, anything! We, I, all of us are really awesome.



Reflection Questions

1. What was going on in his life when he was experiencing depression?

2. How did it impact his daily life?

3. What self-care strategies does Alan use?

4. If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



Health Skills Models: www.rmc.org/healthskills

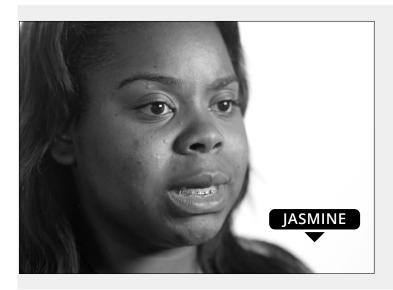
ALAN 4

JASMINE

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills



Jasmine experienced depression after being affected by community violence. She also faced some challenges when trying to get help, but connecting with a therapist provided a safe space for her to talk about her feelings.



RECOGNIZING DEPRESSION I grew up with a parent who experienced depression. As an only child in a single parent home, that can be very difficult because that's your only person, she was a single mother, so that's the only person that I really had communication with and to be cut off like that [because of her depression], I definitely picked up some of those traits. I go through bouts where I'm significantly sad.



[I also had an] experience with community violence [that] was definitely heartbreaking. That's what started me going down in a spiral because it was something I didn't understand, couldn't put an answer to. I feel like when we can't find answers, that's when we get the most confused. When you experience and witness these traumatic events, when you are constantly enduring these traumatic events, you can't help but to feel some type of way about it and to be hurt about it.

IMPACTING DAILY LIFE [When I'm depressed], I shut everyone out. I don't want people to necessarily know that I'm going through a hard time, sometimes especially if I can't identify why I'm going through this or why everything is very emotional for me and bothering me. I just shut down. **When you're feeling feelings of depression, it leaves you confused.** It leaves you lonely. It leaves you upset. It leaves you broken feeling.

I think in the black community we're told that we have to be strong, we have to be independent, and these things are drilled in our head constantly, so when there's something that's happened traumatically, we feel like we're not being strong ... we're not being independent ... we're letting down our families ... we're not being who we're supposed to be.

To think that you're anything less than another person because you're going through depression is really sad for me to hear, especially when so many people experience the same thing. With the stigma in my community about depression, we're all going through something, we're all hurting, but we don't want to say what we're going through, we want to act like we're not struggling with this. And it's just hard.

Stigma for me looked like, "What goes on in this house, stays in this house," and it looked like that for a lot of my friends, too. So a lot of the hurt my friends went through I didn't find out about until years later, even though I was going through it with them, not knowing I was going through it with them.



SEEKING HELP I felt like I had a great connection with a lot of my teachers. They started to notice subtle changes in me and they reached out to me. I didn't want to share what I was going through, and I felt like I was embarrassed. I felt like I was being successful at hiding my depression, but apparently not.

FINDING SUPPORT Therapy for me was a lifesaver. It was a challenge with my family because they weren't supportive of my decision to continue therapy. However, after talking with my parents and grandparents about why this is important to me and how this is changing me, I was able to have some therapy sessions with them as well. So it definitely played a big role in me feeling better.

Something that surprised me about therapy was how much I loved it. I was just so addicted to being able to express myself, and just getting it off my chest, I didn't want to hold in those feelings anymore. It was definitely comforting to be able to talk to someone and not be afraid that other people were going to find out. It's non-judgmental.

COPING SKILLS Church and my spirituality definitely helped me overcome my hard times. I feel like church gave me hope, it was a place where I was amongst people who were going through something and I could see their pain and I could see them growing, and hope that knowing that, "Yes, I'm going through something. I'm not alone. And God is going to look out for me, He's there for me." I also started [living] a healthier life. I became invested in reading my Bible, I became invested in the things that I put into my body, I became invested in working out.



Something that I thought wouldn't help was sharing my story. [When I started to share my story] I was able to see how so many people have gone through something similar to what I went through and could use my life and the way I got through it as an example, and it really helped me.

LOOKING FORWARD If I had to say something to someone who was afraid to get help, I want to say that you're already on the right track. You're thinking about "How can I change my life?" or "How can I overcome this?" So congratulations. This is your life, and it's a precious gift.

I've learned that life throws everyone curveballs. No matter how rich, beautiful, popular, or another label that is desired, everyone goes through something or is born with something.



Reflection Questions

- 1. What was going on in her life to trigger the depression?
- 2. Why was it so hard for her to talk about her feelings?
- **3.** How did it impact her daily life?
- 4. How does Jasmine explain stigma? What is stigma?
- **5.** What self-care strategies does Jasmine use?
- **6.** If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



Health Skills Models: www.rmc.org/healthskills

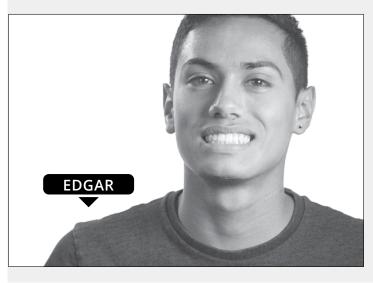
JASMINE 4

EDGAR

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills



When Edgar was a teenager, he moved from Mexico City to the United States. His experience moving and having to leave some of his family behind in Mexico contributed to his depression. His story shows how he came to understand his depression and how family and mentors can play an important role in getting help.



RECOGNIZING DEPRESSION I come from Mexico City [and] a really loving family, a lot of support.

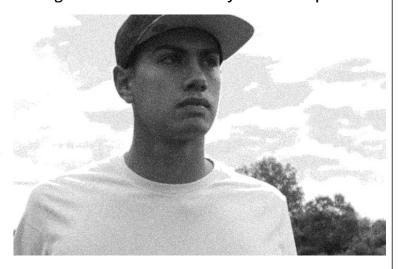
The first interaction with depression I was about 14, 13. I was in Mexico. All of a sudden, I felt something was wrong. I thought it was mostly because of my relationship. I loved this girl with all my heart, but then for one reason or another, things didn't work out, especially with me moving to the United States, I knew that was going to be a tough transition.

Latinos, we know family, community. Leaving that behind, no matter where you go, even if you're leaving for the greatest thing, you're not going to have your family with you. That is the hardest part I think. That support. It's people who know when you're sad, when you're happy, they know everything about you. So not having that support [after you move], it's tough.

IMPACTING DAILY LIFE I knew that my grandma and my mom would have a hard time [with me leaving Mexico] because I'm their only son and their only grandson. So I knew that was going to be tough on them, so I was kind of sad for that reason too. I felt slow, my mind was clogged. My mood wasn't as happy, or as energetic. My thoughts were of guilt, thinking I could have done things different to sustain my relationship

[with my girlfriend in Mexico]. I was clumsy in my movements, I did not want to do as many activities.

My mom was a little angry and surprised. She had never seen [me depressed] like that, and she told me about how I was not focused. Coaches told me the same thing, my level of play wasn't as it used to be and they wanted me to perform well. The desire to learn wasn't as strong.



SEEKING HELP AND FINDING SUPPORT The inner struggle was that I was someone who I didn't think would have depression. I am outgoing. But it was happening to me. [For me, getting help was] going to therapy, meeting with my therapist. I miss her, she was a big part of my recovery from that state of mind. I remember the first sessions were just like basic stuff, getting to know me. After a while, that's when I really started opening up about the core of my depression.



I did cry. It got me. It really did. Because we all feel, and my message is, allow yourself to feel. When that happens, when something isn't as good as you want it to, like depression, talk about it, let it go. It's like putting weight away.

COPING SKILLS My goals, my family, the desire to do well for me and those around me [give my life meaning].

What I do to keep balanced is, I like to learn things all the time. I'm a curious person. Learning new things, they keep your mind positively occupied.



Depression will not look to your skin color, to your background, that will not matter to depression. What people misunderstand about depression sometimes is that [they think] if you have depression, you're weak, or something along those lines. Something about being less than the person next to you. That is not true. The point is anyone can have depression, we're all different of course so there are different reasons for what triggers depression.

A lot of people need to hear [about what it's like to be depressed] from someone who looks like them, in my case, in my culture, Latinos. I know what it's like, I know the struggles. I'm trying to get this message to everyone, but especially to my people, the people I know.

LOOKING FORWARD I learned that I'm stronger than I thought I was. Once you overcome depression, you feel like you can do anything. You've been on the low, but now it's time to enjoy when you're on the rise.

Love yourself at all times because you don't want to do anything that harms yourself. Do not hold onto feelings of hate. Take care of your body because it's who you're going to be for the rest of your life.



Reflection Questions

- 1. What was going on in his life when he was experiencing depression?
- 2. Why was it so hard for him to talk about those feelings?
- 3. How did it impact his daily life?
- 4. Who did he seek support from?
- 5. What self-care strategies/coping skills did Edgar use?
- **6.** If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



Health Skills Models: www.rmc.org/healthskills

EDGAR 4

MAC

Today you'll work in small groups and read more about one of the students from the video. In your small group, take turns reading aloud each part of your student's story. When you're finished reading, discuss the reflection questions posted on the wall and jot down your group's answers on the chart paper on the wall.



Health Skills Models: www.rmc.org/healthskills

Mac has experienced depression for much of his life which he says is connected to his struggles with his gender identity. He grew up in a high pressure community and had a hard time finding the right people to help him. Here he shares his story about how he found hope and help to get through his most difficult times.





RECOGNIZING DEPRESSION My depression comes from long-term stress. My depression comes from a family that doesn't talk about feelings. [My depression comes from living in a community with] little or no information/exposure to anything LGBT. My depression comes from my struggles with my gender identity.

[My] days were pulled down by the intensity of my gender dysphoria; people not seeming to get that I wasn't a girl.

Both my depression and my gender identity are things that show up in my first memories. With my gender identity, I've had, I have very severe gender dysphoria, which is a severe discomfort with your body, in the fact that your body is not lining up what the map in your mind has it to be. It's not exactly what you think it should be. And so my gender identity—the dysphoria that came with it got more intense with time, especially in middle school ... and my depression got intense at the same time.

IMPACTING DAILY LIFE My baseline stress level was at such a high point that anything would tip it. One of my close friends said, "Everything is a catastrophe for you." I'd reach a lot of little breaking points over time. If you're constantly tipping over, overflowing with stress, over time, you reach a point where you don't want to deal with it anymore, and you start considering things like suicide.

I felt really helpless. Especially in the face of my family not wanting to deal with the fact that I am transgender. It was too hard for them to wrap their minds around

SEEKING HELP Getting help was difficult. In high school, my family didn't want to recognize that I had depression. None of my family talked about their own. There was a stone wall—don't ask, don't tell policy—which made it hard for me to ask them for advice, help, connection, and resources.

I had a few teachers who reached out to me and really understood who I was—some just encouraged my talents and interests, some did tell me that life would get better and that it's not always as rough. It helped me to feel seen.

[Overall] in school it was really difficult because I met a social worker who believed that they were helping me, but they actually really alienated me, and they didn't listen to me at all. They didn't know what to do with me. So for a couple years I bounced around but a lot of people were trying to help me in ways that weren't helpful, a lot of different therapists, three I think.





rinding support [There were] two things that really helped me. The first thing that really helped me was empowering myself. I got involved in an organization that talked about mental health and taught people what mental health was. It gave me a tangible way to fight back at something [depression] that was



so intangible. Getting involved in things that matter to you, where you can see yourself making a difference in some way, really helped me a lot.

The second thing was I took a lot of time to think about why people were reacting the way they were reacting to me. Especially with my family, it helped me to recognize that they were as helpless as I was in this situation. They had never faced this before. Most people I talked to didn't know what being transgender meant. I had to recognize that they were going to need a lot of time to wrap their minds around a concept they had never heard of, that was terrifying to them, and that there really was no research about.

It was terrifying to me too, it wasn't something I had wanted for myself. They were very clear that they loved me a lot, and although the way they were reacting and acting didn't feel like love at all, I had to remember that they were coming from a place that they thought they were doing the right thing for me.

COPING SKILLS What helped me is that people's reactions are their reactions. They're not connected to you. Their reactions aren't about you, it's about their history, their ideas, their preconceived notions. You have to take their reactions with a grain of salt. Reframing things helps a lot.

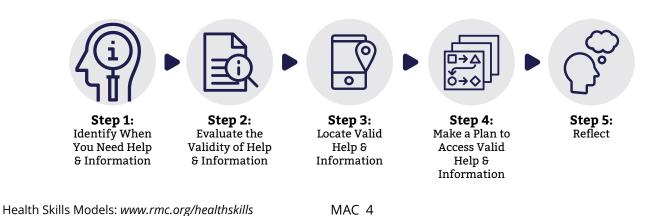
Reading a lot ... I used information and I think information became really powerful for me, helped me cope with feeling out of control, how to cope with feeling stressed. I actually learned a lot of [positive] coping methods that [from books]. I found activities that really grounded me and helped me connect with my body—especially sports. I feel most happy and connected when I'm with people I really feel comfortable around.

LOOKING FORWARD I've had a lot of luck finding a few close friends—we call it "no filter"—you don't have a filter, I don't have to filter myself when I'm around them or when we're talking. It makes me feel really good because I feel more connected to them and more connected to myself.



Reflection Questions

- 1. What was going on in his life when he was experiencing depression?
- **2.** How might stigma (a negative belief) around the LGBTQ community impact Mac's daily life?
- 3. Who did he seek support from?
- **4.** Was it a positive experience?
- **5.** If a friend at your high school felt depressed... list two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.



3

Lesson 3 Overview and Objectives

Lesson 3 of the Erika's Lighthouse Level III program is designed to raise students' awareness of what might help them when they're having a difficult time, including what kinds of people they find supportive during times of stress. This lesson begins with a review of the answers to the stories on the video. It gives students the opportunity to listen to a variety of students from different backgrounds and the similar and sometimes different experiences they have with depression.

Students will learn more about self-harm and suicide during this lesson with reinforced opportunities to seek a trusted adult when themselves or someone they know might need it.

NATIONAL HEALTH EDUCATION STANDARDS ALIGNMENT **STANDARD 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

STANDARD 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

LEARNING OBJECTIVES

Students will be able to:

- Share their answers from the lesson prior and identify a valid and reliable resource to help teens; and
- Participate in an activity that reviews content from these 3 lessons.

Note to Teacher: If you had students complete or consider the extension questions in Lesson 2, you may want to refer to them before jumping into Step 1.

TOTAL INSTRUCTION TIME
45 minutes

TEACHING STRATEGIES

Small Group Activity Debrief

Video

Polling Activity

Find Someone Who Review Activity

EQUIPMENT, MATERIALS & PREPARATION

- Audio/visual equipment
- Lesson 3 slideshow and a way to show it Note: on slide 12, type in the name(s) of the school counselor, social The valid and reliable trusted adults in our school are: worker and/or psychologist students Place your school counselor, social worker and/or psychologist's names here. can go to.
- The Erika's Lighthouse Level III Lesson 3 video segment on suicide, self-harm and getting help
- Student Packet; one for each student
- Research 3 resources prior—A national hotline, local psychologist/ social worker, trusted adult at school
- Copies of *Find Someone Who* document; one per student
- If using an online polling application tool, prep prior by placing this question into the application: What are two signs to look for in yourself or friends regarding depression or self-harm?
- Copies of Lesson 4 Performance Assessment (if introducing today); one per student.

LESSON 3 OUTLINE

STEP 1 (2 minutes per group)

12 minutes Debrief of Lesson 2 group work—Each group shares their answers on chart paper from Lesson 2 and their resource. Each group should be ready to share how they know their resource is valid and reliable. You may want to compile a class list of these resources. Encourage students to use social media to share these resources with other students.

STEP 2

2 minutes Introduce the terms suicide and self-harm. (refer to slideshow)

Suicide: Suicide is defined as death caused by self-directed injurious behavior with intent to die as a result of the behavior. - NIMH **Self-harm:** When people intentionally hurt themselves or put themselves in dangerous situations because they are feeling a lot of pain and don't know what else to do. It is often a sign of emotional distress. – NAMI Explain that these terms will be discussed in the next portion of the video.

LESSON 3 OUTLINE (continued)

STEP 3 9 minutes **Show** the last video segment (Level III Lesson 3)

After the video, have students answer the following question via either Poll Everywhere, Kahoot!, or another online technology tool, if you have access. You would need to set up the question within the application prior. If this is not accessible to you, have students write their answers on a post-it note, or index card, turn in and share out.

The question is:

What are two signs to look for in yourself or friends regarding depression or self-harm?

Debrief this activity by reviewing the warning signs students share.

Note to teacher: During the sharing out, be prepared that students may ask questions, or your class may go into a more in-depth discussion around certain topics. Some heavier topics might come up or some students might be more affected by the topic. But it is not the teacher's job to diagnose. Know school protocol for referring at-risk kids and for referring students you are concerned about. Consider involving a school social worker or counselor in these types of discussions.

STEP 4

20 minutes Hand out the Find Someone Who document to each student. Have students place their names at the top. Explain that their goal is to get up, walk around and find others in the room that can answer the question in a box. When you find peers that know answers, have them write their answers in the box and write their initials. The goal is to get all boxes filled.

> Students' task is twofold: to answer questions for their peers' documents and to get their own document completed by others.

Give students about 12 minutes to complete.

Once finished, go through each box and debrief answers.

LESSON 3 FACILITATOR INSTRUCTIONS

Find someone who	Examples may include:	
can define self-care.	Getting enough sleep. Asking for help when it is needed. Eats well. Exercises. Handles stress well. Communicates needs in a healthy way.	
can list a resource not at the school.	Erika's Lighthouse website. NAMI website. Following specific organizations on social media, National Suicide Prevention Hotline.	
is willing to share what they do for self-care.	Sleep. Hanging with friends. Staying drug-free. Spending time alone when needing to recharge. Doing yoga. Exercising. Good self-hygiene.	1
can list a warning sign of depression.	Not participating in activities a person usually loves. Feeling sad for multiple days at a time. Losing appetite. Feeling hopeless, sadness, moodiness. Sleeping too much or too little. Feelings of worthlessness or guilt. Note: If not all of these are shared, share those	
	not listed again as a review.	
can share a cause for depression.	Sometimes there isn't a specific incident or cause. Loss of a loved one. Traumatic event. Family history. Community violence. Stress.	

Examples may include:

Note: Teacher may want to ask a follow up

How do you know this adult is a trusted adult?

They are licensed as a mental health provider.

They are trustworthy and have information they

The same information is in multiple sources.

Stigma is a mark of shame associated with a

particular circumstance, quality, or person.

They aren't promoting a product to sell

The author's background is reputable. It's from an organization that is trusted.

Any staff at school.

when debriefing:

could share.

Examples may include:

Information is up to date.

The resources are clear.

question

Find someone who ...

can name a

trusted adult

at the school.

can define what

it means when a

resource is valid.

can define what

it means when a

can explain what

stigma means.

resource is reliable.

STEP 5

Introduce the Performance Assessment for Lesson 4.

Explain that students will have an opportunity to demonstrate their new knowledge and skills related to the past three lessons during the Lesson 4 performance assessment.

Hand out performance assessment if you would like students to review prior to lesson 4.

TIP FOR TEACHERS

Now might be a good time to utilize one of the Awareness into Action activities, such as the Footprint Activity. This shows students how to get to the people in the school building to can help, such as a social worker or counselor.

https://www.erikaslighthouse.org/wp-content/uploads/2019/02/Footprint-Activity.pdf

POST-TEST: WHAT HAVE YOUR STUDENTS LEARNED?

Take 3 to 5 minutes to have students fill out the survey through the QR code in the student packet. Or share this link:

http://elhhspost.info/



3

LESSON 3 FACILITATOR INSTRUCTIONS

REVIEW FROM LESSON 2 STUDENT STORIES

	Questions:	Possible student responses:
Callie	What was going on in her life when she was experiencing depression? Why was it so hard for her to talk about those feelings?	Callie was bullied. Her parents divorced. She lost a friend to suicide. She really didn't know what she was feeling. She couldn't identify her feelings.
	When she told her mom about her depression, how did her mom react?	Her mom didn't want to believe Callie was experiencing depression. She was defensive. Callie said her mom really didn't understand depression.
	Who was the second person she talked to?	School Counselor.
	If a friend at your high school felt dep (websites, organizations, books, etc.) t	pressed List two people or resources hat would be a valid/reliable resource.
Mason	What was going on in his life when he was experiencing depression?	Mason experienced anxiety because of the pressure to achieve placed on him by himself and others. He felt pressure to be the best at everything.
	Why was it so hard for him to talk about those feelings?	A lot of people at school did not understand depression. He had to find a therapist with whom he worked well.
	What has he learned in therapy?	In therapy Mason learned coping mechanisms for anxiety and he learned where his anxiety came from.
	What self-care strategies does Mason participate in?	Mason played sports and made music with his friends. He surrounded himself with friends who didn't treat him differently when he was anxious or depressed.

If a friend at your high school felt depressed... List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.

LESSON 3 FACILITATOR INSTRUCTIONS

	Questions:	Possible student responses:		
Alan	What was going on in his life when he was experiencing depression?	Alan experienced the demise of his parents' relationship which eventually ended in divorce. He saw his dad less and less and worried about not having a family anymore.		
	How did it impact his daily life?	He didn't do well in school, which caused his Dad to be very hard on him. He felt like a failure and thought of self-harm and suicide at times.		
	What self-care strategies does Alan use?	He practiced mindfulness strategies such as self- talk and deep breathing to help him be in the moment and not think about the past.		
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.			
Jasmine	What was going on in her life to trigger the depression? What was going on in her life when she was experiencing depression?	Jasmine's mom was a single mother who experienced depression so Jasmine faced some challenges due to the impact of a parent who experiences depression. But what mostly triggered her depression was witnessing a traumatic, violent event in her community. (In the video she mentions her dad having to go away)		
	Why was it so hard for her to talk about her feelings?	Jasmine didn't understand her feelings. She couldn't describe them. She felt confused.		
	How did it impact her daily life?	She shut everyone out because she didn't want anyone to know she was going through a hard time because of the stigma related to her community.		
	How does Jasmine explain stigma? What is stigma?	Stigma is a negative belief. In her community, Jasmine described that there was a stigma around depression. The community expected the members to be strong and independent. People couldn't talk about depression.		
	What self-care strategies does Jasmine use?	Her spirituality and people in her church gave her hope. She learned to take care of her body by eating healthfully and exercising. She also found that sharing her story helped her feel better.		
	If a friend at your high school felt depressed List two people or resources			

LESSON 3 FACILITATOR INSTRUCTIONS

	Questions:	Possible student responses:		
Edgar	What was going on in his life when he was experiencing depression?	Edgar moved from Mexico to the U.S. and had to leave some of his family behind. He also went through a breakup.		
	Why was it so hard for him to talk about those feelings?	He felt like he had no one to talk to after leaving his family. He also felt like someone like him wouldn't experience depression.		
	How did it impact his daily life?	He had no energy, he felt like he was moving in slow motion. He couldn't think clearly, and his sports performance dwindled.		
	Who did he seek support from?	Edgar sought support from his therapist. His coach was also a main supporter		
	What self-care strategies did Edgar use?	He focused on his goals, reached out to his family, used his desire to learn new things to keep his mind occupied.		
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.			
h k c c	What was going on in his life when he was experiencing depression?	Mac struggled with gender identity. His family didn't communicate about feelings.		
	How might stigma (a negative belief) around the LGBTQ community impact Mac's daily life?	The stigma around LGBTQ could isolate Mac. Mac had no one to turn to because there were few people who understood what he was going through. The stigma made it hard for him to ask questions or seek advice.		
	Who did he seek support from?	Mac sought support from teachers, social workers, therapists, and an organization		
	Was it a positive experience?	The social workers were not a positive experience because they didn't understand him and he felt alienated. The organization was a positive experience because he found a group of people he could relate to.		
	If a friend at your high school felt depressed List two people or resources (websites, organizations, books, etc.) that would be a valid/reliable resource.			

Support

Lesson 3 of *The Erika's Lighthouse Program* is designed to raise your awareness of what might help you when you're having a difficult time, including what kind of people you will find supportive during times of stress.

You will learn more about self-harm and suicide during this lesson with reinforced opportunities to seek a trusted adult when you or someone you know might need it.

Suicide

Suicide is defined as death caused by self-directed injurious behavior with intent to die as a result of the behavior.

— National Institute of Mental Health (NIMH)

Self-harm

When people intentionally hurt themselves or put themselves in dangerous situations because they are feeling a lot of pain and don't know what else to do. It is often a sign of emotional distress.

— National Alliance on Mental Illness (NAMI)



What have you learned? this code to answer a short surv

Scan this code to answer a short survey or go to

http://elhhspost.info



NAME			
INAIVII			

Find someone who ...

can define self-care.	can list a resource not at the school.	is willing to share what they do for self-care.
initial	initial	initial
can list a warning sign of depression.	can share a cause for depression.	can name a trusted adult in the school.
initial	initial	initial
can define what it means when a resource is valid.	can define what it means when a resource is reliable.	can explain what stigma means.
initial	initial	initial

Lesson 4 Overview and Objective

Lesson 4 of the Erika's Lighthouse Level III program is designed to assess students' knowledge and accessing information skill gain from the previous 3 lessons. It is up to the teacher whether students will work individually, in pairs or groups on this assignment. It has been developed for student choice. However a teacher might select one of the four options to assign to students. Students should receive the description or prompt of the assessment/product they will turn in as well as the rubrics that accompany them.

NATIONAL HEALTH EDUCATION STANDARDS ALIGNMENT **STANDARD 1:** Students will comprehend concepts related to health promotion and disease prevention to enhance health.

STANDARD 3: Students will demonstrate the ability to access valid information, products, and services to enhance health.

LEARNING OBJECTIVE

Students will be able to:

 Demonstrate their knowledge and accessing information/resources skill gains.

TOTAL INSTRUCTION TIME
45 minutes

TEACHING STRATEGIES

Performance Assessment to gauge student knowledge and skill gains.

EQUIPMENT, MATERIALS & PREPARATION

Copies of Lesson 4

Performance Assessment,

one per student

(if not handed out prior).

4

LESSON 4 OUTLINE

STEP 1 40 minutes Introduce the performance assessment if not done prior.

Explain that students will have an opportunity to demonstrate their new knowledge and skills related to the past three lessons.

5 minutes Encourage students to consider starting or joining an existing Erika's Lighthouse Teen Empowerment Club.

Also check out the 40+ Awareness Into Action activities.

Remind students about the Depression Toolbox on erikaslighthouse.org.



Check out our Awareness into Action Activities to encourage breaking stigma and promoting good mental health!

https://www.erikaslighthouse.org/portal/

Erika's Lighthouse Performance Assessment

Choose one of the four options in the boxes below to demonstrate your knowledge and skill gain during this program.

You are an author of self-help books that promote well-being. Create a one-page overview about your new full-length book that shares the experiences of someone with depression. This overview document is meant for you to market your book around the United States to bookstores and people interested in buying your book. You will submit a one-page overview document.

Make sure the overview includes:

- A story about a main character with depression
- 4 warning signs of depression for the character
- Two causes of depression for the character
- Two valid and reliable resources, products, people or places for the main character to go for support
- Explanation of why these two sources are valid and reliable.

You are a newscaster or radio broadcast reporter reporting a story about depression.

Your audience includes adults watching the nightly news or listening on the radio coming home from work. You will submit a sound byte of your radio broadcast or a video of your newsreel.

Make sure your broadcast includes:

- A story, or information on depression to adults in the community.
- 4 warning signs of depression
- · Two causes of depression
- Two valid and reliable resources, products, people or places the audience may go to for support.
- Explanation of why these two sources are valid and reliable.

You are concerned about a friend possibly being depressed. Using voice memo on your phone, or creating a video on Flipgrid, construct a caring message to them that is at least 1.5 minutes in length.

Make sure your message includes:

- That you care about them and why you wanted to reach out
- 4 warning signs of depression that you recognize
- Two possible causes of depression
- Two valid and reliable resources, products, people or places your friend could access easily
- Explanation of why these two sources are valid and reliable.

Use Storyboard (or draw) to develop a comic strip story that addresses depression among people your age.

Make sure your comic strip includes:

- A story on depression to peers your age
- 4 warning signs of depression
- Two causes of depression
- Two valid and reliable resources, products, people or places the audience may go to for support.
- Explanation of why these two sources are valid and reliable.

4

Performance Assessment Rubric

	Content	Assessing Resources
4 (EXCEEDS)	I included four or more accurate warning signs of depression. I included two or more accurate causes of depression.	I listed at least two local or regional resources/products/people or places that can help someone. I clearly explained giving at least two reasons for validity and two reasons for reliability why my two sources are valid and reliable.
3 (MEETS)	I included at least four common warning signs of depression. I included at least two common causes of depression.	I listed two or more resources/ products/people or places that can help someone. I explained at least two reasons for validity and two reasons for reliability why my two sources are valid and reliable.
(CLOSE TO MEETING)	I included two or three common warning signs of depression. Or some of my warning signs were not all accurate. I included only one common cause of depression. Or my causes were not all accurate.	I listed one resources/products/people or places that can help someone. I explained why my two sources are valid and reliable, but the explanations might not have been thorough or accurate.
1	I included only one or no warning sign of depression. Or all of my warning signs were not accurate. I included only one, or no common	I listed one or no resources/products/ people or places that can help someone. Or my resources weren't accessible for the audience in my project.

cause of depression. Or all of my

causes were not accurate.

(NOT YET

MEETING)

4

4

I did not explain why my sources

are valid and reliable.

Performance Assessment Tools

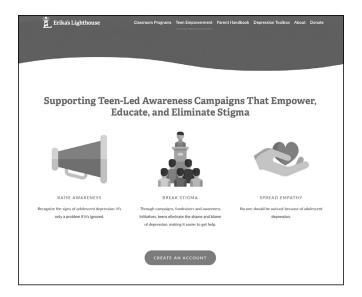
TEEN EMPOWERMENT

Dialogue is the best way to reduce the stigma of adolescent depression. Student-powered awareness is the most effective way to encourage communication.

When students talk, other students listen. When teens highlight the importance of learning about adolescent depression, it shows their peers that there is nothing to be ashamed of. It demonstrates that those experiencing depression don't have to hide.

SHARE YOUR KNOWLEDGE

Share your new knowledge about depression, how to find and ask for help and promote good mental health in your school! Go to *erikaslighthouse.org* to see how you can start a Teen Empowerment Club or use Awareness into Action activities to empower yourself and your peers.



erikaslighthouse.org

Erika's Lighthouse Performance Assessment

Choose one of the four options in the boxes below to demonstrate your knowledge and skill gain during this program.

You are an author of self-help books that promote well-being. Create a one-page overview about your new full-length book that shares the experiences of someone with depression. This overview document is meant for you to market your book around the United States to bookstores and people interested in buying your book. You will submit a one-page overview document.

Make sure the overview includes:

- A story about a main character with depression
- 4 warning signs of depression for the character
- Two causes of depression for the character
- Two valid and reliable resources, products, people or places for the main character to go for support
- Explanation of why these two sources are valid and reliable.

You are a newscaster or radio broadcast reporter reporting a story about depression.

Your audience includes adults watching the nightly news or listening on the radio coming home from work. You will submit a sound byte of your radio broadcast or a video of your newsreel.

Make sure your broadcast includes:

- A story, or information on depression to adults in the community.
- 4 warning signs of depression
- · Two causes of depression
- Two valid and reliable resources, products, people or places the audience may go to for support.
- Explanation of why these two sources are valid and reliable.

You are concerned about a friend possibly being depressed. Using voice memo on your phone, or creating a video on Flipgrid, construct a caring message to them that is at least 1.5 minutes in length.

Make sure your message includes:

- That you care about them and why you wanted to reach out
- 4 warning signs of depression that you recognize
- Two possible causes of depression
- Two valid and reliable resources, products, people or places your friend could access easily
- Explanation of why these two sources are valid and reliable.

Use Storyboard (or draw) to develop a comic strip story that addresses depression among people your age.

Make sure your comic strip includes:

- A story on depression to peers your age
- 4 warning signs of depression
- Two causes of depression
- Two valid and reliable resources, products, people or places the audience may go to for support.
- Explanation of why these two sources are valid and reliable.

Performance Assessment Rubric

	Content	Assessing Resources	
4 (EXCEEDS)	I included four or more accurate warning signs of depression. I included two or more accurate causes of depression.	I listed at least two local or regional resources/products/people or places that can help someone. I clearly explained giving at least two reasons for validity and two reasons for reliability why my two sources are valid and reliable.	
3 (MEETS)	I included at least four common warning signs of depression. I included at least two common causes of depression.	I listed two or more resources/ products/people or places that can help someone. I explained at least two reasons for validity and two reasons for reliability why my two sources are valid and reliable.	
(CLOSE TO MEETING)	I included two or three common warning signs of depression. Or some of my warning signs were not all accurate. I included only one common cause of depression. Or my causes were not all accurate.	I listed one resources/products/people or places that can help someone. I explained why my two sources are valid and reliable, but the explanations might not have been thorough or accurate.	
1 (NOT YET MEETING)	I included only one or no warning sign of depression. Or all of my warning signs were not accurate. I included only one, or no common cause of depression. Or all of my causes were not accurate.	I listed one or no resources/products/ people or places that can help someone. Or my resources weren't accessible for the audience in my project. I did not explain why my sources are valid and reliable.	