

State of Hawaii



HAWAII STATE
DEPARTMENT
OF HEALTH

Training Sponsored By:

DOH, Injury Prevention and
Control Program

DOH, Child & Adolescent Mental
Health Division

Suicide Prevention Task Force
Hawaii S.P.E.A.R. Foundation of
America



Injury Prevention and Control Program
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Honolulu, Hawaii 96813

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SUICIDE PREVENTION

Applied Suicide Intervention Skills Training



2-Day Suicide Prevention Workshops

The Hawaii State Department of Health, in collaboration with the Suicide Prevention Task Force, the Child and Adolescent Mental Health Division, and Hawaii S.P.E.A.R. Foundation of America is offering a 2-day Applied Suicide Intervention Skills Training (ASIST) in each county. Participants will be trained to recognize and assess the risk of an individual in crisis and provide suicide prevention first-aid, thereby minimizing the suicide risk. It will also provide information about referrals to the resources necessary for the level of care needed.

Who should attend?

School administrators, teachers, counselors, psychologists, social workers, law enforcement, clergy, community-based/mentor agencies, community caregivers, crisis workers, and anyone who is interested in preventing suicides.

Suicide – an urgent public health issue in Hawaii

- Hawaii loses 128 lives to this tragedy each year (about one every three days), and another 870 are hospitalized after attempting to take their own lives.
- Nationwide, Hawaii had the second highest percent of youth who reported that they "seriously considered attempting suicide" (nearly 20%)
- Hawaii had the second highest percent of youth who reported "attempted suicide" among 39 states reporting (13%).

Learn Suicide First Aid

This workshop covers five basic learning modules.

1. The Introduction Module
2. The Attitude Module
3. The Knowledge Module
4. The Intervention Module
5. The Resource/Network Module

Participant MUST ATTEND

Both Days

Please do not register if you are unable to attend the entire workshop. Please see that your on-call responsibilities are covered while attending the workshop.

Registration: 7:30 a.m. Class starts promptly at 8:00 a.m. with no late admittance and ends at 4:30 p.m.

ASIST Workshop Locations:

Maui: Dec 18-19, 2008 (NOTE: Th/Fri) at **Puunene School**
East Camp 5 Road, Puunene, HI 96784

Molokai: Sept 11-12, 2008 (Th/Fri) at **Queen Lili'uokalani Children's Center**
Kaulana Oiwi Complex, Kaunakakai, HI 96748

Kauai: Sept 25-26, 2008 (Th/Fri) at **Queen Lili'uokalani Children's Center**
4530 Kali Road, Lihue, HI 96766

Oahu: Aug 28-29, 2008 (Th/Fri) at **Hawaii Tokai International College**
2241 Kapi'olani Blvd (8th floor), Honolulu, HI 96826

Oct 23-24, 2008 (Th/Fri) at **Hawaii Tokai International College**
2241 Kapi'olani Blvd (8th floor), Honolulu, HI 96826

Dec 4-5, 2008 (Th/Fri) at **Hawaii Tokai International College**
2241 Kapi'olani Blvd (8th floor), Honolulu, HI 96826

Hawaii: Nov 6-7, 2008 (Th/Fri) at **Queen Lili'uokalani Children's Center**
919 Ululani Street, Hilo, HI 96720

(Park in designated QLCC stalls, on street, or grassy area across street from St. Joseph gym, not in business parking on Hamakua side of QLCC.)

Lunch is on your own.

Workshop cost is \$65.00. Make checks payable to:

Kapi'olani Community College

Also accepting VISA or MASTER CARD

To register, complete the registration form and submit with payment to Kapi'olani Community College

REFUND/CANCELLATION POLICY

Full refunds will be given if cancellation is made at least 5 business days prior to workshop. No refunds or exchanges will be given after that time.

REGISTRATION FORM

Applied Suicide Intervention Skills Training 2-Day Workshop

Registration is limited. Participants must attend both days. You will be contacted if any scheduling changes occur. Return this form (one per registrant) with payment to:

**Kapi'olani Community College
Continuing Education Registration
'Ilima 106
4303 Diamond Head Road
Honolulu, Hawai'i 96816
Ph. 734-9211
Fax. 734-9447**

I understand that I am required to attend two full days. Registration: 7:30 a.m., Class starts promptly at 8 a.m. both days. I understand there will be no late admittance to the workshop on both days.
(Signature) _____

NAME (print): _____

AGENCY/ORGANIZATION: _____

ADDRESS: _____

PHONE CONTACT: _____ CELL: _____

EMAIL: _____

TOTAL enclosed: \$ _____ Cash Check P.O. # _____

VISA MasterCard Credit Card: # _____

Exp. Date ____/____/____ Name on card _____

Billing Address: _____

Registration: Check workshop you will attend: Cost for each workshop is \$65.00

___ August 28-29, 2008 (Thurs/Fri), Hawaii Tokai International College, **Oahu**

___ September 11-12, 2008 (Thurs/Fri), Queen Lili'uokalani Children's Center, **Molokai**

___ September 25-26, 2008 (Thurs/Fri), Queen Lili'uokalani Children's Center, **Kauai**

___ October 23-24, 2008 (Thurs/Fri), Hawaii Tokai International College, **Oahu**

___ November 6-7, 2008 (Thurs/Fri), Queen Lili'uokalani Children's Center, **Hilo, Hawaii**

___ December 4-5, 2008 (Thurs/Fri), Hawaii Tokai International College, **Oahu**

___ December 18-19, 2008 (NOTE: Thurs/Fri), Puunene School, **Maui**