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A comprehensive education programme in suicide prevention

(First presented at the XXII World Congress of the International Association for Suicide Prevention (IASP) 10-14 September 2003 Stockholm Sweden)

Norwegian National Suicide Prevention Strategy (Seksjon for selvmordsforskning og -forebygging - SSFF) offers a two year part time postgraduate study in suicide prevention. The course is given in Norwegian, but it is open to other nationalities.

Historical background

In 1994 the Norwegian National Suicide Prevention Strategy was initiated. As part of this came the establishment of the Suicide Research and Prevention Unit (SSFF) at the University of Oslo in 1996. Numerous courses were given by our staff for various professional groups involved in suicide prevention in order to increase their competence. In order to create a group of people with sufficient competence in suicidology to fill key positions in a regional and national suicide prevention network, the revised Norwegian National Suicide Prevention Strategy in 2000 gave our Unit mandate for developing a postgraduate study in suicide prevention. The aim was to give selected key personnel sufficient competence to be able to plan, coordinate and manage various local and regional suicide prevention projects. The aim was also to give them sufficient understanding of suicidological research to be able to make critical evaluations of the evidence base of various preventive measures. The plans for this postgraduate study were approved by the University of Oslo in 2001.

Current status

In February 2002 the first 22 students started their postgraduate education in suicide prevention. The mean age is 45 years. 21 of them are currently writing their diploma thesis which will be the main basis for the grading of their competence. At the end of November they will end their study with individual project presentations and oral exams. We are currently marketing the next course in this postgraduate programme. Deadline for application is October 15th and the course will start in January 2004. The course is given in Norwegian, but also students from Sweden, Finland, Denmark, Iceland or others who can understand Norwegian, are free to apply. They may contact me afterwards in order to get more information and application forms.

Future plans

This summer the University of Oslo approved our plans to expand our postgraduate programme to a master programme enabling students to gain a master degree in suicide prevention. This is much wanted by the current students, and we believe this to be crucial to the future recruitment of new students. However, we currently lack the financial means to run this master program. Once the financial problems have been solved, the new students to our post graduate programme will be offered a transfer to the master program. Also the students who graduate this year will then be offered a possibility to extend their studies in order to gain a master degree.

Organization

Our post graduate education is organized as a part time study with a duration of two years. Hence, the students are allowed to remain in their jobs and maintain their normal civil life while studying. This is important since the current 21 students come from all over the country. A majority work as psychiatric nurses, while some have degrees in teaching science or social work. We even have one pastor and a police officer teaching at the National Police Academy. Most of the students are engaged in suicide prevention as one of their professional duties.

They come to Oslo for a week long intensive course twice every term, two courses each autumn and two each spring. In addition they are organized in three regional groups that meet two or three times each term in between the courses. Those living in North and Central-Norway meet in Trondheim, the others in Oslo. These meetings usually have lasted for two days; one in which they work together to solve a task in order to gain so called “problem based learning”, and one day in which they meet with a Psychodrama therapist in order to gain more insight into their personal attitudes and reactions to the realities of death, suicide and self destructive behaviour.

For the two course weeks each term we have invited the leading researchers and experts on the various topics that have been on the agenda. Central topics have been: “Basic understanding of the suicidal process”, “The epidemiology of suicide”, “Central models for suicide preventions”, “Intervention, treatment and follow-up”, “Ethical challenges and research challenges”, “Psychological reactions among helpers and professionals”. The second year the student write a thesis individually or together with one or two fellow students. Among the topics chosen this year are “Suicide among elderly men”, “Suicide survivors”, “Possible explanations for the gender paradox in suicidal behaviour”. The latter project will actually be reported in the next issue of our journal “Suicidology”, which by the way is distributed freely all over Scandinavia.

Evaluation

In March 2003 all 21 students were asked for their qualitative responses to a host of questions about their satisfaction with the post graduate education program. 16 answered the forms. I shall very briefly summarize what we learnt from these responses.

First, students are generally very satisfied with the program. They express statements like “This have been an exciting study programme with many extremely good lecturers.”

However, most of the students have found it hard to keep focus on their studies between the course weeks. They are sucked into the maelstrom of their work and private life. They did not learn to know their fellow students well enough to keep in contact between their occasional meetings. Most of the students also complain about the meetings of the regional groups. Their stint at problem based learning was not sufficiently integrated with the rest of the education program, and the groups met too seldom to allow any deep group processes to take place.

We also have a very heterogeneous group of students with respect to previous education and professional experience. Hence, some of the students complain that the teaching has not been thorough enough on topics where they already have a high

competence. In particular they have asked for more teaching on problems relating to clinical work with suicidal patients.

Finally, our contact with the students and their supervisors during the process of writing their theses have shown us that most students in this age group have long been away from academic writing and scientific methods.

Planned adjustments and revisions

When we start the next course in our post graduate education in January 2004, we are going to make several adjustments to how the course is organized. First, we will organize the first week at a place with full boarding in order to scramble the new students together. We want them to befriend each other from the very start, and to create a team spirit in the group.

Second, we will organize the students in groups that meet at specific times each week in our “electronic classroom” on the Internet. The programme used by the University of Oslo allows the students to chat, use discussion groups, write collective documents and read common resources like Word-documents or PowerPoint presentations. It also allows us to broadcast mail or news to all students, and to create multiple choice questionnaires in order to test what they have learnt. We will use all this in order to increase their commitment to the study programme in between the courses.

Even if we still have the ambition of making our students emotionally prepared for working with suicide prevention, we have realized that we can only have limited expectations to what we can offer the students through group supervision. This is partly due to the cost of hiring trained psychotherapists for extensive periods of time, and partly due to the great variation in the motivation of the students when such group processes are not sought specifically, but added to an education program. Hence, in the next course we will include some form of group counselling in the course weeks, rather than continuing with the present arrangement.

We see a clear need to include a course on scientific methods and writing even if this is a post graduate program, as these skills may need to be reawakened in students who have had a long career after graduation.

When we expand the post graduate programme to a master programme further changes will be made. First, the programme will be divided into modules each with some form of evaluation of the students. This will also allow us to organize parts of the programme into alternative modules. In particular we want to develop one module on clinical work with suicidal persons directed at students with primarily clinical experience and interest, and an alternative module about the organization of suicide prevention directed at students with a non-clinical background. We hope this change will make our programme more appealing to doctors and psychologists, and that we in the future can avoid the criticism from some of our current students that too little of the teaching has been in depth on clinical work with suicidal patients.