

**VOICES OF RESILIENCE: A GROUP OF ADOLESCENTS' EXPERIENCES
WITH A SUICIDE PREVENTION PROGRAM**

by

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A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS

in

THE FACULTY OF GRADUATE STUDIES
GRADUATE COUNSELLING PSYCHOLOGY PROGRAM

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October, 2012

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ABSTRACT

In a high school in British Columbia, Canada, a grassroots, school-based suicide prevention group appeared to have had a strong impact on the participants of the group. In the Alive group, high school students, between 15 and 18 years of age, created and performed presentations on suicide prevention to peers and students at other schools. The author of the present study employed the qualitative method of the Listening Guide to explore how participation in a social change program for suicide prevention impacted the participants' resiliency. The participants' narratives reveal voices of vulnerability including voices of not knowing, disconnection, and silence. These voices existed primarily as the participants discussed past experiences of suicidality and depression. The voices of resiliency within the participants' experiences include voices of knowing, connection, altruism, and protection. Through the connection they experienced in the Alive group, the participants have experienced moving away from these voices of vulnerability, and they are coming to a greater place of knowing about themselves and about others. As they experienced healing, they expressed a desire to help others, and to impact the world with what they have learned. This study has heuristic value for those engaging youth in important matters concerning them.

Key-words: Suicidality; resilience; Listening Guide; suicide prevention.

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ACKNOWLEDGMENTS

First and foremost, I would like to thank the Alive group and those who participated in this study. Without your willingness to share your healing journeys with me, this thesis would not have been possible. I have been amazed by your boldness, depth of insight, vulnerability, and strength. Your wisdom is beyond your years and you have taught me more than you know.

Dr. Janelle Kwee, thank you for fostering a positive learning environment that always left me feeling encouraged. Your curiosity and hunger to listen to these participants' voices has taught me so much about what it means to truly enter another's experience. Dr. Rob Lees, thank you for your flexibility, wisdom and community-centered focus as it was very helpful in my learning process. Dr. White, thank you for your involvement in this project; your knowledge and expertise, as well as your enthusiasm to truly listen to the participants was invaluable. Jennifer Decker, your knowledge, intuition, and desire to be moved by the participants was inspiring. I appreciate your involvement more than you know; I truly enjoyed dialoguing with you as we listened to the participants engage with what it means to be caring and strong women.

To my husband, James. Your encouragement, love, and support have carried me through graduate school. Thank you for your wisdom and insight, your ever-questioning mind, and for teaching me to give myself grace.

To my parents; thank you for your continual encouragement, patience, and support as I engaged in this process. You have both taught me what it means to be a strong, compassionate, and intelligent woman; thank you for your listening ears and your unconditional love.

CHAPTER 1: INTRODUCTION

Recently, within both the medical and psychological fields, attention on effectiveness research in prevention has increased (Marchand, Stice, Rhode, & Becker, 2011). In order to assess prevention effectiveness, it is essential to distinguish between the stages within prevention work: primary, secondary, and tertiary. Marchand et al. (2011) defined the three ways of structuring prevention work as follows:

Primary prevention is practiced with general populations, with the goal of preventing disorder onset. Secondary prevention is undertaken to prevent future onset of a problem among populations at elevated risk. Tertiary prevention is aimed at individuals who already experience symptoms of a disease, with the goal of preventing further onset of pathology. (p. 32)

Within psychology, there has been a growing emphasis on health promotion and well-being, which directs the emphasis away from a problem-orientation. This shift represents a move from tertiary prevention to primary and secondary prevention.

Research and practice in the area of suicide has also experienced a shift towards prevention. Specifically, this shift has included the tenet that the traits or abilities an individual possesses have a protective influence on negative risk factors. These internal protective factors and the process of their development are often referred to as *resiliency*. Johnson, Wood, Gooding, Taylor, and Tarrier (2011) conceptualize resiliency to suicide as “a perception or set of beliefs which buffer individuals from suicidality in the face of stressors or risk factors” (p. 563). Everall, Altrows, and Paulson (2006) define resiliency as “an adaptive process whereby the individual willingly makes use of internal and external resources to overcome adversity or threats to development” (p. 462). Also, the

consensus in research literature seems to be that resilience is not a fixed attribute or outcome, but rather is a multi-dimensional and continually changing process (Everall et al., 2006; Richardson, Neiger, Jensen, & Kumpfer, 1990; Rutter, 1987, 2001). Resiliency has been connected to the area of suicide prevention in numerous recent studies (Everall et al., 2006; Johnson et al., 2011; Nrugham, Holen, & Sund, 2010). In a narrow sense, resilience has come to mean the individual capacities, behaviours, and protective processes associated with health outcomes despite exposure to a significant number of risks. However, Ungar (2005) cautions against a purely individual approach to resiliency and stresses that it is complex, and that youth, their caregivers, and their communities travel on multiple pathways toward health. In this way, Ungar's conception of resilience moves beyond a focus solely on the individual to encompass a more dynamic notion of resilience that is contextualized within the sociocultural context. It is essential to consider the experience of at-risk youth in developing and enacting resiliency when we examine the suicidology literature. For the present study, the concept of resiliency is conceptualized not solely as the development and utilization of internal coping resources by an individual, but also as the experience of and process that individuals, their families, and their communities engage in to travel towards health.

There has been an increased amount of research in recent years on the importance of resiliency, which sheds new light on prevention practices for issues that are particularly relevant for adolescents. Adolescence is a developmental period characterized by both significant changes and challenges. The drive to gain greater independence from parents, the increased importance of peer influence, and the changes in physical, social, and psychological spheres create a time of risk for most adolescents

(Lakin & Mahoney, 2006). However, this period also can be conceptualized as a time of great opportunity in which adolescents have the capacity to develop a positive self-identity and positive relationships. Because a crucial developmental task in adolescence is to bring together and internalize the drives for affiliation, autonomy, and acceptance (Lakin & Mahoney, 2006), it is vital that any prevention strategies for adolescents not only aim to solve the identified problem, but also focus on positive youth development.

A shift in focus towards the development of protective internal factors is much needed, as suicide within the youth populations is an important concern. According to a nationwide survey of students between grades 9 and 12 in the United States, of those surveyed, 15% have seriously considered attempting suicide, 11% have made a specific plan, and 7% had attempted suicide within 12 months prior to the study (Hooven, Herting, & Snedker, 2010). In Canada, suicide is the second leading cause of death among youth between 12 and 18 years of age (Rhodes, Bethell, & Bondy, 2006; Skinner & McFaull, 2012). The statistics are comparable in British Columbia. According to a study by the McCreary Centre Society involving over 50,000 teenagers, suicide is the second leading cause of adolescent death in British Columbia, and in 2008, 12% of students surveyed seriously considered suicide and 5% attempted suicide (Smith, Stewart, Peled, Poon, & Saewyc, 2009).

It is evident that suicidality is a major problem with the adolescent population in British Columbia. Due to the emphasis on prevention, numerous intervention programs aim to reduce the risk of adolescents experiencing suicidality and to develop characteristics of resiliency within all individuals, enabling them to overcome the risk of various threats to development. In a high school in British Columbia, an intervention

program with suicidal adolescents appeared to result in notable improvements within its participants. Through presenting suicide education information to their peers, the participants seem to have overcome much of their previously suicidal thoughts and behaviours. Due to the perception that remarkable change occurred within the participants, the participants' experiences are worth exploring further. The following research question guides the present study: How does participation in a social change program for suicide prevention impact resiliency in adolescents?

Therefore, in this thesis, I, the researcher, will use the qualitative method of the Listening Guide to explore the experiences of the adolescents who participated in this social change program. I will use a resilience framework to conceptualize the research problem, emphasizing the mechanisms of growth and the view of the participants "as active agents who adaptively avail themselves of strengths and resources to rebound from adversity" (Everall et al., 2006, p. 461). Within the scope of this thesis, I will not develop a protocol for suicide prevention programs. I will, however, explore the mechanisms at work within a specific social change intervention and how this experience impacted the resiliency of the adolescent participants.

CHAPTER 2: LITERATURE REVIEW

In order to effectively explore the impact of the present suicide intervention program, it is important to explore the existing literature. In the following literature review, I will begin by covering selected literature on suicide, including risk factors, protective factors, and other important concepts. I will also explore the important components of resiliency along with theories on how resiliency can be developed within individuals. Lastly, selected intervention strategies for suicidal adolescents are reviewed, identifying important intervention components. Social change strategies are also discussed as they pertain to the development of characteristics of resiliency.

Overview of Suicide Among Youth

As previously outlined, suicidal thoughts, ideations, and behaviours are prevalent within the adolescent population, both in the United States and Canada. From 2003 to 2008, there has been a decrease in the percentage of students who seriously considered (16% in 2003 to 12% in 2008) and those who attempted suicide (7% in 2003 to 5% in 2008; Smith et al., 2009). However, it is important to acknowledge that though self-reported suicide ideation and attempts among youth may have declined recently, there is recent evidence to suggest that over the past 30 years, rates of suicide among Canadian adolescent girls have increased (Skinner & McFaull, 2012).

Risk factors. Awareness of suicide risk factors is vital because being able to identify risk factors can provide early clues about the necessity of suicide intervention. Hooven et al. (2010) identify risk factors such as suicidal thoughts or attempts, depression, anger, anxiety, substance use, school problems, family distress, and lack of social support. Fleischhaker et al. (2011) noted that conduct disorders and child abuse or

neglect are also risk factors for suicide. The influence of child abuse on the likelihood of future risk of suicide, according to Nruham et al. (2010), only occurs as a result of being a victim of abuse or a traumatic event, not a witness. Also, violent life events were more significant predictors of suicide risk than were traumatic events. Additional factors that may predispose an individual to be at a higher risk for suicide are impulsivity, conflicts with parents or peers, hopelessness, poor coping skills, and lack of future-orientation (Hooven et al., 2010). Aboriginal youth; lesbian, gay, and bisexual youth; obese youth; and those with a health condition or disability were identified by Smith et al. (2009) as social groups who are at higher risk for suicide. Therefore, although overall risk for suicide may have declined slightly over the last few years, there are many youth who seem to be at risk for becoming suicidal when faced with life stressors.

An additional risk factor is exposure to suicide. In British Columbia, individuals with a family member or close friend who has attempted or committed suicide in the past year are six times more likely to attempt suicide (Smith et al., 2009). From a social learning perspective, much of human behaviour is learned through observation. Imitative behaviour is impacted by the characteristics of the observed models and the consequences associated with their actions. Furthermore, the response of a community to suicide can influence whether it is viewed as a normative or as a pathological occurrence (Insel & Gould, 2008). Depending on the learned behaviour of the observers, suicide contagion or imitation may occur, creating suicide clusters. As a result, social change interventions carried out within a particular social setting, such as a school, have great potential to impact the social environment as well as the prevalent view of suicidal behaviour. While considering risk factors helps indicate which individuals may be at a higher risk for

suicidality, it is also imperative to consider how individuals identified as high-risk can best be helped within intervention programs.

Help-seeking behaviour. Help-seeking behaviour is an important construct when considering suicidality in adolescents. Many adolescents lack the confidence or the knowledge necessary to ask for help when they are experiencing suicidality. Also, not much is known about how adolescents seek help or how they perceive help-seeking when they are experiencing a suicidal state (Smith et al., 2009).

In order to increase help-seeking behaviour among suicidal adolescents, decreasing preventative barriers is crucial. Increasing trust-based relationships with helpers, communicating information about resources, utilizing peer networks, and building on past successes with help-seeking can all overcome potential help-seeking barriers (Greidanus & Everall, 2010). Smith et al. (2009) report that in British Columbia, willingness to seek help from adults appears to have decreased since 2003. If faced with a serious problem, 75% of adolescents report they could seek support from adults in their family and 56% state they could seek support from adults outside of their family. In 2003, these statistics were 78% and 59%, respectively. Furthermore, when faced with a real issue, 18% of females and 7% of males stated that they did not access services even though they felt they needed them. Reasons for not accessing services included hoping the problem would go away, not wanting parents to know, or not knowing where to go to access help (Smith et al., 2009).

In the context of a resilience framework, low help-seeking behaviour is indicative of low resiliency and is also a barrier to the future development of resiliency. Therefore, individuals who are unwilling to seek out help may not receive the opportunity to

strengthen their resilience. Because a suicidal individual already lacks key components of emotional and interpersonal regulation, it is vital that help-seeking behaviours be encouraged and that programs are structured so that adolescents experiencing suicidality do not fall through the cracks.

Protective factors. Pirruccello (2010) reports that protective factors include supportive family relationships, connectedness within a school or other community, good social and coping skills, self-confidence, access to mental health resources, conflict resolution, skill building, and a willingness to seek help. Lieberman, Solomon and Ginzburg (2005) found high self-esteem to also be a protective factor. Other personal characteristics that serve a protective function are agency, which is a sense that the individual is in control of one's own actions, and a positive attributional style, where negative events are explained by external causes (Johnson et al., 2011). The presence of protective factors, whether internal or external, tends to buffer the risk factors in one's life, often resulting in reduced risk of suicidality.

Resilience to Suicide

In recent years, there has been growing interest in the research of resilience to suicide, which can be defined as a set of beliefs or characteristics that buffer individuals from suicidality in the face of stressors or risk factors (Lieberman et al., 2005). As discussed previously, resiliency is an important focus of prevention efforts with individuals experiencing suicidality, particularly adolescents.

Johnson et al. (2011) presented a model for resilience to suicidality, the buffering hypothesis. In order to formulate this hypothesis, the authors completed a meta-analysis of 77 articles that looked at the psychological constructs which act to moderate or buffer

risk factors. Johnson et al. (2011) proposed that risk and resilience are not two opposite ends of one dimension, but that they are two separate bi-polar dimensions. The authors suggested that in order to reduce suicidality, “resilience should be active when an individual is facing high levels of risk, reducing the likelihood of suicide. When risk levels are low, resilience is unnecessary” (Johnson et al., 2011, p. 564). In this study, the authors argued that several factors act as moderators of overall resiliency. The strongest and most consistent evidence supports a buffering role for positivity of attributional style and higher levels of agency. Conversely, perfectionism and hopelessness seem to amplify potential risk factors. Other factors that had weaker evidence yet still moderated the impact of risk on suicidality are problem-solving ability, self-esteem, social support, family and significant other support, attachment, and suicide-related beliefs. These findings suggest that in order to promote the development of resiliency, suicide prevention programs should focus on developing the client’s sense of agency, or control over their circumstances, and also on developing their self-concept as a capable agent (Johnson et al., 2011).

In support of the buffering hypothesis, Nrugham et al. (2010) found that resilience moderates the impact of lifetime violent events and attempted suicide, even in the presence of depression. Though risk factors tend to increase the likelihood of suicide, high resilience in individuals buffers the impact of risk factors and results in lowered risk. The Connor-Davidson Resilience Scale (2003) is used to measure resiliency in individuals. The scale focuses on five factors of resilience: personal competence, high standards, and tenacity; trust in one’s instincts, tolerance of negative affect and

strengthening effects of stress; positive acceptance of change and secure relationships; control; and spiritual influences (Connor & Davidson, 2003).

Many of the core risk factors or internal deficits that elevate an individual's risk for suicide are possible areas of development from a resiliency framework. Everall et al. (2006) discovered, through a qualitative analysis of resiliency in female adolescents who experience suicidality, that the major domains of resilience identified in the process of suicide recovery are social, emotional, cognitive, and goal-directed action processes.

Richardson (2002) discussed the development of resiliency as a process of successful and unsuccessful adaptations to disruptions in the biopsychospiritual balance. When protective factors are unsuccessful in moderating risk, there is a resulting disruption in homeostasis. Over time, the individual responds to this disruption with an integrative process, creating one of four outcomes: the disruption leads to a new, higher level of homeostasis through growth and increased resilience; the individual returns to baseline homeostasis in order to get past the disruption; the individual experiences a loss in functioning or a lower level of homeostasis; or the individual experiences a dysfunctional state in which unhealthy or maladaptive coping patterns are used to deal with stressors (Richardson, 2002). According to Richardson, those individuals who are able to respond to disruptions by reaching a higher level of homeostasis are resilient. Therefore, resilience is not about the absence or presence of risk factors but about how one responds to disruptions.

As discussed in the Introduction, Ungar's (2005) notion of resilience moves beyond a sole focus on the individual's characteristics and reflects a more complex and contextualized understanding of resilience. In his understanding, resilience also is the

structures that surround the individual, the services he or she receives, the way knowledge about health is constructed, and all of these factors combine with the individual's characteristics to enable him or her to overcome adversity (Ungar, 2005). For this reason, giving consideration to the larger socio-cultural context when looking at resilience in the Alive group members is vital.

Intervention Programs

Due to the high prevalence of and the complex nature of suicide risk, evidence-based intervention strategies must be implemented in order to minimize risk and to build upon protective factors and resiliency. Intervening in or before high school is very important, because many of the risk factors from adolescence will carry forward into adulthood. Once a high-risk adolescent enters adulthood, new stressors, such as less support, more transitions, and new responsibilities, impact his or her already impaired social life and daily functioning (Hooven et al., 2010). In order to effectively explore a current suicide prevention program, it is essential to look at the core components of suicide prevention programs in the literature.

Systematic reviews of school-based prevention programs. School-based suicide prevention programs surfaced in the 1980s as a reaction to the significant increase in suicide rates that many Western industrialized nations experienced (Guo & Harstall, 2002; White, Morris, & Hinbest, 2012). Since the emergence of school-based suicide prevention, there has been a similar emphasis within the literature to evaluate the effectiveness of these prevention programs in reducing suicidal ideation and completed suicides in the adolescent population. As youth suicide prevention education programs have followed the emphasis on evaluating effectiveness and on prioritizing evidence-

based practice, many prevention programs are predicated on what is deemed to be effective or on what *works*. While research on effectiveness is valuable and necessary, focusing solely on what works increases the tendency of researchers to focus on evaluations from a purely quantitative perspective. Furthermore, the research in the area of suicide prevention education has not come to a conclusive answer of what prevention education efforts are best or most evidence-based. A systematic review of early suicide prevention programs concluded that "...there is insufficient evidence to either support or not to support curriculum-based suicide prevention programs in schools" (Guo & Harstall, 2002, p. iv). Though some of the early school-based prevention education programs were evaluated with mixed results, the emerging focus on program evaluation led to more rigorous research and evaluation studies. A more recent systematic review demonstrates similar results: Miller, Eckert, and Mazza (2009) found that of the 13 studies they reviewed, five showed promising evidence for outcomes of statistical significance, and only two demonstrated strong evidence. Corcoran, Dattalo, Crowley, Brown, and Grindle (2011) conducted a systematic review of 17 studies and also report mixed results. The authors report that in the studies that measured suicidal ideation at posttest, intervention group participants were slightly less likely to report suicidal ideation than control group participants, both at posttest and at follow-up. However, for studies that measured both suicidal and self-harm events and assessed the outcome later than immediately after the intervention, the intervention group was slightly more likely to have suicidal and self-harm events than the control group. The authors interpret these contradictory findings to mean that interventions are only slightly effective in reducing suicidality in adolescents, and that they may, in fact, increase suicidal and self-harm

events over time. Despite this finding of Corcoran et al., other studies have suggested that some programs can lead to increased student knowledge and changed unwanted attitudes, without undesirable effects (Ciffone, 2007).

One response to the apparent lack of evidence in the systematic reviews on suicide prevention education programs is to call for more rigorous methodology in the effectiveness research and to increase the number of evidence-based suicide prevention programs in schools (Tompkins, Witt, & Abraibesh, 2010). However, White and Morris (2010) argue that the traditional evidenced-based practice and research focus “tends to obscure the complexity and dynamic nature of social learning, privileges a unitary and individualistic understanding of suicidal behaviour, and fails to account for the multiplicity of ways in which understanding suicide and ideas about prevention might be understood” (p. 346). For these reasons, an equally valuable response is to recognize that better understanding the components and mechanism at work within suicide prevention programs is necessary in order to provide insight for decision-makers to determine future suicide prevention strategies (Guo & Harstall, 2002). As White et al. (2012) suggest, the narrow range of methodologies that have been utilized to study school-based suicide prevention education initiatives, the lack of definitive conclusions, and the resulting questions that remain around suicide prevention set the stage for “alternative conceptualizations and fresh approaches to inquiry” (p. 344) of suicide prevention education programs.

Suicide prevention programs evidenced in the literature. To establish a base of knowledge in which to orient the proposed study, I carried out a search on PsychINFO with the keywords *suicide prevention* and *adolescents*. Within these results, I selected

articles that focused on the effectiveness of suicide prevention strategies with adolescents. I implemented these inclusion criteria in order to investigate the methods, components, and results of adolescent suicide intervention programs within the body of research. The following is a review of the selected literature on intervention programs.

Promoting CARE. In one of the only longitudinal studies on the effectiveness of a suicide prevention program, Hooven et al. (2010) evaluated the program Promoting CARE. Promoting CARE is a school- and home-based program intended to enhance personal and social resources, such as behaviour change, skills acquisition, social support, motivation, and self-efficacy (Hooven et al., 2010). In this study, 593 participants were randomized into four treatment groups: both parent and adolescent treatment, only adolescent treatment, only parent treatment, and waitlist control. The decreased suicide risk achieved in the study by participants was maintained from postintervention in adolescence into young adulthood (Hooven et al., 2010). These results indicate that the participants developed an increased ability to deal with life stressors. Individuals who presented with more severe pretreatment suicidality experienced a slower decline in risk and a longer period of vulnerability, yet their risk level into young adulthood was comparable to other groups. Also, parent intervention alone was not demonstrated to be a significant source of behaviour change.

The authors stated that “over and above the effects of the intervention, initial self-efficacy reduces risk and maintains well-being” (Hooven et al., 2010, p. 730). This statement prioritizes the development of self-efficacy in suicide prevention. The authors also suggest that accessing social support, learning new skills, and building confidence in one’s own ability to create behaviour change are important steps in building self-efficacy,

thereby aiding suicide prevention efforts.

Dialectical behaviour therapy for adolescents (DBT). DBT was originally created for use with clients with Borderline Personality Disorder. However, clients experiencing suicidality are similar to clients with Borderline Personality Disorder in that they both have difficulties with emotional regulation, interpersonal regulation, and self-regulation. Therefore, DBT is designed to teach skills for regulation and distress tolerance, and the reduction of suicidal and non-suicidal self-injurious behaviours is the primary goal. In a clinical trial with individuals experiencing suicidality, DBT was associated with improvement in domains of suicidality, non-suicidal self-injurious behaviour, emotional dysregulation, and depression (Fleischhaker et al., 2011). Prior to entering treatment 8 of the 12 participants had attempted suicide at least once, yet there were no suicidal attempts during treatment or at the one-year follow-up. The authors report that after DBT, the participants seemed to be able to handle the demands of adolescence more easily.

Though DBT is not conceptualized within a resiliency framework, it uses the core theories of acceptance and change to help participants develop emotional self-regulation, enhance problem-solving skills and capabilities, and gain self-acceptance. Intensive skills training aids in the mastery of skills and helps one generalize the skills to daily life. Fleischhaker et al. (2011) demonstrated that the participants in their study were better able to handle life stressors and could more readily deal with emotional distress in a healthy way. For these reasons, it appears that participating in DBT is a resiliency-enhancing process.

Online suicide prevention community. Adolescents are familiar with the Internet and access it to gather information and to communicate. The Internet also has many

opportunities for individuals to reach out for help. In a study of the use of the internet for receiving help, Greidanus and Everall (2010) evaluated helper therapy in an online suicide prevention community. When individuals went to a website to access support, trained volunteers responded to the messages and modeled how to provide support. Those who sought advice seemed to find a sense of community, and the help-seekers soon transitioned into the role of help providers. As new help providers, they often responded to other help-seekers in ways that were similar to the trained volunteers. This study indicates that helping others within a community can provide positive adjustment, feelings of competence, and social usefulness (Greidanus & Everall, 2010). Developing one's self-concept as a capable agent of change is an important component of resiliency (Johnson et al., 2011). Therefore, it appears that transitioning into a help-providing role may have fostered resiliency in the participants. In the present study, it would be helpful to complete follow-up with the help-providing participants to determine if providing support helped buffer the impact of suicidal risk factors.

School-based suicide prevention delivered by peer leaders. Sources of Strength is a peer leadership program that trains youth leaders from various social positions, including high risk high school students (Wyman et al., 2010). Adult mentors taught youth leaders to model to peers the importance of knowing and engaging trusted adults, of increasing youth-adult communication, of asking adults for help with suicidal friends, and of knowing and using interpersonal and formal coping resources. The peer leaders engaged in peer-to-peer communication, peer-to-adult communication, classroom presentations, and public service announcements. Insel and Gould (2008) argue that the use of peer leaders can be very powerful for the help-seeker and the help provider due to

the importance for adolescents of social influence and modeling. Also, because adolescents experiencing suicidality are likely to have social ties to other adolescents with similar concerns (Wyman et al., 2010), this peer-to-peer modeling program made use of the peers' social connections to impact adolescents that may not seek help. Additionally, the increased social connectedness among the high school students can reduce suicide through "enhanced psychological well-being, increased monitoring of behaviour by others, and exposure to normative social influences that encourage adaptive coping strategies" (Wyman et al., 2010, p. 1653).

The results of this study indicate that the training of peer leaders led to changes in school norms. The norms most strongly enhanced were students' perceptions that adults in the school can help adolescents who experience suicidality, and it became more acceptable to ask for help. The largest and most positive increases in perceptions of adult help occurred amongst the students with a history of suicidal ideation. The peer leaders who were most at-risk and who had the least adaptive norms, the lowest social engagement, and the fewest connections to adults benefited the most from being a peer leader (Wyman et al., 2010). Because adolescents are much more aware than adults of suicidal behaviour in their peers, increasing students' partnering with adults to assist their peers is a vital process for reducing suicidal behaviour and reaching those who may not ask for or accept help from adults.

Social change interventions. As mentioned previously, adolescence is a time of great risk and of great opportunity for positive identity development (Lakin & Mahoney, 2006). The above suicide intervention programs target the development of resiliency in individuals who were previously at risk for suicide. Although some of the programs did

implement social change strategies, the primary priority was suicide intervention. The enhancement of resiliency is an important developmental experience for all adolescents, as it cultivates the internal coping skills necessary to buffer them from future risks.

While the Alive group's primary focus was suicide prevention education, the participants also engaged in social action through enacting their desire to make a difference in their world. They expressed explicitly through the group and through the present study that they want to see a change in the way that society talks about and deals with suicidality in youth. For these reasons, I believe that the social change component was an important aspect of the Alive group. Below is an exploration of various social change interventions that are intended to develop resiliency and foster positive outcomes in adolescents of various risk levels.

Social change interventions, or volunteer programs, foster positive identity development in adolescents by engaging them in the greater community. This type of intervention has the potential to empower participants, to build self-efficacy, and to enhance connections between youth and community resources.

The youth empowerment strategy of YES! is an example of a program that engages adolescents in social change (Wilson et al., 2007). YES! is an afterschool empowerment program and research project for underserved, at-risk adolescents. After learning about social action and the importance of effecting change, groups of adolescents came up with social action projects that would make a difference in their own communities. This type of intervention facilitates positive identity development through simultaneously inviting the youth to work together with peers towards positive

community development, while also building their capacities for participation, self-determination, learning new skills, and taking action.

In a study examining the impact of peer-to-peer volunteering, Haski-Leventhal, Ronel, York, and Ben-David (2007) discovered that though youth volunteers tend to have a positive impact in those with whom they work, there is also a positive effect on the youth that do the volunteering. The impact of the service on the adolescent volunteer includes a positive impact on success in school; reduced behaviour problems, such as drug abuse, violence, and early pregnancy; more positive attitudes toward society; more knowledge about others in the community; increased social responsibility; and improved decision-making skills.

Volunteering also helps foster the belief in the individual that he or she can make a difference, and this belief provides self-efficacy and a sense of control over one's life (Haski-Leventhal et al., 2007; Lakin & Mahoney, 2006; Primavera, 1999; Wilson & Musick, 2000). Social change strategies, in particular, enable the individual to exercise ownership over making a difference. Because many individuals who experience thoughts of suicide see themselves as incapable of coping and without any personal alternatives, the development of self-efficacy is an important step in healthy identity development and in the decrease of suicidal risk.

As evidenced above, the development of a supportive community is an essential protective factor in reducing suicidal risk (Duke, Skay, Pettingell, & Borowsky, 2009). Because youth volunteers are so relational in their focus, it is vital that social change interventions build community and make connections between people. For these reasons, implementing a social action program for suicide prevention with adolescents identified

as high-risk is likely to foster much needed social support and positive identity development in these youth.

Purpose of Study

In light of the research in the present literature review, suicidality and suicidal ideation are important concerns among Canadian adolescents. While the consideration of risk factors and protective factors helps to explore the development of suicidal behaviour, these constructs alone do not adequately inform suicide prevention programs. How resiliency is developed and how it interacts with risk factors and protective factors, are vital constructs when evaluating suicide prevention programs. The development of internal abilities to overcome adversity will buffer not only the impact of inevitable risk factors in adolescents, but also the suicidal risk throughout adolescents' lives. The development of internal characteristics of resiliency is present in both the suicide prevention and the social change literature. Although the specific construct of resiliency is not referred to in all suicide prevention or social change studies, many important components of resiliency are evident in some of the positive results of these programs. Therefore, conceptualizing a suicide intervention program within a resiliency framework is necessary in order to better understand how to overcome suicide and how to positively impact resiliency.

Though there have been many attempts within the literature on suicidality to demonstrate effectiveness, there is little research on the adolescents' experiences of the intervention programs. Ungar (2002) cautions against taking a top-down approach in understanding youth, as this tempts those in power positions to understand the youth too

quickly. Rather, he argues that a missing voice from the literature in the field of interventions, are the voices of the youth themselves (Ungar, 2004). As we listen to the narrative of effectiveness within the suicidology literature, the lived experiences of the prevention program participants is starkly absent. Therefore, in the following thesis, we aim to explore the *insider accounts* of the participants of one such suicide prevention education program. In a high school in British Columbia, an intervention program with high-risk adolescents experiencing suicidality appeared to impact the development of resiliency within its participants. Through learning about suicidality and presenting suicide education information to their peers, the participants seem to have overcome much of their previously suicidal thoughts and behaviours. Due to the perception that remarkable change occurred within the participants, the participants' experiences are worth investigating further. Through exploring the thick narratives of their experiences, we intend to be a vehicle for their voices within the literature. This qualitative research study will add to the research on suicide prevention programs and on the development of resiliency in adolescents. The following research question will guide the present study: How does participation in a social change program for suicide prevention impact resiliency in adolescents.

CHAPTER 3: METHODOLOGY

As discussed in the previous two chapters, the purpose of the present study is to explore how participation in a social change program for suicide prevention impacts resiliency in adolescents. Although it appeared that the suicide prevention program in the present study had better equipped the students to handle suicidality, it is imperative that the participants' own experiences of the group are explored. In the following section, I detail the research design of the present study, including a description of the Alive group; participant characteristics; methodology, including rationale and procedure; the research paradigm; recruitment; data collection and analysis; and rigour.

Research Design

Alive group. The Alive group is a youth-led suicide prevention education group sponsored by the F.O.R.C.E. Society for Kids' Mental Health, a non-profit agency. The overall focus was to enhance training and skill development among youth. This small group of youth journeyed together through a process of becoming literate in mental health issues, recognizing signs and symptoms of mental health concerns and developing skills to assist high-risk peers. The Alive group consisted of eight participants who were interested in learning more about mental health. After learning about various mental health disorders and how mental illness can lead to suicide, the group members decided to focus on suicide prevention. The participants learned the Ask, Assess, Act model to understand how to respond to suicidal ideation. As the participants experienced the value of learning this model and applying it to their own lives, they decided to create a presentation based on this model to share with other students. Therefore, the group had a dual focus: to not only educate the members of the group but also to reach other youth

and teach them how to recognize signs of suicide risk in themselves and in their peers (Leuthardt, 2011). Because of the organic, student-led nature of the group's development, its goals and focus were strongly impacted by the personalities and passions of the members. As a result of this organic development and the way that the structure of the group was adapted to fit the needs of the members, it is difficult to communicate exactly what the goals and strategies of the Alive group were and how these strategies were carried out. For these reasons, a more helpful approach may be to look to the participants to discover what the experience of the Alive group was like for them.

Participants. The participants for this study are five high school students between 15 and 18 years of age. Some of the students had been identified by school staff as being particularly at-risk for self-harm or suicide; other students joined the group due to a personal connection with suicide. Four of the five participants in the present study joined what they referred to as a Girls' Group in grade 10, which was intended to provide a supportive environment for these students. As the students decided that they wanted to make a difference in their world, they transitioned into a suicide prevention education group and chose the name Alive. The goal of this group, as described above, was to educate youth about suicide warning signs and risk factors and to have them share their knowledge about suicide with other youth. Four of the five members of my study were in the group for a total of three years, beginning with its conception as a girls group. One participant was in the group for one year.

The teachers and mental health workers involved in the group's leadership noticed that, during their time of involvement in the group, remarkable changes in the

participants had taken place. For this reason, a supervisor involved with overseeing the suicide prevention program brought the group to the attention of this researcher. Because it is a specific group that is of interest to the researcher, the participants involved in this study are high school students who were part of a pre-existing, school-based intervention group, the Alive group. While results from the proposed study cannot necessarily be generalized to a larger population, the lived experience of the participants may inform the research and practice of other suicide prevention programs and may help to construct the complex experiences of the students within this group.

Rationale for use of the Listening Guide. The purpose of the present study is to investigate how participation in a social change program for suicide prevention impacted resiliency in adolescents. While research on resiliency and on suicide has been explored through both qualitative and quantitative means, the present research question requires entering into the lived experience of the participants. For this reason, only a qualitative method will enable the researcher to more fully understand the participants' experiences of how the social change group impacted their resiliency. In support of this assertion, Ungar (2005) states that "the researcher who wants to understand individual and collective constructions of concepts such as resilience among marginalized populations will need to enter the world of discourse analysis" (p. xxvii). Furthermore, the use of a resilience framework conceptualizes the participants as active and adaptive individuals who have the capacity to rebound from adversity. From this framework, it is important that the method used in the present study empowers the participants and aids in their process of building resiliency.

A relational method, such as the Listening Guide, is created to recognize the layered nature of psychological processes and to interpret psychological behaviour within a relational and cultural context. This qualitative method is best used when the research question requires listening more deeply both to a person's expressed experience and to the contexts in which their experiences occur (Gilligan, Spencer, Weinberg, & Bertsch, 2003). This method is also helpful for discovery research and for uncovering new questions. With a strong relational component, the Listening Guide intentionally brings the researcher into relationship with the participant through making one's experiences and interpretive lens explicit. The structure of the method is not a set of prescriptive rules, but rather is flexible. For these reasons, the Listening Guide empowers participants, enabling them to impact how researchers listen, how researchers ask questions, and how the participants' expressed experience is interpreted. The researcher listens first to the participant's voice before looking for answers to the research question (Gilligan et al., 2003). Carol Gilligan (1982) laid the foundation for the present method through her work on identity and moral development. The Listening Guide is based on psychoanalytic theories, through the emphasis on the layered nature of the psyche, as well as on relational psychologies, in that one's sense of self is inseparable from one's relationships and culture (Gilligan et al., 2003).

For these reasons, implementing the Listening Guide will cast new light on the experiences of the Alive group members, interpreting their experiences within the context of adolescent female development and within the cultural context in which they live. This method involves listening deeply to the participants' experiences, capturing not just what they say directly, but also the meaning and context behind their words. Ungar

(2004) emphasizes the importance of privileging the voices of the youth themselves and the need to listen to their voices when asking questions about pathways to health and resilience. Due to the dynamic interaction between the experiences of suicidality, the development of resiliency, and the unique challenges of being an adolescent, the Listening Guide is the qualitative method that will best speak to the research question of the present study.

Gilligan and Machoian (2002) demonstrate that the Listening Guide is a useful method to explore adolescent girls' suicidality. These authors discuss that in early adolescence, girls' resilience is at risk, and their peak in suicidality reflects a fight for relationship. Interpreted in this light, suicidality can be viewed as a way of "enacting the hope that someone does care about them and will listen and take them seriously" (Gilligan & Machoian, 2002, p. 323). Confronted with the "world's overwhelming deafness," (Gilligan & Machoian, 2002, p. 323) girls may learn that in order to be taken seriously, they must learn to speak the language of violence. Through presenting the case of Abby, Gilligan and Machoian (2002) described how Abby was unable to effectively get her needs met within the treatment system. Through a relational interpretation of her suicidality, the authors understood Abby's suicidality as "an active resistance to disconnection; as an active fight for voice" (Gilligan & Machoian, 2002, p. 333). In this way, an adolescent girl's suicidality can be seen as a "complicated hope for relationship" (Gilligan & Machoian, 2002, p. 335).

Because of the relational nature of the Listening Guide, this manuscript will occasionally employ personal pronouns, such as *I* or *we*. When used, *I* refers to the primary researcher and *we* refers to the research team, which includes the primary

researcher; the thesis supervisor, Dr. Janelle Kwee; and a research assistant, Jennifer Decker. Although this use of personal pronouns deviates from traditional APA style, the personal and relational nature of the language is utilized to maintain continuity with this relational method.

Implementing the Listening Guide. By using voice, resonance and relationship, The Listening Guide “systematically attends to the many voices embedded in a person’s expressed experience” (Gilligan et al., 2003, p. 157). Each person’s spoken voice is composed of voices embodied in culture and in relationships, with oneself or with others. Sequential listenings help the researcher listen for distinct aspects of one’s experience, co-occurring voices, and the relationship between voices (Gilligan et al., 2003), which adds depth and richness to the interpretation of the participant’s expressed experience. The following section outlines how I implemented the Listening Guide method for the present study.

Step one: Plot and listener’s response. Step one involves listening for the plot, including the landscape, multiple contexts of the story, what is happening (what, when, where, with whom and why), repeated images or metaphors, dominant themes, contradictions and absences, the social context of the story, and the research environment. Listeners also pay attention to their own response to the narrative, including thoughts, feelings, what touches them, where they feel connected or disconnected, their respective social positions, and how these responses impact their understanding of the person. Identifying personal responses enables researchers to separate their experiences from the participants’.

Step two: I poems. The second listening helps the researcher listen to the participant's first-person voice, capturing what the participant may not have said directly but what is central to the meaning. Tuning into a person's first-person voice enables the listener to attend to what the participant knows about her- or himself before talking about her or him. To construct the I Poem, each first person I was identified within the passage, along with the verb and any important accompanying words. Maintaining the original sequence of the text, we pulled out each underlined phrase and arranged each phrase on a separate line, like lines in a poem. The I Poem is meant to pick up on an associative stream of consciousness that runs through the narrative, and the stanzas reflect shifts in meaning or changes in voice.

Given the nature of the participants' experiences within the group, it soon became evident that the pronoun we also carried significant meaning within their speech. As a result, I included a We Poem in order to highlight how the voices may shift as the participants talk about not only themselves, but also about themselves as part of the group.

Each interview was analyzed by at least two members of the research team. The analysis process involved each member completing the first and second steps on her own prior to meeting. After the first two steps had been completed, the participating members of the research team got together and shared what they had come up with in their analyses. Typically, this involved reading aloud the Plot and Listener's Response, as well as the I Poem. After each member had read aloud her analysis, the research team discussed similarities and differences between analyses. When there were differences in the analyses between researchers, we discussed the rationale for the differences and

attempted to arrive at a consensus. The researchers made note of the analysis process, as well as the subsequent discussion, and incorporated these observations into the overall analysis.

Step three: Listening for contrapuntal voices. Listening for multiple voices enables the researcher to discover several different layers within a person's expressed experience. The concept of contrapuntal voices comes from the musical form of counterpoint, which combines two or more melodic lines with independent rhythm and contour. The lines are harmonically interdependent, yet move in relationship with one another.

Each contrapuntal voice is identified in a separate listening and can be coded by colour. Relationships will be evident between the contrapuntal voices and the first-person voice, and the voices may be in harmony with or in opposition to one another. At this point, the focus becomes the relationship between the voices, that is, which contrapuntal voice is most related with the I poem, are any voices completely separate from the I poem, and what is the relationship between the contrapuntal voices (do they take turns, oppose each other, or move in and out of relationship with one another). Each voice should illuminate a meaningful aspect of the text. Because listening for contrapuntal voices is an iterative process, the researcher should continue to identify voices until the meaning of the text is most fully represented by the identified voices.

In order to carry out the Listening Guide in a relational manner, the third step was always carried out with at least two members of the research team. For the analysis of the first interview, the researchers completed steps one and two independently. They then held a preliminary discussion of potential voices heard in the interview. The

discussion began to form a more full picture of the voices in the participant's expressed experience and the research team completed separate listenings for each contrapuntal voice. The voices identified seemed to form two categories: voices of resilience and voices of vulnerability. The voices of resilience include knowing, connection, and altruism. The voices of vulnerability include not knowing, disconnection, and silence. It is important to note that the research team carefully discussed the names used to label these sets of voices. At first, the term *depressive* was used to denote the voices of not knowing, disconnection and silence. However, it was determined that the title *voices of vulnerability* was more appropriate. In this context, vulnerability is not meant to have positive or negative connotations but is meant to signify the sensitive nature of these states. In times of vulnerability, external circumstances may have a more pronounced impact on the individual than in times of resilience.

Though these voices were identified based on the first interview, the researchers were attuned to similarities and differences in voice that occurred in the expressed experience of each subsequent participant. When differences were noted, the researchers either developed a new voice to listen for, or they kept track of how a particular voice varied between interviews. In this way, the researchers implemented the Listening Guide reflexively, taking into account the individual experience of each participant and the reactions of the researchers.

This reflexivity is demonstrated through the identification of a seventh voice, the protective voice. In the analysis of the third interview, the researchers began hearing a protective voice that the participant used to communicate frustration, pride, and a desire to protect the group she had helped to create. This protective voice was fairly strong in

the third interview, but it had not been heard in previous interviews. After identifying and coding for this voice, the researchers went back to the first two interviews and listened for the protective voice. With ears attuned to the protective voice, we heard a voice that had not originally been noticed. Because the protective voice appears to be a desire to defend what the participants have created and to speak out against their perceived oppression, the protective voice was considered to be a resilient voice.

In some participants' expressed experience, there was a co-occurring emphasis that presented to the researchers as a literal speaking of the participant. This was referred to as the participants' literal voice and it occurred alongside the knowing, connection, altruism and silence voices. An example of this literal voice is heard in Anne's experience: "Sure, you may feel crappy, you may feel so bad, but you'll get over it. One day, it may be years ahead, but you will get over it and you will be happy again." In this statement, she evidences a clear and confident way of speaking, so it was coded as the knowing voice. However, along with her knowing voice, she is also speaking as if she is talking to someone else and it carries a sense that she is demonstrating how she actually speaks. Therefore, this voice was identified as a literal knowing voice and coded separately from the other instances of the knowing voice. An explanation of each contrapuntal voice, along with examples, markers, and frequencies, is included in the results section of the present study.

Step four: Composing an analysis. The researchers then synthesize the identified voices with what has been learned about the participant, as it relates to the research question. Bringing the voices back into relationship with one another aids in retaining the complexity of the participant's experience. Multiple interviews can be looked at in

relation to one another, which may reveal similarities or differences in themes (Gilligan et al., 2003).

After all the interviews had been coded with contrapuntal voices, the primary researcher completed the fourth step of the Listening Guide. In order to complete this final step of the analysis process, the researcher listened to the interviews once more in order to compile what the research team had discovered about each participant. A sample analysis of one interview is included in its entirety as Appendix A.

Paradigm assumptions. The Listening Guide most closely aligns with the constructivist research paradigm. Some assumptions implicit within the constructivist paradigm are “that knowledge is socially constructed by people active in the research process, and that researchers should attempt to understand the complex world of lived experience from the point of view of those who live it” (Mertens, 2010, p. 16). Mertens (2010) explores further assumptions of the constructivist paradigm: (a) ethically, there should be balanced representation of views and the awareness of the participants should be raised; (b) reality exists in multiple, socially constructed realities; and (c) knowledge is gained through the interactive link between the researcher and participants and all values are made explicit. The basic assumptions of the constructivist paradigm have implications for the knowledge claims that can be made from this study. Haverkamp & Young (2007) posit that within the constructivist paradigm, knowledge or meaning cannot be directly observed but must be interpreted, as it is co-constructed through the interaction between the researcher and the participant.

It is clear that the above assumptions of the constructivist paradigm impact any potential knowledge claims that can be made. For instance, any conclusions or

interpretations from this study do not represent a definitive reality that can be generalized to a larger population. However, the narratives of the participants and the resulting voices shed light on these participants' experiences with both suicidality and the suicide prevention program. What can be learned from these participants may have clinical implications for work with individuals or groups. The knowledge claims are greatly impacted by the researchers, the participant, and their interactive relationships. Because values are made explicit within this paradigm, all findings are interpreted in light of the influence of these values. Lastly, a methodological implication of the existence of multiple realities is that research questions cannot be conclusively established before the study begins but will develop as the study progresses. Knowledge gained throughout the study, from both the participants and the researchers, must therefore continually inform the research purpose and process.

Recruitment. Within the constructivist paradigm, researchers often identify samples with the purpose of selecting information-rich cases that can be studied in greater depth. Morrow (2005) states that qualitative research sampling is always purposeful, as participants are selected with the intent of providing information-rich data, and it is always criterion-based, as the participants will be people who have experienced a particular phenomenon or belong to a particular group. Because both characteristics are true for the present study, the research will implement intensity sampling as the sampling procedure (Mertens, 2010). For intensity sampling, the criterion for selection of cases is to choose individuals or groups in which the phenomenon of interest is strongly represented. Researchers look, not for extreme cases, but for cases with richness and depth. In order to utilize intensity sampling, the researcher should have knowledge about

whether the group or individual fits the requirements of the study. Many of the participants in the group have had direct and indirect experiences with suicidality, and they appear to have been strongly impacted. For these reasons, the mental health workers involved with the Alive group agree that the participants have experiences worth exploring.

After the group was identified, an important step was to educate each participant on the study and request their participation. The researcher spoke to the potential participants, explained the objectives of the study, and described what participation would involve. Due to the participants being minors, the same information about the study was sent home for their parents to read (see the Letter to Parents, Appendix B). The participants, along with their parents, were asked to complete an Informed Consent form (see Appendix C). Participants received a \$25 gift certificate to the mall as compensation for their time spent participating, and they were also offered a copy of the thesis upon completion. Of the eight participants in the Alive group at the time of recruitment, five participants agreed to take part in the present study.

Data collection procedures. The researcher gathered data through semi-structured interviews, following the Listening Guide protocol. After the students and parents completed the Informed Consent form, an interview was scheduled at the school or a location of the participant's choosing. Interviews took 45 - 90 minutes to complete. At the beginning of each interview, the interviewer spent a few minutes engaging the participant and building rapport, the participant was given the opportunity to ask questions about the process, and informed consent and confidentiality were reviewed. To view a selection of Potential Interview Questions, see Appendix D. Questions were

open-ended so that the participants could determine the flow and content of the interview. Due to the inherently relational nature of the Listening Guide (Gilligan et al., 2003), the researcher implemented the interview protocol with flexibility. This flexible implementation involved responding to markers of intensity or conflict, asking further about questions with strong emotional content, clarifying meaning, and building rapport throughout the interview. Maintaining openness and flexibility serves to explore the participants' experiences in greater detail, eliciting more richness and depth in the interview data. The relational way of interacting with the participants is consistent with both the Listening Guide protocol as well as with the constructivist paradigm.

After each interview, participants had the opportunity to debrief their experience, which helps to ensure that the interview process did not create any emotional distress for the participant. Although debriefs were expected to last approximately 30 minutes per participant, the researcher was available for as much time as the participants needed to adequately debrief. Participants for this study utilized approximately 5 – 10 minutes to debrief the interview process and none of the participants seemed to have been impacted in a negative way by the interview. Also, the researcher was available to the participants by phone or email between 9:00 am and 9:00 pm for the duration of the study and up to four weeks after the study has been completed. However, none of the participants contacted the researcher for further debrief. The interviews and debrief were video recorded and stored in encrypted files on the principal investigator's password protected computer.

Data analysis. Data analysis involved transcribing the videos of the participants' interviews. Data transcription was completed by a professional transcriber and/or the

primary researcher and was checked for accuracy by the researcher and the research team. After completing the transcriptions, the protocol for the Listening Guide, detailed in the Research Design section, was implemented in order to listen for the voices that make up the participants' expressed experience.

Once all interviews had been listened to multiple times and the voices had been identified, the primary researcher composed an analysis for each participant. As the researcher synthesized the identified voices with what has been learned about the participant, it was related back to the research question. The researcher looked for similar and contrasting voices across participants, in order to explore how the participants each responded to the suicide prevention program. Furthermore, the researcher looked for aspects of or voices of resiliency within the participants' experiences that may have resulted from their involvement in the group.

Rigour and quality. Within qualitative research, quality can be evaluated in terms of credibility, rigour, trustworthiness, and validity (Morrow, 2005). However, efforts to maintain rigour and quality must be consistent with the research paradigm. Morrow (2005) recommends that qualitative researchers ground research “not only in the substantive theory base leading to the questions guiding the research but also firmly in the paradigm that is most appropriate to that research as well as in more transcendent criteria for trustworthiness” (p. 250). In order to implement research practices that help ensure research rigour and quality, the researcher used Morrow's criteria as a guide. Morrow suggests that Guba & Lincoln's (1989) authenticity criteria are particularly relevant within the constructivist paradigm. Authenticity criteria include

- *fairness*, which demands that differing constructions of reality be elicited and honoured;
- *ontological authenticity*, which prioritizes improving, expanding, and elaborating upon participants' individual constructions;
- *educative authenticity*, which encourages participants to better understand and appreciate the construction of others;
- *catalytic authenticity*, which stimulates action; and
- *tactical authenticity*, which is the degree to which participants are empowered to act to change their circumstances.

Attention to authenticity criteria was implemented throughout the interview process. The format of the Listening Guide was implemented with flexibility in order to attune to the reality construction of the participant and to more deeply understand the participants' experiences. To prioritize educative, catalytic, and tactical authenticity, the researcher organized one two-hour focus group for the participants after the interviews had been completed. The focus group enabled the participants to share their perspectives with each other and to work together toward ideas for further action as a group. The focus group also enabled the researcher to share general findings from the interviews and to receive participant feedback. Consistent with the constructivist paradigm and with the relational nature of the Listening Guide, the researchers used the focus group to honour the participants as experts on their own experience. The participants had the opportunity to speak to what was heard from their interviews and they commented on the research team's observations (see Appendix E for a list of focus group questions and Appendix F for excerpts from the focus group transcript).

Morrow (2005) also proposes criteria that prioritize rigour in explicating meaning from the participants. She states that it is important to have a mutual co-construction of meaning between the researcher and participants, as well as a forum for the participants' meaning to be enhanced and deeply understood. The researcher's ability to fully understand the participants' meaning can depend on a number of factors, including the context, the culture, and the rapport (Morrow, 2005). In order to better enable the researcher to understand the meaning created by the participants within this particular context, the researcher attended three group meetings prior to completing interviews. This exposure to the group was done to build rapport with the students and to enable the researcher to become immersed in the culture of the group.

Morrow (2005) describes several criteria for trustworthiness of data across research paradigms, including subjectivity, adequacy of data, and adequacy of interpretation. One strategy to address subjectivity is to embrace the researcher's subjective viewpoint and use it as an integral component of data interpretation. The strategy for addressing subjectivity that this researcher will implement is bracketing, which is the process of making one's own assumptions explicit. Davidson (2002) discusses the Husserlian view of bracketing by describing that only through reflecting on past experiences can one develop not only a sense of what it means to be a psychological subject, but also a sense of how one's sense of self influences the construction of meaning. Therefore, the researcher team reflected on their own experiences, assumptions, and biases on suicidality and resiliency in order to explore how these perspectives might impact the process of creating meaning. The researchers continually

participated in the reflexivity process by engaging in discussions throughout the study, as new experiences elicited further reactions or assumptions.

Adequacy of data in the qualitative realm relates to quality, length, and depth of interview data rather than to number of participants (Morrow, 2005). In the present study, the number of potential interviews had a maximum of eight, based on the size of the pre-existing group. Therefore, rather than relying on a high participant number, five interviews that delved deeply into the richness of the lived experience of the group was determined to provide sufficient adequacy of data. The flexibility of the Listening Guide enabled the researcher to implement an interview design that is sensitive to the growing body of data, and this flexibility enabled interpretation and clarification within the interview. These factors provided interviews of greater depth and increased the adequacy of data. Variety of evidence is an additional component of data adequacy (Morrow, 2005). Therefore, data gathered from observations of the group, the interviews, the focus group, and the observations of the school-based group leader increased data adequacy.

The final criteria for trustworthiness of data is adequacy of interpretation. Morrow (2005) suggests, “an analytic framework should be articulated that will enable the investigator to systematically make meaning of or interpret the data” (p. 256). Because the Listening Guide has a built in protocol for explicating meaning from the interviews, this protocol enabled the researcher to systematically approach the interviews with the intent of creating meaning. Additionally, due to the relational nature of the Listening Guide, at least two members of the research team completed the analysis process for each interview, and they were in continual conversation throughout the process.

CHAPTER 4: RESULTS

The purpose of this study is to explore how participation in a social change program for suicide prevention impacts resiliency in adolescents. Though this study is grounded within the context of relevant research, we approached the analysis of the interviews with openness, looking to hear what emerged from the participants' experiences organically. This practice is consistent with feminist research, as a fundamental tenant of the Listening Guide approach is to allow the participants to shape the methodology and analysis as the research develops (Gilligan et al., 2003). In this way, we honoured the participants' own experiences as we encountered the emerging truth within their narratives.

Traditionally, the voices identified using the listening guide are voices of resistance and oppression. As we began to immerse ourselves in the interview data, it became apparent that the way the participants spoke about themselves and their experiences unfolded into two overarching themes: voices of vulnerability and voices of resilience. Within these categories, the voices of vulnerability we identified include voices of not knowing, disconnection, and silence. The voices of resilience include voices of knowing, connection, altruism, and protection. The following chapter includes an outline of each voice as well as a summary of how the voices manifested within the expressed experience of each participant.

In the present thesis, it is not my intention to demonstrate that the Alive group alone was responsible for changes in the participants. However, in the interviews, the participants felt strongly that participating in Alive was a transformative experience and that without this group they would likely not have experienced such change. I recognize

that there were likely many other factors at play in the participants' lives while they participated in the group and that any of these factors could have impacted the participants' well-being. For these reasons, if the wording in the following sections over-emphasizes the role that the Alive group may have had for the participants, this emphasis is only meant to communicate emphasis that the participants expressed within their interviews.

Voices of Vulnerability

Voice of not knowing. The not knowing voice occurred as participants spoke with hesitancy, were expressing a lack of understanding or awareness, or were questioning their own voice or ability to know. Markers used to identify this voice include a tone or way of speaking that indicates hesitancy or uncertainty, or participants speaking directly about their lack of knowledge. We also listened for any statements that seemed to have an underlying lack of knowledge within what the participant was saying. In these cases, while the not knowing was not stated directly, there seemed to be an implicit sense that the participants were unsure or lacking knowledge in some area.

After completing the coding, I kept track of how often the individual voices occurred in order to get an overarching sense of each voice. I recorded the amount of words each participant spoke within each voice, as well as the number of times that voice occurred. For instance, if a participant spoke in a particular voice 50 separate times, this voice was recorded as having a total frequency of 50. This data can help give us a more broad understanding of the occurrence of the voices, adding more richness to the qualitative analysis. Within the following section, quantitative data such as the word and frequency counts will be reported if this information adds to the qualitative richness of

the data. It may appear that the use of frequency counts is at odds with the theoretical assumptions of the Listening Guide, as the Listening Guide is meant to capture complexity, fluidity, and multiplicity. The frequency counts are not intended to simplify the results or reduce the complexity of the participants' accounts. Rather, the use of the frequency counts is intended to illustrate the overarching flow of the voices, both within and across participants. This approach further conveys how the voices present within the participants' expressed experience and is intended not to reduce but to add to the complexity of the results. Although some of this data is included in the body of the present thesis, the word counts of the voices for each participant is included in Appendix G, and a table detailing how frequently the voices co-occur is included in Appendix H.

Within the not knowing voice, we coded a total of 1988 words, which represents 10% of the total coded word count. However, the not knowing voice occurred 232 times, representing 18.7% of the total frequency count of the voices. The reason for this relative difference is that the not knowing voice often occurred as a short statement that preceded or followed what the participant was saying. Therefore, while the not knowing voice was not a primary voice used by the participants, it significantly impacts how the participants are heard.

The not knowing voice presented within the participants' expressed experience through questioning their own voice or experience. As the participants were speaking, there were instances in which statements such as, "kind of," "I guess," "I think," and "I don't know" preceded or followed what they were saying. These types of statements evidenced the voice of not knowing within their expressed experience. For instance, Anne shares in a knowing voice that her story is not something to be ashamed of, yet she

follows her statement of knowing with “I guess,” making her knowing voice sound more hesitant and doubtful. Some participants had fewer instances of this doubting voice in their expressed experience, demonstrating that their knowing voice is more clear and confident. Jane has only a few instances of questioning her experience, whereas Anne, Lucy, and Ginny have more occurrences of the not knowing voice questioning what they have said.

The not knowing voice also occurred as the participants were speaking directly about having a lack of knowledge. For instance, when talking about being depressed and suicidal, Jane shares, “When I was in that state, I didn’t know how I felt and I didn’t know really what the signs were.” Jane’s lack of knowledge led to confusion about what she was feeling and an inability to get the help she needed. For many of the participants, their lack of knowledge about how to handle suicide caused them to be overwhelmed and confused. Harper shares that “It’s really, really overwhelming if you don’t know how to deal with it and someone’s telling you they wanna hurt themselves. Like, you don’t know what to do and it’s just like, overwhelming or like you feel helpless.” Typically, this form of not knowing was spoken of in the past tense, before the participants had the opportunity to learn more about how to handle suicidality within the Alive group. None of the participants spoke with not knowing as they discussed their ability to currently handle suicidality. However, some participants stated that learning to handle suicidality was about more than gaining knowledge, and it took time to become able to use their knowledge in times of crisis. Harper shares that even though she knew what to do, getting emotionally overwhelmed kept her from using her knowledge effectively. She states that at first, “you just freak out, you just say whatever’s on your mind, like you

don't know what to do, you don't sit back and like try to think about everything you know." Though learning the knowledge was the beginning of knowing, utilizing this knowledge effectively was not an automatic process.

The participants also spoke about this lack of knowledge in reference to relationships, as it related to their ability to help others. When participants were questioning a relationship, the voice of disconnection often co-occurred with the not knowing voice. For instance, when Lucy states, "I don't know if Harper really likes me," we heard voices of both disconnection and not knowing in her words. Harper also evidences this co-occurrence of disconnection and not knowing as she speaks about her relationship with her mother: "If my mom and me would argue about something and she'd get upset, I would get, I would freak out because I wouldn't know how she was gonna react."

Some of the participants evidenced a voice of not knowing as they expressed a desire to continue with suicide prevention in the world, because they were unaware of how to carry out this desire. For instance, Anne says, "What are we supposed to do with this after we graduate?" and "How do you carry it, you know, into the real world?" As Lucy shares about going out into the world, she speaks with knowing as she shares that she knows about herself. However, she expresses a lack of awareness about how who she is will fit into society. She states, "I've figured out where I belong, what I am, where I am, I just need to figure out how that fits into society." Though she expresses certainty about herself, she is still trying to discover how she can fit into the world.

Through the analysis process, we noticed that many of the participants referred in their interviews, directly and indirectly, to socio-cultural norms that exist within society.

We listened as they shared about the rules of living that they notice in the world around them and as they described their reactions to these rules. At times, these voices of the world were internalized and consistent with the participants' own conceptualizations; at other times, the participants commented on and critiqued the values and norms that exist in society. Within the not knowing voice, the participants commented on the not knowing that they see in the world. The participants share that people, in general, do not know how to handle suicidality, and the participants also notice that adults have a lack of understanding towards teenagers. This discussion of the norms and status quo that the participants see in society will be discussed further within the results section, as we heard it within several voices.

Voice of disconnection. As we listened to the voices of vulnerability, we heard a strong sense of disconnection in the participants' experiences. In order to identify this voice of disconnection, we listened for distance, conflict, or superficiality within relationships, talking about being alone, or an inability to connect to others. There were a total of 2450 words coded within the voice of disconnection, which represents 12.4% of the total coded word count.

The participants spoke with a voice of disconnection primarily as they were referring to the past. Within this voice, many of the participants talked about the isolation and aloneness they felt. Jane shares about her life prior to entering the Alive group: "I had nobody to talk to at all... I felt, like, really alone, like nobody was there anymore for me." Anne shares that "coming to a new school, I didn't really know anyone, so I was kind of all alone." Similarly, Lucy speaks about her experience of disconnection in the past. She that when her friends in middle school started smoking

and partying, she lost her friends because she did not see “eye to eye” with them anymore. In order to deal with this disconnection, Lucy shares that she turned to medication to numb her pain: “Middle school for me, it definitely just piled on, just constantly. And I remember there was this one time where I was like, I'm so done with this, and for a while there, Advil was my best friend.” It appears that for many of the participants, the disconnection they experienced was linked primarily to isolation, both at school and at home.

The voice of disconnection also occurred as the participants were directly referring to specific relationships. A few participants discussed the disconnection in the relationships with their parents prior to their involvement in the group. Jane shares about her relationship with her parents being strained, and Anne has a voice of disconnection as she shares about her parents: “I think they were kind of embarrassed they have a reject kid.”

Harper evidences disconnection as she speaks about her past and present relationship with her mother. Harper told a story about being in the car with her mother and sister, and that her mother stated she was going to drive the car off a cliff. Disconnection is evident in their relationship as she shares about her response to her mother's suicidal threats and her mother's denial of any responsibility for the emotional impact these threats had on Harper. When I asked Harper if she is able to discuss these feelings with her mom, she responds with a voice laden with disconnection: “I don't think she even thinks I remember this stuff, I think she thinks she did it, and then we get over it and that's the end of it.” During the peak of her emotional difficulties with her mother, Harper also speaks with disconnection about her relationships with her sister and

her friends. During what she describes as a very difficult time for her, she shares that “I didn’t really have anyone to talk to.” For her, the consequence of this disconnection was getting kicked out of school. She shares about this experience: “Then I didn’t go to school. I didn’t really hang out with my friends anymore.” In Harper’s story, her relationship with her mother is the only relationship she speaks of in which she still evidences disconnection.

Some of the participants also talk about the disconnection inherent within the environment of high school and within the world. Anne shares about the categories of people in high school, such as *goth* and *emo*. She speaks about needing to dress a certain way to fit in and that some of her friendships were based primarily on how they dressed. As she speaks about the end of one of these friendships, she states:

She kind of just was like, wow, you've changed, I don't want to be friends with you. I was like, wow, you don't want to be friends with me because of how I dress now? But we were only friends in the beginning because of how we dressed.

Within her voice of disconnection, Anne is speaking about how the appearance of connection within friendship may have inherent disconnection, due to the superficiality of some relationships. As she speaks with this voice of disconnection, she states, “Friendship never lasts. That kind of sucks, but especially in high school, right?” Lucy shares about the disconnection she has experienced in the world as she shares a story about seeing a boy on the bus be ignored. As she talks about this story, it is evident that she notices disconnection in the world in the form of social ignorance.

The voice of disconnection is also apparent as the participants talk about their experiences with mental illness. Anne talks about depression and the disconnection that it caused within her family: “The worst thing about depression is I did really questionable things and really terrible things to my family during those years, and it's really hard to reclaim the relationships.” While the sense of isolation and disconnection not only influenced the development of mental health concerns, Anne demonstrates that dealing with mental health issues also contributed to disconnection in her family.

Anne continues to share about disconnection as she discusses a prior experience with another member of the Alive group. Anne and Harper both share that prior to the group, they had much disconnection and conflict in their relationship. Soon after joining the group, the girls were able to move past their differences, but the experience of disconnection was still present in their voices as they reflected on their past relationship. Harper talks about their previous disconnection: “I had no idea about the things that she’s been through... I don’t even know you and I don’t know anything about you.” As Harper and Anne reflect back, they are both able to identify that because they were disconnected from each other, their judgments about each other were unfounded and there was unnecessary conflict.

A significant portion of Anne’s voice of disconnection includes speaking about the disconnection she has experienced with adults and within the helping profession. She shares that receiving advice from someone who does not take the time to understand where you are coming from is a very disconnecting experience. She shares that “I’ve been to counsellors who are like, well, this is what you have to do. It’s like, no, do you even understand how hard it is to be depressed?” For Anne, the disconnection and the

lack of understanding she experienced with some counsellors was not helpful for her in moving through her emotional difficulties. It seems that the lack of identification was central to her experience of disconnection: “When I was really depressed, listening to people talk about how you need to go do this stuff, it's like, wow, you have ever been depressed? I'm guessing not because when you're depressed you don't want to go do something.” Harper also shares about disconnection in the context of helping: “If I was just listening to some adult talk about it I'd probably... get bored.” With this statement, she is referring to the disconnection she sees in the interactions between adults and adolescents, and she is emphasizing the importance of having teens help other teens.

The voice of disconnection was also evident as the participants spoke about the leader of the Alive group changing. Harper shares about the disconnection she experienced in the transition to a new leader: “It's hard with a new person because it's like there's not that level of trust yet... it seems like no one's going to talk about their real stuff.” For many of the members, the disconnection they experienced was enough to keep them from coming to the Alive group. While all the other participants in the present study stopped attending the Alive group, Lucy felt that it was important to keep coming. Because the other members of the group stopped attending, Lucy voiced disconnection as she talked about the other members: “The girls who used to be in the group, like Jane and Harper who decide now that they don't need to show up, that's kind of like - you know, it's kind of one of those things that's like, oh, okay, that's unfortunate.” The reaction that the participants had to the new leader is very complex and multi-layered and will be elaborated later on within other voices.

Voice of silence. Within the participants' expressed experience was a strong sense that at times, either for internal or external reasons, they were unable to speak. Markers of this voice of silence included listening for any time a participant felt unable to say what was on her mind or kept a secret, references to silencing in the world, or internalized self-judgment. The voice of silence included 2003 words, which is 10% of the total word count. While there is evidence of past or present silencing in the participants' expressed experience, it is not a primary voice.

Many occurrences of the voice of silence occurred within the context of relationships. Jane depicts the experience of what it was like to be unable to speak to her parents: "I wanted to tell them stuff but I didn't want to because they're really strict." Though Jane voiced an internal desire to speak to her parents, her perception of their strict rules kept her from sharing anything with them. In her words, "I stopped telling them stuff." We heard evidence of not being able to speak in Harper's experience, and she shares about not telling anyone else about what was going on for her. Often, an inability to speak about her experiences coincided with disconnection in the relationship. Harper also shared about past experiences where she was unable to say what she was thinking, which demonstrates a discrepancy between her internal and her expressed experience. For instance, after speaking about what she wants to say to a friend when he is suicidal, she follows up her statement with "but I never say that to him." A similar disconnect is evident as she speaks about her relationship with her mother: "I was so mad at her for doing that but I didn't wanna tell her." As discussed previously, Harper evidences silence in her current relationship with her mother as she still feels unable to share with her how she truly feels.

Within the voice of silence, many of the participants referred to silence in the world, which includes stigmas against suicide and mental illness and a real or perceived inability for the participants to speak into the world. Jane evidences stigma in a relationship as she explores an experience she had with a friend. When Jane tried to share with her friend about her depression, she experienced a lack of understanding as her friend said “You’re being ridiculous,” which Jane experienced as silencing. The inability Jane’s friend had to hear and believe Jane’s own experience made her “feel ten times worse.” Anne’s experience of the silence in the world includes an expectation that she would be judged by the world due to her depression. She shares that, “At first I thought people were gonna be like, ha, ha, ha, you know? Stupid girl, she’s depressed, right?” Anne discusses this silence in the world directly: “society makes it sound like you should – you know, any addictions or whatever, you should keep it a secret, right, and that’s what I always did.”

Lucy elaborates further on the silence in the world as she shares about the reactions of some teachers upon hearing that she was in a suicide prevention group. She shares that “sometimes you get the teachers who just kind of cower because there’s that stigma that you don’t talk about [suicide].” She continues to share about how suicide often gets “swept under the carpet”. Lucy elaborates on the norm of silence she notices in the world: “People don’t just go up to one another and are like, this is what suicide is, and this is what it feels like, this is what I’ve dealt with. It doesn’t happen that way in society because it’s something that’s, like you don’t talk about it.” All of the participants demonstrated some aspect of stigma or silence in the world as they were speaking about suicide.

As Ginny shared about her own experience, she demonstrated a unique aspect of the silent voice. Ginny did not say the word “suicide” at all in her interview. She referred to suicide exclusively as “that stuff,” “that topic,” or “that type of stuff.” Though Ginny makes a few comments about silence in the world, the majority of her silent voice demonstrates her own inability to speak directly about suicide. Ginny shares about how she is more comfortable talking about suicide, yet she contradicts herself by demonstrating through her words that silence is still strong within her experience.

There was also a sense within this voice of silence that some participants judge themselves based on the stigma in the world, demonstrating internalized self-silencing. For instance, Anne shares her own experience with depression and self-harm, and she follows up her words with “...you know, this whole story” in a mocking, minimizing tone. She further states that when she hears the stories of others, she sees her own story as less important, and she refers to herself as weird and as a crybaby. Lucy demonstrates past self-judgment as she shares, “when I started reading my story, I never thought it was important. I was just like, it’s just another story.” Within the voice of silence, there is evidence that some participants have internalized self-silencing and stigma.

Within her voice of silence, Anne speaks about the silencing environment high school. When sharing about how the group came together, she shares that she has come to expect high school to be a silencing environment:

So we had these ideas, but we were like, you know, it's probably not going to work out. It's just going to be like everything else, right, especially when it comes to school. They get you all excited for something, but no, that's not how it works.

There is further evidence of the silencing environment of high school within Harper's experience. As she speaks about school, she shares about how strange it is for members of the group to be seen talking because they are from different friend groups. Harper also evidences silence as she labels herself and others into various categories. She shares that she "doesn't come off as the type of kid to do outside school stuff," demonstrating that she has placed herself in a box. While that box did not keep her from participating in the group, it is still an important aspect of how she sees the world. While we recognized that Harper's tendency to categorize and label herself and others may not necessarily be silencing, given the way Harper talked about these categories, there seemed to us to be some level of silence evident.

There is also evidence of silence as the participants speak about the helping profession. For instance, Jane shares that when talking to a counselor, she might be worried because sometimes counselors "[can't] keep stuff a secret." Though limits of confidentiality are put in place to protect the safety of clients and the public, Jane experiences these limits as silencing. Anne continues exploring the silencing she has experienced within a counselling setting: "Nothing's worse than trying to tell someone that you cut yourself or that you throw up to someone you don't even know that's, like, super old, and they're like [looking at their watch]." It appears that the formal counselling setting gives some participants the impression that they cannot share what is going on for them.

Voice of literal silence. We heard a literal voice, as well as the absence of an ability to speak, in many of the interviews, which co-occurred with many of the voices. Initially, we identified this literal voice as the participant sharing what she had actually

had said or when she spoke to the interviewer about being able to physically speak. In the transcripts, we marked the occurrence of this literal voice with blue underline. For instance, a variation of the voice of silence that was heard in some interviews was a sense of pressure to fake what you were feeling or thinking. We heard this as the participants' literal voice co-occurring with their voice of silence. As we were listening for this voice, it seemed to us to be the living out of silence in their lives. The silencing they experienced then caused some participants to purposefully hide what they were thinking or feeling. Jane demonstrates this voice within her experience as she shares about feeling sad, yet faking a smile and pretending she was happy. Jane further demonstrates this literal voice of silence as she shares her awareness that others around her may be faking their emotions. She shares that "The happiest person in the world could just decide to jump off a cliff because you didn't know their history at all." Harper also demonstrates this literal silent voice as she shares about the discrepancy between what she was thinking and what she was actually saying when dealing with a suicidal friend. As she's speaking in this voice, she says, "I'm just like, okay, Brad, it's okay, it's okay, but really inside I'm like, you're an idiot." We heard these statements as different from the typical voice of silence, as the participants were speaking about the actions they took or words they said (or did not say) as a result of the silence they experienced.

Voices of Resilience

Voice of knowing. In the interviews, the participants demonstrated an ability to speak about themselves, their relationships and the world with greater certainty. This knowing voice presented when participants were being sure, being confident, or providing clarity or direction to what they were saying. When we were listening to the

transcripts, the markers we used to notice when the participants were speaking in the knowing voice included words that provided an emphasis, such as *definitely*; a tone of confidence, certainty, or purposefulness; or a sense that the participant had come to a new realization. The voice of knowing makes up 32.6% of the total coded word count, indicating that it is the most commonly used voice among the participants.

The participants used the knowing voice when speaking about something that was important to them or something that was true about themselves. When listening to the participants' knowing voices, I had the clearest sense that I was hearing was most representative of their internal experience. From this knowing place, the participants were able to share about what was most important about their experience in the Alive group.

The knowing voice often included speaking about knowledge gained within the Alive group, such as when Jane shares, "I've been more aware of people's actions and how they feel, and I can pick up when people feel depressed or suicidal." Jane then demonstrates that the knowledge she has gained has helped her to become more confident in her abilities: "I know what to do and how to help him." For Anne, her knowing voice is used when she shares about how she is more comfortable with herself and with her own story. She states that the group "definitely made it easier for me to be comfortable with my story and stuff. It made me feel actually like I could say it and not be upset or whatever or be embarrassed." Lucy uses her knowing voice to share that she learned to more greatly value her own story. Because everybody's story is different and can teach you something unique, her story has value as well. With a similar sense of confidence, Jane states that being in the group has created a sense of certainty about who she is and

who she wants to be in the future. When asked how the group has impacted her, she states, “I definitely would say me being in the group has made me a better person and has made me somebody who I want to be for the rest of my life.”

An aspect of the knowing voice that emerged included not just gaining knowledge, but being able to access this knowledge when it is needed. Lucy states that “being able to understand what you're supposed to do and then being able to put it into action are two totally different things because it is the most scary situation where your friend's like, I'm going to kill myself.” Similarly, Harper shares that “in the moment it's hard to remember like you don't think of how to deal with it calmly, you just freak out... so now I know how to deal with it without freaking out.” These participants demonstrated a realistic and grounded sense of knowing as they are able to recognize that suicidality can still be overwhelming, and at the same time, their knowledge can better equip them to handle these situations.

The knowing voice was also used when participants were speaking about being more settled in relationships and understanding others. Many of the participants shared that the Alive group has helped them understand what may be going on for people on a deeper level. For instance, Lucy shares about how “being in a group like this not only teaches you about suicide but teaches you that there's so many different levels to people.” Lucy demonstrates that she has integrated this learning into her understanding of the world and her understanding of relationships. She has learned to look at what is going on for others on a deeper level when connecting to them about their experiences.

Anne uses her knowing voice to share that she feels more independent and more able to handle her emotions. She can decide how she wants to feel and after participating

in the group: “[She] was finally able to stand on [her] own and be happy.” In this way, the knowing voice connects with her ability to feel in control of her own emotions, rather than be controlled by them. From this place of knowing, she is able to share about what it is like to be depressed. She states, “The worst part of depression is not being able to control how you feel and not being able to be like, you know what, life sucks but I’m going to feel okay today. You just can’t. You want to feel happy, but you just can’t. It really sucks.” Better understanding her own emotional experience, both now and in times of depression, helps her to be an empowered agent of her own change rather than a passive recipient of the emotions that previously dominated her experience.

The knowing voice also included evidence of the participants’ abilities to set boundaries for themselves. For instance, Anne expresses a desire to help others in her life and wants to continue helping others in her future. However, from her knowing voice, she expresses concern that if she does go into a helping profession, it might negatively impact her mood. In this way, the knowing voice is heard not as an optimistic desire to constantly help others, but a desire to help with an awareness of how it would impact her own emotional well-being. Similarly, Harper reflects on a past experience in which her mother threatened to commit suicide. Knowing what she knows now, she speaks with an angry sense of knowing: “I’m 14, why are you telling me this? You can’t just do that.” Better understanding what it means to be in relationship with someone, Harper evidences frustration as she reflects on the inappropriate boundaries her mother had with her and her siblings. Harper also shares about setting boundaries with a friend who may have used suicidality as a way to manipulate others: “You can’t just put me

through this all the time, you can't just phone me whenever you're upset and say you're gonna crash your vehicle and I can hear you driving."

In the interviews, the participants demonstrated knowing when they shared with me advice about the teenage world or about counselling. At numerous points in her interview, Anne would make comments to me about the ins and outs of high school and adolescents. For instance, while telling me a story about the importance of an interaction she had with a girl at a presentation, Anne looks at me and says, "If someone's a metal head and you say it's an awesome band, you're friends." It seemed that this piece of knowledge was important for Anne to tell me because it let me into the rules of relating within her world. Also, near the end of the interview, when asked what else is important within her experience, Anne says, "I'm way younger than you, but I'm gonna give you some advice here." She then continues to share from her knowing experience: "I found that the best counselors are the counselors that get to know you as a person first rather than get to know you as someone who's depressed." Anne's knowing voice is clear as she feels confident and secure enough in the interview to offer me expert advice from her own experience.

Harper also offers some advice about suicide prevention as she shares:

When it comes to suicide prevention, there's a lot of focusing on the people that commit suicide or have attempted, and the people that have lost but there's not much focusing on the people that are the people that they come to. So I was like, I know there's a lot of people that get in that situation and no one ever really focuses on that part of it.

Harper knows that because she felt unprepared to deal with her friends that experienced suicidal thoughts, there must be others out there who also need to know more about how to help their friends that experience suicidality. Based on her experience, she felt confident and sure about the recommendations she had for suicide prevention work. Harper continues to offer advice as she speaks about the reason that the Alive group had such an impact. She shares, “I think the reason why we get through to them more is because we are their age...it hits closer to home for them.” The importance of the peer-to-peer education is further elaborated on within the voice of connection.

The knowing voice also included evidence of knowing the limits of knowledge. For instance, although they have learned about suicide and suicide prevention, Harper reflects about her friend who has experienced suicidality: “I’m not the person that can judge inside his head if he’s actually ready to hurt himself or not.” Because her knowing voice presents as a grounded awareness of when her knowledge is not enough, Harper is better able to take care of her own needs and keep herself safe.

In her knowing voice, Lucy shares that she has increased her understanding of herself. She speaks about growing into herself, gaining greater self-acceptance, and understanding where she belongs. Harper was able to determine who she wants to be: “I just realized what kind of person I wanted to be and what kind of person I wasn’t.” This sense of being secure in who she is helps her notice when outside circumstances keep her from being who she wants to be.

Lucy’s knowing voice, at times, takes on a different quality than the other knowing voices. At multiple times in her interview, she spoke with a cadence and

purposefulness that left a more marked impression on the listener and provided more emphasis to her words. For instance, she shares:

You don't have to tell everybody that you're feeling that way, but there's definitely other ways. You don't have to self-medicate yourself in order to feel better. You don't have to start cutting to feel better. You don't have to do any of those things. There's help. There's definitely help for you.

The purposeful sentences she has chosen to represent her knowledge demonstrate an ability not only to know, but an ability to effectively communicate what she knows, with emphasis and authority.

Voice of literal knowing. As outlined earlier in this chapter, we heard a literal voice in many of the interviews that co-occurred with numerous voices. When co-occurring with the knowing voice, the literal knowing voice included the times when the participants were sharing about what they actually said and when they spoke to the interviewer about being able to speak. The literal knowing voice did not occur very often; it included a total of 293 coded words and occurred 16 times. It represents a 1.6% of the total word count of all voices and 4.5% of the words coded within the knowing voice. Though the literal knowing voice is not very common, it's possible that its power lies in its limited use. When speaking in the literal knowing voice, it is clear that the participants intend to be listened to and are communicating in a way that demands to be heard.

Jane used her literal knowing voice to share about being able to talk to her parents about what was going on for her. She also used this voice as she shared that in the group, she was able to talk more and share her opinion. For Anne, she shares that the group

enabled her to express what she was feeling. In her literal knowing voice, Anne spoke with such directness that it seemed as though she was actually speaking to someone else. For instance, Anne speaks in the interview as if she was actually talking to a suicidal youth: “Sure you may feel crappy, you may feel so bad, but you’ll get over it. One day, it may be years ahead, but you will get over it and you will be happy again.” Anne goes on to share, “It’s not going to be easy to tell someone, but it helps. If you can get up enough courage, if you can use all your strength to do it, it will end up much better than if you just sit at home cutting yourself.” With a similar sense of literal knowing, Harper communicates the boundaries she has in relationships. After she had shared about not being able to speak her mind when she is talking to someone who is suicidal, I asked her if she is able to share her feelings to this same person at a later time. Using her literal voice of knowing, she states that when the individual is more calm, she would say “That’s not fair of you to put me in that spot and you can’t just do that. If you are honestly feeling upset, you know you can phone me anytime but you can’t just get upset and immediately do that to me, like if you’re not actually feeling that way.” With her literal knowing voice, Harper demonstrates that though she is able to care for others, she is also able to create boundaries for herself so that she does not lose herself in the process.

The participants’ voices of literal knowing were heard as an ability to put flesh on their ability to know. Though many of their words signify their metaphorical voices, these words are the literal reference to voice. In these moments, the participants demonstrated that they did not just gain knowledge; they also gained the ability to implement their knowing voice through powerful words and actions.

Voice of connection. A prominent emphasis in all of the participants' experiences was the importance of being connected to others. We heard this voice of connection primarily in reference to connections within the group, but the participants also spoke of connections with students in their presentations as well as with other important individuals in their lives. The markers we used to hear the voice of connection included listening for an encounter with another person, identification with others that have similar traits or experiences, and any language that signifies having a close or connected relationship. The voice of connection included 4,490 words and makes up 22.7% of the coded voices, making it the second most commonly coded voice within the participants' expressed experience.

The voice of connection was strongly tied to the participants' experience of the Alive group. Within the Alive group, the participants were able to share their stories and learn that they are not alone. Jane shares about her experience of connection within the group: "All the girls in the group, they all have their own stories, and it's nice to share our feelings, and we're so clicked. We can tell each other anything now." Lucy speaks about the connection within the group by stating, "All other people don't connect with each other the way we connect, and it's really kind of amazing and empowering." In the Alive group, the participants experienced a powerful level of connection that they had not yet encountered in the world.

Within the connection voice is also evidence that sharing one's story and hearing the stories of others leads to increased understanding of oneself as well as others. Jane shares a story about a girl who, after listening to her story in the presentation, came up to Jane and said, "Thank you so much, I understand now what's going on with me." The

identification this girl experienced with the stories of the members of the Alive group better enabled her to understand and to put words to what was going on inside of her.

Anne also shares about the greater understanding she gained of others: “you hear so many stories about other people, like, what happened to them, so it’s easier to understand what other people are going through.” Anne shares about a realization she had after hearing about the deeper issues others experience: “Then you’re like, oh, everyone goes through that.” Both of these voices of connection co-occurred with the knowing voice, demonstrating that through connection, the participants came to a place of knowing.

There was a sense within the voice of connection that being understood, or having someone identify with you, was a powerful experience. Anne shares about how “it definitely helped people to more so understand me.” For Anne, being understood or identified with was a powerful mechanism of change. Lucy puts words to the experience of identification as she shares that “everybody just knew exactly where you were coming from.” Ginny was impacted, as well, by being able to identify with other members: “I liked it because it’s relatable and stuff, and everybody’s kind of going through the same thing.” She experienced this identification as she heard Anne’s story and realized that they have had similar experiences. She was inspired by the fact that Anne has been able to get through her difficulties.

The absence of judgment appears to be an important aspect of the connective experience. Lucy speaks about a particular presentation that was smaller and more intimate: “You could feel the connection between them, and it wasn’t – like, nobody judged you.” In this judgment-free environment, everyone had a voice and everyone was valued. Jane shared that, for her, the sense of equality she felt within the group was

important. In the group, she speaks about how they worked together: “We usually work together on stuff, and we just try to make everything really equal, like when we voted for our name.”

Trust was an important aspect of the group because it enabled the participants to share without fear. Harper shares about this level of trust and the importance of their leader in developing this sense of trust: “She built that trust... we would all talk about how we really felt and everything and no one would ever talk about it outside of that group, it was just like a rule, like whatever was said stayed there and she would always enforce that.” Harper contrasts this experience of trust within the group as different than her experience of the norms of high school. She spoke with surprise about how what they shared in the group never turned into gossip. For her, this experience of connection in a confidential environment was a new experience. One aspect of the assurance of confidentiality was the fact that there was a sense of mutual sharing. Each member was sharing the same amount of deep and personal information, which increased the trust in the group. Harper shares that “There was no one in there that wouldn’t share so everyone was sharing just as much as they were hearing.” For Harper, it was also important that the leader would share, further adding to the sense of mutual sharing.

Sharing within the context of the Alive group built trust with the members, which provided them the safety and support necessary to share their stories in the presentation. Harper shares that “Because I was with those people that were sharing the same amount of stuff it was like we would all share stuff with people we didn’t even know. But it was because we were together that it was okay.” Though Harper could not have shared her

story alone, she had confidence because she was doing it with a group of people she felt supported by and in whom she trusted.

The experience of connection within the group also enabled the members to better connect with other individuals in their lives. Anne shares that “when you get to know members of the group, it’s easier to connect with other people because you kind of have more experience with different types of people.” For Anne, the connection she experienced within the group led to greater experiences of connection outside of the group. Specifically, both Jane and Anne share about how it became easier to connect with their parents. Previously, there was a block in the communication, as both members seemed unable to talk to their parents about what was going on for them. However, the connection experienced in the group opened the lines of communication with their parents.

There were also powerful connections experienced in the presentations, as the participants shared their stories and saw how their stories impacted others. Lucy talks about how “it’s just really interesting to see how other people react to our presentation,” and “in a way it’s kind of beautiful when we make people cry.” Many of the participants spoke about the impact of Anne sharing her story to the audiences: “When she shares her story... everyone in the room just goes quiet, and they’re always fixed on her.” Anne also shared about the power of telling her story and seeing others connect to her experience. She shares a story where she experienced this connection with someone in the presentation: “Something I said really kind of made her feel something... I could feel that something within her connected to something that was said... it was just something about that whole moment, you know?” In this story about connection, there is a sense

that Anne is having trouble articulate the meaning of the experience, yet it is clear that this was a powerful moment of connection for her. She goes on to share, “I don’t really know what it means, why it means so much, but it really does.” Lucy speaks with a sense of awe as she states that it is “inspiring to see how many people just connect to you.” Again, Lucy juxtaposes this experience of connection with the connection she sees in the world: “just being able to connect to talk to them and communicate with them on a level that most people don’t think exists is very powerful.” As the participants shared about seeing how their stories impact others, it seems to have given their stories greater meaning and they are experiencing what it is like to be an agent of healing in the life of another individual.

Because they experienced powerful connections within the group and at presentations, there is evidence that the participants developed a desire for deeper connection in their lives. For instance, Lucy shares that “I’ve always kind of been more interested in people, what makes people tick, why do people think that way, and it’s just kind of grown deeper.” It also appeared that the participants developed greater empathy for others. Anne shares that “I feel bad for people that are down, you know, because I’ve been there.” Harper speaks about this development of empathy: “All of a sudden you hear something really sad about someone and you’re like, awh, I feel bad for ever being mean to you.”

The participants also spoke about the impact of having teenagers share with other teenagers. Jane describes that “having a teenager talk about [suicide] to another teenager is way more impact to a person than having an adult.” In a voice laden with both knowing and connection, Anne says, “I think that’s easier to understand someone your

age.” Harper expresses the awareness that peers can help each other as she states that “we always try to relate to them because we are the same age as them.” The participants agree that an important factor in the impact of the group was the peer-to-peer connections that were established.

Some participants also spoke about the importance of connection within the counselling setting. Anne shares that “I found the best counsellors are the counsellors that get to know you as a person first rather than get to know you as someone who’s depressed... it’s much easier to accept advice from someone that you know a bit more.” With this statement, Anne speaks to the value and necessity of connection within the therapeutic environment.

In Harper’s voice, much of her expression of connection was grounded in specific relationships. For instance, she refers to her relationships and experiences of connection with both her dad and sister. She speaks about phoning her dad when she is overwhelmed and she shares the importance of having someone to talk to about her emotions. Harper had a unique experience within the group as both her sister and dad participated in the presentations with her. As Harper’s connective voice co-occurred with not knowing, she demonstrated that within the context of relationship, she had the capacity to worry. She expresses this worry when sharing about her sister: “I was really worried about her all the time.” Harper demonstrates that when you are in relationship with someone but you do not experience the type of connection that enables you to know what is going on for the other individual, worry is created. Harper also speaks about how the connection she experiences with her dad enabled her to better understand herself. In

speaking about her dad, Harper says, “How strong my dad is and stuff, I just wanna be like that.”

Voice of altruism. As the participants elaborated further on what it was like to participate in the Alive group, it was evident to us that they had a desire to give back to others and to make a difference. Typical markers for this altruistic voice included listening for any language that implied the participants wanted to give back to the world or to use their experiences in the group to make an impact on others. The voice of altruism makes up 9.1% of the coded voices, as it includes 1,803 words.

One aspect of the altruistic voice included the participants speaking about the feeling they received from helping. Anne discusses how “going to schools and talking is a big thing. I love to do that. It’s a good feeling inside.” Similarly, Harper shares, “I can be proud of myself for doing something and teaching people stuff.” Through going out and making a difference, the participants felt good about themselves and experienced themselves as active agents of change.

Another aspect of the altruistic voice included recognizing the value of their own experience with the group and wanting to give their experience and knowledge to others. This aspect of the altruistic voice seemed to be less related to feeling positively about what they were doing and more to do with the desire to see other people experience healing. For instance, Lucy shares, “I just wanted to teach other people about what I know.” As Harper talks about how she would rather do presentations than be simply a support group, she shares, “[doing presentations] feels like we’re making a difference and actually doing something.” It appears that their own experiences with suicidality and depression gave the group members an increased amount of empathy for others who are

struggling with similar concerns. Their journeys through these issues seems to have fed their desire to make a difference in the lives of others who are also struggling.

It appears that the altruistic voice is connected to the knowing voice as many participants expressed the desire to use their knowledge and experience to help others. Jane shares from both her altruistic and her knowing voice as she shares, “it makes me feel like a better person to help people” and “I want to help people that felt like I did.” Lucy speaks about how the group members “kind of decided we wanted something to change,” with both an altruistic voice and a knowing voice. Through coming to a greater place of knowing, the participants desire to use this confidence and knowledge to help others.

Activist voice. We heard in one participant’s interview the altruistic voice co-occurring with her literal speaking voice. When Lucy’s literal voice occurred at the same time as her altruistic voice, her voice took on a different meaning. As she spoke, her sense of purposefulness increased, and we had the sense that she was making a speech. In her interview, she even referred to herself as an activist. Therefore, we decided to title this voice the activist voice. Listen as she speaks with her activist voice:

We can show them that just the four walls in the counselling office, those four walls don't have to be that small, you know what I mean? We can expand those.

Like, [our high school] can be our walls to start. Everyone can talk to each other.

Everyone can know. Everyone can understand each other.

This activist voice goes further than to talk about helping others; she creates the sense that she is going to revolutionize the world. As we listened to Lucy speak from this voice, we were inspired by the power in her voice and by the desire she has to completely shift

the world's way of thinking and acting towards suicide. She speaks again in this activist voice as she shares about what it is like to present:

It's those moments where you go in front of a crowd of people and everything -- you feel kind of different. You feel like you're the outsider, the one that's stepping kind of out of the line, and all of these kids are just watching you being like, okay, whatever. Like, sometimes it feels like that, and then as soon as you finish your presentation, it kind of feels like everybody kind of steps a little bit out of their line.

Here, she paints a picture of what it is like to make a difference. You might feel like an outsider as you are doing things in a new way, but the courage you have to risk first gives others the courage to follow in your footsteps. As you step outside of the way the world is used to handling suicidality, it gives others the opportunity to step a little bit out of their line. Lucy describes that “you kind of drop the bomb and just interact with people in a different way.” These words demonstrate that she sees the way they do things in the group as completely different than what happens in the world. Because she has experienced such openness and vulnerability in the group, she wants to see that in the world. She continues to share in this activist voice as she says, “if we could honestly get all the people in the school to see on the level that we see.” To Lucy, she does not participate in the group only because she enjoys it or likes the way it feels; the urgency in her activist voice communicates that, for her, this is something she must do.

Voice of protection. Throughout the data collection process for the present study, the participants experienced a change in leadership within their school-based group. Much of their change and development had occurred under the leadership of one

individual, and the participants responded in different ways to this leadership change. A voice emerged within the interviews that demonstrated their reaction to this change; we entitled this the protective voice. As we listened to these interviews, we began to hear a voice within many of the participants that sounded quite angry and frustrated. As we continued to listen to this voice, we heard that the participants' anger and frustration was directed at the recent changes in the group and was birthed out of a desire to protect the group that they had helped to create. The protective voice represents 3.2% of the total coded word count.

Jane, Anne, Lucy, and Harper were involved with the Alive group since its conception and their being part of determining the direction of the group was an important experience. Many of the members enjoyed making decisions and having a voice in the group, and Jane demonstrates well the essence of the protective voice: "We don't want to lose what we created." Mid-way through their last year in the group, the Alive group leader left her position and the group continued with a new leader. Because the new leader had a different leadership style than the previous leader, many of the participants reacted negatively to the shift. Anne describes the change:

We got this new woman, we're expecting all this stuff to go on, and she's like, this is what I want to do. We're just like, we had this. And it was, Alive was kind of our baby. We nurtured it and made it grow, and then this lady wanted to come and change it, so of course we got kind of angry.

Some participants also demonstrated a protective voice that was directed at members who only attended sporadically and who were not as invested in the group as others. Lucy shares:

This group is so important. It's not just a place where we meet. It's not just presenting to people. It's changing the world in our own little kind of [way], just making a little part of the world more aware, and for some people that just don't show up and don't care, it's heartbreaking.

Some members responded to the change in leadership by not attending the Alive group. Lucy was the only participant in the present study who was still attending the group, and she expressed a protective voice directed at the members who had stopped attending. She states that “Jane and Harper don't show up anymore because they don't like [the new leader] and they don't like the new people, but we have to have new people, and it's always kind of like that battle between do we fight for it or do we grow up?” Lucy demonstrates a balanced approach as she voices frustration about recent changes, yet recognizes that giving up is not an effective way to pursue what you believe in.

Participants' Stories

It is important within the Listening Guide approach to listen for each voice individually. However, it is also essential to bring the separate voices into relationship with one another in order to embody the complexity of each participant's expressed experience. For this reason, the following section will outline what was learned about each participant, based on the voices that made up their experience.

Jane. Jane speaks about her life before the Alive group primarily with voices of disconnection, not knowing, and silence. As she recounts her experiences of depression, her voice is primarily that of being disconnected from others and disconnected from what was going on inside of her. Listen to her I poem as she evidences a voice of disconnection:

I lost

I was

I was

I didn't only lose

I lost

I had nobody

Jane also evidences not knowing as she describes how she was unable to understand or talk about her own experience. She did not know what she felt inside, and she was not aware of the signs of depression or suicide. Silence is also evident within her experience of suicidality and depression as she talks about not having anyone to talk to and not knowing how to open up to others.

Jane's experience in the Alive group began with connection and it appears that connection was the mechanism through which she was able to move from a place of disconnection, not knowing, and silence to a place of knowing. In the Alive group, she heard the experiences of other group members and this connection enabled her to talk more and to voice her own opinion. She also learned how to develop meaningful relationships and the identification she experienced in these relationships enabled her to put words to the experiences and emotions that had previously been so confusing. For Jane, the connection in the group was characterized by trust, the stories shared, and deep relationships. Jane experienced a place where everyone's opinion was valued, everyone's voice was heard, and where they made decisions in a collaborative way. This collaborative and empowering environment characterized the type of connection that existed in the group.

The connection Jane experienced enabled her to come to a place of greater knowing. She was able to identify her own strengths and abilities and put her abilities to use in the group. For instance, she shares about how she is often the person to explain things to the other group members, and she can calm the other members down when emotions run high. Her connection and knowing voices exist concurrently as she shares about how interesting it was to notice these newfound strengths. As she settles into sharing how she has changed, she speaks from a knowing voice in saying that the group has made her a better person; she is somebody who she wants to be for the rest of her life. The knowing is linked again with the voice of connection as she speaks about the importance of teenagers helping other teenagers. Her experience of connection within the group enables her to speak knowingly about the fact that because teenagers do not feel comfortable with or trust adults, having a teenager talk to another teenager about suicide has an invaluable impact. She knows of this impact because she has experienced the power of connection between teenagers.

At the time of the interview, Jane spoke about herself and about what she knows in a strong, confident voice. There were few times when her knowing was interrupted by tentative or questioning language. In this way, she comes across as being very sure of what she knows, and she is able to speak from what appears to be her own true voice. Jane's I poem demonstrates well her movement from not knowing to knowing and altruism:

I was

I didn't know

I felt

I didn't know

I went

I saw it

I was like

I have

I was like

I don't want

I don't want

I want to be here

I want to

I want to help people

I did

Jane speaks confidently about what has helped her in her journey and it is evident that the connection she found in the group enabled her to connect to other important people in her life, like her parents. Jane's knowing voice is also evident as she shares that some individuals may use threats about suicide to manipulate others. Jane shares about an ex-boyfriend who threatened to commit suicide after she broke up with him. As she recounts how the suicidal threat strongly impacted her emotions, she describes being upset, scared, and frustrated. Through this experience, Jane learned that helping others also requires setting her own boundaries. From her place of knowing, Jane knows how to tell when others are being serious about their threats and she knows how to set boundaries when others are using suicidal threats to manipulate. Through gaining knowledge within the group, Jane feels more confident to face her life experiences and

protect her own emotional well-being. She has also learned the limits of her knowledge as she acknowledges that she cannot always help others, and she sometimes has to back away.

Jane demonstrates frustration with the silence and not knowing in the world. She acknowledges that though others could be experiencing the same struggles, silence keeps them in a place of not knowing. Through experiencing connection in the group, she now understands that the status quo of not talking about suicide and not knowing how to handle suicide is damaging. As she pushes away from what she notices in the world, her altruistic voice comes through. Through connecting to a story about someone else's silence and isolation, Jane moved to a greater place of knowing and she gained a desire to share this story with others. Her altruistic voice is closely connected to her *We* poem as she shares about what the group has achieved and created together.

Jane's literal voice of silence is evident as she describes wanting to hide her sadness: "No, you can't be sad, you have to be happy." As we listened to her speaking, we really tried to understand whether she was talking about the honest desire for her friends to be happy or whether she was voicing pressure to keep negative emotions hidden. There also is some silence amidst her knowing. In the *Alive* group, she speaks of the recent transitions and knowing that there are issues, yet speaking about how you always have to be considerate. In this context, it seems like her awareness of what might be going on for others can silence her from speaking about what she sees, feels, and knows.

As Jane speaks about the change in leadership in the *Alive* group, her protective voice is clear. While she speaks about having to work through it and talk about it, her

protective voice is laden with voices of silence and not knowing. With the change in leadership, Jane does not feel that the group knows the new leader well enough to be open with her. Because Jane perceives this new leader as threatening to the connection in the Alive group, her protective voice comes in as she speaks about not wanting to lose what the group has created.

The above summary of Jane's experience is meant to illustrate how each voice was represented within her experience and how the voices moved in and out of relationship with one another. However, in order to get an overall sense of the voices that make up each participant's experience, I decided to also display the occurrence of the voices in a visual manner. Figure 1, below, summarizes the total occurrence of Jane's voices, and a similar figure will follow after each participant's story.

Jane's primary voice is the voice of knowing, which makes up 31% of her coded expressed experience. The voice of connection occurs within 27% of the total coded voices and the altruistic and protective voices occur within 18.5% and 1.9% of the coded voices, respectively. Overall, Jane speaks primarily with resilient voices, as the four resilient voices make up 79% of Jane's total coded voices. The voices of not knowing, disconnection and silence have an occurrence of 3%, 7.5%, and 10.8%, respectively. These results indicate that overall, Jane voices are primarily that of resilience and while there are some vulnerable voices, these voices make up a small percentage of her experience.

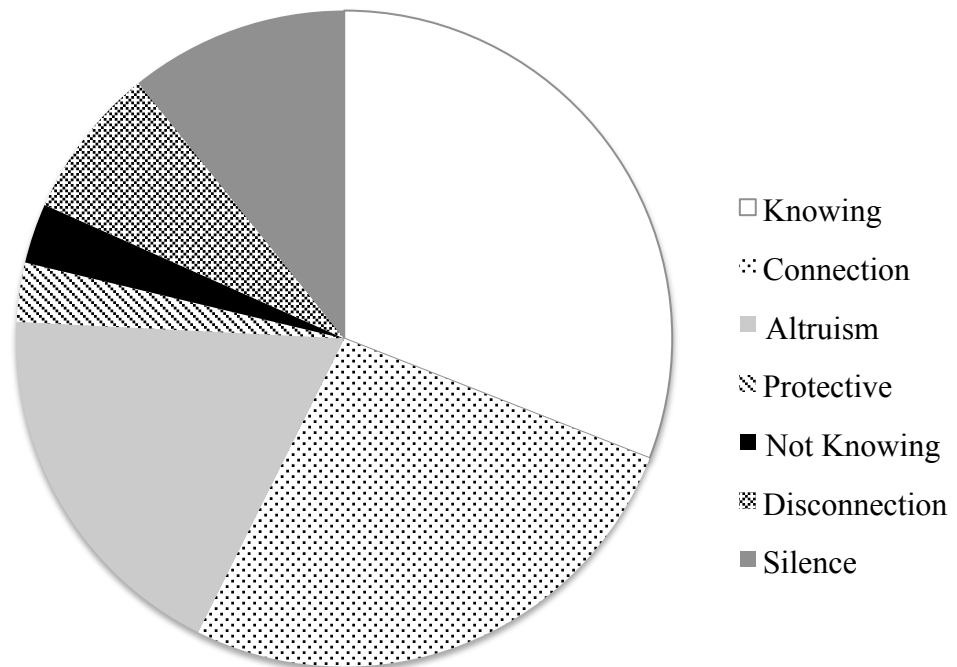


Figure 1. Voices Within Jane's Coded Expressed Experience. The voices within Jane's coded expressed experience are displayed above, by percentage, in order to depict how often she speaks in each voice.

Anne. Anne is an energetic and lively woman, with a contagiously enthusiastic and genuine nature. In her interview, I felt her passion for people and her desire to use her experiences to help others. Prior to being in *Alive*, Anne was controlled by her own emotional experience. She evidenced not knowing as she shares about not understanding what was going on inside of her; she was disconnected from her own experience. She felt silenced by the world and did not know how to access help. She describes depression as taking away her ability to decide how she wants to feel. With a knowing voice, she states that “the worst part of depression is not being able to control how you feel... you want to feel happy but you just can’t.”

As she talks about living within adolescent culture, she evidences silence, disconnection, and not knowing. She describes her depression, stating numerous times that she did not want anyone to find out. With a voice of disconnection, she talks about how dressing in gothic or emo style can be a silencing barrier because dressing in those styles means you have to act or look a certain way. She shares that when she came into high school, she did not know anyone, she was alone, and she was “gosh darn depressed.” When she speaks retrospectively about experiencing depression and describes the impact her emotional state had on her relationships, disconnection is evident. This disconnection and silence made it very difficult for her to know how to tell anyone about the difficult emotional experience she was having.

As Anne first speaks about the Alive group, her voice of knowing is apparent. In a strong, confident manner, she describes how Alive helped her to be comfortable with her own story and express her feelings without shame. She continues speaking in this voice of knowing, as she further explores how she has developed greater empathy and has become more able to understand the subjectivity and complexity of others’ problems.

After being in the Alive group, Anne talks about her emotional experience with a voice of knowing. She recognizes that external circumstances will create hard times, yet she states that “No, I’m going to be happy, this is my decision. I can decide to be unhappy or I can decide to be happy. Sometimes it’s hard, but I like to think that you have a certain say in how you feel.” As she speaks from this confident, knowing voice, listen to her I Poem:

I was kind of finally able to stand on my own

I’m going to be happy

I can decide

I can decide

I like to think

I'm on

I feel

I actually get to decide

I feel

I've got my own thing going

Similar to Jane, it appears that Anne came to a greater place of knowing through connection. Through Alive, she gained friends, found others who understood her, and was able to open up more to others. Because she recognizes that it is not always safe to share your deepest struggles within the formal environment of high school, the Alive group became the safe place where she experienced deep connection. Through connecting in the group, she was able to speak to others about her experience and she was able to express what she was feeling. Connection built Anne's empathy and provided her with identification. She learned that she is not the only one who struggles, which helped her to feel less alone. As she talks about this capacity to identify and empathize with others, the knowing and connective voices occur at the same time. Anne describes perfectly the way that one's own experiences can lead to greater empathy: "I feel bad for people that are down, you know, because I've been there."

A specific story that Anne tells is of her process of developing connection with a member of the group with whom she previously did not get along. Being together in the group helped these two girls develop a strong connection and has brought her to a place

of knowing about connection. Now, she more richly understands how connection and identification can build a bridge over even the most intense disconnection.

Anne tells more stories about connection as she describes being able to tell when others are having a hard time. Once she is finished telling the story about a connection she made with a girl at a middle school, however, she evidences voices of both disconnection and not knowing. She is able to talk about the connection she made, yet she still wonders about the deeper meaning of that experience: “I don’t know, I can’t get that girl out of my mind...I could feel that something within her connected to something that was said... I don’t know, it was just something about that whole moment, you know?” She seems sure about the connection that was made, yet she also seems unsure about whether she can trust her own intuition. She struggles to put into words the meaning of that connection, even though she felt something powerful. In the above statement, the voices of connection and knowing co-occur as Anne experiences how connection with others impacts her ability to know herself and to know others. She also uses the voice of disconnection to talk about the nature of connection. Though she connected deeply with this girl, the nature of their relationship was short-lived and she was not able to develop continuing contact. In this sense, there was also a loss of connection. While Anne is able to experience and value experiences of connection, she demonstrates uncertainty about trusting her own intuition as she is learning about the nature of connection in particular contexts.

Anne takes a balanced perspective in recognizing that while she does have an ability to understand what is going on for others, she is not always able to know what is going on at a deeper level for people. This realization leads her to the conclusion that

when you encounter others it is helpful to give them the benefit of the doubt, because you never know what they are going through.

Anne speaks with a voice of silence as she details the fear of judgment she experienced when she first shared her story. Her voice of silence continues as she describes how society makes her feel like she should keep her struggles a secret. Before the Alive group, Anne accepted society's valuing of silence and secrecy, causing her to feel shame about her emotional experience. At first, it was very difficult to break the societal norm of not talking about suicide, but as she experienced the connections with other students, she realized the group is making a difference. Listen to how she describes the difference they make in the group: "You help people, people help you. It's not like we're just going and telling people about suicide. We tell our stories and people tell us their stories, and we're like, wow, look at what we're doing." Through connection, she felt empowered to break the silence.

Anne began to experience herself as a powerful means of establishing connection with others, rather than seeing herself as damaged. Now, she seems able to recognize that though she has been through hard times, she cannot change what happened. Her difficult times have helped make her who she is today. Though Anne states this realization verbally, she still has evidence of self-silencing and judgment as she speaks negatively about her own experiences. She makes statements that minimize the validity of her own emotional experience, such as "you know, this whole story." Similarly, immediately after recounting her own experience with depression and an eating disorder, a voice of silence comes in as she says "lots of people have it worse. I can't really say it was too bad." Later on, she talks about how meeting others in the group who had

difficult experiences made her think that “their life sucks a hell of a lot more than yours does... aren’t I just a crybaby.” This minimizing way that Anne speaks about her own experience is a unique feature of her own silencing voice that was not found in the other interviews. Taking both of these voices into account, it appears that Anne knows rationally that she does not need to be ashamed, yet there is still a part of her that is experiencing shame and judgment.

As she shares from her knowing voice, statements indicating not knowing, such as “I guess” and “I don’t know,” often follow her confident statements. The juxtaposition of these voices demonstrates that though Anne’s knowing voice is coming through, the not knowing she experiences causes her to doubt herself. This doubtful voice occurs multiple times in Anne’s expressed experience. Her doubting voice strongly impacts how she speaks about herself; listen to her I Poem as she speaks from this voice:

I don’t know

I just

I don’t know

I don’t know

I can’t

I don’t know

I don’t know

I don’t know

I think

I could feel

I don’t know

A perfect example of the doubting voice coming through in her expressed experience occurs when she speaks about what is normal: “He seemed like a pretty normal kid. I guess not. Maybe it is normal. I have no idea.” Though Anne is able to speak about what she knows, the presence of her not knowing voice evidence that she doubts herself. At times, Anne seems to doubt her own intuition or her own experience. However, it is also possible that her way of speaking makes her sound hesitant, when in fact she may have a deep understanding of herself and her world.

As Anne talks about her altruistic desire to help others, she speaks with a mature and balanced voice of knowing. She describes that she cannot help everyone, and she is worried that helping others as a career might have a negative impact on her own emotional well-being. Listen to her I Poem as she talks about this conflict:

I would love

I don't know

I should actually do something

I don't know

I would love to do more

I'm just kind of worried

Though Anne has an altruistic voice as she speaks about wanting to help others, her voice of knowing is clear as she communicates her desire to first meet her own needs. This ability to ensure that she is taken care of is significant, since women are socialized to value connection and the well-being of others above even themselves for the sake of being in relationship.

Anne's protective voice occurs as she speaks about the transition in leadership within the group. There is shift in voice from connection to disconnection. With a frustrated and protective tone, Anne describes how the shift in leadership has been difficult, and there has been confusion about what everyone wanted and a lack of communication. Though the group had taken ownership of the direction of Alive, she experienced an authority figure attempting to change the group. Her protective voice emerges as she talks about becoming angry and frustrated: "Alive was kind of our baby. We nurtured it and made it grow, and then this lady wanted to come and change it, so of course we got kind of angry but, you know, really angry." After voicing this frustration, Anne evidences voices of protection, silence, and not knowing as she surrenders control of the group to the new leader: "I suppose it wasn't ours, it was hers."

From her experiences with suicidality and depression, Anne wants to offer me some advice as a helper. Her altruistic voice is clear as she uses the interview to help me talk to youth in a more helpful way. She warns me against the silence of pretending that I have it all together and the danger of telling someone what to do without taking the time to understand how hard it must be for them to be depressed. Because she has experienced connection, she knows that helping must occur in the context of connection:

Don't sit there and pretend – don't be like, oh, really [hand on chin in listening pose] and try to tell them what they have to do, because I've been to counselors who are like, well, this is what you have to do. It's like, no, do you even understand how hard it is to be depressed? I found that the best counselors are the counselors that get to know you as a person first rather than get to know you as someone who's depressed.

For her, the lack of connection is silencing, and without connection, advice is meaningless. From her new place of knowing, she provides advice that expresses her literal voice and the importance of connection, as if she was talking to youth who are experiencing suicidality and self-harm:

It's not going to be easy to do this, it's not going to be easy to go tell someone, but it helps. If you can get up enough courage, if you can use all your strength to do it, it will end up much better than if you just sit at home cutting yourself.

She does not offer simplistic advice or easy answers. Because she knows how hard it is to ask for help when you are hurting so much, she is able to offer a response that is laden with both connection and knowing. Her voice of knowing occurs with her voice of altruism again as she talks about sharing her knowledge. This time, she is speaking with her literal voice. She speaks of wanting to tell people and wanting them to understand that “you may feel crappy, you may feel so bad, but you’ll get over it. One day, it might be years ahead, but you will get over it, and you will be happy again.”

Like Jane, the voice of knowing is Anne’s most dominant voice, making up 36.4% of her coded voices. This occurrence of her knowing voice demonstrates that Anne’s most common way of speaking is in a strong and confident manner. However, Anne’s second most common voice is her voice of silence, representing 16.4% of her total voices. Though Anne demonstrates a clear sense of knowing, she also speaks with a voice of silence within her expressed experience. Anne evidences an almost equal amount of the voices of connection and disconnection, making up 14% and 12% of her voices, respectively. This demonstrates that within her expressed experience, Anne is

moving in and out of the experience of being connected. Figure 2 below depicts the overall occurrence of Anne's voices.

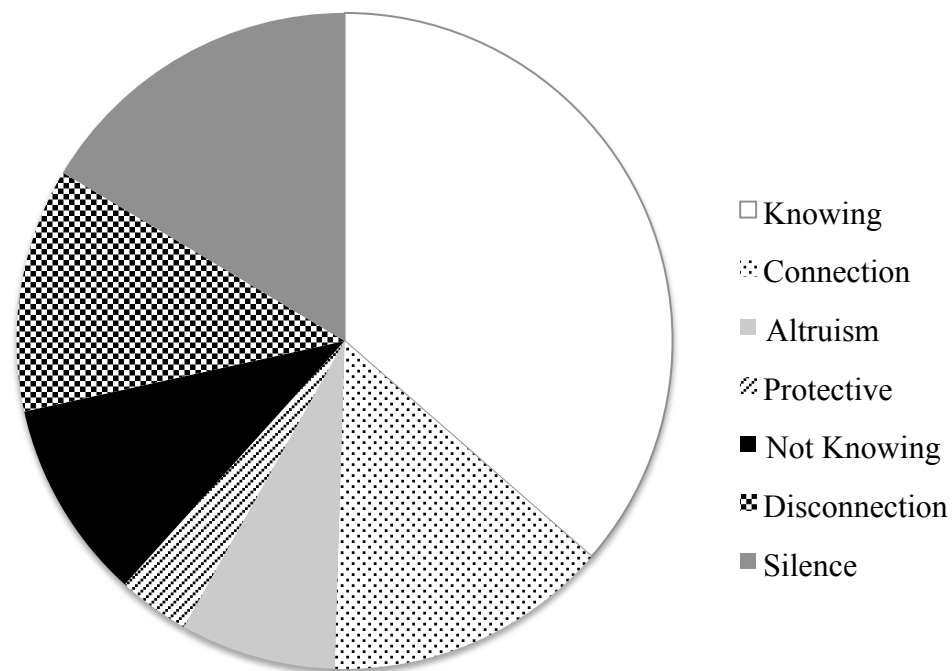


Figure 2. Voices Within Anne's Coded Expressed Experience. The voices within Anne's coded expressed experience are displayed above, by percentage, in order to depict how often she speaks in each voice.

Lucy. With a voice of disconnection, Lucy shares that the transition from being a carefree child to being a middle school student was very isolating. Encountering new people, along with the changes she experienced in puberty, made life very confusing. She felt disconnected from her friends when they started to engage in activities that did not interest her. She felt alone, and she feared people would judge her or label her a loner. As everything "piled on," she used Advil to numb the pain of her isolation, yet she

was too scared to ask for help. Speaking from her current perspective, she uses a knowing voice to share that medicating yourself is no way to escape the pain. Though asking for help is difficult, she knows there are other ways to get help. Her knowing voice takes the form of an advocate as she speaks against silence and against harmful behaviours. She shares that you do not have to self-medicate or cut to feel better.

Though aloneness characterized her middle school years, she desired connection. There is urgency in her disconnected voice as she speaks of needing to connect to something.

Her voice shifts to one of connection as she contrasts her previously disconnected experience with her experience in the Alive group. She shares that connecting with members of the group helped her to cope with being alone and it demonstrated to her that there are others willing to help her. The connections she has established with other members in the group make her feel less alone in the world. Knowing that she has the capacity to connect and that there are others out there like her seems to give her the strength to enjoy being alone.

One important aspect of Lucy's voice of disconnection is her ability to notice disconnection in the world. In a knowing voice, she shares her desire to connect with others and to understand them more deeply. She is able to masterfully shift from her knowing and connective voices when she describes herself to a voice of disconnection as she observes the world around her. She also shares in a knowing voice that taking the time to understand why someone is feeling a certain way can bring greater understanding about people on a different level and can help one understand why situations exist. For Lucy, a risk of disconnection and not knowing is that you may miss out on meaningful relationships. In a knowing voice, she states that if you do not take the time to get to

know someone on a deeper level, you may never know what is going on for him or her. It seems as though her ability to take a closer look at the way others respond has helped in her development of empathy.

Change is important to Lucy. For her, seeing others change has been inspirational and it has been her motivation for being in the group. When she speaks about presenting in the group, she shares that at first it was uncertain, weird, and scary. However, her not knowing shifts immediately into connection as she shares how inspiring it is to see how the students and teachers responded to their presentation. It seems that though not knowing is evident in her experience, she is able to persevere through the uncertainty to reach connection.

Lucy believes that suicide needs to be talked about, and her experiences of connection have helped her know that “everybody has a story with [suicide], whether they know it or not.” She shares about a small, intimate presentation with a profound sense of connection as she describes that everyone talked and shared their stories about suicide. She speaks directly about the connection she experienced in the room and emphasizes that nobody judged you, everybody knew exactly where you were coming from, and they were friendly. It seems that the identification the individuals in the room experienced provided a deep sense of connection.

She shares about an important relationship with a voice of connection, as she states that the moments of connection give her strength in the hard times. She shifts into a voice of knowing as she shares that holding onto the moments of calmness and connection gives her strength when she encounters difficulties. She demonstrates that, to her, connection has a sense of constancy that sustains her through hard times. Before the

Alive group, Lucy shares that she did not know what to do if someone was feeling suicidal. When Lucy talks about how she understands and responds to suicide now, she speaks from a place of knowing. Though she now knows what to do, she is also able to recognize that when dealing directly with suicidality, her emotional reaction could keep her from using her knowledge effectively. She is able to recognize how scary it is to deal with a friend who is feeling suicidal.

Lucy speaks in a disconnected voice as she shares about how it is not easy being stressed every day and having to go to school. For her, school is still a place where she has to be with people that she does not want to see. She shifts into a voice of silence as she opens up that in her school, she sees many things being swept under the carpet. It seems that, to her, school is still an isolating and silencing place. However, she quickly launches into a knowing voice as she shares how Alive has given her hope in herself and faith in humanity. Now, she knows what to do to keep herself calm and how to deal with stress. She has also learned that even though life is sometimes out of your own control, learning how to deal with what is in your control can keep life from becoming a negative experience.

When Lucy speaks in her knowing voice, her language is often clear and persuasive. However, her not knowing voice often interjects with “I don’t know,” making her knowing voice sound less sure. This uncertainty occurs as she speaks of her ability to be considerate of others, and it also occurs when she talks about growing into herself and gaining self-acceptance. As we listened to her interview, we conceptualized the presence of the not knowing within the knowing as Lucy having a voice in training. Listen to her I Poem as she moves from voices of knowing to not knowing:

I don't know

I've come to understand

I understand

I don't know

I understand

I don't know

At times, her voice is clear and strong. For instance, when sharing about presenting, she says, "I've dealt with suicide and almost everybody in this room has, and you don't have to stand there and be alone. You don't because you're not alone." At other times, she speaks both with certainty and hesitancy. However, when her voice, particularly the activist voice, comes together, it is very powerful. To us, the Alive group enabled her to have a voice and it was a safe place to practice using this voice. As she continues to use her voice to inspire others, I suspect there will be increased shifts from not knowing to knowing.

Lucy evidences altruism and knowing as she talks about how Alive has opened her eyes to the silence that exists in the world. She sees the world sweep many things under the carpet, including suicide. Teachers at her school often respond with silence and not knowing when they hear about what Alive is doing. For Lucy, the silence she sees in the world is real and dangerous, and feeling alone and not being able to share your true feelings can lead to suicide. She shares a story of one participant in a presentation whose friend "seemed totally fine" and then jumped in front of a train. As she speaks about this silence, her voice is clear, confident, and sure. It seems that her ability to talk about the

silence she sees does not silence her or keep her from speaking out. In this section of her speech, it appears that the knowing leads into altruism.

Lucy speaks in a disconnected voice as she talks about the recent changes in the group. Though the personality and leadership style differences of the new leader have impacted the group, Lucy is still coming to the Alive group. With disconnection and her protective voice, she expresses sadness and frustration at the members who no longer attend. She recognizes the balance between fighting for what they had and “growing up” though learning to be effective in the structures that surround them. She speaks with knowing as she states that though it is unfortunate the other members have left, there is nothing she can really do about it. Though it is scary being the only original member, she is still able to pursue her passion of teaching others what she knows. Her protective voice is clear as she shares how it is hard to see new members only showing up every once in a while and not caring about the group. To her, the Alive group is not a way to get out of class; she is using her experiences to change the world.

Lucy exhibits altruism as she talks about wanting to create change in the world through helping others. Her altruistic voice is more intense than in the other interviews, and, at times, it is heard as an activist voice that wants to challenge the status quo and inspire others to change. Lucy has a cadence and purposefulness in her voice as she is speaking in her altruistic voice that creates the impression that she is making a speech. In this altruistic voice, she shares that standing in front of a crowd feels different and makes her feel like an outsider as she steps out of line. However, she speaks with a sense of exhilaration as she talks about how after finishing the presentation, it feels like everybody

steps a little bit out of their line. It appears that though speaking out is scary, the courage she has to risk first empowers others to also speak out as well.

As her connected and knowing voices demonstrate the importance of the connection experienced in the Alive group, Lucy shifts into her activist voice. She shares about wanting to “expand the walls” of the Alive group and teach new members that “everyone can talk to each other. Everyone can know. Everyone can understand each other.” To her, the Alive group is a microcosm of what the world should be and she is committed to do whatever she can to make this happen. Each time Lucy shifts into her activist voice, there are also strong voices of connection and knowing either at the same time or very close to the activist voice. Even though suicide is not generally talked about in society, Lucy wants to interact with people in a different way, and she wants to talk about suicide. She wants to get everyone in the presentation audiences to see on the level that they see. When she speaks in her activist voice, the clarity and emphasis she uses gives the impression that she has more than a desire for change; Lucy has to see change and she will do whatever she can to make it happen.

Lucy’s primary voices are knowing and connection, representing 35% and 17% of her total voices, respectively. However, Lucy also speaks from a place of disconnection 15.5% of the time, demonstrating that disconnection makes up a significant portion of her experience. The total occurrence of Lucy’s voices, represented by percentage, is displayed in Figure 3, below.

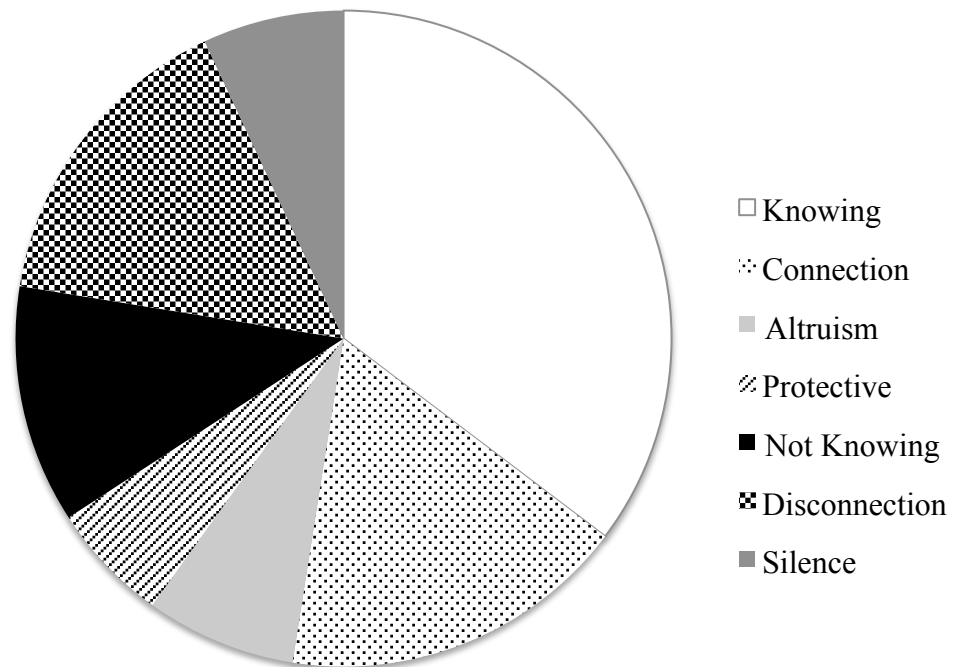


Figure 3. Voices Within Lucy's Coded Expressed Experience. The voices within Lucy's coded expressed experience are displayed above, by percentage, in order to depict how often she speaks in each voice.

Harper. Harper joined Alive because she was often the person that her friends would talk to if they were feeling suicidal. In a clear and confident knowing voice, she describes how she thought it would be important to know more about how to help her friends. In Harper's experience of suicide prevention, there is much focus on the people who have attempted or committed suicide and their families, but there is not enough of a focus on the people in whom suicidal individuals confide. To Harper, having a friend tell you that they want to hurt themselves is very overwhelming. When she had friends confide in her, she did not know what to do and she felt helpless. Harper's motivation to create change comes from her personal experience; she did not want to feel overwhelmed and helpless anymore.

Harper speaks in a knowing voice as she shares that the Alive group taught her how to deal with people talking to you about feeling suicidal. Before the Alive group, Harper experienced overwhelming emotions in a variety of relationships. With simultaneous voices of not knowing and disconnection, Harper speaks about how worried she used to get when her mom would get upset and she did not know how her mom was going to react. She also speaks with voices of not knowing and disconnection as she shares about her past relationship with her sister. Harper noticed that her sister had depression, and she used to worry that her sister did not understand how to deal with her feelings. Harper talks a lot about being worried about those around her. When she talks about being worried, it appears that voices of connection as well as not knowing occur simultaneously. It appears that the not knowing existing amidst a connection with someone creates worry and uncertainty.

With a voice of not knowing, Harper shares that before the group, she did not know what to do when someone was having suicidal thoughts and she would “freak out.” For her, freaking out involves not knowing what to do and becoming emotionally overwhelmed. She also shares that she would sit on the phone all day with her friend when he was experiencing suicidality, and she would leave school, yet she would not tell anyone else. Even though her friend would keep hanging up on her, she would keep calling him back. As we listened to her story, we heard voices of not knowing, silence, and disconnection in her experience. In the process of trying to help her friend, Harper seemed to lose herself for the sake of the relationship.

Harper continues to share about a story in which her mom said, “I’m just gonna kill myself,” when she was with Harper and her sister. Not knowing and disconnection

co-occur as she shares about this experience. With a mom who was threatening to kill herself and a younger sister who was crying, Harper was paralyzed with silence and not knowing; she did not know what to say or what to do. From a knowing place, she acknowledges that this situation is much more than a 14-year-old should be able to handle.

Based on the experience of suicidality with her mom and friend, Harper believes that using suicidal behaviour to manipulate others is selfish, and it makes her frustrated. She says, “don’t do that to the people that you love.” She continues to speak with a knowing voice and connection is woven into her experience as she shares that she is like her dad, and he feels the same way as she does about suicide. Harper then applies this perspective on suicidality to her experiences with her friend. With a knowing voice, she states, “you can’t just put me through this all the time, you can’t just phone me whenever you’re upset and say you’re gonna crash your vehicle and I can hear you driving.” In contrast to the way she used to handle these situations with not knowing and disconnection, she now says with knowing, “you need to not think about just yourself, you need to think about what you’re doing to me when you call me.” However, with silence, Harper says that she cannot say this to her friend. She knows he would incorrectly interpret her words as indicative of a lack of care. It seems that Harper knows and is able to express how she feels about the situation, yet she is also aware of how her words would make others feel. With a knowing voice, Harper is able to understand that because someone is already feeling down, being told that they are selfish would be counterproductive in his or her moment of intensity. When asked if she would be able to tell others how she truly feels, she shares that she would speak to them calmly while they

are upset. However, she would express how she truly feels when they are more stable. She would say:

That's not fair of you to put me in that spot and you can't just do that if you honestly are feeling upset, you know you can phone me anytime, but... you can't just get upset and immediately do that me if you're not actually feeling that way.

With both connection and knowing, Harper demonstrates an ability to know what she feels and consider the feelings of others, yet she no longer loses herself in the process.

Harper is silenced in her relationship with her mom, as she shares that she cannot tell her mom how she feels. As Harper speaks about her mother, her voice is laden with both silence and disconnection. It appears that her mom's denial of her own past behaviour is a barrier to Harper speaking and to them connecting, as her mom seems to have an inability to acknowledge the emotional impact her behaviour had on her children.

After joining the group, Harper gained knowledge about what to do when others spoke of suicide. However, like Lucy, there was an initial barrier to her ability to access the knowledge she had gained from Alive and to use what she knew. When she felt unable to use her knowledge, she shares in a connective voice that she turned to her dad. After her dad was able to reassure her that she did, in fact, know what she needed to do, she states in a knowing voice "then I remembered that I'm in a suicide prevention group and I dealt with it that way." Based on this experience, it seems that Harper's knowing is created and strengthened within relationships of connection. Though it was hard for her to remember what she knew, the support and reassurance of someone she was close to helped her to use the knowledge she had gained. Now, she shares in a knowing voice that she knows how to assess the level of risk and she knows how to handle suicidality.

Her own experience of not being able to access her knowledge demonstrated to her that it is not easy to deal with suicidality. After this experience, she wanted the students in the presentations to understand that they still get scared when they experience suicidality.

Harper demonstrates knowing and altruistic voices as she says, “don’t expect that you’re supposed to just know this stuff or that we just like, we still get freaked out by it too.”

Harper exhibits a wise and balanced perspective as she shares that even though they know what to do, it is okay to still become overwhelmed.

Harper does evidence some doubting in her expressed experience, but the not knowing voice does not seem to take away from the power in her expressed experience. In general, her not knowing voice is used to reference the past and she uses the knowing voice to refer to the present. Listen to her I Poem as she moves from her past not knowing and disconnection to her current place of knowing:

I didn’t even know

I’d been in the group

I had the knowledge

I have

I still freaked out

I didn’t even think

I knew

I got there

I just stopped

I was like

I phoned my dad

I remembered

I'm in a suicide prevention group

I dealt with it

I know how to deal

Connection was a primary voice within Harper's experience. In this voice, she speaks primarily about her relationships with her dad and sister. Though she has always been close with her dad, their collective engagement in the presentations seems to have deepened their relationship. When she speaks about her sister, Harper acknowledges the silence that she noticed in her sister's world; her sister would not talk in front of or even make eye contact with anyone. Though Harper describes them as always being close, the connection they have was deepened when Harper began to see her sister come out of her shell and open up. As the connective voice continues, Harper shares that her sister is now more able to talk about her depression.

Harper then tells a story about her relationship with another member of the group. Harper speaks with both disconnection and not knowing as she shares that though she and Anne did not know anything about each other, they did not get along. Through learning about each other, they connected and moved past the not knowing and the disconnection. From her current place of knowing, she reflects back in a wise voice and acknowledges that because they did not really know anything about each other, they had problems with each other for no reason. Through connecting in the group, Harper and Anne discovered that they had similar personalities and they got along well. With a knowing voice, Harper reflects that if she had never participated in the group, she would have never gotten to know Anne.

As she reflects back on this experience, the silence in Harper's experience is indicative of the silence of the world. Harper comments on the rules of female social games and how these social games fueled disconnection and conflict in her life. Harper uses the term "jokey-rude" to describe the way that girls talk to each other, indicating the tendency for women to communicate through passive aggression. Looking back, she realizes that what she thought were legitimate reason to be enemies were not legitimate at all. Though a misunderstanding had fueled disconnection in Harper's life, she was able to experience that connecting with other women can break the norms of silence and disconnection in the female social world.

Connection continues to be an important piece as Harper shares in a knowing voice about the trust within the Alive group. Harper acknowledges that silence exists within the social structure of high school. She shares that other students might think it was weird to see members of the Alive group talking outside of the group because they are all from different social groups. Through this discussion, Harper demonstrates that the Alive group broke through the social norms of high school and the barriers to connection. Silence also exists as she shares about how the group was not a "school, strict place." For Harper, the structure of school is not an environment that fosters safety, trust, or openness. Her observation of the silencing nature of high school seems to emphasize the connection she experienced in the group. The connection she experienced in the Alive group was profoundly different than the environment she was used to in high school. She continues to share with a voice of connection as she shares that, in the group, everyone would talk about how they really felt, and they had confidence in the group's trust and confidentiality. Although gossiping is a norm of high school, the Alive group

members experienced such safety and trust within the group that they felt safe enough to confide in each other. Harper's voice of connection is so strong when she talks about this trust that she describes the group as "a little family." When I inquired further about how the trust was developed, Harper explains that it progressed naturally and slowly as everyone began sharing more personal information and confiding in one another. Her not knowing voice came through as she struggled to put into words something she had not experienced before. Because everyone was sharing the same amount of personal information, they did not have to worry that the trust would be broken.

The connection that existed in the group also enabled the group to feel safe sharing their stories with others in the presentations. With silence, Harper shares that she would not have been able to share her personal stories if she was alone. The safety of the group's presence helped her to break the silence. She did not feel alone because the other members were also sharing their stories. The sharing of personal stories began in the group and Harper decided "if we can share it in here, we can share it at a presentation as well if we're together."

Harper's voice of silence comes through in the way she interprets and speaks about the world. With a voice of silence, she shares that she is not the type of person who does outside of school activities. Because of the label she places on herself, it appears that she is still buying into the world's tendency to categorize and label. However, this pressure did not keep her from participating in the group, demonstrating that she is fighting against the silence. In her expressed experience, the origin of this label was left ambiguous. She may have been referring what others have told her, how she sees herself, or how she thinks others perceive her. It also appears that she has a

particular idea of who someone who participates in outside of school activities is and she seems hesitant to identify with this type of person. While this labeling demonstrates that she buys into the dichotomies of the world, there was not agreement among the researchers that this way of speaking was truly a voice of silence.

In the Alive group, Harper experienced a level of connection with other teenagers that broke through the silence of the world and created an opportunity for communication, vulnerability, and identification. She experienced that connection breaks the barrier to silence. Harper shares a story about this connection when she shares about the students who responded emotionally to the presentation. This experience taught her that the students are actually listening and are being impacted emotionally. She shares in an altruistic voice about how it good it felt to see others respond to their presentation. She states “I’d be happy with just one person feeling better or like having a way out.” As Harper experienced the strong connections with others, she realized that the group was making a difference. After sharing this story, she shifts into a knowing voice as she speaks about the importance of peer-to-peer connection; because they are the same age and can relate to each other, it hits closer to home.

Though Harper shares that she has never felt suicidal, her experience with the intense emotion of anger enables her to realize that everyone might respond to stressful situations differently. Her empathy for those that are feeling suicidal is increased based on her own experience of being overwhelmed emotionally. She shifts into an altruistic voice as she shares that she enjoys telling people how to deal with their feelings. Because she had to learn how to cope with stress in her own life, she is passionate about teaching others in the presentation about how to cope with their own stress. The

connection she experienced in the group helped her learn how to deal with her own stress, as the group members would listen and give her advice. Harper now knows strategies that help her to release the emotions she is feeling, so that they do not control her.

As Harper shares about the recent transitions in the group, she speaks with voices of knowing and disconnection. Having a new leader is difficult for her, because they have to again develop the trust they once had. Though she seems open to having new people, she seems aware that a lack of trust may silence others and may keep them from talking about their “real stuff.” Her protective voice is evident, in addition to silence and disconnection, as she shares that what she loved most about the group is gone and she does not attend the group any more. It appears that Harper felt silenced by her perceived lack of trust in the group, which led to her disconnection from the group.

Overall, Harper’s voice of connection is her dominant voice, making up 29% of her coded voices. Her voice of knowing follows closely behind, occurring within 28% of her coded voices. Harper also speaks with a substantial portion of disconnection and not knowing, with 12.9% and 11.7% respectively. Figure 4 represents the total occurrence of the voices that make up Harper’s expressed experience.

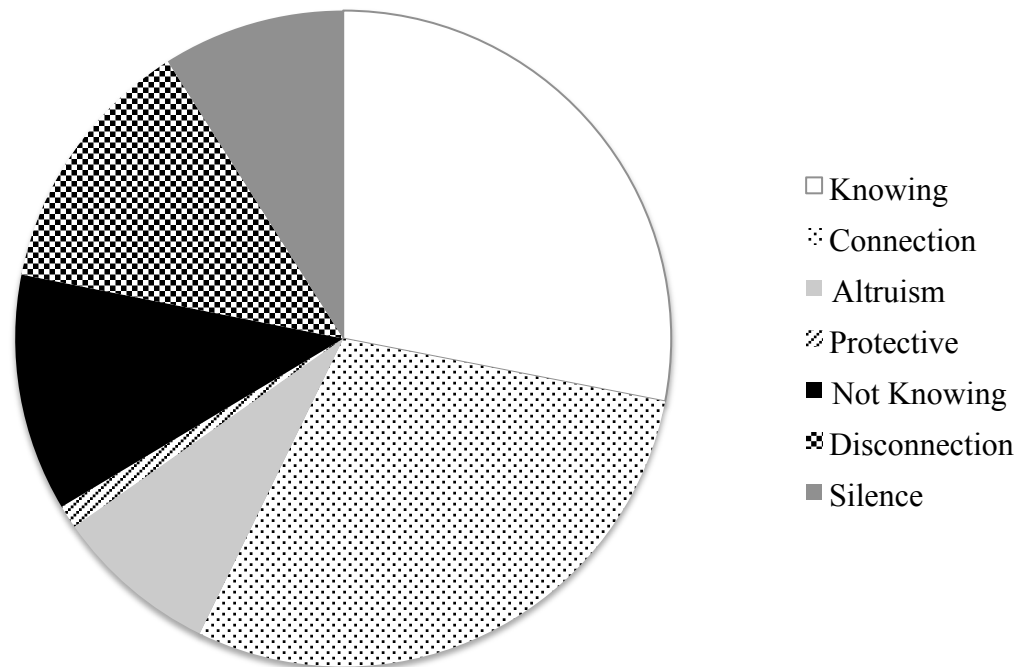


Figure 4. Voices Within Harper's Coded Expressed Experience. The voices within Harper's coded expressed experience are displayed above, by percentage, in order to depict how often she speaks in each voice.

Ginny. Ginny's voice stands out in contrast to the voices of the other participants. Ginny joined the group for one year, while the other participants had been involved for three years. When Ginny talks about her life before the group, she speaks primarily in voices of disconnection and not knowing. She shares that it did not seem that anybody else dealt with suicidality, and she felt very alone. She also evidences silence and not knowing as she shares that she was confused about suicide and she felt it was not something about which she could talk.

As Ginny spoke, we heard her as very hesitant and tentative with her language and way of speaking. She demonstrated much not knowing in her expressed experience. She often begins speaking with "I don't know" and follows up sentences with qualifiers

such as “I think” or “I guess,” making her sound less sure of herself. Due to the occurrence of the not knowing voice within her language, she presents as doubtful about her own experience and intuition. Ginny also presented as very guarded, responding with one word answers to many of the questions and she needed to be probed further in order to elaborate. An example of the occurrence of her not knowing voice alongside her knowing is found in her I Poem:

I know how to deal

I think

I know

I can

I think

I think

I think

I don't know

Ginny also evidences not knowing in her present experience as she says that the other members know more about the group than her. For her, this not knowing brought on silence that kept her from speaking in the group and sharing her voice. She voices disconnection in her experience as she shares that she was not very much a part of the group. However, she also stated that she felt just as important to the group as anyone else, evidencing connection. From these voices, it appears that while Ginny acknowledges that she is new to the group, she felt valued, equal, and just as important to the other members. With an altruistic voice, she adds that she felt important because she was making a difference.

Ginny, with a voice of silence, explains that in the group, she preferred to watch rather than participate. Sometimes, however, the leader asked for her opinion. Even though Ginny did not speak much, she noticed many things that went on in the group. It appears that being invited to share helps Ginny to feel comfortable speaking about her own experience. With a knowing voice, she shares that she noticed her sister really cares about the group and that she is very opinionated. She also noticed that other members are friends in the group. Also, having been aware of the conflict Harper had with Anne, she was surprised to see that they are friends now.

In the interview, Ginny shares that she is more comfortable talking about suicide and that she knows more about it. However, in the interview, Ginny did not say the word *suicide* once. She referred to suicide as “that stuff” or “that kind of thing,” which we labeled as a voice of silence. Though Ginny states that she is more comfortable talking about suicide, she demonstrates that she still cannot speak about it directly. As she shares with a knowing voice that she knows how to deal with suicidality now, this silence is evident in her experience. Although I want to believe that she has come to a place of knowing about suicidality and about herself, the silence evident in her experience makes her knowing voice less clear and sure.

Ginny evidences voices of connection and knowing as she shares that the group helped her become more talkative. Both silence and disconnection are evident in her experience before the group because she was shy and she did not talk. Through the connection with the other members in the group and through experiencing a safe environment, Ginny moved into a place of knowing and being more comfortable with herself. The connection that Ginny experienced in the group was different than any she

had experienced before. She heard people openly talk about suicide and she also experienced people showing their emotions in a real way. It felt safe because they could share what they wanted. This ability to share what they wanted created trust for Ginny and made her feel comfortable.

The connection she experienced in Alive made her feel that you could talk about suicide and the others would help you deal with it in a calm way. She evidences a voice of disconnection as she shares how she feels when others respond to suicidality by freaking out and getting mad because they are worried. It appears that one of the reasons she did not share with others how she was feeling before joining the group is that she was aware of how others would respond and she did not want to cause worry. The way she juxtaposes these two ways of dealing with suicidality seem to demonstrate that Ginny finds dealing with suicidality calmly and in a supportive way to build connection.

Ginny also demonstrates an awareness of the not knowing in the world in regards to suicide. Her experience of this not knowing kept her silence, because she did not think anyone knew how to deal with suicide. Because she was unsure about how others would respond to her suicidality, she was left in a place of silence and disconnection, and she felt she could talk to no one.

With a knowing voice, Ginny shares about how she learned that people could be experiencing suicidality and you would never know it. Her knowing comes from the experience of connection where she learned more about who has dealt with suicide. She speaks specifically of Anne's story as shares how meaningful it was to hear about her own journey with suicidality and to see her be cheerful and happy now. Ginny really identified with Anne's story because they have been through similar experiences. For

Ginny, learning that other people have been through suicidality and identifying with them in a common experience led her to knowing that it is normal to feel that way. Ginny summarizes what she has learned as she says, “everybody feels that way and it’s totally normal. Even the most happy people can feel like that. And now I know how to deal with it, before I had no concept of how to deal with it.” It seems like the primary shifts for Ginny were that the identification and connection she experienced in the group helped her move from a place of not knowing to a place of knowing, helping her understand herself and know how to deal with suicidality. Her movement between connection and knowing is heard in her I Poem:

I don’t let stuff bother me

I can just think

I can talk

I don’t let myself get to

I feel way too upset

I can’t bounce back

I talk

I know

Ginny shares in an altruistic voice a few times in her interview, but her altruistic voice is less frequent than the other participants. Also, her altruistic voice seems to be more about enjoying the presentations and knowing how to help others than a strong desire to help others or to change the world.

Ginny only speaks with a protective voice a few times in her interview, when referring to the new leader having changed the group, which caused the others to stop

attending. When Ginny shares about the other members not coming, she speaks with concurrent disconnection and protective voices.

Ginny speaks primarily with voices of knowing and connection, as these voices make up 37% and 32.9% of her coded voices, respectively. She also speaks with a substantial amount of the voices of not knowing and disconnection, with occurrences of 11% and 8.2%, respectively. The overall representation of Ginny's voices is included in Figure 5.

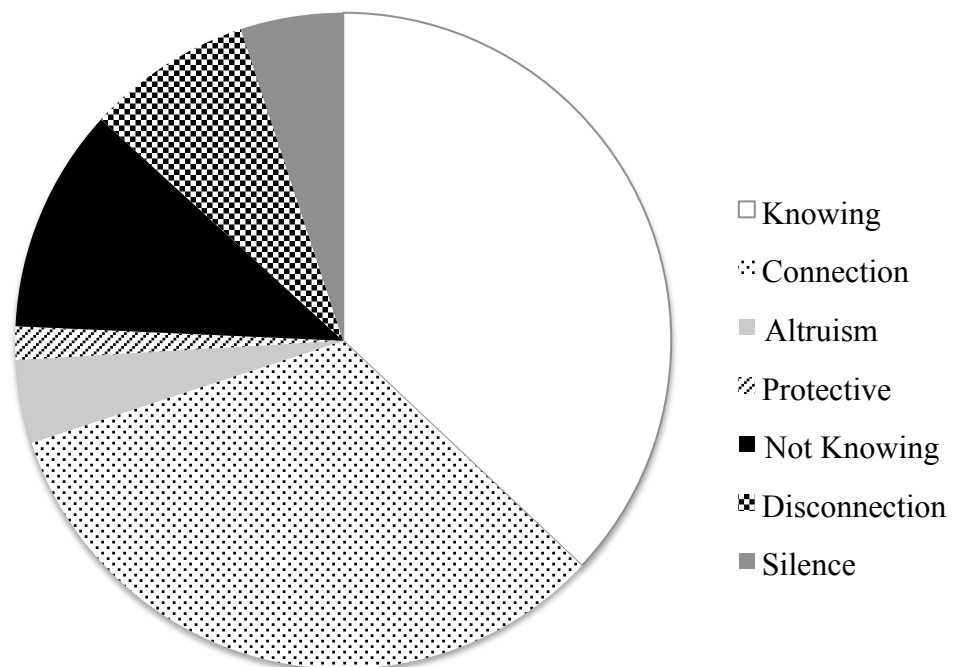


Figure 5. Voices Within Ginny's Coded Expressed Experience. The voices within Ginny's coded expressed experience are displayed above, by percentage, in order to depict how often she speaks in each voice.

Though there are many differences among how the participants evidenced each voice within their experience, there are also numerous similarities in their healing journey to overcome suicidality. In the following chapter, the results of the present study will be

discussed in order to explore how the participants' involvement in a social change program for suicide prevention impacted their resiliency.

CHAPTER 5: DISCUSSION

The present research study began with the goal of considering how the participants' involvement in a social change program for suicide prevention impacted their resiliency. It appeared, from an outside perspective, that the suicide prevention program in the present study had been successful in helping the participants move through their experiences of suicidality. However, little was known about how the involvement in this program had impacted the students from their perspectives. Because the purpose of the Listening Guide is to delve deeply into the lived experience of the participant, much was learned about how these participants experienced change through the Alive Group. Although each participant had a unique experience and was heard differently based on the voices that interacted within her expressed experience, there were common themes and movements heard among the participants. Therefore, the following section will include an outline of what was learned from the present study contextualized within the body of relevant research, clinical and research implications, strengths and limitations, and future directions.

As presented in the literature review, resiliency is conceptualized for the present study as the experience of utilizing internal coping resources to buffer the potential impact of and to overcome life stressors. Many of the participants spoke of their past experiences of suicidality and depression with the vulnerable voices of not knowing, disconnection, and silence. They expressed a lack of knowledge about suicide and an inability to understand or communicate about their internal emotional states. They also expressed a strong sense of disconnection in relationships with family and friends, particularly in the past. Because they felt they had no one to talk to and no one who

understood them, they expressed feelings of isolation and aloneness. The silence within their experience manifested as a fear of being judged and a sense that they could not speak about what was going on in their lives. Many of them experienced the high school environment as silencing, and they felt pressure to keep their struggles a secret. In the context of a resiliency framework, it appears that prior to participation in the group, many of the participants did not have or perhaps were not able to use internal coping resources to overcome their life stressors.

These findings regarding the participants' experiences of suicidality are consistent with current research on suicidality. According to Hooven et al. (2010), risk factors that may predispose individuals to suicidality include depression, anger, anxiety, school problems, family distress, lack of social support, conflicts with parents or peers, hopelessness, poor coping skills, and lack of future-orientation. All of the participants experienced at least some of these risk factors prior to the Alive group. According to the buffering hypothesis (Johnson et al., 2011), risk and resilience are two separate bipolar dimensions. From this perspective, one can overcome suicidality without necessarily removing all risk factors. Resiliency can be developed to such a point that individuals can overcome their life stressors. Furthermore, from a resiliency framework, risk factors can be seen as potential areas for development. Based on the participants' experiences, this study appears to fit with the buffering hypothesis. Although many of the participants experienced a decrease in the presence of some risk factors, other risk factors, including conflict and mental illness, remained present. The participants demonstrated an ability to think about and talk about these risk factors in a different way. Because the participants developed greater resilience, it appears that the risk factors present do not affect their

well-being as negatively now as they did prior to the participants' involvement in the group. Based on the results of this study, it appears that the connection experienced within the group had the most prominent impact on the participants' resiliency.

In the Alive group, the participants experienced deep connection, which strongly impacted their healing journey. The participants shared their stories and they learned that they are not alone. This identification with others enabled them to come to a more rich understanding of themselves and of others. Through the group, they developed deep and real relationships with others, and they gained a greater desire for deep connection in their lives. In an environment filled with trust and free from judgment, they were able to share their stories without fear. They learned that their stories are not something to be ashamed of, but rather are powerful tools of healing. Because they were comfortable with each other and felt supported, the participants felt able to share their stories within the presentations. As they shared their stories, they experienced themselves as powerful agents of healing in the lives of others.

Through the connections experienced in the Alive group, the participants came to know themselves more deeply. Not only did they increase their knowledge about how to handle suicide, they also gained greater self-acceptance and became more comfortable with their own stories. Those who found their emotional experience to be previously confusing, isolating, and silencing tended to see themselves as passive victims of their own emotional states. Through a greater understanding of their internal experience, they were able to help others and experienced themselves as empowered agents of change. As the participants grew in knowledge and learned how to use this knowledge, they spoke more confidently about themselves and about the world around them. At times, there was

still not knowing in their expressed experience. However, the opportunity they had to practice living out their knowing in a safe and supportive environment instilled greater confidence. They also became able to care for others in a way that does not threaten their own well-being for the sake of relationship.

In the present study, the connectedness and support experienced within the group was a powerful mechanism that enhanced resiliency in the participants. This result is consistent with the literature, as Pirruccello (2010) found that connectedness within a school or other community was a protective factor. Through this connection, the participants also demonstrated further protective factors from Pirruccello's (2010) research, such as better social and coping skills, increased self-confidence, an ability access to mental health resources, ability to resolve conflict, and a willingness to seek help.

Consistent with Johnson et al.'s (2011) research, the agency developed within the Alive group members seemed to serve a protective function. In other words, the members experienced themselves not only as in control of their own experience, but also as powerful agents of healing in the lives of others. This sense that individuals are in control of their own actions, along with positive attributional style or optimism, allows them to attribute negative events to external causes rather than to blame themselves (Johnson et al., 2011). This attribution then enables them to focus their attention on doing what they can to remain healthy. Many of the participants demonstrated an increase in their sense of agency. For instance, when asked about how she understands resiliency in her own life, Anne described that when outside forces try to throw something at her, she is able to respond with "No, I'm going to be happy, this is my

decision. I can decide to be unhappy or I can decide to be happy...I like to think you have a certain say in how you feel.” Before the group, Anne felt completely out of control, but her experience within the Alive group empowered her to be able to say, “Screw you, life. I’ve got my own thing going.”

Through their connection in the Alive group, the members also demonstrated an ability to develop and maintain other supportive relationships. As supportive family relationships and social support are demonstrated to be protective factors (Johnson et al., 2011; Pirruccello, 2010), the ability to extend their networks of support and establish positive familial relationships added to the participants’ resiliency.

According to Johnson et al. (2011), increased self-esteem is a moderating factor that reduces risk of suicide in individuals. The ability the participants had to experience identification and learn that their experiences and their stories are not something to be ashamed of seems to have increase their sense of self-esteem. It appeared that seeing how their stories could impact the lives of others in a positive way helped the participants to see the value in themselves and in their stories.

Because the Alive members knew firsthand what it was like to deal with depression and suicidality, a desire for altruism flowed naturally from their voice of knowing. Having been there, they developed a desire to give back and to use their experiences to speak against the not knowing, disconnection, and silence that exists in society. The empathy that they have developed through deep connections with others has led to their desire to help others who struggle with similar concerns.

From a resilience framework, the risk factors or internal deficits that might elevate one’s risk of suicide can be considered to be possible areas of development. In

this way, the experience of the voices of vulnerability gives the participants the ability to identify with and have empathy for others who might be in a vulnerable place.

Therefore, the vulnerable voices can be a potential for creating a positive impact in the world, if the experience of moving through these dark places is handled well by people who can foster experiences of true connection.

Within the feminist literature, the voices identified are often voices of resistance and oppression. In this study, the voices of vulnerability seem to result from the oppression these girls experienced, either from their social environment or from their own emotional experience. Similarly, the voices of resilience seem to indicate the resistance of the participants. At times, they are resisting the stigma and the vulnerable voices that exist within society. They are also resisting the experience of suicidality and depression.

The participants in the present study appeared to experience a development of voice, through their experiences of connection. The development of voice is an essential process for resistance, as Gilligan (1982) says “without voice, there is no possibility for resistance” (p. xix). The findings from the Alive participants seem to be consistent with Gilligan’s theories of female development and the importance of developing voice, particularly in adolescence. Gilligan (1982) purports that in order to have relationship, connection is required. Relationships depend “not only on the capacity for empathy or the ability to listen to others and learn their language or take their point of view, but also on having a voice and having a language” (Gilligan, 1982, p. xix). However, a common relational error that women make is that they tend to prioritize knowing others, believing that through others, they will know themselves. This relational error often results in

women losing touch with and dissociating from themselves and their own voices, for the sake of having relationships with others.

In Gilligan's research, the researchers heard a shift in adolescent girls' voices as they spoke of relationships and their sense of themselves. Gilligan (1982) states:

Girls at the edge of adolescence describe impossible situations – psychological dilemmas in which they felt that if they said what they were feeling and thinking no one would want to be with them, and if they didn't say what they were thinking and feeling they would be all alone, no one would know what was happening to them.

The participants in the present study evidenced this dilemma. Though they felt the urgency in their lives to be in relationship, they did not feel the freedom to express what they were feeling and thinking. Particularly in the times of not knowing, many of them did not have the words to explain or the ability to understand their own experience. In this time of dissociating from their own experience, the participants found Alive.

Through this group of other females, the participants did not have to experience the above situation as a dilemma. The Alive group involved connecting with other women in such a way that they felt able to share, to speak, and to know. Through connections with others, they came to know themselves. Like Gilligan, I was struck by the fearlessness and honesty in these girls and their determination to speak truth while maintaining relationship. Female development often involves encountering a social reality that differs from one's own experience. Because these participants found Alive, they did not have to relinquish what they knew about themselves and their own experience. They were able to participate in relationships that enabled them to explore their inner world and the

experiences of others. Through this experience of connection, they were able to take part in using their voice to change society, and they expressed their resistance to the confusion, disconnection, and silence that was the norm.

In the context of the intervention strategies evidenced in the literature review, like Greidanus and Everall (2010), the present study demonstrates the positive impact that occurs when helping within a community. As the participants became engaged in the greater community, they made connections with other people. The group was able to help those who watched the presentation, and they experienced healing themselves. As a result, this suicide prevention program, geared toward social change, benefited not only the previously high-risk participants, but also those in the presentation audiences.

Focus Group

The focus group was originally planned in order to prioritize ontological, educative, catalytic, and tactical authenticity within the present study. In the focus group, the participants were able to share what they had learned from the group and together, the group expanded upon their individual constructions. The participants also heard the perspectives of other members. Although the participants had been empowered to change their circumstances while they were involved in the group, many of them expressed regret, sadness, and anger at the recent changes in leadership. Due to the dynamics in the group with the new leader, the participants feared that the group was changing from what they had created it to be. As heard in their protective voice, they wanted to keep safe what they had created together. Because they were together in the focus group, this protective voice was quite clear; their energy seemed to multiply as they began discussing the recent changes in the group. Therefore, although they were

empowered throughout their involvement in the Alive group and in the present study, there was an overarching sense of disempowerment as their final experience with the Alive group was primarily negative.

In this sense, the current study was well timed, because it gave the Alive members a forum in which to process their experiences and a place to voice their discontent. As one member said in the focus group, “I never really stopped to think about how Alive had affected me.” This study gave the participants a chance to discuss and process their time in the group. The focus group seemed to function as a positive capstone experience, as it occurred during the last week of school of the year. With this timing, the focus group seemed to function as a place where the Alive group members could get together once again and celebrate their positive changes.

Overall, the themes present in the focus group were consistent with the themes identified in the individual interviews. Because of the nature of the girls’ conversation, the resilient voices were more prominent as they seemed to be discussing and celebrating the aspects of their experience that had gone well. They did strongly emphasize within the focus group how much they missed their past leader and as they all began sharing, their enthusiasm quickly increased in intensity.

A further intention of the focus group was to honour the participants as experts on their own experience. For this reason, the research team presented their preliminary impressions of the interviews to the participants. They had the opportunity to speak to what was heard from their interviews and comment on the research team’s observations. The Alive group members affirmed the themes that had been noted by the researchers.

Research Paradigm

The Listening Guide is closely aligned within the constructivist research paradigm and, as outlined in the Methodology section, I used the constructivist paradigm to guide the research design and processes. An important tenet of the constructivist paradigm is the existence of multiple realities, and an implication of this tenet is that research questions and processes will develop and evolve as the study progresses. Through being in relationship with the research participants and their stories, I made an effort to have any knowledge gained throughout the study inform the research purpose and process.

As a result of this emphasis, it became apparent very quickly that elements of the transformative research paradigm fit well within this study. The transformative paradigm acknowledges that knowledge and reality are constructed within social hierarchies and there is an emphasis on the promotion of social justice and human rights. According to Mertens (2010), transformative researchers “consciously and explicitly position themselves side by side with the less powerful in a joint effort to bring about social transformation” (p. 21).

The participants in the present study have social change as a priority. Through their involvement with the group, they became aware of the ways that society oppresses those who are suicidal, particularly youth. These participants resist the not knowing, disconnection, and silence they see in society and they have been inspired to do something about it. As I sat with them and got to know their stories, I could not help but be impacted by what I heard. For this reason, it did not seem as though this study fully fit within a traditional constructivist paradigm any longer. Mertens (2010) acknowledges that constructivist researchers are recognizing the need to position their work within the context of social justice and as a result, the boundaries between paradigms are becoming

more diffuse. The reflexivity employed within the research process made the permeability of these boundaries very apparent as this study's emphasis quickly shifted toward one of social action. Because the present study was not initially developed with transformative tenets in mind, it does not fit well in this paradigm. However, because of the recent shift in emphasis, it appears that the most fitting paradigm for this study is a constructivist paradigm with an emphasis on transformative social change.

Implications

Clinical. The present study has many implications for counsellors working within the clinical setting. First of all, through listening deeply and purposefully to the participants' lived experiences, I was able to hear the multiple layers of their experience and interpret their words in a new light. I was also able to interpret and hear the participants' words within the relational and cultural contexts of their lives.

Implementing the Listening Guide trains researchers to process and deeply listen to the participants' experience. Therefore, engaging in the process of deep listening to clients, through a method such as the Listening Guide, is a valuable skill for all clinicians.

Engaging in the process of deep listening would also enable clinicians to better understand their own inner experience.

The participants also commented on the value they found in reflecting on their own experiences. Therefore, it is valuable to provide for clients the opportunity to reflect on their own growth processes. This implication for clinical work applies to both individual and group programs, and it would enable clients to become more aware of the impact that intervention strategies have on their lives.

More deeply understanding the experience of a suicidal adolescent has implications for any counselor working with suicidal individuals. While each client's story is unique, learning about the voices that exist within these participants' expressed experience will help counsellors have a greater appreciation for clients' internal struggles. More specifically, it was clear that the experience of being adolescents in middle school or high school brought on much confusion, silence and disconnection. Although all adolescents experience transitions and changes during this time, intervention is most critical for the adolescents who may be identified as high-risk. Therefore, the present study demonstrates the importance of intervening in early adolescence to connect adolescents with the support needed to make a healthy transition into adulthood.

Because the connectedness was of such importance in the healing of the participants, it is clear that building the capacity for connection is an important clinical priority when working with suicidal or high-risk adolescents. In the Alive group, the component of connection was built into the format of the group. However, within the counselling setting, it is important to strengthen the social connectedness of the individual, build a network of accountability and support, and foster a sense of belonging. This emphasis on connection could also include communication skills that help the individual develop deep relationships, both now and in the future.

The participants also emphasized the importance of encountering leaders and counsellors that truly cared about them. When a professional takes the time to get to know them as people, this effort builds strong connection and helps foster healing. The participants shared that counsellors or leaders who treat caring as a job is profoundly disconnecting. As a result, an important implication for counsellors is that when working

with adolescents, genuine care is vital. Treating youth as though they are just another client and neglecting to appreciate them as people is not helpful in fostering healing.

Consistent with the altruistic voice, it was important for the participants to play a part in a program that was bigger than themselves and to experience themselves as active agents of change. This finding supports Gilligan and Machoian's (2002) assertion that responding to an adolescent's suicidality should involve encouraging them to experience themselves as powerful. Within the counselling setting, it would therefore be important to engage clients in social action initiatives, based on their areas of interest. It should be noted that the participants in the Alive group felt they would have been unable to present to others outside of the group if they did not have the support network within the group. Therefore, when working with clients who are experiencing suicidality or who are high-risk, it is vital to ensure that they feel supported and well before engaging in social initiatives.

These findings may be of particular use for counsellors looking to set up a group for high-risk adolescents or those experiencing suicidality. Much of the hurt that existed in the participants' lives came from wounds within relationships or within social settings. Therefore, taking part in a supportive group has the potential for great effectiveness and can provide a corrective emotional experience for these youth. Lakin and Mahoney (2006) described that for adolescents, a crucial developmental task is to carry out and internalize the drives for affiliation, autonomy and acceptance. As demonstrated with the Alive group, the group environment has the potential to help participants achieve all of the above developmental tasks, further adding to their resilience. The resilient voices in

the present study of connection, knowing and altruism all spoke to the fulfillment of the drives for affiliation, autonomy and acceptance.

As brought up by Harper, many adolescents feel overwhelmed because they have friends experiencing suicidality. Harper did not find much support or education that she could use to help her friends. She joined the group specifically to learn how to provide support for suicidal friends. Furthermore, many of the participants spoke directly about receiving help from adults and though it was helpful at times, they also described it as scary and unhelpful. Smith et al. (2009) state that not much is known about how adolescents seek or perceive help-seeking when they are in a suicidal state. According to the results of this study, accessing help when you are in a suicidal state from adults is very difficult. As a result, many youth are coming to their friends for help and support. Therefore, engaging youth in the suicide intervention initiatives is important so that there are fewer barriers to suicidal youth in help-seeking behaviour and also so that the youth that are confided in have the knowledge necessary to help their friends. Since adults do control many of the community resources, it is also important to engage the youth as gatekeepers that are aware of the community resources and can get other youth connected with appropriate professionals. Wyman et al. (2010) and Insel and Gould (2008) demonstrated similar findings in support of the need to engage youth leaders in peer-to-peer programs in order to reach at-risk youth. Since adolescents are more privy than adults to the suicidal behaviour in their peers, increasing students' partnering with adults to assist their suicidal peers is vital in order to reduce suicidal behaviour and reach those that may not ask for or accept help from adults.

Research. When working from a resiliency framework with suicidal or high-risk adolescents, it is vital that efforts are made to enhance resilience in the participants throughout the process of the study. The Listening Guide is a method consistent with this aim as it is intended to be an empowering method that prioritizes the experience of the participant. For this reason, it is helpful to utilize qualitative methods of research, such as the Listening Guide, with this population, in order to best enhance resiliency throughout the process.

It appears that utilizing the Listening Guide enabled the participants to be heard more deeply and for the complexity of their internal experience to be captured. In particular, the participants responded well to the relational format of the study. It is clear that these participants oppose environments that foster disconnection and silence. In fact, for healing to occur, they need trust, openness, a lack of judgment, and deep connection. In the words of Anne, “Nothing's worse than trying to tell someone that you cut yourself or that you throw up to someone you don't even know that's, like, super old, and they're like [looking at their watch].” An important research implication based on the findings of the present study is that when conducting research with adolescents, it is important to foster an environment of connection, empathy, trust and openness. Through creating a supportive environment, adolescents will be more likely to let you into their world.

Strengths and Limitations

A weakness of the present study is that after it had begun, the original leader of the Alive group was unable to continue in her leadership role. As discussed earlier, this change in leadership created a disruption for the group members and influenced many of them to discontinue involvement in the group. Because many of the members reacted so

strongly to this shift in leadership, it is possible that the impact of the Alive group was overshadowed by their experience of the shift. Serendipitously, however, it seems that the present study was well timed as the participants were in need of a forum to process their experiences, and they needed their voices to be heard. The timing of the interviews and focus group occurred in such a way as to act as a capstone experience for the participants to summarize, celebrate, and pass on their experiences from the Alive group. In the focus group, some of the participants expressed the value they found in reflecting on how they had changed through the Alive group. As was initially expected, sharing their stories, being listened to, and identifying their voices was a positive and validating experience. It is this researcher's hope that the participants will use this process of reflection to determine how to continue on paths of resiliency in their own lives.

A further limitation is that the present study includes just five members of Alive. Though the qualitative analysis of these members' experiences is meaningful, their experiences may not represent each members experience within the group. The girls who were interviewed also presented as very eager to discuss their experiences with the group. It is possible that those who may have had a different, or perhaps more negative, experience with the group may have been less likely to respond to the invitation to participate. Due to the demographics of the Alive group, no males were included in the present study. Therefore, the findings from the present study may apply only to females.

A general misunderstanding of qualitative research is that it is limited in its generalizability. Because of the grassroots way that this group formed and the way that the personalities of each participant interacted, the Alive group was unique. Therefore, it is not be possible to recreate another Alive group in exactly the same way.

Much has been learned, however, about what was helpful for the healing experiences of the Alive members. As a result of this depth of learning, it is very possible to use this knowledge to inform the creation of a similar group. Therefore, while the results of this study are not generalizable, they are highly transferable.

As discussed previously, the implementation of the Listening Guide is meant to be a relational process that empowers the participants and enables the researchers to truly listen to the participants' voices. For these reasons, there was a purposeful effort made to build relationships with the group members throughout the process. Through attending Alive meetings, conducting interviews, and holding a focus group, it is this researcher's opinion that this relational involvement strengthened the results of the study and led to greater richness of data and analysis. The relational contact with the participants enabled the researchers to engage with the interview analysis in greater depth, and the relational and cultural contexts were more evident. It would have further strengthened this relational connection if the researcher had been able to attend one of the Alive group presentations. Also, it would have been helpful to speak to the former Alive group leader. Because she got to know the participants deeply, she may have added useful insight into their personalities and into the way participation in the Alive group has impacted their lives.

The analysis occurred with at least one other member of the research team and there was continual dialogue about how the researcher team was reacting to the participants' stories. When there were different reactions or interpretations among the researchers, we were able to bounce ideas off each other and engage in a discourse that

served to deepen the complexity of the analysis process. Therefore, a strength of this study is the relational way that the analysis process was completed.

Future Directions

The Listening Guide is a helpful method to use within discovery research and to uncover new questions. It would be important, in future research, to investigate if similar themes exist in the members of other suicide prevention groups or with other adolescents experiencing suicidality. Given the transformative experience that the Alive group was for these members, it would also be helpful to create similar groups and determine the transferability of the results of the present study.

Because the Alive group was a very specific type of group, it would be helpful to look into other types of groups and determine the impact on the participants. For instance, would a similar group with younger participants be effective? Another future direction of the present research is to investigate the impact the Alive presentations had on the audiences. Were there meaningful shifts in the suicidality or resiliency of those who viewed the presentation? It appears that the participants experienced profound shifts in the way they understand the world and their own inner experiences. Carrying out a longitudinal study with these participants would be helpful in determining whether the impact of such a group continues over time.

This study was done only with Caucasian women, who were adolescents in high school. Future research could explore the experiences of suicidality in male participants. Due to gender differences, it is likely that males would experience a suicide prevention group and the development of resilience than the females in the present study. It would also be helpful to investigate the experiences of participants with greater ethnic diversity.

Because the participants were strongly embedded and impacted by the systems surrounding them, it would be helpful to do further research on the impact that friends, parents, families, and other relationships have on moving away from suicidality. It is also important to further investigate the processes within family and school systems that promote resilience in youth experiencing suicidality.

Conclusions

I began this study hoping to explore how participation in a suicide prevention group impacted resiliency in adolescents who were experiencing suicidality. It appears that the resilience of the participants was impacted primarily through the experience of connection. Through identification and connection with others who had experienced similar difficulties, the participants discovered that they are not alone and that there is hope for them. Through this identification, the participants were able to come to a greater understanding of their own internal experience. Their deeper understanding seemed to give the participants a greater sense of self-efficacy, and they felt able to take control of their lives. The experience of connection also enabled the participants to experience vulnerability in a safe and supportive environment. Learning that relationships can provide healing seemed to enable the participants to create more healthy relationships in their own lives.

Through the connection in the Alive group, the participants came to know themselves more deeply, and they became more confident in trusting their own intuition. Becoming more familiar with who they are and who they want to be, they were more able to maintain a healthy emotional state. Though many of them still evidenced risk factors for suicidality, they became more able to bounce back from adverse circumstances, and

they knew what to do to stay well. Learning about suicidality enabled the participants to help others and to help themselves. Because they became more aware of how helping others can negatively impact their own well-being, the participants learned to ask for what they need, ensuring that they do not lose touch with their own voice for the sake of relationship.

According to their expressed experience, these adolescent girls were profoundly transformed through their involvement in the group. The voices of vulnerability evidenced in this study include voices of not knowing, disconnection, and silence. These voices existed primarily as the participants discussed past experiences of suicidality and depression. The voices of resiliency within the participants' experiences include voices of knowing, connection, altruism, and protection. Through the connection they experienced in the Alive group, they have moved away from these voices of vulnerability and they are coming to a greater place of knowing about themselves and about others. As they experienced healing, they expressed a desire to help others and to impact the world with what they have learned.

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APPENDIX A

Sample Listening Guide Analysis

**Note: The Step One analysis was done separately by all members of the research team. In order to better demonstrate the analysis process, I have included Step One analyses from both Jennifer Decker, the research assistant, and the primary researcher.*

Step One (Jennifer Decker, Research Assistant)

Plot. This is a story about transformation. A young woman who moved from a place of depression and helplessness to a place of confidence and resilience. She talks about her personal experience with depression and suicidality. She was in a sad state, hating every thing, feeling alone, not talking to anyone, and being tired all the time. She thought about committing suicide. She wanted to talk to someone, talk to her parents, but aloneness kept her quiet. A fake smile kept others at bay. Things changed around the time she joined the Alive group. She found her voice, gained confidence, found connection, and began to feel like herself again. Trust and openness characterized the group. She learned that she is not alone; every member has their own story of suffering. She is normal; these are things normal teenagers go through. The group exposed her to others—Blue Wave and Individual Inspiration—who inspired her and brought more hope. The group also brought the chance to help others. Giving presentations made her feel nervous and happy and grateful. The education made her more aware of people's actions and feelings. She now feels like she knows what to do to help. She was able to put this knowledge to use when her ex-boyfriend threatened to commit suicide. She was able to move from a scared, upset, and angry place, to a place where she knew this was a cry for help. One thing that made Alive special is that it was teenagers talking to other teenagers—this is impacting and more comfortable. Another important thing was the group leader. She called out leadership abilities in the group members, empowering this young woman find her role and utilize her strengths. She reconnected with others, including her parents, being honest with them about her experience. Another important piece of her story was going for individual counselling, learning about herself and her wants.

One area of seeming contradiction was when she talked about trying to cheer up her friend who used to be depressed: "No, you can't be sad, you have to be happy." Another was when she said, "I still fake a smile every day." I was unsure about the tense, if she was referring to the past or present.

Listener's Response. What really stood out for me was a contrast between the voice of depression and the voice of empowerment or resilience. I could feel the weight of the depression in her words: the aloneness, the having to fake a smile, the hiding that part of yourself, the keeping of feelings inside. It makes me feel heavy and reminds me of my own experience with depression. I was impressed with her positive attitude. It sounds like the education and experience of Alive has provided a context for her own suffering. It sounds like it has provided a sense of control. She knows the symptoms and characteristics, she knows what to do, she knows when to call the police, she knows when

there's nothing else she can do. She has gone from not knowing to knowing. That was key for me: the education transforming the way she seems to feel in the world. I was also impressed by her desire to "pay it forward," to help others who are in similar situations, to tell them they are not alone and there are options other than suicide. Her words about holding on and that there's more to life than you expect come from a place of experience. They mean more because she has hit "rock bottom." Her story is encouraging for me, and although some of the contradictions in her interview make me wonder how fully she understands emotions, I am inspired by her and proud of her.

Step One (Chelsea Ohlmann, Primary Researcher)

Plot and Listener's Response. Jane's story seems to have moved from a place of being very depressed and alone to being able to handle her own emotions and relationships. The Alive group seems to have helped her along in this journey. As I listened to Jane, she seems wise and observant. She speaks of being able to mediate between other members of the group and help them to understand things. She shares that she is "usually the person to break everything down for them to understand." She also shared about being a leader in the group and that she was often the one to convince the other members to get on board with new ideas. Jane shares about her experience in a calm and collected way that leads me to believe that she has really processed and understands the impact of the Alive group. She states that "me being in the group has made me a better person and has made me somebody who I want to be for the rest of my life as a person right now." Not only has she learned about what to do in situations with suicidality, she has come to better know who she is and who she would like to be.

Jane speaks about her relationships with friends, boyfriend, parents, and counsellors. The relationships with the other members of the Alive group seem to be of particular importance in her journey to know herself. In this listening, a dominant theme I heard was the movement from knowing to not knowing and from not wanting to "be here" Repeated metaphors, images, dominant themes to deciding to "be here." Similarly, I heard a shift in her experience from a place of confusion to a greater understanding of her own emotions. A metaphor that I heard Jane use was using the language of being alone to describe depression and suicidality. A contradiction that I heard was Jane speaking about not feeling comfortable expressing negative emotions. While she speaks about being able to open up to others, she also speaks of feeling pressure to "fake a smile" when she's not feeling happy. In terms of the research context, this was the first interview I completed and as a result, I found myself being unsure of the interview process and less familiar with the questions, which may have kept me from being fully engaged with the participant. I found myself thinking about this uncertainty as I listened to the interview and I noticed that I was more methodical in the interview than I would have liked to be. I also noticed hesitancy in how I approached the topic of suicide with her, which surprised me. As I listened to Jane, I felt happy, fearful, hesitant, grateful, and open. I also noticed that I felt slightly emotionally disconnected as I listened to her story. Because Jane talks about her emotions and experiences in a very cognitive manner, my cognitive side was engaged as I listened to her.

Step Two: I/We Poems

I've been more aware
I can pick up
I've seen
now I know what to do

I've noticed
I've noticed
I wanted to be
When I started
I was
if I was
what I want to be

I was
I would say
I was in a really depressed stage
I thought about
I didn't have
I went through
I thought about
I decided not to
I couldn't do it
I didn't want to
I was really sad
I hated everything
I was
I started
I became more
I want
I guess

I had nobody
I
I wanted
I didn't want
I felt

I also found
I was

I lost
I was
I was

I didn't only lose
I lost
I had nobody

I'm in a really good place
I'm really happy
I'm really thankful
I found
I'm really thankful
I now have the ability

I was
I didn't know
I felt
I didn't know
I went
I saw it

We worked through

I was like
I have
I was like
I don't want
I don't want
I want to be here
I want to
I want to help people
I did.

I'm always like
I love it

We're so clicked
We can tell each other anything now

I was like
I want to be able
I would hate
I wish
I'm totally one of those people
I could be the happiest
I could be so sad
I still fake a smile
I totally understand
I wish
I usually have
I didn't have
I felt

I saw
I forget

I always make
I'm like
I remembered
I think
I had just started
I saw
I used

I'd just say
I love
I'm grateful
I be there
I don't know

We've had

We keep
We keep

I don't think
I dated
I broke up
I was
I wasn't
I wouldn't
I didn't want to be with him again
I'm seeing
I would say

I tell

We go

I ask

I didn't want him to do that
I just wanted him to stop
I know
I know
I'm not really able to help him
I have to back away

I met
I was actually back to myself

I was
I'm not sure

I used to go
I would just look
I live
I just, like, look
I actually had
I kind of spent
I could talk

I felt
I was tired
I didn't want to go
I did go
I felt
I was

I wasn't
I always pretended I was happy
I'm generally a really happy person
I just didn't feel happy at all
I tried to talk

I was, like, no
I'm not
I have nobody
I'm saying

I would definitely say
I would also tell
If I had done it
I wouldn't have
I wouldn't have
I'm really thankful
I met
If I had
I probably would have never

I've hit rock bottom
I've gone
I started
I was
I went
I've had

I needed
I'm grateful
I actually rear-ended

I was really upset
I rear-ended
I hit my rock bottom
I was

I need
I need

We weren't really doing anything
We weren't presenting

I decided
I never knew what I wanted
I was like
I want
I hope
I hope
I get to tell
I went
I know

We're having an issue

I know

We did

I suggested

We do
If we do it

We have
We just kind of have to work

I guess
I think
I don't think
I'm totally open-minded
I'm in
I'm not going

We created
We hope
We hope
We created

I hope
I don't think

I went
I went through all the stuff
I saw
I was

We discussed
We thought
We came
We all agreed
We decided
We were also going to do something
I don't think
We decided
We would do
We wanted to make
We took
We used
We researched
We used
We decided
We would go
We'd make them aware
I think
We did
We did
We shared
I've thought
I know
We were
We don't know her that well
We're open-minded
We don't want to lose
We created
I try
I might have to
We just started
I'm usually
We all have
I was
I'd be
We'll hear
I was
I can
We usually vote together
We just try
We voted
We had
We hated
We came up
We all agreed
If I

I definitely
 I want to be
 I went
 If I came
 I would know
 I'd know what to do
 I would say
 I was able
 I came
 I can't do anything
 I need
 I was
 I told
 I'm pretty sure
 We've come a long way

I think
 I don't think
 I think
 I told
 I actually told
 I thought
 I was
 I was
 I am
 I kind of
 I stopped telling
 I started
 I can tell them
 If I'm going
 If I'm staying out
 I don't think

Step Three: Listening for Contrapuntal Voices

Voices listened for and legend for coding:

Depression/Suicidality

Not knowing

Silence

Disconnection

Resiliency/Healing

Knowing

Connection

Altruism

Protective voice

- Each voice was listened for and coded within the interview and this coding was done different coloured highlighters. In this Appendix, the coding is represented by highlighting and text colours.
- On the paper copies of the analysis, the literal voice was marked with a blue underline and it coincided with the voices of silence, knowing, altruism, and connection. On the following document, the literal voice is indicated with red or blue type.
- When there is double coding or co-occurring voices, this is reflected in the colour of the text.

Q = Chelsea (interviewer)

A = Jane (participant)

(Interview begins)

Q Um, so is there anything you wanted to share to start off about anything that kind of sticks out for you about how this experience has been with the Alive group?

A Um, no.

Q Okay. We can jump to some specific questions then?

A Then maybe something will --

Q Get your mind going. Okay. So looking back to your life before you started in the Alive group, can you think of any changes that have happened in your life since then?

A Um, I've been more aware of people's actions and how they feel, and I can pick up when people feel depressed or suicidal, kind of. Like, my friend, he definitely -- I've seen him try to commit suicide tons of times, and now I know what to do and how to help him so that he doesn't try to kill himself. Yeah, it makes me a better person. It makes me feel like a better person to help people.

Q So you notice you've been more aware of how other people feel and noticing that with your friend?

A Yeah.

Q And it feels good to help other people?

A It feels good to know what the warning signs are and know how to help them so

that you don't lose somebody.

Q So the being aware of other people's feelings, would you say that is more specific to just suicide, or have you noticed that in other areas of your life too?

A I've noticed it in other areas, like in relationships, like, a boyfriend/girlfriend relationship or my mom and dad's relationship or towards me, and Harper and my relationship, yeah.

Q Harper in the group?

A Yeah, we're best friends.

Q Okay. Can you think of an example of how you've noticed that?

A I've noticed that we're more -- we used to fight a lot and now we don't fight at all anymore and that's because we know how to talk with each other and we know how to be open with each other because of the group.

Q Okay. You and Harper?

A Mm-hm.

Q That's very cool. It sounds like it's made you guys closer.

A Yeah.

Q Cool. So is there anything that you kind of looking forward would like more of in your life based on --

A Like towards the group or --

Q Just kind of looking back on your experience and some of the ways that you've benefitted from it, is there anything like that that you want more of in your life, like any kind of more future goals or that kind of thing?

A Mmmm... no?

Q Am I confusing you?

A Yeah, a little. Like, do you mean --

Q Well, sometimes when you're becoming more aware of, let's say, how other people feel around you, when you learn something new, it can sometimes make you aware of, oh, I didn't realize that I could even do this, and now there's all

these other kind of goals that are open to me. Like, for instance, oh, I like helping people, maybe I want to be a counsellor or maybe I want to be a teacher, things like that. That's just kind of one example. Does that fit with you at all?

A Yeah, totally.

Q Okay. How so?

A Because I wanted to be a teacher. When I started this group, I was like, that would be really cool if I was a counsellor or a teacher, to be able to talk to people and help them, but yeah.

Q So in some ways, your experience has been a little piece of what you might see --

A Yeah, what I want to be in the future.

Q Yeah, and it fits with you it sounds like?

A Mm-hm.

Q Okay. Cool. So how would you describe your life before the Alive group?

A Before the Alive group, I was I would say not -- I was in a really depressed stage almost. I thought about, like -- because I didn't have my friends because I went through a breakup, I thought about wanting to kill myself, but then I decided not to because I couldn't do it and I didn't want to. It's just because I was really sad and I hated everything that was going on, and then when we started the group I was kind of shy and not really talking at all to anybody, and then a couple weeks into the group, Harper and I started becoming friends again, and, like, [other group member] also, but she's not in the group anymore, became friends again, and things started looking up for me in the group, and then from the group I became more - what's the word I want to use? - outgoing, I guess, being able to talk more and voice my opinion instead of sit there in the corner and be quiet.

Q So it sounds like you -- in participating in the group, you developed stronger relationships with just some of the group members?

A Mm-hm.

Q And then also more confidence?

A Yeah.

Q Being able to kind of share your opinions and that kind of thing?

A Mm-hm.

Q It sounds like that was a really difficult time for you before heading into the group.

A Yeah.

Q Can you share a little more about like your experience, with feeling like you wanted to escape the pain or not live anymore, that kind of thing. What was that like for you?

A It was really bad. I had nobody to talk to at all, and when I -- I wanted to tell my parents but I didn't want to because they're really strict and stuff, but I felt, like, really alone, like nobody was there anymore for me, and then the group helped a lot, and I also found -- I was dating another guy, and he really helped me. We did stuff together, and he was always with me, and he, like, cheered me up. But it was a really sad time for me because also I lost -- like, the guy I was with before, I was friends with all of his friends, so I didn't only lose him; I lost all of my friends with him, so I had nobody.

Q Yeah, I can imagine that would make you feel really alone.

A Mm-hm.

Q I'm really glad you found the group.

A Yeah, me too.

Q Thank you for sharing that. I know it can be hard. That can be hard sometimes. What's it like -- in the place where you are now, what's it like to look back on that time?

A I'm in a really good place right now. I'm really happy with everything that's going on in my life, and I'm really thankful that I found the group, and I'm really thankful that I now have the ability to tell my parents stuff, and also seeing [name of other program], she really inspired me and stuff because she, like, went

through that, also, and to -- when I was in that state, I didn't know how I felt and I didn't know really what the signs were, and when I went to the group and I saw it and we worked through it and I was like, wow, I have all those characteristics, and I was like, I don't want to do that, like, I don't want to -- I want to be here, I want to -- I want to help people that felt like I did.

Q It sounds like you're really -- like, first of all, the group helped you in your own experience and then helped you use that experience to kind of reach out to other people?

A Mm-hm, yeah.

Q Cool. So participating in the group, is there a story that sticks out to you about a really meaningful or important experience that you had in the group?

A Well, Anne's story with her -- having, like, depression and having to take pills for her depression and stuff is really inspiring because she knew that she wasn't a normal person and she went and got help, and now she's a really cool person. She's so funny and stuff, and every time she's down I'm always like, no, you can't be sad, you have to be happy, because she's so happy all the time. Just, like, her whole -- like, I love it when she shares her story because everyone in the room just goes quiet, and they're always, like, fixed on her.

Q So there's something powerful in her story?

A Yeah.

Q Yeah, that touches you and you notice that it touches other people too?

A Mm-hm.

Q Okay. Yeah, it's really meaningful when we can have those connections with people around us, and we're not alone, we're not the only person who struggles with that kind of thing.

A And like all the girls in the group, they all have their own stories, and it's nice to share our feelings, and we're so clicked. We can tell each other anything now.

Q That's so cool. Any other kind of meaningful experiences that stick out to you

from any of the presentations or from being in the group?

A There was this one guy, and he made a really valid point to us that you can't always know when someone's going to commit suicide. His best friend asked a girl out, and he was, like, fine. Like, she rejected him, and he was like, oh, yeah, but it's fine, whatever. A couple hours later, he stood in front of a train and killed himself, and he had no signs at all because he played it off like it was cool, like he didn't care that this girl rejected him, which is totally true. You can never, ever, like, assume somebody's going to commit suicide. The happiest person in the world could just decide to jump off a cliff because you don't know their history at all. That story really stuck out to me. I was like, it's true, and I want to be able to tell people that story and be like, you can't always know, and if you have a feeling, just -- like, if that happens, maybe you should be with, like, him and hang out with him and not just go home or go to your sporting event and not -- and then find out your best friend died.

Q Mm-hm. Is there any feelings that thinking about that story brings up for you?

A I would hate -- like, it makes me feel sad. Like, I wish that it was more easier for people to see that you're feeling that down, and I'm totally one of those people that I could be the happiest -- I could be so sad, but I still fake a smile every day, so I totally understand how he felt, but even -- I wish he would just let somebody know.

Q Mm-hm. So some sadness sounds like some -- yeah, some hopes for how people would be able to handle somebody in that situation.

A Mm-hm.

Q I'm wondering if you were in a place like that, if you were in a place where you felt, you know, so much going on inside but felt like you had to put on a face. Like, is there anything that you would hope that other people around you would do for you or say to you?

A If things are going -- I usually have Harper to talk to about those things, but

back, like, before the group when I didn't have anybody to talk to and I felt all those feelings inside, I saw a presentation that [teach at school] took me to, actually, and I forget what it's called, but anyway, he came in and just -- he was just so funny, and basically he told us just a smile in the hallway is good enough for somebody to cheer them up, and I always make an effort to smile at people in the hallway just so that they cheer up a little bit, and even people that smile at me, like, a stranger, I'm like, oh, that was nice of them, and that kind of helps me -- like, it kind of makes me feel like somebody cares still.

Q Yeah, it sounds like -- you said at the beginning that you have become more aware of how people are feeling.

A Mm-hm.

Q But at the same time, it also sounds like you're aware of how what people are feeling might be covered up by something, like, you know, a smile or something like that.

A Mm-hm.

Q That's a really cool thought, just to smile at people.

A Yeah, and I remembered what the guy -- it's called [name of social change program] That's what it was.

Q Okay. So he came to talk to your class or --

A He came to talk to the school, I think, but, like, in small sections. Only a couple classes went.

Q And it sounds like that was a meaningful presentation for you?

A Yeah, it was. It opened my eyes to a lot of things, too, because I had just started the Alive group and then I saw that presentation, and I used some of the impact he gave me on the group to even just a smile or anything can cheer somebody up.

Q And it sounds like that's fit well. You guys are making an impact, too, and you're all just individuals in the Alive group?

A Mm-hm.

Q And you all have your individual stories, but you're able to come together, too and do an individual group impact.

A Yeah.

Q Very cool. Yeah, any other experiences that have been meaningful to you since you've been in the Alive group?

A No. I'd just say that Anne and that [name of program] were two of the main ones that stood out for me, but going to schools and talking is a big thing. I love to do that. It's a good feeling inside.

Q If you had to put a name to what feelings you have inside, would you be able to do that?

A It would be almost grateful. Like, I'm grateful that I be there; nervous, too, because I don't know how people take it. Like, we've had girls run out of the room crying from our presentation, and it makes me happy too. It makes me a whole bunch of different feelings.

Q It sounds like there's a lot going on.

A Mm-hm.

Q So you like the going out and the speaking?

A Mm-hm.

Q Sounds like you feel grateful to have that opportunity to do that?

A Yeah.

Q Happy about it, nervous, lots of things going on.

A Mm-hm.

Q Yeah. How does the group normally handle -- like, if that were to happen, if someone were to run out crying, what normally happens?

A We keep going. We keep doing our presentation. Usually [former leader] or a counsellor or one of the teachers goes out to go see those girls, but usually at the end of the presentation, one to the girls either admits that they felt that way or something had happened to them, and they thank us for making them realize

that -- this one girl had the same kind of thing that Anne did and she didn't realize it, so when she saw Anne she hugged her and was like, thank you so much, I understand now what's going on with me.

Q Yeah, it sounds like that connection is a big piece; like, being able to -- you've connected with other people in the group who have had the same experiences, and then when people watch the presentation and they hear that other people might feel the same way that they do or have the same issues that they do, that they're not alone anymore.

A Mm-hm.

Q That must be so cool to participate in.

A Yeah.

Q Cool. Any other experiences that stick out to you?

A No, I don't think so.

Q Okay. You've said a lot. I'm just checking. So we've touched on this a little bit, but can you share -- I know we talked about your experience before being in the alive group, maybe feeling a little suicidal, maybe feeling -- if you didn't want to specifically die, you wanted to at least wanted to kind of maybe end the pain that was going on or escape in some way. Can you share about your personal experiences with suicidality, so that can be either you or other people in your life who you've noticed?

A Like, this is a big thing normal teenagers -- like, girls go through. They're in a serious relationship, and then they decide that they want to break up with them, and sometimes the guy or the girl decides to -- like, they don't want you to go, so they say that they're going to commit suicide because they're sad. I dated this guy for a year and a bit, and I broke up with him. He told me he was going to commit suicide, and he, like, ran away from home, and I was unfortunately away for summer, and -- Harper is friends with him, so she had to find him, calm him down because I wasn't in town, and that took a big impact on me, and then we

started to be friends again and stuff, and then he decided he was going to commit suicide -- like, try to commit suicide again by jumping off a bridge because I wouldn't -- I didn't want to be with him again. So actually, Ms. [teacher at school] took us to the police station because he was being serious, and they took him to the hospital and stuff, and he went through the whole mental illness, and yeah, and actually the other day he is mad because I'm seeing another guy, and he told Harper that he wanted to commit suicide again, and he was, like, standing beside a freeway and was like, I'm going to run, and then Harper was like, you're an idiot if you're going to do that because there's more than just yourself you're going to kill. Like, you're going to upset me, you're going to upset everyone around you. So then he didn't do it. Usually, when we talk to him, he calms down. I would say that was one of the biggest suicidal impacts on me.

Q Okay. So you said that that happens a lot for people?

A Yeah, it happens a lot, yeah, for people. I tell that story when we go out for the presentation, and I ask who's felt that or who's done that before, and the majority of the girls put their hands up that they've felt that before.

Q Okay, that someone has done that to them?

A Mm-hm.

Q Okay. So in some ways, it seems like people might use -- their feelings might be real or not, but kind of using suicide almost as a threat --

A Yeah.

Q -- to try to get people to do what they want, in a sense.

A Mm-hm.

Q What was it like for you to kind of have someone say that to you?

A It was upsetting, it was scary, a little bit angry because I didn't want him to do that. I just wanted him to stop. But now when he does that, I know that he's not being serious anymore, and I know that he's just doing that as an indirect threat because he wants something or needs something.

Q And is it still scary and upsetting?

A It's not scary and upsetting anymore. It's more of a cry for help, and I'm not really able to help him because he still has those feelings towards me.

Q Okay. So just kind of noticing kind of your relationship?

A Yeah, and, like, I have to back away and let him deal with it.

Q Okay. Interesting. So that happens a lot for people. Okay. And so was that something that happened before and kind of lead into you feeling really kind of depressed and down and out and that kind of thing?

A Yeah.

Q So how soon after was that that you felt that way?

A Probably a week after because then all of his friends didn't like me and we weren't friends at all, and then the month later I met another guy, and that's when things were kind of looking okay, but not until mid-November of last year I was actually back to myself, like, normal, happy.

Q Okay. And when did the alive group start? Did it start in September?

A Yeah, it started in September, so it took a couple months for me to kind of get comfortable and be able to be myself again.

Q Yeah, and when did all that stuff with your ex-boyfriend happen?

A In the summer.

Q In the summer? Right, you said you were gone for the summer.

A Yeah. Not this summer, like, last summer.

Q Right. Before last year. Makes sense. What was it like for you to be in that place of feeling kind of down and just really not sure how to navigate all the pain and not feeling like -- like, you mentioned that you had thoughts of suicide in that time?

A Yeah. I was just -- I'm not sure really how to explain it, just a lot of being alone and a lot of being alone and being in a room alone makes you think a lot, and you need somebody to be with you so that you don't think those horrible thoughts all

the time, and I used to go for a walk and I would just look out and see the view, because I live on a mountain and I just, like, look at it, and at the time I actually had a kitten, so I kind of spent most of my time with the cat talking to him because he was somebody that didn't really say anything but I could talk to about how I felt.

Q So it sounds like you kind of longed for that connection with people?

A Mm-hm.

Q Yeah. And it doesn't sound silly. Animals can be great things to talk to.

A Yeah.

Q Yeah. Anything else kind of that sticks out to you about that time, like, what that was like for you?

A It was just really hard. I was tired all the time, and I didn't want to go to work, and when I did go to work I felt like I was -- I wasn't actually happy, but I always pretended that I was happy just so that people -- because people know that I'm generally a really happy person, but at the time I just didn't feel happy at all, and when I tried to talk to my best friend about it, she was, like, you're being ridiculous and stuff, and I was like, no, I'm not being ridiculous because I have nobody and now you saying that makes me feel ten times worse because you don't believe anything I'm saying.

Q Mm-hm. So if someone else was going through a time like that, what kind of words would you have for them?

A I would definitely say hold on, there's more to life than expected, and I would also tell them that it's really not worth it. Like, if I had done it, I wouldn't have met my boyfriend, today. I wouldn't have met him, and we're going to move in together and stuff, and I'm really thankful that I met him, and if I had continued thinking those thoughts, I probably would have never met him, and life's unexpected, and sometimes you have to go through bad times to get to the good times.

Q So those are some of the pieces for you that kind of learnings you took and things you could share with other people?

A Mm-hm.

Q It gets better?

A Does.

Q There's more to life?

A Like, I've hit rock bottom a couple times, I've gone to counseling. Actually, I started going to counseling in December for grieving because my ex-boyfriend's mom died while I was with him, and I went to counseling, and also, I've had a boyfriend -- an ex-boyfriend try to kill me before.

Q Wow.

A Yeah, so there's some unresolved issues that I needed to get over, and going to counseling definitely helped me with that, and I'm grateful to see the patterns of my really abusive relationships and be able to be in a really healthy one right now.

Q Mm-hm. Very cool. So it sounds like you've had some experiences where, you know, it's been difficult, like you said, hit rock bottom, but you've also been able to access some resources to help you out?

A Yeah.

Q Like the counseling, even just knowing there's unresolved issues to work through is really positive. A lot of kids don't always see that.

A Yeah, a lot of people don't see that at all, and I actually rear-ended a car because I was really upset, and it wasn't a smart idea, but I rear-ended a car, and that was when I hit my rock bottom and I was like, I need to go see a counsellor and I need to get all this off my chest. Like, the alive group at the time wasn't -- we weren't really doing anything, we weren't presenting or anything in December, and this was, like, a couple days before winter break.

Q Was this the last winter break?

A Yeah. And I decided to go to the counsellor, and me and her get along really well, and she's been able to open my eyes up to a lot of things. Like, I never knew what I wanted in a guy before, and, like, we went through a magazine and we cut out pictures, and then to see it on paper was really changing and, like, motivating and made me cry because I was like, it's nice to see and know that I want those things and work towards them, and I hope to bring that to the group this year so that they're more aware of putting it out on the table and seeing it and being able to change things, and I hope that I get to tell people that I went to counseling for help, and that it's -- people don't judge you going to counseling. If you're going to counseling, you're going to counseling for a reason, and that reason is to get better so that you don't end up with a mental illness or you don't end up committing suicide or ramming vehicles.

Q Yeah. So it sounds like some more of the things that are changing in your life, even really recently, you're hoping to bring to the group.

A Mm-hm.

Q And do you want to have them do kind of a similar activity with a magazine?

A Yeah, that would be cool, and just to see how they portray people, like, how they want the group to keep going, because I know right now we're having an issue with new people coming, the entire group, but you always have to be considerate, and I know that when we did presentations at [names of middle schools in the area], a lot of the kids there were like, oh, how do we get into this group next year when we're in Grade 10, and I suggested that we do the presentation here because if we do it, then the people that were in Grade 9 that are in Grade 10 now would be like, oh, that presentation I saw in Grade 9, maybe I'll go to it and I'll be part of it now because I'm in high school.

Q So in some ways, it's even looking ahead to kind of almost building a legacy; like, people who see this group in junior high can come in and join in high school and kind of give back as well?

A Mm-hm.

Q What's it like for you? I know you mentioned there's been that transition and [former leader] has stopped coming and you've got a new person coming in. How has that impacted your experience with the group?

A It's not really impacted me a whole bunch. It's just frustrating because right now the lady that we have now, she doesn't really know what exactly [former leader] was doing, and we just kind of have to work through it and talk about it. I guess.

Q Okay. So it's been a bit of a change?

A Mm-hm.

Q Yeah, and it sounds like [new leader] might not know exactly the plans people have and what she did and that kind of thing?

A Yeah.

Q So is it going off in a different direction, or is it just taking time?

A I think it's just taking time. I don't think it's going in a different direction, and I'm totally open-minded to having new people and even, like, training new people would be good because this is my last year. I'm in Grade 12, going to university. I'm not going to have time to come back here and do that presentation, along with the other girls that are in the -- so we created this really cool group that we hope stays alive, and we hope that we can look back and be like, yeah, we created that group. I hope it goes really far, like maybe get more funding into it and become like the [intervention program] or something, because it's really important on a teenager basis; like, having a teenager talk about it to another teenager is way more impact to a person than having an adult, because automatically teenagers don't trust adults and they don't feel comfortable with adults at all.

Q Yeah. So it sounds like that's really -- you recognize that as being really valuable, from a youth perspective being able to share with other youth about what you're going through. Would you say it's better than adults sharing with

youth or --

A It's better because really, I don't think there is any group that does that, and it's nice to do that because it's not -- you don't have to be worried like with a counsellor or something, you're not necessarily worried, but -- a school counsellor you might be worried because [a teacher] for example, couldn't keep stuff a secret. She has to tell somebody. And with teenagers, they're really open to other teenagers if you get to know them on a friendship level. They open up to you, or if you have a really good counsellor, they open up to you.

Q So what was the process like in -- you guys go out to other schools and do presentations, so how did that come about that you started doing that? Like, how did this group form and how did you get involved with it?

A In Grade 10, [group member] was, like, a rebellious person, and she was, like, my best friend at the time, and [a teacher] put her into a girls' group, which was a group of girls that go and there's this big book that goes along with it, and it helps you talk about your emotions and feelings and how to deal with stuff and your personal image and your body image and all that stuff, and she invited me to come one time, and they talked about stuff. So then I went for half a year, and then the next year I went through all that stuff, and then we went to girls' group, and [the former leader] was there, and I saw her presentation on mental health before summer, and I was like, you did the mental health presentation. She was like, yeah, and then she told us that she wanted to create, like, a mental health kind of group, and then we discussed topics that we thought needed to be addressed in our community; like, teen pregnancy was one, and then we came across suicide because we all agreed that every one of us has been impacted by suicide in, like, our family or one of our friends or a close relative or a friend -- yeah, pretty much. So we decided that we were also going to do something with [a community agency], but I don't think we got around to doing that.

Q Okay. So that's how you kind of decided that suicide was something --

A Yeah. We decided that we would do suicide because all of us were impacted by somebody who has either tried to commit suicide, committed suicide, or has been thinking about it, and at the time there were a lot of suicides going on last year, in the news, and also gay people coming out and then committing suicide because they didn't belong, so we wanted to make other people aware that there is help out there, you don't have to be the one that jumps off a bridge and you don't have to do that. You can come to somebody and talk.

Q Okay. And so then how did it come about that you did the presentations and you decided that that was kind of the way you wanted to go?

A We took [the former leader]'s mental health presentation, and we used -- because suicide isn't, like, just a thought; it's usually linked to depression or other things in your life, so we researched -- she had, like, a part of suicide in her presentation, so we used some of her videos and some of her stuff, and then she came up with parts for us to say and statistics and facts to say, and then we decided that we would go to the schools in our community and we'd make them aware, and that's where the presentations started. I think we did our first one here, and then we did our actual first one at [a middle school].

Q Okay. So it sounds like you were really involved, along with other people, in just forming the group and deciding what you were going to do and why you were going to do it and being able to kind of create your own kind of group in a sense?

A Mm-hm.

Q Because of things that you valued and you thought were important and that kind of thing.

A Mm-hm.

Q Would you say that that's kind of the case?

A Yeah. Yeah.

Q Okay. Awesome. I can see how it would be difficult shifting leaders, with [the

former leader] being there --

A Yeah.

Q -- since the beginning and kind of being part of this process with you guys.

A Mm-hm, and there's a lot of trust in our group. Like, we shared all of our stories. They know my ex-boyfriend tried to kill me, they know that I've thought about suicide, they know everything, every aspect of bad things that have happened in my life and good things, and I know the majority of them, like, if Anne's having a really bad day because her boyfriend and her fought, she tells us about it, and [the former leader] was there, and we were really comfortable with [the former leader] because she's been there since the beginning and she knows us, and with [the new leader] she's almost, like -- we don't know her that well to be open enough with her, and she's bringing a lot of new ideas to the group, which we're open-minded about, but we don't want to lose what we created with her.

Q Yeah. Would you feel -- like, how would it be for you to be open with [the new leader] about that and to kind of share those types of thoughts with her?

A I try to, but today the group was very talkative and very opinionated, so I might have to talk to her, like, when the group's kind of calmed down, because right now we just started coming together and seeing each other and all these new changes and new people coming makes them mad, like, some of the girls, makes them angry, and they don't want those changes.

Q Okay. So some of the other people maybe aren't as understanding?

A Mm-hm.

Q More frustrated?

A And I'm usually the person to kind of break everything down for them to all understand. We all have, like, our roles in the group. Like, [the former leader] she always thought that I was kind of like -- not necessarily the leader but the one that always talked everyone into stuff because they would always, like, argue and I'd be like, hey, calm down, we'll hear both sides of the story.

Q That's interesting that she noticed that in you. What was it like for her to notice those strength and the leadership abilities and some of the things that you're able to do?

A It was nice. I was like, that's kind of cool that I can do that, and, like, Anne and Harper are very opinionated, and it's nice to have people that are opinionated because then you know more opinions and more ideas and stuff, and we usually vote together on stuff, and we just try to make everything really equal, like when we voted for our name. We had a whole bunch of different ideas, and we hated them all and some of us liked them all, and then finally we came up with Alive, and then we all agreed that that was the name.

Q Interesting. Sometimes something as simple as choosing a name can be very complicated.

A Yeah.

Q I talked to you a little bit about in the beginning about resiliency and about what that meanings, and that is basically when we kind of integrate the experiences we have into kind of who we are, it can sometimes strengthen us to kind of face new experiences in the future. Would you say that being involved in this group has affected your ability to cope with things that you might encounter in the future?

A It affects it in a good way; like, a really good way. If I -- I definitely would say me being in the group has made me a better person and has made me somebody who I want to be for the rest of my life as a person right now, and also, going to see a counsellor, as well, made me open-minded to a lot of new things, and the group did, too, as well, and just being able to talk and be open with people and tell people, oh, I went to schools to present prevention of suicide, which is really cool because it's one of a -- like, a really big topic that people don't necessarily talk about, and then when they do it opens up a lot of new opportunities for people.

Q So it's impacted you in a positive way, you'd say?

A Yeah.

Q About learning how to kind of cope with things in your future, and even just shaping the person that you are?

A Mm-hm. Like, if I came in a situation of suicide again in my life, I would know how to act towards it, and I'd know what to do, which people probably wouldn't know what to do, and hopefully all the kids that we talked to last year, they know and have helped their friends.

Q Mm-hm, because it almost seems like a ripple effect kind of thing where if you even inspire one person in that group to do the same thing with his group of friends or her group of friends, like, even just kind of go from there, it's really cool to see that impact.

A Mm-hm.

Q Cool. Are there any stories that come to mind when you think of how the group has impacted your ability to handle things differently now than you maybe did in the past?

A Well, I would say probably just the story of [my friend] trying to jump off the bridge. I was able that time to be thinking of all the warning signs and what to do, and I came to the conclusion I can't do anything so I need to involve the police, so that would probably be one story that --

Q Okay. So what you did would be probably not how you would have handled it in the past?

A Probably not, no.

Q Had you not had the experiences that you had and the education?

A Mm-hm.

Q Okay. Very cool. Sounds like you were very able to remain almost calm and --

A Yeah. I was the calm one.

Q You were the calm one?

A [Other friend] was the hysterical one, freaking out.

Q Okay. And I'm wondering -- I don't know if you -- just let me know if this fits for you, but would you be able to describe the word "resilience" to me in your own words? I've explained to you kind of how I conceptualize it. Is there anything that it would mean to you based on how I described it?

A Just the impact on me of the group and how it relates to me and how it changes me?

Q Mm-hm.

A Basically what I told you before. It just makes me a better person inside, and I'm pretty sure all the other girls would agree. We've come a long way. Like, Lucy's more open, she talks more. She always was talkative, but she seems less depressed. Anne has her ups and downs. She's kind of like a roller coaster, but she does have more ups than downs. Harper had a really bad anger problem, and now she hardly ever gets angry anymore, and I think being in the group she was able to realize that she didn't like the person she was and she wanted to change that.

Q So you noticed changes in yourself and you've also noticed in the group changes in other people?

A Change in the group, yeah.

Q What types of people that they are and just how they handle things and that kind of thing?

A Mm-hm.

Q Very cool. Yeah, those are -- I guess that's all the specific questions that I have. Is there anything else that sticks out to you from your experience that we haven't talked about yet?

A I don't think so.

Q No? Okay.

A I think I told you most of everything.

Q Okay. Well, there was one thing that I was wondering about based on what we

were talking about. You talked a little bit about your relationship with your parents and how when you were going through some of those hard times, it would have been really difficult sharing with them, feeling like they were really strict, that kind of thing, and you also talked a little bit about how it's maybe different now with them. How has that relationship shifted since you've been involved in the group?

A [redacted] When I actually told them that I thought about it, like, months later when I was in the group, [redacted] they looked at me like, are you serious? [redacted] And I was like, "I am serious." [redacted] I kind of, like, strained my parents' and my relationship. [redacted] Like, I [redacted] stopped telling them stuff, and [redacted] then I started being open with them again, and [redacted] then they became more open with me and more trusting with me, basically [redacted]

Q Okay. So you were able to -- there was times when you didn't share things with them?

A Mm-hm.

Q Maybe for fear of them not reacting well or judging you or whatever?

A Yeah.

Q But it sounds like it's different now for you guys?

A Yeah.

Q Okay. And is that helpful for you? Is that meaningful for you?

A Yeah. [redacted] Like, I can tell them if I'm going to come home tonight or if I'm staying out tonight, and they trust me a lot. [redacted] Yeah.

Q So it sounds like there's been changes in how you view your relationship and interact with them and also maybe some changes in how they view you, in how they interact with you?

A Mm-hm.

Q Okay. Cool. Anything else that kind of sticks out to you or ...

A Nope. No, I don't think so.

Q Okay. Well, I guess that's it, then. I'll shut off these things.

Step Four: Composing an Analysis

Jane's voices tell her story. Her life before the Alive group is spoken about primarily with voices of disconnection, isolation, and silence. She felt alone and she had nobody to talk to, even though she longed to talk to somebody. As she recounts her experiences of depression, her voice is primarily that of being disconnected from others, disconnected from herself, and not knowing how to describe her own experience. Even though she was not happy, Jane pretended that she was happy, evidencing her silence. Jane found her parents inaccessible to talk to because they are really strict, which she experiences as silencing her ability to speak. Jane also experienced breaks in several important relationships and when she tried to speak to others about what was going on, she was silenced by their inability to believe her.

Her experience in the Alive group started with connection. She made new friends and connected with old friends. She heard about the experiences of other group members and was inspired. This connection enabled her to be able to talk more and voice her own opinion. She continues to speak from this voice of connection as she speaks about the trust in the group, the stories they shared, and how strongly connected everyone feels. She also found connection in a dating relationship, which gave her somebody to spend time with and somebody to cheer her up.

Her voice of connection is very evident as she describes her experience in the group. Because they are connected, they can tell each other anything. She has experienced feel not alone in the group and identifying with others who have felt similar emotions and had similar experiences. The connection she experiences with others gives birth to her knowing (received knowledge?). The connection she experienced in the group also brought her to a place of knowing about her own abilities and strengths. For instance, she shares about how she is often the person to break everything down for the other group members and how she can calm the other members down when emotions run high. The connection and knowing voices exist concurrently as she shares about how interesting it was to notice these newfound strengths. As she settles into sharing how she has changed, she speaks from a knowing voice in saying that the group has made her a better person and somebody who she wants to be for the rest of her life (p. 18).

The knowing is linked again with the voice of connection as she speaks about the importance of teenagers talking to other teenagers (p. 14). Her experience of connection within the group combined with her knowledge of what it is like to be a teenager enable her to speak knowingly about the fact that because teenagers do not trust or feel comfortable with adults, having a teenager talk to another teenager about suicide has an invaluable impact. Jane speaks about the connection from her voice of knowing, having had experienced the impact of connection between teenagers. Conversely, Jane speaks about silence as she shares about how talking to adults can cause worry since they cannot always keep the things you share a secret.

At the time of the interview, Jane spoke of herself in a strong, confident voice. She voiced thankfulness for finding the group and gratefulness for the opportunity to share what she has learned. She speaks confidently about what has helped her in her

journey and she expresses gratitude for being able to learn about herself. The juxtaposition of her knowing voice and her connection voice demonstrate that the knowing and the connection she found in the group enabled her to connect to other important people in her life, such as her parents. As Jane shared about finally being able to tell her parents about her feelings of depression and suicidality, voices of silence still came through from her parents, yet she responded from a voice of knowing ("I am serious", p. 20), which enabled her to begin being more open with them and began to build trust. She is confident now about what she knows. She has experienced that even though life can be hard, it does get better. After she speaks in her knowing voice, she often moves into an altruistic voice as she expresses the desire to tell others about what she has learned and experience.

Jane's knowing voice is also evident as she speaks about how some individuals use threats about suicide to manipulate others. As Jane shares about an ex-boyfriend who threatened to commit suicide after she broke up with him, she recounts how the suicidal threat strongly impacted her emotions. It was upsetting, scary, and frustrating. Through this experience, Jane also learned that helping others also requires setting her own boundaries. Though she has the desire to help others, she also knows that she does not need to be manipulated. From this place of knowing, Jane knows how to tell when others are being serious about their threats and she knows how to set boundaries when others are using suicidal threats to manipulate. Through gaining knowledge within the group, Jane feels more confident to face her life experiences and protect her own emotional well-being. She has also learned the limits of her knowledge as she acknowledges that she cannot always help others and sometimes has to back away.

As Jane shares about how the group forms, she uses very active language that is strongly connected to her I and her We poems. She speaks from her voice of knowing as she describes what the members of the group discussed, thought, agreed upon and decided. In the Alive group, Jane experienced a place where everyone's opinion was valued, everyone's voice was heard, and where they made decisions in a collaborative way. This collaborative and empowering environment characterized the type of connection that existed in the group.

Jane speaks now from a place of knowing. Her knowing voice is generally quite strong. She speaks of being aware of the actions of others, knowing more about suicide, and knowing how to help others in that place. Her knowing voice is not often interrupted by questioning herself or by self-doubt. Her knowing voice leads her into an altruistic desire to help others. Jane seems to want to share with others what she has gained from the Alive group. She's also gained a sense of what she wants to do with her life. Jane's altruistic voice joins with disconnection as she shares about how being silenced (not having anyone to talk to) and disconnected from others (not belonging) contributes to suicidality (p. 15).

Jane's voice of not knowing comes up as she is searching for the right word to say to accurately describe her own experience. She also spoke of a period of not knowing when she was experiencing depression. She did not know how she felt and she did not

know what signs to watch for. In Jane's account, the period of not knowing is immediately followed by the knowing that she experienced in the group. As Jane speaks from her knowing voice, she sometimes speaks of knowing now (i.e. "now I know"), which infers that there was a time of not knowing. She talks about not knowing what she was feeling and not knowing what she wanted. Jane also speaks about the not-knowing in the world and about how others are also not aware of what they are feeling or when they need help.

Jane's voice of silence is evident as she describes wanting to hide sadness. When she talks about hiding sadness ("no, you can't be sad, you have to be happy"), we really tried to hear whether she was talking about the honest desire for her friends to be happy or whether she was voicing pressure to keep negative emotions hidden. There also is some silence amidst her knowing. In the Alive group, she speaks of the recent transitions and knowing that there are issues, yet speaking about how you always have to be considerate. In this context, it seems like her awareness of what might be going on for others can silence her from speaking about what she sees, feels, and knows.

She also speaks about the silence that exists in the world as she acknowledges that people are not always able to tell others how they feel. She speaks about this silence in a knowing way as she acknowledges that you cannot always tell what is going on for other people. As she recounted a story about a boy who committed suicide unexpectedly, this truth becomes very real for her. This story evokes a wish that it was easier for others to notice when you are feeling down. Jane has experience in a very real way how easy it is to put on a happy face for the sake of avoiding talking about sadness. Through connection to a story about someone else's silence and isolation, Jane was moved to a greater place of knowing and a desire to share the story with others. For Jane, the vehicle for moving through her silence is having someone to talk to.

Jane's demonstrates frustration with the silence of the world. She acknowledges that others could be experiencing the same struggles, but silence keeps them in a place of not knowing. Through experiencing connection in the group, she now understands that the status quo of silence and not knowing in the world is not helpful. She also shares about how suicide is not talked about in the world (voice of silence) and that most people do not know how to handle suicide (not knowing voice) (p. 18). As she pushes away from what she notices in the world and how damaging she sees it to be, her altruistic voice comes through.

As Jane speaks about the change in leadership in the Alive group, her protective voice comes through to describe the difficulty that the group has had adjusting to the change. While she speaks about having to work through it and talk about it, her protective voice is laden with voices of silence and not knowing (p. 14). When she brings up the importance of the connections within the group, this voice of connection is directly followed with the disconnection she has experienced recently in the group. With the change in leadership, Jane does not feel that the group knows her well enough to be open with her. While she acknowledges the reality of transitions, her protective voice comes in as she speaks about not wanting to lose what the group has created. Within this protective

voice, Jane speaks about wanting to talk to the new leader and the other group members in order to mediate how they can adapt to the changes without becoming angry.

When Jane goes to the schools to do presentations, she loves it. In a knowing voice, she speaks about being grateful that she is there and also talks about how impacting it is to see others react emotionally to their stories. Jane is proud as she speaks about the group that they have created and she is hopeful that it will continue. Her altruistic voice is closely connected to her “we poem” as she shares about what the group together has achieved and created. Their group is special and unique.

Overall, Jane’s voices are fairly clear and strong. There are not many times when her knowing is interrupted by tentative or questioning language. In this way, she comes across as being very sure of what she knows and able to speak from her own true voice.

APPENDIX B

Letter to Parents

Dear Parent,

I am a second year student in the Master of Arts in Counselling Psychology program at Trinity Western University. I have been working with the staff that are involved with the suicide prevention group that your child is participating in at Sardis Secondary School.

The adults involved with this group have noticed what a unique and valuable experience it seems to have been for your child. As a result, I am hoping to learn more about your child's experience in order to better understand how this type of prevention group impacts the participants.

I am hoping to complete a research study with the suicide prevention group. The goal of this research is to better understand how participating in the suicide prevention group has impacted your child's ability to handle life stressors. Because your child has been involved in a group at school that has helped to teach other students about suicide, I am interested in learning more about how this experience has impacted him or her.

The research will consist of a 1 – 1.5 hour interview at school in which your child will have the opportunity to share about his or her experiences. The interview will include a time for debrief, which will allow your child to ask questions or gain additional support. After all the interviews are completed, the whole group will have the opportunity to participate in a focus group, in which they can share about, learn from, and gain an appreciation for each other's experiences.

This study may benefit your child in the following ways. Reflecting upon experiences often helps to take the skills and strategies learned and integrate them into the self-concept. This integration of positive coping skills, also called resiliency, often helps individuals when they face hard times in the future. Also, the purpose of the interview is to truly listen to your child and help them discover their own voice, which can be an empowering experience.

Lastly, involvement has the potential to benefit peers, the school and your community. As you may have noticed, your child is already impacting those around him or her in a positive way. Sharing about these experiences will help to strengthen other suicide prevention programs, it will help teach more students about how to handle suicidality, and it even has the potential to help create more groups like the one at your child's school.

Confidentiality is highly valued and your child's identity will not be revealed at any time in the study. Transcripts will be anonymized and video/audio recordings will be destroyed as soon as they are transcribed. Please see the attached Informed Consent form for more information on confidentiality. As a small token of my appreciation, participating students will receive a \$25 gift certificate.

In order to participate, please read and sign the attached form and have your child bring the form to Nicole Leuthardt at school. If you have any questions or concerns, please contact me at (778) 809-0048 or Chelsea.ohlmann@gmail.com.

Thank you very much, I look forward to hearing from you!

Chelsea Ohlmann

Graduate Student, M. A. Counselling Psychology, Trinity Western University

APPENDIX C

Informed Consent Form

Trinity Western University
Graduate Program in Counselling Psychology
7600 Glover Road, Langley, BC, V2Y 1Y1

Project Title:

**Social Change and Resilience:
A Group of Adolescents' Experiences with a Suicide Intervention**

Principle Investigator:

Name: Chelsea Ohlmann
Department: Counselling Psychology
Contact Info: Chelsea.ohlmann@gmail.com or 778-809-0048

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Department: Counselling Psychology (TWU)
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Department: Child & Youth Mental Health – Chilliwack
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(604)

Purpose

The goal of this research is to better understand how participating in a social change intervention for suicide prevention impacts resiliency in adolescents. Basically, going out into the community and participating in making change happen seems to have a strong effect on the individuals who participate. Because you've been involved in a group at school that has helped to teach other students about suicide, I am interested in talking to you to find out more about this experience.

The most important perspective when looking at how this experience has impacted you, is yours!

Study Procedures

If you choose to participate in this project, you will be invited to participate in a personal interview, lasting up to 1.5 hours. This interview is an opportunity for you to share your personal stories about how suicide has touched your life and also about your experience participating in this suicide prevention group.

Video or audio recordings will be made of all interviews and then a transcript of the interview will be made. Once the analysis of the interviews is complete, you will then be invited back with the whole group to participate in a focus group at the school. In this

group, you will have the option of talking about what the experience of participating in this study was like. You will also be able to hear from your friends about what they have learned and they will be able to learn from you. Participation in this focus group is voluntary and it requires a time commitment of no more than 2 hours.

Potential Risks and Discomforts

As with any study, there are potential risks that come with participation. With this study, due to the sensitive nature of the topic of suicide, it is possible that sensitive or emotional information will be shared in the interview. You do not have to answer any question or talk about particular issues that you are not comfortable with. Also, there is support built into the interview process to help ensure that you have access to the help you need. A debrief following the interview will enable you to talk about your experience with the interviewer, the researcher will be available to you by phone or email from 9 am to 9 pm for the duration of the study, and the focus group will also allow you to talk about your experience to your peers and learn from their experiences. There will be counselling available to you during the length of the study in case you would like someone to talk to.

There could also be the risk of other students noticing your participation in the study. The interviews will be completed at your school during your group session or at an outside location in order to minimize any social risks.

Potential Benefits to Participants and/or to Society

A possible benefit to students who participate in this project is reflecting upon and learning from your own experiences. Reflecting upon your experiences will likely help to take the skills and strategies you've learned and integrate them into who you are. This integration of positive coping skills, also called resiliency, often helps individuals when they face hard times in the future.

As you've experienced in your school group, having your voice heard really makes a difference, because your story is important. One of the purposes of this study is to listen to the difference voices that you have and to help you better understand the voices in your experience. Being truly listened to is an empowering experience, which is a further benefit of this study.

Lastly, your involvement has the potential to benefit your peers, your school and your community. As you have experienced, you are already impacting those around you in a positive way. Sharing about your experiences will help to strengthen other suicide prevention programs, it will help teach more students about how to handle suicidality, and it even has the potential to help create more groups like the one at your school.

This is a collaborative study and you are invited to ask questions or give feedback at any time. If you have any thoughts about what you need most in your particular journey, if you experience any distress or concerns during the study, you are free to contact me (Chelsea Ohlmann) (chelsea.ohlmann@gmail.com or 778-809-0048) or anyone on the research team. If you have any concerns about your treatment or rights as a research participant, you may contact Ms. Sue Funk in the Office of Research at Trinity Western University at 604-513-2142 or at sue.funk@twu.ca.

Confidentiality

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. All documents will be identified only by code number and kept in a locked filing cabinet. Research participants will not be identified by name in any reports of the completed study. Any computer files, such as interview transcripts or video files will be encrypted and also stored on a password protected computer. Only the primary researcher will have access to these files. Data will be stored anonymously for a period of two years after the completion of the study and may be used for eventual publication. You will be notified in the event that this research is published. After this period, all data gathered from this study will be disposed of confidentially (i.e. shredding, deleting).

The following are exceptions to your right to confidentiality.

1. If you pose a clear and imminent danger to yourself and/or others.
2. If I am made aware that you are abusing and/or neglecting a child or vulnerable adult, or report of someone else who is engaging in such behaviour(s).
3. If I am requested to release confidential information (e.g., interview notes) for the purpose of complying with a subpoena or other legal matters authorized by law.

****I will always discuss the situation with you before violating confidentiality.**

Compensation

Each participant will receive a \$25 gift card as a small token of appreciation for your participation. You will receive this gift card at the end of the interview, even if you decide to withdraw your participation.

Participant Consent

By signing this informed consent form, I understand that my participation in this study is entirely voluntary. I understand that it is within my own power and right to choose not to participate or to withdraw at anytime during this study, without jeopardy to my involvement with the group or my school. If at any time I choose to withdraw it is my responsibility to contact the primary researcher and communicate my choice in writing. Once the interview data has been anonymized and analyzed, I understand that there will be no way for the researcher to identify my responses and therefore I cannot withdraw after that point. Upon withdrawal, all information collected about you will be disposed of.

I am also aware of the potential risks and benefits of my participation. I have been informed and understand my right to ask questions that I see as relevant and important to my participation in this study. I also acknowledge, understand, and accept that my responses will be kept confidential and in an anonymous form and be kept for further analysis after the completion of this study.

Your signature below indicates that you have had your questions about the study answered to your satisfaction and have received a copy of this consent form for your own records. Your signature indicates that you consent to participate in this study and that your responses may be put in anonymous form and kept for further use after the completion of this study.

Date:

Parental Consent:

I consent / I do not consent (circle one) to my child's participation in this study.

Parent/Guardian Name (print)

Parent/Guardian Signature

Phone number:

Address:

Email:

Participant Consent:

I choose / I do not choose (circle one) to participate in this study.

Research Participant Name (print)

Research Participant Signature

APPENDIX D

Potential Interview Questions

- Can you think of any changes in yourself during the time you participated in the group?
- How have they stuck with you? What would you like more of?
- How would you describe your life before the group? What else is going on in your life and how did that affect you? (positive and negative – protective and risk)
- What was your experience like to participate in the group?
- Can you share about your experiences with suicidality?
- Can you tell me a story about an important experience you had while participating in the group and how it impacted you?
- Resiliency is a term used to describe the process of integrating experiences into who you are so that you will be stronger in the face of future difficulties. Do you think this group has impacted your ability to positively cope with future challenges? Do you have any stories about this?
- Can you describe the word “resilience” to me in your own words? What does it mean to you?

Debriefing Questions:

- What was this interview experience like for you?
- In your presentation, you talk about the importance of help-seeking. Who do you have in your life that you can ask for help when you feel overwhelmed?
- Is there anything that was brought up in the interview that you would like to discuss further?
 - Do you feel ready to end this interview?
- Is there any further assistance you would like from me (i.e. counselling referral, more information on the study, etc).

APPENDIX E

Focus Group Questions

- ***Opening Question/Icebreaker***
 - o Tell us your name and something you're excited for this summer.
- *Now that we've heard from each of you in your interviews about your experience with the Alive Group, an important step is talking about your experiences together. Introduce picture on board (visual of how the individual pieces are complete, now together they can come up with the most important pieces of what ALIVE was to them).*
- *How this focus group will go is that we'll ask you some different questions and you guys can take charge and go with the questions as you'd like.*
- ***Introductory***
 - o When you think of suicide prevention, what comes to mind?
 - o When you think of resiliency, what comes to mind?
- ***Transition Questions***
 - o What keeps youth resilient from suicide?
- ***Key Questions***
 - o What was it like to talk to someone else about your experience with the Alive Group? Have you learned anything about yourself through participating in this process?
 - o In your interviews you all shared about how Alive has affected you. What did you come up with in your interview?
 - o Here were some of the things I heard from the interviews with you.... To you, what is the most important thing others should know about your experience with the Alive Group?
 - o Can you come up together with a summary of the Alive Group?
 - o Were any parts of your experience with the Alive Group difficult?
- ***Ending Questions***
 - o Of all the things we discussed, what is the most important?
 - o If someone was trying to make other groups like Alive, what would be your advice?
 - o What advice do you have for other students who are going through experiences of suicidality? For students whose friends are experiencing suicidality?
 - o Here's a summary of what we heard here today (summarize the big ideas that emerged from the discussion) → how well did that capture what was said here?
 - o Is there anything we should have talked about but didn't?

- Based on what we remembered and learned, how can we summarize it as a group?

Note-taking suggestions:

- Make note of what's grabbed on collectively
- How the group members interact (voices, silent members, leaders, etc.)
- Are their voices about the Alive Group speaking in unison, contradictory, etc.?
- Themes
- What was helpful or unhelpful about Alive?

Preliminary themes from interviews:

- Importance of ***relationships***
 - ... within the group
 - ... improved relationships with family and friends
 - ... moving from being closed off to ***more open*** in relationships
 - ... increased ***depth*** in relationships
- Importance of participants' role in formation and direction of group
- Importance of ***connections*** made with others on a deeper level
- Increased ***empathy*** and ***openness*** to understanding others
- More open to differences of others
- Able to be open about difficult topics, such as suicide and depression
- Increased ***self-acceptance, confidence, and empathy***
- Desire to ***help other students*** have a similar experience and for some students a desire to pursue a career in a helping profession
- Being able to put words to or ***understand one's inner experience***

APPENDIX F

Excerpts from Focus Group Transcript

C = Chelsea or J = Jen (interviewers)

Participants = H (Harper), A (Anne), G (Ginny), L (Lucy)

- C Cuz it sounds like from talking to you, the... in order to go out and do the presentations, having that close-knit, supportive, trust-filled community [*H and A nodding*] was really necessary to go and share about your own stories
- H Yeah.
- A Yeah, I... [*then listens to H*]
- H It make us more confident. You're not on your own doing, like saying something that's hard to say cuz basically all the people around you are saying it too.
- C Yeah.
- A I like to think that that's what made us so awesome (H: Mhmm) was being able to share everything with each other and then we're just... more confident.
- H It was like a little family.
- A Yeah. And now our family's ripped apart by divorce I guess [*everyone laughs*]
- C So if I could just kind of, we're kind of, I'm going to use a bit of a metaphor, we're focusing on one tree right now, if we could take a bit of a step back just for a second and look more at the whole forest, when you think of suicide prevention, what comes to mind?
[*A and H look at each other and smile*]
- H Alive. [*laughter*]
- C So the Alive groups is kind of your, yeah... Do you have any other ideas about suicide prevention.
- L Well there's a lot of stigma against suicide. Like, originally, like when we first started, it was kinda one of those things where it was like, Let's do this! [*says something inaudible*] And I don't know, it was pretty cool.
- A And then, I guess, one good thing about us, well I guess "us" [*makes air quote motions*] too, was that I like to think that we all look as though, you know, when most people think of like suicide, they think about goth people and emo people.
- H We all look so different.
- L Yeah.
- H Like all of us have our own style so it's like we can all relate to different groups, (L: Mhmm) it's like, we don't all look the same and we all have completely different stories and completely different roles in how suicide affects us. (L: Mhmm) Like being the friend that people come to talk to, being the person that's actually dealt with it, being people that have that problem themselves (C: Yeah), so we go on all aspects of it, not just one, not just preventing suicide, we... cuz a lot of things like that kind of focus on everyone, like the friend and stuff like that and we tried to focus on like everyone. [*A and L nodding in agreement throughout*]
- C So you noticed you guys could do something different that doesn't happen in any

- other suicide groups.
- H Yeah. Yeah.
- L Yeah. And just like having so many different perspectives of people who've dealt with suicide has kind of like made us stronger and kind of moulded us together to understand, not only our perspective but other people's perspectives on suicide? Like being able to see that, you know what, for me and myself, like my friend really wanted to commit suicide. I have people in my life that are like, you know a little bit kind of on the edge with that kind of thing. (C: Mhmm) And it's much, it's much cooler to see, well not cooler, but it's way better to see not only your perspective but to see A----'s perspective, H-----'s perspective, G-----'s perspective.
- A My God, it's getting hot in here!
- C So even though [laughter in responses to A---'s comments]... so even though you guys are so different, you still connect on that one piece, which helps.
- L Yeah, but when we were in that room all together, just for Alive, it wasn't just like we connected through suicide but like, in a kind of really horrible sounding way, suicide brought us closer together.
- C Mhmm
- A [Laughs] Our problems...
- L Brought us together. Like, I could never talk about stuff I talk about in this room with my family exactly, but you guys are like my family, were like my family.
- H It's cause we've been together since like Grade 10, all going through, and we've all changed so much and had so many things happen.
-
- C One question maybe is when I met with you guys that was kind of a separate thing from your experience with the Alive group and I'm curious what it was like share with somebody who wasn't in the Alive group about it.
- H That was trippy.
- C So what was that like?
- [Everyone laughs and looks around at each other]
- H It was trippy.
- A I felt all awkward and jittery.
- C Did you?
- A Just cause with the whole camera thing I kind of felt like I was being viewed [looks at the camera with a look of fear/anger?] Like those clips of mental hospitals when you're like in a mental hospital or something and they view you as they're asking you questions?
- L On the day that you interviewed me I was really, really tired and I just remember laughing a lot. I was like hahahaha, I was so retarded.
- C So you guys felt a little awkward maybe, was there anything else that came up for you?
- A It was nice to share my... it was nice to just talk, you know? Cuz, I don't know... I know this sounds really silly, but when you're talking about, when you talk at the group you have to be all, basically when you're telling your "story" [she added air quotes as she was talking] you have to be all strong and whatnot and I felt when I was talking to you I didn't have to have the persona going on, you

- know? So that was cool.
- C So you felt able to just kind of be who you were, without having to be okay, or say certain things.
- L That's how it was with (previous Alive leader) *[mimics crying]*
- H It was the first time for me that I ever really like looked at the bigger picture of Alive, like I never really looked back on all of it as like a big picture, I was just like.
- A Yeah *[nods]*. I feel like this is the end, guys.
- H It is. *[says something inaudible and points at A]*
- A There's gonna be no more Alive. I feel like, cuz we're all graduating, we're all going.
-
- C So I have a question for you guys since probably in this room you're the most prominent experts on suicide, and being a youth and being a teenager. So what do you think keeps teenagers resilient from suicide?
- L Talking about it.
- H Stuff like this.
- C Talking about it?
- H Friends, stuff like that. People, like going around and letting them know that that's not the only way and stuff.
- C So talking about it...
- H Pretty much exactly what we're doing. Like even if we like go to a school and only like affect one person, like that's all we're trying to do, like as long as someone like...
- C So what you're doing when you go there is talking about it and is the, like I heard you say before that the connection, like connecting with somebody who's been there where you are who's your age and gets it. It's not a teacher who's saying, you know, go for a walk if you feel sad. It's different.
- H Cuz when you hear it from like an adult, or something, it's like, okay, we hear this all the time they're just telling us. But we're teenagers, we're exactly where they are. We have to deal with the same exact same thing so we know exactly how it feels so they can relate to us.
- C Mhm...
- H Plus, I think cuz we have so many people of different kind of cliques in this school that we can affect more people cuz it's not like all one type of person. We don't all hang out in the same group, none of us are like that, we're all so different.
- L I think now we kind of just, like every time we walk by each other we smile at each other, we wave.
- H I know right?
- C So it's almost better that you guys aren't from all the same friend group because you kind of, it's like little like *[hands motioning together and then spreading apart signifying them going out from the group]* go out into the...
- L Into the world!
- C Yeah, into the school and just kind of like being with all different people.

- L From the perspective of not being in Alive anymore to being in Alive, it's, it's different.
- C What else? What else keeps teenagers, makes them more resilient to suicide would you say?
- L I don't know.
- H It could be anything, it could be the smallest thing. Like, it's different for everyone I guess. Some people it's seeing this big presentation we give, some people it could just be like hearing about something, like it's different for everyone.
- L Yeah.
- C So what is it for you guys? You've all had different experiences with suicidality and some of you guys haven't been in that place where that's something you're considering but some of you have maybe. So what is it for you guys that keeps you resilient from suicide?
- H I don't really think...
- L I don't know, just being able to...
- H ...cuz I don't really ever like consider suicide. But that's just me.
- C Okay, so from your standpoint. What were you going to say, Lucy?
- L I don't know, just being able to talk about it? Like, with my family I used to have (referring to Alive group) but being able to talk about it not only in my... being able to learn about it. So then when I feel that I way I know exactly what to do, so it's kind of been like
- C So being able to talk about it but also knowing, so like what do I do.
- L Yeah, what's going on and how am I going to deal with this kind of thing, it's not always just like, I don't know what the hell's going on, you know what I mean? It's knowing and knowing what to do about it.
- C So does knowing some of that information help you understand what's going on inside?
- L Yeah. It helps me not only understand myself but others too.
- C Okay.
- L Like being able to step back and see someone that's upset not only with themselves and with others too, and understand why, like why kids act that way.
- C Okay.
- H Yeah, like Anne and me, used to hate each other. Like we had so much beef and then like I got to know her and her real story and that stuff and it was just like, I don't know know anything about you.
- C Mhmm.
- H Like, and the same for me, like she didn't know anything about me. So it totally changed our point of views on each other.
- C Yeah.
- H Cuz we didn't even know anything.
- C So calling into question those judgments you made about people when really you had no information to begin with.
- H Yeah.
- C Yeah. And that happens a lot in the world. I'm curious, because you obviously like the Alive group a lot, and I know there's been some shifts and everything and

- you're coming...
- L There's been a lot of crap...
- C You're coming, but you guys aren't really coming and so um, how... given the experience you had with the Alive group, how does that impact you now? Cuz if you're not coming anymore, you're not being at the Alive group, but it sounds like it still changed you so how does that impact your life now?
- H Everything that we learned and like gained from it, it just stays with you, you don't forget it. Like, everything that we got from it.
- C Mhmm. So even though there's been some shifts (H: Yeah) in the actual Alive group, it's still... the benefit is still there. (H: Yeah). And it still has changed you.
- CG Yeah, even though I don't even go to the Alive group anymore. The only things that I'm involved with are the things with the old people and like, doing stuff with you. (smiles and laughs)
- L But yeah, if next year if you guys still want to do something with Alive, definitely.
- C Mhmm. And I also heard a bit of you guys you know, you don't want it to stop here, for you.
- H Mhmm.
- C Like, this was so cool and so cool of an experience, like how can this, how can you do more of this, like I wanna do more of these things.
- L I do. Like, not only just for ourselves, but I think that getting people like Ginny's age (Harper smiles and looks at Ginny into this kind of thing (C: Mhmm). You know what I mean? Like the younger generation would be kind of cool cuz ...
- H Like give all of our knowledge to the grade 10s so that when we leave they can keep doing this.
- L Yeah, so it doesn't...
- H That's the only reason that I had anything to do with this still cuz I feel like I owe that, not to just peace out and like never talk about it again, even though I don't like what [new leader]'s doing, I still went for a while just to show her and like tell her everything that I thought about the group, hoping that she would like keep something of that. And then she totally didn't, but...
- C Yeah. So it's almost like there was, you had like a sense of ownership. (H: Yeah). Like cuz you guys were a part of creating it, really, part of deciding what you were going to do and making it happen (H: Yeah) and then you felt like, oh, I want to do as much as I can to keep this going. (H: Yeah) It wasn't just like something you could leave and it's just like whatever.
- H Once you're done school you're done that. (C: Exactly) It's something that's always, like I'll always remember it and stuff. Like it was a big part of high school for me.
- L I sass her every time I go.
- C So what kind of caused that do you think? Like what kind of caused that sense of like ownership and that sense of this is part of us.
- H The fact that we did it... [Old leader], like we were always like, yeah we wanna go to more schools, like we were always trying to plan more schools to go to and we put so much work into it and that's what bothers me about the people that go now and don't do anything and they get all the benefits. Because we weren't

doing it to get food or leave school, we were doing it because it meant something to us and it was really special and we made it what it was because it was important to us.

L Like I think that the only thing that we really got when we were in the group was, like for being in the group, as a gift, [teacher at school] gave us four credits, four extra credits for doing it. And when we first started out, it was kind of like the only thing that we got was cookies and juice. And that's what I looked forward to every Monday. Like being able to be in the group Alive, and being able to go to the group and get some cookies. You know what I mean, like, that was my Monday morning, what kept me going. So... It was beautiful.

C I'm curious Ginny about your perspective, because I know you came a little bit later than these guys (G: Yeah). So what was it like for you coming in?

G Um, at first it was like, I didn't think they'd be that open with each other like how they were, they all seemed like friends and they would talk about like everything with each other and at first I was really shy, but then as I got into it more, I like opened up more, I guess.

H Cuz you watch everyone else do it and then you were like, wooh.

C So it was helpful to see them and how open they were and it made you feel safer to open up?

G Yeah.

J Yeah, you know what? I'm kind of curious, as I'm kind of hearing about how important [Old Leader] was to this whole experience, I'm wondering if, I don't know if you can like separate like how much percentage of kind of this good feeling that you have is from coming to the Alive group and doing presentations or how much of it is just like, [Old Leader].

H It was just all of it! Like, it was like that, the Alive group on its own, it was just like that group was like our baby kind of like we made it so much bigger than it was but just having [Old Leader] like the way that she was just made it even better.

L Yeah like being able not to just go to schools and tell people exactly how you feel, what's going on, how to deal with this stuff, but to have somebody, is kind of like, every time you came to school on Monday morning having somebody kinda as like an adult mentor who didn't just was like, I'm [Old Leader] and I'm hear basically to tell you exactly what you're gonna do, it was like she was one of the group, she was like one of our friends. And she helped us not only like discover more into ourselves, in a way, and like link to other people but to be able to connect to each other in order to create a safe space, not only in that room but to create a safe space in a room with like 200 kids or create a safe space with like 75 kids, you know what? It's...

H We focus a lot on [Old Leader] now, like we did that's the main thing but it's because she's gone that we're so like...

L Yeah.

H Like at the time, the biggest thing was like, we would feel good when we'd go present and stuff so that was the biggest thing. And now that she's gone now that's why we focus on her so much, we're always like, awh [Old Leader], like...

- L [Old Leader] was...
- C So when she leaves, you're able to think, okay, now that she is gone it's different, so maybe thinking that some of the things she did made it part of the... whole experience, yeah. So it sounds like it's really hard to say okay, well, you know well this much of why I liked it was because of the presentations and this much of why I liked it was...(H: Yeah) because it was all together.
- L Well, I mean like, yeah, like, presenting, I know like just for myself, it was a good feeling, it wasn't like you just went up there, it wasn't your job, it wasn't like something you necessarily had to do. You didn't have to go up there and you didn't have to do anything you didn't want to do. Every single one of us went there and came to the presentations because we wanted to. Everybody told their stories because we felt comfortable and we wanted to. Everybody wanted to create that safe, that same safe space that everybody in the room, not only just us, not only the kids but even like people who, like teachers, everyone was able to feel safe, everyone was able to not only just listen to our presentation but to be able to connect to it in any way they felt was, you know, comfortable.
- H And it's not like just putting yourself out there, it's like you're watching everyone that you've been like going through all this stuff with in the group, they go out there and they put themselves out there and, like not knowing what people are gonna think about it and stuff and everyone's doing it so you're just like kinda like, I don't care, we're all doing it together, so it's not like hard.
- L Yeah. You're able to kind of like cross that social stigma of being, like no, we're not gonna talk about this to, we can all talk about this and it's okay to talk about this. (C: Yeah.) And all of us are here because we know it's okay, because we're able to talk about this openly. (C: Mhm). And it's just really cool, like...
- C Absolutely. Hmm.
- L Yeah, I know, we focus a lot on [Old Leader] just cuz...
- H Cuz she's gone and she was so perfect.
- C I think that's a really interesting point that yeah, it would make it very evident the role she played after she left, but maybe in that, before she left, you maybe wouldn't have known.
- H Yeah, well we all loved her and we were all like, this is why our group is so good, but after she left it was like, woah, she had a big impact on why it was so good, like (L: Yeah.) Aside from just like doing the presentations, which we all felt really good about, which, like if I would go up and talk by myself... but if I went up by myself, that wasn't me being like, oh, good job [Old Leader] like I was like, oh, I'm so proud of myself for doing that and I would feel good about myself, but then on top of it when I think of [Old Leader] now, I'm like she did have a big impact on why I was able to feel that way.
-
- H And they, it's the rules of our group, it's like nothing that's said in that room leaves the room, and that never happened.
- C No?
- H We shared so much intense stuff over 3 years and nothing ever, like nothing ever happened.
- L Like, it's, it's kind of funny now that I think about it but like, everybody would

say some pretty, like, like, not only like, (H: Personal things) people cried in there. But people said the most awkward funny things in the world in that room like talk about how our weekends went and if you understand anything about high school things can get a little crazy sometimes... (H: Laughs)

H And nothing ever left the room.

L You never left the room feeling that somebody was gonna tell your secrets. You never left the room being like, I just did something completely stupid, I just told all those people, you know what I mean? It was like you never left hearing anything 2 weeks later from someone else, being like, so I heard you had a wild weekend. Like it wasn't like that.

H And it wasn't even like just [Old Leader] would remember the things that you told them, like it was like if we came back in the group like the next meeting and we were doing check-in and everyone in the group would be like, Oh Anne, whatever happened with that thing, like everyone just remembered everything.

C So I'm curious about, cuz you've talked a lot now about like the safety and the trust and um, you guys building a support network and going deeper and meeting each other and feeling like you're not alone. So that sounds like that was something that happened, like when you guys met, kind of on your own. So what was different when you, or what added to that when you would go out to the schools and do the presentations.

H Like, what do you mean?

C Cuz you talked about how like having you know just a support network or group wasn't what you wanted, you wanted to

L Yeah.

C So... but at the same time, the support group part of it sounds like it was helpful. So, like what fits where would you say.

H The support group like aspect of it made it easier to go cuz then we knew that we had that like...

L It was safe.

H Those people around us to make us stronger and make us feel like, it felt like how we felt in that room, like so like confident in whatever we were like talking about so normal when you leave and go to that school, you can say that same things because you're with those people and that feeling doesn't go away just because you leave that room.

L Like there was never that feeling that if you went up on that stage and you cried, that everyone would laugh at you, it wasn't that feeling that...

H The feeling stayed with us, no matter where we went. It wasn't just in the room, it was the people that we were with that made that feeling.

L Yeah, it was not only like, we say family like, it was just basically like everywhere we went like it didn't matter if there was like we went to [name of school] and everything messed up, like everything was like glitching out and...

H And the people were still like, yeah, that was such a bad presentation to us and we had like girls walking out and crying still and we were like, wow, we still had an impact even though we didn't have our crap together.

L Yeah, like you just have such an impact on other people and it's just really empowering to know that we're high school kids, you know what I mean? Well,

we're not high school kids anymore but um, just being high school kids, being able to talk to middle school kids who are going into high school that it's not only, suicide isn't something you should be scared of, it's not something that you should have a stigma about, but that in a way, there's people and there's ways of having a family like we do. Like, not only is it safe for us to talk about this kind of thing but in high school, high school's a rough place for some people and having a group like this, was really kind of like one of those things where it's like, it's not as rough as long as we have each other. We're able to talk about things that nobody else would talk about normally, like nobody would feel safe about, but we're able to be like you know what, like it's okay. Like, I... everything that we talked about was like crazy sometimes.

H I feel like our group had something different than what most presentations go. Like it was, I don't know. There was just something different like something that we did or something that when we'd go present somewhere, like it had a different feeling than, you know? Like that family feeling. And also when we would go and present, it would just affect so many people and I remember being in middle school and like I'd see these presentations and I wouldn't fall apart. Like it just never really hit me as much.

L Yeah.

H And then I, like I wouldn't even see other people feel then there was just something we must have done right that it just like affected people so much. We had like all the facts, we had videos, we had our own stories, like we had so much that like it hit everyone in some way. Like there was always some way that someone could relate to what we were talking about.

C And that's what I was talking about the beginning, it's like, like you just said, there's something different that you maybe can't even describe it necessarily in words or know exactly what it was (H: Yeah) cuz it wasn't the facts and it wasn't the videos and it wasn't the way that it happened or the fact that you presented but it was like something, there was something different. (H and L: Yeah) So like, what is that something different? What do you think?

H I don't even know.

L I have no idea.

H It's just... it's a natural thing that just happened over time that was just like woah, like...

L Yeah!

C Mhm. It's like an energy, or like a...

H Yeah, it's just like a good feeling. I think that maybe we just had all the right people that were willing to put the... like there was no one that did a half-ass job and it's not like it was hard to do that stuff, it was just like we have all the perfect people to make this group and it just like worked out perfectly.

L Like it was just a, it wasn't a connection of like we're just here to present, it was like we're here to not only tell kids and teach kids about suicide, but we're here to like...

H Help each other still.

L Yeah and inspire each other in a way.

H It wasn't like we would go up there and be like, we don't have this problem

- any more. Like we would change our presentation as things happened to us.
- L Yeah!
- H Like when [we] had to deal with my friend trying to attempt suicide and stuff like that we changed it and we were like wow, we're going around at schools saying that they should know exactly how to deal with this when that happened to us like a week before that and we didn't even know what to do and we've been in the group for like 2 years.
- L Yeah!
- H So don't expect that you'll be able to do it because we've been in this group for so long and it happened to us and we were like falling apart so...
- C So the group kind of like changed as it... it just morphed with you guys
- H Yeah.
- L It wasn't just like something that was always just constant it wasn't just one thing.
- H It was, it was never the same presentation over and over again.
- L No, it was like a big picture, like it started out as just this one little thing and then it grew. Like it just grew arms and it became just this creature.
- C Became alive. It became alive... Like it became living.
- L Yeah!

-
- C So for someone who's never heard about Alive or anything like this, how would you summarize?
- H You can't. I can't. Like everything that it is, I don't know how to explain it to someone, like they have to see it or something or sit with me for this long
- C So it's more about the experience.
- H Yeah. Like feeling the vibe that like that's there when you talk about it and stuff.
- L Yeah, not only just the vibe you get from the other members but the vibe you get from the people you present to. Like being able to be so impactful to somebody to make them cry. To know that people listen to your presentation not just, you know, sit there and are like [sitting relaxed and bored] "when's this gonna be over?" Like –
- H There's so many different points of view from Alive. There's like the presenting it makes you feel so good and then the group on its own makes you feel so good and then the connections and the trust, like there's just so many different levels of like...
- L Yeah.
- C Do you guys wanna hear some of the things that I heard from meeting with you? (All: Yeah). Um, okay, here, just from –
- L We talk a lot.
- C You do talk a lot, it's not hard to get you guys to talk. Well here's some of things like just from meeting with you and I think I came to one or two times you guys met but like I heard that relationships was really important for you guys (H: Mhm) so that was a lot of things. First of all, like within the group, your guys' relationships with each other. Um, I also heard some threads of like relationships changing outside of the group, like maybe with family, maybe with friends, and this awareness that what's going on for people is different than what you just see and being able to kind of go deeper with people is helpful, not just here but with

like maybe your parents or maybe your friends or maybe your boyfriends or whoever. And I also heard that you were able through this to have more depth in relationships, to go deeper.

L Yeah. It wasn't just always kinda like most people just dig along the surface.

C Yeah, so you had that experience of going deeper and it's almost like that became now what you wanted. Like this whole surfacey, "we don't talk about anything deep" isn't gonna cut it for us anymore. Yeah.

L I definitely got a lot deeper

C And like I heard today, I also heard in your interviews, that how the group formed was also really important.

H Yeah.

C It wasn't just this group you just signed up for and then just started doing but you actually were part of deciding (H: Yeah), what is this gonna be? And really calling the shots and figuring out what it was gonna be for you guys. (H: Yeah). Um, yeah and I also heard um, like I love the story you share about you and A because I heard that in a lot of different ways from a lot of different people in different relationships about increased understanding about what's going on for other people (H: Nods head and says Yeah). It's not just about the – our first judgments we make about people but it's about –

H Yeah, it's like understanding why they are the way they are.

C Yeah. So yeah, increased empathy, understanding what's going on for people and thinking, wow, that person's really had it rough. Or thinking, I don't know what's going on for that person, maybe I shouldn't be so quick to judge them.

H Yeah.

C Yeah. Um, yeah and you guys also talked I think about being able to talk about difficult topics. Like you (pointing at L) said right at the beginning, like stigma and this group here, like –

L Yeah, there's no stigma in this group anymore I'm pretty sure.

C And we're sick of not talking about it (L: Yeah) we don't want there to be stigma, we don't want there to be silence about it. Yeah. Um, yeah and I also, I think it's really cool that you want things to go somewhere from here too. Not just Alive, but what does this mean for you and your future. Like thinking, this was something really cool, I wanna do something like this. It doesn't necessarily mean you're gonna be a social worker (H: that's what I'm doing) or a counselor. And maybe it does! But there's pieces of this that everybody could have in their lives so it's cool that you've had this experience and you want it to go somewhere from here.

L Well just like not only the experience of just like Harper wants to be a social worker, but having the experience to know that people are human, that you know, things don't always just have to be, okay, open book, close book, it doesn't always have to be like that. You can go into something and you can learn about it, you can turn the pages, you can read the entire book and know how everything works. Like Alive wasn't just something that was just kind of like, you open the book, okay, whatever, and you close the book and it's over with. It's something that for me, personally, it's like you open the book and it's never, it's never gonna be something that just kind of closes. It's not gonna be something that ends. Like

- I'm always gonna remember like going to the school and making people cry, hitting people in the way that they cry. It's hard to make people cry sometimes, but we always seem to. It's not like something like, Harper said this, it's not something that we're all proud about, but you know, it's-
- H It's like a weird feeling, it's like "Awh, I made you cry." But that sounds bad, it's not like-
- L It's something that you know, like you just feel it in your bones that you hit somebody on a level that wasn't the surface. Like you don't skim the surface like a normal presentation. You dig deep. And you connect with people that normally like you wouldn't connect with. Like I, I mean like, most of the people in the group I would never talk to. The only one I ever talked to was Anne. And then Anne's like, Yeah, I hate Harper, she's a bitch. And then it was like, Oh. And now it's like they sit next to each other and are like "Ha, I like that girl."
- C So does some of like the things that I heard, does some of that fit with you guys.
- All Yeah.
- C So you said it's hard, it's hard to explain what Alive is
- H Yeah.
- C Have we started a little to kind of get into a bit of what it was?
- H Yeah. It's just like... It's hard to explain it because you have to explain each like part of it in different ways, like presenting is a whole different story than like just being the group itself, like it's all so many different feelings, that it's just like... hard to explain it all.
- L Yeah. It's just like the most interesting, wonderful feeling to be able to connect with people that you don't talk to, people that are like, so to speak, from the other side of the hallway. People that are just like, alright you stand in that social group and I'll stand in this social group. You don't talk. You don't mingle. But being able to be like, you're from here and I'm from here, let's find common ground.
- C Mhm.
- L And then let's do something about it. You know what I mean? Like, everybody deals with something like this, it's not like it's one person out of the entire group that's like, Oh, I've had feelings like this or I know somebody. Like everybody. And in a room of kids that, you know, we show up in there and sometimes you know it feels like they're just kind of, oh this is gonna be cool, you know what I mean? Like this is gonna be boring. To be able to go in there and change somebody's mind and to be able to talk to somebody about a topic that most people's parents won't talk to them about. It's very cool.
- C Yeah, absolutely. So what other pieces are still parts of the story that I haven't heard from you yet? Cuz I just mentioned a bunch of things, but what are we missing?
- H How like it's gonna affect us for the rest of our lives, just this group. Like Alive, I knew that I wanted like some type of job in that kind of field and then like joining Alive and being in that and meeting [Old Leader] and stuff, like that helped me pick my career and that started in like Grade 10 and now I'm going to go to university in January.
- C Awesome. So this is a good kind of... I explained to you guys at the beginning... this is a perfect fit for what you just mentioned about where does it go from here.

Because not just this specific Alive group but I talked to you guys individually and here we are together, we're trying to figure out, what is this Alive group. If someone was wanting to do something like this somewhere else and they maybe didn't have you guys there, what advice would you have for them or what would you tell them about how they could try to do something like this?

L Hm. Well I mean like, kind of...

H It's hard to figure out because we didn't really have to try to make it this way, it kind of just happened and then we were like, woah.

C Okay.

L Like, you just need to start out with like a good leader. Like [old leader] was definitely something that not only like helped our group like just be able to present places but she like helped us so then we're not like, you know what, like, helped us kind of talk.

H And I think trust is the biggest thing that you have to have in a group to make it work. To make people confident enough to go out, not only to share in the group but you need that trust when you go to present somewhere as well. Like you just, trust is probably the biggest thing that you need.

L You need trust anywhere in your life. And I mean, like being able to trust someone like Harper that I don't talk to everyday, that I don't see everyday, I wouldn't be like Harper's my BF, you know what I mean? It's like...

H It feels weird. You're not really friends with that person but you trust them more than some of your close friends. It's weird.

L Yeah, to trust people in the group that are like totally across the tracks to me, they're totally the other people, you know what I mean? To be able to trust somebody so much that isn't, you know, your mom or dad. To trust somebody that isn't your best friend is very weird. Like it's a weird feeling but it's a comfortable feeling. To be able to be like, yeah, we're all human. Let's get over that. You know what I mean? And like, let's do something. We all came here for a cause and we're all as serious about this cause as one another, you know what I mean? It wasn't something like Harper's crazy about this but Anne isn't, it's something that we're all crazy about this. We all kind of got all of the feelings out in the open. We all talked about anything and everything we wanted to. We all just kinda became a family and to be able to learn how to present and know our facts about something that can help other people not only like connect to people but be able to help people like we've helped people is kinda cool, so.

C So the trust was really big.

L Woah. Yeah.

C Yeah. Hmm. So what else would you tell someone who's trying to start up something like this?

L You just need people who are as committed as you are.

H Try to get [Old leader]

C So committed people. And that kind of comes from having a good leader, it sounds like.

H Uh huh.

C Someone who... so what's a good leader to you?

L [Old leader]

- C Besides what we talked about, we talked about a lot of things. Someone who's like equal level with you, someone who... builds the trust.
- L Well, someone who's human.
- H It's not a dictatorship.
- C No dictators. Okay.
- H It shouldn't be a job.
- L No.
- H Like it shouldn't be a work environment, it should be... like that's involved, you have to do a lot of work if you want it to like grow and stuff.
- L Get to this point.
- H Yeah. But, you don't want that to be the vibe when you're in there because no one's going to sit and talk about how suicide has affected them if they think that it's like, a job.
- C And I like that word you used, vibe. Cuz it's not like probably, maybe even necessarily anything that [old leader] maybe said or did sometimes but that just that feeling you had when you were with her that she did care.
- H Yeah.
- C And when someone doesn't prioritize you and make you an equal then it gives off that vibe that "I'm not safe here." Even if she never said, "You're not safe here." But it just gives you that feeling.
- H Yup.
- C It sounds like you guys have a lot of intuition about that.
- H Mhm.
- L Yeah. Just being able to like, I don't know, [old leader] was pretty cool, like, I have no idea, you just get to know [old leader] on a whole different level, like how old is she? Like, I think she's like 26 or 27. She doesn't look that old.
- CG It's not even just [old leader] it's just the way that she – like she's awesome I love her, but I mean just like the way that she just like was in the group, that's what type of leader you need.

APPENDIX G

Table G1. Word Counts of Voices, by Participant

Voices	Jane	Anne	Lucy	Harper	Ginny	Totals
Knowing	837	1374	1801	1774	381	6167
<i>Literal Knowing</i>	43	167	0	83	0	293
Total Knowing	880	1541	1801	1857	381	6460
<i>% of Total</i>	13.62%	23.85%	27.88%	28.75%	5.90%	
Connection	673	595	877	1889	339	4373
<i>Literal Connection</i>	78	0	0	39	0	117
Total Connection	751	595	877	1928	339	4490
<i>% of Total</i>	16.73%	13.25%	19.53%	42.94%	7.55%	
Altruism	525	324	197	534	42	1622
<i>Activism</i>	0	0	181	0	0	181
Total Altruism	525	324	378	534	42	1803
<i>% of Total</i>	29.12%	17.97%	20.97%	29.62%	2.33%	
Protective	83	150	302	76	17	628
<i>% of Total</i>	13.22%	23.89%	48.09%	12.10%	2.71%	
Not Knowing	84	417	599	774	114	1988
<i>% of Total</i>	4.23%	20.98%	30.13%	38.93%	5.73%	
Disconnection	214	509	790	853	84	2450
<i>% of Total</i>	8.73%	20.78%	32.24%	34.82%	3.43%	
Silence	225	695	355	576	52	1903
<i>Literal Silence</i>	82	0	0	18	0	100
Total Silence	307	695	355	594	52	2003
<i>% of Total</i>	15.33%	34.70%	17.72%	29.66%	2.60%	19822
Totals	2844	4231	5102	6616	1029	19822

Note. The *% of Total* column indicates the percentage of each participant's coded words within each voice. For instance, Jane's knowing voice (880 words) makes up 13.62% of the total Knowing Voice coded in all the participants (6460 words).

APPENDIX H

Table H1. Co-Occurrence of Voices, by Word Count

	Coded Voices										
	K	C	Al	P	NK	D	S	LK	LC	Ac	LS
K	0	333	106	66	70	138	99	0	0	0	0
C	333	0	147	0	47	31	4	41	0	8	0
Al	106	147	0	28	0	0	32	34	14	0	0
P	66	0	28	0	20	67	58	0	0	0	0
NK	70	47	0	20	0	183	70	0	0	0	0
D	138	31	0	67	183	0	221	12	0	0	0
S	99	4	32	58	70	221	0	0	0	0	0
LK	0	41	34	0	0	12	0	0	14	18	0
LC	0	0	14	0	0	0	0	14	0	14	0
Ac	0	8	0	0	0	0	0	18	14	0	0
LS	0	0	0	0	0	0	0	0	0	0	0

Note. K = Voice of Knowing; C = Voice of Connection; Al = Voice of Altruism; P = Protective Voice; NK = Voice of Not Knowing; D = Voice of Disconnection; S = Voice of Silence; LK = Voice of Literal Knowing; LC = Voice of Literal Connection; Ac = Activist Voice; LS = Voice of Literal Silence.