

October 28, 2024

Dear Parent / Guardian,

This school year, school staff are working to teach students about mental health and how to seek help if they are worried about themselves or a friend. We are using a program called *Signs of Suicide (SOS)*. The program teaches students about this difficult topic and encourages them to seek help.

SOS has been used by thousands of schools over the past few decades. Studies have shown that it effectively teaches students about depression and suicide while reducing the number of students' self-reported suicide attempts.

Through the program, students learn:

- that depression is treatable, so they are encouraged to seek help
- how to identify depression and potential suicide risk in themselves or a friend
- to ACT (Acknowledge, Care and Tell a trusted adult) if concerned about themselves or a friend
- who they can turn to at school for help

**December 2 and December 4**, through Advisory/WIN time, 9th grade students will watch age-appropriate video clips and participate in a guided discussion about depression, suicide, and what to do if they are concerned about a friend. Following the video, students will complete a brief depression screening tool. This tool cannot provide a diagnosis of depression but does indicate whether a young person should be referred for evaluation by a mental health professional.

We encourage you to visit [www.sossignsof suicide.org/parent](http://www.sossignsof suicide.org/parent) for information on warning signs for youth suicide, useful resources, and some of the key messages students will learn. You can also view this [parent video](#) to learn more.

All 9<sup>th</sup> grade students were given a copy of a parent information letter during their Advisory class the week of October 28. If you do **NOT** wish your child to participate in the SOS High School Program, please complete the bottom of parent letter and return it to the high school counseling department, to the attention of Maggie Spingler, school counselor, by **Tuesday November 26, 2024**. If we do not hear from you, we will assume your child has permission to participate in this program.

I do **NOT** give permission for my student, \_\_\_\_\_, to participate in the SOS depression lesson at Lake Braddock High School.

Parent/guardian name (please print) \_\_\_\_\_

Parent/guardian signature \_\_\_\_\_ Date: \_\_\_\_\_

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Sincerely,  
Maggie Spingler, School Counselor  
[mmspingler@fcps.edu](mailto:mmspingler@fcps.edu)