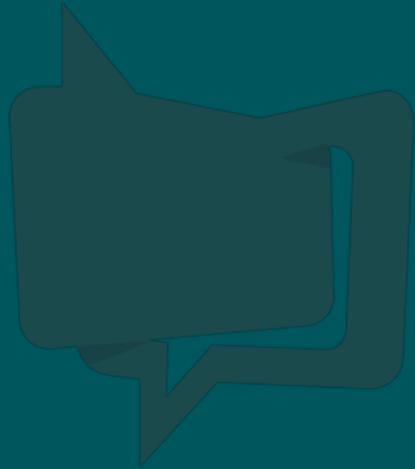


Is suicide preventable?



Each Mind Matters 2018-2019 webinar series

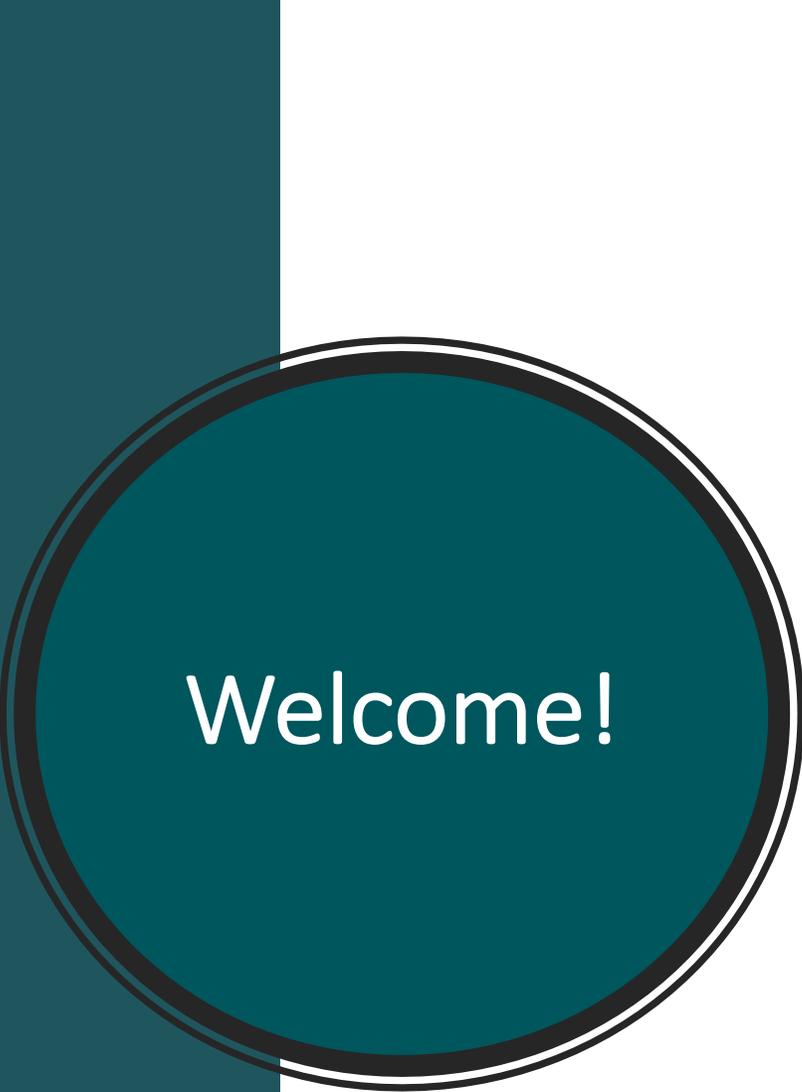
Know the Signs >> Find the Words >> Reach Out



California's Mental Health Movement



Funded by counties through the voter-approved Mental Health Services Act (Prop. 63).



Welcome!

- If you called in on the phone, find and enter your audio PIN
- If you have a question, technical problem or comment, please type it into the “chat” box or use the icon to raise your hand.



Sandra Black, MSW



Sandra Black has worked in suicide prevention in California since 2007. Until 2011 she managed the California Office of Suicide Prevention, which included completion and implementation of the California Strategic Plan on Suicide Prevention. In 2011 she joined the Know the Signs suicide prevention social marketing campaign as a consultant, and has since also joined the Each Mind Matters mental health movement team. She provides technical assistance to counties and community-based organizations around mental health promotion and suicide prevention. She holds an MSW from the University of California, Berkeley and a BS from Cornell University.



Anara Guard



Anara Guard has worked in suicide and injury prevention since 1993. For the past eight years, she has been a subject matter expert advising Know the Signs and other suicide prevention projects. Previously, she was deputy director at the national Suicide Prevention Resource Center where, among other duties, she led the development of annual grantee meetings for SAMHSA's suicide prevention grantees and oversaw technical assistance. She has presented numerous workshops and trainings for journalists, community members, and the field of suicide prevention at large on how best to communicate about suicide prevention. Her publications include peer-reviewed articles and manuals on alcohol screening and brief intervention, rural suicide postvention, consumer protection approaches to firearm safety, child hyperthermia, violence and teen pregnancy, and more. Ms. Guard earned a master's degree in library and information science and a certificate in maternal and child health.

Each Mind Matters 2018-19 Webinar Series

Join us for the 2018-2019 **Each Mind Matters** webinar series. This series will provide a deeper understanding of suicide prevention in the workplace, at school and with our Spanish-speaking communities. In addition, we will feature webinars about Mental Health Awareness Month in May and Suicide Prevention Week 2019.

Questions? Please email:
info@eachmindmatters.org

This webinar series is hosted by **Each Mind Matters: California's Mental Health Movement**, and is part of statewide efforts to prevent suicide, reduce stigma and discrimination related to mental illness, and to promote mental health and wellness. These initiatives are funded by counties with Prop 63 MHSA funds through the California Mental Health Services Authority (CalMHSA), an organization of county governments working to improve mental health outcomes for individuals, families, and communities.

September 25, 2018 1PM (English) / 2:30PM (Spanish) PST

Skills Building: Engaging Latino Communities in Suicide Prevention

The webinar will provide participants with an in-depth look at the *SanaMente* campaign and resources to educate the Latino community about suicide prevention.

To register: English: attendee.gotowebinar.com/register/1662240972603779842

To register: Spanish: attendee.gotowebinar.com/register/6909583250350834690

October 23, 2018 1PM PST

Suicide Prevention: Youth Suicide Prevention in Schools and Communities

This webinar will provide attendees with information and resources to help schools, parents and communities work together for youth suicide prevention.

To register: attendee.gotowebinar.com/register/8185639062151443714

November 13, 2018 1PM PST

Suicide Prevention in the Workplace

The webinar will present the rationale for suicide prevention in the workplace. An overview of best practices and resources to support workplace suicide prevention strategies will be provided.

To register: attendee.gotowebinar.com/register/2683796126457115138

February 12, 2019 1PM PST

Is Suicide Preventable?

The webinar will review comprehensive suicide prevention approaches, including postvention after suicide, and discuss how to maintain energy and hope when the going gets tough.

To register: attendee.gotowebinar.com/register/6632742715152024065

March 26, 2019 1PM PST

Learning Exchange: Community Engagement for May is Mental Health Awareness Month

This webinar will introduce the 2019 Each Mind Matters Toolkit and feature Mental Health Awareness Month activities and strategies.

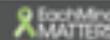
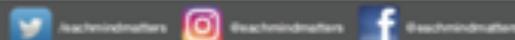
To register: attendee.gotowebinar.com/register/4358905389909356546

June 18, 2019 1PM PST

Suicide Prevention Week 2019: Tools, Activity Ideas and Resources

The webinar will review materials available to support your suicide prevention efforts during National Suicide Prevention Awareness Week (September 8-12, 2019), World Suicide Prevention Day (September 10), and throughout the month and year.

To register: attendee.gotowebinar.com/register/362006900106480130



Funded by counties through the Mental Health Services Act (Proposition 63), approved by voters.

View all previous Each Mind Matters webinars, presentations, and other resources at: EMMResourceCenter.org



“Is suicide preventable?”

Suicide rates rose across the U.S. in all states but one

2018 brought two more high profile deaths

Many feel economic stress and disconnection from one another



Polarized and contentious cultural and political environment



Natural disasters seem more common and more deadly



Despite all our efforts things seem to be getting worse...

Why is the problem of suicide so persistent?

- Success can be hard to measure.
- Causes of suicide are complex, and many of the factors that lead to it are not easy to fix.
- Knowing the signs and raising awareness is not enough.
- Reaching the populations with the highest rates is very challenging and under-resourced.
- Although the mental health system has largely taken the lead, a comprehensive approach is necessary to make a difference.

Suicide rising across the US

More than a mental health concern

Suicide is a leading cause of death in the US. Suicide rates increased in nearly every state from 1999 through 2016. Mental health conditions are often seen as the cause of suicide, but suicide is rarely caused by any single factor. In fact, many people who die by suicide are not known to have a diagnosed mental health condition at the time of death. Other problems often contribute to suicide, such as those related to relationships, substance use, physical health, and job, money, legal, or housing stress. Making sure government, public health, healthcare, employers, education, the media and community organizations are working together is important for preventing suicide. Public health departments can bring together these partners to focus on comprehensive state and community efforts with the greatest likelihood of preventing suicide.

States and communities can





How do we sustain momentum for
suicide prevention?

There are reasons for hope!

There are effective strategies and programs

Most people believe suicide is preventable and want to help

Suicidology is a dedicated and active field

Media coverage has improved a lot

Suicide is more openly discussed

Effective suicide prevention

 Preventing Suicide	
Strategy	Approach
Strengthen economic supports	<ul style="list-style-type: none"> • Strengthen household financial security • Housing stabilization policies
Strengthen access and delivery of suicide care	<ul style="list-style-type: none"> • Coverage of mental health conditions in health insurance policies • Reduce provider shortages in underserved areas • Safer suicide care through systems change
Create protective environments	<ul style="list-style-type: none"> • Reduce access to lethal means among persons at risk of suicide • Organizational policies and culture • Community-based policies to reduce excessive alcohol use
Promote connectedness	<ul style="list-style-type: none"> • Peer norm programs • Community engagement activities
Teach coping and problem-solving skills	<ul style="list-style-type: none"> • Social-emotional learning programs • Parenting skill and family relationship programs
Identify and support people at risk	<ul style="list-style-type: none"> • Gatekeeper training • Crisis intervention • Treatment for people at risk of suicide • Treatment to prevent re-attempts
Lessen harms and prevent future risk	<ul style="list-style-type: none"> • Postvention • Safe reporting and messaging about suicide

Effective suicide prevention

- Early recognition and treatment of depression
- Cognitive Behavioral Therapy for Suicide Prevention
- Dialectical Behavioral Therapy
- Collaborative Assessment and Management of Suicidality
- Caring Contacts
- Early intervention, e.g. Good Behavior Game, PIER model
- Safety planning
- Counseling on Access to Lethal Means
- Suicide prevention hotlines
- Gatekeeper training



Appendix: Summary of Strategies and Approaches to Prevent Suicide

Strategy	Approach/Program, Practice or Policy	Scale	Self-Reported Evidence	Other Risk/Protective Factors for Suicide	Lead Sector?
Strengthen economic supports	Strengthening household financial security				
	Unemployment benefit programs				
	Other income supports				
Strengthen access and delivery of suicide care	Mental health services				Government (local, state, federal)
	Behavioral health integration in health insurance policies				Business/Labor
	Behavioral health integration in underserved areas				Government (local, state, federal)
	Suicide prevention services (SIPS)				Government (local, state, federal)
	Emergency Department (ED) care				Government (local, state, federal)
	Behavioral health integration in underserved areas				Government (local, state, federal)
Create protective environments	Emergency Department (ED) care				Healthcare
	Emergency Department (ED) care				Social Services
	Emergency Department (ED) care				Healthcare
	Emergency Department (ED) care				Social Services
Promote resilience	Community-based programs				Government (local, state, federal)
	Peer support programs				Public Health
	Community engagement activities				Healthcare, Business/Labor

U.S. Air Force Suicide Prevention Program



[Am J Public Health](#). 2010 December; 100(12): 2457–2463.

PMCID: PMC2978162

doi: [10.2105/AJPH.2009.159871](https://doi.org/10.2105/AJPH.2009.159871)

PMID: [20466973](https://pubmed.ncbi.nlm.nih.gov/20466973/)

The US Air Force Suicide Prevention Program: Implications for Public Health Policy

[Kerry L. Knox](#), PhD,[✉] [Steven Pflanz](#), MD, [Gerald W. Talcott](#), PhD, [Rick L. Campise](#), PhD, [Jill E. Lavigne](#), PhD, [Alina Bajorska](#), MS, [Xin Tu](#), PhD, and [Eric D. Caine](#), MD

“The AFSPPP effectively prevented suicides in the US Air Force. The long-term effectiveness of this program depends upon extensive implementation and effective monitoring of implementation. Suicides can be reduced through a multilayered, overlapping approach that encompasses key prevention domains and tracks implementation of program activities.”

As of June 2017, Campus, State, & Tribal Grantees



Trained **1,304,600** people



Implemented **35,301** tra

GARRETT LEE SMITH YOUTH SUICIDE EARLY INTERVENTION AND PREVENTION STRATEGIES NATIONAL OUTCOMES EVALUATION

**Fiscal Year 2017
Report to Congress**
June 2018

Highlights along the Pathway to Care



State and tribal GLS grantees have identified 60,564 youth as at risk for suicide through trained gatekeepers or screenings.

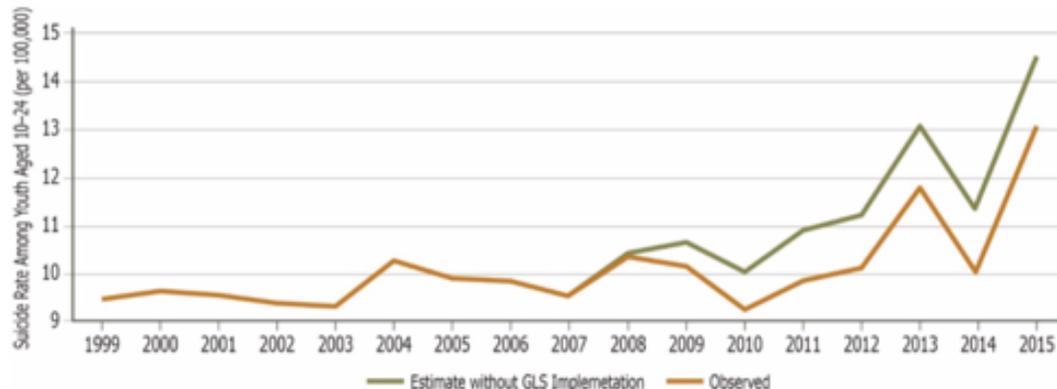


Nearly all youth identified as at risk for suicide were referred for services (86 percent*; n = 46,803/54,708).



Eighty seven percent* of those referred to mental health services, and for whom data are available, had received services within 3 months of the referral (n = 30,784/35,209).

Exhibit 12. Difference between observed youth suicide rate and estimated rate in absence of the GLS Programs in rural counties



Continuity of Care Study:
Assessing system conditions, capacity, and infrastructure.

Exploratory Study of Factors Influencing Care

Suicide Safer Environment:
Assessing grantee and provider practices within healthcare settings.

Training Study:
Assessing grantee training activities, settings, and recipients.

Quasi-Experimental Study Utilizing Medicaid Data

Randomized Control Trial of Role Play and Booster Training



ZEROSuicide
IN HEALTH AND BEHAVIORAL HEALTH CARE

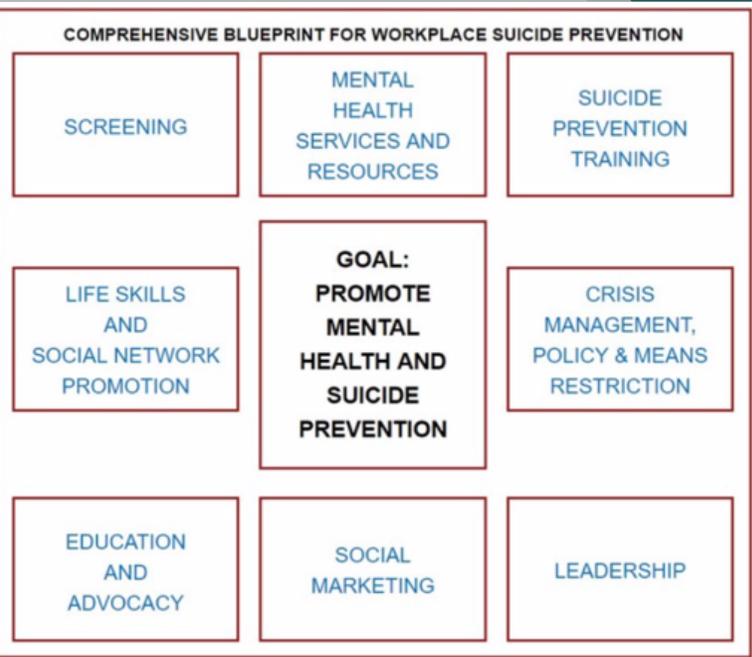
#BeThe1To
If you think someone might be considering suicide, be the one to help them by taking these 5 steps:

ASK. KEEP THEM SAFE. BE THERE. HELP THEM CONNECT. FOLLOW UP.

Find out why this can save a life at www.BeThe1To.com
If you're struggling, call the Lifeline at **1-800-273-TALK (8255)**

DOWNLOAD KIT

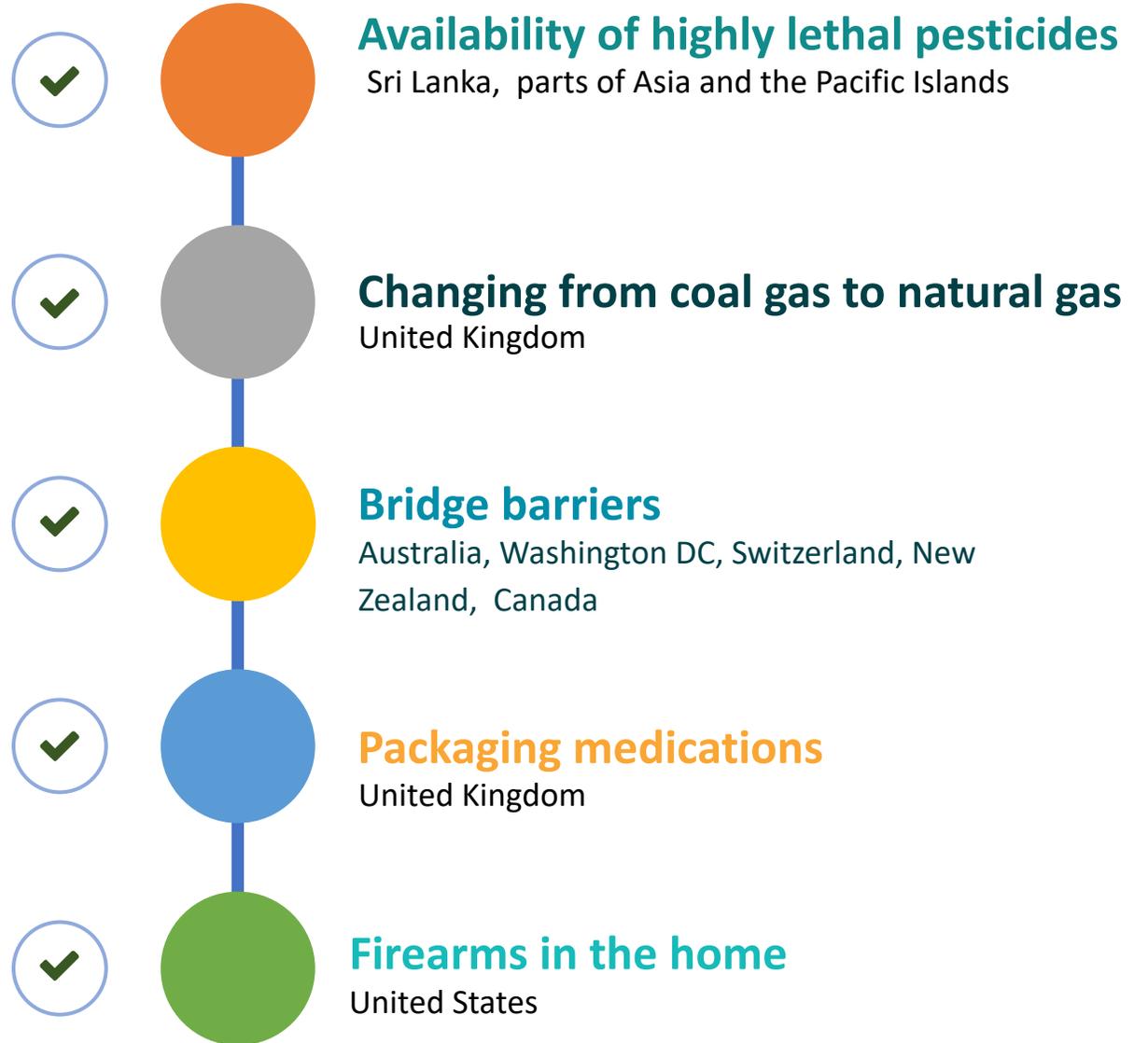
CREATED BY: [NATIONAL SUICIDE PREVENTION LIFELINE](#)



National initiatives based on effective approaches

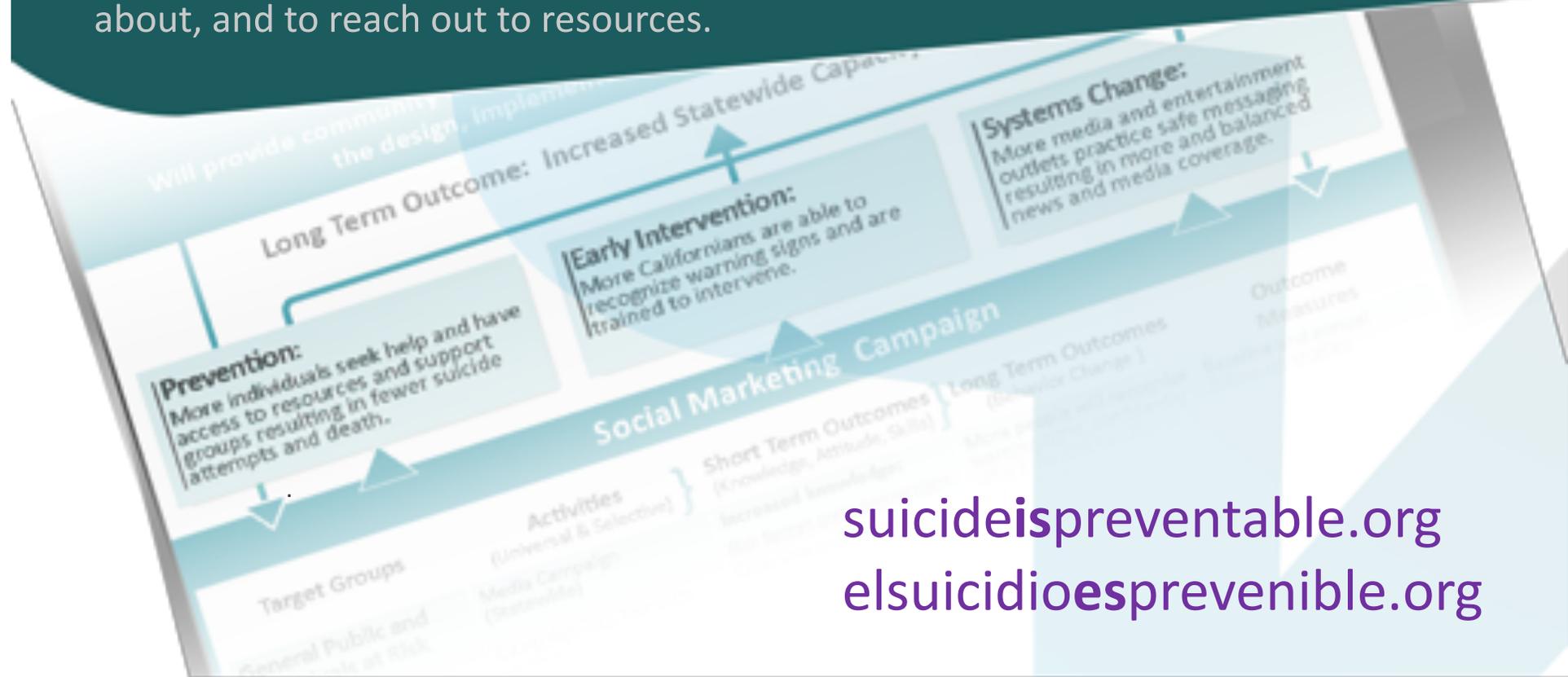
Means Matter

Examples from around the world...



Know the Signs is a statewide suicide prevention social marketing campaign with the overarching goal to increase Californians' capacity to prevent suicide by encouraging individuals to know the signs, find the words to talk to someone they are concerned about, and to reach out to resources.

KNOW THE SIGNS



suicideispreventable.org
elsuicidioesprevenible.org

Social Marketing Can Also Be Effective

Know the Signs is a statewide suicide prevention social marketing campaign with the overarching goal to increase Californians' capacity to prevent suicide by encouraging individuals to know the signs, find the words to talk to someone they are concerned about, and to reach out to resources.

KNOW THE SIGNS



50%

Californians were exposed to the Know the Signs campaign that was rated by an expert panel to be aligned with best practices and one of the best media campaigns on the subject.

"The results provide further evidence that the Know the Signs campaign is making Californians **more confident in their ability to intervene** with someone at risk of suicide."
(RAND Corporation, 2015)

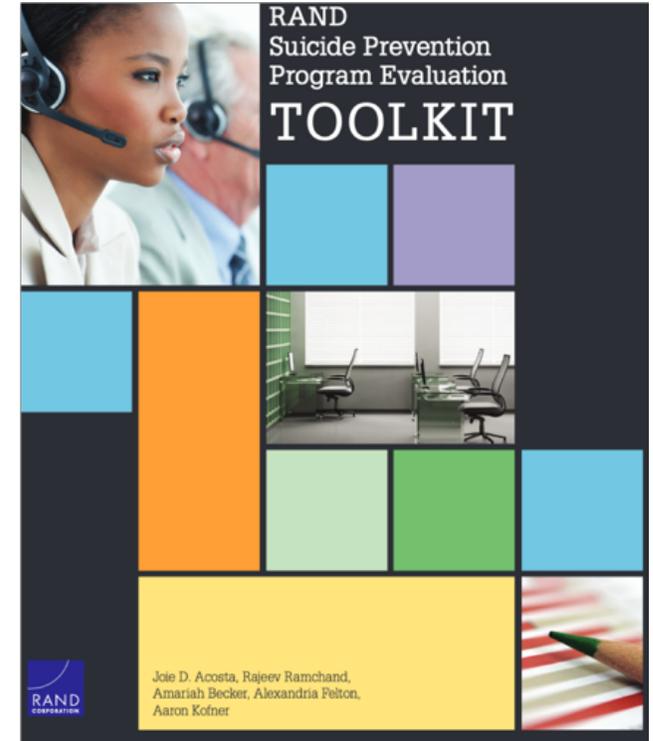
Efforts to raise awareness have worked

**94% of Americans
think suicide is
preventable**

Source: <https://afsp.org/harrispoll/>

Measuring success is hard -- but not impossible

- The field is actively developing – be a part of the solution!
- Evaluating your programs helps develop the evidence-base and provides impetus and inspiration for others
- Evaluation resources are available to support you





How do you know what you
are doing is working?

Suicidology is a dedicated and active field



RESEARCH SUMMARY

A Look Back at Research Summaries in 2018

Lethal Means Counseling in Hospital Emergency Departments--*American Journal of Preventive Medicine*

Suicidal Ideation and Suicide Attempts among Court-Involved, Non-Incarcerated Youth--*Journal of Forensic Psychology Research and Practice*

Classifying Drug Intoxication Deaths as Suicides--*PLOS One*

Sexual or Gender Minority Status and Suicide Attempts among Veterans Seeking Treatment for Military Sexual Trauma--*Psychological Services*

Safety Planning Intervention versus Usual Care--*JAMA Psychiatry*



Media coverage has improved

Creating connections: Solutions to youth suicide in La Plata County

Written stories by Mary Shinn, Durango Herald staff writer

Audio stories by Sarah Flower, KDUR

Photographs by Jerry McBride, Durango Herald photo editor

Editing by David Buck, Durango Herald assistant city and digital editor

Assistant editing by Amy Maestas, Durango Herald executive editor;

and Shane Benjamin, Durango Herald city editor

Newsweek

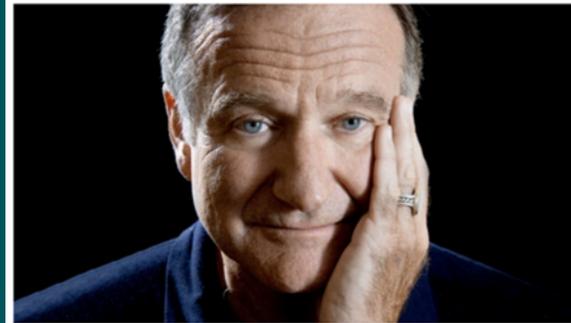
ROBIN WILLIAMS LEFT 'UNPRECEDENTED' MARK ON SUICIDE HOTLINES

BY ZACH SCHONFELD ON 8/11/15 AT 4:00 PM

Robin Williams' Legacy, and Its Impact on Suicide Prevention

| Robert Gebbia, CEO

f 6.5K t 296 G+ 1 in 222



We see compassionate responses more often

 **Lisa Newman**
9 hrs · 👤

Don't ask if a friend obviously in need, needs help. Barge in —

TWITTER.COM

Sheila O'Malley on Twitter

"My good friend David - whom I've known since high school - knew I was struggling and he felt helpless. He said "you are loved" "we need you". I was like, "Doesn't matter, but thanks." So he took a risk. It very well could have ended badly. I could have lashed out. /2"

 **Caissie St. Onge** ✓
@Caissie

So many messages telling those who are struggling to reach out. Fair enough, but part of what depression does is mutes your ability to reach. If you are NOT depressed & you see someone struggling, YOU reach out. If you don't see someone who used to be around, YOU reach out.

6/8/18, 9:04 AM

 On June 8, 2018, we lost a friend and colleague to suicide.

 **Matthew Zuckerman** @matthew608b · Jun 8

Always available to talk to a friend or coworker about #mentalhealth #suicide etc. I've been on both sides of that conversation and shame is not your friend. #crazysocks4docs

 **Richard Byyny** @rbyyny

Let's start the conversation with our colleagues about mental health for all doctors - bit.ly/2Jcad7K

1 in 5 doctors have depression...

🗨️ 2 ❤️ 6 ✉️

2018 SUICIDE PREVENTION SUMMIT



The Hero In Each of Us:
Finding Your Role in Suicide Prevention

Mental health as a social justice issue

Health insurance is a mental health issue. I can't help a client who can't afford to see me.

Housing is a mental health issue. I can't use therapy to help a client whose depression and anxiety come directly from sleeping in the streets.

Food insecurity is a mental health issue. I can't help a client who isn't taking their medication because their pills say "take with food" and they have nothing to eat.

Healthcare is a mental health issue. I can't help a client whose "depression" is actually a thyroid condition they can't afford to get treated.

Wages are a mental health issue. I can't help a client whose anxiety comes from the fact that they are one missed shift away from not being able to make rent.

Child care is a mental health issue. I can't help a client who works 80 hours per week to afford daycare, and doesn't have the time or energy left to come see me.

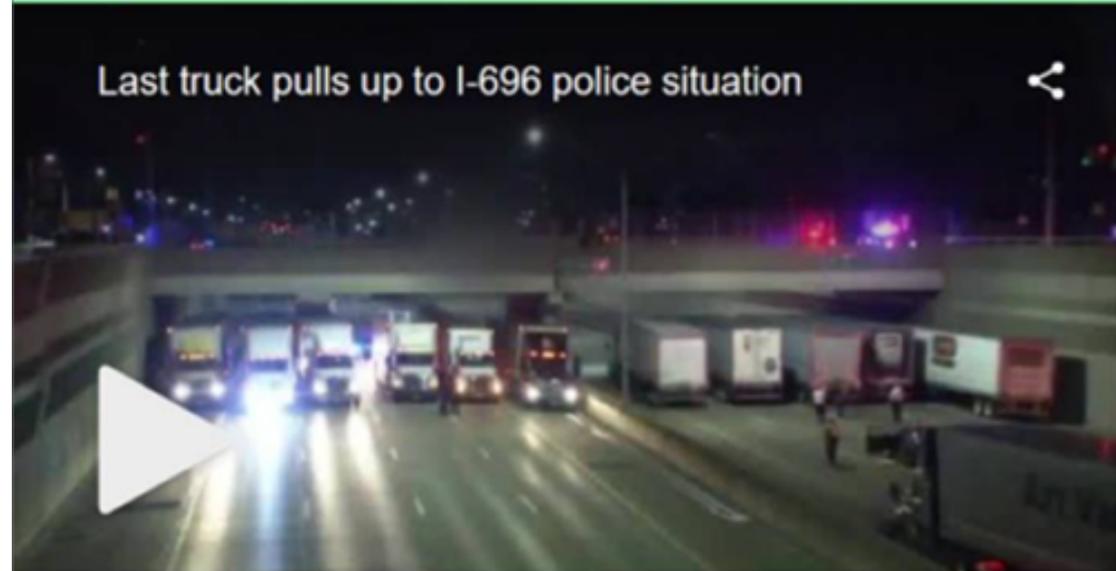
Drug policing is a mental health issue. I can't help a client who ended up in prison because they got caught self-medicating with illegal substances.

Police brutality is a mental health issue. I can't help a client whose 'anxiety' is a very real and justified fear of ending up as a hashtag.

If you're going to make a stand for improving mental health, you have to understand that addressing mental health goes way beyond hiring more therapists and talking about mental health on social media. If we're really serious about tackling this mental health problem as a country, it means rolling up our sleeves and taking down the barriers that prevent people from getting the help they need - even if those people are different than us, lead different lives, and make choices we don't agree with.

13 semis line Detroit freeway to help man considering suicide

Last truck pulls up to I-696 police situation



OAK PARK, Mich. (WJBK) - If you or a loved one is feeling distressed, call the National Suicide Prevention Lifeline. The crisis center provides free and confidential emotional support 24 hours a day, 7 days a week to civilians and veterans. Call the National Suicide Prevention Lifeline at 1-800-273-8255. Or text to 741-741

[CLICK HERE for the warning signs and risk factors of suicide.](#) Call 1-800-273-TALK for free and confidential emotional support.



“Is suicide preventable?”

Support after suicide loss



Annabelle

00:27

EachMind MATTERS

Stay Informed

GET HELP NOW

Subscribe

vimeo

A Vimeo video player is shown in a dark grey frame. The video content features a man in a white shirt and grey cap smiling and holding a baby. A speech bubble above the baby says "Cheese!". The video player includes a play button, a progress bar at 00:27, and standard video controls. Below the video player, the name "Annabelle" is visible. At the bottom of the slide, there is a green banner with the logo "EachMind MATTERS" and a "GET HELP NOW" button. To the right of the banner, the text "Stay Informed" is above a green "Subscribe" button.

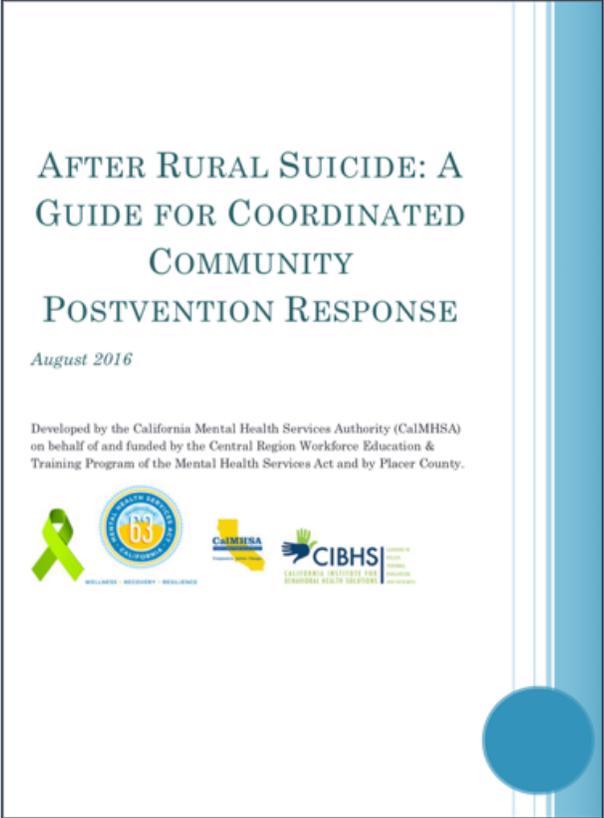


What helps after a suicide?



- Organized, quick and empathic response
- Support is available to promote healing among those affected
- How a suicide is handled by the school, community, workplace
- How a suicide is portrayed publicly and in the media

Community Postvention Response



Sustaining energy and
inspiration on a personal
level

**Acknowledge the work is
hard**

Connect with the field

You don't need to have all the answers

Practice self care

Seek out stories of recovery, resilience

Connection



American Association of Suicidology <SUICIDOLOGY@LISTS.APA.
SUICIDOLOGY@LISTS.APA.ORG
Wednesday, February 6, 2019 at 9:02 PM
[Show Details](#)

There are 3 messages totaling 1585 lines in this issue.

Topics of the day:

1. Resources for adults with developmental and intellectual disabilities
2. CDC funding opportunity
3. Fwd: Free Webinar on February 12th from United Survivors



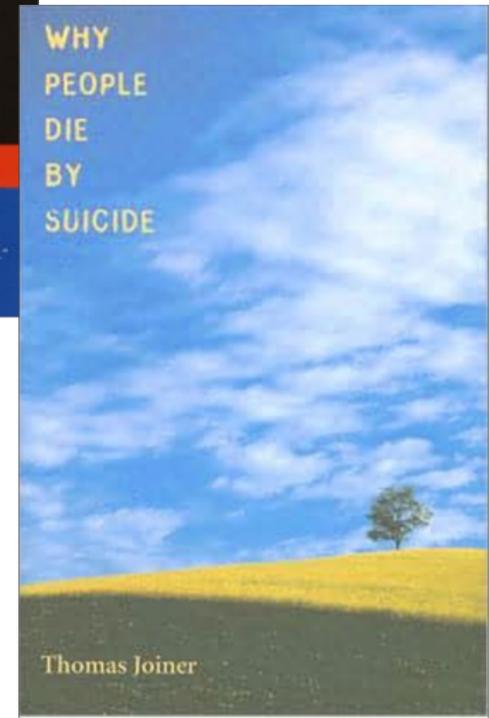
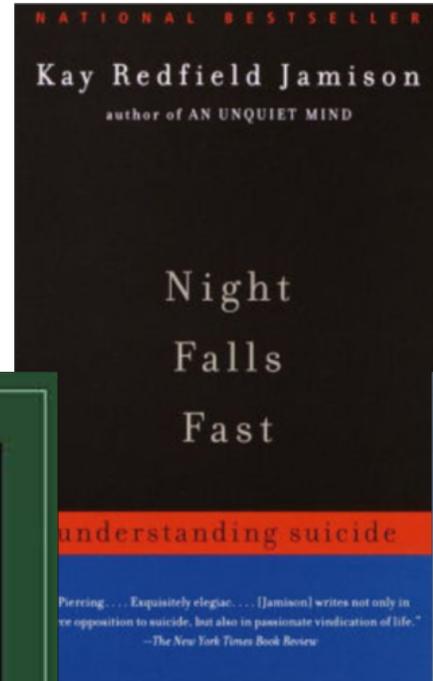
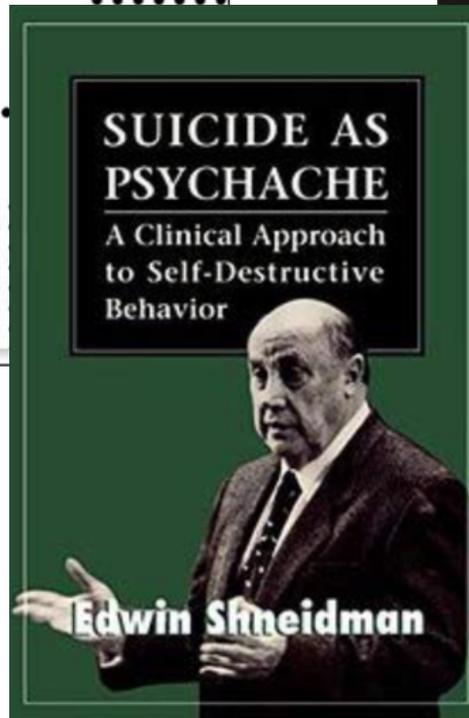
Welcome to the "zerosuicide" mailing list



zerosuicide <zerosuicide-bounces@mailman.edc.org>
zerosuicide-request@mailman.edc.org
sandra@suicideispreventable.org
Wednesday, February 28, 2018 at 12:38 PM



Knowledge



Tools



D. Miguel de Cervantes Saavedra
Juan de la Torre, Pintor, año 1600.

Forewarned, forearmed; to be prepared is half the victory.
(Miguel de Cervantes)

AFTER RURAL SUICIDE: A GUIDE FOR COORDINATED COMMUNITY POSTVENTION RESPONSE
August 2016

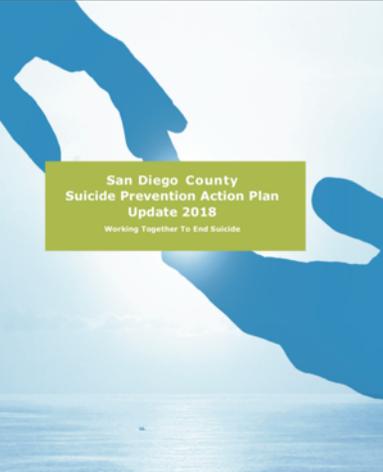
Developed by the California Mental Health Services Authority (CalMHSA) on behalf of and funded by the Central Region Workforce Education & Training Program of the Mental Health Services Act and by Placer County.

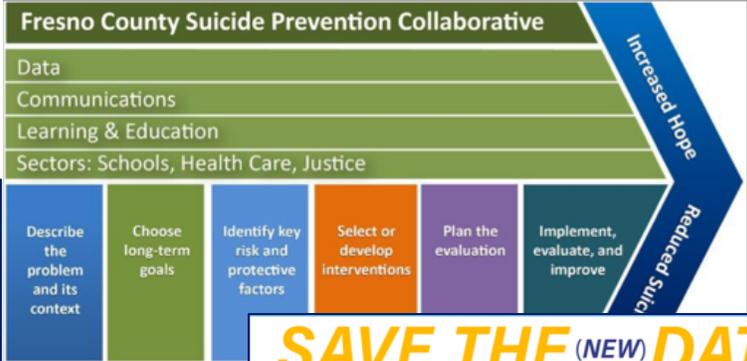


CALIFORNIA STRATEGIC PLAN ON SUICIDE PREVENTION: Every Californian Is Part of the Solution




San Diego County Suicide Prevention Action Plan Update 2018
Working Together To End Suicide





SAVE THE (NEW) DATE
SPTF Strategic Planning Retreat

Thursday, April 19th
9 a.m. - 4 p.m.

Woodland Baptist Church
1436 S Woodland St.
Visalia, CA 93277

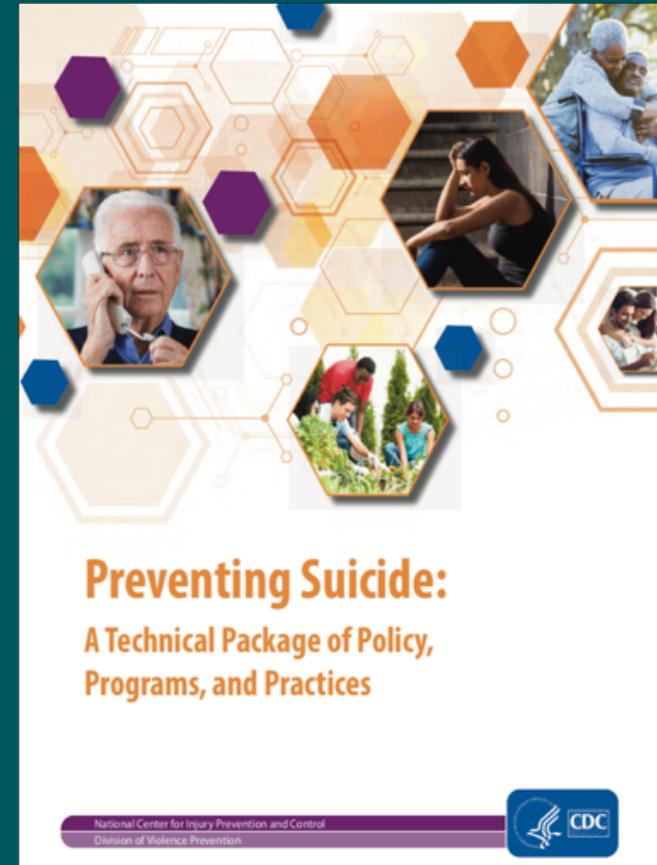
To register and for more information, visit www.sptf.org

The SPTF Strategic Planning Retreat is open to anyone. Newcomers are welcome!

SPTF STRATEGIC PLANNING RETREAT ACTIVITIES TO INCLUDE:

- Review of Structure, Programing, Goals and Objectives, Funding Allocation and Trainings Offered

More Tools!



Self Care





What inspires you?

Resources

- CDC Technical Package:
<https://stacks.cdc.gov/view/cdc/44275>
- RAND Suicide Prevention Evaluation Toolkit:
<https://www.rand.org/pubs/tools/TL111.html>
- AAS Suicidology list: <http://lists.apa.org/cgi-bin/wa.exe?A0=SUICIDOLOGY>
- SPRC Weekly SPARK: www.sprc.org
- After Rural Suicide: A guide for community postvention
<https://www.cibhs.org/pod/after-rural-suicide>

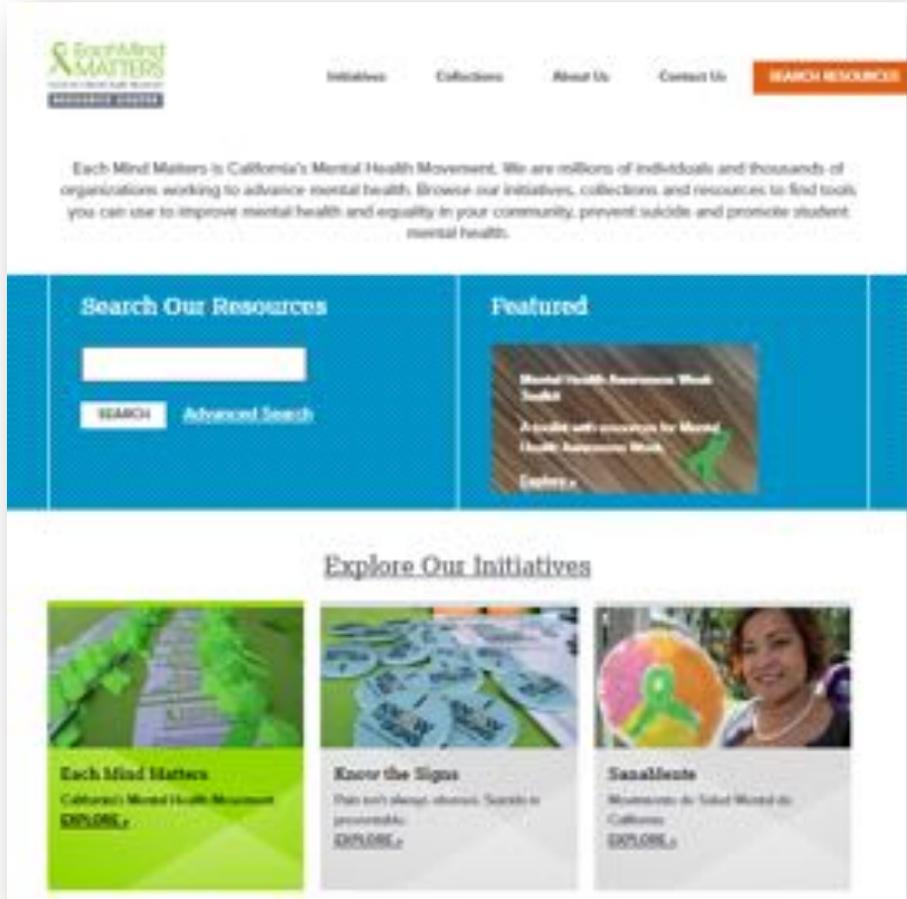
Resources



www.suicideispreventable.org

www.elsuicidiodoesprevenible.org

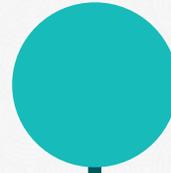
Each Mind Matters Resource Center



<https://emmresourcecenter.org/>



Takeaways...



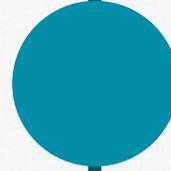
Suicide is preventable

when effective strategies are in place and accessible to those at highest risk.



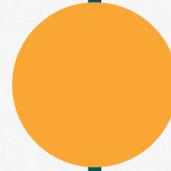
Suicide is not just a mental health problem

the whole community has a role to play.



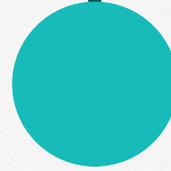
What happens after a suicide

is as important as prevention.



We need to hear more about the successes

not just the tragedies.



Put on your oxygen mask first

before you try to help others.



Q&A

Thank you!

Sandra Black

sandra@suicideispreventable.org

Anara Guard

anara@suicideispreventable.org



Funded by counties through the voter-approved Mental Health Services Act (Prop. 63).