



"We need to get people other than the choir to sing.
We need journalist associations, employee
assistance programs, chambers of commerce,
defense lawyers, pediatricians, family practitioners,
and others to get involved. They see people every
day that may be at risk and we need them to partake
in the conversation"

- Key informant, 2010 Progress review Nation Strategy

DAILY DISASTER OF UNPREVENTED AND UNTREATED M/SUDs				
Any MI:	SUD:	Diabetes:	Heart Disease:	Hypertension:
45.1 million	22.5 million	25.8 million	81.1 million	74.5 million
37.9 %	18.3 %	84 %	74.6 %	70.4%
receiving	receiving	receiving	receiving	receiving
treatment	treatment	treatment	screenings	treatment

Community Partnerships

Youth statistics

For youth between the ages of 10 and 24, suicide is the **third leading cause of death**. A nationwide survey of youth in grades 9-12 across the US found that **15%** of students reported seriously considering suicide, **11%** reported creating a plan, and **7%** reported trying to take their own life in the **12** months preceding the survey. **Over 40%** of surveyed gay or lesbian youth seriously considered attempting suicide. Suicide rates among American Indian/Alaska Native adolescents and young adults are **1.8 times** higher than the national average for that age group.

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 Latina girls have the highest rates of feeling sad and hopeless, seriously considering suicide, making a suicide plan AND attempting suicide when compared to whites and blacks.

Why mental health services are not sufficient

- Many of those at high risk don't seek mental health services
- The majority of mental health professionals have not been trained in suicide risk assessment and management
- Mental health services are often not accessible, poorly coordinated, and not structured to meet the needs of people at risk for suicide

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77 percent of individuals who die by suicide had visited their primary care doctor within the year 45 percent had visited their primary care doctor within the month THE QUESTION OF SUICIDE WAS SELDOM RAISED...

Community Partnerships

- Utah Youth Suicide Study
- 63% of youth in Utah who died by suicide had previous contact with the juvenile justice system.
- 28% of youth in Utah who died by suicide had previous contact with mental health services.

Community Partnerships

- A comprehensive, community driven, public health approach is necessary.
- Mental health services are an essential component of suicide prevention, but insufficient to reduce suicide rates in communities.

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SO, HOW DO WE CREATE . . .

- → A national dialogue on the role of BH in public life
- → With a public health approach that:
 - Engages everyone general public, elected officials, schools, parents, churches, health professionals, researchers, persons directly affected by mental illness/addiction & their families
 - Is based on facts, science, common understandings/messages
 - Is focused on prevention (healthy communities)
 - Is committed to the health of everyone (social inclusion)

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Community Partnerships-NSSP

- Goal 4 of the National Strategy for Suicide Prevention in 2001
- "Develop and Implement Community Based Suicide Prevention Programs"
- Involve both government and the private sector
- · Develop a plan, implement, and evaluate

What do we need?

- Communities deserve high quality mental health services that are responsive to community needs.
- Communities need access to mental health services (problems include waiting lists, lack of evening hours)
- Mental health services need crisis response, outreach capacities and follow-up.

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•RCT: 1867 suicide attempt survivors from 5 countries (all outside the US). •Brief (1 hour) intervention as close to attempt as possible. • 9 follow-up contacts (phone calls or visits) over 18 months.

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- We need to be able to engage youth in the community settings where most youth can be found, as well as in those settings where high risk youth can be found.
- We need universal approaches to be utilized in schools and primary care settings.
- We also need suicide prevention approaches in juvenile justice settings, foster care settings, emergency departments and substance abuse programs.

ACTION ALLIANCE RECOMMENDS 3 PRIORITY AREAS FOR CONSIDERATION

- → Issue One: Too many missed opportunities to save lives in primary care settings.
- → Issue Two: Millions of Americans still lack access to evidencebased care and BH professionals that can reduce suicidal behavior.
- → Issue Three: Too many discharged from EDs/inpatient units following suicide crisis at significantly elevated risk yet 50 percent referred to care following discharge do not actually receive outpatient treatment.

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Community Partnerships-Garrett Lee Smith (GLS) Memorial Act

 Develop and implement statewide or tribal youth suicide early intervention and prevention strategies in schools, juvenile justice systems, substance abuse programs, mental health programs, foster care systems, and other child and youth support organizations.

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Five Major Suicide Prevention Components

- Garrett Lee Smith State and Tribal Suicide Prevention Grant Program
- Garrett Lee Smith Campus Suicide Prevention Grant Program
- National Suicide Prevention Lifeline
 Crisis Center Follow-up Grant Program
- · Suicide Prevention Resource Center
- Native Aspirations



Garrett Lee Smith State and Tribal Suicide Prevention Grant Program

- 123 three year grants awarded.
- 44 different States have received grants



- 40% of all grant recipients have been AI/AN communities
- 270,352 trained or educated by GLS State and Tribal grantees
- 39,251 youth screened

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- Primary care is an underutilized setting for suicide prevention efforts.
- SPRC Rural Primary Care toolkit
- Pennsylvania GLS -primary care screening
- Tremendous opportunities for collaboration with other partners such as HRSA

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- The Veterans Administration now has Suicide Prevention Coordinators in every VA Medical Center and many clinics as well who have responsibility for community outreach.
- "Press one" and veterans chat

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Community Partnerships

- Crisis Centers are important community partners.
- 151 in the National Suicide Prevention Lifeline network.
- Often staffed by community volunteers, so they are really of the community.
- Spanish language sub-network and American Indian initiative.

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History of SPRC

 Goal 4.8 of the National Strategy for Suicide Prevention called for "the development of a technical assistance and resource center to build capacity for states and communities to implement and evaluate suicide prevention programs."

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Information and Resources

- Multiple publications and other resources
 - Strategic Planning for Suicide Prevention
- Web pages for each of the 50 states, including contacts, data, and state suicide prevention plans
 - http://www.sprc.org/stateinformation/index.asp
- E-mail list:
 - The Weekly Spark weekly newsletter

Lifeline Activities

- Developed a Spanish sub-network to serve Spanish speakers in their native language; Formulating and implementing Suicide Risk Assessment Standards for crisis centers to ensure proper identification of suicidal callers;
- Providing information and trainings in evidence-based or evidence-informed practices for call center
- Providing technical assistance and support to network crisis centers;

 Collaborating with an evaluation team to improve crisis center practices and service;
- Working with survivors of suicide loss, attempt survivors and national consumer leaders to promote culturally effective services to high risk populations;
 Promoting crisis center follow-up services for high risk callers and patients discharged from hospitals and
- emergency departments to enhance continuity of care; Developing and disseminating public education information to raise awareness of suicide prevention and to
- promote the hotline number nationally:
- Collaborating with social networking websites to promote the number, especially among younger populations.



What can you do?

- Create the dialogue at the local and state level
- · Utilize the resources available- both locally and nationally
- Model programs after best practices
- · Collaborate: Build, maintain and expand on existing relationships
- · Don't try to do it alone



Contact information

James Wright, MS, LCPC

Public Health Advisor

SAMHSA, Center for Mental Health Services Division of Prevention, Traumatic Stress and Special Programs Suicide Prevention Branch

> 1 Choke Cherry Road, Room 6-1002 Rockville, MD 20857

James.wright@samhsa.hhs.gov

Ph: 240.276.1854 Fx: 240.276.1890