





SUICIDE PREVENTION: WHAT WE KNOW AND WHAT WORKS

Presenters

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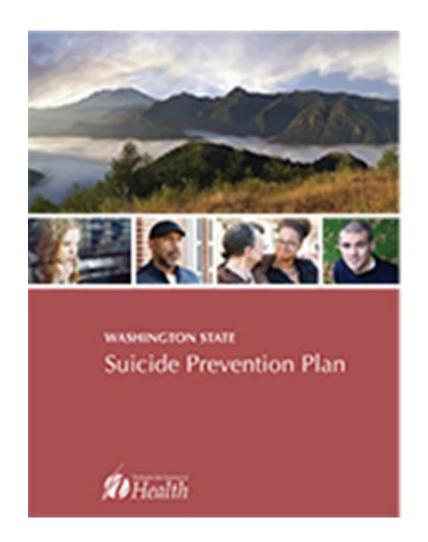
Self Care

"Rest and self care are so important. When you take time to replenish your spirit, it allows you to serve others from the overflow. You cannot serve from an empty vessel." – Eleanor Brown



Why Discuss Suicide Prevention?

- Suicide is a preventable, public health issue.
- About 75% of all WA violent deaths are suicides.
- Suicides account for about 75% of all firearm fatalities.
- Everyone can play a role in suicide prevention.



Impact

115 PEOPLE EXPOSED

TO EACH SUICIDE DEATH (Cerel, 2016)







LOSS & TRAUMA OF THOSE LEFT BEHIND

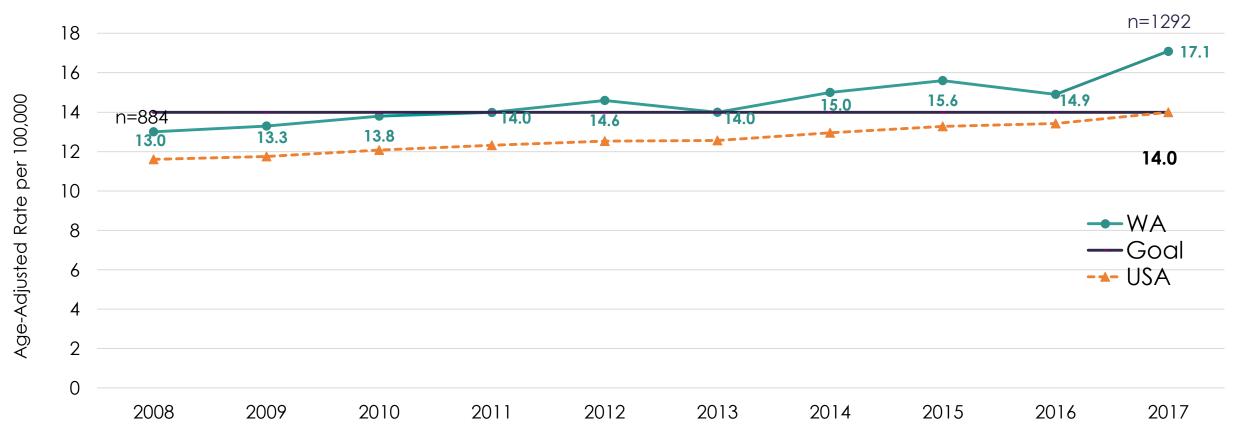


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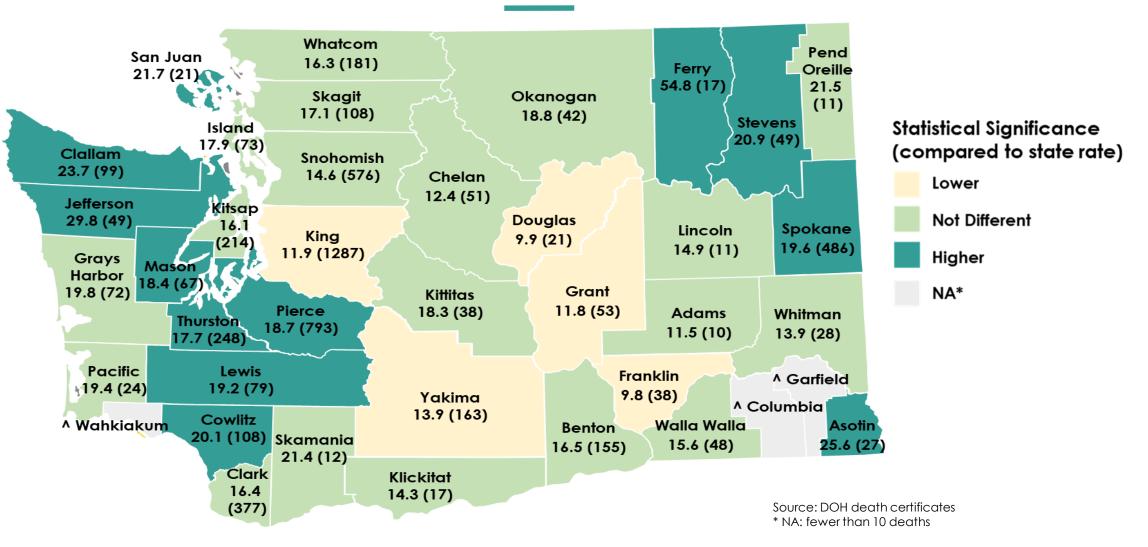
Results Washington

1.2.A.g: Reduce suicide death rate from the rate of 15.6 per 100,000 in 2015 to 14.0 per 100,000 in 2020



2013-2017 Washington State Suicide Mortality

(State Age-Adjusted Rate = 15.4 per 100,000. ^=fewer than 10 deaths)



Who are at high risk of suicide?

Race

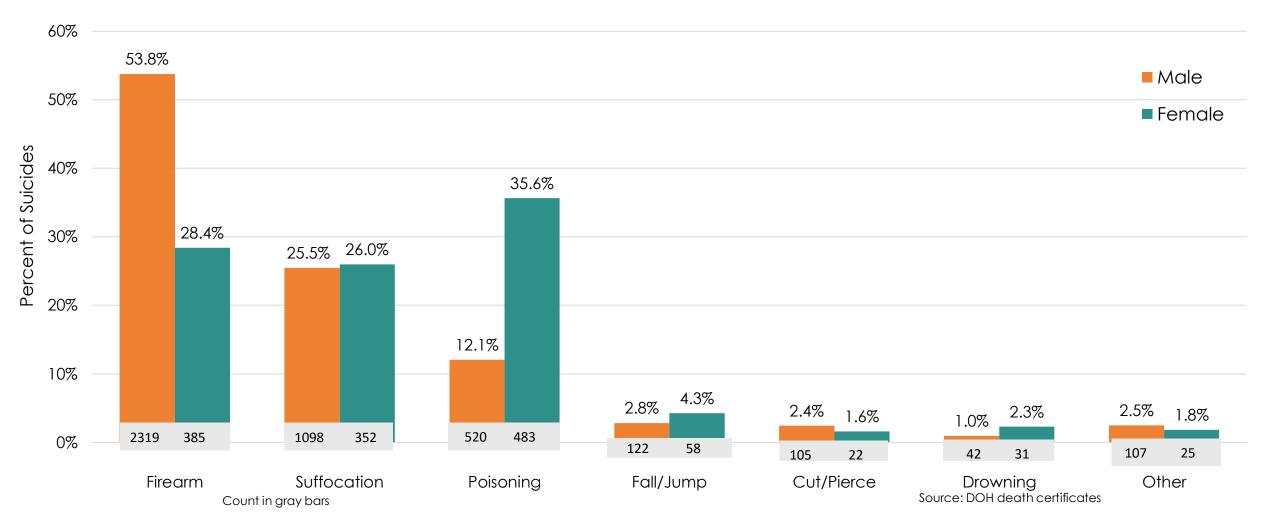
 American Indian and Alaskan Native (AI/AN) have the highest rate of suicide Whites have the second highest rate

Age and Sex

- Males, especially white males die by suicide at much higher rates than woman their age. (3 to 1 ratio)
- Youth ages 10-24 had a 27% increase in suicide from 2016 to 2017.
- Adults 75+ have the highest rate of suicide
- From 2013 to 2017, 1189 veterans** died by suicide.
- Females have greater hospitalizations due to intentional self-inflicted injuries.

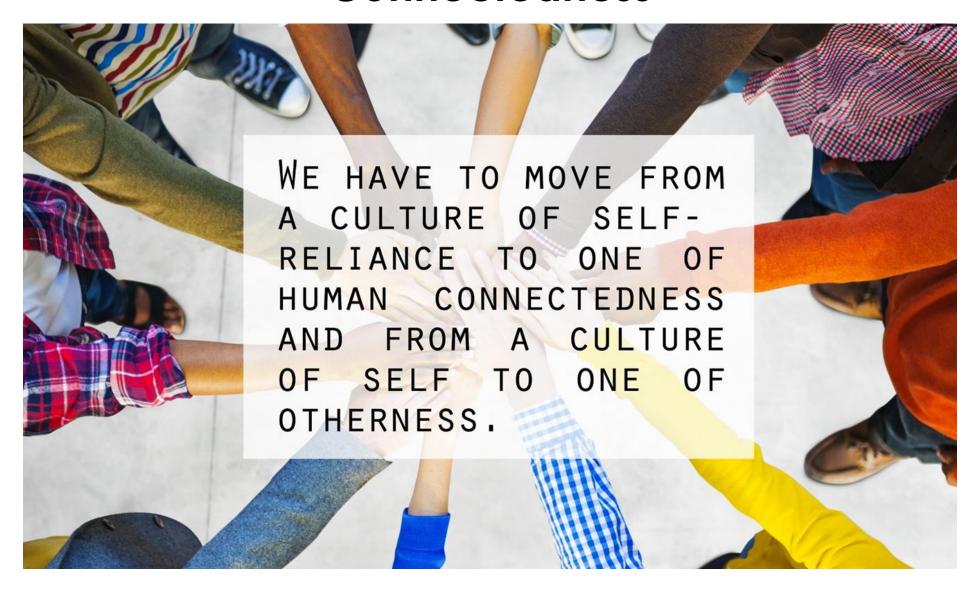
^{* &}quot;Veterans" includes active service members, reserve members, and veterans.

WA Suicide by Method and Sex (201<u>3-2</u>017)



What can CHW's do?

Connectedness



Risk and Protective Factors

Risk Factors

Personal Characteristics

- Membership in a vulnerable group
- Family History

Life Experiences

- ACES
- Loss (ex. job, relationship, etc.)
- Previous suicidal behavior
- Isolation
- Lack of access to care
- Easy access to lethal means

Physical and Mental Health

Personality and Outlook

- Hopelessness
- Impulsivity
- Feeling like a burden

Protective Factors

Individual

- Problem solving skills
- Non-violent conflict resolution

Relationships

- Family and community supports
- Healthy relationships with health care or behavioral health care providers

Community

Access to care

Societal

- Lack of access to lethal means
- Cultural or religious beliefs that discourage suicide

Look at the FACTS

Feelings:

Hopelessness, rage, anger, seeking revenge, anxiety or agitation, feeling trapped, no sense of purpose in life

Changes: Unable or sleeping too much, dramatic mood changes, increasing alcohol or drug use, withdrawing from friends, family or society, behavior or attitude, appearance or hygiene

Actions:

Talking or writing about death, dying, or suicide, especially if this is unusual or related to a crisis or loss, seeking means of suicide, acting reckless or engaging in risky activities.

Threats: Direct: "I am going to kill myself." Indirect: "No one would miss me if I were gone." "You have meant a lot to me – please don't forget me."

Stressors: Loss, trauma, instability, sudden change

Ask About Suicide

- Express your concern in a way appropriate for your relationship.
- Ask open-ended questions.
- Use reflective listening.
- Be calm & directly ask about suicide.

Are you thinking about suicide?

I've noticed _____, and I'm concerned about you because

Sometimes when people are in that situation, they feel suicidal. Are you feeling that way?

Remove the Danger and Get Help

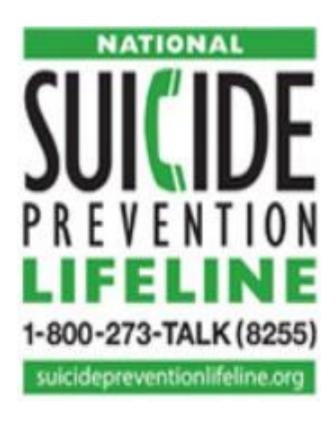
It was very brave of you to tell me. Who else do you think can be helpful right now?

I want to you to stay safe. Is there somewhere you'd prefer to go for help?

I know where we can get some help. I'll come with you/help you call.

Referral examples

- National Suicide Prevention Hotline
 - > 800-273-TALK (8255)
- Crisis Text Line
 - Text "HEAL" to 741741
- Washington 2-1-1
- Washington State Mental Health Crisis Lines by County
 - https://www.dshs.wa.gov/bha/division -behavioral-health-andrecovery/state-mental-health-crisislines



What's WA doing?

Timeline

Year	Action
1995 – 2016	State Youth Suicide Prevention Plan
2012 – 2017	Suicide prevention training for health professionals
2013	Suicide prevention training for school health professionals and school district plans
2015	Higher education task force
2016	State Suicide Prevention Plan Across the Lifespan, Safer Homes Coalition , WA Action Alliance for Suicide Prevention, Extreme Risk Protection Order
2017	Funding to improve WA's National Suicide Prevention Lifeline answer rate, Temporary transfer of firearms
2018	Agricultural industry task force, Drug takeback, Multiagency legislative decision package, Bree Collaborative suicide care report

Why Agricultural Workers?

Stressors for agricultural workers are unpredictable and beyond personal control, which threaten the loss of operations and income. **Examples include:** climate disease outbreaks personal health issues market shifts trade policies substance use stigma

What is House Bill 2671?

- House Bill 2671
 - Create a task force
 - Write a <u>report</u> of findings and recommendations
 - Pilot program



Task Force Findings and Recommendations

- Risk factors:
 - job-related stress; financial burdens; lack of access to services in rural areas; isolation; and cultural stigma.
- Consider diversity of agricultural workers.
- Community members and professionals, including <u>CHW's and Promotoras</u>, need to play key roles.
- Education
- Data and evaluation
- Communication strategies
- Culturally and linguistically appropriate
- Long-term, sustainable funding

Pilot Framework

- 1. Pilot is located in Skagit County and administered by WSU Skagit County Agricultural Extension
- 2. Be made publicly available through a web-based portal.
- 3. Provide a resource to **train** agricultural industry management, workers, and their family members.
- 4. **Build capacity** within the agricultural industry for "train the trainer" to train individuals to deliver training in person.
- 5. Contain model crisis protocols.
- 6. Contain model marketing materials.
- 7. Be available in English and Spanish. (Skagit Extension has additional language translators available.)

Contact Info

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Suicide Prevention Strategies for Working with Men Safer Homes, Suicide Aware

Conducting Suicide Prevention Outreach to a Primarily-Male Audience

Brett L. Bass

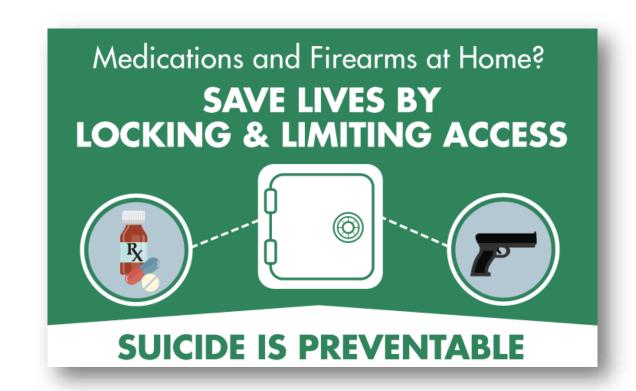
Safer Homes, Suicide Aware Program Coordinator Forefront Suicide Prevention

University of Washington

Community Health Worker Conference
Wenatchee Convention Center, Wenatchee WA
11 April 2019

What is Safer Homes, Suicide Aware?

- 1. A public awareness campaign that educates people on immediate action steps using a guided conversation
- 2. Customized suicide prevention training for specific audiences (usually enthusiasts or professionals providing access to firearms or medications):
 - Community-based settings where men in the middle years can be reached
 - With multiple partners, distributing messaging, collateral materials & locking devices



Safer Homes Task Force Partnerships









































Safer Homes Conversation

Signpost to get attention, ask permission

Assess storage practices, ask questions

Fact(s) about suicide

Expect and listen to emotion



Recommend based on individual's circumstances

Safer Homes Participant Locations & Data

Gun shows:

- Significant overlap with high-risk populations
- 74% male
- Disproportionate veteran status (25% of SH participants vs. ~9% of the Washington state population)
- Age range largely overlaps with most atrisk population (35-64 males with firearms)
- Generalization: High correlation with those most ask risk of suicide



Target Audience

- ~70% of suicide deaths are white males in the middle years (35-64)
- ~48% of suicide deaths are as a result of self-inflicted gunshot
- Most suicide attempts are with medication overdose/poisoning
- Suicide rates are elevated in highstress/insular professions (first responders, members of the armed forces, lawyers, doctors, dentists, etc.)



Key Outreach Components

Engage with people where they are; cultural competence is of key importance

Employ messengers within the community who are known & trusted members of it

Offer tangible services (such as free locking equipment) at the time of the intervention

Cultivate partnerships where there is common ground; avoid polarization

Obstacles with Audience

- Skepticism about program
- Lack of belief that suicide can be prevented
- Fear of contact information being misused
- Inaccurate beliefs about suicide
- Belief that organization is anti-gun
- Fear of personal information abuse/HIPPA violations resulting in loss of firearms rights





Outreach Techniques

- Explain intent of the program
- Review privacy statement/document
- Stay on-message; avoid contentious topics
- Understand the raw data & share a few (no more than two or three) points with someone
- Stress culture of safety; suicide prevention is just one more safety rule
- Be authentic

"We're nonpartisan; let me tell you about the program..."



Campaign Resources

- Website: SaferHomesCoalition.org
- Facebook page: <u>facebook.com/saferhomeswa</u>
- Postcards, stickers, posters



Contact Information & Resources

Forefront Suicide Prevention
UW School of Social Work
4101 15th Avenue NE, Box 354900
Seattle, WA 98195-4900

- intheforefront.org
- facebook.com/intheforefront/
- <u>twitter.com/intheforefront</u>

- Quarterly Safer Homes Task Force meetings (usually at Seattle UWPD headquarters)
- LEARN trainings available
- At least one gun show or community event per month
 - 12-13 January: Chehalis
 - 11 February: Olympia
 - 2-3 March: Moses Lake
 - 27-28 April: Omak

Questions or Comments?



In Summary

- Suicide is preventable!
- Everyone can play a role in suicide prevention.
- Look at the FACTS, Ask about suicide, Remove the danger, and Get help.
- There are a lot **resources** available.
- Do some self-care today!

DOH Resources

- DOH Suicide Prevention Pages
 - WA State Suicide Prevention Plan
 - WA suicide data and reports
 - o Join the DOH Suicide Prevention Listserv
- Recent reports
 - Annual firearm fatality and suicide prevention report (March 2019)
 - Improving Behavioral Health & Suicide Prevention in the Agricultural Industry: Task Force Findings & Recommendations (Dec. 2018)
 - o Suicide & Safe Storage of Firearms fact sheet (Mar. 2018)

Other Resources

- Suicide Prevention Resource Center
- National Action Alliance for Suicide Prevention
- American Foundation for Suicide Prevention (AFSP)
- SAMHSA's Suicide Prevention page
- Zero Suicide model for health systems

Guidelines & Toolkits

- CDC's Suicide Prevention Technical Package
- <u>Transforming Communities: Key Elements for the Implementation of Comprehensive Community-Based Suicide Prevention</u>
- After a Suicide: A Toolkit for Schools (2nd edition)
- Recommendations for Reporting on Suicide
- Safety Plan Guide

