

Suicide Prevention — San Juan County

*Presented 12-03-2020 by
Natalie Lowe, Injury Epidemiologist and
Jacalyn Dougherty, Suicide Prevention Coordinator*

**Suicide Prevention Program, Office of Injury Prevention
Injury & Behavioral Epidemiology Bureau, Epidemiology and Response Division**

Topic Overview: Suicide as a Public Health Issue

- ❖ Introductions & Caveat
- ❖ Definitions & Language Use to Reduce Stigma
- ❖ Common Data Terminology & Abbreviations
- ❖ Data on Suicide and Suicide-related Behaviors for San Juan County, NM, and U.S.
- ❖ NMDOH Suicide Prevention Program: Public Health Activities and Resources





How Do You Know When You're Not OK?

For most people, suicide is not an easy topic to discuss.

Health care providers and professionals often experience compassion fatigue and may become more susceptible to the impact of suicide.

Please monitor yourself and seek out help when needed.

Dial: **855-662-7474** NM Crisis & Access Line
505-277-3013 Agora Crisis Center (at UNM)

Save your work EAP phone # in your cell for easy access.



Definitions

- **Suicide:** Death caused by self-directed injurious behavior with an intent to die as a result of the behavior.
- **Suicide attempt:** Non-fatal, self-directed, potentially injurious behavior with an intent to die as a result of the behavior; might not result in injury.
- **Suicidal ideation:** Thinking about, considering, or planning suicide.
- **Suicide-related behaviors:** Thoughts and activities that may contribute or lead to suicide.

Source: <https://www.cdc.gov/violenceprevention/suicide/definitions.html>



Language is Important in Helping to Reduce Stigma About Mental Health Challenges & Suicide

- *Stigma* is an issue in getting people to *talk* about suicide and in encouraging *help-seeking*
- Language matters!
 - Use “died by...” vs. “committed ...”
 - Encourage person-centered, gender-identity-congruent language
 - “*Person with x...*” rather than labeling individual as his/her disease or condition
 - Use “He *has* depression” vs. “He *is* a depressive.”
 - Use “She *has* diabetes” vs. “She *is* a diabetic.”
- Lived experience - attempt survivor, suicide loss survivor



Common Data Terminology & Abbreviations

Abbreviation examples:

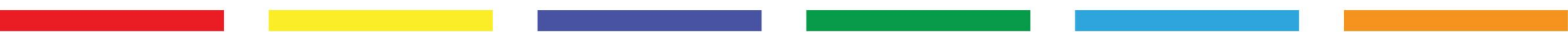
NW = Northwest health region as designated by the Department of Health

NM = Statewide rate for New Mexico

US = National rate for United States

Terms:

Age-adjustment = Statistical process applied to rates of disease, death, injuries or other health outcomes which allows communities with different age structures to be compared (www.health.ny.gov)



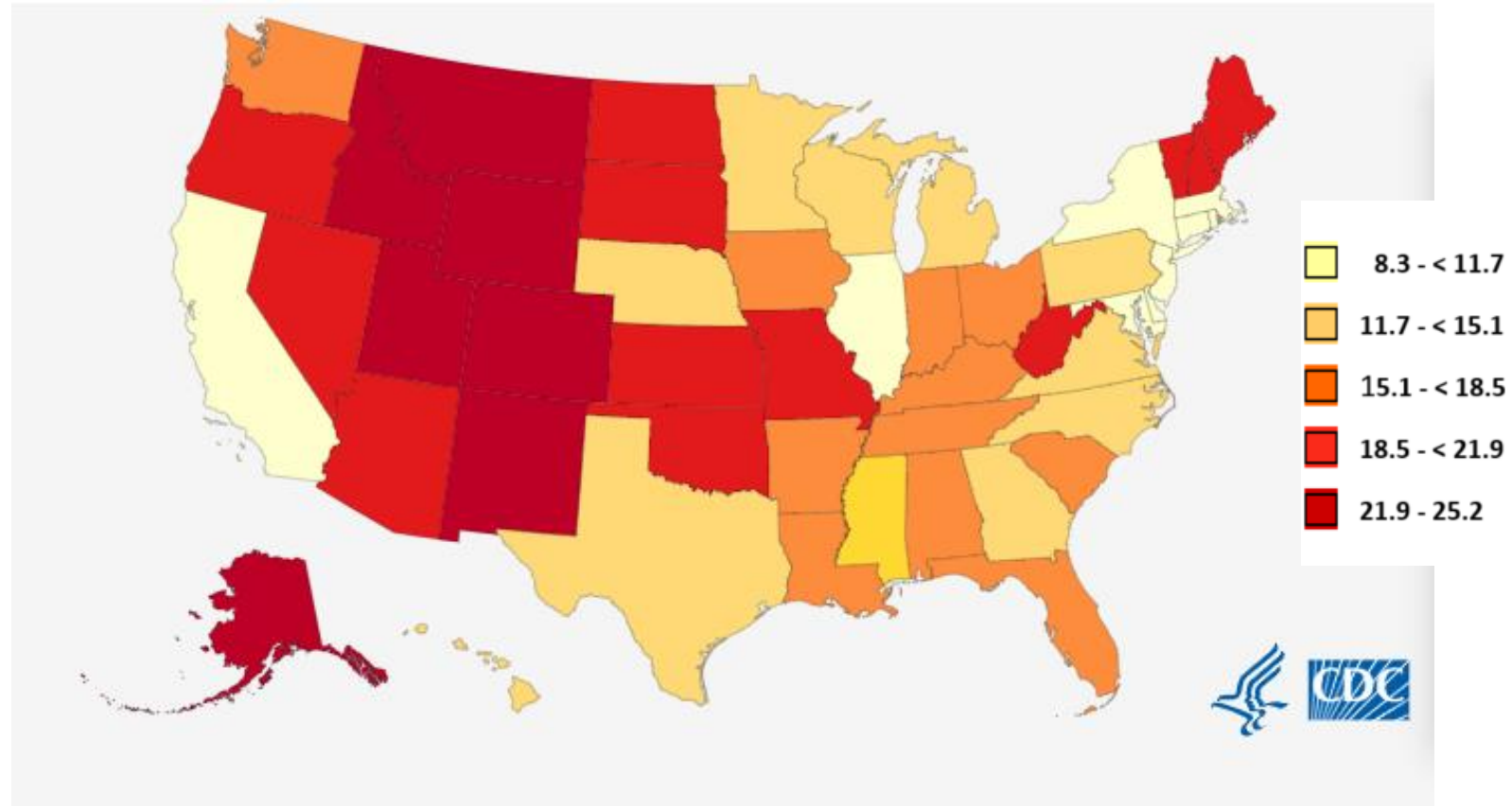
Age-Adjusted Suicide Rates by State: 2018

The age-adjusted suicide rate in NM was

25 per 100,000 population

NM: 2nd in the US

(Note:
The darkest color represents the highest age-adjusted suicide rates)



Source: Centers for Disease Control. Suicide Mortality by State. Accessed from <https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm>. Retrieved November 12, 2020.

Data Sources Overview for Suicide and Mental Health

CDC WONDER,

Death by Intentional Self-Injury (**Suicide**)

New Mexico Vital Records and Health Statistics (NMVRHS)

Death by Intentional Self-injury (**Suicide**)

National Violent Death Reporting System (NVDRS)

Percent of Suicides with a Prior History of Selected Risk Factors

Behavioral Risk Factor Surveillance System (BRFSS)

Self-reported **Mental Distress**

Youth Risk and Resiliency Survey (YRRS)

Non-suicidal Self-injury

Feeling Sad or Hopeless

Considered Suicide

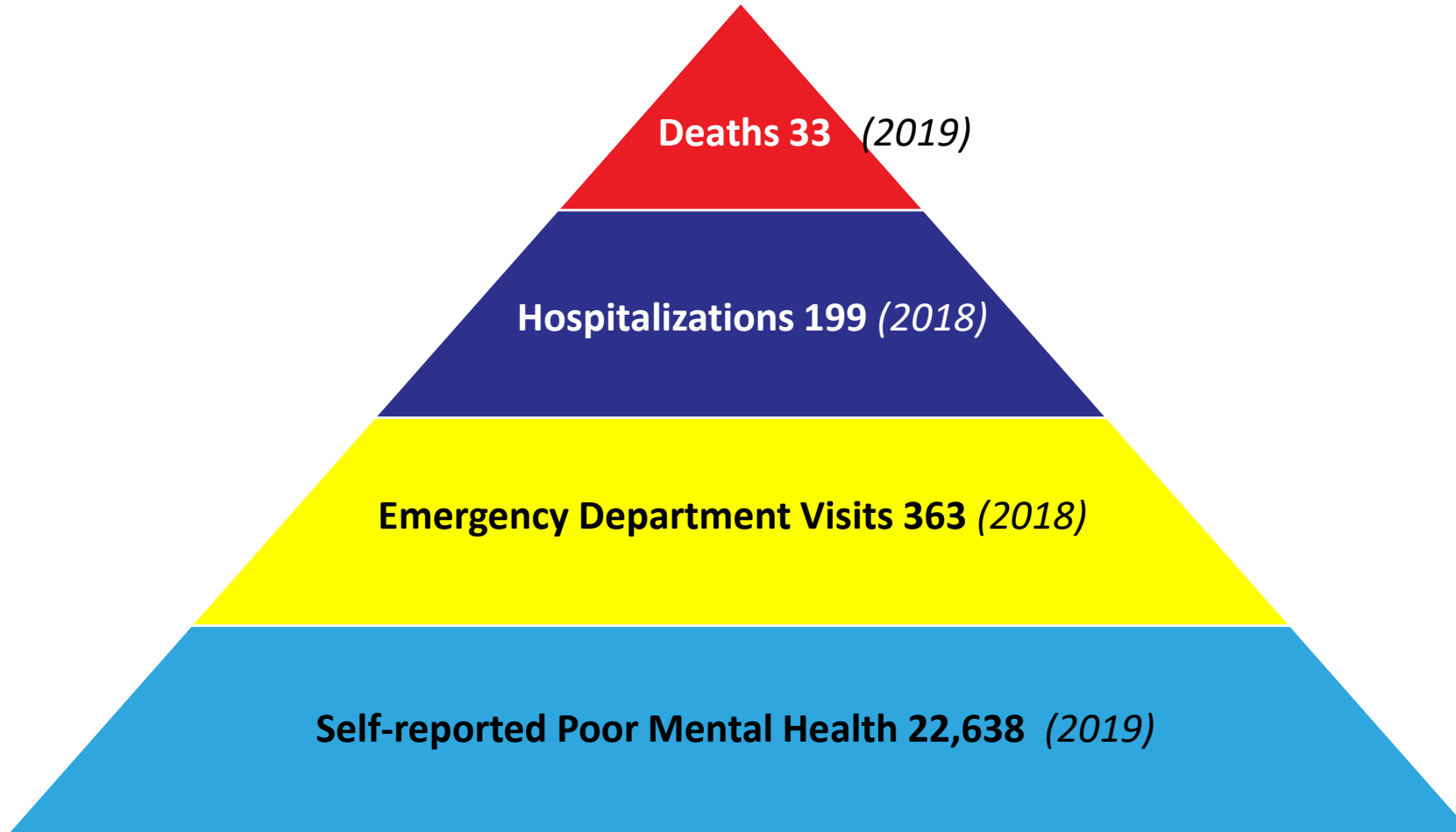
Made a Suicide Plan

Made a Suicide Attempt

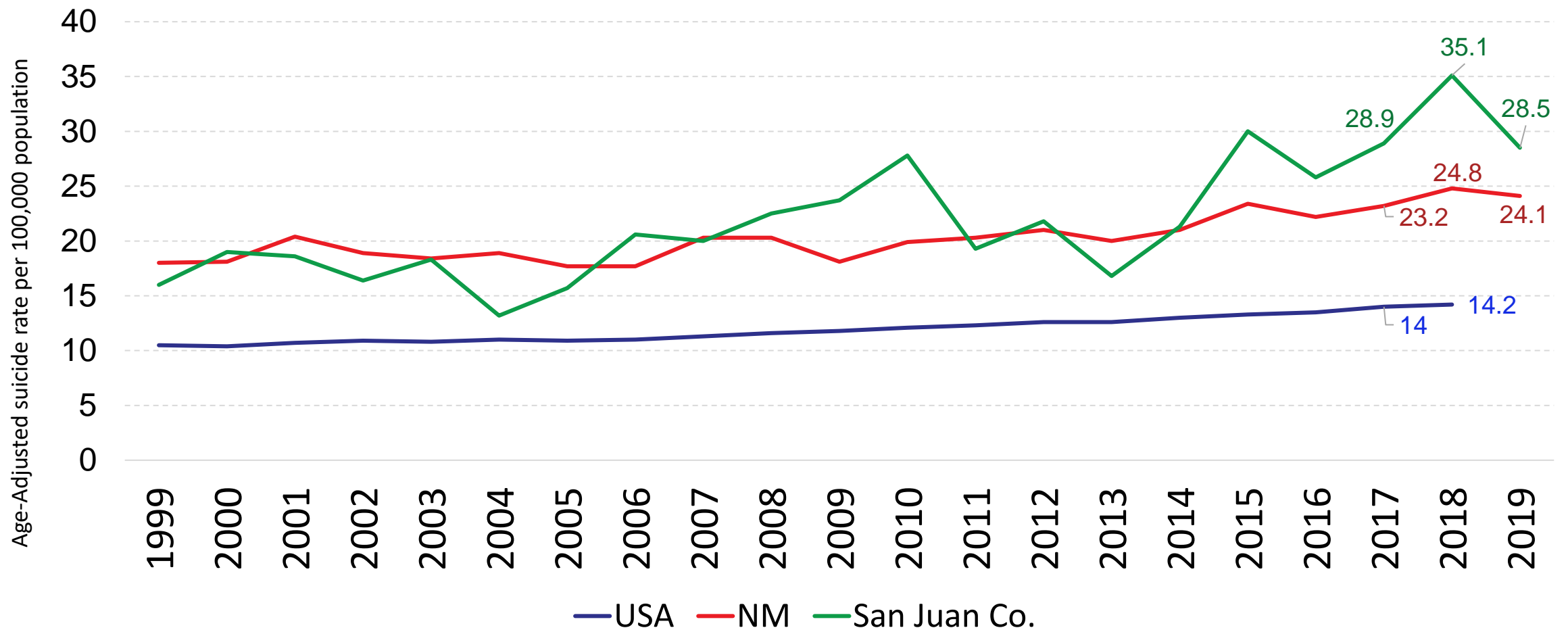
Injured in Suicide Attempt



Estimated Burden of Mental Health and Suicide in San Juan County

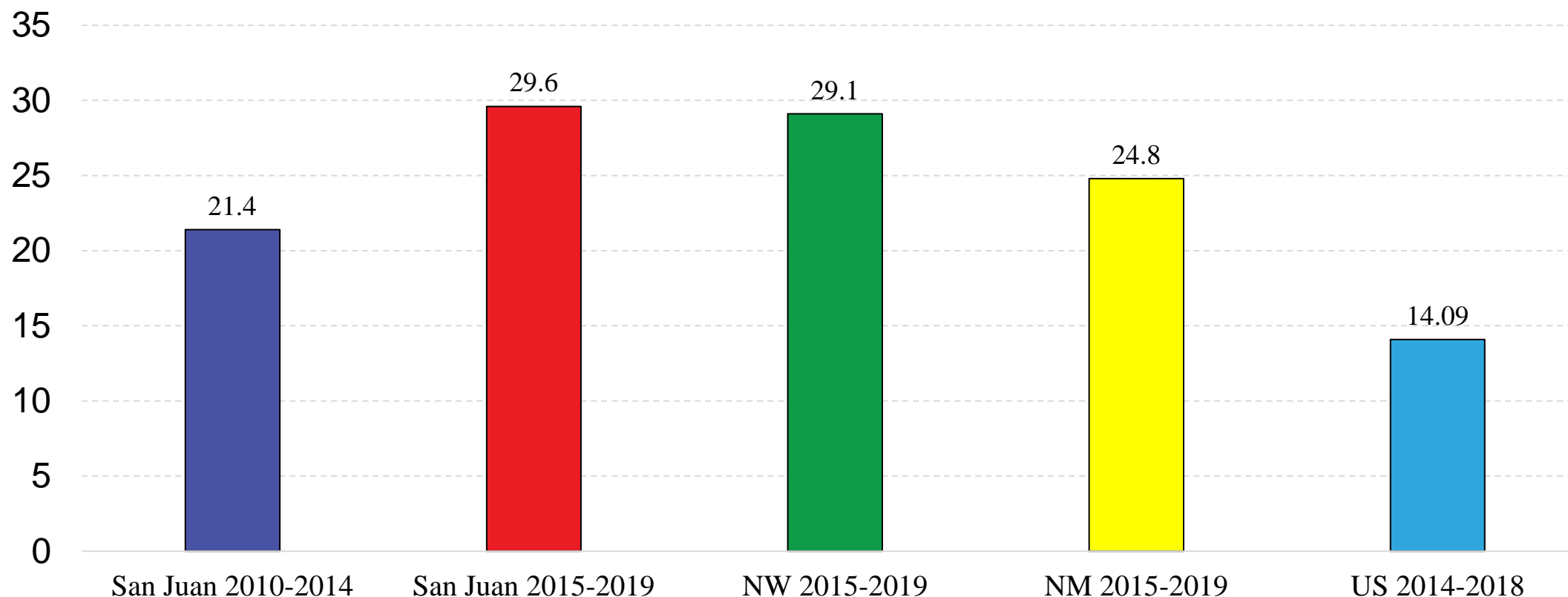


Age-Adjusted Suicide Rate Per 100,000 Population



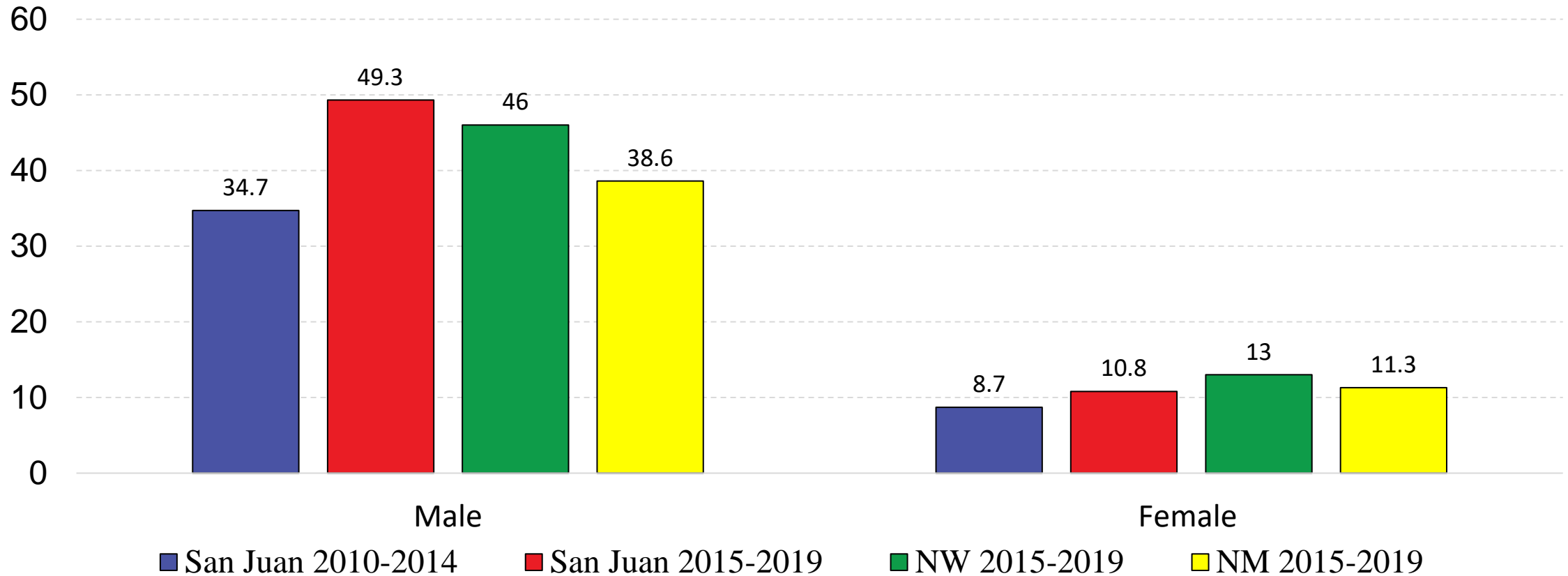
Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

Age-Adjusted Suicide Rate per 100,000 Population



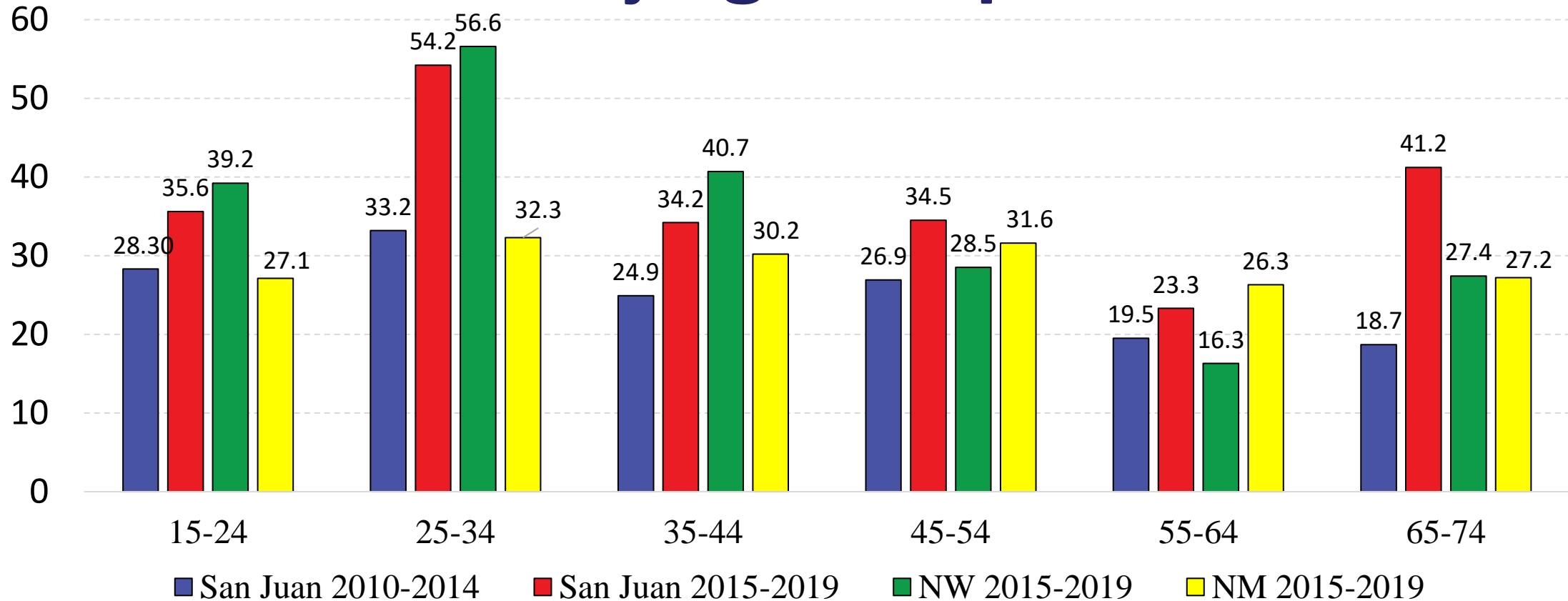
Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

Age-Adjusted Suicide Rate Per 100,000 Population by Sex



Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

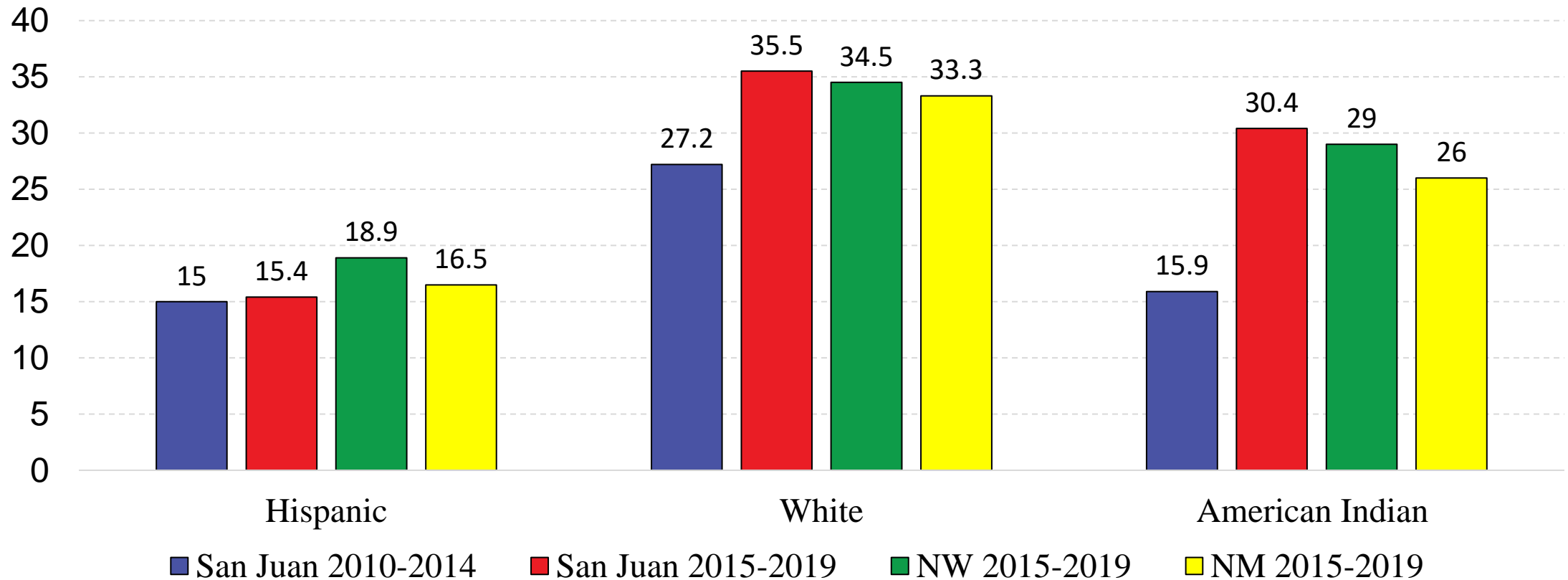
Crude Suicide Rate Per 100,000 Population by Age Group



Note:* age groups under 15 and over 75 years of age had less than 20 cases and therefore the rates were too unstable to display.

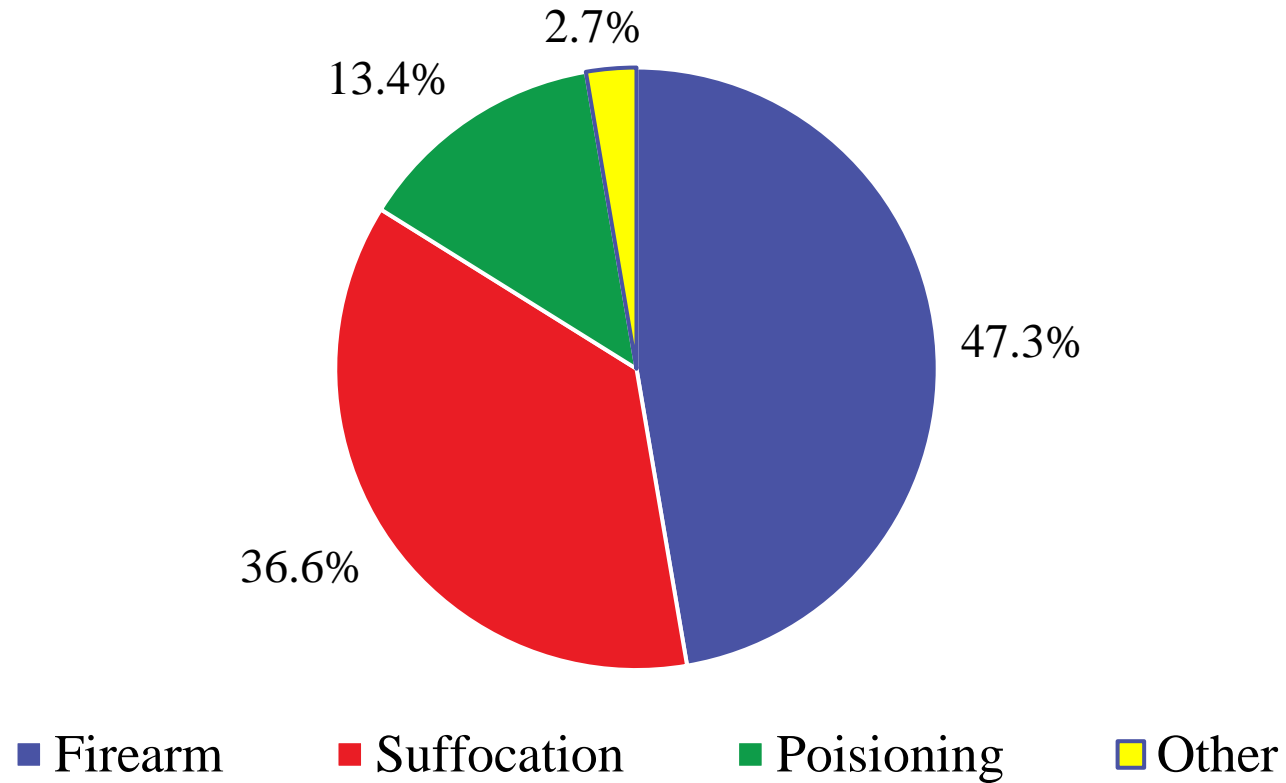
Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

Age-Adjusted Suicide Rate per 100,000 Population by Race and Ethnicity



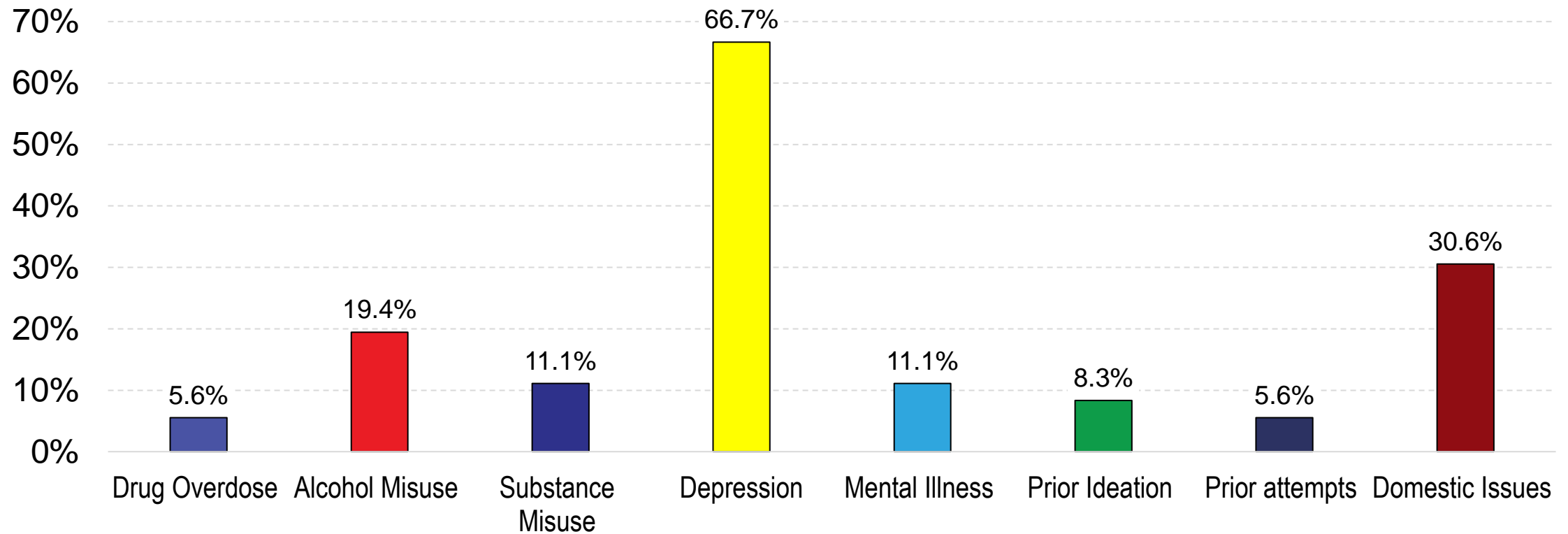
Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

San Juan County Suicide by Mechanism: 2015-2019



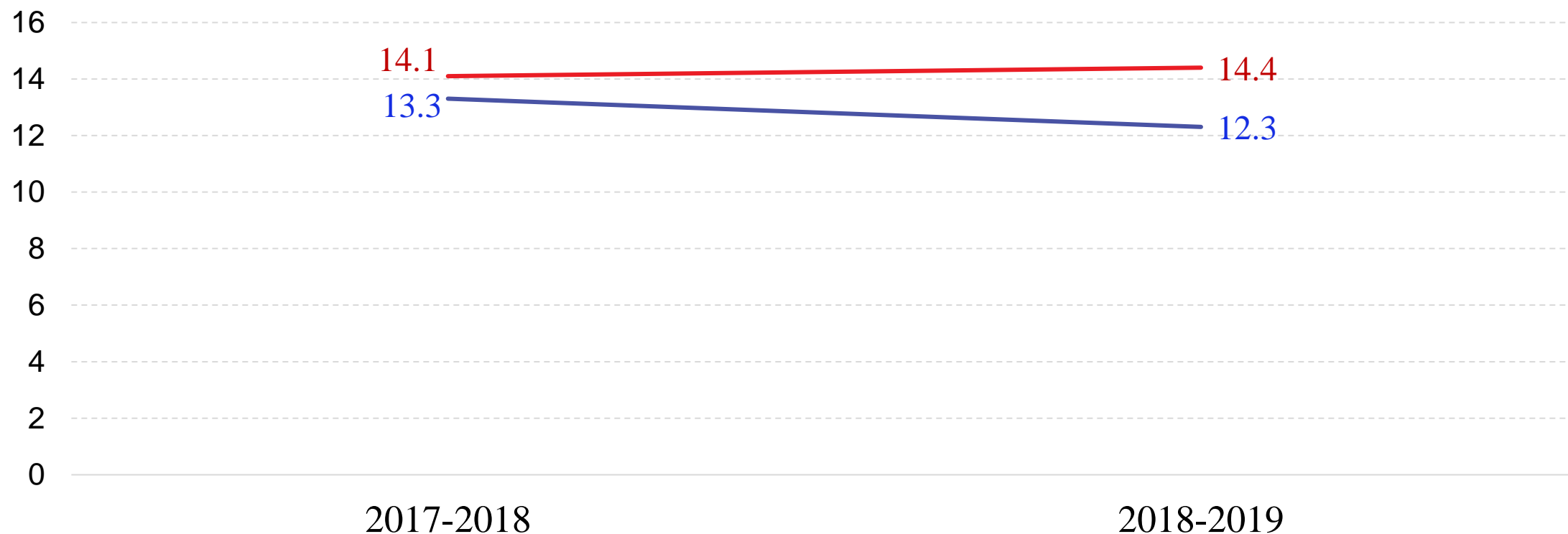
Source: New Mexico Death Certificate Database, Office of Vital Records and Health Statistics, New Mexico Department of Health. Retrieved on November 20, 2020 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>.

Percent of Suicides with Prior History of Selected Risk Factors, San Juan County: 2018



Source: New Mexico Department of Health. Injury and Behavior Epidemiology Bureau. National Violent Death Reporting System. Suicide Custom Query. 2018; Accessed November 21, 2020. <https://www.cdc.gov/violenceprevention/datasources/nvdrs/index.html>

Percent of Adults Who Self-Reported Experiencing At Least 14 Days of Mental Distress Within the Past 30 days

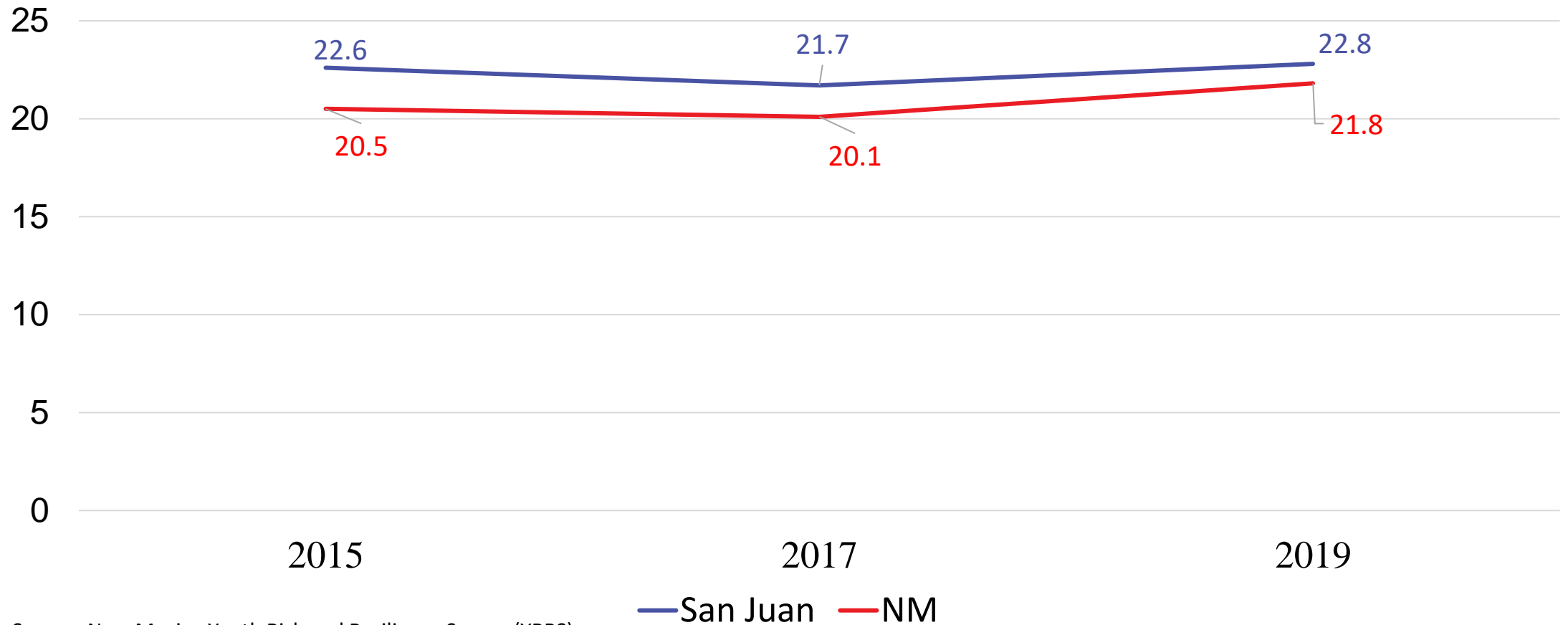


Source: Behavior Risk Factor Surveillance System (BRFSS)

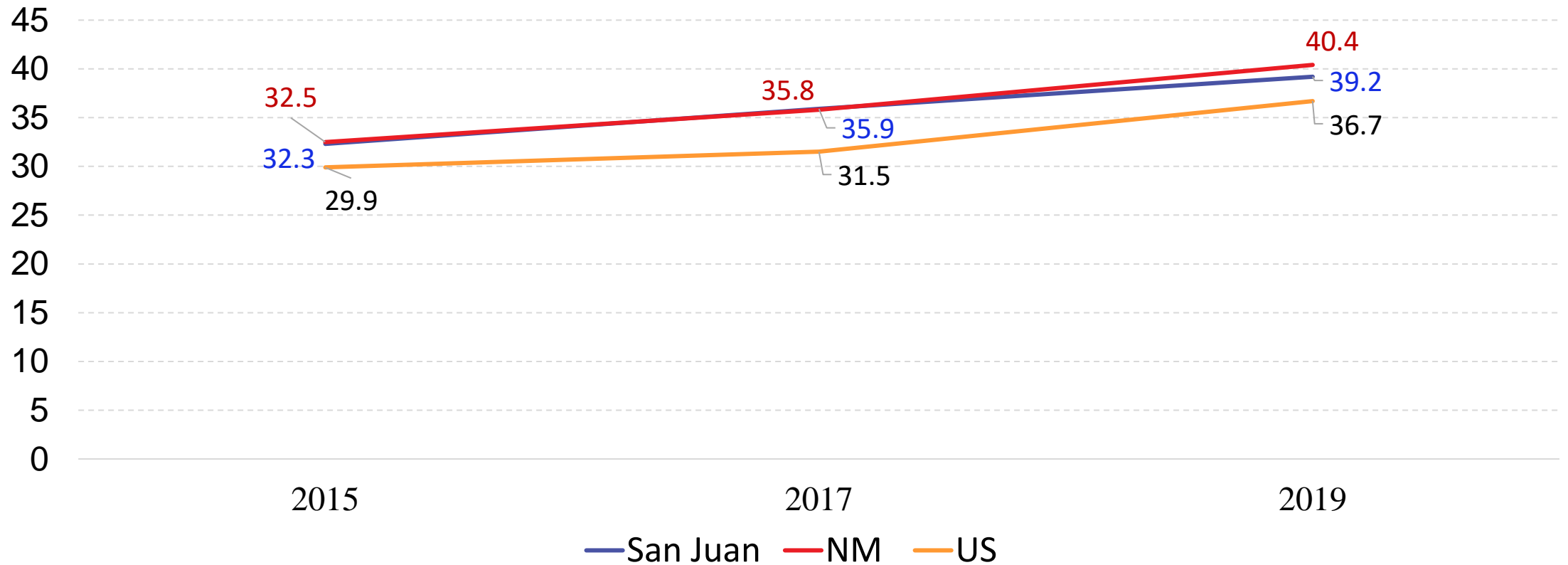
— San Juan

— New Mexico

Percent of Public High School Students Who Self-Reported a Non-Suicidal Self Injury Within the Past Year

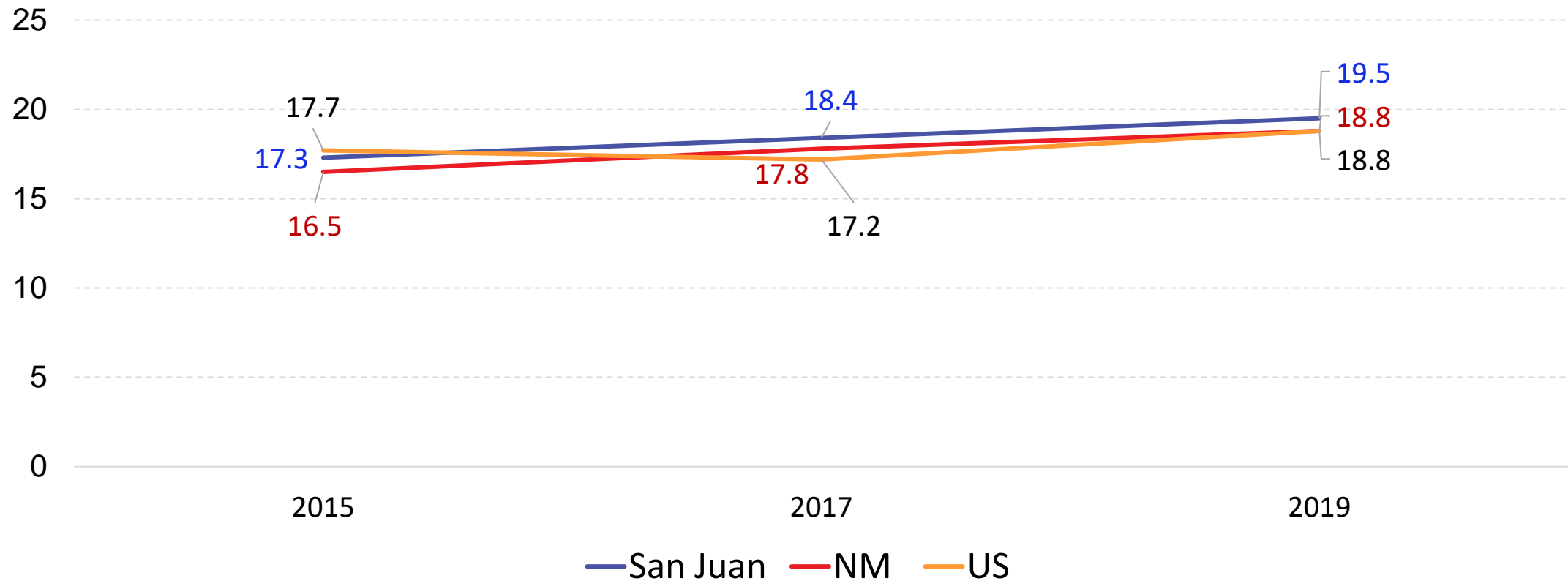


Percent of Public High School Students Who Self-Reported Feeling Sad or Hopeless for at least 2 Weeks Within the Past Year



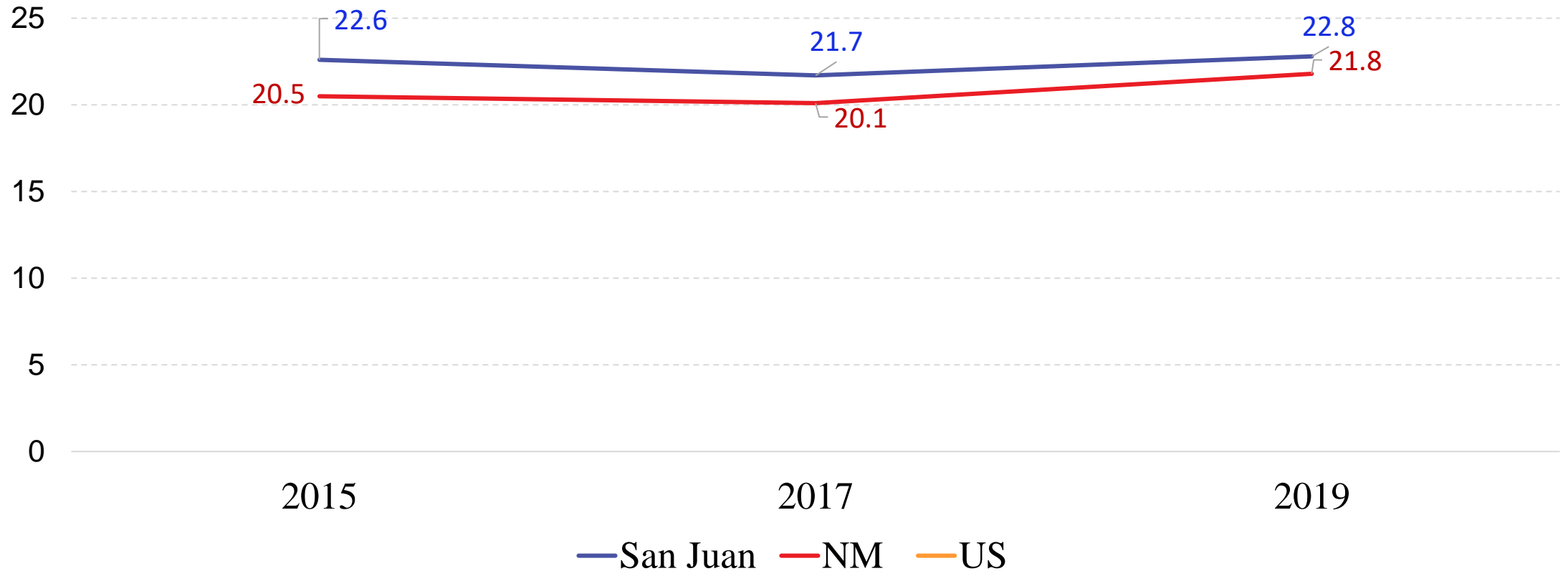
Source: New Mexico Youth Risk and Resiliency Survey (YRRS)

Percent of Public High School Students Who Self-Reported That They Seriously Considered Suicide Within the Past Year



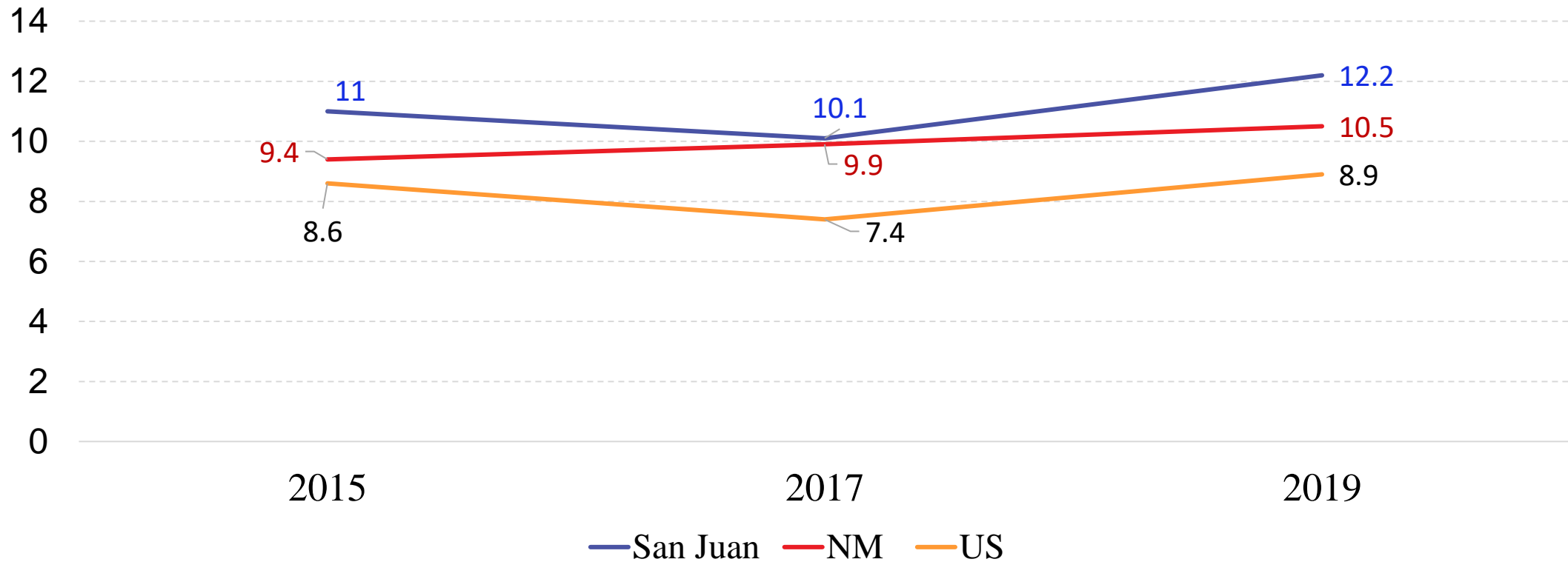
Source: New Mexico Youth Risk and Resiliency Survey (YRRS)

Percent of Public High School Students Who Self-Reported That They Made A Suicide Plan Within the Past Year



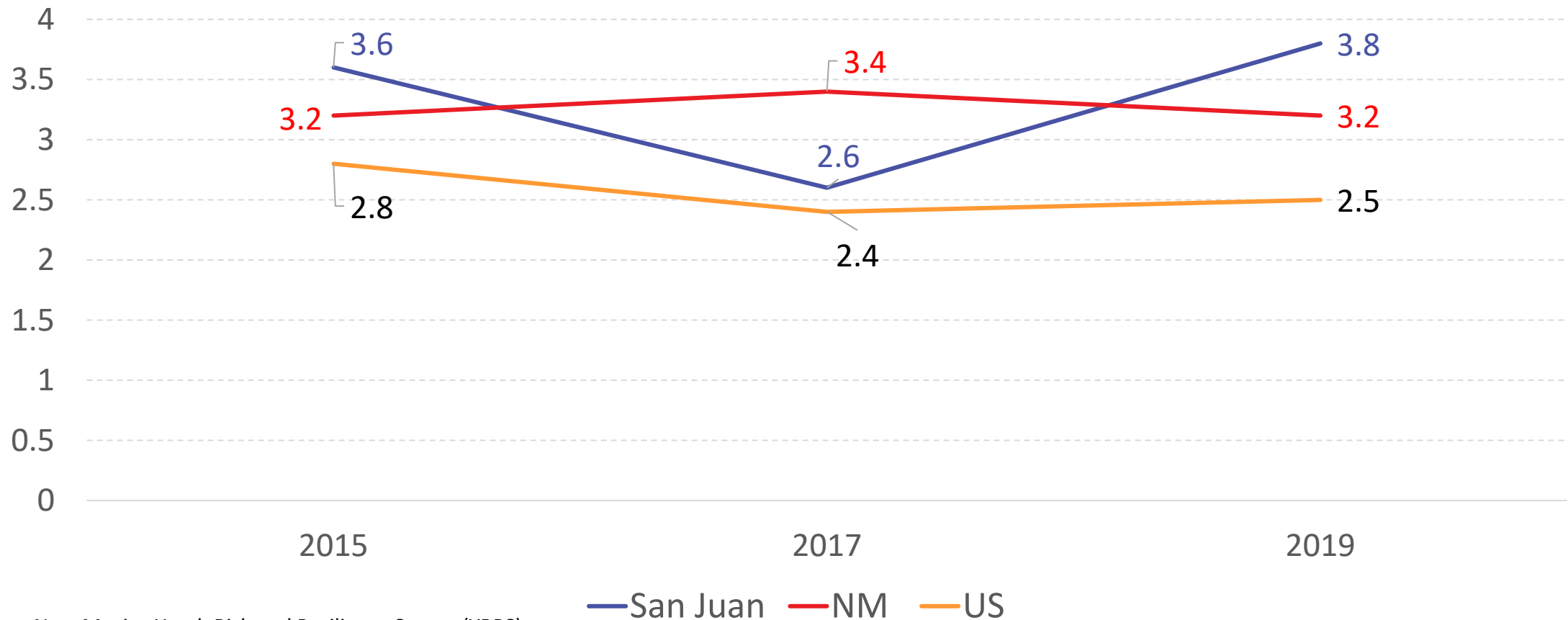
Source: New Mexico Youth Risk and Resiliency Survey (YRRS)

Percent of Public High School Students Who Self-Reported That They Attempted Suicide Within the Past Year

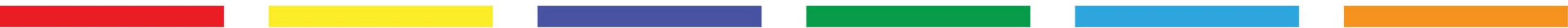


Source: New Mexico Youth Risk and Resiliency Survey (YRRS)

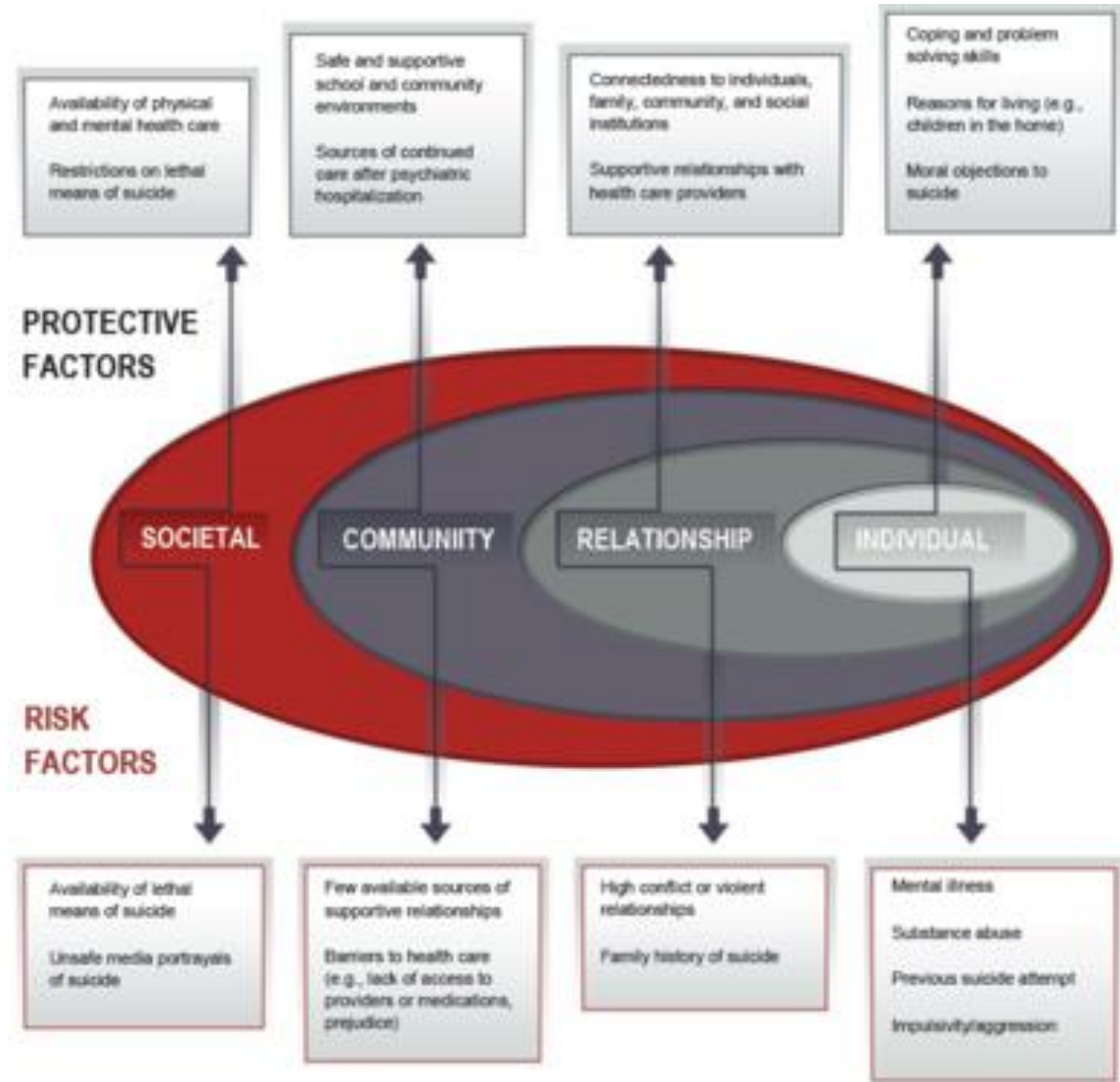
Percent of Public High School Students Who Self-Reported that an Injury Due to a Suicide Attempt Within the Past Year



Source: New Mexico Youth Risk and Resiliency Survey (YRRS)



Social-Ecological Model for looking at Suicide Risk and Protective Factors



Some Risk Factors for Suicide



- Family history of suicide, or child maltreatment
- Previous suicide attempt(s)
- History of mental disorders or alcohol and substance abuse
- Feelings of hopelessness
- Impulsive or aggressive tendencies
- Isolation, a feeling of being cut off from other people
- Barriers to accessing mental health treatment
- Loss (relational, social, work, or financial)
- Physical illness
- Easy access to lethal methods
- Unwillingness to seek help

Source: CDC Suicide. Risk and Protective Factors. [Suicide Risk and Protective Factors](#) | [Suicide](#) | [Violence Prevention](#) | [Injury Center](#) | [CDC](#)

Some Protective Factors for Suicide



- Effective clinical care for mental, physical, and substance abuse disorders
- Easy access to a variety of clinical interventions and support for help seeking
- Family and community support (connectedness)
- Support from ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution, and nonviolent ways of handling disputes
- Cultural and religious beliefs that discourage suicide and support instincts for self-preservation

Source: CDC Suicide. Risk and Protective Factors. [Suicide Risk and Protective Factors](#) | [Suicide](#) | [Violence Prevention](#) | [Injury Center](#) | [CDC](#)

Suicide Prevention Program: **Public Health Activities (1/3)**

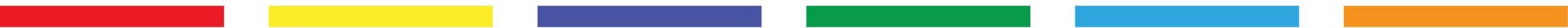
- Monitor and track suicide and associated mental health trends, research risk and protective factors, evaluate interventions, and determine how to best implement effective interventions.
- Disseminate data on suicide and suicide prevention to the public and to prevention partners.
- Raise awareness of suicide as a public health issue that can be addressed using a public health approach.
- Bring together people from various sectors (e.g., health, media, business, criminal justice, behavioral science, epidemiology, social science, advocacy and education) via the NM Suicide Prevention Coalition.



Suicide Prevention Program:

Public Health Activities (2/3)

- Develop, monitor, and work to implement, a statewide suicide prevention strategic plan in conjunction with the NM Suicide Prevention Coalition.
- Promote effective ways to prevent suicide, including a strategy in which people leaving hospital EDs due to a possible or likely suicide attempt are followed up on to ensure that they receive appropriate care.
- Reduce access to lethal means by providing for distribution of gun locks around the state, partnering with a non-profit organization.
- Promote effective ways to prevent suicide among youth, including peer-based approaches in which youth gatekeepers seek assistance for peers who may have increased risk for suicide.



Suicide Prevention Program: **Public Health Activities (3/3)**

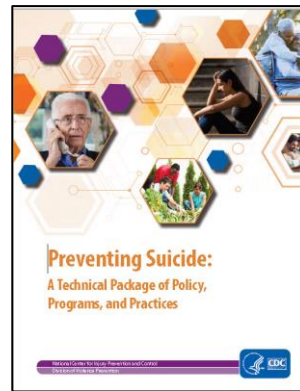
- Train youth and adults in evidence-based suicide prevention programs including gatekeeper training and mental health first aid.
- Promote efforts to reduce stigma about mental health and suicidal ideation and intent.
- Investigate and respond to possible and actual suicide clusters.



Raise Awareness & Bring People Together

Raise awareness of suicide as a public health issue

- Community-based prevention presentations
- Topic presentations
- Responses to requests for information, data, resources



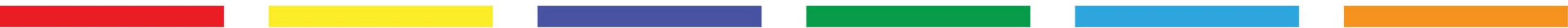
Facilitate communication with people from various sectors via the *NM Suicide Prevention Coalition*:

- Health care representatives
- Epidemiologists
- Media personnel, faith leaders
- Business, workforce leaders
- Behavioral scientists
- Prevention advocates, attempt survivors

Statewide Suicide Prevention Strategic Planning

Strategic Planning with the New Mexico Suicide Prevention Coalition

- Input gathered statewide about needs and resources
- Quarterly meetings related to Strategic Goals for Suicide Prevention to identify local, regional, and state actions to address suicide



Promote Effective Ways to Address Suicide

Secondary Prevention of Suicide

Program to prevent suicide re-attempts in individuals coming to the Emergency Department with suicide attempts

- Includes:
 - Reducing stigma and promoting help-seeking
 - Individualized Safety Planning
 - Referral for behavioral health follow-up care
 - Caring contacts
 - Program evaluation

Patient Safety Plan Template	
Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:	
1.	
2.	
3.	
Step 2: Internal coping strategies – things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):	
1.	
2.	
3.	
Step 3: People and social settings that provide distraction:	
1. Name:	Phone:
2. Name:	Phone:
3. Place:	Place:
Step 4: People whom I can ask for help:	
1. Name:	Phone:
2. Name:	Phone:
3. Name:	Phone:
Step 5: Professionals or agencies I can contact during a crisis:	
1. Clinician Name:	Phone:
Clinician Pager or Emergency Contact #	
2. Clinician Name:	Phone:
Clinician Pager or Emergency Contact #	
3. Local Urgent Care Services:	
Urgent Care Services Address:	
Urgent Care Services Phone:	
4. Suicide Prevention Lifeline Phone:	1-800-273-TALK (8255)
Step 6: Making the environment safe:	
1.	
2.	
<small>Safety Plan Template ©2008 Barbara Stanley and Gregory B. Brown. It is provided with the express permission of the authors. No portion of the Safety Plan Template may be reproduced without their written, express permission. You can contact the authors at 800-273-TALK with any questions or comments.</small>	
The one thing that is most important to me and worth living for is:	

Reduce Access to Lethal Means

- **Gun lock distribution in partnership with non-profit organization**
- **Education of providers about *Counseling on Access to Lethal Means* training**
- Simple steps to increase a suicidal person's safety --reduce access to firearms at home and store medications safely.
- Many counselors and providers and family members of at-risk people don't think to do this.
- These temporary safety interventions are not anti-gun or designed to limit freedom, but to save lives.



Make a Difference with Firearms, **the Most Lethal Means of Suicide in NM**

Family and friends can help to protect a suicidal person by temporarily storing all firearms away from home.

Have a trusted person outside the home store firearms until the situation improves.

Some storage facilities, police departments, gun clubs, & gun shops will store guns.

Off-site storage not an option?

Lock the guns at home with new locks or combinations.

Don't assume that firearms in glove boxes or vehicle tool chests are off-limits.

Keep ammunition out of the home or locked separately.

Store unloaded!

Remove a key component of the guns.



Prevent Suicide Among Youth

Train youth and adults in evidence-based suicide gatekeeper programs

- Culturally-sensitive programs
- Peer-based approaches
- Gatekeeper Trainings:
 - *Question, Persuade, Refer* Gatekeeper Trainings (for individuals and organizations)
 - Applied Suicide Intervention Skills Training (ASIST)
 - Youth Mental Health First Aid
- Other
 - Counseling on Access to Lethal Means
 - Honoring Native Life



Promote Efforts to Reduce Stigma About Mental Health Challenges & Suicide



- Use Responsible Reporting Guidelines
- Include Crisis Numbers-
Where to get help
- Educate About Facts of
Suicide and Prevention



Investigate and Respond to Possible and Actual Suicide Clusters

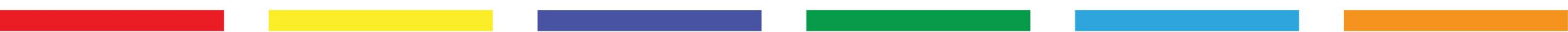
- Collaborate with Law Enforcement, Office of Medical Examiner, and Bureau of Vital Records and Health Statistics
- Frequent monitoring of data
- Coalition to focus on establishing enhanced notification processes



Resource for Counseling on Access to Lethal Means

Counseling on limiting access to lethal means training:

- On-line
- Takes about 1-2 hours to complete
- Imperative to reduce suicide
- Current cost ?
- Recently transitioned over to ZeroSuicide
- Recent additional version – CALM - ED



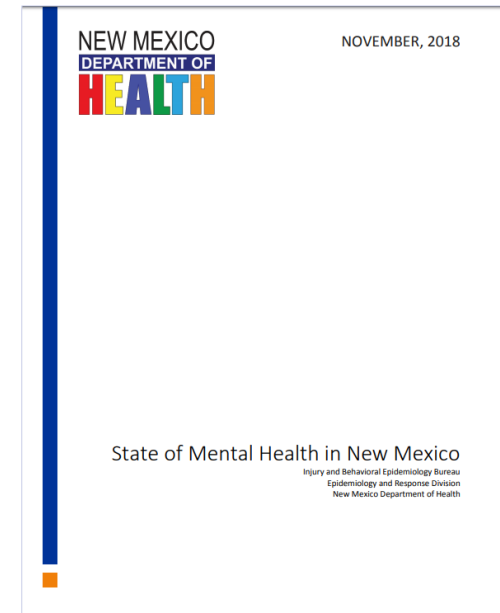
Resource for Data Monitoring and Dissemination

Data Monitoring and Surveillance



<https://ibis.health.state.nm.us>

Data Dissemination




<https://nmhealth.org/data/view/general/2193/>


Gatekeeper Resources



*Question, Persuade,
Refer* Gatekeeper
Trainings (for
individuals and
organizations)

Youth Mental Health First Aid

 **Suicide Prevention Resource Center**
About Suicide Effective Prevention Resources & Programs Training & Events News & Highlights Organizations

 **8 2 5 5
1 (800) 273 TALK**

**Applied Suicide Intervention Skills Training
(ASIST)**
Date: 2007
(For resources, this is the publication date. For programs, this is the date posted.)

Other Resources: Suicide Prevention Resource Guide

Suicide Awareness & Prevention Resource Guide

Note: These resources are intended to inform stakeholders and community members of potential resources. Inclusion does not necessarily imply endorsement by the Department of Health.



Community- and National-level Strategic Planning for Suicide Prevention:



Preventing Suicide: A Technical Package of Policy, Programs, and Practices was published by the Centers for Disease Control in 2017 and outlines six evidence-based strategies for approaching suicide prevention at the community and state level. This technical package supports the goals and objectives of the 2012 *National Strategy for Suicide Prevention* and focuses on evidence-based approaches. <https://www.cdc.gov/violenceprevention/pdf/suicideTechnicalPackage.pdf>

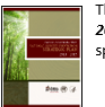


The **2012 Revised National Strategy for Suicide Prevention** emphasizes the role individuals can play in helping friends, family members, and colleagues to not die by suicide. Gives guidance for schools, businesses, health systems, clinicians, and other sectors while considering newer research and advancements in the field since the previous document was published. https://www.ncbi.nlm.nih.gov/books/NBK109917/pdf/Bookshelf_NBK109917.pdf



Transforming Communities: Key Elements for Comprehensive Community-Based Suicide Prevention presents seven key elements for comprehensive community-based suicide prevention, identified via a review of relevant programs, guidance, and models. The elements are key considerations that should guide community-based suicide prevention efforts and aim to help communities create policies, programs, and services that reduce suicide and improve individual, family, and community health.

<http://actionallianceforsuicideprevention.org/sites/actionallianceforsuicideprevention.org/files/TransformingCommunitiesPaper.pdf>
<https://theactionalliance.org/resource/transforming-communities-key-elements-implementation-comprehensive-community-based-suicide>



The **American Indian/Alaska Native National Suicide Prevention Strategic Plan 2011 - 2015** provides information about the U.S. Indian Health Service mission and six goals with specified objectives to address suicide in American Indian/Alaska Native populations.

https://www.ihs.gov/suicideprevention/includes/themes/responsive2017/display_objects/documents/AIANNationalSPStrategicPlan.pdf



National Advisory Committee on Rural Health and Human Services is a 21-page policy brief published in late 2017 by the Health Resources and Services Administration National Advisory Committee on Rural Health and Human Services. This resource addresses the impact of suicide in rural areas and state- and federal-level prevention strategies. <https://www.hrsa.gov/sites/default/files/hrsa/advisory->

Suicide Awareness & Prevention Resource Guide

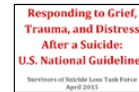


The **Suicide Prevention Infrastructure Recommendations** document was developed under the direction of the Suicide Prevention Resource Center (SPRC) based on findings from a literature review and public and private sector expert panel member opinions. The document is designed for state leaders and organized into six categories: Authorize, Lead, Partner, Examine, Build, and Guide. <http://www.sprc.org/sites/default/files/SPRC-State%20Infrastructure-Full%20Recommendations.pdf> Also, see accompanying 1-page summary. <http://www.sprc.org/sites/default/files/SPRC-State%20Infrastructure-Summary.pdf>



The **World Health Organization's National Suicide Prevention Strategies: Programs, Examples and Indicators** provides a worldwide perspective about suicide, including resources and data sheets.

<http://www.who.int/topics/suicide/en/>



The **Responding to Grief, Trauma, and Distress After a Suicide**, national guidelines are presented in a 67-page document developed by the National Action Alliance for Suicide Prevention: Survivors of Suicide Loss Task Force. This document was developed to call to create and sustain necessary resources, infrastructure, services, and systems for communities to effectively respond to any incidence of suicide in the U.S. <https://allianceofhope.org/wp-content/uploads/2018/10/2015-GriefTraumaDistress-AfterSuicide-NationalGuidelines.pdf>



Best Practices in Care Transitions for Individuals with Suicide Risk: Inpatient Care to Outpatient Care provides an evidence-based summary of recommendations for in-patient and out-patient providers to help at-risk individuals successfully transition from hospitalization to care in out-patient settings. The document provides practical suggestions for improving collaboration to ease transitions in this especially high-risk group. <https://theactionalliance.org/resource/best-practices-care-transitions-individuals-suicide-risk-inpatient-care-outpatient-care>

Data, Statistics, & Technical Assistance:



https://ibis.health.state.nm.us/indicator/view/SuicDeathYear.NM_US.html

For youth risk information, access <https://ibis.health.state.nm.us/ibisph-view/query/selection/yrrs/YRRSSelection.html>



<https://www.nlm.nih.gov/health/statistics/suicide.shtml>



<https://www.cdc.gov/violenceprevention/suicide/statistics/index.html>

<https://www.cdc.gov/vitalsigns/suicide/index.html>

<https://www.cdc.gov/ViolencePrevention/suicide/index.html> - resources and data

In summary, suicide...

- ❖ is a multi-faceted, complex public health issue with various biopsychosocial components
- ❖ requires data to direct interventions and a comprehensive, evidence-based approach, and
- ❖ is being addressed by the Department of Health Office of Injury Prevention through a variety of local, regional, and statewide efforts in conjunction with the NM Suicide Prevention Coalition





Our most important message ...
Suicide is preventable!



Questions or comments?



Thank you!

natalie.lowe@state.nm.us

505-827-2708

jacalyn.dougherty@state.nm.us

505-827-2488

