



## COMMUNITY HEALTH WORKER CONFERENCE

Prevention and Community Health  
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“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 Brownn



# What do you do to relax or destress?

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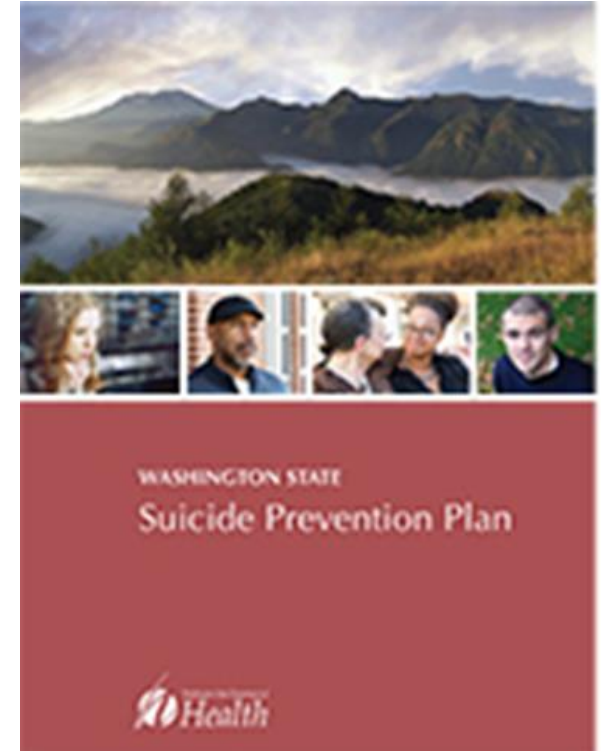
# “One Conversation Saved My Life”

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# Issue

- Suicide is a preventable, public health issue.
- Over 75% of all WA violent deaths are suicides.
- Firearms are used in almost half of all 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)



  = MAJOR LIFE DISRUPTION



### LOSS & TRAUMA OF THOSE LEFT BEHIND

#### Reactions:

- Guilt
- Anger
- Shame
- Anxiety
- Isolation
- Insomnia
- Suicidal/Suicide death



#### Domino Effect:

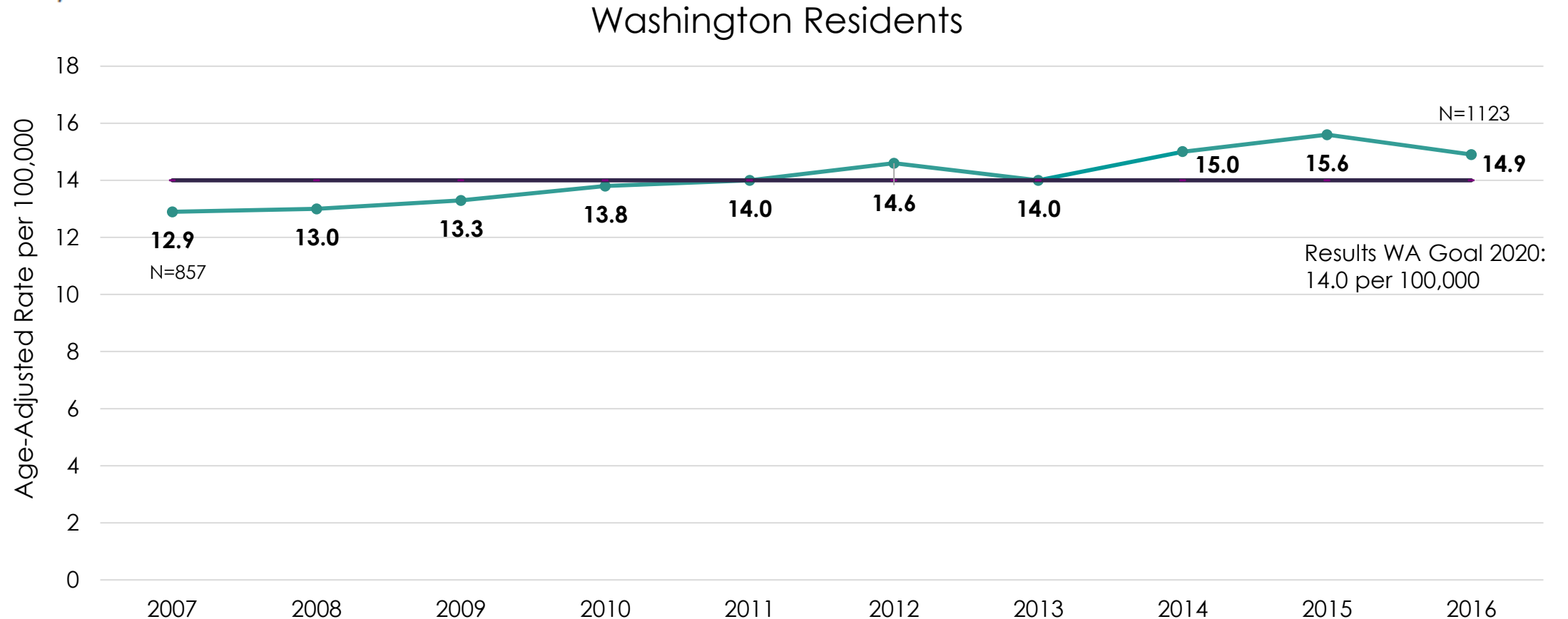
- Divorce
- Job loss
- Loss of purpose
- Substance abuse
- Financial hardship
- Health consequence
- Dropping out of school

# Data

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# Results WA Measure

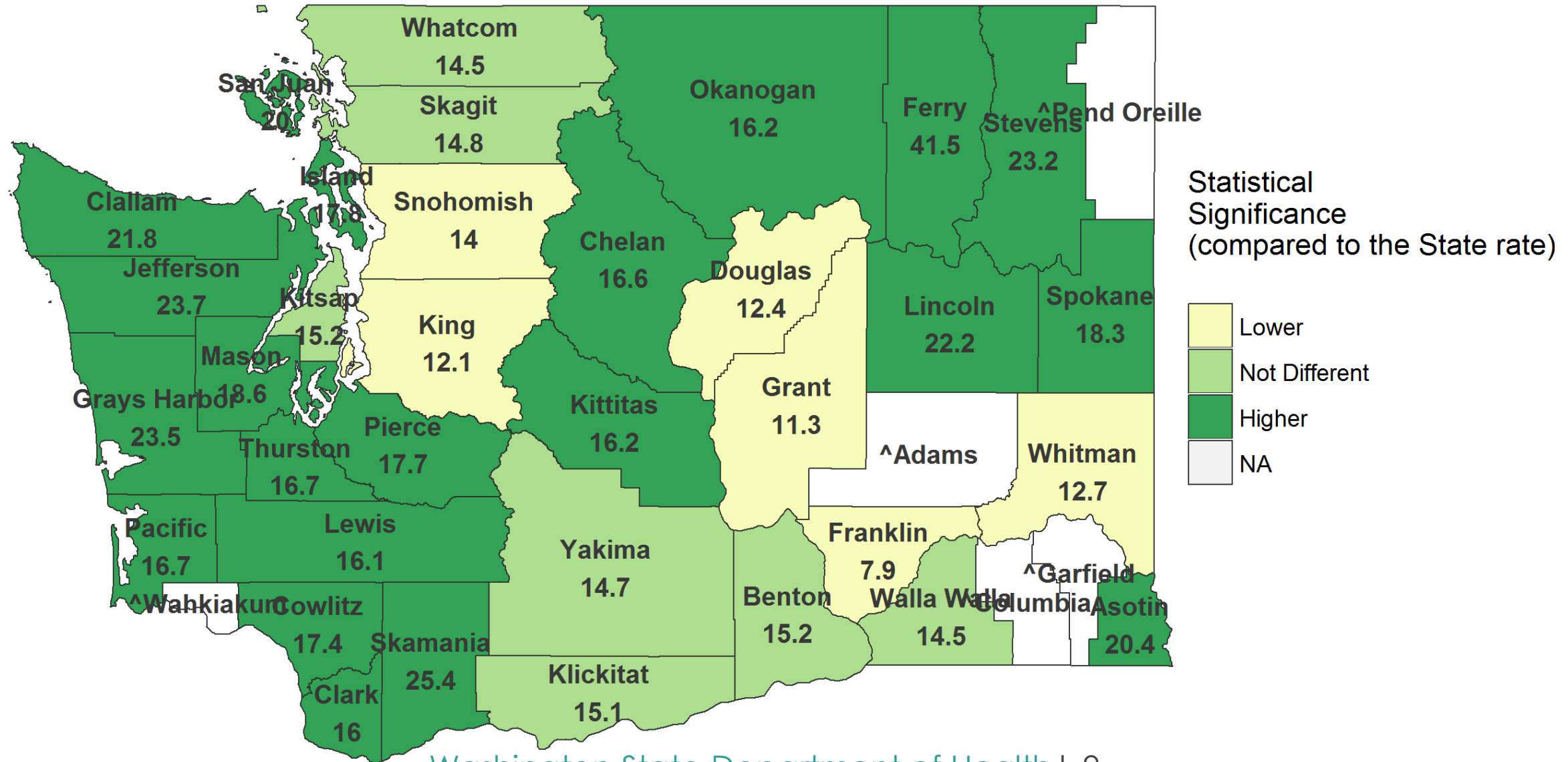
1.2.A.g: Reduce suicide death rate from the rate of 15.6 per 100,000 in 2015 to 14.0 per 100,000 in 2020



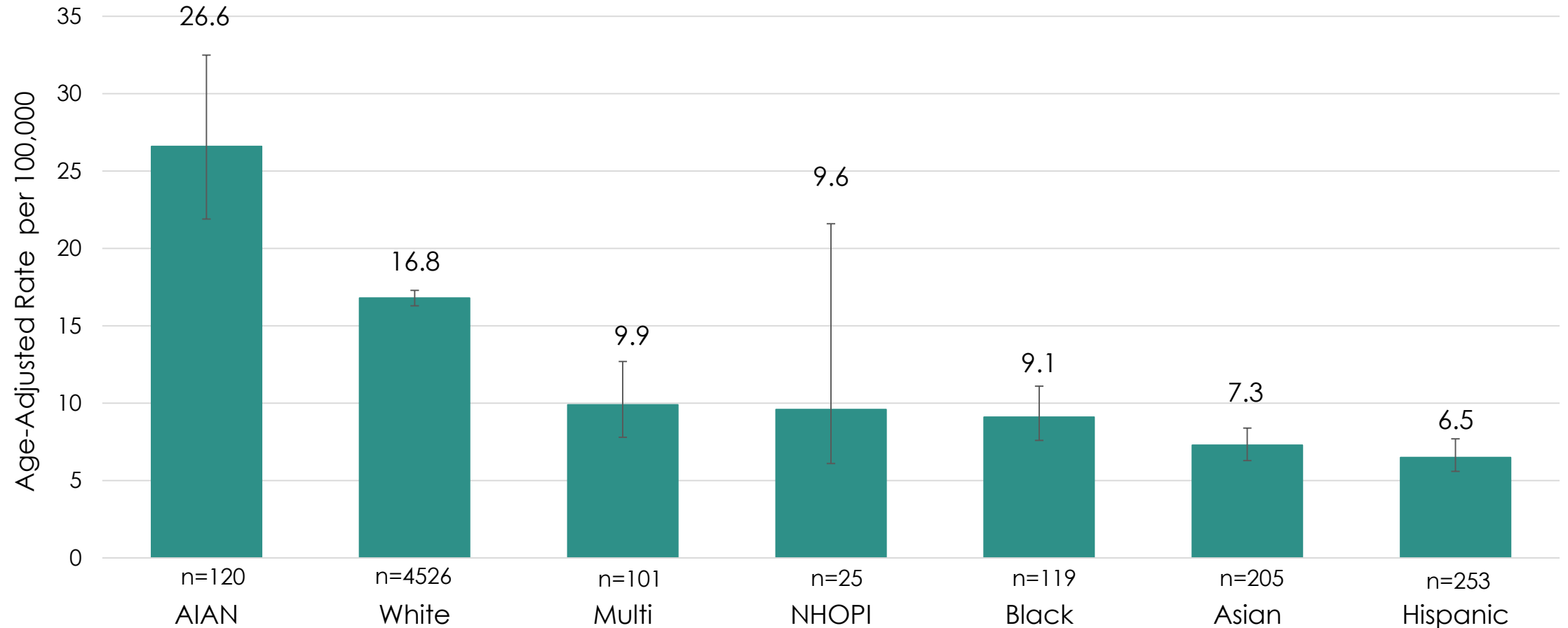


# 2012-2016 Suicide Rate by County

(Rate = 14.9 per 100,000; Total 5,412 suicides)



# Suicide Rate by Race/Ethnicity (2012-2016)




AIAN: American Indian and Alaskan Native  
Multi: Multiracial  
NHOPI: Native Hawaiian/Pacific Islander

# Means of Suicide

- Firearms are used in about 45-50% of WA suicides every year.
  - Firearms, suffocation, and poisoning are the leading means of suicide.
- Safe storage of lethal means is a best practice.
  - In the most recent Behavioral Risk Factor Surveillance System (BRFSS), 38% ( $\pm 2\%$ ) of adults with firearms reported keeping them stored safely at home.

## HOW TO REACH OUT TO HELP PREVENT SUICIDE


**Safer Homes,  
Suicide Aware campaign**  
[saferhomescoalition.org](http://saferhomescoalition.org)



ARE YOU A PHARMACY  
PROFESSIONAL?

You dispense powerful medications  
that are intended to heal, but are  
sometimes used in overdose or suicide.


MORE INFORMATION



ARE YOU A FIREARMS  
RETAILER / INSTRUCTOR?

You often know when things aren't  
right with someone. Be aware, a new  
gun could be used for suicide.

MORE INFORMATION



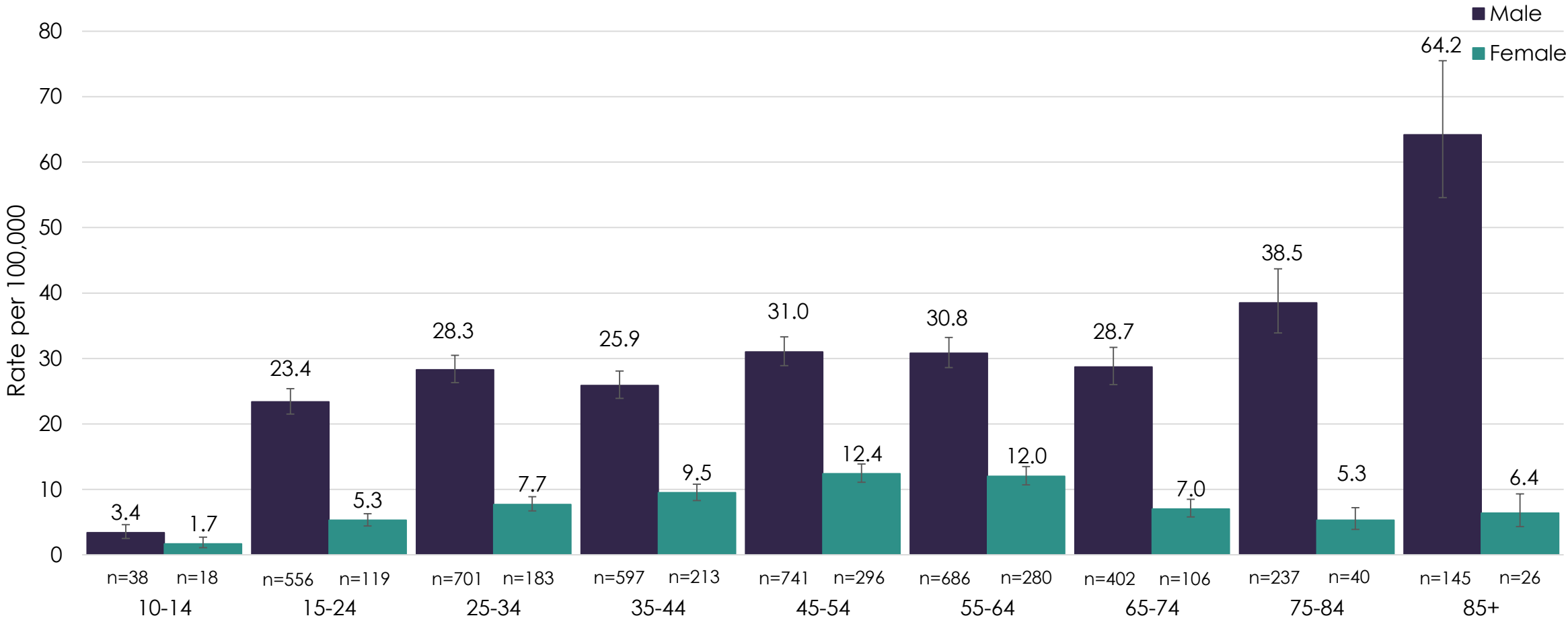
ARE YOU A TRAINING PROVIDER  
FOR MENTAL HEALTH AND  
MEDICAL PROFESSIONALS?

Add Safer Homes to your trainings.  
Help providers learn specific steps they  
can share with patients to remove  
access to lethal means.

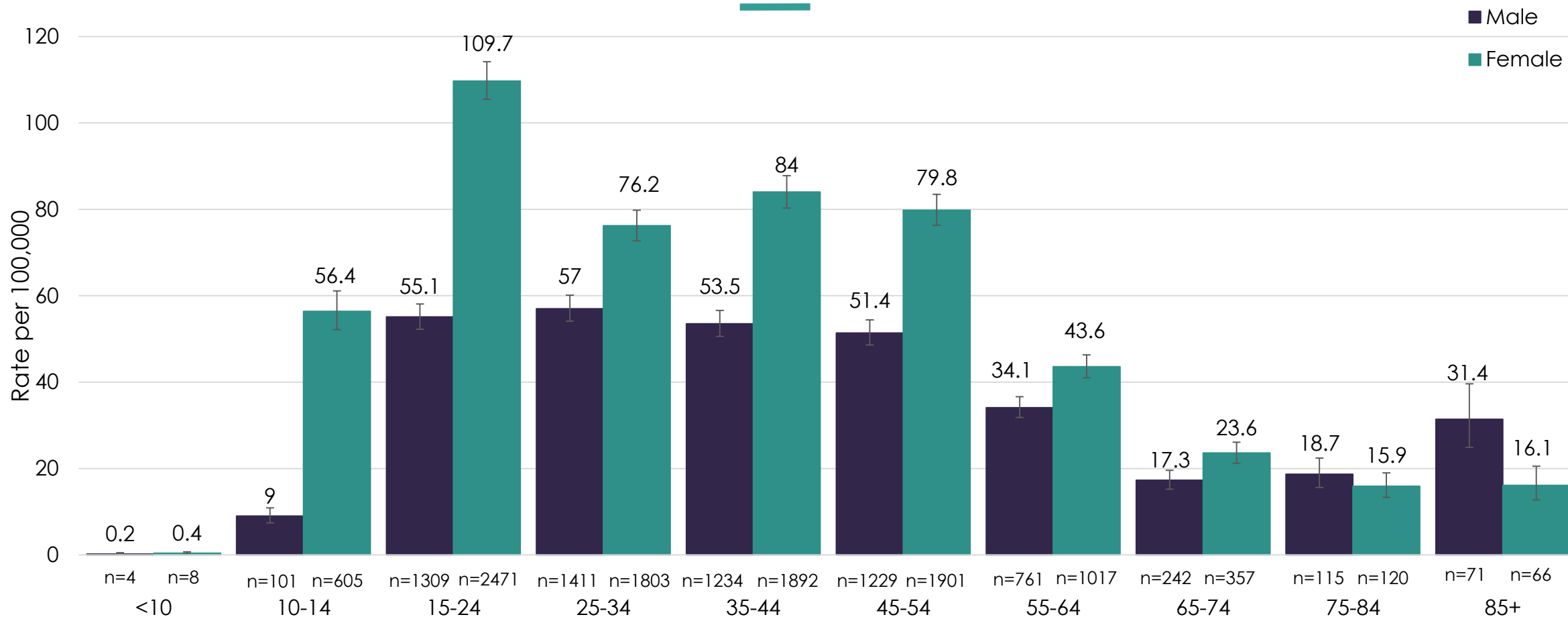
MORE INFORMATION



# Suicide Rate by Age and Sex (2012-2016)



# Rates of Hospitalization for Intentional Self-Harm by Age and Sex (2012-2016)



Why?



# Why suicide?

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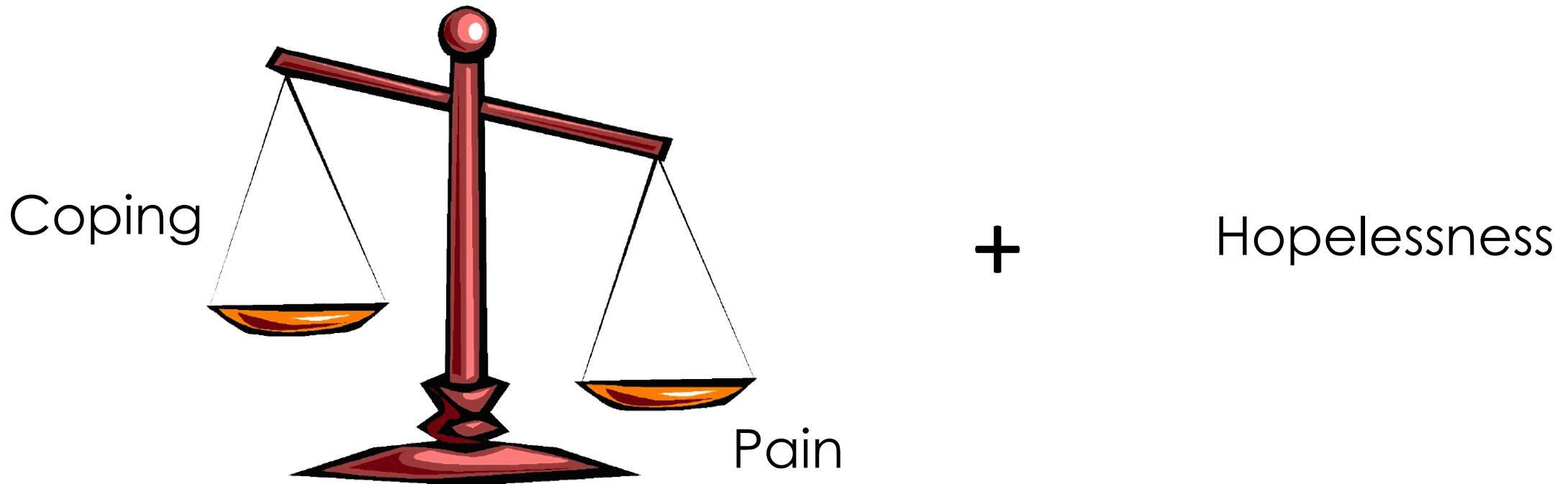
- Every story is unique.
- Research is evolving, but we know there are some identities, experiences, and conditions linked.

Brainstorm: What are suicide risk factors?



# Suicide is not about wanting to die.

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# “What Dreams May Come” Quote

“That’s the thing about suicide: It doesn’t discriminate. It doesn’t matter who you are or what you have. It doesn’t matter how loved you are. The pain and the feelings of isolation can build and build over time, and if something or someone doesn’t set you back on your path, you may get trapped in the box. The box is filled with self-loathing, self-doubt, hopelessness, futility, the thought that you and your pain are a burden to every single person around you, and that they’d be better off if you erased yourself from their lives. The box lies. And when you get trapped in that box, it can feel impossible to get out. Sometimes it is. That’s when we can lose the people we love.”





# Risk factors

## **Personal characteristics**

Membership in a vulnerable group:

- Men 45 and older
- Resident of a small-town rural community
- American Indian/Alaskan Native or white
- Participation in armed forces
- LGBTQ

Family history:

- Of mental illness
- Of abuse
- Of substance abuse

## **Life experiences**

Childhood trauma (ACEs), historical trauma or recent trauma

Loss:

- Breakup or divorce
- Job demotion or loss
- Loss of functioning
- Death, especially by suicide, in the family or community
- Loss of stability (identity, eviction, deployment of a family member, financial crisis, sexual violence)

Previous suicidal behavior

Isolation

Barriers to accessing mental health care

Easy access to lethal means

## **Physical and mental health**

Mental illness

Substance abuse disorder

Traumatic brain injury

Changes in physical or mental functioning

## **Personality and outlook**

Hopelessness

Impulsivity

Aggression

Feeling like a burden

Personal or cultural beliefs validating suicide

Unwillingness to seek help

# Protective factors

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<b><u>Individual</u></b>	<b><u>Relationship</u></b>	<b><u>Community</u></b>	<b><u>Societal</u></b>
Skills in problem solving, conflict resolution and nonviolent handling of disputes	Strong connections to family and community support  Support through ongoing medical and mental health care relationships	Effective clinical care for mental, physical and substance use disorders  Easy access to a variety of clinical interventions and support for help-seeking	Restricted access to highly lethal means of suicide  Cultural and religious beliefs that discourage suicide and support self-preservation

# Connectedness



WE HAVE TO MOVE FROM  
A CULTURE OF SELF-  
RELIANCE TO ONE OF  
HUMAN CONNECTEDNESS  
AND FROM A CULTURE  
OF SELF TO ONE OF  
OTHERNESS.

What can we do?

# Look at the FACTS

## Feelings

Hopelessness	Rage, anger, seeking revenge	No reason for living
Anxiety or agitation	Feeling trapped—like there's no way out	No sense of purpose in life

## 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 (for example, collecting pills or making plans to purchase a weapon in a crisis)
Acting reckless or engaging in risky activities, seemingly without thinking

## Changes

Changes in sleep: unable or sleeping too much	Dramatic mood changes
Increasing alcohol or drug use	Changes in connections: withdrawing from friends, family or society
Change in behavior or attitude	Change in appearance or hygiene



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## Threats

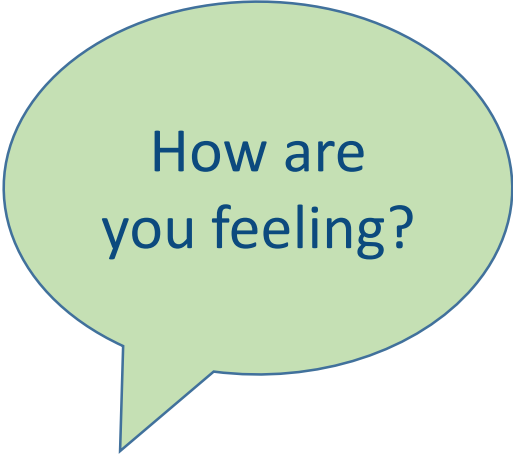
Direct	“I am going to kill myself.” “You won’t see me next week, I’ll be dead by Monday.”
Indirect	“I can’t do this anymore.” “No one would miss me if I were gone.” “You have meant a lot to me – please don’t forget me.”

## Situations/Stressors


Loss	Trauma
Instability	Sudden change

# Ask about suicide

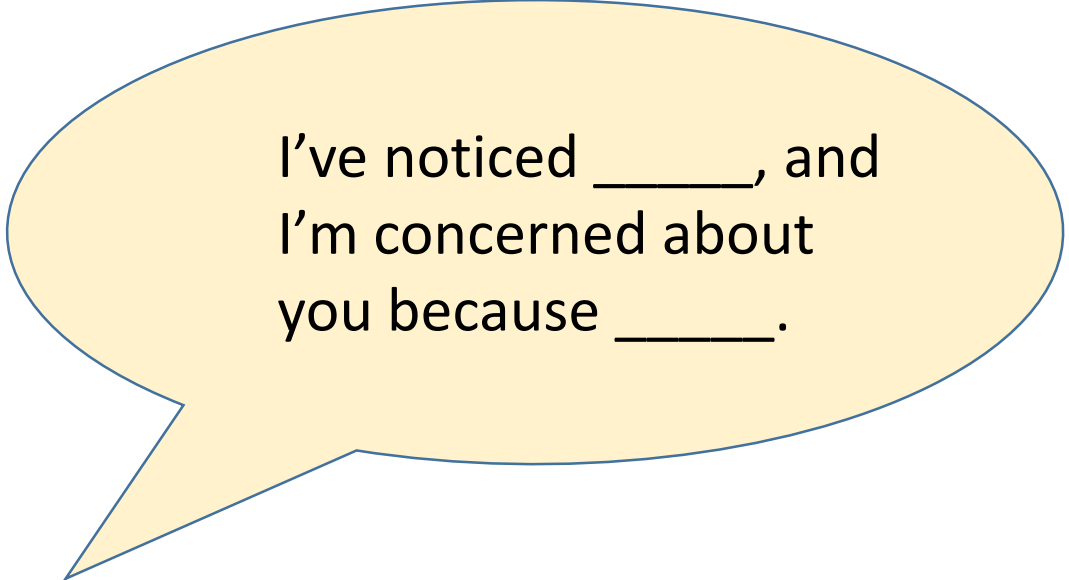
- Express your concern in a way appropriate for your relationship.
- Ask open-ended questions.
- Use reflective listening.



How are you feeling?



What has been going on in your life lately?



I've noticed \_\_\_\_\_, and I'm concerned about you because \_\_\_\_\_.

# Be calm and direct.

Are you thinking about suicide?

It sounds like you're considering ending your life. Am I understanding that right?

When you said \_\_\_\_\_, I wondered if you meant you're thinking about suicide. Are you?

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

# Remove the danger and get help

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

I want to help you 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

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## National Suicide Prevention Lifeline

- 800-273-TALK (8255)

## Crisis Text Line: Text “HEAL” to 741741

## WA State Mental Health Crisis Lines by County

- <https://www.dshs.wa.gov/bha/division-behavioral-health-and-recovery/state-mental-health-crisis-lines>

## Washington 2-1-1

- Call 2-1-1 or visit <https://win211.org/>



What are your concerns and experiences?

What are we doing in WA?

# DOH Suicide Prevention Activities

- Washington State Suicide Prevention Plan
- Action Alliance for Suicide Prevention
- Mental Health Promotion/Suicide Prevention Workgroup
- Safer Homes Coalition
- Health Professionals Training
- National Suicide Prevention Lifeline & Crisis Text Line
- Youth suicide prevention grants
- SAMHSA Garrett Lee Smith Grant
  - Focused on Grays Harbor, Pacific, and Clallam Counties



# Other Projects

- Office of Superintendent of Public Instruction
  - [Social Emotional Learning Modules](#) were added to K-12 education for educators and students.
  - Project AWARE continues to promote the [Mental Health in High School Curriculum](#).
- Department of Veteran Affairs
  - Family and Military Suicide Prevention and Care Workshop
  - [Max Impact TBI](#) app
- Enterprise Suicide Prevention Workgroup
- Suicide prevention in healthcare



# Questions or comments?





# Resources

- DOH Suicide Prevention Pages:  
<https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention>
  - WA State Suicide Prevention Plan
  - How to Prevent Suicide in the Workplace
- Suicide Prevention Resource Center: <http://www.sprc.org/>
- National Action Alliance for Suicide Prevention:  
<http://actionallianceforsuicideprevention.org/resources>
- American Foundation for Suicide Prevention (AFSP): <https://afsp.org/>
- SAMHSA's Suicide Prevention page: <https://www.samhsa.gov/suicide-prevention>
- Data Visualization
  - CDC's WISQARS: <https://wisqars-viz.cdc.gov/>
  - Washington Tracking Network – Suicide:  
<https://fortress.wa.gov/doh/wtn/WTNPortal/#!q0=2531>
  - AFSP's data: <https://afsp.org/about-suicide/suicide-statistics/>

# In Summary

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- 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!



*Washington State Department of*

*Health*