

Suicide Prevention: A National and State Imperative



SPPAC Meeting
Sacramento, CA
November 8, 2007
Lanny Berman, Ph.D., ABPP
Executive Director



**AMERICAN ASSOCIATION
OF SUICIDOLOGY**
Dedicated to the Understanding and Prevention of Suicide

Objectives

- ▶ Context: Place suicide prevention in historical context
- ▶ Context: Place state suicide prevention programs in national context
- ▶ Identify models for suicide prevention and raise a few questions
- ▶ Offer a few recommendations



" It was once said that the moral test of government is how that government treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life, the sick, the needy and the handicapped. "

Hubert H. Humphrey



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Federal Initiatives in Suicide Prevention: I. Center for Studies of Suicide Prevention, NIMH, 1968

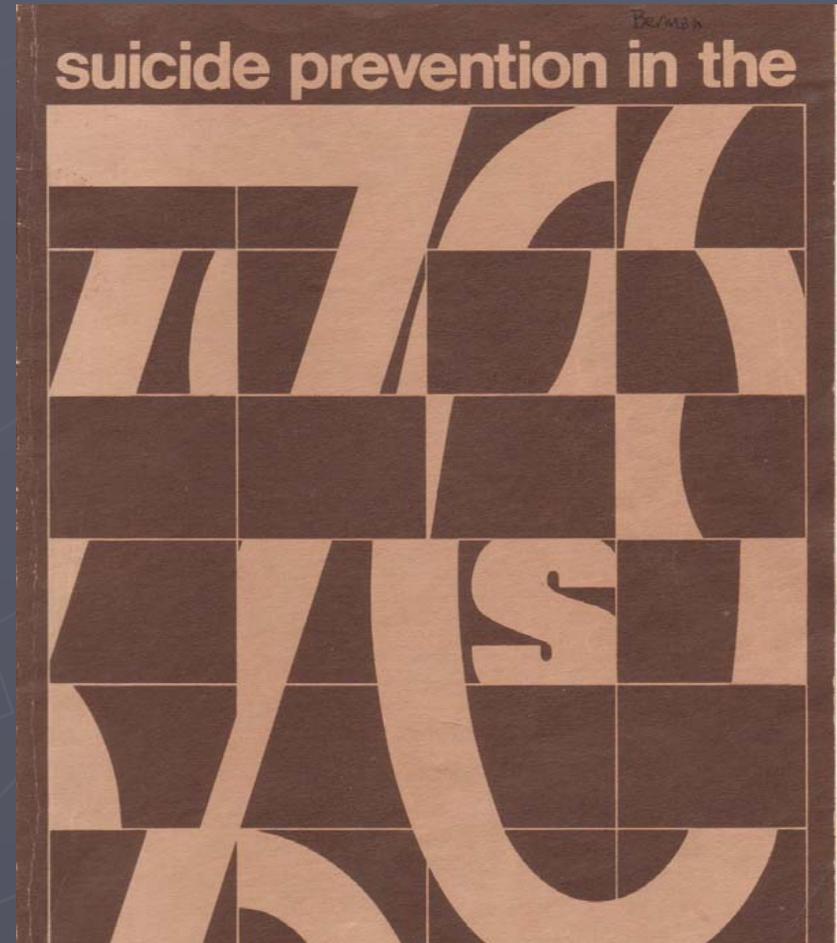
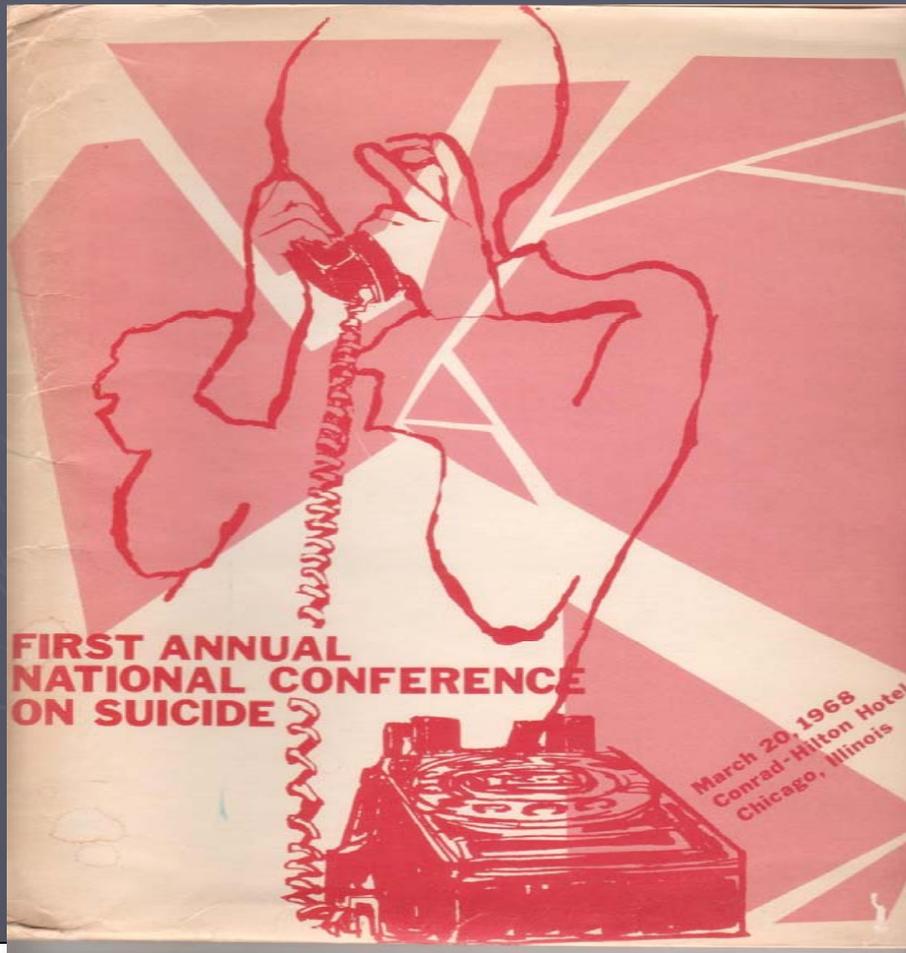


**AMERICAN ASSOCIATION
OF SUICIDOLOGY**

Dedicated to the Understanding and Prevention of Suicide



Federal Initiatives in Suicide Prevention -- Center for Studies of Suicide Prevention, 1968 to 1973



AMERICAN ASSOCIATION
OF SUICIDOLGY

Dedicated to the Understanding and Prevention of Suicide



Federal Initiatives in Suicide Prevention: II. Secretary's Task Force on Youth Suicide Prevention (1986)

- ▶ 4 volume, state-of-the-science report published, 1989
- ▶ Only 200 copies disseminated
- ▶ Political Will



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Federal Initiatives in Suicide Prevention: III. 1997 --



Congressional Record

PROCEEDINGS AND DEBATES OF THE 105th CONGRESS, FIRST SESSION

Vol. 143

WASHINGTON, TUESDAY, MAY 6, 1997

No. 57

The Surgeon General's
Call To Action
To Prevent Suicide
1999



Department of Health and Human Services
U.S. Public Health Service

National Strategy for Suicide Prevention

A Collaborative Effort of SAMHSA, CDC, NIH, HRSA



SPRC
SUICIDE PREVENTION RESOURCE CENTER

NATIONAL
**SUICIDE
PREVENTION
LIFELINE**
1-800-273-TALK
www.suicidepreventionlifeline.org

INSTITUTE OF MEDICINE
**Reducing
Suicide**
A NATIONAL IMPERATIVE



PRESIDENT'S NEW FREEDOM

COMMISSION ON MENTAL HEALTH

Mission | Background | Commissioners | President's Remarks | Contact Us | Home



Surveillance

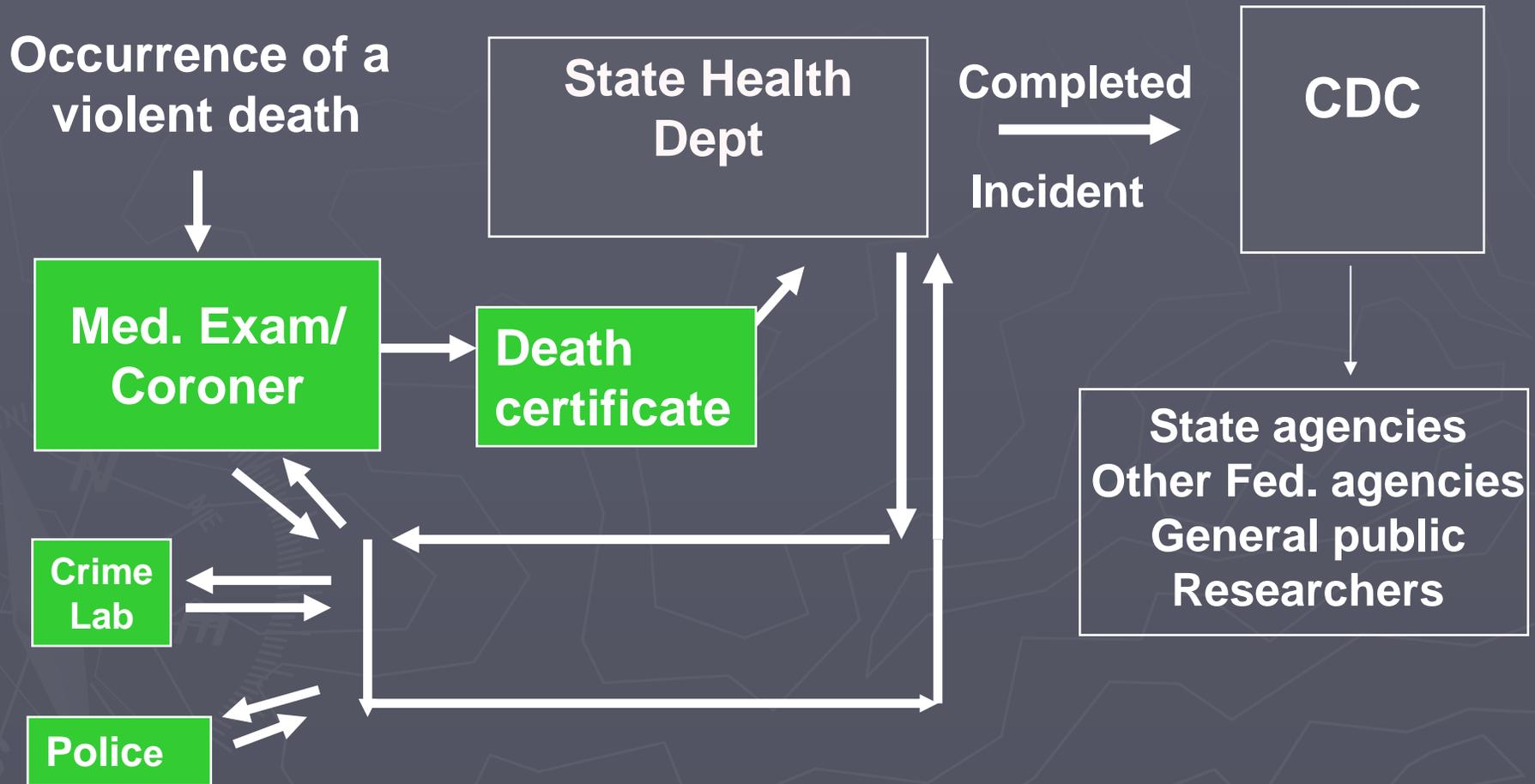
- ▶ **National Violent Death Reporting System:** Linking Data to Save Lives
- ▶ CDC funded – 17
- ▶ Soon to be 29 with HR 3043 passing and \$4 million in additional funds



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Flow of Information for the National Violent Death Reporting System



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Garrett Lee Smith Memorial Act

- ▶ 2005 – Senator Gordon Smith (R-OR)
- ▶ SAMHSA grants
 - October 1, 2005 -
 - 14 State/Tribal prevention grants
 - 20 Campus Suicide Prevention Grants
- ▶ October, 2007 (HR 3043) increased funding





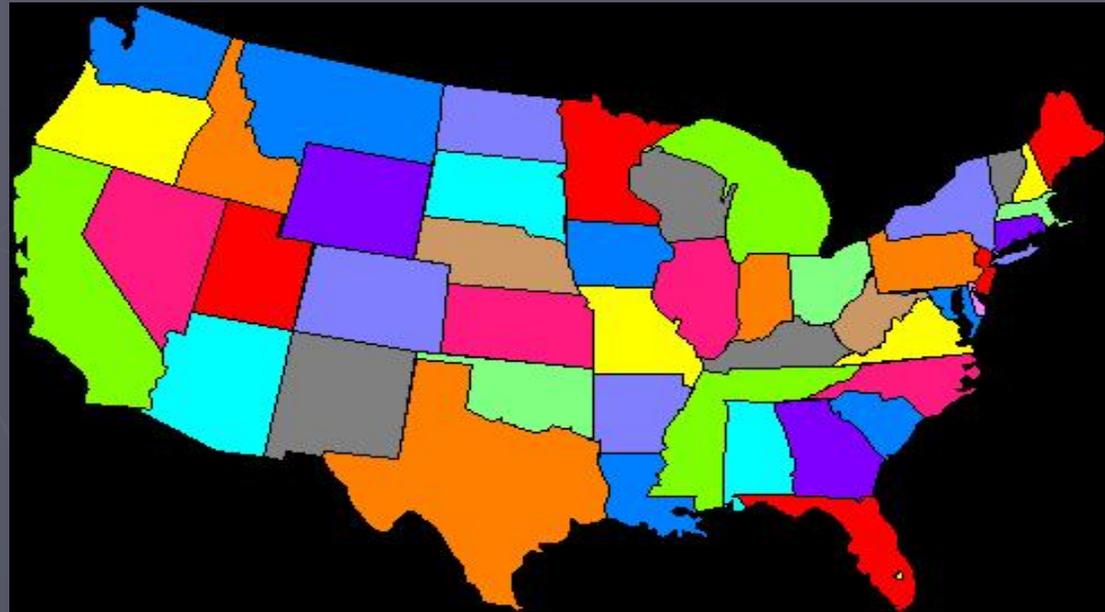
•2002-2010: \$3+Million/Year – *Cooperative Agreement* between SAMHSA and Education Development Center

•Mission & Goals

- Promote implementation of the NSSP
- Support efforts to develop programs, implement interventions, and
- Promote policies to prevent suicide in communities, states, and reservations...



State Suicide Prevention Plans



As of 1 April, 2007, **48 (96%) U.S. States** have a **state suicide prevention planning group** in place or being formed; **82% have a freestanding plan**; **8%** have a plan tied to a statewide injury prevention plan. Three states have passed mental health parity legislation (NY, OH & WA)



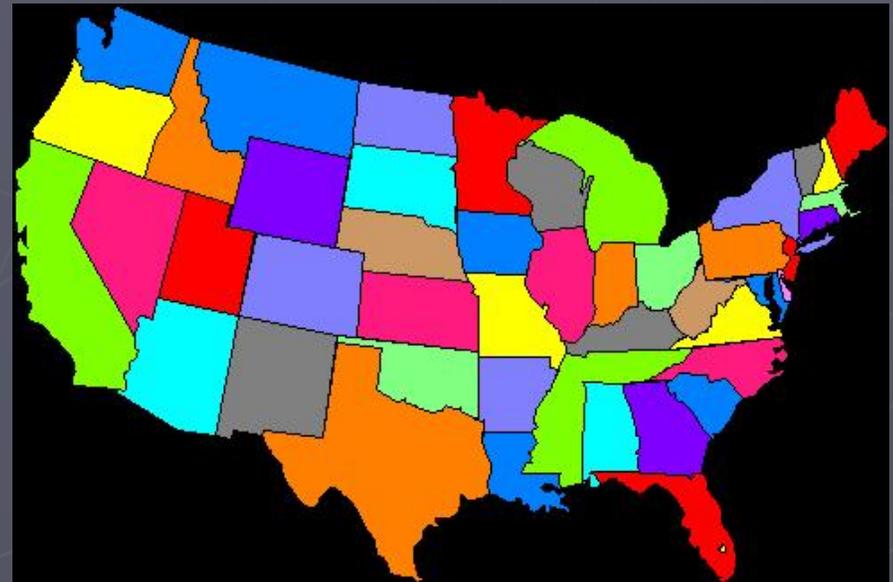
AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Interviews conducted Summer, 2006 – March, 2007, Harvard Injury Control Center, ref: Cathy Barber

State SP Funding, 2007

- ▶ At latest count, only 14 states (28%) have funded suicide prevention-related activities [other than GLS grant funds].
- ▶ After California, New York and Massachusetts have the largest war chests (\$2.5M and \$3.9M, respectively).
- ▶ 5 of the 14 states have less than \$150K in annual funds



Conceptual Model of Prevention Strategies (and examples)

	Individual Predisposition	Social Milieu	Proximal Agents
Primary Prevention	Depression management Anger management Problem-solving training Help-seeking training	Dropout prevention Media training	Gun safety training for parents and primary care physicians
Secondary Prevention	Outpatient treatment	Clinical education & training Peer counseling	Medication emetics Hospital suicide-proofing Less access to guns
Tertiary Prevention	Substance abuse treatment Psychiatric treatment	Juvenile justice programs Case management & follow-up	SSRI treatment for depression Neuroleptics for psychosis



Evidence-based Prevention Programs

- **Case finding strategies**
- **Risk factor reduction strategies**



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Evidence-based Prevention Programs

I. *Case finding (early detection) strategies:*

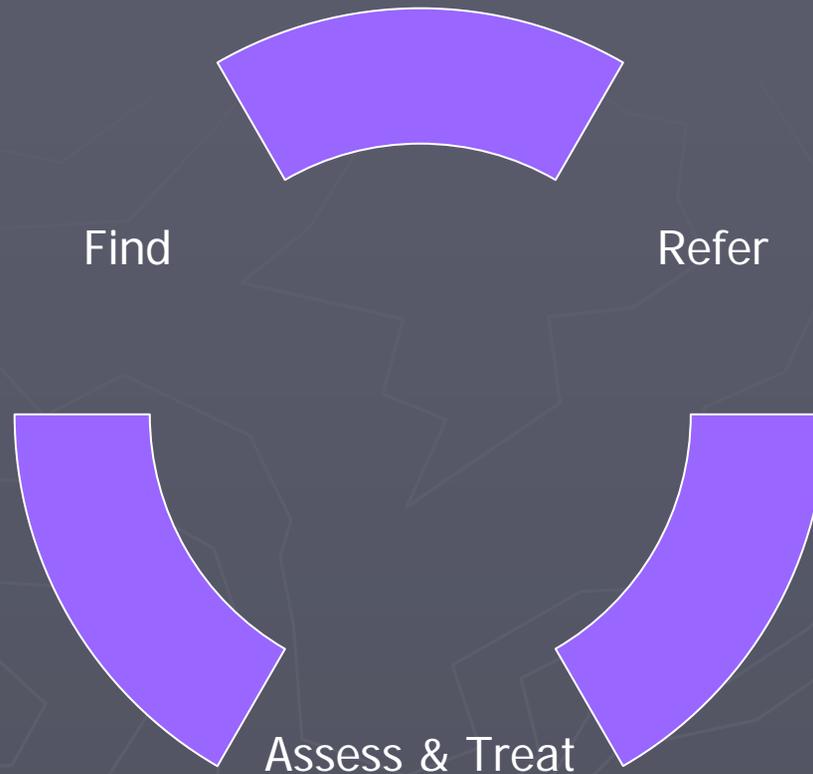
- ▶ Suicide awareness curricula
- ▶ Screening
- ▶ Gatekeeper training
- ▶ Crisis centers and hotlines



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Early Detection Rationale



AMERICAN ASSOCIATION
OF SUICIDOLGY

Dedicated to the Understanding and Prevention of Suicide

Warning Signs on the Internet

(Mandrusiak 2006)

- ▶ Google search: “warning signs” and “suicide”
 - 183,000 hits
- ▶ Tabulation of 1st 50 of randomly selected 200 sites
 - 138 distinct warning signs
 - ▶ 63 were unique to one site
- ▶ Of 200 web sites sampled
 - 3266 warning signs



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Red Flags (Mnemonic)

▶ **IS PATH WARM?**



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

IS PATH WARM?

- ▶ **I** Ideation/threatened or communicated
- ▶ **S** Substance Abuse/excessive or increased

- ▶ **P** Purposeless/no reasons for living
- ▶ **A** Anxiety, Agitation/Insomnia
- ▶ **T** Trapped/feeling no way out
- ▶ **H** Hopelessness

- ▶ **W** Withdrawal from friends, family, society
- ▶ **A** Anger (uncontrolled)/rage/seeking revenge
- ▶ **R** Recklessness/risky acts - unthinking
- ▶ **M** Mood changes (dramatic)





Goal 6: Implement training for recognition of at-risk behavior and delivery of effective treatment.



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Early Detection and Referral Models Beget Need for Professional Education and Treatment

- ▶ The average mental health professional has only 2 hours of formal didactic training in suicide

Reference: AAS Surveys



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Professional Education and Treatment: Needs

- ▶ The majority of family physicians and pediatricians have prescribed an SSRI for a child or adolescent patient, yet
 - Less than 1 in 10 report receiving adequate training in the treatment of childhood depression and only 1 in 6 report feeling comfortable treating children for depression

JAMA, 1999; North Carolina data



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Core Competencies for the Assessment and Management of Individuals At-risk for Suicide (AMSR)

- ▶ AAS/SPRC 1 day Training Curriculum
 - 24 competencies
 - Knowledge based



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide



Recognizing and Responding to Suicide Risk: Essential Skills for Clinicians (RRSR)

- ▶ case application and skills based
- ▶ on-line entry and exam
- ▶ 2 days' F2F training
- ▶ post-training on-line networking, support, and CE



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Evidence-based Prevention Programs

II. Risk factor reduction strategies:

- ▶ **Restriction of lethal means**
- ▶ **Media education**
- ▶ **Postvention/crisis intervention**
- ▶ **Skills training (increase protective factors)**





National Strategy for Suicide Prevention

A Collaborative Effort of SAMHSA, CDC, NIH, HRSA, IHS

Goal 5: Promote efforts to reduce access to lethal means and methods of self-harm.



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

A. Means Restriction

- ▶ Make highly lethal means less accessible



Attempt suicide with less lethal means

or

Delay suicide attempt



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Means Reduction

- ▶ Not all people who die by self-harm are unambivalently determined to die.
- ▶ Some act impulsively during a short-term crisis period.
- ▶ If a method of suicide is made less lethal, or if a highly lethal method is made less available and an attempter substitutes a less lethal method, the odds are increased that an attempt will be nonfatal.
- ▶ 90% or more of those making nonfatal attempts will NOT go on to die by suicide (Owens, 2002)



Restriction of Lethal Means

► **Rationale: availability, accessibility, and socio-cultural acceptability determine choice.**

- e.g., Pesticides – internationally/rural farming
- e.g., Firearms – USA
- e.g., Bridge access – world-wide
- Gender and cultural variations
- Need to target common preferences.
- Method substitution?



State Interviews

- ▶ How many states are working on reducing access to firearms?

50%

35%

25%

10%



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

State Interviews

- ▶ How many states are working on reducing access to firearms?

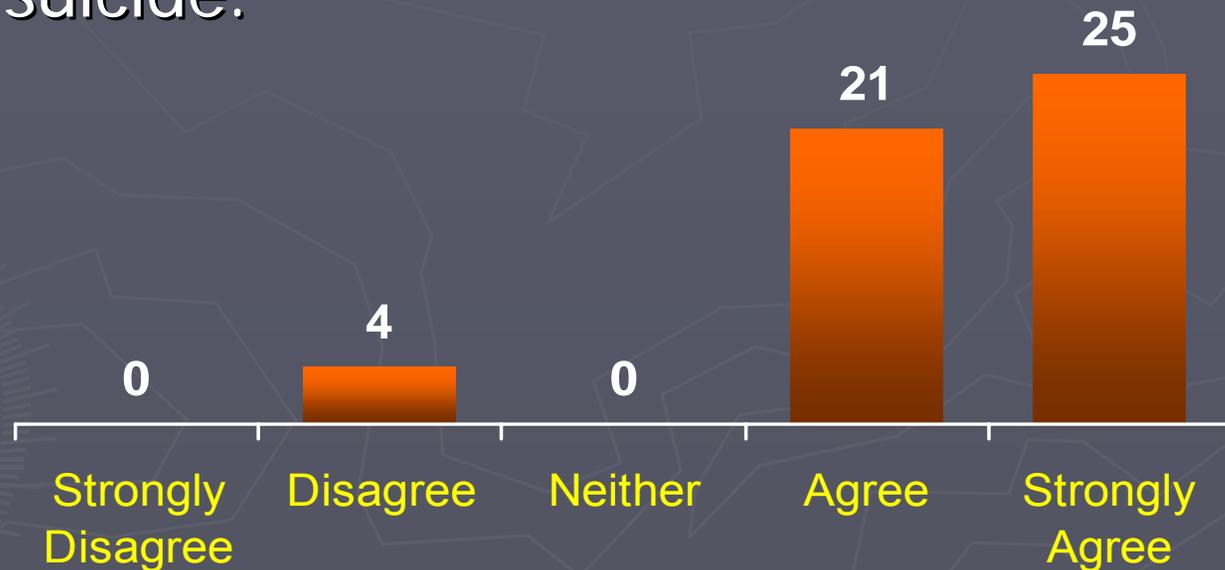
50% 35% 25% **10%** = 5 states.

- ▶ *76% of the state plans call for means restriction.*
- ▶ Why isn't every one of the 31 states that are doing gatekeeper training or screening or public awareness campaigns also working on means reduction?
- ▶ Is it because they disagree that it can work?



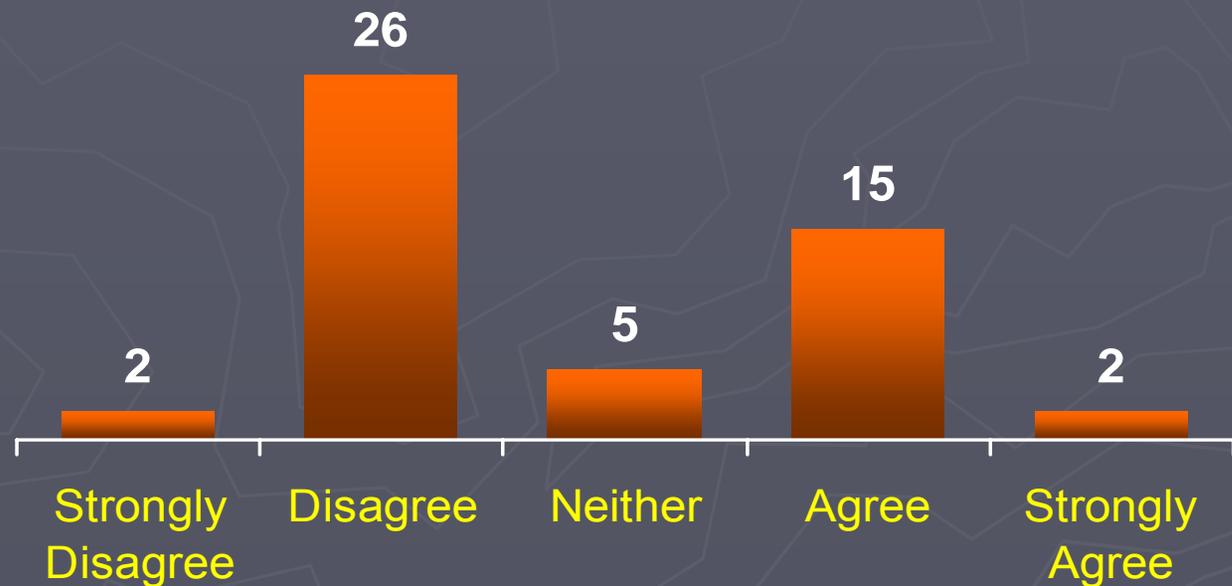
State Interviews

“A gun in the home increases a teenager’s risk for suicide.”



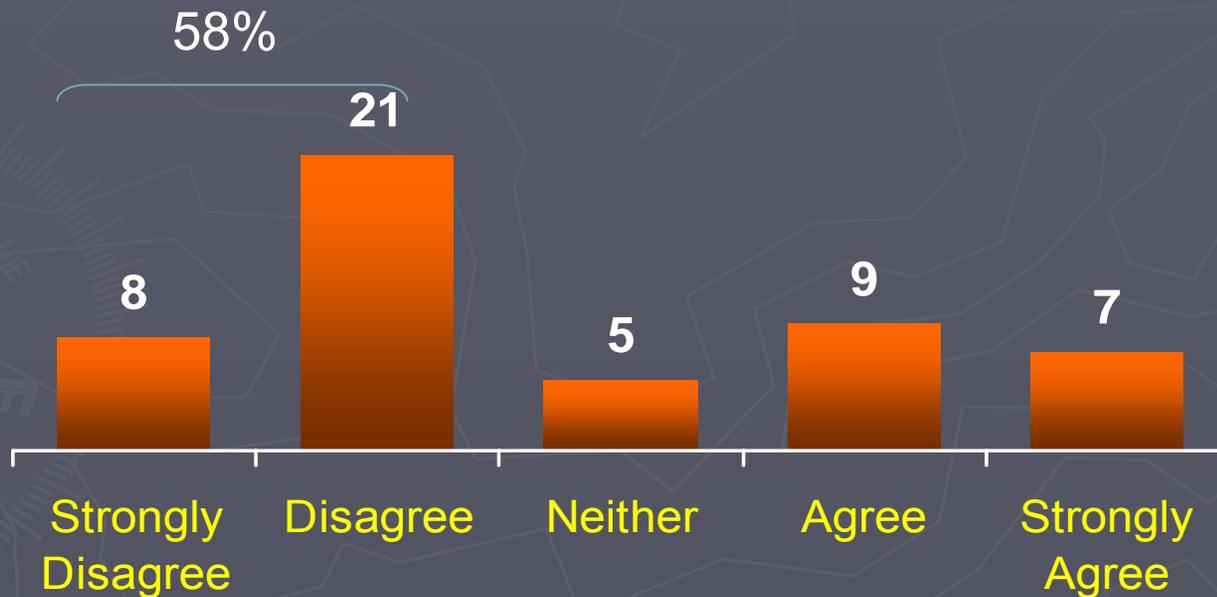
State Interviews

“Among people who kill themselves with a gun, if no gun were available they would have killed themselves using other means.”



State Interviews

“Most people who make a medically serious suicide attempt will not go on to kill themselves.”



Barriers to Means Reduction

- ▶ Political contentiousness of gun issue
 - States with high gun ownership rates say they can't touch this.
 - States with low gun ownership rates say this isn't their issue.
- ▶ Assumptions about "intent" ("If you really want to commit suicide, you can always find a way.")



SPRC/AFSP Evidence-Based Practices Project

- ▶ Community-Based Programs
 - U.S. Air Force Suicide Prevention Program
 - Reduced Analgesic Packaging
- ▶ Emergency-Room Programs
 - ER Means Restriction Education for Parents
 - ER Intervention for Teen Females and Their Mothers
- ▶ Primary Care
 - PROSPECT (Care Management for Elderly)
- ▶ School-Based Programs
 - C-Care/CAST
 - Columbia University Teen Screen
 - Lifelines
 - Reconnecting Youth
 - SOS Signs of Suicide
 - Zuni Life Skills Intervention
- ▶ Service Delivery
 - Psychotherapy in the Home

http://www.sprc.org/featured_resources/bpr/ebpp.asp



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

National Registry of Evidenced –Based Programs and Practices

▶ Prevention Programs

- SOS Signs of Suicide
- U.S. Air Force Suicide Prevention Program

▶ Treatment Programs

- Cognitive Behavioral Therapy for Adolescent Depression
- Dialectical Behavior Therapy

http://www.sprc.org/featured_resources/bpr/nrepp_bpr.asp



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Hypothetical Sub-Group Problem Areas in California

- ▶ Largest N of suicides is among middle-aged (45-54) WM
- ▶ Highest rate of suicide is among elderly
- ▶ Teen suicide rates highest among African American males known to Juvenile Justice system
- ▶ Recent, apparent cluster of Hispanic male suicides in San Bernardino
- ▶ Nonfatal suicide attempts highest among young Latinas



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

and a not so *hypothetical*

- ▶ SP Funding = \$14,000,000 x 4 years
- ▶ Plan/Spending decisions based on:
 - Economic impact of problem?
 - Emotional impact of problem?
 - Known evidence-based intervention available?
 - Target for which best surveillance data available?
 - Most vocal/articulate SPPAC participant or advocacy group?
 - Most *powerful* SPPAC participant or advocacy group?
 - Best bet for maintaining political will?



Recommendations: Part I

- Think Top Down (Political Will) / Bottom Up (Grassroots)
- Get Maximum Bang for Buck – Go for Policy First
- Get Maximum Buck for Bang – Spend Wisely
- Don't Reinvent Wheels that Roll
 - ▶ Use Best Practices – Empirically Evaluated Models



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Recommendations: Part II

- **Education Does Not Equal Prevention**
 - ▶ Knowledge Competencies Are Important
 - ▶ **Skill Competencies** are More Important
 - ▶ **Competent Communities** are Most Important
- **Recognize and Celebrate Complexity; Do Not Oversimplify** – Reach for Complex Solutions
 - ▶ Awareness programs require next steps – early detection and referral requires trained and competent referrals
 - ▶ Depression is not synonymous with suicide
 - ▶ Universal programs are tempting, but targeted programs might be better



Recommendations: Part III

- **Think Sustainability: This is a Marathon, not a Sprint**
 - ▶ Resist Institutional tendency toward short-term
- **Use Consultant Experts; Otherwise Learn the Research Literature**
 - ▶ My degree and experience must be worth something!
- **Think Iteration and Evaluate**



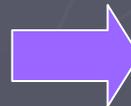
Recommendations Part IV: Tie Policy to Research

90% of suicides have
diagnosable mental
disorders



Increase available,
accessible, and
affordable MH svcs

Reattempt rates are high



Reimburse continuity
of care

Available and accessible
firearms in the home
increase risk



Handgun control laws,
trigger locks,
personalized guns...

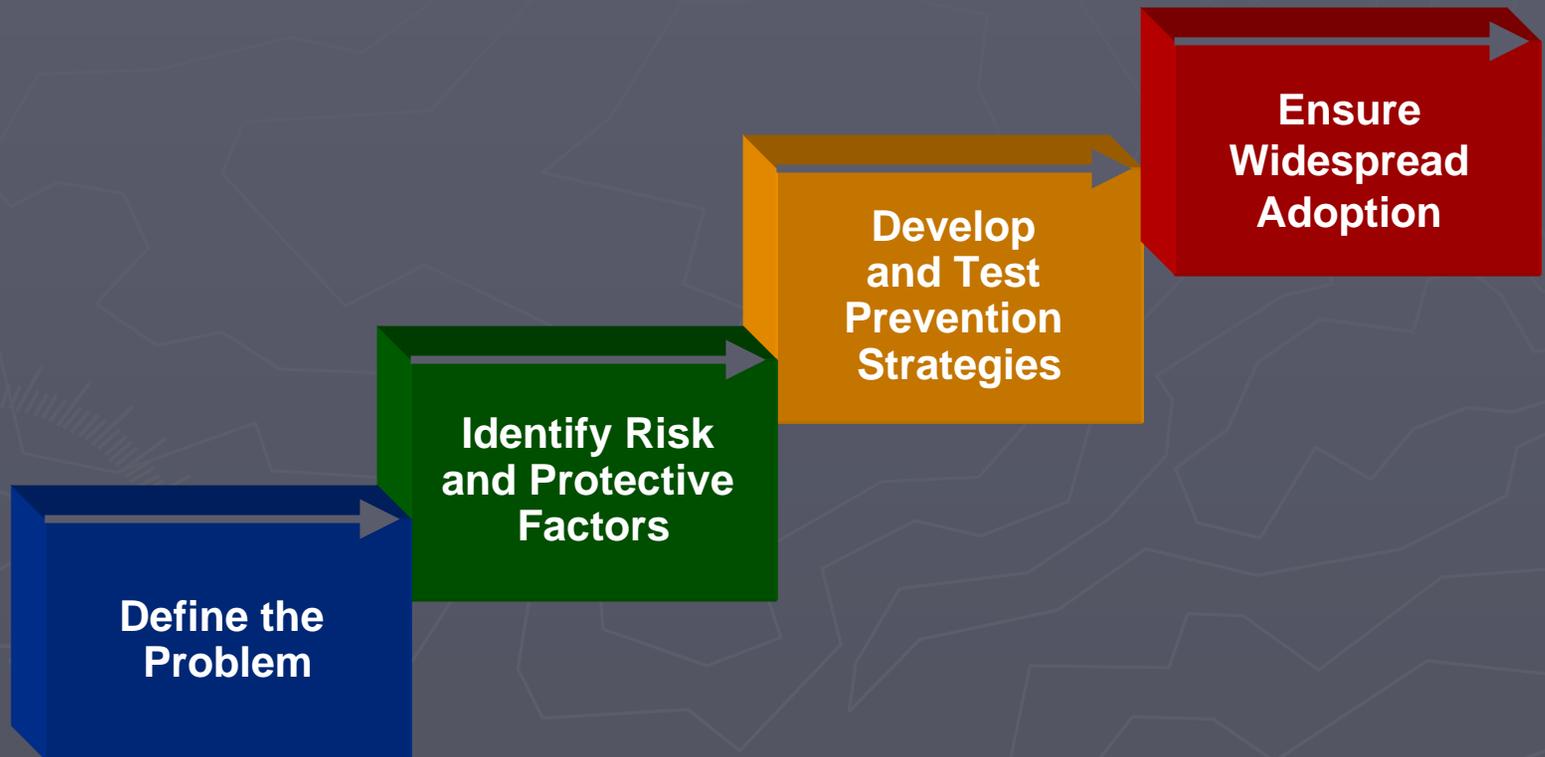


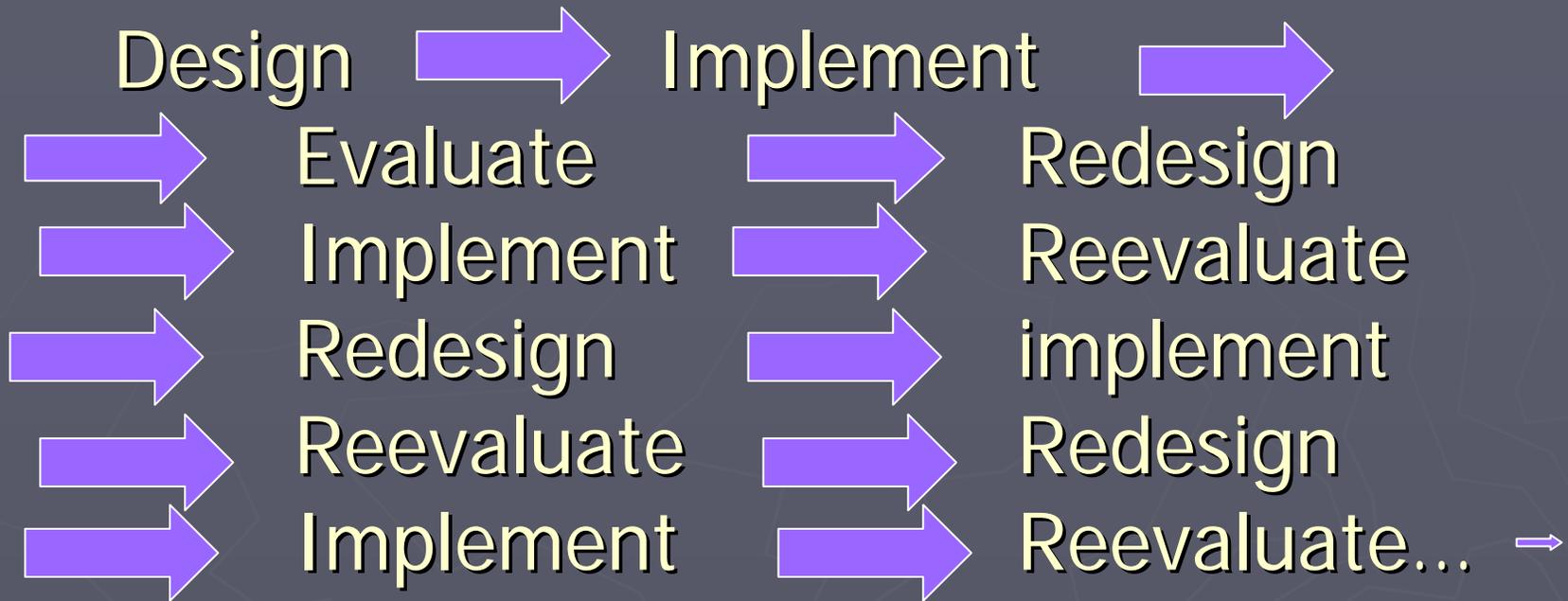
AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

after Brent & Perper, 1995

The Public Health Approach to Prevention





Iterative Steps toward Effective
Prevention Programming

The Hook: The Economic Burden of Suicide

Each suicide has been estimated to cost the state an average of \$397,000 in lost economic potential

California

2004 N Suicides

3,343

2004 \$

\$1.33 billion



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

The Other Costs

- ▶ >3,000 deaths annually
- ▶ 20,000+ - new survivors annually
- ▶ ~ 60-80,000 attempts annually
- ▶ Impact on individuals, families, communities, schools, workplaces and society at large
- ▶ Guilt, stigma, "what if's?," shame
- ▶ Potential for clusters, contagion

One life lost is one too many



AMERICAN ASSOCIATION
OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

Political Will



The Steps Forward

- ▶ National and State Resolutions
- ▶ NSSP
- ▶ Hotline Grant
- ▶ Suicide Prevention Resource Center
- ▶ Garrett Lee Smith Memorial Act
- ▶ Indigenous Suicide Prevention Efforts
- ▶ Stop Senior Suicide Act
- ▶ Mental Health Parity
- ▶ Veterans SP bill
- ▶ 48 states with a state suicide prevention strategy, some even with reasonable funding
- ▶ Media Guidelines
- ▶ *IS PATH WARM?*
- ▶ Research (~\$40 million portfolio at NIH)
- ▶ NVDRS funding
- ▶ National Council for Suicide Prevention/Collaboration
- ▶ Action Alliance for Suicide Prevention
- ▶ Federal Steering Group



“You must be the change you want to see in the world.”

Mahatma Gandhi



**AMERICAN ASSOCIATION
OF SUICIDOLOGY**

Dedicated to the Understanding and Prevention of Suicide

Contact Information

Lanny Berman

Executive Director

American Association of Suicidology

5221 Wisconsin Avenue, NW

Washington, DC 20015

(202) 237-2280

berman@suicidology.org

www.suicidology.org



**AMERICAN ASSOCIATION
OF SUICIDOLOGY**

Dedicated to the Understanding and Prevention of Suicide