Improving Mental Health and Reducing Suicide

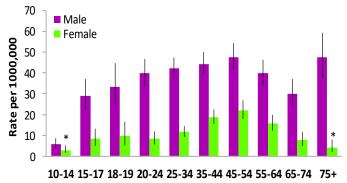
Workgroup Co-chairs: Teresa Brechlin and Kim Myers

Data Updates

Suicide is a major preventable public health problem in Utah and the 8th leading cause of death (2010–2016 inclusive). Every suicide death causes a ripple effect of immeasurable pain to individuals, families, and communities throughout the state. From 2015 to 2017, the age-adjusted suicide rate in Utah was 22 per 100,000 persons. This is an average of 628 suicide deaths per year. In 2017, suicide was the leading cause of death for Utahns aged 10–17 and 18–24. It was the second leading cause of death for ages 25–44.

Many more people attempt suicide than die by suicide. One in 18 Utah adults (5.6%) report having had serious thoughts of suicide in the past year (SAMHSA National Survey on Drug Use and Health, 2015–2016). According to the 2017 Youth Risk Behavior Survey, 21.6% of youth in grades 9–12 reported seriously considering suicide, 17.1% made a plan about how they would attempt suicide, and 9.6% attempted suicide one or more times in the prior year.

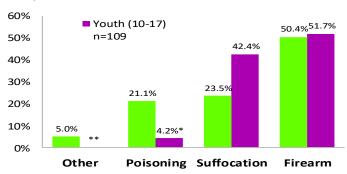
Suicide by Age and Gender, Utah, 2015-2017



Source: Utah Death Certificate Database, Utah Department of Health

The plan below focuses on three main goals. There is a broader Utah Suicide Prevention Plan at https://www.health.utah.gov/vipp/pdf/Suicide/
SuicidePreventionCoalitionPlan2017-2021.pdf. This plan

Percentage of Suicide by Age Group and Method of Injury, Utah, 2015–2017



Source: Utah Death Certificate Database, Utah Department of Health

also outlines priority high-risk populations. The goals below are those pieces of the larger plan that were targeted for further expansion through the Utah Health Improvement Plan efforts.

Goals, Objectives, and Measures

Goal: Increase availability and access to quality physical and behavioral health care.

Objective: Increase formal adoption of the 'Zero Suicide' framework by health and behavioral health care providers statewide by ten health systems/organizations.

Measure: Number of health systems/organizations formally adopting the Zero Suicide framework

Baseline: Zero organizations have adopted the Zero Suicide Framework as of January 2017

Target: Ten health systems/organizations will adopt the Zero Suicide framework by December 2020

Current: 18 organizations have adopted the Zero Suicide framework as of December 2018

Strategy: At least 10 new organizations will formally adopt the Zero Suicide Framework systematic approach to quality improvement in health and behavioral healthcare settings.

Goals, Objectives, and Measures (continued)

Accomplishments:

- The 2018 cohort of the Utah Zero Suicide Learning Collaborative met every other month to provide training, technical assistance and networking for an average of 10 different health and behavioral health care organizations.
- The 2019 cohort will start in January 2019 with an additional 10 health and behavioral health care organizations.
- Held the Utah Zero Suicide Summit in July 2018.

Goal: Increase social norms supportive of help-seeking and recovery.

Objective: Train at least 10% of the population of Utah in an evidence-based gatekeeper training.

Measure: Number of people trained in an evidence-based gatekeeper training

Baseline: 25,000 (estimated) as of January 2017

Target: A minimum of 299,592 Utahns trained by December 2020

<u>Current</u>: In 2018 an additional 548 trainings were held and 23,872 individuals trained in evidence based gatekeeper program.

Strategy: Evidence-based training will be offered to Utahns in a variety of settings. These include training programs such as CONNECT, QPR, Mental Health First Aid, ASIST, Working Minds, and others.

Accomplishments

- DSAMH awarded six Community Health Training Grants and seven Means Safety Training Grants with community gatekeeper training as a focus.
- NAMI Utah awarded 15 mini grants to communities, many with community gatekeeper components. NAMI Utah, AFSP Utah, Hope 4 Utah, and many other community partners continue to provide and expand on community gatekeeper training statewide.

Goal: Reduce access to lethal means of suicide death.

Objective: Partner with at least 30 firearm retailers, concealed carry instructors, and/or firearm enthusiasts to incorporate consumer suicide awareness and prevention materials as a basic tenet of firearm safety and responsible firearm ownership.

Measure: Number of formal partnerships established

Baseline: Zero partnerships as of January 2017

<u>Target</u>: Ten firearm retailers, instructors, enthusiasts in Utah will have incorporated suicide education, prevention, and awareness efforts into their businesses by December 2020

Current: Nine firearm retailers, instructors, enthusiasts as of December 2018

Strategy: Thirty firearm retailers, instructors, or enthusiasts will have formal policies and protocols established to educate staff and clients and customers on suicide prevention, safe storage of firearms, and reducing access.

Accomplishments:

- DSAMH awarded seven mini grants to agencies throughout the state, who provided suicide prevention and firearm safety training to 696 individuals.
 - Knowledge and intentions to help during a suicide crisis increased from an average of 3.44 on a Likert scale
 pretest to 4.52 on the post test.
 - Grantees used firearm safety media and community events to reach approximately 127,711 Utahns with firearm safety suicide prevention messaging.
 - Mini grants were also intended to mobilize community partnerships and grassroots efforts around firearm safety suicide prevention, and approximately 88 new community partners were engaged with these efforts.
 - Grantees are encouraged to target special populations in their community suicide prevention work.

Available Services/Resources

Mental Health Status

The Utah Department of Human Services Division of Substance Abuse and Mental Health (DSAMH) is the state agency responsible for ensuring that mental health services are available statewide. The DSAMH also acts as a resource by providing general information, research results, and statistics to the public regarding substances of abuse and mental health services. The DSAMH contracts with Community Mental Health Centers (CMHC) to provide these services and monitors these centers through site visits, a year-end review process, and a peer review process.

Address:

Department of Human Services Division of Substance Abuse and Mental Health 195 North 1950 West Salt Lake City, Utah 84116 Phone: 801-538-3939

Fax: 801-538-9892

http://www.dsamh.utah.gov

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration

(SAMHSA)

http://www.samhsa.gov

National Institute of Mental Health

http://www.nimh.nih.gov

Mental Health: A Report of the Surgeon General http://www.surgeongeneral.gov/library/mentalhealth/home.html

More information on the Behavioral Risk Factor Surveillance System may be found on the website of the CDC. http://www.dcd.gov/brfss/

interior with a cargo trained

Local mental health centers http://dsamh.utah.gov/mental-health/#box1

Utah Psychological Association website has place for provider referrals

https://utpsych.org/directory

Depression

The DSAMH is the state agency responsible for ensuring that mental health services are available statewide. The DSAMH also acts as a resource by providing general information, research results, and statistics to the public regarding substances of abuse and mental health services. The DSAMH contracts with Community Mental Health Centers (CMHC) to provide these services and monitors these centers through site visits, a year-end review process, and a peer review process.

Address:

Department of Human Services
Division of Substance Abuse and Mental Health
195 North 1950 West
Salt Lake City, Utah 84116
Phone: 801-538-3939
Fax: 801-538-9892

http://www.dsamh.utah.gov

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA)

http://www.samhsa.gov

National Institute of Mental Health http://www.nimh.nih.gov

Suicide

All Counties, 24 Hours:

National Suicide Prevention Lifeline (800) 273-TALK (8255)

Mobile Crisis Outreach Team—Salt Lake County 801-587-3000

Man Therapy

http://mantherapy.org/

QPR courses

http://www.qprinstitute.com/

National Alliance on Mental Illness (NAMI) Utah

http://www.namiut.org/

801-323-9900

Toll Free 877-230-6264

Utah Suicide & Crisis Hotline

http://www.suicide.org/hotlines/utah-suicide-hotlines.html

The SafeUT Crisis Text and Tip Line is a statewide service that provides real-time crisis intervention to youth through texting and a confidential tip program – right from your smartphone. Licensed clinicians from the University Neuropsychiatric Institute's 24/7 CrisisLine call center respond to all incoming chats, texts, and calls by providing supportive or crisis counseling, suicide prevention, and referral services. We can help anyone with emotional crises, bullying, relationship problems, mental health, or suicide related issues. The SafeUT app can be downloaded at: https://healthcare.utah.edu/uni/programs/safe-ut-smartphone-app/.

Permission to Grieve: For Survivors of a Loved One's Suicide

http://health.utah.gov/vipp/pdf/Suicide/ grievebooklet final0605.pdf

Available Services/Resources (continued)

Utah Suicide Prevention Coalition

http://utahsuicideprevention.org/

American Foundation for Suicide Prevention:

https://www.afsp.org/

Utah Violent Death Reporting System

http://www.health.utah.gov/vipp/topics/nvdrs/

Utah Violence and Injury Prevention Plan

http://www.health.utah.gov/vipp/pdf/Combined%

20plan Draft.pdf

Suicide Prevention Resource Center

http://www.sprc.org/states/utah

Centers for Disease Control and Prevention

http://www.cdc.gov/ViolencePrevention/suicide/

Substance Abuse and Mental Health Services Administration

http://www.samhsa.gov/prevention/suicide.aspx