

The OHA Suicide Prevention Team includes:

Jill Swiers Baker and **Shanda Hochstetler** in **Youth Suicide Prevention** (within the Health Systems Division)

Meghan Crane in the Zero Suicide Program (within the Public Health Division)

Emily Watson in Veteran and Military Suicide Prevention (within the Public Health Division)

Deb Darmata in Adult Suicide Prevention (within the Health Systems Division)

Nirmala Dhar in Older Adult Suicide Prevention (within the Health Systems Division)

And here is *some* of what we have been working on since June.

LGBTQ+ Mini-grants totaling \$215,000 were awarded to 18 community organizations across Oregon. Kris Bifulco of AOCMHP led this work alongside the Alliance LGBTQ+ Advisory group. Over 80 applications were received representing 30 counties and heaps of thoughtful community projects.

The Big 6 Suicide Prevention trainings are up and running. Coordinators offer ongoing support and assistance to trainers, coordinate T4Ts, meet regularly together to collaborate and individually with the U of O Suicide Prevention lab to plan evaluation. They are building partnerships with local suicide prevention leaders and finding creative ways to bring suicide prevention programming to every corner of Oregon. Coordinators for the programs are listed below.

Kris Bifulco, AOCMHP, Connect: Postvention An in-person, half-day postvention training teaching adult service providers best practices to respond in a coordinated way in the aftermath of a suicide. AVAILABLE VIRTUALLY.

Liz Thorne, Matchstick Consulting, Sources of Strength Youth-led program to help promote healthy norms and coping skills to fellow peers in a school setting with a focus on hope, help, and strength. AVAILABLE VIRTUALLY.

Tim Glascock, AOCMHP, Applied Suicide Intervention Skills Training (ASIST) A two-day workshop designed for anyone ages 16+ to learn to provide skilled intervention and safety planning.

Crystal Larson, Lines for Life, Question, Persuade, Refer (QPR) A 1.5 hour online or in-person training program for anyone ages 16+ that teaches three easy steps to identify signs someone is thinking about suicide and how to connect them to help. AVAILABLE VIRTUALLY.

Tim Glascock, AOCMHP, safeTALK A half-day in-person training program that teaches anyone ages 15+ how to recognize and engage individuals who might be having thoughts of suicide and how to connect them with community resources.

Maria Gdontakis Pos, AOCMHP, Mental Health First Aid A broad overview one-day training on recognizing the early signs of mental illness, mental health problems, and substance use. AVAILABLE VIRTUALLY.

(Not a Big 6 program, but also worth noting)

Collaborative Assessment and Management of Suicidality (CAMS): "Therapeutic framework for suicide-specific assessment and treatment of a patient's suicidal risk;" "A flexible approach that can be used across theoretical orientations and disciplines for a wide range of suicidal patients across treatment settings and different treatment modalities." AVAILABLE VIRTUALLY.

School Suicide Prevention and Student Wellness Program is also up and running. This collaboration between OHA, Oregon Department of Education (ODE) and Lines for Life supports the implementation of Adi's Act and Section 36 of the Student Success Act. See [Press Release here](#).

In short, this program places four regional School Suicide Prevention and Student Wellness Coordinators who are available to help schools and school districts create, develop, and grow their suicide prevention, intervention, and postvention plans. Kahae Rikeman at Lines for Life is already at work and looks forward to getting the four new coordinators hired and trained in the coming months. Job postings for these positions are available [here](#) and can be shared widely.

OHA is moving a legislative concept forward around:

- requiring medical examiners to report to Postvention Response Leads at the local mental health authorities for youth suicide death
- giving OHA a directive to collaboratively draft a consistent postvention response plan with local mental health authorities

S-PIP Team: OHA's COVID-19 Response Team for Suicide Prevention, Intervention and Postvention (includes the OHA SP Team listed above and other OHA staff representing behavioral health, data and analytics, child welfare, consumer voice, community engagement, equity and inclusion, and other OHA units.)

This team works on four focus areas. Listed below are highlights of some of the many projects of SPIP.

Data collection/availability

- The [most recent report](#) with publicly releasable data is now posted to the Injury and Violence Prevention – Suicide Prevention Data and Analysis webpage [here](#)
- SPIP is also internally monitoring suicide death data across the lifespan in weekly reports from the Medical Examiner's office
- Vital stats has temporarily moved to monthly updates of the manner of death by county of residence 2020 year-to-date [tables](#) due to increased interest during COVID-19

Access to Care

- Support of projects for increasing access to behavioral health care
- Worked with AOCMHP to issue \$215,000 in mini-grants specific to suicide prevention for LGBTQ+ Mini-grants
- Collaboration with Department of Human Services for a webpage and campaign to advertise [resources](#) available for several key concerns (including suicide prevention)
- Collaboration with Lines for Life's YouthLine program, to create a Student Suicide Assessment Line ([SSAL](#)) for school personnel to access a master's level trained person to screen students for suicide risk remotely

Consumer Voice

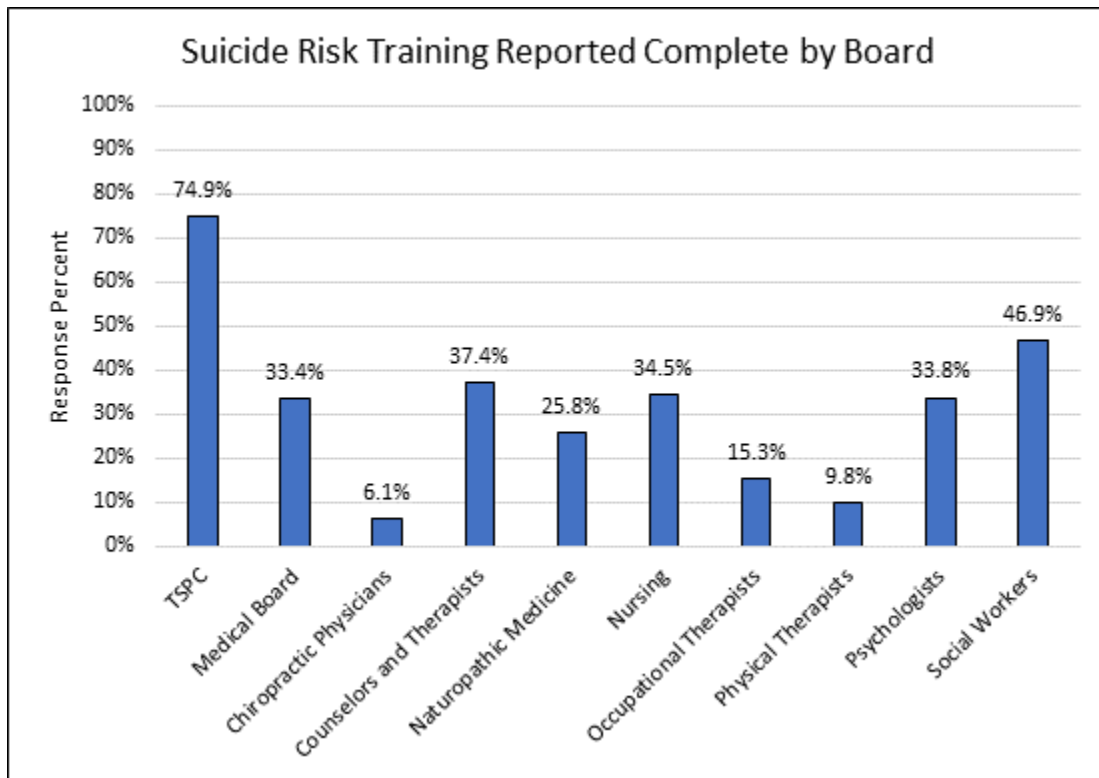
- Convened youth and family focus groups for various projects
- Consumer listening sessions and office hours by Brandy Hemsley
- Connected with updates on Community Partner Outreach Program's listening sessions which reported out consumer and partner feedback gathered from across the stat

Equipping Providers

- Free training opportunities for behavioral and physical health providers around suicide signs, intervention skills, and screening tools
- Issued guidance [document](#) for providers working via telehealth with clients with suicide risk

SB 48 report release

- A report on how many providers self-reported taking a continuing education course on suicide prevention for re-licensure from 2018-2019 is scheduled to be release by September 30, 2020.
- The report will show that the highest percentage of professionals who self-report taking a course on suicide prevention is School Counselors (74.9%) and the lowest was Chiropractors (6.1%)



Percentage of licensees reporting completion of continued education in suicide assessment, treatment or management by licensing board.

- This information may be useful to the Workforce Committee and the named legislative priority for workforce training requirements for behavioral health providers.

OHA Veteran's Suicide Prevention Work

- OHA continues to work with Lines for Life to develop a curriculum and deliver a series of statewide trainings to address suicide in the veteran/military service member population. Trainings are anticipated to being in early 2021.
- AOCMHP and OHA are partnering to offer a veteran-specific MHFA instructor training in November 2020 (announcement and one-pager are attached).
- The VA is asking for feedback from Veterans Service Organizations, Veterans, and community organizations regarding Executive Order 13861, the President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS). The survey is [linked here](#).

September 11, 2020

Dear Alliance to Prevent Suicide,

The heaviness of this time is palpable. And yet, and still, there **are** places of hope and light and good. As we give this OHA update, I am co-housed with Shanda's family while we wait to hear about how the merging fires near my home in Scio react. That community is grieving the loss of one of their 8th grade student's life who didn't get the notice to evacuate on time. The converging fires seem representative of the merging hard things circling around us right now.

When I was younger, my parents didn't allow us to have video games because they were certain my brothers and I would be instantly corrupted. So, when I would go to my piano lessons at my more worldly neighbor's house, I would play her video games while I waited for my turn for a lesson. One game involved these boxy looking villains trying to attack a fortress. You couldn't do anything to kill or hurt them, you just could frantically stack wooden boxes up around the fortress. Every time a villain would get close enough to bump into the wooden boxes, some would fall away, but you were still safe unless all your wooden boxes had been destroyed.

Friends, we have a tall, tall barrier of protective wooden boxes. Especially when we look at the collective picture of what is happening in Oregon. I could give you a thousand examples of helpers, of heroes, of love and support just from my tiny Scio community.

In the context of the hard work that this group does day in, and day out, here are some of the wooden boxes that have been securely been put into place since our last meeting.

- 18 community-based organizations received funding through the Alliance to Prevent Suicide to provide affirming and protective activities to our LGBTQ+ friends in Oregon. These dollars will transform over the next few months into podcast, dance projects, mentoring opportunities, gender-affirming supplies, and direct access to affirming mental health care providers statewide. Among other things. This was masterfully done through the leadership of Kris Bifulco and the LGBTQ+ workgroup of this Alliance.
- 53 Rockstar champions of suicide prevention were submitted for appointment as members. Our very own Annette and Jen organized, contacted, and affirmed a place and space for a downright beautiful combination of new members and those who have been the giants of suicide prevention since the inception of this Alliance.
- Oregon led the conversation with Livingworks (who give safeTALK and ASIST trainings) to advocate for a virtual training option of some sort. Tim and Maria at the Association of Community Mental Health Programs have been instrumental in creatively adjusting to meet a very evident hole in our defense for suicide prevention in Oregon.

- Alliance members have met with state lawmakers to advocate for better training for behavioral health providers and to move forward the policy you all decided upon at our last meeting.
- Our Big Six coordinators have continued to recruit, train, support, and resource communities all across Oregon. Literally, in every county in Oregon.
- The work that Lon Staub, Basic Rights Oregon, this Alliance to Prevent Suicide has moved forward an important step for Adi's Act – which requires school districts to create and improve suicide prevention, intervention and postvention plan. We have money and resources to get to school districts in Oregon. Please contact Kahae at Lines for Life to link your local school district and create reinforced wall in your community.

And although I cannot give you numbers because of data use agreements and to protect the confidentiality of the families that **have** experienced the hardest tragedy of all with the loss of a loved one to suicide, and although this has been harder than any of us knew when the stay-at-home orders began, youth suicide rates have **NOT** increased since the pandemic began. That is good news and should be celebrated as we wrap up suicide prevention week and continue with suicide prevention month. What we are doing matters. It's making a difference. Our work and sweat and tears and passion and good ideas and willingness to set aside ego in the name of collaboration matters. It's making a difference.

Far aside from my role in the Oregon Health Authority, as a human, as a mother, as someone who lives with and loves others with a mental health diagnosis – I am proud of Oregon. And I feel so grateful to be in the place that I am. Literally, today. But also in this work. Thank you for showing up – time and time again.

Holding tightly to hope,

Jill Baker

Youth Suicide Prevention Policy Coordinator

Oregon Health Authority

Fire Related Information and Resources:

You can get real-time updates by following OHA on Twitter [@OHAOregon](#) or on [Facebook](#). Here are some other suggested resources:

- The [Oregon Wildfire Resources](#) webpage compiles all the state's resources in one place.
- Oregon Department of Forestry posts wildfire information on its [Wildfire Information page](#) and on [FlashAlert.net](#).
- Oregon Office of Emergency Management is on [Facebook](#) and [Twitter](#).
- The Public Health Division's [Wildfire and Smoke information](#) website.
- Visit the [Oregon Wildfire Resources](#) webpage to access resources within Oregon state government.
- See the [State of Oregon Fires and Hotspots Dashboard](#) for wildfire information across the state.
- Check [TripCheck](#) for the latest information about road closures in areas impacted by the fires and wind storm.
- Stay tuned to trusted social media sources such as the [Oregon Office of State Fire Marshal](#), [Oregon Department Forestry](#), and your local county emergency management offices.



MENTAL HEALTH FIRST AID FOR VETERANS

Nearly **1 in 4** active duty members showed signs of a MENTAL HEALTH CONDITION, according to a 2014 study.

*National Alliance on Mental Illness
via JAMA Psychiatry*

20

veterans die by
SUICIDE EACH DAY.

U.S. Department of Veterans Affairs

About
18.5%

of service members returning from Iraq or Afghanistan have post-traumatic stress disorder (PTSD) OR DEPRESSION.

*Substance Abuse and
Mental Health Services Administration*

Why Mental Health First Aid?

Mental Health First Aid for Veterans, Military Members and their Families teaches you **how to identify, understand and respond to signs of mental illnesses and substance use disorders.**

This 8-hour training gives you the skills you need to reach out and provide initial support to someone who may be developing a mental health or substance use problem and help connect them to appropriate care.

WHAT IT COVERS

- A discussion of military culture and its relevance to the topic of mental health.
- A discussion of the specific risk factors faced by many service members and their families such as mental and physical trauma, stress, separation, etc.
- How to break down the stigma associated with substance use disorders and mental illnesses like anxiety, depression, post-traumatic stress disorder (PTSD) and more.
- How to reach out to those who suffer in silence, reluctant to seek help.
- Community resource information and support.

WHO SHOULD TAKE IT

- Military members
- Veterans
- Families and friends of military members or veterans

The course will teach you how to apply the ALGEE action plan:

- **Assess** for risk of suicide or harm
- **Listen** nonjudgmentally
- **Give** reassurance and information
- **Encourage** appropriate professional help
- **Encourage** self-help and other support strategies

TO FIND A COURSE OR CONTACT AN INSTRUCTOR IN YOUR AREA, VISIT
www.MentalHealthFirstAid.org OR EMAIL Info@MentalHealthFirstAid.org.



MENTAL
HEALTH
FIRST AID®

“So many people are out there wishing for something better, hoping that help will show up. That’s what Mental Health First Aid is — it is help to get people connected to care and ultimately to get them to a better place.”

—Tousha Paxton-Barnes, U.S. Army Veteran