

Agenda:

- Update on 2021 Legislative session and suicide prevention legislation
- An orientation on how to use public health data for planning local suicide prevention activities by Roger Brubaker, Suicide Prevention Coordinator of Lane County
- Coalition highlight: Curry County with Gordon Clay
- Update on progress on YSIPP 2.0 (Youth Suicide Intervention and Prevention Plan)

Attendance:

1. Annette Marcus
2. Amber Ziring
3. Amy Ruona
4. Anders Kass
5. Caitlan Wentz
6. Charlette Lumby
7. Chelsea Holcomb
8. Chris Hawkins
9. Debra Darmata
10. Elissa Adair
11. Emily Watson
12. Eric Bowling
13. Fran Pearson
14. Gordon Clay
15. Iden Campbell
16. Jenna Oh
17. Jennifer Fraga
18. Jesus Nunez-Pineda
19. Jonathan Hankins
20. Jonathan Rochelle
21. Justin Potts
22. Justin Thomas
23. Kara Boulahanis
24. Kris Bifulco
25. Kristin Fettig
26. Laura Rose Misaras
27. Leslie Golden
28. Lina deMorais

29. Maria Antonia Botero
30. Mary Massey
31. Meghan Crane
32. Mila Rodriguez-Adair
33. Miranda Sitney
34. Nikobi Petronelli
35. Pamela Pearce
36. Rebecca Prassas
37. Roger Brubaker
38. Rosanna Jackson
39. Sarah Rea
40. Scott Vu
41. Shane Roberts
42. Spencer Lewis
43. Staff
44. Sunshine Mason
45. Tanya Pritt
46. Tim Glascock
47. Tina Meikhail
48. Wren Fulner

OEA is also doing a Virtual Advocacy Week March 29 through April 2.

<https://www.oregoned.org/virtual-advocacy-week>

suicide is a rare event so county level deaths by suicide can't be reported by race/ethnicity as this can lead to identification of the one who has passed.

mclark@optionsonline.org Megan Clark-Options for Southern Oregon



Please enter your name, pronouns, title, organization, email and coalition in the chat box. Name one thing going well in your coalition or community.

**Regional Coalitions a
– February 10, 2021**

Core Messages

HOPE

Promote a sense of hope and highlight resilience.

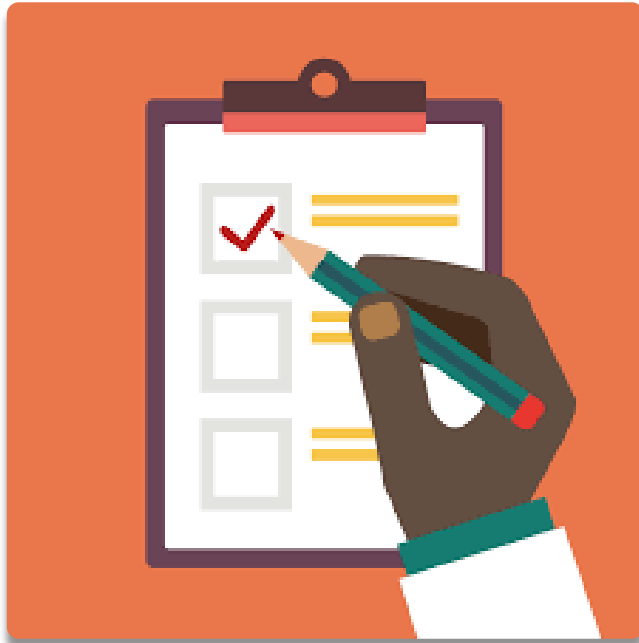
HELP

Make sure the right help is available at the right time.

HEAL

Engage individuals and communities in the healing process after an attempt or suicide

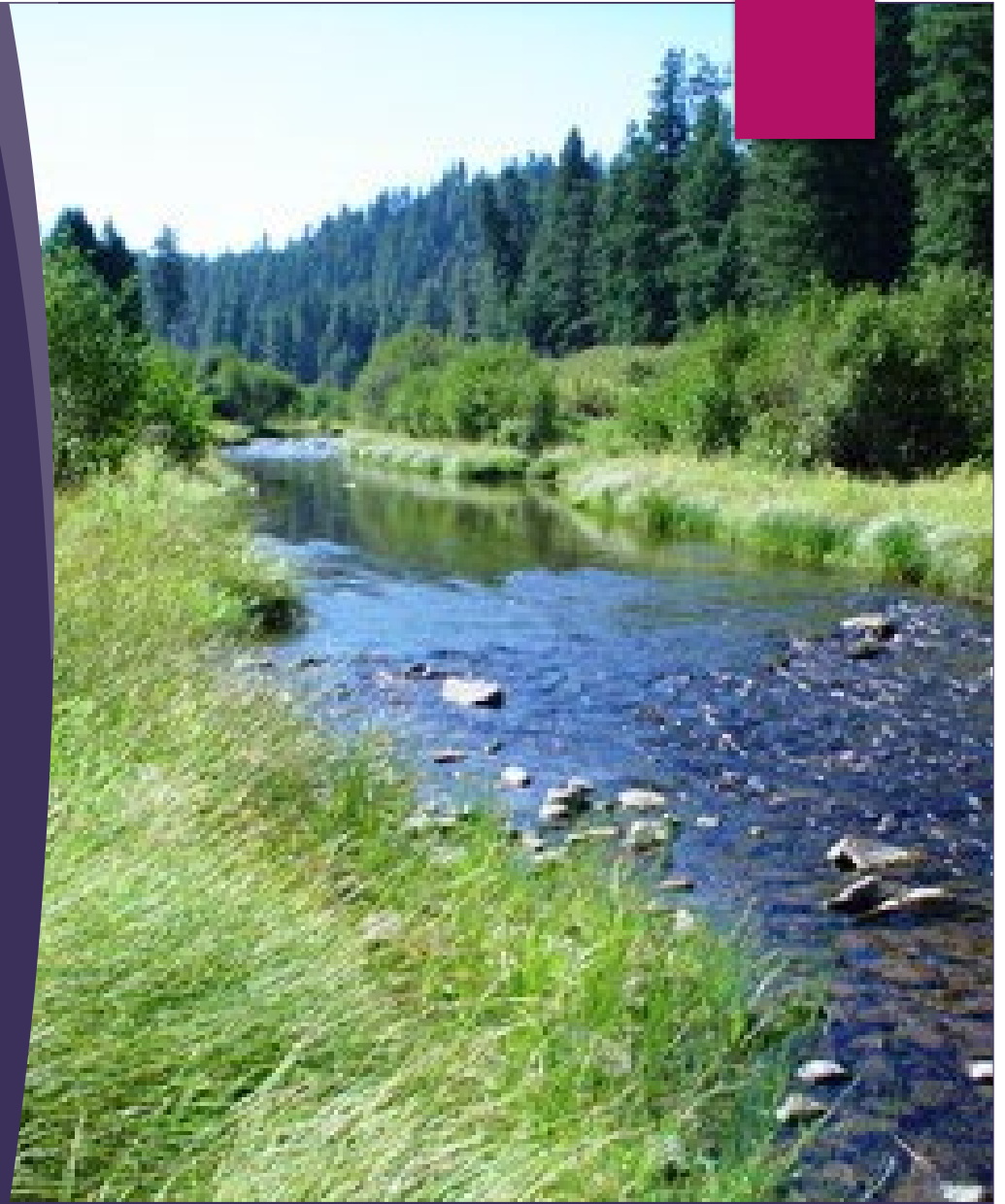
AGENDA



- ▶ Welcome and Introductions (in chat, name, pronouns, organization affiliation if applicable)
- ▶ Update: OHA, Alliance and Legislation
- ▶ Publicly Available Data for Suicide Prevention -- Roger Brubaker
- ▶ Opportunity for Coalition Lead Quarterly – Jonathan Rochelle and Annette Marcus
- ▶ Highlight: Suicide Awareness and Prevention Council of Curry County – Gordon Clay

Angels by Eli Clare

Late afternoons as shadows
overtake the valley, I lay myself
in the riffle where stream
meets river, water warmed all day
and still cold, current pulls, finger bones
tremble. I hang onto rocky bottom
long as I can, then give way,
body rushing downstream
to steadier water. Dive deep
to swim along the green
gold river bed, salmon
nibble, lungs strain. And finally
after the sun has disappeared,
hills leaning closer, I leave
the clasp of angels, return
to weight of bone and muscle



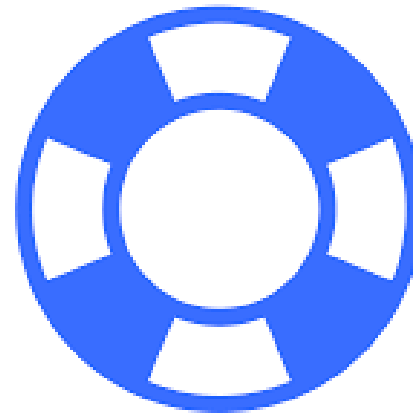
Legislative Update 2021 Session

- HB 3037: Directs medical examiner to report suspected suicides involving decedents 24 years of age or younger to local mental health authority. Directs Oregon Health Authority to develop statewide suicide post-intervention protocol. Authorizes cross-reporting between local mental health authorities. *
- HB2315: Requires behavioral health workers to receive continuing education on suicide assessment, intervention and management *
- SB 563: Modified laws relating to youth suicide intervention and prevention to include children 5 to 10 years of age.
- HB2381: Modifies laws relating to youth suicide intervention and prevention to include children under 10 years of age. *
- SB52: Direct Dept of Ed to develop and implement statewide education plan for students who identify as lesbian, gay, bisexual, transgender, queer, two-spirit, intersex, asexual, nonbinary or another minority gender identity or gender orientation.
- HB 3139: Requires parental disclosure when minor receives suicide risk assessment, intervention, treatment or support services

Capitol Day:
February 15, 2021

JOIN US BY REGISTERING

<https://oregonscd.attendase.com/>



**American
Foundation
for Suicide
Prevention**

Oregon
Alliance
to Prevent Suicide
Hope • Help • Healing

Publicly (and not so publicly) Available Data Sources for Suicide Prevention Efforts in Oregon

Roger Brubaker, MPH
Lane County Public Health
Suicide Prevention Coordinator



Goals of Today's Presentation

- Review surveillance data sources available for the analysis of suicide mortality, attempts and ideation and other behavioral health outcomes in Oregon at the regional, state and county level
- Discuss how Lane County Public Health (LCPH) uses these data to address suicide prevention and engage with different sectors of the community



Suicide Mortality

- Oregon Public Health Assessment Tool (OPHAT)
 - Mortality, rates, prevalence, counts, direct age-adjustment, age stratification, *race/ethnicity, YPLL, geography
- Vital Statistics
 - <https://www.oregon.gov/oha/PH/BirthDeathCertificates/VitalStatistics/death/Pages/index.aspx>
- Oregon Violent Death Reporting System (OVDRS)
 - Over 600 variables related to risk factors, decedent characteristics and circumstances of death (~50 useful/analyzable at the county level)
 - <https://www.oregon.gov/oha/ph/diseasesconditions/injuryfatalitydata/pages/nvdrs.aspx>



Suicide Attempts

- **Oregon Healthy Teens/Student Wellness Survey:**
Youth Risk Behavior Surveillance System (YRBSS)
 - Ability to analyze attempts/ideation with other risk factors to build profiles of youth
 - <https://www.oregon.gov/oha/PH/BIRTHDEATHCERTIFICATES/SURVEYS/Pages/Student-Wellness-Survey.aspx>
- **Oregon Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE)**
 - Hospital and Urgent Care based real-time data to monitor behavior approximating suicide attempts/self-harm



Suicidal Ideation & Mental Health Problems

- Oregon Healthy Teens/Student Wellness Survey
- National Survey on Drug Use and Health
 - Depression, mental health problems, substance abuse, ideation, attempts
 - Data not available at the county level – State and Regional
 - <https://nsduhweb.rti.org/respweb/homepage.cfm>
- Behavioral Risk Factor Surveillance System (BRFSS)
 - County-level analysis for select indicators possible using OPHAT or special request from OHA's Health Promotion and Chronic Disease Prevention (HPCDP) Section



Suicide in Lane County 2000-2016

Trends, Risk Factors and Recommendations



PUBLIC HEALTH
PREVENT. PROMOTE. PROTECT.

Suicide in Lane County 2000-2016

Suicide is a serious public health issue. In Lane County, the suicide rate is **50%** greater than the U.S. national average. Between 2000-2016, 1,079 Lane County residents died by suicide.

The following data points describe who they were, some of the circumstances of their deaths and what Lane County residents can do to provide hope to those at risk, connect them resources and **save a life**.

To view the full report, *Suicide in Lane County 2000-2016: Trends, Risk Factors and Recommendations*, visit preventionlane.org.

1 in 4
deaths by suicide was
a veteran



9 in 10
people who died by
suicide were over
the age of 25

60% of men never
accessed mental
health services in
their lifetime



Over **half** of all
those who died
by suicide used
a firearm

35%
were experiencing
financial hardship
at the time of their
death

1 in 3
people struggled
with a substance
use problem

Communication Warning Signs

- Talking about wanting to die
- Feelings of hopelessness
- Feeling like a burden to others
- Feeling trapped

What you can do
Ask them if they're
thinking of suicide



Connect Them With Resources

Let them know that help is
available. It's OK to ask for
support.



If you or someone
you know is thinking
of suicide, call:

**NATIONAL
SUICIDE PREVENTION
LIFELINE**
1-800-273-TALK(8255)
suicidepreventionlifeline.org



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Postvention Response and Cluster Analysis

- In 2018, 6 Lane County adolescents died by suicide in a period of 6 weeks
- We determined this to be a “suicide point cluster” by comparing the current death rate to previous mortality trends and community input per CDC guidelines
- During our response we monitored attempt data using ESSENCE to determine if there had been an increase preceding and following the identification of the cluster
- This information was critical to our description of events for the media and community stakeholders



Final Thoughts

- “Suicide is the 1st, 2nd, 3rd...leading cause of death for youth in Oregon.” - When we quote this statistic we must fully explain its meaning.
- Beware of “just pounding the drum of death data?”
(Spencer-Thomas, 2018) <https://www.sallyspencerthomas.com/dr-sally-speaks-blog/2018/7/4/from-awareness-to-action-we-need-your-feet-fighting-alongside-us-in-the-suicide-prevention-movement>
- "Statistics are people with the tears wiped away" - Irving Selikoff.



Thank you!

Roger Brubaker

- Suicide Prevention Coordinator

roger.brubaker@lanecountyor.gov



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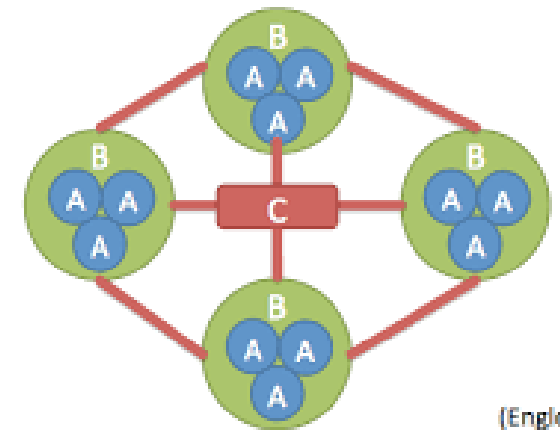
Establishing a Suicide Prevention Coalition Leader Network

SUPPORTING THE TRANSFER OF STATE POLICY AND RECOMMENDATIONS INTO SUCCESSFUL LOCAL IMPLEMENTATION

Supporting Local Implementation

- ▶ How do we help local communities and practitioners coordinate, implement, and sustain comprehensive suicide prevention activities?
- ▶ Bring together coalition leads in an online community (network) of practice to:
 - ▶ Cross-community collaboration –What works? What doesn't?
 - ▶ Share effective resources, protocols, and tools (resource hub)
 - ▶ Provide guidance around policy (Adi's act, HB-3090, etc.)
 - ▶ Collect and centralize local implementation data

Improvement Networks: Accelerate Learning in Practice for Improvement



(Englebart, 1994)

Why This Discussion? Connects to Goals of Our Communication Plan

Goal 1: Broader awareness of youth suicide prevention and intervention efforts being implemented in local communities across the state; and, a systematic communication process for sharing lessons learned, practice and communication resources, and subject matter expertise.

Goal 2: Increase dialogue across geographic areas and use suicide-related messaging to unify the field.

How:

Quarterly Webinars for the field
Quarterly Coalition Leader Meeting for
Network Improvement
Media Resource Packet available online
Alliance Listserv
Website

Potential Network Roll-Out

- ▶ Contact coalition leads and hold initial network meeting (March)
 - ▶ Begin addressing common problems of practice during meetings
 - ▶ Set up a shared “resource hub”
- ▶ Design “evaluation package” for local coalitions to use
- ▶ Have Alliance members participate in local coalition
 - ▶ Organize by emerging and established
 - ▶ Later -consider having more formal relationship with coalitions (an example: designated member from each coalition or each region. Alliance serves as hub of a network of coalitions)
- ▶ Develop system for information sharing
 - ▶ Tools, resources, and recommendations going out
 - ▶ Local data, requests, and questions coming in (or across)

We Value Your Feedback!

https://oregon.qualtrics.com/jfe/form/SV_3wuNqsVFk8ZIUTI

