

# Orientation to the Oregon Alliance to Prevent Suicide

HOPE, HELP AND HEALING



Oregon  
*Alliance*  
to Prevent Suicide



Funded by  
Oregon  
*Health*  
Authority



# Let's Take Good Care of Each Other and Ourselves

Let us know with a private chat if you're having a tough time and need someone to talk with. **USE THE CHAT**

Take a break when you need to – get up and stretch, get yourself a cup of tea or a bite to eat. Please mute yourself unless you have a comment.

Draw, doodles, take notes or pat your cat or dog during the meeting





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Geographically/Politically  
Diverse

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Many Rural and Remote  
Counties

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As of 2020 13<sup>th</sup> highest suicide  
rate in the U.S.

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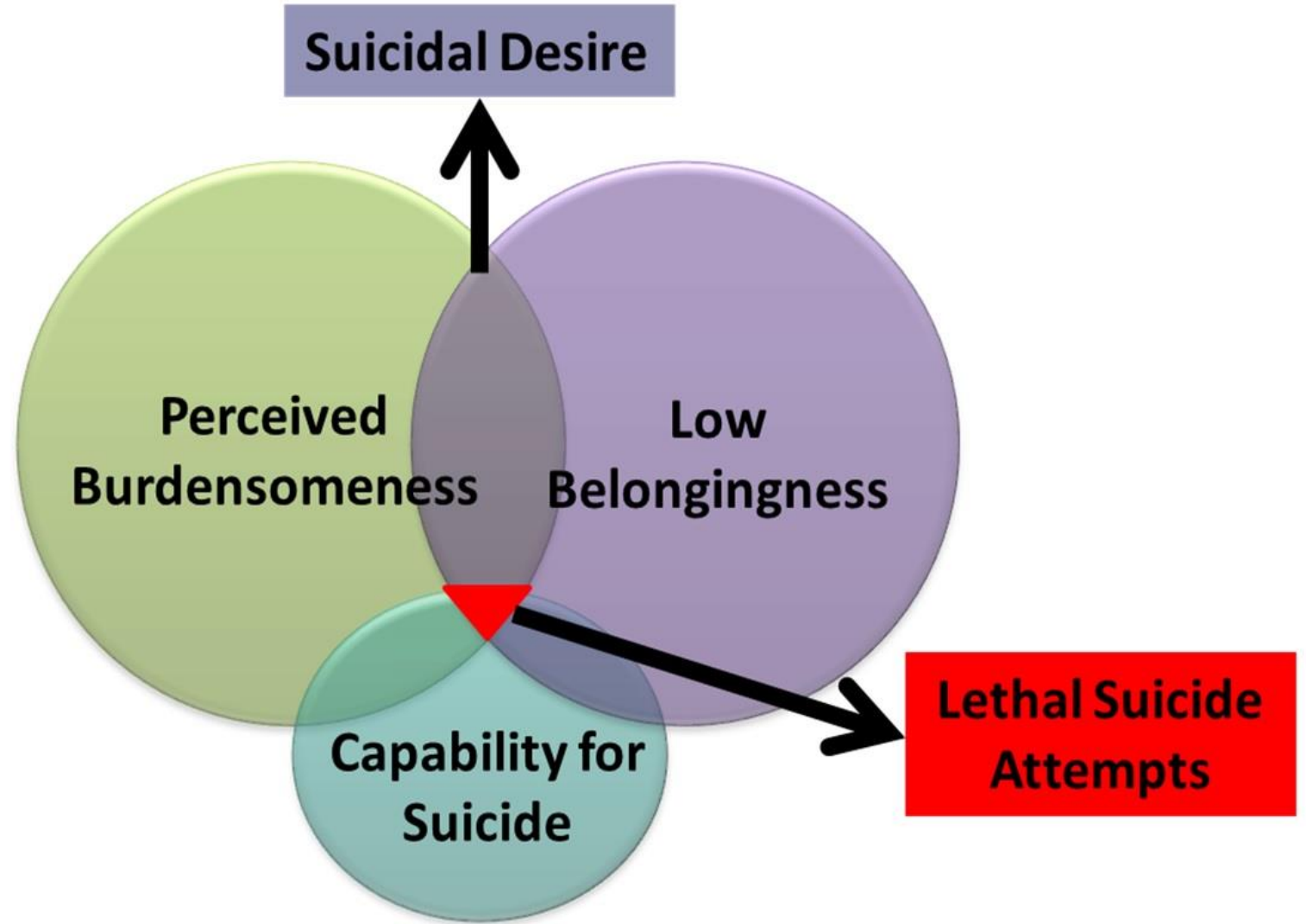
County-based behavioral  
health system

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Youth suicide rate declined  
2019 - 2022 after previous  
alarming increase

# Interpersonal Psychological Theory of Suicide

This figure illustrates the circles of Influence that affect suicide risk and must be addressed in suicide prevention activities.



# Alliance Focus

**Monitoring and advising OHA to  
reduce youth/young adult suicide**

**Equity and liberatory practice**

**Connecting the field of suicide  
prevention in Oregon**

**Policy development and  
implementation**

# Alliance History







Getting  
to Know  
You



## **Vision**

In Oregon, all young people have hope, feel safe asking for help, can find access to the right help at the right time to prevent suicide, and live in communities that foster healing, connection, and wellness.

## **Mission**

The Alliance advocates and works to inform and strengthen Oregon's suicide prevention, intervention and postvention policies, services and supports to prevent youth and young adults from dying by suicide.



After murder of  
George Floyd,  
Alliance leadership  
asked us to deepen  
our equity  
commitment.





## **Equity Statement**

To achieve our vision, we acknowledge the impact of white supremacy, institutionalized racism, and all forms of oppression. The Alliance endeavors to make Oregon a place where suicide reduction and prevention is achieved for people of all ages, races, ethnicities, abilities, gender identities, sexual orientations, socioeconomic status, nationalities and geographic locations.

What does it mean to center youth / young adult voice?

# GROUP AGREEMENTS

What does it mean to center lived experience?

We value being a community of care. Reach in and reach out.

Be in the growth zone. All Teach and All Learn.

Challenge oppression and racism.

Intent does not always equal impact

Replace judgment with wonder - be curious not furious

Be aware of how much you are speaking. Create space for others.

Check for understanding

Speak your truth and be aware of the ways you hold privilege

Strive for suicide-safer messaging and language



## HOPE

Promote a sense of **hope** and highlight resilience.

## HELP

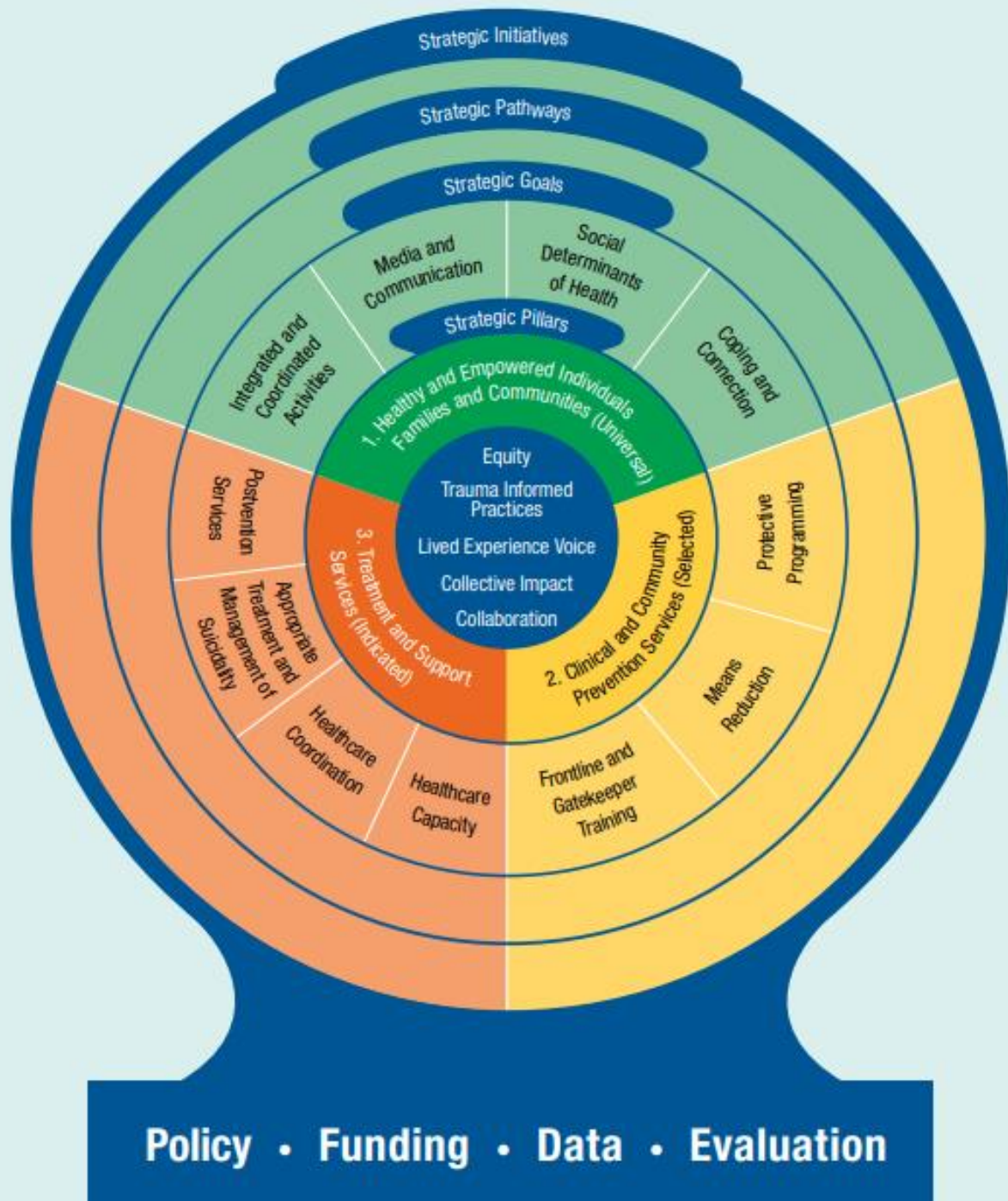
Make it safe to ask for **help** and ensuring that the right **help** is available at the right time

## HEALING

Work with individuals and communities in the **healing** process after an attempt or suicide



**Connection and Transformation**



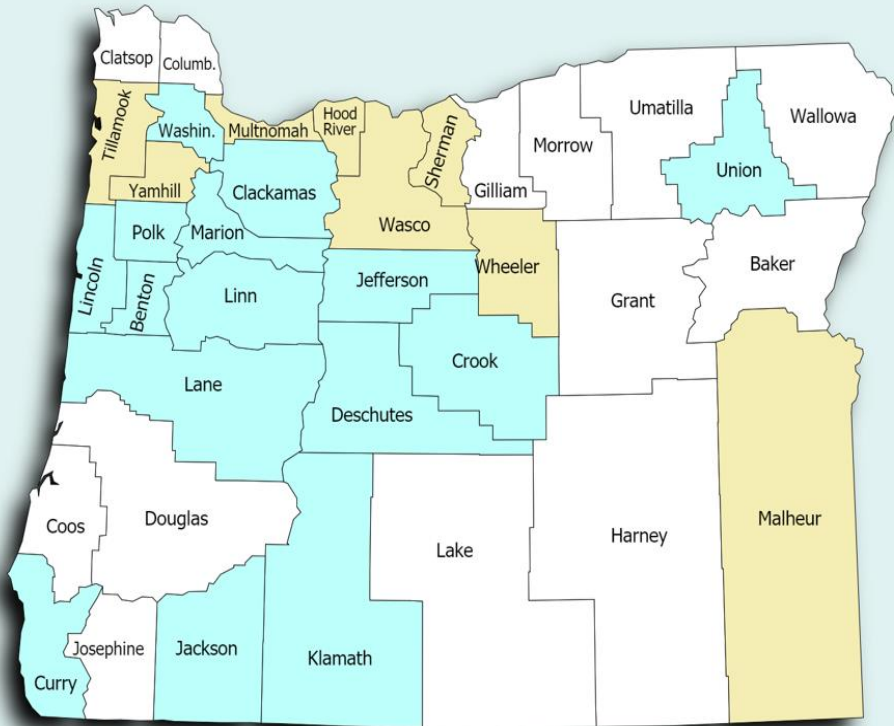
# YSIPP Framework

YSIPP OHA Initiatives Smartsheet

Alliance Specific Initiatives

# Helping Connect the Field

## Regional Suicide Prevention Coalitions



Not connected with the Alliance / No current coalition

Established Coalition Connected with the Alliance

Emerging Coalition Connected with the Alliance

Created with paintmaps.com

Alliance and Regional Suicide Coalitions –  
Connecting the Field and Amplifying our  
Voices

Promote a sense of hope and highlight  
and support strategies for resilience.

Support people to ask for help and  
ensure that the right help is available at  
the right time.

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



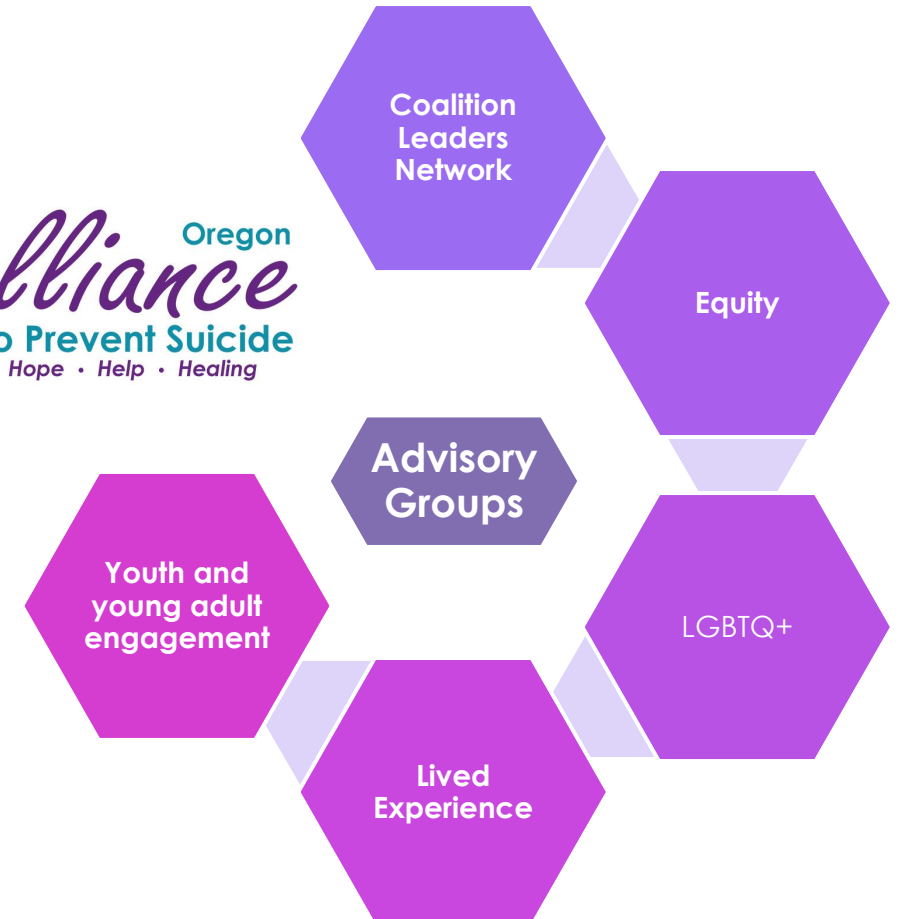
Oregon  
**Health**  
Authority



ASSOCIATION OF OREGON  
COMMUNITY MENTAL  
HEALTH PROGRAMS



*Alliance*  
to Prevent Suicide  
Hope • Help • Healing



# Data & Evaluation Draft Committee Description

As suicide prevention champions, we serve as a community of researchers and data people committed to – a learning collaborative for sharing information, surfacing challenges and problem-solving.

Together, we work to:

Stay up-to-date on the landscape of available data in the suicide prevention world.

Increase access and use the accessibility and usability of suicide-related current and future data related to suicide in Oregon.

Provide formal recommendations and input to the Alliance executive committee and OHA.

Consider a data equity framework to improve data systems and identify disparities in mental health and access to services for all of Oregon's diverse communities in order to address inequities.

Provide technical assistance and consultation to Be a resource for to the Alliance and its Committees, as requested. and a standard-bearer for data and evaluation.

Provide formal recommendations and input to the Alliance executive committee and OHA.

The committee serves as a is a communication forum for between working partners and community collaborators to and their diverse initiatives so together we may better support data alignment and shared strategies across their diverse initiatives.

We are transitioning to a role as a committee where we review and comment on workplans, dashboards, and performance measures for OHA's Youth Suicide Intervention and Prevention Plan.

# Workforce Committee Draft Description

## Purpose

The Alliance Workforce Committee advocates for policies and practices that ensure Oregon's workforce who serve children and youth are well equipped with skills to screen, assess, safety plan, treat and manage suicide risk. We also advocate for mental health promotion and suicide safer work environments.

## What We Do

We are dedicated to increasing the understanding and benefits of suicide prevention in the workplace. Our work centers on improving suicide risk assessment, safety planning, treatment, and management skills for physical and behavioral health providers, those serving people with mental health and substance use challenges, and school staff. We are also committed to collaborating with community partners and local businesses to provide information for employees about mental health promotion, suicide prevention, resources, and crisis supports.

Our work is aligned with the state's Youth Suicide Intervention and Prevention Plan (YSIPP) and is focused on policy and advocacy.



# Additional Key Areas for Engagement

## **Committees (Public Meetings)**

- ▶ Schools Committee – Monitoring and Advising on Adi's Act
- ▶ Transitions of Care –
- ▶ Lethal Means – Reducing Access to Lethal Means
- ▶ Executive
- ▶ Workforce
- ▶ Eval and Data

## **ADVISORY GROUPS**

- ▶ LGBTQ+
- ▶ Equity
  - ▶ White Accountability Learning Collective
  - ▶ BIPOC Caucus
  - ▶ Youth and Young Adult (currently inactive)
  - ▶ Lived Experience (Needs to Regroup)

# WEBSITE IS KEY RESOURCE

[www.oregonalliancetopreventsuicide.org](http://www.oregonalliancetopreventsuicide.org)

Register for quarterly meetings

Read committee descriptions and notes

See latest Alliance publications

Policy updates

Alliance tracking activity tracking too.

# ALLIANCE CHAIRS

Alliance Chair: Galli Murray, Suicide Prevention Coordinator, Clackamas County

Alliance Vice-Chair: Charlette Lumby, Incite Agency for Change

Data & Evaluation Committee Chairs: Karen Cellarius and Sandy Bumpus

Schools Committee Chairs: Justin Potts and Claire Kille

Transitions of Care Committee Chairs: Charlette Lumby and Liz Schwarz

Workforce Committee: Julie Scholz and Don Erickson

LGBTQ+ Advisory: Aubrey Green and Wren Fulner

Lethal Means: Jonathan Hankins, Donna-Marie Drucker, and Pam Pearce

Lived Experience: Laura Rose Misaras



# Policy Success: Instrumental in Passage of 20 Bills

Postvention Legislation – leading the nation. CMHP's central to the effort



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graph TD; A[Postvention Legislation – leading the nation. CMHP's central to the effort] --> B[Behavioral Health Emergency Dept. Visit – require caring contact follow up]; B --> C[Fund Youth Suicide efforts in Oregon ($6 million YSIPP and $4 million school-based services)]; C --> D[Require suicide assessment and management continuing education for behavioral health workforce]; D --> E[Suicide prevention/postvention plan in every school (Adi's Act)];
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Behavioral Health Emergency Dept. Visit – require caring contact follow up

Fund Youth Suicide efforts in Oregon (\$6 million YSIPP and \$4 million school-based services)

Require suicide assessment and management continuing education for behavioral health workforce

Suicide prevention/postvention plan in every school (Adi's Act)

# Policy Priorities – 2023

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Funding the Adult AND Youth Suicide Prevention Plans

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Increase access to quality suicide assessment / management training for health professionals

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988 and crisis response system – support robust system with cell fee

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LGBTQ2SIA+ Affirming Schools and access to gender affirming care

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Safe storage of firearms

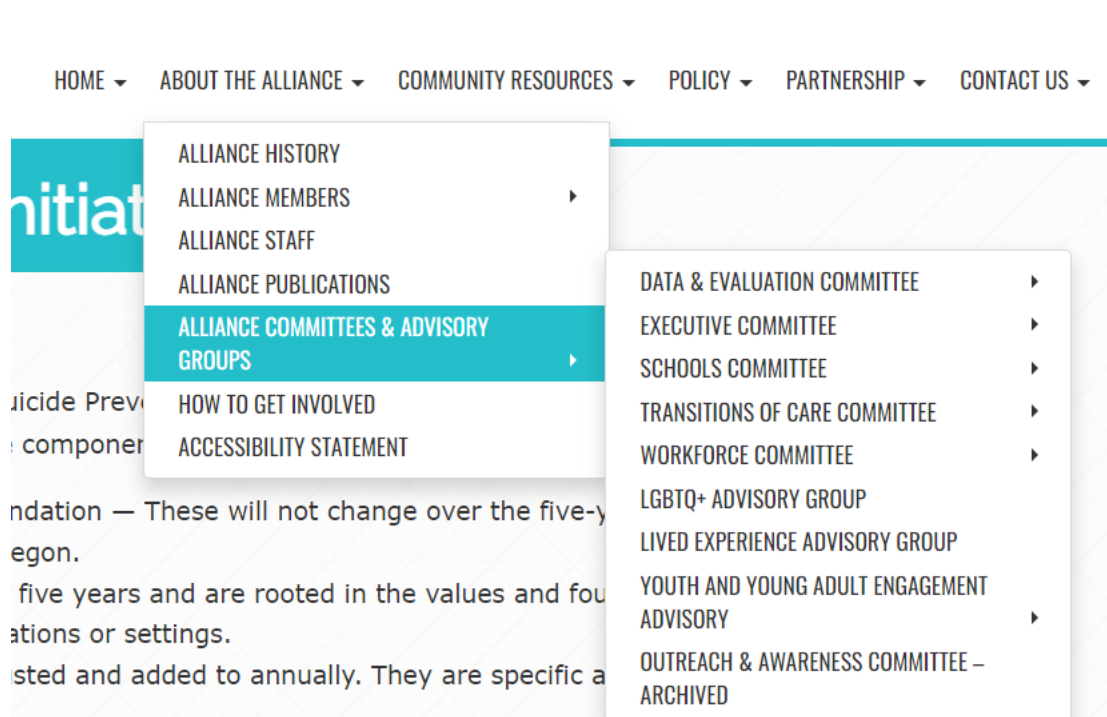


# How to Get Involved with the Alliance



# Website Navigation

## Alliance Website



## Executive Committee

### What is the Executive Committee?

The Executive Committee oversees all committees, workgroups, and activities of the Alliance. They also organize Alliance business, make decisions on behalf of the Alliance between meetings, and make policy recommendations to OHA.

This Committee currently meets the first Monday of the month from 2:30 PM – 4:00 PM virtually. To join, please go to this link <https://us02web.zoom.us/j/89796541408?pwd=OGpPRVArcDhTS1MzWml3YUhaZHV3dz09> and can also be joined by calling 669.900.9128,,89796541408#,,,,\*651946#

Below are the dates that the meetings have been held and when they will be held. Meeting agendas are posted at least seven days before the meeting and meeting minutes will be posted within seven days post meeting.

To find previous meeting minutes, please go [here](#).

If you have questions about this Committee, please email Alliance staff Annette Marcus at [amarcus@aocmhp.org](mailto:amarcus@aocmhp.org).

Fiscal Year 2021 – 2022  
Current and Past Meetings



# Let's Connect



Annette Marcus – [amarcus@aocmhp.org](mailto:amarcus@aocmhp.org)



Jenn Fraga – [jfraga@aocmhp.org](mailto:jfraga@aocmhp.org)



Website: [www.oregonalliancetopreventsuicide.org](http://www.oregonalliancetopreventsuicide.org)



## Quarterly Meeting


September 15, 2023

**WELCOME!** Please share name, pronouns, organization (if applicable) in chat

**Meeting: 9:00 – 12:00**

**Hybrid: Online and In Person in Beautiful Bend, OR**

# Today's Agenda

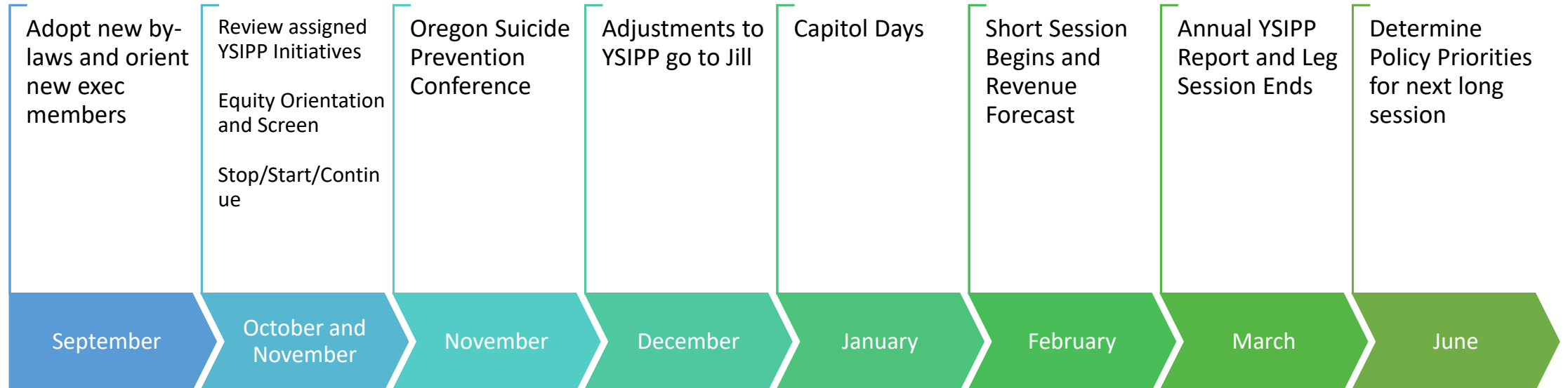
- Welcome and Introductions
  - Committee and Advisory Highlights
  - Small Group Breakouts
  - Alliance Business – Minutes, By-laws and New Executive Members
  - Black Youth Suicide Prevention Initiative
  - YSIPP Updates
  - Staff Updates
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# Group Agreements

- We value being a community of care. Reach in and reach out.
- Be in the growth zone. All Teach and All Learn.
- Challenge oppression and racism.
- Intent does not always equal impact
- Replace judgment with wonder
- Be aware of how much you are speaking.
- Create space for others.
- Check for understanding
- Speak your truth and be aware of the ways you hold privilege
- Strive for suicide-safer messaging and language



# Some Timeline Considerations for Committees





# Committee and Advisory Group Reports

# Schools Committee

- Committee Chairs
  - Justin Potts (he/him) *School Psychologist, Eugene 4J School District*
  - Claire Kille (she/her) *Statewide School Suicide Prevention Manager, Lines for Life*
- Key Focus Area(s)
  - Sustain Positive Committee Engagement
  - Monitor and provide guidance for Adi's Act and evaluate supporting infrastructure

# Schools Committee - Key Accomplishments

## 1. Improve Committee Efficiency and Effectiveness

- Develop **strategic plan** and prioritize initiatives
- Optimize meetings with advance **agenda planning** and focus on high-impact strategic initiatives
- Engage membership, understand expectations and perspectives
- Implement guidance from other advisory groups and committees (equity, youth engagement, infrastructure)

# Schools Committee - Key Accomplishments

## 2. Expanded Methods of Monitoring School Suicide Prevention (Adi's Act)

- Reports from various partners to inform the committee on successes, barriers, challenges, gaps in monitoring
- Big River Programs, Forward Project/Deschutes Co., School Suicide Prevention and Wellness Program (Lines for Life), School Safety and Prevention Specialists (ESD), UO Suicide Prevention lab – OSSPP, LGBTQ2SIA+ Student Success Program (Angie Foster-Lawson), SafeOregon Tipline, Family Acceptance Project, Youth Focus Groups
- Lesson learned: Monitoring of Adi's Act has needed to be separated by policy requirements (ex: posted plans) and implementation of the policy at school (ex: reaching staff and students)



# Schools Committee - Key Accomplishments

## 3. Legislative Advocacy

- HB2656 – Several schools committee members participated in advocating for the Oregon Student Health Survey
- HB2643 – Several schools committee members testified in opposition or neutral of this bill, requiring schools districts to have individualized student suicide prevention plans. Did not pass.

Other:

SB 551 – Relating to secure storage information on school district websites

SB 549 – School based health centers

HB 2477 – Relating to parental rights regarding students

HB 2636 – Requires every district has school-based mental health professional and nurse at each school

HB 2644 - Directs school districts to have policy to respond to mental health needs of students who may have been subjected to abuse.

# Schools Committee - Looking Forward

- September 2023 Report Soon Available
- Improving the visibility of district suicide prevention plans in schools
- Being clear on our intentions and clear direction on how we are monitoring how Adi's Act is reaching students
- **Keeping an eye on possible metrics for measuring success**
- Interest in how the Oregon student survey (HB 2656) will be administered and how the data will inform us
- Determine how the equity screening tool fits into our committee's work
- Hearing from more schools and districts

# Workforce Committee

- Committee Chairs
  - Don Erickson (he/him) *Oregon Department of Human Services*
  - Julie Scholz (she/her) *Oregon Pediatric Society*
- Key Focus Area(s)
  - Monitoring HB2315 Implementation
  - Small Steps Project launch
  - Training for healthcare providers – legislation?
  - Promoting various suicide prevention trainings

# Workforce Committee – Key Accomplishments

- Launching Small Steps and Partnership with AFSP
- Sponsored SB818 to require healthcare providers to take suicide assessment and treatment training. (Alas, did not pass)
- Support development of training for Traditional Healthcare Workers

# Workforce Committee – Key Challenges

- Reaching 18-24 year olds in workforce
- Tracking and assessing effectiveness of HB2315
- Opposition by healthcare providers to mandated suicide prevention training
- Lack of champion in the business sector
- Few culturally specific suicide prevention trainings available



# Schools Committee - Looking Forward

- Continue to promote Suicide Prevention trainings for the Behavioral Health workforce. (HB 2315 follow up)
- Evaluate Small Steps pilot to determine adding to the YSIPP
- Collect data on what education has the most impact for practitioners' needs and for their clients.
- Possibly reach out/partner with specific “high risk” professions
- Address lack of suicide prevention assessment and treatment training in masters and doctoral programs for healthcare and behavioral healthcare providers

# Data & Evaluation Committee

- Committee Chairs

- Karen Cellarius (she/her) *Sr Research Associate, PSU Regional Research Institute. Director, PSU RRI Human Services Implementation Lab*
- Sandy Bumpus (she/her) *Executive Director Oregon Family Support Network*

- Key Focus Area(s)

1. Increasing access and use of suicide related data in Oregon
2. Staying up-to-date on the landscape of available data
3. Providing technical assistance & consultation to the Alliance and its Committees, as requested and a standard bearer for data and evaluation
4. Developing a data equity framework to improve data systems and to ID disparities in MH & access to services for all of Oregon's diverse communities in order to address inequities.
5. Providing formal recommendations and input to the Alliance Executive Com. & OHA.

# Data & Evaluation Committee - Key Accomplishments

1. Developed and prioritized committee focus areas
2. Developed work plan for coming year
3. Added list of data sources to D&E agenda to help guide work
4. Reviewed OHA's 2022 YSIPP Report and accompanying UO YSIPP Evaluation Report from a data and evaluation perspective

## ***Reporting challenge for OHA and Partners:***

Amount and breadth of YSIPP initiatives make it difficult to gain a picture of overall implementation and provide input on next steps

## **YSIPP Report Recommendations:**

Attempt to derive a 1-2 page snapshot of YSIPP progress

Break "Achieved" category of progress into "Ongoing" and Complete"

Integrate evaluation data into report sections when reporting progress

A logic model may help track activities and outcomes

Consider asking Alliance committees & affinity groups to review draft of next report from their perspective, possibly to be compiled into a formal response or cover letter for the report from the Alliance

# Data & Evaluation Committee - Looking Forward

## **2023-2024 Workplan**

1. Assigned lead on expanding existing spreadsheet of suicide-prevention research (include other information sources and links to recordings of past trainings)
2. Assigned workgroup lead on data equity framework
3. Inviting broader representation on committee (including more members with lived experience to help with understanding and data interpretation)
4. Offering more TA to Alliance & Committees, including:
  - Making data & resource spreadsheet available on Alliance web-page
  - Ensuring all future mini grants have a data/evaluation component
  - Assigning liaisons to other workgroups/committees, if requested
  - Standing agenda item where TA requests can be reviewed by full committee (contact Jenn Fraga or co-Chairs w/requests)

# Transitions of Care Committee

- Committee Chairs
  - Charlette Lumby (she/her) *Alliance Co-Chair, Incite Agency for Change*
  - Liz Schwarz (she/her) *Oregon Youth Authority*
- Key Focus Area(s)
  - Original Focus: Advocating for passage of HB 3090
    - Continued monitoring implementation of HB 3090: OHA Updates
  - Current focus: Leadership strategic planning meeting
    - What does TOC (Transitions of Care) look like moving forward?

# Transitions of Care Committee – Key Accomplishments

- HB 3090 advocacy and monitoring of implementation
  - Re-survey of Emergency Departments: Compliance rates (2nd - 100%)
  - Provided feedback to OHA on responses from hospitals for ongoing monitoring
  - Now: Continued monitoring
- Review of YSIPP 2021-2025 and TOC work
  - Will be included in strategic planning session
- Committee members expertise, strengths, and engagement
  - ED Boarding Rate presentation from OHA



# Transitions of Care Committee - Looking Forward

- Key Challenges
  - TOC: On hold for a year prior to Charlette and Liz's Leadership (leadership in the first year)
  - Identifying next steps: in moving forward what are realistic and purposeful actions with direct community impact that will continue to help decrease youth suicides.
- Equity Needs: Absence of youth representation. Utilize Alliance focus groups.
- Specific Projects: TOC Strategic planning meeting prior to October meeting.

# LGBTQ+ Advisory Group

- Committee Chairs

- Aubrey Green (she/her)
- Liz Schwarz (she/her)

- Key Focus Area(s)

- Promote affirming schools, families and culture for LGBTQ+ youth to reduce youth suicide.
- Equip allies with tools to fight toxic rhetoric and misinformation.



## LGBTQ2SIA+ Youth in Oregon

- LGBTQ youth who live in a community that is accepting of LGBTQ people reported significantly lower rates of attempting suicide than those who do not.
- The vast majority of LGBTQ students (more than 88%) in Oregon regularly heard anti-LGBTQ remarks. 61% of LGBTQ+ Students report being bullied. 43% of transgender students report seriously considering suicide. LGBTQ+ students are 3x more likely to miss school due to fear.
- About 1 in 4 Oregon youth experience conflict at schools based on race, ethnicity, culture, religion, gender, sexual orientation, or disability.
- About 8% of Oregon 6th, 8th, and 11th graders are trans or gender-expansive.
- About 1/3 of Oregon youth identify with an LGB+, other, or unsure sexual orientation.

# LGBTQ+ Advisory – Key Accomplishments

- LGBTQ Mini-Grant Process (Kris Bifulco)
- Letters Advocating for LGBTQ Affirming Policies and Statements – OHA and Oregon School Board Association
- Presentations at Conferences (We Can't Wait)
- Harm Reduction to Liberation Spectrum
- Family Acceptance Trainings

# LGBTQ+ Advisory – Key Accomplishments

- Developed Key Resources

[LGBTQ2SIA+ Public Comment Guide - full document](#)

[LGBTQ Comment Guide One Page Overview](#)

[Affirming Students Through Inclusive Staff Policies: Policies for Trans and Gender Diverse Staff Belonging](#)

Special thanks to Siche Green, Kris Bifulco, Lake and LGBTQ+ Grantees

# Summer Gathering

## Call to Action: Commit to Right Action to Defend LGBTQ2SIA+ Youth



Write and meet with local state legislators to inform them about the issues impacting our communities



Track local school board meetings—and show up to support Student Success Plan and Social Emotional Learning



Attend protests, demonstrations, and other public events that raise awareness



Uplift, connect, and support existing work and leaders in the community.



Create and organize space for community care and healing, resource sharing, mutual aid, creating safety nets, and investing in community building.



Normalize conversations around self-care, boundaries, mental health and well-being.



Call in new allies, including the unlikely ones.

# Lethal Means Safety Committee

- Committee Chairs

- Jonathan Hankins (he/him) *Suicide Rapid Response Coordinator at Lines for Life*
- Pam Pearce (she/her) *Founder of Harmony Academy, Substance Use Subject Matter Expert*
- Kelie McWilliams (she/her) *Executive Director Rural Engagement Project*

- Key Focus Area(s)

- Providing recommendations to OHA on lethal means safety. Committee workplan can be found [here](#).
- Partnering with safer storage advocates for short session legislation



# Lethal Means Safety – Committee Key Accomplishments

- Recently became an Alliance Committee
- Completed YSIPP Initiative – submit Committee workplan and recommendations to OHA on lethal means
- Looking at 2<sup>nd</sup> and 3<sup>rd</sup> leading means used in suicide deaths
- Partnering with Oregon Firearm Safety Coalition on upcoming safe storage legislation

# Lethal Means Safety Committee - Looking Forward

- Key Challenges – difficult to find recommendations around a specific means; data challenges
- Legislative Priorities – Safe Storage options, working with safer storage legislation advocates

# Equity Advisory Group

- Co-Chairs – Michelle Bangen, she/her, Incite Agency for Change  
Angela Perry, she/her, AFSP

## **Key Focus Areas:**

- 1) Transparency in internal process
  - Equity Agreements, On-boarding
  - Centering equity in recommendations
- 2) Collaboration and Collective Impact
  - Partner mapping - Starting with Youth Organizations
  - Develop targeted, intentional partnerships (e.g. OFSN, Centro Latino, BRO)
  - Build community of care - BIPOC Caucus/WALC
- 3) Demystifying systems and breaking down barriers
  - Coalition work
  - Low-barrier grants
  - More to be determined

# Equity Advisory-Key Accomplishments

- Develop equity-driven internal processes e.g. group agreements
- Created suicide prevention [Equity Screen](#) available on website
- Established two ongoing caucuses:

## BIPOC Caucus

Supported Suicide Prevention Summit: Using Cultural Protective Factors in Black and Indigenous Communities to Prevent Suicide

Ongoing support, connection and community care

## White Accountability and Learning Caucus

Supported Summit above

On-going learning together (currently My Grandmother's Hands)

# Equity Advisory-Looking Forward

- Strengthen Onboarding
- Provide support to Alliance committees re centering equity in recommendations
- Support coalitions and others in implementing the equity screen
- Continued learning and community care
- Develop new partnerships and identify areas for shared advocacy

# Small Group Reflections



1. What stood out for you about the committee activities e.g. questions, excitement, ideas?
2. How did the committee activities, challenges and plans for moving forward align with or relate to the work you're doing with the Alliance and/or your individual priorities and interests?

# Youth/Young Adult Nominees

## **Aaron Townsend (19)**

- I'm a nineteen-year-old college student who has years of dealing with suicidal ideation under my belt. I am friends and have been partners with many other suicidal and more broadly neurodivergent people for most of my teenage life. Thus, despite not having a background in psychological research or legislative action or even loud advocacy, I am very personally invested in the subject of suicide and what is done about it on a social level. That is why I want to be able to vote on the executive actions of the Alliance - such is simply the most direct application of my experiences.

## **Aditi Khanna (17)**

- I am a high school student and I have been volunteering at Oregon YouthLine, a teen-to-teen crisis line, for over 2 years. I am a co-leader for the Legislative Committee at YouthLine, have worked with AFSP at Capitol Days and provided testimony, and have worked as an intern for Next Up which has allowed me to receive training on how to be a purposeful advocate and work to pass bills to help correct social injustice.

## **Tanvi Vemulapalli (17)**

- I am a high school student at Jesuit High School and I have been volunteering at Oregon YouthLine, a teen-to-teen crisis line, for over 2 years. I am ASIST trained. I am a co-leader for the Legislative Committee at YouthLine which aims to promote improvements/pass new bills regarding mental health. I believe that mental health has a lot of stigma around it and I want to help change that. As a teenager in today's fast paced society, I see that many resources are needed to offer the best mental health support for different groups of people. I want to help make that change because I believe mental health should be cared for. I believe that I offer a unique perspective as a teen and as a person with a lot of prior mental health advocacy experience.



# Lived Experience Nominees

## **Siche Green-Mitchell**

- As a trans queer man with a disability, educator, and counselor for youth I have seen how systemic injustice and lack of proactive suicide prevention can lead to my people dying by suicide along with many other communities. I am passionate not only about the outcome, but the approach that the OAPS takes to achieve its goals. As I have engaged with OAPS for the past three years I've seen and felt the care and inclusion it shows members of all backgrounds and beliefs as well as the depth and breadth of initiatives. I would like to continue to work with OAPS on the executive council and use my lens to add to the scope of experience, backgrounds, and skills that makes this alliance thrive. Thank you for considering my nomination.

# At Large Nominees

## **Mary Massey**

- Suicide Prevention/Mental Health Coordinator, Sherwood School District. Serves on both the Transitions of Care and Schools Committees and provided powerful testimony for the Alliance at school-related hearings during legislative sessions.

## **Craig Leets**

- YouthLine Deputy Director at Lines for Life and is representing the organization with the Alliance. Craig has participated in activities with the Alliance since he began in his current role in January 2022 and has attended various committee and task force meetings in addition to regularly attending the White Accountability and Learning Community. Craig would like to join the Executive Committee to help advance the mission of the Alliance, elevate youth voice whenever possible, and connect statewide policy agendas with clinicians who are doing suicide prevention and intervention work on the ground.

# Voting Members

Aaron Townsend	Craig Leets	John Seeley	Lukas Soto	Sara Gelser Blouin
Aditi Khanna	Don Erickson	Jon Davies	Mary Massey	Shane Lopez
Amber Ziring	Donna-Marie Drucker	Julie Scholz	Mike James	Siche Green-Mitchell
Amy Ruona	Erin Porter	Justin Potts	Monica Parmley-Frutiger	Spencer Lewis
Angela Perry	Frankie Pfister	Karen Cellarius	Pam Pearce	Stephanie Willard
Anna Silberman	Galli Murray	Karina Smith	Pedro Pacheco	Tanya Pritt
Antonia Alvarez	Gordon Clay	Kelie McWilliams	Rene Kesler	Tanvi Vemulapalli
Cassandra Curry	Iden Campbell	Kirk Wolfe	Rosanna Jackson	Tim Handforth
Charlette Lumby	Ishawn Ealy	Laura Rose Misaras	Sandy Bumpus	Wren Fulner
Christina McMahan	Jamie Gunter	Liz Schwarz	Sarah Rasmussen	

# Questions – Need Assistance

- Annette Marcus – [amarcus@aocmhp.org](mailto:amarcus@aocmhp.org)
- Jenn Fraga – [jfraga@aocmhp.org](mailto:jfraga@aocmhp.org)

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# Black Youth Suicide in Oregon

These data represent non-Hispanic black youth ages 5-24 in Oregon (dates vary).

## Emergency Department Visits

Source: Administrative Discharge Data - Oregon Association of Hospitals and Health Systems

African American females had the highest rates of visits to emergency departments for suicide dation and attempts (2020-2022)

African American females had the highest rates of hospitalizations for suicide ideation and attempts (2020-2022)

## Hospitalizations

Source: Administrative Discharge Data - Oregon Association of Hospitals and Health Systems

## Youth Suicide Rate

Source: CDC WONDER

Oregon’s youth suicide rate decreased 27% from 2018 to 2021.

This decrease is largely due to decreases in the number of deaths of youth identified as White.

36 fewer White identified youth died by suicide in 2021 (59 deaths) compared to 2018 (95 deaths).

For youth of color (includes all race/ethnicities other than White), no reduction in suicide occurred in 2021 (31 deaths) compared to 2018 (31 deaths).

**In 2021, non-Hispanic black youth deaths accounted for 7.6% of Oregon’s youth suicides - yet black youth represent 2.31% of Oregon’s youth.**

Source: Oregon Public Health Assessment Tool (OPHAT), ORVDRS

## Where are black youth in Oregon?

Source: Oregon Public Health Assessment Tool (OPHAT)



There are black youth in every county in Oregon.

The counties with the highest population of black youth (in order) are:

- Multnomah
- Washington
- Lane
- Marion
- Clackamas

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# Update on Black Youth Suicide Prevention Work

Jill Baker, Youth Suicide Prevention Policy Coordinator





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# My why.



Oregon  
Health  
Authority



## Telling the data story – specific to black youth:

- African American females had the highest rates of visits to emergency departments for suicide ideation and attempts(2020-2022)
- African American females had the highest rates of hospitalizations for suicide ideation and attempts(2020-2022)
- In 2021, non-Hispanic black youth deaths accounted for 7.6% of Oregon's youth suicides -yet black youth represent 2.31% of Oregon's youth.
- National data showing Black youth as having the fastest growing youth suicide rate.

# Policy Academy Team



## **SAMHSA Policy Academy:**

- Oregon was invited by SAMHSA
- Travel team went to Baltimore in July 2023
- SAMHSA will check back in with Oregon in October
- Main goal – launch a Black Youth Suicide Prevention Coalition
  - One main initiative in prevention, intervention and postvention to center work for first year
  - Travel team transitioned to a launch team

## What we are working on:

- Black Youth Suicide Prevention Coalition launch team support
  - Largely led by travel team that went to SAMHSA policy academy
  - Charter, values, group agreements
  - OHA support currently is Nikobi Petronelli and Jill Baker
  - Town Hall, grant application, invite to others to join efforts
- Life Sustaining Practices Pilot Project
  - OHA support from Dishanta Kim, Nikobi Petronelli, Walter Bailey, Jill Baker and Shanda Hochstetler (and our managers)

# How can you stay informed and become involved?

- Email [jill.baker@oha.oregon.gov](mailto:jill.baker@oha.oregon.gov) to be added to our contact list
- Watch the YSP listserv (from Meghan Crane) for Town Hall information and invitation
- For black providers or adults supporting black youth: Watch the YSP listserv for Info Session invitation for the Life Sustaining Practices Pilot Project fellowship opportunity

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# Youth Suicide Intervention and Prevention Plan: 2024 Initiatives

Presented to  
Alliance to Prevent Suicide – September 15, 2023

Jill Baker, OHA Youth Suicide Prevention Policy  
Coordinator [jill.baker@oha.oregon.gov](mailto:jill.baker@oha.oregon.gov)

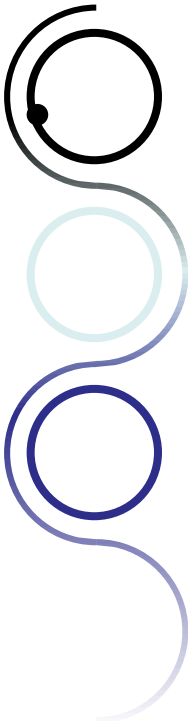


# Purpose of this presentation

- To briefly remind us of how we got here, and how its different than previous processes
- To inform the Alliance to Prevent Suicide about how OHA is organizing the process of gathering feedback for the 2024 youth suicide prevention initiatives
  - From Alliance committees
  - From OHA's Suicide Prevention, Intervention and Postvention subgroups
  - From youth
  - From other advisory groups

# How we got here

## 2020



Assessed the  
YSIPP 2016-  
2020

Gathered  
hundreds of  
pieces of  
feedback

Built the  
Oregon Suicide  
Prevention  
Framework

Ease/impact  
process to  
prioritize  
initiatives

## 2021

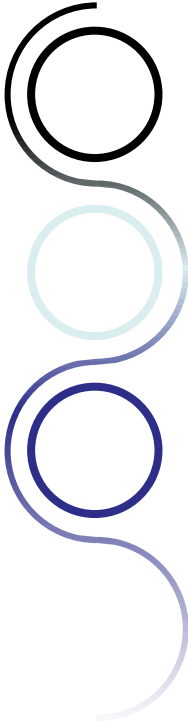


Published 21-  
25 [YSIPP](#)

Named 117  
priority  
[initiatives](#) for  
22-22

Began work on  
YSIPP  
initiatives

## 2022 - 2023



Work continued  
on 117  
initiatives

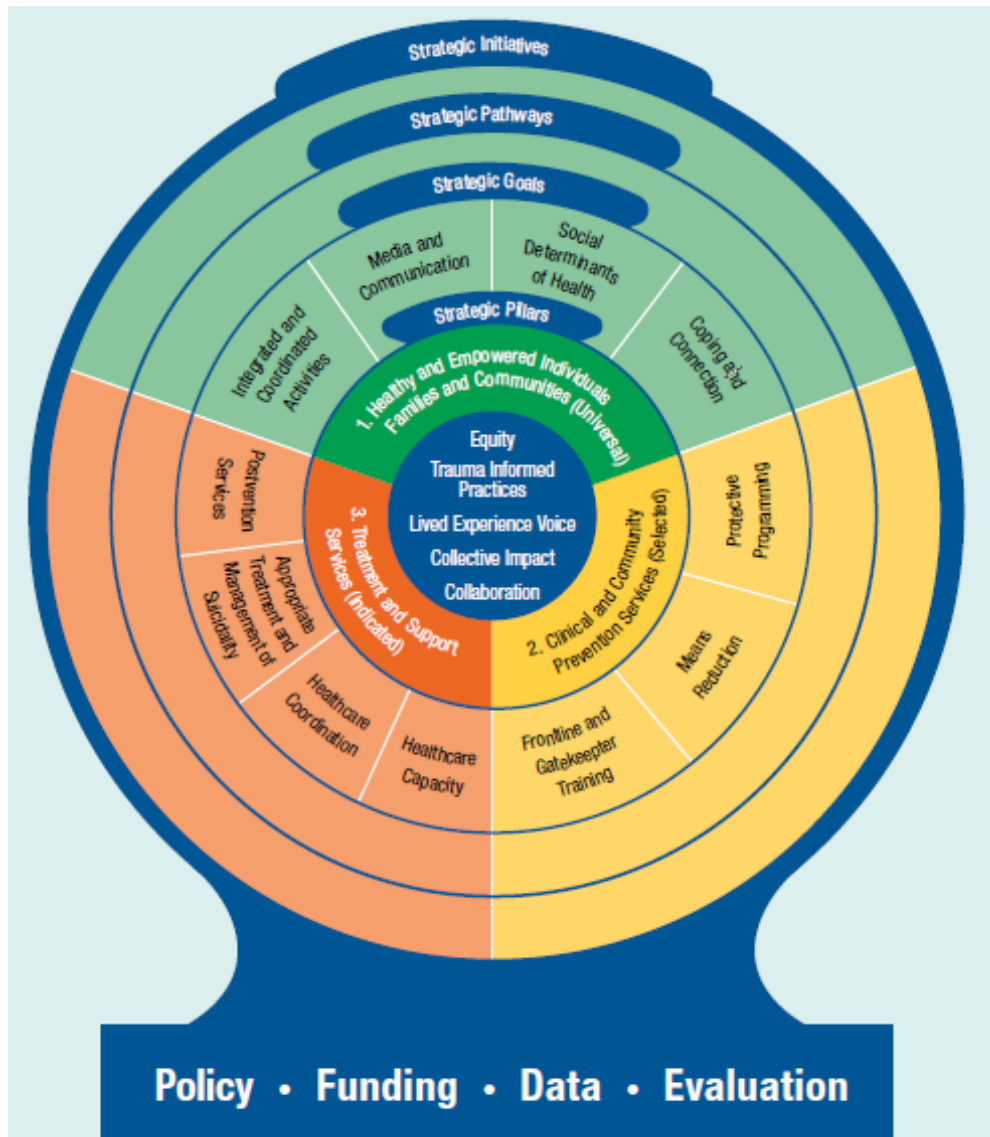
Focused on  
organization,  
tools for project  
management

Assigned lead  
people and  
entities

Decided  
collectively  
what to start,  
stop, continue  
for 2023



# OHA Suicide Prevention Framework



Some tools:

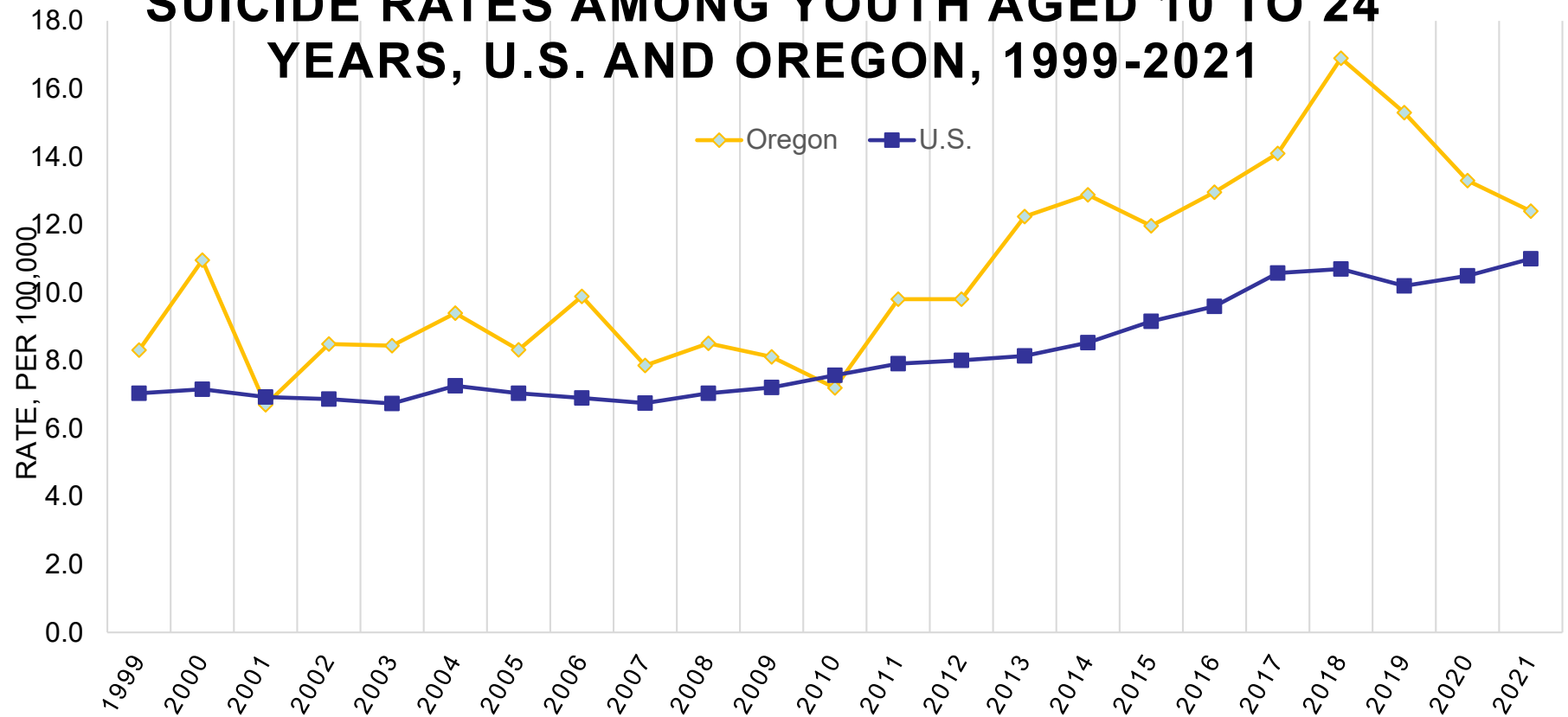
1. Interactive [PDF](#) with Pathways

2. 10 min [video](#) describing OHA's youth suicide prevention tools

# Talking about youth suicide and data

- These data represent human lives, and far too many have been lost to suicide.
- How suicide is measured (rate vs count)
- Statistical analysis with “small” numbers – does not measure impact
- No “perfect” data set – we chose a few to show you today, know that its not a full/complete story

# SUICIDE RATES AMONG YOUTH AGED 10 TO 24 YEARS, U.S. AND OREGON, 1999-2021



Source: CDC WONDER

Year	Number of youth suicides	Suicide death rate (per 100,000)	Rank among 50 states (50 is lowest rate)
2014	97	12.9	12
2015	90	12	16
2016	98	13	15
2017	107	14.1	17
2018	129	16.9	11
2019	116*	15.3	11
2020	101†	13.3	18
2021	95	12.4	22

\* In addition to these deaths among youths in Oregon age 10–24, there were two suicide deaths among children younger than 10 in 2019.

† In addition to these deaths among youth in Oregon age 10–24, there was one suicide death among children younger than 10 in 2020.

Source: CDC WISQARS & OPHAT & WONDER data sets

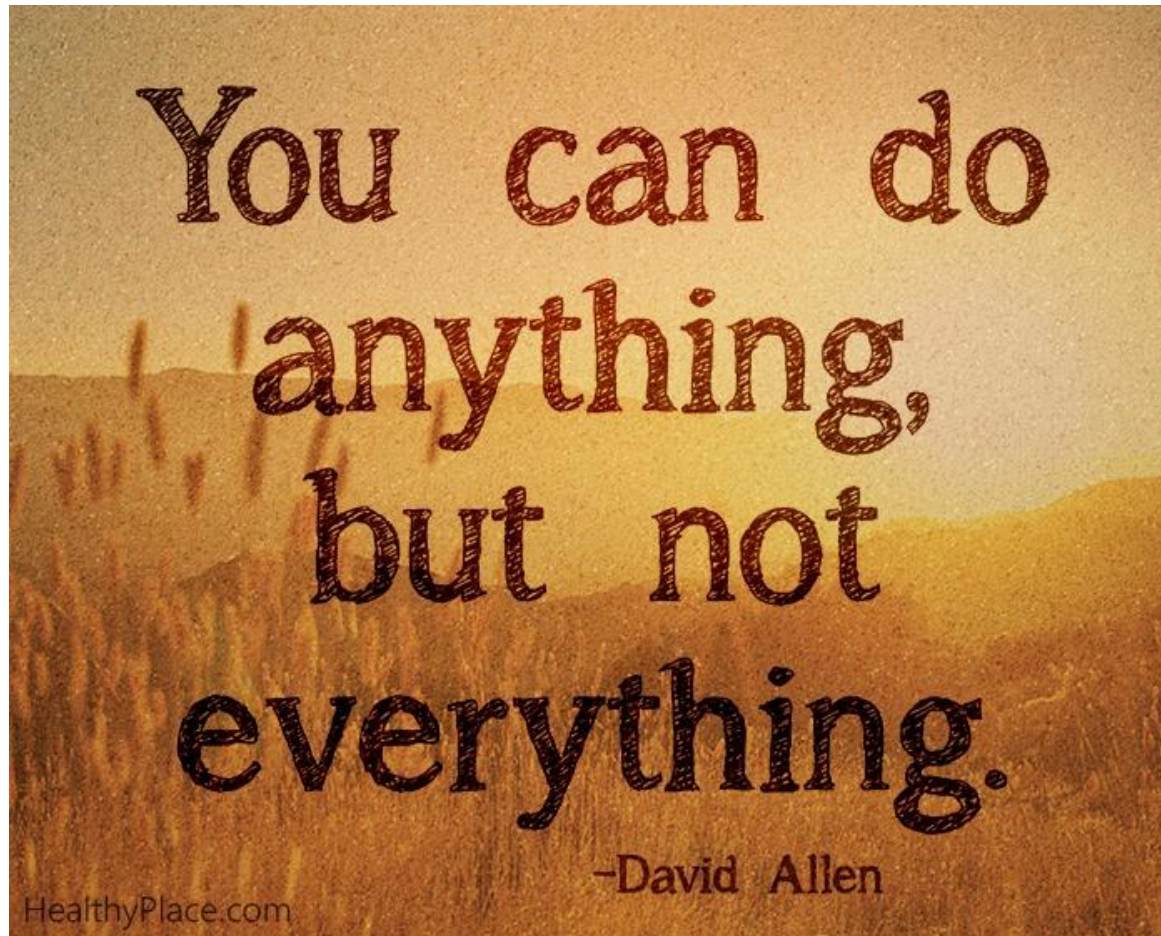
## Number of suicides among youth aged 24 years and younger by year and race/ethnicity, Oregon 2018 - 2021

Race/Ethnicity	2018	2019	2020	2021
	Deaths	Deaths	Deaths	Deaths
Non-Hispanic Am Indian/Alaska Native	3	2	2	1
Non-Hispanic Asian / Pacific Islander	3	1	4	2
Non-Hispanic Black	5	3	1	7
Non-Hispanic two or more races	1	2	4	5
Non-Hispanic White	95	88	76	59
Hispanic, All Races	19	17	13	16
Unknown Race	1	0	0	2
Total	127	113	100	92

Note: Oregon residents who died out of state are not included. Hispanic includes all races.

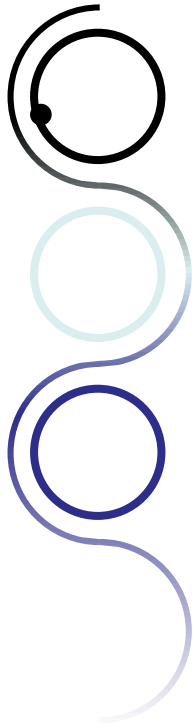
Source: CDC WONDER

# Start, Stop, Continue



# YSIPP Annual Update Roadmap

## September



Leads update progress on 2022 initiatives

OHA presents at Alliance Qrtly

SPIP x3 being “start, stop, continue”

## October



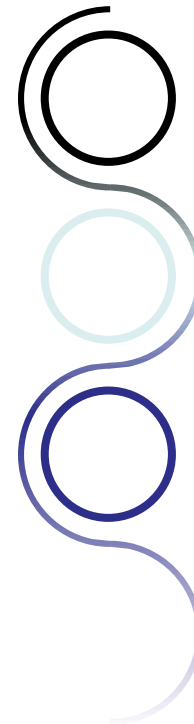
Alliance committees begin “start, stop, continue”

Children’s System Adv Council Input

Oregon Consumer Advisory Council input

Tribal prevention meeting input

## November



Youth Think Tanks/Focus Groups

Alliance committees finalize rec’s for OHA

SPIP x 3 finalize rec’s for OHA

# What am I asking of committees/advisory groups/SPIP teams?:

1. Review of your 2023 YSIPP initiative(s) to assess progress. What's left on your plate?

2. Thinking of 2024 bandwidth and equity-centered priorities:

- What do we want to keep working on?
- What do we think we'll have bandwidth for?
- Is there a project/initiative that we want to let go of?
- Are there projects/initiatives that we want to add?
- Are there projects/initiatives we want to recommend that OHA add?



# Small Group Activity for today:

1. Read the YSIPP 2023 initiative that is going to carry forward into 2024 (with relevant modifications).
2. Consider the three questions:
  - Who benefits or may be burdened by this?
  - What is the data telling us?
  - What cultural or community-specific strengths might be important to consider?
3. Choose one thing to highlight for the main group (knowing that your jamboard and sticky notes will be gathered).

- 2.1.2.1 OHA will support **Big River Programming** by providing low or no cost access to Train-the-Trainer events, statewide coordination, evaluation support, and limited course support for the following programs: Sources of Strength (K-Postsecondary), MHFA, QPR, ASIST, YouthSAVE, Oregon CALM, CALM, and Connect Postvention.
- 2.2.3.3 OHA will explore partnership with state and local law enforcement agencies to develop and promote suicide safer **Emergency Risk and Protection Order (ERPO)** protocols and to plan and begin development of an ERPO tracking system to determine use patterns and frequency.
- 2.3.3.1 **Adi's Act** requires that every school district in Oregon adopt a policy requiring a comprehensive suicide prevention, intervention, and postvention district plan. ODE will continue to support implementation of this important legislative mandate.
- 3.1.4.1 OHA will publish a **toolkit** on best and promising practices for suicide risk assessments, screenings, and safety planning.

# Questions?

OHA will support Big River Programming by providing low or no cost access to Train-the-Trainer events, statewide coordination, evaluation support, and limited course support for the following programs: Sources of Strength (K-Postsecondary), MHFA, QPR, ASIST, YouthSAVE, Oregon CALM, CALM, and Connect Postvention.

Who benefits or may be burdened by this?

**Benefits:**  
areas/counties  
without a dedicated  
suicide prevention  
coordinator or  
coalition,  
low-income areas

What is the data  
telling us?

Ages 18-24 with a  
specific focus on  
colleges, trade  
schools, active and  
non active  
military/veterans,  
youth in transition  
programs, job corps,  
construction industry,

What cultural community  
specific strengths might be  
important to consider?

**Utilize ODE to  
support  
communication and  
information  
dissemination**

**Burdens:** those with  
limited reliable  
internet access, those  
without connections  
to communication  
sources (i.e. how do  
parents find out about  
training  
opportunities)

**Burdens:** acceptance  
of training for  
age/developmental  
level, dissemination of  
information in  
languages other than  
English/accessible  
formats (both T4Ts  
and trainings)

OHA will explore partnership with state and local law enforcement agencies to develop and promote suicide safer Emergency Risk and Protection Order (ERPO) protocols and to plan and begin development of an ERPO tracking system to determine use patterns and frequency.

Who benefits or may be burdened by this?

What is the data telling us?

What cultural community specific strengths might be important to consider?

OHA will publish and disseminate a toolkit on best and promising practices for suicide risk assessments, screenings, and safety planning for schools.

## Who benefits or may be burdened by this?

Schools are burdened to come up with these plans..  
Can be difficult, especially for schools who are highly stressed.

Burden: Difficult for schools especially if there isn't a district-wide response.

When guidance is provided without funding, we have equity problems.

More resourced schools will have an easier time with this.

Lack of MH support/trainings.

## What is the data telling us?

Students likely to reach out to staff will share identity-- what does this mean for faculty/teachers/staff who are doing additional work/additional labor to support them

How are we defining which schools need more resources or not. Sometimes schools with higher reports are just folks who know how to navigate the systems. Who are we missing?

How are we tracking who is doing this labor?

## What cultural community specific strengths might be important to consider?

Sometimes we need more individualized/culture-based plans

Adi's Act requires that every school district in Oregon adopt a policy requiring a comprehensive suicide prevention, intervention, and postvention district plan. ODE will continue to support implementation of this important legislative mandate.

Who benefits or may be burdened by this?

**Benefit:  
Students**

**Burden:  
staff  
training  
time**

**Benefit: is  
also staff  
training --  
mandated**

**Burden: systemic  
implementation  
across educational  
domains  
(administrative on  
down)**

What is the data  
telling us?

What cultural community  
specific strengths might be  
important to consider?

**Student  
affinity groups  
can provide a  
great source  
of peer  
support**

## 2023 Executive Nominations:

### At large

1. Mary Massey

### Youth / Young Adult

1. Aditi Khanna (17)

I am a high school student at Jesuit High School and I have been volunteering at Oregon YouthLine, a teen-to-teen crisis line, for over 2 years. I am ASIST trained. I am a co-leader for the Legislative Committee at YouthLine which aims to promote improvements/pass new bills regarding mental health.

2. Aaron Townsend (19)

I'm a nineteen-year-old college student who has years of dealing with suicidal ideation under my belt. I am friends and have been partners with many other suicidal and more broadly neurodivergent people for most of my teenage life. Thus, despite not having a background in psychological research or legislative action or even loud advocacy, I am very personally invested in the subject of suicide and what is done about it on a social level. That is why I want to be able to vote on the executive actions of the Alliance - such is simply the most direct application of my experiences.

3. Tanvi Vemulapalli (17)

Who I am: I am a high school student at Jesuit High School and I have been volunteering at Oregon YouthLine, a teen-to-teen crisis line, for over 2 years. I am ASIST trained. I am a co-leader for the Legislative Committee at YouthLine which aims to promote improvements/pass new bills regarding mental health.

Why I want to be a part of this committee: I believe that mental health has a lot of stigma around it and I want to help change that. As a teenager in today's fast paced society, I see that many resources are needed to offer the best mental health support for different groups of people. I want to help make that change because I believe mental health should be cared for. I believe that I offer a unique perspective as a teen and as a person with a lot of prior mental health advocacy experience.

### Lived Experience

1. Siche Green-Mitchell

As a trans queer man with a disability, educator, and counselor for youth I have seen how systemic injustice and lack of proactive suicide prevention can lead to my people dying by suicide along with many other communities. I am passionate not only about the outcome, but the approach that the OAPS takes to achieve its goals. As I have engaged with OAPS for the past three years I've seen and felt the care and inclusion it shows members of all backgrounds and



beliefs as well as the depth and breadth of initiatives. I would like to continue to work with OAPS on the executive council and use my lens to add to the scope of experience, backgrounds, and skills that makes this alliance thrive. Thank you for considering my nomination.

2. Craig Leets

Craig Leets, he.him.his, is the YouthLine Deputy Director at Lines for Life and is representing the organization with the Alliance. Craig has participated in activities with the Alliance since he began in his current role in January 2022 and has attended various committee and task force meetings in addition to regularly attending the White Accountability and Learning Community. Craig would like to join the Executive Committee to help advance the mission of the Alliance, elevate youth voice whenever possible, and connect statewide policy agendas with clinicians who are doing suicide prevention and intervention work on the ground.

# Alliance Bylaw Proposed Changes

*September 2023*

*These proposed changes are highlighted in the attached bylaws as well.*

Page 1 – adjust age range to 5 to 24 from 10 to 24

Page 2 – addition of role of coalitions

Page 2 – Clarifies how members are appointed to the Alliance

Page 3—Defines affiliates

Page 4 – Clarification of chair terms

Page 5 – Executive membership. Defines the composition and terms of those who serve on the executive in a role OTHER than committee chair.

Page 5 – Changes amount of representation on Executive Committee for those sitting in the role of lived experience from 2 people with direct lived experience and 1 person as a loss survivor to up to 4 people with lived experience

Page 6 – Clarification of advisory group role

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## Oregon Alliance to Prevent Suicide Bylaws

### Background on the Alliance

Suicide is a major public health issue nationally, and in Oregon, it has been either the first or second most common cause of death for youth and young adults up to age 24 for many years.

In 2014, the Oregon State Legislature mandated development of a five-year plan to address Oregon's high rate of suicide among individuals aged 10 through 24. The Oregon Youth Suicide Intervention and Prevention Plan (YSIPP) was signed by the Oregon Health Authority (OHA) and submitted to the Legislature in January 2016. The YSIPP calls for the creation of The Oregon Alliance to Prevent Suicide (Alliance) to develop a public policy agenda for suicide intervention and prevention across agencies, systems, and communities.

In 2019 Oregon's legislature passed SB 707 which put in statute a requirement for a Youth Suicide Intervention and Prevention Advisory Committee on youth suicide ages 10 to 24, amending ORS 418.731 and 418.733. The Alliance is serving in this role.

In 2021, Oregon's legislature passed SB 563 expanding the YSIPP focus to include ages 5 through 24 for more upstream prevention work.

### Purpose and Responsibilities

The Alliance is charged with overseeing implementation of the YSIPP and evaluating outcomes related to suicide prevention in Oregon. The purpose of the Alliance is to serve as an advisory to the OHA with a goal of reducing youth suicides in the state of Oregon. Alliance members are appointed by the OHA to develop a public policy agenda for suicide prevention, intervention, and postvention across agencies, systems, and communities. The Alliance seeks to:

- Promote a sense of **hope** and highlight recovery and resilience.
- Make it safe to ask for **help** and making sure that the right help is available at the right time.
- Engage individuals and communities in the **healing** process after an attempt or suicide.

#### Responsibilities of the Alliance Include:

- Advise the OHA on the development and administration of strategies to address suicide intervention and prevention for children, youth and young adults through 24 years of age.
- Recommend potential members to OHA for appointment to the Alliance.
- Promote a coordinated approach with the State for youth suicide prevention.
- Develop a plan to foster and sustain statewide policy development and leadership in suicide prevention.

- The Alliance consults with the Youth Suicide Intervention and Prevention Coordinator on updates to the YSIPP under ORS418 733.
- Develop a policy agenda for suicide prevention that identifies state policy priorities and communicates the agenda to state and local policymakers.

### **Alliance Structure and Membership**

Members will be appointed by the Director of OHA. Members serve at the discretion of OHA's director and can only be removed by resignation or by the director. Membership will at a minimum align with the SB707 requirements and include a minimum of four youth and young adults aged 24 or younger.

Any current member of the Alliance may recommend an individual for membership to the Executive Committee. The Executive Committee will submit recommendations to the director of OHA. Candidates must be confirmed and appointed by OHA's director.

Membership is for a period of three years and is renewable every three years. At the end of each term members may be reappointed. The Executive Committee will vet and recommend members to the director of OHA. Members intending to resign shall submit a letter of resignation to the Chair, with a copy to the Alliance Staff and to the OHA Youth Suicide Prevention Coordinator.

The Alliance places a high value on ensuring that its statewide work connects with efforts in local communities and recognizes the important role of Regional and County Suicide Prevention Coalitions play in that work. When considering membership recruitment, the Executive is encouraged to work towards regional representation of the coalitions, while also complying with statutory requirements.

Alliance staff will track membership attendance and terms and notify OHA and the Executive Committee of terms coming to an end.

A current member of the Alliance may submit a nomination for an individual for membership to the Executive Committee for consideration. A person may self-nominate as well. All applicants will complete an application which will be submitted to the Executive Committee for consideration. The Executive Committee may elect to waive the application process. The Executive Committee will vet and recommend nominations to the OHA Youth Suicide Coordinator who will forward it to the director of OHA. Per the Alliance Bylaws, members will be appointed by the Director of OHA, serve at the discretion of OHA's director and can only be removed by resignation or by the director. See Attachment 1, Alliance Bylaws

As indicated by SB 707 (2019), the members of the advisory Committee should reflect the cultural, linguistic, geographic, and economic diversity of Oregon and must include but need not be limited to:

- Individuals who have survived suicide attempts;
- Individuals who have lost friends or family members to suicide;
- Individuals who have not attained 21 years of age;

- Representatives of state agencies, including but not limited to the Department of Human Services, the Oregon Health Authority and the Department of Education, who provide services to individuals who have not attained 21 years of age;
- Representatives of Oregon Indian tribes;
- Representatives of colleges and universities;
- Medical and behavioral treatment providers;
- Representatives of hospitals and health systems;
- Representatives of coordinated care organizations and private insurers;
- Suicide prevention specialists; and
- Representatives of members of the military and their families.

**Alliance members must:**

- Be familiar with the Oregon Youth Suicide Intervention and Prevention Plan and the responsibilities it designates for the Alliance.
- Learn about and share best practices in suicide, suicide prevention, intervention, treatment, and postvention.
- Communicate the needs and concerns of their constituencies to the Alliance.
- Communicate issues under consideration by the Alliance to their constituencies to obtain feedback.
- Be open to including youth voice and supporting meaningful youth involvement.
- Maintain a statewide perspective for what will work in Oregon.
- Serve on Committees or work groups as appropriate.
- Support Alliance public policy agenda and other initiatives, and advocate for them as appropriate.
- Attend quarterly meetings, preferably in person.
- Participate in decision-making with timely responses and by voting in person, by email or by phone.
- Maintain a perspective on what is in the best interest of the Alliance and make this perspective a priority in matters relevant to the Alliance.

**Affiliates**

Affiliates are individuals interested in participating in Alliance Committees, quarterly meetings or other Alliance activities and who have not been appointed as a member by the director of OHA. Affiliates may provide feedback and help in development of policy but are not voting members. This enables, for example, multiple people from a single organization to participate in Committee work while ensuring that no one organization is over-represented in the voting process. It also provides a way for potential members to engage.

## **Stipends:**

The Alliance values participation of youth and young adults, family members, and persons with lived experience. Stipends and reimbursement may be provided to individuals not otherwise receiving compensation for time and expenses. Reimbursement under this subsection is subject to the provisions of ORS 292.210 to 292.288.

## **Alliance Chair and Committees**

To be eligible for nomination as the Alliance Chair or Vice-Chair, a member shall have served on a Committee prior to their nomination.

The Alliance Chair will lead meetings, and in their absence, the Vice-Chair may take the lead. The Chair and Vice-Chair terms will be for a period of two years. The Vice-Chair position is intended to support the Chair and prepare the individual for serving as Alliance Chair in the future. The Alliance Chair and Vice-Chair will be elected by Alliance members at the quarterly meeting held in June. Chair and Vice-Chair may serve two consecutive terms and can be nominated again for appointment after a period of two years.

The work of the Alliance is moved forward through Committees. Committees are determined at the June quarterly meeting by the full Alliance. Chairs of these standing Committees will serve on the Executive Committee. Ad hoc work groups will be commissioned by the Executive Committee for a specific scope and purpose.

Committees will establish annual goals and action steps each year in the spring. Each Committee will meet at least quarterly to assess progress towards the annual goals. Each Committee will have a Committee Chair tasked with facilitating the Committee meetings and ensuring goals are met and deliverables are completed.

## **Executive Committee**

The Executive Committee will meet prior to each quarterly meeting of the full Alliance. Additional meetings will be held as needed.

The Executive Committee shall:

- Meet to develop and review full Alliance quarterly meeting agendas,
- Review and approve recommendations or proposals from each of the Committees,
- Recommend to the Alliance new or updated policies and procedures,
- Review and make recommendations on other items to come before the Alliance,
- Make decisions between meetings on behalf of the Alliance membership,
- Make recommendations to OHA on new Alliance members, and
- Prioritize special projects, especially those focusing on diversity, equity and inclusion and groups that are at disproportionate risk of suicide.

#### Executive Committee Membership:

- Alliance Chair
- Alliance Vice-Chair
- Standing Committee Chairs
- OHA/Health Systems Division Representative (non-voting)
- OHA Public Health Representative (non-voting)
- The following positions will be appointed for a three-year term on the Executive Committee. They may serve multiple terms provided they receive a membership reappointment from OHA and are approved by Alliance members:
  - Up to four members with lived experience which is defined as either having direct lived experience of intrusive suicidal thoughts, urges and/or behaviors (including suicidal attempts) and / or as a bereavement loss survivor (i.e. family member of a person who attempted or dies by suicide)
  - Two young adult representatives, who may be supported at Executive Committee meetings by a non-voting adult ally
  - Up to two at-large members
  - A healthcare provider
  - A person representing schools (K-12) or colleges and universities

#### Committee Chair Determination

Committee members will recommend a Chair or Co-Chairs. If the Committee uses a Co-Chair structure, only one of the Co-Chairs shall serve on the Executive Committee. Committee Chairs will report to the Executive Committee regarding Committee activities and recommendations, and work with the Executive Committee to review, revise and adopt these recommendations.

### Decision Making

#### Elections

- The Alliance Chair and Vice-Chair shall be nominated and voted upon at the June meeting of the Alliance. Nominations may come from any member and may be for any member, including self-nomination. Members of the Alliance must be present in person or by phone to vote and each member may cast one vote per position.
- Committee Chairs shall be elected for a period of one year at the Committee meeting immediately preceding the June Alliance meeting. Committee Chairs, excluding the Executive Committee Chair, shall be elected by majority vote of the Committee.
- At discretion of the Executive Committee, Chair may be asked to extend period of service to assist with transition and to allow continuity.



## Committee & Advisory Group Meetings


- All Committee meetings will follow Oregon's Public Meeting Law, ORS 192.610 – 192.690.
- Advisory Group meetings will occur as needed and do not follow Oregon's Public Meeting Law, ORS 192.610 – 192.690. These groups are population specific and serve as an advisory group to the full Alliance and to Committee work as needed. Advisory groups do not have a position on the Executive Committee but are looked to as a trusted resource in developing population specific work and ensuring that the Alliance attends closely to issues of equity and inclusion.
- Meetings of the full Alliance will be held quarterly. Special meetings via conference calls will be scheduled as needed. A designee may be delegated by an Alliance member to represent the member by attending and voting at a quarterly meeting. Members will notify the Staff of the Alliance and the Chairperson in advance if they are sending a designee or will miss a meeting.

## Voting

- Each appointed member, with the exception of members who are OHA staff, is entitled to one vote on any matter referred to the full membership. Votes will require a quorum.
- A quorum will be 50% plus one of those present who are OHA appointed members. Decisions will be made by majority vote of the quorum.
- Committee Chairs or any member may submit motions for vote to the Executive Committee and at quarterly meetings.

## Time Sensitive Matters

- Time sensitive matters are those in which a decision is needed before the next scheduled quarterly meeting. When time allows, feedback will be gathered via email from Alliance members and the Executive Committee will discuss. No less than three business days will be allowed between when an issue is raised and voting. Voting will occur in a teleconference call. Voting records shall be contained in Executive Committee minutes and will be shared with Alliance members via email and at quarterly meetings. Any member of the Alliance may propose a time-sensitive matter for a vote by submitting a request to the Alliance staff who will be responsible for bringing the matter to the Executive Committee.
- The Executive Committee is authorized to vote on policy recommendations and take action between quarterly meetings on behalf of the full Alliance as needed. The Executive Committee will only vote to support proposals that align with the Alliance-approved legislative agenda, are specifically mentioned in the YSIPP, or otherwise have been approved by the Alliance membership. If an issue arises other than those in the approved legislative agenda, specifically mentioned in the YSIPP, or have been approved by the Alliance membership, it will be brought to the Executive Committee and the full Alliance will be informed by email and any decisions will be documented in the minutes.

A circular wreath of various botanical illustrations surrounds the central text. The wreath includes green ferns, a red maple leaf, a large green leaf, a branch with small pink flowers, a branch with yellow flowers, a large red leaf, and purple flowers.

# Alliance Youth Focus Groups (High level findings)

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September 2023

# 2023 Focus Groups

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## Adi's Act Focus

- ❑ Gauge student awareness of their school's suicide prevention plans / policy to gather anecdotal information about Adi's Act implementation
- ❑ 76 attendees
- ❑ 44% were age 14-17

## Crisis Line Messaging Focus

- ❑ Learn how youth have heard about different crisis and help lines, which ones they have reached to, hear concerns they have or difficulties in using the lines and use this information to create recommendations to OHA on messaging and advertising of lines
- ❑ 32 attendees
- ❑ 72% were age 11-17

# Adi's Act Themes



- ❑ When students have positive relationships with teachers, they feel safer and identify them as people they can talk to in crisis
  - ❑ The opposite is true when students have negative relationships with teachers, they have a difficult time at school and feel isolated
- ❑ Students believe that having a safe, quiet place to go when they are escalated or having a crisis would be beneficial and help them to manage their crisis
- ❑ Students want their teachers and their peers to receive trainings on suicide prevention and intervention
  - ❑ There were differences in how they think this could be accomplished
- ❑ Students don't believe that resources are easily and readily available both at schools and for ongoing supports
- ❑ Overall, universal screenings about mental health would be helpful but there were some questions and concerns

# Crisis Line Messaging Themes



- ❑ Some schools don't share crisis lines / mental health information
- ❑ For the ones that do, students find it helpful when information is shared on flyers at school in the hallways and bathroom stalls and at counselor offices
- ❑ Calling it a 'crisis' line can make people feel like they can't use the line if they minimize what they are experiencing
- ❑ People want flowcharts / examples of what happens when you call or text a crisis line
- ❑ Not everyone was aware of the SafeOregon Tip Line
- ❑ For those who do know of it, they are worried to use SafeOregon Tip Line because of potential police involvement
- ❑ Students are more likely to talk with someone they are concerned about than report it or call a line about the person because they don't want anything to happen to them
- ❑ Who shares the resources matter. Students report being more open to hearing the information from peers / student leadership than teachers or school staff

# Next Steps



- ❑ Pause on focus groups until March 2024
- ❑ Will be problem solving some of the hiccups that were encountered, reaching out to committees about topics they would like for a focus group, thinking through youth engagement with committees, planning out in-person focus groups, connecting with other organizations around the state



Full Findings will be on the Alliance  
website



A circular wreath of various botanical specimens, including green ferns, red and green leaves, yellow and purple flowers, and a branch with small pink blossoms, framing a central white circle.

Questions?

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