

# Oklahoma Suicide Prevention Council





# Suicide in Oklahoma

- Suicide is the 2<sup>nd</sup> leading cause of death for Oklahoma young people age 10-24.

*Source: CDC WISQARS*

- From 2002-2004, there were 2,285 young Oklahomans (age 10-24) hospitalized and fatally wounded with self-inflicted injuries.

*Source: Injury Prevention Service Surveillance Data*

- 36 young Oklahomans (under the age of 20) die by suicide each year (average annual, 2002–2004).

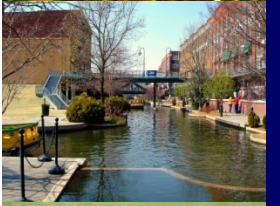
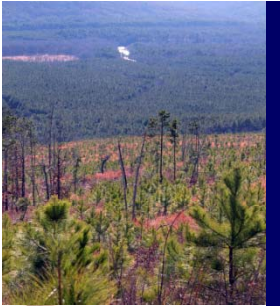
*Source: Oklahoma KIDSCounty Factbook*

- Suicide is the 2nd leading cause of death ages 10-34. Males account for 80% of suicides.

*Suicide Prevention Resource Center (1999-2005)-CDC (2008)*

- Highest rates are among White, Non-Hispanics.

*Suicide Prevention Resource Center (1999-2005)-CDC (2008)*



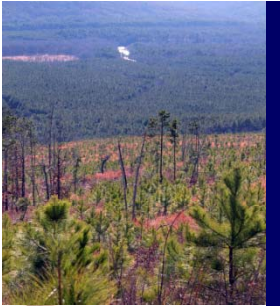
# Myths & Facts

*Myth: Suicide can't be stopped – if someone wants to do it, they will find a way to do it.*

**Fact: Suicide is preventable. The majority of the time, people give definite signs. The key to prevention is knowing the signs and knowing what to do when you recognize the signs. Remember that most suicidal youth don't really want to die, they just want their pain to end.**

*Myth: Asking about suicide will increase their risk and cause them to attempt suicide.*

**Fact: Talking about suicide does not create or increase risk – it actually reduces it. Talking about it relieves anxiety and provides the opportunity for communication.**



# Myths & Facts

*Myth: Most suicides happen without warning.*

**Fact:** We often hear from those who have lost someone to suicide that it happened without warning or that their loved one showed no signs. It is most likely that the intent of ending their life may not have been initially recognized. However, most suicidal people exhibit some level of warning signs.

*Myth: Only experts can prevent suicide.*

**Fact:** Everyone has a role in preventing suicide. No matter who you are, you can help save a life by knowing the warning signs and knowing what to do when you recognize someone is at risk.



# Risk Factors

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- Alcohol or other drug use, abuse, misuse
- Previous suicide attempt
- Mental illness
- Barriers to health and mental health care services
- History of abuse or trauma
- Access to lethal means
- Exposure to contagion influence
- Sexual orientation – homosexual, bisexual, transgender
- Life stressors/interpersonal loss
- Family history of mental illness/suicide attempts

# Protective Factors

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- Access to health and mental health care services
- Life skills – coping/problem solving
- Connectedness to school/community – social integration
- Help-seeking behavior
- Community readiness to recognize/respond to suicide risk

# Effective Prevention

- Gatekeeper training
- Screening programs
- Crisis management
- Infrastructure improvement:
  - Media reporting protocols
  - Referral networks
  - Access to mental health services
  - Lethal means restriction



# Rationale for Gatekeeper Training

The person most likely to prevent us from taking our own life is someone we already know.

Because . . . . .

Research shows that prior to making an attempt, 90% of people in a suicidal crisis will give some kind of warning of their crisis/intent to those around them.

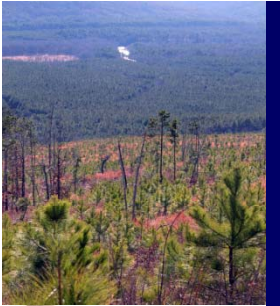




# Rationale for Gatekeeper Training

The greater the percentage of the members of a given community who are trained to successfully recognize warning signs and refer its suicidal members, the fewer suicide-related adverse events should occur.





# OK Prevention Efforts

- State plan on suicide prevention across the lifespan
- State Suicide Prevention Council
- Garrett Lee Smith Memorial Act prevention funds
- Annual suicide prevention conference
- Local efforts
  - Screening
  - Gatekeeper training
  - Crisis planning/Suicide response planning
  - Crisis/help lines

# Garrett Lee Smith Memorial Act

- Goal 1: Promote public awareness that suicide is a public health problem and is preventable.
- Goal 2: Implement community-based suicide prevention programs utilizing evidence-based strategies.
- Goal 3: Implement training for recognition and referral of at-risk behavior for suicide.
- Goal 4: Develop strategic partnerships to improve statewide and institutional infrastructure that supports and sustains suicide prevention.





# Oklahoma State Plan on Suicide Prevention

## Assessment

- Improve the way suicide deaths and attempts are recorded and reported
- State agencies assist communities in accessing and using local data

## Policy Development

- Improve the way suicides are reported in the media
- Increase access to health and mental health services
- Reduce access to lethal means
- Improve referral networks in communities

## Assurance of Services

- Build a strong public support for suicide prevention and the investment in all people
- Public education about suicide across the lifespan
- Implement community and school-based suicide intervention training and screening programs



# National Resources

**Suicide Prevention Resource Center**

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

**American Association of Suicidology**

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

**Suicide Prevention Action Network USA**

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



# State Resources

## ODMHSAS Youth Suicide Prevention Website

<http://www.odmhsas.org/Prevention/YouthSuicidePrevention.htm>

## Suicide Prevention Council

Meets Monthly (4<sup>th</sup> Thursday)

1:00 – 4:00 pm

Youth Services for Oklahoma County

201 NE 50<sup>th</sup>, Oklahoma City