

Pain Isn't Always Obvious



suicideispreventable.org

Small County Suicide Prevention Task Forces

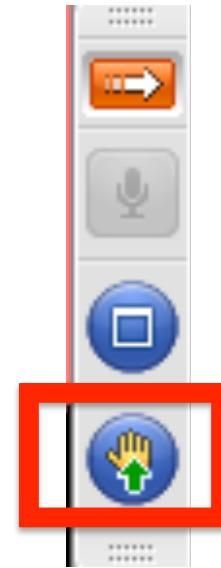
December 13th, 2012



WELLNESS • RECOVERY • RESILIENCE

Welcome!

- Please mute your line
- If you have a question, please type it into the “Questions” box or “raise your hand” by clicking the hand logo on your control panel



Purpose of webinar today

- Task force fundamentals
- Building on the *Know the Signs* Campaign
- Learn from other counties' unique experiences

What is a task force?

- Working towards a particular goal
- Is not an “organization” or “service”
- Bringing together people from disparate sectors/fields with a common goal

Poll

Does your county have a suicide prevention task force?

Poll

Is your county currently planning to start a new suicide prevention task force?

Primary task force concerns

... sustainability of task force
beyond current efforts

... reaching out to most at-risk
demographics

... overcoming conservative perspectives,
stigma and politics around suicide

... making the most out of limited
resources

- **Task force fundamentals**
- Building off the Know the Signs Campaign
- Learn from other county's unique experiences

#1: Start where the **energy** is

Who **wants** to be involved?
And why?

Can you integrate within an
existing planning process?

Was there a recent **event** that
generated **community concern**?

#1: Start where the **energy** is

Who **wants** to be involved?
And why?

... Who is excited about
making a difference?

... Who will be an active
participant?

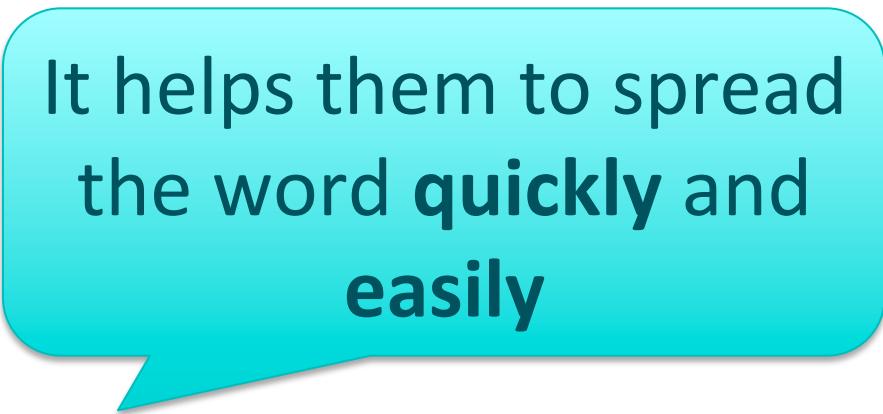
#2: Make it tangible

Work towards something **specific**

Make sure the task force can be described in an “elevator conversation”



It keeps things exciting!



It helps them to spread the word **quickly** and **easily**

#3: Figure out the best place to start

- What is your current capacity?
- Who can be your champion?
- What are existing programs and activities?
- What are existing resources to build on?

#3: Figure out the best place to start

- What is your current capacity?
- Who can be your champion?
- What are existing programs and activities?
- What are existing resources to build off on?

... How much community engagement can your county maintain and sustain?

... Are community organizations on board?

#3: Figure out the best place to start

- What is your current capacity?
 - Who can be your champion?
 - What are existing programs and activities?
 - What are existing resources to build off on?
- ... Who is a community influencer?
- ... Who can effectively share their story?

#3: Figure out the best place to start

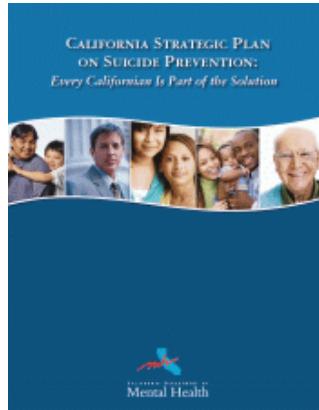
- What is your current capacity?
- Who can be your champion?
- **What are existing programs and activities?**
- What are existing resources to build off on?

Existing local organizations

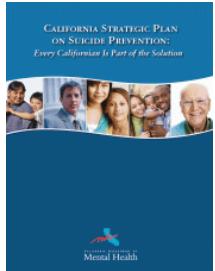
PEI Projects

#3: Figure out the best place to start

- What is your current capacity?
- Who can be your champion?
- What are existing programs and activities?
- What are existing resources to build on?



#3: Figure out the best place to start



<http://www.mhsoac.ca.gov/docs/Suicide-Prevention-Policy-Plan.pdf>



<http://www.preventioninstitute.org/component/jlibrary/article/id-103/127.html>



<http://www.preventioninstitute.org/component/jlibrary/article/id-104/127.html>

#4: Develop an outreach plan

The people

The plan

The
relationships

The
evaluation

#4: Develop an outreach plan

The people

The plan

The
relationships

The
evaluation

... Who is *already* there and who
should be there?

(psst... it might not be who you expect!)

#4: Develop an outreach plan

The people

The plan

The
relationships

The
evaluation

... How do you engage “the people” to bring them in?

#4: Develop an outreach plan

The people

The plan

The
relationships

The
evaluation

... Use the “elevator speech” to
describe the task force

... How does the task force relate
to experience or field of work?

#4: Develop an outreach plan

The people

The plan

The
relationships

The
evaluation

... Track your outreach results.
Task forces are not static and
new outreach should be
considered when necessary

#5: Create a strategic plan

- What are your goals and objectives?
- What is your target population?
- What is the best way to reach them?
- What is your implementation timeline?
- What are the roles and responsibilities of members of the task force?

- Task force fundamentals
- **Building off the Know the Signs Campaign**
- Learn from other county's unique experiences

Poll

Have you seen any *Know the Signs* Campaign materials in your county?

Leverage off statewide momentum



The screenshot shows the homepage of the "KNOW THE SIGNS" website. At the top, there are three navigation links: "Know the Signs", "Find the Words", and "Reach Out". Below this is a large orange header with the text "PAIN ISN'T ALWAYS OBVIOUS." in white. Underneath the header, there is a brief message about how friends, family, and coworkers can suffer from emotional pain and that recognizing signs is important. Below this message are three circular buttons with text: "RECOGNIZE THE WARNING SIGNS", "LEARN HOW TO HAVE A CONVERSATION", and "REACH OUT FOR ADDITIONAL RESOURCES". At the bottom of the page, there are links for "SPREAD THE WORD", "Media", "About", and "Contact Us".



Know the Signs >> Find the Words >> Reach Out

Leverage off statewide momentum



SURROUNDED BY FRIENDS
NEVER FELT SO ALONE

On the surface, a friend experiencing emotional pain or suicidal thoughts may seem OK. The warning signs — like isolation, depression, and withdrawal — can be subtle. But recognizing the signs is the first step toward being there for a friend in need. Visit suicideispreventable.org to recognize the signs, find the words and take action. You have the power to make a difference. The power to save a life.

Pain isn't Always Obvious

KNOW THE SIGNS
Suicide is Preventable

In case of emergency, call the National Suicide Prevention Lifeline at 1.800.273.8255

Learn the signs at suicideispreventable.org

¿Qué harías
si supieras que me
quiero suicidar?

A menudo es difícil saber lo que sienten nuestros hijos. Y es más difícil aún saber sobre un tema tan duro como el suicidio. Pero el saber reconocer las señales de advertencia y qué hacer cuando las detectas puede ser la diferencia entre vivir un día más y una vida entera. ¡No te arrepentirás! No espere a que sea demasiado tarde. Para mayor información visite [www.suicideispreventable.org](http://suicideispreventable.org)

Apresúrate a reconocer los señales.
Visita: www.ElSuicidioEsPrevenible.org

El número de emergencia es:
RECONOZCA LAS SEÑALES
El Suicidio Es Prevenible

En caso de emergencia llame al
Número Nacional de Línea de Emergencia
1.888.226.9454

Know the Signs >> Find the Words >> Reach Out

Customize materials



KNOW THE SIGNS

FIND THE WORDS

REACH OUT

The warning signs of emotional pain or suicidal thoughts aren't always obvious. Here's what to look for:

- Talking about wanting to die or suicide
- Feeling hopeless, despaired, trapped
- Giving away possessions
- Putting affairs in order
- Reckless behavior
- Anger

Knowing what to look for is the first step toward being there for a friend or family member in need. If you sense something is wrong, trust your instincts and get more information at suicideispreventable.org.

START THE CONVERSATION
Mention the warning signs you are noticing.

ASK ABOUT SUICIDE
"Are you thinking about suicide?"

LISTEN
Express concern and reassurance.

YOU ARE NOT ALONE
If you even see one warning sign, step in or speak up. But you don't need to do it alone. Help is available. To find local resources, visit: suicideispreventable.org

IN A CRISIS
If you think a person is suicidal, don't leave them alone. Call the National Suicide Prevention Lifeline if you are in crisis or concerned about someone. Trained counselors are available 24/7 to offer support. 1.800.273.8255.



RECONOZA LAS SEÑALES

ESCUCHE Y DIALOGUE

BUSQUE AYUDA

Las señales de advertencia del dolor emocional o de los pensamientos suicidas no siempre son obvias. El saber reconocer las señales es el primer paso para poder ayudar a un amigo o familiar que está en peligro. Si usted siente que algo está mal, confíe en su instinto y obtenga más información en www.el suicidioesprevenible.org

SEÑALES DE ADVERTENCIA

- Hablar de querer morir o suicidarse
- Sentirse sin esperanza, desesperado y atigrado
- Regular pánicos o ataques
- Poner sus asuntos en orden
- Comportamiento imprudente
- Risa o exceso

ESTÁS PENSANDO EN EL SUICIDIO?

Hablar sobre el suicidio no es típico para nuestras familias. Pero escuchar con atención y dialogar abiertamente con un ser querido que esté considerando el suicidio puede hacer toda la diferencia del mundo. Si está preocupado por alguien, no lo dude. Visite www.el suicidioesprevenible.org para aprender cómo iniciar la conversación.

INICIAR LA CONVERSACIÓN
Mencione las señales de advertencia que ha notado.

PREGUNTAR SOBRE EL SUICIDIO
"¿Estás pensando en el suicidio?"

ESCUCHAR
Expresar su preocupación y tranquilizar a la persona.

BUSCAR AYUDA
Si nota que su amigo o familiar tiene las señales de advertencia de suicidio, intérvalo o diga algo. Usted no está solo al ayudar a alguien que está en crisis. Para asistencia y acceso a recursos locales, visite: www.el suicidioesprevenible.org

EN UN MOMENTO DE CRISIS
Si usted piensa que la persona podría suicidarse, no lo deje solo. Ayude a encontrar ayuda. Llame al 911 para emergencias que amenazan la vida o para ayuda inmediata. Mantenga a la persona lejos de cosas que pueden hacerle daño, tales como armas de fuego, drogas o lugares altos. Llame a la Red Nacional para la Prevención del Suicidio al 1-800-228-9454



Know the Signs >> Find the Words >> Reach Out

Find it all on Your Voice Counts!

www.yourvoicecounts.org → Resource Center

RESOURCE CENTER

NEED HELP?

 Contact us for question and technical assistance.

[HELP](#)

FILTERS

- ALL (59)
- DATA & REPORTS (2)
- COUNTY NEEDS ASSESSMENTS (1)
- MEDIA OUTREACH (11)
- TV (2)
- RADIO (2)
- PRINT ADVERTISEMENTS (3)
- POSTERS AND BROCHURES (2)
- OFFICE SUITE (BUSINESS CARDS, FLYERS, PPT TEMPLATES) (5)
- ENGLISH (25)
- SPANISH (6)

[SUBMIT](#)

SEARCH RESULT

Posters and Brochures

**Suicide Prevention Posters**
Target: General Public
Language: English and Spanish

This poster lists key warning signs for suicide and encourages individuals to visi...

[more](#)

**Suicide Prevention Brochures**
Target: General Public
Language: English and Spanish

This 4-panel, pocket-size brochure provides information about warning signs, how t...

[more](#)

Know the Signs >> Find the Words >> Reach Out

You can do it...

... we can help!

- Social marketing strategic planning
- Customizing campaign materials
- Guidance and planning for engaging with the media
- Get connected to statewide and national suicide prevention resources

- General tips
- Building off the Know the Signs Campaign
- **Learn from other counties' unique experiences**
 - Task force history
 - Key players in County
 - Task force activities
 - Obstacles encountered
 - Key lessons learned

BUILDING A SUCCESSFUL SUICIDE PREVENTION TASK FORCE

Tuolumne County
Behavioral Health Department

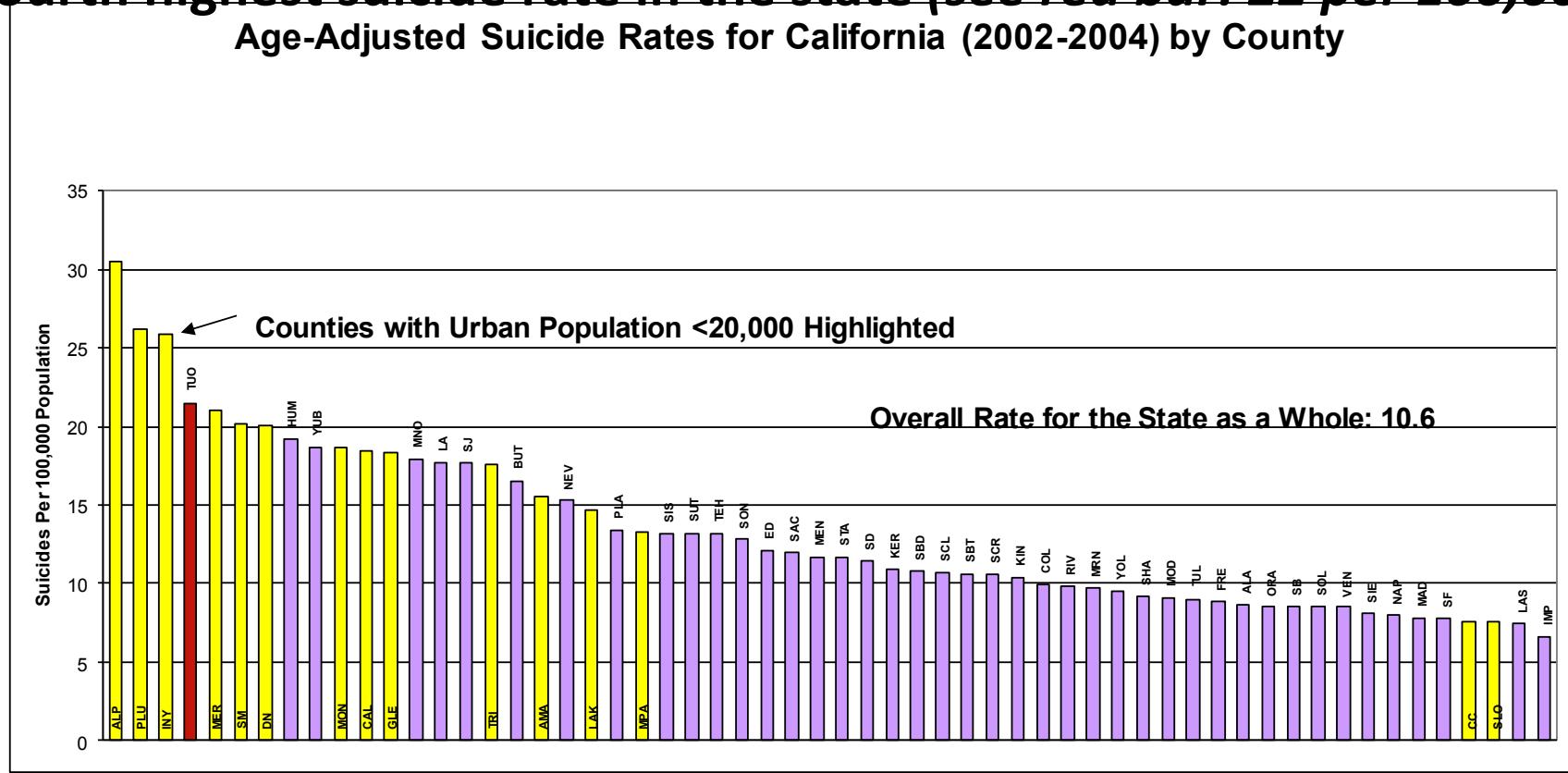
The Beginnings:

- **1985**: A local group, the “YES Partnership”, was launched with Kaiser Grant funding to address a series of suicides in local youth. School curricula addressing suicide was reviewed and made available to local schools
- **2006**: In response to another series of suicides, YES Partnership funded research to study factors influencing suicide rates in rural vs. urban California counties
- Concurrent with but still independent from statewide movement through MHSA funding for PEI, CSS.

Tuolumne County compared to State

- Fourth highest suicide rate in the state (see red bar: 22 per 100,000)

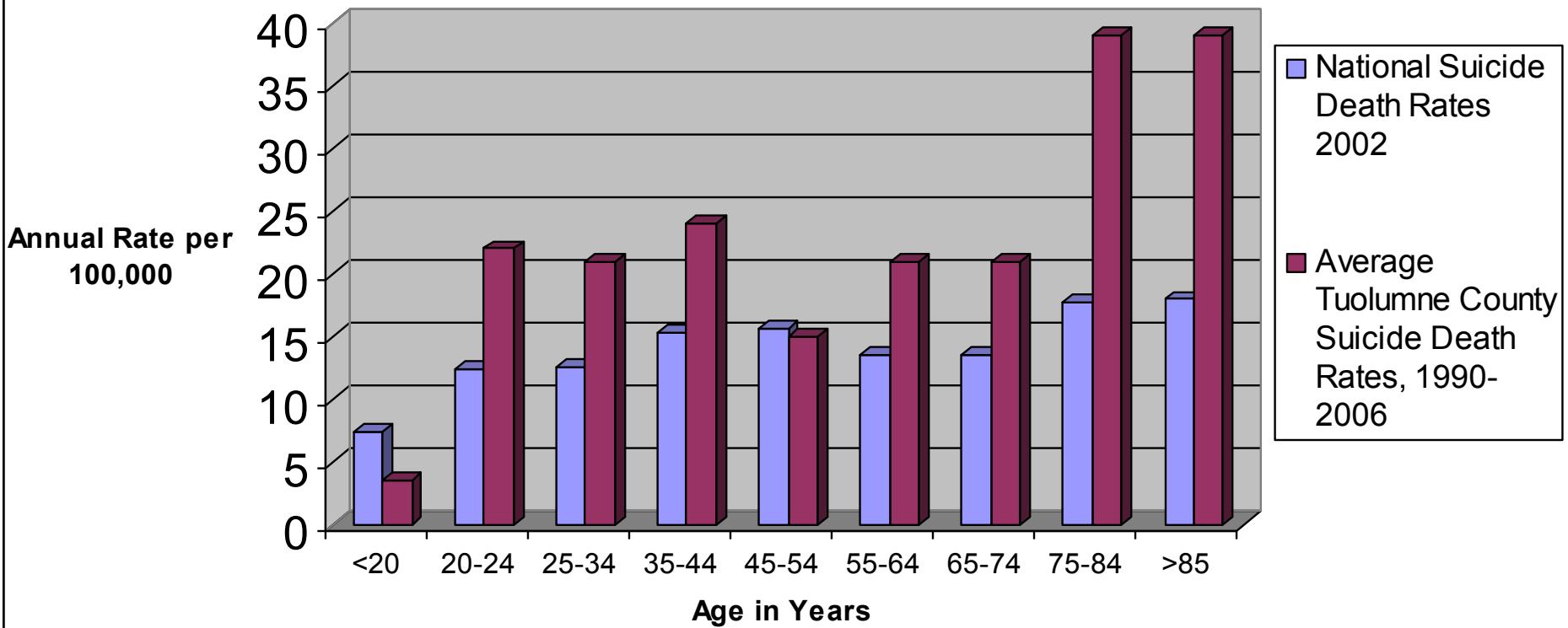
Age-Adjusted Suicide Rates for California (2002-2004) by County



Know the Signs >> Find the Words >> Reach Out

Compared nationally:

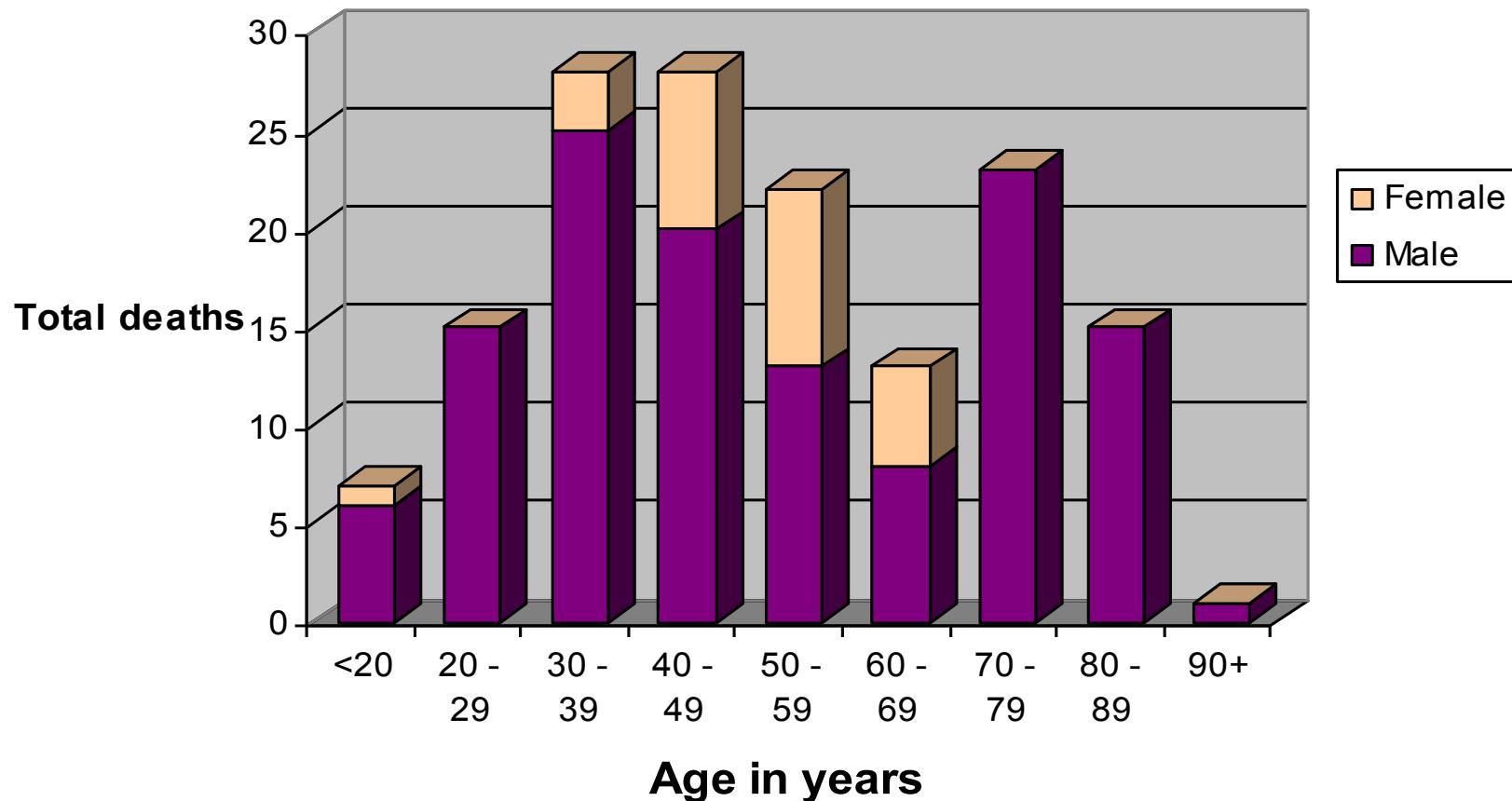
Tuolumne County and National Suicide Death Rates



Know the Signs >> Find the Words >> Reach Out

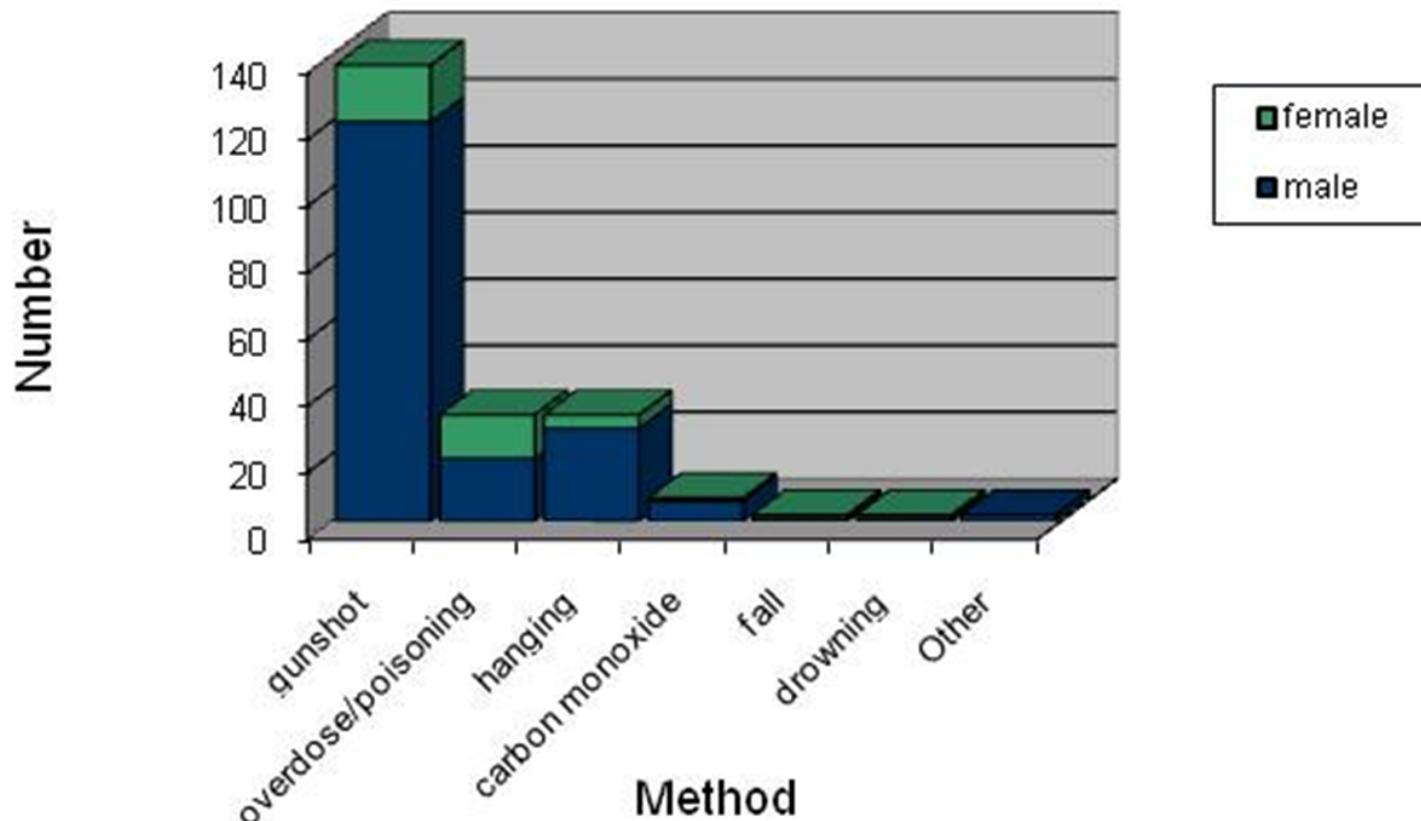
Is there a target population?

Tuolumne County Suicides by Age & Gender (1990 -2006)



Digging deeper into the data...

Tuolumne County Suicides by Method and Gender,
1990-2012



Formation of the Task Force

January
2007:

In response to community concerns and subsequent information found in the data, the *Tuolumne County Suicide Prevention Steering Committee* was formed; the group evolved to become the **Tuolumne County Suicide Prevention Task Force (TCSPTF)**,

Timeline

- **2007-2008:** Local resources were coordinated and efforts combined
 - Multiple agencies had created different suicide prevention/crisis contact cards and flyers – consolidated into one format for use by all.
 - Local 24-hour Crisis Lines were expanded and advertised.
 - The California Suicide Prevention Strategic Plan was released, providing some guidance and direction.
- **September 2008:** The TCSPTF met and organized into subcommittees to begin the process of writing a Three-year Strategic Plan for Tuolumne County

Bringing the stakeholders together

- Resourcing & incorporating already existing groups/efforts
- Significant involvement and leadership from Public Health Officer
 - Connection with Medical Community
 - Access to community, state and federal data
- NOT led by Mental Health
 - Reaching target populations outside of SMHS clients
 - Community issue, not exclusive to MH – reducing stigma

Community Representation on the Suicide Prevention Task Force:

Task Force participants included individuals from:

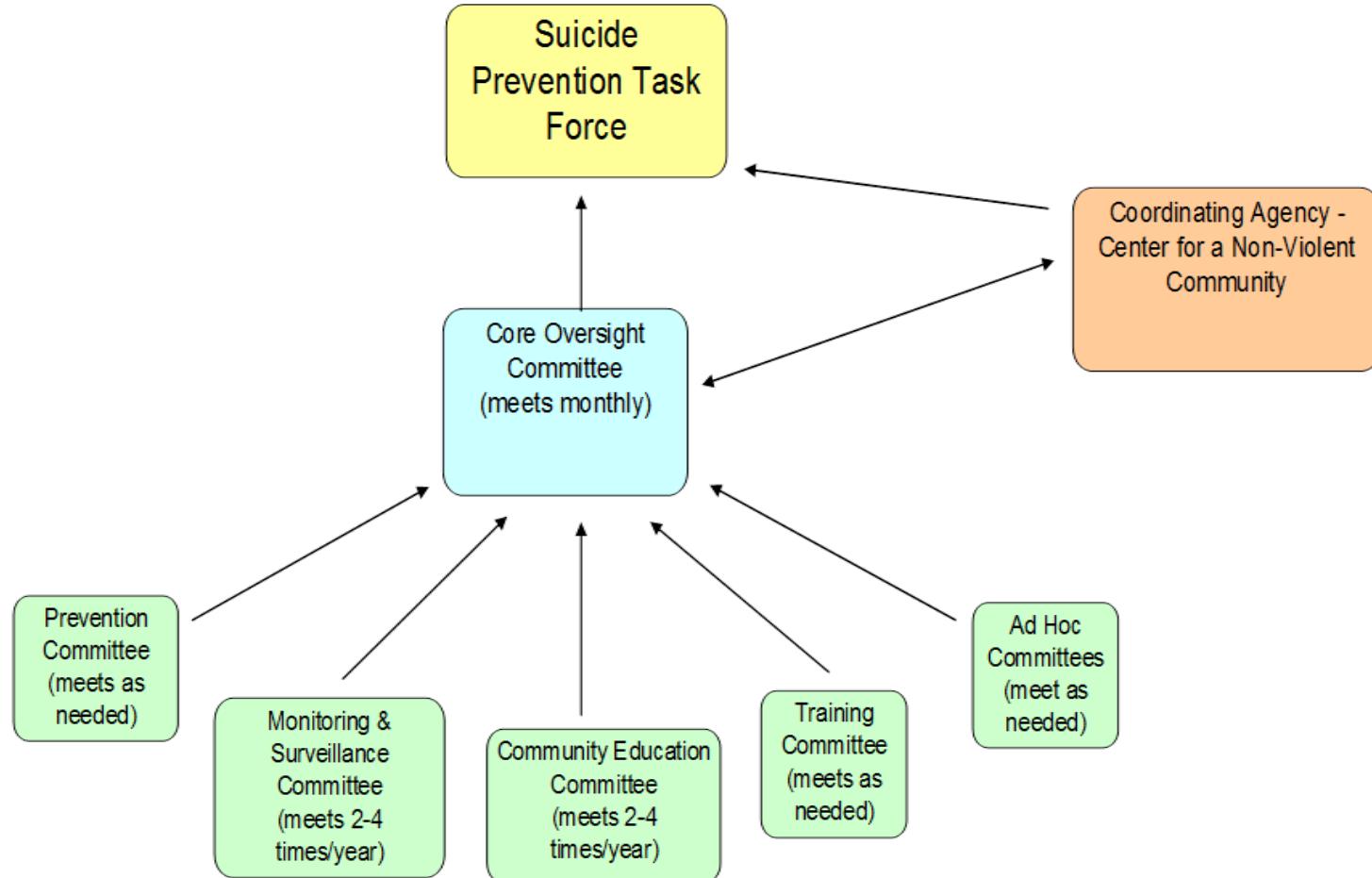
- Public Health
- Law Enforcement
- Behavioral Health
- Board of Supervisors
- Schools
- Office of Education
- Local Hospital
- Medical Practitioners
- Recreation
- Community members, some with personal experience with suicide in their families.
- Non-Profit Agencies
- Emergency Medical Response
- Service Clubs
- Senior Support Agency
- Faith-Based Organizations
- Probation
- Human Services Agency
- Child Development

Task Force Mission

Mission Statement:

“To coordinate the planning, implementation and monitoring of projects throughout Tuolumne County that prevent and reduce the risk of suicide incorporating the core values of integrity, accountability, compassion, collaboration and professionalism.”

TCSPTF & Committee Structure



Know the Signs >> Find the Words >> Reach Out

Timeline (cont.):

- **January 2009:** The Tuolumne County Suicide Prevention Strategic Plan (TCSPSP) was completed and the Core Oversight Committee was formed. Selection of the Coordinating Agency (CNVC) and efforts to seek funding ensued. Sonora Area Foundation funded initial launch of TCSPTF implementation.
 - *Funding note: funds were awarded to the coordinating agency to ensure implementation of the Strategic Plan with the understanding that funds could be leveraged to pay for additional trainings, materials, personnel, etc.*
- **2009-2010:** Multiple trainings provided, community education conducted, “No Wrong Door” policy disseminated, partners launch and expand local programs (Dawn’s Light, CNVC bullying prevention campaigns, school based programs etc...)
- **2010:** Core Oversight Committee Bylaws were written and preparations made for the next TCSPTF planning period

Strategic Plan

APPENDIX B SUICIDE PREVENTION STRATEGIC PLAN

TRAINING, PREVENTION and INTERVENTION EXPANDED PROPOSALS YEARS TWO AND THREE

Program	Brief Description	Target Audience/ Target Population/Presentation Group Size	Age Groups	Outcomes	Annual Costs	Agency to provide oversight	Inkind/Cash and Noncash
SOS Signs of Suicide School Based Intervention	SOS Signs of Suicide is a 2-day secondary school-based intervention that includes screening and education. Students are screened for depression and suicide risk and referred for professional help as indicated. Students also view a video that teaches them to recognize signs of depression and suicide in others, and taught that the appropriate response to these signs is to acknowledge them, let the person know you care, and tell a responsible adult (either with the person or on that person's behalf). Students also participate in guided classroom discussions about suicide and depression. The intervention attempts to prevent suicide attempts, increase knowledge about suicide and depression, develop desirable attitudes toward suicide and depression, and increase help-seeking behavior. Note the education part of the SOS program can be implemented in one class period, such as in a health class. The main teaching tools are a video and discussion guide, and a brief 7-question, non-diagnostic screening tool for depression. Students are then given the opportunity to meet with counselors following the program, for themselves or for a friend.	9 th – 12 th grade	Youth	School counselors and teachers trained and implementing curriculum by end of year one. The nationally recognized high school version, evaluated in a randomized-control study, has demonstrated a reduction of suicide attempts by 40% (Aseltine & DeMartino, 2004) and a dramatic increase in help-seeking behavior (Aseltine, 2003), a critical element in preventing suicide.	Total Cost of SOS program kit is \$300, @ 10 kits for 4 grade levels in high schools = \$3,000 (Pending additional funds for school counselors through the Student Mental Health initiative) Costs for staff training not included. A kit of materials is available that includes a staff procedure manual and training video, student screening forms, an educational video and discussion guide, and brochures on suicide and depression for students and parents.. The SOS program kit provides extensive, detailed step-by-step information on how to implement the program.	Individual School Districts implementing curriculum	Unknown
Bullying Prevention Schools	The expanded Bullying Prevention Program "I Choose Respect" consists of two components: 1) A 45 minutes of education annually to 4 th grade students in 8 elementary schools in the recognition of bullying behavior, discussion of tolerance, experiential role plays in respect and empathy, intervention strategies for students using role plays, and how to get help in 209-10 2) An intensive one year bullying Prevention Program in one elementary school for grades K-8th which includes 3 components: 1) The above "I Choose Respect" program; 2)Conducting Restorative Justice Circles in which the victim of bullying behavior and the perpetrator of bullying behavior choose friends, relatives to sit in a circle and identify needs and feelings of everyone in the circle, and together develop strategies to restore balance and accountability for the incident including follow up; 3) Training teachers, staff, and students on how to conduct Restorative Circles so that the program is self sustaining. This intensive program will be conducted in a total of 2 schools over 2 years.	4 th graders in 9 schools Identified bullies and victims of bullying and teachers and school staff of Jamestown Kindergarten through 8 th graders in Jamestown Elementary School	Youth ages 5 to 12 years old	1) 400 4 th graders educated annually in "I Choose Respect" in 2009-2010 and 2010-2011 2)500 students educated in "I Choose Respect" 5 years to 12 years old in one school 2010-2011 3) 25 core students trained to facilitate Restorative Justice Circles in one school 2010-2011 4) 25 teachers, staff able to facilitate Restorative Justice circles and provide intervention strategies for bullying in one school 2010-2011	Total of \$60,000 which includes 1)\$20,000 for school presenters in 2009-2010 and 2)\$40,000 for school presenters and trainers for intensive training and prevention activities in one school for 2010-2011	Mountain Women's Resource Center (MWRC)	\$55,000 2009-2010 \$55,000 2010-2011 if MWRC still receives money from the state

Task force activities

- Quarterly meetings were conducted between August 2007 and September 2008
- Entire SPTF (Approx 60 members) attended annual retreats for reporting, collaborating and planning
- Projects throughout the community that targeted suicide prevention were presented, catalogued and included in a resource directory.
- The four strategic directions recommended by the California Strategic Plan on Suicide Prevention were used as a framework for subcommittee assignments, with “Prevention” broken into Prevention and Intervention groups:
 - 1) Development of a Suicide Prevention (and Intervention) system
 - 2) Training and Workforce Enhancements
 - 3) Community Education
 - 4) Monitoring and Surveillance for Effectiveness

Task force activities (cont.)

- Four specific age groups were addressed by each subcommittee:
 - Youth (18 years and under)
 - Young Adult (16-24 years)
 - Adult (25-60 years)
 - Older Adult (over 60 years)
- A resource directory of evidence-based prevention programs was established and prioritized over the three year planning period
- A community education plan was established to cover the three year planning period
- At the end of the first three year cycle, work began on developing a new 3 year plan based on lesson learned and identified needs and resources.

Current Status....

- New Coordinating Agency: ATCAA
(Amador Tuolumne Community Action Agency)
- Next 3 year Strategic Plan completed
- Oversight Committee meeting monthly
 - Recent agenda items include: updates from partners, community response to suicides, state, regional and local efforts and trainings, current events (i.e. Know The Signs campaign, ReachOut)
- Fourth Annual SPTF Retreat planned for Spring, 2013

Challenges, learning points

- We recommend designating an external lead point to reduce stigma of suicide as a “mental health issue” and reframe it as a community health issue
- Sustaining energy and interest of the oversight committee through more mundane tasks can be difficult – it was a topic at a recent meeting and feedback included inviting trainers to provide updates and stories and to discuss community responses to current suicide event.
- Schools (including colleges) also have grant funding and services available - Collaborating can help avoid duplication of services and maximize resources.

Challenges, learning points

- Retaining trained trainers for QPR, SafeTalk, etc. can be difficult
- Compensation for trainers who are expected to provide ongoing trainings (beyond what is required) needs to be addressed and planned for
- Community and stakeholder focus tends to be on youth and older adults, but the largest number of suicides occur in the middle age group, where services and supports are most slim.

Contact information

Tuolumne County Behavioral Health

Willow Thorpe, MHSA Coordinator

105 Hospital Road

Sonora, CA 95370

(209) 533-6245

Coordinating Agency:

ATCAA (Amador-Tuolumne Community Action Agency)

Bob White

rwhite@atcaa.org

(209) 533-1397 x226

Questions & Discussion

If you have a question, please type it into the “Questions” box or “raise your hand” by clicking the hand logo on your control panel



Thank you!

Sandra Black

sblack@edc.org



Theresa Ly

tly@edc.org



Next webinar:

January 9th

Finding & Using Local Data

Please fill out
the
Evaluation!

Webinar will be archived on
www.yourvoicecounts.org