

Quality of Life Council: Suicide Prevention



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"He saw only despair ahead and felt only pain in his present, pain and despair so potent that he sought suicide as a release." (Senator Gordon Smith about his son, Garrett Lee Smith)

Leading Causes of Death, United States

1900

2002

	Causes of Death	Rate per 100,000	Causes of Death	Rate per 100,000
	All Causes	1,719.1	All Causes	847.3
1.	Pneumonia and Influenza	202.2	Heart Disease	241.7
2.	Tuberculosis	194.4	Malignant Neoplasms	193.2
3.	Diarrhea	142.7	Cerebrovascular Disease	56.4
4.	Heart Disease	137.4	Pulmonary disease	43.3
5.	Intracranial Lesions	106.9	Accidents	37.0
6.	Nephritis	88.6	Diabetes Mellitus	25.4
7.	Accidents	72.3	Pneumonia and Influenza	22.8
8.	Cancer	64.0	Alzheimer's	20.4
9.	Senility	50.2	Nephritis	14.2
10.	Bronchitis	40.3	Septicemia	11.7
			Suicide	11.0

Suicide in Perspective

Scope in the U.S.

- Every 18 minutes another life is lost to suicide.
- Every day more than 80 Americans take their own lives and over 1,900 Americans visit Emergency Departments for self-inflicted injury.
- For every two victims of homicide in the U.S. there are three persons who take their own lives.
- There are now twice as many deaths due to suicide as to HIV/AIDS.

Suicide in Perspective

Scope in U.S.

- Between 1952 and 1995, the incidence of suicide among adolescents and young adults nearly tripled.
- In the month prior to their suicide, 75% of elderly suicide victims had visited a physician.
- Many who attempt suicide never seek professional care.
- Males are four times more likely to die from suicide than are females.

Suicide in Perspective

Scope in Florida

- In 2002, there were 2,332 suicides in Florida and 1004 homicides.
- More than twice as many Floridians die by suicide than homicide.
- More than six preventable deaths take place in Florida every day.
- The suicide rate in Florida is the 13th highest in the U.S.
- Nearly 60,000 people attempt suicide in Florida each year.

Suicide in Perspective

Teens

- Suicide is probably the number one cause of death for gay teens.
- Nine out of ten teen suicides take place in the home just before parents return from work.
- About half of teen suicide victims had been in trouble with the law or the school.
- "I want to kill myself, but I don't want to be dead. I mean, I want to be dead, but I don't want to be dead forever. I only want to be dead until my eighteenth birthday."

—A 15 year-old

Suicide in Perspective

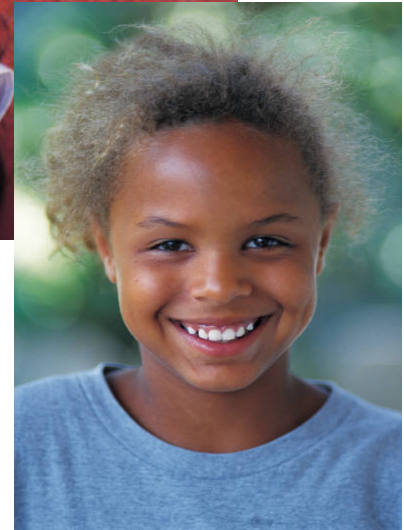
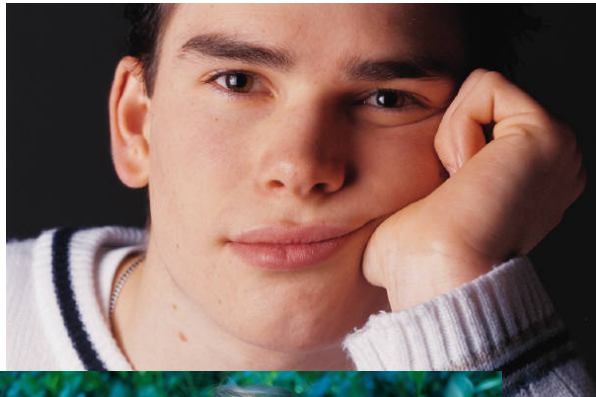
Teens

- Almost half of teen suicide victims had been abusing alcohol or drugs.
- According to the U.S. Surgeon General, more than 80% of teens who kill themselves had a diagnosable and treatable mental disorder.
- In a typical high school classroom, it is probable that one boy and two girls have made a suicide attempt during the past year.
- Teen girls attempt suicide far more often than boys (about 9 times), but males are about 4 times more likely to die.

Suicide in Perspective

Broward County

- Suicide is the second leading cause of death in Broward County of persons 15-24 (accidents being the leading cause).
- The rate per 100,000 population for persons 15-24 is 15.3 in Broward.
- In Florida, the rate is 14.4 and is the third most frequent cause of death.
- **First Call Helpline**
Call 211 or (954) 537-0211
- First Call for Seniors**
(954) 390-0485
- Teen Hotline**
(954) 567-TEEN
(954) 567-8336





Selected Characteristics

Academia

- ◆ Study now, do later
- ◆ Publishing a necessity & critical to progress
- ◆ Job security a worry
- ◆ Job depends on finding scarce resources

Public Health Agencies

- ◆ Do now, study later
- ◆ Publishing a luxury or deterrent to progress
- ◆ Job security a worry
- ◆ Job depends on using scarce resources wisely

Where should we go from here?

- National and State needs
- Injury Prevention Advisory Council
- Training and Education
- Research funding
 - Public Health Foundation
- Organized support
- Cross-disciplinary efforts

Community
Concern

Environmental
Change

Evaluation

Education &
Awareness

Coalitions

Physical
Environment

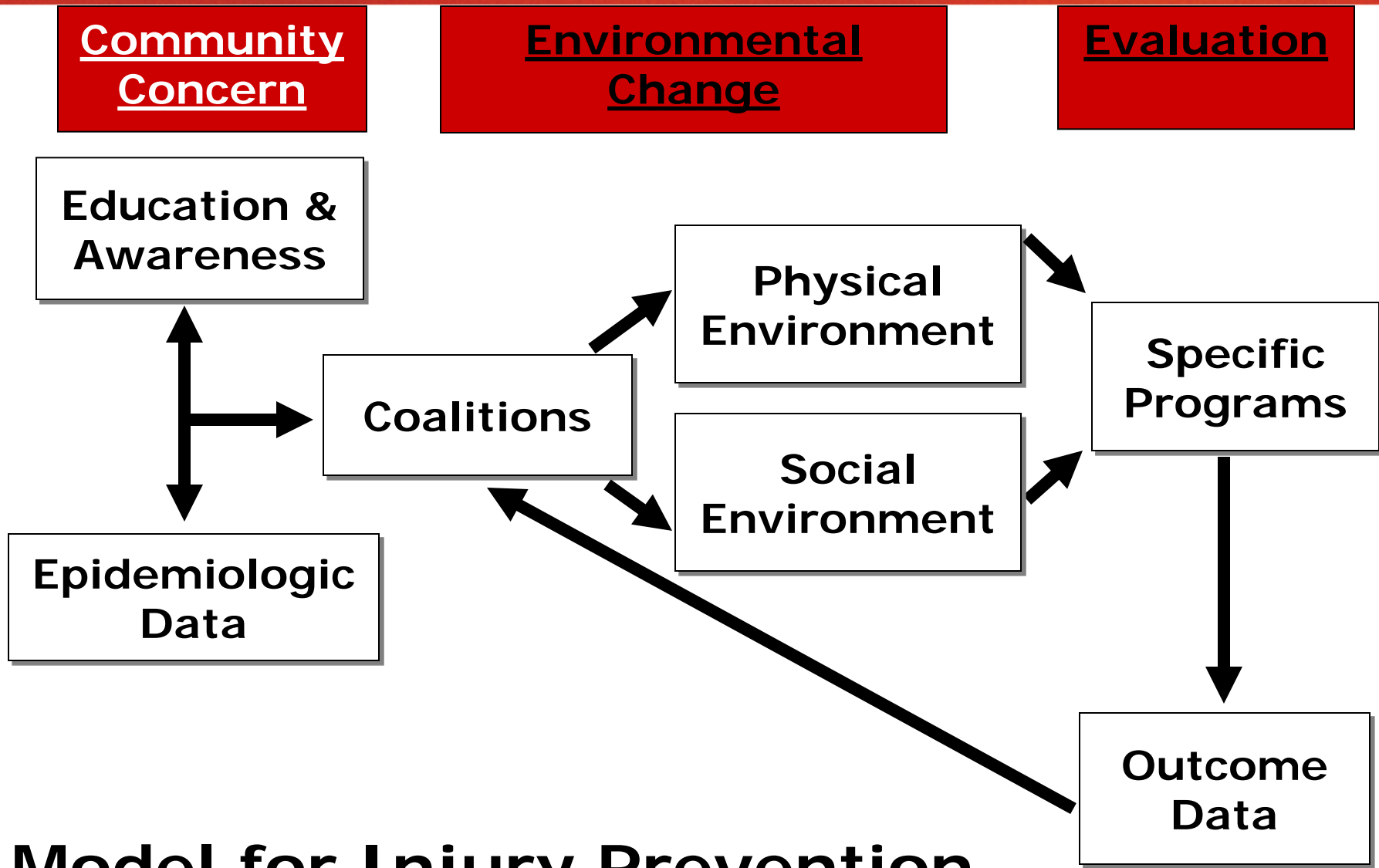
Social
Environment

Specific
Programs

Epidemiologic
Data

Outcome
Data

Model for Injury Prevention

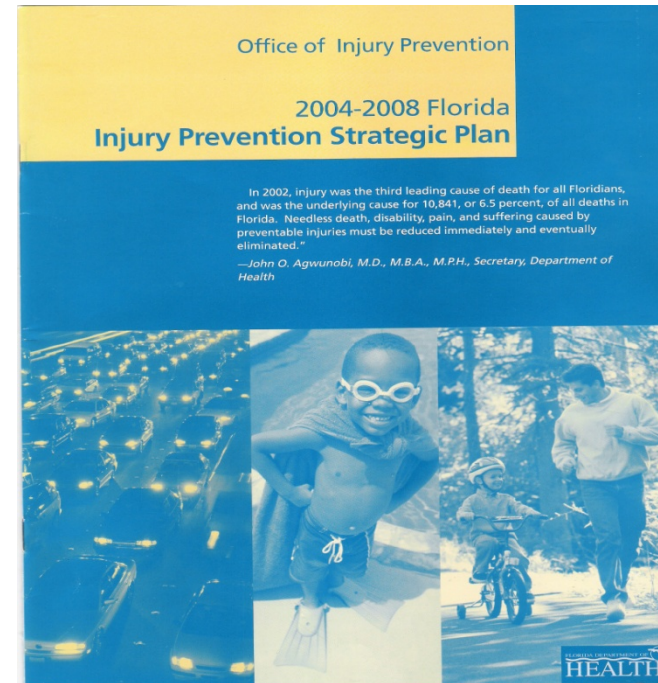


FL State DOH IP Program and Role of Pediatric Emergency Medicine to:

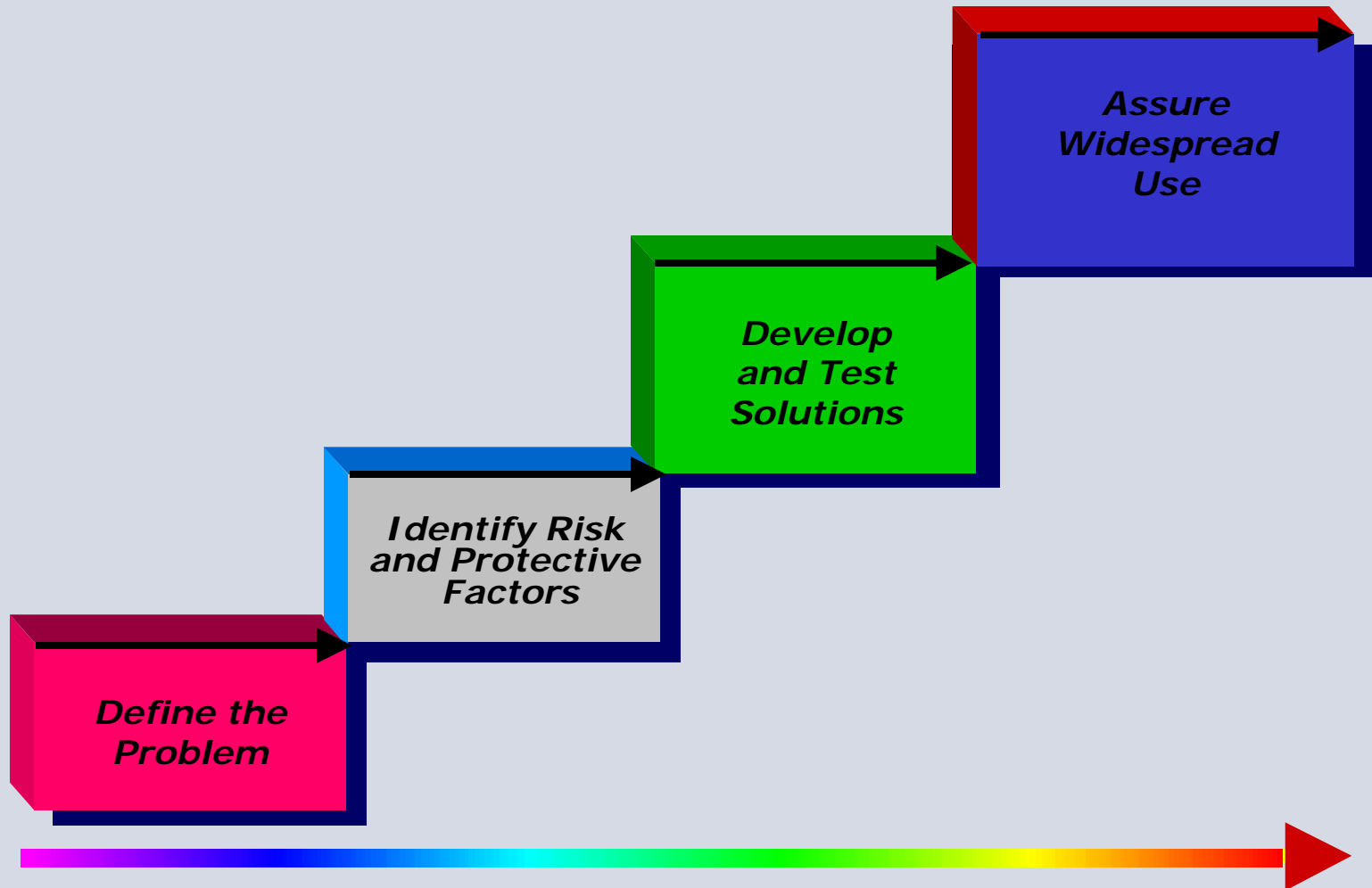
✓ develop capacity

✓ implement effective, comprehensive injury prevention programs

-- including both unintentional injury and violence prevention.



The Public Health Approach



Specific Aims of the Youth Suicide Prevention Prototype Program

Training: The Youth Suicide Prevention School Based Guide was developed to assist schools in creating comprehensive suicide prevention programs.

Coordination: Establish a pilot suicide surveillance system in Broward County to better understand the problem.

Communication: Conduct communications network to include:

- ✓ public awareness
- ✓ advocacy events
- ✓ media partnerships
- ✓ primary care and emergency services providers decision makers
- ✓ to improve response to mental health emergencies.

<http://www.sprc.org/statepages>

Pilot Counties

➤ Alachua

- *non-metropolitan* community
- 217,955 residents.
- 65 schools, total enrollment: 29,684 students.

➤ Broward

- *metropolitan* community
- population under 18: 382,934
- Total school enrollment: 260,916
- The 10 to 14 age group grew by 68% in the past decade -- double the rate for overall population growth.

Youth Suicide Surveillance System

- Track the epidemiology of suicidal behavior in pilot counties. This behavior includes suicide attempts which are often underreported.
- Coordinate information collection from various community agencies encountering suicidal youth.
- Outline statistics based on scientific research to assist in addressing the problem of youth suicide.



Youth Suicide Surveillance System: Alachua and Broward Counties

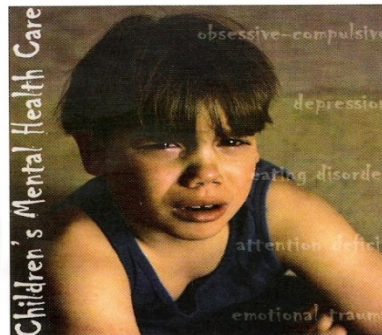
- Agency for Health Care Administration Hospital Data: Alachua and Broward Counties
- Alachua County Medical Examiner
- Baker Act Data: Alachua and Broward Counties
- Broward County Medical Examiner
- Broward County Fire Rescue (Broward Sheriff's Office)
- Broward General Medical Center Pediatric Emergency Department/Pediatric Trauma Center
- Department of Juvenile Justice:
Alachua and Broward Counties
- First Call for Help, Broward County
- Shands Hospital
Emergency Department, Alachua County



Primary Care

- The majority of Americans receive treatment for behavioral health conditions from a primary care physician.

Crisis in Children's Mental Health Care: What We Can Do



Pediatricians are aware of less than half of the children in their practice who have mental health problems, according to a child psychiatrist who will speak at the Monday, October 10 plenary session for developmental and behavioral pediatrics.

"There is a burden of mental illness in the pediatric population, yet there is a mental health care delivery crisis now," says Michael Jellinek, MD, FAAP, faculty of "Children's Mental Health Crisis" (P308).

The prevalence of mental health problems in the general pediatric population approaches 10 percent, estimates Dr Jellinek, chief of child psychiatry at Massachusetts General Hospital and professor of psychiatry and of pediatrics at Har-

vard Medical School. The prevalence is even higher — more than 20 percent — among severely stressed, chronically ill or low-income children.

Emotional and behavioral disorders in children range from depression to attention deficit, obsessive-compulsive, and eating disorders as well as emotional trauma due to difficult home situations, such as child abuse or parents' divorce.

Underrecognized, Undertreated

Many children with psychosocial dysfunction need professional help, but their problems are often difficult for pediatricians to recognize, Dr Jellinek says.

"The pediatrician may see the school-aged child

See Mental Health, page 3

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™



75
Years of Caring
1930-2005

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Improving Access to Mental Health Care Primary Care Providers Providers

- Service Models which increase families' help-seeking or adherence related to mental health care
- Incorporate mental health screening into general pediatric practice
- Collaborate with mental health professionals or school personnel
- Use of technology to help in assessment and management of mental health disorders
- Increase reimbursement for mental health services



Broward County Primary Care Physician Survey

- Over the past two decades, the rate of psychosocial problems identified in primary care increased as mental health services decreased.
- Primary Care Physicians are:
 - Keys to early identification of children with mental health disorders and determining appropriate interventions.
 - In need of updated information on mental health screening and referrals.

Primary Care Physician Survey

- ◆ Physicians surveyed desired more information on Mental Health Services.
- ◆ The most common 3 barriers seen by the physicians in treating Mental Health clients were (in order):
 1. Inadequate insurance for Mental Health services.
 2. Not enough time or resources.
 3. Inadequate reimbursement for the treatment of Mental Health concerns.

AAP CATCH Grant: Health Professionals & Families United



Emergency Medical Services and Mental Health

- ◆ Ten percent of adolescents with mental health problems make their **first connection to medical** treatment through emergency medical services.
- ◆ When children or youth receive emergency medical services they experience anxiety, fear, confusion, stress, or other threatening emotions
- ◆ Education of pre-hospital professionals regarding mental health issues such as child abuse is inadequate (Hoyle and White, 2003).
- ◆ Thus, there is a need to increase knowledge and increase the capacity of first responders to deal with suicidal behavior and mental health emergencies.

Law Enforcement and Mental Health

- Police are often the **first and sole community resource** called on to respond to urgent situations involving persons with mental illness.
- Law enforcement is responsible for **recognizing the need** for treatment for an individual with mental illness and **connecting the person with the proper treatment resources**. **“street-corner psychiatry”**
- A recent study by an EMSC grantee reports that the **personality and attitude of police** dealing with mental health problems and psychological emergencies is absolutely critical.

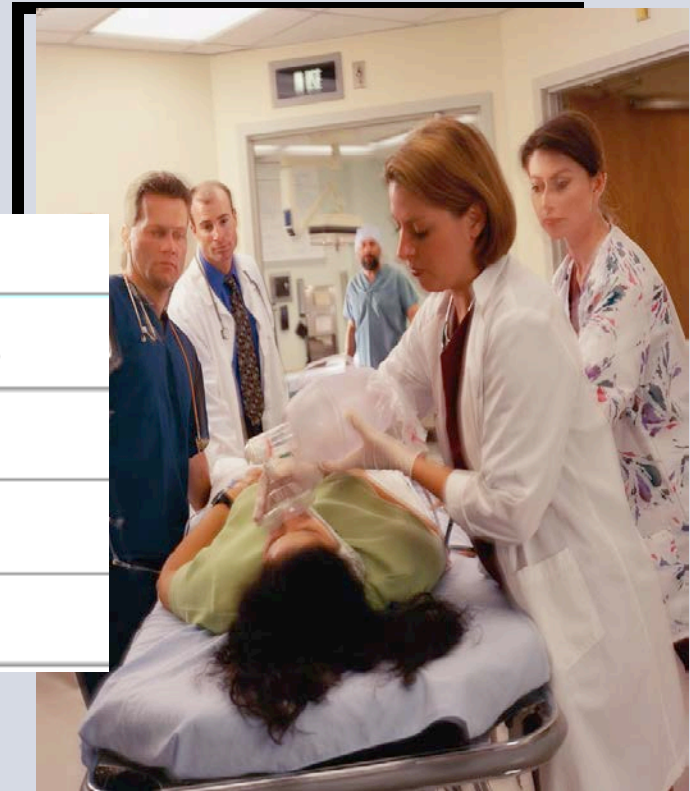
Law Enforcement and The Emergency Department

- ◆ The relationship between police and emergency departments is critical due to the **involuntary admission** of mental health cases.

Preparedness



Data
Elements for
Emergency
Department
Systems



Baker Act Data

- ◆ Baker Act data were analyzed from year 2001 to the first 6 months of year 2003 for Alachua and Broward counties totaling 5126 cases.



- ◆ The eligible population was defined as children age 18 years old and younger.

Baker Act Data Results for Alachua and Broward Counties

- The Baker Act was not found to be invoked on either gender more frequently.
- **Gender** was found to be related to the **harm type**:
 - girls tended to **harm themselves more often**,
 - whereas **boys more frequently harmed others** as well as **harming both themselves and others** at the same time.

Baker Act Data Analysis

- The percentage of **Hispanic Baker Act Recipients in Broward County nearly tripled** from 6.7% in 2001 to 16.2% in the first six months of 2003.
- In **Broward** County **more mental health professionals** were among Baker Act enforcement personnel than in **Alachua** County where **law enforcement personnel** are the primary Baker Act enforcement personnel.

Suicide Prevention

A Florida Imperative

There is

Help & Hope

A public service by the Florida Outdoor Advertising Association

www.floridasuicideprevention.org

2001
Suicides 2,290
AIDS 1,658
Homicide 964

The School Board of Broward County, Florida

RESOLUTION

No. 03-43

Resolution In Support of Suicide Prevention Day March 26, 2003

WHEREAS, the devastation of suicide has consumed families statewide and remains a serious health problem; and

WHEREAS, surveys indicate that children and adults educated on the dangers and effects of suicide will be more likely to detect and possibly prevent such an act; and

WHEREAS, raising awareness in the community about the significance of psychiatric illness and the importance of promoting treatment and education can save lives; and

WHEREAS, an integrated approach to lowering the state's current suicide rate by one third by 2005 has been implemented; and

WHEREAS, parental influence and community education and involvement are known to be the most crucial factors in preventing suicide; and

WHEREAS, key sources such as mounting public information campaigns, specialty training for caregivers and community leaders, and developing a responsive health care system are being established to meet the goal of lowering Florida's suicide rate;

NOW, THEREFORE, BE IT RESOLVED, that The School Board of Broward County, Florida, in conjunction with the hundreds of organizations and millions of citizens and residents to the United States, hereby declares and proclaims its support for

Suicide Prevention Day
March 26, 2003

and urges all schools, centers and departments within its jurisdiction to observe this month with appropriate programs and activities.

Given at Fort Lauderdale, Florida, this 18th day of March 2003.

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

BY:

Leif Wexler
Leif Wexler, Chair

ATTEST:

Franklin L. Hill, Jr.
Franklin L. Hill, Jr., Superintendent of Schools



September 17, 2005

Fourth Annual Raising Healthy Children Seminar

FREE SEMINAR
designed for educators, physicians,
nurses, and mental health care professionals



Presented by
Broward County One Community Partnership,
Nova Southeastern University,
and the Broward County Children's Services Council



www.nova.edu/childrenconference



What Has Changed?
The Feminization of the Superhero

- One new factor: entertainment media's portrayal of women in violent roles
- Music videos, movies, magazines and videogames
 - More instances of female violence being shown as admirable and problem solving
 - Trend in children's programming for violent female characters
 - Women musicians glorify and justify violence

WITH A FOREWORD BY JANET RENO

SUGAR & SPICE NO LONGER NICE

AND
HOW WE CAN STOP GIRLS' VIOLENCE

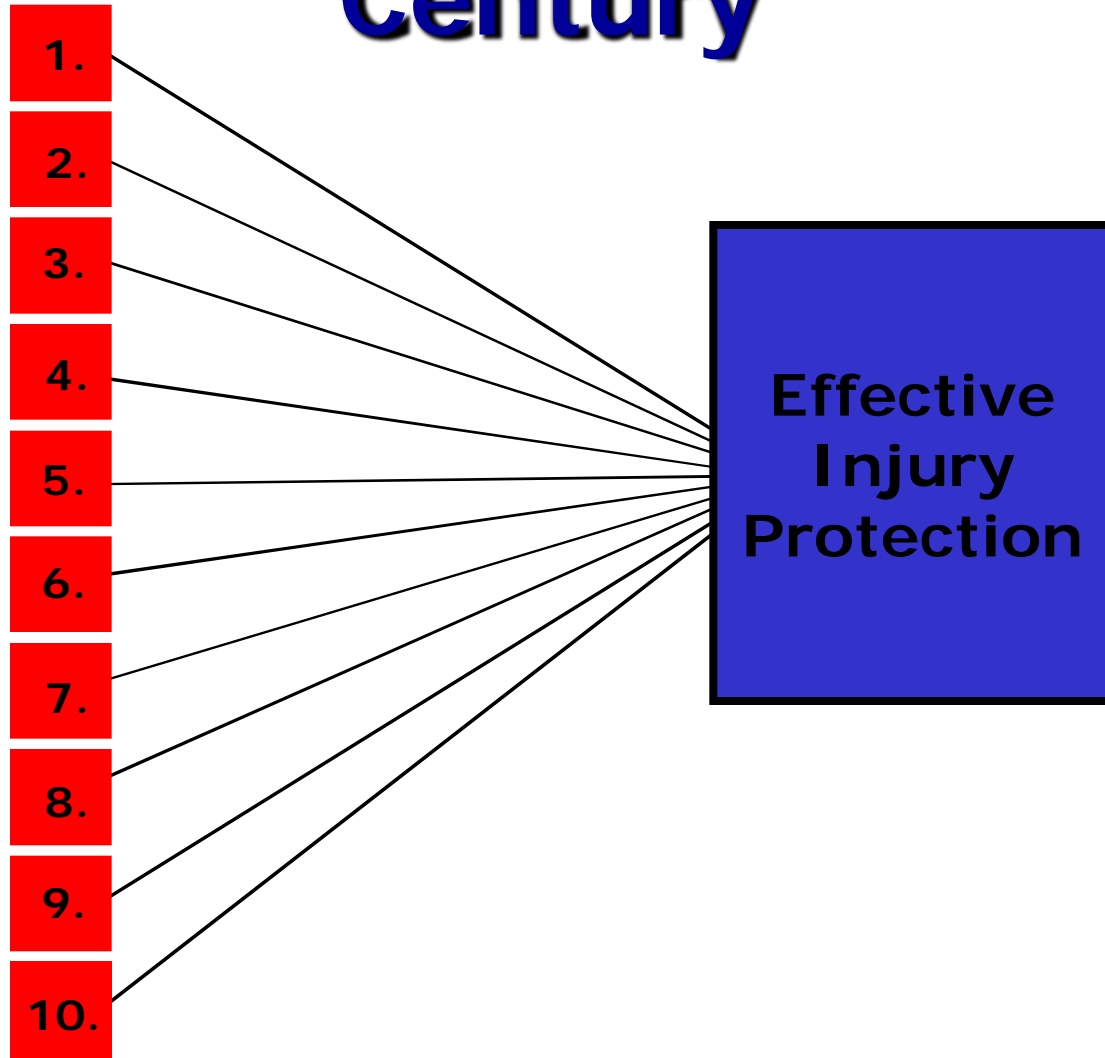
"THIS PROVIDES ANSWERS"
— BILL COSBY

DEBORAH PROTHROW-STITH
HOWARD R. SPIVAK

***Suicide Prevention is everyone's responsibility.
Together we can make a difference -
Improving the health and quality of life.***



Top 10 Achievements of the 21th Century



Nova Southeastern University

**Suicide Prevention:
Recent Initiatives
At NSU**

Suicide Prevention Initiatives @ NSU: 2004-2006

Jan., 2004

- Student Counseling (SC) reinvented, introducing a Brief-Therapy model, streamlined phone intakes, fast access to first sessions, and goal-oriented sessions.
- First full-time professional staff members hired.
- Liaison established between SC and Student Affairs Reps throughout NSU.

Feb., 2004

- Launch of 24/7 NSU student crisis line:
 - Same phone number as SC: 954-262-7050.
 - Staffed by full-time NSU SC staff counselors.
- Protocol established for university administrators to refer and mandate at-risk students to SC.

Suicide Prevention Initiatives @ NSU: 2004-2006

Feb., 2004

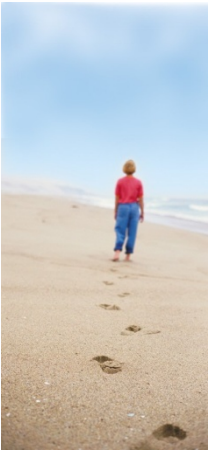
- Liaison established between SC and Residential Life.
- SC involved in "Take Back the Night."

March, 2004

- First mandated clients sent to SC.
- Liaison established between SC & Student Health.

May, 2004

- SC facilitates first voluntary hospitalization for suicidal NSU student.
- SC staff attend first of many suicide-prevention trainings.
- SC brochure developed for campus-wide distribution.



Suicide Prevention Initiatives @ NSU: 2004-2006

Summer, 2004

- SC outreach efforts begin at various college orientations.
- Psychiatrist hired at SC: 4 days per week.
- President initiates campus-wide interdisciplinary suicide prevention initiative, establishing the "NSU Suicide Prevention Committee."
- SC moves into Parker Building—a central but discreet location.
- Liaison established between SC and Athletics.
- First SC training of Residential Life RAs.

Suicide Prevention Initiatives @ NSU: 2004-2006

Summer, 2004

- SC trains administrators at various colleges on how to recognize and refer troubled students.
- SC trains PA students on time/stress management.
- Suicide Prevention Committee begins work on PowerPoint training modules for campus staff & students.

Fall, 2004

- Baker Act protocol established with NovAlert.
- SC website launched:
<http://www.nova.edu/studentcounseling/>
- SC facilitates first involuntary hospitalization of an NSU suicidal student.
- SC co-sponsors World AIDS Day activities.

Suicide Prevention Initiatives @ NSU: 2004-2006

Spring, 2005

- SC and Clinical Operations administrators meet with NBHD to facilitate voluntary hospitalizations of NSU Students to Broward General.
- SC provides suicide prevention training for HPD residents
- SC trains HPD faculty—and faculty/administrators at Miami Dade Community College—on how to recognize, approach, and refer students in distress.
- NSU “Wellness Committee” established.
- SC develops first draft of the “Risk & Resource Interview Guide” for staff suicide assessments.

Suicide Prevention Initiatives @ NSU: 2004-2006

From the Risk and Resource Interview Guide

© Flemons & Gralnik, 2005

■ Suicidal/Homicidal Thoughts

	Client	Client's Significant Others
Risk	<ul style="list-style-type: none">• Have you had thoughts about taking your/someone else's life?• How do you make sense of this?	<ul style="list-style-type: none">• Do your SOs know about the thoughts you've been having?• If they knew, what would be their response?• How would they make sense of it?
Resource	<ul style="list-style-type: none">• Have you ever succeeded at not acting on an urge to take your/someone else's life?• How do you make sense of this?	<ul style="list-style-type: none">• Have your SOs talked to you about not acting on your urges?• How do they make sense of your previous successes at not acting on urges?

Suicide Prevention Initiatives @ NSU: 2004-2006

Summer, 2005

- Planning begins for providing SC services at NSU Educational Centers.
- SC begins a weekly advice column in the Knight newspaper (now called *The Current*).
- SC and CPS co-facilitate postvention response to murder of NSU Optometry student.
- SC produces a promotional video: "Inside Student Counseling."

Suicide Prevention Initiatives @ NSU: 2004-2006

Fall, 2005

- Student Affairs and SC begin developing protocols for an NSU Crisis Response Team.
- SC and CPS co-facilitate postvention response to death of USchool Coach.
- Suicide Prevention Committee begins offering one-day workshops for DCF.
- Suicide Prevention Committee delivers recommendations to the president for comprehensive suicide prevention initiative at NSU.

Suicide Prevention Initiatives @ NSU: 2004-2006

Spring/Summer, 2006

- NSU Suicide Prevention Committee will meet with the President and Vice Presidents to discuss implementation of the committee's recommendations.
- NSU Suicide Prevention Committee will continue offering day-long DCF sponsored workshops for agency administrators in the community.
- SC staff counselors will take Baker Act training.
- SC will begin offering services at NSU Educational Centers.

Summary

- Suicide is a major public health problem even apart from the emotional cost to survivors
- Increased awareness of suicide and providing more comprehensive mental health services will save lives
- Strong links exist between suicide and other forms of violence, including homicide
- Natural disasters and personal loss increase the risk of suicide



More Summary

- NSU has and is developing many resources to decrease the risk of suicide and to facilitate effective crisis intervention
- Collaboration and community service are major priorities of the university
- Collaboration among community agencies is essential in addressing the problem of suicide



Preventing Suicide is Everyone's Responsibility

- ◆ Thank you from
- ◆ Deborah Mulligan
- ◆ Gene Cash
- ◆ Douglas Flemons
- ◆ Scott Poland

