



Be Aware!

Knowing the Signs of Suicide

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CRIHB

The California Rural Indian Health Board, Inc.



Overview

- Prevalence of suicide
- Risk factors
- Signs of Suicide: An evidence-based suicide prevention program
- ACT
- Other suicide response programs offered by CRIHB
- Questions/discussion

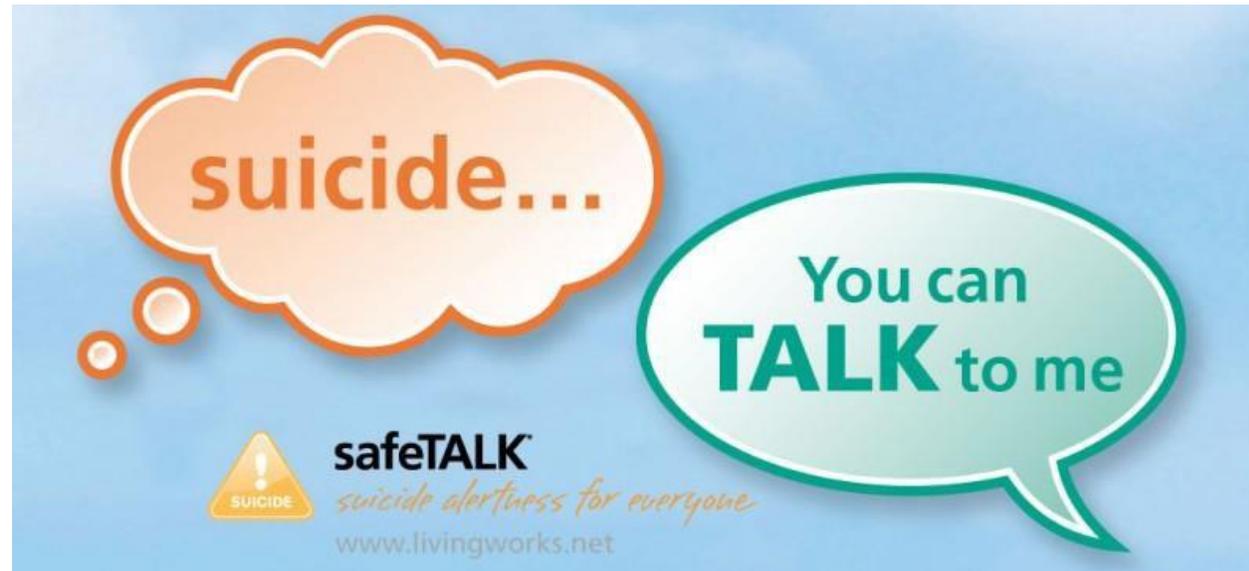


Objectives

- Name at least three (3) strategies to raise awareness about suicide in American Indian/Alaska Native (AI/AN) communities
- Utilize all the ACT steps for suicide alertness
- Identify three (3) evidence-based practices for suicide prevention and early intervention

Before we start...

- Group Agreements
- Safety and “self-care”
- What do you hope to get out of this session?





Prevalence of suicide

- **AI/AN suicide rates**

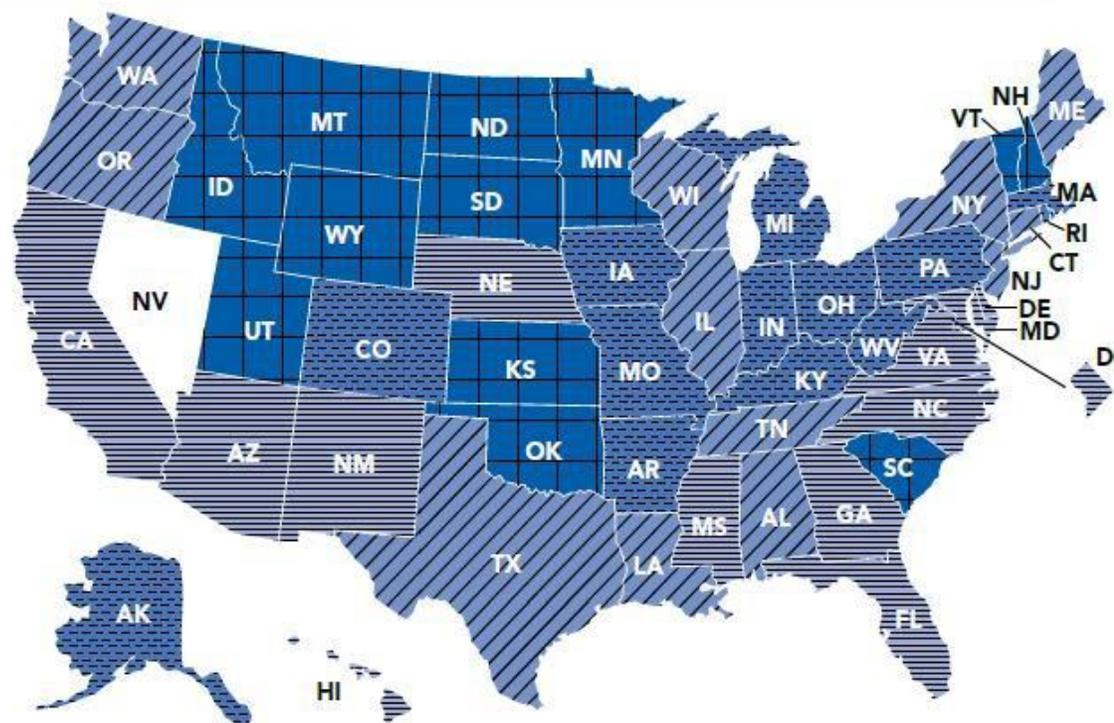
- 21.5 per 100,000, more than 3.5 times higher than those among racial and ethnic groups with the lowest rates.
- More than one-third of AI/AN suicide deaths were youth
- AI/AN males were more than twice as likely to die by suicide as most other gender and racial and ethnic subgroups.

A screenshot of a CDC website page. At the top left is the CDC logo and text: "Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™". At the top right is a search bar and a link to "A-Z Index". Below this is a blue header bar with the text "Morbidity and Mortality Weekly Report (MMWR)". Underneath is a white bar with the CDC logo and social media icons for Facebook, Twitter, Email, and RSS. The main title of the article is "Suicides Among American Indian/Alaska Natives — National Violent Death Reporting System, 18 States, 2003–2014". Below the title is the issue information: "Weekly / March 2, 2018 / 67(8);237–242". At the bottom is the author list: "Rachel A. Leavitt, MPH^{1,2}; Allison Ertl, PhD²; Kameron Sheats, PhD²; Emiko Petrosky, MD²; Asha Ivey-Stephenson, PhD²; Katherine A. Fowler, PhD² (View author affiliations)".



PROBLEM: Suicide rates increased in almost every state.

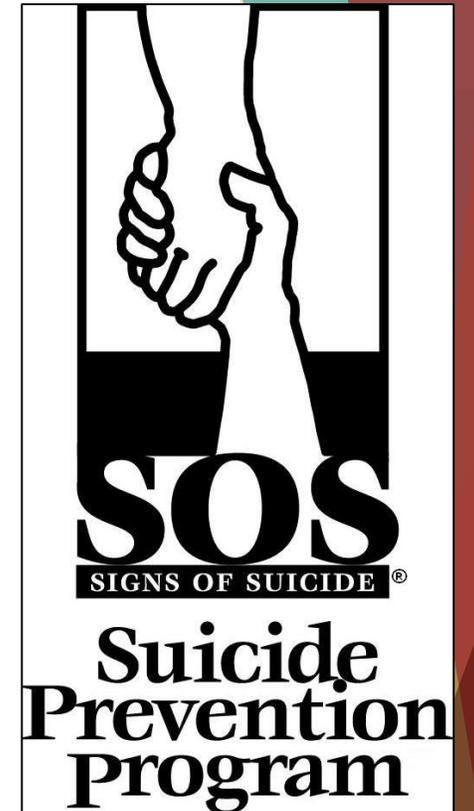
Suicide rates rose across the US
from 1999 to 2016.

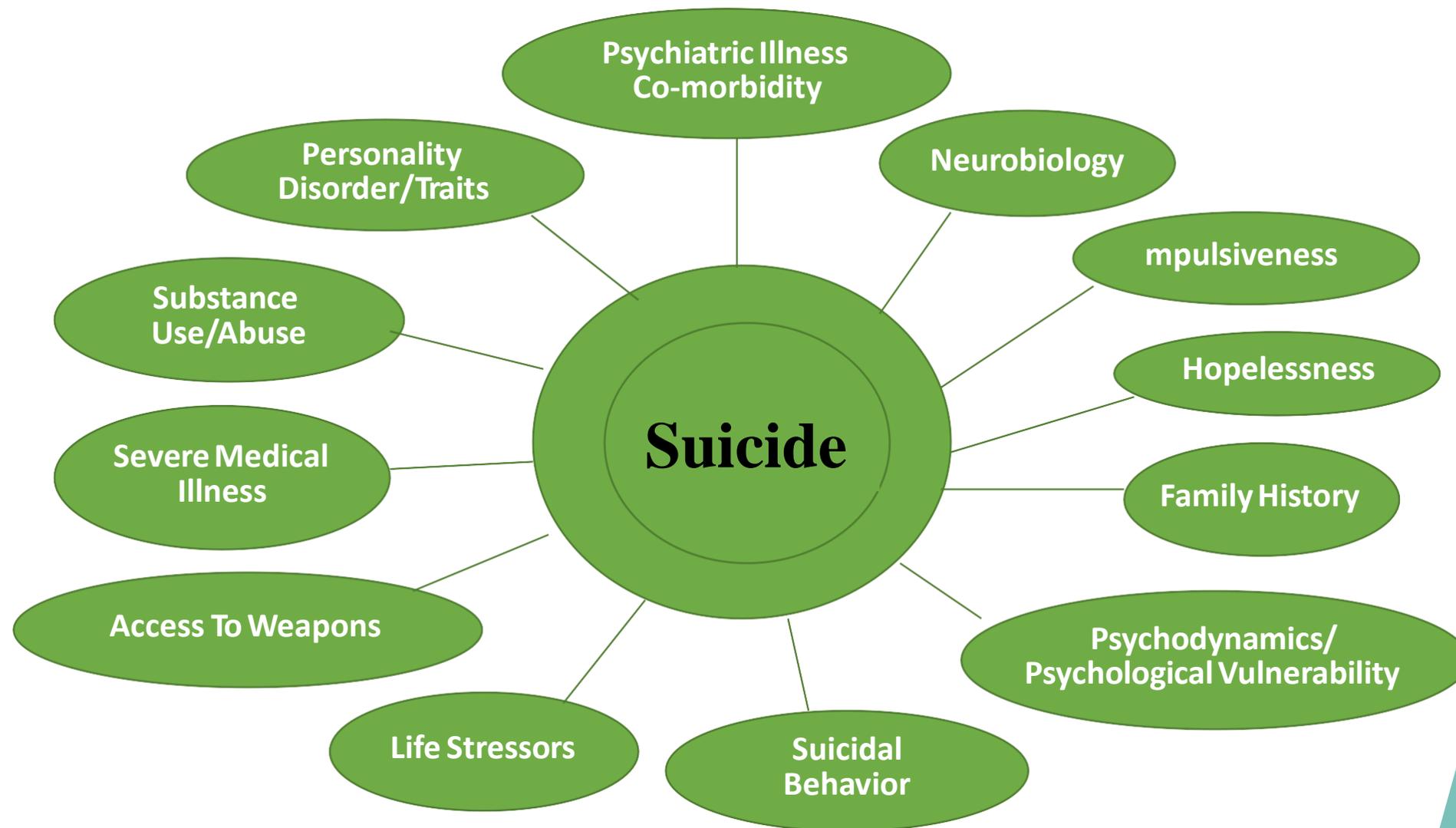


SOURCE: CDC's National Vital Statistics System;
CDC Vital Signs, June 2018.

Signs of Suicide (SOS) curriculum

- Developed by Screening for Mental Health, Inc.
- 60-Minute session
- Includes Implementation Guide/DVD
- Best Practice Curricula for schools
- What we are doing today is not the SOS curriculum, but a modified version







What are the signs of suicide?

- Talking, reading, or writing about suicide or death
- Talking about feeling worthless or hopeless
- Saying things like, “I’m going to kill myself,” “I wish I were dead,” or “I shouldn’t have been born”
- Visiting or calling people to say goodbye
- Giving things away
- A sudden interest in drinking alcohol
- Purposely putting oneself in danger
- Obsessed with death, violence, and guns or knives
- Previous suicidal thoughts or suicide attempts

<http://pbskids.org/itsmylife>

ACT

- **Acknowledge**
 - Listen to your friend, don't ignore threats
- **Care**
 - Let your friend know that you care
- **Tell**
 - Tell a trusted adult that you are worried about your friend



Acknowledge

- “That sounds really tough, I’m sorry to hear that.”
- “You have some major challenges on your plate.”
- Don’t minimize feelings:
 - “You’ll get over it.”
 - “Time heals all wounds.”
 - “Stop worrying about it.”

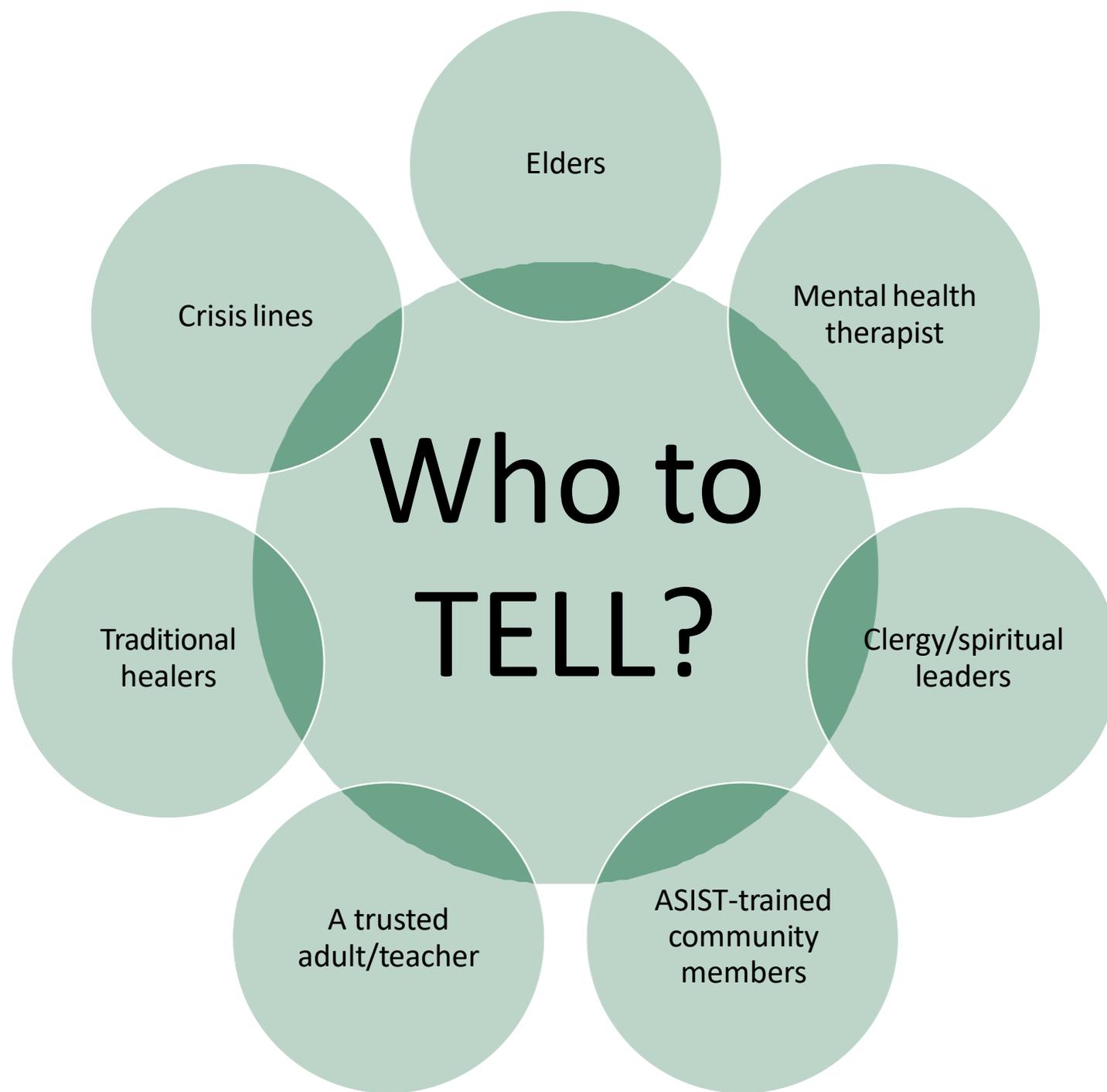
Care

- “I would hate for any harm to come to you.”
- “I don’t want this to get any worse. I’d really like to see you get some help.”
- “You are an important part of my class and I want to be sure you stay safe.”



Tell

- “I know Ms. Jennings in the Student Services office; she works with many students who are facing challenges like you are. Let’s go see her together.”





NATIONAL

SUICIDE
PREVENTION
LIFELINETM

1-800-273-TALK (8255)

suicidepreventionlifeline.org



THE **TREVIOR** PROJECT

LGBTQ CRISIS HOTLINE

CALL 1-866-488-7386



**TRANS
LIFELINE**
877-565-8860

A black and white poster for Trans Lifeline. At the top is a white icon of a raised fist with a female symbol (a circle with a vertical line) in the center, and two arrows pointing outwards from the fist. Below the icon, the words "TRANS" and "LIFELINE" are written in a large, bold, distressed, stencil-like font. At the bottom, the phone number "877-565-8860" is displayed in the same distressed font, with each digit contained within a small rectangular box.

Stay safe

- Never promise secrecy when it comes to suicide!
- Always get help; you are not alone
- Know local resources

STOP
suicide
Save a life. Choose to live.

Video: “We All Need to ACT to Prevent Suicide”

<https://youtu.be/JuMsdUV1h2I>



Practice!

Who/Place: Co-workers on a work break

Person 1: Tell Person 2 that you're worrying about things, withdrawing from friends and family, and feeling like you can't handle life anymore.

Person 2: Go through steps of ACT

- Have a conversation
- It's okay if it's difficult

Practice debrief

- What was it like?
- How did it feel to go through ACT?
- Who did you say you'd go Tell?



Suicide Prevention/Intervention Trainings

LivingWorks

- suicideTALK
- safeTALK
- safeTALK Training of Trainers
- ASIST (Applied Suicide Intervention Training)



NAMI NH (National Alliance on Mental Health New Hampshire)

- Connect Suicide Postvention



SMH (Screening for Mental Health)

- Signs of Suicide (SOS)



LivingWorks Philosophy

- Suicide is everyone's business
- Suicide can be prevented
- Most people with thoughts of suicide don't want to die



suicideTALK Workshop

- 90-minute session
- Suicide awareness
 - Personal and community beliefs
 - Perspective of person thinking about suicide
 - Ways to help protect, preserve, and promote life
- Community-based training for people ages 15 and older



Workshop Objectives



- Suicide is a serious community health problem that is often misunderstood
- Personal and community beliefs about suicide affect suicide stigma and safety
- The steps taught in safeTALK can be used to help prevent suicide
- How to get involved in life protection, preservation, and promotion

safeTALK Training

- 3-4 hour session
- Best Practice Curriculum
 - Standard, First Nations, Veterans
- Audience
 - Ages 15+
 - Parents, teenagers (age 15-19), community leaders, Tribal leaders, primary care professionals, behavioral/mental health professionals, teachers, military personnel, anyone interested in preventing suicide



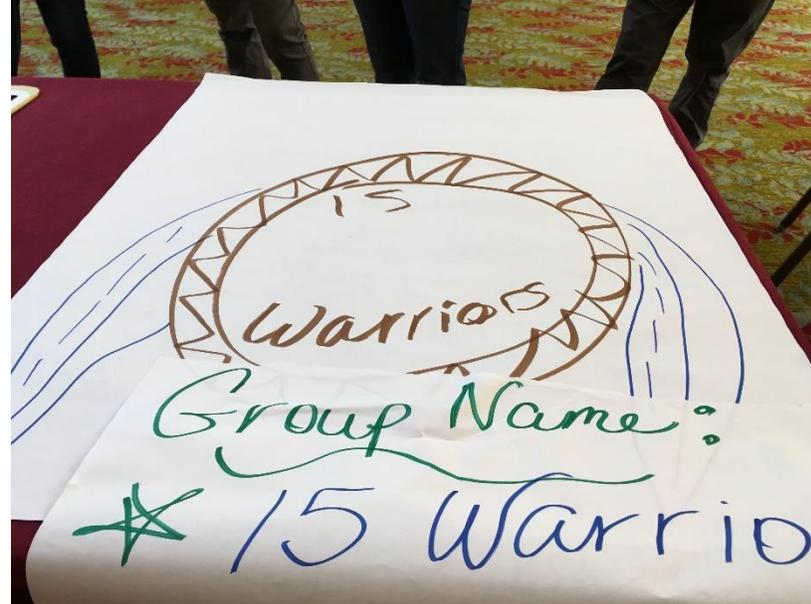
Training Objectives



- Notice and respond to situations where suicide thoughts might be present
- Move beyond the common tendency to miss, dismiss, and avoid suicide
- Apply the TALK steps: Tell, Ask, Listen, and KeepSafe
- Know community resources and ways to connect with help

Registered suicideTALK and safeTALK Trainers

- Daniel Domaguin, Behavioral Health Clinical Manager
- Deborah Kawkeka, Training Coordinator



QPR (Question, Persuade, Refer)

- 1 hour session
- Model of early:
 - Recognition of suicide warning signs
 - QPR
 - Intervention and referral
 - Professional assessment and treatment
- Audience
 - Middle school and above (only if adults and high schoolers are trained)
- QPR Trainer
 - Deborah Kawkeka, Training Coordinator





QPR Instructor

- Deborah Kawkeka, Training Coordinator





safeTALK Training of Trainers

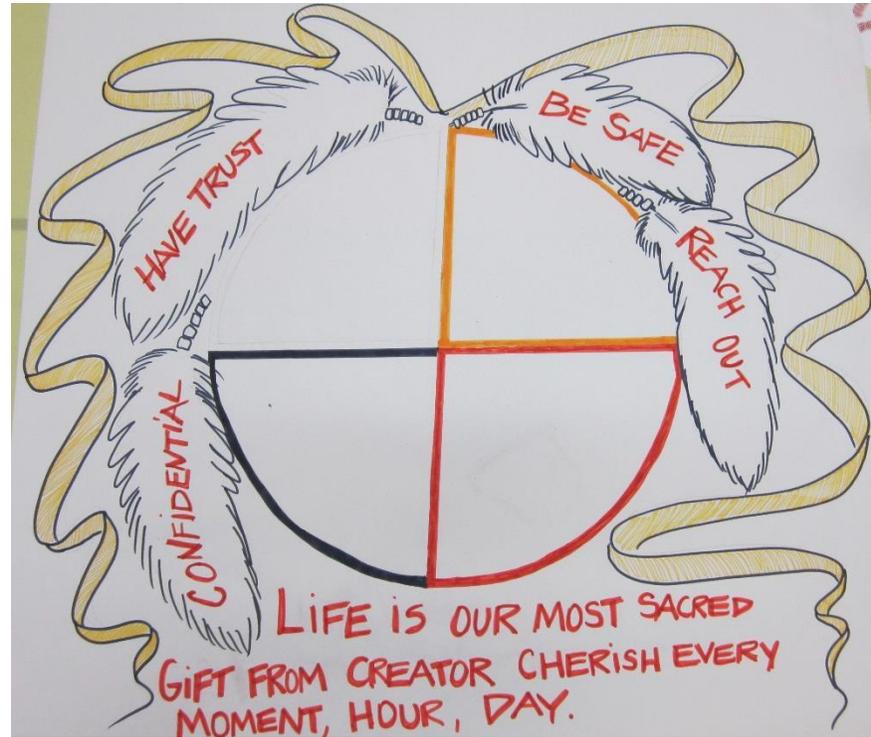
- Two-day training
- Can train up to 10 individuals to become a Registered safeTALK Trainer
- Cost of approximately \$9,000 is waived for CRIHB full-member Tribes and Indian Health Programs



Courtesy of the Oakland Museum of CA

safeTALK Instructor

- Deborah Kawkeka, Training Coordinator



ASIST: Applied Suicide Intervention Skills Training

- Two-day suicide first aid training
- Gatekeeper training for people ages 16 and older
- Intended for: first responders, mental/behavioral health and primary care professionals, volunteers, and community leaders



ASIST Objectives

- Understand ways that personal and society attitudes affect suicide interventions
- Provide guidance and suicide first aid to a personal at risk in ways that meet their safety needs
- Identify key elements of an effective suicide safety plan and the actions required to implement it
- Appreciate the value of improving and integrating suicide prevention resources



Registered ASIST Trainers

- Deborah Kawkeka, Training Coordinator
- Stephen Valliere (pending), Project Coordinator



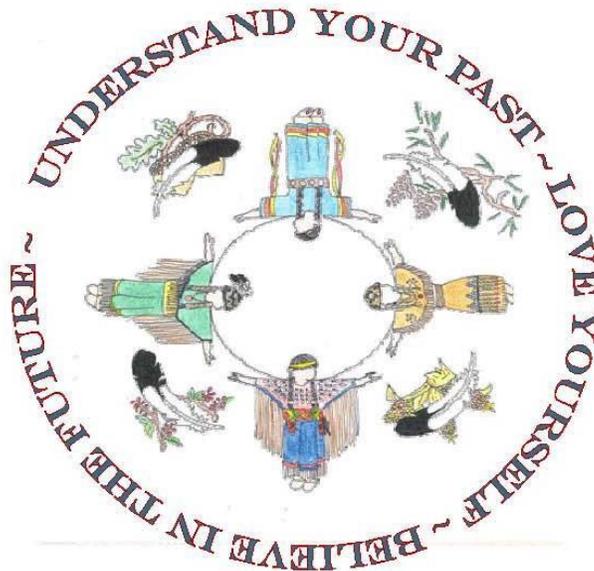
Connect Suicide Postvention Training

- One-day training
- Based on socio-ecological model
- Reduce risk and promote healing after a suicide
- Training to develop
 - Community resource engagement
 - Suicide postvention protocols



Registered Connect Suicide Postvention Trainers

- Kathleen Jack, Deputy Director
- Deborah Kawkeka, Training Coordinator



Questions?





Thank you!

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Upcoming Events

- ▶ 1st Tribal MAT ECHO of 2020
 - ▶ January 21st, 2020
- ▶ WPSI Webinar: Starting Treatment: Buprenorphine Induction 101
 - ▶ January 14th, 2020
 - ▶ featuring Candy Stockton-Joretteg, MD

Free Technical Assistance



MAT WAIVERED PRESCRIBER SUPPORT INITIATIVE



Could you benefit from physician consultation to provide Medications for Addiction Treatment (MAT)?

Are you seeking additional resources to help patients struggling with opioid use?

Do you have questions about best practices to provide MAT for patients with complex needs?

***Request Free
Technical Assistance
TODAY***

Make a request at www.uclaisap.org/MATPrescriberSupport/