

Public Health Approach to Suicide Prevention

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COLORADO
Department of Public
Health & Environment

Population Health Definition.

A population health approach protects and improves the health outcomes of entire **groups of people**. Through this work, uneven distribution of these outcomes are monitored and addressed among subgroups.

Population health strategies support communities affected by disparate opportunities, as well as social and environmental disadvantages.



Office of Suicide Prevention

The mission of the Office of Suicide Prevention is to serve as the **lead entity for suicide prevention, intervention, and postvention** efforts in Colorado, **collaborating with communities** statewide to reduce the number of suicide deaths and attempts.

The office funds local initiatives, focusing on priority populations and highly impacted parts of the state. The office implements primary prevention strategies to reach individuals **prior to the escalation of a crisis**, trains individuals to recognize and respond to suicidal crises, and leads collaborative partnerships.



Office of Suicide Prevention

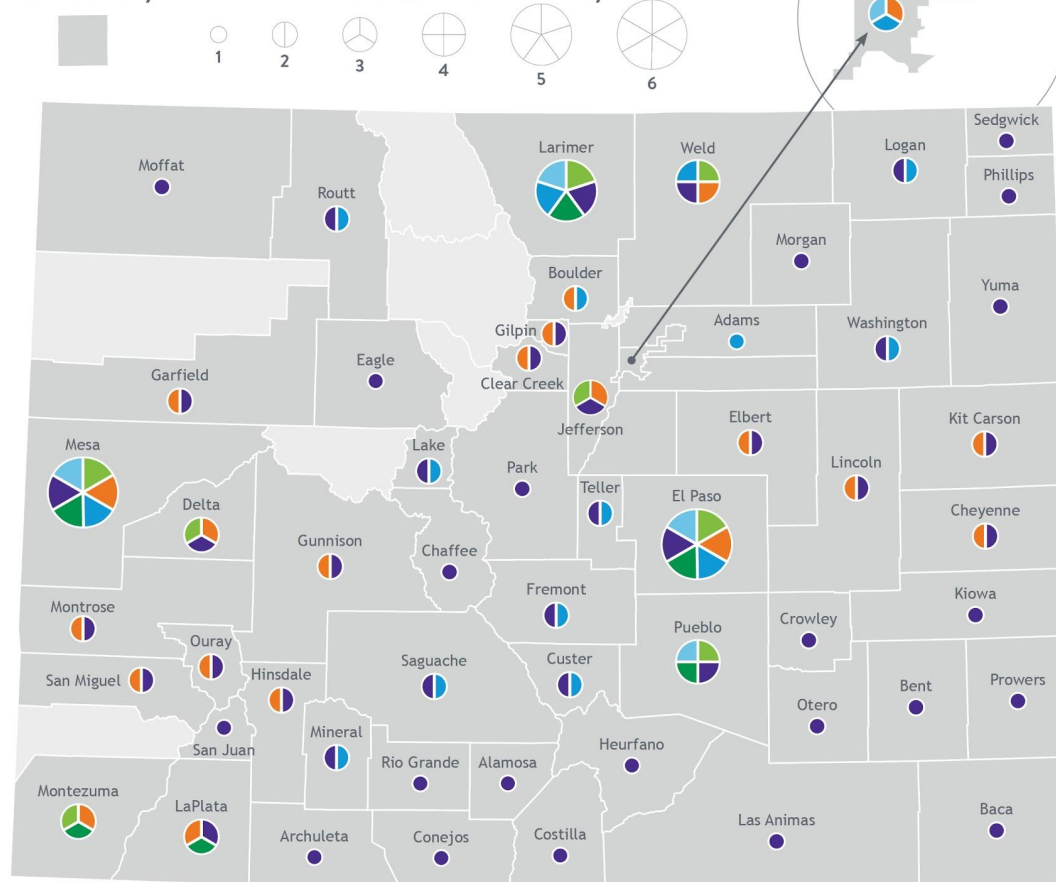
- Legislative Responsibilities:
 - Suicide Prevention Commission (SB14-88) -Advisory Board
 - Zero Suicide in statute and the Colorado Plan (SB16-147)
 - School Training Grant (SB18-272)
 - Hospital Outreach Initiative (HB12-1140)
 - Mental Health First Aid training pass through in long bill
- Additional data-driven/evidence-based strategies:
 - Comprehensive community-based prevention
 - Community grants
 - Emergency Department Follow-Up Project
 - Gun Shop Project and Lethal Means Safety
 - Youth Suicide Prevention (Ages 10-24)
 - Man Therapy www.mantherapy.org
 - Governor's Challenge to Prevent Suicide Among Service Members, Veterans, and Their Families
 - Public information and education
 - Competitive federal grant management (SAMHSA, CDC, ASTHO)
- Cross-agency Collaboration

SUICIDE PREVENTION INITIATIVES

Fiscal Year 2019-20

Funded County

Number of Initiatives in a County



Initiative by County

Zero Suicide Grant Funding

Denver, El Paso, Larimer, Mesa, Pueblo

Garrett Lee Smith Youth Suicide Prevention Grant Funding

Delta, El Paso, Jefferson, Larimer, Mesa, Montezuma, Pueblo, Weld

Community Grants

Boulder, Cheyenne, Clear Creek, Delta, Denver, El Paso, Elbert, Garfield, Gilpin, Gunnison, Hinsdale, Jefferson, Kit Carson, LaPlata, Lincoln, Mesa, Montezuma, Montrose, Ouray, San Miguel, Weld

Colorado Gun Shop Project

Alamosa, Archuleta, Baca, Bent, Chaffee, Cheyenne, Clear Creek, Conejos, Costilla, Crowley, Custer, Delta, Eagle, El Paso, Elbert, Fremont, Garfield, Gilpin, Gunnison, Hinsdale, Huerfano, Jefferson, Kiowa, Kit Carson, La Plata, Lake, Larimer, Las Animas, Lincoln, Logan, Mesa, Mineral, Moffat, Montrose, Morgan, Otero, Ouray, Park, Phillips, Prowers, Pueblo, Rio Grande, Routt, Saguache, San Juan, San Miguel, Sedgwick, Teller, Washington, Weld, Yuma

Colorado-National Collaborative for Suicide Prevention

El Paso, La Plata, Larimer, Mesa, Montezuma, Pueblo

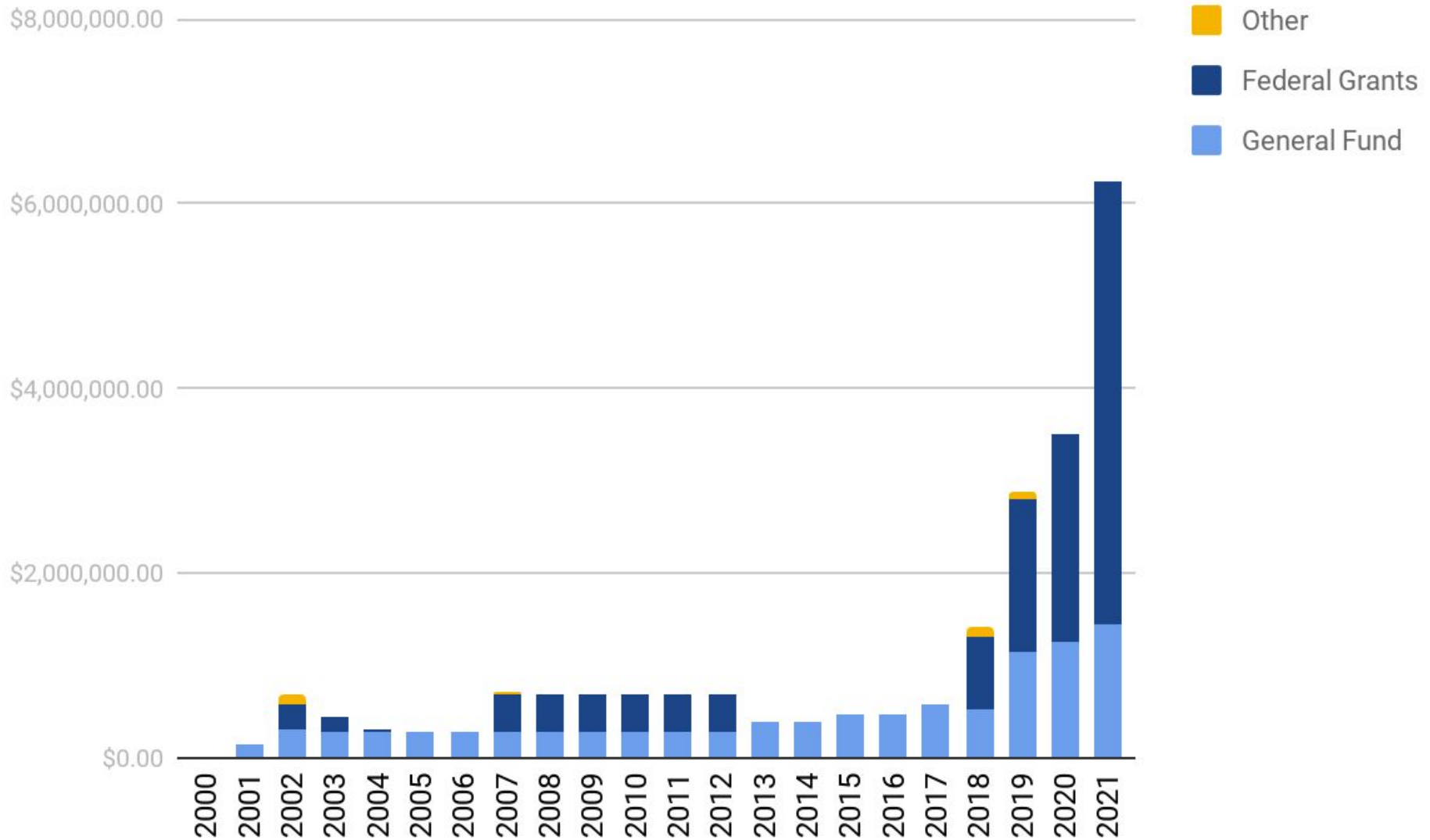
Office of Suicide Prevention School Training Grantees

Adams, Boulder, Custer, Denver, El Paso, Fremont, Lake, Larimer, Logan, Mesa, Mineral, Routt, Saguache, Teller, Washington, Weld



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Historical Funding for Office of Suicide Prevention



Suicide Prevention Commission

Support Integrated Healthcare 	Improve Training and Education 	Enhance data collection tools and systems 	Build Community Resilience and Connectedness 
Adopt the Zero Suicide initiative within health care systems. Adopt the Colorado Follow-Up Project as standard protocol for following up with suicidal patients after discharge from emergency departments and inpatient settings. Promote screening to identify suicide risk within health care settings. Support primary care practices in adopting suicide prevention protocols. Identify and support programs, initiatives, practices, and policies that reduce harm from involuntary treatment.	Support training for mental health and substance abuse providers. Develop and implement comprehensive suicide prevention strategies for high-risk industries. Build capacity within the legal community to identify those at risk for suicide and link them to care.	Encourage and incentivize coroners, medical examiners, and law enforcement to adopt a standardized suicide investigation form. Enhance information-sharing between organizations.	Strengthen economic stability and supports, including food security, affordable housing, livable wages, and other family-friendly workplace policies. Create supportive, inclusive, and safe communities, especially for LGBTQ+ youth. Support schools and other youth-serving organizations in implementing comprehensive protocols and evidence-based programming focused on enhancing protective factors. Prioritize, promote, and expand community-based alternatives to involuntary treatment for support, respite, and recovery prior, during, and after periods of crisis that preserve dignity and are responsive to identity, culture, and personal autonomy.

Office of Suicide Prevention Approach

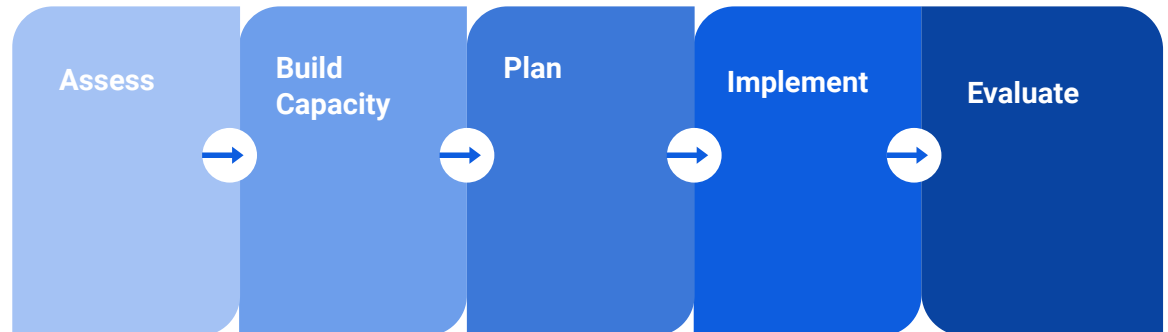
Theoretical Model

- Coordinated and full-scale comprehensive prevention efforts are necessary to demonstrate measurable reduction in suicide rates and numbers at the population level (county and state).
- The traditional approach of just focusing on mental health treatment services has not been effective at preventing suicide at the population level.
- Integration and coordination across sectors and settings is critical.
- Counties such as Ireland, Australia, and New Zealand have successfully adopted a comprehensive community factor level approach.



Office of Suicide Prevention Approach

Goal: Develop, implement, and evaluate a comprehensive strategy at the county-level that can be evaluated and replicated across Colorado and nationwide.



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Building a comprehensive model

- Data-driven
- Across the continuum: prevention, intervention, postvention
- Evidence-based, where possible
- Common strategies across communities so that it can be evaluated
- Aligned with national recommendations from CDC and National Action Alliance
- Lens of health equity and inclusivity (race, ethnicity, urban/rural, LGBTQ+)
- Local infrastructure and capacity critical

National Partners

- Injury Control Research Center for Suicide Prevention
- Education Development Center (Suicide Prevention Resource Center)
- American Foundation for Suicide Prevention
- Centers for Disease Control and Prevention
- Substance Abuse and Mental Health Services Administration
- National Action Alliance
- Veterans Administration

State Partners

- Office of Suicide Prevention
- Colorado Suicide Prevention Commission
- Rocky Mountain Mental Illness Research, Education and Clinical Center at the Denver Veterans Administration Center
- Governor's Office
- CO Behavioral Healthcare Council
- State agencies

Local Partners

- Local Public Health Departments
- Community Mental Health Centers
- Local coalitions and non-profits
- Hospitals
- Schools/Districts
- Emergency Responders
- Family Resource Centers
- Faith community leaders
- Veteran-serving organizations
- Local government agencies
- And more!



Examples of Comprehensive Suicide Prevention Strategies

 Connectedness	• Early social-emotional health • Positive youth development • Sources of Strength • Man Therapy • Inclusive community spaces, events, and policies
 Economic Stability and Supports	• Increase awareness, access and utilization of food security initiatives • affordable housing and transportation programs • family-friendly workplace policies • Increase access to affordable, quality childcare
 Improving Access to Responsive Care	• Implementation of Zero Suicide framework within health care systems
 Education and Awareness	• Gatekeeper training • Media campaigns • Organizational policy development
 Lethal Means Safety	• Gun Shop Project • Lethal Means safety training (firearms and medications) • Prescriber training • public messaging campaigns
 Postvention	• Survivor outreach and support • Training and awareness of postvention resources • Community postvention response planning • Responsible and proactive messaging and reporting

Populations of Focus

Working-Age
Adults (25-64)



Veterans



Youth (0-18)



Older Adults
65+



Young
Adults
(19-24)



LGBTQ+
Community



Evaluation

National→ State→ Local

- Shared indicator dashboard.
- Individual Programs.
- Process.
- Outcomes.
- Sum of the parts.

Process - Strategy Map



Interactive CNC Dashboard

Process and Outcome Evaluation Platform

Web-based platform

Each county has their own dashboard, rolls up to the state level

Customizable, includes state required indicators, but local users can add additional measures specific to their county's context

Straddles the line between project management and data visualization tool



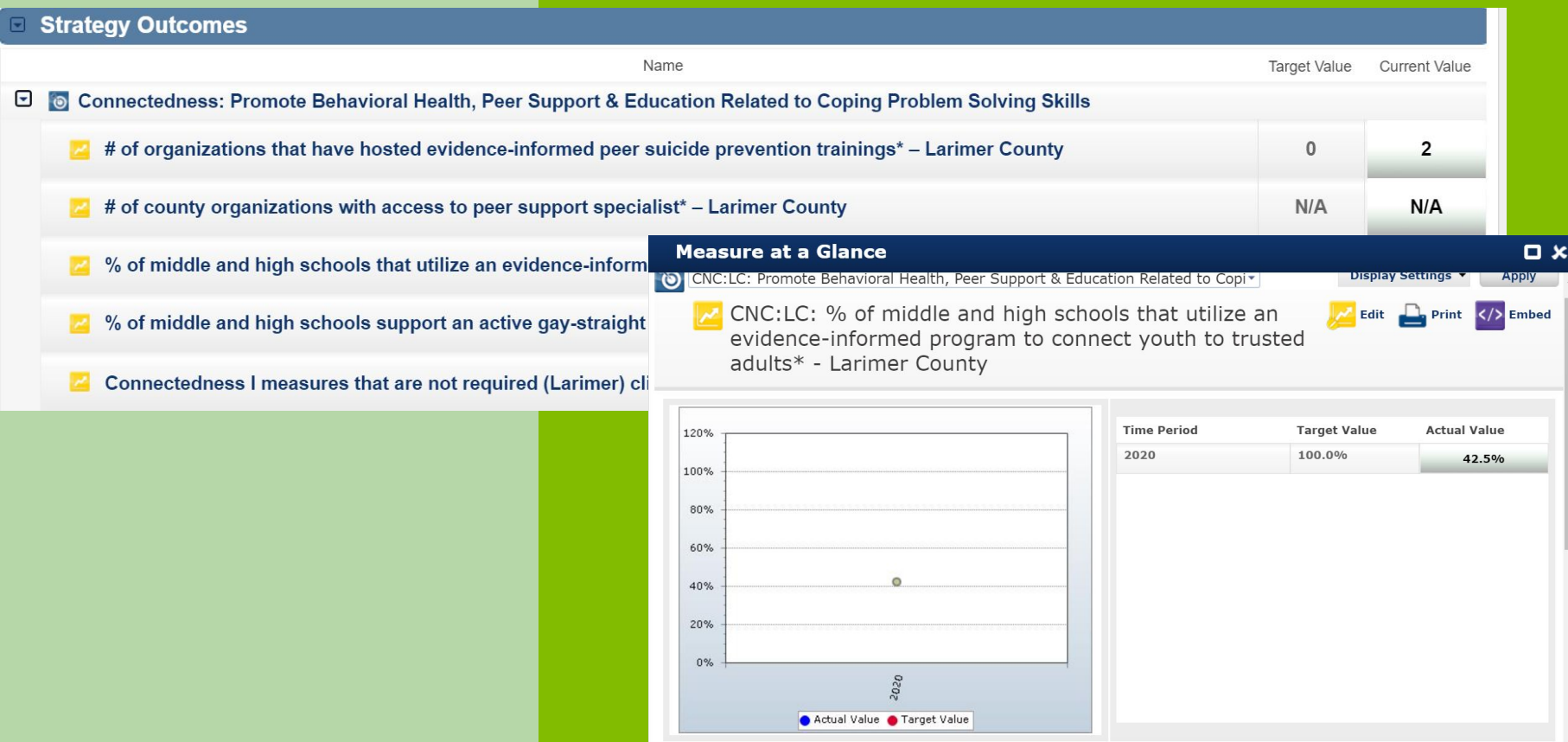
Interactive CNC Dashboard

Strategy Outcomes

Name		Target Value	Current Value
 Connectedness: Promote Behavioral Health, Peer Support & Education Related to Coping Problem Solving Skills			
 # of organizations that have hosted evidence-informed peer suicide prevention trainings* – Larimer County		0	2
 # of county organizations with access to peer support specialist* – Larimer County		N/A	N/A
 % of middle and high schools that utilize an evidence-informed program to connect youth to trusted adults* - Larimer County		100.0%	42.5%
 % of middle and high schools support an active gay-straight alliance or GLSEN-led initiative* – Larimer County		0.0%	61.0%
 Connectedness I measures that are not required (Larimer) click here --> 		N/A	N/A



Interactive CNC Dashboard



Next Steps

Evaluation Next Steps

Continuing to upload new data points, and refining measures

Finalizing mid and long-term indicators

Establishing data review and interpretation processes with local and national partners

Continuing to build up evaluation and data resources to support local capacity and infrastructure



Data Resources

- Colorado Violent Death Reporting System, Vital Stats
- Interactive Public Facing Dashboard
- Child Fatality Prevention System
- Maternal Mortality Review Team
- Hospital and Emergency Department Data Sets
- Healthy Kids Colorado Survey (YRBS)
- BRFSS
- Office of Behavioral Health data streams
- Medicaid data
- *Syndromic Surveillance data
- And more!

Suicide Data Dashboard

www.coosp.org

Suicides in Colorado: Age-adjusted suicide rates per 100,000 population

Colorado Vital Statistics Program, (death certificate)

Select years:

2004 ☐ 2019 ☒

Select method used to inflict the fatal injury:

All methods

Age-adjusted suicide rate per 100,000 population

Age-adjusted rate	18.6
95% confidence interval (lower)	18.3
95% confidence interval (upper)	18.9
Deaths	15,731
Population	82,785,789

Age-adjusted rate of suicide by demographics

Click on one or more subgroups below to filter all other charts to that group(s); click again to deselect

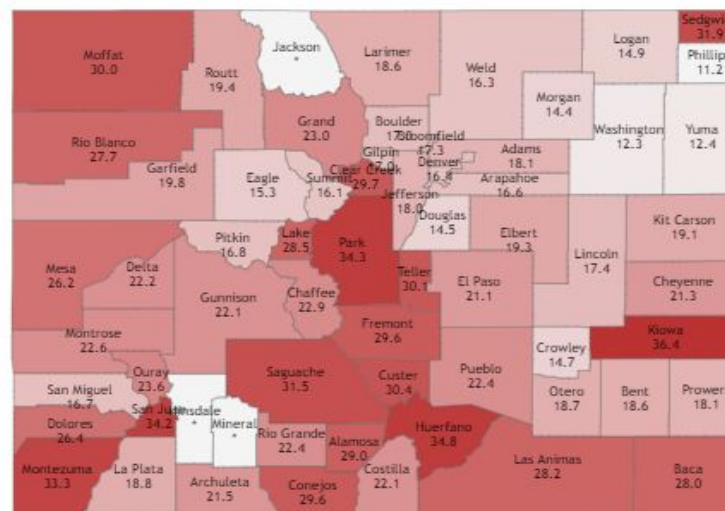
by sex:



by ethnicity:



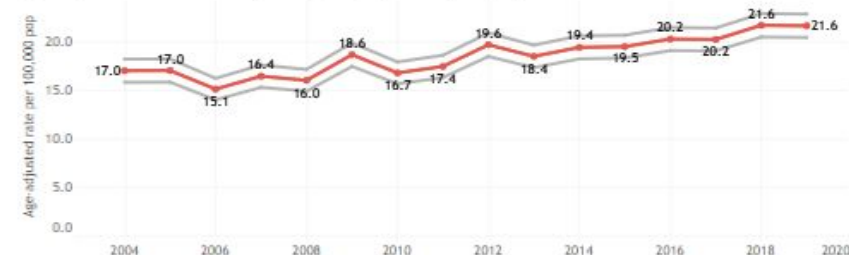
by race:



Selected population for all charts on this page

Sex: All, Ethnicity: All, Race: All, Method: All methods, County: All

Age-adjusted rate of suicide per 100,000 population per year, 2004 to 2019



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Opportunities

- Leadership of lived experience
- Equity focus
- Older adults and primary prevention
- Partnership with food security, housing, other economic support organizations
- Civic engagement



Q & A



THANKS!



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