# SUICIDE PREVENTION PROGRAMMINGIN OREGON: A LANDSCAPE SCAN

### SCOPE OF WORK

Utilizing data from our prior work and scans (e.g., literature, statewide data dashboards and artifacts), will allow us to summarize current efforts for:

- Supporting youth and rural Oregonians experiencing suicidal ideation
- Reducing stigma surrounding suicidal ideation
- Addressing barriers to suicide prevention support
- Obstacles to implementing suicide prevention best practices
- Supporting those experiencing SI across the lifespan

**Exemplar deliverables:** brief, report, and/or presentation of scan of current suicide prevention activities in Oregon, gaps/successes in policy and practice, and mapping of state efforts

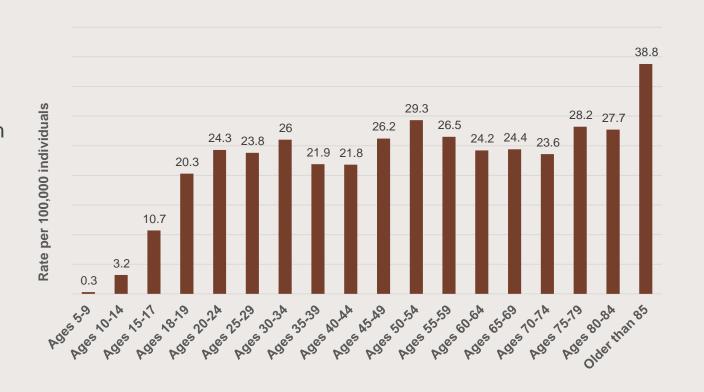
# OVERVIEW OF SUICIDE IN OREGON

- For the last 30 years, suicide rates in Oregon have been higher than the national average<sup>1</sup>
- There were 883 suicide deaths in Oregon during 2022<sup>2</sup>

 The suicide rate 19.5 suicide deaths per 100,000 people in Oregon (compared to 14.2 per 100,000 people for the rest of the United States)<sup>2</sup>

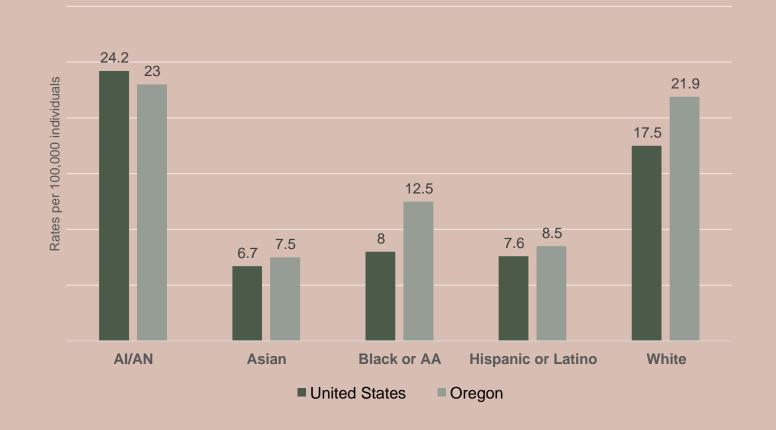
## SUICIDE IN OREGON: AGE<sup>2</sup>

- Males between the ages of 45 through 65 are most likely to die by suicide
- Suicide is the second leading cause of death of young people in Oregon, aged 5 through
   24
- 24% of suicide deaths in Oregon during the period of 2018 through 2022 occurring in adults 65 and older



#### SUICIDE IN OREGON: RACE & ETHNICITY<sup>2</sup>

- Non-Hispanic American Indian and Alaska Native individuals have the highest rates of suicide in Oregon
- The next highest suicide rates in Oregon by ethnic group are Non-Hispanic White Oregonians
- Non-Hispanic Asian people had the lowest suicide rates



# SUICIDE IN OREGON:

# SEX & GENDER

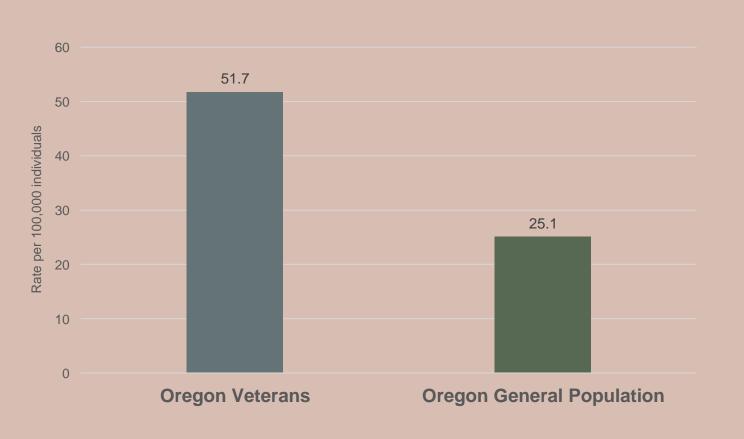
There are sex differences between males and females, with adult males 75% more likely to die by suicide than adult females in Oregon<sup>2</sup>

 The higher risks for males intersects with lethality of mechanism, Veteran status, occupation, and urbanicity

■ Sex vs. Gender<sup>3-5</sup>

#### SUICIDE IN OREGON: VETERAN STATUS<sup>6</sup>

- Veteran suicide rates in Oregon are significantly higher than national veteran suicide rates
- In 2022, the veteran suicide rate in OR was 51.7 compared to 25.1 for non-veterans over 17
- Veterans used firearms at higher rates compared to other mechanisms



# SUICIDE IN OREGON

#### OCCUPATION<sup>2</sup>

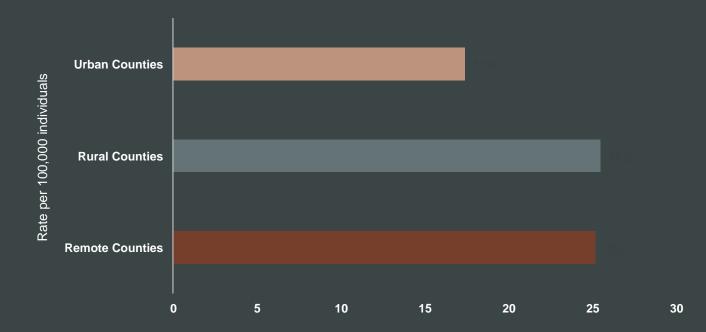
• Farming, Fishing, and Forestry

#### **URBANICITY**<sup>7-8</sup>

• Suicide rates for rural and remote Oregonians is higher than that of urban Oregonians

#### METHOD<sup>2</sup>

- Firearm 54%
- Suffocation 25%



# STATEWIDE POLICIES

#### **Adult Suicide Policies**

- HB 3090 (2017) Requirements for Emergency Departments
- HB 2315 (2021) Requires Suicide Risk Assessment, Treatment, and Management Continuing Education for Licensure
- HB 2417 (2021) Funding for Crisis Response Services and Report
- ASIPP (2023) Establishes framework for adult suicide prevention through OHA

#### **Youth Suicide Policies**

- HB 4124 (2014) and SB 563 (2019) –
   YSIPP
- SB 52 (2019) Adi's Act
- HB 3139 (2022) Requiring Disclosure without Minor's Consent
- HB 3037 (2021) Requiring Postvention

Primary prevention: activities that increase protective factors (i.e., access to basic needs, healthcare, social support, emotion regulation skills) and decrease risk factors (i.e., prior suicidal thoughts and behaviors, adverse childhood experiences, legal problems, social stigma)9

# PRIMARY PREVENTION

#### PRIMARY PREVENTION PROGRAMMING

#### **YOUTH**

- Safe Storage Programs
- Social Emotional Learning in Schools
- Outpatient Treatment
- Big River Advanced Skills Training (CAMS/DBT/CBT/AMSR)

#### <u>ADULT</u>

- Safe Storage Programs
- Enhanced Care Outreach Services
- Outpatient Treatment

## INTERVENTIONS

Interventions (or downstream or secondary prevention efforts) in the field of suicide prevention are defined as direct efforts to intervene or prevent someone from attempting suicide<sup>9</sup>

#### INTERVENTION STRATEGIES: YOUTH

#### **Big River Gatekeeper Trainings**

- Applied Suicide Intervention and Skills Training (ASIST)
- Question, Persuade, Refer (QPR)
- Youth Suicide Assessment in Virtual Environments (Youth SAVE)
- Mental Health First Aid (MHFA)
- Counseling on Access to Lethal Means (CALM/OCALM) Only Firearm-Specific Intervention

#### INTERVENTION STRATEGIES: ADULTS



- OHA/PSU Online Trainings
- Statewide Crisis Lines
- County-based Crisis Intervention Services
- Inpatient Mental Health Treatment
- Zero Suicide Healthcare System Training/Support

# POSTVENTION<sup>10</sup>

- Postvention is defined as an organized response after a suicide.
- These efforts often include immediate and long-term emotional support, contagion mitigation, and prevention of other harmful effects of suicide

# POSTVENTION STRATEGIES:

#### YOUTH

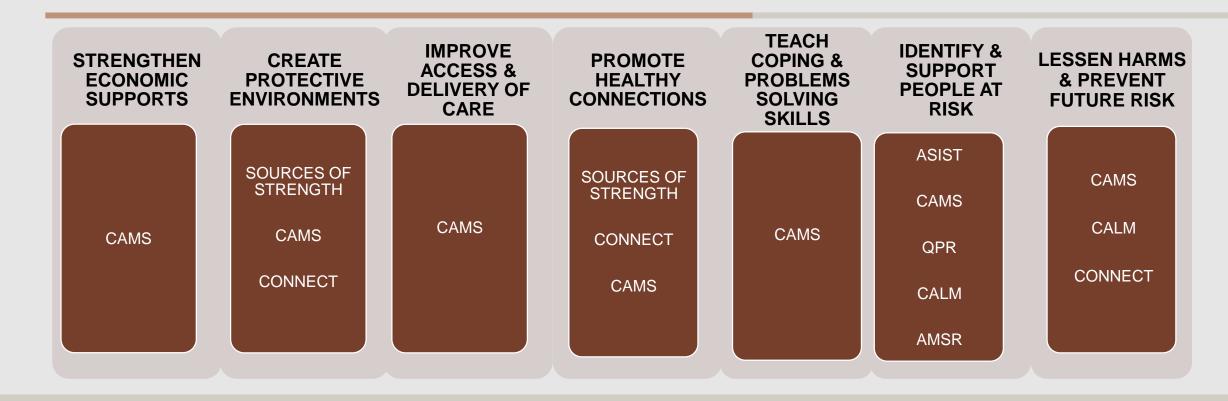
- Oregon Youth Suicide Postvention Leads
- Lines for Life Youth Suicide Rapid
   Response
- School-Based Postvention Plans (required by Adi's Act)
- CONNECT Postvention Training
- Suicide Bereavement Groups

#### POSTVENTION STRATEGIES: ADULTS

#### **CONNECT Postvention Training**

- Not specifically for either adults or youth, but many counties use public schools as central resources for their Postvention Plan, so it is likely more directed toward youth.
- Some counties choose to specifically include adults in Postvention planning, but many do not, as they do not receive the same support from the state

# CDC BEST PRACTICES FOR SUICIDE PREVENTION<sup>11</sup>: MAPPING OREGON EFFORTS



- Lack of true primary prevention
- Lack of youth treatment options
- Lack of adult suicide prevention programming
- Lack of culturally-specific programming
- Lack of firearm-specific programming
- Policy implementation issues
- Tracking and data issues
- Workforce shortage
- Lack of resources for rural Oregonians

# IDENTIFIED GAPS IN PROGRAMMING

#### REFERENCES

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