

September 12, 2025

Subject: Response to Task Force on Community Safety and Firearm Suicide Prevention Policy and Practice Recommendations for Legislative Report

Dear Andrew and Donna-Marie,

I am writing in response to the Sept. 8th presentation by University of Oregon Suicide Prevention Lab (UOSPL) to the Task Force on the findings from the Oregon suicide prevention scan they conducted. The presentation and corresponding report from UOSPL did not fully capture the extent of suicide prevention, intervention, and postvention work supported by Oregon Health Authority (OHA). I am reaching out to you as co-chairs of the Task Force on Community Safety and Firearm Suicide Prevention to provide additional information on Oregon Health Authority's suicide prevention efforts. I request that the below information be provided to Task Force members and considered for inclusion in the Task Force's legislative report due September 15, 2025. OHA welcomes the opportunity to provide additional information on suicide prevention, intervention and postvention efforts at future Task Force meetings. Below is a summary addressing major gaps in the report and additional documents.

OHA Suicide Prevention efforts are grounded in the Oregon Suicide Prevention Framework and the state's 2021-2025 Youth Suicide Intervention and Prevention Plan (YSIPP) and 2023-2027 Adult Suicide Intervention and Prevention Plan (ASIPP). The Framework and plans are built off the National Strategy for Suicide Prevention, CDC Suicide Prevention Resource for Action, and hundreds of pieces of feedback from collaborators and partners across Oregon.

OHA has submitted legislatively mandated reports to the Oregon legislature related to the YSIPP every year since 2015. These reports provide detailed overviews of work taking place and track progress. A list of YSIPP initiatives (organized around the Oregon Suicide Prevention Framework), including progress on each initiative, lead entity, progress notes and metrics, is publicly available. Refer to the YSIPP 2025 Initiative Tracker.

The UOSPL report identified several areas of concern related to Oregon suicide prevention efforts. Given time constraints with the legislative report due date of September 15, 2025, we are unable to comprehensively respond with an exhaustive list of all the work not included in the report. However, we have responded with highlights of our work, presented in the order of the gaps identified in the UOSPL report.

- Lack of true primary prevention
 - OHA supported the creation of the Life-Sustaining Practices Fellowship Program and its development of a healing practices toolkit for adults serving Black, African and African-American youth designed to help young people navigate life challenges, build resilience, strengthen identity and nurture healing.
 - OHA is providing funding to award low-barrier small grant opportunities to support community engagement activities and structures among rural older adults to help reduce social isolation. Projects include gardening; music and art therapies; aging, death and memory events; and wellness programs.
 - OHA continues to work on collaborating with partners around the state on primary prevention.
- Lack of adult programming
 - OHA published the first 5-year Adult Suicide Prevention Intervention and Prevention Plan (ASIPP) in April 2023. While there is no state general fund supporting these efforts beyond funding for an OHA Adult Suicide Prevention Coordinator, OHA has moved multiple initiatives forward with support from a CDC Comprehensive Suicide Prevention grant that runs through August 2027. The ASIPP First Year Progress Report published in August 2025 provides an overview of work to date.
- Lack of culturally specific programming
 - OHA's 2024 Youth Suicide Intervention and Prevention Plan Annual Report provides information on OHA's efforts, specifically pp. 11-15, which highlights increasing language accessibility, increasing diversity of training, and growing Black youth, Latine and Tribal suicide prevention work.

- OHA has supported training access and creating an Oregon trainer pool for Be Sensitive, Be Brave Mental Health and Suicide Prevention culturally infused suicide prevention community helper trainings. The agency has also provided access to the Suicide Prevention 201: Advancing Suicide Prevention & Clinical Management for Diverse Clients training.
- OHA finalized cultural infusion of the Oregon Suicide Prevention Framework to enhance cultural considerations throughout the entire framework that is guiding YSIPP 2026-2030 initiative development and tracking.
- OHA is finalizing Request for Proposals to distribute new \$1 million investment approved during the 25-27 legislative session. This will grow existing efforts and continue focus on culturally specific youth suicide prevention efforts including a focus on Black, African and African-American; Latine; and Tribal youth.
- Lack of firearm-specific suicide prevention programming
 - OHA supported research with rural firearm owners on how they would like to be approached by a healthcare provider if they or someone they love is at risk of suicide. This peer reviewed and published research led to the creation of provider trainings, publish facing brochures, and a community helper training.
 - OHA has been distributing firearm and medication safe storage devices to counties and communities over the last several years although funds available have not been able to meet demand for requests. Safe storage devices have been distributed through all 16 Oregon Department of Human Services-Child Welfare's District, saturated in communities that have been impacted by youth suicide, through Mobile Crisis teams, and through nearly every county's Public Health and/or Mental Health departments.
 - OHA is supporting research on Oregon's Extreme Risk Protection Order program implementation to identify activities and recommendations.
- Policy implementation issues
 - OHA is required to provide a legislative report on suicide prevention training, through HB 48 (2017 and HB 2315 (2021), for behavioral health providers every odd-numbered year on data from all boards and licensees listed in ORS 676.866. The most recent report released in August 2025 is available on the OHA website.

- Lack of resources for rural Oregonians
 - OHA's CDC Comprehensive Suicide Prevention grant is focused on reducing suicide in Oregon's rural areas and adults aged 55 and older. It focuses on older adults and service members, veterans and their families (SMVF). Refer to the ASIPP Year One Progress Report for more details.

OHA has reviewed the Task Force's draft policy and practice recommendations for the Sept. 15 legislative report and have appreciated previous opportunities to provide feedback. OHA is largely aligned with recommendations recognizing additional funding will be needed to implement many of these efforts. Besides the \$1 million new investment in youth culturally specific suicide prevention funding for the 25-27 biennium, new investments for OHA suicide prevention efforts have not increased since 2019. OHA estimates that implementation of the YSIPP is 55% funded as of the 25-27 biennium. There is no state general fund for dedicated adult suicide prevention beyond the 1.0 FTE for the Adult Suicide Prevention Coordinator. Adult suicide prevention efforts are primarily funded by time-bound federal funds.

Please let us know if you or the Task Force have additional questions. OHA is very willing to present to the Task Force in the future as requested.

Sincerely,



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