Suicide Data

- 91% increase in suicides in Johnson County between 2008 and 2012. Death by suicide rose from 45 to 86.

- Suicide is the 10th leading cause of death, claiming more than twice as many lives each year as does homicide.

- Every 13.7 minutes someone in the United States dies by suicide.

- For every person who dies by suicide, more than 30 others attempt suicide.
Suicides & Overdoses by Year in Johnson County
From 2008-2012

**Deaths as reported from Johnson County Coroner’s Office**
Suicides & Overdoses by Age in Johnson County

From 2009-2013

*2013 data includes January-April

**Deaths as reported from Johnson County Coroner’s Office
In 2011, 10% of Johnson County high school males and 13.6% of females seriously considered attempting suicide in the past 12 months.

In 2011, 6% of Johnson County high school males and 5.7% of females attempted suicide at least once.

Source: Kansas High School Youth Risk Behavior Survey, 2011
Cause of Suicide Deaths by Gender
Kansas 2006-2010

Females
- Poisoning: 9%
- Firearm: 28%
- Suffocation: 21%
- All Others: 42%

Males
- Poisoning: 6%
- Firearm: 22%
- Suffocation: 12%
- All Others: 60%

Source: 2006-2010 Kansas Vital Statistics, Bureau of Epidemiology and Public Health Informatics, KDHE
Suicide Rate by Zipcode

66202-Mission
66204-Overland Park
66215-Lenexa
66212-Overland Park
66210-Overland Park
66211-Leawood
66213-Overland Park
66031-New Century
Summary of Past Events-Summit

- Suicide Prevention Summit-November 13, 2012 at Heartland Community Church in Olathe
  - 150 people in attendance representing diverse sectors
  - Roundtable group discussion gathering participant feedback
  - Information gathered:
    - Have you seen an increase in suicide attempts/death by suicide? If so, how has that increase affected the individuals you serve or services you provide?
    - What, if any, changes has your organization or others in the community, made to be more responsive to suicide? What are you currently doing in your field to address suicide?
    - Do you feel your organization has proper training to address suicide risk? What training opportunities do you know of in our community?
    - What do you feel are the resources and or gaps in our community on suicide education/prevention/intervention?
    - Where do we go from here? What are some first steps in preventing suicide in Johnson County?
Summary of Past Events—Focus Groups

- **Focus Groups**
  - Monday, March 25th: 18 attendees
  - Tuesday, March 26th: 15 attendees
- Reviewed Comprehensive Notes
- **2012 National Strategy for Suicide Prevention**
  - A report of the U.S. Surgeon General and the National Action Alliance for Suicide Prevention
  - Thirteen goals with corresponding objectives
  - Focus groups narrowed down to top three priority goals for our community
Suicide Prevention Goals

Strategic Direction 1: Healthy and Empowered Individuals, Families, and Communities

• Goal 2: Implement research-informed communication efforts designed to prevent suicide by changing knowledge, attitudes, and behaviors.

Strategic Direction 2: Clinical and Preventative Services

• Goal 7: Provide training to community and clinical service providers on the prevention of suicide and related behaviors.

Strategic Direction 3: Treatment and Support Services

• Goal 8: Promote suicide prevention as a core component of health care services.
Goal #2-Communication Efforts

- Goal #2-Implement research informed communication efforts designed to prevent suicide by changing knowledge, attitudes, and behaviors
  - Develop, implement, and evaluate communication efforts designed to reach defined segments of the population
  - Reach policymakers with dedicated communication efforts
  - Increase communication efforts conducted online that promote positive messages and support safe crisis intervention strategies
  - Increase knowledge of the warning signs for suicide and of how to connect individuals in crisis with assistance and care
Goal #7 – Training

- Goal #7-Provide training to community and clinical service providers-prevention of suicide
  - Provide training on suicide prevention to community groups who have a role in the prevention of suicide related behaviors
  - Provide training to MH and SA providers on recognition, assessment, management of at risk behavior and delivery of effective clinical care for people with suicide risk
  - Develop and promote the adoption of core education and training guidelines on the prevention of suicide and related behaviors by all health professions, including graduate and continuing education
  - Develop and implement protocols and programs for clinicians and clinical supervisors, first responders, crisis staff and others on how to implement effective strategies for communicating and collaboratively managing suicide risk
Goal #8 – Health Care Services

- **Goal #8-Promote suicide prevention as a core component of health care services**
  - Develop and implement protocols for delivering services for individuals with suicide risk in the most collaborative, responsive, and least restrictive settings
  - Promote continuity of care and the safety and well being of all patients treated for suicide risk in emergency departments or hospital inpatient
  - Encourage health care delivery systems to incorporate suicide prevention and appropriate responses to suicide attempts as indicators of continuous quality improvement efforts
  - Coordinate services among suicide prevention and intervention programs, health care systems, and accredited local crisis centers
Evaluation Results Focus Groups

In your work, how significant is suicide prevention?

- Very significant
- Somewhat significant
- Neither significant nor insignificant

In a typical month, what percentage of your job is dedicated to suicide prevention?

- 0%
- 1-20%
- 21-40%
- 41-60%
- 61-80%
- 81-100%
How likely do you see yourself continuing to work with Johnson County Mental Health Center on suicide prevention in the future?
Discussion Questions

- Response to work up to this point
- Feedback on three priority areas
- Vision for suicide prevention in Johnson County
Next Steps

- **Complete feedback worksheet**
  - Gauge community commitment to next steps

- **Vision for the future**
  - Three workgroups
    - Research-informed communication efforts
    - Training to community and clinical service providers
    - Suicide prevention as a core component of health care services
  - Identify workgroup leaders and members
  - Workgroups create strategic plans to reduce suicide rates in Johnson County
Thank you for your commitment to reducing suicide in our community!

Questions?