

Suicide Prevention Initiatives

Signs of Suicide (SOS) Training

Target population: Middle and High School Students

DMH is bringing Screening for Mental Health, Inc. (SMH) to Missouri this spring to certify contracted prevention Regional Support Center (RSC) staff as SOS Trainers. The RSCs will have the expertise to provide this training to school staff across the state. Each school that implements SOS training will need a \$375 toolkit. RSCs will have some very limited funds to buy the toolkits so schools may need to help with the costs.

The SOS Program encourages students to identify a trusted adult in their life such as a school counselor, teacher, or coach, and to turn to them when in need. Also included in the SOS Program is a validated screening tool to assess students for the signs of depression. The SOS Signs of Suicide® High School Prevention Program is the only school-based suicide prevention program listed on SAMSHA's National Registry of Evidence-based Programs and Practices that addresses suicide risk and depression, while reducing suicide attempts.

Zero Suicide Initiative

Target population: Individuals in Mental Health Treatment

The Coalition for Community Behavioral Healthcare, in collaboration with DMH and the national Suicide Prevention Resource Center, is hosting a Show Me Zero Suicide Learning Collaborative for Community Mental Health Centers this spring. The foundational belief of Zero Suicide is that suicide deaths for individuals under care within health and behavioral health systems are preventable. The Collaborative will begin with a two-day Zero Suicide Academy for senior leaders of organizations that seek to dramatically reduce suicides among patients in their care. Using the Zero Suicide framework, participants learn how to incorporate best and promising practices into their organizations and processes to improve care and safety for individuals at risk. DMH facilities are also being educated on the Zero Suicide framework.

Suicide Prevention Campaign

Target population: White Middle-Aged Men

DMH plans to implement a suicide prevention campaign this Fall for this target group using Public Service Announcements and fact sheets to educate individuals and their loved ones on warning signs of suicide and how to get help. Highest suicide rates in Missouri: males, ages 35-54, white, non-Hispanic.

Mental Health First Aid (MHFA) Training

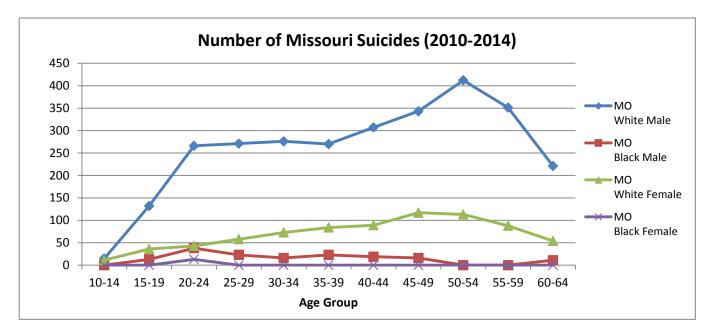
Target population: All Missourians

The Missouri Institute of Mental Health (MIMH) and the contracted RSCs provide MHFA training across the state. MHFA is an in-person training that teaches how to help individuals developing a mental illness or in a crisis. DMH has trained 7,959 in Youth MHFA and 18,026 in Adult MHFA, this includes teachers and school administrators, colleges/universities, older adults, veterans/military, faith-based individuals, public safety, and correction staff.



Missouri Statistics

- US TREND: A recent study by two Princeton economists found that death rates (in general) among middle-aged white Americans has been climbing over the past 15 years. At the same time, death rates for younger and older Americans and for other race/ethnicity groups have been declining. Research indicates that the increase for middle-aged white Americans has been primarily driven by suicide and substance abuse (Kolata, 2015: <u>http://www.nytimes.com/2015/11/03/health/death-rates-rising-for-middle-aged-white-americans-study-finds.html? r=0</u>).
- **COMPARED TO THE NATION**: Missouri's suicide rate is 16.8 per 100,000 population. This is higher than that for the country which is 13.4 per 100,000 population (American Association of Suicidology, 2015).
- **MISSOURI DEMOGRAPHICS**: The group of people with the highest suicide rate is white males age 35 to 54. Suicide rates of white males are appreciably higher than any other demographic group. Moreover, the suicide rates of adult white males are consistently higher than that of teenage white males (Centers for Disease Control and Prevention, 2016: Missouri suicide data from 2004 2014.)
 - Rates per 100,000 population:
 - Males compared to Females: 23.38 vs. 5.71
 - White compared to Black: 15.35 vs. 6.51
 - Age 45-49 compared to Age 15-19: 22.99 vs. 8.90
 - White Males age 45-49 compared to White Males age 15-19: 37.49 vs. 14.94
 - White Males age 45-49 compared to Black Males age 45-49: 37.49 vs. 12.42
 - White Males age 45-49 compared to White Females age 45-49: 37.49 vs. 13.23
- **REDUCING MISSOURI'S SUICIDE RATE:** Missouri's suicide rate is largely driven by suicides in the adult male population. In order to reduce the state's suicide rate, prevention initiatives must address suicide in this demographic population.

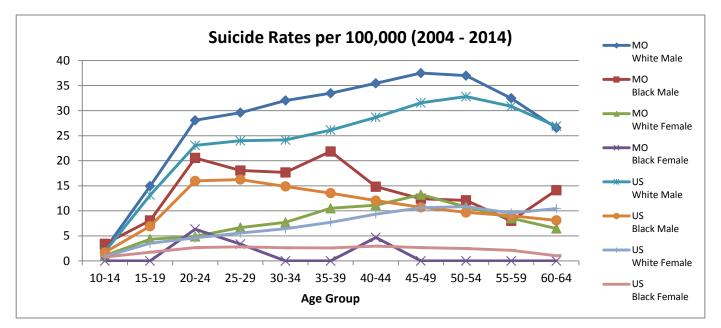


Age Group	MO White Male	MO Black Male	MO White Female	MO Black Female
10-14	15	*	11	*
15-19	132	13	36	*
20-24	266	38	43	13
25-29	271	23	58	*
30-34	276	16	73	*
35-39	270	23	84	*
40-44	307	19	89	*
45-49	343	16	117	*
50-54	412	*	113	*
55-59	351	*	88	*
60-64	221	11	54	*

*Counts too low to report.

Data source: Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System

SIGNIFICANCE: Middle-aged white males in Missouri have more suicides than any other demographic group.



Age Group	MO White Male	MO Black Male	MO White Female	MO Black Female	US White Male	US Black Male	US White Female	US Black Female
10-14	2.28	3.41	1.08	*	1.84	1.7	0.88	0.79
15-19	14.94	8.07	4.33	*	13.14	6.93	3.53	1.75
20-24	28.08	20.56	4.89	6.35	23.07	15.98	4.6	2.65
25-29	29.59	18.05	6.67	3.36	23.99	16.25	5.57	2.82
30-34	32.02	17.67	7.7	*	24.15	14.87	6.44	2.62
35-39	33.48	21.85	10.51	*	26.12	13.53	7.72	2.6
40-44	35.46	14.83	11.13	4.69	28.67	12.05	9.35	2.96
45-49	37.49	12.42	13.23	*	31.56	10.7	10.62	2.65
50-54	36.98	12.09	10.78	*	32.8	9.69	10.83	2.47
55-59	32.47	8	8.53	*	30.86	9.01	9.55	2.11
60-64	26.56	14.12	6.48	*	26.88	8.1	10.47	1.05

'*Counts are too low to obtain a stable rate.

Data Source: Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System

SIGNIFICANCE: Middle-aged white males in Missouri have a higher suicide rate than any other demographic group in the state or country.