

Prioritizing Equity in the 2024 National Strategy for Suicide Prevention (NSSSP)

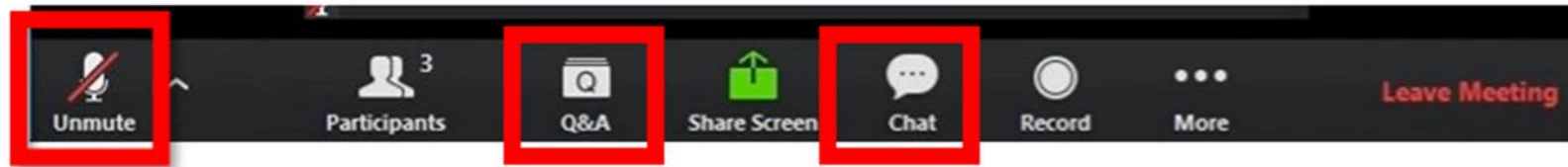
Presenters- National Council for Mental Wellbeing




Laura Leone, DSW
National Council for Mental Wellbeing
Consultant



Asking A Question & Using Closed Captioning



All functions are located at the bottom of your screen

- Ask questions by using the Q&A or chat function (you will **not** be able to unmute). Please indicate if you would like your questions to be anonymous.
- Use the chat for discussion & interactive activities.
- Click  and then select "Show Subtitle" to access closed captioning or "View Full Transcript" to access the transcript.

*If you are experiencing technical difficulties, please send a direct Zoom chat message to Hosts and Panelists.

Strategic Direction – Health Equity

Strategic Direction 4: Health Equity in Suicide Prevention

- **Goal 12:** Embed health equity into all comprehensive suicide prevention activities.
- **Goal 13:** Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on historically marginalized communities, persons with suicide-centered lived experience, and youth.
- **Goal 14:** Create an equitable and diverse suicide prevention workforce that is equipped and supported to address the needs of the communities they serve.
- **Goal 15:** Improve and expand effective suicide prevention programs for populations disproportionately impacted by suicide across the life span through improved data, research, and evaluation.



The Importance of Equity



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Equality

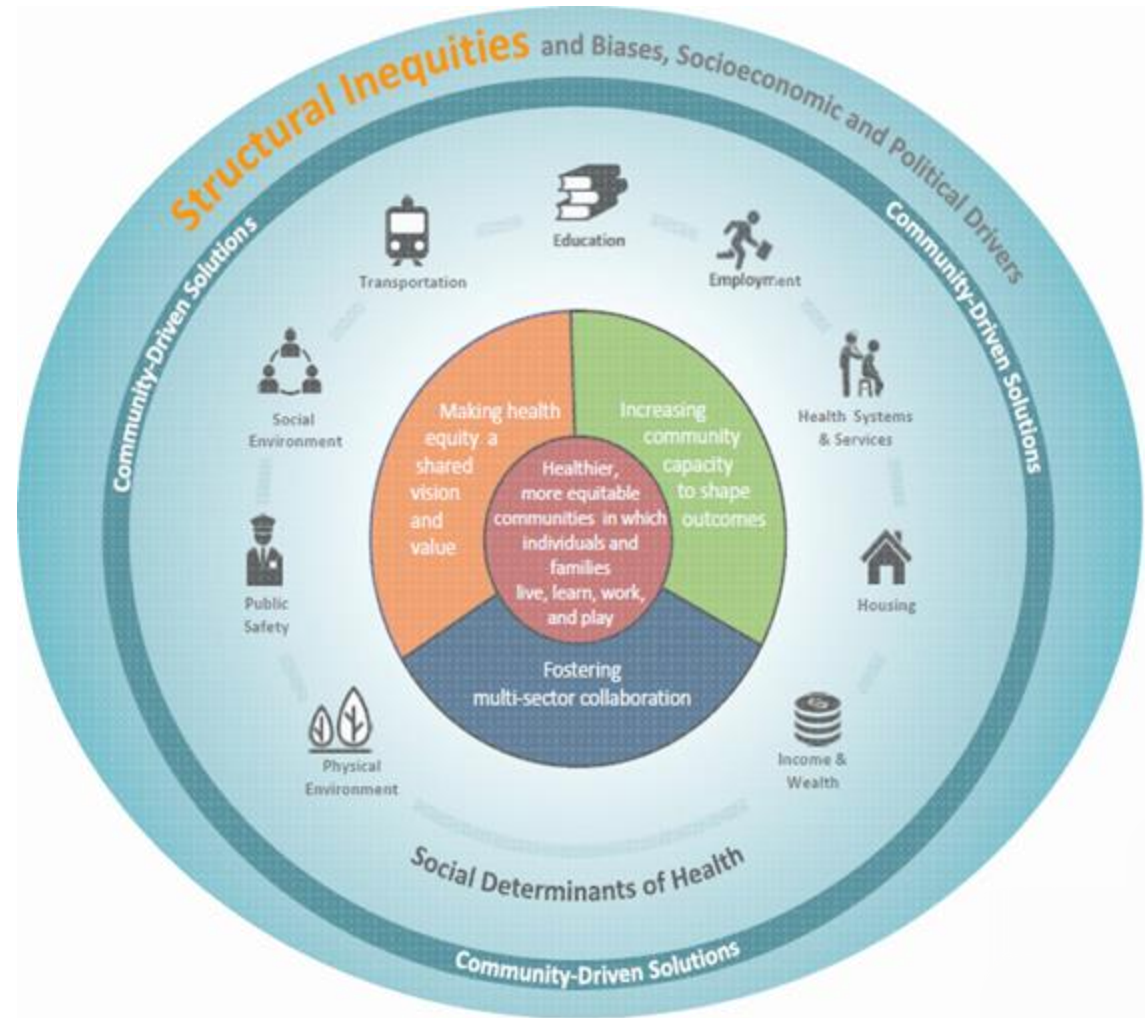


Equity



Health Inequities

Health inequities arise when certain populations are made vulnerable to illness or disease, often through the inequitable distribution of health protections and supports.



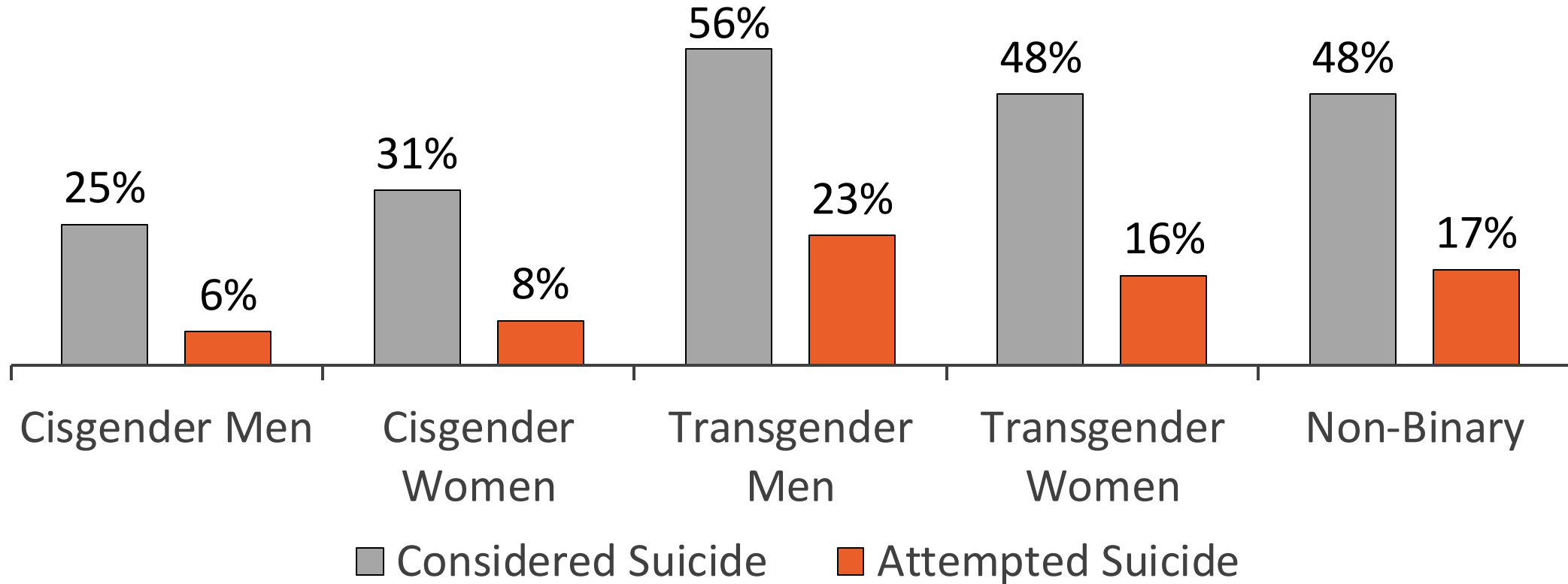
Evidence



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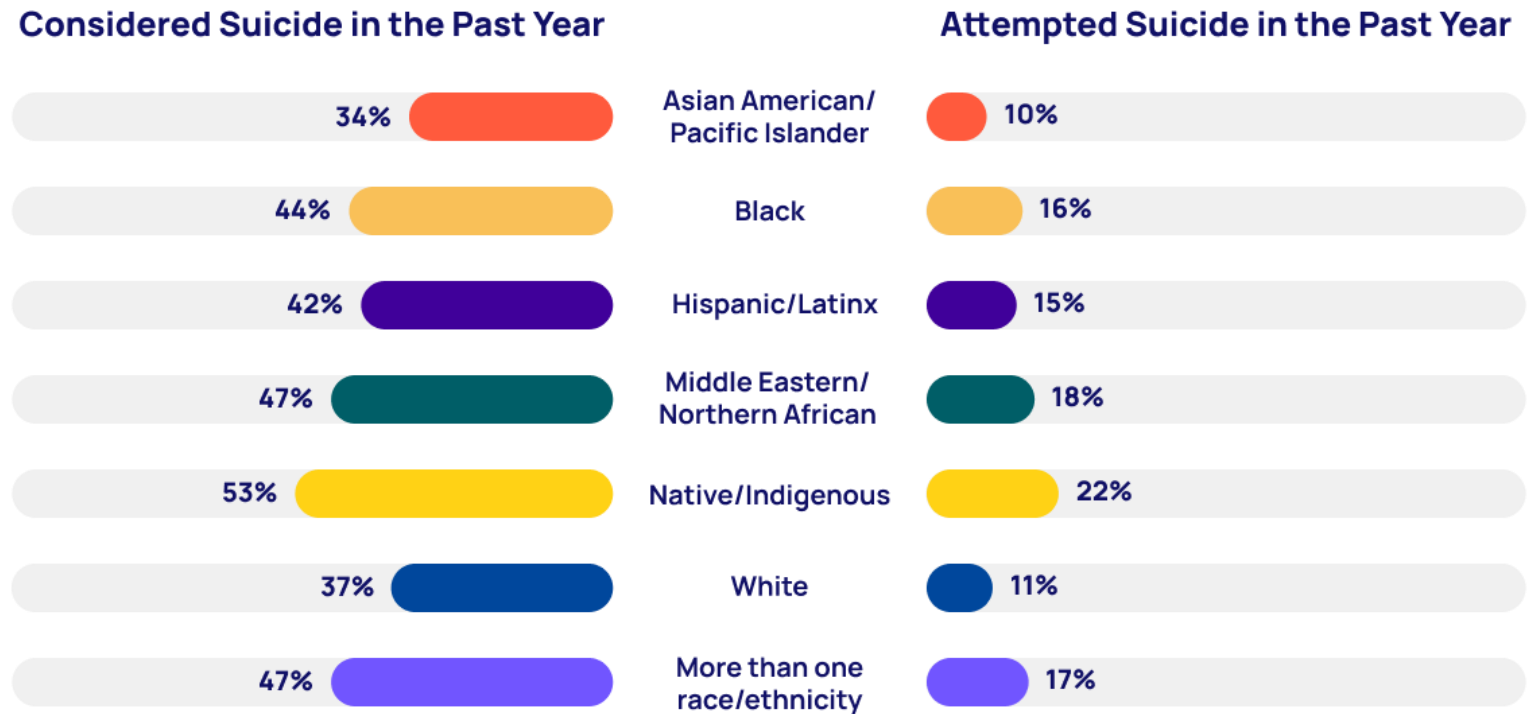
Example 1

Suicidal Behaviors – Gender Identity (13-24 years of age)



Example 2

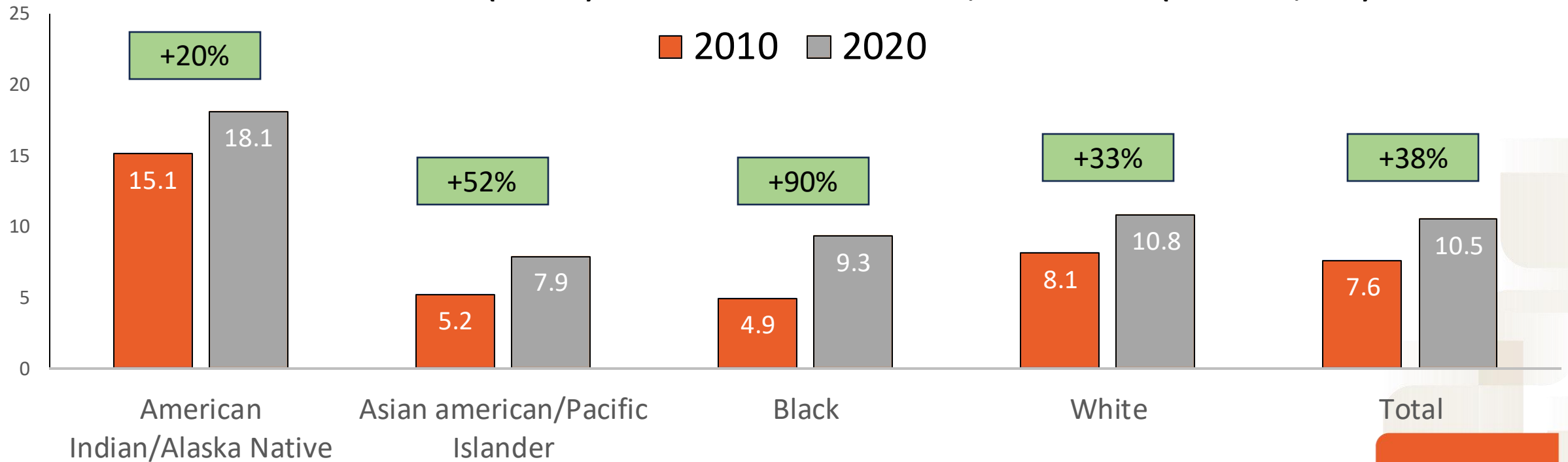
Rates of considered and attempted suicide among LGBTQ young people by race/ethnicity:



<https://www.thetrevorproject.org/survey-2023>

Example 3

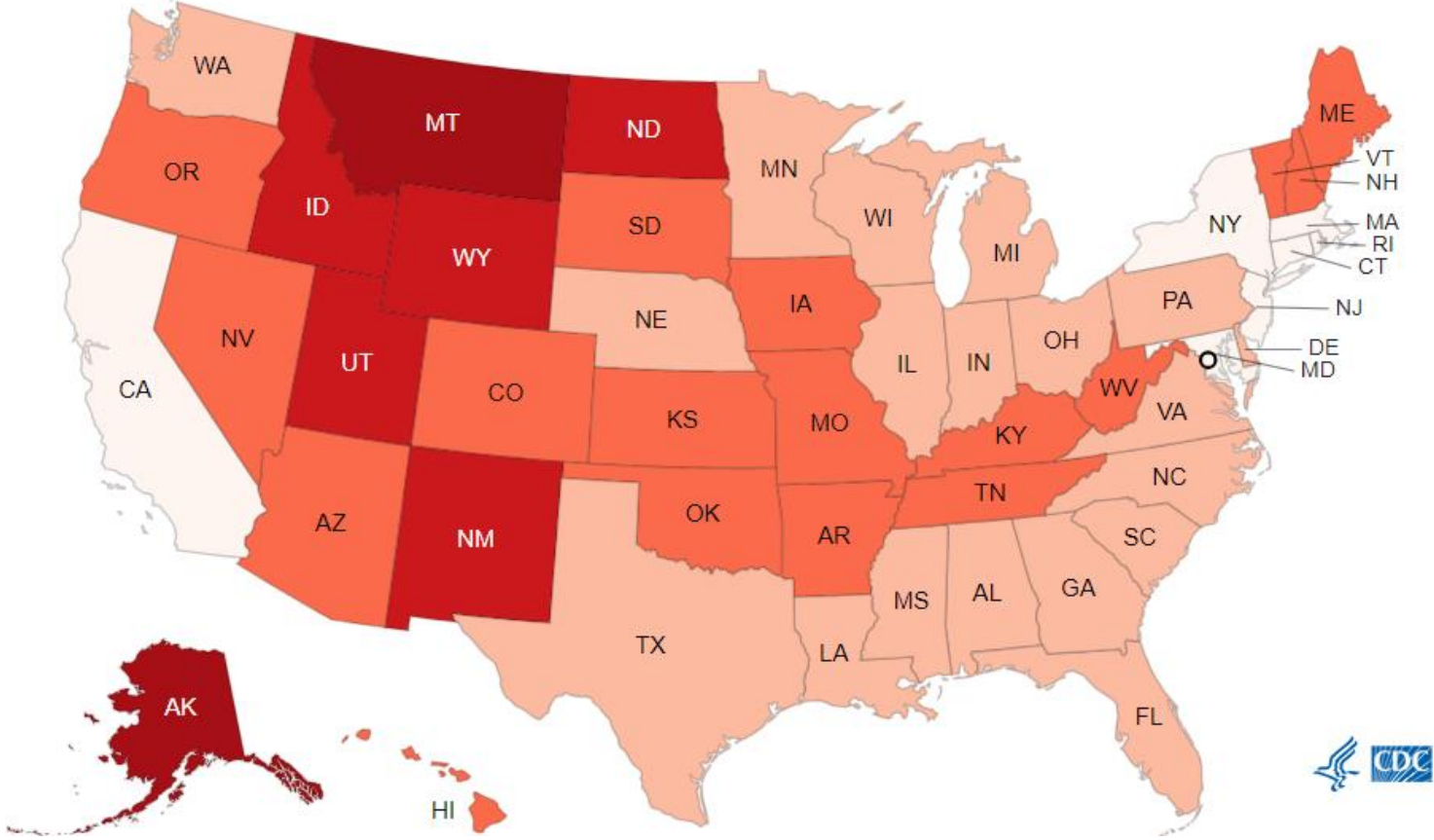
TRENDS IN YOUTH (10-24) SUICIDE RATES BY RACE, 2010-2020 (PER 100,000)



CDC WONDER Online Database (2021).

Example 4

Year
2022 ▾



Source: CDC/National Center for Health Statistics

 www.TheNationalCouncil.org



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RESPONDER**STRONG**[™]

CRISIS TEXT LINE |

Text **HELLO** to **741741**
Free, 24/7, Confidential

988 SUICIDE & CRISIS
LIFELINE
24/7 CALL, TEXT, CHAT

THE **TREVOR** PROJECT
Saving Young LGBTQ Lives


**Mental Health
FIRST AID**
*from NATIONAL COUNCIL FOR
MENTAL WELLBEING*

  **Veterans
Crisis Line**
DIAL 988 then **PRESS 1**



Resources

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Call for Collaborative Action

Equity



National Strategy *for*
Suicide Prevention

Introducing the New National Strategy for Suicide Prevention and Federal Action Plan

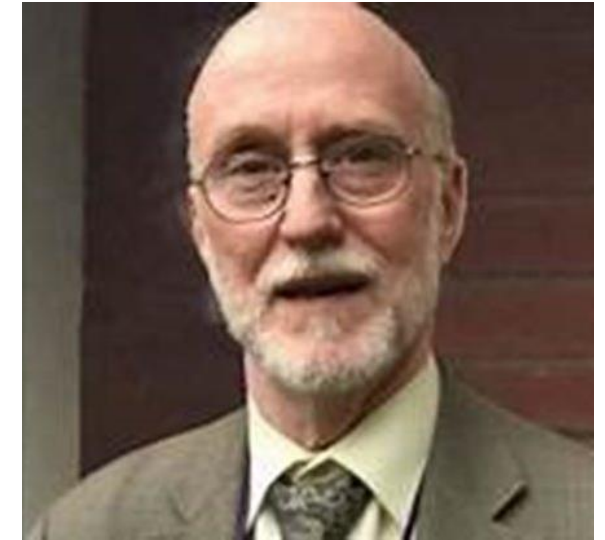
Brandon J. Johnson, MPH, MCHES
Dr. Richard McKeon

2024

Presenters- SAMHSA



Brandon Johnson, MHS, MCHES
Suicide Prevention Branch Chief
SAMHSA



Richard McKeon, Ph.D., MPH
Senior Advisor
SAMHSA

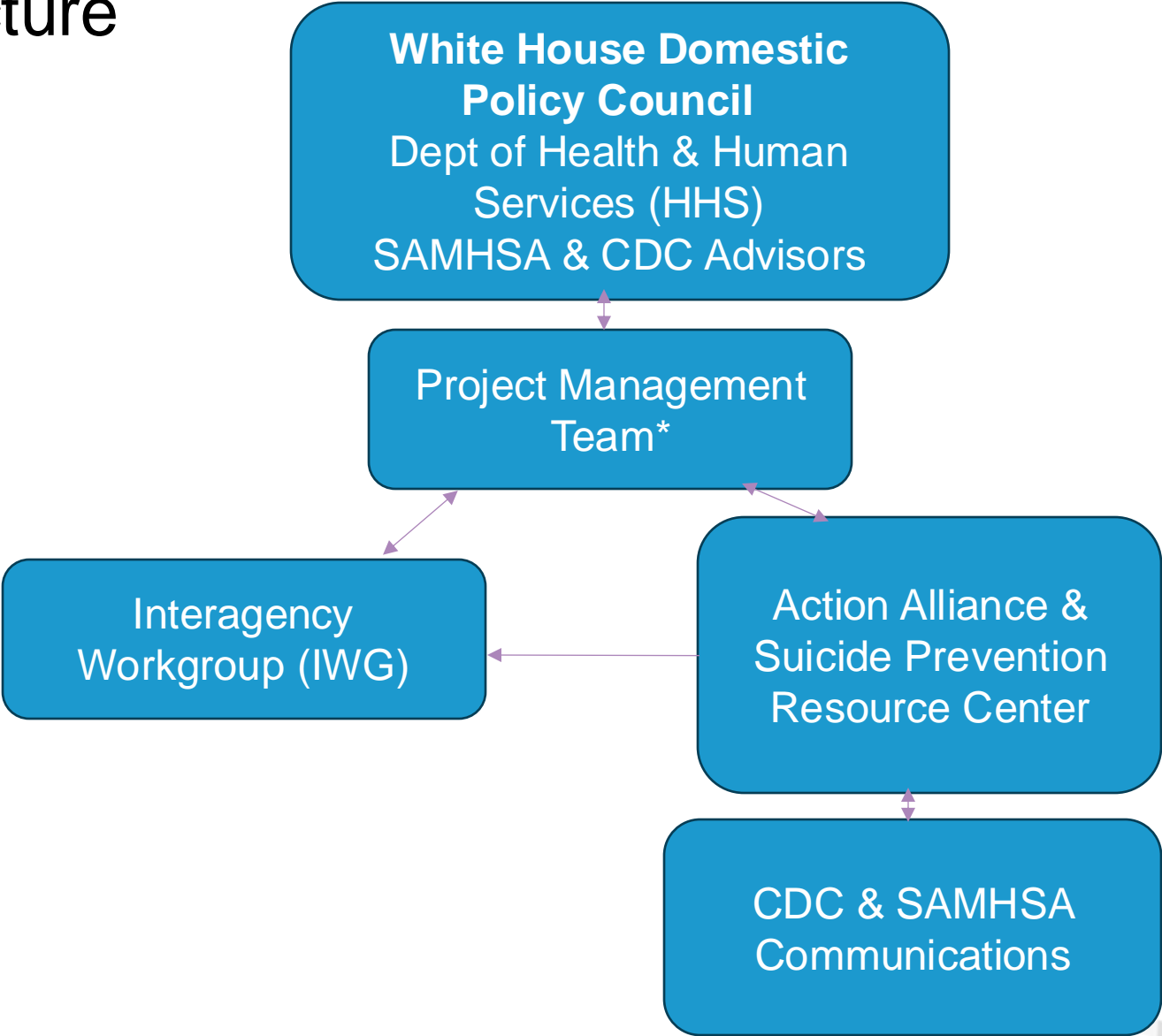


Background

Charge to
Develop 2024
*National
Strategy for
Suicide
Prevention and
Federal Action
Plan*

- Biden-Harris Administration requested a 2024 National Strategy for Suicide Prevention (*National Strategy*) and Federal Action Plan (*Action Plan*).
- HHS, acting through the *Behavioral Health Coordinating Council's (BHCC) Suicide Prevention and Crisis Care subcommittee (SPCC)*, was asked to lead the charge with interdepartmental engagement to build a cross-government strategy
- Released April 23, 2024

Project Structure



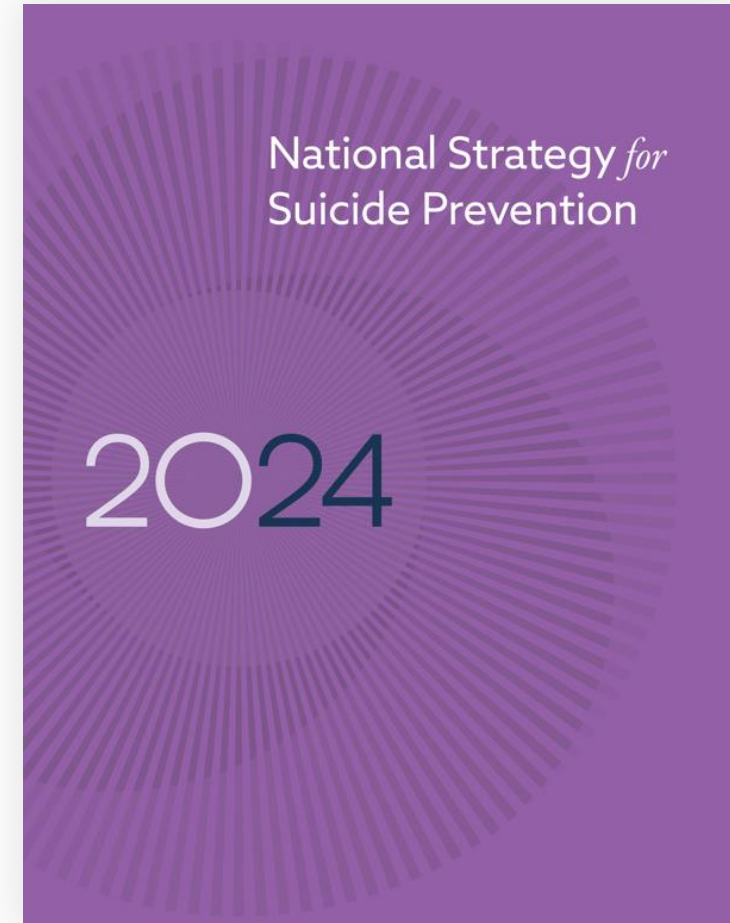
*Brandon Johnson (co-Lead; SAMHSA), Deb Stone (co-Lead, CDC) Judy Qualters (CDC), Richard McKeon (SAMHSA), Jane Pearson (NIMH), Joel Dubenitz (ASPE), Kyle Rosenblum (staff support, CDC)

2024 National Strategy *for* Suicide Prevention

The 2024 *National Strategy for Suicide Prevention* is a bold new 10-year, comprehensive, whole-of-society approach to suicide prevention that provides concrete recommendations for addressing gaps in the suicide prevention field.

The new 2024 *National Strategy*:

- Incorporates advancements in the field and addresses emerging issues
- Is designed to guide, motivate, and promote a more coordinated and comprehensive approach to suicide prevention
- Focuses on addressing the many risk and protective factors associated with suicide, with the recognition that there is no single solution to this complex challenge





Developing the *National Strategy*

NSSP Contributors

The 2024 *National Strategy for Suicide Prevention* was developed by a federal Interagency Work Group (IWG) comprised of:

20+
Agencies

10
Federal Departments

WITH SUPPORT FROM:

—
Suicide
Prevention
Resource
Center (SPRC)

—
National Action
Alliance for
Suicide Prevention
(Action Alliance)

AND A PROJECT MANAGEMENT TEAM CO-LED BY:

—
Substance
Abuse and
Mental Health
Services
Administration
(SAMHSA)

—
Centers for
Disease
Control and
Prevention
(CDC)

—
National
Institute of
Mental Health
(NIMH)

—
U.S. Department of
Health and Human
Services Office of the
Assistant Secretary
for Planning and
Evaluation
(ASPE/HHS)

NSSP Contributors

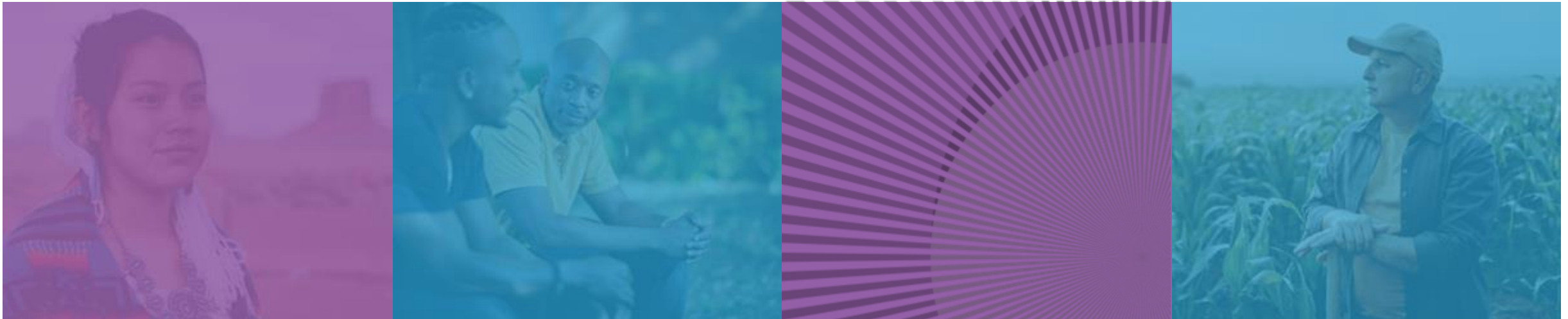
Also reflected in this 10-year *National Strategy* is the input of:

2,000+

People from across the United States who participated in a national needs assessment and a series of listening sessions



Including people with suicide-centered lived experience, tribal members, youth, suicide prevention experts, and partners in the private sector.



National Strategy Development

- Gathered input from invested groups across the country
- Reviewed data trends
- Reviewed 2012 National Strategy and 2017 Assessment Report
 - Assessed gaps, areas needing updating
- Review of 15 key reports and recommendations,* for example:
 - Surgeon General's Call to Action to Implement the National Strategy (2021)
 - Advisory on Social Media and Youth Mental Health
 - VA National Strategy for Suicide Prevention
 - Advancing Comprehensive School Mental Health Systems
 - National Guidelines for Behavioral Health Crisis Care
 - Preventing Suicide: A Technical Package of Policy, Programs, and Practices

Interagency Work Group & Other Federal Contributors

Department of Agriculture

- Economic Research Service
- Forest Service
- National Agricultural Statistics Service
- National Institute of Food and Agriculture
- Office of Partnerships and Public Engagement
- Rural Development

Department of Defense

Department of Education

Department of Health & Human Services

- Administration for Children & Families
- Administration for Community Living
- Agency for Healthcare Research and Quality
- Centers for Disease Control and Prevention
- Centers for Medicaid & Medicare Services
- Food and Drug Administration
- Health Resources and Services Administration
- Indian Health Service
- National Institutes of Health
- Office of the Assistant Secretary for Planning and Evaluation

- Office of the Assistance Secretary of Health
- Substance Abuse and Mental Health Services Administration

Department of Homeland Security

- Customs and Border Protection
- U.S. Coast Guard
- U.S. Immigration and Customs Enforcement
- Office of Health Security

Department of Housing and Urban Development

Department of Justice

Department of Labor

- Occupational Safety and Health Administration
- Veterans' Employment and Training Service

Department of Transportation

- Federal Railroad Administration
- National Highway Traffic Safety Administration

Department of Veterans Affairs

Examples of Changes from 2012 to 2024 *National Strategy*

- **Created new strategic direction on equity in suicide prevention:**
 - Greater focus on supporting people with lived experience, populations disproportionately affected by suicide and marginalized populations, social determinants of health
- **Strengthened focus on:** upstream prevention/comprehensive approach
- **Reflected advances in surveillance:** use of real-time data and data science
- **Added new goals:** lethal means safety, 988, workplace suicide prevention, suicide prevention infrastructure in states, tribes, local communities, territories
- **Added new objectives related to:** social media/digital technology, substance use, adverse childhood experiences, youth
- **Strengthened objectives related to:** continuity of care, care transitions, provider training
- **Elevated evaluation:** throughout strategy, added objective to evaluate the *National Strategy*

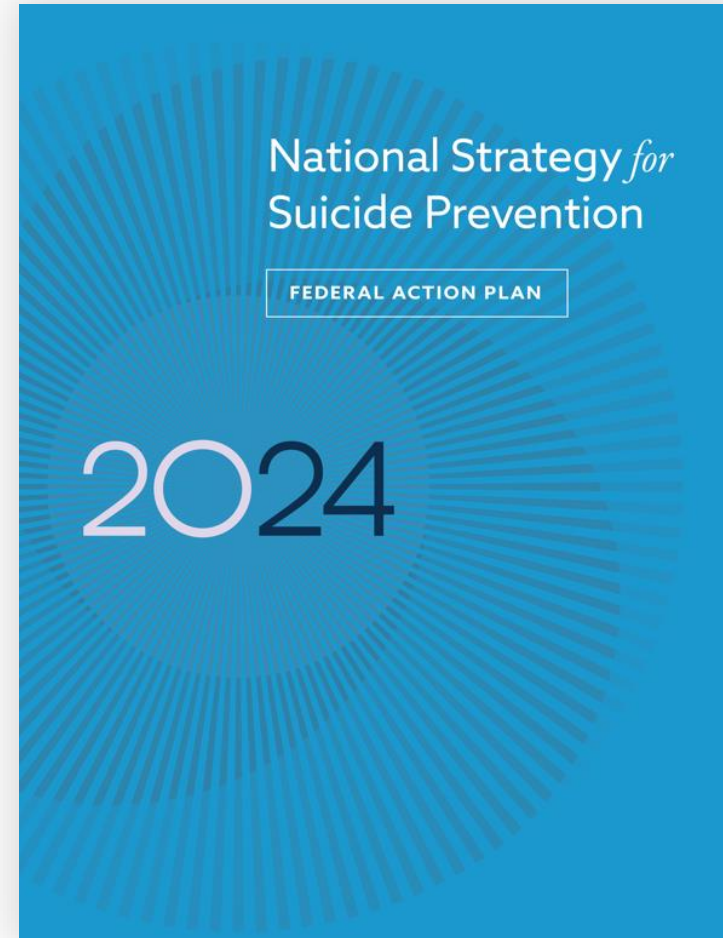
National Strategy *for*
Suicide Prevention

FEDERAL ACTION PLAN

2024

2024 National Strategy *for* Suicide Prevention *Federal Action Plan*

The *National Strategy* is accompanied by the first-ever *Federal Action Plan (Action Plan)*, which **identifies more than 200 actions** across the Federal government to be taken over the next three years in support of those goals.





Next Steps

Comprehensive Communication Plan

➤ **The Communication Plan seeks to:**

- Create awareness of the 2024 *National Strategy and Federal Action Plan*, including actionable dissemination steps for the suicide prevention community.
- Emphasize empathy, the commitment to health equity, and the comprehensive approach set forth in the 2024 *National Strategy*.
- Activate new and continued participation and commitments from partners across diverse agencies and organizations.

➤ **Materials developed**

- Press release, social media toolkit, conference presentations, and other materials for public and private sector

Next Steps: Monitoring and Evaluation

- After release of the *National Strategy*, will develop monitoring and evaluation plan for release at later date
- Building out of agency timelines and metrics of accountability
- Development of core metrics to monitor progress and success
- Evaluation of both agency actions and the National Strategy itself
- Action Alliance and Federal partners to lead



Overview of the 2024 *National Strategy for Suicide Prevention*

NSSP Strategic Direction



Strategic Direction 1: Goals

Strategic Direction 1: Community-based suicide prevention

- 1 Establish effective, broad-based, collaborative, and sustainable suicide prevention partnerships
 - 2 Support **upstream comprehensive community-based** suicide prevention
 - 3 Reduce access to **lethal means** among people at risk of suicide
 - 4 Conduct **postvention** and support people with suicide-centered lived experience
 - 5 Integrate suicide prevention into the culture of the **workplace** and into other community settings
 - 6 Build and sustain suicide prevention infrastructure at the state, tribal, local, and territorial levels
 - 7 Implement research-informed suicide prevention communication activities in diverse populations using best practices from communication science
-

Strategic Directions 2 & 3: Goals

Strategic Direction 2: Treatment and crisis services

- 8 Implement effective suicide prevention services as a core component of health care.
 - 9 Improve the quality and accessibility of crisis care services across all communities.
-

Strategic Direction 3: Surveillance, quality improvement, and research

- 10 Improve the quality, timeliness, scope, usefulness, and accessibility of data needed for suicide-related surveillance, research, evaluation, and quality improvement
 - 11 Promote and support research on suicide prevention
-

Strategic Direction 4: Goals

Strategic Direction 4: Health equity in suicide prevention

- 12 Embed health equity into all comprehensive suicide prevention activities
 - 13 Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on marginalized communities, persons with suicide-centered lived experiences, and youth
 - 14 Create an equitable and diverse suicide prevention workforce that is equipped and supported to address the needs of communities they serve
 - 15 Improve and expand effective suicide prevention programs for populations disproportionately impacted by suicide across the lifespan through improved data and support of research and evaluation.
-

Strategic Direction 4: Goal 13 Objectives

Goal 13: Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on marginalized communities, persons with suicide-centered lived experiences, and youth

- 13.1 Implement and evaluate focused suicide prevention activities across the life span that address the increasing rate of suicide thoughts, attempts, and deaths within racial, ethnic, and historically marginalized groups.
- 13.2 Increase awareness and understanding of the unique barriers and challenges of rural communities to better inform and improve suicide prevention activities.
- 13.3 Increase awareness and understanding of the unique barriers and challenges of military and Veteran status to improve suicide prevention among service members, Veterans, and their families.
- 13.4 Increase suicide prevention programs, practices, and policies in support of and in collaboration with LGBTQI+ individuals.

Strategic Direction 4: Goal 13 Objectives

Goal 13: Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on marginalized communities, persons with suicide-centered lived experiences, and youth

- 13.5 Improve and expand suicide prevention programs, practices, policies, and crisis response in child welfare, criminal and juvenile justice, behavioral health, and other systems serving populations disproportionately affected by suicide and ensure ongoing staff training and development.
- 13.6 Leverage social media use for youth and young adults to support suicide prevention efforts.
- 13.7 Develop research priorities and implement prevention strategies to address the high rate of suicides among older adults..

Age-adjusted suicide rates by race/ethnicity

Suicide rates increased 2018-2021:

- + **26%** among AI/AN, especially in age group 25-44
- + **19%** among Black populations, especially in age groups 10-24 and 25-44
- + **7%** among Hispanic people, especially ages 25-44

<https://www.cdc.gov/mmwr/volumes/72/wr/m7206a4.htm>

Numbers of Suicide and Suicide Rates, 2022*		
Race/Ethnicity	Number of Suicides	Age-Adjusted Rate per 100,000
Non-Hispanic		
American Indian and Alaska Natives	652	27.2
Asian	1,460	6.9
Black or African American	3,828	8.9
Native Hawaiian or Other Pacific Islander	95	14.3
White	37,503	17.6
More Than One Race	683	10.5
Hispanic	5,131	8.1

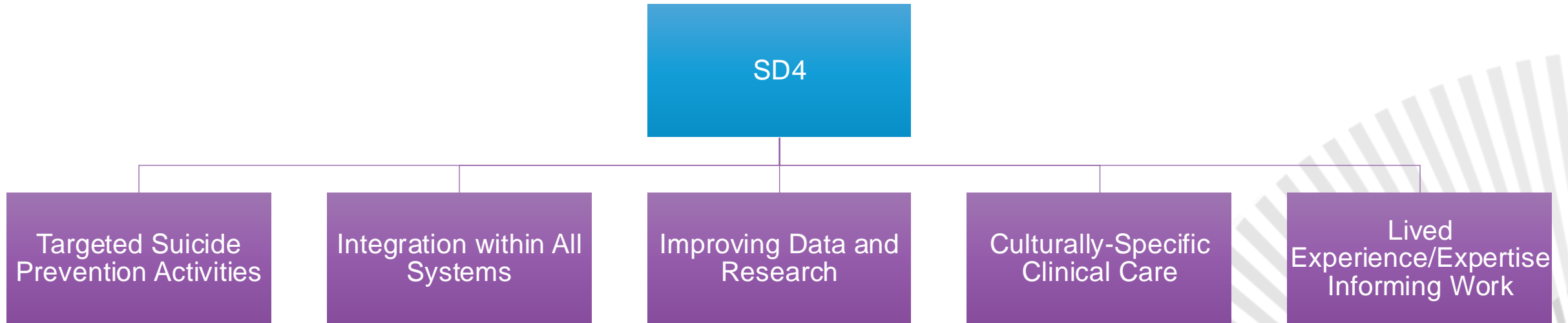
*2022 provisional data; Source: CDC Wonder

Suicide Trends

Populations with Suicide Disparities	Suicide Deaths	Suicide Attempts
Disproportionately affected	<ul style="list-style-type: none"> • Middle aged adults 35–64 years • Older adults 75+ • Non-Hispanic American Indian/ Alaska Native (AI/AN) persons, especially ages 10-24 years • Non-Hispanic White persons, especially males • Rural populations • Veterans • Certain occupational groups, such as construction • People with less than a high school education 	<ul style="list-style-type: none"> • Youth 15-19, especially females • LGBTQ+ young people
Populations with increasing rates	<ul style="list-style-type: none"> • Youth ages 10-24, especially females, and non-Hispanic Black youth • Hispanic and Non-Hispanic AI/AN, Black, and multi-racial persons ages 25-44 	<ul style="list-style-type: none"> • Children/youth • Non-Hispanic Black youth



Pillars of Strategic Direction 4



SAMHSA Federal Action Plan Item: SD4

- **SAMHSA** will plan and support a series of annual Policy Academies to support states in addressing populations disproportionately affected by suicide, using the best available data to prioritize populations of focus.





2024 Black Youth Suicide Policy Academy



Additional SAMHSA Work in Equity

- **Embedding Equity and Building the Suicide Prevention Workforce for Underserved Communities Technical Experts Panel**
 - July 9-10, 2024 Hilton Washington DC / Rockville Hotel & Executive Meeting Center Rockville, MD
- **Older Adult Suicide Prevention Policy Academy,**
 - August 7-8th, Hilton Rockville
 - To address this critical issue, the Older Adult Suicide Prevention State Policy Academy will engage teams representing 5 participating U.S. states and key informants from national suicide/behavioral health and aging-related organizations in developing state plans to reduce older adult suicidal thoughts, attempts, and deaths.
 - At the completion of the policy academy, state teams will develop an action plan.

Questions?

Questions?

National Strategy *for*
Suicide Prevention

Thank You

CONTACT

Brandon J. Johnson, MHS, MCHES
Brandon.Johnson1@samhsa.hhs.gov

Dr. Richard McKeon
Richard.mckeon@samhsa.hhs.gov



2024

Thank you!

The slides and recording for this webinar will be available on <https://www.thenationalcouncil.org/>

Feel free to reach out for additional thoughts or questions.
Dr. Laura Leone - LauraL@thenationalcouncil.org