

the plan

Alabama
Suicide
Prevention
2004

Suicide is a leading cause of death due to injury in Alabama, second only to motor vehicle crashes. Over 500 suicides are committed in the state each year. These statistics are strong indications that suicide is a problem that needs to be addressed in our state. In response to “The Surgeon General’s Call to Action to Prevent Suicide 1999” published by the Department of Health and Human Services, United States Public Health Service, Alabama convened a multi-disciplinary Suicide Task Force to develop a plan to address suicide in the state.

Alabama’s Suicide Prevention Plan builds upon the fifteen points raised in the Surgeon General’s report. The three overall goals addressed in the plan are:

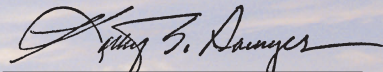
- 1. To recognize suicide as a problem affecting Alabama.**
- 2. To outline a strategy for the prevention of suicide in Alabama.**
- 3. To identify federal, state, and local resources to support implementation of Alabama’s Suicide Prevention Plan.**

We are pleased to present Alabama’s first suicide prevention plan. We invite you to use this plan as you seek resources to support you, your family, and community. We trust that you will also use this plan as you implement activities to decrease Alabama’s suicide rate.

Sincerely,



Donald E. Williamson, M.D.
State Health Officer
Department of Public Health



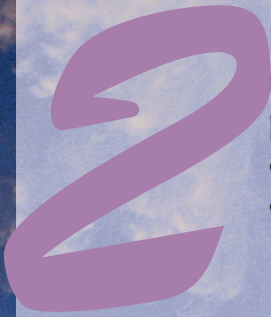
Kathy E. Sawyer
Commissioner
Department of Mental Health





Promote public awareness that suicide is a health problem and, as such, many suicides are preventable. Use information technology appropriately to make facts about suicide and its risk factors and prevention approaches available to the public and to health care providers.

- A. Establish an Alabama toll-free suicide prevention hotline with statewide, regional, and national data for referral to treatment and support services.
- B. Explore funding and human resources to support a suicide prevention campaign.
- C. Conduct an Alabama Suicide Prevention Plan press conference to kickoff implementation featuring the State Health Officer and Commissioner.
- D. Establish a suicide prevention website, with links to various departments.
- E. Develop a suicide prevention campaign to educate the general public through all forms of media.



Expand awareness of and enhance resources in communities for suicide prevention programs and mental and substance abuse disorders assessment and treatment.

- A. Create an Alabama Suicide Prevention resource directory, and educate the general public on how to access the directory.
- B. Establish an annual Alabama Suicide Prevention awards program, acknowledging exemplary practice.
- C. Strengthen and expand survivors of suicide support groups in the state.
- D. Educate legislators and potential benefactors of suicide rates in Alabama and the need to implement a prevention program.
- E. Encourage the development of employee assistance programs, which address suicide prevention.

3 **Develop and implement strategies to reduce the stigma associated with mental illness, substance abuse and suicidal behaviors, and with seeking help for such problems.**

- A. Recruit volunteers and survivors across ethnicities and age groups for a Speakers' Bureau.
- B. Provide suicide prevention education through the Speakers Bureau, website and the media to as many recipients as possible to include schools, elderly organizations and businesses.



Expand collaboration with and among public and private sectors to implement the Alabama Suicide Prevention Plan.

- A. Enlist the support of the Governor to issue a Suicide Prevention Awareness Month proclamation in accordance with national initiatives.
- B. Explore the possibility of developing an annual Alabama Conference on Suicide Prevention.
- C. Explore legislative funding for the implementation of Alabama's Suicide Prevention Plan.

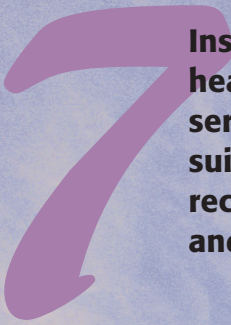
5 Improve the ability of primary care providers to recognize and treat depression, substance abuse, and other major mental illnesses associated with suicide risk. Increase the referrals to specialty care when appropriate.

- A. Identify and develop a suicide screening assessment tool for primary care providers and distribute for statewide use.
- B. Develop an Alabama Primary Care Provider Speakers' Bureau, and utilize speakers for presentations and training.
- C. Encourage primary care providers to attend the American Association of Suicidology Conference, and other continuing education opportunities regarding suicide prevention.



Eliminate barriers in public and private insurance programs for provision of quality mental and substance abuse disorder treatments and create incentives to treat patients with co-existing mental and substance abuse disorders.

- A. Educate legislators to eliminate mental health barriers in public and private insurance groups, while supporting the efforts of other organizations committed to this cause such as the National Alliance for the Mentally Ill in Alabama and the Mental Health Association of Alabama.
- B. Provide local experts for media presentations addressing disparities.

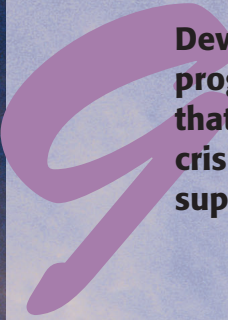


Institute training for all health, mental health, substance abuse and human service professionals concerning suicide risk assessment and recognition, treatment, management, and aftercare intervention.

- A. Involve universities throughout the state in continuing education for health, mental health, substance abuse, and human service professionals (including primary care physicians, first responders, clergy, teachers, school counselors, correctional workers, adult and child protective service social workers, other social workers, insurance workers, and families) concerning the suicide risk assessment and recognition, treatment, management, and aftercare intervention.
- B. Include suicide prevention training at state conferences, across disciplines.
- C. Encourage individual workers to participate in the American Association of Suicidology Crisis Worker Certification Process.
- D. Explore options toward the development of a certified suicide prevention program in Alabama for health, mental health, substance abuse, human service professionals (including primary care physicians, first responders, clergy, teachers, school counselors, youth organizations, correctional workers, child and adult protective service social workers, other social workers, insurance workers and families).

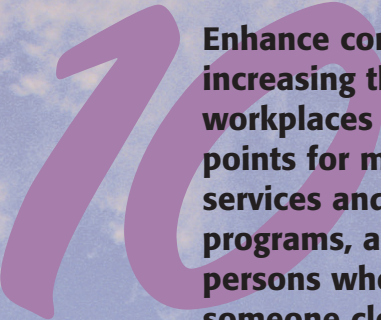
8 Develop and implement effective training programs for family members of individuals at risk, and for natural community helpers on how to recognize, respond to, and refer people showing signs of suicide risk and associated mental and substance abuse disorders. Natural community helpers are people such as educators, coaches, hair-dressers, and faith leaders, among others.

- A. Educate faith organizations in suicide prevention.
- B. Recruit and train community volunteers, including family members and natural community helpers, to educate the organizations they represent, and the general public on suicide prevention.
- C. Encourage hospitals, clinics, and other appropriate facilities to promote availability of training to family members of individuals at risk or attempters of suicide.
- D. Invite the American Association of Suicidology to offer training at state conferences in Alabama.
- E. Annually survey suicide prevention resources in Alabama, and publicize these resources at both state and local levels.
- F. Maintain a current resource database that families, individuals at risk for suicide, first responders, other professionals, and natural community helpers can access for resource information.
- G. Make access to counseling more available through school systems, workplaces, clinics, hospitals and other appropriate facilities.
- H. Create a community environment that supports seeking help without stigma.



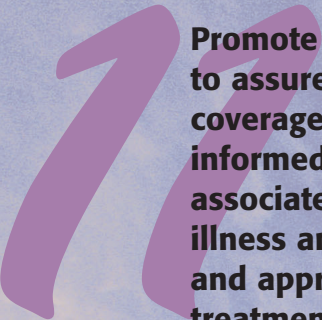
Develop and implement safe and effective programs in educational settings for youth that address adolescent distress, provide crisis intervention, and incorporate peer support for individuals seeking help.

- A. Incorporate adolescent crisis intervention into high school health education through the development of a suicide prevention curriculum, which includes a local resource list of all providers and youth organizations.
- B. Train students to provide peer counseling, and develop an awards program for youth, recognizing exemplary efforts to help peers.
- C. Encourage community volunteer efforts through school organizations to instill the benefits of helping others.



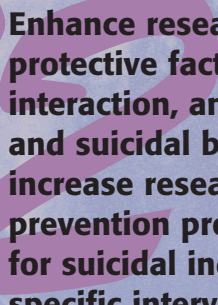
Enhance community care resources by increasing the use of schools and workplaces as access and referral points for mental and physical health services and substance abuse treatment programs, and also provide support for persons who survive the suicide of someone close to them.

- A. Certify teachers and employers as crisis intervention specialists.
- B. Provide school counselors, personnel or human resource officers in business and employment counselors with lists of suicide prevention resources available in their areas.
- C. Provide school and workplaces with resources for mental and physical health services and substance abuse treatment programs.
- D. Develop at least one survivor support group in each mental health area.



Promote a collaboration with the media to assure that entertainment and news coverage represent balanced and informed portrayals of suicide and its associated risk factors, including mental illness and substance abuse disorders and approaches to prevention and treatment.

- A. Train Alabama's media in the appropriate news coverage of suicide, suicide prevention activities, and organizations.
- B. Provide media with press releases, public service announcements, and resident experts to interview to disseminate current and ongoing information about suicide in Alabama.
- C. Encourage media to attend state conferences in Alabama covering suicide prevention.
- D. Invite media to suicide awareness campaigns, programs, or training.
- E. Encourage the participation of American Association of Suicidology members/suicide coalition members in media presentations.



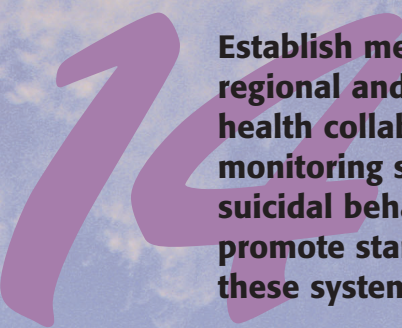
Enhance research to understand risk and protective factors related to suicide, their interaction, and their effects on suicide and suicidal behaviors. Additionally, increase research on effective suicide prevention programs, clinical treatments for suicidal individuals and culture-specific interventions.

- A. Assist interested colleges, universities, and hospitals in seeking grants to support research, and report findings at state conferences in Alabama.
- B. Encourage graduate/doctoral students to research suicide for thesis/dissertation, and present at state conferences in Alabama.



Develop additional scientific strategies for evaluating suicide prevention interventions and ensure that evaluation components promote standard terminology in these systems.

- A. Continue the Alabama Suicide Prevention Task Force, with the Alabama Department of Public Health as the lead agency, and committees structured to annually survey prevention and intervention efforts.
- B. Encourage the development of suicide prevention interventions that contain an evaluation component and reach desired goals and objectives through technical assistance and education provided through the Alabama Suicide Prevention Task Force.



Establish mechanisms for federal, regional and state interagency public health collaboration toward improving monitoring systems for suicide and suicidal behaviors and develop and promote standard terminology in these systems.

- A. Create/implement a standardized reporting system for suicides and suicide attempts through the Alabama Suicide Prevention Task Force.
- B. Encourage suicide prevention programs, hospitals, clinics, and families to report suicides and/or suicide attempts.
- C. Create a community environment that supports the open discussion of suicide without stigma through mass education and media presentations.
- D. Explore possibilities for the development of a position(s) to coordinate and implement these and other duties outlined in this plan.

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Encourage the development and evaluation of new prevention technologies, including firearm safety measures, to reduce easy access to lethal means of suicide.

- A. Encourage colleges, universities, and hospitals to publicize results found through research and include these prevention findings in public education efforts.
- B. Make access to counseling more available through school systems, workplaces, clinics, hospitals, and other community areas.

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