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Funding and Disclaimer





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The views, opinions, and content expressed in this product do not necessarily reflect the views, opinions, or policies of CMHS, SAMHSA, or HHS.

Land Acknowledgement

We acknowledge that the land that now makes up the United States of America was the traditional home, hunting ground, trade exchange point, and migration route of more than 574 American Indian and Alaska Native federally recognized tribes and many more tribal nations that are not federally recognized or no longer exist.

We recognize the cruel legacy of slavery and colonialism in our nation and acknowledge the people whose labor was exploited for generations to help establish the economy of the United States.

We honor indigenous, enslaved, and immigrant peoples' resilience, labor, and stewardship of the land and commit to creating a future founded on respect, justice, and inclusion for all people as we work to heal the deepest generational wounds.

Objectives



- 1. Create a common understanding of substance use and suicide prevention
- 2. Describe the relationship between substance use and suicide
- 3. Review the key overlaps of substance use and suicide prevention
- 4. Identify areas for collaboration



Creating a Shared Understanding: Substance Use and Suicide Prevention

Creating a Shared Understanding:

Substance Use Prevention

- Substance use prevention refers to the prevention of any substance misuse or preventing the onset of regular substance use
- Activities work to educate and support individuals and communities to prevent the use and misuse of substances and the development of substance use disorders
- Historically substance use prevention funding has focused on youth, but does also include adult misuse prevention

Source: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control

Creating a Shared Understanding: Suicide Prevention

- Suicide prevention refers to the prevention of suicide attempts and death
- Activities include upstream prevention efforts, early identification and support for those at risk, and postvention efforts
- Suicide prevention is done across the lifespan, although funding has

historically focused on youth and young adults

Creating a Shared Understanding:

Substance Use and Suicide are Linked



- Substance use increases risk for suicide
- Shared risk and protective factors
- Overlapping clinical populations

Source: CDC, 2021



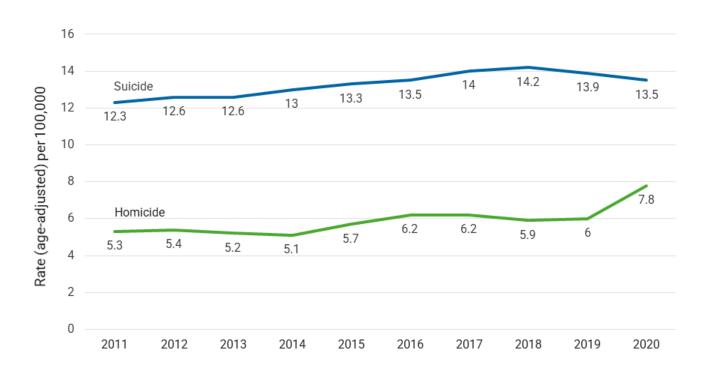
Suicide Rates by Sex, United States 2011-2020



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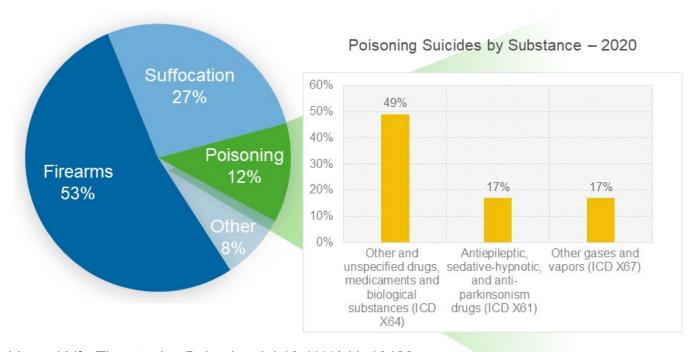


Suicide and Homicide Rates, United States 2011-2020





Suicide Deaths by Method, United States 2020

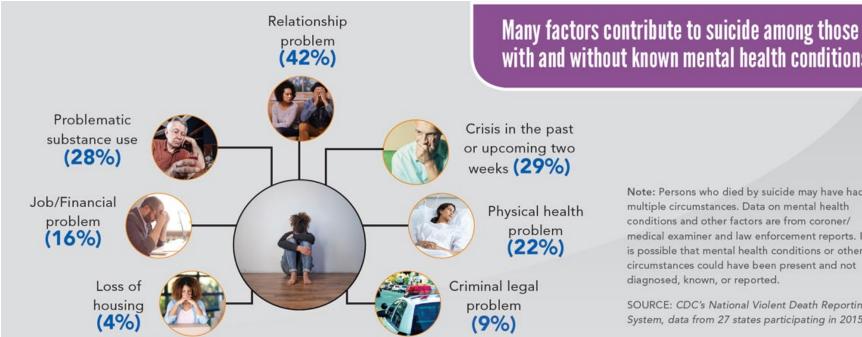


Suicide and Life-Threatening Behavior, doi:10.1111/sltb.12422

www.sprc.org

Source: CDC, 2021

Problematic Substance Use and Suicide



with and without known mental health conditions.

Note: Persons who died by suicide may have had multiple circumstances. Data on mental health conditions and other factors are from coroner/ medical examiner and law enforcement reports. It is possible that mental health conditions or other circumstances could have been present and not diagnosed, known, or reported.

SOURCE: CDC's National Violent Death Reporting System, data from 27 states participating in 2015.



Problematic Substance Use and Suicide

- 1 in 7 adults (15%) have a current substance use disorder
- Nearly 46,000 people died by suicide in 2020
- In 2020, drug poisoning (including opioid and heroin overdose) was present in 9% of suicide deaths
- Rates of suicide in the U.S. were almost four times higher for men than for women
- 22% of deaths by suicide in the U.S. involve alcohol intoxication (SAMHSA)



Problematic Substance Use and Suicide

- Up to 40% of individuals seeking treatment for a substance use disorder report a history of a suicide attempt(s)
- Adults who have an opioid use disorder are 13 times more likely to die by suicide than the general population

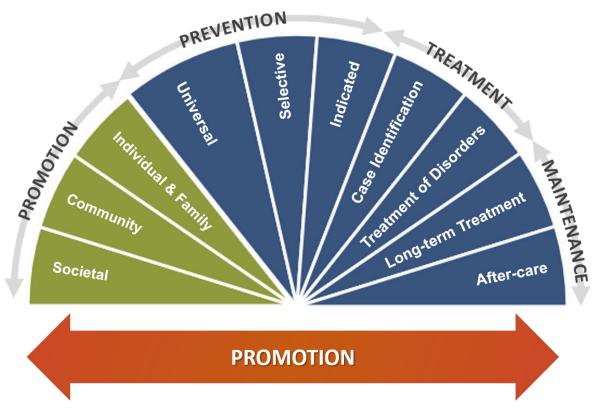




Substance Use and Suicide Prevention

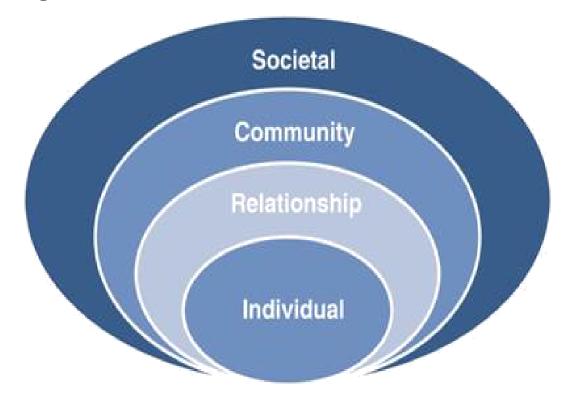


The Intersection: Spectrum of Mental, Emotional, and Behavioral Interventions





Socio-Ecological Model



Shared Risk Factors

Societal

Easy Access to Substances

High Alcohol Outlet Density

Community

Low Community Connectedness

Relationship

Bullying

Family Conflict

Financial Stress (in caregivers)

Social Isolation

Lack of Support

Individual

Behavioral health problems

Physical health problems

Poor coping skills

Trauma

Family

Shared Protective Factors

Societal

Access to physical and mental health care

Availability of evidence-based treatments

Reduction of access to lethal means

Community

School Connectedness

Relationship

Connection to a caring adult

Individual

Conflict resolution skills

Good coping skills

Healthy relationship skills

Strong parenting skills

Family



Key Areas of Collaboration:Substance Use and Suicide Prevention



Key Areas of Collaboration

- Identifying the problem
- Sector engagement and partnerships
- Planning
- Strategies
- Language and stigma



Key Areas of Collaboration: Identifying the Problem

 Both suicide and substance misuse prevention practitioners often use a needs assessment and strategic planning process to identify prevention priorities and to develop a strategic plan to address those priorities.



Recommendation: *Identify local data sources and identify whether there are both substance misuse and suicide prevention data points.*



Key Areas of Collaboration:

Sector Engagement and Partnerships

 Suicide prevention and substance misuse prevention are both most effective when they collaborate closely with other sectors in our communities. This means that prevention programs in both areas are likely already collaborating with some of the same partners.



Recommendation: *Identify who is working on suicide/substance misuse prevention in your community and find all the sectors with whom they collaborate.*



Key Areas of Collaboration:Planning

 During the planning phases, substance misuse and suicide prevention efforts can strategically identify ways in which they can work together on one another's strategic plans.



Recommendation: During the planning phase of your prevention initiative, consider reviewing the shared risk and protective factors that are effective in addressing both suicide and substance misuse prevention.



Key Areas of Collaboration:Strategies

- Leverage work in key settings such as schools
- Collaborate on community policies such as alcohol outlet density
- Exchange data to identify overlaps in your community's needs (NVDRS, child fatality review)



Key Areas of Collaboration:

Language and Stigma

- Always continue learning as language is frequently evolving
- Use first person language
- Avoid language that references suicide as:
 - Inevitable
 - Normal
 - Glamorous



Key Areas of Collaboration:

Substance Use and Suicide Prevention Professionals













Leverage each other's strengths and ask to partner. Plan and implement cross-training on the link between substance use and suicide.

Use process and outcome data to evaluate and make the case Learn
who is
responsible
for suicide
prevention.

Familiarize yourself and peers with suicide and substance use prevention plans, strategies, and programs.

Identify public health goals you have in common.



Examples from the Field:

Substance Use and Suicide Prevention



Examples from the Field:

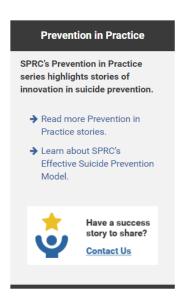
West Virginia





Examples from the Field:

Native Americans for Community Action, Inc (NACA)



Building Life Skills, Connectedness, and Resilience in Youth



News Type: From the Field, Prevention in Practice

Author: Suicide Prevention Resource Center

Publisher: Education Development Center, Inc.

State: Arizona

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Find information on suicide prevention efforts in your state.



Additional Resources

- PTTC Prevention Technology Transfer Center Network https://pttcnetwork.org/
- The Intersection of Substance Misuse and Suicide Prevention https://pttcnetwork.org/centers/south-southwest-pttc/event/intersection-substance-misuse-and-suicide-prevention
- Substance Abuse and Mental Health Services Administration <u>www.samhsa.gov</u>
- National Action Alliance for Suicide Prevention <u>www.actionallianceforsuicideprevention.org</u>

The national Suicide Prevention Resource Center (SPRC) is your one-stop source for information to help you develop, deliver, and evaluate evidence-informed suicide prevention programs.

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Thank you!



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Products and resources

References

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Pie Chart Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2017 on CDC WONDER Online Database, released December, 2018. Data are from the Multiple Cause of Death Files, 1999-2017, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at http://wonder.cdc.gov/ucd-icd10.html on Feb 6, 2019

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