

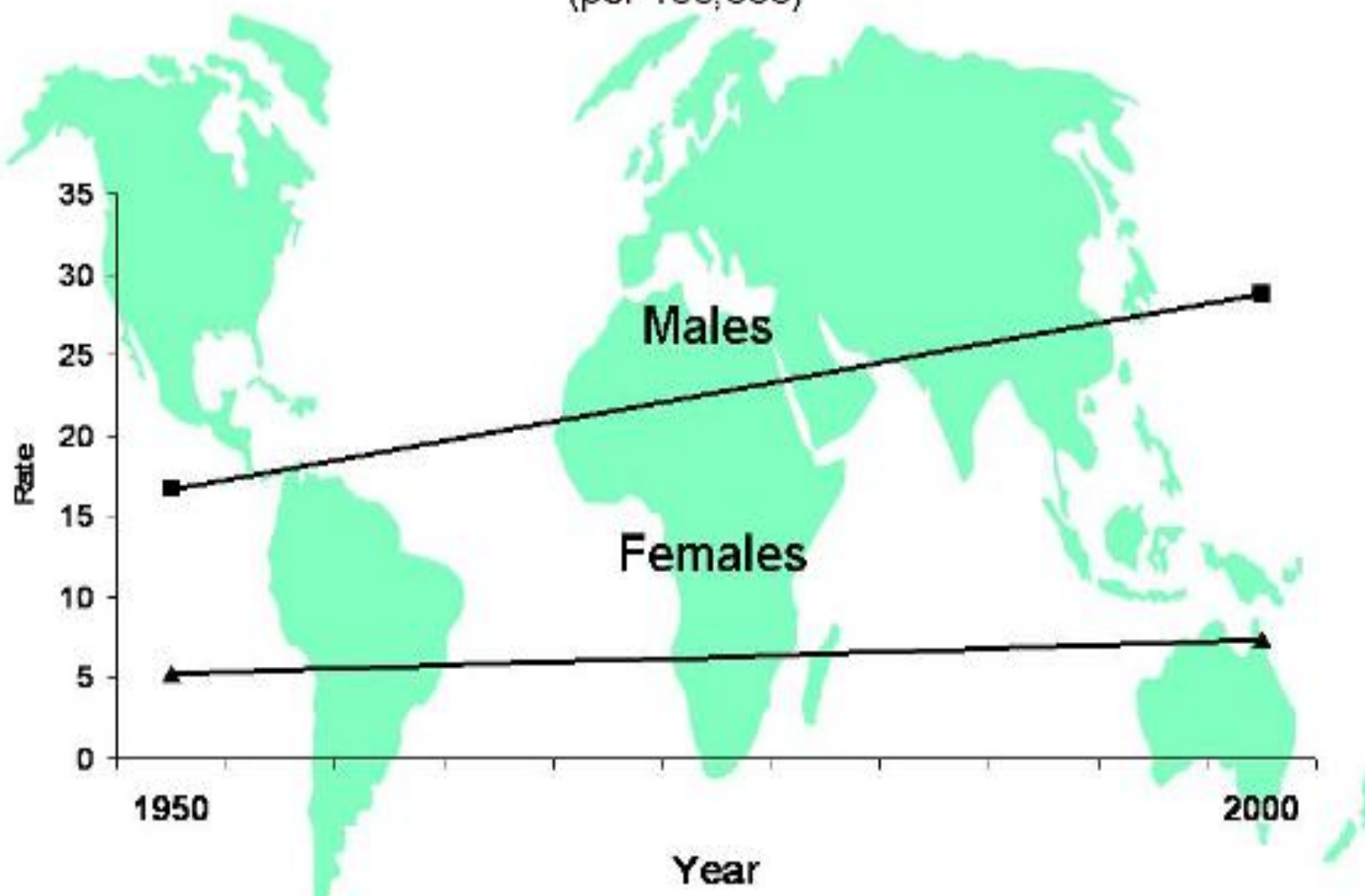
An Overview of the National Strategy for Suicide Prevention

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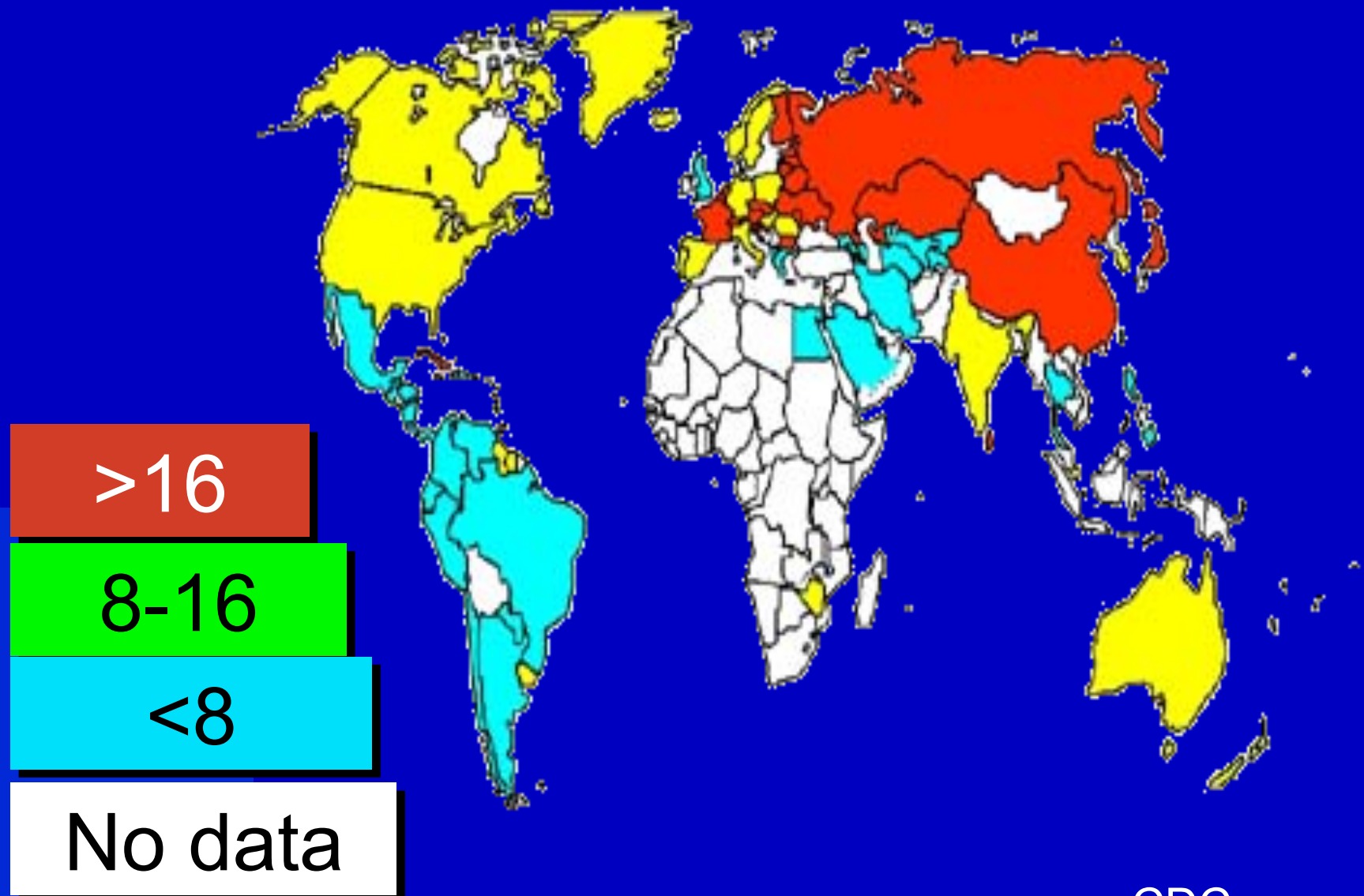
Texas Suicide Prevention Symposium
August 1, 2012

Evolution of global suicide rates 1950-2000

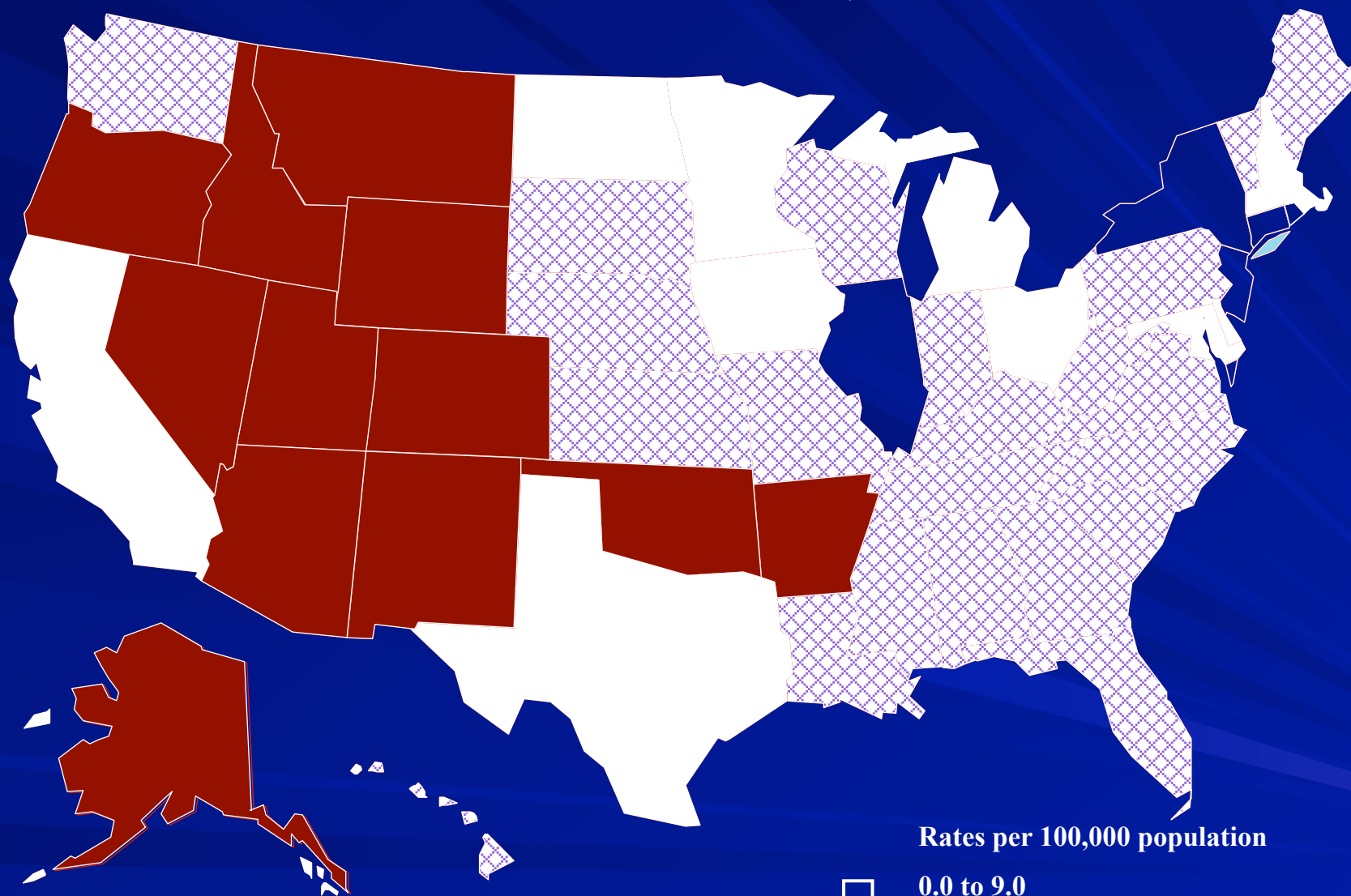
(per 100,000)



Nationality and Suicide Rates



Age-adjusted suicide rates among all persons by state -- United States, 2001



Source: Centers for Disease Control and Prevention (CDC) mortality data

History of US suicide prevention efforts...



(From Crosby, 2005)



National Action Alliance for Suicide Prevention: An Overview

Katherine Wootten
Associate Director, Secretariat

7 October 2011 | MHLG Meeting



History/Formation

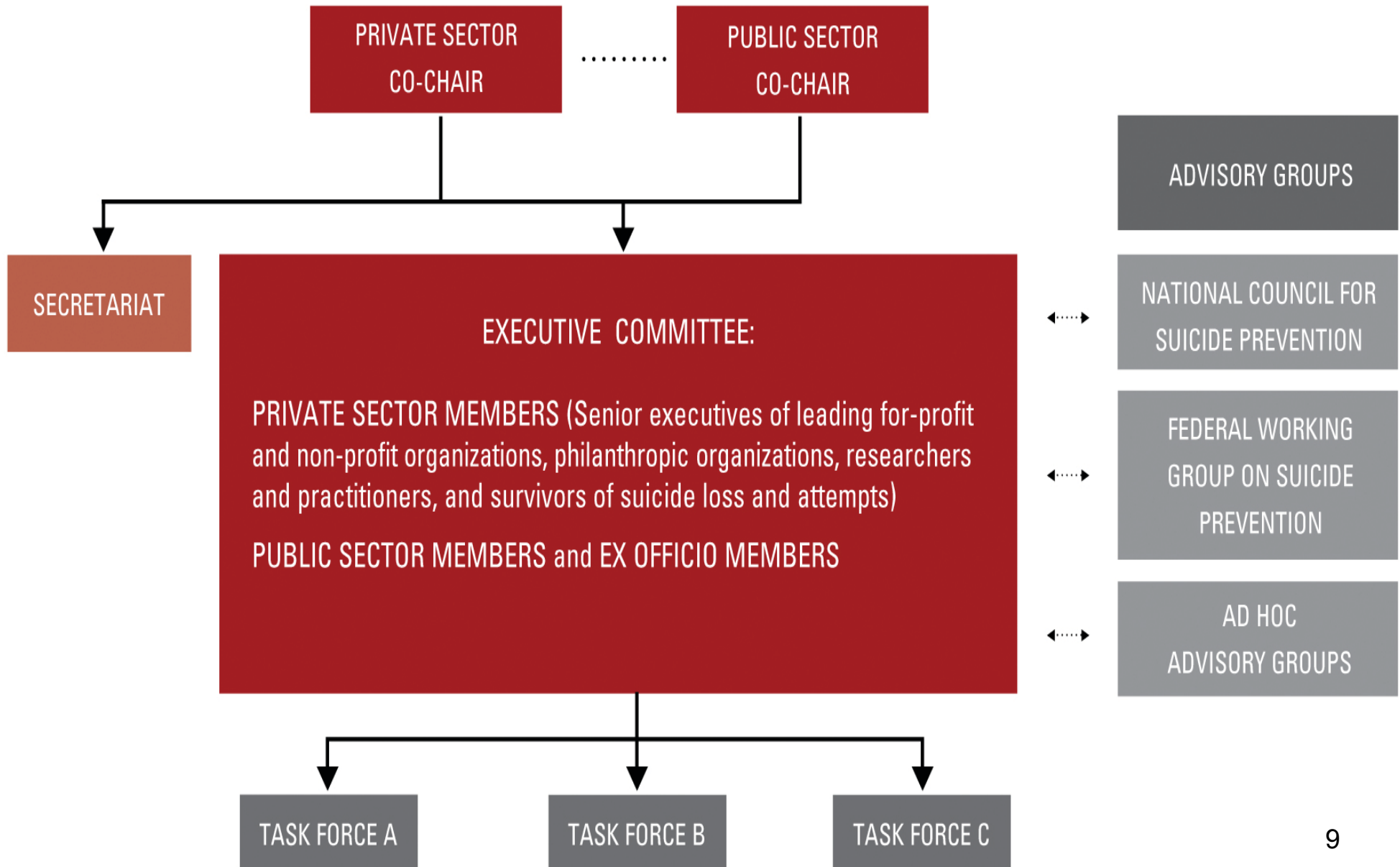
- Included as Objective 2.2 of the NSSP (2001):
 - By 2002, establish a public/private partnership(s) (e.g., a national coordinating body) with the purpose of advancing and coordinating the implementation of the [NSSP].
- Launch (2010) was convened by Secretary of Health and Human Services Kathleen Sebelius and Secretary of Defense Robert Gates
 - ***Private sector Co-Chair:*** The Honorable Gordon Smith, President and CEO of the National Association of Broadcasters
 - ***Public sector Co-Chair:*** The Honorable John McHugh, Secretary of the Army



- To advance the *National Strategy for Suicide Prevention* (NSSP) by:
 - **Championing** suicide prevention as a national priority
 - **Catalyzing** efforts to implement high-priority objectives of the NSSP
 - **Cultivating** the resources needed to sustain progress



Organizational Structure





Executive Committee (EXCOM)

ROLES/RESPONSIBILITIES

- Meeting involvement
- Planning
- Action Alliance member education and enrichment
- Co-lead task force
- Leveraging organizational systems
- Resource development

REPRESENTATION

- **Public:** Defense, Education, Health and Human Services, former Federal legislator, Interior, Justice, Labor, State government (mental health, substance abuse), VA
- **Private:** Behavioral health/substance abuse, business, faith leader/interfaith, hospitals, insurance, National Council for Suicide Prevention, older adult services, organized labor, primary care, social media, SPRC, traditional media, youth advocacy
- **Other:** Clinical, consumer of mental health services, philanthropy, research, suicide attempt survivor, suicide loss survivor



Task Forces

- Prioritized according to high-priority goals and objectives of the NSSP, interest, political will, and resource availability
- Leadership comes from members of the EXCOM, who select members and create a plan of action
- Fourteen currently established:
 - Oct 2010: **Infrastructure** task forces (*National Strategy for Suicide Prevention* Revision, Data and Surveillance, Research Prioritization)
 - Dec 2010: **High-risk population** task forces (American Indian / Alaska Native populations, LGBT Youth, Military/Veterans, Survivors of Suicide Attempts, Survivors of Suicide Loss)
 - Apr-Sep 2011: **Intervention** task forces (Clinical Care and Intervention, Clinical Workforce Development, Faith Communities, Public Awareness and Education, Workplace, Youth in Contact with the Juvenile Justice System)



Advisory Groups

- Comprised of leading suicide prevention organizations, professional associations, and ad hoc groups
- Represent the interests of vulnerable populations and others
- Provide expertise and insight to the EXCOM and task forces
- Two categories:
 - *Standing* – regularly consulted (e.g. National Council for Suicide Prevention, Federal Working Group on Suicide Prevention)
 - *Ad hoc* – established as needed



- The Action Alliance has an ambitious, multi-year agenda aimed at priority goals and objectives from the NSSP. Its goals include:
 - ***Year 1:*** Develop the infrastructure and capacity of the Action Alliance to lay a strong foundation for accomplishing the priorities of Year 2 and beyond, which will have the potential to create long-term change in suicide prevention.
 - ***Year 2 and beyond:*** Change systems and policies that have the power to affect suicide outcomes over the long term.

(e.g., an updated and revised NSSP, a prioritized research agenda, a compelling case for employers to support suicide prevention in their workplaces)