



Community Resources for Suicide Prevention in Indian Country

September 9, 2015

Traditional Opening



Today's Facilitators



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Suicide Prevention Resource Center



Words of Encouragement



Tending to
one another!

Traditions in the Creator's Way

Our charge as helpers is to guide or assist others in finding this way of health that the Creator intended for them and us. That is the Creator's work that we are blessed with and can be seen in the use of rituals and ceremonies

Bigfoot & Martinez 2011

Challenges Throughout Indian Country

- Limited behavioral health services and resources
- Barriers to Accessing health and care
- Stigma & Fear about talking about suicide
- Large untapped human and community capacity
- Challenges to coordinated care between state and tribal resources and services
- Crisis response systems are lacking in Indian country
- Limited family and community focused services for suicide prevention

Understanding the Need

In the US:

- Suicide claims more lives than homicide and HIV combined
- 1 million adults attempt suicide every year
- More than 36,000 people complete suicide each year

(CDC, 2012)

1 million



Suicide in Indian Country

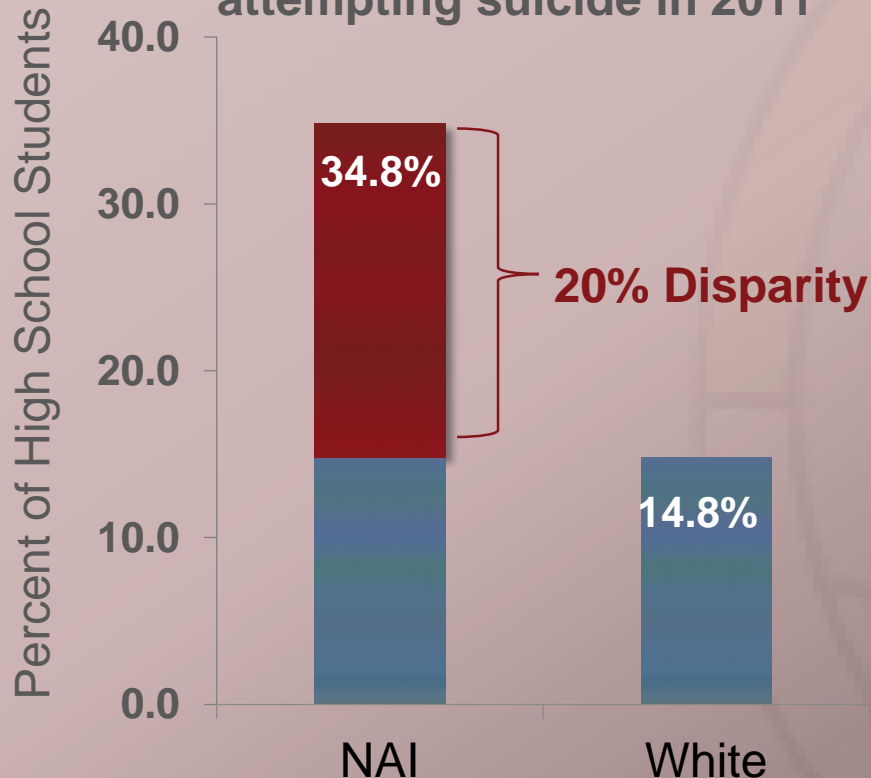
- Second leading cause of death for ages 15-24¹
- Suicide rate for this age group is 25.48 per 100,000 people (2.6 times higher than national average)¹
- 4 young men for every young woman¹
- Youth ages 15 to 24 make up 40% of all suicides in Indian Country²

1 CDC, NCIPC, WISQARS. 2007 data.

2 Carmona, RH. (2005). *U.S. Surgeon General's testimony on suicide prevention among Native American youth, before the Indian Affairs Committee, U.S. Senate, June 15, 2005.* www.surgeongeneral.gov/news/testimony/06152005.html

Mental Health Disparities: Suicide

Percent of NAI high school students reporting they seriously considered attempting suicide in 2011



34.8% of Native American Indian high school students reported seriously considering suicide in the last year, over twice the rate of white students.



Adverse Childhood Experiences Study (ACE)

- From 1995-1998, over 17,000 patients participating in routine health screening volunteered to participate in the study.
- Data reveals staggering proof of the health, social, and economic risks that result from childhood trauma.
- 10 questions administered in health care setting

The ACE Study uses the ACE Score, which is a count of the total number of ACE respondents reported. The ACE Score is used to assess the total amount of stress during childhood and has demonstrated that as the number of ACE increase, the risk for the following health problems increases in a strong and graded fashion:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy

Sample ACE Questions

During the first 18 years of your life...

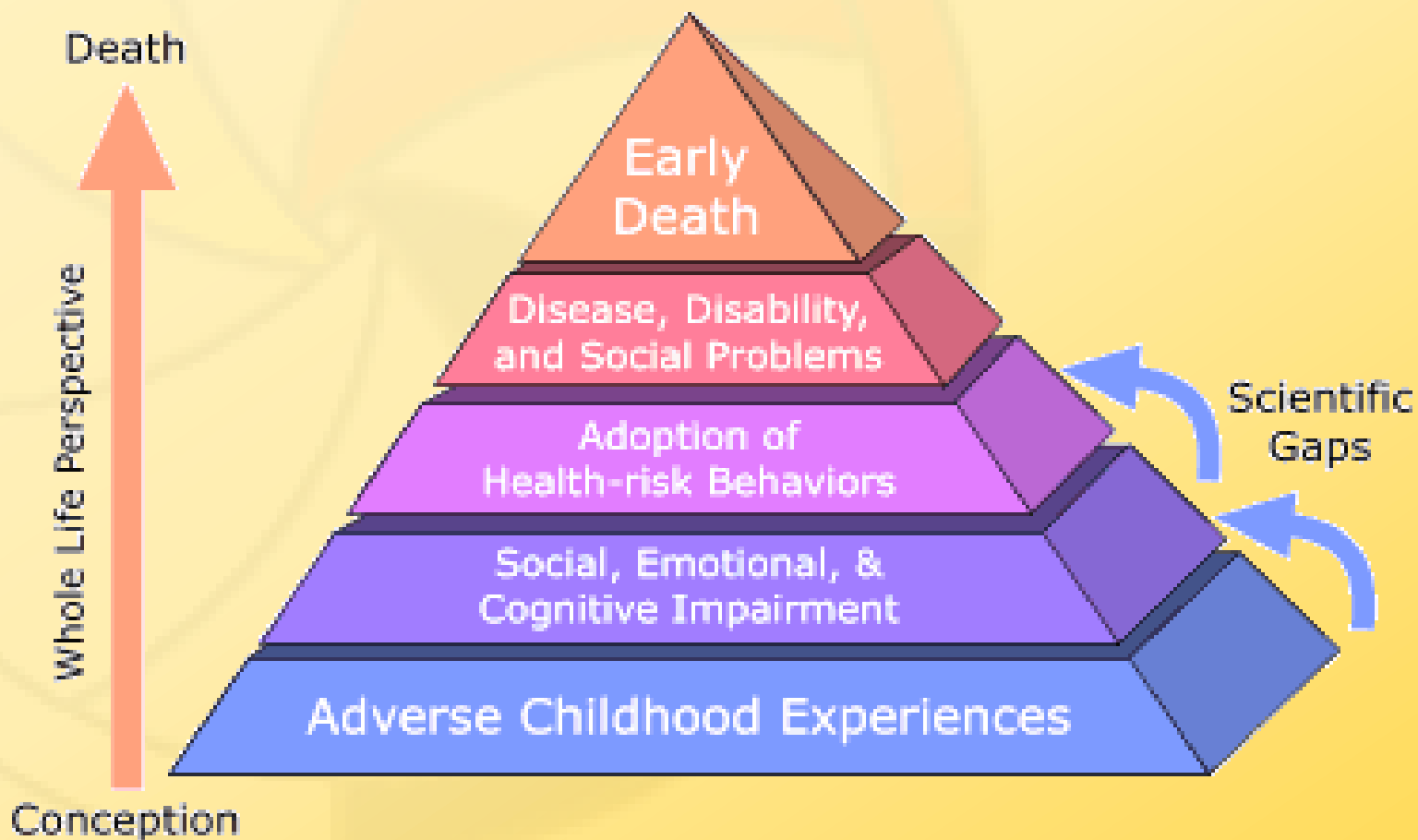
1. Did a parent or other adult in the household **often** Swear at you, insult you, put you down, or humiliate you? **Or** Act in a way that made you afraid that you might be physically hurt?
2. Did a parent or other adult in the household **often** ...Push, grab, slap, or throw something at you? **Or** Ever hit you so hard that you had marks or were injured?
3. Did an adult or person at least 5 years older than you **ever**...Touch or fondle you or have you touch their body in a sexual way?**or** Try to or actually have oral, anal, or vaginal sex with you?
4. Did you **often** feel that ...No one in your family loved you or thought you were important or special? **or** Your family didn't look out for each other, feel close to each other, or support each other?

Sample ACE Questions cont.'

In the first 18 years of your life...

5. Did you **often** feel that ...No one in your family loved you or thought you were important or special? **Or** Your family didn't look out for each other, feel close to each other, or support each other?
6. Did you **often** feel that ...You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? **Or** Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

Adverse Childhood Experiences Impact



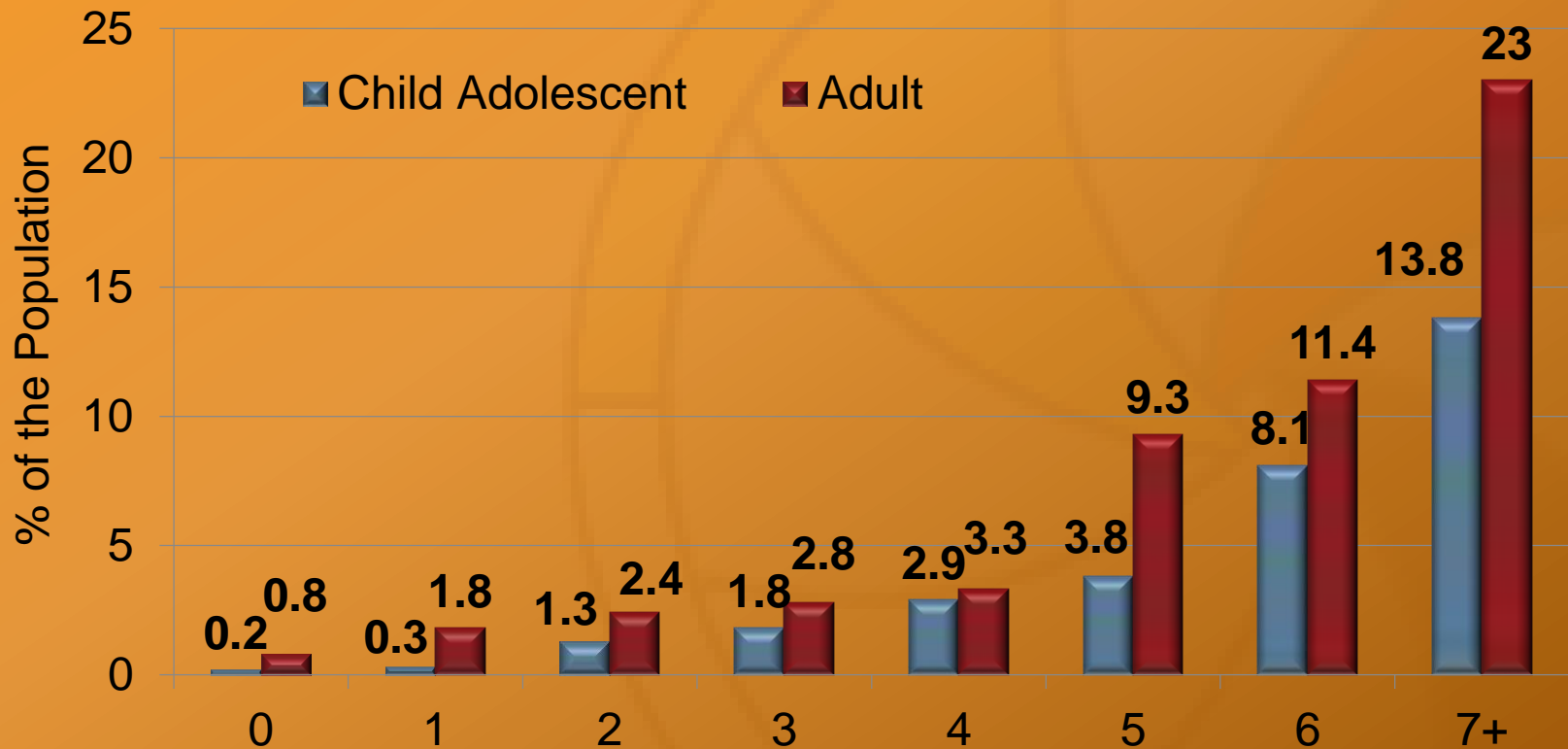
Impact of Childhood Adversity

- “Childhood adversity is also associated with AI/AN suicidal behavior and ideation.” p. 892
- “AI/AN youths have more severe problems with anxiety, victimization, substance abuse, and depression, which may contribute to suicidality.” p. 892
- “Research has also linked perceived discrimination and acculturation stress with AI/AN suicide ideation” ., p. 892

Wexler, L., Chandler, M., Gone, J. P., Cwik, M., Kirmayer, L. J., LaFromboise, T., & Allen, J. (2015).

ACE and Suicide Attempts

Percentage of population who reported suicide attempts by ACE score, BRFSS 2009



Implications of ACE as Factor in Suicide Prevention

- Early Intervention, treatment and healing of effects from traumatic experiences and exposure
- Trauma Informed Circle/System of Care
- School-based trauma screening
- Wellness Screening (how can protective factors be increased/strengthened)

Support for Native Communities

Garrett Lee Smith Memorial Act

- October 21, 2004
- Funded by SAMHSA

Meth and Suicide Prevention Initiative (MSPI)

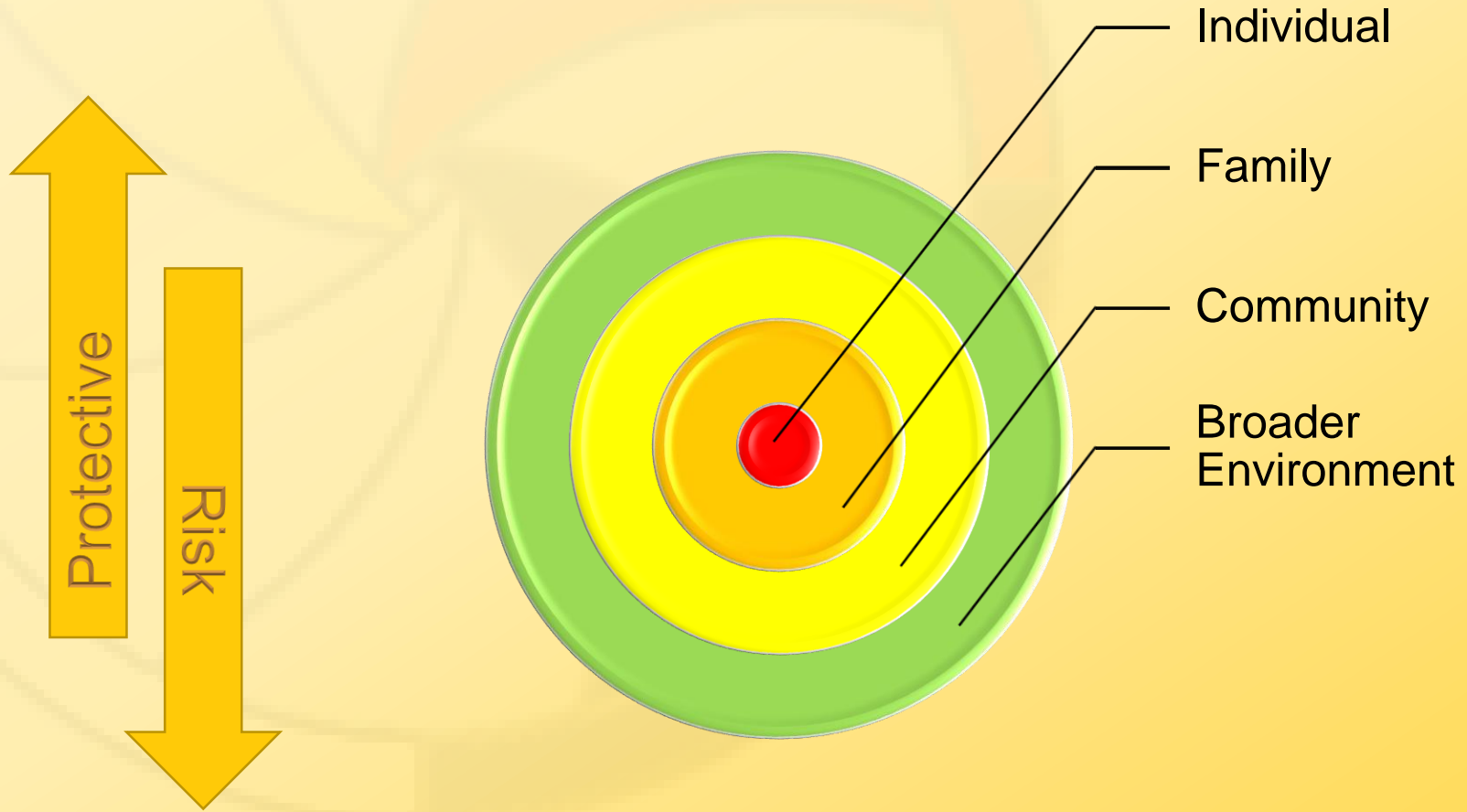
- Funded by IHS
- Listening sessions
- Two national suicide prevention summits
- # of MSPI programs

Coordinated Services

Natural Supports

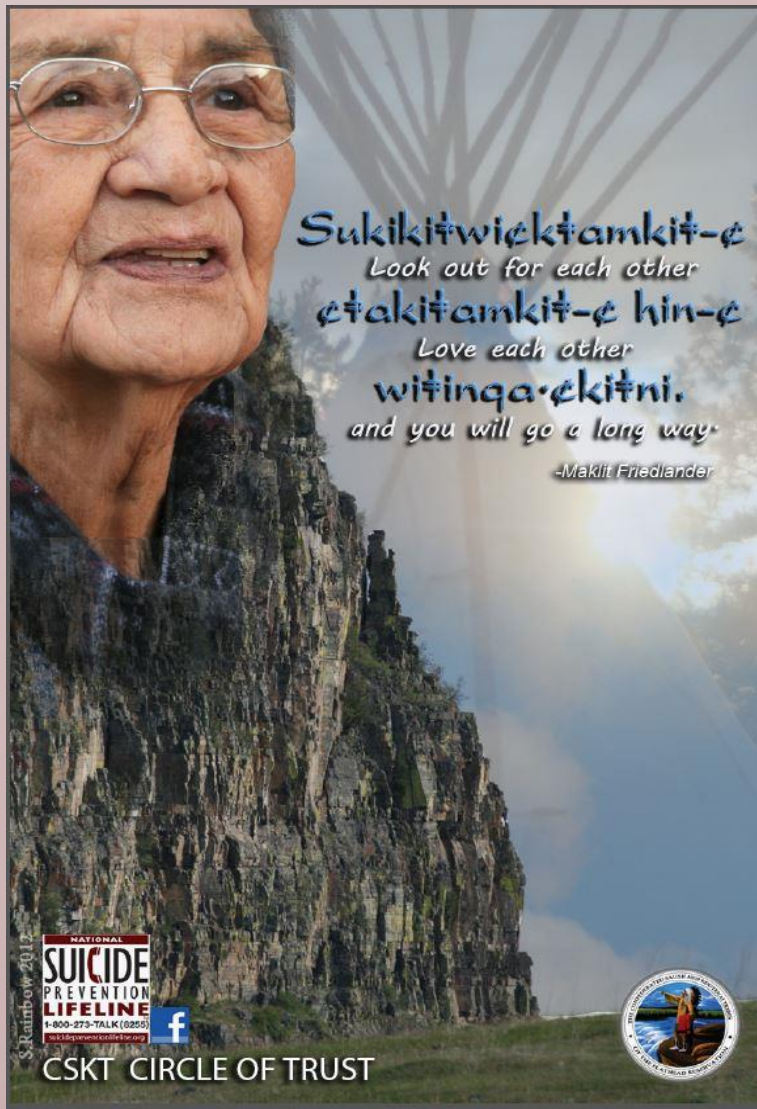
What are some naturally occurring supports in your community for suicide prevention?

Community, Connectivity & Relationships



A Framework for Taking Action to Prevent Suicide

- Finding and Using Data and information
- Identifying & Responding People at Risk for Suicide
- Postvention & Working with Survivors of Suicide Loss
- Upstream Prevention
- Safe messaging about Suicide



Words of Hope Campaign

Confederated Salish & Kootenai
Tribes

Flathead Indian Reservation

Safe, Effective & Empowering
Messages

Changes the way we talk about
suicide prevention

“Some tribal departments are not able to keep the posters on their wall because people keep taking them” (CSKT Staff,2014)



We look up to you....

-Jerrell Joseph Piapot

Witwitwi·na'ti

NATIONAL SUICIDE PREVENTION LIFELINE
1-800-273-TALK (8255)
Find us on Facebook

CSKT CIRCLE OF TRUST
1-800-273-TALK

S.Rainbow 2012

Culture is Prevention!

Many culture-based practices

Sweat lodge

Talking circle

Feasts

Regalia making

Cultural games & sports (lacrosse, snow snake, feasts, etc.)¹⁶



What are some culture-based practices in your community for suicide prevention?

Strategies used by Tribes to Tend to Youth



- ❖ Peer to Peer Mentoring
- ❖ Using paraprofessionals
- ❖ Digital Storytelling
- ❖ Culturally Strengthening
- ❖ Life Promoting strategies
- ❖ Laughter
- ❖ Historical Trauma Trainings
- ❖ Promoting Life Line Crisis Hotline

Increasing Protective Factors

Programs that Build Protective Factors

- Life skills development
 - American Indian Life Skills Development
- Awareness / Gatekeeper training
 - Applied Suicide Intervention Skills Training (ASIST)
 - Native H.O.P.E. (Helping Our People Endure)
 - QPR Gatekeeper Training
 - Sources of Strength
 - Yellow Ribbon Suicide Prevention Program
- Gathering of Native Americans (GONA) - Focused on increasing the strengths of Native youth and Community
- Project Venture - Aims to develop social & emotional competence that facilitates youths' resistance to AOD.

See the Best Practices Registry and related resources for additional programs that can be adapted for AI/AN communities**

Examples of Prevention Strategies in Indian and Alaska Native Country

- Doorway to Sacred Places – curriculum created with Alaska Native Elders





Cultural Healing Camps to address trauma and to strengthen cultural identity, e.g. naming ceremonies, purification to address spiritual residue left from trauma

Copyright Richard and Ethleen Two Dogs 2009

Girls Culture Camps

Building and strengthening relationships with the non-human relatives, horses, buffalo, fire, stones, water, mountains





Youth making offerings at Sacred Mountain

Children's Healing Camps



Suicide is Preventable



Talking about Suicide

Emphasize Hope!

Must talk about it to educate ourselves

- Talking about it *will not* bring it about!

We must Ask the Question!

- Take cues seriously
- Asking someone if they are thinking of ending their life *will not* put the idea in there head.

Framing the conversation is essential

Connect with available help!

Suicide Prevention Resource Center - SPRC

Four Functions

1. Resource Center
2. Training Institute
3. Technical Assistance (TA) Center
4. Leader and influencer of science, policy, and practice

The screenshot displays the SPRC website homepage. At the top, there is a navigation bar with links for 'About SPRC', 'Contact Us', and 'FAQ', along with a search box and a 'Login' button. The main header features the SPRC logo and the text 'SPRC • Suicide Prevention Resource Center' with the tagline 'Promoting a public health approach to suicide prevention'. Below this is a secondary navigation menu with categories: 'Suicide Prevention Basics', 'News & Events', 'Training Institute', 'Best Practices Registry', 'Library & Resources', and 'Who We Serve'. The main content area includes a featured article titled 'SPRC Director Jerry Reed on Crisis Lines' with a photo of Director Reed and a 'Find out more' button. Below the article is a carousel of featured content with categories: 'Crisis Lines', 'ICRC-S Webinar', 'Montana', and 'SXSW Webinar'. The page is organized into several columns of resource cards: 'Professionals Providing Social Services', 'Health Care & Behavioral Health Providers', 'SAMHSA Youth Suicide Prevention Grantees', 'States & Communities', 'American Indian/Alaska Native', and 'Colleges & Universities'. On the right side, there is a 'Director's Corner' section with a photo of Jerry Reed and a 'The Weekly Spark' section with a 'Subscribe' button. At the bottom right, there are social media links for Twitter and Facebook, and a 'Tweets' section showing a tweet from @SPRChweets.

Find out who is doing what?

About SPRC | Contact Us | FAQ [My Account](#) | [Logout](#)

SPRC • Suicide Prevention Resource Center
Promoting a public health approach to suicide prevention

SUICIDE PREVENTION LIFELINE 1-800-273-TALK (8255)
suicidepreventionlifeline.org

[Suicide Prevention Basics](#) | [News & Events](#) | [Training Institute](#) | [Best Practices Registry](#) | [Library & Resources](#) | [Who We Serve](#)

Who We Serve

[f](#) [t](#) [in](#) [e](#) [+](#) Share

- For Professionals
- For Providers
- Grantees
 - List of Grantees
 - Grantee Webinars
 - Grantee Annual Meetings
 - Core Competencies
 - Strategic Communication Planning
 - From the Field
 - Private pages
- States & Communities
- American Indian/Alaska Native
- Colleges and Universities
- Prevention Support Team
 - Administer SPRC Users
 - Primary Contacts List
 - State Contacts List
 - Grantee and Public Users

Home » Grantees

Garrett Lee Smith Suicide Prevention Grantees are funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) for three year grants to support suicide prevention work in Campus, State, and Tribal communities. The map below shows all current GLS Grantees - [click on a grantee below to find out more about specific program activities and contact information.](#)

Click on the four arrows on the far right to view the map in fullscreen.

Need Program Assistance?
Contact us for assistance with your suicide prevention efforts.

Grantees

Private Section

- Campus Grantees
- Tribal Grantees
- State Grantees

United States

SUICIDE PREVENTION RESOURCES

Tribal Youth Training and Technical Assistance Center

Community Resources for Suicide Prevention – Resources Handout

- Suicide Prevention Resource Center – www.sprc.org
- National Lifeline Number 1-800-273-TALK (8255) - <http://www.suicidpreventionlifeline.org>
- Doorway to Sacred Places <https://captus.samhsa.gov/grantees/capt-clients/s/ts/dsp>
- Understanding Risk and Protective Factors for suicide: A primer for preventing suicide – http://www.sprc.org/library_resources/items/understanding-risk-and-protective-factors-suicide-primer-preventing-suicide
- Facebook reporting information – <http://www.sprc.org/news-events/pressroom/facebook-provides-first-kind-service-help-prevent-suicides>
- Safe & effective messaging <http://www.sprc.org/library/SafeMessagingfinal.pdf>
- American Indian Alaska Native Fact Sheet – http://www.sprc.org/sites/sprc.org/files/library/AI_AN%20Sheet%20Aug%2028%202013%20Final.pdf
- Action Alliance – <http://actionallianceforsuicideprevention.org/about-us>
- Preventing Suicide: A Toolkit for High Schools <http://www.sprc.org/content/high-school-toolkit>
- The first annual American Indian Alaska Native Hope for Life Suicide Prevention Awareness Day is on September 10th <http://actionallianceforsuicideprevention.org/task-force/aian2/hope-for-life>
- THRIVE - Free Suicide Prevention Materials created by the THRIVE media campaign designed to help Native Community members across the US to ignite hope. <http://www.npaih.org/epicenter/project/thrive>
- We are Connected. We need you here – http://www.npaih.org/epicenter/project/mspi_prevention_media_resources



Hope for Life Day Toolkit

Sean Bennett
Public Health Advisor
Indian Health Service (HQ)

<http://actionallianceforsuicideprevention.org/task-force/aian2/hope-for-life>

Traditional Closing



References

1. Communication with Lea Perkins, Red Lake Nation Suicide Prevention Program, August 26, 2015
2. <http://www.cestudy.org/>
3. Wexler, L., Chandler, M., Gone, J. P., Cwik, M., Kirmayer, L. J., LaFromboise, T., & Allen, J. (2015). FRAMING HEALTH MATTERS. Advancing Suicide Prevention Research With Rural American Indian and Alaska Native Populations. American Journal Of Public Health, 105(5), 891-899. doi:10.2105/AJPH.2014.302517
4. Working with Native American Communities on Prevention, Slide Show, April 2015, SAMHSA's Center for the Application of Prevention Technologies

Working with Native American Communities on Prevention