“Soak up the views. Take in the bad weather and the good weather. You are not the storm.”

-Matt Haig
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Housed within the Maine Center for Disease Control and Prevention (Maine CDC), the Maine Suicide Prevention Program (MSPP) is a collaborative initiative among state and local partners committed to preventing suicide in Maine.

**The goals of the MSPP include:**

- Provide statewide leadership and coordination for suicide prevention.
- Improve integration of effective suicide prevention efforts within public and private organizations statewide.
- Increase access to suicide prevention and intervention services in health care and behavioral health settings.
- Educate professionals working with Maine people about suicide prevention, intervention, and postvention.

The **Maine Suicide Prevention Plan 2020-2025** was collaboratively developed by the MSPP and the state and local partners that comprise the MSPP Advisory Council. The plan is a “blueprint” for organizations that want to provide evidence-informed suicide prevention in local communities. The MSPP and members of the Advisory Council are committed to implementing the strategies detailed in the plan over the next five years.
Maine Suicide Prevention Program

Strategic Plan 2020-2025

Strategic Plan Goals:

1. Implement primary prevention strategies to promote resiliency, positive coping skills, and community connectedness.

2. Develop a professional workforce skilled in use of evidence-based suicide prevention practices.

3. Promote suicide risk assessment, intervention, and treatment as core components of health care services.

4. Increase access to early intervention, mental/behavioral health treatment, and crisis services.

5. Promote public awareness to reduce suicide risk, fight stigma, and promote recovery.
Goal 1: Implement primary prevention strategies to promote resiliency, positive coping skills, and community connectedness.

Target Populations:
- School-aged children
- Adolescents and young adults
- School personnel
- Youth-serving professionals
- Families
- Significant adults (coaches, troop leaders, etc.)
- Older adults
- Adults experiencing transitions or stressful life events (job loss, disability, relationship changes, etc)
- Law enforcement, first responders, military
- Populations experiencing disparities in suicide risk

Key Strategies:
1.1 Promote the use of evidence-based social and emotional learning programs for school aged children.
1.2 Increase leadership skills and community connectedness among young people through youth engagement and positive youth development opportunities.
1.3 Support prevention interventions for youth to address risk factors that impact mental health (such as substance use, bullying and harassment, and violence).
1.4 Educate parents and caregivers about the importance of family support and connectedness for the wellbeing of children.
1.5 Train professionals on the impact of adverse childhood experiences, the importance of building resiliency skills, and providing trauma-informed care (increasing awareness about mental health).
1.6 Support local coalitions and grassroots organizing focused on building engaged communities and developing assets for youth and adults (track and share best practices).

Outcome Measures:
- Increase the number of Maine schools implementing evidence-based social and emotional learning programs.
- Increase the number of youth participating in leadership development or youth engagement activities.
- Decrease the percentage of youth who report current tobacco, alcohol, or other substance use.
- Decrease the percentage of youth who report being bullied at school in the past year.
- Increase the percentage of youth who report they have a family that loves and supports them.
- Increase the percentage of youth who report they feel they matter to their community.
**Goal 2:** Develop a professional workforce skilled in use of evidence-based suicide prevention practices.

**Target Populations:**
- Behavioral health clinicians
- Behavioral health direct care staff (such as case managers)
- Substance use disorder treatment providers
- Educators
- School counselors
- First responders
- Veterans services providers
- School staff including school nurses, health educators, school counselors, administrators
- Youth-serving professionals
- Providers serving adults at high risk
- College and university personnel
- Providers serving older adults

**Key Strategies:**

2.1 Provide training and skill building for educators, school personnel and providers in strategies to identify, support, and refer individuals at risk of suicide.

2.2 Integrate training in suicide prevention, risk identification, and intervention as part of pre-professional education for the behavioral health workforce.

2.3 Support behavioral health clinicians in the use of evidence-based practices for assessing suicide risk.

2.4 Promote the use of evidence-based treatments for suicidality.

2.5 Increase the number of providers using strategies to increase safety for individuals at risk of suicide, including safety planning and counseling on reducing access to lethal means.

2.6 Expand the reach of suicide prevention and best-practices training to include additional professions serving youth and adults (such as vocational rehab, physical therapists, occupational therapists, career centers, corrections, and juvenile justice).

**Outcome Measures:**
- Increase the number of school staff receiving suicide awareness training.
- Increase the number of school staff receiving gatekeeper training.
- Increase the number of behavioral health providers trained in suicide safer care practices.
- Increase the number of behavioral health consumers who receive screening, intervention, and support for suicide risk.
**Goal 3:** Promote suicide risk assessment, intervention, and treatment as core components of health care services.

**Target Populations:**
- Health care providers
- Health care paraprofessionals (EMTs/paramedics, Certified Nursing Assistants, home health, physical and occupational rehabilitation specialists)
- Health care administrators
- Pre-professional training programs

**Key Strategies:**

3.1 Include education on suicide prevention as a core competency for health professional training programs.

3.2 Increase the number of health care providers that routinely screen all patients for unmet mental health needs and suicide risk using evidence-based tools.

3.3 Promote co-location of medical and behavioral health services in primary care settings and school based health centers.

3.4 Increase the number of health care organizations implementing the Zero Suicide Model.

**Outcome Measures:**
- Increase the number of health care providers receiving training in suicide-safer care practices.
- Increase the number of organizations implementing Zero Suicide Model.
- Increase the number of individuals at risk of suicide presenting in primary care who receive a supported behavioral health referral.
Goal 4: Increase access to early intervention, mental/behavioral health treatment, and crisis services.

Target Population:
- School-aged children and their families
- Adolescents
- Adults at increased risk of suicide
- Medical and behavioral health providers
- Employers
- Out of school youth
- Crisis services providers

Key Strategies:
4.1 Promote universal and targeted mental health screening for school-aged children, targeted supports, and referral to care.
4.2 Implement evidence-based and innovative practices to increase peer-to-peer support and help seeking among youth and adults.
4.3 Support implementation of best-practice policies and protocols for suicide prevention, intervention, and postvention in educational settings, youth-serving organizations, and programs serving adults at increased risk of suicide.
4.4 Support the provision of high-quality crisis services throughout Maine, including the Maine Crisis Line and mobile crisis services.
4.5 Increase awareness of the increased risk of suicide during care transitions and ensure individuals at increased risk receive effective referrals to treatment, care coordination, and follow-up.

Outcome Measures:
- Increase the number of schools implementing universal behavioral health screening and tiered behavioral supports.
- Increase the number of schools implementing best-practice peer support programs.
- Increase the number of schools and organizations receiving training and/or technical assistance on the development of suicide prevention policies and protocols.
- Increase the number of Maine residents who access the Maine Crisis Line through call, text, or chat.
Goal 5: Expand public awareness about suicide and mental health to increase help-seeking, reduce stigma, and promote recovery.

Target Population:
- General public
- Media
- Policy makers
- Caregivers

Key Strategies:

5.1 Develop and promote public outreach campaigns focused on promoting help-seeking for individuals with mental health needs.

5.2 Promote reporting practices regarding suicide, and support media messaging that focuses on hope and recovery.

5.3 Increase public awareness about the availability of the Maine Crisis Line and crisis text services.

5.4 Ensure that high-quality data on suicide in Maine is available to decision-makers and the general public.

5.5 Engage organizations not traditionally connected to suicide prevention (hunting and fishing clubs, chambers of commerce, major employers, parks and rec, YMCA) in outreach efforts to raise awareness of suicide warning signs and intervention strategies.

5.6 Develop and promote resources for youth and adults on navigating digital spaces and responding appropriately to concerning social media content.

Outcome Measures:

- Increase the number of individuals who see messages about help-seeking as a sign of strength, resources for support, stories of hope and recovery.
- Increase the number of media outlets that report on suicide in a manner that focuses on hope and recovery.
- Increase the number of individuals who know about and know how to access the Maine Crisis Line and crisis text services.
- Increase the number of individuals who are exposed to high-quality data on suicide in Maine.
- Increase the number of organizations (that are not traditionally connected to suicide prevention) that are trained in suicide prevention, including warning signs and intervention strategies.
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