2024 State and Territorial Suicide Prevention Needs Assessment National Priority Areas and Calls to Action

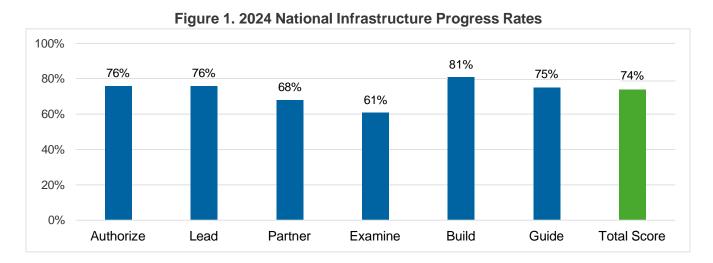
Background

The Suicide Prevention Resource Center (SPRC), with its partner Social Science Research and Evaluation (SSRE), conducted the fourth annual State and Territorial Suicide Prevention Needs Assessment (SNA) in the spring of 2024 to assess the suicide prevention needs, challenges, strengths, infrastructure supports, and capacity of states, U.S. territories, and the District of Columbia. The 2024 SNA had a 98% participation rate with 53 of 54 states¹ submitting a response.

Respondents answered a series of quantitative and qualitative questions related to their state's progress in achieving the six essential elements outlined in SPRC's <u>Recommendations for State</u> <u>Suicide Prevention Infrastructure</u> (Infrastructure Recommendations). SPRC has identified three priority areas with associated calls to action for strengthening suicide prevention efforts in the U.S. National priority areas are based on aggregate data, so they may or may not be aligned with each state's unique priorities. Each priority area includes specific calls to action to guide future work in these areas.

National Progress in Developing Effective Suicide Prevention Structure

The results of the 2024 SNA demonstrated continued national growth toward achieving each of the six essential elements as well as continued growth in the overall national progress rate. The total national suicide prevention infrastructure progress rate for 2024 was 74% and the scores for each of the six essential elements were: Authorize 76%, Lead 76%, Partner 68%, Examine 61%, Build 81%, and Guide 75%. Variations in the essential element scores indicate areas of strength and areas where additional focus is needed.



¹ The term "state" is used in this document as a short-hand reference to states, the District of Columbia, and U.S. territories.

Of note, the Examine essential element progress score has had the lowest score on the SNA each year, highlighting the need to support states' efforts to access, compile, analyze, and use existing public and private sector data to evaluate suicide prevention efforts.

2024 SNA National Priority Areas

The criteria SPRC used to select the 2024 national priority areas included factors such as urgency, feasibility, impact on overall suicide prevention infrastructure, and alignment with the 2024 <u>National Strategy for Suicide Prevention</u>. To identify the national priority areas, SPRC performed a systematic analysis of the data in SPRC's <u>2024 SNA Aggregate Technical Report</u>. We focused on identifying ways states can allocate resources to address specific challenges to developing comprehensive suicide prevention infrastructure. We also looked for strategies to help states capitalize on existing opportunities to facilitate continued progress.

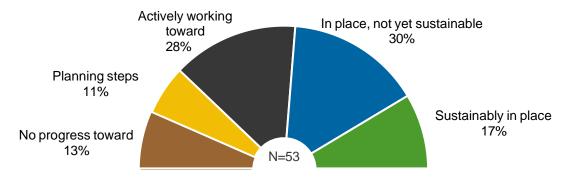
- National Priority Area 1: Formalize and strengthen partnerships between public and private sector entities within states and territories to ensure suicide prevention goals and efforts are aligned.
- National Priority Area 2: <u>Increase state and territorial capacity to gather quality suicide-related</u> data and evaluate suicide prevention efforts.
- National Priority Area 3: <u>Build and strengthen state and territorial capacity to assess and support local-level suicide prevention efforts.</u>

National Priority Area 1: Formalize and strengthen partnerships between public and private sector entities within states and territories to ensure suicide prevention goals and efforts are aligned.

Background Data: Improving relationships between suicide prevention partners within the state can support partners' ability to integrate suicide prevention into their structures, policies, and activities. Focusing on these relationships can help define each partner's role, avoid duplication of efforts, and increase communication and collaboration on initiatives focused on populations disproportionately impacted by suicide.

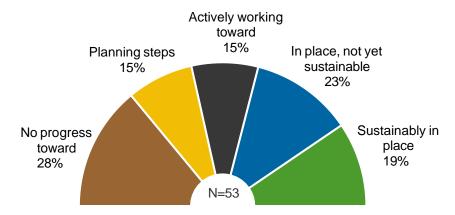
Strong partnerships across agencies, organizations, and community sectors are key to effectively reducing suicide; however, 83% of states reported that they have not yet sustainably integrated suicide prevention efforts into partners' structures, policies, and activities.

Figure 2. Integration of Suicide Prevention Efforts by Partnering State Agencies or Departments



Additionally, 81% of states indicated that they did not have signed partnering agreements sustainably in place to define each party's role in suicide prevention.

Figure 3. Establishing Signed Partnering Agreements Defining Roles in Suicide Prevention



Of the 36 states that reported there are state or federally recognized Tribes or Tribal health boards within their geographic borders, eight (22%) reported having no awareness or interaction with these Tribes or Tribal health boards related to suicide prevention. No states reported collaboration characterized by sharing goals and decision-making.

National Priority Area 1 Calls to Action	
State and Territorial Suicide Prevention Workforce	Suicide Prevention Champions
Institute formal memorandums of agreement or understanding between suicide prevention partners to clearly establish common suicide prevention goals, partners, roles, and collaborative prevention efforts.	Support and engage in the creation and regular updating of state or territorial suicide prevention plans to ensure advancement of goals shared by suicide prevention partners.

Suicide Prevention Resource Center

Tools and Resources: These SPRC tools and resources can support states and organizations in forming more effective partnerships:

- <u>Creating a Partnership Memorandum of Understanding</u>
 This worksheet lists criteria to consider when creating a memorandum of understanding with partners.
- <u>Partnerships and Collaborations</u>
 This page contains resources to support the development of successful partnerships.
- <u>Statewide Partnerships Virtual Learning Lab</u>
 This online, self-paced learning module explores state and community collaboration and establishing and managing partnerships.

Success Story – Adopting a Shared Vision in Connecticut: The Connecticut Suicide Advisory Board (CTSAB) and its statewide coalition of more than 900 members and 300 organizations are responsible for developing and implementing the state's suicide prevention plan. The current PLAN 2025 reflects the professional and personal experiences of a broad range of public and private groups and individuals with an interest and investment in suicide prevention efforts. Their insights were collected through a survey (n=243) of the suicide prevention community, 18 focus group sessions, and more than 100 key informant interviews. This process helped build a unified plan for actualizing the CTSAB's mission and vision.

National Priority Area 2: Increase state and territorial capacity to gather quality suicide-related data and evaluate suicide prevention efforts.

Background Data: State-supported data collection is essential to measuring the effectiveness of state suicide prevention efforts and supporting continuous improvement. No single source can provide all the data needed to understand the epidemiological landscape of suicide in a state. As such, states need to collect and/or access data from multiple entities at the local, state, and federal level to build effective suicide prevention infrastructure. Only 19% of states have sustainably linked suicide prevention data from different systems and 21% report no progress toward this goal.

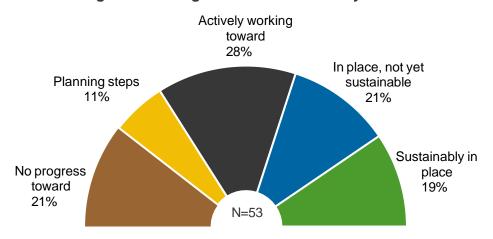
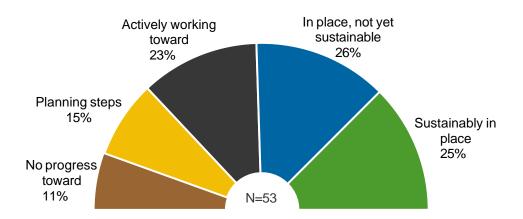


Figure 4. Linking Data From Different Systems

SPRC 2024

Near real-time data related to suicidal ideation and attempts is essential to creating a comprehensive surveillance picture. These data can support the identification of emergent trends, potential suicide clusters, and changes in reported suicides and suicidal behavior. Only 25% of states report having a sustainable system in place for collecting and analyzing near real-time data related to suicide. Additionally, 11% report no progress toward establishing this type of system.

Figure 5. Establishing a System for Collecting and Analyzing Near Real-Time Statewide Data for Suicide Ideation and Attempts



Data equity is set of principles and practices for using data to promote health, well-being, and equity by recognizing the influence of power, bias, and discrimination in data collection, analysis, and interpretation.² Incorporating equity in all data efforts helps states ensure they have relevant, accurate, and actionable suicide-related data. However, three-quarters of states (75%) report they have not made sustainable progress toward ensuring that high-risk and underserved populations are adequately represented in their data.

Impact evaluations, which assess changes in outcomes attributed to a specific intervention, are important to determining the effectiveness of state suicide prevention efforts. While most states reported implementing state-supported process evaluations (74%) and outcome evaluations (64%) in the past year, far fewer (26%) reported implementing impact evaluations.

National Priority Area 2 Calls to Action		
State and Territorial Suicide Prevention Workforce	Suicide Prevention Champions	
Allocate sustainable funding for analyzing and evaluating suicide prevention policies, practices, and programs.	Develop and formalize sustainable partnerships with injury and violence prevention epidemiologists and/or data analysts.	

² Andrews, K., Parekh, J., & Peckoo, S. (2019). How to embed a racial and ethnic equity perspective in research: Practical guidance for the research process [Working Paper]. Child Trends. https://cms.childtrends.org/wp-content/uploads/2019/09/RacialEthnicEquityPerspective ChildTrends October2019.pdf

Suicide Prevention Resource Center

Tools and Resources: SPRC's data infrastructure development tools and resources can help states develop data infrastructure initiatives and processes:

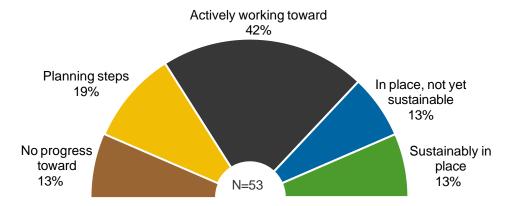
- Beyond Numbers: Navigating Data for Suicide Prevention
 This online, self-paced course supports states and territories in building suicide prevention data capacity and promoting equity in all data-related efforts.
- <u>Creating a Stronger Data Infrastructure for Suicide Prevention</u>
 This pre-recorded webinar is based on the six essential elements of state suicide prevention infrastructure. It focuses on creating infrastructure to support data-driven decisions in suicide prevention.
- <u>Data Infrastructure: Recommendations for State Suicide Prevention</u>
 This supplement to SPRC's Infrastructure Recommendations supports state and local leaders in understanding the resources and systems needed to effectively identify, share, analyze, and use data in prevention efforts.
- Locating and Understanding Data for Suicide Prevention
 This online, self-paced course presents a variety of data sources related to suicide prevention
 and explains key concepts to help learners better understand the data.

Success Story – Advancing Data Capacity in Ohio: DataOhio Portal (Mortality | DataOhio) provides free access to past and present mortality data and other health-related data. Community partners can use this portal to compare their community's death record data to that of neighboring counties and/or the state, see trends in suicide deaths, and inform their suicide prevention efforts. The Suicide Prevention Plan for Ohio calls for using multiple data sources in planning suicide prevention efforts, including insurance claims data, data from syndromic surveillance systems, and information from local suicide fatality reviews and psychological autopsies. The state continuously evaluates suicide prevention efforts to identify challenges and areas of success in implementing the plan.

National Priority Area 3: Build and strengthen state and territorial capacity to support and assess local-level suicide prevention efforts.

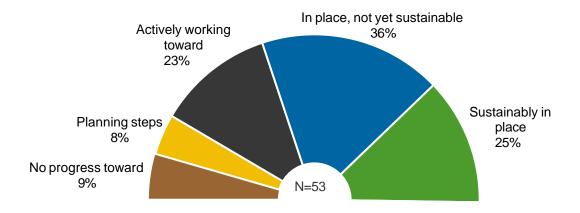
Background Data: Community-led suicide prevention efforts, including community-based programs, policies, and initiatives, are a vital component of comprehensive suicide prevention. Assessing local-level suicide prevention efforts helps communities and states understand the strengths, challenges, and gaps in local efforts. While many states (42%) report actively working to formally assess local-level suicide prevention needs, only 13% have this practice sustainably in place.

Figure 6. Formally Assessing Regional and/or Community Suicide Prevention Needs



While many states indicated that they have the funds necessary to guide state, county, and local groups in implementing evidence-informed suicide prevention programming, 75% do not have a sustainable funding stream to support this work.

Figure 7. Allocating Funding and Resources Necessary to Guide State, County, and Local Groups in Implementing Evidence-Informed Suicide Prevention Programming



National Priority Area 3 Calls to Action	
State and Territorial Suicide Prevention Workforce	Suicide Prevention Champions
Support and collaborate with local-level suicide prevention coalitions to form data subcommittees that include data experts and researchers who can guide comprehensive evaluations of local suicide prevention efforts.	Support increased public education about the need to allocate funding and resources to support the continuous evaluation and improvement of community-led suicide prevention efforts.

Tools and Resources: These tools and resources from some of SPRC's partners can support community-based efforts to prevent suicide:

- Assessing Community Needs and Resources
 - This Community Toolbox toolkit provides guidance and resources related to conducting assessments of community needs and resources.
- Community-Led Suicide Prevention Toolkit Data Element
 - This website from Education Development Center provides guidance on developing the ability to use data effectively in community-led suicide prevention efforts.
- Evaluating the Initiative
 - This Community Toolbox toolkit provides guidance on evaluating a community program or initiative.
- Getting to Outcomes
 - This resource from RAND provides a 10-step program for implementing, evaluating, and continuously improving prevention programs.

Success Story – Developing Missouri's Community-based Suicide Prevention Efforts: In 2023, the Missouri Department of Mental Health worked closely with Partners in Prevention and Education Development Center to facilitate the first ever Suicide Prevention Coalition Academy in the United States. The academy was designed to provide guidance to community coalitions on implementing sustainable, evidence-based suicide prevention efforts using the newly developed Community-Led Suicide Prevention Toolkit. The academy included a two-day, in-person event followed by virtual community of practice sessions each month for a year. The academy objectives were to provide coalitions with the information and skills to successfully adopt or expand suicide prevention efforts, assist coalitions in developing and implementing strategic plans, and create collaborations among community coalitions and other agencies to provide mentorship and support.

Conclusion

Since its inception in 2021, SPRC's annual SNA has provided states, federal partners, and other organizations with essential data about the nation's progress toward developing state suicide prevention infrastructure. States and territories need this strong suicide prevention infrastructure to fully implement SPRC's Effective Suicide Prevention Model. SNA data and related resources support suicide prevention champions and the national, state, and community suicide prevention workforce in their efforts to secure sustainable resources, support, and funding to carry out the six essential elements of suicide prevention infrastructure.

The SNA offers one of the only existing comprehensive assessments of state progress toward developing robust suicide prevention infrastructure. SPRC applauds the efforts of those who work diligently every day to reduce suicide deaths and attempts by supporting comprehensive suicide prevention programs and efforts. For more information on SPRC's SNA, please visit sprc.org/sna.