

SOUTH DAKOTA SUICIDE PREVENTION

STATE PLAN 2025-2030

GUIDING PRINCIPLES: Make data-driven decisions; Build state and local partnerships; Prioritize community-led efforts; Utilize the South Dakota Prevention Framework; Be culturally relevant; Focus on the next generation; Highlight positive impacts and efforts; Evaluate outcomes to improve programming.



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		GOALS		
		PREVENTION <i>"Before Crisis"</i>	INTERVENTION <i>"During Crisis"</i>	POSTVENTION <i>"After Crisis"</i>
		Implement evidence-based interventions throughout multiple sectors to prevent suicides, suicide attempts, and other risky behavior.	Increase awareness and access to services to intervene in time of crisis.	Provide support for recovery services for survivors, their families, and the community to eliminate future suicides.
OBJECTIVES	STRATEGIES			
1. DATA: Share data to inform and evaluate efforts at the state and community level.	1. Continue to enhance public data sharing through dashboards, reports, infographics, and other methods. 2. Collect and share hospital data (IHS, VA, SDAHO) on suicide attempts to inform prevention efforts. 3. Improve data collection across data sources to ensure data quality and comprehensive data.	1. Continue monthly meetings of the Data to Action workgroup to inform response efforts and share more timely data.	1. Promote the inclusion of questions on suicidal behaviors, risk factors, and exposure to suicide in youth and adult data systems (YRBS, BRFSS, etc.).	
	+ Utilize data to develop and promote tools and resources to identify and improve community readiness.			
2. EDUCATION AND TRAINING: Provide culturally appropriate and evidence-based education and training to the public and various professions.	1. Share evidence-based and culturally relevant resources and trainings with primary, secondary, and postsecondary schools for students and educators. 2. Provide community helper trainings for partners during community and organizational gatherings, in-services, and conferences. 3. Provide education and training to organizations that support rural and tribal communities, farmers, and ranchers, Service Members, Veterans and their Families (SMVF), and other high-risk populations.	1. Provide training to behavioral health providers on suicide prevention modalities including screening and assessment. 2. Provide training to employers on referring individuals in crisis to resources. 3. Provide tools and trainings to support first responders responding to suicide events. 4. Collaborate with health providers, using the Zero Suicide framework, to identify priorities including successful care transitions. 5. Provide crisis resources including model policies, tools and trainings that may be utilized by primary, secondary and postsecondary schools, worksites, and other entities.	1. Provide guidelines and training on responsible media reporting. 2. Provide postvention resources including model policies, tools and trainings that may be utilized by primary, secondary and postsecondary schools, worksites, and other entities.	
	+ Provide harm reduction and means safety training and educational resources. + Provide focused training and resources to support systems, including parents and employers.			





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3. COMMUNICATIONS: Utilize multiple effective methods to raise awareness about how to prevent crisis and help individuals access services.	1. Regularly share information, resources, and upcoming events with partners through list serves, newsletters, etc. 2. Prioritize data sharing and data literacy with partners and the public.	1. Promote state, local, and tribal resources on the SD Suicide Prevention website. 2. Develop and disseminate culturally relevant resources. 3. Target media efforts in high-risk communities identified by the Data to Action workgroup. 4. Prioritize messaging around Means Safety.	1. Share and coordinate suicide loss survivor resources with funeral homes, faith-based organizations, South Dakota Survivor Outreach Services, and other entities. 2. Develop culturally relevant resources for survivors.
	+ Develop and implement population-specific campaigns to increase awareness. + Increase education and awareness by implementing effective strategies to reduce stigma. + Highlight and share positive impacts and efforts.		
4. COMMUNITY ENGAGEMENT: Support community leaders and engage community organizations to provide support to individuals before, during, and after a crisis.	1. Support local capacity for evidence-based prevention and community resiliency efforts. 2. Participate in community events to bring awareness of the issue and available resources. 3. Provide local resources to various community organizations that work with high-risk populations, including SMVF, farmers and ranchers, youth and young adults, older adults, and the American Indian population.	1. Conduct community outreach to high-risk communities identified by the Data to Action workgroup, sharing local resources and training opportunities. 2. Based on life-stressor data, partner with community programs (unemployment, housing, etc.) and employers to provide suicide prevention resources to clients who may be at higher risk for suicide. 3. Provide self-care training to professions that experience vicarious trauma, including service members, Veterans Service Officers, the National Guard, EMS, health professionals, educators, and law enforcement.	1. Provide assistance to survivor support groups within communities. 2. Establish and maintain a postvention workgroup of statewide organizations, including organizations that serve SMVF, tribal communities, and farmers and ranchers.



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