

Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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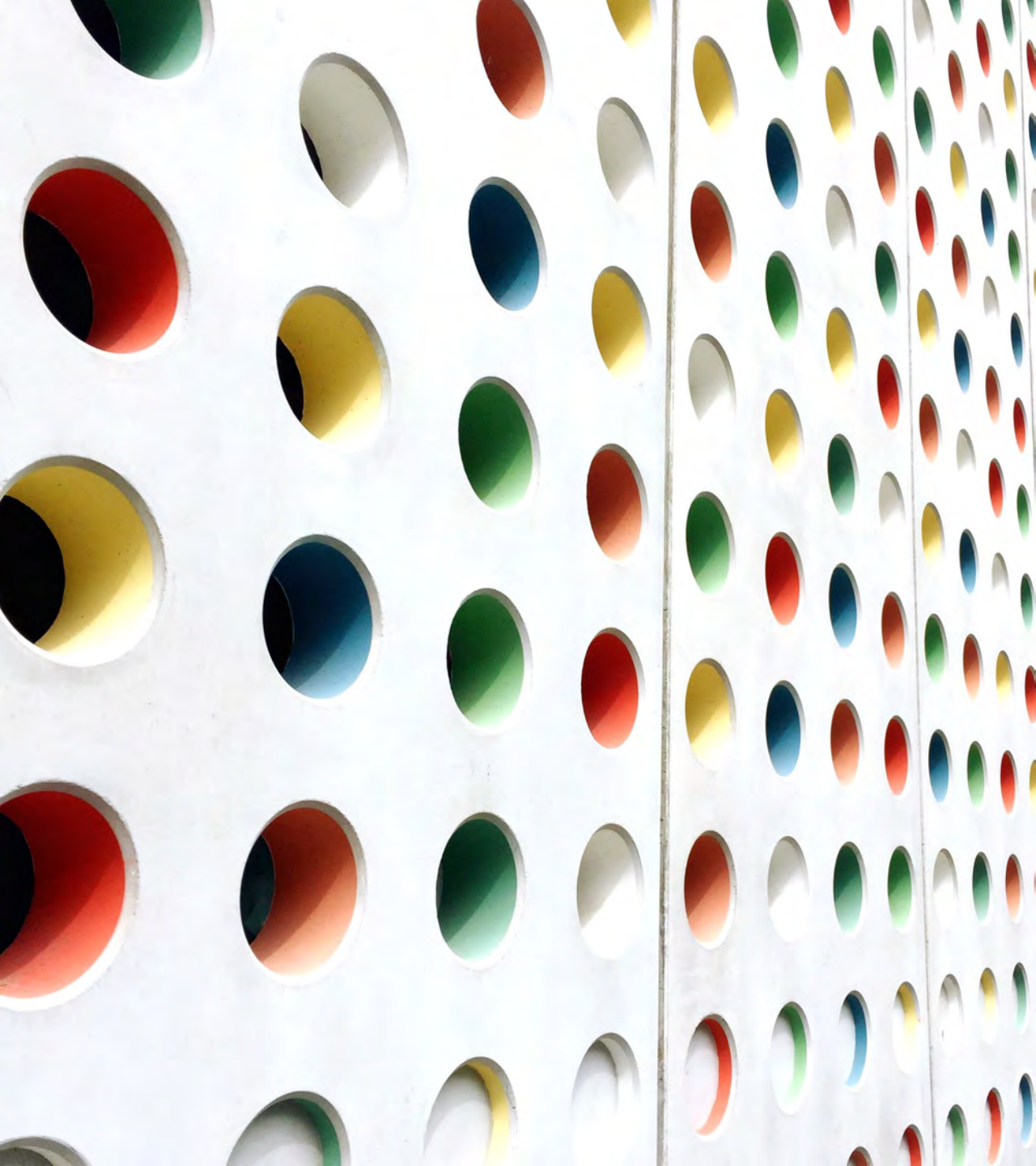
WPPNT Reminders

How to join the Zoom webinar

- **Online:** <https://dhs.wi.zoomgov.com/j/1606358142>
- **Phone:** 669-254-5252
- Enter the Webinar ID: 160 635 8142#.
 - Press # again to join. (There is no participant ID)

Reminders for participants

- Join online or by phone by 11 a.m. Central and wait for the host to start the webinar. Your camera and audio/microphone are disabled.
- [Download or view the presentation materials](#). The evaluation survey opens at 11:59 a.m. the day of the presentation.
- Ask questions to the presenter(s) in the Zoom Q&A window. Each presenter will decide when to address questions. People who join by phone cannot ask questions.
- Use Zoom chat to communicate with the WPPNT coordinator or to share information related to the presentation.
- [Participate live to earn continuing education hours](#) (CEHs). Complete the evaluation survey within two weeks of the live presentation and confirmation of your CEH will be returned by email.
- A link to the video recording of the presentation is posted within four business days of the presentation.
- Presentation materials, evaluations, and video recordings are on the WPPNT webpage: <https://www.dhs.wisconsin.gov/wppnt/2024.htm>



Suicide Among Youth

WPPNT Meeting August 8, 2024

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Suicide Prevention Specialist

Mental Health America of Wisconsin

Presentation Description

Suicide is a serious public health issue with many contributing factors across all four levels of the social-ecological model including individual, relationship, community, and societal. Therefore, we need to focus on the social determinants of health to prevent suicides and not just mental health issues. Suicide among youth is also a public health problem in Wisconsin. Suicide was the second leading cause of death for youth ages 10-19 in Wisconsin, and from 2020 to 2021, youth suicides increased by 22%. Firearms were the most common method of youth suicides in 2021 for the first time since 2016. LGBTQ+ youth are at an increased risk for suicide and are three times more likely to have considered suicide compared to their heterosexual peers. A few prevention strategies for preventing youth suicides in Wisconsin include implementing strategies that reduce the impact of adverse child experiences, supporting efforts to reduce access to lethal means, supporting innovative ways to expand access to behavioral health services including peer-led programs, and improving care transitions. One peer-led program for LGBTQ+ youth is the PRISM Program from MHA-WI providing support from certified peer specialists who identify as queer and/or trans and have lived experience with mental health issues. Alternatives to Suicide is a support group model created by the Wildflower Alliance, which focuses on speaking about, sitting with, understanding, and moving through thoughts of suicide. Finally, UW Green Bay provides a variety of suicide care trainings for all types of healthcare providers to support individuals who may be at risk of suicide.

Objectives

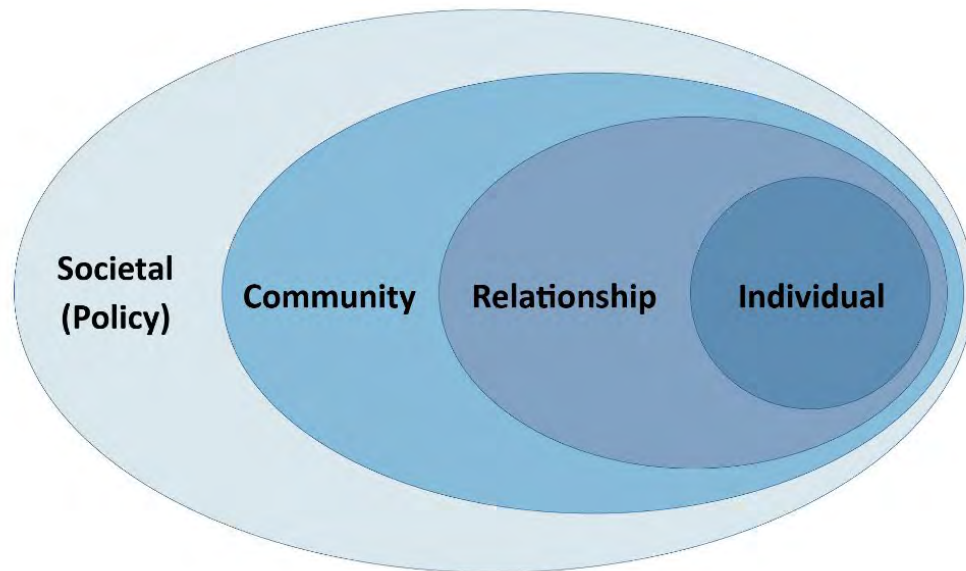
1. Understand the prevalence of suicide and self-harm among youth, including LGBTQ+ youth, ages 10-19, in Wisconsin.
2. Learn four prevention strategies from the Wisconsin Suicide Prevention Plan (2020) to prevent youth suicides in Wisconsin.
3. Learn how peer-led programs and support groups, like the PRISM Program at MHA-WI and Alternatives to Suicide, can prevent youth suicides by providing support for individuals from certified peer specialists with lived experience.

Outline

- Language Matters and Suicide is a Public Health Issue
- PSW and Wisconsin Suicide Prevention Plan (2020)
 - Data for Suicides Among Youth in Wisconsin
 - Suicides Among LGBTQ+ Youth
 - Risk Factors
 - Prevention Strategies
- PRISM Program at MHA-WI
- Alternatives to Suicide and VCVC Models
- UWGB Suicide Care Trainings

Best Practice Language for Suicide Prevention	Language to Avoid for Suicide Prevention
<p>Died by suicide Took his/her/their own life Killed him/her/them self Suicide death</p>	<p>Committed suicide Chose to kill him/her/them self Successful or completed suicide Suicided</p>
<p>Suicide attempt</p>	<p>Failed or unsuccessful suicide attempt</p>
<p>Disclosed suicidal thoughts</p>	<p>Threatened suicide</p>
<p>Describe behavior in neutral terms (What does the behavior look like?)</p>	<p>Manipulative or attention-seeking behavior Suicidal gesture</p>
<p>Lethal means safety</p>	<p>Lethal means restriction (disempowers people, implies coercion)</p>
<p>Has bipolar disorder (or other mental health condition)</p>	<p>Is bipolar</p>
<p>Working with or supporting a suicidal patient</p>	<p>Dealing with a suicidal patient</p>
<p>Use straightforward terms to describe trends, e.g., “increasing” or “rising”</p>	<p>Strong terms with shock value, such as “skyrocketing” or “epidemic”</p>
<p>Limit descriptions of suicide events and provide suicide prevention resources in communications (does not apply to official death investigations)</p>	<p>Quoting from a suicide note Detailed descriptions of the location or method of death, memorials or funerals, or the grief of family and friends</p>

Suicide is a Public Health Issue



- WHO estimates that 700,000 die by suicide globally each year
- Estimated 49,500 people died by suicide in the US in 2022
- Suicide is a complex issue with multiple contributing factors
- Suicide is not just an individual issue, but affects relationships, communities, and society at large
- Suicide is preventable



Prevent Suicide Wisconsin and the State Plan

- **Prevent Suicide Wisconsin (PSW)** is a statewide public-private partnership, led by MHA-WI, whose mission is to reduce the number of people that attempt and/or die by suicide in Wisconsin
- Administered by MHA-WI via DHS contract, the [PSW Steering Committee](#) serves as the advisory board for the [Wisconsin Suicide Prevention Plan](#)
 - [Website](#)
 - [Annual PSW Conference](#)
 - [E-newsletter sign up](#)

Suicides Among Youth Wisconsin Data

- Suicide was the **2nd leading cause of death** for 10-19-year-olds
- Adolescents who died by suicide were **more likely to disclose suicide intent to a friend or peer**
- **Females ages 15-17** had the highest rate of ED visits and hospitalization stays with self-harm injuries (2016-2017)
 - [DHS Self-Harm Data Dashboard](#)
 - [Self-harm Among ED Patients](#)
 - [Self-harm Among Female ED Patients](#)
- **2017-2021 Data:** 277 total youth who died by suicide
 - 2020-2021 youth suicide deaths increased by 22%
 - 2021 males made up 75% of all youth suicide deaths (WISH data)

Youth Data Trends


Youth ages 10-19 were more likely to disclose suicide intent to a friend than adults

- 36% vs 12%

Family and school problems were more likely to contribute to suicide for youth ages 10-19

- Family problem: 32% vs 12%
- School problems: 25% vs 1%

Firearms became the most common method of youth suicides in 2021 for the first time since 2016 (WISH data)



Mental Health Among LGBTQ Youth (2021 YRBS)

- **65%** of LGBTQ+ youth experienced **depression** vs 34% of all students
- **80%** of LGBTQ+ youth experienced **anxiety** vs 52% of all students
- **56%** of LGBTQ+ youth experienced **self-harm** vs 22% of all students
- LGBTQ youth are almost **3 times more likely** than their heterosexual peers to have **considered suicide**

Suicide
YRBS
2021
Wisconsin
Data

18.1% seriously considered suicide

14.8% made a plan

8.5% attempted suicide

LGBTQ+ Youth:

- 48% seriously considered suicide
- 38% made a plan
- 22% attempted suicide
- Increase in all categories from 2017 Data

National Data on Suicides Among Youth

- 2018-2021 suicide rates increased by **36%** for non-Hispanic Black youth ages 10-24
- **30%** of female HS students in 2021 thought about suicide
- **Suicide Attempts:**
 - 13% of female HS students and 7% of male HS students reported an attempt in 2021
 - 16% of non-Hispanic AI/AN and 14% of non-Hispanic Black HS students reported attempts in 2021
 - **30%** of HS students with same-sex sexual contacts and **22%** of LGBTQ+ HS students reported suicide attempts in 2021 compared with 6% of heterosexual HS students



Suicide Risk Factors for Youth

- According to the Wisconsin Violent Death Reporting System 2012-2016
 - Recent argument with a parent
 - Bullying Victim
 - Loss of privileges/items
 - History of self-harm
 - Recent school suspension
 - Anxiety
 - Alcohol use (15–17-year-olds)

LGBTQ Youth Risk Factors

- Less sense of school belonging
- Lack of supportive adults
- Bullying
- Depression and Anxiety



State Plan Prevention Strategies

Strategy 1: Increase
and Enhance
Protective Factors



Resources to reduce the impact of ACEs

- Wisconsin Office of Children's Mental Health: <https://children.wi.gov/pages/home.aspx>
- GSAFE: <https://gsafewi.org/>
- Wisconsin DHS- Childhood Experiences and Health: <https://www.dhs.wisconsin.gov/aces/index.htm>
- Wisconsin DPI:
 - Student Services- Prevention and Wellness: <https://dpi.wi.gov/sspw>
 - Bullying Prevention Resources: <https://dpi.wi.gov/sspw/safe-schools/bullying-prevention>
 - Safe Schools for LGBTQ+ Youth Resources: <https://dpi.wi.gov/sspw/safe-schools/lgbt>

Strategy 1: Increase and Enhance Protective Factors



Opportunities for Action

Promote training for safety planning that includes lethal means safety and encourage the use of evidence-based safety planning tools.

Encourage individuals to dispose of medications and household chemicals safely.

Resources

CALM – Counseling on Access to Lethal Means

<https://sprc.org/online-library/calm-counseling-on-access-to-lethal-means/>

Means Matter (Harvard TH Chan School of Public Health)

<https://www.hsph.harvard.edu/means-matter/>

Lethal Means & Suicide Prevention: A Guide for Community & Industry Leaders

<https://theactionalliance.org/resource/lethal-means-suicide-prevention-guide-community-industry-leaders>

Prescription Drug Take Back

<https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-drug-take-back-locations>

Safe Disposal

<http://dnr.wi.gov/topic/healthwaste/businesspharm.html>

Lock, Stock, and Barrel

<https://www.cbsnews.com/news/gun-violence-doctors-counsel-patients-firearm-safety-at-home/>

Dr. Bigham's contact
information:

James.bigham@wisc.edu

LOCK, STOCK, AND BARREL

This program provides a nonjudgmental space to learn how to talk about firearms, safe handling and storage of firearms, and the role safe firearm storage plays in addressing gun-related injuries and death by suicide.



Goal of training

Increase lethal means safety of firearms by normalizing the conversation, familiarity, and knowledge between providers and patients who are gun owners as part of a comprehensive approach to preventing suicide.

Who is this for?

A collaboration of gun shops and healthcare professionals



"Patients are experts in the means (firearms) the clinician is the expert in managing risk."

Participants will learn about:

Guns and Ammo

Different types of and uses for firearms and ammunition

01

Safe storage

Gun Locks, safes, holsters, and other security mechanisms

02

Shooting

Proper ways to hold guns, stance and the appeal of shooting

03

Firearm culture

Understanding firearms culture and the role firearms in the home and workplace

04

Strategy 2: Increase Access to Care for At- Risk Populations



Opportunities for Action

Encourage the safe use of smartphone apps and the evaluation of their effectiveness

Support the expansion of telehealth.

Promote the implementation and expansion of peer-led services and programs.

Resources

Mental Health Apps (APA)

<https://www.psychiatry.org/psychiatrists/practice/mental-health-apps>

Project ECHO® Telehealth Model

<https://echo.unm.edu/about-echo/model/>

Uplift WI

<https://www.mhawisconsin.org/upliftwi>

Peer-Run Respite

<https://www.dhs.wisconsin.gov/peer-run-respice/index.htm>

Alternatives to Suicide Peer-to-Peer Groups

<https://www.mhawisconsin.org/alt2su>

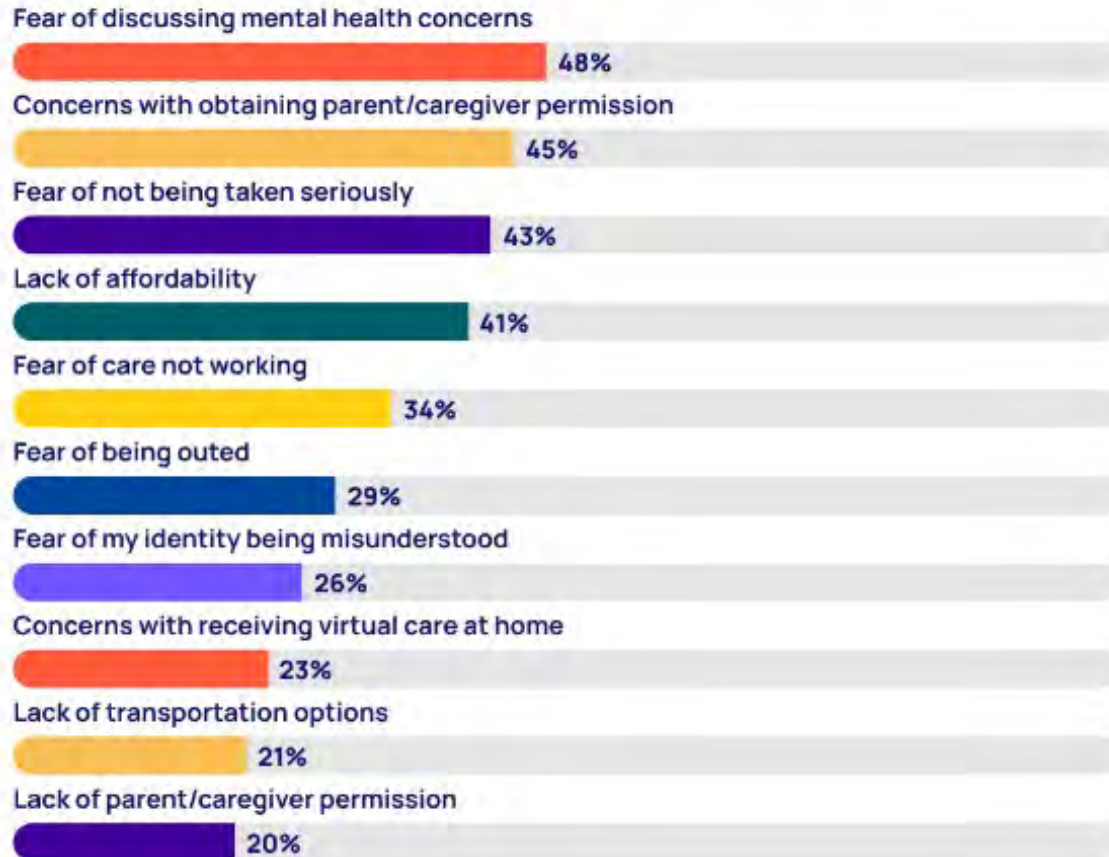
NAMI Wisconsin Peer Leadership Council

<https://namiwisconsin.org/about-nami-wisconsin/peer-leadership-council/>

Wisconsin Peer Specialists

<http://www.wicps.org/>

LGBTQ youth who wanted mental health care but were unable to get it cited the following top ten reasons



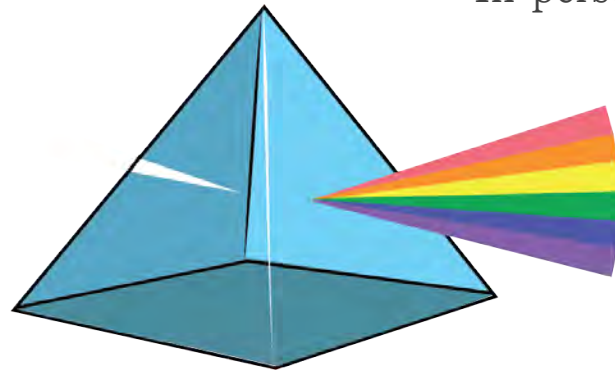
LGBTQ+ Mental Health: Barriers and Protective Factors

Protective Factors:

- Feel high levels of social support from family/friends
- Live in an accepting community
- Had access to LGBTQ+ affirming spaces
- LGBTQ+ youth who report having at least one accepting adult were 40% less likely to report a suicide attempt in the past year!
- <https://www.thetrevorproject.org/>

What is the PRISM Program at MHA-WI

- PRISM= Peer Recovery in Supportive Mutuality
- Everyone on the PRISM team is a Certified Peer Specialist who identifies as queer and/or trans and has lived through mental health struggles.
- Peers can offer in-person services upon request, pending availability
- PRISM provides peer support, mentorship, and resources referral as needed to LGBTQ+ youth and adults in Wisconsin
 - Warmline
 - Virtual support groups
 - In-person groups



THE PRISM PROGRAM

Connecting LGBTQ+ youth to trained peer specialists for virtual emotional & mental health support and mentorship.



414.336.7974

mhawisconsin.org/prism

How to Access PRISM

1. Warmline: 414-336-7974

- Call or Text
- Be prepared to share name, county of residence, age, and what you need support with
- Staffed 7 days per week from 10am-10pm
- Individualized peer support with the option for ongoing peer relationship

2. Virtual Support Groups: Every Tuesday at 7pm CT over Zoom (anyone LGBTQ+ 16+)

3. In-person support through school visits:

- Inquire at prism@mhawisconsin.org

Alternatives to Suicide Model

Support group model created by the [Wildflower Alliance](#) focused on speaking about, sitting with, understanding and moving through thoughts of wanting to die. It highlights:

- Responsibility to and not for or over
- Consent and choice
- Responses to injustice
- Healing in communities
- These support groups are technically for ages 18+ but the framework can be utilized by anyone

Wildflower Alliance Trainings:

<https://wildfloweralliance.org/trainings/>

- For those who are interested in learning more: [Overview Video](#)




VCVC Model

The Model	The Goal
Validation	I see you. I accept you as you are. I am glad that you are here. Your experiences and concerns make sense.
Curiosity	I value your individual story. I see you as whole human being (not a number or a diagnostic label). I care about the context of your life. You are the expert of your experience.
Vulnerability	I am also a whole human being with my own strengths and struggles. I value our connection.
Community	We are not alone. Our connection exists in wider community where we have other roles/identities... where we give/receive support.

VCVC model credited to the [Wildflower Alliance](#)

Strategy 3: Implement Best Practices for Prevention in Health Care Systems

[How Caring Letters
Prevent Suicide: CBS
Sunday Morning Video](#)



Improve care transitions.

prevent **suicide**
WISCONSIN
PARTNERS SAVING LIVES IN OUR STATE
www.preventsuicidewi.org

Resources

National Action Alliance, Best Practices in Care Transitions for Individuals with Suicide Risk: Inpatient Care to Outpatient Care

<https://theactionalliance.org/resource/best-practices-care-transitions-individuals-suicide-risk-inpatient-care-outpatient-care>

Safe Care Transitions

<http://zerosuicide.edc.org/toolkit/transition>

NowMattersNow.Org- Caring Messages Training

https://training.ursulawhiteside.org/p/caringmessages/?affcode=346122_682vo98u

Continuity of Care for Suicide Prevention: The Role of Emergency Departments: https://sprc.org/wp-content/uploads/2023/10/ContinuityCare_Suicide_Prevention_ED-2023.pdf

Caring Contacts as Non-Demand Engagement: <https://zerosuicide.edc.org/toolkit/engage/pathway-care>

UW Green Bay Suicide Care Trainings

- **Family Based Youth Suicide Risk Management Workshop:** CEHs 6.5
 - January 23-24, 2025; 8:30-12:15pm
- **Counseling on Access to Lethal Means (CALM) Training:** CEHs 3.0
 - March 6, 2025; 9:00-12:00pm
- **Attachment Based Family Therapy (ABFT) Introductory Workshop Part 1:** CEHs 6.5
 - May 6-7, 2025; 8:30-12:15pm
- **Attachment Based Family Therapy (ABFT) Introductory Workshop Part 2:** CEHs 13.0
 - June 4-5 AND June 11-12, 2025; 8:30-12:15pm

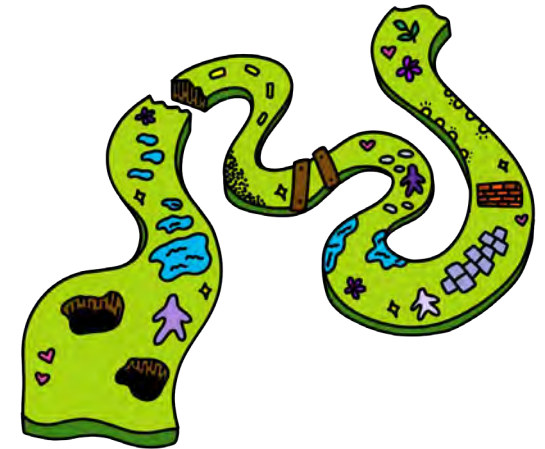
Trust the Process

Suicide is a **public health** issue, so we need to address **social determinants of health** and not just mental health issues.

No matter how careful you are you might say the “wrong” thing and that’s OK

You don’t have control over others’ responses

Hopefully, this information and resources will better prepare you to address suicide and talk about it!



Thank you!!

- Please feel free to reach out (Kelsey@mhawisconsin.org) with any questions
- Sign up for the PSW [newsletter](#) for more suicide prevention resources and PSW General Coalition meeting information

prevent suicide[®]
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PARTNERS SAVING LIVES IN OUR STATE

2024 GENERAL COALITION MEETINGS

Thursday June 20: 12-1:30pm CT

Thursday September 5th: 12-1:30pm CT

Zoom Meeting ID: 714 356 8651



**Open to anyone interested in
getting involved in suicide
prevention in Wisconsin!**



UPLIFTWI

HERE WHEN YOU NEED AN EAR



CALL ANYTIME

We're here for you when you need us- 365 days of the year.



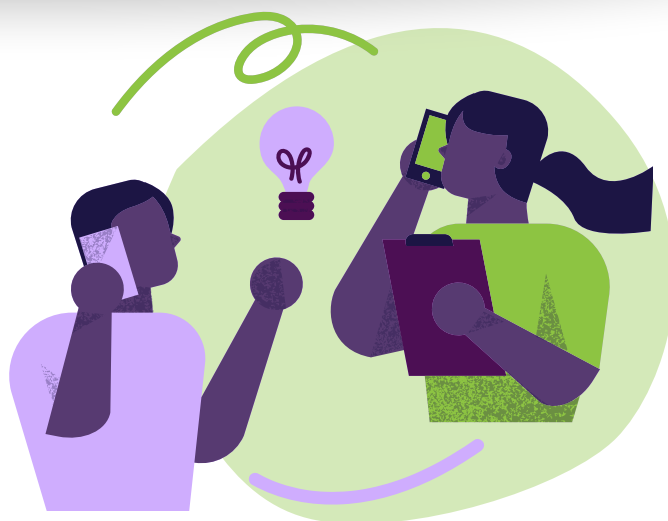
SHARED EXPERIENCES

Uplift WI operators are peers that have lived experience with mental health and other life challenges that you may connect with.



YOUR PRIVACY MATTERS

Not only are all calls anonymous, but what you share with your peer stays between you and your peer. This is a safe space.



UpliftWI offers caring peer specialists who get your experiences, providing a safe and confidential place for you to connect and find support.

CALL US WHEN YOU'RE READY.

534-202-5438



FOLLOW US ON SOCIAL MEDIA!

@UPLIFTWIS



MHIA
Mental Health America
of Wisconsin

Milwaukee



SUICIDE SUPPORT GROUPS

All support groups are meeting virtual - see preventsuicidewi.org for a suicide loss support group that is meeting in-person in your area

ALTERNATIVES TO SUICIDE

Alternatives to Suicide Support group is meant to support suicide attempt survivors, or those living with thoughts and feelings of suicide. This group allows people to talk about suicidal thoughts, their feelings or their experiences in a safe environment with no judgement. The struggles and successes are shared, we support one another, and strategize alternative coping mechanisms.

You do not need to be in crisis to attend. Come in times of strength and challenges.

SURVIVORS HELPING SURVIVORS (SHS)

This virtual support group is open to all suicide loss survivors in all areas. This is a safe space for all family members and friends who are dealing with suicide grief. There is no fee and you are welcome to come as often as you feel comfortable.

Your feelings of grief, sadness, shock, isolation, anger, and guilt may be overwhelming. This is a normal response and others like you can help you recover and let you know you are not alone.

VIRTUAL SUPPORT GROUP

Second and fourth Thursdays

7-8:30 PM

Join Via Zoom

JOIN BY

MEETING ID: 860 2730 7132

PHONE IN OPTION: +1 312 626 6799

Questions:
psw@Mhawisconsin.org
414-336-7970

VIRTUAL SUPPORT GROUP

NORTH SIDE: 1st Wednesday 6 PM

SOUTH SIDE: 2nd Tuesday 7 PM

EAST SIDE: 3rd Wednesday 6:30 PM

TO JOIN

Email: erica@mhawisconsin.org

prevent suicide
GREATER MILWAUKEE (PSGM)

Coming Together: Action, Hope, Recovery

Mental Health America of Wisconsin
3910 W Lisbon Ave.
Milwaukee, WI 53208
www.mhawisconsin.org/survivors

Main Office Phone: 414.276.3122
E-mail: info@mhawisconsin.org
OR psw@Mhawisconsin.org

THE PRISM PROGRAM: FREE AND CONFIDENTIAL LGBTQ+ PEER SUPPORT

OPEN TO ALL
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RESIDENTS



PEER SUPPORT BY
AND FOR LGBTQ+
PEOPLE

WANT TO TALK TO
SOMEONE ABOUT
SUBSTANCE USE?
MENTAL HEALTH
CONCERNS? JUST NEED
TO VENT? CONTACT US!

Staffed daily from 10AM-10PM
7 days a week



**We've got
your back!**



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your back!**



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