

Suicide Prevention Plan

FOR ASHLAND COUNTY

March 2004

Ashland County
Suicide Prevention Coalition

Coordinated by:
Ashland County Mental Health And Recovery Board

Introduction

More than 1,200 Ohioans die by their own hand every year. The impact of suicide does not stop with the lost lives. For every suicide death, it is estimated that six

Suicide (49.1%) is the leading cause of violent deaths worldwide, outnumbering homicide (31.3 %) or war related deaths (18.6%)

Source: World Health organization

individuals will be profoundly affected for the rest of their lives. These deaths and their effects are even more tragic as suicide is largely preventable. As the ninth leading cause of death in Ohio, suicide remains an ongoing challenge for healthcare policymakers, providers of care, schools, faith communities and law enforcement. Ohio statistics continue to mirror national trends where suicide rates are increasing among particular areas of the population. Adolescents, young adults, men 25 to 44 years of age and the elderly are among those at the highest risk in Ohio. Economic downturns and the inability to effectively problem solve and cope with challenges increase the risk for these priority groups, making the development of suicide prevention policies even more essential.

Number of Suicides in Ashland County	
2000	10
2001	4
2002	6
2003	5

- Suicide (49.1%) is the leading cause of violent deaths worldwide, outnumbering homicide (31.3 %) or war related deaths (18.6%).
- About 1,200 Ohioans die by suicide each year)
- The rate is highest rate is among men (44+)
- The rate has tripled for those between the ages of 15-19 since the 1950's.
- Many cases are not identified as suicide- actual rates are estimated to be 2-3x greater than reported
- The vast majority of people who commit suicide have a mental illness (often undiagnosed and untreated).

A National Priority

In October 1998, at the request of the U.S. Surgeon General and in collaboration with the Suicide Prevention Advocacy Network (SPAN), the Substance

More adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza, and chronic lung disease combined.

Source: The Surgeon General's *Call to Action to Prevent Suicide*

Abuse and Mental Health Services Administration (SAMHSA) convened a national suicide prevention conference. The Ohio Department of Mental Health (ODMH) appointed an eight-member team to attend the conference and assist in drafting the Surgeon General's *Call to Action to Prevent Suicide*, which was released in 1999. ODMH Director Michael F. Hogan, Ph.D., was appointed to a national committee that assisted in the development of the National Goals and Objectives for Suicide Prevention 2000-2005. These National Goals serve as the framework for Ohio's state plan that utilizes Awareness, Intervention and Methodology, or AIM strategy to reduce the prevalence of suicide. In January 2001, the Report of Ohio's Mental Health Commission, *Changing Lives, Ohio's Action Agenda for Mental Health*, included a recommendation that Ohio should build an initiative to reduce suicides. Ohio's Suicide Prevention Plan is the next step in saving lives and reducing suicidal behaviors by developing a comprehensive strategy in response to a very complex set of issues.

Ashland County Coalition

In September 2003, the Mental Health and Recovery Board of Ashland County received a \$10,000 grant from the Ohio Department of Mental Health for the purpose of establishing a community coalition to develop a suicide prevention plan. The first organizational meeting of the coalition was held in October. More than 50 individuals representing all aspects of the community attended, including county and city government, law enforcement, schools, providers, survivors and health care professionals. The Ashland County Suicide Prevention Plan is the result of four planning meetings of the coalition. The coalition identified target groups and then identified objectives for each group. The coalition also identified activities that would be utilized to reach these objectives (see Matrix on page 6)

Three target groups were identified by the coalition:

- Youth
- Older Adults
- Middle-aged Men

The general objectives of the plan are:

- Increase community awareness regarding suicide and depression
- Provide training regarding how to respond to a potentially suicidal person
- Establish Workgroups To Implement Plan:
 - Media,
 - Awareness
 - Gatekeeper Training

Each section below identifies specific objectives for each target group.

Youth

The 1999 Ohio Youth Risk Behavior Survey shows that nearly 20 percent of all high school students in Ohio seriously

Between 1952 and 1995, the incidence of suicide among adolescents and young adults nearly tripled.

Source: The Surgeon General's *Call to Action to Prevent Suicide*

contemplated suicide during the 12 months preceding the survey. Significantly more females (25 percent) than males (16 percent) seriously considered suicide. Young women are more likely to attempt suicide than young males by about 6 to 1, but completed suicide is more common in adolescent males than in females by about 3 to 1. While some clinicians believe that psychiatric illness, such as clinical depression, underlies all suicide among the young, others think it is more complex than that, pointing to developmental factors that influence behavior. Certainly, all agree that substance and/or alcohol abuse significantly increases the risk of suicide in young people, as does anxiety or impulsivity, sexual identity issues – including being gay, lesbian or bisexual – and sexual abuse.

Objectives

- Get youth representatives on coalition
- Implement school-based programs
- Conduct depression screening
- Provide training to school personnel, youth and parents

Middle-aged Men

At particular risk of suicide are Ohio men, 25 to 44 years of age. According to the Ohio Department

- ***Males are four times more likely to die from suicide than females***
- ***White males account for more than 75 percent of Ohio's suicides***

Source: Ohio Department of Mental Health

of Health, white men between the ages of 25 to 34 have the highest rate of this group. From 1996 to 1998, men between the ages of 25 and 34 had a suicide death rate of 23.7 per 100,000 and men between the ages of 35 to 44 had a suicide death rate of 23.0 per 100,000.

Men are generally more successful at completing suicide than women because they choose violent, more lethal means. However, the impulse to take one's own life is rooted in problems far more complex than the actual vehicle for death. Men who are 25 to 44 years of age are under enormous stress to perform, achieve, and provide. This oftentimes overwhelming stress coupled with a tendency to not seek help in times of need may help to describe why men of this age are at higher risk for suicide.

Objectives

- Increase community awareness regarding depression and suicide in men
- Provide suicide prevention training to gatekeepers (physicians, probation officers, etc.)
- Conduct depression screening

The Elderly

While the young are at particular risk for suicide, the group at greatest risk for suicide is the elderly. The suicide risk for Ohioans above the age of 80 is three to four times higher than for the average Ohioan.

Some of the factors that make the elderly more vulnerable to suicide are social isolation, significant losses (death of spouse, loss of home, family, and friends) illness, disability, chronic pain, depression, and oftentimes, hidden alcoholism. While many of these factors may be unique to the aging process, their presence and influence should not be fatal.

In the month prior to their suicide, 75 percent of elderly suicide victims had visited a physician.

Source: Center for Public Health Data and Statistics

Objectives

- Increase representation/involvement of older adults
- Increase awareness regarding suicide and depression in older adults
- Provide training to older adults, their caregivers and gatekeepers
- Conduct depression screening
- Outreach to "shut-ins"

Ashland County Suicide Prevention Coalition

Activity	General	Youth	Men	Elderly
Media	WNCO Radio WRDL Radio T-G Articles Channel 2 AU Media Dept. Web-site	T-G Kids Section School Newsletters Student newspaper City School Cable	<i>Real Men/Real Depression</i> Radio Newspaper Channel 2	Radio Newspaper
Awareness, Education and Outreach	Speakers Bureau Literature Educational Packets Support/bereavement groups Survivors NAMI Outreach Depression Screening Amish (Chiropractors)	Packets for teachers Orientation Packet for Students Resource table @ orientation AHS Home room comm. <i>TeenScreen</i> <i>Red Flags I</i> Jason Foundation Awareness/utilization of hotline Groups for “at-risk” students School Web Sites Teachers resource manual SOS	Packets for Physicians <i>Real Men/Real Depression</i> Paycheck stuffers Farm Bureau Newsletter REAP Extension office Posters in factories Employment office Unions	Packets for Clergy Sr. Ctrs/Nursing Homes “Shut-ins”
Gatekeeper Training	Physicians/Nurses DJFS Clergy Police/EMT/Fire Legal Community/Probate Chamber of Commerce Funeral Directors Human Resources Beauticians Vet clinics Chiropractors	Teachers/School Staff Daycare Providers Youth Pastors Christian Ed staff Student training Dention staff/PO’s	College Staff Bar owners/Social Clubs 12 Step Groups Probation Officers Service Clubs AA	Physicians Clergy Council on Aging Homecare services; LTC/ACF facilities

Suicide Fact Sheet

Common Warning Signs

Giving away favorite possessions

A marked or noticeable change in an individual's behavior

Previous suicide attempts and statements revealing a desire to die

Depression (crying, insomnia, inability to think or function, excessive sleep or appetite loss)

Inappropriate "good-byes"

Verbal behavior that is ambiguous or indirect: "I'm going away on a real long trip. You won't have to worry about me anymore. I want to go to sleep and never wake up."

Purchase of a gun or pills

Alcohol or drug abuse

Sudden happiness after long depression

Obsession about death and talk about Suicide

Decline in performance of work, school, or other activities

Deteriorating physical appearance, or reckless actions

High Risk Life Events Associated With Suicide

Death or terminal illness of a loved one

Divorce, separation, or broken relationship

Loss of health (real or imaginary)

Loss of job, home, money, self-esteem, personal security

Anniversaries

Difficulties with school, family, the law

Early stages of recovery from depression

What To Do

Take suicide threats seriously, be direct, open and honest in communications.

Listen, allow the individual to express their feelings and express your concerns in a non-judgmental way.

Say things like, "I'm here for you. Let's talk. I'm here to help."

Ask, "Are you having suicidal thoughts?" A detailed plan indicates greater risk.

Take action sooner rather than later.

Get the individual who is at risk connected with professional help.

Dispose of pills, drugs and guns.

Don't worry about being disloyal to the individual; contact a reliable family member or close friend of the person

What Not To Do

Do not leave the person alone if you feel the risk to their safety is immediate.

Do not treat the threat lightly even if the person begins to joke about it.

Do not act shocked or condemn. There may not be another cry for help.

Do not point out to them how much better off they are than others. This increases feelings of guilt and worthlessness.

Do not swear yourself to secrecy

Do not offer simple solutions

Do not suggest drugs or alcohol as a solution

Do not judge the person

Do not argue with the person

Do not try to counsel the person yourself

Where to find help in Ashland County:

Appleseed Emergency Crisis Hotline: 419-289-6111 or 1-888-400-8500

Mental Health and Recovery Board: 419-281-3139

Local Resources

24 Crisis Hotline: 419-289-6111 or 1-888-400-8500

Community Organization	Phone Number	Services
Mental Health And Recovery Board 1605 County Road 1095 Ashland, OH 44805	419-281-3139	<ul style="list-style-type: none"> • Information • Resources • Speakers Bureau • Training
Appleseed Community Mental Health Center 2233 Rocky Lane Ashland, Ohio 44805	419-281-3716	<ul style="list-style-type: none"> • Crisis Intervention • Assessment • Counseling • Medication • Support Groups
Catholic Charities Services 34 West 2 nd Street Ashland, Ohio 44805	419-289-1903	<ul style="list-style-type: none"> • Assessment • Counseling • Support Groups
Ashland County Council on Alcohol and Drug Abuse 310 College Ave. Ashland, Ohio 44805	419-289-7675	<p style="text-align: center;">Alcohol/Drug Services</p> <ul style="list-style-type: none"> • Assessment • Counseling • Support Groups
Private Providers	Phone Number	Services
Cornerstone Psychological Affiliates 259 Sandusky Street Ashland, Ohio 44805	419-289-1876	<ul style="list-style-type: none"> • Assessment • Counseling • Support Groups
Ashland Professional Counseling 1065 Claremont Ave. Ashland, Ohio 44805	419-281-1000	<ul style="list-style-type: none"> • Assessment • Counseling • Support Groups

Ashland County

Suicide Prevention Coalition

Internet Resources

The following web sites provide excellent resources regarding suicide prevention. Most of them have additional links to other resources on the web.

<http://www.mentalhealth.org/suicideprevention/default.asp>

Home page for the national prevention initiative.

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

This is the site of Suicide Prevention Advocacy Network (SPAN), one of the primary national organizations.

<http://www.psycom.net/depression.central.suicide.html>

This site has a lot of links to suicide prevention resources.

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

Home page for the American Association of Suicidology.

The following sites focus primarily on programs specific to children and adolescents:

<http://web.nami.org/youth/redflag.htm>

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

For more information contact:

Mental Health and Recovery Board of Ashland County
1605 Count Road 1095 Ashland OH 44805
419-281-3139

Suicide Prevention Coalition

Name	Organization
Steve Stone	MHR Board of Ashland County
Martha Jorden	MHR Board of Ashland County
Sandy Hoffman	MHR Board of Ashland County
Susan Elliott	MHR Board of Ashland County
Jody Allton	MHR Board of Ashland County
Gregg Applegate	MHR Board of Ashland County
Rachelle Griffin-Hall	School/Community Liaison
Terri Cavin	Appleseed Community Mental Health Center
Tammy Hoverstock	School/Community Liaison
Becky Plank	Ashland County Council on Aging
Sharon Jeffries	School/Community Liaison
Karrie Wilkinson	School/Community Liaison
Stephanie Krueger	School/Community Liaison
Brennan Galloway	Family & Children First Council
Jimi Fowler	School/Community Liaison
Ellie Grubb	City of Ashland, Mayor's Office
Erin O'Diam	ACB MR/DD
Al Sanders	Ashland Health Department
Phil Vermillion	Ashland Police Department
Dennis Dyer	ACCADA
Aric Fick	School/Community Liaison
Chris Smalley	Ashland Professional Counseling
Rosalie Snyder	Ashland Professional Counseling
Stacy Merryweather	Appleseed Youth & Family Services
Susie Boyer	Appleseed Community Mental Health Center
Rebecca Helbert	Hillsdale Elementary/Middle School
Diane Sprague Park	Hospice of North Central Ohio
Judge Damian Vercillo	Juvenile Court
Pat Edwards	Hillsdale High School
Cathy Thiemens	Catholic Charities Services
E. Wayne Risner	Ashland County Sheriff
Debbie Portner	Cornerstone Psychological Services
Machenzie Fry	Ashland Times-Gazette
Marilyn Felker	Ashland County West Holmes Career Center
Peggy Steward	Ashland City Schools
Steve Wells	School/Community Liaison
Tammy White	School/Community Liaison
Dr. William Emery	County Coroner
Nancy Udolph	Ashland University, Social Work Dept.
Rick Super	Ashland City School Resource Officer
Johanne Phelps	Volunteer/Community
Jerry Strausbaugh	Appleseed Youth & Family Services
Kym Irwin	Ashland City Schools Counselor
Ron Pagano	Dale-Roy, MR/DD Board
Jane Leshar	Trinity Lutheran Church
Pastor Dan Alexander	King Road Alliance Church
Sharon Boyd	Catholic Charities Services

Suicide Prevention Coalition of Ashland County

Workgroup Roster

Media

**Ellie Grubb, Chairperson
Jessica McCormick
Steve Landrum
Sandy Hoffman**

Awareness/Education

**Diane Park, Chairperson-
Dennis Dyer
Becky Plank
Terri Caven
Karrie Wilkerson
Jerry Strausbaugh
Karrie Wilkinson
Stacy Merryweather**

Gatekeepers Training

**Steve Stone, Chairperson
Steve Wells
Stacy Merryweather
Jody Allton
Rick Super
Susie Boyer
Captain Kyle**

**Trainers:
Susie Boyer
Kym Irwin
Stacy Merryweather
Steve Stone
Jerry Strausbaugh
Steve Wells**

We apologize if any names were mistakenly omitted from the roster of participants in this booklet. We realize that there are many who are not listed on the roster that support this important initiative and we thank each and every one of you. This is a countywide plan and there will be many people coming together to work collaboratively to carry out this plan out over the next few years.

We want to thank those who worked initially on the plan for all your hard work and input. We would also like to thank the entire community because this is a caring community, one that takes a stand to make a difference; in this case a difference to save lives.

Thank you to the Ohio Department of Mental Health for their support and for the grant that provided the dollars to begin this important endeavor. Also for the help and support of Dr. Ellen Anderson throughout the planning process.

The Mental Health and Recovery Board of Ashland County

Thank You!