IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH
525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.dph.illinois.gov

MEETING NOTICE
ILLINOIS DEPARTMENT OF PUBLIC HEALTH (IDPH)
Illinois Suicide Prevention Alliance
August 14, 2024
10 a.m. – 1 p.m.
****Recording****

Approved on November 21, 2024

AGENDA

I. Welcome & Introductions
II. Roll Call
III. Review & approval of May meeting minutes & CoP Team Charter *
IV. Update on 988 Implementation
V. IVDRS Update
VI. Depression Screening Update – Douglas County
VII. Guest Speaker – Jason Stanford
VIII. Training Update – Prevention First
IX. IDPH Updates
X. Update on the Governor's Challenge: To Prevent Suicide Among Service Members, Veterans, and their Families activities
XI. Annual Report
XII. Timely Referrals Update
XIII. Update on Suicide Related Legislation
XIV. Partner sharing
    a. *All - Please share information about your agency's suicide prevention activities*
XV. Public Comment

Future FY24 meetings:
Thursday – November 21, 2024
Tuesday – February 11, 2025
Wednesday – May 14, 2025

** Action Needed*

x	1	Jenna Farmer Brackett	Representative from a suicide prevention program serving rural communities (Centerstone)
x	2	Chuck Johnson	Representing Illinois Hospital Association
x	3	Amber Clark	Representing veterans' services
x	4	Eric Davidson	Representing Higher Education
	5	Tom Howard	Representing First Responder Professions
x	6	Andy Wade represented by Tony Ohlausen	Representing Promoting the Importance of Mental Health Treatment
x	7	Angie Thinnes	Representing Attempt Survivors
	8	Kim Godden	Representing First Responder Professions
	9	Steven Lomelino	Representing Attempt Survivors
x	10	Beth Morrison	Representing Suicide Prevention
	11	Christopher Balthazar	Representing LQBTQ+
x	12	Deb Martin	Representing Survivors of Suicide Loss
x	13	Rafiah Maxie-Cole	Representing Survivors of Suicide Loss
x	14	Sarah Horrell	Representing Survivors of Suicide Loss
x	15	Cynthia Paidipati	Researcher in Suicidology

Ex-Officio Members			**Agency**
x	16	Brian Kieninger	IDPH /Division of Emergency Preparedness and Highway Safety
x	17	Dana Wilkerson	Illinois Department on Aging
x	18	Colonel Marcus Gipson	Illinois State Police
x	19	Dr. Teresa Glaze	Illinois Department of Human Services /Division of Mental Health
x	20	Dr. Melvin Hinton	Illinois Department of Corrections
x	21	Dr. Erin Alexander	Illinois Department of Children and Family Services
x	22	Julia Strehlow	Illinois State Board of Education
x	23	Dr. Alda Leavy-Skinner	Illinois Criminal Justice Information Authority
x	24	Margo Watson	Illinois Department of Veterans Affairs
x	25	Chima Obidiegwu	Illinois Department of Human Services/Division of Substance Use Prevention & Recovery
x	27	Glenda Gallisath	Illinois Board of Higher Education
x	28	Jill McCamant	IDPH Injury & Violence Prev. Prog.

Stakeholders

Aaron Henry, Carelon Behavioral Health
Aaron Lenaghan
Amanda Burnside, Ann & Robert H. Lurie Children's Hospital of Chicago
Amanda Minor, Douglas County Health Department
Amie Nogami
Chima Obidiegwu, IDPH/SUPR

Claire Farnsworth, Centers for New Horizons, former MH educator
Coleen Moore, LCPC, Vice President of Clinical Services at Lifelong Access, Normal IL
Eric Davidson
Jack Rein
Jacob Bradshaw, Carelon/Illinois Mental Health Collaborative (IL Warm Line)
Jason Sanford, DHS, Regional Prevention Coordinator, US Department of Homeland Security
JB
Jena Wallander
Jennie Pinkwater
Jennifer Martin, IDPH
Jessica Heise, Community Engagement and Partnerships Coordinator
Judy King
Julianna Mitrius
Kristin Becker
Katie Kelly
Kellie Henrichs, Prevention First
Kira B, Hope for the Day
Liz Gonzalez, AllianceChicago
Lucy Craycroft
Miranda Scott
Michelle Langolis
Melissa Stalets
Maryann Mason, IVDRS and Northwestern University
Nadia Sharara, Ma, NCC, LPC
Neva Wright, Suicide Prevention Graduate Intern, IDPH
Olapeju "Pej" Lawal, IDPH, School Health Nurse Consultant
Randyl Wilkins
Shelly Sital, AllianceChicago
Sarah Patrick, Chief, Division of Emerging Health Issues, IDPH
Sarah Schroeder
Tracy Levine
Trang Pham-Smith
Tiffani Saunders
Victoria Freier

I. Welcome & Introductions
    a. Deb welcomed everyone to the group and invited everyone to put their introduction into the chat.
II. Roll Call
    a. Jill performed the roll call and a quorum was present.
III. Review & approval of May meeting minutes & CoP Team Charter *
    a. Chuck Johnson motioned to approve the meeting minutes. The motion was seconded by Marcus Gibson. The group voted in favor of approving the May meeting minutes.
    b. Glenda Gallisath moved to approve the team charter. The motion was seconded by Eric Davidson. The group voted in favor of approving the team charter.
IV. Update on 988 Implementation
    a. Dr. Glaze introduced Lucy Craycroft to present regarding the 988 implementations. Lucy shared that the statewide answer rate is currently at 54%, but this was after updated that occurred in July after a new center won the grant for the statewide back up. They are transition from Path to Centerstone for the state back up and primary for 85 counties. The call rates for the other call centers are still looking good, such as DuPage is at 81.8% and Lake County is at 81.3% and is a 24-hour call center. Lucy added that with the implementation of Centerstone, the other centers either increased or decreased their capacity and

went over which centers covered each county. Lucy added they are waiting on SAMHSA approval for the statewide communication plans for advertisement. Lucy added that in September they will be rolling out georouting. The concern is in Cook County and the way it is routed as it is the only county in the US that is routed by zip code. They are in talks with Vibrant on what that will look like and they will be doing traffic studies to look at where calls might increase. Lucy answered questions from the participants regarding answer rates, georouting, and the communication plan. Cynthia Paidipati added information regarding georouting.

V. IVDRS Update
    a. Dr. Glaze introduced Katie Kelly to the group to introduce. Katie explained the purpose of the IVDRS and SUDORS surveillance systems and the information that is collected and which coroners and counties are participating in providing information. Katie provided overall suicide decedent demographics and changes in table and chart formats. Katie discussed the primary weapons used in suicide deaths, suicide circumstance, a snapshot of youth suicide in Illinois, and race and ethnicity, veterans and suicide, older adults and suicide, and firearm suicide. Katie discussed an analysis of older adult suicides in hopes to guide outreach programs. Katie further discussed young adult suicide with intimate partner problems. Katie shared that they are looking into rural suicides. Katie answered questions from participants.

VI. Depression Screening Update – Douglas County
    a. Dr. Glaze introduced Amanda Minor to provide an update on their Depression Screening grant. Amanda shared data regarding how many ASQ and PHQ9 screenings have been administered, as well as how many individuals have been identified as at risk. Amanda continued to explain how many people have been educated on firearm restraining order, have received safe storage locks, and trainings available. Amanda explained plans such as CALM trainings, continue screenings in schools, administering geometric gun safes, and starting a mentoring program. Amanda answered questions regarding where to go for CALM training and the cost of the safes.

VII. Guest Speaker – Jason Stanford
    a. Deb introduced Jason to share initiatives that the Department of Homeland Security are doing in suicide prevention work. Jason shared a video that provides an overview of violence prevention work in the Department of Homeland Security. Jason shared that the Center for Prevention Program and Partnerships is the only department in Homeland Security looking at prevention and explain some of the work that is being done, the partnership they're working with, and

initiatives that are being targeted. Jason went through the approaches used to target the different initiatives. Jason discussed the training and grants that are being offered. Another video was shared to show how in plain sight threats can be.

VIII. Training Update – Prevention First

a. Dr. Glaze introduced Kellie to provide an update regarding the training grant. Kellie provided an overview of the work that Prevention First does. Kellie shared the trainings that Prevention First will be offering as part of the grant, including self-paced online and in-person AMSR training, mental health first aid trainings, QPR trainings, and safe talk trainings. Kellie shared that there are scheduled trainings, but they also offer personal trainings for organizations for any organizations that are interested in having Prevention First come to them for any of the trainings. Prevention First has been holding a learning collaborative, which mimics ECHO trainings, and held a suicide symposium in person. Prevention First is also in the process of developing an asynchronous course and research development to further develop resources.

IX. IDPH Updates

a. Jill provided updates regarding the general revenue funds and the notices of funding opportunities that it provides – Project ECHO and Zero Suicide Academy. Jill added that the four SAMHSA grants will be renewed for year two. Jill shared that the CDC Comprehensive Suicide grant will have 4 grants that will be posted within the next month. Jill shared that the subcommittees started back up in June and added that if anyone was interested in joining the subcommittees to let them know. Jill added that September is Suicide Prevention Month and added that there will 6 webinars that will be hosted. Since June if 2023, IDPH has sent out 129,500 gun locks with a partnership with the VA and are still available for free. Jill shared that the Pause to Heal campaign is live and the video was played. The Pause to Heal campaign is to bring awareness to the firearm restraining order. Jill shared IDPH will be at the Illinois State Fair to bring awareness to Pause to Heal and firearm restraining orders. Jill added that Jennifer was able to fund 15 organizations across the state for safe storage strategies and provided $1.6 million in general revenue funds for this. There are 3 strategies that the organizations will be focusing on – gun lock distribution and education regarding the importance of gun locks and developing training on firearm restraining order act. Jill gave an updated regarding board member applications and they are on the directors' desk. Jill introduced Tiffanie Saunders, the section chief for the Center of Minority Health Services. Tiffanie gave an update regarding the black

youth policy academy that was held by SAMHSA. Tiffanie shared that the project is in the early phases and there will be more to come soon.

X. Update on the Governor's Challenge: To Prevent Suicide Among Service Members, Veterans, and their Families activities
   a. Dr Glaze shared an updated regarding the Illinois Governor's Challenge. Dr Glaze shared about their experience at the National Conference which was in June. Dr. Glaze shared her experiences and people she met. Dr. Glaze shared that the group is starting to provide in-person trainings for 3 trainings throughout the state. Dr Glaze also shared they were invited to the Law Enforcement Conference in August.

XI. Annual Report
   a. Neva shared the 2024 suicide report and explained the purpose and the updates for the report. The report will be presented at today's meeting and voted on at the November meeting and then presented to legislations.

XII. Timely Referrals Update
   a. Deb introduced Liz Gonzalez and Shelly Sital who are the grantees for the timely referrals grant from SAMHSA's GLS grant. Liz gave a meeting recap of the in-person convening that took place in July. Liz shared an overview of the meeting participants that were present at the July meeting. Liz shared the contents of the meeting, such as the landscape assessment and interviews, provided an overview of what is missing, provided an overview of participant experiences, provided a summary of findings, and top proposed solutions for short, intermediate, and long term.

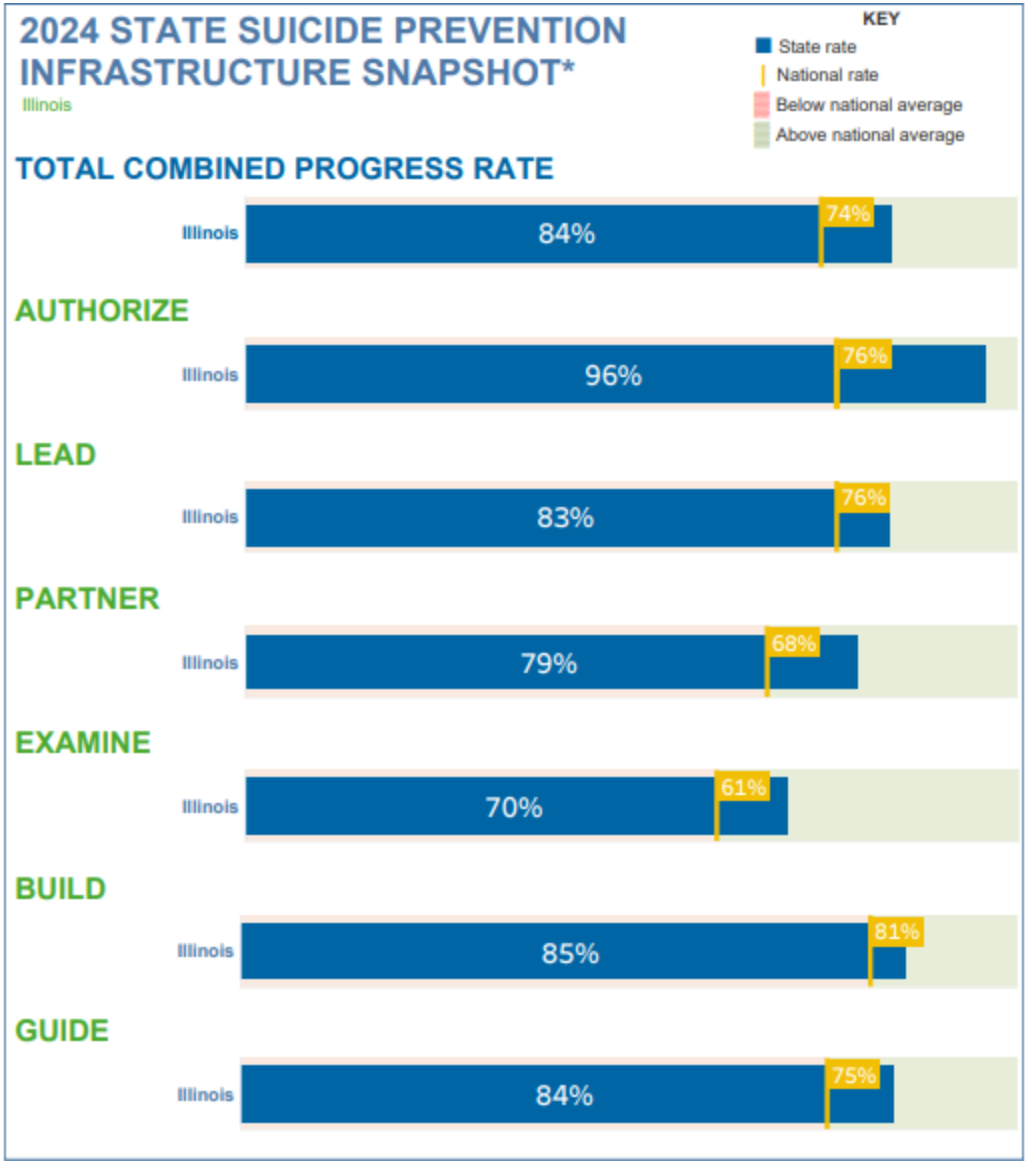
XIII. Update on Suicide Related Legislation
   a. Deb shared that Steve is not present to provide an update on legislation so this will be skipped.

XIV. Partner sharing
   a. Deb invited everyone to share their events. Jack Rein shared that Cicero School District 99 is having their fall mini mental health summit, where they focus on supporting staff and students needs, meeting them where they are and really supporting them and letting them know its ok to take space and they are partnering with Alyssa's Mission.
   b. Beth Morrison from AFSP shared that on Saturday September 14th they have their first Cobden Suicide Prevention Awareness walk in Cobden City Park, about 20 mins South of SIU Carbondale. There will also be a walk in Chicago at the same date at Montross Harbor.
   c. Randyl Wilkins shared that they have multiple trainings coming up, including QPR and Mental Health First Aid.

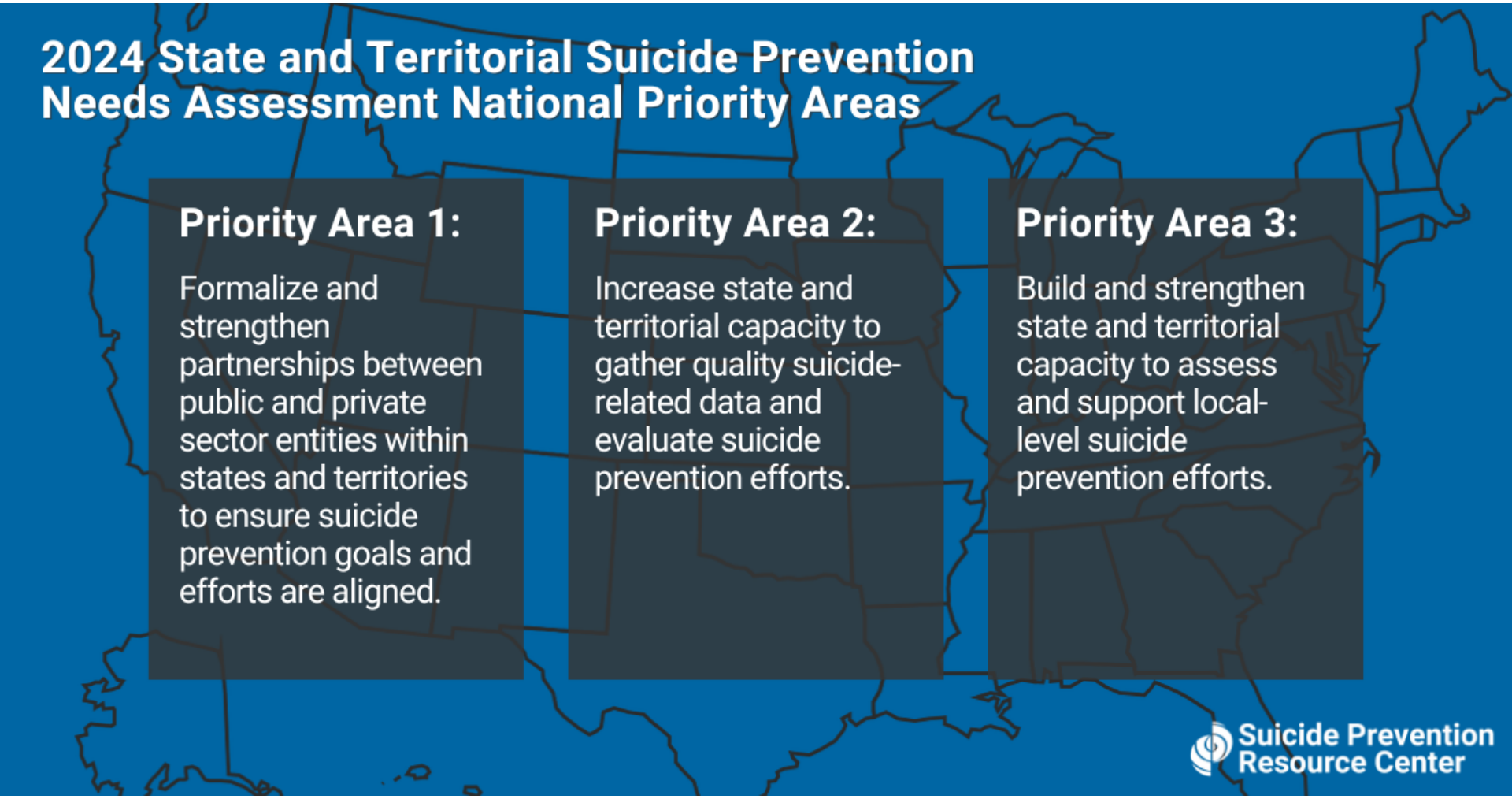
d. Chuck Johnson shared that the Adams County Suicide Prevention Coalition is sponsoring a Suicide Awareness Month media campaign with local television station WGEM. They will be doing 271 TV messages, 200 radio messages, fifteen 30 second promotional spots on NBC, FOX, CW and MeTV, WGEM Digital platform, WGEM comp news, their weather app, and their streaming platform. That's a $4,000 media campaign. Chuck shared they are also sending letters to clergy to ask them to talk about suicide during the Sunday of the Suicide Prevention week, and sending a letter to newspapers. They are also looking into a video resource to support parents following their child's suicide related crisis. The video is developed by Zero Suicide Institute and Parents to Parents, a non for profit organization that offers resources to care tackers whose children are struggling with mental health challenge and it was funded by the four Pines fund. They're going to link this video to their website for parents who have had a child attempt suicide view it, they're going make it available to Blessing hospital, inpatient, outpatient staff, Quincy Medical Group, and outpatient staff. Chuck added that they will also be renewing their bus wraps that have Suicide Prevention messaging on them.
e. Deb shared that Jared's Keepers will be taking 4 four areas central Illinois areas school district principles and/or mental health professionals to the Crisis Intervention Team Conference in Indianapolis at the end of the month. Deb added that there will be several webinars that will be coming out through IDPH for suicide prevention month.
f. Amber Clark shared they will be having their 4th annual operation obstacle even coming up on September 21st at Richland Community College in Decatur. It is a 2-mile obstacle course race and all proceeds go to Richland's veteran services.

XV. Public Comment

a. Deb Martin shared that they will be hosting a celebrity chef in Springfield on October 18th.

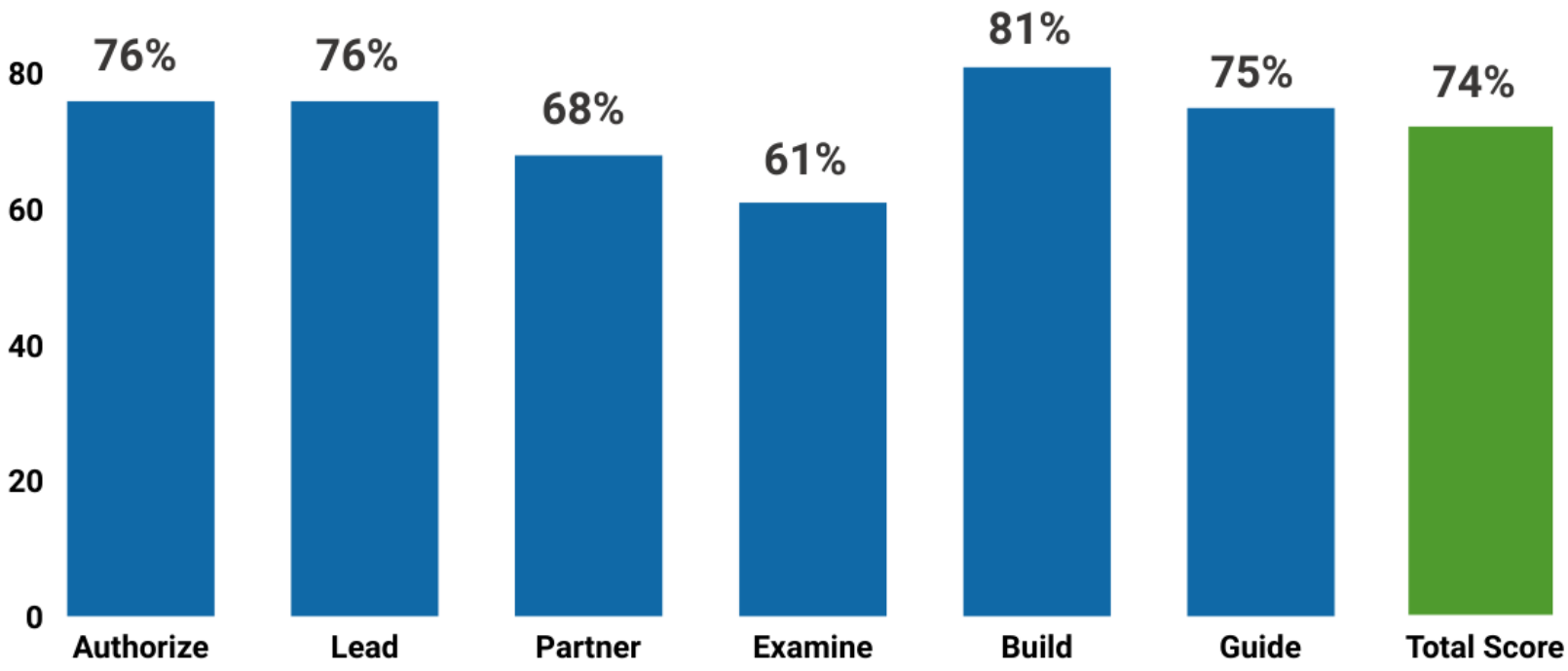


IDPH
Illinois Department of Public Health

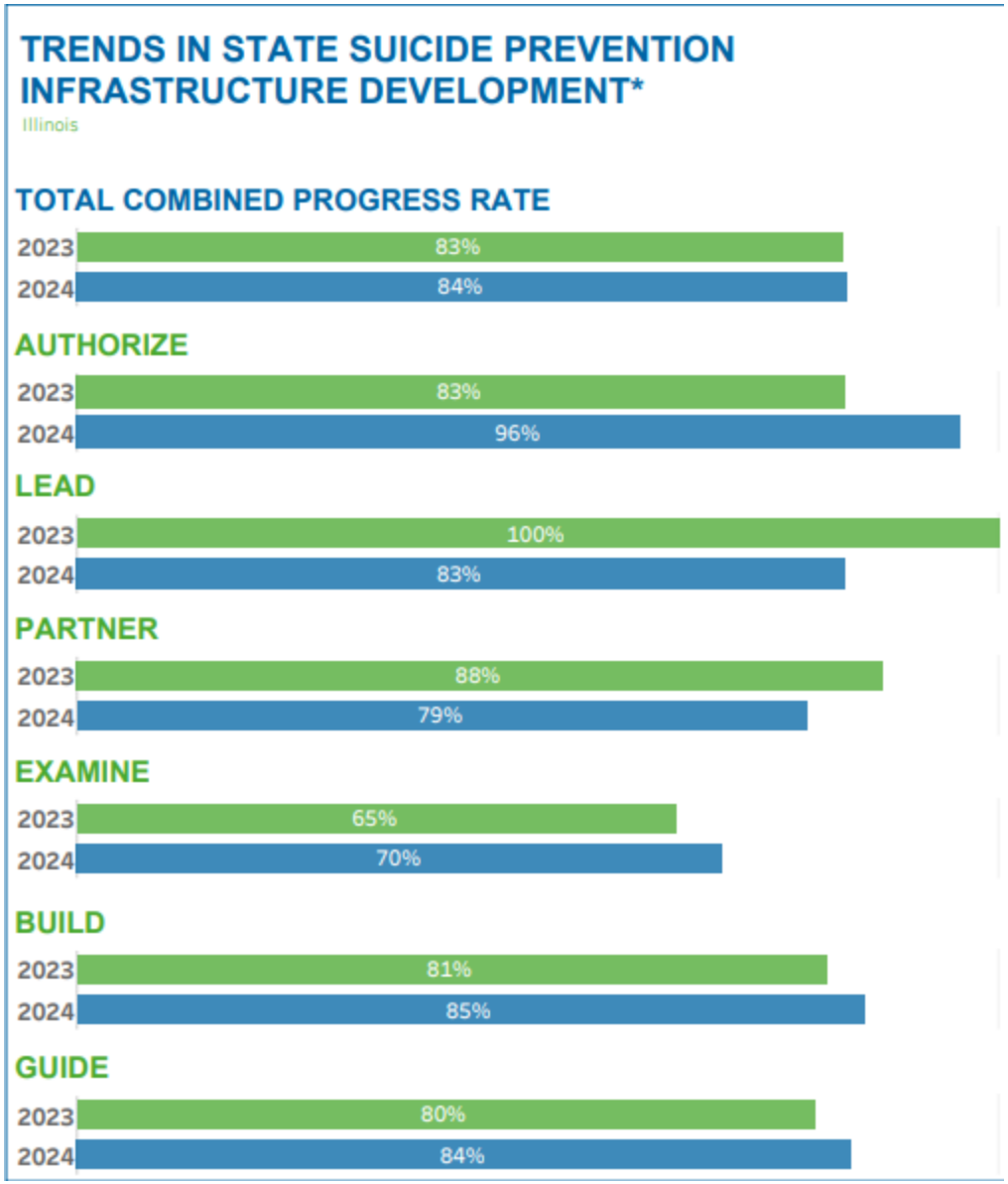


IDPH
Illinois Department of Public Health

2024 SNA National Infrastructure Progress Rates



IDPH
Illinois Department of Public Health



IDPH
Illinois Department of Public Health

Analysis of Older Adult Suicide Deaths in Illinois, 2020-2021 by Maryann Mason, PhD - Infogram

DPH Men's Health Section

Andrew Lerch, PT, DP

Office of Health Promotion, Men's Health Section Chie

ckground

out me

n's Health Section

- Concentrate on raising awareness of health-specific issues to men
- Work with mental health providers to raise awareness of the mental state of men and development issues in boys
- Collaborate with Illinois schools of public health to complete annual assessment, recommend policy developments, and identify services needed

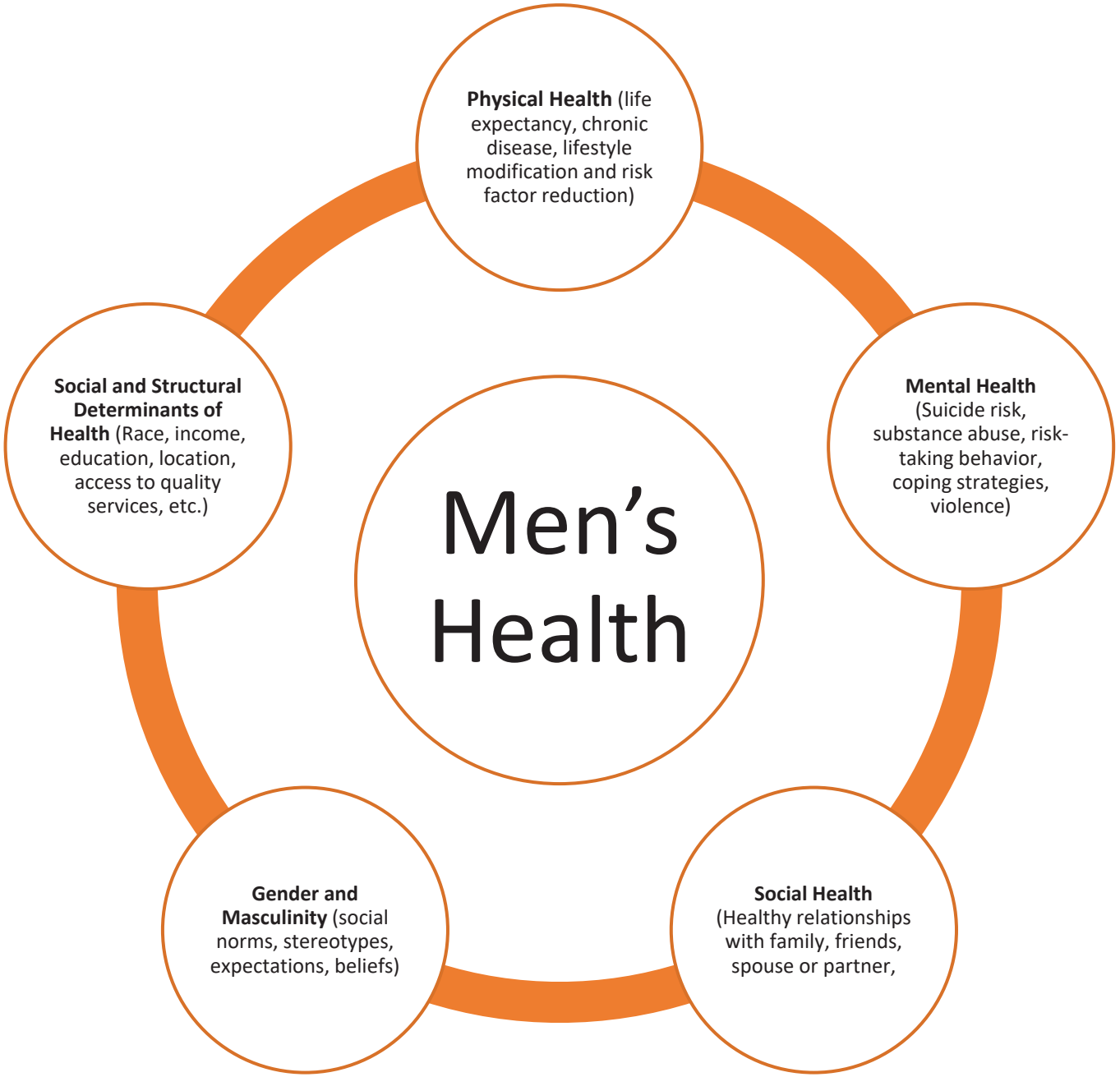
PH Men's Health website section

"Health planning needs to allow for the different needs of men and women, regarding exposure to risk factors, barriers to access and use o services and health outcomes. In many circumstances, men experience poorer health outcomes than women do. Although some of these poorer health outcomes may have a biological basis, they may be amplified by gender roles. Gender analysis and health policies should consider women, men and gender-diverse population groups, to ensure equitable health outcomes."

-World Health Organizatio

World Health Statistics 2019: Monitoring Health for the SDG

Areas of Focus



Priority Topics & Key Facts

inois men are expected to live **5.8 years less than women** (T-30th for difference in U.S)

- Life Expectancy (2021): Overall: 76.8, Male: 73.8, Female 79.8.
- Life Expectancy (2022): Overall: 77.1, Male: 74.2, Female 80.0.

lental health is an alarming and worsening crisis

- IL male suicide rates is **3.6x higher** than female and increasing in disparity (2019-2021 CDC)
  - Suicide rate correlated with increasing age
- Substance abuse, overdose events, and homelessness higher among men
  - Almost 5x increase in overdose deaths in Black men aged 55+ between 2015 and 2023
- Men are less likely to seek care. (17.8% men compared to 28.6% women between ages of 18-44 (2019-2021 CDC))

ealth equity

- Communities of color experience the poorest outcomes for vast majority of health indicators
- Black males in IL have lower life expectancy, higher rates of chronic disease, overdose mortality, gun violence deaths.

ack of gender-specific policy

- World Health Organization created agenda/guide in 2018 for the "Strategy on the Health and Well-being of Men in the WHO European
  - Only 7/50 ratifying countries have designated national-level policies related to men's health.
- Limited state-level men's health government agencies or programs (35% have devoted webpage, 27% have a men's health coordinator - study)

llinois-Specific Data

Revised Sep. 2024 Cancer Awareness Report – Prostate

- 2nd leading cause of death for males (1262 deaths in 2022)
- Higher mortality rate and higher incidence rate in Black Illinoisans (188.9 new cases/100,000 people 2021), compared to 70.0 (Asian and Pacific Islander), 95.1 (Hispanic), 112.4 (White, Non-Hispanic)
- Associated with social determinants of health (race, education, income)
- In 2022, there were 1,262 men who died of Prostate cancer. For every 100,000 men in Illinois, 19 died of Prostate cancer.

Opioid overdose: 2357 male deaths out of 3261 total (72.3%) (2022 IL Vital Records)

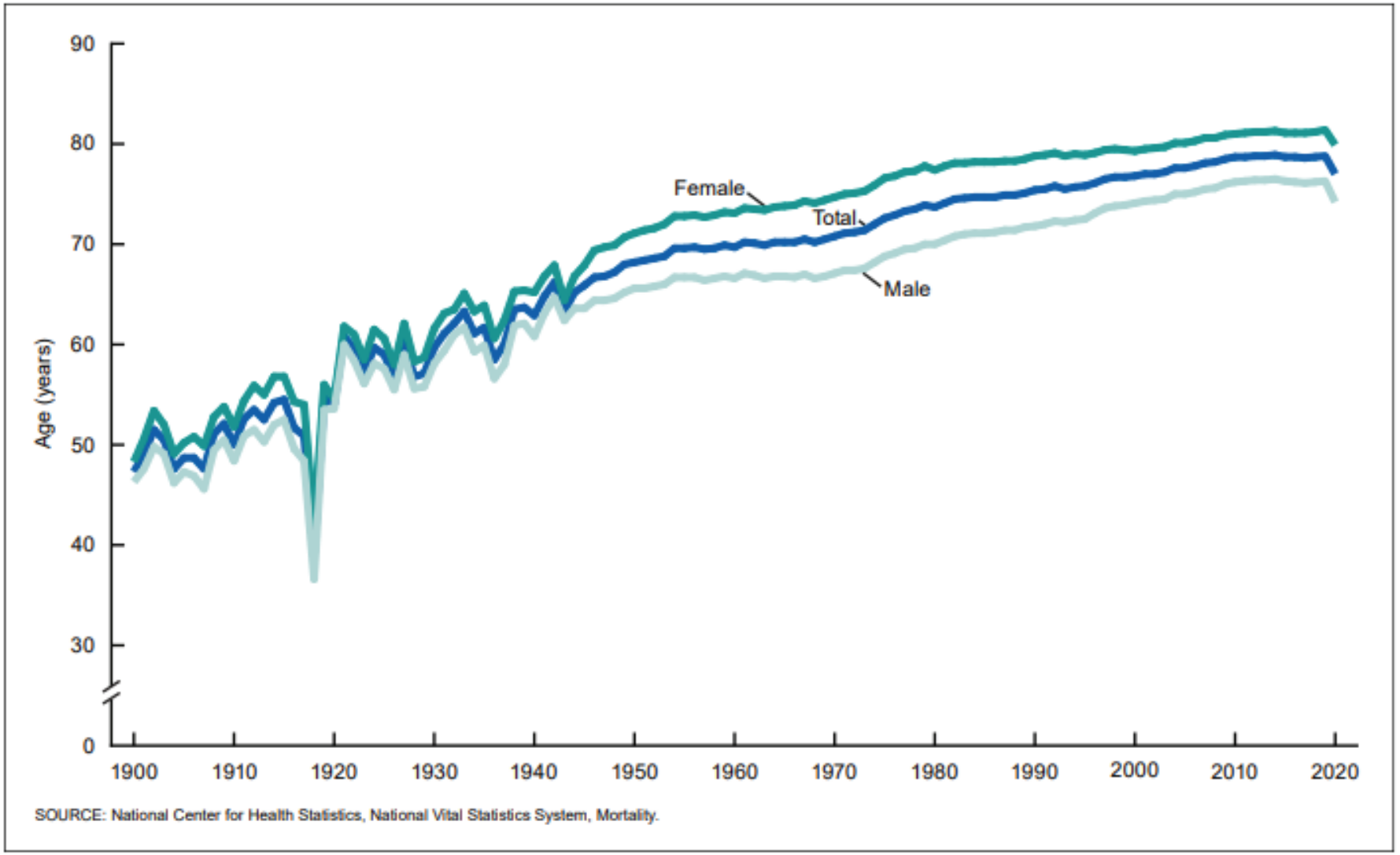
- Non-Hispanic Black population between ages of 55-64 most affected (207.0/100,000)
  - 10.2x higher than Non-Hispanic Whites for the same age group

Suicide: 1,533 total among both genders and 11.7/100,000 residents (2022 CDC)

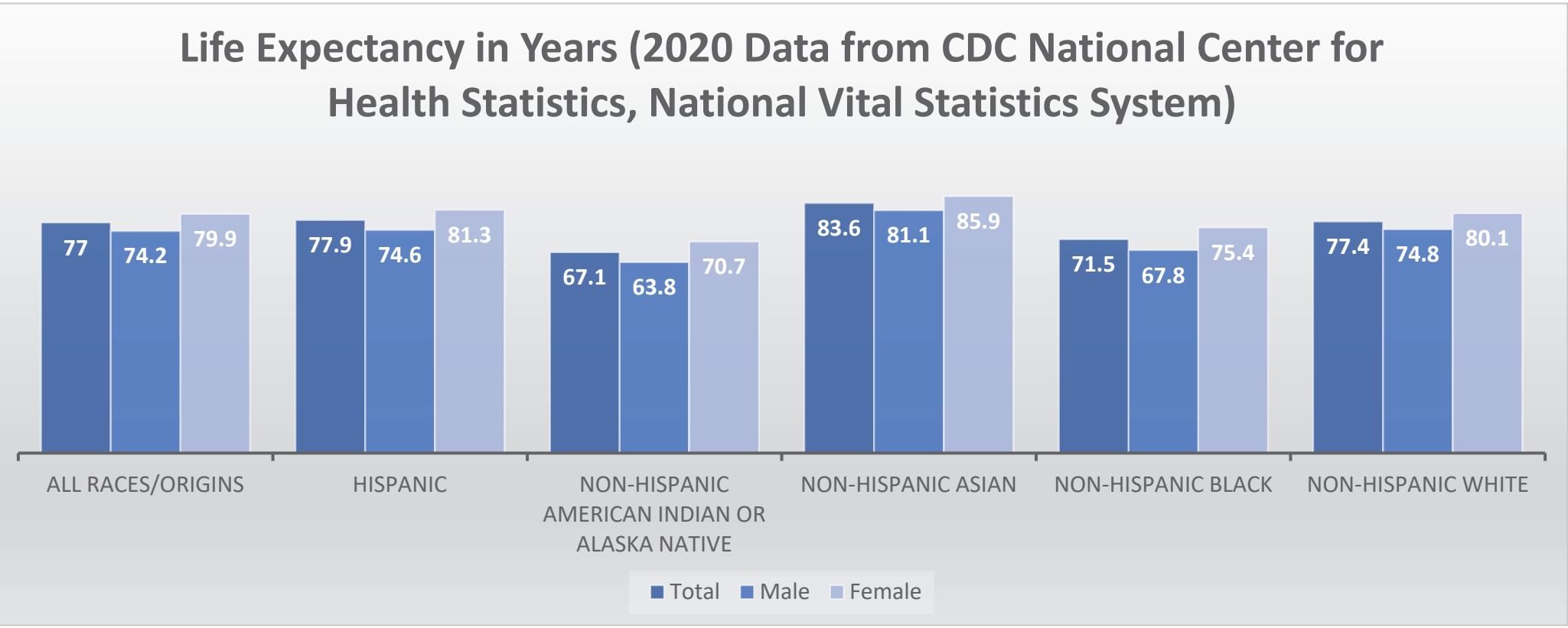
- Increased 7% between 2021-2022; 1 person every 5 hours and 41 minutes
- Highest among ages 75-84
- 3.6x higher among men in IL

Firearm mortality: 1,798 total and 14.4/100,000 residents (2022 CDC)

Figure 1. Life expectancy, by sex: United States, 1900–2020



SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.



expectancy gap between women and men increased another 0.6 years between 2019-2020.

differences through the years:

0: 2.0 years → 1975: 7.8 years → 2010: 4.8 years → 2020: 5.7 years

ds for male increased have been attributed to increased rates of disease and early mortality from heart disea
g cancer, and various cancers.

The State of Health of Adolescent and Young Adult (AYA) Males in the United States (2020 Research Review)

Depression is unrecognized, underdiagnosed, and misdiagnosed in AYA males

- Necessary to understand risk factors, **male-specific symptoms** and coping mechanisms that mask depression, and develop tools to assess male-specific symptoms with a culturally-sensitive and individualized approach
- High school males have **up to half the rate of diagnosed depression and suicidal behaviors/ideation, but up to three times the rate of suicide completion**.
  - Suggests significant underrecognition
  - Downstream consequences/triggers for violence, risky behaviors, decline in academic performance, loss of interested in activities, impaired relationships, self-harm, suicide.
- Research supports the need to acknowledge and support relationships and emotional connection highlights gender norms to suppress emotions that are perceived as socially unacceptable.

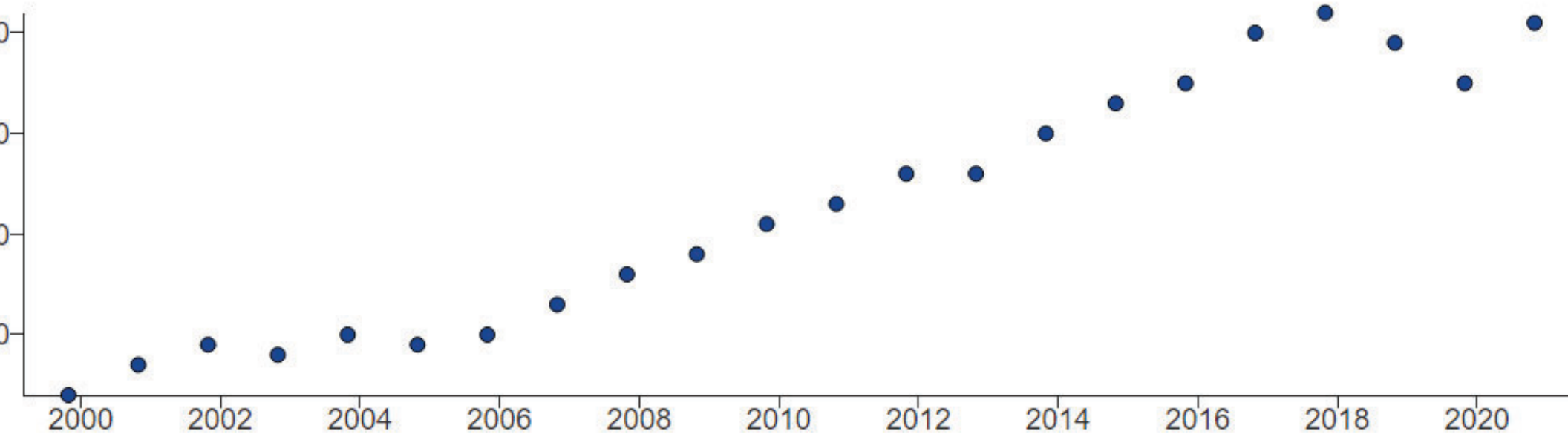
“If all of the fish in the water are dying, it’s probably not the fish at fault, but rather something in the water”

Professor Wizdom Powell

Partner of the Global Action on Men’s Health and Co-Author of GAMH 2024 Mental Health Report

Mental Health: Suicide

CDC Created Data and Graph for U.S. (2022)



Mental Health: Suicide

39,282 total suicides among men in 2022 in U.S. (~80% of over 49,000 suicides)

- Rate is up 34% for men between the ages of 25-34 since 2010
- Highest among older men >65 years of age (6x the rate of women)
- Men are 3-4.5x higher to commit suicide depending on age
- Highest rates among American Indian/Alaskan native and Non-Hispanic Whites
  - Rural areas > Urban
  - Potentially associated with social fragmentation, higher percentage of veterans, increased access to firearms

1541 total in IL (both men and women)

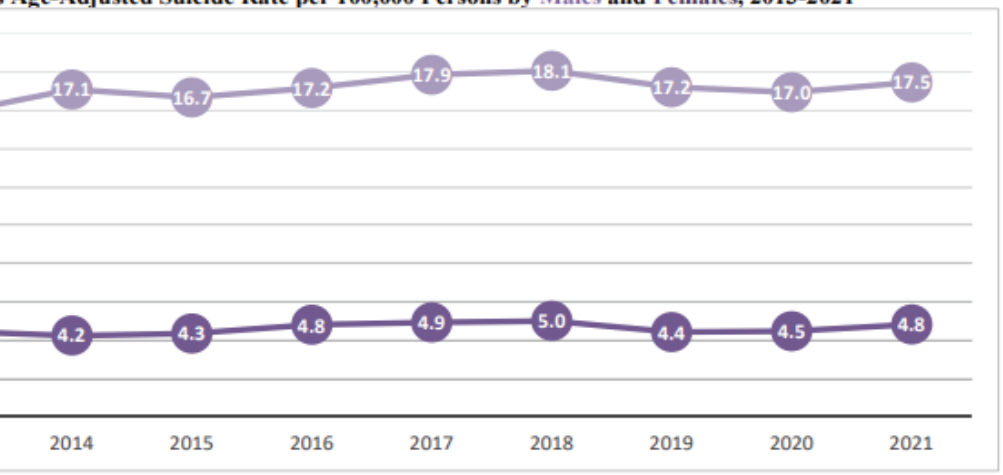
- 3.6x higher in males and increasing disproportionately
- Compares to ~4x higher rate seen nationally in 2022

Figure 11[20]: Proportion of Illinois Suicides in 2022 by Gender and Race/Ethnicity*

*Abbreviations: NH = non-Hispanic

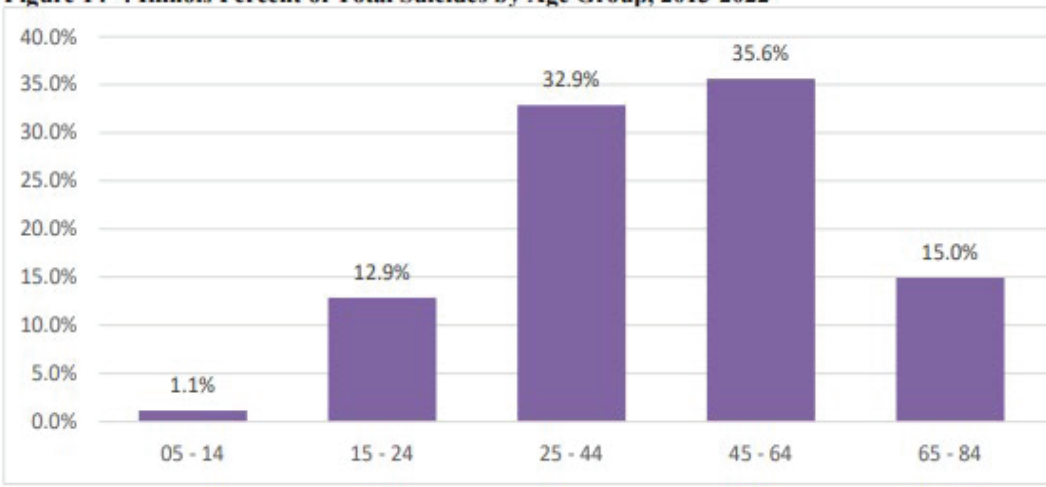
Figure sourced from IDPH 2021-2023 Suicide Prevention Report from the Illinois Suicide Prevention Alliance

s Age-Adjusted Suicide Rate per 100,000 Persons by Males and Females, 2013-2021*



1, Illinois, All Ages, All Races, All Ethnicities.

Figure 14[23]: Illinois Percent of Total Suicides by Age Group, 2013-2022



Figures sourced from IDPH 2021-2023 Suicide Prevention Report from the Illinois Suicide Prevention Alliance

Mental Health: Suicide

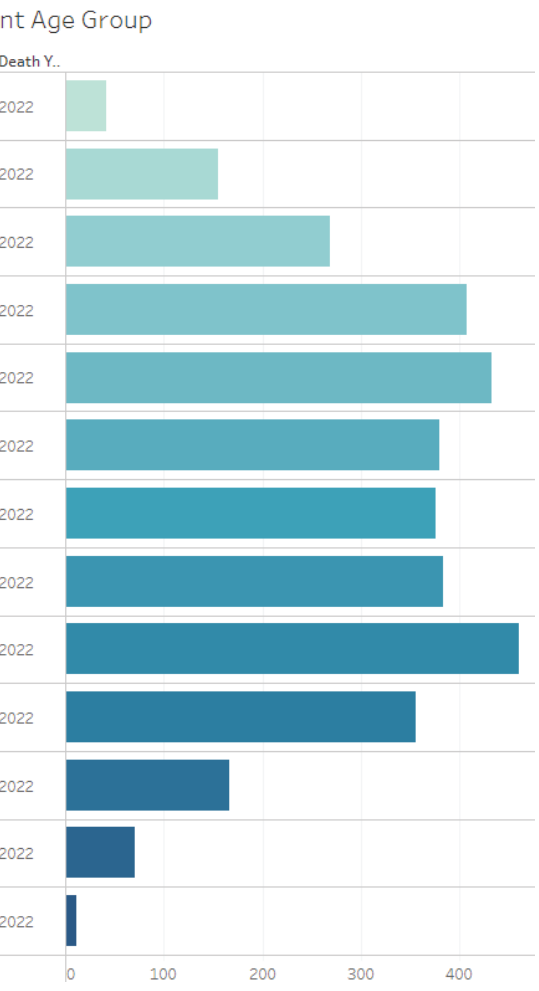
Substance Abuse

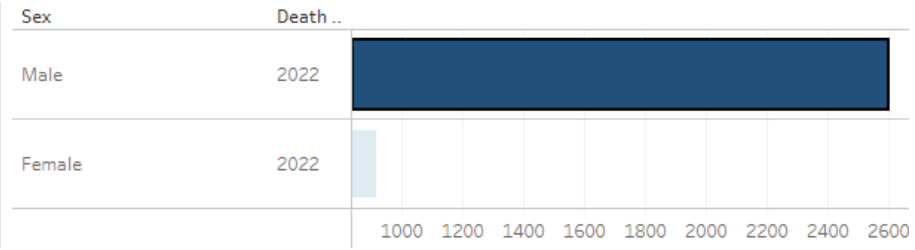
Drug use is on the rise in general, including illicit opioids, methamphetamine, and cocaine. This has led to increased death rates and what is being considered a national crisis, with a record 12-month rolling numbers exceeding 110,000 deaths in August 2023

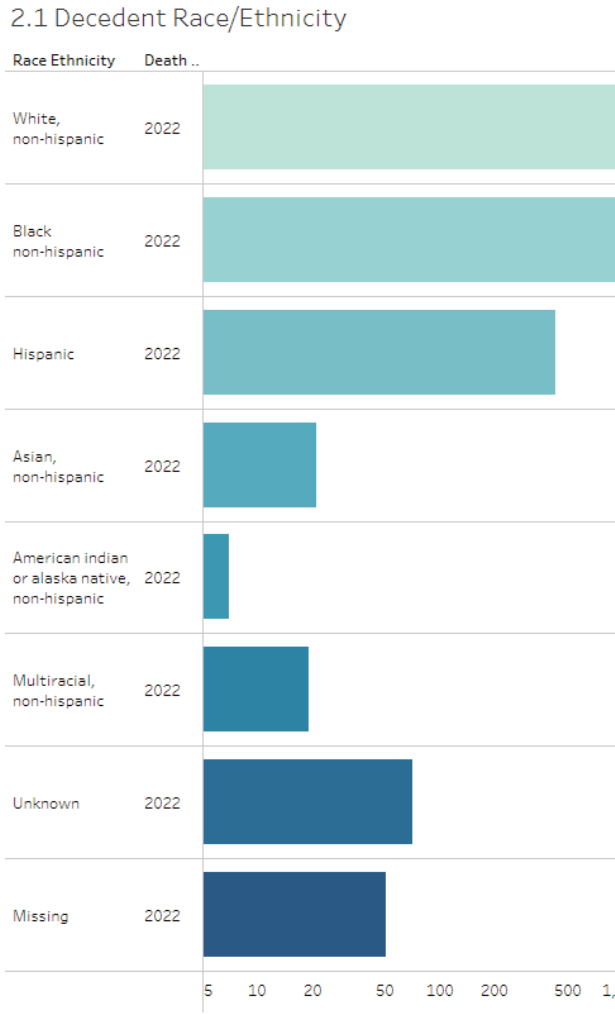
- Cocaine overdose has risen each year since 2012
- Methamphetamine overdose has increased over 500% for ages 25-54 between 2011 2018.

Alcohol abuse

- Approximately 178,000 people die from excessive use each year in the United States
- Men typically drink more often and in larger amounts (binge drinking), with increased rates of alcohol-related hospitalization, deaths, motor-vehicle accidents, and chronic diseases like cancer, liver disease, and decreased sexual function and fertility. In combination with other social factors and gender norms, alcohol leads to increased risk-taking behaviors, injury, and sexual violence







Substance Abuse

2022 overdose data: Graphics and Data sourced from Northwestern University SUDORS system.

Mental Health: Exposure to Stress

Violence and Trauma:

- Exposure much more common in men
  - Homicide rate 6x higher (2017)
  - 7x more likely to die from gun-related violence
  - 24.2% of males had carried a weapon at least once in the last 30 days compared to 7.4% of women

Contributes to symptoms across all health areas

- PTSD, depression, anxiety
- Stress and coping behaviors lead to physical symptoms like diabetes, heart disease, IBS
- Negative impact on personality development, academic performance, defiant/conduct disorders, increased risk for future violence

- <u>Illinois:</u>
  - 40% of children between 0-17 have experienced at least 1 adverse childhood experience (abuse/neglect, exposure to domestic violence)
  - 120,828 reports of child abuse and neglect and 7,743 repo of child sexual assault in 2017 (DCFS)
    - 49% of child abuse/neglect involved male vict
    - 16% of child sexual assault
    - Overrepresentation among Black children for both
  - 1995 IL residents died from guns in 2021
    - Guns involved in 87% of all homicides and 45% of al suicides
    - 88% of all firearm homicides are male, 79% were bla
    - 78% of total suicide victims were male, and 88% of these suicides used a firearm

Mental Health: Access and Utilization of Care

Men have reduced health-seeking behavior

- Gender norms and ideologies, societal expectations, cost of care barriers
- Exacerbates issues with under- or non-diagnosis of issues
- Limits treatment options
- Intersects with other social determinants

Men more likely to be hospitalized due to conditions that would be easier to treat in early stages

Fewer opportunities for effective transition of care between school-aged annual appointments and adulthood.

- Consider OBGYN for women to continue regular medical monitoring
- Pregnancy/antenatal services has been suggested as a potential point of contact to educatio men and offer preventative health and screening services.

Areas for Health Promotion Programming

Dimensions of Health

- Physical
  - Improving exercise habits and diet, weight loss/management, smoking cessation, improve engagement with preventative health services and sex-specific healthcare (prostate and testicular needs), HIV prevention
- Mental:
  - Provision of professional and/or group counseling, stress reduction and conflict resolution training, promotion of sense of purpose/motivation through workforce training, fatherhood/family support programming, paternal depression acknowledgement, gendered mental health assessment development and intervention.
- Social:
  - Advancing gender-transformative approach for change (promoting positive/acknowledging harmful gender norms, behaviors, and roles), reduce unhealthy coping behaviors, positively influence desire to seek and interact with family and friend support structures, workforce promotion, housing initiatives, recidivism reduction

Questions?

Andrew Lerch, PT, DPT
IDPH Office of Health Promotion, Men's Health Section Chief
535 W Jefferson, 2nd floor | Andrew.lerch@illinois.gov