2008 Suicide Prevention Report

March 2009
More than 1,000 Illinoisans die by suicide each year.

On average in the United States, a person dies by suicide every 16 minutes.

It is estimated that there are 25 attempts for every adult death by suicide in the United States; and an estimated 100 to 200 attempts for every young person that dies by suicide.

Each suicide intimately affects at least six other people.
2008 highlights include:
- Illinois Suicide Prevention Strategic Plan was released.
- 2005 – 2007 Suicide Prevention Report was submitted for Department approval.
- *State Agency Review and Initial Recommendations Report: Recommendations of Policy and Program Changes to Support Suicide Prevention* was submitted for Department approval.

The goals and activities of the Illinois Suicide Prevention Alliance (alliance) challenge communities, educators, advocates, clergy, public health professionals, hospital personnel, health care providers, prevention specialists, law enforcement, physicians, mental health professionals and policy-makers to take positive and active steps to reduce the number of suicides and lessen its stigma across Illinois.

In 2001, the statewide effort to address suicide in Illinois began, and flourished with facilitation from the Illinois Department of Public Health. The first meeting of the Illinois Suicide Prevention Coalition was convened in 2002, with the main task of developing a state plan for suicide prevention. By 2003, a rough draft of the plan was completed, and included key recommendations for suicide prevention.

In 2004, the Suicide Prevention, Education and Treatment Act (Public Act 093-0907) was passed by the Illinois General Assembly and signed into law. Public Act 093-0907 (http://www.ilga.gov) directed the Illinois Department of Public Health to appoint an advisory board entitled the Illinois Suicide Prevention Strategic Planning Committee. The committee represents statewide organizations and other agencies that focus on the prevention of suicide and the improvement of mental health treatment, or that provide suicide prevention or survivor support services. The committee is charged with the development and implementation of the Illinois Suicide Prevention Strategic Plan. In addition to the strategic plan, it also is charged with implementing: 1) a statewide suicide prevention conference, 2) a media campaign, 3) a public awareness campaign, 4) education initiatives, and, 5) if funds are appropriated, five pilot programs to provide training and direct service.

In 2007, an alliance was formed between the Illinois Suicide Prevention Strategic Planning Committee and the Illinois Suicide Prevention Coalition, unifying the strengths of these groups to continue to advance suicide prevention efforts in Illinois. To solidify this merger, legislation was passed during the 2007 Illinois legislative session amending Public Act 093-0907 and officially changing the name of the committee to the Illinois Suicide Prevention Alliance (alliance). This technical amendment (Public Act 095-0109) became law on January 1, 2008.
One of the first accomplishments of the alliance was the development of a vision and mission statement to help guide our suicide prevention efforts in Illinois.

**Vision:** The Illinois Suicide Prevention Alliance envisions an Illinois where no one is touched by suicide.

**Mission:** To reduce suicide and its stigma in Illinois.

The alliance is fulfilling its mission through a positive, public health approach to suicide prevention by collaboratively working with concerned stakeholders from the public and private sectors to increase awareness and education, provide opportunities to develop individual and organizational capacity in addressing suicide prevention, and advocate for improved access to treatment.

**ACCOMPLISHMENTS – Illinois Suicide Prevention Alliance**

The alliance met five times in locations throughout the state, including some by video conference. The 2008 meetings were held March 17, May 21, July 16, August 15 and November 18. The following accomplishments outline and highlight the work of the alliance in an effort to carry out our mission over the past year.

Highlights include:
- Illinois Suicide Prevention Strategic Plan was released.
- 2005 – 2007 Suicide Prevention Report was submitted for Department approval.
- State Agency Review and Initial Recommendations Report: Recommendations of Policy and Program Changes to Support Suicide Prevention was submitted for Department approval.

**A. Education and Training Efforts**

The alliance’s educational and training efforts focused on increasing the capacity of professionals and community members to gain the knowledge and skills to increase and improve identification and treatment of suicidal behavior utilizing existing services, and to provide timely support and/or referral to potentially suicidal individuals.

Accomplishments:

- Provided training to all alliance members on the Open Meetings Act in May 2008.
- Coordinated and implemented the Suicide Prevention Resource Center’s (SPRC) two-day Core Competency Training for communities interested in developing local suicide prevention coalition projects to assist in implementing the state plan; 50 people were trained from 11 different teams from Illinois, including coverage of the following counties and local cities: Bureau, DeKalb, DuPage, Fulton, Gallatin, Grundy, Kane, Kendall, Knox, LaSalle, McHenry, Madison, Marshall, Monroe, Peoria, Randolph, St. Clair, Saline, Stark, Tazewell, White, Woodford, and Saline counties, Orland Park, Orland Hills, Orland Township, and the Metropolitan Chicago area.
• Recommendations were proposed to the Department for continued education and training efforts through a work plan from the alliance.

B. Public Awareness Efforts
The alliance’s public awareness efforts focus on increasing public awareness on suicide prevention and decreasing stigma around suicide and mental health.

Accomplishments:

• Re-engaged with Market M, a public relations and marketing firm, to continue to develop and begin implementation of a statewide suicide prevention public awareness campaign, including a draft of a suicide prevention Web site.
• Recommendations were proposed to the Department for continued public awareness efforts through a work plan from the alliance.

C. Community Outreach Efforts
The alliance’s community outreach efforts focused on increasing the number of partners and collaborations across Illinois to assist with the implementation of suicide prevention efforts on the local level.

Accomplishments:

• Empowered and provided technical assistance in 11 Illinois communities to establish local outreach initiatives.
• Suicide prevention coordinators at the local veteran affairs hospitals became actively involved in alliance activities.
• Recommendations were proposed to the Department for continued community outreach efforts through a work plan from the alliance.

D. Data Collection and Analysis Efforts
The alliance’s data collection and analysis efforts focused on increasing the quality and availability of statewide and community data for planning, surveillance and evaluation of suicide.

Accomplishments:

• Served as a resource by providing statistics on crisis calls, death reporting, legislation tracking and data analysis for injury prevention programs.
• Recommendations were proposed to the Department for continued data collection and analysis efforts through a work plan from the alliance.
In addition to the above, the *Illinois Suicide Prevention Strategic Plan* was officially released through the Illinois Department of Public Health. Based on the goals and objectives of the plan, the alliance made recommendations to the Department on the utilization of the $350,000 allocated by the Illinois State Legislature in the FY08 budget to suicide prevention. Those recommendations included the following proposal to the Department, which resulted in a contract between the Department and Mental Health America of Illinois (MHAI) to implement during FY09 due to the late release of the FY08 funding to the Department:

1) Build capacity across Illinois to promote local suicide prevention efforts by building and/or expanding 15 to 20 effective and efficient coalitions and partnerships through a training conference and support of local efforts.
   a. Establish partnerships with local coalitions and provide a two-day coalition building training focusing on suicide prevention.
   b. Provide each local coalition with a stipend, as well as technical assistance, to develop and implement a nine-month local suicide prevention initiative.
2) Support research-based evaluation methods and technical assistance to plan for the replication of suicide prevention programming and efforts in Illinois according to outcome measures.
   a. Work with a university-based or other qualified evaluator to provide a comprehensive evaluation of specific suicide prevention initiatives, and make recommendations for continued efforts and programming.
3) Begin implementation of the public awareness campaign to reduce the stigma of suicide, increase awareness of risk factors, including mental illnesses, and promote linkage to human services for at-risk individuals.
   a. Finalize and launch the “It Only Takes One” public awareness campaign statewide.
   b. Continue work with Market M to implement the public awareness plan developed for suicide prevention through research and focus groups in 2007.
4) Work with a qualified professional to analyze suicide data statewide (including attempt data) and train providers on how to collect better data.
   a. Conduct interviews statewide with coordinators of data sets related to suicide deaths and attempts, and determine data system components, strengths and gaps.
   b. Develop a schedule of release dates for vital records and hospitalization discharge of data items related to suicide deaths and suicide attempts.
5) Support and build school-based suicide prevention initiatives and professional development opportunities for staff, students, parents and other caregivers.
   a. Provide mini-grants to school districts and local organizations to develop and implement suicide prevention initiatives within their curricula, increase in-school mental health support, conduct staff professional development, and educate students and parents/other caregivers.
6) Develop and enhance the capacity of health service providers statewide to increase suicide prevention and early intervention.
   a. Supply educational information to Division of Mental Health providers to distribute on suicide prevention.
   b. Develop guidelines for providing education to family members and significant others of persons at-risk of suicide who receive care for mental health and/or substance abuse disorders. Begin implementation of guidelines at all relevant treatment centers.
7) Develop and enhance the capacity of providers, who serve the aging population in Illinois, regarding suicide prevention and early intervention.
   a. Provide two to six regional statewide educational opportunities to Department on Aging service providers.
8) Develop and implement Suicide Prevention Month activities during September 2008 and Mental Health Month during May 2009.
   a. Statewide distribution of materials for specified Suicide Prevention Month activities to local communities and/or organizations.
   b. Launch activities associated with public awareness campaign.

Other key accomplishments by the Department in 2008 include:
- Submitted an application for youth suicide prevention activities to the Substance Abuse and Mental Health Services Administration.
- Participated in the development of the State Injury Indicator’s Report by the U.S. Centers for Disease Control and Prevention. The report is a surveillance effort to gain a broader picture of the burden of injuries across the nation. By participating, Illinois will be able to see trends over the years and compare Illinois to other states. The report is anticipated to be released in 2009.
- Provided a grant, through general revenue funds, to the Children’s Memorial Hospital, Children’s Data Lab to continue to implement the Illinois Violent Death Reporting System in three counties. (More than half of the violent deaths in the system are suicides.)
- Provided funds, through general revenue funds, to the Farm Resource Center to offer outreach crisis intervention.
- Released a Suicide Prevention Fact Sheet.
- Organized state level data for suicides and suicide attempts. In addition, created a map and chart to demonstrate the county suicide rates and responded to numerous data requests for local data.
- Collaborated with the Pacific Institute for Research and Evaluation to update the Illinois data fact sheet sponsored by the Suicide Prevention Resource Center.
- Provided technical assistance to state and local entities as well as conducted presentations and displays.
RECOMMENDATIONS FOR NEXT STEPS

Over the next five years, the Alliance seeks to develop and enhance comprehensive suicide prevention, early intervention, and post-vention programs and services across Illinois, building vital supports across diverse communities.

The following initiatives are recommended next steps in carrying out the goals of the Illinois Suicide Prevention Strategic Plan:

- **Develop and Evaluate Five Model Suicide Prevention Comprehensive Pilot Programs (three-year programs)** - To develop and evaluate five model, comprehensive programs statewide that include suicide prevention, intervention, and post-vention in order to provide replicable, evidenced-based outcomes that other communities and service providers can use with adaptations.

- **Implement a Suicide Prevention, Early Intervention and Training Initiative** - To provide the following specific services:
  1) To develop and enhance the capacity of community gatekeepers statewide through community-based mini-grants to increase suicide prevention and early intervention skills through local education by experts in the field.
  2) To assess the current capacity and network of crisis lines in Illinois.
  3) To enhance professional development abilities in Illinois through a statewide conference on suicide prevention.
  4) To develop and enhance the capacity of health service providers statewide to increase suicide prevention and early intervention skills through local education by experts in the field.
  5) To develop and enhance the capacity of service providers to the aging population in Illinois on suicide prevention and early intervention skills. To develop and enhance service provider skills to traumatized children in the child welfare system on suicide prevention and early intervention.

- **Implement the Suicide Prevention Public Awareness Campaign** - To develop and implement a public awareness campaign to reduce the stigma of suicide, and increase awareness of risk factors, including mental illnesses, and promote linkage to human services for at-risk individuals.

- **Develop and Implement a Suicide Prevention Community Outreach Initiative** - To build capacity across the state to promote local suicide prevention efforts by building/expanding 20 to 25 new effective and efficient coalitions and partnerships.

- **Improve and Implement Suicide Prevention School-based Initiatives** - To support and build the following school-based initiatives:
  1) Professional development related to suicide prevention.
  2) Grants to school districts to develop and implement suicide prevention initiatives within their curricula, increase in-school mental health support, conduct staff development, and educate students and parents/other caregivers.
• **Improve Suicide Prevention Data Collection and Analysis** - To provide the following services:
  1) To develop and implement the Illinois Violent Death Reporting System (IVDRS) statewide in order to collect more effective and accurate data on suicide deaths in Illinois.
  2) To work with an epidemiologist to analyze suicide attempt data statewide, train providers on how to collect better data, and provide reports on data by county.

• **Support Suicide Prevention Evaluation and Research** - To support research-based evaluation methods and technical assistance to plan for replication of suicide prevention efforts in Illinois according to outcome measures.

### CONCLUSION

In conclusion, the Illinois Suicide Prevention Alliance is committed to suicide prevention and improving mental health and well-being. Per the requirements in Public Act 093-0907, the alliance is dedicated to overseeing the implementation of the Illinois Suicide Prevention Strategic Plan.

### ILLINOIS SUICIDE PREVENTION ALLIANCE (ISPA) MEMBERS in 2008

<table>
<thead>
<tr>
<th>APPOINTED MEMBER</th>
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<tbody>
<tr>
<td>Judy Ashby</td>
<td>LifeSavers Training Corporation</td>
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<tr>
<td>Sherry Bryant</td>
<td>Survivor</td>
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<tr>
<td>Stanley Lewy</td>
<td>American Foundation for Suicide Prevention</td>
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<tr>
<td>Thomas Mannard</td>
<td>Illinois Council Against Handgun Violence</td>
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<tr>
<td>Becky Markwell</td>
<td>Illinois Higher Education Center</td>
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<tr>
<td>Blanche “Buzz” Hays</td>
<td>Survivor</td>
</tr>
<tr>
<td>Sharmeice Snyder</td>
<td>Jason Foundation at Streamwood Behavioral Health Systems</td>
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<tr>
<td>Shannon Sullivan</td>
<td>Illinois Safe Schools Alliance</td>
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<tr>
<td>Lora Thomas</td>
<td>NAMI Illinois - National Alliance on Mental Illness</td>
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<tr>
<td>Stephanie Weber</td>
<td>Suicide Prevention Services</td>
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<tr>
<td>Carol Wozniewski</td>
<td>Mental Health America of Illinois (Co-Chair)</td>
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<tr>
<th>EX-OFFICIO MEMBER</th>
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<tr>
<td>Sergeant Jill Allen</td>
<td>Illinois State Police</td>
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<tr>
<td>Reshma Desai</td>
<td>Illinois Violence Prevention Authority</td>
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<tr>
<td>Dr. Sam Gaines</td>
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<td>Illinois Department of Public Health, Injury and Violence Prevention</td>
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<tr>
<td>Jennifer Martin</td>
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<td>Mary Mayes</td>
<td>Illinois Department on Aging</td>
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<td>Jessica O’Leary</td>
<td>Office of the Illinois Attorney General</td>
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<td>Marilyn Peebles</td>
<td>Illinois Department of Children and Family Services</td>
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<tr>
<td>Wendy Blank</td>
<td>Illinois Department of Corrections</td>
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<tr>
<td>Patricia Reedy</td>
<td>Illinois Department of Human Services, Division of Mental Health</td>
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<tr>
<td>Glenn Steinhausen</td>
<td>Illinois State Board of Education (Co-Chair)</td>
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Suicides by County

- 61 or More (25)
- 29 to 60 (25)
- 16 to 28 (26)
- 4 to 15 (26)

Source: IDPH, Illinois Center for Health Statistics
Illinois Department of Public Health
Suicide Rate per 100,000
2002-2006 Aggregated

Suicide Rate per 100,000
Source: IDPH, Illinois Center for Health Statistics

Note: Counties in white had less than 10 deaths during the time period. A rate would not meet standards of reliability and precision.

Source: IDPH, Illinois Center for Health Statistics
Copies of this report are available at
http://www.idph.state.il.us/pub_home.htm

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