

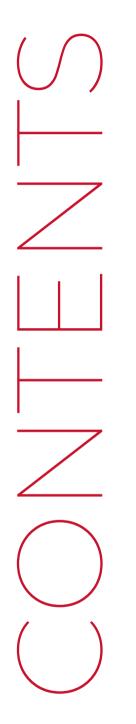
Connecting to Hope

Suicide Prevention Awareness Month Toolkit

Office of Suicide Prevention



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Resources Media, fact sheets, and references Suicide is preventable. By building awareness and promoting care, Marylanders can make a difference.

This Suicide Prevention Awareness Month, Maryland is **connecting to hope.**

The Office of Suicide Prevention, housed in the Maryland Department of Health's Behavioral Health Administration, works year-round to promote mental well-being and prevent suicide. Every year, the office leads a campaign for Suicide Prevention Awareness Month that brings together partners and communicates essential information to the public.

Connecting to hope is a process that requires consistent effort and support. Focusing on hope emphasizes the opportunities for growth and recovery. Suicide is preventable. Through building awareness and essential skills, anyone can support people at risk.

This toolkit will...

- INFORM you by sharing important facts about suicide
- EDUCATE you about safety planning and lethal means safety
- **TRAIN** you through course offerings
- **CONNECT** you to suicide prevention organizations and resources
- SUSTAIN you with resources to care for yourself and others

Included in the toolkit are resources and media templates that can be shared widely. If you share any of our resources, you can tag us @mdhsuicideprev on Instagram, Facebook, or X.

Use **#ConnectingtoHope** in your posts to be part of the campaign.

For information about conferences, training, and events, please visit **linktr.ee/mdhsuicideprevention**

Please reach out to **mdh.suicideprevention@maryland.gov** if you have any questions or feedback to share.

Together, we can prevent suicide!

Key Events



World Suicide Prevention Day

Annually on September 10

World Suicide Prevention Day is a time to remember those affected by suicide, to raise awareness, and to focus efforts on directing treatment to those who need it most. Honoring this day is an annual worldwide commitment and action to prevent suicides, with various activities around the world since 2003. **Wear yellow to show your support.**

National Suicide Prevention Week

The second week of September

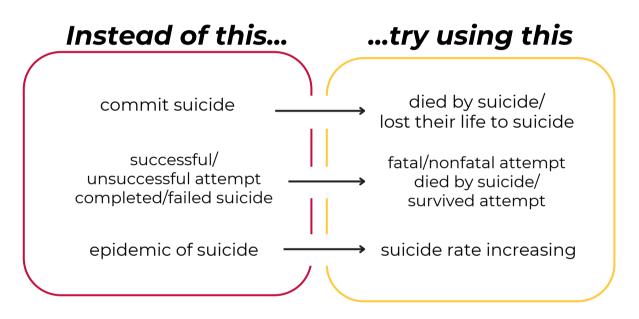
This annual week is a campaign to inform the public about suicide prevention and the warning signs of suicide. During this week, we encourage you to share suicide prevention resources and stories of hope. Use **#ConnectingtoHope** in your posts to join the campaign!

WORDS MATTER

How we communicate about suicide - in media, in messaging, and in personal conversations - makes a difference. As you share messages about suicide prevention, consider the impact of the language you use.

Avoid Stigmatizing Language

In general, avoid using language around suicide that reinforces negative stereotypes and prejudice. It's important to emphasize hope and recovery.



Report on Suicide Responsibly

Media coverage of suicide can be highly impactful. When suicide is sensationalized, it can contribute to increased risk of suicide in the community. When suicide is reported on responsibly, it can actually promote help-seeking for those at risk of suicide.

For more information Visit the Reporting on Suicide website. reportingonsuicide.org Visit the Canada Centre for Addiction and Mental Health Words Matter website. camh.ca/en/today-campaign/help-and-resources/words-matter



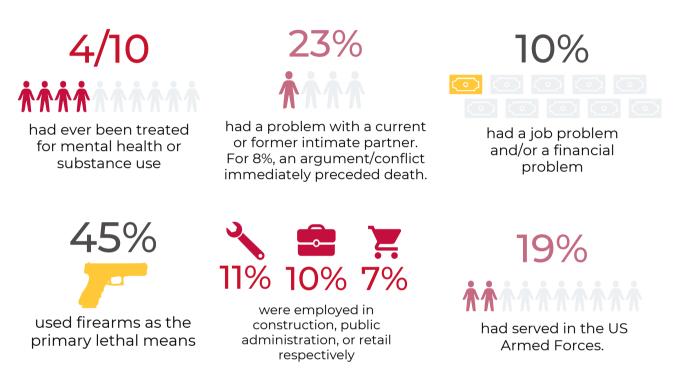
INFORM

Accurate and current data can inform suicide prevention, providing evidence to fight stigma and misconceptions. Key data points highlight the impact of suicide in our communities.

Suicide in Maryland: Data Snapshot

Between 2018-2022, an average of 624 Marylanders died by suicide annually. [1] In 2022, there were 12,382 years of potential life lost to suicide in Maryland. [1] It is estimated that a single suicide impacts an average of 135 people. [3]

According to Maryland Violent Death Reporting Systems Data from 2003-2020, of the people who died by suicide... [7]



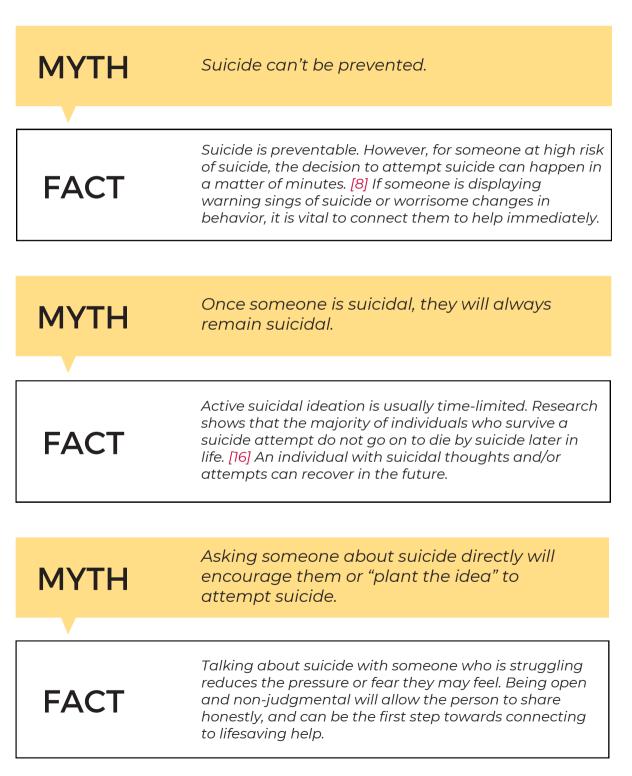
Nationally, some communities and groups have elevated risk and/or increasing rates of suicide.

- In 2022, suicide was the 2nd leading cause of death for ages 10-14. Suicide was the 3rd leading cause of death for ages 15-24 and 25-34. [2]
- Older men ages 75+ have the highest rates of suicide compared to other age groups. [17]
- The suicide rate for Black youth ages 10-19 surpassed that of their White peers for the first time in 2022, increasing 54% since 2018, compared to a 17% decrease for White youth. [4]
- In 2021, the racial/ethnicity group that had the highest rate of suicide in the US was American Indian and Alaska Native people. [5]
- 39% of LGBTQ young people seriously considered suicide in 2024. Percentages were higher for LGBTQ youth of color. [6]

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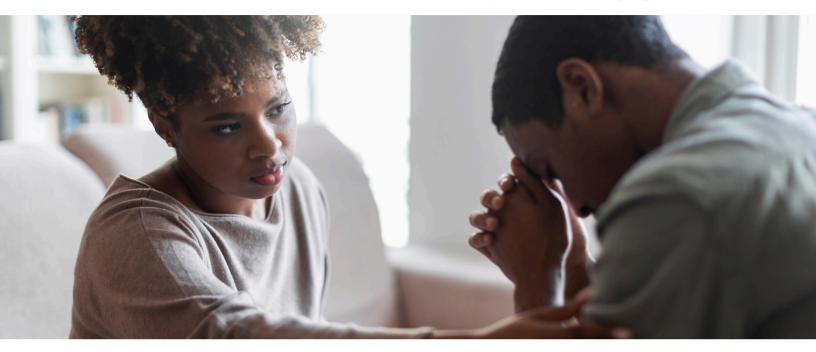
Suicide is Preventable

Suicide can be a difficult subject to learn about, but many people have an incomplete or misinformed understanding of suicide. It's important to debunk myths about suicide. Stigma and misconceptions hinder open conversations that can be lifesaving. [15]



Asking the Question

It is important to ask directly about suicide, if you are worried about someone. If you aren't sure when to ask the question, keep an eye out for **warning signs.**



Talking About

- Wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Feeling hopeless or having no reason to live
- Feeling trapped or in unbearable pain
- Feeling extremely guilty or ashamed
- Being a burden to others

- Behavior Change
- Increasing the use of alcohol or drugs
- Losing interest in activities
- Acting anxious or agitated; behaving recklessly and irrationally
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings
- Sharp drop in performance
- Giving away possessions

Warning signs can look different for every person. Ask about suicide directly:

"Are you thinking about suicide?" "Are you thinking of killing yourself?" "Are you thinking about ending your life?"

Avoid using less specific questions, like "are you thinking about hurting yourself?" or "you wouldn't do anything drastic/stupid, would you?" You want to be direct to encourage openness and honesty.

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If you are ever in a conversation about suicide, **Remember Your ABCDEs.**

Ask Directly. Asking someone directly, "are you thinking of suicide?" can be the open door to a conversation that they've been needing. Ask the person if they have a plan for suicide, and if they know what they would use to carry out their plan.

Be an Active Listener. Be there to listen with compassion and empathy. Avoid judgmental or dismissive statements. Let the person share their feelings and story. Do not jump to advice-giving, and stay calm.

Continue to Keep Them Safe. Do not leave someone alone if they are thinking about suicide. If applicable, remove what they planned to use (firearms, medications, etc.). If you think the person is in immediate danger, call or text 988. You can also take them to the nearest emergency room or crisis center.

Discuss Options and Connect to Help. Find out who they can reach out to for help, whether it's a therapist, a doctor, friends or family. For additional support, call or text 988.

Encourage, Support, and Follow Up. Follow-up with the person in the days and weeks after the crisis to let them know you're thinking of them.

Lived Experience of Suicide

People with lived experience of suicide include...

- Individuals who have experienced suicidal ideation, behaviors, or crisis
- Individuals who have survived a suicide attempt or multiple suicide attempts
- Individuals who have experienced a loss or losses to suicide

Involving individuals with lived experience in suicide prevention

- People who have attempted suicide or have been affected by a suicide death are at higher risk of suicide. Engaging them in their own care has been shown to reduce suicide risk.
- The insights of people with lived experience are extremely valuable in prevention planning, treatment, and education. This leads to improved care, enhanced safety, reduced suicide attempts and deaths, and improved support for loss and attempt survivors.
- The stories of individuals with lived experience are incredibly powerful, can help reduce suicide stigma, and can encourage help-seeking behavior.

After a suicide attempt or suicide loss

- Engage in self-compassion and self-care.
- Seek help from a mental health professional and community resources.
- Talk to those you trust.
- Explore peer support options, including support groups.
- Develop a safety plan.

For Attempt Survivors

Visit the 988 Lifeline website. <u>988lifeline.org/help-yourself/attempt-survivor</u>

For Loss Survivors

Visit the American Foundation for Suicide Prevention website. <u>afsp.org/ive-lost-someone</u>



EDUCATE

The Office of Suicide Prevention works in many areas related to suicide prevention. This Suicide Prevention Awareness Month, we focus on two key interventions (Safety Planning & Lethal Means Safety) that can make a big impact.

Safety Planning

A safety plan is a set of resources and instructions that can guide a person during a mental health or substance use crisis. This brief intervention can develop a concrete plan for supporting safety. Although there are clinical safety plans, there are also types of safety planning that can be done with loved ones or individually. Research points to safety planning being effective at reducing suicidal behavior for those who have been hospitalized for suicide-related concerns. [9]

What goes in a safety plan?

Safety planning typically includes identifying...

- Warning signs
- Internal coping strategies
- People and places that provide distraction
- People the individual can ask for help during a crisis
- Professionals or agencies the individual can contact during a crisis
- Plans to make the environment safer (lethal means planning)

How do I develop a safety plan?

Safety planning can be done independently, or can be done in partnership with a loved one or mental health professional. There are three important things to remember:

- Safety planning should not be done during a crisis. Planning should be done when an individual is stable and in a clear state of mind.
- **Safety plans are NOT contracts.** They are voluntary guidelines developed and driven by the person who is at risk of suicidal crisis.
- **Consulting with a clinician is recommended.** A clinician can provide additional insight and valuable resources. Remember, you can always call, text, or chat 988 for additional resources.

- For Safety Plan Templates

Visit the My Safety Plan website to access a guided safety plan. <u>mysafetyplan.org</u> Download the Suicide Safety Plan mobile app. <u>suicidesafetyplan.app</u>

Lethal Means Safety

Lethal means are objects (e.g., medications, firearms, sharp instruments) that can be used to seriously harm or kill oneself or others. "Lethal means safety" is an intentional, voluntary practice to reduce suicide risk by limiting access to lethal means.

Reducing access to lethal means is an important part of suicide prevention. The lethal means that a person decides to use during a suicidal crisis often depends on what is available. Because there is usually less than an hour between the decision to attempt suicide and the attempt, making means difficult to access can prevent suicide. [8]

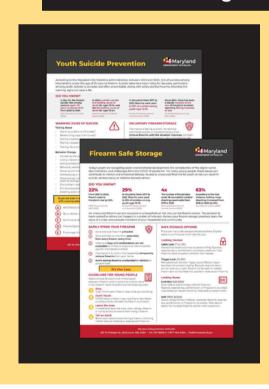
Asking about lethal means is part of asking the question. Work with a person at risk of suicide to remove access to lethal means, at least temporarily.



Firearms and Suicide

Ensuring that firearms are stored securely and handled appropriately is essential to preventing suicides. Suicides make up the majority of all gun-related deaths in the US. [11] Suicide attempts using firearms are also highly lethal, with 90% of firearm suicide attempts ending in death. [12] Research shows that there is a low rate of means substitutions among people who are suicidal, meaning that if the preferred means is removed, a person in crisis is less likely to attempt. [13] Since firearms are so lethal, it is critical that access to firearms is restricted for a person who is thinking about suicide.





Firearm Safe Storage & Youth Suicide Prevention Guide

For youth in distress, access to unsecured firearms can result in suicide, serious injury, or violence towards others. As part of ongoing efforts to reduce youth suicides, reduce firearm violence and improve health outcomes for all Marylanders, the Maryland Department of Health has developed a Firearm Safe Storage and Youth Suicide Prevention Guide.

This guide was developed as part of the 2023 Legislative Session's Senate Bill 858 Firearm Safe - Storage Requirements and Youth Suicide Prevention (Jaelynn's Law). This effort aligns with the Moore-Miller Administration's goal of encouraging a public health approach to reducing firearm violence.

To learn more and access the guide, visit **health.maryland.gov/firearm-safety**

Voluntary Safe Storage

One of the most important things that responsible firearm owners can do is to limit access. One unsecured firearm can put everyone in a household at risk of killing or injuring themselves or others, not just the firearm owner. Whatever securing devices are chosen, make sure to keep keys and combinations away from children, unauthorized users, and people at risk of harming themselves or others. Store firearms unloaded, locked, and separate from ammunition.

If someone in the home is feeling suicidal, has recently attempted suicide, or is experiencing a crisis, it is safest to remove lethal means from the household entirely until the situation improves. **In cases of crisis, consider storing firearms temporarily at an external voluntary safe storage option near you.**



For Safe Storage Near You

Visit the Maryland Safe Storage Map website. <u>mdpgv.org/safestoragemap</u>

Extreme Risk Protective Orders

An extreme risk protective order (ERPO) is a civil court-issued order that temporarily prohibits individuals who are found to be a danger to themselves or others from purchasing or possessing a firearm, rifle, or shotgun. In Maryland, ERPOs can be filed by:

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- Family members
- Law enforcement
- Health care professionals including...
 - Physician
 - Psychologist
 - Clinical Social Worker (LCSW)
 - Licensed Clinical Professional
- Counselor (LCPC)
- Clinical Nurse (specializing in psychiatric/mental health nursing)
- Psychiatric Nurse Practitioner
- Licensed Clinical Marriage or Family Therapist (LMFT)
- Health Officer
- Designee of a Health Officer who has examined the individual

For more about ERPOs

Visit the Bloomberg American Health Initiative ERPO Website. <u>americanhealth.jhu.edu/implementERPO</u>



TRAIN

Suicide prevention training raises awareness and builds skills that can help to save lives. There are training options available for anyone, whether you are just beginning to learn about suicide prevention, or you are an experienced mental health professional looking to add tools to your toolbox.

Building Essential Skills

The provision of suicide prevention training is a critical function of the Office of Suicide Prevention. It is essential that behavioral health professionals, community gatekeepers, and the general public are offered opportunities to learn and engage with suicide prevention. Suicide prevention training can be tailored to a wide variety of audiences – it can increase awareness and decrease stigma for the general public, or it can help build critical skills for clinicians.

The Office of Suicide Prevention continues to offer trainings every year, most of which provide continuing education units (CEUs) for counselors, psychologists, and social workers.

Training topics will always focus on our office's main mission of suicide prevention, intervention, and postvention.

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• Mental Health First Aid

 A skills-based training course that teaches participants about mental health and substance-use issues, including how to recognize a mental health challenge or crisis and how to connect to help.

• Trainings with the Trevor Project

- Ally Training creates dialogue about being an adult ally for LGBTQ youth and informs about common terminology.
- CARE Training (Connect, Adapt, Respond, Empower) provides an overview of suicide among LGBTQ youth.

• Question, Persuade, Refer (QPR)

 Three steps anyone can learn to help prevent suicide. These courses are designed to teach professionals how to reduce the immediate risk of suicide and provide longerterm care for those at risk.

Through the Office's monthly newsletter, suicide prevention training throughout Maryland is shared with thousands of advocates, clinicians, and community members.

Stay Up to Date with Training

Subscribe to the Office of Suicide Prevention email list for monthly updates. <u>linktr.ee/mdhsuicideprevention</u>



CONNECT

Suicide prevention is a community effort. In Maryland, there is a strong coalition of champions and organizations working to prevent suicide. For anyone who is interested in joining the growing community of suicide prevention advocates in Maryland, there are limitless opportunities.

A Coalition of Partners

There are many organizations engaging in suicide prevention. Here are a few key partners that frequently collaborate with the Office of Suicide Prevention.

Together We Care is a set of community-driven campaigns supported by the Office of Suicide Prevention. These campaigns spotlight and elevate suicide prevention and mental health promotion for historically underserved and excluded groups. Each campaign is undertaken in partnership with grassroots organizations that serve these communities.

Taking Care of Us

Strengthening Black and Brown Communities through Mental Health Equity and Advocacy

Key Partners

Black Mental Health Alliance develops,

promotes, and sponsors culturally-relevant educational forums, trainings, and referral services that support the health and wellbeing of Black people and their communities.

blackmentalhealth.com

Office of Minority Health and Health

Disparities addresses the social determinants of health and eliminate health disparities by leveraging the resources of the Maryland Department of Health, providing health equity consultation, guiding policy decisions, and influencing strategic direction on behalf of the Secretary of Health.

health.maryland.gov/mhhd



Caring Out Loud

Empowering LGBTQ+ Youth and Young Adults through Mental Health Training, Advocacy, and Action

Key Partners

The Trevor Project works to end suicide among LGBTQ young people through provision of crisis services, training, research, and advocacy. The Trevor Project offers a tollfree telephone line where confidential assistance and crisis support is provided by trained counselors.



thetrevorproject.org

Caring for Communities

Supporting Native and Indigenous Communities through Mental Health Training, Equity, and Advocacy

Key Partners

Native American Lifelines promotes health and social resiliency within Urban American Indian communities. Native American LifeLines applies principles of trauma informed care to provide culturally centered behavioral health, dental, outreach and referral services.



nativeamericanlifelines.org

Caring for Champions

Fortifying mental health and suicide prevention efforts targeting the athletic community.

Key Partners

Alston for Athletes provides mental health resources and training to athletic directors, coaches, and student-athletes across the country. This work will expand to include coaches, sports medicine professionals, and other high-contact athletic support personnel. AFA's mission is to advocate for student-athlete mental health awareness through policy change and providing access to mental health services.



alstonforathletes.org

Governor's Commission on Suicide Prevention



The Governor's Commission was created in 2009 to strengthen and coordinate the state's suicide prevention, intervention, and postvention services. Governor's Commission meetings are open to the public, and are available to stream on the Office of Suicide Prevention's Facebook page (@mdhsuicideprev).

 For more about the Governor's Commission
 Visit the Governor's Commission webpage.
 health.maryland.gov/bha/suicideprevention/Pages/governor's-commissionon-suicide-prevention.aspx

988 and Crisis Services

What is 988?

988 is the National Suicide & Crisis Lifeline. You can call, text, or chat 988.

Contacting 988 connects people directly to the National Suicide & Crisis Lifeline, which encompasses all behavioral crisis services, to include all mental health and substance use (problems with drug and alcohol use).

The 988 Suicide & Crisis Lifeline replaces the National Suicide Prevention Lifeline AND expands services to cover all behavioral health crisis services.



SUICIDE & CRISIS

The Lifeline provides live crisis center phone services in English and Spanish and provides translation services in over 150 additional languages for people who call 988.

Here are all of the ways to connect:

- Call 988, the Suicide & Crisis Lifeline
 - Press I for the Veterans Crisis Line
 - Press 2 for Spanish
 - Press 3 for LGBTQ+ support
- Text 988 (English and Spanish)
- Chat online: <u>988Lifeline.org</u>
- 988 For Deaf, Hard of Hearing, Hearing Loss
 - 988lifeline.org/help-yourself/for-deaf-hard-of-hearing
- 988 for Youth
 - <u>988lifeline.org/help-yourself/youth</u>
- 988 for Loss Survivors
 <u>988lifeline.org/help-yourself/loss-survivors</u>

Learn more about 988

Visit Maryland's 988 webpage. **988.maryland.gov**

Suicide Prevention Non-Profits

American Foundation for Suicide Prevention Maryland Chapter

The grassroots work the American Foundation for Suicide Prevention (AFSP) does focuses on eliminating the loss of life from suicide by: delivering innovative prevention programs, educating the public about risk factors and warning signs, raising funds for suicide research and programs, and reaching out to those individuals who have lost someone to suicide. AFSP Maryland brings together people from all backgrounds who want to prevent suicide in the state. Families and friends who have lost someone to suicide, vulnerable individuals, mental health professionals, clergy, educators, students, community/business leaders, and many others energize the chapter.

Out of the Darkness Walks

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Every year, AFSP coordinates fundraising walks around the country for suicide prevention. The core of the Out of the Darkness movement, which began in 2004, are these community walks. These events give people the courage to open up about their own connections to the cause, and a platform to create a culture that's smarter about mental health. Friends, family members, neighbors and coworkers walk side-by-side, supporting each other and in memory of those who have been lost to suicide.

Find a local Out of the Darkness Walk at the AFSP website: supporting.afsp.org/index.cfm?fuseaction=cms.page&id=1370

Visit the Maryland Chapter website.

Mental Health Association of Maryland

MHAMD is Maryland's only volunteer nonprofit citizens organization bringing together consumers, families, professionals, advocates, and concerned citizens for unified action in all aspects of behavioral health. MHAMD envisions a just, humane, and healthy society where each individual is accorded respect, dignity, and the opportunity to achieve their full potential — free from stigma and prejudice.

Mental Health Association of Maryland, cont.

MHAMD provides a wide array of programs and public awareness campaigns, including training and peer support services for older adults. MHAMD also champions advocacy efforts every legislative season.

Connect with MHAMD

Visit the Mental Health Association of Maryland website. **mhamd.org**

NAMI Maryland

The National Alliance on Mental Illness (NAMI) Maryland Chapter provides educational resources and events, statewide outreach, advocacy and affiliate organizational support. NAMI Maryland provides the free trainings that allow NAMI affiliates to deliver NAMI programs.

Local NAMI affiliates in Maryland offer free peer support, education and outreach programs, and engage mental health advocates in their communities.

NAMI Maryland encompasses a strong statewide network of more than 43,000 families, individuals, community-based organizations and service providers. These members and supporters are the face and voice of the NAMI Maryland movement--families, individuals, friends and businesses--who come together to celebrate mental illness recovery, to honor those who have lost their lives to mental illness and to combat stigma, promote awareness and advocate for others.

NAMI Maryland provides public education workshops, teleconferences on specific issues, and carry out an ongoing campaign and public policy agenda to improve mental health services throughout the state, reduce the stigma associated with mental illness, and support effective treatment and recovery programs.

Connect with NAMI Maryland Visit the Maryland Chapter website.

namimd.org/about_nami_maryland



SUSTAIN

In suicide prevention, there are no one-size-fits-all solutions or easy fixes. Effective suicide prevention requires consistent effort from a healthy community. To stay engaged over time without burning out, it is essential to care for yourself – especially if you have been personally impacted by suicide.

The Value of Self-Care

Self-care is intentional time taken to do things to improve your own mental and physical well-being. Due to the tragic nature of suicide, suicide prevention can be mentally and emotionally draining. Practicing self-care protects your health, and is extremely important for those who are participating in suicide prevention efforts.

Self-care looks different for everyone. If you don't have one already, consider developing an individualized self-care plan. Here are a few questions to ask yourself: [14]

What kinds of activities are self-care for me? Try to list a variety of activities, and make sure to include some that are simple and readily available for challenging days.

Who are the people I can talk to? Think about who you can connect with and trust, regardless of whether you're having a good day or a bad day.

Who are the people I can ask for help? Make a list of people and resources you can lean on if you are struggling. Your list should include 988 – you can always call for more information and resources.

There are hundreds of resources to help guide you with self-care and selfcompassion. Although smartphone applications are a relatively new way to practice self-care, there are many choices available. The One Mind PsyberGuide is a free resource where apps and digital health resources are categorized and reviewed by experts.

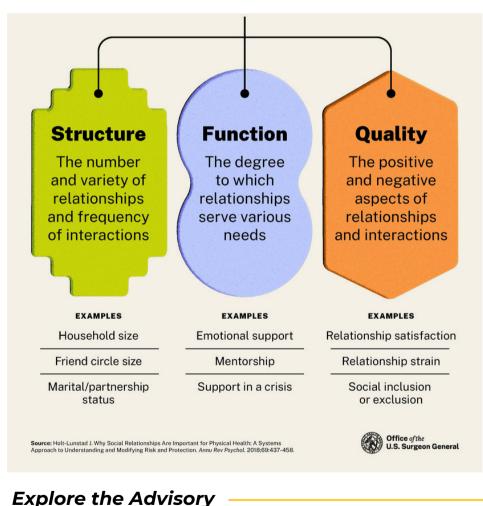
Find a Wellness App for You!

Visit the One Mind PsyberGuide website. <u>onemindpsyberguide.org</u>

Social Connection

Our relationships with loved ones and with our communities are essential to our overall wellbeing. With social isolation rising, it is more important than ever to prioritize social connection in our lives. Social connection has a tremendous positive impact on mental, emotional, and physical health.

In May 2023, the US Surgeon General Dr. Vivek Murthy released a Surgeon General's Advisory focused on "Our Epidemic of Loneliness and Isolation." Studies cited in the Surgeon General's advisory showed that deaths by suicide, along with risk of self-harm, are associated with loneliness and indicators of isolation. [19] The advisory highlights the healing effects of social connection. This month, consider the **Three Vital Components of Social Connection**, and ways that you might improve or deepen your social connections:



Visit the US Surgeon General's Social Connection Priority Area Website. hhs.gov/surgeongeneral/priorities/connection/index.html

Connecting to Hope



For many Marylanders, suicide is a tragedy that has touched their lives in painful, traumatic ways. Our communities are forever shaped by the hundreds of lives we lose to suicide every year.

Still, for those around us who are struggling with despair today, there is an opportunity to connect to hope. With the help of engaged and informed communities, we can prevent suicide.

Take time to check in with loved ones. Share information, learn more, and help fight against stigma by debunking myths about suicide. Join the community of suicide prevention advocates through events like the Maryland Annual Suicide Prevention Conference and AFSP Out of the Darkness Walks. Consider reaching out to organizations involved in suicide prevention in Maryland to learn more about available support. Save 988 on your phone, and spread the word about our National Suicide & Crisis Lifeline. Most importantly, engage in self-care and selfcompassion, and know that you are never alone. You matter. There are always resources available to help you connect to hope.

The Office of Suicide Prevention encourages you to be the difference in your community, during Suicide Prevention Awareness Month and beyond. Thank you for learning about and supporting suicide prevention in Maryland!

If you would like to learn more, or if you have any questions, email us at <u>mdh.suicideprevention@maryland.gov</u>.



RESOURCES

For Suicide Prevention Awareness Month, the Office of Suicide Prevention has developed and compiled materials to supplement this toolkit. These resources include social media posts, selected factsheets, and references.

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!



Suicide is preventable.

Be SMART

with Firearms

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!

@mdhsuicideprev

prevention is lethal means safety.

> Being SMART with firearms benefits the individual and those around them.

A key component to suicide

#ConnectingToHope #SafeStorage

Store firearms unloaded, locked & separate from ammunition.

Keep keys and combinations away from children & people at risk of crisis.

firearms are lethal

Pew Research Center, 2023; Conner A, et al. (Annals of Internal Medicine), 2019

Suicides make up the majority of gun-related deaths in the US

90% of suicide attempts using

@mdhsuicideprev

What is a Safety Plan?

A safety plan is a set of resources and instructions that can guide a person during a mental health or substance use crisis. Safety plans are NOT contracts. Instead, they are voluntary guidelines developed and driven by the person at risk of crisis.

> plans can be developed... with a clinician with a loved one on your own!

A safety plan can be done individually or with a mental health professional

Download the Connecting To Hope Suicide Prevention Awareness Month Toolkit to learn more about Safety Planning.

#ConnectingToHope #SafetyPlanning

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!



Established in 2003, World Suicide Prevention Day was created by the International Association for Suicide Prevention and the World Health Organization (WHO) to share the message that suicide is preventable. Learn More about the history of World Suicide Prevention Day at <u>https://www.iasp.info/WSPD/a</u> bout/

#SuicidePreventionDay #ConnectingtoHope #WearYellow

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World Suicide Prevention Day

@mdhsuicideprev

Established in 2003, World Suicide Prevention Day was created by the International Association for Suicide Prevention and the World Health Organization (WHO) to share the message that suicide is preventable. Learn More about the history of World Suicide Prevention Day at <u>https://www.iasp.info/WSPD/a</u> bout/

#SuicidePreventionDay #ConnectingtoHope #WearYellow

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!



HELP IS ALWAYS AVAILABLE 988lifeline.org

If you are struggling, you are not alone.

Text, Call, or Chat 988 at anytime to speak to a trained mental health professional, have a supportive conversation, and connect to resources. 988lifeline.org

#ConnectingtoHope #Connect2Help #988

Hey, I've noticed you've been different lately.

> Have you been thinking about suicide?

Asking the question can save a life.

Asking someone if they're thinking about suicide does not increase the risk of suicide. It can open a conversation that can save a life.

If a loved one is showing warning signs and/or experiencing a mental health crisis, ask the question and connect to help.

#ConnectingToHope #StartTheConversation

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!



Connect to Hope through Social Connection

@mdhsuicideprev

You can't pour from an empty cup.

What are you doing for SELF-CARE?



Connecting with others is essential for suicide prevention and our overall wellness.

Plan some time with a loved one this week!

#ConnectingToHope #SocialConnection

There's no way to pour into others if your own cup is empty.

This Suicide Prevention Awareness Month, create a list of ways you can fill your cup. Go to

<u>https://onemindpsyberguide.o</u> <u>rg/</u> for more self-care resources.

#ConnectingtoHope #FillYourCup #selfcare #selfcompassion

@mdhsuicideprev

Shareable social media, along with recommended captions, are below. Use the graphics and messages to encourage your community to Connect to Hope!

Banners

Youth Suicide Prevention Awareness



All Age Suicide Prevention Awareness



Digital Meeting Background



Youth Suicide Prevention Awareness



All Age Suicide Prevention Awareness

Navigating the Behavioral Health System



Navigating the behavioral health system can be complicated. If you or a loved one needs care, particularly for a suicide-related concern, there are a few key points to consider.

Where Do I Start?

There are many behavioral health provider options that suit different needs. It may take time to find the best provider for your child. Professionals who can help include:

- Medical Doctors, including Pediatricians and Psychiatrists (MD)
- Nurse Practitioner (NP)
- Psychologist (Ph.D. and Psy.D)
- Social Worker (LCSW)

- Counselor (LCPC)
- Marriage and Family Therapist (MFT)
- Crisis Support Specialist
- Peer Specialist

How Do I Find Help?

Your health insurance company will be able to guide you towards a provider that is in your network. In-network providers are typically less expensive than out-of-network providers. If you do not have insurance, you can sign up for Medicaid or low-cost insurance. Your Local Behavioral Health Authority, Core Service Agency, or Local Addiction Authority can also help you find a local provider.

Therapy to Consider

Some therapy modalities have been shown to reduce suicidal ideation and suicidal behavior. Cognitive Behavioral Therapy (CBT) and Dialectical Behavioral Therapy (DBT) are two of the top evidence-based therapy modalities that help with suicidal ideation and suicidal behaviors.

Types of Treatment Options

There are many types of treatment options that fulfill different behavioral health needs. Here are some options to consider.

- Individual Therapy: One-on-one therapy between the therapist and the individual seeking help.
- Family Therapy: Family members work together under the supervision of a therapist with the main purpose of improving familial relationships.
- **Group Therapy:** A group of people meet to describe and discuss their problems together under the supervision of a therapist.
- Medication Therapy: One-on-one consultations with a psychiatrist to discuss how medication can assist, typically in combination with psychotherapy.
- Targeted Case Management (TCM) Provider: Supports clients with mental health needs through connections to community partners to achieve life goals. A TCM Case Worker can offer parenting support, school support, and a connection to transportation.
- Assertive Community Treatment (ACT): ACT teams serve individuals who have been diagnosed with serious and persistent forms of behavioral health challenges. The team is usually comprised of a clinician and a peer. Promotes independence, rehabilitation, community integration, and recovery.
- Psychiatric Rehabilitation Services: Individualized psychiatric rehabilitation services often include attending a day program, as well as a wide range of programs designed to promote independent living skills.

- Residential Rehabilitation Services (16 years and older): An adolescent moves into a community that has staff on-site anywhere between 40 hours a week to 24/7. Staff assist with administering medications, and teaching daily living and coping skills.
- Intensive Outpatient Program: Structured non-residential psychological treatment program that addresses concerns that do not require detoxification through a combination of group and individual psychotherapy, family counseling, groups, and strategies for encouraging engagement in treatment.
- Residential Treatment Center: Provides intensive help for youth with serious behavioral health challenges. Children temporarily live outside of their homes and in a facility where they can be supervised by trained staff 24/7.
- Behavioral Health Walk-In & Urgent Care Centers: Non-crisis patients typically receive a mental health evaluation by a Mental Health Clinician or Psychiatric Nurse Practitioner. Patients in crisis will be typically be referred to the emergency department.
- Hospitals/Emergency Departments: Emergency stabilization during crisis. It is important to note that wait times and costs can be a limiting factor with this option. Your local hospital may have a crisis counselor or a walk-in crisis wing. Consider looking into these services if you have a child at risk of a crisis.

Additional Services That May Help

Every county in Maryland has different programs available. Your Local Behavioral Health Authority, Core Service Agency, Local Addition Authority, your doctor, or therapist can guide you to the programs that are available in your county. Below is a list of potential programs to ask about.

Maryland Coalition of Families (MCF) is the first and only statewide nonprofit organization that offers family peer support to people and families who have a loved one experiencing mental health, substance use, or problem gambling challenges. Using their personal experience caring for their own loved one, our Family Peer Support Specialists offer emotional support, resource connection, and systems navigation at no cost. mdcoalition.org

The American Foundation for Suicide

Prevention (AFSP) is a voluntary health organization that advocates for research and education about suicide. The organization's stated mission is to "save lives and bring hope to those affected by suicide". <u>afsp.org</u>

The National Alliance on Mental Illness

(NAMI) is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. The NAMI organization operates at the national, state, and local level.

<u>namimd.org</u>

988 Suicide and Crisis Line provides 24/7, 365 assistance for behavioral health concerns. 988 Suicide and Crisis Line can connect you to local mental health resources near you. You can call, text, or chat 988. 988 also offers multiple language options for accessibility. <u>988lifeline.org</u>

The Maryland Department of Social

Services offers many family-oriented programs.

- Family Preservation Services: Enhances the parent's ability to create a stable and nurturing home environment. They also provide, refer to, and coordinate services needed to achieve or maintain family safety, stability, independence, and unity.
- Integrative Therapeutic Family Services: ITFS provides support services to youth who experience symptoms or behaviors that threaten to disrupt their current placement. ITFS staff work with the families in their homes. Grant-funded services are provided at no cost to the families.

MENTOR Maryland (MM): MM serves children and adolescents who are facing a range of challenges and their families. MM offers services and supports that lead to growth and independence, regardless of the physical, intellectual or behavioral challenges that individuals face. md-mentor.com

Parent CRAFT is an online video course that teaches parents the skills they need to meet the risks of substance misuse. This course is free for residents of Maryland who want help getting their child to accept substance use treatment.

<u>cadenceonline.com/maryland</u>

Behavioral Health Treatment - FAQ



Q How long is a therapy session?

The session length varies depending on what you want, what the behavioral health professional offers, and what costs the insurance will cover. They typically range anywhere from 40 minutes to an hour.

Q How often will I go to a therapist?

The frequency varies on what you want, what the behavioral health professional suggests for your specific needs, and what costs the insurance company will cover.

Q How much does therapy cost?

Cost varies widely depending on the provider, your income, and what costs your insurance company will cover. If you only have to pay a co-pay, therapy could be as little as \$20/session. It can be as much as \$240 a session for psychiatry visits. Some professionals offer a sliding scale cost based on income level. It is important to ask for the cost upfront.

Q How do I set up my first appointment?

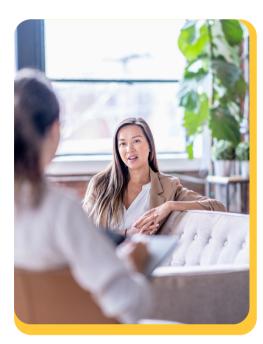
Follow these steps:

- Call your mental health provider. Ask them how to prepare for your first appointment. Each provider has their own process.
- Collect any documentation the mental health provider requested. This may be identification, insurance card, past medical history, new client forms, medication and supplement list, etc.
- Consult your insurance company for cost and coverage information.
- If you are doing a telehealth appointment, make sure you have the proper program downloaded. It may be useful to test the program with a friend or family member beforehand.
- Before your appointment, it may be helpful to write down notes about your signs and symptoms, and list of questions you may have.
- Put it on your calendar! You may want to arrive early to complete paperwork.

First Mental Health Appointment -What to Expect

Preparing for and attending your first mental health appointment can be stressful. The following is a list of what to expect at a typical mental health appointment.

- Bring a pen and paper, and any documentation that your provider requires.
- Check in at the front desk. Let them know why you are there and what your name is.
- Fill out any paperwork they may hand you.
- Sit down and wait until your name is called.
- Your first session is typically an intake session. The provider will ask questions about your history to identify the best treatment for you.
- Once you have completed the intake questions, and therapy has started, it is important to be open, non-judgmental, and take care of yourself. Therapy can heighten emotions and it is natural to feel overwhelmed, or even exhausted. Try to remain open and take it one step at a time. It may take several sessions to feel comfortable. Always advocate for yourself.
- Ask for assignments, workbooks, and books that you can work through.
- Therapy works best if you are honest about what is and is not helping. After a few sessions, evaluate if this provider is right for you. If needed, you can find a new provider who may connect with you better.
- There is hope and recovery is possible! There is no exact timeline on improving your mental health. Try to trust the process and ask for additional support if you need it.





Warning Signs for Suicide



Warning signs are observable indicators that a person may be thinking about suicide & may urgently need help.

SIGNS TO LOOKOUT FOR

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Talking About

- Wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Feeling hopeless or having no reason to live
- Feeling trapped or in unbearable pain
- Being a burden to others

Behavior Change

- Increasing the use of alcohol or drugs
- Losing interest in activities
- Acting anxious or agitated; behaving recklessly and irrationally
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings
- Sharp drop in performance
- Giving away possessions

ASK DIRECTLY

If you think someone may be thinking of suicide. Asking the question "are you thinking of suicide?" can open the door to a conversation that may save a life.

HOW TO HELP: ABCDE



GET HELP NOW



If someone is...

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Talking about feeling hopeless or having no reason to live

MENTAL HEALTH OR SUBSTANCE USE CRISIS?



CALL OR TEXT 988



CONFIDENTIAL AND AVAILABLE 24/7

Safe and Secure Storage for Firearm Owners



Storing your firearms safely and securely can save lives. By storing your firearms, you can prevent your weapons from being stolen. You can also prevent your weapons from being accessed by loved ones at risk of suicide or violence against others.

Be SMART | Safely Store Your Firearms



Store and lock firearms **unloaded**

Store and lock ammunition separately from firearms

Make sure **keys/combinations are not accessible** to people in household in crisis (at risk for violence against self or others)

If someone is in crisis in the household, **temporarily remove firearms** from your home

Avoid storing firearms unattended in vehicles to prevent theft

LOCKING DEVICES





Cable Lock (Free-\$50)

Device that blocks chamber to prevent firing. Typically requires key or combination to unlock, usable on most firearms. Good to prevent children from access, but can usually be cut with bolt cutters/simple devices.

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Trigger Lock (\$5-\$50)

Two-piece lock, fits over trigger guard. Blocks trigger but does not prevent loading. Typically requires key or combination to unlock. Should not be used on loaded firearm (can still be fired). Not usable on lever-action firearms.

LOCKING BOXES



Lock Box (\$25-\$350)

Small safe to store handguns/small firearms. Typically requires key, combination, or fingerprint to unlock. Lock boxes can be permanently mounted to prevent theft.



Safe (\$100-\$2,500)

Stores variety of firearms/other valuables. Typically requires key, combination, or biometrics to unlock. Most secure option for multiple firearms, and for theft prevention.



The 9-8-8 Suicide & Crisis Lifeline

Marylanders can connect to a local behavioral health crisis call specialist through the 9-8-8 Suicide & Crisis Lifeline. People experiencing mental health or substance use crises can call or text 9-8-8, or chat <u>online</u>: **988Lifeline.org.**

What does this mean for Marylanders?

When someone in Maryland calls 9-8-8, the call is routed based on the caller's area code. For those calls routed to Maryland, the call is answered by one of the strategically-located call centers. These centers provide phone-based support and information regarding local resources.

Who can call 9-8-8?

Anyone in need of assistance with behavioral health-related problems.

What can people expect when they call 9-8-8?

Callers will hear a greeting message while their call is routed to a Lifeline network crisis call center (based on the caller's area code)

- A trained crisis counselor will answer the phone, listen to the caller, understand how their problem is affecting them, provide support, and provide resources and interventions as needed.
- If a Maryland crisis center is unable to take the call, the caller will be automatically routed to a national backup crisis center.

- The Lifeline provides live crisis center phone services in English and Spanish and uses Language Line Solutions to provide translation services in over 150 additional languages for people who call 9-8-8
- Veterans can access the Veterans Crisis Line by calling 9-8-8 and pressing 1
- Press 2 for Spanish
- Press 3 for LGBTQ+ support (under 25 years old)

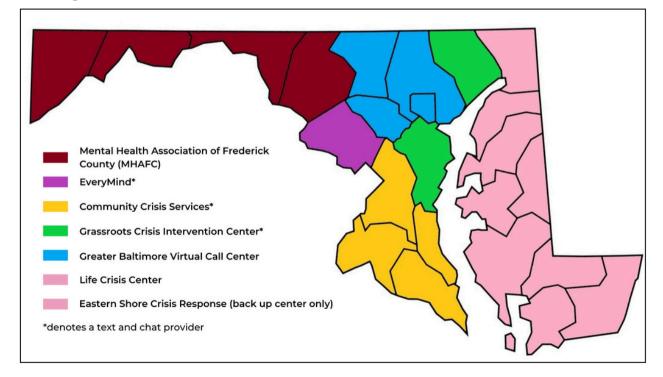
What can someone expect during a chat or text?

Texts and chats to 9-8-8 will also be routed to a Lifeline network crisis call center based on area code. A response to chats and texts will be given by a call center staff person.

Learn more:

988.maryland.gov

Maryland's 9-8-8 Call Centers



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