



Maryland Suicide Prevention and Early Intervention Network Newsletter

WITH HELP COMES HOPE

Planning Ahead for Means Safety

Almost three-fourths of all suicide attempts occur within an hour of the decision to attempt – *and a quarter of attempts occur within just five minutes.*

This crisis period, the often brief window of time between the decision and the attempt, is a crucial point for intervention and prevention.

Means safety, or delaying or preventing access to the lethal means used in attempts, is a key prevention strategy that has been successful in reducing suicide rates.

Researchers have found that when a person in a suicidal crisis does not have access to their planned method of attempt, most often, they will not use a different method. Rather, not having access to their preferred means can delay an individual from an attempt long enough for the high-risk crisis period to pass.

The best time to prepare for a suicidal crisis is before it occurs. Consider these tips for means safety to include on

your suicide safety plan:

- Remove lethal means from the home entirely. Dispose of any excess medication and keep firearms with a trusted friend or family member until the crisis period is over.
- If you choose not to remove lethal means from your home, consider using a medication safety pouch or firearm lock.

Friends, families, and professionals working with an individual at risk should also be aware of Extreme Risk Protective Orders (ERPO), a new law allowing certain individuals to request that firearms be temporarily removed from someone demonstrating a clear and imminent danger to themselves or others. The law provides for spouses, cohabitants, relatives, people with children in common, dating partners, guardians, law enforcement, and clinicians to petition an ERPO. Once the crisis period passes, and the petition is either terminated or expires, the firearms can be returned.



Are You a Veteran?

Maryland's Commitment to Veterans (MCV) is a program devoted to total wellness for veterans and their families.

MCV provides training to the community about veteran-specific topics to improve awareness of available behavioral health resources. Regional resource coordinators provide assistance to veterans and their families to support a healthy transition to civilian life.

To connect to a regional resource coordinator, call the MCV referral line at **877-770-4801**.

211

Maryland

Get connected. Get help.
Call 211, press 1

In Maryland, With Help Comes Hope

In December 2019, the Federal Communications Commission unanimously approved a [proposal](#) to create a three-digit national suicide prevention helpline. Under the plan – which could go into effect in 2021 – callers experiencing a suicidal or mental health crisis could dial 988 and be connected to the existing network of crisis call centers throughout the country. This shift from 1-800-273-TALK to 988 creates the potential for dialing the crisis hotline to be as natural as dialing 911 for medical emergencies.

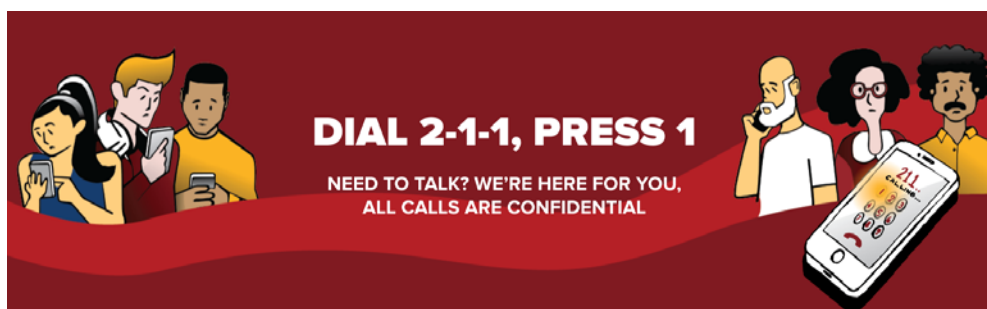
This move is not unprecedented, however. Maryland's Crisis Hotline, 1-800-422-0009, began in 1990 as a youth suicide prevention hotline. Since that time, the hotline has expanded to serve adults with mental health needs as well. In April of 2018, Maryland's Behavioral Health Administration

partnered with 211 Maryland to transition to Maryland's Helpline, "211, press 1," for behavioral health crises.

211, press 1 provides Marylanders with a memorable number to contact for mental health and substance use concerns. It can provide help to users in need of crisis intervention; risk assessment for suicide, homicide, or overdose prevention; support; guidance; and information and linkage to community behavioral health providers.

The Helpline offers 24/7 call, chat, and text service. Users contacting the service will be routed to one of the call centers based on their location. Marylanders in need, as well as their friends, families, and professionals working with those in need, are encouraged to reach out.

You can call 211 and press 1, text your zip code to 898-211, or visit 211md.org to get connected to the Helpline today.



Resource Spotlight: Family Peer Support

Behavioral health crises can be overwhelming not only for the person in crisis, but for those close to the person as well. While friends and family members may want to support and care for their loved one, they may feel ill-equipped to do so.



Image courtesy of [Canva](#).

To better equip caregivers to assist their family members during recovery, the [Maryland Coalition of Families](#) (MCF) began free family peer support programs for mental health, substance use, and gambling concerns.

Family peer support can help caregivers:

- Navigate systems including education, juvenile justice, and child welfare
- Identify and access resources and treatment
- Receive hope and guidance
- Learn from other families' experiences caring for their loved ones

- Feel less alone and isolated

While MCF's mental health family peer support program provides support solely to parents and caregivers of children struggling with these concerns, MCF also provides peer support for family members of people any age with substance use and/or gambling disorders.

To be connected to a [family peer support specialist](#) near you, call MCF at 410-730-8267 or email referral@mdcoalition.org.

TRAINING SNAPSHOT

Become an ASIST Trainer and Teach Life-Saving Skills

We are hosting a free [Applied Suicide Intervention Skills Training \(ASIST\) Training for Trainers](#) on May 11-15, 2020. The deadline to [apply](#) is January 20.



Save the Date: Recognizing and Responding to Suicide Risk May 6-7 | Catonsville

On May 6-7, we will be hosting a [Recognizing and Responding to Suicide Risk: Essential Skills for Clinicians \(RRSR\)](#) training in Catonsville. RRSR was developed by the American Association of Suicidology to prepare mental health practitioners to effectively assess and manage suicide risk. Keep an eye out for [registration](#) to open in March!



FAST FACTS

17%

17% of people with a gambling disorder have attempted suicide.

FOR MORE INFORMATION

Visit the [Maryland Center of Excellence on Problem Gambling](#)'s website.

Problem Gambling: A Risk Factor for Suicide

March is Problem Gambling Awareness Month. It is [estimated](#) that between four and six million American adults are problem gamblers, 150,000 of whom are Marylanders.

Problem gambling, often called “the hidden addiction,” is characterized by impaired control to stop or limit gambling behaviors in spite of the negative financial, emotional, interpersonal, or legal consequences that the gambler may experience. For nearly [one-half](#) of those struggling with a gambling disorder, these consequences lead to thoughts of suicide.

While many studies have linked problem gambling to suicide, [researchers](#) in 2002 found that among gamblers seeking treatment, those with a history of suicidal ideation or attempts reported a greater severity of gambling behaviors than those with no history of suicidality. They tended to endorse more cravings to gamble and more money spent gambling in the past month.

This mounting debt that problem gamblers often face can create feelings of guilt, shame, and hopelessness – all common [risk factors](#) for suicide. They may feel the need to hide their problem gambling from friends or family members to avoid disappointing them. They may wonder how they could ever pay back their losses. Even in recovery, as they work towards repayment, debt can be a lifelong, painful reminder of the past.

People with a gambling disorder are also more likely to develop comorbid physical and behavioral health conditions that are also risk factors for

suicide. They have been shown to have [higher rates](#) of stress, sleep deprivation, mood disorders, substance use, anxiety, and [PTSD](#) than the general population. Impulsivity and risk-taking are also shared risk factors among both problem gamblers and people who experience suicidal thoughts and behaviors.

Additional [family stressors](#), such as divorce, job loss, bankruptcy, and homelessness have been linked to gambling disorders as well. Dramatic shifts in life circumstances such as these are also common precursors to suicide.

If you are concerned that you or someone you know may be a problem gambler, look out for these [warning signs](#). You can also take a [self-administered screener](#) to find out if a formal evaluation or professional help is needed.

Help is available at no cost for all Maryland residents and their families:

- Call 1-800-GAMBLER, a 24/7 free and confidential helpline.
- Get connected to a peer recovery support specialist by calling 1-677-214-2120.
- Find a [counselor](#) at no cost to you.
- Attend a Gambler's Anonymous [meeting](#).

If you are having thoughts of suicide, call 211 and press 1 to speak with a trained call specialist now.

Updates from the Field

New Insight on Suicide Prevention

A recent [study](#) found that high school students who had close networks of friends and trusted adults had lower suicide rates than students lacking these close supports.

After a Suicide: A Toolkit for Colleges of Veterinary Medicine

The American Foundation for Suicide Prevention, collaborating with the American Veterinary Medical Association, and the Association of American Veterinary Medical Colleges, released a [toolkit](#) to guide veterinary colleges in their response after a student dies by suicide.

Suicide Has Been Deadlier Than Combat for the Military

Suicide rates for active military service members and veterans are rising, due in part to their access to lethal means and culture of reluctance to seek treatment. [Read more.](#)

Washington: New Initiative Aims to Prevent Youth Suicide

Since implementing a new [screening tool](#) from the Zero Suicide Initiative in March, Seattle Children's Hospital has screened over 5,000 patients ages 10 and up who did not present for psychiatric reasons.

Suicide Prevention in Long-Term Care Facilities

The American Society on Aging released an [article](#) highlighting approaches to prevent suicide among older adults in long-term care facilities.

Rural Suicide Prevention Toolkit

The Rural Health Information Hub recently developed a [toolkit](#) to lead community organizations in reaching rural communities in suicide prevention efforts.

Rural Response to Farmer Mental Health and Suicide Prevention

The Rural Health Information Hub created an [issue guide](#) to give an overview of federal, state, and local resources to address farmers' mental health needs.

Best Practices in Care Transitions for Individuals with Suicide Risk

The National Action Alliance for Suicide Prevention Care Transitions Advisory Group recently released a [report](#) of evidence-based practices to guide health care providers during patient transitions from inpatient to outpatient care.

New Report on Inequalities in Access to Behavioral Health Care

A new [report](#) found significant differences in network use and provider reimbursement between behavioral health care systems and physical health care systems.

Weapon Carrying at School and Suicide Attempts among US Teens

A new [study](#) of suicidal behaviors among high school students found that students who report bringing weapons onto school property are at higher risk for suicide attempts than students who do not carry weapons on the premises.

Why Mental Health Care Deserts Persist for US Children

A recent [study](#) found that, although there has been a 20% increase in child psychiatrists from 2007-2016, 70% of counties in the U.S. still do not have any child psychiatrists who work within them.

New York: As NYPD Suicides Rise, City to Provide Officers Free Mental Health Care

In response to the recent deaths by suicide among their officers, New York-Presbyterian Hospital is providing police with free mental health services, including counseling and medication. [Read more.](#)

Transforming Tribal Communities: Indigenous Perspectives on Suicide Prevention

The Suicide Prevention Resource Center has released a new [video series](#) with experts' advice on addressing the underlying issues of suicide and mental health symptoms in the American Indian and Alaska Native communities.

Announcements

Call for Proposals for Maryland's 32nd Annual Suicide Prevention Conference

The Suicide Prevention Conference Planning Committee is seeking presentation proposals for next year's conference on October 7, 2020. The deadline to [submit a proposal](#) is January 27, 2020.

Enhancing Suicide Prevention in Emergency Care via Telehealth

The National Institute of Mental Health released a [funding opportunity announcement](#) for a research grant to develop telehealth approaches for assessing and treating emergency department patients' suicide risk.

Research Grants for Preventing Violence and Violence Related Injury

The Centers for Disease Control and Prevention is seeking [applications](#) for research grants to study adverse childhood experiences and violence prevention.

Events

February 2020

February 2	American Foundation for Suicide Prevention Volunteer Orientation	Register
February 5	Language of Loss	More information
February 8	safeTALK	Register
February 11	safeTALK	Register
February 12	Mental Health: Suicide Prevention	Register
February 20	Development, Evolution, and Evaluation of the Alliance Project Gatekeeper Program	Register
February 25	Emotional Support Animals: Ethical, Legal, and Clinical Issues for Mental Health Professionals Webinar	Register
February 27	Youth Mental Health First Aid	Register
February 27-28	Applied Suicide Intervention Skills Training (ASIST)	Register

March 2020

March 3-4	Recognizing and Responding to Suicide Risk: Essential Skills for Clinicians	Register
March 5-6	Recognizing and Responding to Suicide Risk: Essential Skills for Clinicians	Register
March 6	Postvention as Prevention: Supporting Children, Adults and Families, after Suicide Loss	Register
March 7	B'More Healthy Expo	More information
March 17	Assessing Military Clients for Trauma and Post-Traumatic Stress Disorder Webinar	More information
March 18	Governor's Commission on Suicide Prevention Meeting	Register
March 18-19	Prolonged Exposure for PTSD Training Webinar	More information
March 19	The Relationship Between Gambling and Behavioral Health	Register
March 26	safeTALK	Register

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About MD-SPIN

Maryland's Suicide Prevention and Early Intervention Network (MD-SPIN) provides a continuum of suicide prevention training, resources and technical assistance to advance the development of a comprehensive suicide prevention and early intervention service system for youth and young adults. MD-SPIN will increase the number of youth, ages 10-24, identified, referred and receiving quality behavioral health services, with a focus on serving high risk youth populations (LGBTQ, transition age, veterans and military families, youth with emotional and behavioral concerns) and in target settings (schools, colleges/universities, juvenile services facilities, primary care, emergency departments).

Maryland Behavioral Health Administration Mission

The Maryland Department of Health Behavioral Health Administration will develop an integrated process for planning, policy and services to ensure a coordinated quality system of care is available to individuals with behavioral health conditions. The BHA will, through publicly-funded services and support, promote recovery, resiliency, health and wellness for individuals who have or are at risk for emotional, substance related, addictive and/or psychiatric disorders.

