Maryland Crisis Connect

The Behavioral Health Administration recently unveiled a new way for Marylanders dealing with mental health or substance use concerns to quickly access available local resources.

Marylanders are encouraged to “Call 211 and Press One” to reach Maryland Crisis Connect, a crisis response service staffed 24/7 by knowledgeable call specialists. Maryland Crisis Connect represents a partnership with Maryland 211, which has a well-established history of responding to crisis, information, and referral calls.

This partnership helps improve the quality and management of calls, ensure uniform standards and procedures, and seamlessly route calls to local resources based upon the caller’s location.

Also, now accessible is the website mdcrisisconnect.org, which includes an online resource database as well as and text and chat features.

A series of Public Service Announcements are airing across the state, announcing the new crisis connect number. The PSAs are in English and Spanish and include a spot read by Tony Jefferson, Safety with the Baltimore Raven’s.

Maryland Crisis Connect went “live” in early April when those dialing 211 with a mental health or substance use issue were instructed to “Press One.” The state’s current Crisis Hotline number, 1-800-422-0009, will remain live indefinitely but is no longer being advertised.

Maryland Crisis Connect, Call 211 is the number to call for anyone dealing with mental health or substance abuse issues.

Save the Date

Maryland’s 30th Annual Suicide Prevention Conference will be held on Wednesday, Oct. 3 at Martin’s West. See registration and more information.

Suicide and the Media

Conversations about suicide and suicide prevention are important; sensitivity to the way suicide is covered in the media can have a powerful impact.

Suicide Prevention Month

Learn about events, trainings, webinars, and other methods to observe National Suicide Prevention Awareness Month this September.
Suicide and the Media

The deaths of Kate Spade and Anthony Bourdain were shocking and sparked a national conversation about suicide. Though conversations about suicide and its prevention are important, often times the media focuses on unnecessary and harmful circumstances around suicide deaths.

There have been many high-profile suicide deaths over the last couple of years including Robin Williams, Chester Bennington, and Chris Cornell. After these tragedies, a media frenzy ensues that often focuses on the method of suicide and contents of suicide notes — rather than on the person’s life.

Research shows that irresponsible reporting can increase suicide risk. Centers for Disease Control and Prevention (CDC) data shows that in the four months after Robin Williams’ death, suicide rates rose by 10 percent nationally.

When a suicide occurs, check on loved ones and provide information on resources such as crisis hotlines. Do not share articles that do not follow the reporting recommendations on suicide. Some recommendations include:

- Avoid overdramatizing the event.
- Do not provide exact details or photos of location or method.
- Do not oversimplify the cause of death.
- Do not normalize suicide.
- Inform without dramatization.
- Use school or family photo of the person.
- Share positive stories of hope and recovery.
- Share resources.

Social Media and Suicide Prevention

On June 14, MD-SPIN hosted a webinar entitled “Suicide Prevention in the Era of Social Media.” The webinar explored benefits and challenges of social media and suicide prevention, the relationship between mental health and social media, and how social media can be used to identify people at-risk of suicide. If you were unable to join the webinar, you can watch the recording here. Below are key takeaways from the webinar:

- Social media can increase risk of mental health concerns, but it can also provide a sense of support
- Teens who spend three hours a day or more on electronic devices are 35 percent more likely to have a risk factor for suicide
- Youth use social media as a place to communicate distress – there is a strong correlation between age-adjusted suicide data and state Twitter-derived data with suicide content

If you see concerning posts or signs of psychological distress — take action.
Kognito Usage
As of July 19, over 30,306 Marylanders have completed Kognito training.

safeTALK Training for Trainers
Congratulations to the 19 trainer candidates that completed the safeTALK Training for Trainers, May 21-22.

FAST FACTS

54%
CDC found that 54 percent of people who died by suicide did not have a known mental health condition.

18%
After review of suicide-related Instagram posts, researchers found that only 18 percent of the posts mentioned hope and recovery.

FOR MORE INFORMATION
Suicide Prevention Resource Center
American Association of Suicidology
American Foundation for Suicide Prevention

Updates from the Field

Veteran Suicide Data: 2015 Update
The U.S. Department of Veterans Affairs recently released a report on its analysis of veteran suicide data, showing the average number of veterans who have died by suicide remained at 20 per day.

Hospitalization for Suicide Ideation or Attempt
A recent study examining trends in emergency and inpatient visits from 2008 to 2015 showed that suicidal ideation and attempts have been increasing in youth.

Frequency of Prescription Opioid Abuse and Suicide Risk
An analysis of data suggests that the abuse of prescription opioids occurring weekly or more is associated with suicidal ideation, planning, and attempts.

Gaps in Laws Requiring Suicide Prevention Training for Health Care Professionals
A recent study of state legislation databases revealed that as of October 2017, only 10 states have legislation requiring health care professionals to complete suicide prevention training.

Suicide-Related Conversations on Instagram
Researchers studied samples of posts on Instagram containing the hashtag #suicide and #suicidal to determine whether media guidelines were being followed and how users conveyed caring.

The Role of Firearms in Rural-Urban Differences in Suicide in Maryland
A recent study was published suggesting that the differences in suicide rates between rural and urban settings may be linked to firearm suicide rates in rural areas.
In Observance of Suicide Prevention Awareness Month:

- **Friday, Sept. 7** marks the beginning of the National Weekend of Prayer
- **Sunday, Sept. 9** is the start of National Suicide Prevention Week
- **Monday, Sept. 10** is World Suicide Prevention Day
- **Monday, Sept. 17** is National Physician Suicide Awareness Day

The Governor’s Commission on Suicide Prevention Public Meeting

The Governor’s Commission on Suicide Prevention is holding a public meeting on Friday, Sept. 21 from 1 to 3 p.m. at the Peoples’ Resource Center, located at 100 Community Pl. in Crownsville, Md. Registration is required to attend in person.

The meeting will include presentations on trauma and suicide, an overview of the State child fatality review team, universal precautions, and a discussion about HB 1302.

Register for the meeting via the registration link in this article, or under the “Events” section for September on the page that follows.

Webinars

**Thursday, Sept. 6:** Suicide Survivorship: Applying TAPS Best-Practice Model to Support Military Families, Veterans and Clinicians

**Thursday, Sept. 13:** Suicide Prevention for Veterans with Other than Honorable Discharges

**Thursday, Sept. 20:** Achieving the Promise of Suicidality Interventions: What Do We Know and How Do We Use It?

Register for the webinars in the “Events” section for September on the page that follows.

Training

**Thursday and Friday, Sept. 6–7:** Online Workshop in Second Life

**Friday, Sept. 7:** Suicide Awareness, Prevention, and Managing the Aftermath in Your Workplace

**Friday, Sept. 7:** Mental Health First Aid Training

Register for a training in the “Events” section for September on the page that follows.

Awareness Events

**Saturday, Sept. 15:** We Rock the District, dedicated to the awareness and prevention of teen suicide.

**Friday, Sept. 21:** See the Good, third annual suicide prevention benefit concert.

**Saturday, Sept. 22:** Celebrate Life

**Saturday, Sept. 22:** 22K March for Life Suicide Awareness Hike

**Saturday, Sept. 29:** Second Annual Prince George’s County Help, Heal, Hope Suicide Prevention 5K

Register for other awareness events from the “Events” section for September on the page that follows.

Awareness Materials

- Suicide Prevention Month Materials from the American Association of Suicidology
- Each Mind Matters 2018 Suicide Prevention Week Toolkit
- Defense Suicide Prevention Office Suicide Prevention Month Poster

Other Ways to Observe

- Practice self-care
- Wear yellow clothing or wear a yellow or purple and teal ribbon
- Share suicide prevention resources such as crisis hotlines or text lines

Out of the Darkness walk dates, visit the AFSP Website.
## Events

### August

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### September: Suicide Prevention Awareness Month

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Keep Up With Us

Join our email distribution list | Visit our website | Follow us on Twitter @MDSuicidePrev

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’s 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.