



Maryland Suicide Prevention and Early Intervention Network Newsletter

WITH HELP COMES HOPE

June is Post-Traumatic Stress Disorder Awareness Month

This June is the fifth annual Post-Traumatic Stress Disorder (PTSD) Awareness Month. It's estimated that for every 100 adults in the U.S., seven or eight will experience PTSD at some point in their lives.

While PTSD is well known in relation to veterans, anyone that experiences trauma could develop PTSD. Examples of these traumatic events include experienced or witnessed abuse, combat trauma, natural disasters, serious accidents such as a car wreck, terrorism and school shootings. Among those that experience PTSD, common symptoms include flashbacks, nightmares, being easily startled and mood symptoms, including feeling more depressed, anxious and irritable.

Although PTSD is effectively treated through therapy, and some symptoms can be managed with certain prescribed medications, many people with PTSD struggle to seek help or recognize they are suffering from PTSD.

You can help spread awareness about PTSD and its treatment this month. Here are a few ways:

- Follow the National Center for PTSD on [Twitter](#) and [Facebook](#)
- Post on your social media with some suggested [sample posts](#)
- Create a bulletin board at work or school with PTSD information and resources
- Organize a community walk or run for PTSD
- Speak to veterans and ask how they are doing today
- Invite someone with PTSD to speak in your classroom, at your workplace or at your next community event

For PTSD resources and more ideas, visit the National Center for PTSD's [website](#).



MARYLAND
Department of Health
Maryland's Commitment to Veterans

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**.

Suicide Prevention

Visit our [website](#) for archived webinars, training opportunities, archived newsletters, resources and fact sheets.

For additional support, guidance and assistance, call 211 and select option 1; or text your zip code to 898-211.

2019 Legislative Session Wrap-Up

On April 8, Maryland's 439th Session adjourned. Maryland's 2019 Legislative Session addressed a wide variety of topics, including numerous bills pertaining to mental health, substance use and suicide. Below are a few of the bills of note discussed in the Session.

Decriminalization of Attempted Suicide

Bills SB 395 and HB77 decriminalizing attempt suicide have both passed. The bills also stipulate that individuals who commit other crimes in the course of attempting suicide may still be charged with those additional crimes. These bills are expected to become effective as October 1.

Veteran Suicide Prevention – Comprehensive Action Plan

Also passed was SB 521, which will require the Maryland Department of Health and Maryland Department of Veteran Affairs to create and

implement a comprehensive action plan to prevent veteran suicides. The plan will be required to address accessibility and availability of professional veteran mental health services. This bill is expected to become effective July 1, with requirements that certain reforms be implemented by 2023 and 2029.

End-of-Life Option Act

SB 311 failed in the second reading. This act would have allowed an individual to request medical assistance to end their life if the request met certain criteria. Some of these criteria include that the request is to be made in writing by the individual themselves and witnessed. HB 399, which was cross-filed with SB 311, is in first reading judicial proceedings. This is not the first time the "Death with Dignity" bill has been introduced – legislators have considered physician-assisted suicide four times since 2015.

Grace's Law 2.0

SB 103 and HB 181 were approved by Governor Hogan. These bills amend prohibited behaviors concerning online harassment and bullying of minors. They also prohibit individuals from electronically bullying someone with the intent to cause them emotional or physical harm, or to coerce them to attempt suicide. Grace's Law, which was named after 15-year old Grace McComas who died by suicide in 2012, was initially passed in 2013. Grace's Law 2.0 differs from its previous version in that the new bill enacts harsher sentences for violating the law and eliminates the need to prove that there was a pattern of bullying behavior.

Spotlight: Maryland's Commitment to Veterans

MCV is a program within Maryland's Department of Health that partners with the United States Department of Veterans Affairs, the Maryland Department of Veterans Affairs, the Maryland National Guard and the Maryland Defense Force.

Regional resource coordinators from MCV work with veterans and friends and families of veterans to link them to services to assist veterans in the transition back to civilian life. These regional resource coordinators can:

- Assist veterans in coordinating mental health and substance use disorder services within Veterans Affairs or Maryland's public health system
- Provide information and referrals to veterans regarding veteran benefits, employment, education and housing
- Conduct outreach through trainings and events to educate veterans and other community members about MCV
- Provide education to other organizations about military culture and veteran-specific suicide prevention

All veterans can utilize this service regardless of VA-eligibility. To speak to a regional resource coordinator, call 877-770-4801 or visit the [MCV website](#). Calls are accepted 24 hours a day, seven days a week. It is important to note that regional resource coordinators are not crisis workers. If you are a veteran experiencing a crisis, contact the Veterans Crisis Line at 1-800-273-8255 and select option 1. Veterans and their family members can also contact Maryland's Crisis Helpline by calling 211 and pressing 1 or texting their zip code to 898-211.

TRAINING SNAPSHOT

safeTALK



An additional 45 people were trained in safeTALK in March and April. Pictured are some of the newest suicide alert helpers in Maryland.

Family Therapy Training



On April 23, AFSP co-hosted an Attachment-Based Family Therapy Workshop for clinicians with Maryland's Suicide Prevention and Early Intervention Network (MD-SPIN). More than 30 clinicians attended the event.

FAST FACTS

8,000,000

PTSD affects roughly 8 million adults in the U.S. in a given year.

FOR MORE INFORMATION

[After a School Tragedy... Readiness, Response, Recovery, & Resources](#)

The Link between PTSD and Suicide

Research has shown that people with PTSD are about six times as likely to attempt suicide as those without PTSD. While the exact cause for this link is debated, we do know that a clear relationship exists between PTSD and suicide.

According to studies, responses to trauma, such as shame, guilt, lack of positive coping skills and the development of secondary mental health problems may explain the link between PTSD and suicidal thoughts and behaviors.

It is common for survivors of trauma to feel [shame](#) about what they went through. In particular, shame is common for victims of physical and sexual abuse. Experiencing shame may lead to unwillingness to seek counseling and support from friends or family to help cope with and heal from trauma.

Guilt has been known to be a contributing factor in suicides as well. [Survivor's guilt](#) has recently effectuated the deaths of Sydney Aiello and Calvin Desir, two survivors of the Parkland school shooting, and of Jeremy Richman, whose daughter was killed in the Sandy Hook shooting. [Guilt about one's own actions in combat](#), also known as moral injury, is another aftereffect of trauma that has been linked to suicide risk. In fact, the association between PTSD and suicide is particularly important amongst veterans due to the high levels of trauma they experience during service. It is estimated that 20 veterans die every day from suicide.

There is also an increased suicide risk in those with PTSD that do not have the appropriate coping mechanisms to handle high levels of stress or negative emotions, such as people who have difficulty opening up and expressing their feelings.

People with PTSD may also develop [secondary mental health problems](#), such as depression and anxiety, which can contribute to suicide risk as well.



Veteran. Picture courtesy of [Canva](#).

PTSD is treatable, and multiple evidence-based therapies have been shown to be effective. Trauma-focused cognitive behavioral therapy (TF-CBT) is a talk therapy designed to address past trauma by reframing how someone thinks about their trauma and by developing coping skills to help them deal with trauma. Eye movement desensitization and reprocessing (EMDR) has also been successful treatment for patients with PTSD.

If you or someone you know has PTSD and is experiencing suicidal thoughts, here are some ways you can help:

- Reduce access to lethal means (weapons, medications, etc.)
- Talk to someone you trust, or be someone that your friend can trust
- Seek professional mental health help, such as therapy
- Practice mindfulness and challenge suicidal thoughts
- Work to develop positive coping strategies
- In crisis situations, speak to a crisis worker or go to the emergency room

Updates from the Field

Success Story on Care Transitions at NH Hospital

The Suicide Prevention Resource Center released [Prevention in Practice: Care Transitions at New Hampshire Hospital](#), detailing a pilot program helping youth safely transition from inpatient settings to the community.

National Suicide Prevention Strategies: Progress, Examples, and Indicators

The World Health Organization (WHO) has released [National Suicide Prevention Strategies: Progress, Examples, and Indicators](#). The document outlines strategies for developing, implementing, and evaluating national suicide prevention strategies and provides examples from each WHO region.

Empathy Often Avoided Because of Mental Effort

New research published by the American Psychological Association (APA) found that people will avoid empathy because they assume feelings of empathy could be depressing or costly. [Read more.](#)

Association between 13 Reasons Why and U.S. Suicide Rates

The *Journal of the American Academy of Child & Adolescent Psychiatry* (JAACAP) has published [research](#) on the association between the release of Netflix's *13 Reasons Why* and U.S. suicide rates. It found that there was a nearly 30 percent increase in the overall suicide rate among U.S. youth ages 10 to 17 in the month following the show's release. Read a [statement](#) from the National Action Alliance for Suicide Prevention (Action Alliance). Find [resources](#) to help parents, schools, media, and community leaders discuss the show and promote awareness about suicide prevention.

Increases in Demand for Crisis and Other Suicide Prevention Services after a Celebrity Suicide

Psychiatric Services has published [research](#) on increases in

demand for crisis and other suicide prevention services after a celebrity suicide. The study examined suicide rates, help-seeking and service capacity following celebrity suicide deaths. It found that the U.S. needs additional resources to help crisis and other suicide prevention services meet increases in demand following celebrity suicide deaths.

Law Enforcement Agencies' Perceptions of Temporary Firearms Storage to Prevent Suicide

Law enforcement agencies in U.S. Mountain West states perceive few barriers to temporary, voluntary firearms storage to prevent suicide and believe that suicide prevention is consistent with their mission. [Read more.](#)

Intimate Partner Violence, Suicide and Their Overlapping Risk in Women Veterans

Women veterans may have unique, overlapping risk factors related to suicide thoughts and behaviors and intimate partner violence. [Read more.](#)

Association of Cannabis Use in Adolescence and Risk of Depression, Anxiety, and Suicidality in Young Adulthood

A recent study published in *JAMA Psychiatry* analyzed the relationship with adolescent use of cannabis and development of mental health conditions in young adulthood. While no association was found between cannabis use and anxiety, youth who used cannabis were at an increased risk of developing depression and suicidal behavior later in life. [Read more here.](#)

Announcements

New Publication: A Practical Guide to Psychiatric Advance Directives

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released a report that provides practical information for the use of psychiatric or mental health advance directives (PAD). A PAD is a legal tool that allows a person with mental illness to state

their preferences for treatment in advance of a crisis. [Read more.](#)

After A School Tragedy

The SAMHSA Mental Health Technology Transfer Center (MHTTC) Network has released a [resource](#) to help schools support students and families after violence or trauma.

Suicide Prevention Competencies for Faith Leaders

Faith leaders play a key role in suicide prevention and postvention care. To better equip leaders of all faiths with life-saving skills to prevent suicide, the [National Action Alliance for Suicide Prevention](#) (Action Alliance) and its [Faith Communities Task Force](#) released [Suicide Prevention Competencies for Faith Leaders: Supporting Life Before, During, and After a Suicidal Crisis.](#)

White Paper Released on Best Practices for State Suicide Prevention

A [white paper](#) developed by the National Governors Association Center for Best Practices, Centers for Disease Control and Prevention (CDC) and SAMHSA was released, highlighting the importance of upstream prevention and data-informed approaches in state suicide prevention.

Archived Webinar Available: What Survivors of Suicide Want You to Know

The recording of Maryland's Suicide Prevention and Early Intervention Network's (MD-SPIN) April 2019 webinar, titled "What Survivors of Suicide Want You to Know," is now [available for viewing online.](#)

Register to be a Vendor at the 31st Annual Suicide Prevention Conference

Organizations interested in exhibiting at Maryland's 31st Annual Suicide Prevention Conference on October 2 should email mdh.suicideprevention@maryland.gov to request the vendor application.

Events

June

June 1 – June 2	Applied Suicide Intervention Skills Training (ASIST)	Register
June 3	Therapy Hour: A Case Presentation, Interpretation and Discussion	Register
June 5	Beyond PTSD – Grief-Informed Treatment After Trauma	Register
June 7	Annual Psychology Conference: Resiliency, Current Status and Practice	Register
June 7	MD Workplace Health and Wellness Symposium – Creating a Safe Workplace Culture	Register
June 7	Assessing Military Clients for Trauma and Post-Traumatic Stress Disorder	Register
June 8	safeTALK	Register
June 9	Utilizing Creative Arts in Grief	Register
June 12	Trauma-Informed Intimate Partner Violence Treatment in Military and Veteran Populations	Register
June 12	Critical Role of Families in Reducing Risk and Promoting Well-Being for LGBTQ and Gender Diverse Children and Youth	More Info
June 15	Trilogy of Trauma – Epilogue: Black Men and Suffering in Silence	Register
June 15	Care for the Caregiver Event	Register
June 19	Not All Wounds Are Visible: A Community Conversation	Register
June 19	Helping Patients with PTSD-Related Nightmares	Register
June 21	Addressing Urban Health Disparities Through Participatory Health Research	Register
June 22	Caring for the Caregiver Workshop	Register
June 26	Research with Psilocybin: History, Neuropharmacology, and Potential Clinical Applications	More Info
June 26-27	Applied Suicide Intervention Skills Training (ASIST)	Register
June 28	The Ethics of Self-Care	Register

July

July 1	Introduction to Motivational Interviewing	Register
July 11	Baltimore City Health Department Naloxone Training	Register
July 15-16	Applied Suicide Intervention Skills Training (ASIST)	Register
July 17	Narcan Training at Glen Burnie Library	Register
July 17	Governor’s Commission on Suicide Prevention	More Info
July 18	Universal Precautions to Suicide Risk : Because Anyone Could Be at Risk	Register

July 25	The Ethics of Supervision: It's More Than Just Listening	Register
July 26 – July 29	Trauma/Stress Resolution Workshop, 28 CE's	Register
July 29	Disarming the Suicidal Mind: Evidence – Based Assessment and Intervention	Register
July 30	Disarming the Suicidal Mind : Evidence – Based Assessment and Intervention	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.

