

Disproportionally Impacted Communities

The background of the slide features a sunset scene with mountains in the distance. Two hands are shown reaching towards each other, one from the top right and one from the bottom center, set against a warm, orange and yellow sky.

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Agenda

- Overview of Disparities
- LGBTQ Youth
- Veterans
- Farmers
- Rural
- First Responders
- Native Americans
- Now What?

Equity vs. Equality



Overview

LGBTQ

Veterans

Farmers

Rural

First Responders

Native Americans

LGBTQ Youth

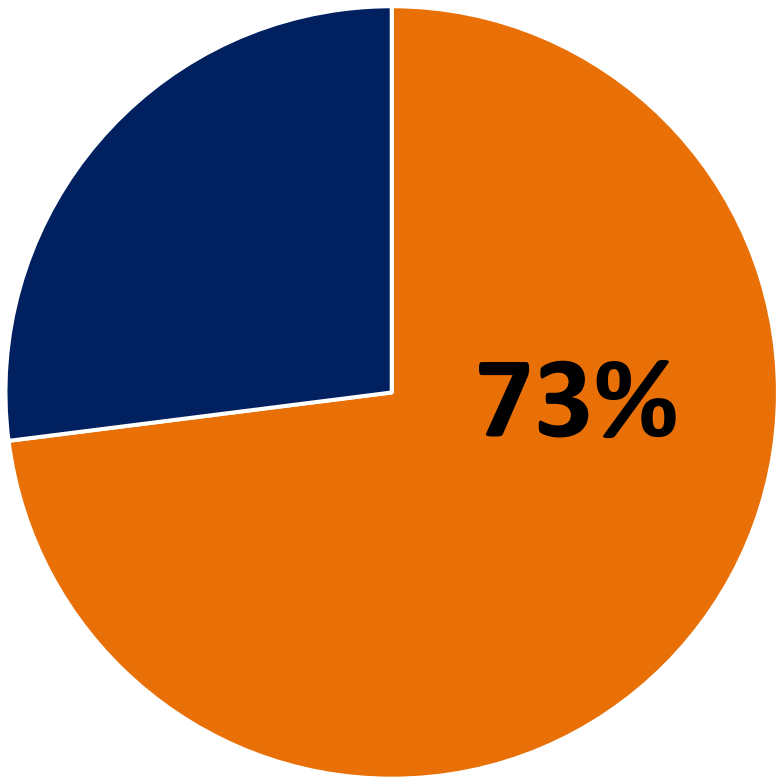
- Lesbian
- Gay
- Bisexual
- Transgender
- Queer/Questioning



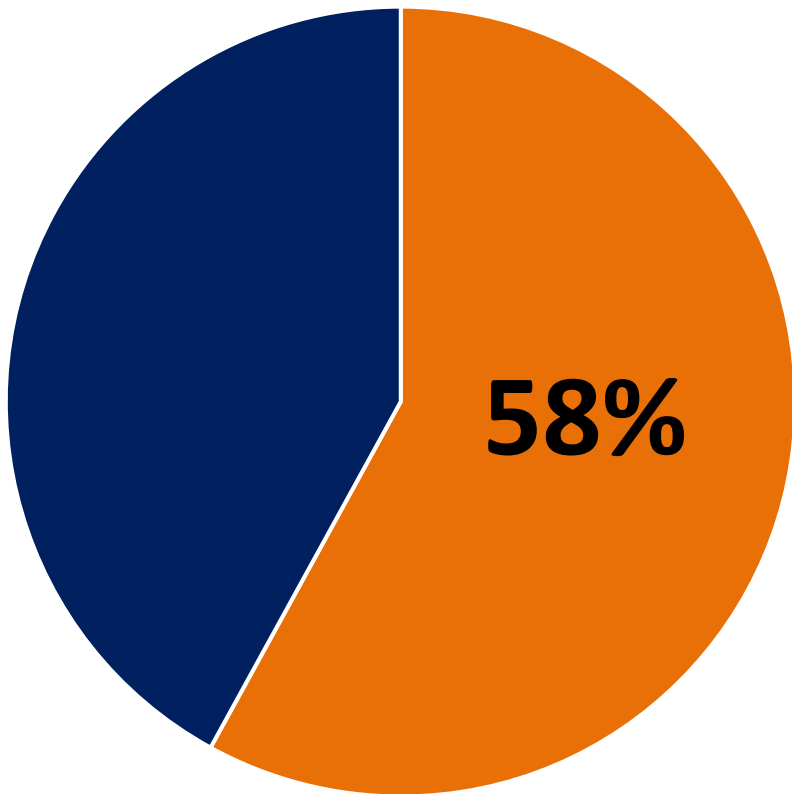
LGBTQ Youth Anxiety and Depression



LGBTQ Youth Reporting Symptoms of Anxiety

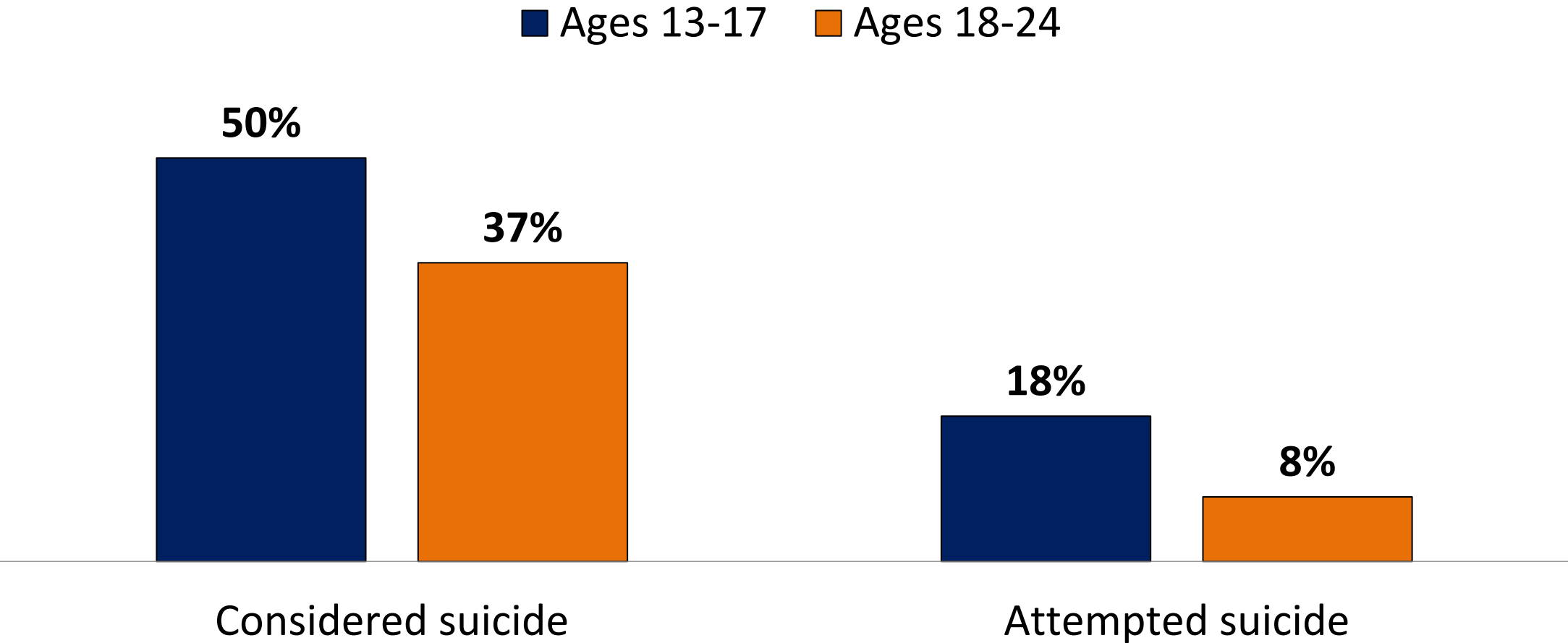


LGBTQ Youth Reporting Symptoms of Depression



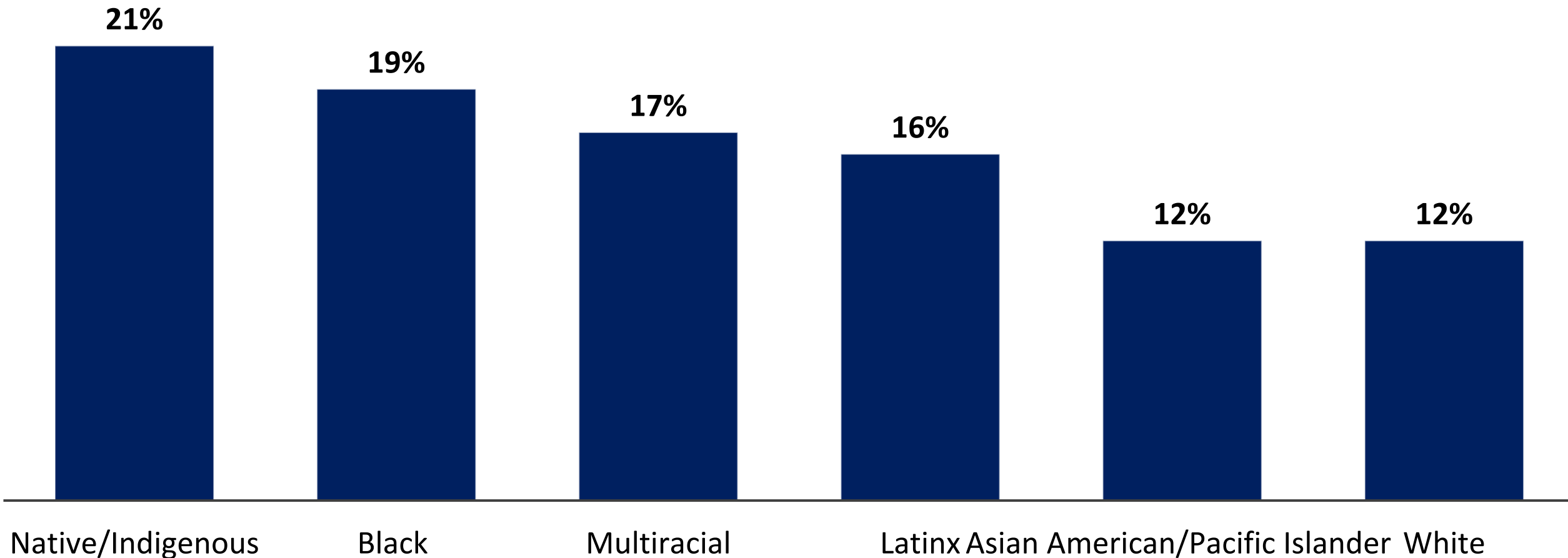
The Trevor Project 2022 National Survey on LGBTQ Youth Mental Health

Rates of Considered and Attempted Suicide Among LGBTQ Youth



The Trevor Project 2022 National Survey on LGBTQ Youth Mental Health

LGBTQ Suicide Attempts in Past Year By Race



The Trevor Project 2022 National Survey on LGBTQ Youth Mental Health

Risk Factors

- Minority stress
- Rejection and lack of social support & affirming spaces
- Physical harm & bullying
- Discrimination
- Conversion therapy





Veterans

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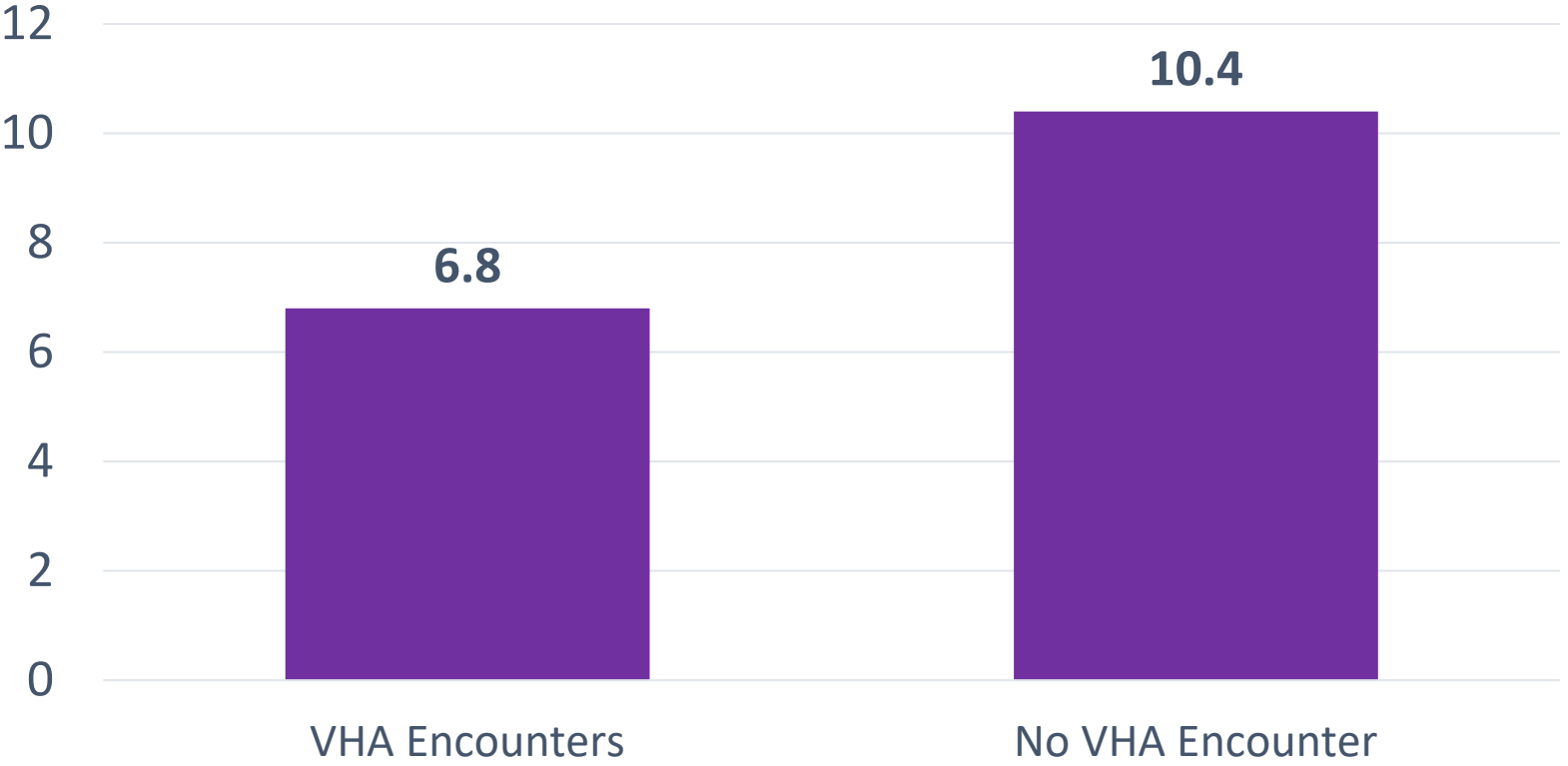
[Native Americans](#)

Suicide Rates

- People who have previously served in the military account for about **13.7%** of suicides among adults in the United States.
- Veterans have an age adjusted suicide rate that is **52.3%** greater than the non-veteran US adult population.
- Since 2010, more than **65,000** veterans have died by suicide – more than the total number of deaths from combat during the Vietnam War and the operations in Iraq and Afghanistan.



Average Verteran Sucides Per Day 2018, 2019





Risk Factors

- Coping with effects of aging
- Homelessness
- Unaddressed chronic health conditions
- Underlying mental health conditions or substance use disorder, in some cases aggravated by their military service.
- Diminished social environment
- Access to and knowledge of how to use firearms

Farmers



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Farmers

- Farmers and ranchers had a suicide rate that was, on average, **3.5X** that of the general population.
- Agriculture, Forestry, Fishing, and Hunting male suicide rates **36.1** per 100,000.

Peterson C, Sussell A, Li J, Schumacher PK, Yeoman K, Stone DM. Suicide Rates by Industry and Occupation — National Violent Death Reporting System, 32 States, 2016. MMWR Morb Mortal Wkly Rep 2020;69:57–62. DOI: <http://dx.doi.org/10.15585/mmwr.mm6903a1>



Risk Factors

- Debt
- Reduced commodity prices
- Drought
- Possibility of Losing Farm



Rural



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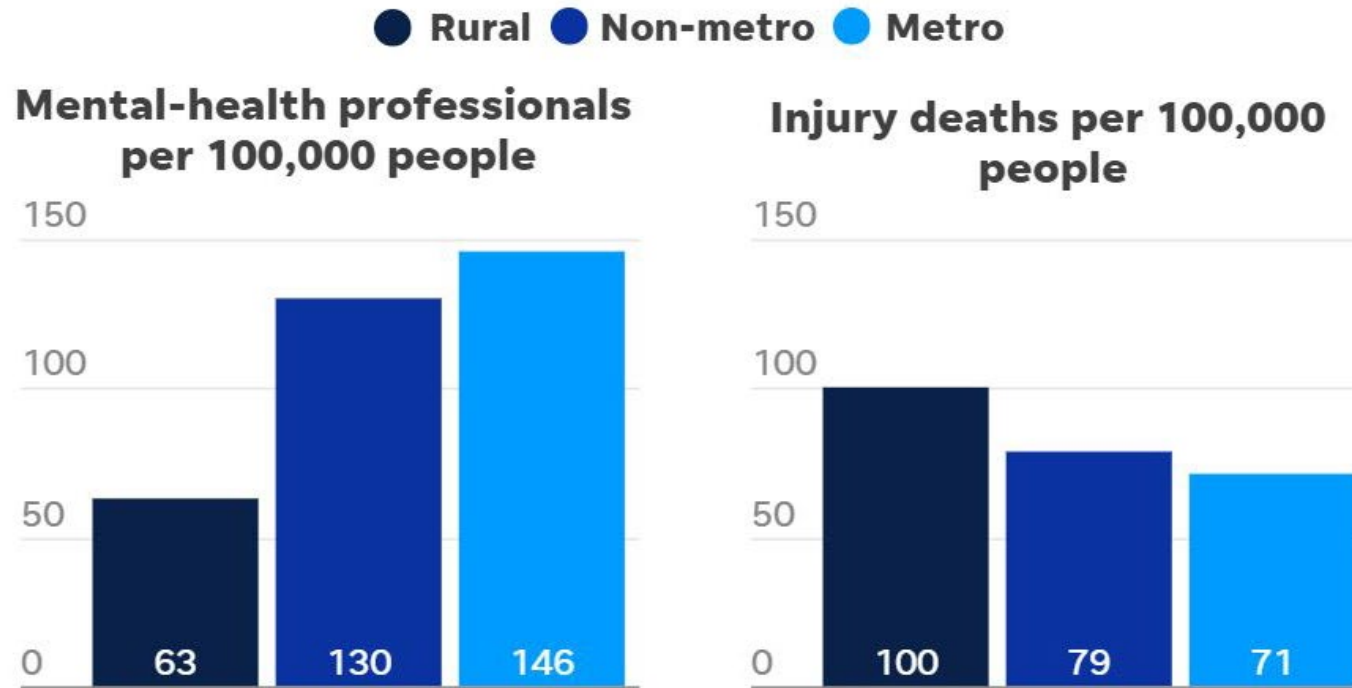
[First Responders](#)

[Native Americans](#)

Rural Mental Healthcare Access

Rural mental-health access

Across the Midwest, rural counties have fewer mental-health professionals per person and more injury deaths per person, than suburban and metro counties. Injury deaths include suicides, homicides and accidental injuries.



<https://www.usatoday.com/in-depth/news/investigations/2020/03/09/climate-tariffs-debt-and-isolation-drive-some-farmers-suicide/4955865002/>

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Population Density Rates

Rural areas experience much higher rates of suicide than urban areas. Suicide rates increase as population density decreases and an area becomes more rural:

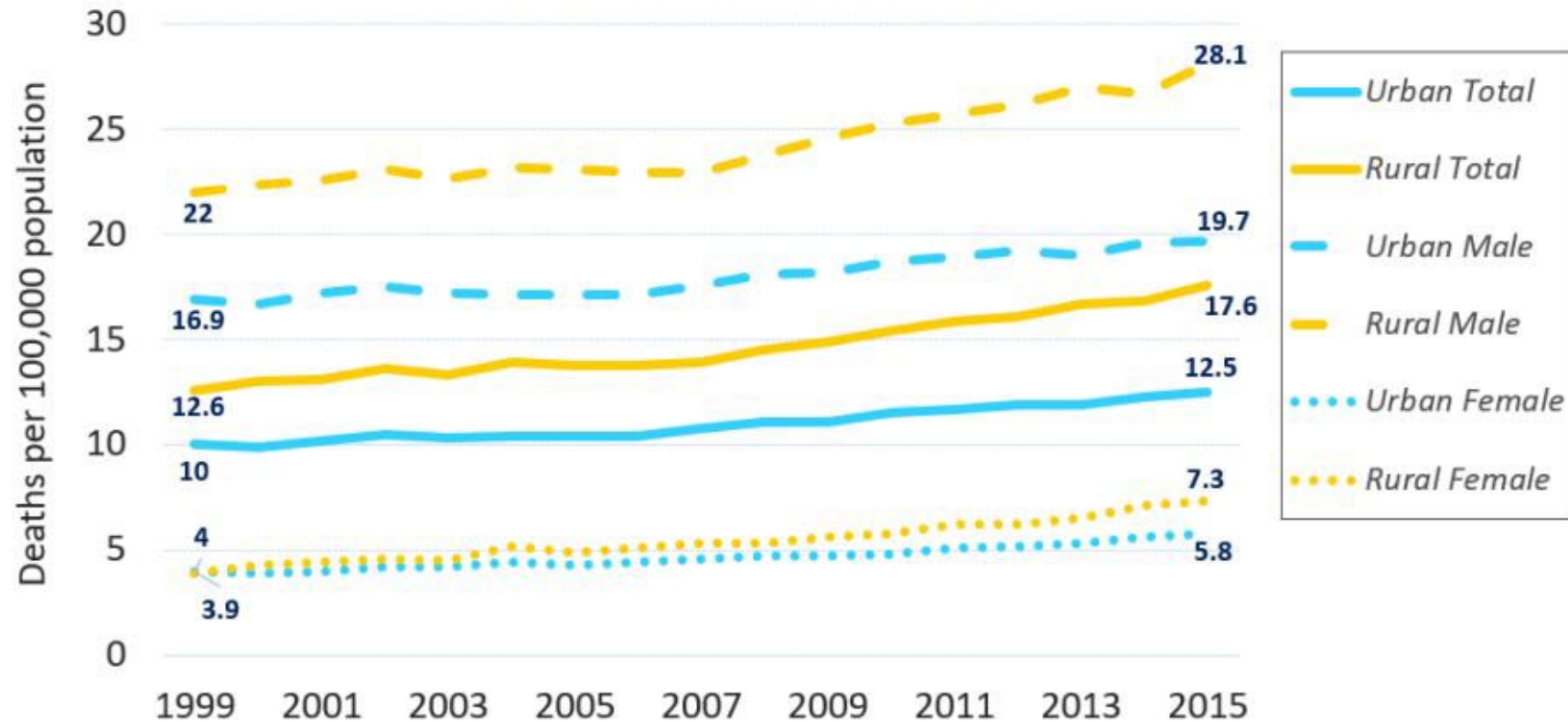
2018-2019 - Number of deaths per 100,000

- Large central metropolitan: 10.9
- Large fringe metro: 12.5
- Medium metro: 15.3
- Small metro: 17.2
- Micropolitan (non-metro): 18.3
- **Noncore (non-metro): 20.5**

Stone DM, Jones CM, Mack KA. Changes in Suicide Rates — United States, 2018–2019. MMWR Morb Mortal Wkly Rep 2021;70:261–268. DOI: <http://dx.doi.org/10.15585/mmwr.mm7008a1>



RURAL/URBAN AGE-ADJUSTED SUICIDE RATES, BY SEX UNITED STATES, 1999-2015



Note: Suicides are identified using International Classification of Diseases, 10th revision underlying cause of death codes U03, X60-X84 and Y87.0. Age-adjusted death rates were calculated using the direct method and the 2000 standard population. Rurality of county of residence is based on 2006 classification scheme.

Source: National Vital Statistics System, Mortality (NVSS-M).



Rural Suicide Rates

Suicide rates in rural areas are highest among non-Hispanic AI/AN males (**59.6** per 100,000) and non-Hispanic white males (**37.9** per 100,000).

Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) [online]. [Feb 17, 2022]. Available from URL: www.cdc.gov/injury/wisqars



First Responders

A night scene with emergency vehicles, likely fire trucks, with their red and yellow lights flashing. A person is walking across the foreground, silhouetted against the bright lights. The scene is hazy, possibly due to smoke or fog.

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Suicide Rates

Attempted suicide rates are

10 times

higher among first responders

<https://www.northpointrecovery.com/addicted-professionals/emt-addiction-information.php>

Depression

36%

Of EMS providers suffer
from depression

<https://www.northpointrecovery.com/addicted-professionals/emt-addiction-information.php>

How First Responders Develop Serious Mental Health Issues

Exposure to

death, grief, injury, pain and loss



Coupled with

demanding schedules, physically challenging jobs, and a lack of safety and security



Can result in

emotional trauma



If left untreated can lead to

Depression, anxiety, PTSD, suicidal ideation, and suicide

<https://counseling.northwestern.edu/blog/first-responders-suicide-help/>



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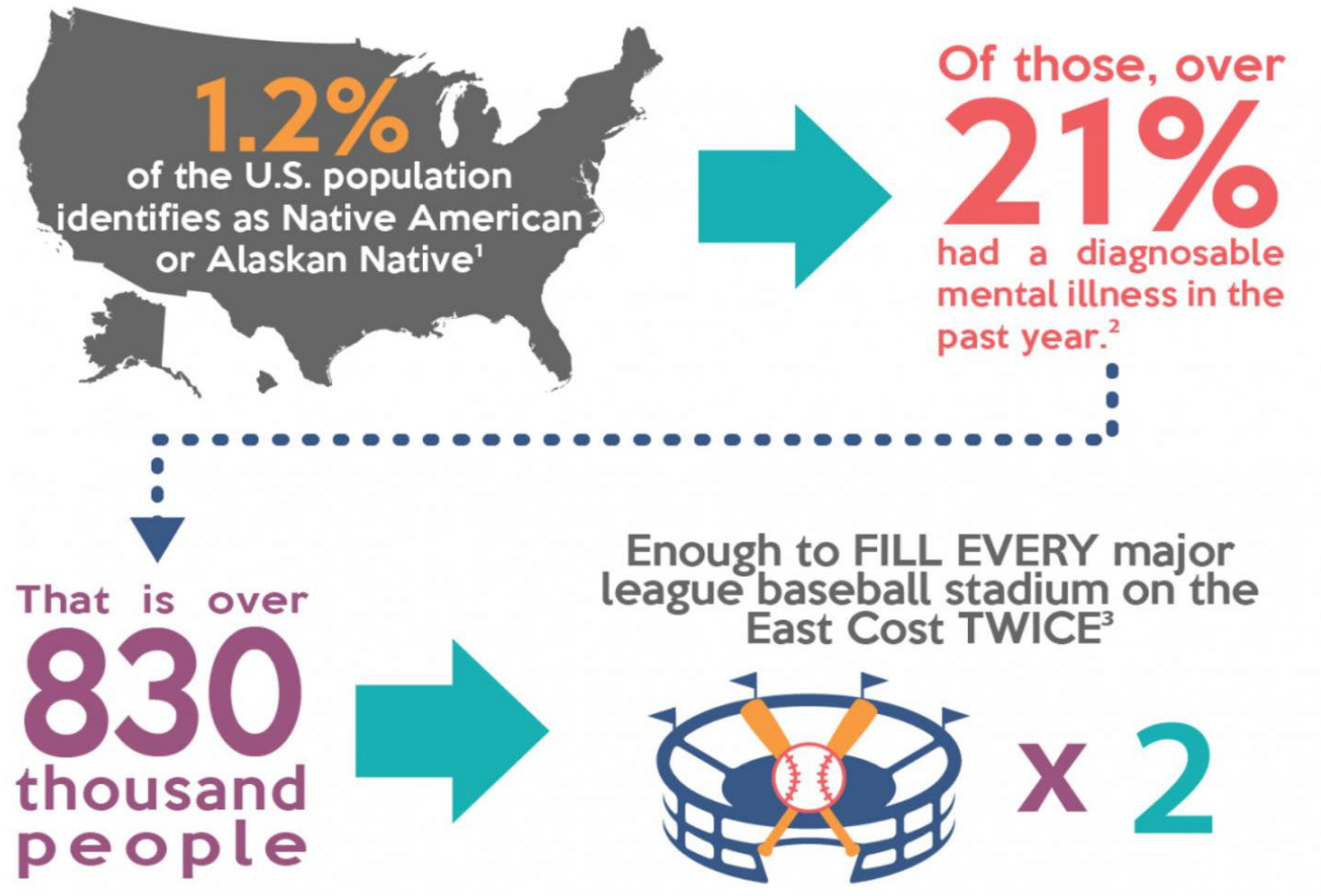
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Mental Illness

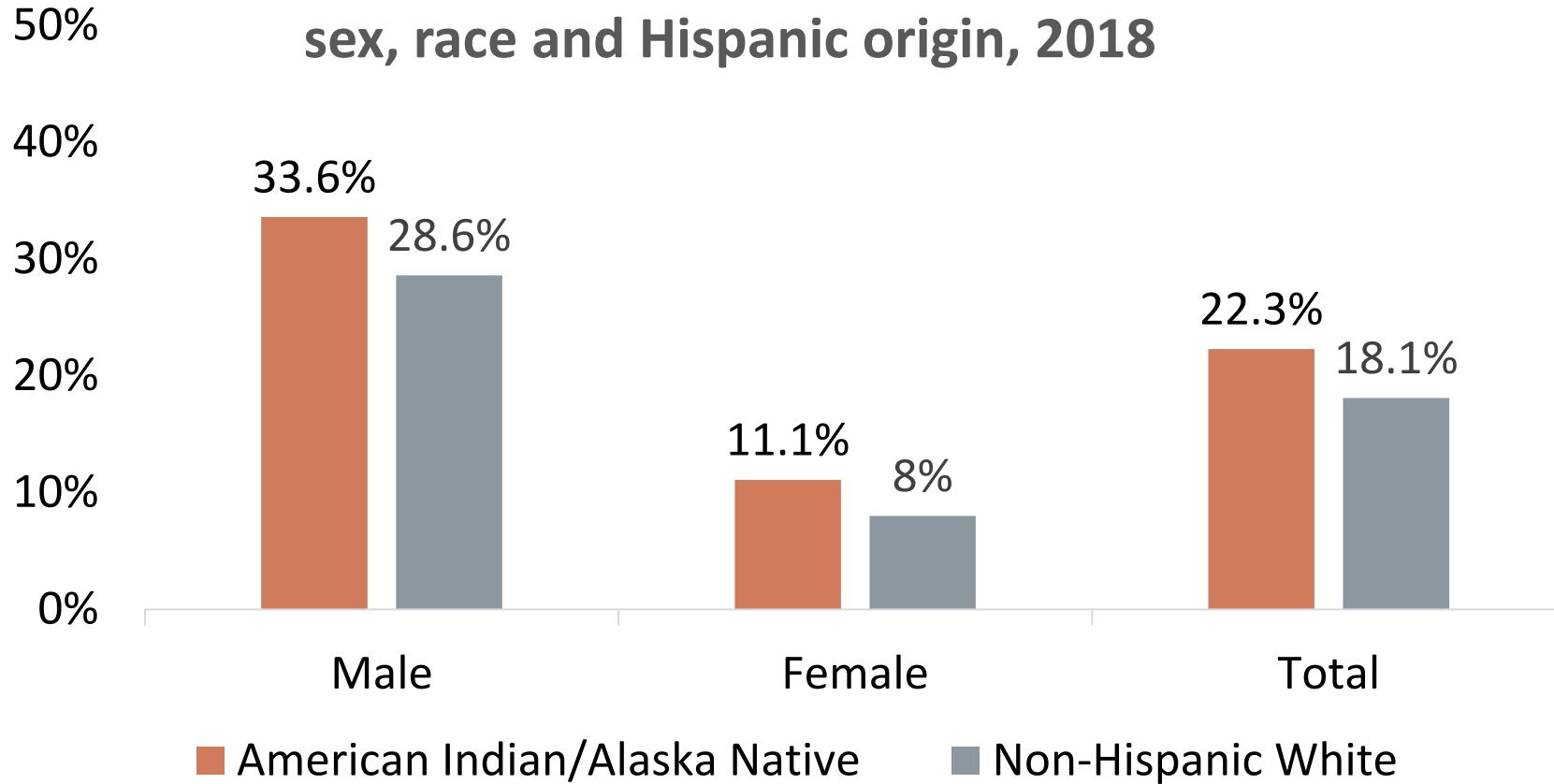


SOURCES
¹United States Census Bureau. (2014). American fact finder. Retrieved from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>
²Substance Abuse and Mental Health Services Administration. (2014). Racial and ethnic minority populations. Retrieved from <http://www.samhsa.gov/specific-populations/racial-ethnic-minority>
³Wikipedia List of Major League Baseball Stadiums. Retrieved from https://en.wikipedia.org/wiki/List_of_Major_League_Baseball_stadiums



Native Americans Suicide Rates

Age-adjusted death rates for suicide, by sex, race and Hispanic origin, 2018



Source: CDC 2021. National Vital Statistics Report, Vol. 69, No. 13. Table 10.
<https://www.cdc.gov/nchs/data/nvsr/nvsr69/nvsr69-13-508.pdf> [PDF | 2MB]

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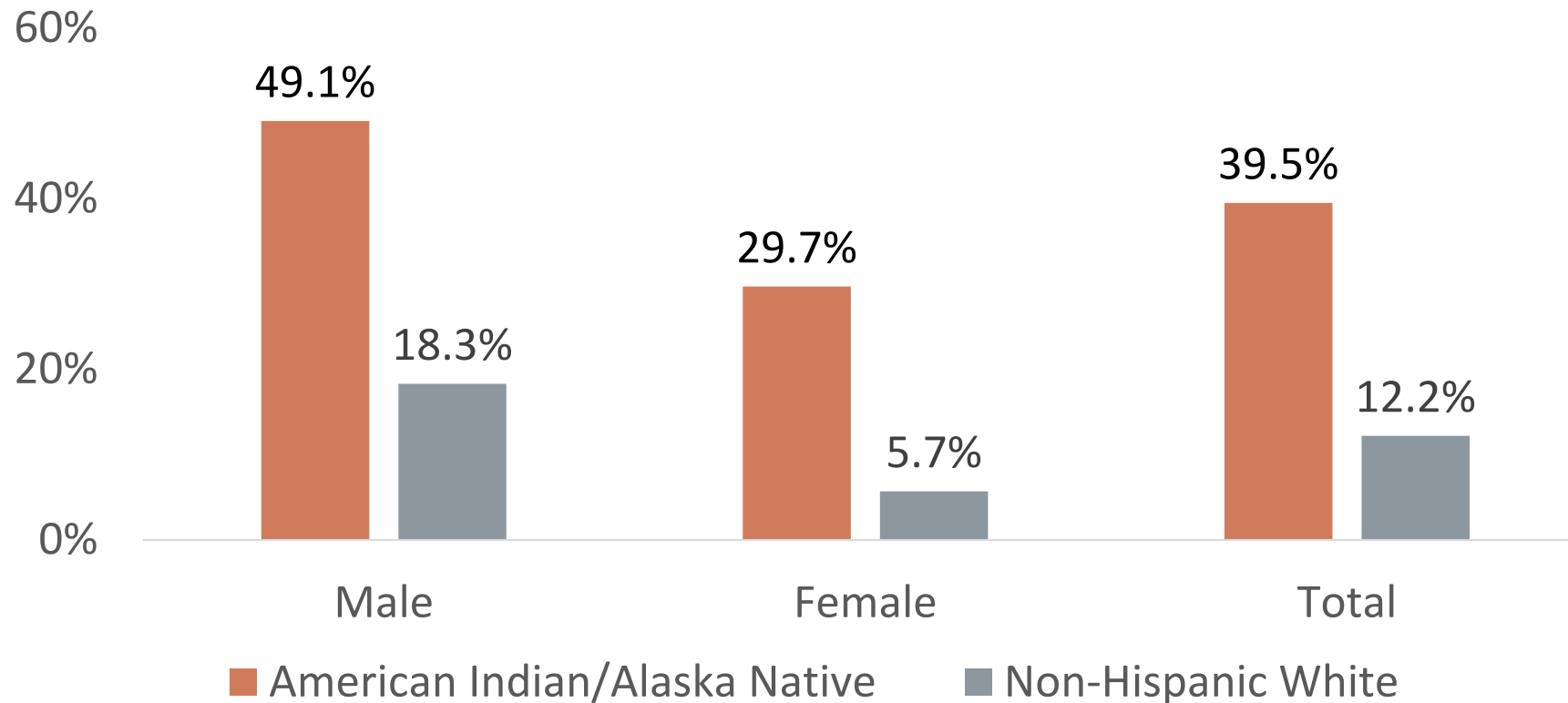
First Responders

Native Americans



Native American Suicide Rates

Death rates for suicide: ages 15 - 19, 2019



Source: CDC, 2021. National Center for Injury Prevention and Control. Web Based Injury Statistics Query and Reporting System (WISQARS) [Accessed 04/21/2021]

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Risk Factors

- Mental health disorders
- Substance use disorders
- Intergenerational trauma
- Access to care
- Community-wide issues
- Poverty

Retrieved from: <https://www.ihs.gov/suicideprevention>



Emerging Trends

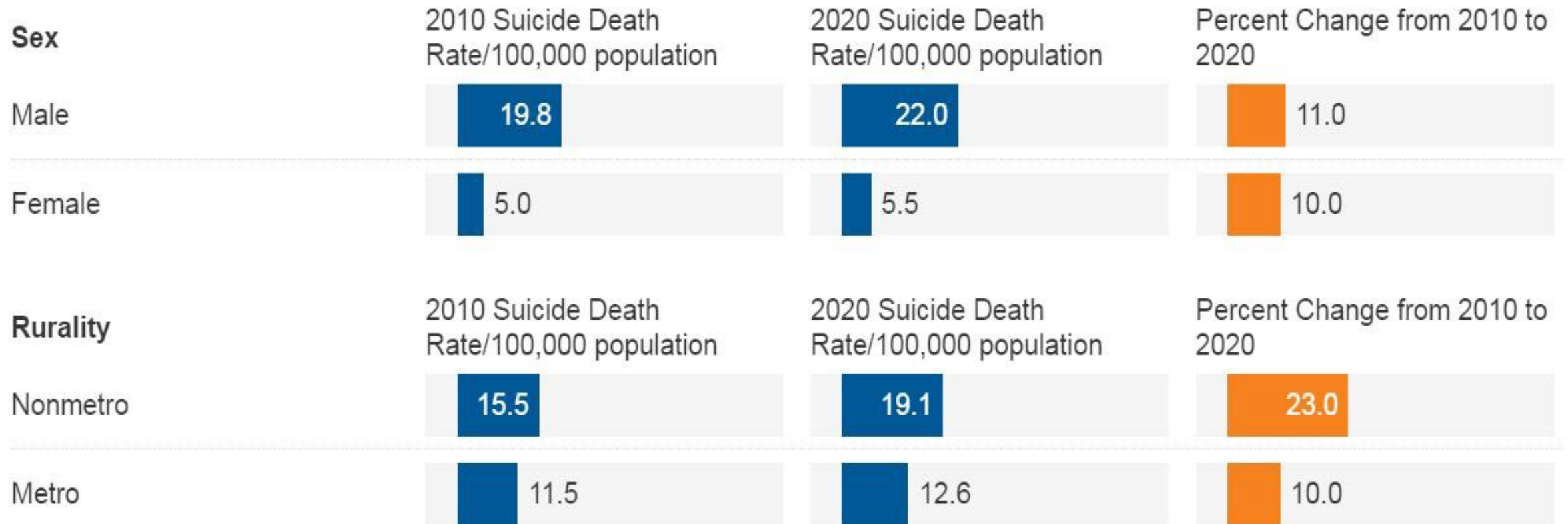


2023
2022
2021
2020

Suicide Death Rates by Demographics and Location, 2010 to 2020

Race/Ethnicity	2010 Suicide Death Rate/100,000 population	2020 Suicide Death Rate/100,000 population	Percent Change from 2010 to 2020
White	15.0	16.8	12.0
Black	5.4	7.7	43.0
Hispanic or Latino	5.9	7.5	27.0
Asian or Pacific Islander	6.2	6.8	10.0
American Indian or Alaska Native	16.9	23.9	41.0
Age	2010 Suicide Death Rate/100,000 population	2020 Suicide Death Rate/100,000 population	Percent Change from 2010 to 2020
12-17	3.9	6.3	62.0
18-25	12.8	17.0	33.0
26-44	15.0	17.8	19.0
45-64	18.6	17.4	-6.0
65+	14.9	16.4	10.0

Continued...

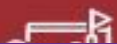


Now What?



Community Engagement





1. Initial preparation



4. Ongoing mobilization of the media

1. Tips for successfully working with the local media
2. Responsible media reporting



5. Monitor and evaluate the community action plan

1. Continuous monitoring
2. Evaluation to formulate lessons learned for future efforts
3. Surveillance systems and quantitative change



6. Community feedback meeting

Upstream Prevention

Moving Prevention Upstream

Why do we believe in the importance of upstream prevention? To understand, imagine standing along the bank of a rushing river...

There are people struggling in the water. It's clear that without help, they could drown. Person after person are pulled to shore. They're weak and cold, and some are clearly ill. Before long, more people float by. It's a struggle to rescue as many people as possible. The question is: What else could be done to help them?

The rush of people isn't stopping. Upstream, there are people clinging to tree branches and rocks in the water. They haven't been swept away by the current yet, but they still need help. Life preservers are thrown to those in the water. The question is: Where are they all coming from?

Life jackets are being handed out when there is a distant scream. Upstream, someone falls through a hole in an old bridge and splashes into the river below. That's it! If someone doesn't post warning signs or repair the bridge, more people will fall in. Heading upstream with a toolbox, it's clear: Fixing this bridge will help keep people safe today and for years to come.



Why intervene here?

It's important to help people in urgent need. When individuals face a crisis, **tertiary prevention** services offer vital treatment options that help individuals cope and recover. These interventions are essential for dealing with the consequences of trauma. The next step? Helping people avoid them.

Why intervene here?

Giving people tools and support for improving their own health is key. **Secondary prevention** programs provide a critical early response to behavioral health challenges. Such midstream interventions can help individuals avoid further harm. The next step? Addressing trauma's root causes.

Why intervene here?

Helping people build resilience can prevent harm before it occurs. That's why **primary prevention** takes place upstream. By addressing the root causes of public health challenges, these interventions have the power to strengthen and protect communities as well as individuals.



- Wisconsin example
- Colorado example



CDC's Suicide Prevention Technical Package: Strategies & Approaches

	1	2	3	4	5	6	7
Strategy	Strengthen economic supports	Strengthen access and delivery of suicide care	Create protective environments	Promote connectedness	Teach coping and problem-solving skills	Identify and support people at risk	Lessen harms and prevent future risk
Approach	<ul style="list-style-type: none"> Strengthen household financial security Housing stabilization policies 	<ul style="list-style-type: none"> Coverage of mental health conditions in health insurance policies Reduce provider shortages in underserved areas Safer suicide care through system change 	<ul style="list-style-type: none"> Reduce access to lethal means among persons at-risk of suicide Organizational policies and culture Community-based policies to reduce excessive alcohol use 	<ul style="list-style-type: none"> Peer norm programs Community engagement activities 	<ul style="list-style-type: none"> Social-emotional learning programs Parenting skill and family relationship approaches 	<ul style="list-style-type: none"> Gatekeeper training Crisis intervention Treatment for people at-risk of suicide Treatment to prevent re-attempts 	<ul style="list-style-type: none"> Postvention (activities that reduce risk and promote healing after a suicide death) Safe reporting and messaging about suicide

Equity



State Examples

Featuring Charlie the Great!





Speaking with Legislators and Suicide Prevention Legislation

Charlie Severance-Medaris, policy specialist, NCSL Health Program

April 26, 2021

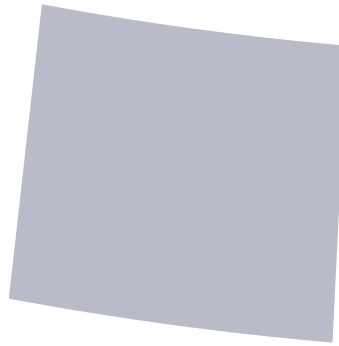
Preventing Suicide Among LGBTQ+ Youth



Arkansas



California



Colorado



Illinois



Utah

Preventing Suicide Among Veterans



Florida



Texas



Utah



West
Virginia



Washington

Preventing Suicide Among First Responders



Illinois



Kentucky

Farmers and Rural Communities



Kentucky



New York



Washington



Wisconsin
(Proposed)

Native Americans and Other Racial Disparities

Colorado - Appropriated \$5 million for facilities to provide mental health services to tribal communities.

Delaware (Pending) – Requires the governor to consider black and indigenous women in the membership of the Child and Maternal Death Review Commission, recognizes the role and disparity of suicide in maternal and child deaths in black and indigenous communities.

