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# Suicide Prevention Newsletter July 2016

## Assessing and Managing Suicide Risk-Training

A **free** training in Assessing and Managing Suicide Risk will be offered in Wenatchee on August 18.

This training meets the legislative mandate for health care professionals, nurses, school social workers, counselors, and psychologists.

Register [here](#).

## Forefront Cares

Forefront: Innovations in suicide prevention has a program called *Forefront Cares*. This program sends a package to bereaved individuals or families to let them know that there is a community that supports them. Each package contains educational materials on grief after suicide, as well as comfort items such as a candle and tea.

Forefront also offers short-term telephone support for those newly bereaved by suicide. New



loss survivors will be matched with trained volunteers, based on the type of loss experienced.

In order for an individual or family to receive such a package or to request the telephone-based peer support, please

email [ffcares@uw.edu](mailto:ffcares@uw.edu) or call 206-291-7279. The package is free for those who live within Washington State and who have lost someone to suicide in the past year.

## Guidance for Pediatricians

American Academy  
of Pediatrics



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The American Academy of Pediatrics published a new clinical report, [\*Suicide and Suicide Attempts in Adolescents\*](#), as guidance for pediatricians. It advises pediatricians to "Ask questions about mood disorders, use of drugs and alcohol, suicidal thoughts, bullying, sexual orientation, and other risk factors associated with suicide in routine history taking throughout adolescence. Know the risk factors (eg, signs and symptoms of depression) associated with adolescent suicide and screen routinely for depression. Consider using a depression screening instrument, such as the PHQ-9 or PHQ-2, at health maintenance visits from 11 to 21 years of age and as needed at acute care visits."

## Recommendation for Depression Screening

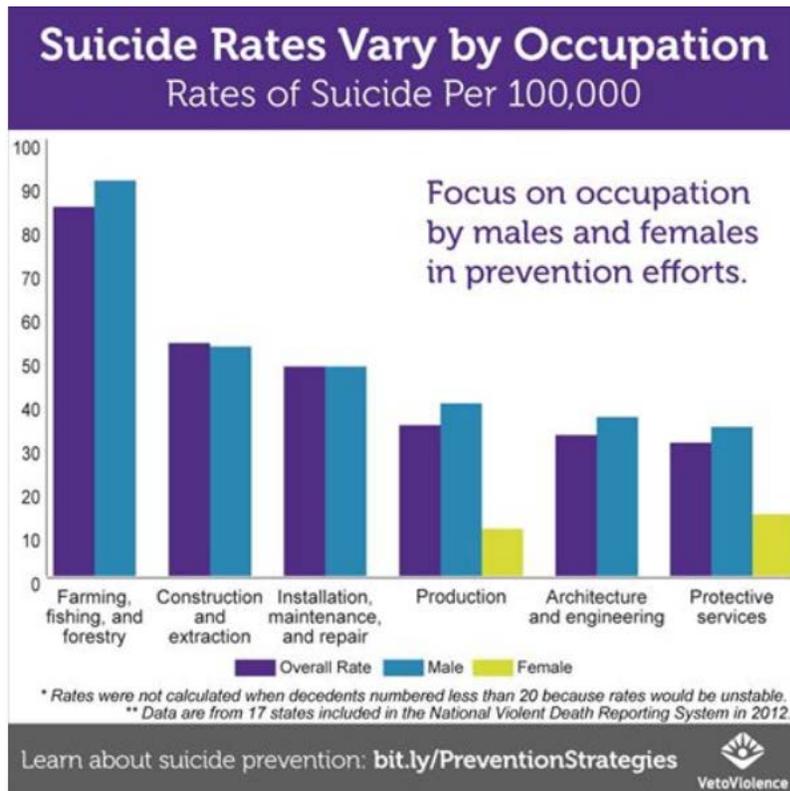


The U.S. Preventive Services Task Force (USPSTF) has issued a new recommendation regarding depression screening for adults: "The USPSTF recommends screening for depression in the general adult population, including pregnant and postpartum women. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up."

This recommendation replaces the 2009 one, which recommended selective screening based on professional judgment and patient preferences when depression care supports were not in place. "In recognition that such support is now much more widely available and accepted as part of mental health care, the current recommendation statement has omitted the recommendation regarding selective screening, as it no longer represents current clinical practice. The current statement also specifically recommends

screening for depression in pregnant and postpartum women, subpopulations that were not specifically reviewed for the 2009 recommendation.”

## Suicide Rates Vary by Occupation



Infographic from VetoViolence, CDC

## The Importance of Asking and Communicating

Dr. Christabel Owens from the University of Exeter Medical School did a qualitative study with families “bereaved by suicide where loved ones had no clinical engagement prior to death. Debunking a common myth, every interviewee on reflection some months following suicide loss, saw it coming. More worrying, all deeply regretted they had said nothing, compounding survivor guilt. Christabel recounts family dilemmas, familiar to clinicians and researchers. In the aftermath of suicide loved ones always feel a sense of complicit guilt and remorse for the unspoken, the noticed but unremarked concern. Uniformly, families in this study harboured great regret for not

simply asking, 'have you been thinking about suicide? I am really concerned, and I will stick around to ensure you get the right kind of help...together we can get you through these difficult times. '

In retrospect, loved ones recommended 'whatever you say, say something....' Christabel's finding identified love and loyalty misplaced preservation of the relationship status quo over rocking the boat, fearing the risk of rejection or the silent treatment. In the context of suicide risk, tentative, understated under-confidence in speaking out to a loved one in distress, from a place of deep concern, can become a contributory factor to suicide fatality. This all too prevalent 'loyalty' position prevents potentially lifesaving bridge-building towards effective support for a renewed sense of 'life worth living'. Near lethal attempt survivors often repeat Kevin Hines's alert, 'had just one person asked, I would have said it all. ' Love and loyalty silences can be fatal. An important dinner table take home message...for every household." (Fergus Cumisky, Contact Zero Suicide Manifesto, Zero Suicide Listserv, July 5, 2016)

## Public Service Announcements & Infographic

The American Foundation for Suicide Prevention (AFSP) has two public service announcements (PSA), [Talk Saves Lives – 30 second PSA](#) and [Talk Saves Lives – 60 second PSA](#). AFSP suggests sharing them on social media.



## Stories of Hope and Recovery

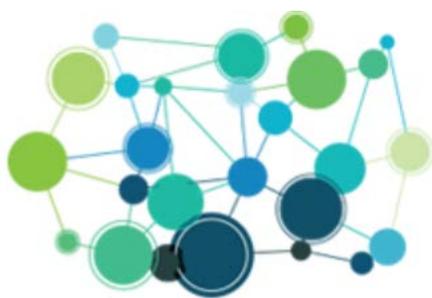
[The Substance Abuse and Mental Health Services Administration](#) (SAMHSA) and the [National Suicide Prevention Lifeline](#) published videos depicting inspiring stories from three people who survived a suicide attempt, [Jordan](#), [Terry](#), and [David](#). Told through their voices and those of their families, the

stories recount their journeys from the suicide attempt to a life with joy and purpose.

## In the News

- [Study says young Latinas at greater risk for suicide](#)
- [Teen Bullies And Their Victims Both Face A Higher Risk Of Suicide](#)
- [Gun Violence is a public health issue](#)

## ACEs Connection Network



The [ACEs Connection Network](#) calls itself “the most active, influential ACEs community in the world.” Join it to prevent ACEs, heal trauma, build resilience, connect with people using trauma-informed/resilience-building practices, and to stay current with news, research, and events.

## Garrett Lee Smith Suicide Prevention Act

The Garrett Lee Smith Act is a federally funded suicide prevention program. [The bill was sponsored by Sen. Gordon Smith](#) in memory of his son, Garrett L. Smith, who died of suicide one day before his 22<sup>nd</sup> birthday.

Ten months after his son’s death, Sen. Smith introduced the Garrett Lee Smith Memorial Act in the Senate. It was signed into law on October 21, 2004. Since then, the act has been funding numerous suicide prevention programs around the country.

In Washington alone, it is funding five programs:

Three campus grants:



- Northwest Indian College,
- University of Washington,
- Western Washington University,

One state grant:

- Washington State Department of Health,

and one tribal grant:

- Yakama Nation.

The Act is now up for renewal. Renewal seems likely, as it has been written into various bills.

## Interesting Website

- [Men Get Depression](#)