

**Statewide Suicide Prevention Council
Quarterly Meeting
Anchorage, January 11, 12 & 13, 2016**

Chairman William Martin called the meeting to order at 1:06 p.m. on Monday, January 11, 2016 at the Frontier Building.

Chairman Martin thanked the Council members for traveling to the meeting. He noted that the meeting was almost cancelled and there needed to be special permission given to hold it due to the travel restrictions put in place by the Governor. The Council will not be able to meet again this fiscal year due to the travel restriction in place. There will be quarterly meetings held by teleconference. There is the possibility of Council members holding public meetings in their own communities. Chairman Martin met with the Governor and the Lt. Governor last month on suicide prevention. This meeting is to rework the state plan. He thinks the plan should remain largely the same but be updated. The Governor would like one of his legacies to be the reduction of the suicide rate in Alaska, which the Chairman was pleased to hear. As of October there were more suicides in 2015 than in 2014. It is discouraging because it has remained a pretty consistent rate, but last year might be higher than the past decade.

Roll Call was taken: Sharon Fishel, Meghan Crow, Barbara Franks, Alana Humphrey, Bill Martin, Brenda Moore, Sen. Anna MacKinnon, Sen. Berta Gardner, Cynthia Erickson, Rep. Geran Tarr, Lowell Sage, Rep. Benjamin Nageak, Kathryn Casello, Linda Sheridan, Rob Sanderson Jr.

Absent: Alavini Lata (excused)

Approval of the Agenda

Rob Sanderson **moved** to adopt the agenda. Senator Anna MacKinnon **seconded**. The agenda was **approved** without objection.

Approval of the Minutes

Rep. Benjamin Nageak **moved** to approve the September 23 and 24, 2015 minutes; Sharon Fishel **seconded**. Chairman Martin asked if there were any corrections. Linda Sheridan commented that the minutes reflected on page 14 that she had trained 89 percent of the soldiers in suicide prevention, but she didn't personally train all of them. The minutes were **adopted** as amended without objection.

Ethics Disclosure

Chairman Martin serves on the Juneau Suicide Prevention Coalition and on a tribal suicide coalition, which receive state funds. Sharon Fishel works for DEED, which receives suicide prevention grant funds from the Council as well as a grant from the Division of Behavioral Health. Her suicide prevention grant application will be going out tomorrow so there will be a new set of grantees this coming fiscal year. Barbara Franks serves on the Alaska Psychiatric

Institute Advisory Board and the National Suicide Prevention Lifeline. Rep. Tarr commented that she is on a national task force on behavioral health and just got back from a meeting in Florida. Alana Humphrey works for Boys and Girls Club, which receives state funds. Meghan Crow works for Lower Kuskokwim School District, which receives suicide prevention funds from Department of Education and Early Development (DEED). Linda Sheridan commented that in 2015 there were zero suicides at Ft. Wainwright. Active duty Army suicides were down last year. That is not true in the rest of the branches, but it is the case with the Army. Brenda Moore co-founded Christian Health Associates, which receives state funding for its school-based health clinics as well as Anchorage Project Access. Rob Sanderson is on the Central Council of Tlingit Haida Indian Tribes of Alaska board, which receives state grants.

Attendance

Chairman Martin commented that the next item on the agenda is to discuss attendance. He noted that there has been enough for a quorum in all of the recent meetings, but some have been pretty close. He encourages all members to try and attend all of the meetings. This is probably the last in person meeting. Kate Burkhart commented that the Council can meet whenever it wants, but just can't travel until the next fiscal year. Eric Morrison commented that there are two meeting scheduled for this fiscal year, one in the spring and one in the summer, which will both be video/teleconferences. Senator MacKinnon asked if there is any member that has not been in compliance with the by-laws. Burkhart said the by-laws state that a member cannot have three unexcused absences in a 12 month period. Nobody is out of compliance with the by-laws. Sanderson commented that he hopes people will attend all of the meetings and the Council should hold itself accountable. This is an important issue and he is disappointed that the travel restrictions are in place, adding that this Council is one that should continue to receive funding.

Annual Implementation Report, Kate Burkhart

Kate Burkhart commented that the Annual Implementation Report was not finished prior to the meeting. Most of the data points have been updated, but there is some information that wasn't available prior to the meeting so there is not a completed draft. The narrative is lower priority because of some emerging projects, including work needing to be done for the Governor's suicide prevention workgroup that is meeting every two weeks. John and Katherine Baker have also started a project called Alaskans Changing Together (ACT) that has taken some time and attention. It will be done soon once the missing information is provided. The information that has been provided is very good. There has been a large increase in the calls to Careline. The money that the Council has secured for DEED has shown to be effective and initial reports indicate it has actually saved lives. One alternative school reported 16 interventions. She apologized that the draft is not completed, but it will be soon once the final information is provided.

Senator MacKinnon asked if Burkhart works for the Council or for the Governor. Burkhart commented that she was appointed by the Governor but her direct supervision is provided by the executive committees of the Council, the Alaska Mental Health Board (AMHB), and the Advisory Board on Alcoholism and Drug Abuse (ABADA). Her salary is paid for out of the AMHB budget, not the Council's.

Senator MacKinnon asked what the expertise of the Governor's workgroup is and how it differs from the Council. Burkhart commented that Commissioner Valerie Davidson will be meeting with the Council tomorrow to speak about the workgroup, but the Lt. Governor pulled together a workgroup that initially didn't involve the Council but was invited to the third meeting. The commissioners of the departments of Health and Social Services, Public Safety, Corrections, Education and Early Development, as well as some other experts from each department. The chiefs of staff of the Governor and Lt. Governor have also participated. Burkhart commented that the first meetings focused on fact finding, and the recent meetings have focused on the Council's work and the Council's plan. Commissioner Davidson will be addressing all of this tomorrow. Chairman Martin commented that he thinks the Council should be present at all of the workgroup meetings since it focuses all of its work on the issue and has done so for many years. Moore commented that she was disappointed that the workgroup has supported this new ACT initiative when they have never reached out to the Council. That has happened before when people do work not involved with the Council and there becomes competing efforts and uncoordinated efforts. It takes everybody working together, coordination and evidence-based practices to address the issue. There are certain groups that get the attention of certain policy makers and get credited with all of the work, when the Council has been addressing the issue for years. Rep. Tarr commented that she thinks the workgroup is a good thing. The Council is not excluded at this point, but there has been work of bringing the departments together that will overall strengthen the work of the Council. Burkhart commented that if the Council would like an appointed member to attend the meetings she can't imagine they would not allow that to happen. Her perception is there is a need to find out what the different departments are and are not doing and look at how that effort can be better coordinated. Senator MacKinnon commented that she is a little upset that the Council wasn't initially invited to participate and is upset that new priorities are being put forward that were not brought forth to the Council. The Chairman should have been asked to participate from the beginning. She is happy to work with the workgroup, but she would like to make a **motion** to ask the workgroup that a Council member be included in the workgroup and meetings. Sanderson **seconded** the motion. Martin asked for the question. The **motion passed** without objection.

Public Comment

Faith Meyers is a volunteer mental health advocate to improve the rights of people in crisis. Mental Health Trust beneficiaries are the most likely people to commit suicide and die of exposure in a snowbank. Suicide is not always immediate, alcohol and drug abuse can take years for someone to kill themselves. There are often not policies in place to help people protect themselves. Individuals made to feel helpless and hopeless are the most likely to make poor decisions. There are rights that need to be improved, which will in turn decrease the rate of suicides. There is a benefit to make the rights available to people in crisis. Alaska should create literature that it can share with those in need. Tens of millions of dollars have been spent on suicide prevention, and even with an annual budget in the millions, the rate of suicide has increased since 2005. It is time for Alaska and the Statewide Suicide Prevention Council to add improving rights for the disabled and people in crisis as a way to decrease suicide. She thanked the Council for its time.

Rep. Tarr commented that Meyers is a constituent of hers and has been very involved in public advocacy and the legislative process. She noted that Meyers has put a lot of work in the handout she provided. Meyers commented that if people are vulnerable they could benefit from having a resource guide they

could look at to access help and resources. It would help reduce the frustration and potentially keep people from taking their own lives.

Patrick Anderson has sat on the American Indian and Alaska Native Suicide Prevention Task Force for about four years. Before that he was the administrator of two rural healthcare systems. He has had family experiences that led him to the work he is doing today in suicide prevention. He became interested in the subject in 2008 when he learned about the Adverse Childhood Experiences Study (ACES). He is trying to help people learn about that study and the impacts of things that happen to children that can lead to mental health issues and behaviors in adulthood. What people face in Native areas is an epidemic in childhood trauma that is severely impacting. He doesn't believe that suicide prevention should be addressed in a silo. It should be addressed at a behavioral level. He has publicly acknowledged having a score of six in the ACES. Policy makers and healthcare providers do not target the people most at risk. People should be focusing on the people that are the most traumatized in society. The Native population is much larger and diverse from the participants in the original study. People with higher ACES scores are much more likely to attempt and commit suicide. Men are the highest at-risk population. Anderson went through a number of figures of ACES related to suicide. People with higher ACES scores are also more likely to experience other debilitating health issues. Native communities with people with a higher ACES scores are more likely to have greater issues with alcohol abuse, domestic violence, sexual assault and other issues. A lot of state expense and a lot of the issues come from a lack of addressing childhood trauma.

Sheridan commented that she agrees that the high-risk populations should be targeted. She commented that women attempt suicide more frequently and men complete suicide more often. She does not want to see the populations separated from a risk standpoint. It is important to look at both. Anderson commented that he agrees, but that sometimes it is easier to focus on moving the easiest numbers first. Men and women should both have a screening protocol. It would benefit people to know that they fit into a high risk profile, but should not assume that they are going to do anything to harm them self because they fit that profile.

Erickson commented that it is hard to break the cycle. A lot of the leaders in villages are the abusers. She asked if he had any solutions for breaking the cycle. She commented that at-risk women in her community often are easier to identify, which she attributes to the use of social media and talking more about it with friends. It is very hard to break the cycle with the leaders of the villages.

Anderson commented that it is difficult to change and it is difficult to accept solutions that don't come from evidence-based sources. He is not a big fan of best practices. He is a systemic thinker. He advocates teaching people on their own experiences. The older generations have to be convinced of the impacts that childhood trauma has, but they also have to be healed. They are often dealing with the same issues. He believes that people need to have proper knowledge, nutrition, exercise, meditations and other therapies. There are some people that have had such serious trauma that they need professional help, but there are many that just need a structure of a healthy lifestyle.

Erickson commented that it is sad to see the nutrition level of many youth in villages, because there is not a lunch programs in schools and they end up eating a lot of processed, unhealthy foods. She has been talking with kids in her community about creating parenting classes that can help lead to healthier lifestyles.

Franks thank Anderson for presenting and for being a supporter of a healing conference in Alaska. There are many hurt people that are helping others but have not received any help. Anderson agreed that people that are doing the healing must be healed first. It should be a part of the systemic approach to healing. Anderson thanked the Council for its time.

How to Structure the Updated State Plan, Eric Morrison

Morrison commented that the Council decided to dedicate the majority of this meeting to revising the state plan. It was not specifically discussed how to structure the process, so this is an opportunity to discuss how to spend the following day on revising the plan. Morrison went through the national plan goals and compared them to the state goals and asked if the Council wants to continue using this framework in the new plan, or to take a new path. The question to think about is the number of strategies in the plan. The current plan has 35 strategies. Morrison asked if the structure of the plan is how the Council wants it to be, or if that should be reconsidered the following day. Sheridan asked if the strategies are broken down into specific time frames. Morrison commented that the actual plan was not, but the regional teams created to implement the plan in 2012 did set immediate, intermediate and long term goals. Chairman Martin asked how many regions there are. Morrison commented that there are six regions that participated. Morrison commented that each team selected a different number of goals and strategies that would be most relevant to their regions. Not every solution will work the same in every region. The idea was to have each region tailor their own plans for their specific needs and resources.

Sen. MacKinnon commented that she likes the structure of the plan and that it is very broad. A great number of the strategies were accomplished. She is fine with the number of strategies remaining the same. She recommended going through all of the strategies the following day and update them as they need be. Moore commented that she likes the structure of the plan and how it encompasses both urban and rural. There is a difference in resources and cultures in the different areas.

Burkhart provided some background on how the plan was implemented and the creation of the six regional teams. A lot of what has been learned the past four years is the plan and strategies are a strong framework, but the regional teams worked at different levels of implementation due to a number of factors. There are some opportunities to take the lessons learned from the implementation in how the plan is rewritten. A lot of the strategies have been accomplished, while others have seen very little work done on them. Tomorrow is an opportunity to go through the strategies and reprioritize which ones are the most important. In four years there have been some great strides, but there have also been some problems with the implementation, particularly at the community level. Having the grants centered around the plan has proven successful. Burkhart commented that one of the things she is most proud of is that the plan was the work of about 300 Alaskans that helped shape the strategies. It is a product of Alaskans. The Council endorsed the wisdom of the people that came up with the ideas. She would like to see the Council honor the work of those Alaskans by moving this product forward and revising it rather than starting over. Unlike most state plans that come from bureaucrats, this one was created by Alaskans.

Rep. Tarr asked James Gallanos if the six regional teams should be evaluated and reconsidered, or if there is another way to work on implementation to consider. Gallanos commented that it was originally designed as a way to bring together the different entities and work together. He commented that five

years later the organizations across the state are working much more closely and are able to coordinate resources better.

Sanderson commented that the number of deaths by suicide continues to rise so there might be a reason to take another look at this plan and how it is structured. He said he has not seen anything work across the state. Every community is different. Sen. MacKinnon asked if Sanderson had been able to review the plan. Sanderson commented that he is looking at it. He has not seen many of the strategies implemented in his community in Southeast Alaska, such as training in schools. Sen. MacKinnon commented that it had been implemented and the Council helped make it happen. There may be things that look like they are static, but there is a lot that has been accomplished.

Franks commented that she likes the plan as it is, but looking at the names that were involved in creating it, many of those people have moved on and are no longer in the state or in the field. There has been a lot of turnover. Sheridan asked if there is always a lot of turnover in the state. Franks commented that there is always a lot of new people coming and going, with new people often bringing in new ideas and doing away with previous programs. Moore commented that this is the framework, that there are implementation reports each year that show the progress of the goals and strategies. There has been a lot of work done in the past decade. There are a lot more groups across the state addressing the issue that were unwilling to a decade ago. It is a little discouraging to look at the numbers, but suicide is a complex issue. It takes everybody working together, cooperation, coordination and networking. There have been large increases in trainings and awareness. It is frustrating that the numbers haven't changed, but there has been a great deal of effort.

Burkhart commented that if the focus is always on the total number it can be demoralizing. The population is so small that the rate can shift dramatically with a relative small change in the overall number. The population has increased in recent years, but the rate has not. That is not the decrease that is wanted, but it is something to look at. Alaska has not been at the top of the list of suicide rates in recent years. The Council is making progress but it is not as fast, as dramatic, as many people would like. Rep. Tarr commented on focusing more on the high-risk populations to try and reduce the numbers and rates. Sheridan commented that the military has focused on high-risk population and it has been successful in the Army at Ft. Wainwright.

Sen. Fairclough commented that she supports focusing on targeting a specific population. The Council has been successful at getting legislation for training in schools, so she hopes that strategy remains in the plan. She would also like to see the plan reflect the strategy of getting more training at the university level. She would like people to use their expertise in their rolls to help look at what strategies are important for their roll. The state is facing some rough times ahead financially, so she would like the plan to have strategies that can utilize non-state resources over the next few years. The state is not going to be able to do the majority of the work on the issues, so the plan should reflect that. Fishel commented that the finances are shrinking and the duties are increasing.

Morrison asked the Council how it would like to structure tomorrow. Chairman Martin mentioned that this will be the last time to meet in person until the fall so the work done tomorrow is of extra importance. Morrison commented that the Council will be able to meet in the fall to review the plan before it is finalized. The suggested timeline is to provide a draft to Council members by September 30, which could be at the fall meeting, have Council comments to staff by October 7, put the plan draft out for public comment October 12-26, incorporate the public comments as appropriate, have a revised

version for Council members on November 4, have an ad-hoc teleconference between November 14-18 and have it completed before Thanksgiving. The plan is to unveil the plan in January 2017. This is the same framework that was used last time. Morrison commented that the agenda is to go through the first three goals at the beginning of the day, and the next three after lunch.

Sen. MacKinnon said she would like to meet with the Governor to discuss historical trauma and to possibly have a statewide potluck. There are some legal considerations and a need to walk a tight rope, but it is a good time as a state to address the issue of historical trauma. In her work in the field of sexual assault, she was well aware of historical trauma being a major factor in some communities. Making villages adhere to standardized Western civilization practices have held back some villages and it should be acknowledged. She was curious if something like that could be put in the plan. The administration had talked about moving forward and healing, so she thinks the head of state could host a large meeting to acknowledge that people's culture has been transformed and the languages have been set aside. It might start a conversation.

Burkhart commented that it has been brought to the Council in the past that there is a difference between acknowledgement and reparations. The Council does have some foundation on the subject based on what the people have brought to the Council over the years. She likes to say that it is public input that leads us down those roads, and the Council has received that over the years.

Sage commented that there were a lot of problems created when white people came to Alaska, but also acknowledged that childhood trauma is also a big issue. Every year there is a Native singing event that brings people from all over the state. It would be an ideal time to have a healing event. There would need to be people that understood generational trauma, generational sins, childhood trauma, and it could be beneficial to this generation as well as future generations. It needs to be done statewide.

Sen. MacKinnon commented that the healing event should not be about blame, but rather cleansing and acknowledging. You don't want to put the Governor at risk and have him take blame, but rather acknowledge. He wouldn't necessarily want to be the facilitator, but rather the sponsor. She asked Sage when the singing event takes place. He commented that it takes place the third week of February. Sen. MacKinnon commented that it would make more sense to have it the following year.

Erickson commented that a lot of people continue to blame when there should be more people taking responsibility and acknowledge healing. It is time for people to stop blaming what happened in the 1800s and to move on and start creating healthier families. Sen. MacKinnon commented that there are sins of the forefather that should be acknowledged because there is still anger in a lot of communities. Erickson commented that it is time to step up to the plate and acknowledged that it happened in order to move forward. Sen. Fairclough commented that maybe the Council should host a healing event, rather than the Governor.

Rep. Nageak commented that several years ago he was on a commission that people kept blaming others for what had happened. He finally had enough and told them it was time to stop talking about the sins of the past and start focusing on the future. The past is done and it's time to fix the people, the young people in particular. It is time to heal. Fishel commented that it is important to acknowledge it and then move forward.

Burkhart commented that the Council sounds like it wants to move forward with a healing type event. First Alaskans has been working on similar things but she is not sure where that is going. There is a racial

equity event in February. It appears they have good connections with the Governor's office. It might be possible to partner with them if it is similar. The Council could invite them to the next meeting. Rep. Tarr asked if the meeting would be different from the healing event. Burkhart confirmed it would.

Rep. Tarr commented that she experienced significant childhood trauma. There are a lot of ways to communicate that are more effective with children and victims. For instance, instead of saying "what is wrong with you," you say, "what happened to you?" The shift in language is so important. The racial equality event could be beneficial, but a separate event promoting healing for people that have experienced trauma could also be beneficial. Erickson suggested working with clergy more. Sen. MacKinnon commented that there is healing that needs to happen that goes beyond the Alaska Native population, in all kinds of communities that could benefit. The one thing that has to be addressed is acknowledging it and then not having the resources to deal with it. There should be a safety net ready to go if there is a healing event.

Chairman Martin recessed the meeting for the evening at 4:55 p.m.

January 12, 2016

Chairman Martin reconvened the meeting at 9:04 a.m.

Introduction of Department of Health and Social Services Commissioner Valerie Davidson

Chairman Martin thanked Commissioner Davidson for taking the time to come speak with the Council.

Commissioner Davidson thanked the Council for the invitation and introduced herself in her traditional Yupik language. She was born and raised in Bethel and moved to Fairbanks as a child and went to school there. Her and her siblings were the only Native children in the school and the cultural transition was significant. Her family pushed her and her siblings in doing well in school. She has worked in tribal health for 15 years. She started at the Yukon-Kuskokwim Health Corporation that serves people in an area about the size of Oregon. She then went to work for the Alaska Native Tribal Health Consortium. She has experience with suicides in her family. It is an important issue that affects all Alaskans. It is not a problem the state can fix alone, it will take all Alaskans. All Alaskans should know the warning signs and how to access help and services. It is time for Alaskans to have honest discussions about suicide.

Commissioner Davidson commented that the state is facing a budget crisis. There are things that can be done to create better efficiency in state government, but there are also things that the state won't be able to do anymore. One of the best opportunities is working on Medicaid reform and redesign because as it is now the program is not sustainable. The final report is due to come out in the coming days. The recommendations are not a surprise. One of the recommendations is enhancing behavioral health services in the state. They want to make sure individuals have access to care when they need it. In order to bill Medicaid for behavioral health services you have to have a grant from the state. That is not the national norm. One of the recommendations is eliminating that requirement. It probably made sense when it was put in place, but it doesn't make sense anymore. It will require legislation, but it is something communities have requested. If the state wants to improve its health overall, behavioral health services is key. When there is not a comprehensive behavioral health system it will increase the number of public safety incidents, increases in corrections, increased cases of child maltreatment, and over utilization of emergency services. If the state doesn't develop a better system of care, those costs will continue to increase.

Commissioner Davidson commented that the state has recently had challenges with staffing at Alaska Psychiatric Institute (API). There is some temporary staff available. They were able to get a wage increase for the psychiatrists to be more competitive with the market. It is difficult for people to come work for the state for the previous salary when they could make more in private practice. When they recruit people from out of state the doctors quickly learn that they are underpaid and then they leave so there is a lot of turnover in those positions. They anticipate in the next couple of weeks they will be able to be at full capacity at API.

Commissioner Davidson commented that they are trying to coordinate the different departments. The Governor is looking at creating a suicide prevention cabinet workgroup to see if the services are being coordinated well enough. They want to leverage opportunities. For instance, they could help provide suicide prevention training to election workers. They are trying to set up a structure so they have better communication between departments and divisions. They are in the planning stages of the workgroup and gathering a group of the right people. The first several meetings have been deliberative. They do not want to reinvent the wheel. They recognize the great work of the Council and don't want to create new goals and objectives when that work has already been done. The Governor hopes to make sure every commissioner is aware of suicide prevention and offers trainings and services.

Chairman Martin commented that he appreciates her dedication to suicide prevention. He met with the Governor last month and was told one of the administration's goals is to help bring awareness to the issue. Chairman Martin was happy to hear that, but has growing concern about the dedication to the issue. There was no consultation with the Council when the Governor set up the new suicide prevention project with the Iditarod. The program seems like a good one, but consulting with the Council would have been a good thing. He also assumed that the Council would be involved with the workgroup. Chairman Martin feels that the Council should be involved in anything involved with suicide prevention on the state level because that is what the Council is mandated to do. The recent travel ban will also affect the effectiveness of the Council in the coming year when it is rewriting the state plan. There needed to be special approval to have this meeting and won't be able to meet again until next fall. It is difficult to accomplish the work on video and teleconferences. The Council will be working on the plan today and tomorrow, but that would be very difficult to accomplish if the Council were not meeting in person. He believes the Governor should put his money where his mouth is and support the Council financially. Sanderson commented that he was told that the administration would focus on suicide prevention, but he feels that is not the case with the recent financial cuts. He feels that the Chairman and the Vice-Chair of the Council should participate in the cabinet workgroup. This is one group that needs to be funded. Commissioner Davidson commented that she always appreciates Chairman Martin's frankness and will take his concerns back to the Governor. In terms of being involved in the workgroup, it is still in the primary stages but they would welcome the Council's participation. They are still trying to make sure that they are not violating the Open Meetings Act so they have remained very deliberative. They are still in the planning phase. There have been three planning meetings so far. It is not an official meeting yet, they are planning meetings. Once they are sanctioned they will be able to bring in non-employees. The travel rule is one that nobody is exempt from. The travel limitation will affect everybody. In order to be able to get permission to have additional travel for meetings, it has to go through the Governor's Chief of Staff to get an exemption. It is not just the Council that is affected, it is everybody. Chairman Martin commented that this is a life and death issue.

Sen. Fairclough commented that from a legislative perspective she is offended that a group would come together when there is already one that is appointed by the Governor and dedicated to the subject. It hurts her feelings that a group would get together and not talk to the Chair about the Council's work. It began last year when the legislature was working on Erin's Law and she pleaded with the Governor not to push the law through because there were ideas out there for years that the Council was working on that needed to be incorporated into the bill. The Governor pushed for the law to be passed, but there was a lot of things that were jammed into the law that could become problematic. There is a lot of experience on the Council. It has been working on long-term goals that could be advanced with the help of the Governor, for instance, getting suicide prevention training incorporated into the university curriculum. The Council has been working on systemic changes that would help in the long term. Language matters and she guesses that the participants in the workgroup haven't been trained in suicide prevention, when there is a lot of experience and expertise on the Council. The Council has a great body of work that it has accomplished over the years. She was concerned that she read about this workgroup in the newspaper when the Council has already been doing the work for many years, and doing it well. The Council was audited a couple years ago and it was shown that the Council has grown exponentially over the years in its functions. She would have liked a heads up about the travel restrictions six months ago so the Council could have structured its meetings differently. The Council decided to work on the plan in 2016 to release in 2017, and things would have been structured differently had the Council known that the travel restriction was on the horizon. Sen. Gardner commented that looking at the fiscal situation the state can't miss opportunities and try to reinvent the wheel with a new workgroup.

Franks commented that she is concerned because the funding for the Careline number is often in jeopardy. The one way to get through to young people is through smart phones. She is concerned about the funding for the text line is possibly going away. It is important for the Careline to be accessible to all Alaskans because it helps saves life. There needs to be consistency.

Moore commented she has been on the Council for many years and has seen how it has evolved over the years. The Council has become more effective the past five years. She is frustrated that policymakers will put money behind new projects but those people have usually not been in contact with the Council or involved in the ongoing work. That takes funds away from the ongoing work and makes the work more difficult. One strategy does not fit all and does not work in every community. It is frustrating when a constituent comes to the legislator with a new idea, they should be directed to the Council. A lot of these ideas have been done in the past and many tend not to work. The wheel has been reinvented numerous times and it frustrates her. There is a lot of institutional knowledge that could be utilized and coordination and collaboration is very important to address this issue.

Erickson commented that she also feels the Careline is a vital resource and needs to be protected. It is a critical tool in the villages where there is not a lot of behavioral health services. Careline can only do so much with the little they have. She wants there to be more resources put toward the text line as well.

Humphrey commented that she was hurt when she read in the press about the new program with the Iditarod because there are statewide programs like Boys & Girls Club that are getting reduced support. She feels that her role on the Council is to help youth organizations to be as effective as possible bringing prevention services to children and there are many organizations that could reach more children than the new program. She was hurt that the Council was not advised on the new program.

Rep. Nageak commented that if it wasn't for the services that the health department provides in Barrow, he wouldn't be alive. His wife is a nurse and she made sure their family got counseling after their son died by suicide. He didn't want to go, but his wife made him go. Many people don't know what services are available until someone needs them. The counseling helped the family heal. The counseling works. Those programs work and he wants them to continue.

Sen. MacKinnon commented that she would like to see the administration look at combining behavioral health grants in schools to help with prevention and intervention. There are opportunities in the schools to help save money by putting some of the behavioral health specialists in schools. Fishel commented that they have done that with the school grants and it has reaped huge benefits. The school grantees have used some of the grant money provided by the Council and given it to the behavioral health provider so they can provide a clinician in schools and set hours and set days. It has been very beneficial in the few schools that they have done it and it has saved lives. Sen. MacKinnon commented that school nurses have a good recognition what is going on in schools. She would like to see more prevention services go through nurses' offices. Nurses know what is happening in schools.

Sheridan commented that the Careline is important to Alaska because many people outside don't understand the geography, cultures and challenges that Alaskans have. She would like to see that funding remains for Careline and not a shift to the national crisis line because it could lead to more harm.

Crow commented Lower-Kuskokwim School District has a very good social work model in place in the schools for many years. It works very well to have a counselor and social worker in schools. In villages it is not available for every school to have the services, but it is a very effective tool to have trained people at a clinical level in the schools. There is a lot of good work being done and there should be more conversations about what is working. The successes should be more visible so that what works is being focused on because a lot of the focus tends to be what is going wrong.

Sage commented that his community lost a young girl to suicide last year. She went to the regional hospital and was given medication because they thought she had a mental problem. She had a spiritual problem, he believes. They gave her different types of medication that caused a bad mental reaction. He wants there to be a recognition when someone needs spiritual health rather than medical health. He would like to see that put in the behavioral health language. Erickson commented that she sees a problem with over medication when there is not as much effort going toward support. There is often no follow up or counseling when they are prescribed medicine.

Rep. Tarr commented that if we think we can't afford important prevention programs, it is important to look at where the money is being spent now. There is a lot of money going toward corrections, foster care, etc. The state needs to work more on prevention to help reduce costs. She is very fearful of what will happen if there is not more solutions to these large social problems that have been going on for decades. She will defend any funding that will support those programs. It is critical for Alaska's future. There needs to be more focus on helping the people.

Sen. MacKinnon commented that as the co-chair of the Finance Committee that she thinks that all of the marijuana tax revenue be funneled into prevention resources. It is a new funding stream and it is going to cause problems that will need to be addressed, so why not put it toward prevention. Fishel commented that they did a survey in alternative schools and most students said they would rather use

marijuana than medication to treat their depression so there is a big connection. To use the money to treat that problem would be great.

Commissioner Davidson commented that she appreciates the honest feedback. She acknowledged that she will make mistakes, and has, but generally learns from them moving forward. She will take the concerns back to the Governor. She wants everyone to be aware that as the budgets are shrinking that everyone will need to work together to preserve programs that matter. There is a grab for money right now and she doesn't want to see one program take the funding of another that might be critical to a community. She wants folks to be aware that some programs are trying to get a bigger piece of the pie than they might need. People should look at a community level at what programs work, which ones need protecting, and what are ways that things can be done differently. Things that work in Bethel don't necessarily work in Barrow. She is really excited that in the Mat-Su Valley they have gathered community members to look at Emergency Room data and determine how much of it is behavioral health related. It is around 60 percent. They are also looking at ways to braid funding together from different sources that will allow the community to do things differently. She commented that having discussions at a community level works well so that the state doesn't unintentionally take money from a needed program. One of the things they have committed to is being respectful when they disagree on spending cuts. This is a difficult time and has a lot of difficult tasks ahead. Things are going to be challenging and they are going to have to work together to make decisions and bring Alaska to sustainability. She committed that she appreciates the feedback and will report back to the Governor.

Chairman Martin commented that he appreciates all of the hard work she has done and will continue to do.

Work Session on Revising State Plan

Chairman Martin commented that the Council will spend the rest of the day reviewing the state plan and making any suggestions for revisions, changes or additions.

Goal 1: Alaskans Accept Responsibility for Preventing Suicide

Burkhart asked Council members if they are still satisfied with the first goal. Everyone wanted to keep it as is.

Strategy 1.1 Alaskans learn and understand that suicide is preventable

Chairman Martin commented that this is an important strategy. The state has come a long way in the past decade. A decade ago many tribal organizations refused to talk about suicide. It has kind of been an "elephant in the room" situation that has gotten better as the years have gone by. Chairman Martin asked if the Council has a Facebook page. Burkhart commented that there is a page that has about 1,500 members. It is monitored to make sure that safe messaging is adhered to. Staff has been working on developing a more robust social media presence in the coming year. Erickson commented that she would like to see more things on the page, such as tips and warning signs. Burkhart encouraged her to post. Erickson commented that she is busy with her own page, but would like to see more positive information on the Council's page.

Chairman Martin commented that a lot of people still believe that suicide is a selfish act. There are many things going on in the mind of a suicidal person that you can't often know their ultimate intentions. He

would like to see the reduction of stigma by not associating suicide with selfishness. Chairman Martin asked if anyone had any changes to the first strategy. Hearing none, he moved on to strategy 1.2.

Strategy 1.2 Alaskan adults and elders choose healthy, responsible lifestyles in order to serve as role models for younger generations

Erickson commented that it is important to promote healthy families. Chairman Martin commented that elders can help by learning the signs of suicide and recognize when someone is in trouble. In general conversations people should be able to pick up on those signs. Fishel commented that it would better fit under Goal 2.

Sheridan commented that phones have become such a big distraction and both youth and elders are spending more time on their personal devices. There is a loss of communication, which can be troublesome. Burkhart commented there really isn't a strategy that focuses on families helping families. Moore commented that there is an organization called Best Beginnings that focuses on strengthening families. It might be worth looking at that program and incorporating some of its work. Burkhart commented that all of these programs have been zeroed out of the budget so it would be an optimal time for the Council to emphasize support of these programs that help families.

Erickson commented that she wanted to talk about social media again before she forgot her train of thought. She wants to know how Council members can help reach out on social media and incorporate it in the plan. Burkhart asked if they wanted to add a special section under Strategy 2.1 that says Alaskans know how to respond appropriately and effectively on social media. Rep. Nageak and Erickson agreed. Fishel commented that it would fit well in Goal 2 when it is discussed later. Chairman Martin commented that it can be harmful when someone responds on social media in the wrong way. Rep. Tarr wondered if the Council can accept pro bono work from professionals, such as public relations specialists. Burkhart commented that there is a public information team that does the public relations for the Council. Rep. Tarr commented that the legislators often get a lot of social media attention and they could help get the word out. Burkhart commented that the Council does have digital products available that they could use in newsletters that could link back to the websites. Those can be shared, and it would also help with consistent messaging. Rep. Nageak commented that if they can get that information they can bring it up on the legislative floor and reach out to people through Gavel to Gavel. Rep. Tarr asked if the public information office has enough resources to help us and could possibly do a workshop to help the Council use social media more effectively. Burkhart commented that the Council is a state organization so it has to abide with all of the state policies. What the Council puts out gets vetted by staff before it goes out. If there was a workshop the Council members can do more individually, but what the Council puts out as an entity has to be within the state guidelines. Rep. Tarr commented that a workshop could be helpful and if the Council picked a theme for each month it would be easier for Council members to do their own individual social media more effectively. Burkhart commented that staff will work with the public information team to put together a workshop in February for basic guidelines. Staff will work with them on branding ideas and then can roll out a campaign after session is over.

Chairman Martin asked if there should be any changes on strategy 1.2. Hearing none, he decided to move on.

Strategy 1.3 Alaskan Youth seek out healthy and appropriate relationships with role models in their community

Burkhart commented that much of the work the Council has done and the resources used have targeted younger demographics. Other than the Rotary project, there have not been many resources toward middle aged and elderly populations, and they are not immune from suicide. As the Council continues to go through the plan it would be nice to recognize these other populations. Franks commented that she is very concerned about the aging population within the state and how suicide will become a greater concern in that age group in the coming years. Moore commented that working with the senior centers to get information out would be a good partnership. Sen. Gardner asked if that means that the elderly aren't in the strategies, or if there are no resources going toward it. Burkhart commented that there is no money going to those other age groups. Almost all of the money has gone toward youth. The Juneau Coalition has worked on childhood trauma in the state, but other than that there isn't much money going toward the elderly groups.

Sage commented about the suicide that happened this year at the Alaska Federation of Natives (AFN) Conference in Anchorage and that it would be wise for the Council to reach out to the organizers and try to help organize something for the next conference. There is an opportunity to help share a positive message and help with prevention. Erickson commented that it could be beneficial to have a room with counselors for people to talk to. Franks commented that she thinks the conference should start off with a positive event to open the conference as well as a healing room. There is an opportunity to come together and to address historical trauma and why suicide rates are so high in Alaska. There is still a lot of hurt and trauma from the death at the conference last year. Erickson commented that there was a healing room at the Cama-I Dance Festival in Bethel and it was very successful and got a lot of positive feedback. Burkhart suggested that Chairman Martin and Franks coordinate with AFN and work with the tribal health organizations to help host a healing room. She thinks the event could trigger strong emotions in people and AFN might not have enough resources by themselves to staff a room. She can work with the tribal organizations and see if they would be willing to participate. Rep. Nageak suggested starting with a cleansing dance to open the conference. Franks commented that it has to be done. There is going to be a lot of difficult discussions about budgets and funding shortages, so there needs to be something positive and to recognize what happened last year. Rep. Nageak commented that there could be a drumming ceremony that is represented with all of the tribes from across the state. The drum is like a heartbeat and it could be a positive message of how the heart continues to beat on. Chairman Martin asked if Sanderson is still on the AFN Board. Sanderson commented that he serves as an alternate for Southeast. Chairman asked if he could work with AFN to get a healing ceremony in place. Sanderson agreed. Erickson asked if AFN could be invited to the summer meeting to discuss this. Rep. Tarr commented that a healing ceremony sounds like a positive event. Sheridan commented that a professional should be available so that there is someone to talk to. Sage commented that a presentation of going through healing would be helpful. He would like to have a presentation scheduled on the agenda. Erickson commented that the kids she works with are tired of talking about suicide and would like to discuss positive issues, healing and healthy living. Sheridan commented that she likes the idea of talking about healing because many people that are suicidal don't really want to die they want the pain and hurt to stop.

Erickson commented that it is often difficult for people to get resources in small communities and there isn't a lot of follow-up when teenagers are suicidal and then seem to get better. Burkhart commented

that there could be a new strategy in Goal 4 about aftercare. There is nothing in the plan about aftercare. In Goal 5 a strategy could be added on how to support attempt survivors and their families. Erickson commented that it is difficult and can lead to a relentless cycle. Rep. Nageak commented that it is a great idea. Sheridan commented that it is a good place to help with prevention because a high percentage of people that die by suicide have attempted previously. Burkhart commented that the Department of Health and Social Services has been looking at ways of accessing attempt data and seeing when there is a particular community that has attempted at a higher rate than others and try to intervene with safe messaging. It has been difficult because of privacy laws, but there have been discussions about trying to move that forward. The conversation has advanced a lot in the past three years, when they originally refused releasing that information until it was stale and not useful any more.

Chairman Martin recessed for lunch.

Strategy 1.4 Communities will develop environments of respect, value, and connectedness for all members

Burkhart, based on the earlier discussion, suggested rewriting the entire section to include all age demographics into the section, including elders and middle-aged people of all genders. Sen. Gardner agreed.

Strategy 1.5 Communities will engage parents and other mentors important in the lives of children and youth in health promotion efforts

Burkhart commented that this might be a strategy that the Council takes out of the plan. There are other programs and agencies that have focused on mentoring and that is not really the role of the Council. The indicator is that students have healthy people in their lives. The indicator is right but the strategy might not be needed. Fishel commented that the indicator is important because research shows that the more a student feels connected with an adult the better off that they are. She said the strategy might not be worded right, but the indicator is important to keep. Sheridan commented that she wouldn't like to lose this indicator. Casello commented that when they teach the You Are Not Alone program one of the things they teach is having students identify an adult that they feel comfortable talking with that can give them appropriate help in interventions. It is critical for mental health as well as interventions. Humphrey commented that she believes the original intent of this strategy was to promote healthy lifestyles to reduce suicides, but the protective factors and sense of belonging is very important. The strategy might need to be rewritten. Burkhart asked if it would be appropriate to combine Strategy 1.4 and 1.5. Humphrey suggested moving the indicator to 1.4 and keep Strategy 1.5.

Strategy 1.6 Communities will prioritize building protective factors and resiliency in all comprehensive prevention efforts

Burkhart commented that one of the examples of this strategy is that the Alaska Children's Trust has really focused on resiliency the past few years. Burkhart asked if the Council wants to keep this strategy. Nobody objected.

1.7 Communities will participate in efforts to destigmatize suicide and accessing treatment for mental health crises

Burkhart commented that this strategy is another opportunity to add language about attempt survivors. There could be language about destigmatizing suicide attempts and to support continued access to

services after the crisis. “Suicide attempts” could be added after “to destigmatize suicide.” Fishel agreed and Chairman Martin agreed. The indicator probably will have to change but Burkhart is not sure what to. The Alaska Mental Health Trust Authority does a biannual survey to evaluate their overarching communication strategy, but that has become a less and less valuable tool. In the conversations with the public information office on the social media campaign there could be a discussion on how to monitor the progress or success of the outreach. There might need to be a more responsive indicator. A phone survey might not be the best way to evaluate.

Strategy 1.8 Community organizations will offer supports to promote healthy families

Burkhart commented this strategy came from a conversation about a lot of what the Council is dealing with is what happens to young children. We want to ensure that more children grow up in healthy and supportive environments so we want to promote healthy families. Burkhart asked if this is a strategy the Council wants to keep. Everyone agreed. Sage commented that he would like to see an emphasis on churches supporting health families because this generation has low church attendance and a lack of mentors. Burkhart commented that childcare is another big issue that is not addressed in the plan, particularly for those with disabilities. This might be a good strategy to add language about childcare. Humphrey commented that it is a large challenge in Alaska. For the families that are most struggling it is a huge barrier to being healthy. Burkhart commented that staff will do some research and add some language.

Strategy 1.9 The State of Alaska will support peer-to-peer wellness promotion and supports as an integral part of health promotion and suicide prevention

Burkhart commented that the You Are Not Alone campaign should be added to this strategy. There has been an expansion in the Natural Helpers program since the plan was published. The Rotary project was also a peer-to-peer. Fishel commented that Youth Leaders is also a program used in schools. Sheridan commented there is also a program in the military called Vets 4 Warriors that is also a peer-to-peer program. It is a national organization, but she is trying to bring them up to Alaska this year. Humphrey asked if the indicator needs to be rewritten since it emphasizes “state funded” peer support. She feels it should include private or nonprofit organizations as well. Burkhart agreed.

Goal 2

Strategy 2.1 Alaskans know how to identify when someone is at risk of suicide and how to respond appropriately to prevent a suicide

Burkhart commented that this is the section to add the social media campaign information. Fishel commented that the Mental Health First Aid information should be expanded to include the different versions of the program. Burkhart commented that she will remove the Jason Foundation information.

Strategy 2.2 Alaskans know about Careline and other community crisis lines, and can share that information with others

Burkhart commented that this is an important strategy that should stay in the plan. Erickson commented that everybody knows about Careline but there needs to be more financial support for it. Burkhart commented that Commissioner Davidson is aware that Careline is at capacity and we can’t continue to refer to them without doing something about capacity. The funding needs to be addressed.

Strategy 2.3 Providers of services to veterans will prioritize suicide prevention screenings and effective interventions

Burkhart commented that this is not specific to Veterans Affairs services, because a lot of veterans in Alaska receive services from other agencies as well. A lot of veterans were underreporting about suicidal ideation and that needed to be addressed so that was how this strategy came about. Burkhart commented that she would like to work with Sheridan to update this section and its resources. Sheridan agreed but commented that she works with active military members and is not an expert on veterans. She can reach out to people with more information and help get the resources.

Strategy 2.4 Spiritual leaders will encourage suicide prevention awareness and training in the communities of faith/belief

Burkhart commented that Jim Wisland and Moore have been championing this effort the past several years. There has been progress made. There have been a couple Episcopal diocese seeking training. Burkhart commented that she thinks it is important to keep this strategy. Chairman Martin commented that after a suicide in Juneau this year the minister blocked any postvention efforts. Somehow there needs to be a better effort of communicating with the clergy so they will be willing to be helpful in prevention, intervention and postvention. Sage commented that many times the pastor is the first responder in the villages. They are often there to the very end. Chairman Martin said the problem with clergy is greater in the larger communities. Fishel commented that it really depends on the religion on how the clergy responds. Sage commented that some language should be added about clergy being trained in safe messaging. Fishel agreed.

Strategy 2.5 The primary health care system will prioritize suicide prevention screenings

Burkhart commented that there was not as much progress on this as had been hoped for. In fact, there are less depression screenings done so in a way there was a step back. But the Alaska Native Health Board is in a conversation to put it forward. In order to implement this it takes resources. There needs to be some kind of financial incentive for doctors' offices to take the time to do this. Sheridan commented that the military does suicide prevention screenings on base. Burkhart commented that it is worth keeping this strategy in the plan and trying to get some traction on it in the coming years.

Strategy 2.6 School districts will implement broad screenings to identify not just imminent risk of suicide, but risk factors for suicide(substance abuse, violence, depression, etc.)

Burkhart commented that this strategy came out of the work the Juneau School District and the Juneau Suicide Prevention Coalition were doing. It worked really well but then the funding went away. They were screening for suicide as well as other important life domains. Fishel commented that she really likes the indicator because it is directed at school districts, but she also has some issues with it. Alaska is an active parental consent state and it makes it difficult. Some schools are doing it well, but others are breaking the rules and not getting parental permission. Fishel would like to see something similar, but the schools ability to screen is shrinking. Humphrey commented that as a Council it would still be the goal to have school districts do the screening, but under the law, so she feels it should remain in the plan. Fishel would like to see some language added in the section about parental consent. Burkhart commented that it can be added.

Strategy 2.7 Senior services providers will implement broad screenings to identify not just imminent risk of violence, but risk factors for suicide (substance abuse, violence, depression, etc.)

Burkhart commented that there has been some work by providing resources, but that population has not been targeted for trainings. She recommends keeping the strategy since the population is growing and they have high risk factors as well.

Strategy 2.8 The State of Alaska and its partners will engage village police and public safety officers in developing tailored community based responses and protocols for responding to crises

Burkhart commented that this strategy came from a village police officer's idea and was added into the plan. The cooperation sputtered and the idea didn't come to fruition. She recommends keeping the strategy. On the agenda for tomorrow is a discussion on what strategies to focus on during the last year of the current version of the plan. This is a strategy that could be focused on this year.

Goal 3

Strategy 3.1 Communities will partner with non-traditional organizations to raise awareness about limiting access to lethal means

Burkhart commented that this strategy is about reaching out and working with new people. Everyone agreed to keep the strategy.

Strategy 3.2 The State of Alaska and its partners will make training in evidenced-based suicide prevention and intervention models accessible to all interested Alaskans

Burkhart commented that the trainings need to be updated in the rewrite. There also needs to be a discussion with Alaska Native Tribal Health Consortium. When Franks was working there, ANTHC did a lot of training. There needs to be an update on whether they are still doing any training. Chairman Martin commented that the funding ran out. Burkhart commented that there are a lot of trainings and have continued to grow every year. The Council's policy has been to have a diverse catalog of trainings to meet people where they are. A lot of people have different needs and commitment levels so there is a lot of different trainings available. Chairman Martin commented that the Juneau coalition wants to train 25 percent of the community over the age of 18. It was agreed to keep the strategy in the plan. Cynthia commented that she would like to see more trainings in rural communities. Casello commented that they are working in a lot of smaller communities and have more trips planned in the future.

Strategy 3.3 The State of Alaska will mandate evidence-based suicide prevention and intervention training for all school district personnel

Burkhart commented that this strategy is close to completing, but not yet. Teachers and administrators for grades 7-12 are mandated, but the intent was to get everyone that works in schools to be trained. Fishel commented that one of the complications in House Bill 44 is it says 7 through 12 but in one section it says all staff, so there is some confusion on what the actual mandate is. In order to get a certification to work in a school you must have suicide prevention training and have it renewed, so that implies all staff. Burkhart suggested changing the word "mandate" to "maintain." Fishel agreed. Erickson asked if training was required for college professors. Burkhart commented that there is not. Rep. Tarr commented that as an adjunct professor she has taken training and thinks it might be a good idea. Erickson agreed because many young people that are off at college can be depressed and there might be

some obvious signs. Burkhart suggested adding a strategy to address that, but not mandating training when budgets are being downsized, but to encourage training at the university level. The Council agreed to add language encouraging training at the university level.

Strategy 3.4 Communities will develop wellness coalitions that include suicide prevention in their mission/area of focus

Burkhart commented that the coalitions have come and gone, with some more active than others. There are probably about the same number of active coalitions now as there were in 2012. Burkhart asked if the Council wants to continue advocating for coalitions. Fishel commented that many of the coalitions don't stay intact due to a lack of funding. Humphrey commented that coalitions also have a hard time staying together because of turnover and constantly having to bring new people to that table and build consensus. Morrison suggested changing the word "develop" in the strategy to "support." Fishel agreed, adding that many communities don't have the infrastructure to develop coalitions. Rep. Tarr commented that there needs to be someone in a community to be the champion, but she is unsure how to support that in some communities. The schools and faith-based communities tend to be pretty consistent in most communities. Fishel commented that there is a lot of turnover in schools, particularly in rural communities. Humphrey commented that coalitions is a very Western idea or approach and doesn't know if it translates properly in many rural communities. A coalition could be effective without being formal. Burkhart commented that the strategy is written to support formal coalitions. The wording could be reworked to include formal and informal coalitions. Rep. Tarr commented that her district is one of the most diverse districts in the country and many of her constituents don't participate in formal coalitions or organizations but support family events. She suggested adding language to support families and that supports more culturally relevant groups. Humphrey suggested adding language that supports formal coalitions and informal coalitions, or community collaborative efforts. Burkhart commented that coalitions generally meet during fixed times to get the work done. But if the work is getting done, it should not matter when the work is getting done. There is an opportunity to recognize collaborative efforts in pursuit of suicide prevention that are not necessarily coalitions.

Strategy 3.5 Community suicide prevention efforts will expressly address the contributing factor of substance abuse

Burkhart asked if the Council wants to keep the strategy. Erickson commented that it is very important to her region, with heroin use rising and many youth using marijuana and believing it is a safe alternative due to its legalization by the voters. Burkhart asked if marijuana should be specifically addressed in the strategy. Erickson agreed. She asked if prescription drug abuse was also part of the strategy. Burkhart commented that any substance abuse is included in the strategy.

Strategy 3.6 The State of Alaska will coordinate all prevention efforts across all departments and divisions, to ensure that Alaska has a comprehensive prevention system that recognizes the "web of causality" implicated in suicide, substance abuse, domestic violence, bullying, child abuse, teen risk behaviors, etc.

Burkhart commented that there is a multi-department prevention group that includes Education, Public Safety, and the Department of Corrections. Some great work has been done. There will likely be more collaboration in the coming year due to the Governor's new work group. She commented that Morrison called every department to inquire about each one's outreach efforts and did a spreadsheet with all of

the information. That will give opportunities to connect with other departments and divisions to get information out. Burkhart asked if the Council wants to keep the strategy. Rep. Tarr asked if the multi-department prevention group came out of the Governor's work group. Burkhart commented that it has been working together for three years. That group came out of this strategy. Rep. Tarr asked if it still meets. Fishel commented that the group meets roughly once a month, but will meet mainly when collaboration is needed and will meet more often or less often. The Council agreed to keep the strategy with updates to the narrative.

Strategy 3.7 The State of Alaska will balance the policy of comprehensive and integrated prevention with the use of evidence based practices to achieve verifiable outcomes reducing the impact of suicide, substance abuse, violence, sexual abuse, and mental illness on communities

Burkhart asked if the Council wants to keep this strategy. Sheridan asked if the strategy is similar to 3.5. Burkhart commented that 3.5 is addressing substance abuse, while 3.7 is basically saying pay for things that work. The Council decided to keep the strategy.

Strategy 3.8 The State of Alaska will provide financial and technical support for innovative, research-based suicide prevention practices

Burkhart commented that some of the projects that have happened are the expansion of the Qungasvik Project, A Doorway to a Sacred Place, among others. Burkhart asked if the Council wants to keep the strategy. Humphrey commented that it should be kept, but that there might not be funding. Burkhart commented that it is a five year plan and the financial outlook could be different in several years.

Strategy 3.9 The State of Alaska will coordinate and support stigma reduction efforts around mental illness, addiction, depression and suicide

Sen. Gardner commented that this strategy is important but she isn't sure if anyone is really focusing on the reduction of stigma. Burkhart commented that it is all advertising based. The Council has an annual budget of \$25,000 through the Coordinated Communications work group with the Alaska Mental Health Trust Authority that is used on stigma reduction advertising, including the television public service announcement that ran during Suicide Prevention Week in 2014. Erickson commented that her 4H group has worked with the Division of Behavioral Health on a stigma reduction campaign that included cards and posters that were sent to numerous villages. The Council agreed to keep the strategy.

Goal 4: Alaskans Have Immediate Access to the Prevention, Treatment, and Recovery Services They Need

Strategy 4.1 Alaskans know who to call and how to access help – and then ask for that help – when they feel like they are in crisis and/or at risk of suicide

Burkhart commented that there is a cutout for Careline in the back of the state plan for people to be able to have the number on them at all times if they want to. Staff is in the process of creating a new card that will include more information that can be added to the revised plan. Rep. Tarr asked how the 211 number and the Careline work together, or if they are completely separate. Burkhart commented that the 211 number is a referral service only and doesn't provide direct services. They have a catalog of nonprofit organizations that they can refer people to. They are not a crisis line. She is not sure what they would do if a suicidal person called them seeking help. That is something staff should check up on. All of the Division of Behavioral Health grantees have been required to enroll. Morrison commented that in

five years Careline has more than doubled the number of annual calls. Moore commented that she believes that the number of calls has increased because of all of the suicide prevention work that has been done. Rep. Tarr asked if Careline tracks how many of those calls are repeat callers. Morrison commented that Careline does track that data. Gallanos commented that the Division of Behavioral Health is developing a mobile app with Careline that will allow Alaskans to have all of the contact information on their smart phones. It will cost about \$8,000 to develop and run for the first year and an additional \$1,200 annually to maintain it. Sen. Gardner commented that \$1,200 a year is a very reasonable price. The Council agreed to keep the strategy as is.

Strategy 4.2 Community behavioral health centers will provide outreach to ensure that community members know what services are available and how to access them

Burkhart commented that some behavioral health centers provide more outreach than others, especially in communities that provide higher levels of services. When school districts partner with health centers, like in Petersburg, there is an effective outreach in the community. Sen. Gardner asked if behavioral health centers that receive a grant are required to do outreach. Fishel commented that it is a requirement with her grantees to have a letter of support from their behavioral health providers. Sen. Gardner and Moore commented that with no way to track if the health centers are doing the outreach the strategy seems unnecessary. Burkhart asked if the Council wants to take the strategy out of the plan. The Council agreed to remove the strategy.

Strategy 4.3 Community health providers will offer bridge services for young people identified as experiencing serious emotional disturbance, other behavioral health disorders after age 18-21

Burkhart commented that this strategy came from specific input from people in Juneau that young people that are out of high school and make their own choices often disengage from services and can find themselves in crisis. They often reengage in services in less than optimum circumstances like the court system or the emergency room. The idea of the strategy was for community health providers to support youth coming out of the juvenile health system and into the adult system. As a Council there hasn't been a lot of focus on the strategy, but there has been some work by some agencies to help close the gap that was addressed by the public. Moore commented that it is still a huge issue and a need in the state. Rep. Tarr commented that there is some good work being done on the issue but there isn't the capacity to serve the increasing number of youth coming into adulthood. Burkhart commented that this is the only strategy that targets at-risk youth that are not in the school system or foster care system. The Council agreed to keep the strategy.

Strategy 4.4 The State of Alaska and its partners will, through StopSuicideAlaska.org, create and support a learning network among communities to share ideas and strategies that work

Burkhart commented that this strategy has not been achieved. One of the functions of the website is to be able to host a page for organizations or grantees so that they don't have to fund their own website. That function is not being utilized by the public. She recommends partnering with the Alaska Health Education Library Project (AHELP) to include suicide prevention materials and information in its site. Rep. Tarr commented that the AHELP site seems to be more of a place for professionals rather than a concerned citizen or parent. Burkhart commented that there are still resources on www.StopSuicideAlaska.org, but there hasn't been the participation from the public that was imagined when the site was developed. Rep. Tarr asked if the plan was to do away with

www.StopSuicideAlaska.org. Burkhart commented that the plan is to keep the site, but there could be additional resources on AHELP that could help drive traffic back to www.StopSuicideAlaska.org. The Council agreed to keep the strategy.

Goal 5: Alaskans Support Survivors in Healing

Strategy 5.1 Survivors of a loss to suicide know about suicide prevention resources and how to participate in suicide prevention efforts that support their own healing

Burkhart commented that there was an earlier discussion about adding a strategy to support suicide attempt survivors. The plan has already identified people that have attempted suicide as survivors, but know the plan is to add specific strategies to address the issue. Strategy 5.1 is directed toward survivors of someone that has died by suicide, so Strategy 5.2 would be a similar strategy for those that have attempted suicide. Sheridan commented that in the military there is a separation between ideation and attempts and that they are handled differently, if that is something the Council wants to consider. Burkhart commented that in this context, survivors are defined in the plan as someone that has attempted suicide. Burkhart commented that the narrative in Strategy 5.1 needs to be updated because there are some new survivor groups. Erickson commented that it would be helpful to add additional resources for survivors. Burkhart commented that when the plan was created the focus was on what people were doing. The updated plan can continue with that and acknowledge people that are doing the work and highlight the work. Sage commented that the state may be ready for a grief conference where people can learn how to grieve. There are people that have learned to function without dealing with the pain they have endured. Burkhart commented that it could be included into 5.2 to include what he is talking about. The Council agreed to keep the strategy.

Strategy 5.2 The State of Alaska will provide resources, tools, and technical support for community postvention efforts, with emphasis on natural, organic responses developed in the community

Burkhart commented that Goal 5 will go from two strategies to three. There will be a new strategy 5.2 that will focus on attempt survivors and this strategy will become 5.3 and will be updated to include grief resources.

Goal 6: Quality Data and Research is Available and Used for Planning, Implementation, and Evaluation of Suicide Prevention Efforts

Strategy 6.1 The State of Alaska will improve statewide suicide data collection efforts, employing epidemiological standards/models to ensure quality reporting, analysis, and utilization for timely data driven policy decisions

Burkhart commented that when the plan was written there was the Bureau of Vital Statistics doing its data and the Violent Death Registry doing its data and that was pretty much it. There was very little communication among the different groups. Things are much better now. Burkhart commented that this is a good strategy to keep because there has been progress, but there is still a long way to go to achieve the strategy. It would be a good idea to include the Adverse Childhood Experience Study data. That has informed a lot of the work the Council has done. Rep. Tarr asked if the Kids Count data is included because it has some behavioral health information. Burkhart commented that Kids Count is a compilation of a variety of data sets that the Council used in primary form. Sheridan asked if there is any information from the military used. Burkhart commented that only from the reported deaths. Sheridan

commented that she has put in a request for information on active duty military for Alaska. The Council agreed to keep the strategy.

Strategy 6.2 The State of Alaska will partner with tribal and academic organizations to continue to explore and research the “web of causality” of suicide, prioritizing the health and environmental factors affecting high-risk populations

Burkhart commented that this strategy was written because the National Institute of Mental Health requested the cooperation of the Council for it to study suicide amongst Alaska Natives. They wanted to come in as outsiders and do the study and tell us what the problem was and how to fix it. There was very little support for that. The Council wanted to reflect in the plan that the research is important, but it needs to be participatory and needs to meet everyone’s objectives and is done so respectfully. One of the things that has been talked about but has not been completed due to the high expense, is a more robust follow-back study or psychological autopsy. There has been interest by some groups to do that, but it hasn’t been accomplished yet. Burkhart commented that the Council keeps the strategy but update the information and narrative. The Council agreed to keep the strategy.

Strategy 6.3 The State of Alaska, with its partners, will evaluate the effectiveness of crisis intervention models and responses in use in Alaska

Burkhart commented that in the packets is an evaluation of the youth suicide prevention project. She does not know if there has been a concerted effort in reviewing the crisis intervention models. Rep. Tarr asked when the sunset date was set for the Council during the past legislative audit. Burkhart commented that it was set for 2019. Rep. Tarr commented that there will likely be another audit of the Council around then. Burkhart commented that evaluating the effectiveness of the programs will be important during the next audit to make sure the work being done is effective. The Council agreed to keep the strategy.

Burkhart asked the Council if there are any other issues, strategies or goals the Council wants to add into the plan. Erickson commented that she has been concerned lately about boarding schools and thinks there should be more training for the staff. Fishel commented that the staff is all required to take suicide prevention training already. Burkhart commented that if more rural schools are closed there might be a greater demand for boarding schools. The Council might want to consider if it is appropriate to have a strategy focusing on boarding schools, and if so, what is the strategy. Erickson commented that she thinks it is something to think about it. Burkhart commented that Council members can think about it and bring it back up at the next meeting.

Burkhart commented when the plan was put together it was done in house on her computer. This time around, staff will update the plan and work with the public information team to do the pagination to make it look more professional. The idea is to also rebrand the Council, to include a new logo and update products to release with the social media efforts and new state plan. Erickson commented that she would like it to look very professional because the Council is under a microscope after the death at AFN and the increase in suicides this past year. Burkhart asked for permission to begin the rebranding process. Chairman Martin agreed it is a good idea and asked for a motion. Rep. Nageak made a **motion** to begin the rebranding process. Sanderson **seconded the motion**. The motion **passed without objection**.

Rep. Tarr asked if something should be included about supporting pledge cards like Erickson has been doing. Burkhart commented that there is research that shows that safety plans and pledges don't work, so they are not included in the plan. Erickson commented that she has been giving the cards out for the past couple years and it has been very successful. Burkhart commented that there is no reason why Erickson or others shouldn't do it or can't do it, but it is not included in the plan because it is not a proven best practice.

Chairman Martin called for a recess for the day.

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Chairman Martin called the meeting back to order at 9:05 a.m.

Planning for Public Comment on the Plan

Burkhart commented that there will be multiple ways for people to provide feedback on the plan. They can send an email, provide a letter, or a fax. Chairman Martin asked about hosting community events for feedback. Burkhart commented that if there were to be community events it would cost money, including taking notes as well as paying for the space and advertising. The easiest and most cost effective way is for it to be provided in a written format. Staff will compile the public comment and send it to Council members. Council members will review it and decide how it should be incorporated into the plan. Chairman Martin asked when the changes would be made in the plan. Burkhart commented that it will likely be the summer. The plan doesn't need to be published until the end of the year. The majority of the public comment will be done in the spring and summer. Moore suggested sending the public comment notice to all of the grantees so they have plenty of opportunity to give public feedback. She asked if the public information team can help. Morrison commented that they will be involved. Burkhart commented that the best public comment comes from groups that are interested in the topic and are asked for their opinion or participation. Rep. Tarr asked if there were funds to publicize the public comment period on Facebook or other media outlets. Morrison commented that there are some funds that could be potentially used, but it might be better to put it out as a press release to better use those funds. Rep. Tarr commented that Facebook ads can be pretty cheap and reach a large audience.

Identify Strategies to Focus on in 2016

Burkhart commented that the Council went through all of the strategies yesterday. The purpose of this agenda item is to identify strategies that have not received much focus and can be a priority of the Council to focus on this calendar year, which is the final year of the plan. The two she wants to focus on are Strategy 2.8 and Strategy 4.4. There is an opportunity to complete some of the strategies that have not received as much focus the past four years. Moore commented that she would like to see training for clergy become more widely available. Jim Wisland has developed a curriculum that could be implemented in other communities as well. There are a lot of religious leaders that are having a difficult time dealing with suicide and could use some help. Sage commented that his region has a clergy conference going on this week. He spoke with the Superintendent of his church about possible suicide prevention training. There is a church in 11 villages in his region. Moore commented that there is such a large amount of stigma in churches and the pastors need to be trained in how to deal with it. Rep. Tarr commented that during the fall there were conversations about whether to have a summit or not. A large part of that discussion was about having a clergy track at the summit. She wondered how to better work with the different religious groups to get the training out to people that want it. Sage commented

that he can network with the leaders in his group. There is a need for the training. In a lot of villages there are not first responders and the pastors often have to fill that role, like he does often. They often have to deal with the deaths, from staying with the family to acting as a counselor. There are a lot of different denominations in different regions. They would each need to be approached to try and get them on board. Moore commented that she thinks it is doable but there has never been a vehicle that is right for the church. Some parishioners and pastors don't see the value of Mental Health First Aid in a church environment, so the new curriculum that Jim Wisland created might be more appropriate. Burkhart commented that she heard two parts to focus on. The first is to make resources available, including Jim Wisland's training and others, to faith leaders. The second is to encourage more in-depth training in Gatekeeper. It could start by reaching out to the faith leaders that Council members know and ask them to help populate a page on www.StopSuicideAlaska.org that has all of the resources. That would also help bolster relationships with the faith leaders and the Council and to help inform them on what trainings are available and what might work best for them. Then it could shift to connecting to them with the trainings. Moore commented that she likes that idea. She asked Sheridan if the military chaplains are trained in suicide prevention. Sheridan commented that the Army chaplains in Fairbanks have been trained in ASIST. Burkhart asked if there are any Council members that are interested in leading the relationship building with the religious leaders. Moore commented that she could help reach out to some church leaders.

Chairman Martin asked if there were any other strategies that Council members want to focus on. Erickson commented that she would like to see the work with the Alaska Federation of Natives continue. She would like to have a room at this year's conference that could be a healing room. There could also be training. Chairman Martin commented that Sanderson is on the AFN Southeast committee and has already sent an email asking for an invitation to present. Rep. Nageak asked that they let the Council know when they hear one way or the other. Burkhart commented that she will reach out to ANTHC about having clinicians available.

Chairman Martin asked if there were any other strategies that Council members want to focus on. Rep. Tarr asked if the social media campaign fell under this topic. Burkhart commented the purpose of this agenda item was to focus on strategies in the plan. The outreach is happening and the healing event is happening, but this is an opportunity to look at specific strategies. Sheridan commented that she would like the Council to focus on Goal 2 and Goal 3 and focusing more on prevention efforts rather than postvention efforts. She feels there is more focus on after a suicide than preventing suicide.

Spring Meeting Planning

Burkhart comment that it would be helpful for Chairman Martin and Morrison if they know what the Council wants to do at its next meeting. There was much more Council member input at the current meeting than there has been in the past. That is why there were zero presentations and focused mainly on the plan, because that is what the Council wanted. The meeting will be held remotely and will be held during the legislative session. Fishel commented that the planned date of March 28 is a state holiday. Morrison commented that prior to the travel plan the Council chose to meet for two days in Anchorage, on March 28 and 29. He recommended cutting it down to one day now that the travel restriction is in place and it will be held via video/teleconference. Sheridan recommended meeting on Tuesday, March 29. Morrison commented that the discussion on the parameters of an award was tabled for this meeting to focus on the state plan, which can go back on the agenda for next meeting. Sen. Gardner commented that the rebranding of the Council should be on the agenda. Morrison commented

that he will work with the public information team on multiple logo designs that will be ready for the Council to review at the meeting. Sanderson commented that he sent an email to the Alaska Federation of Natives (AFN) leadership to request a discussion on the Council being on the agenda during the AFN conference in Fairbanks. He will let Chairman Martin know when he hears back from them. Erickson commented that planning for AFN should probably be on the March agenda. Morrison commented that there is also a summer meeting planned where there will also be a chance to discuss the AFN conference. Morrison commented that voting on the executive committee will either have to take place next meeting or the June meeting, as the new leadership starts July 1. Erickson commented that she would like to have a follow-up presentation by Jim Wisland on the clergy training in Seward. She would also like to hear an update on the Governor's work group and to invite AFN leadership to have a discussion. Morrison commented that it might be a good time to decide if the Council wants to meet in October during the AFN conference because there will only be one in-person meeting next fiscal year. Fall is generally the cheapest time of the year to book travel and the meeting could coincide with any healing efforts at AFN. Sanderson commented that the October AFN conference will be its 50th anniversary. They are expecting up to 5,000 people. Humphrey commented that it might be difficult to get plane tickets because there are limited flights. Sanderson suggested blocking rooms now. Chairman Martin commented that he would like to have the meeting the Wednesday before the conference starts and participate in any healing ceremony or efforts. Rep. Nageak commented that he would like to see a healing performance with drummers and dancers to bring people together and show that life goes on. Erickson commented that she would like to see a healing room with pamphlets and people to talk to. Franks commented that it is a perfect opportunity to reflect on the events of the last conference and heal from the hurt and start a new trail.

Chairman Martin asked if there are any more suggestions for the spring meeting. Sage commented that there was discussion earlier about actively trying to get a Council member on the Governor's work group. He would like to follow up on the status of that during the spring meeting. He commented that Chairman Martin's frustration of not being included in the process is very real and should be addressed. Erickson suggested inviting the Governor to the spring meeting. Chairman Martin commented that he will try to meet with the Governor on the issue prior to the spring meeting and invite him to the videoconference.

Alaska Psychiatric Institute's New Rural Aftercare Coordinator Presentation, Sevilla Love

Morrison introduced Sevilla Love, the new rural aftercare coordinator at Alaska Psychiatric Institute (API) that is sponsored by the Alaska Native Tribal Health Consortium (ANTHC).

Love commented that there are many people that made the position possible and she is grateful to be in the position. There was an elder that was suicidal that she worked with at API that switched courses by the time he left. She asked him for what wisdom he would share with youth and he said, "Don't give up. Good things are right around the corner." Out of all of the trainings there is a baseline message and she believes that is the message that needs to be shared. API and ANTHC wrote a memorandum of agreement to create the position. The position is at API. The idea is to do interventions with rural Alaskans and keep in touch with them after they return home. She is a licensed clinical social worker with a clinical background. She was born and raised in Alaska. Her family is Aleut and she lived in King Cove for many years living a subsistence lifestyle. That enables her to sit with patients that come from rural Alaska and have a better connection with them. She doesn't see people from Anchorage or the Mat-Su Valley. When people are suicidal and they go to API they are seen by social workers, the

treatment team, the psychiatrist, and then she will do more specialized work with them. She finds that many people she treats have had a recent death in the family by suicide. She works with the extended system of each patient. Sometimes when a patient leaves she will work with the families to ensure the treatment is working. There is a basic protocol of what she does but it is pretty flexible. She sees patients at least once and tries to establish a relationship with them and to ask to be able to follow up with them in the future. So far nobody has said no. She follows up with the individuals and if she can't get them on the phone she will write letters, which has been effective. The letters are therapeutic and supportive and always include the Careline number. She also helps follow up with the system of care to make sure people don't fall through the cracks. She calls people within one week of discharge, after one month, three months, six months and twelve months. Some people like to have more contact and they will call her. There are no set outcomes for the position yet to know if it is working, but individual feedback is positive. They are developing a group therapy program at API for the program. They are expecting once a week and will be informal. They are excited to be able to start that but they are still a few weeks out. That is the basics of the position. She asked if anyone has any questions.

Rep. Tarr asked if the position is strictly Anchorage based, or if Love will be able to travel to other communities for follow up care. Love commented that she will always be based in Anchorage, but she has plans to go to the major hubs, but that is to meet with the providers to establish professional relationships. She plans to go to Bethel soon because the majority of her patients are from there, followed by Kotzebue and Nome. She will try to touch base with patients if there is time, but the primary reason is to establish professional contacts.

Moore commented that the Council has an interest in working with clergy. She asked Love if she connects her patients with clergy. Love commented that if a patient identifies an important person in their life, whether it's a pastor or an elder, she tries to involve them in the treatment process. There has been some excellent support from clergy.

Erickson commented that there is a family from Ruby that is very grateful because the State Troopers and API helped save a young man and provided follow up care. She feels the follow up care was critical to the young man being alive today. Love commented that it is great to hear that and she will share it with senior leadership.

Franks commented that this sounds like a great position. She asked how the position is funded and asked if it is a pilot program or a permanent position. Love commented that the position is grant funded. ANTHC has received the grant for many years and expects to receive it for many more years. As long as they have the grant the position will be funded.

Moore asked how many patients come from rural Alaska to Anchorage and become homeless and end up at API and then go back to a homeless shelter. Love commented that if they go back to a homeless shelter she doesn't follow them because it is not in the criteria of the job. If they came from a homeless shelter to API and then return home to a rural area she will follow up with them.

Burkhart comment that she appreciates that the patients must give consent for there to be a follow up. She asked what percent of patients consent. Love commented that so far 100 percent of patients have given consent. There were two people that wouldn't let her talk to their care system, but let her talk to the patients themselves. There was one person that didn't want to talk to her but gave consent to follow up with their behavioral health provider. That way she could ensure they are getting services. Burkhart

asked when they are working on a discharge plan if there are conversations about not sending people back home because it might not be safe or because there might not be services. She asked if there are conversations about getting people out of Anchorage but as close to home and their culture as possible while still ensuring their wellbeing. Love commented that there are. Many people want to go home, but social workers will work with the patients to get the most appropriate placement, but sometimes there are financial or other barriers. Burkhart asked if she works with the discharge planners at API as well as the local providers to put together the right thing to go home to. Love commented that she doesn't work on the discharge plans. That is up to the social workers and discharge team. She helps support the treatment teams with decisions and treatment plan after they leave. If she finds out information from a patient she will share it with the discharge team, but she works in the follow up and not the planning. The discharge teams do talk to the patients and will try to discourage them from going back to an unhealthy situation. It depends on the patients' needs.

Rep. Tarr asked if a group home could be beneficial to recovery if a family home was unsafe but the home community provided support and protective factors. She asked if that would work. Love commented that she believes it would work. At a recent tribal directors meeting they talked about that. There is a big need for supportive housing but they don't exist for the most part because of funding. The state knows they are needed and the tribes know they are needed but getting support for them is difficult. People are thinking out of the box, but it takes money.

Chairman Martin thanked Love for the work she does and for making the presentation.

Final Comments

Sanderson commented that he is grateful for being appointed by Governor Walker. The issue has been very real and close to him his whole life. He is grateful for all of the Council members. There is a challenging road ahead and lots of work to do.

Fishel commented that there was a lot of hard work done the past few days. Sometimes it is difficult to see the fruits of the labor because the number of suicides is not necessarily getting better. Going through all of the strategies showed that there has been a lot of progress the last several years. The state is not where it wants to be, but the state plan, the Council, and the grants have saved a lot of lives. It is important to keep moving forward and focusing on prevention, resiliency, and the protective factors.

Humphrey commented that serving on the Council is difficult because of the subject matter. In the years she has been working for Boys & Girls Club there have been fewer suicides in the clubs. There still are some, but fewer and less frequently. She believes the Council is saving lives, but you never know the ones you save. That should keep the Council moving forward. She thanked the Council members for the work they do.

Moore commented that there has been a lot of progress. There is a lot more awareness around suicide than there was a decade ago. The issue has made its way up the ladder to the highest levels of policy making. The tribal entities are working on strategies now when before many wouldn't address the issue. There is a lot more focus on wellness. It will take time to make more changes, but she is encouraged because of all the work being done on prevention across the state.

Sheridan commented that it takes about 20 to 30 years to change cultural identities. Suicide has become part of the cultural identity of Alaska. It will take time to implement all of the changes, but there is progress. There is a lot happening and that needs to be talked about.

Erickson commented that she enjoyed this meeting because there was a lot of open dialog. It has been therapeutic because she often works on the issue in her village alone. There is a lot of silence in the villages on social issues. There is still a lot of stigma. It takes a long time to see the change and it is frustrating that it takes so long. It has come a long way.

Rep. Nageak commented that he never knew about suicide until his cousin died by suicide, who was a year older. That was the first one he ever experienced. Ever since then it has escalated through the years. Ever since his son died by suicide, he has been asked to speak to young people about the issue. One of the things he tells them to talk to people because you could save their life. He is glad to be on the Council and will continue to work on the issue. He wants to see a reduction of the prevalence. He learned a lot at this meeting and is grateful for the work of the Council.

Sage commented that the Council didn't address homelessness at the meeting. That is a very real issue and the public often doesn't hear when a homeless person dies by suicide. Homeless people lose a lot of hope. He would like to see the Council address that issue and reach out to the homeless in the future.

Morrison commented that he is grateful for all of hard work Council members did the past few days and have done over the years.

Burkhart commented that she is fiercely proud of the work the Council does. The work is not always glamorous or fun so the Council doesn't always get the recognition. The work the Council does is important and is moving the issue forward in the right direction.

Chairman Martin thanked all of the Council members for the hard work the past few days and over the years. He considers each Council member his friend. It takes a lot to sit through these meetings and work on solutions of a very difficult problem. It is important to get the message out and get people to share a message of hope. He commented that he knows what depression is like and has been going through it because of family matters. The good thing is he recognizes it and knows how to deal with it properly. He is proud of the Council and the work that it does.

Franks commented that she is glad more people are coming to the table to discuss the issue. She wants more people to share the crisis line numbers. Alaska is a community, even though a large one, people need to take care of each other. There needs to be a safety net.

Rep. Nageak made a **motion** to adjourn. Sheridan **seconded**. The meeting **adjourned at 12:04 p.m.**