

CASTING THE NET UPSTREAM: PROMOTING WELLNESS TO PREVENT SUICIDE
Alaska State Suicide Prevention Plan, 2012-2017



**ANNUAL
IMPLEMENTATION
REPORT
2012**

Statewide Suicide Prevention Council ❖ William Martin, Chairman ❖ Sean Parnell, Governor

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Introduction

The Statewide Suicide Prevention Council ["Council"] was established by the Alaska Legislature in 2001. The Council is responsible for advising legislators and the Governor on ways to improve Alaskans' health and wellness by reducing suicide, improving public awareness of suicide and risk factors, enhancing suicide prevention efforts, working with partners and faith-based organizations to develop healthier communities, creating a statewide suicide prevention plan and putting it in action, and building and strengthening partnerships to prevent suicide.

Casting the Net Upstream: Promoting Wellness to Prevent Suicide is a **call to action**. It acknowledges the most current research and understanding of the "web of causality" of suicide. Suicidal behavior results from a combination of genetic, developmental, environmental, physiological, psychological, social, and cultural factors operating in complex, and often unseen, ways.


Specific strategies were identified to achieve the goals and objectives of the suicide prevention system. These strategies come from the wisdom and experience of Alaskans all over our state. They are based on the most current and credible data and research available. These strategies are ways that individuals, communities, and the State of Alaska can act together to prevent suicide.

The plan is a uniquely Alaskan endeavor, though is aligned with the [National Strategy for Suicide Prevention](#) and the [American Indian and Alaska Native National Suicide Prevention Strategic Plan \(2011-2015\)](#). *Casting the Net Upstream* encourages Alaskans to think about prevention in a new way by promoting physical, emotional, and mental wellness and strengthening personal and community resilience – to prevent suicide by promoting the health of our people, families, and communities. This is the first annual implementation report. In it, suicide prevention efforts toward the six *Casting the Net Upstream* goals are highlighted and performance measures are reviewed.

FY12 Annual Report

In addition to the activities and efforts reported in this implementation report, the Council engaged in the following activities in FY2012:

- ✓ The Council finalized and released *Casting the Net Upstream: Promoting Wellness to Prevent Suicide 2012-2017*, Alaska's state suicide prevention plan in January, 2012.
- ✓ The Council held public meetings in Barrow (October, 2011), Anchorage (January, 2012 and May, 2012). Council member Teressa Baldwin offered a Hope4Alaska presentation and event at the Barrow High School during the October meeting. Council members and staff made site visits to community suicide prevention partners in Anchorage during the May meeting.
- ✓ The Council held ad hoc public meetings by teleconference to address action items arising between quarterly meetings.
- ✓ The Council, in partnership with the Alaska Division of Behavioral Health, hosted the second biennial Statewide Suicide Prevention Summit in January, 2012, at which six regional suicide prevention teams learned about the goals and strategies of *Casting the Net Upstream* and developed local action plans to implement the plan.



In 2012, the Division of Legislative Audit conducted a sunset review of the Council. This audit process was very thorough, and resulted in several important quality improvement efforts. The audit report was published June 26, 2012.¹ Three recommendations were made by Legislative Audit regarding appointment and evaluation of the Council's coordinator/executive director, monitoring and reporting Council member attendance of meetings, and reporting on the Council's performance measures. The Council has resolved the first two recommendations and is continuing to work with the Department of Health and Social Services on the third.

¹ The full report of the legislative audit of the Council is available online at <http://www.legaudit.state.ak.us/pages/audits/2012/pdf/20074rpt.pdf>.

- ✓ The Council coordinated with statewide suicide prevention supporters, including the [Jason Foundation, Inc.](#), Alaska Association of Student Governments and the American Foundation for Suicide Prevention-Alaska Chapter, regarding passage of legislation mandating suicide prevention training for certain school personnel and appropriation of additional funding for evidence-based school suicide prevention programs.
- ✓ The Council (staff and/or members, often with partner organizations) made educational presentations at the 2012 Alaska Federation of Natives Elders and Youth Conference, the 2011 Indian Health Service Action Summit for Suicide Prevention (Anchorage), the 2011 Bureau of Indian Affairs Tribal Providers Conference, the 2012 Alaska Psychiatric Association Conference, and the 2012 American Association on Suicidology Convention. Education/awareness booths and public outreach were provided at the 2011 Elders and Youth Conference. The Council provided 1,300 bracelets with the Careline number, 1,000 Careline magnets, and thousands of Careline brochures for suicide prevention events sponsored by independent living centers, community coalitions, the Alaska State Troopers, the Juneau Human Rights Commission, and others.
- ✓ The Council partnered with Alaska Community Foundation and Alaska Public Telecommunications, Inc. on the November, 2011 Town Square 49 [“Conversations That Matter: Teen Suicide in Alaska”](#) broadcast on youth suicide prevention. The Council partnered with the Irondog Race and Department of Health and Social Services to continue to the suicide prevention campaign “Life is a Team Effort: Live to Ride, Call to Live.” The Council partnered with the Alaska Mental Health Trust Authority to develop public service announcements connecting Alaskans to Careline. The Council also published a biannual newsletter.
- ✓ The Council developed the [Kognito At-Risk](#) pilot for Alaska high schools (launched in FY13). This pilot provides free access to an interactive experiential mental health and suicide awareness and prevention training to all employees of Alaska’s public high schools. Kognito At-Risk is an evidence-based training model that has been shown to be effective in other states. Visit <https://highschool.kognito.com/alaska> or call the Council at 907.465.6518 for more information on access Kognito At-Risk.



Casting the Net Upstream Goals



Goal 1: Alaskans Accept Responsibility for Preventing Suicide



Goal 2: Alaskans Effectively and Appropriately Respond to People at Risk of Suicide



Goal 3: Alaskans Communicate, Cooperate, and Coordinate Suicide Prevention Efforts



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



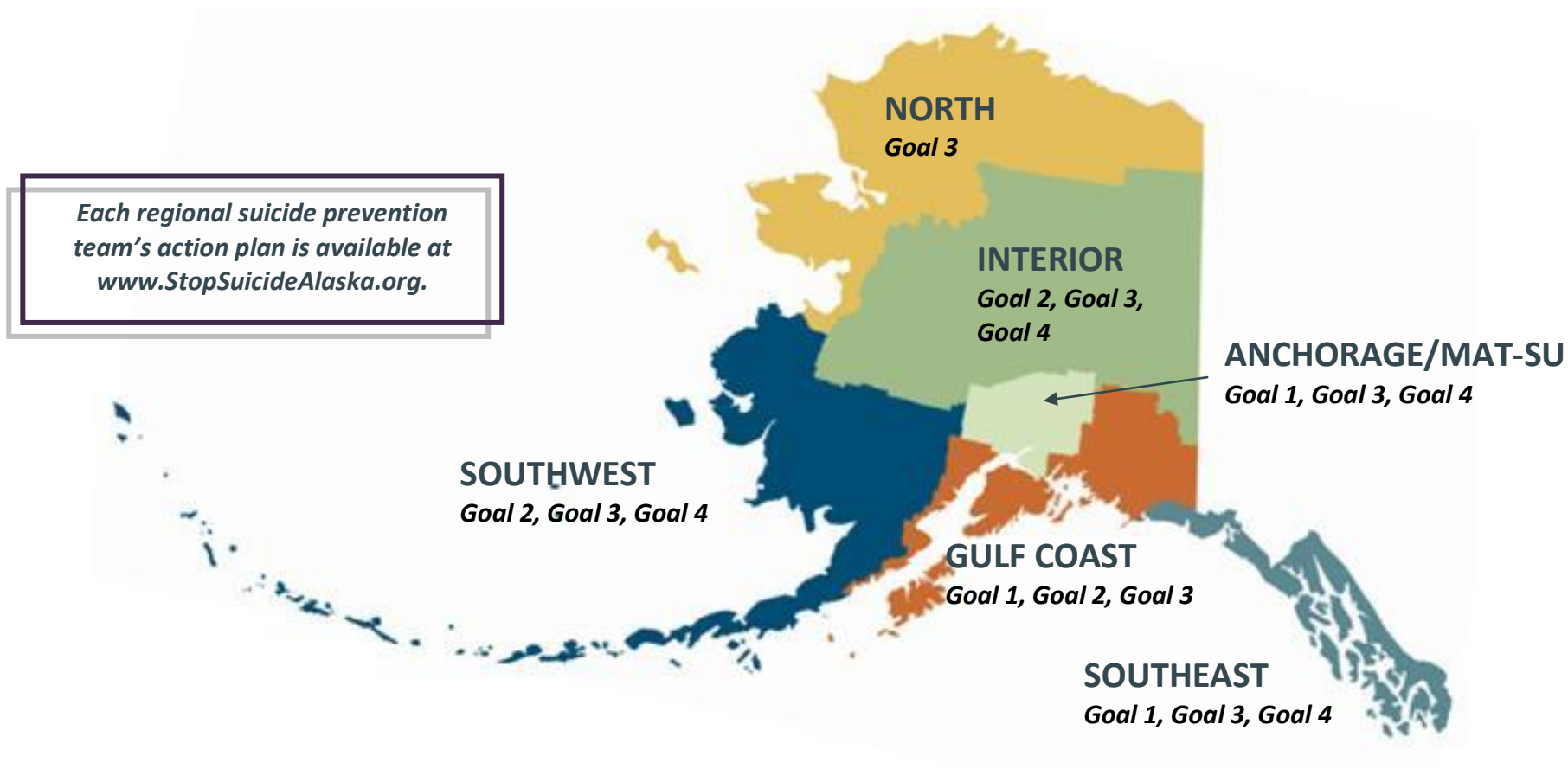
Goal 5: Alaskans Support Survivors in Healing



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

Regional Suicide Prevention Teams

With the release of *Casting the Net Upstream*, the Council held the second biennial Suicide Prevention Summit. Regional suicide prevention teams were invited from the six regions of Alaska: Northern, Interior, Southwestern, Anchorage/Mat-Su, Gulf Coast, and Southeastern. These teams were made up of key stakeholders and leaders in community suicide prevention efforts. They came together to identify those goals within the state suicide prevention plan most relevant to their regions, and to develop action plans to help achieve those goals.



Suicide Rate and Number, 2011

Preliminary data from the Bureau of Vital Statistics shows that **141** Alaskans died by suicide in 2011, 22 fewer people than in 2010 – resulting in a statewide suicide rate of **19.52/100,000**. **Note:** This number only includes those deaths that occurred in Alaska in 2011, and is subject to update once death certificates from outside of the state are received and documented by the Bureau of Vital Statistics.

The decrease in the number of lives lost in 2011 is promising. It is important to note, however, that Alaska’s annual number of deaths by suicide has ranged from 103 in 2001 to 167 in 2008.

2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
16.4	20.7	20.2	22.9	19.2	19.6	22.6	24.0	19.6	22.6	19.5
103	131	123	154	127	132	149	167	140	163	141

Source: Department of Health and Social Services, Bureau of Vital Statistics

Summary of Suicide Prevention Activities

The number of community-based suicide prevention activities has grown exponentially since 2010. Likewise, broad efforts coordinated by the State of Alaska, Alaska Native Tribal Health Consortium, and other statewide organizations have increased. This summary of projects and activities is meant to provide a sample of Alaska’s evolving suicide prevention system.

Suicide Prevention Training

The [University of Alaska Anchorage](#), supported by a grant from the Substance Abuse and Mental Health Services Administration and university matching funds, trained over 500 campus community members in Gatekeeper. Kodiak Area Native Association (KANA) partnered with the United States Coast Guard to provide Applied Suicide Intervention Skills (ASIST) training at the Coast Guard base in Kodiak. KANA also partnered with agencies and individuals in Kodiak and in Homer to provider ASIST training. In Petersburg, the community behavioral health center reports that 85% of its staff and suicide prevention coalition members are trained in the Gatekeeper model of suicide prevention (a 29% increase in the number trained since 2011). Petersburg coalition members have also been trained in the [Connect postvention model](#). The Anchorage/Mat-Su Suicide Prevention Coalition also provided Connect training to 16 of its members.

School-Based Suicide Prevention

The Department of Education and Early Development has provided wellness promotion and education to Alaska's most at-risk students, through the [Promoting Health Alternative Schools and Community Partnerships Initiative](#). Kiita School in Barrow has implemented depression and substance abuse screenings to identify students in need of behavioral health services earlier. At Mat-Su Day School, programs build students' social skills and problem solving skills. Avail Alternative School (Mat-Su) and Yaakoosge Daakahidi Alternative School (Juneau) provided suicide prevention training to teachers and staff. All 13 participating alternative schools are developing suicide prevention and postvention protocols.

The Association of Alaska School Boards' [Alaska Initiative for Community Engagement](#) provided support for communities working to build resilience in young people, promoting parent and youth engagement and youth-led projects to increase community connectedness. The Juneau Suicide Prevention Coalition and Juneau School District have partnered to provide the evidence-based Signs of Suicide screening and services for middle and high school students. In 2012, they report a 16-18% increase in the number of students reporting that it is a good idea to ask a friend who might be at risk if he/she is thinking of suicide – an indication that students are becoming more comfortable talking about and acting to prevent suicide.

Teen Suicide Prevention

The October, 2011 School Health and Wellness Institute included two sessions on postvention in schools, drawing over 100 attendees each. Council member Barbara Franks participated as a presenter in these sessions, which provided school personnel with the tools to create postvention plans, policies, and protocols and an understanding of how postvention activities are in fact also suicide prevention.

Southcentral Foundation continues its "Lead the Change" suicide prevention program, which works in conjunction with the [Denaa Yeets'](#) program. The long-running John Baker-Teck Youth Leaders Program in the Northwest Arctic continues to build youth wellness and resiliency through peer support and strong adult mentorship. The Nulato Life Project, supported by a grant from the Division of Behavioral Health, provides youth mentoring through traditional Athabaskan activities and subsistence skills



Lead the Change participates in 2012 Fur Rondy,

The Bristol Bay Area Health Corporation has developed the culturally-based *Yuutpiciryarit* (Our Way of Life) Peer Prevention Program (PPP), which focuses on about 400 youth in 11 regional villages. PPP is based on the *Recovery Community Services Program (RCSP)* framework, a proposed evidence-based practice. Peers help each other move along the continuum of prevention-treatment-recovery by offering hope, motivation, and general social support through Alaskan Native traditional practices and activities. Also in the Southwestern Region, the [Association of Village Council Presidents](#) (AVCP) is developing a Healthy Families Program to reach Alaska Native youth at risk for suicide or suicide attempts in Alakanuk, Chevak, Hooper Bay and Scammon Bay.

Tanana Chiefs Conference, part of the Interior regional suicide prevention team, is supporting Sources of Strength, and evidence-based peer support program for youth. Sources of Strength uses healthy and supportive peer relationships to build connectedness, increase and encourage help-seeking behaviors, and to create and build a strong network of social and emotional support. Over 100 youth peer leaders are engaged in the program in Huslia, Galena, Tanana, Dot Lake, Tanacross, Tok, Tetlin, Northway, and Mentasta.

Increasing Access to Prevention, Treatment, and Recovery Services

During the 2012 legislative session, a \$415,000 General Fund increment was appropriated to support school-based suicide prevention beginning in FY13. These funds are managed by the Department of Education and Early development, in partnership with the Council. Also during the 2012 legislative session, \$9 million in capital funds was appropriated for innovative substance abuse prevention and treatment programs. These funds will be available over three years (FY13-15) and will be managed by the Department of Health and Social Services.

Media and Public Awareness

Vernon Stickman's one-man run through the winter wilderness in 2012 was an inspiration. He received support from Tanana Chiefs Conference, local businesses, and communities to spread his message of hope and healing in schools along his route.

[Drew's Foundation](#), founded by Paul O'Brien of Bethel, organized a suicide prevention awareness event in conjunction with the Camai regional dance festival in March, 2012 and has developed partnerships with both dog sled and snowmachine racers in the region to carry the message "Suicide is Never the Answer: Call Someone" in regional and statewide races. Additional activities, in partnership with the Bethel suicide prevention coalition, are planned for 2013.



Video public service announcement contests, providing a cohort of dynamic and persuasive messages of hope and healing, are coordinated by the Alaska Association of Student Governments, Alaska Native Tribal Health Consortium, and Tanana Chiefs Conference. The Alaska chapter of the American Foundation for Suicide Prevention has increased its education and awareness efforts, coordinating Out of Darkness Walks in 2011 and 2012. Similar walks/runs were held by tribal health and community organizations. The Council continued its Iron Dog sports card campaign, featuring Archie Agnes and Arnold Marks in 2012.

Supporting Survivors

Juneau and Anchorage both continued to host National Suicide Survivors Day events on November 21, 2012. The Suicide Awareness Intervention Prevention and Healing Coalition in Bethel held a riverside memorial and healing event to support those affected by loss to suicide and other events. After a series of unexpected and tragic deaths in late 2012, the Juneau Suicide Prevention Coalition partnered with communities of faith, NAMI-Juneau, and local mental health providers to hold a “Night of Hope and Healing,” attended by over 150 people.

Data and Research Development

The Alaska Mental Health Board and Advisory Board on Alcoholism and Drug abuse coordinated with Alaska Native Tribal Health Consortium and many other statewide and community stakeholders to successfully propose including questions about Adverse Childhood Experience in Alaska’s annual Behavioral Risk factor Surveillance System (BRFSS) survey. Adverse Childhood Experiences (ACE) include: death of a parent, child abuse and neglect, childhood sexual abuse, parental substance abuse, and other traumatic experiences. These contribute to the “web of causality” of suicide (as well as many other health and social consequences). The BRFSS is an annual survey of adults conducted in every state. It is administered by the Division of Public Health in Alaska and is an invaluable source of information about the health behaviors and quality of life of Alaskans.

Note About the Implementation Report

To attempt to report out on every suicide prevention activity under each and every *Casting the Net Upstream* goal and strategy would be overwhelming — which in and of itself is a positive trend in Alaska’s suicide prevention system. This report highlights key strategies where progress was achieved in 2012. For information on strategies not included in this report, or about a specific project, or to share another suicide prevention program with the Council and its partners, contact Eric Morrison at 907-465-6518.

Goal 1: Alaskans Accept Responsibility for Preventing Suicide

Strategy 1.1 ~ Alaskans learn and understand that suicide is preventable.

Indicator: 1.1.a. Number of unique visits to StopSuicideAlaska.org: 47,941 (2012) — compare to 19,054 (2011)

The average number of StopSuicideAlaska.org page views per day in 2012 was 131. The total number of references back to StopSuicideAlaska.org — when another website included StopSuicideAlaska.org as a resource — more than doubled in 2012 (3,652 referrers).

Strategy 1.7 ~ Communities will participate in efforts to de-stigmatize suicide and accessing treatment for mental health crises.

Indicator: 1.7.a. Alaskans comfortable with a family member, coworker, guest, or neighbor experiencing mental illness: 72.7% (AMHTA, 2012) — compare to 77.3% in 2010

The [Alaska Association of Student Governments'](http://aasg.org) annual public service announcement video contest continues to foster dialogue among youth about mental health and suicide and to promote messages of acceptance and support for help-seeking. Support from Alaska Native Tribal Health Consortium and GCI ensures that the messages created by students are shared throughout Alaska, expanding the reach of the anti-stigma message. In 2012, the winners of the contest were from Madison Manning from Port Heiden, Nuala Kelly from Barrow, and Tori Talley from Juneau. These and past winning videos can be seen at <http://aasg.org/important-news/suicide-prevention/>.

The Alaska Association of Student Governments was awarded the Ardis Kyker State Service Project Award by the National Association of Student Councils in July, 2011 for the students' leadership and advocacy in strengthening the suicide prevention system in Alaska and promoting a youth voice in policymaking.



Goal 2: Alaskans Effectively and Appropriately Respond to People at Risk of Suicide

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

Indicator: 2.1.a. Number of Alaskans trained in suicide prevention/intervention: more than 1,800

The number of trainings conducted in 2012 was significant. *See the discussion under Strategy 3.2 for more information.*

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

Indicators: 2.2.a. Number of calls to Careline annually: 8,497 (2012) — compare to 5,507 (2010)
2.2.b. Alaskans who report knowing how to access services for suicide prevention: 79.9% (AMHTA, 2012) — compare to 69.6% in 2010.



Careline is Alaska’s statewide suicide prevention and crisis call line. Careline has partnered closely with the Council, Division of Behavioral Health, and communities to increase public awareness of the service and promote help-seeking. The Council, the Division of Behavioral Health, the Alaska Mental Health Trust Authority, and many other partners in suicide prevention have committed to promoting the Careline number and resources statewide. **Since 2010, the number of calls to Careline has increased 35% and awareness of Careline as a source of help increased by over 10%** — evidence of the effectiveness of this coordinated and cooperative public outreach effort.

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

Indicator: 2.3.a. Number of suicides among Alaska veterans: 27 (BVS, 2011)

This is a **new indicator**, and the method for collecting the data is evolving. Currently, the Bureau of Vital Statistics collects data on veteran status on death certificates. **Preliminary** figures for 2011, of deaths by suicide of Alaska residents occurring within Alaska, include 27 confirmed veterans (19% of the preliminary total of 141 deaths by suicide).

The Veterans Administration also collects data related to those veterans engaged in Veterans Administration services. The Veterans Administration reports that, in federal fiscal year 2012 (October 1, 2011 – September 30, 2012), 8 Alaska veterans

engaged in services died by suicide, 35 Alaska veterans engaged in services attempted suicide, and 82 Alaska veterans engaged in services were identified as at “high risk for suicide” (suicidal ideation with undetermined or suicidal intent).

Goal 3: Alaskans Communicate, Cooperate, and Coordinate Suicide Prevention Efforts

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

- Indicators:** 3.1.a. Rate of suicides by firearm: 65% (AKVDRS, 2007-2011)
3.1.b. Rate of suicide by poisoning/overdose: 8% (AKVDRS, 2007-2011)

The Village of Togiak has joined the group of Alaska communities supplying gun lockers and safe firearm storage options to residents as part of an effort to prevent suicide by reducing access to lethal means. With financial support from the Rasmuson Foundation in 2011, the Togiak Gun Safe Project provided free gun safes and suicide prevention education to 139 households. The Alaska Mental Health Trust Authority has committed additional funding to continue the project and provide gun safes and education to 120 additional households in FY13. For more information about evidence-based means restriction programs, go to the Harvard School of Public Health’s MeansMatters.org.

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

- Indicator:** 3.2.a. Number of Alaskans trained in suicide prevention/intervention: more than 1,800 adults and youth

The Alaska Native Tribal Health Consortium and the Trust Training Cooperative are two of the largest agencies coordinating evidence-based suicide prevention training statewide. Southcentral Foundation, Kodiak Area Native Association, Tanana Chiefs Conference, and the University of Alaska Anchorage also provide evidence-based training.

School districts have continued to increase suicide prevention training for educators and staff. Local and regional suicide prevention coalitions also provide training opportunities, using both evidence-based models and locally developed programs. The Juneau Suicide Prevention Coalition developed a video-based suicide prevention curriculum with grief expert Dr. Bob Baugher in 2010. That training is offered monthly in Juneau, and is now being shared with communities in Alaska and other states.

Since it was established in Alaska in 2012, the Jason Foundation, Inc. affiliate has partnered with the Department of Education and Early Development to provide 450 Jason Foundation training and education resource kits to school districts in Alaska.

Northstar Behavioral Health, which hosts the Jason Foundation, Inc. affiliate, has also provided training to clinicians statewide on *Standards of Care and Clinical Risk Management for Suicidal Patients* and *Child and Adolescent Suicide Assessment*.

Evidence-Based Suicide Prevention and Intervention Trainings, 2012 Sample

Agency	Training	Number Trained
Alaska Native Tribal Health Consortium	Applied Suicide Intervention Skills Training	22 adults
	safeTALK	111 adults, 57 youth
Southcentral Foundation	Applied Suicide Intervention Skills Training	86 adults
Kodiak Area Native Association	Applied Suicide Intervention Skills Training	37 adults
	safeTALK	28 adults
Trust Training Cooperation	Mental Health First Aid	194 adults
Northstar Behavioral Health	Clinical Practices re: Suicide (in person lunch and learn trainings in Anchorage, facilitated DVD trainings in rural communities)	1,042
Division of Behavioral Health	Connect Training	16
Dept. of Education & Early Development	safeTALK/ASIST for school counselors	63
	Gatekeeper Train the Trainer for special education professionals	25
Veterans Administration	Operation S.A.V.E. (Gatekeeper)	62
Others	Connect Training (DBH trained trainers in 5 communities)	120

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

Indicator: 3.3.a. Number of school districts offering suicide prevention training to educators/staff: *in development*

The Statewide Suicide Prevention Council, the Alaska Association of Student Governments, the American Foundation for Suicide Prevention – Alaska Chapter, and others partnered to support the passage of legislation supporting this strategy. In 2012, the Alaska Legislature passed a bill that requires teachers and certain other school employees (counselors, etc.) in grades 7-12 to have two hours of suicide awareness and prevention training each year. The Department of Education and

Early Development has created a website for suicide prevention training resources: <http://education.alaska.gov/tls/suicide/> and is developing an e-learning module that complies with the statutory requirements.

Some school districts were already providing suicide prevention training to teachers and students. More school districts are offering the required training, in many cases exceeding the 2-hour minimum. FY13 is the first year in which school districts must comply with this requirement.



Mental Health First Aid Training, Bethel 2012

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.

Indicator: 3.6.a. Number of executive agencies and partners engaged in a comprehensive prevention workgroup: 3

The Council on Domestic Violence and Sexual Assault (CDVSA) has moved forward in 2012 with coordinating an initial inter-departmental prevention workgroup to help guide policymaking and improve data analysis practices (meeting in early 2013). This group includes representatives from CDVSA and the Departments of Public Safety, Health and Social Services, and Education and Early Development. The Council and AMHB and ABADA also participate.

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

Indicator: 1.7.a. Alaskans comfortable with a family member, coworker, guest, or neighbor experiencing mental illness: 72.7% (AMHTA, 2012) — compare to 77.3% in 2010

The Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse, in partnership with the Alaska Mental Health Trust Authority and others, have developed the [We Are All Alaskans](#) campaign to promote acceptance and de-stigmatize accessing mental health and substance abuse treatment services. Education and awareness activities in FY12 included presentations to community and professional groups, as well as use of print and social media.

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.

Indicator: 4.1.a. Number of calls to Careline annually: 8,497 (2012) — compare to 5,507 (2010)

See the discussion at Strategy 2.2 above for more about the growth in access of Careline resources.

Goal 5: Alaskans Support Survivors in Healing

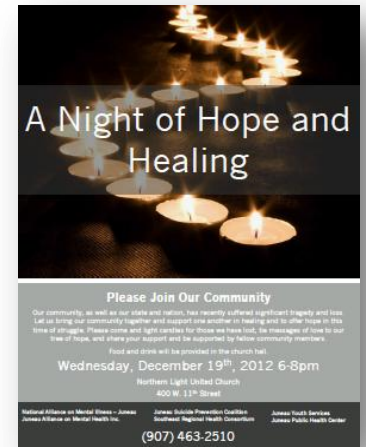
Strategy 5.2 ~ The State of Alaska will provide resources, tools, and technical support for community postvention efforts, with emphasis on natural, organic responses developed in the community.

Indicator (revised): 5.2.a. Number of Alaskans trained in postvention: 136 (2012)

This indicator is revised to reflect the Division of Behavioral Health’s policy change in 2012 to promote the best practice [Connect Training](#), designed by NAMI-New Hampshire. CONNECT is a customizable model of suicide prevention and postvention training. In 2012, 136 individuals were trained in the NAMI-CONNECT model. Six of these were trained as trainers, and have helped increase access to the training outside of Anchorage.

Community postvention efforts grew in 2012. The Fairbanks community action planning group developed a postvention plan in partnership with Careline. Yukon Kuskokwim Health Corporation provided crisis management and debriefing, as well as ongoing support, to communities affected by suicide. The Juneau Suicide Prevention Coalition partnered with community mental health providers, faith communities, and others to host a community night of healing in December, 2012. This event was held to provide a healthy and healing response to several sudden deaths in the community, as well as national tragedies.

The [Helping Our Communities Heal Postvention Resource Guide](#), developed in 2011-2012 by the Council and Division of Behavioral Health in consultation with a stakeholder advisory group, is available on StopSuicideAlaska.org.



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.

Indicator: 6.1.a. Data sources available on StopSuicideAlaska.org: 4 (2012) — compare to 3 in 2011

StopSuicideAlaska.org includes data from the Centers for Disease Prevention and Control, the Alaska Division of Public Health Epidemiology Section, the Alaska Violent Death Reporting System, and the Alaska Bureau of Vital Statistics.

The Department of Health and Social Services has prioritized the modernization of its Bureau of Vital Statistics, moving away from paper-based records management to an electronic system that would permit more timely use of data and information. The Bureau of Vital Statistics reports that, under the paper-based system, the average numbers of days from suicide death to registration was 20.5 days. This is a 30% improvement over the 2007 average of 29.1 days.

Improving the timely registration of deaths will provide the State of Alaska and its partners with important trend information to help identify communities in need of additional suicide prevention resources to address the risk of suicide contagion.

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.

Indicator: 6.2.a. Number of follow-back studies completed since 2011: 0

The Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse coordinated with Alaska Native Tribal Health Consortium and many other statewide and community stakeholders to successfully propose including questions about Adverse Childhood Experience in Alaska’s annual Behavioral Risk Factor Surveillance System (BRFSS) survey. Adverse Childhood Experiences (ACE) include: death of a parent, child abuse and neglect, childhood sexual abuse, parental substance abuse, and other traumatic experiences. These contribute to the “web of causality” of suicide (as well as many other health and social consequences). The BRFSS is an annual survey of adults conducted in every state. It is administered by the Division of Public Health in Alaska and is an invaluable source of information about the health behaviors and quality of life of Alaskans. For more information about the ACE question module, contact Patrick Sidmore, Health Systems Planner II, Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse at (907) 465-8920.

Conclusion

The Council is grateful for the work of individuals, communities, and the State of Alaska in furthering the goals and strategies of *Casting the Net Upstream*. The first year of implementation reflects a strong commitment by Alaskans, their families and communities, and state leaders to preventing suicide. While there is a great deal of work ahead for all Alaskans, the Council is encouraged by the progress made in 2012.

This report was prepared by the Statewide Suicide Prevention Council with content contributions from many stakeholders. The Council expresses our thanks to everyone who assisted in preparing this report.

The *Casting the Net Upstream Annual Implementation Report, 2012* is exclusively web-published, at a savings of more than \$5.50 per color copy. It is available online at:

www.StopSuicideAlaska.org

<http://dhss.alaska.gov/SuicidePrevention/>



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