



Coalition for Suicide Prevention in Clackamas County – Launch Meeting

Tuesday October 16, 2018 4:30 pm to 6:30 pm

Oregon City Library

4:30 pm **1. Welcome & Opening**

Welcome! Please register, help yourself to refreshments and find a seat. Thank you.

Welcome & Convene – Acting Co-Chairs

- Galli Murray, Clackamas County Suicide Prevention Coordinator
- Janie Marsh, Executive Director, Mental Health Association of Oregon &
- Michael Ralls, Director of Social Services, North Clackamas Schools

Purpose and Context

- Opening Remarks – Mary Rumbaugh, Director Clackamas County Behavioral Health
- Background and our Starting Place – Galli Murray
- Safety First, Meeting Guidelines & Logistics

Coalition – Initial Expectations & Opportunities for Involvement

- Participation – All are Welcome – Kathy Turner, SPC Project Manager
- Consistent Group of Participants
- First Year Work and Meetings & Interest Form

5:10 pm **2. Initial Themes of Local Voices & Small Group Discussions**

Local Voices Listening Sessions & Preliminary Themes

- Local Voices Listening Sessions – Erin Schwartz, Senior Policy Analyst, Clackamas County Health, Housing & Human Services
- Preliminary Themes
- Small Groups

Discussion in Small Groups & Report Out

Summary and Next Steps – Kathy Turner

6:15 pm **3. Closing**

Upcoming Meetings – Kathy Turner

- November Meeting – November 13, 2018 Same Time, Same Location
- Second Tuesdays of the month as a consistent day to meet?
 - Dec 11, Jan 8, Feb 12, March 12
 - Morning, Afternoon or Evening?
 - Consistent or Rotating Location?

Meeting Feedback & Closing – Michael & Galli

6:30 pm **4. Thank you and Adjourn**



Meeting Guidelines

1. Show each other respect
2. Start and end on time
3. Listen to others and be open to hearing another person's perspective
4. Share the airtime and self-regulate your participation; please don't interrupt others while they are speaking
5. Please keep to one conversation and avoid sidebar conversations
6. Create a safe environment
7. Communicate about the topic safely
 - Please don't share details of a suicide attempt or death, particularly the person's name or family, the location, the method, the contents of a note or other message, or any other assertions about causes. These details can activate people who are vulnerable.
 - Please don't share personal stories that are told in the meeting outside the meeting.
 - Please use the phrase "died by suicide" instead of commit – commit is a word associated with a crime or a sin
 - Please don't use the terms successful or unsuccessful when talking about attempts/suicides – just say attempts or died by suicide – so that we avoid attributing positives or negatives.
8. Please place mobile phones on vibrate; avoid using electronic devices; take important calls/emailing/texting outside the room. Thank you for your cooperation.
9. The co-chairs are charged with managing the agenda and the time; the small group facilitators are charged with managing the small group; please cooperate with their requests.
10. Stories of lived experience are welcomed; however, to communicate safely, please avoid sharing details.
11. Please raise hands to contribute in the full group.
12. Give specific examples.
13. Speak about interests not positions.
14. Identify next steps that foster commitment to the goals.
15. Resource Table – please share information about other upcoming events, programs, or trainings – because of time limitations we request no verbal announcements; thank you for your cooperation.

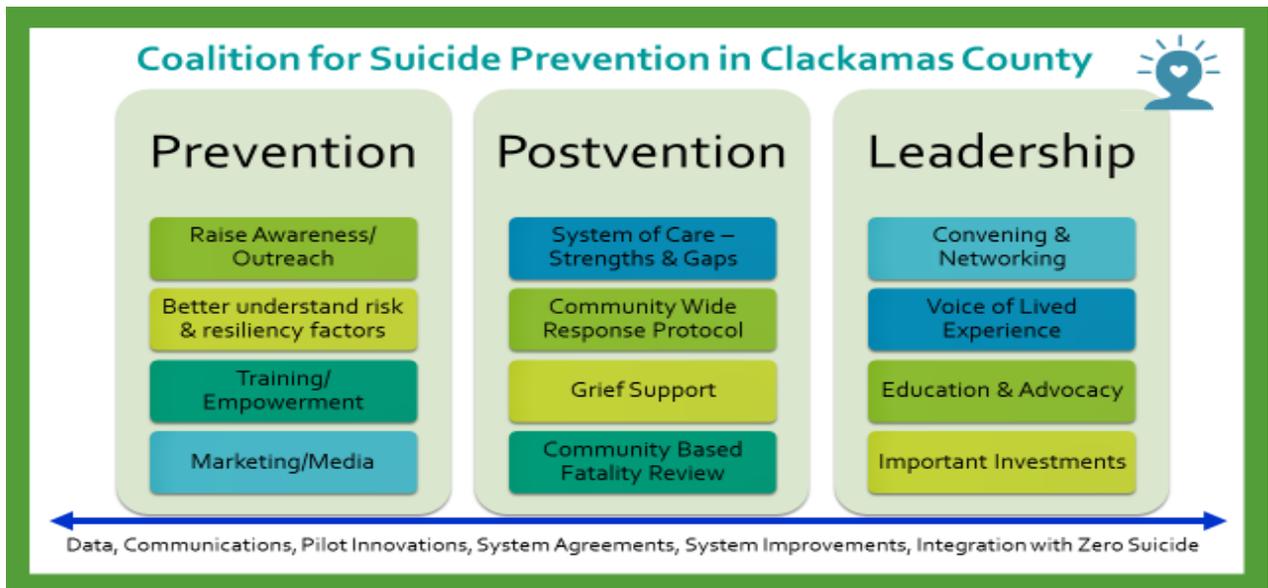


Are you interested in being a member of the Coalition for Suicide Prevention in Clackamas County?

We are looking for a cross section of consistent & diverse voices, who will make a yearlong commitment, for the following:

- Participate in monthly meetings – mainly the work will happen in the coalition meetings, but we may have small amounts of “homework” between meetings
- Participate in special presentations, trainings and events – we anticipate 2 or 3 per year
- Participate in creating a charter, work plan, priorities for action and a steering committee

The priorities for action will be determined by participants in the coalition. Below are examples of priorities that other Suicide Prevention Councils & Committees have chosen. They are offered here to give you a sense of the possible areas for action for Clackamas County.



- Yes, I would like to serve on the coalition and am willing to make the time commitment
- I'm interested in helping promote suicide prevention across Clackamas County; I'm not able to make the time commitment to the coalition right now, but would like to be kept informed!

Name _____

Affiliation _____ Phone _____

Email _____



PRELIMINARY THEMES WORKSHEET

(22% of session voices as of 10.16.18)

1. Promote/Facilitate Connectedness/Lack of Connectedness/Disrupted Connection

What programs or initiatives do you know of now that work to promote connectedness?

Are there ideas from the National Strategy & CDC Strategic Directions that would be good to include for this theme?

What other ideas do you have that could promote connectedness?

Which ideas do you think are “low hanging fruit?”

Other ideas/issues to pull from:

- Empower schools to address bullying
- Encourage schools to change rules and policies
- Encourage lawmakers to change rules and policies
- Need to talk openly, de-stigmatize conversations about suicide
- Target outreach to populations known to be at increased risk
- Talk about suicide in the context of addiction and not just mental health
- PR/News/Commercials to put a face on individuals at risk and those who have died
- Honor lives of those who have died
- Deeper dive into understanding more about people who have died
- Health Issues – addiction, gambling, dementia, physical health problems



PRELIMINARY THEMES WORKSHEET

(22% of session voices as of 10.16.18)

2. Increase Access to Services & Supports/System Barriers/Promote Service Coordination/Collaboration/Addressing Suicide Risk in Emerging and New Ways

What programs or initiatives do you know of now that work to promote access to services?

Are there ideas from the National Strategy & CDC Strategic Directions that would be good to include for this theme?

What other ideas do you have that could increase access?

Which ideas do you think are “low hanging fruit?”

Other ideas/issues to pull from:

- Empower schools to address bullying
- Encourage schools to change rules and policies
- Encourage lawmakers to change rules and policies
- Need to talk openly, de-stigmatize conversations about suicide
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PRELIMINARY THEMES WORKSHEET

(22% of session voices as of 10.16.18)

3. Decrease/Eliminate Stigma/Discrimination/Fear

What programs or initiatives do you know of now that work to decrease or end stigma?

Are there ideas from the National Strategy & CDC Strategic Directions that would be good to include for this theme?

What other ideas do you have that could decrease or end stigma?

Which ideas do you think are “low hanging fruit?”

Other ideas/issues to pull from:

- Empower schools to address bullying
- Encourage schools to change rules and policies
- Encourage lawmakers to change rules and policies
- Need to talk openly, de-stigmatize conversations about suicide
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PRELIMINARY THEMES WORKSHEET

(22% of session voices as of 10.16.18)

4. Promote Education/Training

What programs or initiatives do you know of now that work to promote/provide education and training?

Are there ideas from the National Strategy & CDC Strategic Directions that would be good to include for this theme?

What other ideas do you have that could promote/provide education and training?

Which ideas do you think are “low hanging fruit?”

Other ideas/issues to pull from:

- Empower schools to address bullying
- Encourage schools to change rules and policies
- Encourage lawmakers to change rules and policies
- Need to talk openly, de-stigmatize conversations about suicide
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Health Issues – addiction, gambling dementia, physical health problems



Strategic Direction 1: Healthy, Connected and Empowered Individuals, Families, and Communities

- **Communication, Public Education and Outreach**
 - Reach all and certain segments of the population.
 - Promote positive messages and support safe crisis intervention methods online
 - Increase knowledge of warning signs and how to connect individuals in crisis with help
 - Promote wellness & recovery
 - Promote safe and fair media reporting of suicide and mental illness
 - Engage a broad range of organizations and programs to support suicide prevention activities
- **Advocacy**
 - Educate and reach policymakers
 - Identify and advocate for policies and investments
 - Identify and recruit champions – community leaders and system influencers
- **Reduce stigma associated with mental health, suicidal thoughts and addictions**
- **Strengthen economic supports** – household financial security & housing stabilization policies
- **Promote Connectedness**
 - Peer Support Programs
 - Community Engagement Activities to build community

Strategic Direction 2: Increase suicide prevention protective factors and environments; enhance clinical and community suicide prevention

- Provide training to community members, community organizations, institutions and agencies and clinical service providers on the prevention of suicide and related behaviors.
- Teach Coping and Problem Solving Skills
- Promote efforts to reduce access to lethal means of suicide among individuals with identified suicide risk



- Strengthen efforts to increase access to and delivery of effective programs and services for mental and substance use disorders.
- Reduce provider shortages in underserved areas
- Improve coverage of mental health conditions in health insurance policies

Strategic Direction 3: Suicide Treatment and Support

- Promote and implement effective practices for assessing and treating those identified as being at risk for suicidal behaviors.
- Provide postvention care and support to individuals affected by suicide deaths and attempts to promote healing and implement community strategies to help prevent further suicides
- Promote suicide prevention as a core component of health care services.
- Promote suicide safer care through systems change

Strategic Direction 4: Build Information, Research, and Evaluation Systems for Suicide Prevention

- Improve and expand the capacity to routinely collect, analyze, report, and use suicide-related data to implement prevention efforts and inform policy decisions
- Promote the timely dissemination of suicide prevention research findings.
- Examine how suicide prevention efforts are implemented in different local communities to identify the types of delivery structures that may be most efficient and effective.
- Evaluate the impact and effectiveness of the County Strategy for Suicide Prevention in reducing suicide morbidity and mortality.

Surgeon General: 2012 National Strategy for Suicide Prevention

<https://www.surgeongeneral.gov/library/reports/national-strategy-suicide-prevention/full-report.pdf>

CDC: Preventing Suicide: A Technical Package of Policy, Programs, and Practices

<https://go.usa.gov/xQBGc>

