



Striving for Zero

Striving for Zero Learning Collaborative Module – Means Safety – December 7, 2022

Support for people at risk for suicide or those supporting people at risk is available by calling the **National Suicide Prevention Lifeline** 1-800-273-TALK (8255) or 988

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está disponible llamando al **National Suicide Prevention Lifeline** 1-888-682-9454 o 988

Welcome!

Please add your county name to your display name and introduce yourself in the chat.

We will share the slides and recording with you.

Striving for Zero Learning Collaborative

Advance local strategic planning and implementation and alignment with strategic aims, goals and objectives set forth in California's Strategic Plan for Suicide Prevention



Builds on a previous Learning Collaborative offered by the California Mental Health Services Authority

Find the Plan here: <https://mhsoac.ca.gov/what-we-do/projects/suicide-prevention/final-report>

Advancing Strategic Planning for Suicide Prevention in California
Fiscal Years 2018-2020

Outcomes from the Each Mind Matters Learning Collaborative with County Behavioral Health Agencies and their Community Partners

The Suicide Prevention Learning Collaborative was formed in the fall of 2018 to provide Each Mind Matters (CaIMHSA) member counties with technical assistance as they embarked on developing or updating a suicide prevention strategic plan and creating or enhancing an existing coalition to inform suicide prevention efforts. The Learning Collaborative promotes sharing of knowledge and experience, and provides resources, information and steps needed to develop a suicide prevention strategic plan.

Steps of Strategic Planning

- step 1 Describe the Problem
- step 2 Choose Long Term Goals
- step 3 Identify Risk and Protective Factors
- step 4 Select or Develop Interventions
- step 5 Plan the Evaluation
- step 6 Implement, Evaluate, Improve

Strategic Planning Framework

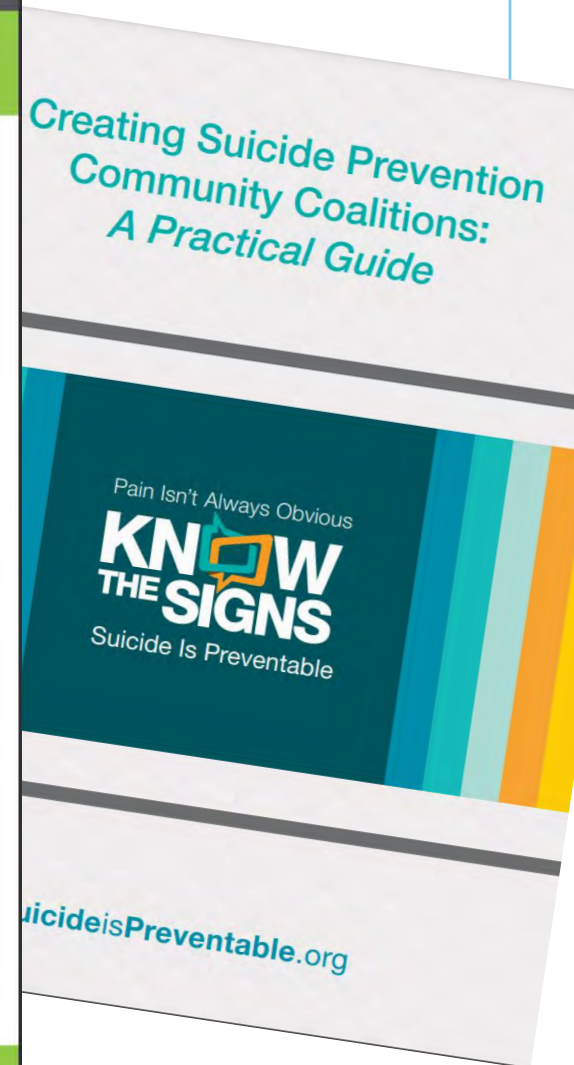
The Learning Collaborative utilized a public health approach to suicide prevention. This approach emphasizes preventing problems from occurring or recurring (not just treating problems that have already occurred); focusing on whole populations rather than individuals; and addressing health disparities and access.

Based on the Steps of Strategic Planning Framework from the Suicide Prevention Resource Center (SPRC).

The Strategic Planning Framework utilized in the Learning Collaborative was informed by the Suicide Prevention Resource Center (SPRC), Key Elements for the Implementation of Comprehensive Community-Based Suicide Prevention by the Action Alliance for Preventing Suicide, and Preventing Suicide: A Technical Package of Policy, Programs and Practices by the Center for Disease Control. It is aligned with California's Strategic Plan for Suicide Prevention (2020-2025): Striving for Zero.

It's been very helpful to have one-on-one support on a monthly basis, including technical assistance, resource sharing and someone to bounce ideas off of. The Learning Collaborative webinars have been helpful and I found the retreat in December 2019 to be very helpful in learning about best practices.
— Toby Cuevin, Nevada County Public Health

EachMind MATTERS
The Learning Collaborative was designed and implemented by the Each Mind Matters Technical Assistance Team administered by Your Social Marketer, Inc.
Your Social Marketer, Inc.



Striving for Zero Collaborative Modules

February 8, 2023

10AM - 12PM

To register:

<https://us06web.zoom.us/j/83574507488>

Striving for Zero Collaborative Modules

April 5, 2023

10AM - 12PM

To register:

<https://us06web.zoom.us/j/84846569116>

Striving for Zero Collaborative Modules

June 7, 2023

10AM - 12PM

To register:

<https://us06web.zoom.us/j/89751120300>

Learning Collaborative Resource Page



<https://mhsoac.ca.gov/initiatives/suicide-prevention/collaborative/>



“The Suicidal Crisis Path is a model that intends to integrate multiple theoretical approaches and frameworks within the context of an individual’s suicidal experience. In doing so, the purpose is to match intervention approaches with the timing, risk factors, and protective factors that would be the mechanisms to prevent a suicide from happening.” (Lezine, D.A. & Whitaker, N.J., Fresno County Community-Based Suicide Prevention Strategic Plan, 2018)

www.FresnoCares.org

Please take of yourself, especially today

While we are all passionate about suicide prevention, today's conversation may be more activating than others we will have.

At any time, if you need to step away or take a break, please do so.

What is Means Safety

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What is Means Safety?

Means safety for suicide prevention is about limiting a person's access to means, methods, or mechanisms by which they may attempt suicide.

Strategies to promote safety in times of crisis or in anticipation of crisis include:


1. Place yourself or a person in a safer environment.
2. Put a barrier between the person and the means (e.g., gun safes, bridge barriers).
3. Increase the amount of time it takes for yourself or a person to access the means, for example by securely storing firearms, over the counter medications, or prescription drugs – this gives time for intervention or for the crisis to pass.


Create Safe Environments



2
STRATEGIC
AIM

GOAL 4: CREATE SAFE ENVIRONMENTS BY REDUCING ACCESS TO LETHAL MEANS

Desired Outcome  Decrease in suicides and initial and subsequent intentional self-harm hospital visits.

Short-term Target  By 2025, all counties are using data and information to develop and implement targeted lethal means restriction strategies to prevent suicidal behavior and are measuring effectiveness.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

Create Safe Environments: Data



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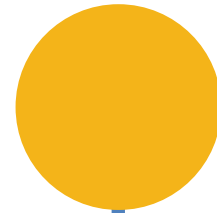
GOAL 4: CREATE SAFE ENVIRONMENTS BY REDUCING ACCESS TO LETHAL MEANS

Objective 4d Use the Public Health Model to evaluate risk and identify the methods of suicidal behavior used by community members and by specific demographic (such as race/ethnicity, age, sexual orientation, and gender identity) and cultural groups to guide development of focused prevention efforts. Once identified, develop tailored means restriction strategies and evaluate impact.

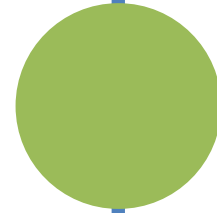
Objective 4i Create agreements among local bridge and rail authorities, first responders, and crisis services providers to collect data documenting events in which people were prevented from falling, any services they received and the outcomes. Include reporting requirements, such as biannual or quarterly reports.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

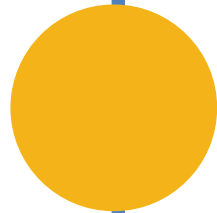
Supporting individuals who are experiencing thoughts of suicide – Resource Mapping Questions



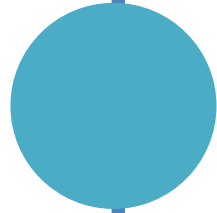
What means/methods are most common in your county?



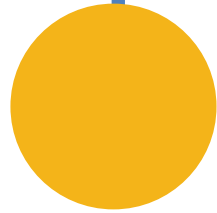
Do means/methods vary by specific demographics?



Are there any currently existing means reduction efforts (even if not directly tied to suicide prevention, i.e. prescription takebacks)?



Do you currently provide (or promote) training for lethal means counseling?



Are there any existing engagements with the firearm community?

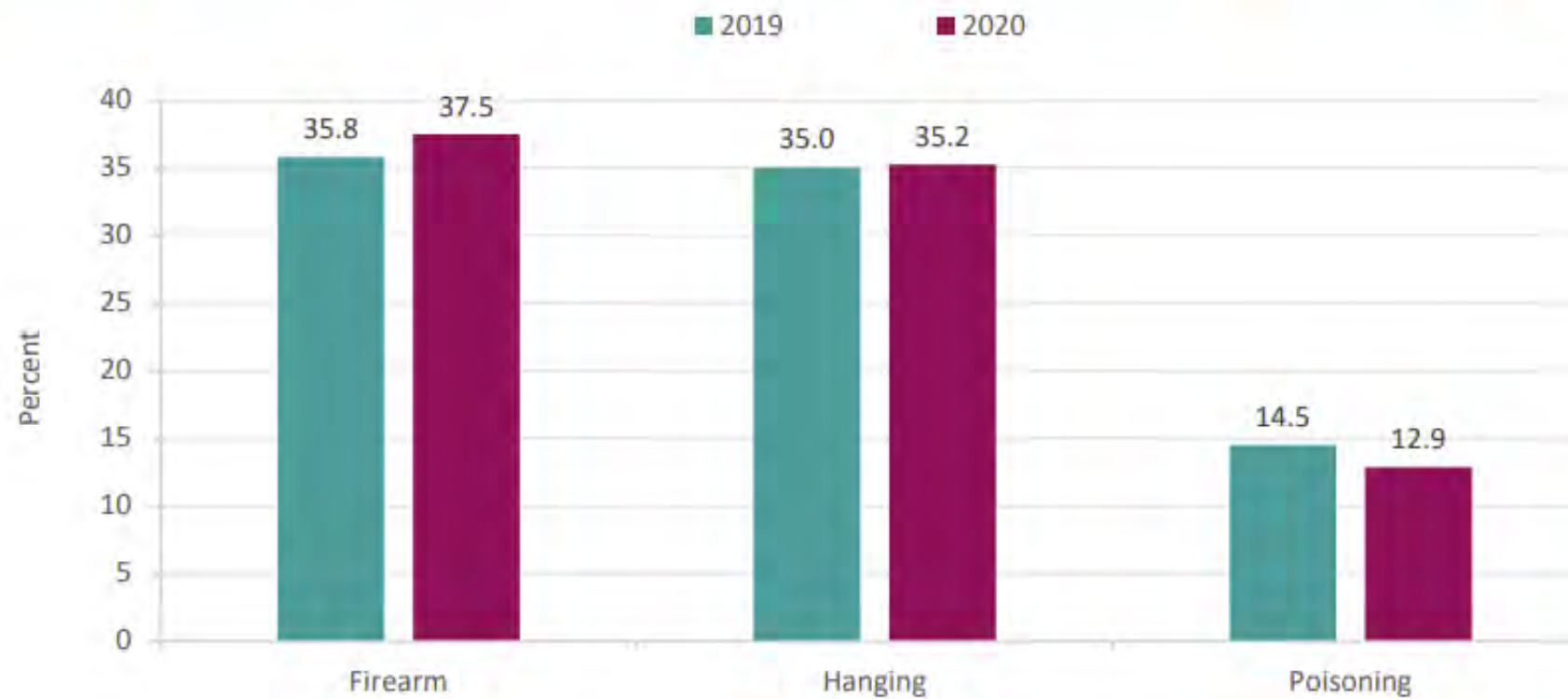
Means Safety: The Why

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Suicide by Mechanism

Mechanism of Suicide in California, 2019 & 2020



Source: 2019-2020 deaths: CDPH, CA Comprehensive Master Death File (CCMDF)



Center for Healthy Communities
Injury and Violence Prevention Branch

https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/SACB/CDPH%20Document%20Library/Suicide%20Prevention%20Program/SuicideAndSelfHarmTrendDataPPT_ADA.pdf

Why Means Safety

Means safety is one the most effective strategies for suicide prevention.

The effectiveness of reducing access to lethal means has been demonstrated using a wide range of intervention in multiple countries.

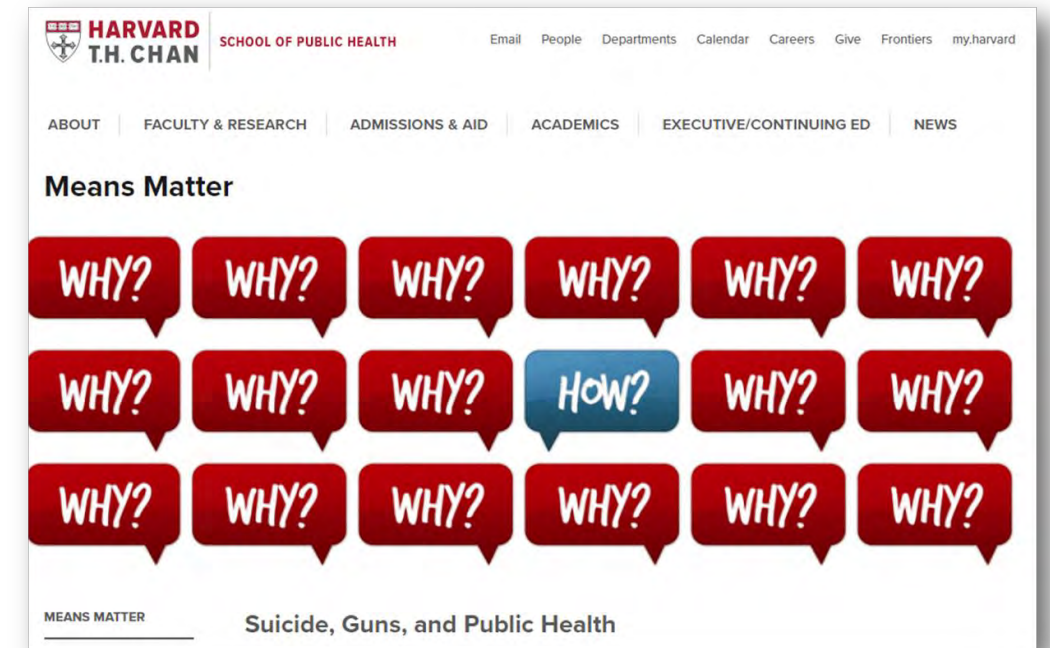
Numerous studies have shown no evidence that individuals experiencing thoughts of suicide sought alternative means, and in many cases suicide overall decreased.



Means Safety: Means Matter

“Most efforts to prevent suicide focus on why people take their lives. But as we understand more about who attempts suicide and when and where and why, it becomes increasingly clear that how a person attempts – the means they use – plays a key role in whether they live or die.” - MeansMatter.org

www.MeansMatter.org



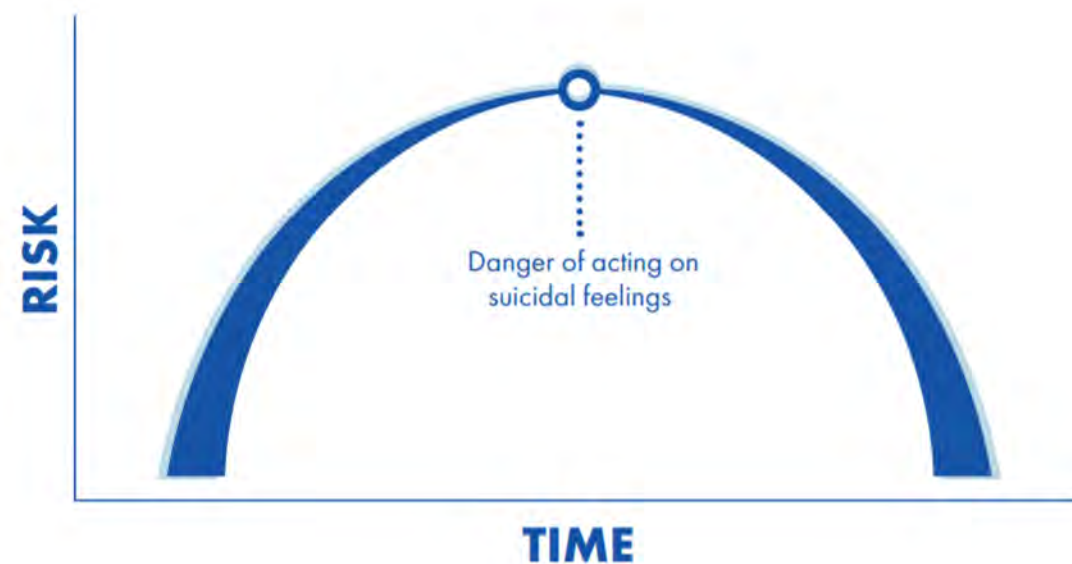
Means Matter helped bring Means Safety to the forefront of suicide prevention efforts.

Website provides background information and key research to support means safety in general and on specific methods.

Principles of Means Safety

Most periods of suicide crisis are fairly short in duration. By putting time and space between a person and lethal means, a lethal attempt is less likely

SUICIDE RISK CURVE



Suicide risk fluctuates over time

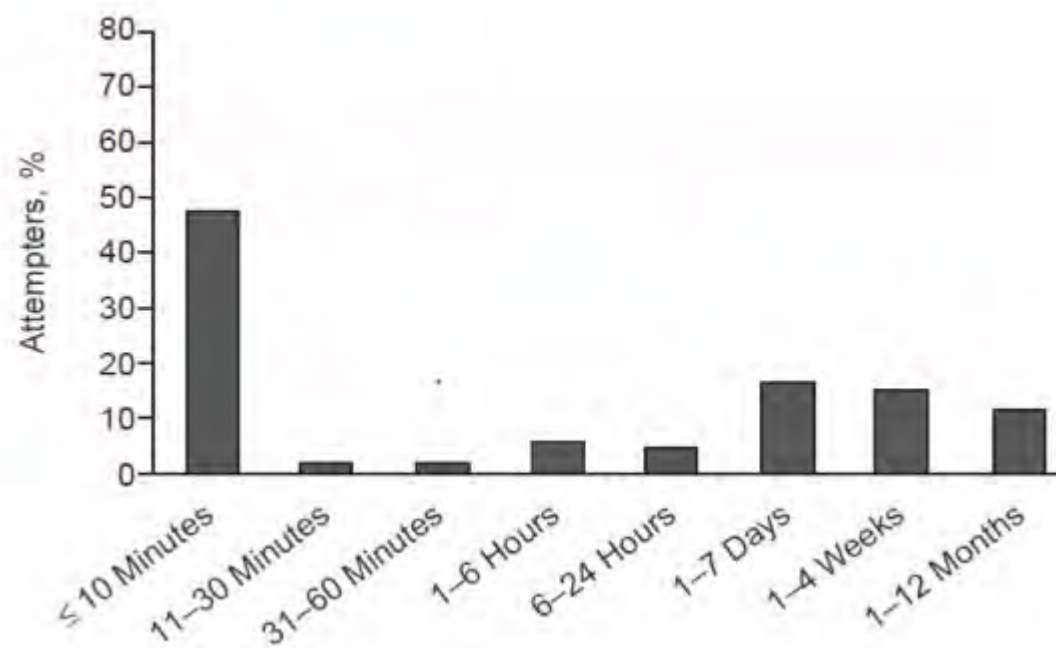
Risk is greater when:*

- Thoughts are more frequent
- Thoughts are of longer duration
- Thoughts are less controllable
- Few deterrents to acting on thoughts
- Stopping the pain is the “reason”

-Suicide Risk Curve by Barbara Stanley, PhD and Gregory Brown, PhD
<https://suicidesafetyplan.com/>

Importance of Means Safety BEFORE Times of Crisis

Based on research, period of time for “deliberation” of suicide attempt was fairly short. This has been replicated in numerous studies and highlights the importance of restricting access to lethal means prior to crisis.



Source: <https://pubmed.ncbi.nlm.nih.gov/19026258/>

- Duration of Suicidal Deliberation:
 - 24% said less than 5 minutes
 - 24% said 5-19 minutes
 - 23% said 20 minutes to 1 hour
 - 16% said 2-8 hours
 - 13% said 1 or more days

Source: <https://pubmed.ncbi.nlm.nih.gov/11924695/>

Means Safety: What can we do?

How can we restrict or reduce access to lethal means?

- Place the person in a safer environment
- Put a barrier between the person and the means
- Create time between the person and the means
- Make the means (and an attempt) less lethal

Polling and Reflection Questions

Do you currently implement any of these means safety efforts?

Mark all that apply:

- Review local data on means
- Facilitate means safety related workgroup
- Promote safe disposal and storage of prescription drugs
- Partner with pharmacists
- Bridge/overpass barrier or signage initiative
- Partner with transit agency
- Engage local gun shops/ranges/instructors
- Distribute gun locks/safes
- Raise awareness about safe storage for suicide prevention
- Other

Q&A and Reflection



Striving for Safety:

A Resource for Community Members and Professionals

Support for people at risk for suicide or those supporting people at risk is available by calling the
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StrivingForSafety.org



[Home](#) [Means Safety](#) [Community Resources](#) [For Organizations](#) [For Survivors](#) [Suicide Prevention](#)

Means Safety: Striving to Keep a Loved one Safe from Suicide

Welcome. This website is designed to support you to increase safety for yourself or a loved one, friend, colleague, or client when suicide risk is elevated. Limiting a person's access to means by which they may cause themselves harm is called *lethal means safety*, and here you'll find information about a range of strategies to promote safety in times of crisis or in anticipation of crisis.

Adding time between thoughts of suicide and a person's ability to obtain lethal means for an attempt represents a practical, lifesaving approach to prevent suicide.

Means Safety Checklist: Striving to Keep a Loved One Safe From Suicide

If you are concerned about how to keep yourself or a loved one who is thinking about suicide or has attempted suicide safe, this checklist offers a starting point.

Getting Started ▶



Preventing Firearm Suicide ▶

Firearm safety strategies that can be applied in the home or at retail stores.

Overdose and Poisoning ▶

Tips to reduce access to medications and other potential poisons, immediate steps you can take to respond to an overdose, and home suicide prevention strategies in pharmacy settings.

Strangulation and Suffocation ▶

Strategies that can be applied in the home, jails, hospitals, and other environments.

Signage, Barriers, and More ▶

Environmental strategies for community planners that place barriers and signage to create time and space for the individual in pain to reach out for help.

Means Safety Checklist

If you are concerned about how to keep yourself or a loved one who is thinking about suicide or has attempted suicide safe in the home, this checklist offers a starting point.

- Learn the warning signs of suicide
- Have a conversation about suicide prevention
- Share crisis resources
- Keep medications securely stored at all times
- Dispose of unused, unwanted, or expired medications
- Review the steps to respond to a suspected drug overdose
- Keep guns securely stored
- Familiarize yourself with California law when considering storing a firearm outside the home
- Trust your instincts
- Remember you are not alone

You are not alone. For immediate help call or text **988** or chat **988lifeline.org** to reach the Suicide & Crisis Lifeline.



Striving for Safety: Community Resources

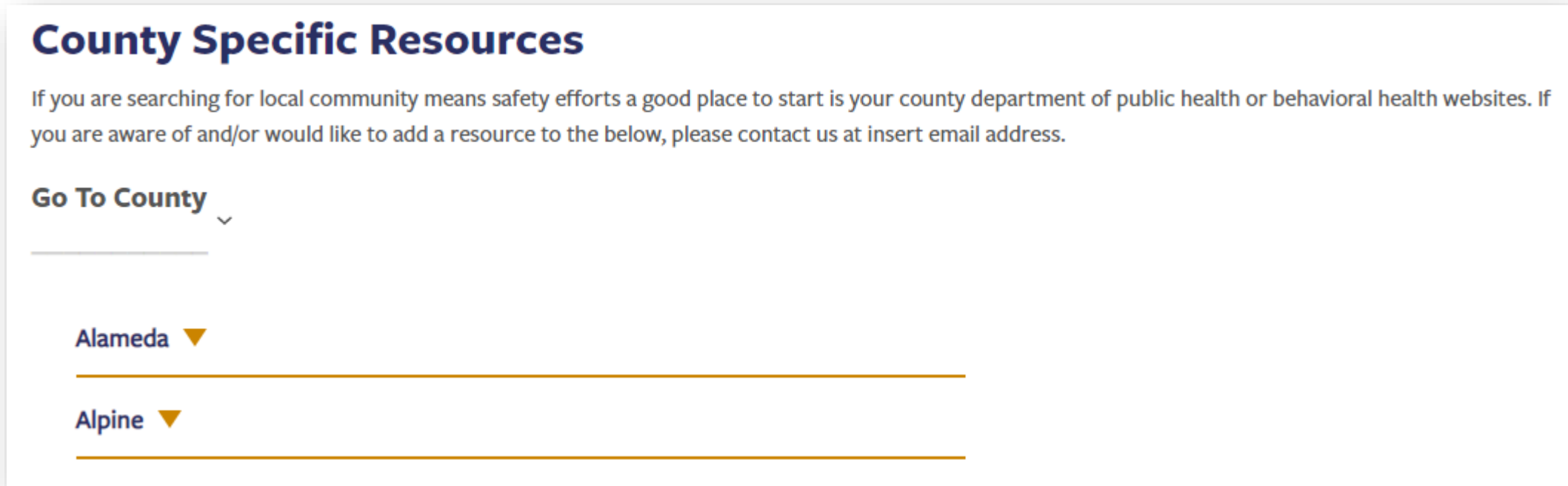
Provide county specific resources for suicide prevention means safety:

- [Please review your county page and contact us with updates](#)



Community Resources

Many communities have local resources, coalitions, and opportunities to get involved that can offer support. If your community does not, we encourage you to utilize the resources below to learn about local community means safety efforts and bring something similar to your community.



County Specific Resources

If you are searching for local community means safety efforts a good place to start is your county department of public health or behavioral health websites. If you are aware of and/or would like to add a resource to the below, please contact us at insert email address.

Go To County ▾

Alameda ▾

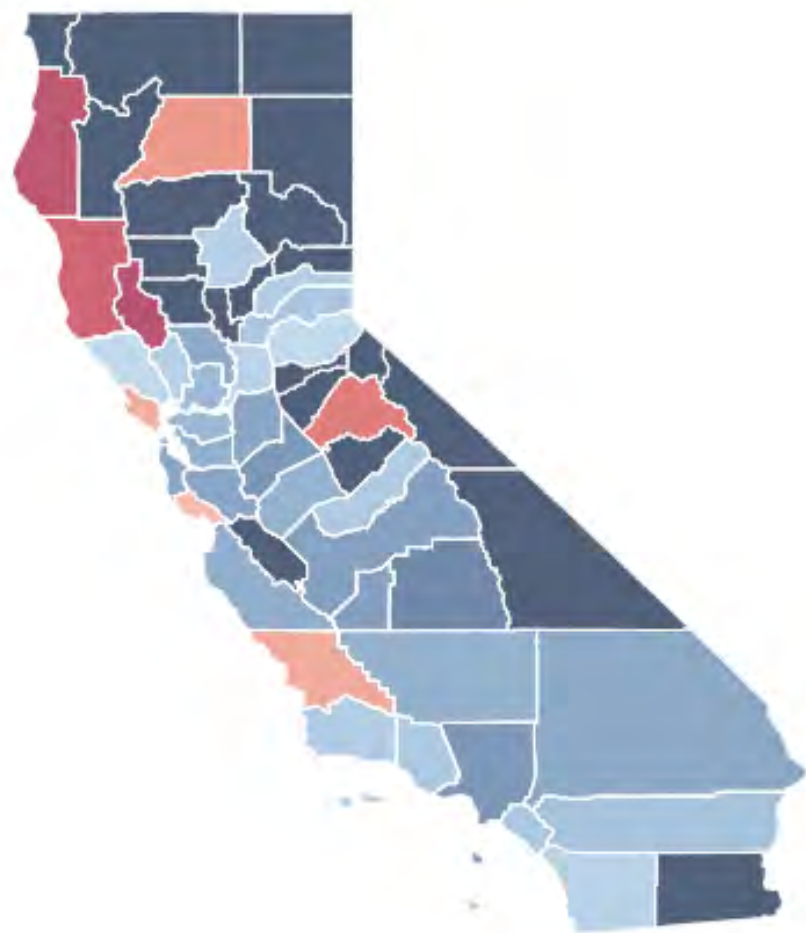
Alpine ▾

Means Safety: Poisoning and Overdose

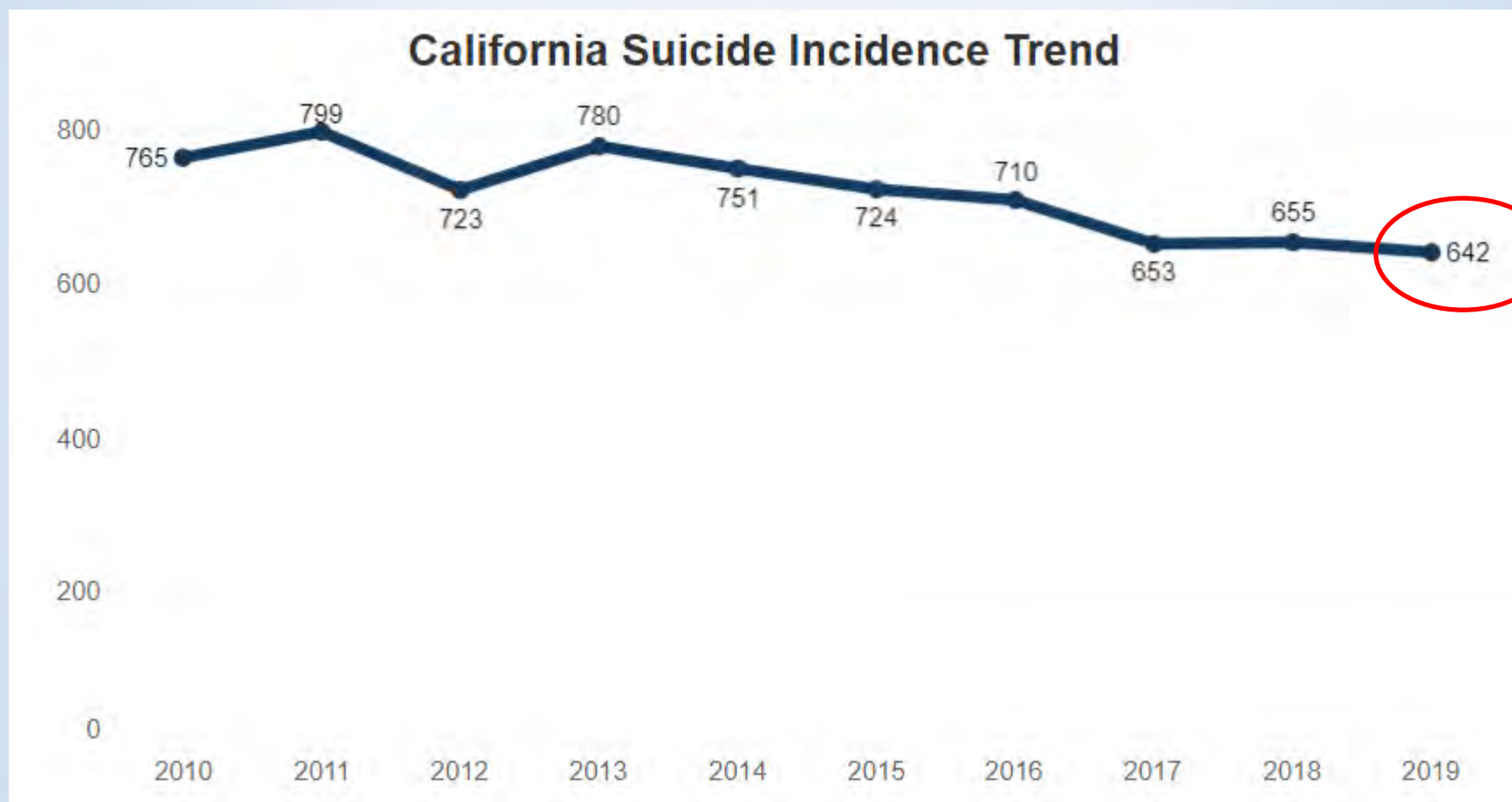
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Poisoning Suicide



- Common method for suicide attempts
- Lower risk of lethality than other forms



MHSOAC Suicide Incidence and Rate: <https://mhsoc.ca.gov/transparency-suite/suicide-incidence-and-rate/>

Create Safe Environments: Poisoning Overdose



2

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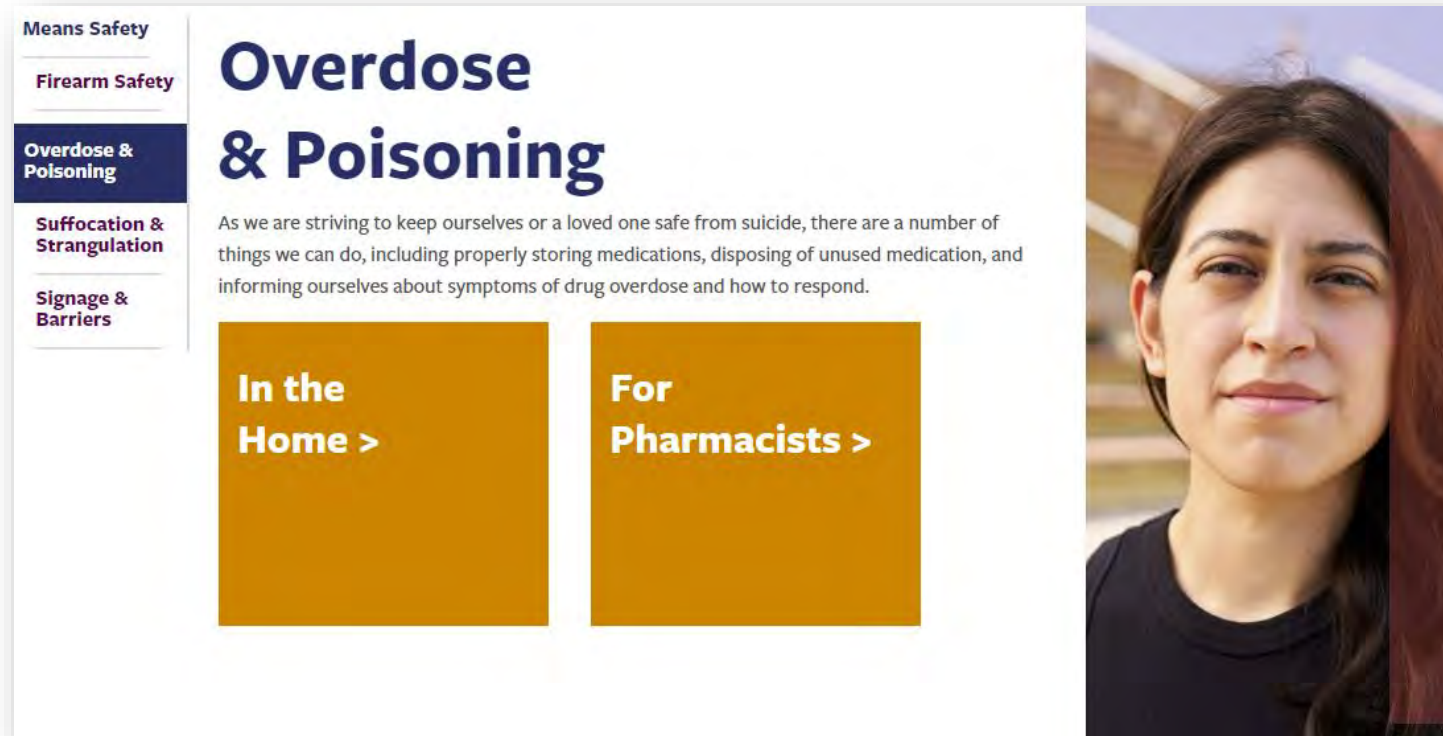
GOAL 4: CREATE SAFE ENVIRONMENTS BY REDUCING ACCESS TO LETHAL MEANS

Objective 4e Promote safe medication disposal methods in the community or through pharmacies and other health care providers, including activities such as “take back” campaigns led by local public health departments that help people dispose of unused or expired medications. Partner with local pharmacies to increase the availability of methods to dispose of unused medication and highlight suicide and overdose prevention resources for people filling prescriptions.

Objective 4g Disseminate information through local health departments to community partners about available overdose prevention resources, methods, and medications to counteract overdose, such as naloxone for opioid overdose.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

Striving for Safety: Overdose



The screenshot shows a webpage with a navigation menu on the left containing: Means Safety, Firearm Safety, **Overdose & Poisoning**, Suffocation & Strangulation, and Signage & Barriers. The main content area features the title 'Overdose & Poisoning' and a sub-header 'In the Home >'. Below the sub-header is a paragraph: 'As we are striving to keep ourselves or a loved one safe from suicide, there are a number of things we can do, including properly storing medications, disposing of unused medication, and informing ourselves about symptoms of drug overdose and how to respond.' To the right of the text is a portrait of a woman with long dark hair. Below the text are two orange buttons: 'In the Home >' and 'For Pharmacists >'.

Informs community members about steps to prevent suicide including:

- Awareness and tools for conversation
- Steps for safe storage
- Safe disposal

Overdose & Poisoning

In the Home

Implementing safety precautions in your home is a starting point for keeping your loved one safe.

1. Keep medications securely stored at all times.

Medications, including over the counter and prescription, should always be kept in their original

More >

2. Be vigilant about keeping track of your inventory of pills and refills.

Carefully note when and how much medication has been taken, so you're aware of how much is

More >

3. Dispose of unused, unwanted, or expired medications.

The best way to dispose of medications is to drop them off at a local safe disposal site. You can

More >

4. Use the proper containers.

Always use products with child-resistant caps but remember they are not **childproof**. Keep

More >

5. Be aware of poisonous substances.

Poisons are any substance that in a high enough quantity can cause illness, injury, or death when

More >

6. Maintain working carbon monoxide detectors.

Carbon monoxide is a deadly gas that you cannot hear, smell, or see. Every home with at least

More >

7. Review the steps to respond to a suspected drug overdose.

Taking drugs (legal, illegal, prescribed, or over the counter) in amounts higher than necessary or

More >

For Pharmacists >

Training for Pharmacists

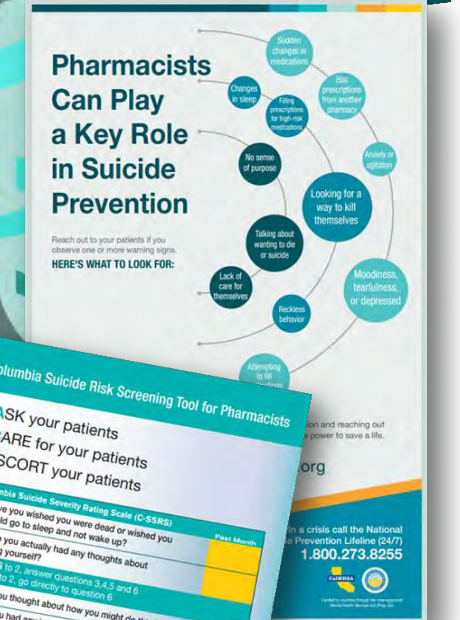
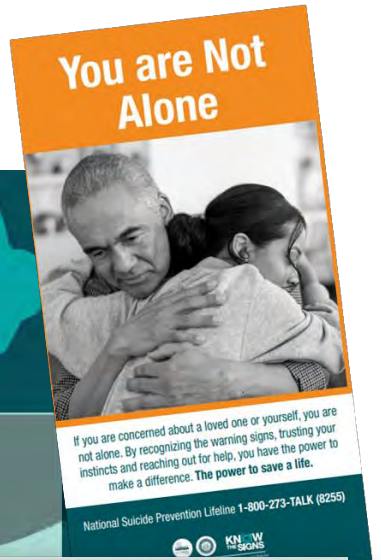
One-hour training for pharmacists, available for free:

- Provides general information on recognizing suicide risk
- Reviews screening protocols using C-SSRS
- Provides opportunity to request hard copy of materials

Pharmacists as Gatekeepers in Suicide Prevention

Presented by Dr. Kelly Lee, Professor of Clinical Pharmacy & Associate Dean and Dr. Nathan Painter, Professor of Clinical Pharmacy at UC San Diego Skaggs of Pharmacy and Pharmaceutical Sciences, this webinar will provide insight into the role pharmacists, as frontline responders, and gatekeepers, can play in suicide prevention. Webinar content will include an overview of suicide prevention, how to counsel on medications that are high in lethality or increase risk of suicidal thoughts, and a variety of resources. Attendees will walk away with an increased understanding on how to identify warning signs of suicide, how to have a conversation with a patient, and how to provide that patient with help.

CAPE Continuing Education Credit Provided!



Question	Response	Risk Level
1) Have you wished you were dead or wished you could go to sleep and not wake up?	Yes/No	Low
2) Have you actually had any thoughts about killing yourself?	Yes/No	Low
3) Have you thought about how you might do this?	Yes/No	Low
4) Have you had any intention of acting on these thoughts of killing yourself, as opposed to you have the thoughts but you definitely would not act on them?	Yes/No	High Risk
5) Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?	Yes/No	High Risk
6) Have you done anything, started to do anything, or prepared to do anything to end your life? Examples: Collected pills, obtained a gun but changed your mind, cut yourself, tried to hang yourself, etc.	Yes/No	High Risk

To register, visit: <http://www.yoursocialmarketer.com/pharmacist-gatekeepers/>

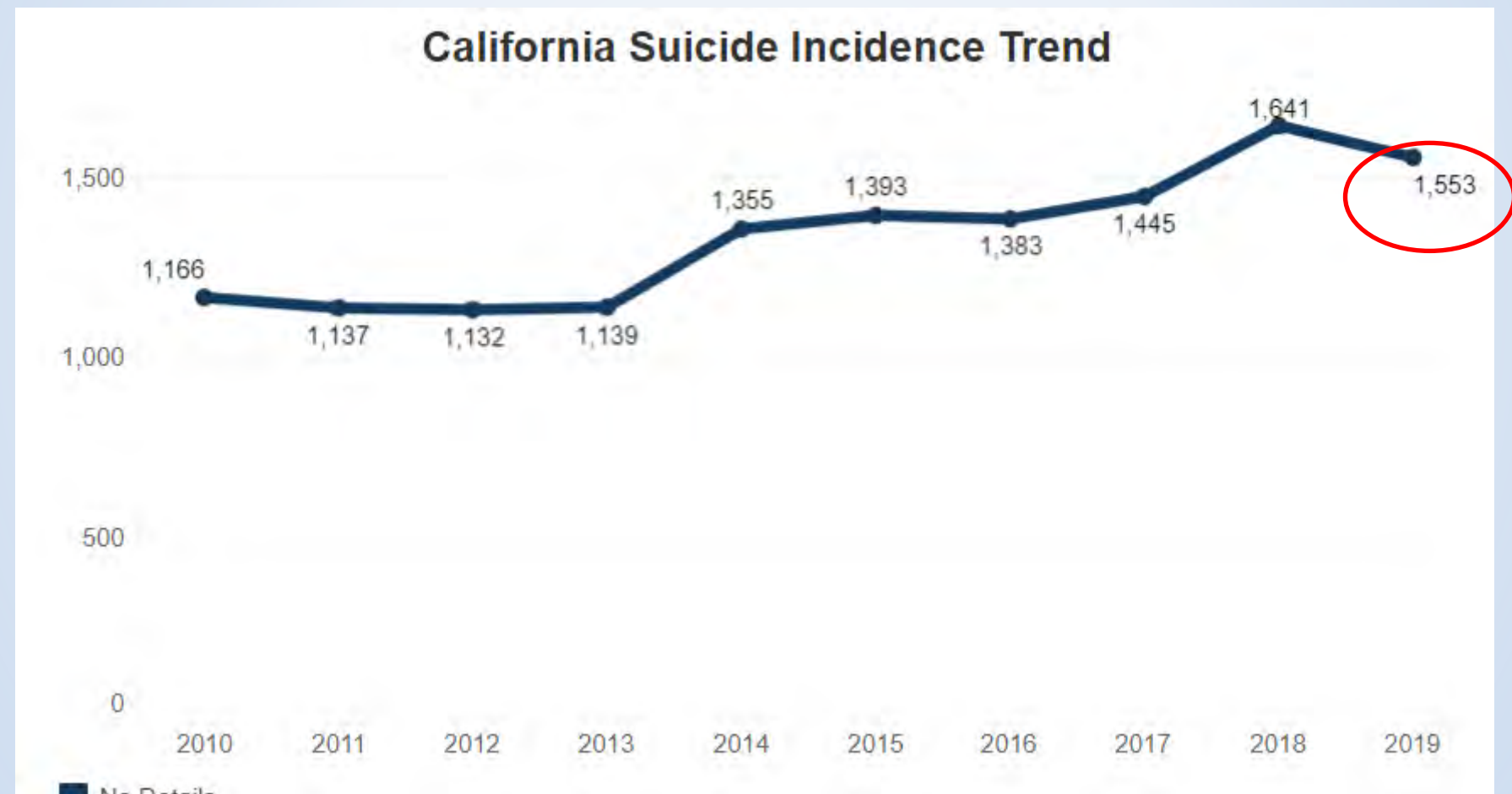
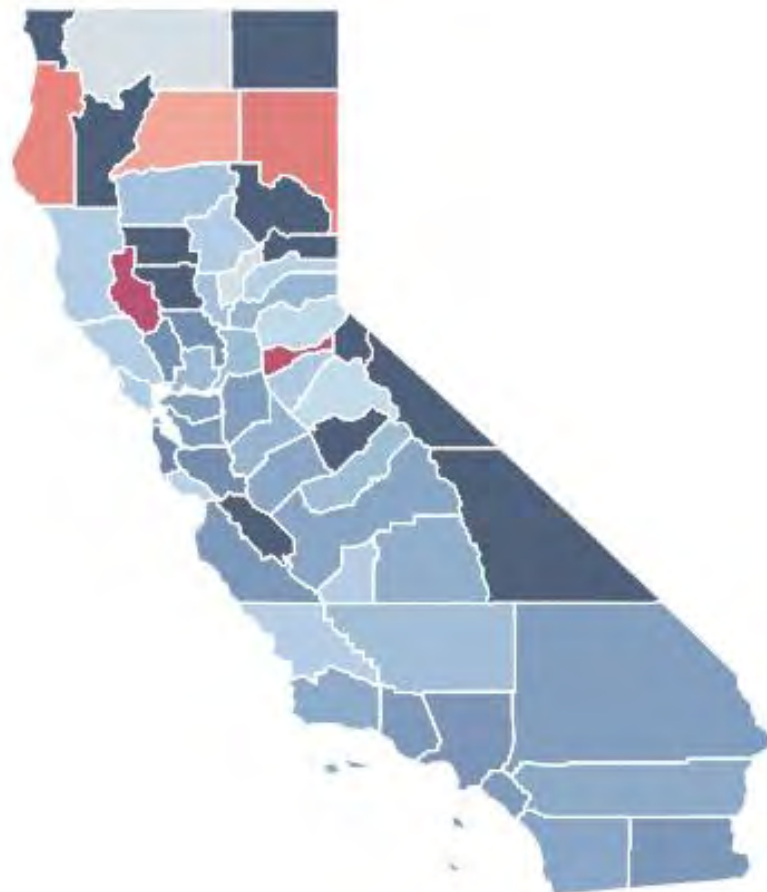
Means Safety: Suffocation and Strangulation

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Hanging/Suffocation Suicide

- Significant increase over past decade
- Arguably the most difficult form of suicide to restrict access to in home (and professional) settings



MHSOAC Suicide Incidence and Rate: <https://mhsoac.ca.gov/transparency-suite/suicide-incidence-and-rate/>

Striving for Safety: Suffocation and Strangulation

Suffocation & Strangulation

It can be challenging to limit access to some types of means within the home. If you are concerned that someone in your home is at risk for suicide, have a conversation with them. Ask directly if they have thought about how they might attempt suicide, or what items they might use. Most often, people thinking about suicide have specific methods they plan to use and oftentimes they don't deviate from their plan. Identifying an intended method can help you make a plan to reduce access to particular means.

In the Home >

In Controlled Environments >



Informs community members and professionals:

- Steps to reduce risk in home
- When to seek higher level of care
- Emphasizes general prevention
- Resources for controlled environments

In the Home

1. Take a good look around your home.

Reducing access to certain points (e.g., beams, doorknobs, changing knobs to non-lock attempt. However, it is important to consider prolonged periods or perm

2. Complete a safety plan.

The Safety Planning Intervention (SPI) is a brief, evidence-based intervention. The Safety Plan should be developed with the individual. **Suicide Safety Plan** is a safety plan. Consider downloading the app from Google Play.

If you are thinking about suicide, please reach out to a professional for help. Their coping strategies. Their

3. Stay vigilant and

If you are concerned that a loved one is at risk for suicide, or if you are concerned that a loved one is at risk for suicide, you may need to seek professional care. You may need to seek professional care. You may need to seek professional care.

4. You are not alone.

You are not alone in helping someone who is at risk for suicide. There are many resources available to help you. You are not alone in helping someone who is at risk for suicide. There are many resources available to help you.

In Controlled Environments

A number of suicide prevention strategies can be put in place in controlled environments such as hospitals, jails and prisons, and police custody.

1. Learn to recognize suicide warning signs and risk factors.

One effective strategy that organizations can implement is offering trainings on recognizing and responding to suicide risk to all staff in the organization. Another is to offer educational materials and crisis resources to family members and caregivers during visitation and at discharge.

2. Have suicide risk screening and assessment trainings and protocols in place to determine suicide risk level.

It's important to provide staff with training in determining risk level using screening and/or assessment. By clearly defining protocols to follow based on risk level, staff will be more effective in recognizing and responding to suicide risk and able to use the strategies they've learned to help keep people safe.

3. Conduct an environmental scan and implement safety technologies.

Such as effective monitoring and supervision; collapsible shower heads, light fixtures, and doorknobs; and specially designed bedding that's resistant to tearing.

4. Include counseling on access to lethal means and development of a safety plan as part of discharge protocols.

These interventions have been shown to reduce suicide risk and suicide attempts following discharge. For more information, please review **Recommended Standard Care for People with Suicide Risk: Making Health Care Suicide Safer**.

5. Have a postvention plan in place to guide the response if a client, inmate, or staff member dies by suicide.

Responding effectively after a suicide death can help people to process trauma in healthier ways and reduce the risk of additional suicides.

National Commission on Correctional Health Care, Suicide Prevention Portal

This website details requirements for a comprehensive, multipronged suicide prevention and intervention program in various settings: Jails, Prisons, Juvenile Facilities, Mental Health Services and Opioid Treatment Programs.

www.ncchc.org/

Means Safety: Signage and Others

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Create Safe Environments: Site Specific



2

STRATEGIC
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GOAL 4: CREATE SAFE ENVIRONMENTS BY REDUCING ACCESS TO LETHAL MEANS

Objective 4h Form regional and local workgroups composed of community members, first responders, transportation representatives, coroners and medical examiners, and crisis service providers to identify specific sites in the community frequently used for suicide, or those that provide the opportunity for suicide.

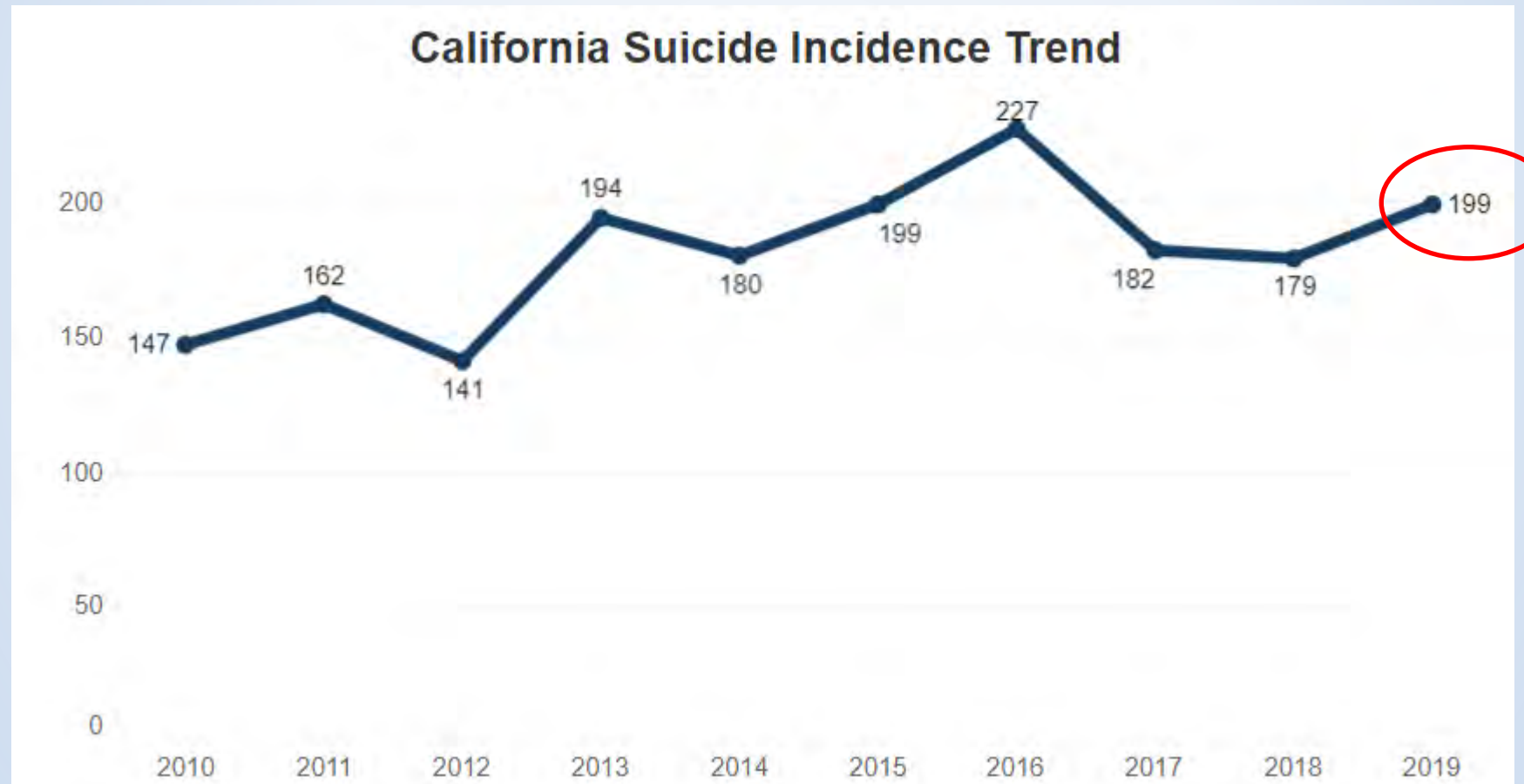
- These sites can be in the built environment or natural sites. Common types of sites include buildings, bridges, and train railways. Characteristics communities should consider in identifying sites are places that provide the opportunity for a person at risk to fall from a height and sites from which falling would place a person in front of a moving vehicle, such as a train. More than one suicide at a site should raise safety concerns.
- Once sites are identified, develop and implement plans to construct barriers to deter or prevent falling. Consider the benefits and risks of installing signs that list crisis services resources, such as suicide prevention hotline information, and provide positive, life-affirming messages. One risk, for example, could be drawing attention of people at risk to a particular site.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

Jump/Fall Suicide



- Although falls from height often receive more media attention (as well as being fairly lethal)



Striving for Safety: Signage and Barriers

Provides information, toolkits, and research related to implementation of safety barriers at various sites:

- Bridge and overpass barriers
- Parking structures
- Railway efforts
- Signage (examples)

Means Safety

Firearm Safety

Overdose & Poisoning

Suffocation & Strangulation

Signage & Barriers

Signage & Barriers

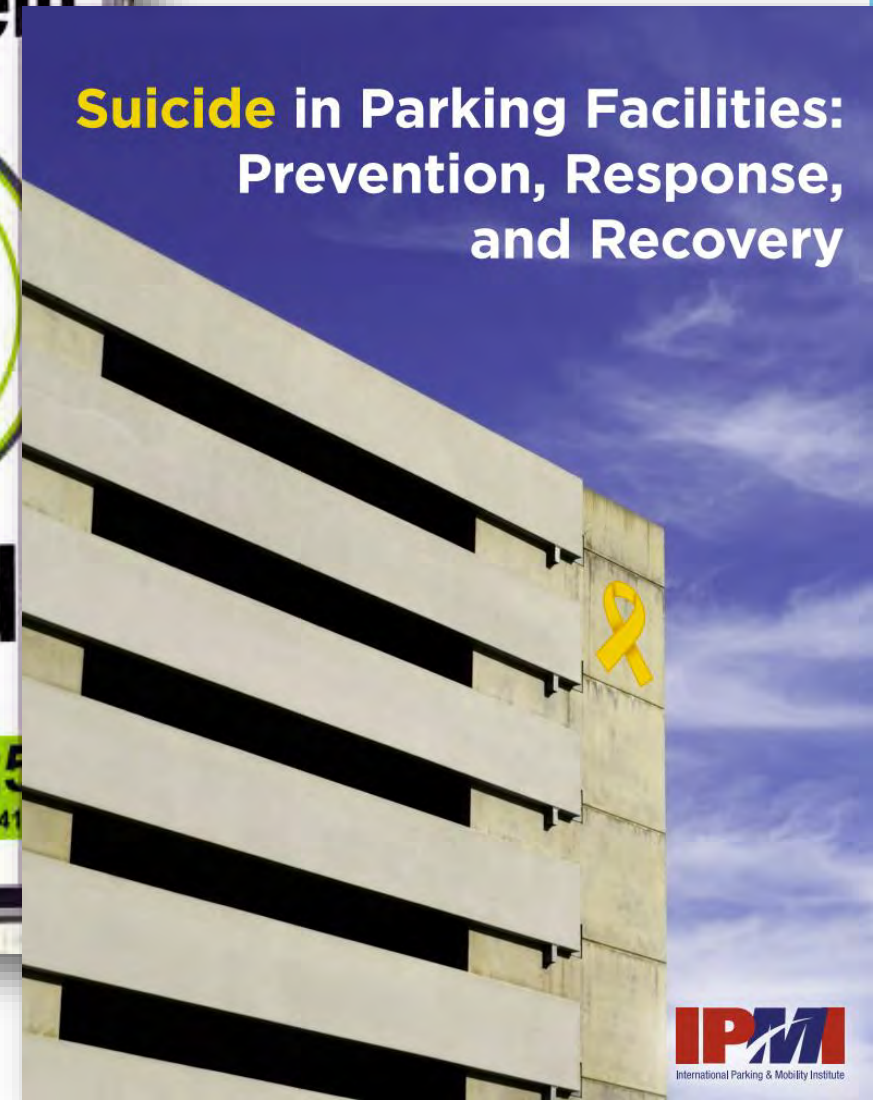
Barriers and other physical deterrents that reduce suicide, or otherwise reduce the lethality of an attempt, are a key component of suicide prevention efforts. In the home, we can place crisis resources in visible places to remind people about that help is available.

Barriers matter because many people who develop suicidal thoughts do not seek another method, even if they attempt suicide and survive will not. This means that efforts not only to reduce access to lethal agents, but also to provide information about these attempts, can save lives.

There are several ways that physical barriers and deterrents can be used to reduce the lethality of an attempt; or signage that offers a message of hope and shares a crisis resource.

The following address various forms of site-specific suicide prevention considerations in more detail.

- Bridge Barriers ▾
- Parking Structures ▾
- Railway Efforts ▾
- Signage ▾



“In the US, where firearms are the method used in approximately **50% of all suicides** and where roughly **1 in 3 homes contains firearms**, even small relative declines in the use of firearms in suicide acts could result in large reductions in the number of suicides, depending on what, if any, method would be substituted for firearms.”

- *Breaking through Barriers, The Emerging Role of Healthcare Provider Training Programs in Firearm Suicide Prevention*

Means Safety: Firearm Suicide Prevention

Create Safe Environments: Firearms



2

STRATEGIC
AIM

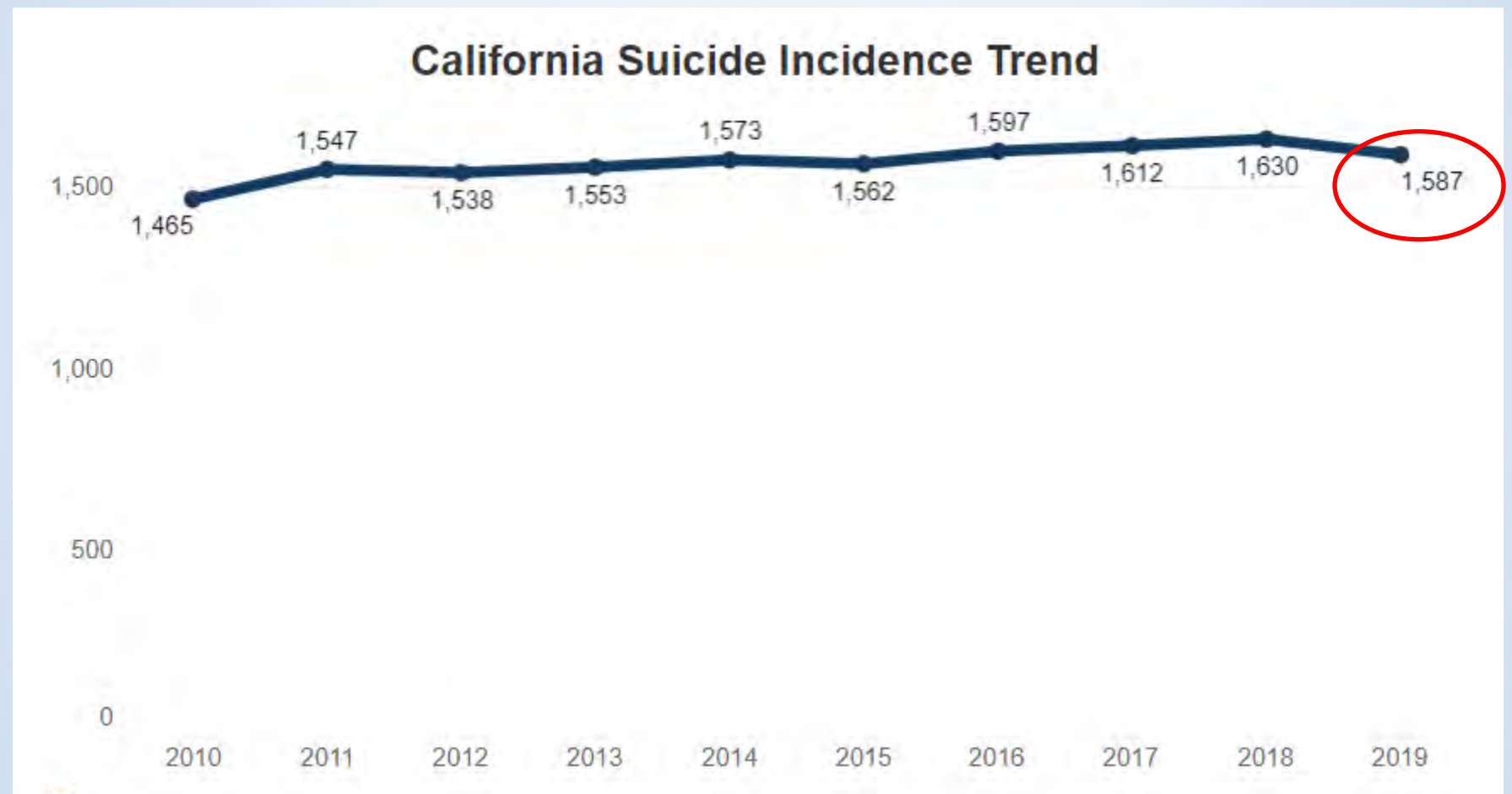
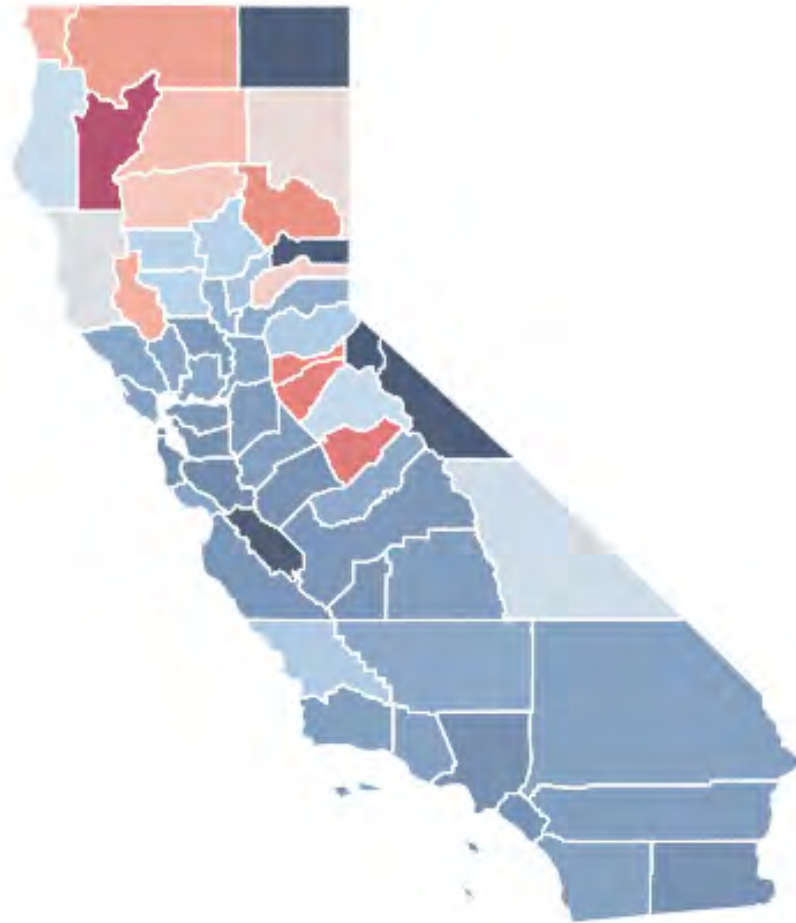
GOAL 4: CREATE SAFE ENVIRONMENTS BY REDUCING ACCESS TO LETHAL MEANS

Objective 4f Disseminate information to local gun shop and range owners to increase awareness of suicide prevention efforts, suicide warning signs, and available resources. Partner with local firearm safety trainers to incorporate suicide prevention awareness into trainings. Invite local gun shop and range owners to join local coalitions. Partner with law enforcement to guide dissemination of lawful options for temporarily transferring firearms for storage in times of suicide crisis or when Gun Violence Restraining Orders apply.²⁷ Resources to support this strategy can be found here: <https://emmresourcecenter.org/resources/suicide-prevention-gun-shop-activity>.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

Firearm Suicide

- Typically highest in more rural areas
- Fairly steady rates over time



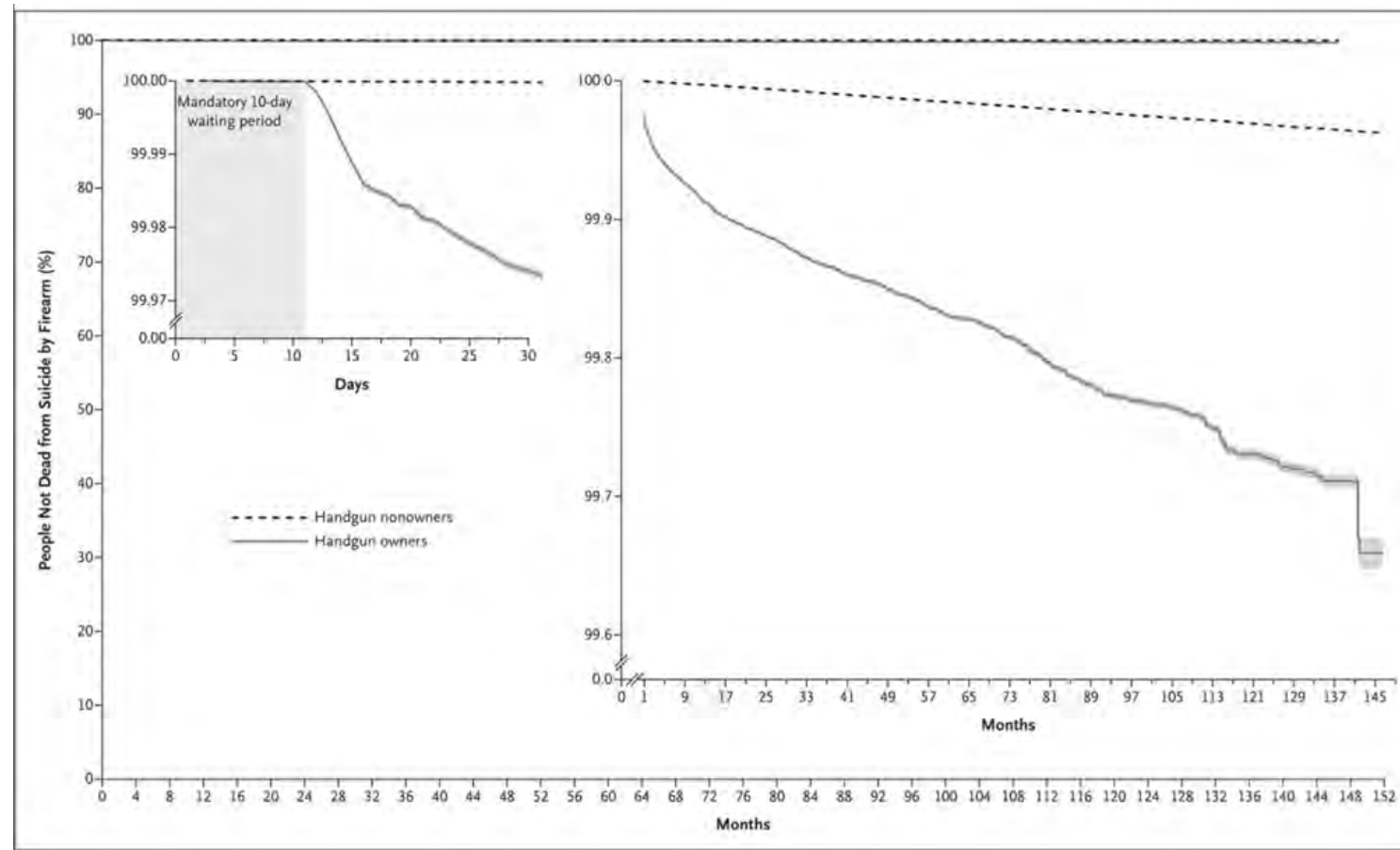
MHSOAC Suicide Incidence and Rate: <https://mhsoac.ca.gov/transparency-suite/suicide-incidence-and-rate/>

Firearm Suicide

SPECIAL ARTICLE

Handgun Ownership and Suicide in California

David M. Studdert, LL.B., Sc.D., Yifan Zhang, Ph.D., Sonja A. Swanson, Sc.D., Lea Prince, Ph.D., Jonathan A. Rodden, Ph.D., Erin E. Holsinger, M.D., Matthew J. Spittal, Ph.D.,
Garen J. Wintemute, M.D., M.P.H., and Matthew Miller, M.D., Sc.D.



Owners
(N=676,425)

Nonowners
(N=25,637,011)

Cause of Death	Owners		Non-owners	
	#	Rate	#	Rate
Suicide	1,354	47.73	16,540	9.38
Suicide by Firearm	1,200	42.30	5,491	3.11

Source: <https://www.nejm.org/doi/full/10.1056/NEJMsa1916744>

Firearm Suicide

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Garen J. Wintemute, M.D., M.P.H., and Matthew Miller, M.D., Sc.D.

Table 3. Counts, Crude Rates, and Adjusted Hazard Ratios for Suicide by Firearm among Handgun Owners, According to Time Period after First Handgun Acquisition.*

Suicides by Firearm	Period Since First Handgun Acquisition						
	1–10 Days	11–30 Days	31–90 Days	91–365 Days	366 Days–3 Yr	4–6 Yr	7–12.2 Yr
Suicides — no./total no. (%)	1/1200 (0.08)	172/1200 (14.33)	154/1200 (12.83)	251/1200 (20.92)	309/1200 (25.75)	194/1200 (16.17)	119/1200 (9.92)
Crude rate per 100,000 person-years	5.41	470.80	147.30	60.71	45.87	18.55	14.28
Adjusted hazard ratio (95% CI)	4.59 (0.82–25.52)	100.10 (55.75–179.90)	16.62 (12.98–21.29)	12.40 (10.48–14.67)	5.35 (4.64–6.17)	1.58 (1.34–1.86)	2.61 (2.14–3.19)

* “Acquisition” refers to the time of the application to purchase. California requires a 10-day (240-hour) waiting period from the date and time of the application to purchase to the time at which the purchaser is permitted to take possession of the firearm.

Source: <https://www.nejm.org/doi/full/10.1056/NEJMsa1916744>

Firearm Suicide

SPECIAL ARTICLE

Handgun Ownership and Suicide in California

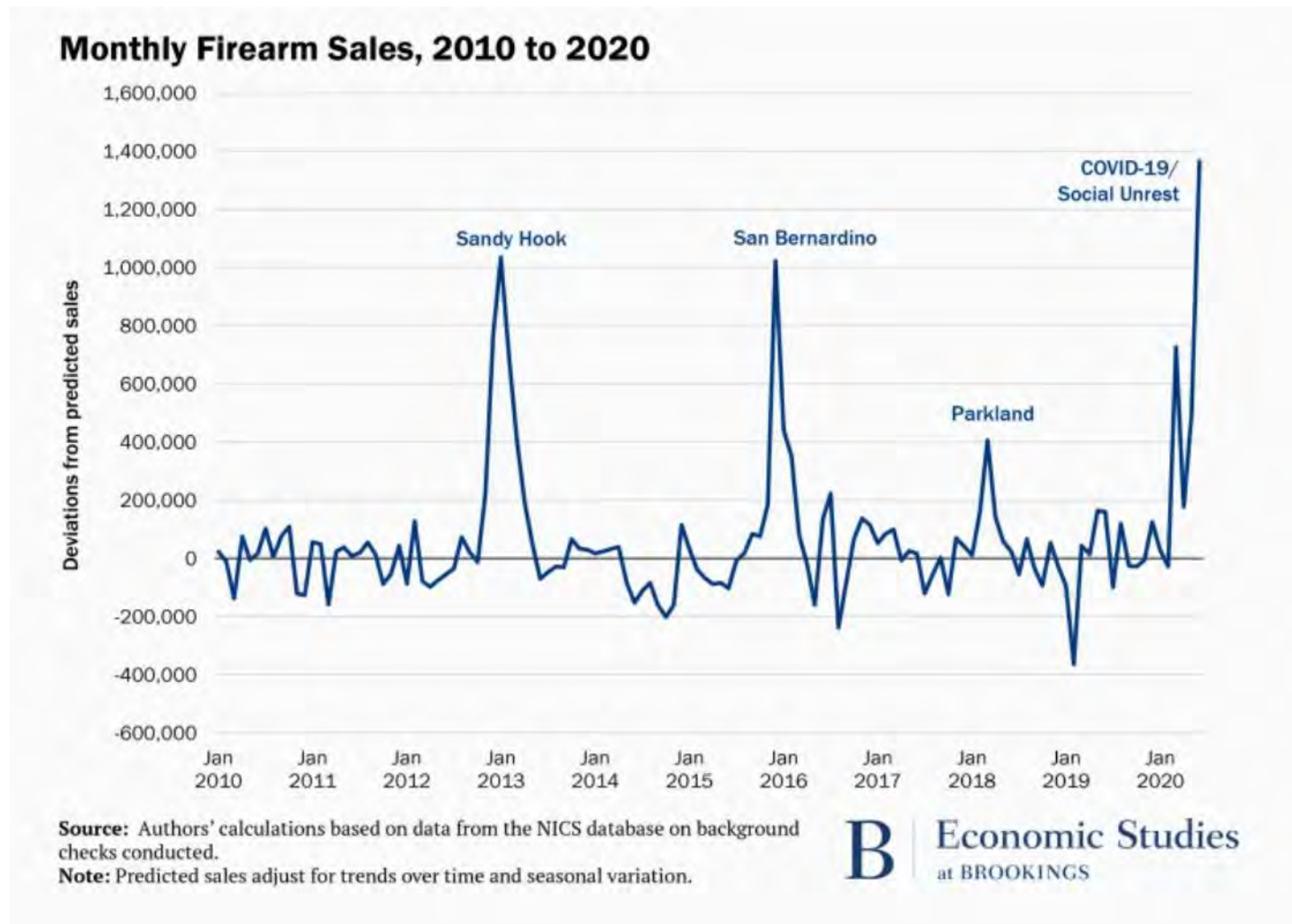
David M. Studdert, LL.B., Sc.D., Yifan Zhang, Ph.D., Sonja A. Swanson, Sc.D., Lea Prince, Ph.D., Jonathan A. Rodden, Ph.D., Erin E. Holsinger, M.D., Matthew J. Spittal, Ph.D., Garen J. Wintemute, M.D., M.P.H., and Matthew Miller, M.D., Sc.D.

Table 2. Counts, Crude Rates, and Adjusted Hazard Ratios for All-Cause Mortality and Suicide among Cohort Members, According to Handgun Ownership Status.

Cause of Death	Owners		Nonowners		Adjusted Hazard Ratio (95% CI)‡
	Deaths*	Crude Rate†	Deaths*	Crude Rate†	
All causes	10,863	382.94	1,447,118	820.91	0.80 (0.79–0.82)
Male	9,343	409.60	697,731	910.11	0.81 (0.79–0.83)
Female	1,500	271.78	739,924	747.99	0.72 (0.68–0.76)
Suicide	1,354	47.73	16,540	9.38	3.67 (3.46–3.89)
Male	1,132	49.63	11,376	14.84	3.34 (3.13–3.56)
Female	219	39.68	5,107	5.16	7.16 (6.22–8.24)
Suicide by firearm	1,200	42.30	5,491	3.11	9.08 (8.48–9.73)
Male	1,003	43.97	4,575	5.97	7.82 (7.26–8.43)
Female	194	35.15	900	0.91	35.15 (29.56–41.79)
Suicide by other methods	154	5.43	11,049	6.27	0.68 (0.58–0.80)
Male	129	5.66	6,801	8.87	0.64 (0.55–0.76)
Female	25	4.53	4,207	4.25	1.01 (0.68–1.50)

Source: <https://www.nejm.org/doi/full/10.1056/NEJMsa1916744>

Firearm Sales



Source: <https://www.brookings.edu/blog/up-front/2020/07/13/three-million-more-guns-the-spring-2020-spike-in-firearm-sales/>

Firearm Means Safety

How can we restrict or reduce access to lethal means?

- Put a barrier between the person and the means

What you can do:

- Promote awareness and importance of, and legal rights for, temporary storage of firearms with friends and family during times of distress and crisis
- Implement efforts to engage local gun shops to participate in safe storage of firearms outside of the home
- Engage firearm instructors to include suicide prevention information in firearm safety courses

California Penal Code Exemption

CA Penal Code now provide an exemption for friends or family to take possession of a firearm during times of suicide crisis (if certain criteria are met):

- Section 27545 does not apply to the transfer of a firearm if all of the following conditions are satisfied:
 - The firearm is **voluntarily and temporarily transferred** to another person who is 18 years of age or older for safekeeping **to prevent it from being accessed or used to attempt suicide by the transferor or another person that may gain access** to it in the transferor's household.
 - The **transferee does not use the firearm for any purpose** and, except when transporting the firearm to the transferee's residence or when returning it to the transferor, keeps the firearm unloaded and secured in the transferee's residence in one of the following ways:
 - Secured in a locked container.
 - Disabled by a firearm safety device.
 - Secured within a locked gun safe.
 - Locked with a locking device as described in Section 16860 that has rendered the firearm inoperable.
 - The **duration of the loan is limited to that amount of time reasonably necessary** to prevent the harm described in paragraph (1).

Source: https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB172

Messengers for Firearm Suicide Prevention

An examination of preferred messengers on firearm safety for suicide prevention

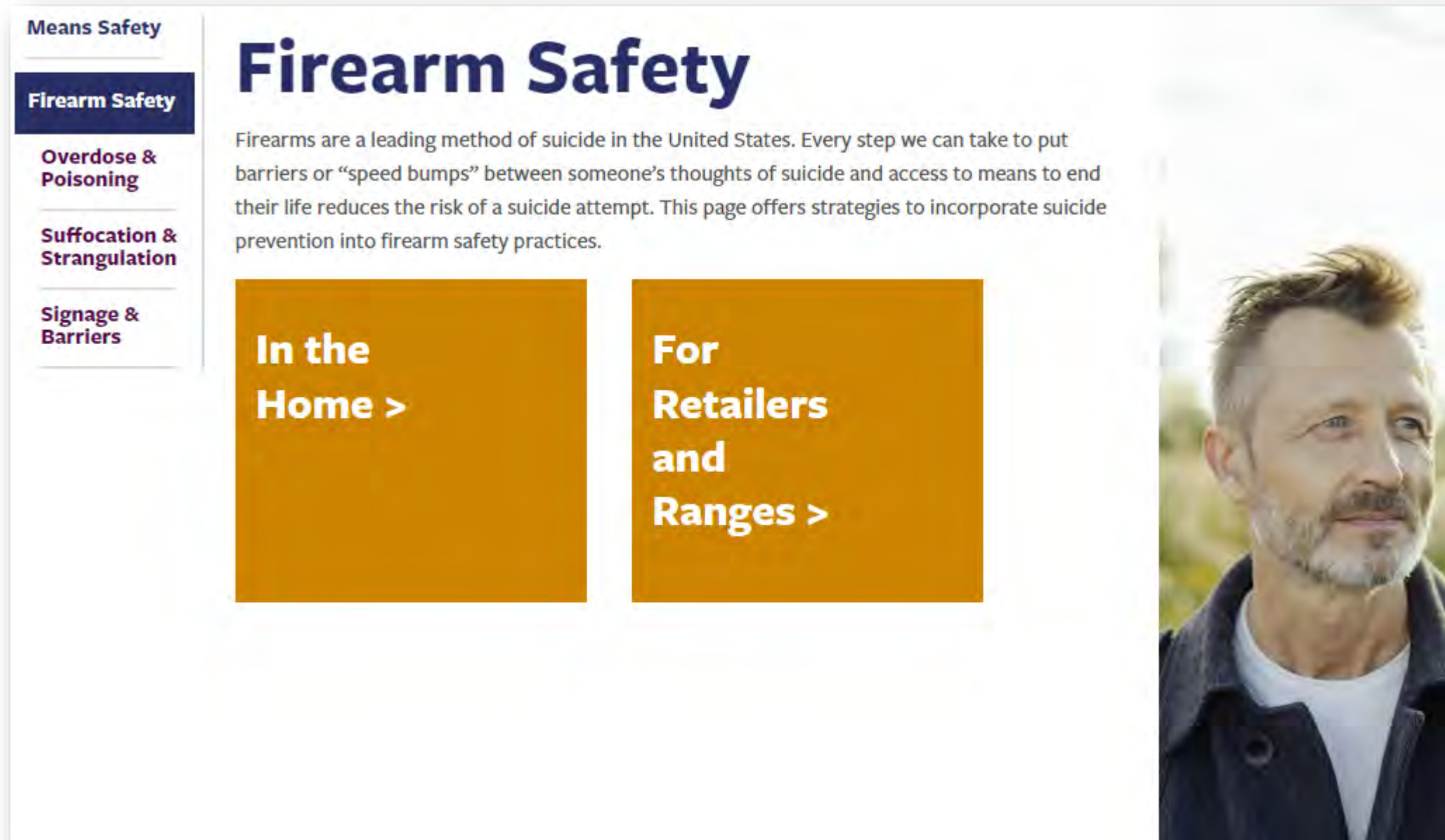
Michael D. Anestis^{a,b,*}, Allison E. Bond^c, AnnaBelle O. Bryan^d, Craig J. Bryan^d

Table 3
Differences between subgroups of firearm owners on rankings of messengers on firearm safety for suicide prevention

	White (n = 514)	Black (n = 75)	p	$p\eta^2$	Military (n = 146)	Civilian (n = 568)	p	$p\eta^2$	Locked (n = 132)	Unlocked (n = 582)	p	$p\eta^2$
Law Enforcement	4.51	6.31	.000	.03	4.92	4.89	.927	.00	5.54	4.75	.031	.01
Hunting or Outdoor Organizations	6.52	7.35	.065	.01	6.66	6.85	.565	.00	6.91	6.79	.741	.00
Military Veterans	5.27	6.81	.000	.02	5.69	5.54	.656	.00	5.57	5.58	.983	.00
Current Military Personnel	5.58	6.64	.015	.01	6.07	5.72	.290	.00	6.08	5.72	.307	.00
National Rifle Association	6.06	7.28	.014	.01	6.38	6.35	.944	.00	7.02	6.21	.037	.01
Firearm Manufacturers	6.95	7.25	.516	.00	6.82	7.07	.457	.00	7.22	6.98	.500	.00
Firearm Dealers	6.75	6.76	.990	.00	6.54	6.93	.228	.00	6.95	6.83	.712	.00
Family Members	6.91	6.45	.356	.00	7.19	6.68	.166	.00	6.76	6.79	.940	.00
Hunting or Outdoor Magazines	8.41	8.79	.341	.00	8.18	8.49	.316	.00	8.36	8.45	.796	.00
Casual Acquaintances	10.19	8.16	.000	.03	9.41	9.76	.313	.00	9.15	9.81	.068	.01
Friends or Coworkers	8.45	7.36	.013	.01	8.37	8.25	.717	.00	7.71	8.40	.048	.01
Gun Show Managers or Coordinators	8.49	7.15	.001	.02	8.56	8.18	.222	.00	8.06	8.30	.462	.00
Physicians or Medical Professionals	9.52	8.53	.034	.01	9.35	9.16	.595	.00	9.08	9.23	.701	.00
Celebrities	11.38	10.16	.004	.01	10.86	11.12	.433	.00	10.59	11.17	.093	.00

Source: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5844398>

Striving for Safety: Firearms



The screenshot shows a webpage layout. On the left is a sidebar with a vertical list of menu items: 'Means Safety', 'Firearm Safety' (highlighted in a dark blue box), 'Overdose & Poisoning', 'Suffocation & Strangulation', and 'Signage & Barriers'. The main content area features a large blue heading 'Firearm Safety' followed by a paragraph: 'Firearms are a leading method of suicide in the United States. Every step we can take to put barriers or “speed bumps” between someone’s thoughts of suicide and access to means to end their life reduces the risk of a suicide attempt. This page offers strategies to incorporate suicide prevention into firearm safety practices.' Below the text are two orange rectangular buttons with white text: 'In the Home >' and 'For Retailers and Ranges >'. On the right side of the page, there is a vertical photograph of a middle-aged man with a beard and short hair, wearing a dark jacket over a white t-shirt, looking off to the side.

Striving for Safety: Firearms (In the Home)

Informs community members about steps to prevent suicide including:

- Awareness and tools conversation
- Suggestions for safe storage
- Importance and strategies for storage outside of home

The screenshot shows a webpage with a sidebar on the left containing navigation links: Means Safety, Firearm Safety (highlighted), Overdose & Poisoning, Suffocation & Strangulation, and Signage & Barriers. The main content area is titled 'Firearm Safety' and includes an introductory paragraph, a sub-section 'In the Home', and a numbered list of four points. A dropdown menu is open under the fourth point, listing four storage options with downward arrows.

Means Safety

Firearm Safety

Overdose & Poisoning

Suffocation & Strangulation

Signage & Barriers

Firearm Safety

Firearms are a leading method of suicide in the United States. Every step we can take to put barriers or “speed bumps” between someone’s thoughts of suicide and access to means to end their life reduces the risk of a suicide attempt. This page offers strategies to incorporate suicide prevention into firearm safety practices.

In the Home

There are a number of ways you can help keep yourself or a loved one safe in the home.

- 1. Learn the warning signs for suicide and crisis resources.**
If you are concerned about yourself or someone else and observe one or more warning signs...
[More >](#)
- 2. Keep guns securely stored.**
It’s important to keep guns...
[More >](#)
- 3. Have a conversation about safety.**
When you’re worried that...
[More >](#)
- 4. Consider additional safety precautions such as storing a firearm off-site or outside the home.**
Putting time and distance between a person at risk for suicide and a gun can save a life. To keep yourself, your family, or your friends safe when someone is experiencing thoughts of suicide, one of the most effective steps you can take is to limit access to firearms by securing firearms safely outside of the home. There are some things to consider before transferring firearms to a gun shop or to a family member or friend. Please note that the law can change and that these tips were written based on information available in September 2022.
 - Storing a gun at a gun shop or shooting range ▼
 - Storing a gun with a friend or family member ▼
 - Storing a gun with law enforcement ▼
 - What if storage or disposal isn’t an option? ▼

[For Retailers and](#)

Striving for Safety: Firearms (Ranges and Retailers)

Provides recommendations for ranges and retailers:

- Promote suicide prevention (required by law to post NSPL)
- Offer trainings on suicide prevention
- Implement safe storage efforts
- Incorporate suicide prevention in firearm safety courses
- Resources for postvention guide

Means Safety

Firearm Safety

Overdose & Poisoning

Suffocation & Strangulation

Signage & Barriers

Firearm Safety

Firearms are a leading method of suicide in the United States. Every step we can take to put barriers or “speed bumps” between someone’s thoughts of suicide and access to means to end their life reduces the risk of a suicide attempt. This page offers strategies to incorporate suicide prevention into firearm safety practices.

For Retailers and Ranges

Each year in the United States, the number of people who die by suicide using a firearm is substantially greater than those who die of firearm-involved homicide. Firearm retailers and ranges are uniquely positioned to play a significant role in incorporating suicide prevention into their existing firearm safety processes and efforts. Here are some steps you can take to help safeguard your customers and communities:

- ✓ Educate yourself and your staff about the **warning signs for suicide**, how to have a conversation with someone you are concerned about, and available resources.
- ✓ Host a suicide prevention training for your staff. Visit the **Community Resources** page to find organizations who may offer trainings in your area.
- ✓ Incorporate suicide prevention education in firearm safety courses. Download slides and talking points **COMING SOON**.
- ✓ Display suicide prevention materials, such as a poster or brochures, on your premises or include them with each new firearm purchase. Download free materials **COMING SOON**.
- ✓ Losing someone to suicide involves complicated grief and it can be helpful to prepare how to support your staff, organization, and community in the event of such a loss. Learn about protocols and procedures you can put in place if one of your members or customers dies by suicide. Order the AFSP-NSSF postvention guide for gun ranges [here](#).

Cultural Competency Classes: Mental Health Professionals

Walk the Talk America offers introductory and intermediate online cultural competence courses for mental health professionals:

Learning Objectives:

- Statistics on firearm suicides
- Myths and stigmas surrounding gun ownership
- Firearms culture in America
- Function, handling, use, and safe storage of firearms
- Live-fire experience on the range (stage 3 course in-person)
- Offers up to 3 CEUs credits



Firearm Means Safety

San Diego County efforts included:

- Focus groups with gun owners and their families
- Adaptation of “Gun Shop” materials
- Over 20 gunshops participated
- Partnered with VA to distribute free gun locks
- Recruited gun shops to offer free/discounted storage
- Worked with firearm instructors to include suicide prevention in safety courses
- Developed website with information specific to firearm owners



The image shows the full brochure. It is divided into several sections. On the left, under the heading "GUN SAFETY SAVES LIVES", there is a list of 10 safety rules. In the center, under "ABOUT THIS BROCHURE", there is text about the "It's Up to Us" campaign, contact information for the San Diego County Access and Crisis Line (1-888-724-7240), and logos for "KNOW THE SIGNS" and "ECONOMY MATTERS". On the right, there is a smaller version of the "PREVENT FIREARM SUICIDES" cover, followed by statistics: "Firearms are the leading method of suicide in San Diego County." and "Over a 10-year period 1,451 people died of suicides involving firearms in San Diego County." At the bottom right, there is a call to action: "Look inside to learn the warning signs for suicide and gun safety tips to keep yourself or a loved one safe." The brochure also features logos for "LIVE WELL" and "It's Up to Us".

County Highlight:

Jonathan Abidari

Suicide and Violence Prevention Program Health Education
Specialist for Humboldt County

Support for people at risk for suicide or those supporting people at risk is available by calling the
National Suicide Prevention Lifeline 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está
disponible llamando al **National Suicide Prevention Lifeline 1-888-682-9454**

Lethal Means Counseling and Safety Planning

Support for people at risk for suicide or those supporting people at risk is available by calling the
National Suicide Prevention Lifeline 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está
disponible llamando al **National Suicide Prevention Lifeline** 1-888-682-9454

Striving for Zero: California Strategic Plan



4

STRATEGIC
AIM

GOAL 11: ENSURE CONTINUITY OF CARE AND FOLLOW-UP
AFTER SUICIDE-RELATED SERVICES

Objective 11g Train health care providers to deliver lethal means counseling to family members and caregivers supporting people who are discharged from a health care setting after suicidal behavior.

Objective 11h Disseminate information on lethal means counseling to health care providers across hospital settings. Prioritize providers who predominantly serve at risk-groups or work in high-risk settings, such as emergency departments. Promote free online training, such as Counseling on Access to Lethal Means available at <https://training.sprc.org/>, and the use of online toolkits, such as <https://health.ucdavis.edu/what-you-can-do/>.

https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf

Lethal Means Counseling

Promote/provide/support trainings to professionals around lethal means counseling:

- Audiences to consider:
 - Medical Professionals: Emergency and Primary Care
 - Mental Health/Behavioral Health Professionals
 - School personnel
- Cultural Competence Courses on working with firearm community

Lethal means safety counseling training should include:

- Evidence to address common misconceptions
- Overview of best counseling techniques
- Information about firearms
- Tools for providers when patients have access to firearm
- Important legal information regarding firearms



CALM

Counseling on Access to Lethal Means

Objective: How to ask individual about access to lethal means, and work with them to reduce access.

Target: Mental/behavioral health clinicians, others supporting persons at risk of suicide.

Platform: Online

Duration: 2 hours

Offered by: Suicide Prevention Resource Center

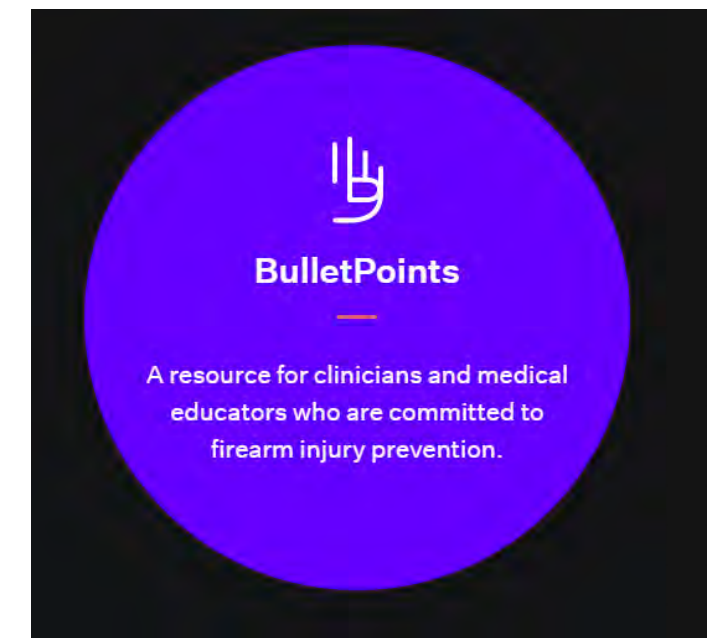
<https://zerosuicidetraining.edc.org/enrol/index.php?id=20>

BulletPoints Project: Clinical tools for preventing firearm injury

- By the end of this course, attendees will be able to:
 - Describe the clinician's role in preventing firearm injuries
 - Identify patients at increased risk for firearm injury
 - Engage in conversations about firearm injury prevention with patients
 - Apply interventions appropriate to the level and type of risk

Course Summary:

- Available for free
- Takes about 60 minutes to complete
- Offers CEUs



www.bulletpointsproject.org/

Safety Planning

- Stanley-Brown Safety Planning Intervention:
 - suicidesafetyplan.com/
- Now Matters Now:
 - nowmattersnow.org/
 - Offers alternative safety plan and resources intended for individuals experiencing suicide crisis
- Crisis Response Plan (CRP) Tool
 - <https://crpforsuicide.com/about>
- Collaborative Safety Planning to Reduce Risk in Suicidal Patients: A Component of the Zero Suicide Model
 - http://suicideprevention-icrc-s.org/sites/default/files/sites/default/files/events/17_7_26_icrc-sslides.pdf
- Safety Plan Treatment Manual to Reduce Suicide Risk: Veteran Version
 - http://www.mentalhealth.va.gov/docs/VA_Safety_planning_manual.pdf

STANLEY - BROWN SAFETY PLAN

STEP 1: WARNING SIGNS:

1. _____
2. _____
3. _____

STEP 2: INTERNAL COPING STRATEGIES – THINGS I CAN DO TO TAKE MY MIND OFF MY PROBLEMS WITHOUT CONTACTING ANOTHER PERSON:

1. _____
2. _____
3. _____

STEP 3: PEOPLE AND SOCIAL SETTINGS THAT PROVIDE DISTRACTION:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Place: _____ 4. Place: _____

STEP 4: PEOPLE WHOM I CAN ASK FOR HELP DURING A CRISIS:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Name: _____ Contact: _____

STEP 5: PROFESSIONALS OR AGENCIES I CAN CONTACT DURING A CRISIS:

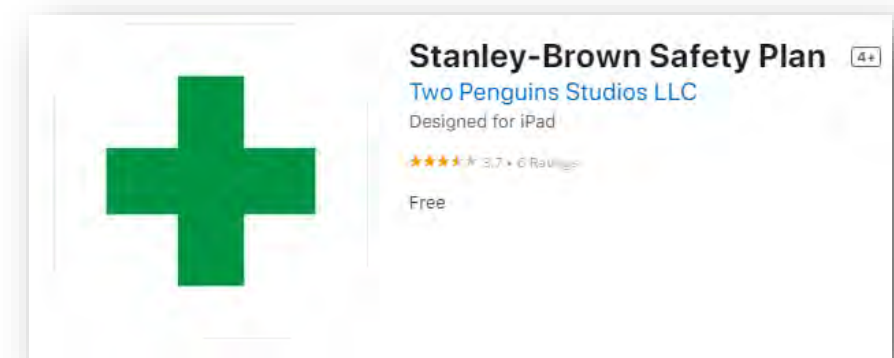
1. Clinician/Agency Name: _____ Phone: _____
Emergency Contact: _____
2. Clinician/Agency Name: _____ Phone: _____
Emergency Contact: _____
3. Local Emergency Department: _____
Emergency Department Address: _____
Emergency Department Phone: _____
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

STEP 6: MAKING THE ENVIRONMENT SAFER (PLAN FOR LETHAL MEANS SAFETY):

1. _____
2. _____

The Stanley-Brown Safety Plan is copyrighted by Barbara Stanley, PhD & Gregory K. Brown, PhD (2008, 2021). Individual use of the Stanley-Brown Safety Plan form is permitted. Written permission from the authors is required for any changes to this form or use of this form in the electronic medical record. Additional resources are available from www.suicideprevention.com.

Stanley-Brown
Safety Planning Intervention



Men and Suicide Prevention

Support for people at risk for suicide or those supporting people at risk is available by calling the
National Suicide Prevention Lifeline 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está
disponible llamando al **National Suicide Prevention Lifeline 1-888-682-9454**

Guest Speaker:

Lindsay Heuer

Supervising Community Education Specialist,
Shasta County Suicide Prevention Program



Shasta County
Health & Human
Services Agency

SHASTA COUNTY SUICIDE PREVENTION



LINDSAY HEUER

LHEUER@CO.SHASTA.CA.US



SYDNEY STINGER

SSTINGER@CO.SHASTA.CA.US



SHASTA COUNTY SUICIDE PREVENTION



Shasta County
Health & Human
Services Agency



LINDSAY HEUER

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SYDNEY STINGER

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Guest Speaker:

Kara Connors

Senior Program Coordinator for Suicide Prevention

Marin County

The Marin County Suicide Prevention Collaborative Men and Boy's Action Team: "Redefining Strength"

Kara Connors, MPH

Senior Program Coordinator for Suicide Prevention

Marin County-BHRS ~ kconnors@marincounty.org



SUPPORT



UNITY



TRUST



EXCELLENCE



Context

Everyone can be vulnerable to mental health, substance use, and suicidal risk. Data indicate those ways in which men are disproportionately impacted by these behavioral health issues.

- **Men make up 49% of our community and comprise of 79% of deaths by suicide.** Men and boys are impacted by suicide across the life span and are known for limited help seeking, especially during times of distress.
- Our community has been impacted by youth suicide, however **middle age men (45-64 y/o) are disproportionately represented.**
- **Marin men fatally overdose at a much higher rate than women (Rx Safe Marin, 2021).**

We know that the number one protective factor is **social connectedness**.

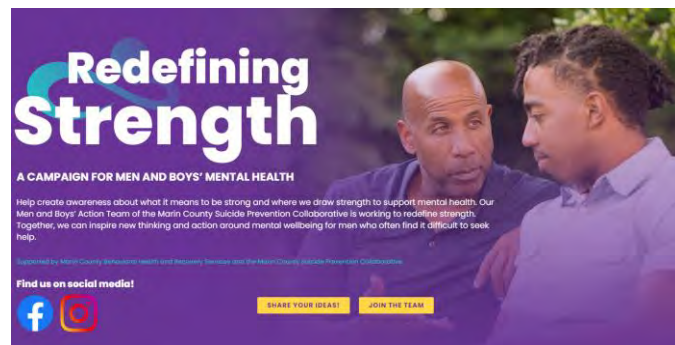
One key risk factor is untreated mental health issues which can be compounded by unhealthy coping skills, such as substance overuse.



Since October 2021: The Development of a Team and Campaign

- Launched the Team with over 50 unique individuals. One of eight Action Teams that work to advance our County's Suicide Prevention Strategic Plan
- Co-leaders: Otis Bruce, Ass't DA of Marin County and Spence Casey, Veteran's Services-BHRS
- Discussed our lived experiences to help inform our goals
- Worked with a Marin-based marketing team to capture our vision
- Developed a grassroots County-wide campaign, "Redefining Strength," reflecting images and experiences of local men and boys
- Hosted first of its kind event, "**A Community Conversation: Redefining Strength for Men and Boy's Mental Health**" during May Mental Health at the BOS Chambers
- Launched the campaign at the event---and thru September 2022.



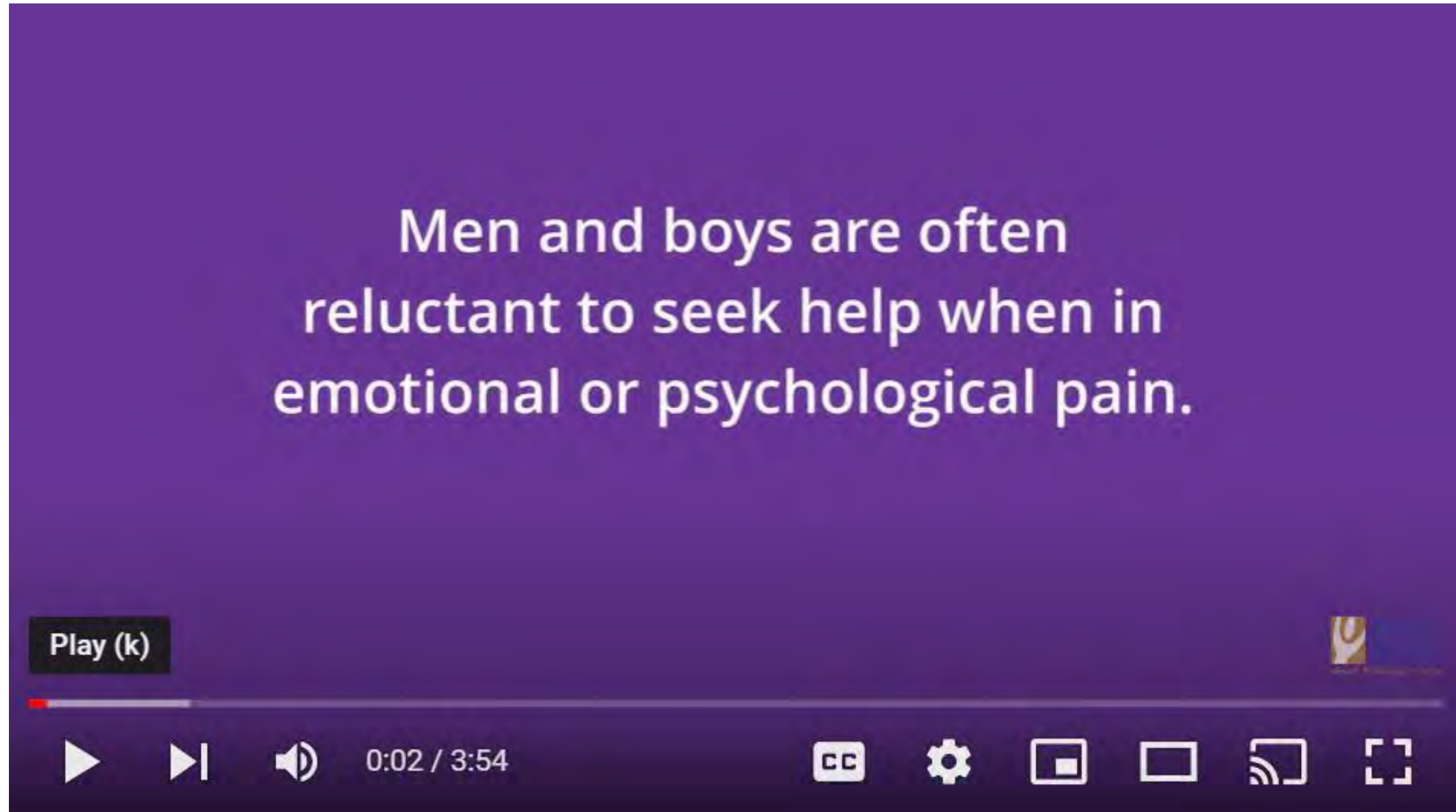


Men and Boy's of Marin

Campaign Elements (English/Spanish)

- Posters, postcards, and video
- Distributed via print, advertisements, radio, social media
- Website: redefinestrength.org

Campaign Video



<https://www.youtube.com/watch?v=p5zK3NghmRw>

Guest Speaker:

Bhuvana Rao

Division Manager, Office of Suicide Prevention

County of Orange Health Care Agency

Support for people at risk for suicide or those supporting people at risk is available by calling the
National Suicide Prevention Lifeline 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está
disponible llamando al **National Suicide Prevention Lifeline 1-888-682-9454**

Help is Here

Men's Suicide Prevention Campaign
OC Health Care Agency
Orange County, California

Presentation for the Statewide Learning
Collaborative

Dr. Bhuvana Rao, Office of Suicide Prevention
December 7, 2022



Adult Suicide Prevention

Presenting Issue: Tasked to address suicide prevention during the COVID-19 Pandemic.

Data: 10-year local data indicates that middle age white males between the ages of 40-60 years are the highest priority population for suicide risk in Orange County.

Research: Men in this age group who are feeling stresses, overwhelmed or hopeless don't seek help in part because of prevailing beliefs and societal expectations regarding masculinity.

Strategy: Used a broad-based marketing and advertising campaign targeting white males 35+ years and their loved ones to encourage information and help-seeking. Additionally targeting military, first-responder, or manual labor type careers.

Objectives:

- Increase education around the signs of suicide ideation
- Increase awareness of helpful resources
- Decrease stigma or perceived shame around help seeking
- Encourage information and help seeking

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Adult Suicide Prevention

Primary: White, male between 35+; military/veterans, public service workers: police, firemen (1st responder careers), construction/physical laborers

Message Approach:

- *You are not alone. This is more common than you think.*
- *Strength is paying attention to your health, well-being.*
- *Strength is getting help/taking action — taking charge, empowering.*

Secondary: Older adults male, 65+, and look to friends & family

Message Approach:

- *Know the signs*
 - ***Failure to take care of self***
 - ***Increased substance use***
 - ***Neglecting doctor's orders/Looking for means to self-harm***
 - ***Changes in sleep***
 - ***Getting affairs in order***
 - ***Withdrawal***
 - *Hopelessness/Depression*
 - *Preoccupied with death*
- *Suicide ideation is more common than you think in older adults.*

Media Tactics

Cable TV

10 Zones: Bravo, CNN, Discovery, ESP2, FXNC, History, Lifetime, National Geographic Channel, Hallmark

- 30 second
- 3 – 15 second spots

Radio

Radio.com, KFI, KPCC, Chargers Sponsorship, Sports Network

- 30 second
- 3 – 15 second spots
- 5 second sponsorships

Digital

- Digital Display & Retargeting
- Pre/Mid-roll video advertising
- Social Ads: Facebook/Instagram
- Google Search

Outdoor

- Digital billboards
- Premier panels
- Posters
- Transit shelters



Community Toolkit

- Newsletter copy
- Social posts
- Posters

Value-Add

- Custom E-blasts KFI Radio
- Radio.com Interviews
 - "I'm Listening"
 - "Open Line"
- **OC HCA Website Landing Page**
Downloadable community toolkit

Media Plan

MEDIA	September				October				November				December				
<i>Broadcast Month</i>	31	7	14	21	28	5	12	19	26	2	9	16	23	30	7	14	21
 	Labor Day (7)								Election Day (3) Veteran's Day (11) Thanksgiving Day (26)				Christmas (25)				
Orange County	3rd Quarter								4th Quarter								
TV																	
General Market Cable (:30 second & :15s)																	
Radio																	
General Market Radio (:15 second & :30 second)																	
KFI-AM 640 (News/Talk)																	
Streaming Audio (Orange County)																	
KPCC-FM 89.3 (Public Radio)																	
Radio.com (Sponsorship and Interviews)																	
Added Value																	
Custom Email																	
Sports Sponsorship (Chargers)																	
Outdoor																	
Digital Boards (Orange County)																	
Transit Shelters (Seal Beach, Huntington Beach, Newport Beach, Laguna Beach, Laguna Niguel, Laguna Woods)																	
Posters (Orange County)																	
Premiere Panels (Huntington Beach, Dana Point)																	
Outdoor Production & Install Fee NET																	
Digital																	
Facebook & Instagram																	
Video - Pre and Mid Roll																	
Search																	
Digital Display																	

Television Spots



Out-Of-Home Billboards



Overwhelmed?
Speak to someone **who understands.**

 (877) 910-WARM | helpishereoc.com



Feel like there's no hope?
****We hope** to talk to you soon.**


(877) 910-WARM | helpishereoc.com 

Out-Of-Home Billboards



Want to make the pain stop?
Start here.

(877) 910-WARM | helpishereoc.com



Loved one withdrawn?
Connect **with help** now.



(877) 910-WARM | helpishereoc.com

Digital Banner Ads

Overwhelmed?

Speak to someone
who understands.

OC health CARE AGENCY

learn more

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learn more

Website Landing Page

[Home](#) / [Help is Here](#)

- [Adult Suicide Prevention](#)
- [Children, Youth & Caregiver Support](#)
- [Directory of Services](#)
- [Health Care Providers & First Responders](#)
- [Older Adults](#)
- [Resources for All](#)
- [Smartphone & Online Support Apps](#)
- [Youth Suicide Prevention](#)

Help is Here

Mental Health and Suicide Prevention Resources




Overwhelmed? Feel like there's no hope? Wish the pain would stop?

If you are struggling and don't know where to turn, help is here. See our resources below to get support, and to talk or chat with real people who get what you're going through. It's free, confidential, and can really help.

Community Toolkit



Help is Here OC
**Adult Suicide
Prevention Campaign
Community Toolkit**



Contents:

- Newsletter Copy
- Printable Posters
- Social Media Posts
Facebook/Instagram
Twitter

Website Data – November 12 – 30, 2020

- Total sessions– **23,515**
- Total users – **15,328**
- Average time on page – **1 minute, 58 seconds**
- Total users from digital banners – **12,744**

2,976 users



2,140 users



1,687 users



Campaign Results

TV Cable 6-week targeted campaign. Flight dates 11/16/20 to 12/27/20.

- TV Cable impressions: 554,000

Broadcast Radio 6-week campaign. Flight dates 11/16/20 to 12/27/20.

- Total Radio impressions: 13,475,235

Outdoor 4-week campaign. Flight dates 11/30/20 to 12/27/20.

- Total Combined impressions 27, 440,970 impressions

Digital 8-week targeted campaign. Flight dates 11/02/20 to 12/27/20.

- The campaign was seen almost 21 million times across all digital media with almost 4.5 million video views. 72% of video views were completed views, meaning the video was played through more than 3 million times.

Landing Page 7-week targeted campaign. Flight dates 11/14/20 to 12/27/20.

- New users added: 37,940
- Page views: 71,925 (unique page views 60,020)

Tool Kit Data from 12/9/20 to 12/27/20

- Total users 92 (new users 58)
- Sessions 112; page views 419

TOP SEARCH & KEYWORDS

Top 10 search keywords:

mental

being depressed

depressed

signs of depression

mental help

symptoms of being depressed

mental health depression

help hotlines

help

talk with someone

Top performing search ad:

Depression won't last forever. | It is possible to feel better. | Help is here.

Talk or chat with real people, who really get what you're going through. 100% free.

Successes, Challenges & Lessons

Success

- Implementation via Pulsar, a full-service Ad Agency with experience in social cause marketing
 - Reach the target audience
 - Understand Government needs and constraints
 - Translated research into messaging
- Early buy-in from leadership
- Data was available
- SME and PIO Collaborations with Pulsar

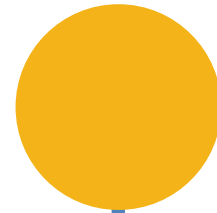
Challenges

- Implementation during the pandemic
- Timing of campaign (during elections, holidays, sports)

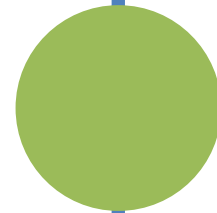
Lessons Learnt

- Plan the long-term strategy prior to campaign implementation
- Data presentation (Clarify that it is a prevention campaign. Cannot make direct links to reducing suicide.)
- Phased approach to campaign

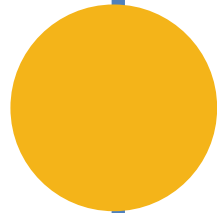
Supporting individuals who are experiencing thoughts of suicide – Resource Mapping Questions



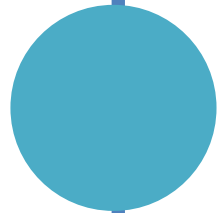
What means/methods are most common in your county?



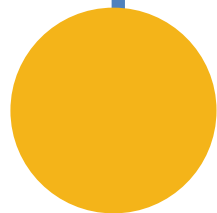
Do means/methods vary by specific demographics?



Are there any currently existing means reduction efforts (even if not directly tied to suicide prevention, i.e. prescription takebacks)?



Do you currently provide (or promote) training for lethal means counseling?



Are there any existing engagements with the firearm community?

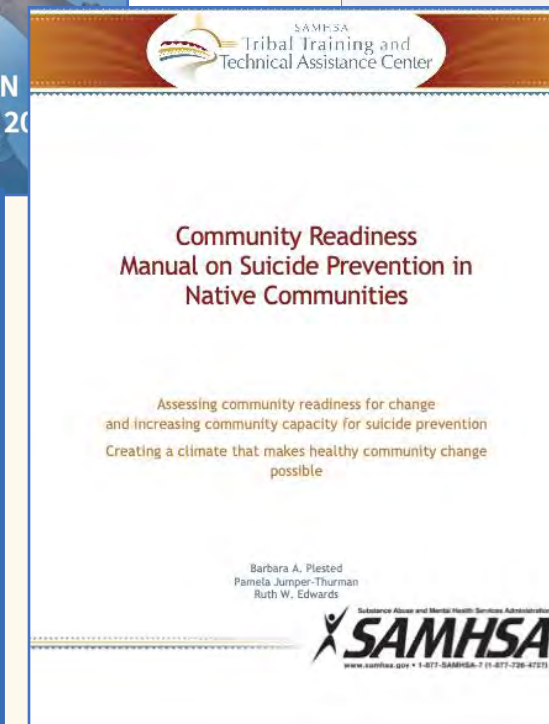
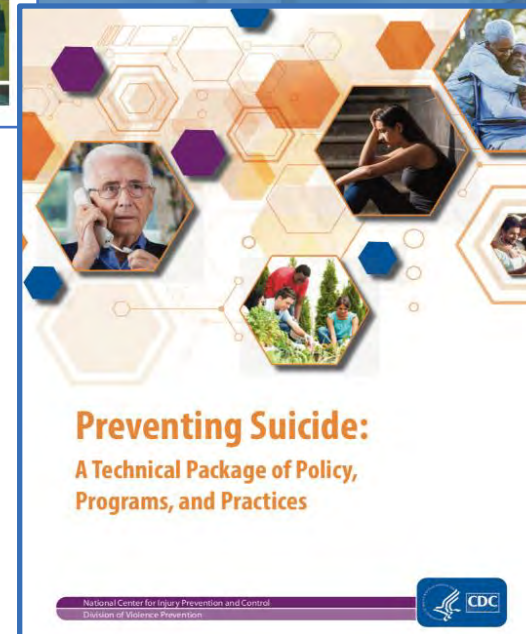
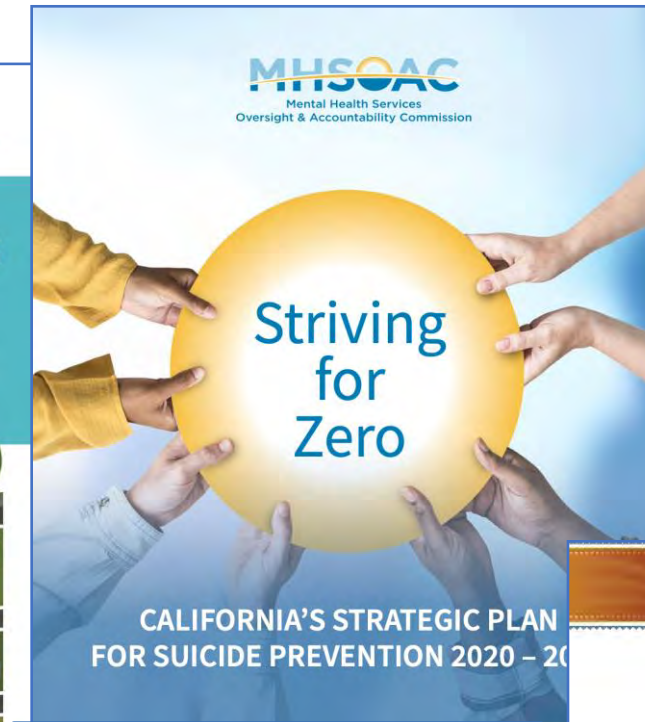
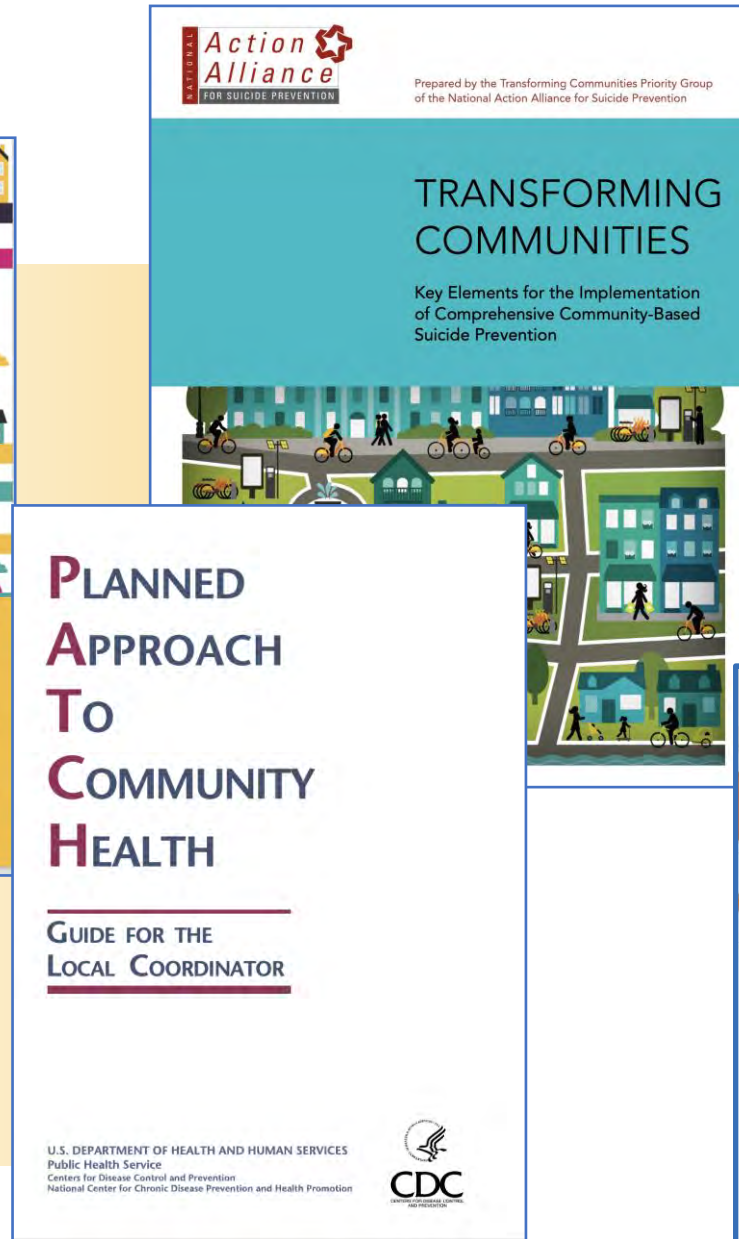
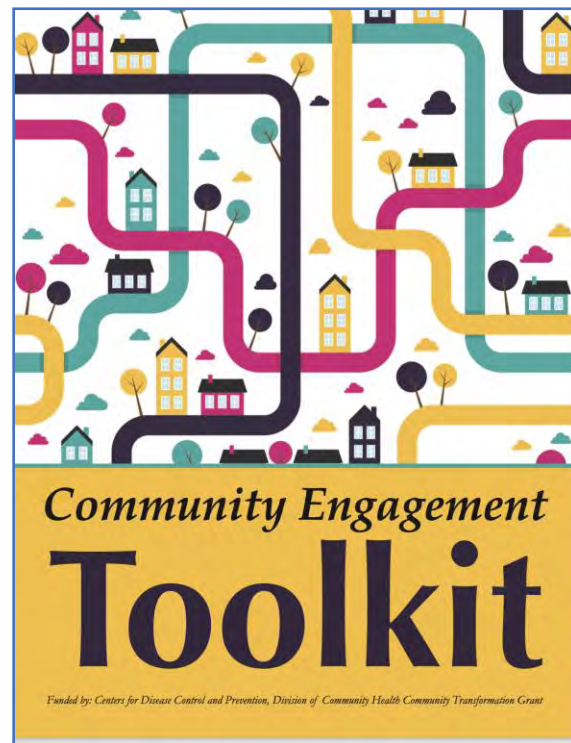
Means Safety: Creating Safe Environments

- Include Means Safety in strategic planning, consider workgroup
- Use data to guide efforts:
 - Most common means, site specific efforts
 - Track data on interventions and preventative actions
- Implement prevention efforts around
 - poisoning overdose
 - firearms
 - other leading methods for suicide to limit/restrict access
- Collaborate with existing coalitions and task forces to incorporate suicide prevention into the work they are doing
- Implement efforts for professionals on lethal means counseling and safety planning

Q&A



Guiding Resources



Thank you for your time

For more information please contact: jana@yoursocialmarketer.com

Support for people at risk for suicide or those supporting people at risk is available by calling the **National Suicide Prevention Lifeline** 1-800-273-TALK (8255) or 988

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está disponible llamando al **National Suicide Prevention Lifeline** 1-888-682-9454 o 988