

# Striving for Zero

## Pebbles of Wisdom

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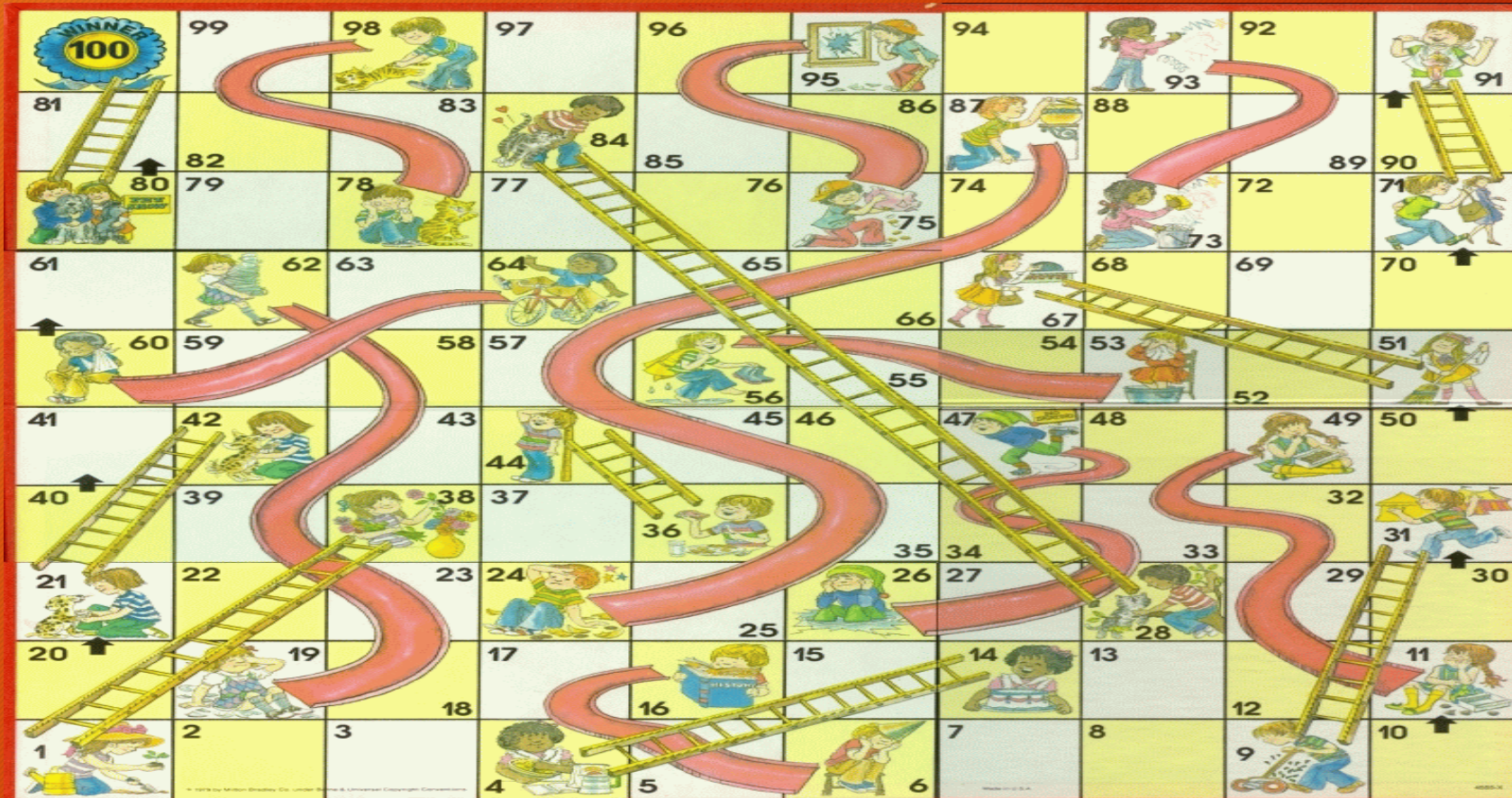
# Aims of presentation

- Introduce
- Present brief historical overview
- Share examples of past and present national activity
- Present lessons learned
- Inspire

# Pebbles of Progress



# Chutes and Ladders



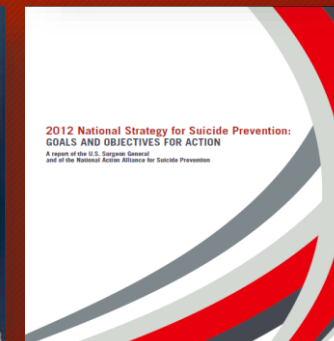
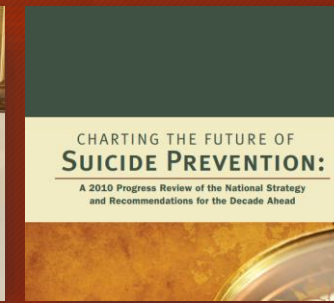
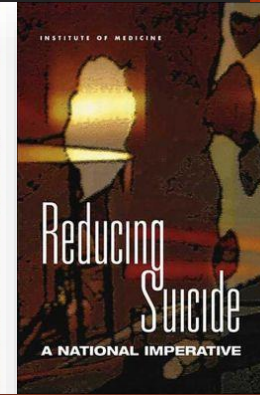
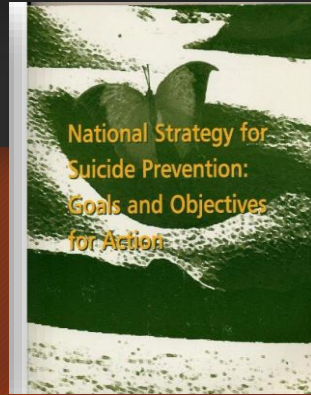
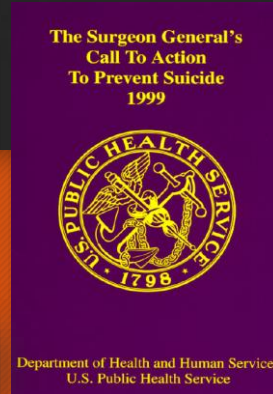
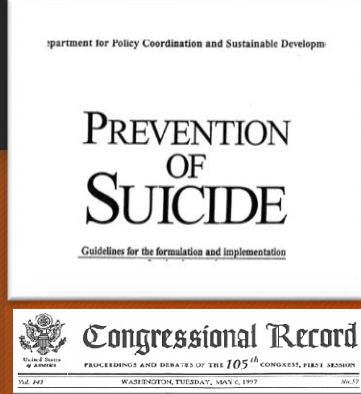
# The Model for Action



**Richmond and Kotelchuck's Health Policy Model**

Found in: Atwood, K, Colditz, G. A., Kawachi, I. (1997). From public health science to prevention policy: Placing science in its social and political context. *American Journal of Public Health, 87(10)*  
DeQuincy A. Lezine, Gerald A. Reed, "Political Will: A Bridge Between Public Health Knowledge and Action", *American Journal of Public Health 97*, no. 11 (November 1, 2007): pp. 2010-2013..

# The Knowledge, Political Will, and Social Strategy



# Where have we travelled nationally?

- Congressional Resolutions
- A Call to Action - A Public Health Approach
- National Strategies for Suicide Prevention
- Institute of Medicine Report
- President's New Freedom Commission
- Lifeline - 988
- Suicide Prevention Resource Center
- DoD Suicide Prevention Independent Review Committee
- NVDRS
- Zero Suicide
- Garrett Lee Smith Memorial Act
- Joshua Omvig Veterans Suicide Prevention Act
- SSG Fox Suicide Prevention Grant Program
- CDC Comprehensive Suicide Prevention Program
- Mental Health Parity
- Medicare Copayment Equity
- State and Territorial Strategies
- State Appropriations
- Federal and State Working Groups

# Pebbles of Practice





# What have we learned?

Suicide prevention requires:

- **Multiple, coordinated interventions**
- **Universal, selected and indicated**
- **Systems transformation as well as individual-level change**
- **Sustained efforts**
- **Upstream and downstream**
- **Mental health and public health**
- **The voice of lived experience**

**“Knowing is not enough; we must apply.  
Willing is not enough; we must do.”**

**—Goethe**



**10**

**We must support programs and policies that create protective environments.**

- This includes reducing access to lethal means for those at risk of suicide.



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**9**

**We must understand that suicide shares risk and protective factors with other public health issues.**

- Work closely with other disciplines – including substance misuse prevention, violence prevention, and ACES prevention – to coordinate prevention efforts.



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## 8

### **We must promote connectedness.**

- Everyone has a role to play in suicide prevention, including the faith community, aging services, media, schools, youth programs, veterans programs, and social service organizations.



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**We must start suicide prevention early. Work upstream.**

- Support programs that build social-emotional health to interrupt problematic trajectories.





# 6

## **We must support people at risk for suicide.**

- This includes gatekeeper trainings and widespread screening for those at risk.
- This also includes transforming the current crisis system in the U.S.





**5**

We must include the voices of lived experience and promote their stories of hope and resilience

- This inclusion must be from the beginning, be authentic and contribute to de-stigmatizing mental health seeking



<https://youtu.be/33ydyqVAGb0>



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**4**

**We must promote policies that strengthen economic supports.**

- Address the social determinants of health.

# Social Determinants of Health



Social Determinants of Health  
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 Healthy People 2030

Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved [date graphic was accessed], from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>



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**3**

**We must work with health care systems – from primary care to hospice – must engage in suicide-safe practices.**

- Move toward models of collaborative care.
- Push for legislation that full ensures mental health parity.



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## 2

### **Engage in structural change.**

- Build state and local infrastructure to support those at risk.
- Focus on equity.



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**1**

**We can fly further and faster if we fly in formation.**

- Bundled, comprehensive, collaborative models must be implemented at the state and community levels.

# Pebbles of Inspiration





# Begin with the end in mind

“You must be the  
change you wish to  
see in the world.”

*Mahatma Gandhi*



# Fly in formation



# Bamboo farming and advocacy



When doors close...windows open



# Follow the Yellow Brick Road



# Thank You

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