



What's Happening in Suicide Prevention in Montana

Wanting to keep you informed and collaborating to find a solution

As most of you know, Montana has one of the highest rates of suicide in the nation, and has for more than three decades. Suicide and the stigma against mental illness has been part of the Montana culture for a hundred years. This isn't going to change quickly. It is going to take a cultural shift in the way we think and an openness to talk about these issues. The purpose of this newsletter is to inform the public of ongoing prevention activities taking place in communities around the state, identifying community advocates, and encouraging input from all Montanans on how we can address the issue of suicide in our state.

Good Behavior Game provided to 36 elementary school teachers

On June 18, 36 elementary school teachers from around the state participated in an all-day training learning how to implement the PAX Good Behavior Game. The PAX Good Behavior Game is a proven, research-based classroom management model designed for use in grades K-6. The training was part of the MBI (Montana Behavioral Initiative) Conference in Bozeman.

Based on a strategy developed by a classroom teacher 40 years ago, the PAX Game involves student teams "competing against" each other to earn rewards for refraining from disruptive, inattentive, or aggressive behavior.

Approximately 20 published studies have shown that use of this model results in decreased classroom disruptions, 60-90 minute more time to teach and learn each day, along with 75-125 fewer disruptions per hour in classes. Long-term effects that have been found years later, as these children become adolescents and adults, include reduction in deviant and criminal behaviors, reduction in directly observable symptoms of ADHD such as inattention and fidgeting, reduction in observable symptoms of Oppositional Defiance and Conduct Disorders, reduction in the manifest symptoms of depression and PTSD, and a 25% to 50% reduction in use of tobacco or other drugs over a child's lifetime.

The training, sponsored by the Montana DPHHS, included bringing in a Master Trainer from the PAXIS Institute in Tucson, AZ, and providing each teacher with a kit enabling them to fully implement the program in their schools.

Research: Native Americans at greater risk of suicide after alcohol intoxication

Web address: <http://www.sciencedaily.com/releases/2013/02/130205173757.htm>

Native Americans are at much greater risk of suicide after acute alcohol intoxication, according to a study led by researchers at The University of Texas Health Science Center at Houston.

The study examined the prevalence and social demographic correlates of suicide involving acute alcohol intoxication among United States ethnic minorities. Results were published in the May 2013 issue of Alcoholism: Clinical & Experimental Research .

"Some reviews suggest that people with alcohol use disorders are nine times more likely to die by suicide than the general population," said Raul Caetano, M.D., Ph.D., M.P.H., the study's corresponding author and regional dean of The University of Texas School of Public Health Dallas Regional Campus, part of UTHealth. "Our paper looks at the issue more specifically, examining suicide and acute intoxication among U.S. ethnic minorities. It is not the first study to do so, but few among them have used such large data set as the National Violent Death Reporting System (NVDRS)."

The authors suggest that alcohol-related prevention strategies focus on suicide as a consequence of alcohol use, especially among American Indian and Alaskan Native youth and young adults.

Research: Common parasite may trigger suicide attempts: Inflammation from T. Gondii produces brain damaging metabolites

Web address: <http://www.sciencedaily.com/releases/2012/08/120816170400.htm>

A parasite thought to be harmless and found in many people may actually be causing subtle changes in the brain, leading to suicide attempts.

New research appearing in the August issue of The Journal of Clinical Psychiatry adds to the growing work linking an infection caused by the *Toxoplasma gondii* parasite to suicide attempts. Michigan State University's Lena Brundin was one of the lead researchers on the team.

About 10-20 percent of people in the United States have *Toxoplasma gondii*, or *T. gondii*, in their bodies, but in most it was thought to lie dormant, said Brundin, an associate professor of experimental psychiatry in MSU's College of Human Medicine. In fact, it appears the parasite can cause inflammation over time, which produces harmful metabolites that can damage brain cells.

"Previous research has found signs of inflammation in the brains of suicide victims and people battling depression, and there also are previous reports linking *Toxoplasma gondii* to suicide attempts," she said. "In our study we found that if you are positive for the parasite, you are seven times more likely to attempt suicide."

The work by Brundin and colleagues is the first to measure scores on a suicide assessment scale from people infected with the parasite, some of whom had attempted suicide.

The results found those infected with *T. gondii* scored significantly higher on the scale, indicative of a more severe disease and greater risk for future suicide attempts. However, Brundin stresses the majority of those infected with the parasite will not attempt suicide: "Some individuals may for some reason be more susceptible to develop symptoms," she said.

Research: Cyberbullying only rarely the sole factor identified in teen suicides

Web address: <http://www.sciencedaily.com/releases/2012/10/121020162615.htm>

Cyberbullying -- the use of the Internet, phones or other technologies to repeatedly harass or mistreat peers -- is often linked with teen suicide in media reports. However, new research shows that the reality is more complex. Most teen suicide victims are bullied both online and in school, and many suicide victims also suffer from depression.

For the abstract, "Cyberbullying and Suicide: A Retrospective Analysis of 41 Cases," researchers searched the Internet for reports of youth suicides where cyberbullying was a reported factor. Information about demographics and the event itself were then collected through searches of online news media and social networks. Finally, descriptive statistics were used to assess the rate of pre-existing mental illness, the co-occurrence of other forms of bullying, and the characteristics of the electronic media associated with each suicide case.

The study identified 41 suicide cases (24 female, 17 male, ages 13 to 18) from the U.S., Canada, the United Kingdom and Australia. In the study, 24 percent of teens were the victims of homophobic bullying, including the 12 percent of teens identified as homosexual and another 12 percent of teens who were identified as heterosexual or of unknown sexual preference.

Seventy-eight percent of adolescents who committed suicide were bullied both at school and online, and only 17 percent were targeted online only. A mood disorder was reported in 32 percent of the teens, and depression symptoms in an additional 15 percent.

"Cyberbullying is a factor in some suicides, but almost always there are other factors such as mental illness or face-to-face bullying," said study author John C. LeBlanc, MD, MSc, FRCPC, FAAP. "Cyberbullying usually occurs in the context of regular bullying."

Cyberbullying occurred through various media, with Formspring and Facebook specifically mentioned in 21 cases. Text or video messaging was noted in 14 cases.

'Let's Talk Billings' a starting point for suicide prevention

Read more: http://billingsgazette.com/news/opinion/editorial/gazette-opinion/gazette-opinion-let-s-talk-billings-a-starting-point-for/article_fca812e7-e81f-587e-97b4-c1c13d91b674.html#ixzz2Zmps3HuQ

TAKEN FROM THE BILLINGS GAZETTE, JULY 7, 2013

If Montana is ever going to reduce the number of people killing themselves, the issue of suicide needs to receive more than lip service. Hand-wringing isn't going to cut it, either.

For more than three decades, suicide has ravaged Montana at a rate that leads the nation. Many of the victims are young, making suicide the second-leading cause of death for those between ages 10 and 24, behind unintentional injuries such as auto accidents and drownings.

In the two years between 2010 and 2011, at least 57 Montana youth aged 15 to 24 killed themselves.

It is a major public health problem. The barriers to candid discussions about suicide must come down.

There are some encouraging indications that those discussions are beginning to occur. The framework has been erected for an innovative, youth suicide prevention project in Billings.

To address the region's "cowboy up" culture, in which residents avoid addressing or dealing with mental-health issues, the campaign is branded, "Let's Talk Billings." The name is designed to get people talking about suicide and depression.

It's a significant starting point.

The goal is to heighten community awareness of depression and suicide among teens, and to provide tools and resources to teens, their friends, families and caregivers.

Current partners in the campaign are Global Health Equity Foundation and Montana State University Billings.

The Miles City-based foundation is a nonprofit organization founded in 2007 that addresses challenges faced by health and mental-health care providers in rural areas. The foundation serves as a catalyst for community awareness, communication and involvement.

The "Let's Talk Billings" campaign advisory panel includes prominent players in the mental-health arena, including representatives from Billings Clinic, RiverStone Health and the Billings chapter of the National Alliance on Mental Illness.

The Global Health Equity Foundation, in partnership with MSU Billings last year, created a similar innovative suicide-prevention program for teens that proved successful in Miles City. The hallmark of the project is that it allows young people to express themselves in a contemporary way.

The suicide prevention project employs a unique combination of performing arts, social media and community-based mental health services to help reach young people to discuss their challenges and emotions.

The peer-to-peer aspect of a play, combined with a Q&A, moderated by a high school counselor, has been a breakthrough in helping youth talk about depression and suicide in Miles City.

A core element of the Miles City campaign was creation of a website specifically for teens, with information about depression and suicide, and access to help at the local, regional and national levels. The website, www.LetsTalkMilesCity.com, provides support and mental-health tools and resources to teens, their families, health care providers and the community as a whole. A Facebook page serves as a companion to the website, an online gathering place for young people to discuss their feelings and help each other. Local counselors and members of the Local Advisory Council are "friends" on the page to provide advice as needed.

The Billings project will mirror the Miles City effort in many respects. It will include reaching out to select high schools and working with administrators, staff and counselors; identifying and engaging a theater director; getting teens involved in the theater workshops; researching local mental-health resources; designing and creating the Billings website; staging the play in high schools throughout Billings; and reaching out to American Indian youth, a group with an extremely high rate of suicide.

It is a concrete step that transcends lip service.





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Are there suicide prevention activities going on in your community that you want to share? Please let us know and we will include it in this newsletter. Send your information to Karl Rosston at krosston@mt.gov.



Healthy People. Healthy Communities.
Department of Public Health & Human Services

Need resources for your suicide prevention efforts? Start by visiting the Montana Suicide Prevention website for data, research articles, toolkits, handouts, and additional information. Go to www.prc.mt.gov/suicideprevention

Research: Lithium Reduces Risk of Suicide in People With Mood Disorders, Review Finds

Web address: <http://www.sciencedaily.com/releases/2013/06/130627190655.htm>

The drug lithium is an effective treatment for reducing the risk of suicide and possibly deliberate self harm in people with mood disorders, finds an evidence review published on bmj.com.

The authors say the drug "seems to reduce the risk of death and suicide by more than 60% compared with placebo" and suggest this review "reinforces lithium as an effective agent to reduce the risk of suicide in people with mood disorders."

Mood disorders are a leading cause of global disability. The two main types are unipolar disorder (often called clinical depression) and bipolar disorder (often called manic depression). Both are serious, long term conditions involving extreme mood swings, but people with bipolar depression also experience episodes of mania or hypomania.

People with a mood disorder have a 30 times greater risk of suicide than the general population. Treatment with mood stabilizing drugs like lithium, anticonvulsants or antipsychotics can help keep mood within normal limits, but their role in suicide prevention is still uncertain.

Lithium was more effective than placebo in reducing the number of suicides and deaths from any cause, but no clear benefits were seen for lithium compared with placebo in preventing deliberate self harm.

When lithium was compared with each active individual treatment, a statistically significant difference was found only with carbamazepine for deliberate self harm. Overall, lithium tended to be generally better than the other active treatments, with small statistical variation between the results.

Montana seeks to better understand why people complete suicide through formation of a suicide mortality review team.

In an effort to better understand Montana's high rate of suicide, Governor Bullock signed House Bill 583, which creates a suicide mortality review team. The suicide mortality review team is a statewide effort to identify factors associated with suicide in an effort to develop prevention strategies. The suicide mortality review team is composed of mental health, military, tribal, law enforcement, coroners, and other experts to review de-identified, suicide deaths. The purpose of the review team is to determine if a suicide was preventable and the factors associated with the suicide.

The prevention of suicide is both the policy of the state of Montana and a community responsibility. The suicidal death of a person can be viewed as a sentinel event that is a measure of a community's overall social and economic well-being and health. The suicide mortality review team process identifies critical community strengths and needs to understand the unique social, health and economic issues associated with suicide. The goal of the suicide mortality review team program is to reduce the inequalities that impact the number of deaths through local community and state collaboration.

The team will meet eight times a year to review pertinent health records of all adult suicides in Montana (youth suicides are currently reviewed by the Fetal, Infant, Child Mortality Review (FICMR) team). Information obtained from the review will be summarized and submitted to the Governor's Office.