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## **SUICIDE PREVENTION CONFERENCE EMPHASIZES ‘GRASS ROOTS’ EFFORT**

Community involvement to prevent suicide was the overall theme at this year’s Oklahoma Department of Mental Health and Substance Abuse Services annual Suicide Prevention Conference, held July 29 in Tulsa.

There are many factors that contribute to the problem of suicide in Oklahoma, said Julie Geddes, suicide prevention specialist at ODMHSAS. “Every community in Oklahoma is different and faces specific challenges. Grass roots efforts at the community level are the key to establishing a successful suicide prevention program. We encourage communities across the state to consider building a program for suicide prevention, whether the emphasis is on reducing stigma, bringing awareness or highlighting referral sources, because one life lost to suicide is one too many.”

In addition to hearing from a number of nationally recognized suicide prevention speakers, several conference participants also were “trained” in ODMHSAS’s “Community Suicide Prevention Toolkit,” which provides guidance on facilitating a community strategy planning process. Others spoke about how their communities have used the toolkit to make their communities “suicide safer.”

Workshop sessions also featured suicide prevention presentations by the Department of Veterans Affairs; The Cherokee Nation; medical facilities, including primary care clinics and emergency room departments; and public school educators.

A recent report from the Oklahoma State Department of Health notes that suicide was the most prevalent type of violent death in Oklahoma from 2004-2008, accounting for 2,637 deaths, or an average of 527 deaths per year.

The “Summary of Violent Deaths in Oklahoma, Oklahoma Violent Death Reporting System, 2004-2008,” also cited the following:

- From 2004-2008, Oklahoma’s rate of suicide increased by 13 percent.
- The youngest person to die by suicide was 12 years of age and the oldest person was 101.
- Seventy-eight percent of suicide victims were male and 22 percent were female.
- In 64 of the suicide deaths, victims killed at least one other person before taking their own lives, resulting in 79 homicides.
- Males 75 years and older had the highest suicide rate among all ages. Among females, women 35-54 years were at greatest risk for suicide.
- A substantial number of suicides were associated with a current depressed mood, intimate partner problem, mental health problem, or physical health problem.
- A positive blood alcohol test was documented for 793 persons (30 percent of persons tested), and a positive drug test was documented for 500 persons (86 percent of persons tested) who died by suicide.
- Almost one in five suicide victims had a history of suicide attempts, and 31 percent had stated their intent or expressed suicidal feelings to another person.
- Twenty-three percent of suicide victims had served in the U.S. Armed Forces.

“Suicide is a preventable tragedy,” Geddes added. “Whether a person is struggling with a mental illness or addiction, or has become seriously depressed due to a job loss or financial difficulties, suicide should never be an option. There are ways to help people out of a situation in which they may believe there is no way out. Talk to someone. There is help.”

The toll-free national suicide hotline is 1-800-273-TALK (8255). Many Oklahomans may also receive information and assistance by calling 211.

The Community Suicide Prevention Toolkit can be accessed online at <http://www.ok.gov/odmhsas/documents/Suicide%20Prevention%20Web.pdf>. Or, for more information about ODMHSAS suicide prevention programs, call Geddes at 405-522-3835.

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