



American Indian and Alaska Native Hope for Life (Suicide Prevention Awareness) Day

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National Council of Urban Indian Health (NCUIH)

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Funding Acknowledgement



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Learning Objectives

- Understand how the AI/AN Hope for Life Day toolkit supports changing the conversation around suicide prevention in Native and Tribal communities.
- Learn about communication and community engagement strategies used on AI/AN Hope for Life Day.
- Exchange ideas for hosting cultural activities and events for AI/AN Hope for Life Day in Native and tribal communities



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National Council of Urban Indian Health (NCUIH)

- NCUIH is a nonprofit, membership based organization that represents the healthcare interests of urban Indian health programs (UIHPs).
- Founded in 1998, NCUIH seeks through education, training and advocacy, to meet the unique needs of the urban Indian population.
- Our programs are often the main source of health care and health information for urban Indian communities. In this role they have achieved extraordinary results, despite the great challenges they face.



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Region I

- Baltimore, MD
- Boston, MA
- New York City, NY

Region II

- Chicago, IL
- Detroit, MI
- Milwaukee, WI
- Minneapolis, MN
- (Green Bay)

Region III

- Omaha, NE
- Pierre, SD

Region IV

- Billings, MT
- Butte, MT
- Great Falls, MT
- Helena, MT
- Missoula, MT

Region VI

- Bakersfield, CA
- Fresno, CA
- Los Angeles, CA
- Oakland, CA
- Manteca, CA
- Sacramento, CA
- San Diego, CA
- San Francisco, CA
- San Jose, CA
- Santa Barbara, CA

Region V

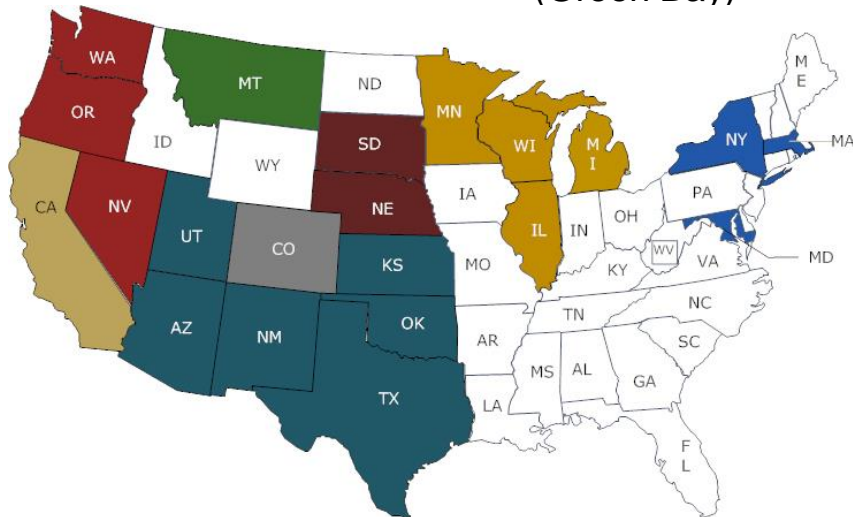
- Portland, OR
- Reno, NV
- Seattle, WA
- Spokane, WA

Region VII

- Albuquerque, NM
- Dallas, TX
- Flagstaff, AZ
- Phoenix, AZ
- Salt Lake City, UT
- Tucson, AZ
- Wichita, KS
- Tulsa, OK
- Oklahoma City, OK

Region VIII

- Denver, CO



List of Member UIHPs



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NCUIH Suicide & Substance Abuse Prevention Initiative (MSPI) Roles

Provides Technical Assistance support to the 10 Urban MSPI Grantees:

- Collecting and Disseminating Information relevant to methamphetamine and suicide prevention, treatment, or recovery support.
- Developing Resources Tools for MSPI including the development and implementation of a National Social Marketing Campaign on Meth/Suicide Prevention
- One-on-One Individualized Technical Assistance Support to 10 grantees which includes direct consultation, coordination of national experts, and linking to other communities who are experts from experience

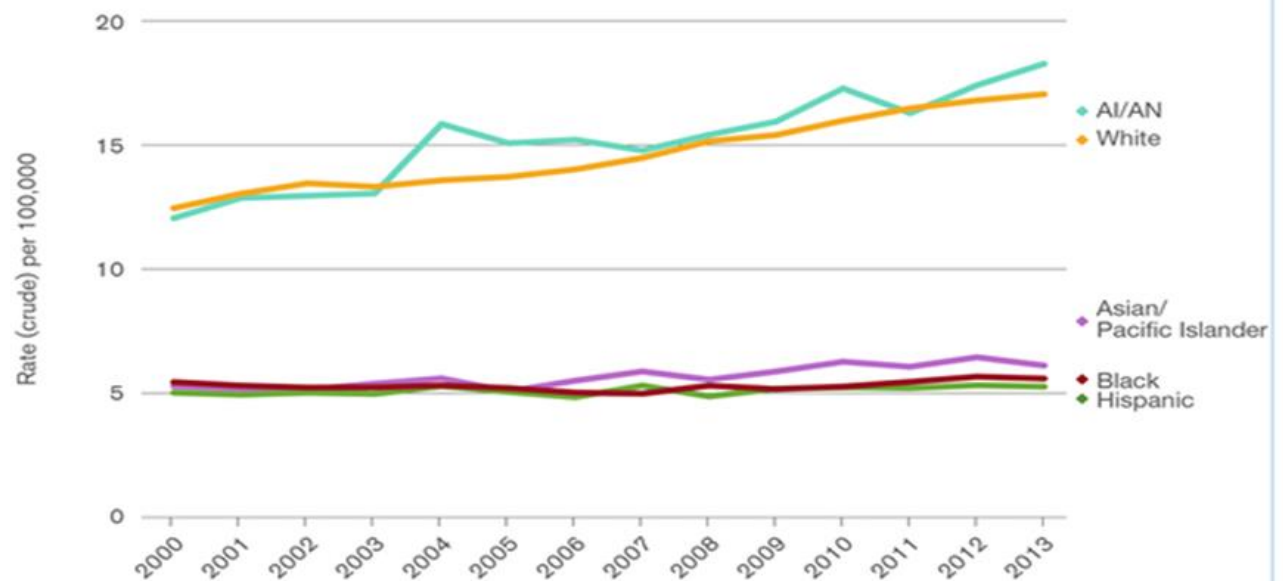


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Suicide among American Indians and Alaska Natives

Suicide impacts AI/AN communities at a greater rate than the overall U.S. population (16.93 vs 12.08 per 100,000) (3)

Rate of Suicide by Race/Ethnicity, United States
2000–2013



Source: WISQARS Fatal Injury Reports, 1999–2013



Suicide among American Indians and Alaska Natives

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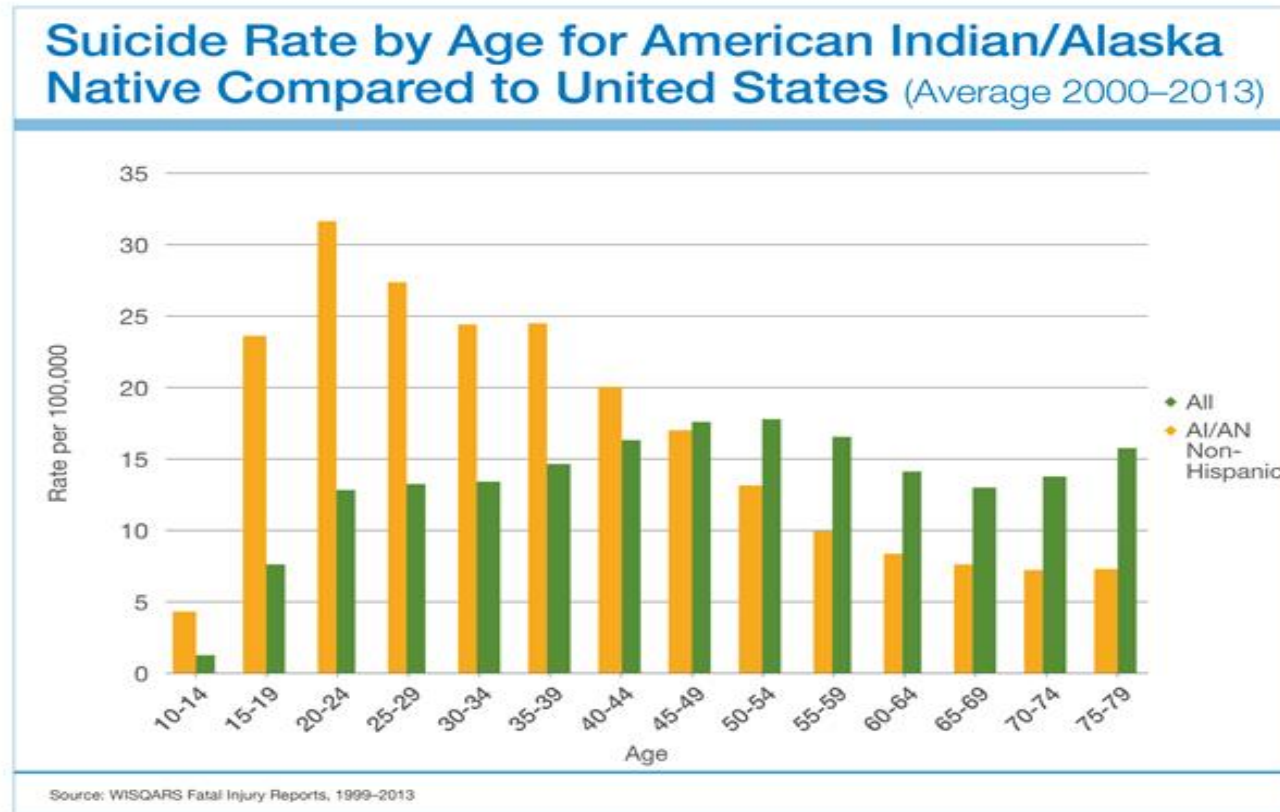
AI/AN youth, ages 10-24, are especially at risk for suicide compared to the overall AI/AN population (2nd vs 8th leading cause of death)

- Suicide generally decreases with age among AI/AN which is in contrast to the overall U.S. population
- Suicide has had a greater impact in recent years on AI/AN adults age 35 – 64



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Suicide among American Indians and Alaska Natives



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Risk Factors for Suicide

Risk Factors (Across Populations)

- Prior suicide attempt(s)
- Alcohol and drug abuse
- Mood and anxiety disorders
- Access to lethal means

Risk Factors (Specific to AI/AN Populations)

- Alcohol and drug use
- Historical trauma
- Alienation
- Acculturation
- Discrimination
- Community violence
- Mental health services access and use
- Suicide contagion



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Strengthening Protective Factors vs. Reducing Risk Factors

Protective Factors (Across all Populations) **Protective Factors for AI/AN Populations**

- Effective mental health care
- Connectedness to individuals, family, community, and social institutions
- Problem-solving skills
- Contacts with caregivers

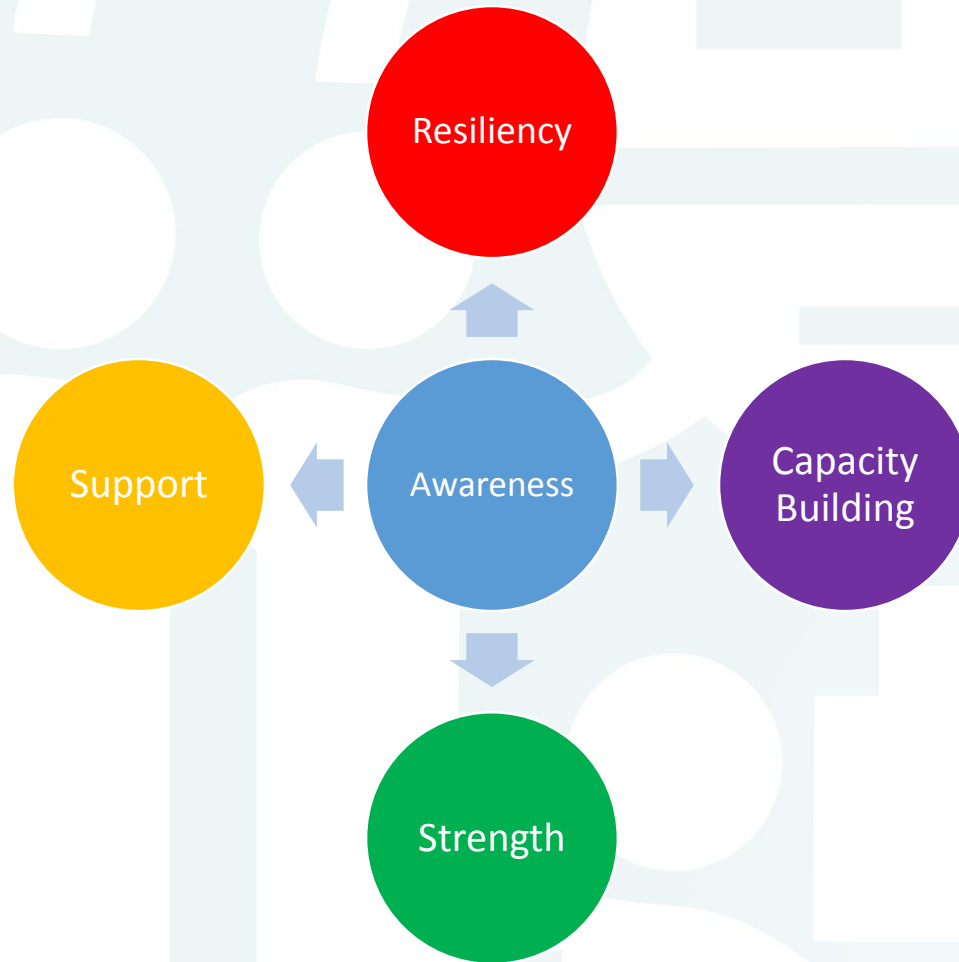
- Community control
- Cultural identification
- Spirituality
- Family connectedness



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Purpose

- Support
- Awareness
- Resiliency
- Capacity Building
- Strengthening



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Partners in Action



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Timeline of Activities

AI/AN Hope for Life Day (Suicide Prevention Awareness Day)
Resolution (June 2015)

- Submitted to NCAI Health Subcommittee and Human Resources Committee
- Passed by NCAI President as a Presidential Proclamation at NCAI Mid-year conference to 'declare an annual national American Indian And Alaska Native "Hope for Life" Day to be held each September



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NCAI Resolution



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NATIONAL CONGRESS OF AMERICAN INDIANS

The National Congress of American Indians Resolution #MSP-15-011

TITLE: Creating an Annual National American Indian and Alaska Native Hope for Life Day (Suicide Prevention Awareness Day)

WHEREAS, we, the members of the National Congress of American Indians of the United States, invoking the divine blessing of the Creator upon our efforts and purposes, in order to preserve for ourselves and our descendants the inherent sovereign rights of our Indian nations, rights secured under Indian treaties and agreements with the United States, and all other rights and benefits to which we are entitled under the laws and Constitution of the United States, to enlighten the public toward a better understanding of the Indian people, to preserve Indian cultural values, and otherwise promote the health, safety and welfare of the Indian people, do hereby establish and submit the following resolution; and

WHEREAS, the National Congress of American Indians (NCAI) was established in 1944 and is the oldest and largest national organization of American Indian and Alaska Native tribal governments; and

WHEREAS, Native communities experience higher rates of suicide compared to all other racial and ethnic groups in the United States of America, with suicide being the 8th leading cause of death for American Indians and Alaska Natives across all ages; and

WHEREAS, for Native youth ages 10 to 24, suicide is the second leading cause of death; and the Native youth suicide rate is 2.5 times higher than the overall national average, making these rates the highest across all ethnic and racial groups; and

WHEREAS, NCAI recognizes that historical disenfranchisement through genocide and institutional racism has resulted in American Indians and Alaska Natives experiencing poorer health and socioeconomic outcomes; these social determinants of health intersect to create a situation in which the general and mental health of Indian communities needlessly suffer; and

WHEREAS, the aforementioned histories of trauma have resulted in increased risk factors for suicide such as cultural disconnection, alienation, and pressure to assimilate, which all contribute to higher rates of suicide among American Indians and Alaska Natives; and

WHEREAS, it is imperative that we address suicide in Indian Country especially now as clusters of suicide are devastating our communities, as we are currently witnessing in several communities in Indian Country; and



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Toolkit Introduction

Hope For Life Day Toolkit coincides with Word Suicide Prevention Day on September 10th and National Suicide Prevention month annually

To help community organizers take specific steps to change the conversation around suicide, initiate action for awareness, and foster hope in the effort to reduce or eliminate suicide in their community.



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Characteristics of Effective Health Communication Campaigns

Define the communication campaign goal effectively

Define the intended audience effectively

Create messages effectively

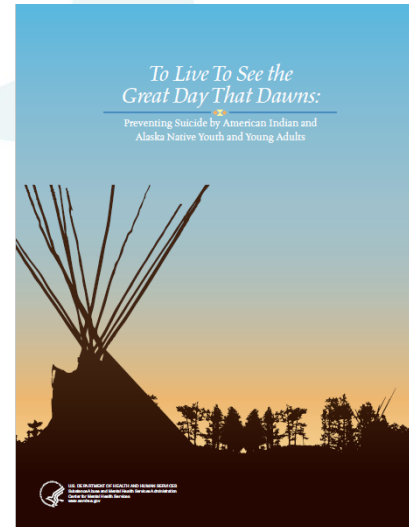
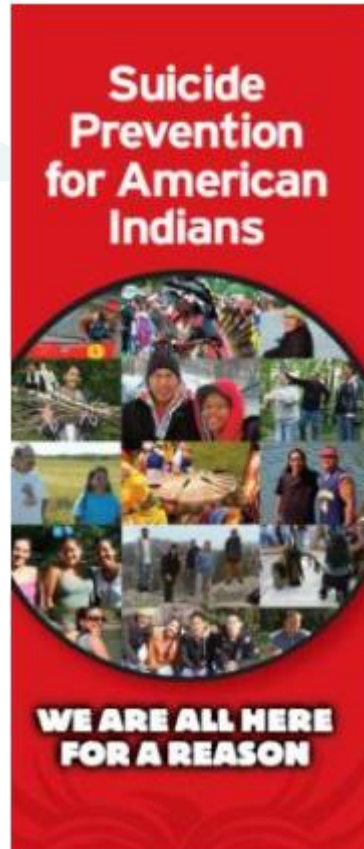
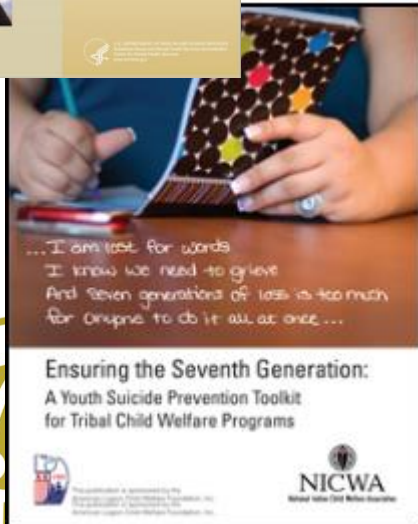
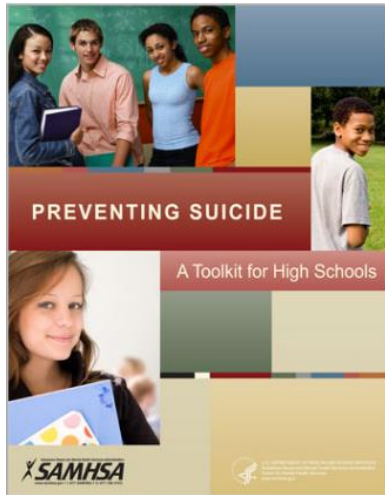
Pretest and revise messages and materials effectively

Implement the campaign effectively



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No Duplication



YELLOW RIBBON
SUICIDE PREVENTION PROGRAM
www.yellowribbon.org



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Communication alone can:

- Increase the intended audience's knowledge and awareness of a health issue, problem, or solution
- Influence perceptions, beliefs, and attitudes that may change social norms
- Prompt action
- Demonstrate or illustrate healthy skills
- Reinforce knowledge, attitudes, or behavior
- Show the benefit of behavior change
- Advocate a position on a health issue or policy
- Increase demand or support for health services
- Refute myths and misconceptions
- Strengthen organizational relationships



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Toolkit Purpose

To help community organizers take specific steps to change the conversation around suicide, initiate action for awareness, and foster hope in the effort to reduce or eliminate suicide in their community.

Background: will provide links to existing resources and information on risk factors and warning signs

Audience: Professionals and grass-roots organizers working in AI/AN communities *(Healthcare providers, school counselors, law enforcement)*



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Toolkit Introduction

Roadmap created to focus on:

- Background
- Communication and Community Engagement Strategies
- Promotional Materials
- Prevention Day Activities
- Resources



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Engagement Strategies

Engaging Leadership

Tips for Urban Indian Organizations

Engaging Native Youth

Promotional Materials

Cultural Activities

Resources



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Engaging Leadership

Gain Support from Tribal Leaders

Preparation Tips:

- Create packets of information to leave
- Personalize the issue- impact

Meeting advice:

- Pose a clear 'ask'
- Invite someone to share firsthand experiences

Follow-up:

- Be proactive
- Keep communication lines open

Included sample letters for use:

- [Tribal Leader Invite Template](#)
- [Resolution Request Template](#)
- [Tribal Resolution Template](#)



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Engaging Urban Indian Organizations

- Outreach to Local Elected Officials and Community Leaders
- 6 Step process
- Sample tools for use:
 - [Sample Invite for Organizers](#)
 - [Sample Proclamation](#)
 - [Sample Press Release](#)



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Engaging Native Youth

- Critical component to success
- Ensure the inclusion and input of ALL community members
 - Community and Youth Advisory Boards
 - Youth Councils/Committees
- Partner for support networks
- Incentives/ Prizes 😊
- Leadership building
- Activities
- Online Presence



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Media, Promotional Materials, Resources

Link to AAS Suicide & Awareness Day Toolkit

<http://www.suicidology.org/>

<http://www.survivorday.org/wp-content/uploads/2015/03/3-27-Step-by-Step-Organizer-Guide.pdf>

Link to AFSP

<http://www.afsp.org/>

Link to SPRC

<http://www.sprc.org/>



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National Suicide Prevention Lifeline



If you or someone you know is in a crisis situation, call:

Native Youth Crisis Hotline 1-877-209-1266



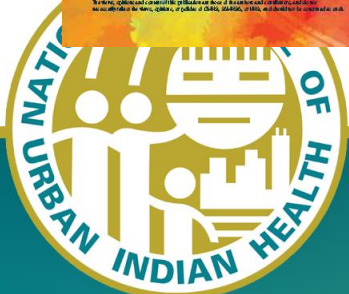
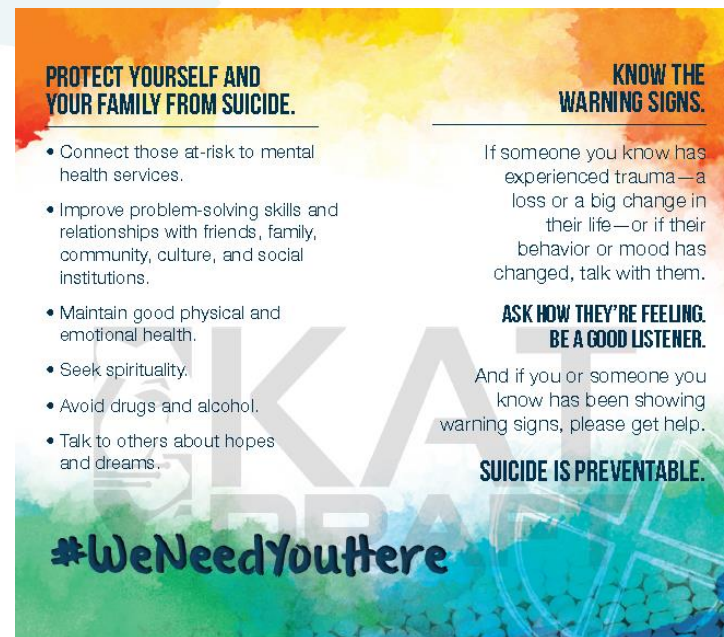
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Media, Promotional Materials, Resources

The Northwest Portland Area Indian Health Board (NPAIHB) resources

FACT SHEETS, POSTERS, RACK CARD, & TIP CARDS

- http://www.npaihb.org/epicenter/project/mspi_prevention_media_resources



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AI/AN Hope for Life Day toolkit launched in August 2015 on
the Action Alliance website



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The Public-Private Partnership Advancing the National Strategy for Suicide Prevention

ABOUT US

LEADERSHIP

NATIONAL STRATEGY

PRIORITIES

ADVISORY GROUPS/TASK FORCES

RESOURCES

MEDIA

Hope for Life Day

The National Action Alliance for Suicide Prevention (Action Alliance) is the public-private partnership working to advance the National Strategy for Suicide Prevention and make suicide prevention a national priority. The Substance Abuse and Mental Health Services Administration, through the Education Development Center, Inc. (EDC) operates the Secretariat for the Action Alliance, which was launched in 2010 by former U.S. Health and Human Services Secretary Kathleen Sebelius and former U.S. Defense Secretary Robert Gates with the goal of saving 20,000 lives in five years.



On September 10, 2012, the Action Alliance, along with the U.S. Surgeon General, Dr. Regina Benjamin, released the revised *National Strategy for Suicide Prevention* (NSSP). The revised strategy emphasizes the role every American can play in protecting their friends, family members, and colleagues from suicide. It also provides guidance for schools, businesses, health systems, clinicians and many other sectors that takes into account nearly a decade of research and other advancements in the field since the last strategy was published.

The Action Alliance periodically identifies priorities that, when accomplished, will help reach its goal of saving 20,000 lives in the next five years. The priorities are chosen because of their potential to produce the systems-level change necessary to substantially lower the burden of suicide in our nation. Learn more about the current priorities by visiting: <http://actionallianceforsuicideprevention.org/priorities>

The Action Alliance is comprised of various task forces. Task forces are time limited work groups advancing the

Search this site:

Search



If you or someone you know is in crisis, please call 1-800-273-TALK (8255).

Support
the
Action
Alliance

Learn more about the partners who have supported our work and how you can help.

[Hope for Life Day Home](#)



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Outcomes...Success??

Social Media (Facebook and Twitter) was the greatest contributor

- Links to Toolkit reached nearly 480 people
- #WeNeedYouHere campaign trended
- Other relevant hashtags were: #MyLifeMatters, #IWillLive
- Youth shared messages of hope

Suicide Prevention Walks – “Walk in Memory-Walk for Hope”

Community Moment of Silence to honor those lost to suicide



Media release – NativeNewsOnline.net

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Barriers and Challenges

Timing is everything!

Communication is Key!

Difficult to track activities



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How Can You Participate?

If you participated, what types of events or activities did you engage in?

What activities could you initiate in your community or on a larger level?

What more would you need to continue this movement?

Next Steps for continued momentum?



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Next Steps...?

Submitted a request for a U.S. Presidential Proclamation for the Hope for Life Day

Refine and evaluate toolkit

New messaging and communication outreach

Education and Expansion

Outreach/Garnering Community Support: Start a letter-writing campaign to senators and elected officials



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Suicide and Substance Abuse Initiative (MSPI) Program Officers

**Ais Murray, MD, MHA
Steven D. Whitehorn**

**Public Health Advisors
Division of Behavioral Health
Office of Clinical & Preventive Services
Indian Health Service
Email: steven.whitehorn@ihs.gov**



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Suicide and Substance Abuse /MSPI Community Partners

**National Council of Urban
Indian Health**



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**National Indian Health
Board**

**National Indian
Health Board**



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Thank You!



Kimberly Fowler, PhD, *Director*

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Issues and Challenges: for Urban American Indians/Alaska Natives

Historical Trauma

Mental Health Disparities

Access to Care

- Lack of licensed providers

Perspectives on Mental Health Issues

- Western approaches to medicine
- Stigma around Mental Health



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Barriers and Challenges

Timing is everything! (disseminate information earlier, gather supporters, adopters)

Communication is Key! (Sharing and Tagging is needed but time consuming)

Difficult to track activities



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