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## Division of Public and Behavioral Health NEWS RELEASE

## Nevada's Office of Suicide Prevention Sees Nevada's Suicide Rate Continue to Stabilize, Yet Rising Youth Rates Cause for Concern

*Carson City* – According to the American Association of Suicidology 2017 Final Data, Nevada currently has the 11<sup>th</sup> highest rate in the nation. Suicide is a leading cause of death in the US. Suicide rates increased in nearly every state from 1999 through 2016, where only Nevada's suicide rate decreased by 1%. Preliminary 2018 data from the Nevada Electronic Death Registry System shows rates across almost all age groups held steady or even decreased, though of concern, was a sharp rise in the suicide rate for youth under 18 years of age, where Clark County experienced a 90% increase in suicide death between 2017 (10 deaths) and 2018 (19 deaths). Youth rates for the remaining counties increased 60%, from 5 deaths in 2017 to 8 deaths in 2018. This trend is occurring nationally for youth as well. Suicide is the second leading cause of death among Nevada youth aged 10-24 years. Suicide is complex and youth can experience multiple risk and protective factors. There is rarely one single event, behavior, or risk factor that can explain this increase, though state child fatality review teams and the Committee to Review Suicide Fatalities seek to find trends and areas for improved communication and prevention across systems. The Centers for Disease Control and Prevention (CDC) recommends the following:

- Increase access to evidence-based mental health care for youth
- Strengthen family relationships
- Promote connectedness within the home, peer, school, and community environments
- Identify and provide support to youth at risk of suicidal behaviors
- Prevent other forms of violence among youth
- Reduce access to lethal means
- Teach coping and problem solving skills
- Consider comprehensive and coordinated suicide prevention programs that address multiple risk and protective factors simultaneously
- Conduct ongoing comprehensive evaluation of suicide prevention programs



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Nevada's response to this rise in youth rates includes multiple efforts from the Office of Suicide Prevention (OSP), the Nevada Department of Education (NDE) and the Division of Public Safety (DPS) along with many community partners. Actions include applying for a second round of funding for Project Aware, focused on Clark County students; Project Aware has implemented strategies to increase the ability for schools to be safe and respectful, all students to have social, emotional and mental health, and all students to have seamless access to mental health support when it is needed. The strongest part of this initiative is working with an integrated and comprehensive multi-tiered system of support (MTSS) that enables individuals, families, communities, schools, emergency services and health care systems to talk about mental health and suicide. MTSS ensures appropriate intervention and follow up. NDE and DPS oversee the statewide SafeVoice program. SafeVoice is a very successful and effective anonymous bystander reporting program where any concerned individual can make a report by phone, on the computer or via the mobile application when they fear for their safety or the safety of others, in schools or in communities. Multiple children's lives across Nevada have been saved because someone was concerned about them and had the courage to speak up and report that information to SafeVoice. To date, SafeVoice has received over 7,383 tips. Other efforts include addressing recommendations from the School Safety Task Force report, sustaining social workers in schools and attaining Medicaid dollars for school-based behavioral health services.

Suicide is a preventable public health issue, but once we can recognize the signs when someone is experiencing a mental health crisis or thoughts of suicide, we can connect them to resources for help. With connection and help comes hope.

Warning Signs of Suicide	What To Do
<ul> <li>Talking about wanting to die</li> </ul>	
<ul> <li>Looking for a way to kill oneself</li> </ul>	If someone you know exhibits warning signs of suicide:
<ul> <li>Talking about feeling hopeless or having no purpose</li> </ul>	<ul> <li>Do not leave the person alone</li> </ul>
<ul> <li>Talking about feeling trapped or in unbearable pain</li> </ul>	<ul> <li>Remove any firearms, alcohol, drugs or sharp objects</li> </ul>
<ul> <li>Talking about being a burden to others</li> </ul>	that could be used in a suicide attempt
<ul> <li>Increasing the use of alcohol or drugs</li> </ul>	<ul> <li>Call the U.S. National Suicide Prevention</li> </ul>
<ul> <li>Acting anxious, agitated or recklessly</li> </ul>	Lifeline at 800-273-TALK (8255)
<ul> <li>Sleeping too little or too much</li> </ul>	<ul> <li>Text, call or message SafeVoice at</li> </ul>
<ul> <li>Withdrawing or feeling isolated</li> </ul>	http://safevoicenv.org/
<ul> <li>Showing rage or talking about seeking revenge</li> </ul>	<ul> <li>Call the U.S. National Suicide Prevention</li> </ul>
<ul> <li>Displaying extreme mood swings</li> </ul>	Lifeline at 800-273-TALK (8255)
	<ul> <li>Take the person to an emergency room or seek help</li> </ul>
The more of these signs a person shows, the greater the	from a medical or mental health professional
risk. Warning signs are associated with suicide but may not	
be what causes a suicide.	

You can find more information on safe messaging for reporting on suicide at <a href="http://reportingonsuicide.org/">http://reportingonsuicide.org/</a>

For more information about OSP go to <u>http://suicideprevention.nv.gov/</u>. SafeVoice: Call:1-833-216-SAFE (7233) or go to safevoice.org