



# Alaska Suicide Surveillance Model



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# What is it?

## A Surveillance Model is...

Public health surveillance is the continuous, systematic collection, analysis and interpretation of health-related data needed for the planning, implementation, and evaluation of public health practice. Such surveillance can...

- a) serve as an early warning system for impending public health emergencies;
- b) document the impact of an intervention, or track progress towards specified goals; and
- c) monitor and clarify the epidemiology of health problems, to allow priorities to be set and to inform public health policy and strategies.

*World Health Organization*

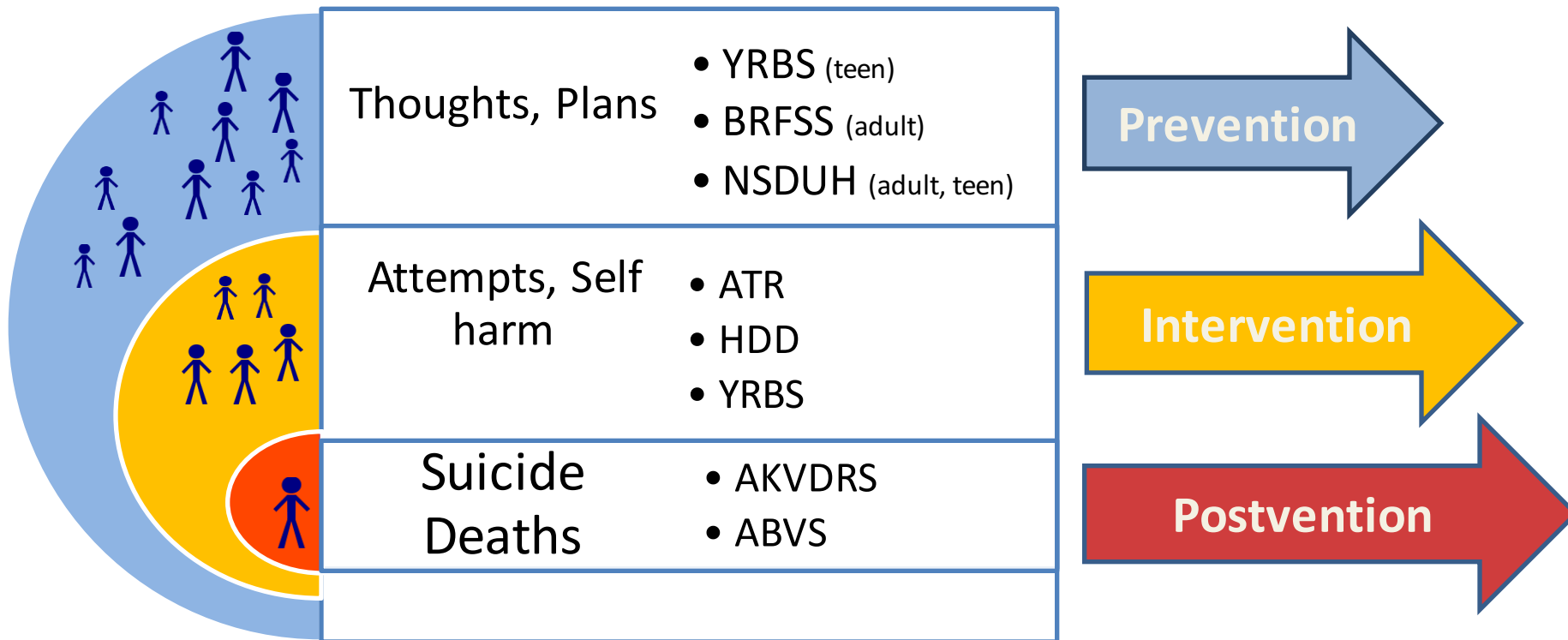


What's in a number?

200



# Alaska Suicide Surveillance Model



YRBS: Youth Risk Behavior Survey  
BRFSS: Behavioral Risk Factor Surveillance Survey  
NSDUH: National Survey on Drug Use and Health  
ATR: Alaska Trauma Registry  
HDD: Hospital Discharge Data  
AKVDRS: Alaska Violent Death Reporting System  
ABVS: Alaska Bureau Vital Statistics



# Who



## Prevention

Schools, Church/Clergy, Community centers,  
Tribal entities, Senior care services, Coalitions,  
Social services, Teen centers, Media entities



## Intervention

Hospitals / ER, Medical centers, Health clinics,  
Community Mental Health Centers, Primary  
Care, Schools



## Postvention

Medical examiner office, Law enforcement,  
Troopers, Church/clergy , Crisis response teams  
School crisis teams, Mental health centers,  
Mortuary



# Prevention

## Questions

- **Who or which groups pose greater risk factors for suicide thoughts, actions or behaviors?**
- **Which regions or communities?**
- **What services are available?**
- **What gaps exist in access to resources, transportation, types of services offered and availability?**

## Solutions

- **Direct community-based resources to those groups most at risk.**
- **Employ screening among schools, health centers and other primary care locations.**
- **Means restriction campaign, firearms safety.**
- **Disseminate resource information, Careline and gatekeeper training.**
- **Create opportunities for community gatherings to celebrate, strength, hope, and culture.**
- **Employ safe messaging, radio, social media, blogs, Facebook and text.**



## Questions

- **How many individuals are being admitted for treatment of suicide?**
- **How many individuals are being seen and return to the hospital ER/ED experience suicidality?**
- **How many individuals/ER are following up on recommended care?**
- **What means and method are most commonly being used in suicide attempts?**

## Solutions

- **Employ Zero Suicide approach to better optimizes health services for the care of suicidal individuals using integrated care model.**
- **Improve training and protocols for suicide risk screening, assessment and follow up, interval care (e.g., 8-12 weeks) .**
- **Reducing access to means, suicide proof homes (i.e., CALM) in safety planning with family and caregivers.**



# Postvention

## Questions

- **Who or which groups pose greater risk for suicide deaths?**
- **What means and method are most commonly being used in suicide deaths?**
- **How often and which types of substances are used prior to at the time of suicide death?**
- **Which and how many suicides appear to have contagion or “copy cat”?**

## Solutions

- **Employ surveillance, training, coordination among postvention team response efforts.**
- **Increase safe homes & spaces for community support, grieving, and someone to talk to.**
- **Increase early substance abuse services.**
- **Increase safe messaging to promote healing and help seeking among others who may be at risk.**
- **Monitor hours, days and weeks post suicide for coordinating short, mid and long term support.**





## In summary the model will...

- Allows real time access to data that can be targeted toward systemic interventions at the state, regional and local level.
- Identify gaps in, suicide prevention protocols, policy, services and resources.
- Provides state planners, policy makers, health system providers, and prevention specialists and community groups information necessary to direct resources when and where needed.