



Alaska Division of Behavioral Health Report to SSPC

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Below is a summary of suicide prevention projects, programs and services that the DBH, Prevention and Early Intervention Services are coordinating throughout the state.

Comprehensive Behavioral Health Prevention Grants

“A coalition led, data driven process to achieve desired results!”

The Division of Behavioral Health has recently completed executing all of the prevention FY 2016 grant awards¹. There have been some delays as the state is transition to the new IRIS systems; however at the time of this report, most all payments and advances have been made in the system.

Community coalitions and grantees are preparing for the FY2016 Annual DBH Prevention All Grantee Meeting September 29 – October 1st in Anchorage. This three-day event will be all about prevention in Alaska communities, more specifically, about ***Community Capacity: A Foundation for Change.***

Over the last year of this grant cycle, prevention coalitions have greatly enhanced their capacity, developing relationships and mobilizing partners to conduct a community assessment. With this in mind, the focus of the meeting will be on coalition development and strategic planning. Further, we will explore how to grow capacity to create sustainable, positive change of behavioral health conditions that are impacting our communities.

Garrett Lee Smith, Alaska Youth Suicide Prevention Project SAMHSA grant

The DBH proposal for the SAMHSA Youth Suicide Prevention Grant was denied. The state/tribe sponsored, youth suicide prevention grant project would have awarded \$736,000 per year for 5 years. Although DBH was not awarded, the proposal was written in the spirit of the *Zero Suicide* effort promoted by the National Action Alliance for Suicide Prevention to make suicide prevention

¹ Total funding awarded by DBH to Comprehensive Behavioral Health Prevention Grantees in FY2015 equals \$3,594,170. List of individual grantee funding amounts and coalition contact information available upon request.

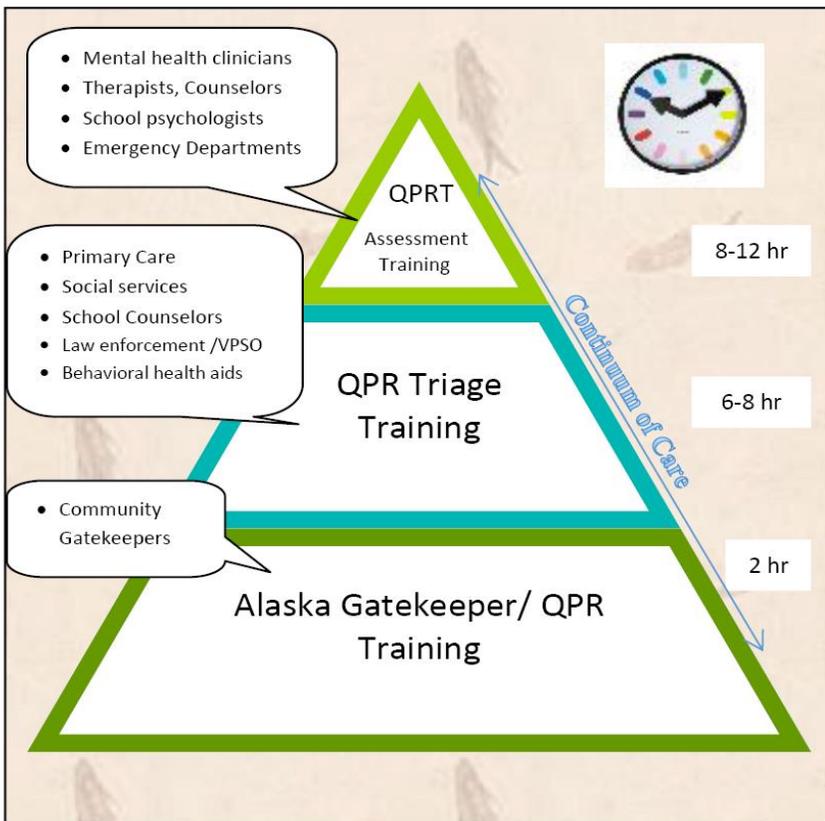
a core priority among Alaska’s health care systems. We hope to resubmit our proposal next year if the federal funding continues to be available.

Future Federal Funding Impact

Loss of federal funding will begin in FY17 unless other funding resources are identified or supplanted. Impacts will include contracts listed below (*no DBH direct grant funding was included in the AKYSPP project*).

- A reduction in Careline funding \$50,000 per year.
- Loss of contract with UAA Center for Human Development and the Alaska Gatekeeper Training Academy \$215,000 per year.
- Loss of “You Are Not Alone” high school initiative \$40,000.
- Reduction of Careline materials supplies and other media and promotional activity \$25,000 per year.
- Loss of project evaluation contract \$60,000 per year.

DBH will however continue the Alaska Youth Suicide Prevention Project (AKYSPP) as part of a “no-cost extension” to expend the rest of the federal project funding in order to complete activities of the project until April 30th, 2016.



A multi-tiered effort is recommended to help bridge the gap between formal and informal suicide prevention strategies that can support youth and the services that provide both short term as well as long term treatment solutions that are developmentally appropriate, culturally responsive and most importantly; sustainable.

In order to reduce suicide in Alaska, expanding trainings to include QPRT Assessment and QPR Triage Training will be needed so all levels of the community system are prepared to identify, support, and ensure appropriate care for individuals at risk for suicide.

However, trainings alone are not enough. Suicide prevention has to be a core priority among organizations and health systems. “Zero Suicide” for example, is an aspirational goal to optimize health care systems in the strongest position to prevent suicide. That requires a highly attuned system of care, or “safety net,” to suicide risk that includes a thorough examination of health care policy, systems, and environments in which conditions and circumstances can influence the risk of suicide. Although simply changing policies and systems is far from eliminating suicide, it would be difficult, if not impossible, to expect a change in our health care practices without it. For Alaska to reach the “Zero Suicide” goal, it will be necessary for Alaska to make suicide prevention a core priority in all areas of health care.

Future Goals

- Increase collaborative networks establishing awareness of suicide risk in Alaska youth
- Shift Training Resource (Gatekeeper Trainings) to TARGETED Gatekeeper Training Health Care System Providers across Alaska: Public Health Nurses, Primary Care Providers, Behavioral Health Aides.
- Increase help-seeking behavior in youth / expand treatment network capable of meeting demand.

Project Evaluation FY 2013-2015.

The AKYSPP grant project evaluation has been completed by the Center for Behavioral Health Research Services awaiting delivery to DBH (*copies of final report upon request*). The evaluation is primarily focused on the 2 hour, Alaska Gatekeeper QPR (Question, Persuade, Refer) Training Model.

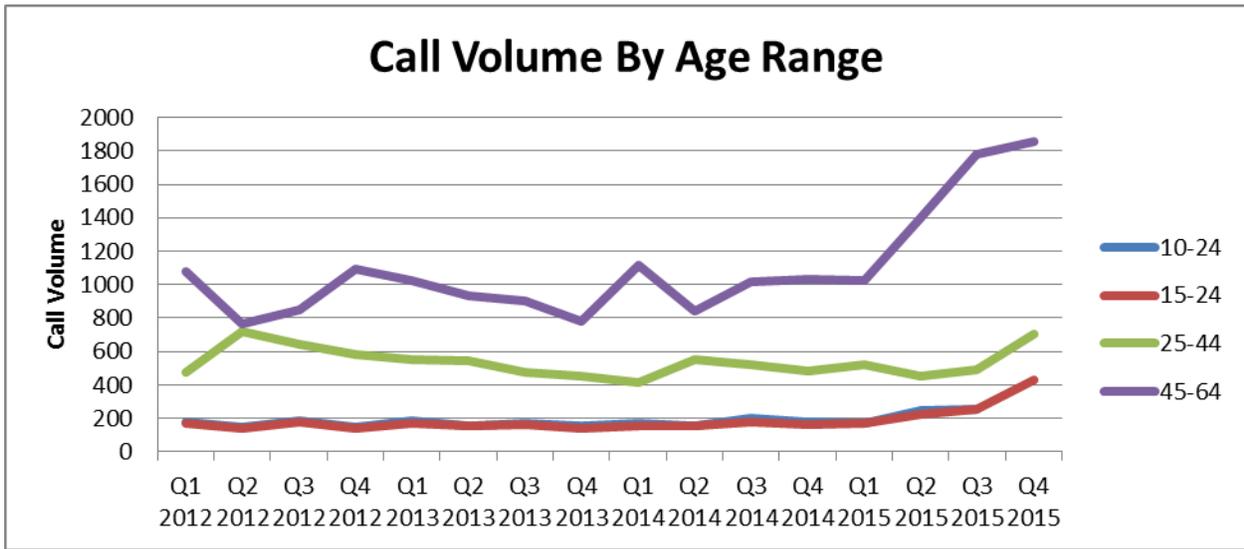
Alaska Careline: Interior Center for Non-Violent Living

Text Service Update:

Alaska Careline will no longer need to discontinue text line “4help” to 839863. The service has been reinstated due to advocacy of several other states that are using the service as well as support from the National Lifeline. Plans to transition to the seven digit, 266-4357 (the actual phone number of Careline) is under way for future use of the Careline text platform to better streamline the text capability. This is anticipated to be phased in over time so there will be no disruption to services.

Alaska Careline Call and Text Data (as of June 30, 2015)

Total call volume by quarter and age range.



Alaska Postvention Project



Summary of Activities:

No activities or projects to report on this quarter.