

Erasing the Stigma

As Suicide Rates Continue to Rise, Hoosier Hospitals Focus on Intervention and Prevention

Recent high-profile deaths by suicide have shocked the nation. But they haven't shocked health care professionals, who know that suicide is a growing public health threat in the U.S.

According to the Centers for Disease Control and Prevention, suicide is one of three causes of death on the rise, along with drug overdoses and Alzheimer's disease. In Indiana, the suicide rate soared 31.9 percent between 1999 and 2016. Today, one Hoosier dies every nine hours from suicide.

Despite these grim statistics, the topic remains largely ignored.

"There's still a stigma attached to suicide," says Jean Scallon, FACHE, vice president of network development at Springstone, which operates behavioral health facilities in several states, including Indiana. "The focus remains on other issues. A recent article in The New York Times pointed out that the National Institutes of Health spent more money for research on dietary supplements last year than on suicide."

Across Indiana, Hoosier hospitals are determined to address the state's rising suicide rate. From training their own staff on the signs and symptoms of suicidal behavior to dispelling suicide myths among the general public, hospitals are striving to bring the issue to the forefront.

"It's about awareness, like any other prevention effort," Scallon said.

The Zero Suicide Initiative

Scallon, who chairs IHA's Council on Behavioral Health, notes that Indiana has one of the highest suicide rates in the nation, especially among younger generations.

"It's the second-leading cause of death among those aged 15-34," she says. "Over twice as many people die by suicide annually in Indiana than by homicide."

She points out that the actual suicide rate may be higher.

"The stigma causes individuals not to report it when a loved one dies by suicide," she says. "They say the death was an accident instead."

Scallon is a faculty member of the Zero Suicide Institute, which provides consultations and trainings to health care organizations seeking to improve their suicide care through the implementation of a comprehensive approach known as Zero Suicide. This approach is based on the understanding that patients at risk of suicide often fall through the cracks in the health care system. It advocates for a system-wide effort to improve outcomes and close those gaps.

"Suicide deaths for individuals under care at health and behavioral health systems are preventable," Scallon says. "The Zero Suicide approach helps these organizations identify patients at risk of suicide and develop a comprehensive plan to ensure they receive the care they need."

There are a number of steps hospitals can take to improve suicide care, from providing evidence-based interventions specific to suicide to building alerts into electronic health records.

"We need to treat it as a no-harm event like falls, catheter-associated urinary tract infections, and infant mortality," Scallon says.

Through the Zero Suicide Institute, Scallon helps health care organizations improve their care transition workflow by implementing policies that ensure safe handoffs between caregivers and upon discharge. While serving as CEO of Bloomington Meadows Hospital, which was a Zero Suicide pilot hospital, she discovered that the simple act of giving patients a handwritten note at discharge thanking them for their courage in seeking help and reminding them of their safety plan had a huge impact. She emphasizes that hospitals must provide personalized, compassionate care if they want to reduce suicides and improve care for individuals who seek help.

"Knowing you care can make a tremendous difference," she says.

Involving the Community

LaGrange County in northern Indiana is mostly made up of rural farmland and several lakes. It's known for having the third-largest Amish population in the U.S. But a few years ago, a troubling fact lay beneath the peaceful appearance: The county was experiencing a rise in both the number of deaths by suicide and the number of suicide attempts.

"Anecdotally, we were seeing an increase in suicide attempts and suicidal thoughts in our schools," says Jared Beasley, vice president of patient care at Parkview LaGrange Hospital. "In addition, our community health needs assessment was identifying behavioral health as a top need year after year after year."

By 2016, the suicide rate in LaGrange County was significantly higher than the national average. The leaders at Parkview LaGrange knew they needed to act.

The hospital established a task force made up of physicians, caregivers, and key stakeholders in the community.

“We decided to take a hard look at the situation and see if there was something we could do,” Beasley says. “It was an issue that resonated very strongly with every member of the task force. For some members, it was a personal issue. Their families had been affected by suicide.”

The task force quickly determined that early intervention was key to preventing suicide.

“Everyone’s scared to talk about suicide. They don’t want to ask uncomfortable questions,” says Jordi Disler, the hospital’s president. “But talking about it isn’t going to give anyone any ideas. They’re already thinking about it.”

The hospital partnered with the Lutheran Foundation to provide QPR (Question, Persuade, and Refer) training, which focuses on how to start the conversation about suicide so individuals at risk can be identified and receive the care they need. The hospital first offered the training to teachers and then opened it up to anyone in the community aged 18 and up.

So far, the hospital has provided training to more than 500 people, including hospital physicians, staff and board members, educators, first responders, business owners, and laypeople in the community.

“We can hardly keep up with the demand for classes,” says Beasley, who is a QPR trainer himself. “It’s an affirmation of the need.”

Disler points out that the hospital uses community benefit funding to offer the trainings at no cost to the community.

“We don’t feel like you can put a price on someone’s life,” she says.

The training includes guidance on how to approach someone who may be considering suicide.

“When you are concerned about someone and try to speak to them, you can’t phrase your questions in a way that creates a barrier,” Disler says. “If you say, ‘You wouldn’t do that, would you?’ or ‘You’re not thinking of doing something stupid, are you?’ they won’t feel like they can tell you the truth. You have to talk to people in a way that shows you’re interested in their

well-being, such as asking them, ‘Are you planning to commit suicide?’”

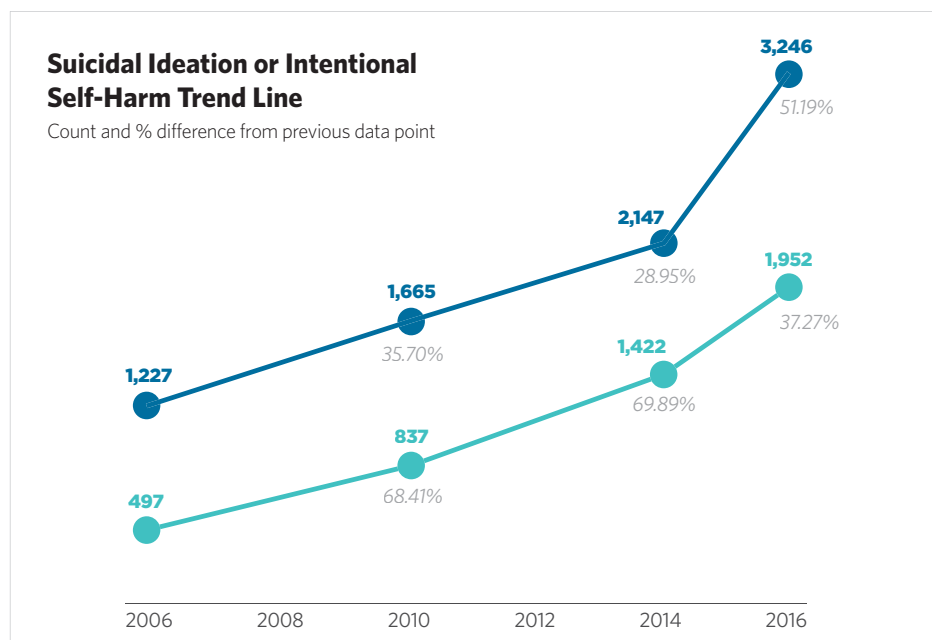
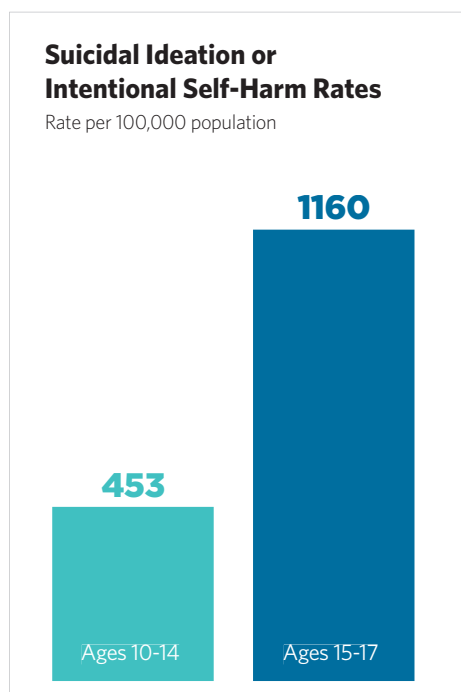
Asking the right questions is only part of the solution. Having the appropriate resources to help is essential.

“Access to services is very limited here in LaGrange County, which is a concern,” Disler says. “If you feel like you may harm yourself and you can’t get an appointment for a month, that’s not really going to help you.”

Parkview LaGrange is working to meet that need in the community by providing mental health counseling at the three area high schools 12 hours a week during the school year. The counselors refer students out when needed, allowing them to receive care more quickly.

Disler urges hospitals to help reduce the stigma around suicide and provide their own QPR trainings. She notes there are grants available to assist with the related expenses.

“It’s a relatively small investment with a very beneficial outcome,” she says. “This has been one of the most positive investments we’ve ever made to improve the health of our community.”



IHA recently collaborated with the Agency for Healthcare Research and Quality (AHRQ) to analyze Indiana’s 2016 data on emergency department visits due to suicidal ideation and intentional self-harm. The largest increase in these visits has been in children under 18, as shown in the above graph. Additional age breakouts and county-specific data will be distributed to hospitals shortly. Contact Kaitlyn Boller at kboller@IHAconnect.org for more information on the data or suicide prevention efforts.