# SOUTH DAKOTA SUICIDE PREVENTION

## GUIDING PRINCIPLES:
- Data driven decisions
- State and local partnerships
- Community–led efforts
- Evidence-based programming
- Culturally appropriate
- Focus on the next generation
- Highlight “Bright Spots” through success stories

## GOALS

### PREVENTION “Before Crisis”
Implement evidence-based interventions throughout multiple sectors to prevent suicides, suicide attempts, and other risky behavior.

### INTERVENTION “During Crisis”
Increase awareness and access to services to intervene in time of crisis.

### POSTVENTION “After Crisis”
Provide support for recovery services for survivors, their families, and the community to eliminate future suicides.

## OBJECTIVES

### DATA:
Share data to inform and evaluate efforts at the state and community level.

1. Implement data dashboards on the SD Suicide Prevention website.
2. Collect and share hospital data (IHS, VA, SDAHO) on suicide attempts to inform prevention efforts.
3. Partner with SDSU Extension and other entities on research related to suicide within farmers and ranchers.
4. Develop and disseminate population specific data infographics.

### EDUCATION AND TRAINING:
Provide culturally appropriate and evidence-based education and training to the public and various professions.

1. Share evidence-based and culturally appropriate resources with local primary, secondary, and postsecondary schools to assist with making program decisions.
2. Encourage the inclusion of mental health/suicide prevention training within primary, secondary, and postsecondary institutions.
3. Provide gatekeeper training for stakeholders like Mental Health First Aid.
4. Incorporate mental health/suicide prevention training at various statewide conferences.
5. Provide education and training to organizations that support farmers and ranchers.
6. Provide harm reduction and means safety training and educational resources.
7. Host a "Bright Spot" event to highlight success stories.

### STRATEGIES

1. **DATA:**
   - Share more timely data to inform response efforts.
   - Utilize call data from Suicide and Crisis Lifeline to assess accessibility and promotion of 988 Lifeline.
   - Utilize community-based data to understand community mental health resource capacity and prioritize interventions base upon community needs.

2. **EDUCATION AND TRAINING:**
   - Provide training to behavioral health providers on suicide prevention modalities.
   - Provide training to employers on referring individuals in crisis to behavioral health specialists.
   - Partner with Department of Criminal Investigation and Department of Health to provide law enforcement and first responder crisis intervention training.
   - Utilizing the Zero Suicide Report, work with agencies to bridge the gap in implementation across the four priority elements.

### POSTVENTION
- Provide a bi-annual reports utilizing South Dakota Violent Death Reporting System (SD-VDRS) data to inform prevention efforts.
- Promote the inclusion of questions on suicidal behaviors, related risk factors, and exposure to suicide in youth and adult data systems (YRBS, BRFSS, etc.).

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[988 - Call. Text. Chat. sdsuicideprevention.org]
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### 3. COMMUNICATIONS:
Utilize multiple effective methods to raise awareness about how to prevent crisis and help individuals access services.

1. Create a suicide prevention list serv and/or newsletter to share updates with partnering organizations.
2. Utilize the calendar on the SD Suicide Prevention website to promote trainings, events, conferences, etc.
3. Develop and implement population specific campaigns within traditional media (radio, print, TV) and social media to increase awareness.

4. Utilize inclusive language across all communication channels, by educating and training organizations on how to do that.

### STRATEGIES

#### 1. Promotion of state, local and tribal resources, such as behavioral health programs on the SD Suicide Prevention website.
2. Develop and disseminate county specific resource guides.
3. Develop and disseminate culturally appropriate resources (brochures, business cards, posters, etc.).

#### 1. Develop a resource packet to assist with response efforts.
2. Promote the survivor grief book within funeral homes, faith-based organizations and other entities.

#### 1. Provide crisis model policies that may be adopted by local primary, secondary and postsecondary schools, worksites, and other entities.
2. Implement a community response plan and provide training to various professionals.
3. Partner with economic-related programs within the community (unemployment, housing, etc.) to provide suicide prevention resources within their programming.
4. Provide self-care training like the Employee Assistance Program to high trauma professions (EMS, veterans, health professionals, law enforcement, National Guard, etc.).

#### 1. Provide assistance to survivor support groups within communities.
2. Support and expand local response teams, including coordination of postvention resources.
3. Provide postvention model policies that may be adopted by local primary, secondary and postsecondary schools, worksites and other entities.

### 4. COMMUNITY ENGAGEMENT:
Support community leaders and engage community organizations to provide support to individuals before, during, and after a crisis.

1. Promote the Communities that Care model or another model within communities to develop a structure to support prevention efforts to address multiple issues (suicide, drug abuse, tobacco use, etc.).
2. Partner with existing coalitions to help develop coalitions in new communities.
3. Participate in community events to bring awareness of the issue and resources available (walks, parades, fairs, etc.).
4. Provide local resources to various community organizations that work with specific populations like farmers, ranchers, veterans, older adults, American Indians, etc.