

# Suicide Prevention & Crisis Support

---


# Mission and Programs


**Making lives better by giving support, offering hope  
and creating connections all day, every day.**

- 211
- 988
- Volunteer Connections
- Caregiver Support
- Outreach Support
- Child Care
- Health Insurance Marketplace
- SD Cares
- Health Navigation Women's Program
- Substance Use Care Coordination



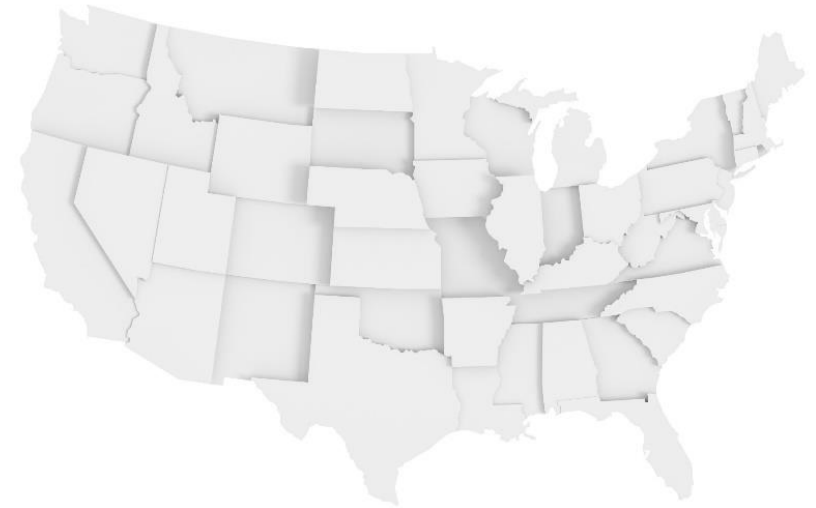
[211](#) [988](#) [Community Directory](#) [Support Programs](#) [Volunteer](#)

[About](#) [Calendar](#) [Donate](#) 

English 

# National Suicide Statistics 2021

- There were 48,183 suicides in the U.S. (under-reported)
- Average of 1 suicide every 11 minutes
- 11<sup>th</sup> ranking cause of death overall
- 3rd ranking cause of death for youth
- 3.5 male deaths by suicide for each female death



# Suicide in South Dakota

- 2022 provisional data shows 183 South Dakotans died by suicide.
- In 2021, **202** South Dakotans died by suicide. This is higher than in 2019 and 2020, which each had 185 suicides, and is the highest ever recorded in the state.
- In 2021, suicide was the leading cause of death among 10-19 and 2<sup>nd</sup> leading cause of death among 20-29.
- Counties that are home to reservations and off-reservation trust land, have some of the highest rates of suicide (Todd, Corson, Oglala Lakota, Lyman)
- The suicide rate among Native American populations is 2.5x higher than White populations
- South Dakota has the 3<sup>rd</sup> highest rate of suicide among 15-24-year-olds in the U.S.

# Minnehaha and Lincoln County Suicide Stats

---

- 34 deaths in 2022
- 27 deaths in 2021
- 40 deaths in 2020
- 37 deaths in 2019
- 34 deaths in 2018
- 36 deaths in 2017

Source: Minnehaha County Coroner's Office

# Moving the U.S. to a 3-digit Dialing Code



On July 16<sup>th</sup>, 2022, our nation moved to the first-ever 3-digit dialing code for suicide prevention and mental health crises, available for call, chat and text.

## Fast Facts about 988:



It will provide greater access to **24/7/365, free, confidential and life-saving services** to those experiencing a mental health, substance use, or suicidal crisis.

It will **not replace** the existing National Suicide Prevention Lifeline— but in fact, strengthen and expand it.

It is an **easy-to-remember number that helps to provide direct connection** to compassionate, accessible care.

It's **more than just a 3-digit number.** It will strengthen our larger crisis care system.

# 988 in South Dakota

- 988 is **answered by the Helpline Center** and staffed by individuals with advanced degrees and experience in behavioral health.
- 988 provides supportive **follow-up calls** to callers and can include follow-up calls from mobile crisis team referrals, discharges from inpatient units or other programs to support care coordination.
- **Partner with** 911 Public Safety Access Points, outpatient behavioral health providers, psychiatric inpatient units, stabilization units and appropriate regional facilities.
- On average, **95% of calls** received by trained crisis counselors in a 988 setting can be de-escalated on the phone, reducing the need to dispatch law enforcement in situations that do not have safety concerns.

# 988 and 911 Partnership

- 988 is designed to collaborate with 911 centers to assist with mental health calls. The Helpline Center will be working with each PSAP in the state to create a partnership between 988 and 911
- 911 transfer calls to 988 such as callers in an emotional crisis or callers expressing mental health needs that are not suicidal
- 911 will also transfer calls to 988 when callers are suicidal and alert but not requiring dispatch
- 988 will work with 911 for calls requiring an emergency medical response or law enforcement response



# Help is 3 Numbers Away



**211** maintains a comprehensive database of community resources and provides information and referrals for essential needs like:

**211** also can connect people with information and referrals for:



**988** provides crisis support for:

- Thoughts of Suicide
- Mental Health Crisis
- Substance Use Crisis
- Emotional Distress

Call for Suicide Intervention and Crisis Support

988

Whole Person Care

Warm Handoff

Call for Emergencies

911

**911** provides first responder dispatch for:

- Medical Emergency
- Fire
- Reporting a Crime
- Disaster Response
- Life Threatening Situation

# BASIC CONCEPTS ABOUT SUICIDE

---

- Most suicidal people do not want to die.
- Suicidal people want to find a way to live.
- Ambivalence exists until the moment of death.
- The final decision rests with the individual.
- Reduce risk factors and you reduce risk.
- Enhance protective factors and you reduce risk.

# Terminology

---

## Try to use:

“died by suicide”

“killed themselves”

“took their own life”

## Rather than:

“committed suicide”

“successful suicide”

“unsuccessful attempt”

“completed suicide”



# Feelings

## Depression

- Hopeless
- Sadness
- Worthlessness or guilt
- Trouble concentrating, remembering things
- Self-blame or self-criticism

## Anxiety

- Recurring fears and worries
- Irritability
- Trouble concentrating
- Feeling on edge

## Guilt

## Anger

Fear of losing control or “losing it”



# Actions

---

Talk of suicide

Drug and Alcohol use

Recklessness

Giving away prized possessions

Finding long-term care of pets

Aggression

Sleep habits

Self-harm



# Behavioral Changes

---



Withdrawn from friends or family

Loss of interest in activities

Poor concentration

Acting like a different person

Low energy

Changes in sleeping habits; difficulty sleeping or sleeping too much

Loss of appetite or increased

# Talk of Suicide

---

Remember ALL talk of suicide should be taken seriously

Can be direct or indirect

- Examples of direct statements
  - “I’m thinking about killing myself
  - “I don’t want to live anymore”
  - “If this doesn’t happen... I’m going to kill myself”
- Examples of indirect statements
  - “I won’t be around much longer”
  - “Everyone would be better off without me”
  - “I can’t do this anymore.”

# High Risk Groups

---

White males

Veterans/Military

American Indians

Young adults (15-24)

Working Males (40-65)

Rural area residents

Attorneys, physicians, dentists, law enforcement, EMS personnel

LGBTQ+





# Key Warning Signs for High Risk

---

A sudden change in thinking or behavior

Creating a plan for suicide; accessing means to complete the plan such as stockpiling medications or acquiring a firearm

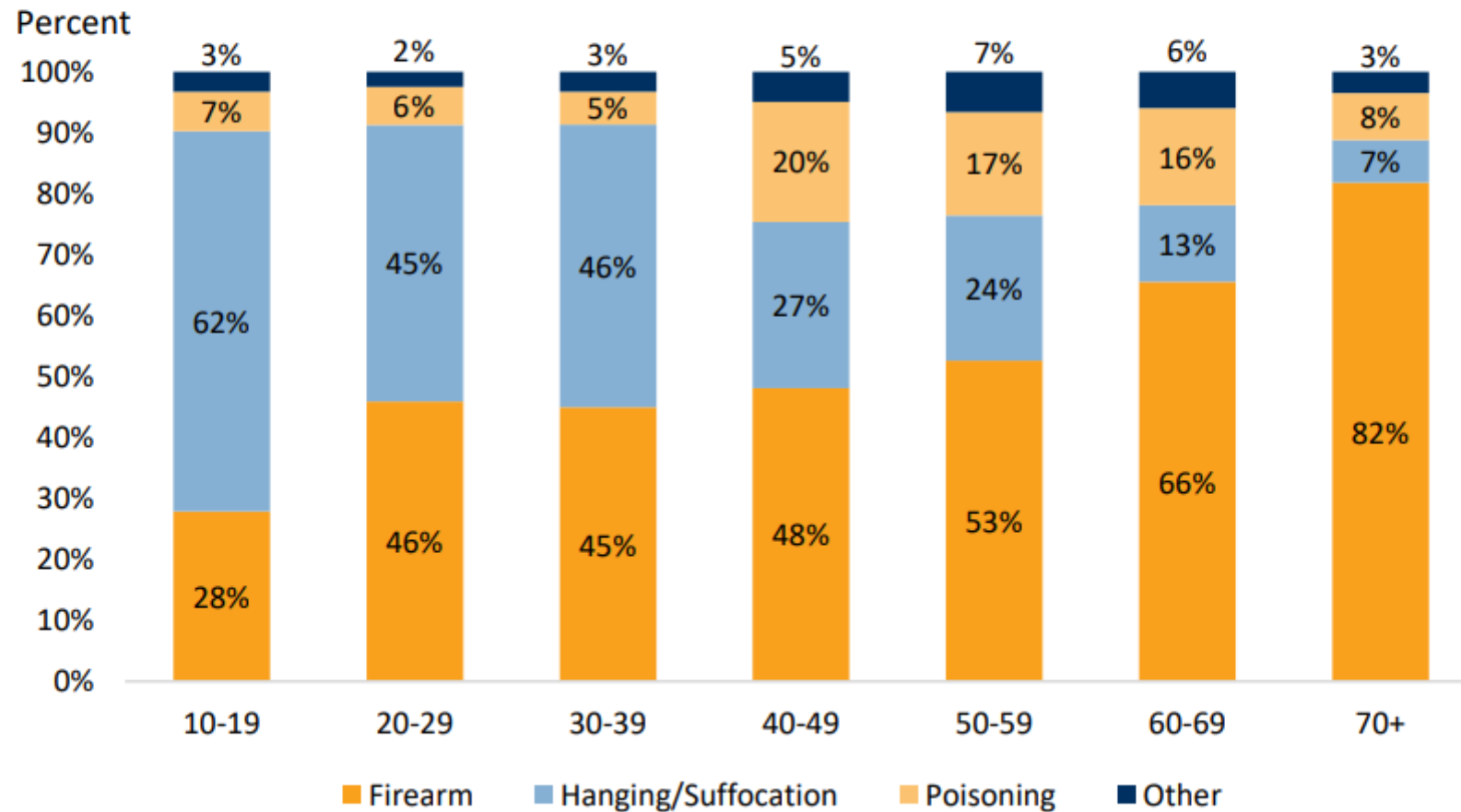
Past suicide attempts

Substance use



In South Dakota, firearms were the most common method accounting for 50% of all suicide deaths, followed by hanging/suffocation (35%), and poisoning (11%). Firearms were the most common method in all age groups, except for youth aged 10-19 years and adults aged 30-39 years, among whom hanging was the most prevalent method.

Figure 10. Suicide Methods by Age Group, South Dakota 2012-2021



# Counseling on Access to Lethal Means (CALM)



- 
- 25% of teens/young adults stated it was <5 mins. between the time they decided on suicide and their attempt
  - 13% said 24 hrs. or more went by
  - 1 in 3 youth suicides followed within 24 hrs. of a crisis
  - 85-90% of gunshot wounds result in death
  - 1-2% overdoses & cutting/stabbing result in death

# CALM (continued)

---

1/3 of households in U.S. have guns (60% in SD)

85% of guns used in youth suicide come from home

9 of 10 people who attempt suicide and survive will not die by suicide later

How to make access to guns difficult:

- Gun lock AND gun cabinet lock
- Unload ammo, hide ammo in separate location (also locked)
- Take other parts of gun out so it is not working
- BEST OPTION: find outside of home temporary storage



# What's Next?

---



If you're concerned someone you know is experiencing suicidal thoughts here are a few tips to help them to safety:

Ask directly about suicide and take all talk of suicide seriously

Show you care and be supportive

Listen in a non-judgmental way – be sure to give yourself plenty of time to listen to them fully

Remember, you don't have to go through this alone, there are resources for help!

# Empathetic listening

---



Be attentive. Be interested. Be alert.

Be a sounding board—allow the speaker to bounce ideas and feelings off of you while being non-judgmental and non-critical

Don't discount feelings by saying phrases such as "It's not that bad" or "There is always tomorrow"

Verbal and non-verbal cues of active listening

Reflect back what you think the speaker is saying and feeling

# Safety Planning

---

Safety planning is about brainstorming ways to stay safe that may also help reduce the risk of future harm.

Acknowledges the risk factors, what they can do on their own to maintain safety, whom to contact for help, and where to go if they cannot stay safe

## Patient Safety Plan Template

### Step 1: Warning signs (thoughts, images, mood, situation, behavior) that a crisis may be developing:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Step 2: Internal coping strategies – Things I can do to take my mind off my problems without contacting another person (relaxation technique, physical activity):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Step 3: People and social settings that provide distraction:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Phone \_\_\_\_\_
3. Place \_\_\_\_\_ 4. Place \_\_\_\_\_

### Step 4: People whom I can ask for help:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_
2. Name \_\_\_\_\_ Phone \_\_\_\_\_
3. Name \_\_\_\_\_ Phone \_\_\_\_\_

### Step 5: Professionals or agencies I can contact during a crisis:

1. Clinician Name \_\_\_\_\_ Phone \_\_\_\_\_  
Clinician Pager or Emergency Contact # \_\_\_\_\_
2. Clinician Name \_\_\_\_\_ Phone \_\_\_\_\_  
Clinician Pager or Emergency Contact # \_\_\_\_\_
3. Local Urgent Care Services \_\_\_\_\_  
Urgent Care Services Address \_\_\_\_\_  
Urgent Care Services Phone \_\_\_\_\_
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

### Step 6: Making the environment safe:

1. \_\_\_\_\_
2. \_\_\_\_\_

Safety Plan Template ©2008 Barbara Stanley and Gregory K. Brown, is reprinted with the express permission of the authors. No portion of the Safety Plan Template may be reproduced without their express, written permission. You can contact the authors at bhs2@columbia.edu or gregbrow@mail.med.upenn.edu.

The one thing that is most important to me and worth living for is:

\_\_\_\_\_



# Basic Safety Planning

---

1. Recognizing warning signs
2. Internal coping skills/strategies
3. People/places who can be a distraction
4. People that I can talk to about what's going on
5. Professionals I can seek out
6. Means Safety

# Suicide Survivor Care

---

Accept intensity of the grief

Listen with your heart

Avoid cliches/simplistic explanations

Be compassionate

Respect need to grieve

Understand the uniqueness of suicide grief

Be aware of support groups





Grief Resources for Suicide Loss Survivors

Visit helplinecenter.org

- Resources
- Events
- Support Services
- In Remembrance
- About Us

Request Support Information

# There is hope. There is help.

Suicide affects millions of people each year. If you have been affected by suicide or are a suicide survivor there are resources and supports available. You are not alone.

Request Support Information



# Self-Care

---

- Acknowledge the emotional and physical impact of trauma scenes
- Dealing with stress
- Debriefing
- Prevent burnout
- Understand PTSD
- Seek professional consultation (EAP)
- Create support system



The 988 line launched on July 16th, 2022 nationwide. When South Dakotans call, text or chat 988, they are connected to 988 counselors at the Helpline Center. They listen, assess, provide support and connect to additional resources as needed. The Helpline Center also answers crisis calls that are transferred from local 911 centers in SD.

Step 1: Pick a start date  July 16, 2022 - February 28, 2023

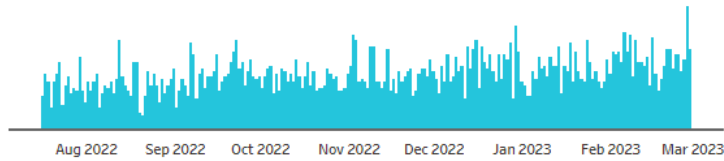
Step 2: Pick an end date  Total Contacts: 4,612

Total Calls: 3,787

Total Texts: 453

Total Chats: 372

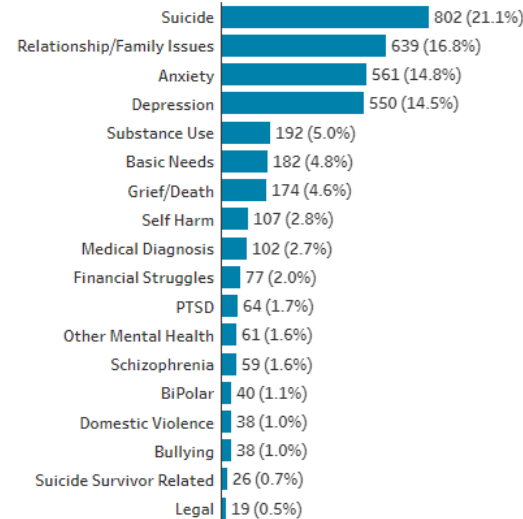
The selected time period is colored **TEAL** in the graph of daily contacts below.



**Overview** Demographics Crisis Geographies Map

**Presenting Concerns**

The primary issue that the contact is identified as having by our 988 counselors.



**Contact Method**

988 Calls	3644
988 Text	453
988 Chat	372
Transferred from 911	143

**Contact Type**

The categorization of the contact by our trained crisis workers. One contact type is identified per contact.

Crisis	2053
Information	1093
Listening and Support	1312
Referral	110

2-1-1  
988  
Icons: hands, people, heart, calendar

# 988 Materials

Available on the Helpline Center website: [helplinecenter.org/988info/988-promotion/](http://helplinecenter.org/988info/988-promotion/)

## 988 T-Shirts

We'd like to get as many shirts into the community as possible, so we're selling them at cost plus shipping. To purchase your 988 t-shirt and more details go to: [helplinecenter.org/988shirts](http://helplinecenter.org/988shirts)



Bella Canvas T-Shirt in Heather Navy

## 988 Window Cling

Please Select ▼

4x6 window cling, can be sent in an increment of your choosing. If you would like more than 10, please let us know through the marketing email listed above.



## 988 Wallet Cards Style 1

Please Select ▼

Business card sized, increments of 25



## 988 Wallet Cards Style 2

Please Select ▼



## 988 Poster Style 3

Please Select ▼

8.5x11 poster, can be sent in an increment of your choosing. If you would like more than 10, please let us know through the marketing email listed above.



## 988 - 211 Difference Poster

Please Select ▼

8.5x11 poster, can be sent in an increment of your choosing. If you would like more than 10, please let us know through the marketing email listed above.



## Help and Hope Brochure

Please Select ▼

Tri-fold brochure, increments of 25. If you would like more than 100, please let us know through the marketing email listed above.



# Thank you!

There is Help, There is Hope

Kendra Rooney, MSW, CSW  
Suicide Prevention and Outreach Coordinator

[Kendra.Rooney@helplinecenter.org](mailto:Kendra.Rooney@helplinecenter.org)

