Suicide Prevention in Nevada: COVID-19 Impact, Risk & Protective Factors, and Recommendations[1]

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Suicide in Nevada

Despite increased awareness, suicide continues to be a significant public health challenge in Nevada. While medical advances have improved both quality and length of life for many, we have not seen the same for mental health. According to the Centers for Disease Control and Prevention (CDC), Nevada ranked 7th highest for rate of suicide in 2019, with suicide as the second leading cause of death for youth aged 15-24 years.[2]

Impact of COVID-19 and Risk Factors

COVID-19 has put a spotlight on mental and behavioral health. Its widespread impact has increased uncertainty for all, and we cannot underestimate the effects on our emotional well-being. The pandemic has created an environment of physical and social distancing, increased isolation, changes in support networks, ever-changing school options of in person, virtual, or hybrid learning, and worries for family and friend's health and the future—all of which contribute to increased anxiety and despair.

We must work to mitigate this to prevent further hardships and tragedies. During these challenging times, we must realize we all have a role to play in offering support, recognizing the early signs someone might be in crisis, and connect the person to resources for help. There is rarely one single event, behavior, or risk factor which can lead to thoughts of suicide. Improving connectedness among individuals and across systems increases the possibility of help, and therefore hope, especially for those who might be more isolated.

Connectiveness: A Key Protective Factor

Social support and connections are key protective factors to prevent suicide. In 2011, the CDC began promoting connectedness as its strategic direction for preventing suicidal behavior. The CDC defines connectedness as "the degree to which a person or group is socially close, interrelated, or shares resources with other persons or groups."[3] From this concept, the use of "Connectiveness" as a new term is increasing in social media realm today.

In our modern lives, and especially in the current climate, it is difficult to create and maintain personal relationships—causing many to reach out to others through social media. Social media makes it possible to find others who share your interests without the need to leave home. However, time spent online takes away time from family and friends. It is also possible to get into negative situations with online bullying, feuding, and "catfishing" (people seeking intimate relationships under false pretenses). **Properly managing and balancing your life with your online contacts can be difficult and requires caution**—because you can never fully trust that others online are honest about themselves.

Connectiveness embodies taking action to connect with others. It can be:
  a. between individuals (e.g., friends, neighbors, co-workers),
  b. among family members,
  c. to community organizations (e.g., schools, faith communities),
  d. to groups (e.g., minority groups, cultural traditions).

Connectiveness can be enhanced through:
   a. social programs directed at specific groups or those who may be at risk for isolation (e.g., older adults, veterans, young adults, youth, and LGBT community members),
   b. activities which support the development of positive and supportive communities (e.g., schools, tribal, and faith-based organizations),
   c. development of supportive relationships between youth and positive adults in their lives (e.g., teachers, coaches, and activity leaders),
   d. implementing activities in educational institutions which help students safely increase and strengthen their social networks to improve individuals connectiveness.

It's important to remember not all social connections are healthy. Suicide prevention programs should promote practices leading to positive and supportive relationships and community connections which can help buffer suicide risk factors.

NOSP's response to COVID-19 challenges
Through CARES funding, Nevada is addressing pandemic-induced emotional strains and suicide risks by:
   o increasing training and education on suicide prevention
   o expanding partnerships within communities to improve suicide prevention and crisis care
   o utilizing awareness messaging to increase access to crisis care and the need to reduce access to lethal means (i.e., medications and firearms)
   o supporting compliance in data collection and submission for surveillance of suicide attempts, suicide ideation and intentional self-harm

Nevada's COVID relief funding was largely focused on building resilience. In addition, healthy coping skills and obtaining support to find a sense of stability helps prevent despair, such as addiction, depression, and suicidal thoughts.

In addition, NOSP is working with community agencies to provide medication safes and locks for firearms to families whose members may be in crisis and at risk for suicide.

Recommendations
   1. ***Know the signs.*** Don't wait for a crisis. If people get help and support before an attempt, they rarely make a second attempt.
   2. ***Reduce access to lethal means.*** Acting on thoughts of suicide can be impulsive. Reducing access gives time to get help and save lives. Lock up all medications, firearms, and securely store the ammunition separately.
   3. ***Talk openly, teach coping and problem-solving skills.*** It is paramount to also address feelings of grief, loss, and disruption. We need to nurture a compassionate community which provides a sense of safety, security, and belonging for all; encourage and model open communication; and create opportunities to talk and connect, especially for youth and young adults.
   4. ***Know what questions to ask***. Using a simple screening tool, (e.g., the —Columbia Suicide Severity Rating Scale), helps determine a person's suicide risk level.
   5. ***Media reporting.*** Responsible and safe media reporting on suicide deaths by not sensationalizing or glamorizing suicide will decrease the risk of contagion. Including stories of hope, help, and resilience can improve suicide prevention awareness in a community.

Conclusion

Suicide is often more about the challenges and stressors around living, not necessarily the desire to die. If we can help those affected, find out what is leading their thoughts of suicide, we can help them get relief from the feeling of loss, pain, or burdensomeness. We need to work together in order to help prevent a suicide. If we can intervene on feelings of isolation or aloneness, listen, and build a connection, we can help plant a seed of hope and willingness to keep safe.

The Surgeon General's Call to Action 2021 emphasizes that "suicide is a complex issue requiring comprehensive solutions. No single strategy alone will be enough to reduce suicide rates. Suicide prevention efforts must combine strategies that promote resilience and wellness, identify and support individuals and groups at risk, provide effective crisis response, care for suicide risk, and support those who have been affected by suicide."[4]

For more information on Training and about NOSP go to http://suicideprevention.nv.gov/.

REFERENCES
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4. "The Surgeon General's Call to Action: TO IMPLEMENT THE NATIONAL STRATEGY FOR SUICIDE PREVENTION." *A Report of the U.S. Surgeon General and of the National Action Alliance for Suicide Prevention.* From https://www.hhs.gov/sites/default/files/sprc-call-to-action.pdf