



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Karen E. Timberlake, Secretary

December 22, 2022

The Honorable Howard L. Marklein
Joint Committee on Finance, Senate Co-Chair
Room 316 East State Capitol
PO Box 7882
Madison, WI 53707

The Honorable Mark Born
Joint Committee on Finance, Assembly Co-Chair
Room 308 East State Capitol
PO Box 8952
Madison, WI 53708

Dear Senator Marklein and Representative Born:

I am pleased to submit the Suicide in Wisconsin: Impact and Response Report to the Legislature, as directed by the Committee at its October 2, 2019, meeting under Wis. Stat. § 13.10. The attached report addresses suicide prevention activities in Wisconsin between July 1, 2021 and June 30, 2022.

Sincerely,

A handwritten signature in black ink, appearing to read "Karen E. Timberlake".

Karen E. Timberlake
Secretary-designee

Enclosure

Suicide in Wisconsin: Impact Response Report

July 1, 2021–June 30, 2022



WISCONSIN DEPARTMENT
of **HEALTH SERVICES**

Division of Public Health
P-02657A (12/2022)

Table of Contents

| | |
|---|---|
| Purpose of This report..... | 1 |
| Suicide in Wisconsin..... | 1 |
| Suicide Data Overview | 1 |
| Demographics | 1 |
| Suicide Prevention in Wisconsin | 2 |
| Suicide Prevention Activities July 1, 2021–June 30, 2022..... | 2 |
| Wisconsin Lifeline/988 | 2 |
| Medical College of Wisconsin | 3 |
| Mental Health America of Wisconsin..... | 3 |
| Wisconsin Department of Health Services | 4 |
| Conclusion..... | 5 |

Purpose of This report

On October 2, 2019, the Wisconsin State Legislature's Joint Finance Committee (JFC) directed the Department of Health Services (DHS) to provide an annual report regarding suicide prevention activities in the state. This report is submitted in fulfillment of this directive, and as such, it details suicide prevention activities which occurred across Wisconsin between July 1, 2021, and June 30, 2022.

Suicide in Wisconsin

Suicide continues to grow as a public health concern in Wisconsin. The suicide rate among Wisconsin residents increased by 32 percent from 2000 to 2020. In 2020, 861 Wisconsin residents died by suicide,¹ making suicide the 10th leading cause of death.² Additionally, it is estimated one suicide death affects as many as 135 other individuals, including family, friends, coworkers, professionals, and others who valued the life of the individual lost to suicide.³ This means that in 2020, over 116,000 Wisconsinites would have felt the unique loss and grief that accompanies suicide. This substantial figure fails to account for the additional numbers of individuals affected by a loved one living with suicidal ideation or prior suicide attempts including 16 percent of Wisconsin public high school students.⁴

Suicide Data Overview

Demographics

- The suicide rate among Wisconsin residents increased by 32 percent from 2000 to 2020.
- In 2020, the majority of suicide deaths were male.⁵
- The majority of those hospitalized or presenting at the emergency department with self-harm injuries were female, 2020–2021 combined.⁶
- Suicide rates were highest among American Indians/Alaska Natives and Whites, 2016–2020 combined.⁷

¹ Resident death certificates, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services accessed 4/13/22.

² <https://wisqars.cdc.gov/> accessed 4/13/22.

³ Chapman AL, Dixon-Gordon KL. Emotional Antecedents and Consequences of Deliberate Self-Harm and Suicide Attempts. *Suicide Life-Threatening Behav.* 2007;37(5):543-552. doi:10.1521/suli.2007.37.5.543.

⁴ 2019 YRBS;

https://dpi.wi.gov/sites/default/files/imce/sspwp/pdf/YRBS_2019_Summary_Report_DPI_Web_Version.pdf

⁵ Resident death certificates, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services.

⁶ Wisconsin Hospital Inpatient Discharges and Emergency Department Visits, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services.

⁷ Resident death certificates, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services.

- Suicide rates were higher among rural county residents compared with urban county residents, 2018–2020 combined.⁸
- Firearms were the most commonly used method of suicide in 2020 (51 percent).⁹
- In 2020, 62 percent of all deaths by firearm were suicide deaths.¹⁰

Suicide Prevention in Wisconsin

The DHS Injury and Violence Prevention (IVP) Program coordinates state injury and violence prevention efforts. The IVP program includes data collection, surveillance, education, and the promotion of prevention and intervention through collaborative efforts with other state agencies and community partners. The following section provides a synopsis of suicide prevention activities which occurred across Wisconsin during the report period and highlights DHS partner organizations, the activities completed, populations reached, and where available, estimates of Wisconsinites served.

Suicide Prevention Activities July 1, 2021–June 30, 2022

Wisconsin Lifeline/988

The Wisconsin Lifeline, supported and funded by DHS, is Wisconsin’s member center of the National Suicide Prevention Lifeline, now called the 988 Suicide & Crisis Lifeline. The service provides free and confidential support for people experiencing a suicidal, mental health, and/or substance use crisis, as well as for people who know someone experiencing such a crisis. The Lifeline is available 24/7 and is operated by Family Services of Northeast Wisconsin, an agency based in Green Bay. The counselors at the Wisconsin Lifeline answer calls, texts, and chats that come from residents throughout the state and are trained to reduce stress, provide emotional support, and connect people with local resources. Most callers’ issues can be addressed within the call itself, with less than two percent of calls requiring dispatch of emergency services, such as law enforcement.

In 2021, approximately 29,000 calls from Wisconsin were answered by the National Suicide Prevention Lifeline. On July 16, 2022, the National Suicide Prevention Lifeline officially became the 988 Suicide & Crisis Lifeline, with “988” as the new 3-digit dialing code for the service. This is expected to lead to a considerable increase in the volume of contacts handled by the Wisconsin Lifeline. In just July of 2022, the Wisconsin Lifeline answered approximately 4,400 calls.

DHS and its partners have engaged in significant planning for the transition to 988 in Wisconsin. In 2021 DHS convened a coalition to develop Wisconsin’s 988 implementation plan, and the coalition continues to assist DHS in the rollout of 988. The coalition includes representatives from county and municipal agencies focused on behavioral health, law enforcement, and emergency services; providers of behavioral health services; and people who have experienced behavioral health crisis situations. Further information about 988 and the Wisconsin Lifeline is available on the DHS website at: www.dhs.wisconsin.gov/crisis/988.htm.

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid.

Medical College of Wisconsin

The Division of Suicide Prevention at the Comprehensive Injury Center at the Medical College of Wisconsin (MCW) works to prevent suicide through research, education, clinical care, and community engagement and serves as an academic partner and resource to community-based agencies who engage in suicide prevention work across Wisconsin. In addition to publishing numerous academic articles, leading poster presentations, and conducting other academic activities advancing the field of suicide prevention science, MCW also worked hard to engage the community in suicide prevention during the report period.

Community Engagement Activities

- MCW developed a podcast, “The ‘S’ Word: A Podcast about Suicide Prevention” and has published monthly episodes since January 2022.
- MCW hosted a panel on suicide in the Black community in partnership with the City of Milwaukee Office of Violence Prevention in September 2022.

Groups

- MCW leads the Milwaukee Suicide Review Commission — a monthly meeting dedicated to reviewing suicides that occur among Milwaukee residents and making recommendations for prevention strategies. Members include public health professionals, law enforcement, health care systems, veteran serving organizations, county-level health and human services organizations, and suicide prevention organizations.
- MCW co-leads the Prevent Suicide Wisconsin data action group — a group charged with overseeing the implementation of priority four¹¹ (improving surveillance of suicide and evaluation of prevention programs) of Wisconsin’s suicide prevention strategy
- MCW leads a community of practice for suicide review teams in Wisconsin. The community of practice team gathers representatives from counties across the state engaging in suicide review to share best practices and lessons learned, as well as work through shared challenges.

Mental Health America of Wisconsin

Mental Health America of Wisconsin (MHA) serves as the statewide suicide prevention coordinating agency for Wisconsin through its leadership of the Prevent Suicide Wisconsin (PSW) public-private partnership. MHA is a state affiliate of national Mental Health America and provides education, advocacy, and service through a variety of peer and clinical programs serving populations disproportionately impacted by suicide and other mental health concerns. (DHS 2020)MHA’s Survivors Helping Survivors (suicide loss survivors) support groups and Alternatives to Suicide (for people with thoughts of suicide) groups offer connection to other peers with similar experiences. The Prevent Suicide Wisconsin (PSW) Statewide Coalition, administered by MHA through a grant from DHS, contributed to the state suicide prevention plan and is considered the state’s public-private partnership for suicide prevention. The PSW Steering Committee serves as the advisory body for the state plan, and the current membership

¹¹ Suicide in Wisconsin Impact and Response <https://www.dhs.wisconsin.gov/publications/p02657.pdf> accessed 12/13/2022.

includes over 20 individuals from a variety of sectors including behavioral health providers and organizations, local and tribal health departments, state agencies, people with lived experience of suicide, mental health and suicide prevention advocacy organizations, organizations representing underserved populations including BIPOC (Black, Indigenous, and people of color) communities, and veteran organizations.

During the report period, MHA worked with the PSW Statewide Coalition to promote implementation of the state suicide prevention plan strategies through the following activities:

- Development of subgroups focused on each of the four strategies.
- Maintenance of a website with statewide resources.
- Dissemination of a monthly e-newsletter.
- Organization of an annual conference.
- Support for the Maternal and Child Health adolescent wellbeing learning community.
- Support and consultation to local suicide prevention coalitions, school districts, and other organizations interested in suicide prevention.
- Provision of trainings, such as the Wisconsin Zero Suicide trainings and conference presentations.

Suicide prevention coalitions are surveyed annually to collect information on local implementation of the state suicide prevention plan. Thirteen coalitions participated in the 2022 survey, and 15 participated in the 2021 survey. MHA and the PSW Steering Committee will use these results to inform technical assistance offered to coalitions in 2023.

DHS continued its commitment to the systematic Zero Suicide approach to quality improvement through grant funding awarded to MHA in 2021. MHA works with health and behavioral health care organizations from around the state to support them in implementing the principles and practices of Zero Suicide. MHA's activities in 2021–2022 included: promoting and disseminating the state suicide prevention plan, which contains a Zero Suicide strategy; conducting two annual sessions of the Wisconsin Zero Suicide Training (WZST); holding learning community calls for organizations that participated in the WZST; and teaming with the Behavioral Health Training Partnership at UW-Green Bay to provide suicide care trainings for clinicians throughout Wisconsin.

Wisconsin Department of Health Services

In 2022, DHS applied for and received the CDC's Comprehensive Suicide Prevention (CSP) grant. The CDC funds states and universities to implement and evaluate a comprehensive public health approach to suicide prevention, with a special focus on populations that are disproportionately affected by suicide. The DHS funded project will focus on reducing suicide morbidity and mortality among two disproportionately affected populations in Wisconsin: rural males ages 25–64 and females ages 10–19.

In addition to reducing suicide morbidity and mortality in the identified populations, the aim of these funds is to:

- A. Create a multi-sectoral partnership.
- B. Use existing data to select vulnerable populations at risk for suicide death and attempts,

- C. Create an inventory of existing suicide prevention programs and identify areas for growth to reach vulnerable populations.
- D. Engage community resources to increase and expand strategies identified in the CDC Technical Package for Preventing Suicide.
- E. Develop and implement a communication plan to share results and improve coordination of providers and resources which serve the identified populations.

Furthermore, this project will ensure rigorous evaluation of individual selected activities and the success of comprehensive suicide prevention while building sustainable infrastructure to reduce suicide mortality and morbidity through an effective public health approach.

Conclusion

This report details many of the suicide prevention activities that occurred across Wisconsin from July 1, 2021–June 30, 2022. As this report demonstrates, Wisconsin is home to many public-private partnerships that support suicide prevention work across the state. This network of interconnected state and community-based services and partnerships provide Wisconsinites with a spectrum of suicide prevention services, activities, care, and support. DHS, along with our partners, remain committed to advancing suicide prevention science, implementing, and evaluating best practice approaches to suicide prevention, and reducing suicide ideation and attempts in our state. Through this committed partnership, Wisconsin can transform the mental health of its citizens, increase awareness of suicide prevention, and prevent suicide in future generations.