

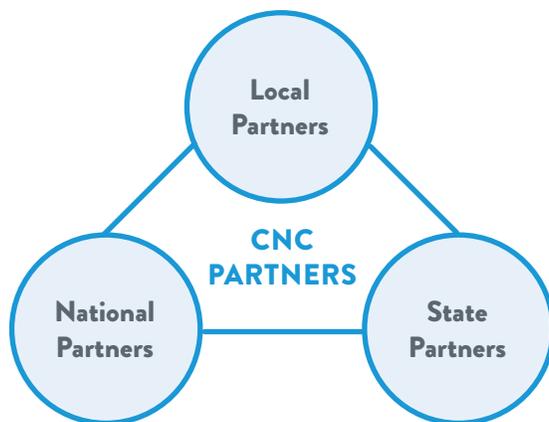
COLORADO-NATIONAL COLLABORATIVE FOR SUICIDE PREVENTION

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The Colorado-National Collaborative (CNC) is a partnership of local, state and national scientists and public health professionals working with health and social service agencies, nonprofit organizations, government agencies, businesses, academic organizations and Colorado residents to identify, promote and implement comprehensive state- and community-based strategies for preventing suicide. In 2018, there were 1,246 suicides among Colorado residents resulting in an age-adjusted suicide rate of 21.2 per 100,000 and is the tenth highest in the nation.¹ Solutions to complex public health problems, like suicide, are often most successful when government, businesses, health services, nonprofit organizations and individual citizens coordinate their efforts. This way, partners can channel their resources to the same goals, avoid duplicating efforts, and enhance each other's work to produce lasting change.

NATIONAL PARTNERS

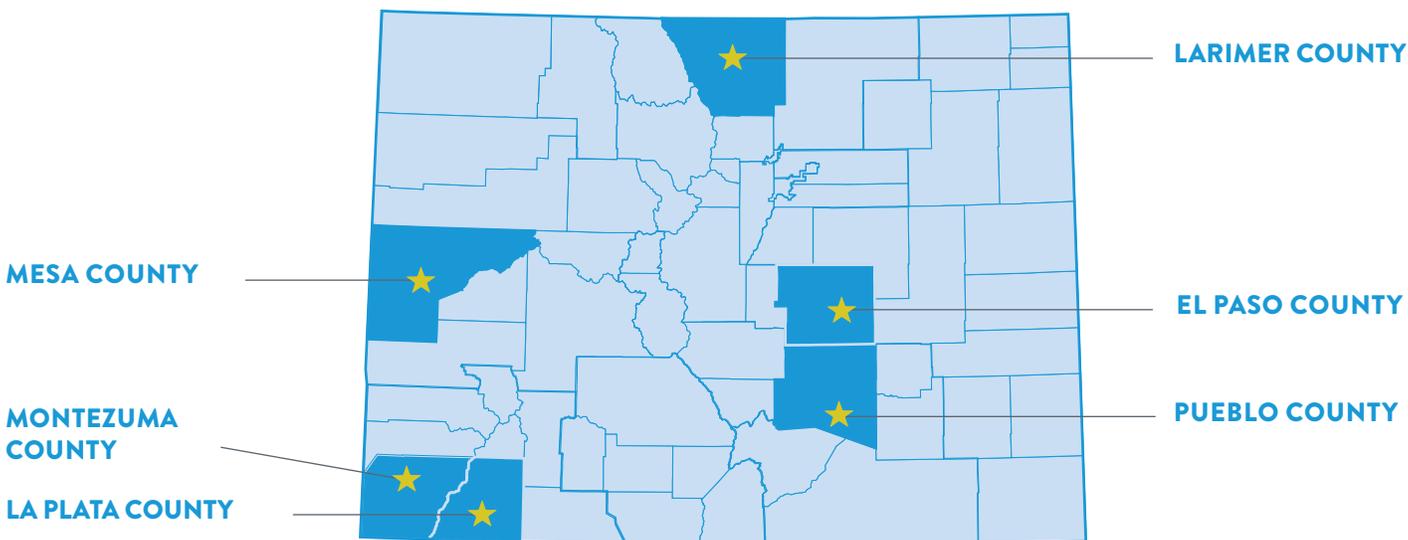
- Centers for Disease Control and Prevention
- Injury Control Research Center for Suicide Prevention
- National Action Alliance for Suicide Prevention
- Substance Abuse and Mental Health Services Administration
- Suicide Prevention Resource Center
- American Foundation for Suicide Prevention
- Education Development Center



STATE PARTNERS

- Office of Suicide Prevention, Colorado Department of Public Health and Environment
- Colorado's Suicide Prevention Commission
- Rocky Mountain Mental Illness Research, Education and Clinical Center at the Denver Veterans Administration Medical Center
- Governor's Office
- Colorado Behavioral Healthcare Council
- Colorado School of Public Health
- University of Colorado Depression Center
- University of Colorado Hospital and School of Medicine

LOCAL PARTNERS



¹ Centers for Disease Control and Prevention, National Center for Health Statistics, CDC WISQARS Online Database

Information on Colorado's suicide prevention efforts and resources can be found at www.coosp.org.



GOALS AND TASKS

In alignment with the Colorado Plan for Suicide Prevention, the National Action Alliance for Suicide Prevention, and the American Foundation of Suicide Prevention, *the goal of the CNC is to create a comprehensive suicide prevention model to reduce suicide statewide by 20 percent by 2024.*

The CNC defines a comprehensive model for suicide prevention as a public health approach that is data driven and prioritizes promising programs, practices and policies for populations and settings across all age groups to include individuals, families, communities and systems.

The process of assessing Colorado's needs and activities, creating a comprehensive approach to prevention, building county- and state-level capacity to implement chosen strategies, and sustaining and replicating the CNC process includes:

Assessment:

- Colorado counties with high numbers and rates of suicide were identified including demographic information (e.g., age, gender, county of residence, method, occupation) and other circumstances surrounding suicide deaths. The Colorado Department of Public Health and Environment's data dashboard can be found [here](#).
- Six counties (Montezuma, La Plata, Pueblo, El Paso, Mesa, and Larimer) have joined the CNC partnership, and include both rural and urban communities that cover approximately 24 percent of the total population of Colorado.
- In 2018, Over 100 agencies participated in a CNC Environmental Scan conducted for each of the 6 participating counties to learn more about existing prevention efforts among community based organizations.

Planned Strategies:

- National, state, and local county partners, including individuals with lived experience of suicide loss or attempts, helped identify six community strategy components that make up the CNC comprehensive approach.

COLORADO-NATIONAL COLLABORATIVE



CONNECTEDNESS



ECONOMIC
STABILITY AND
SUPPORTS



EDUCATION
AND
AWARENESS



ACCESS
TO SAFER
SUICIDE CARE



LETHAL
MEANS
SAFETY



POSTVENTION

1

2

3

4

5

6

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COLORADO
Department of Public
Health & Environment

CNC PILLARS FOR SUICIDE PREVENTION



CONNECTEDNESS

CNC PILLAR 1: CONNECTEDNESS

Connectedness is the degree to which an individual or group of individuals are socially close, interrelated, supportive, or share resources. Social and structural connectedness can be formed within and between individuals,

families, schools, neighborhoods, workplaces, faith communities, cultural groups and society as a whole.

Strategies include policies and programs that promote behavioral health, social and emotional learning starting in elementary school, promotion of web-based resources, workplace policies that support inclusion, and other community engagement events and activities.



ECONOMIC STABILITY AND SUPPORTS

CNC PILLAR 2: ECONOMIC STABILITY AND SUPPORTS

Economic stability and supports refers to the level of economic resources and the degree of equity in the distribution of resources among individuals and communities. These

supports may include the benefits resulting from laws and policies; improving available childcare and school options; adequate employment and living wages; access to housing, transportation and education.

Strategies in this category address financial stress, which is a risk factor for suicide, and include policies and practices for increased food security; affordable housing; family-friendly employment; and access to affordable, quality child care.



EDUCATION AND AWARENESS

CNC PILLAR 3: EDUCATION AND AWARENESS

By implementing education and awareness efforts, community members, providers and other professionals will increase their knowledge and skills and improve their

beliefs and attitudes about suicide, including that suicide attempts and deaths are preventable.

Key focus areas for training include high-risk industries, social service organizations, the legal and judicial community, faith organizations, veteran-serving organizations, LGBTQ+-serving organizations, youth-serving organizations, and older adult-serving organizations. Work will also include leveraging

existing messaging and awareness campaigns, and partnering with local community organizations to develop robust and comprehensive policies and protocols to promote wellness and address intervention efforts.



ACCESS TO SAFER SUICIDE CARE

CNC PILLAR 4: ACCESS TO SAFER SUICIDE CARE

By implementing best practices for safer care, health care systems and organizations will see improvement in quality of patient care and reduction of suicide risk, attempts, and deaths for those within their system.

Strategies include the seven Zero Suicide elements described previously and additional strategies for primary care, mental health centers, behavioral health and substance use disorder treatment agencies, hospitals, and emergency departments.



LETHAL MEANS SAFETY

CNC PILLAR 5: LETHAL MEANS SAFETY

Common across all six communities is the commitment to data-driven strategies, including those that address the means most frequently used in suicide deaths and attempts. Strategies include reinforcing safe storage practices (of firearms and lethal

medications and poisons) through public messaging, expansion of the Colorado Gun Shop Project, and provider training.



POSTVENTION

CNC PILLAR 6: POSTVENTION

Postvention is the response to and care for individuals and communities affected in the aftermath of a suicide attempt, crisis, or death. Examples of postvention include safe reporting and messaging about suicide by the media and by or within affected

organizations. It also includes caring follow up contacts after a suicide attempt or mental health crisis, such as the Colorado Follow-Up Project. Key strategies will ensure that communities are mobilized to support survivors of suicide loss, that positive messaging is guided by lived experience, and that safe messaging resources are available to a variety of organizations.

CNC NEXT STEPS

The next steps include efforts to facilitate and strengthen coordinated comprehensive suicide prevention efforts across the counties and communities that align with the Colorado Plan for Suicide Prevention. As a condition, CNC local partners have identified local capacity-building and adequate funding as a priority to implement and evaluate CNC strategies across all six counties. To be comprehensive, each of the six pillars must be fully funded and implemented throughout the community.

As strategies are funded and implemented, the CNC will also systematically evaluate the methods and community-based processes that support quality improvement efforts. This will require assessment of partnership and capacity development, community readiness, education and awareness, and other local community team and coalition-led efforts that demonstrate saved lives.

