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**Testimony in Support of House Bill No. 2308
Gordon's Gift
concerning suicide evaluation upon admission to certain treatment facilities**

**Presented to the House Committee on Federal and State Affairs
By Monica Kurz, BA
Headquarters, Inc, Director Kansas Suicide Prevention Resource Center**

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Chairman Barker and honorable members of the Committee on Federal and State Affairs:

Thank you for hearing testimony today in support of Gordon's Gift. I present testimony in support of this legislation requiring suicide screening upon admission to inpatient mental health and substance use facilities. The correlation between suicide and substance use has been well-documented and addressing suicide risk for people while in inpatient settings is an important step to addressing the public health crisis of suicide in Kansas.

I am the Director for the Kansas Suicide Prevention Resource Center program at Headquarters, Inc. Headquarters, Inc is the suicide prevention leader in Kansas, providing counseling, education and resources for all to improve public health. At Headquarters, Inc, we work to address the public health problem of suicide through a variety of means including providing 24-hour, suicide crisis phone line support to all 105 counties in Kansas. The Kansas Suicide Prevention Resource Center (KSPRC) provides information and training to lay-people, mental health and substance use treatment professionals, school personnel, and community leaders across the state to strengthen response to suicide risk for all Kansans. This work is in support of the second goal for the Kansas Suicide Prevention Plan (2014) which reads:

*“Increase the prevention, intervention and management training of personnel in **mental health, behavioral health**, education, law enforcement and primary care fields.”*

The Kansas Prevention Collaborative which operates through financial and organization support of the Kansas Department of Aging and Disability Services is a statewide behavioral health prevention coalition which works to support local efforts to prevent alcohol, substance, tobacco use, problem gambling, suicide and other risky behaviors in Kansas communities. The KSPRC works through the Kansas Prevention Collaborative to disseminate information about the link between alcohol/substance use and suicide since research indicates **many shared risk factors between substance use and suicide** including: mood disorders (e.g. depression, anxiety, bipolar disorder), childhood traumatic experiences, unemployment, positive familial attitudes about substance use and others. Prevention science tells us that addressing shared risk factors and increasing shared protective factors will decrease both suicide and substance abuse in the population.

The KSPRC also understands that primary prevention efforts like those of the Collaborative are not enough on their own to address the prevalence of suicide in our State. It is imperative that suicide risk is

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being addressed through targeted interventions with **high risk populations like those who use illicit substances and alcohol**. To support this effort, the KSPRC has developed and will be offering a training free to substance use treatment providers on addressing suicidal thoughts and behaviors in the context of treatment settings. This training has been made possible through support from KDADS. This means that a mechanism for supporting staff at treatment facilities to be “knowledgeable about suicide risk management” will be in place this spring (2018).

As stated previously, targeting interventions to high-risk populations is an essential component of suicide prevention and suicide death reduction in Kansas. People seeking treatment for substance use are among those at highest risk of suicide. Suicide is the leading cause of death among people who abuse alcohol and other drugs, in fact, those who are dependent on alcohol are at a **10 times greater risk for suicide** than the general public; those who use drugs intravenously are at **14 times greater risk** (Wilcox et al., 2004). People often seek inpatient substance use treatment when their substance use issues are at their peak since this is a vulnerable time, seeking treatment often coincides with treatment seekers experiencing suicidal thoughts and behaviors (SAMHSA, 2009, p. 9).

Co-occurrence of substance use disorders and mental health disorders is a particularly high-risk combination for suicide. According to the SAMHSA publication on Behavioral Health in the United States, in 2012, 0.5% of adults made a suicide attempt compared to 5.4% of adults with co-occurring mental illness and substance use disorders (2013). Requiring standard screening for suicide within inpatient settings is a powerful way to identify patients who are experiencing thoughts of suicide or life-events that may contribute to these thoughts. It would allow identification of individuals who are at risk who might otherwise go **unnoticed**. In fact, use of a well researched screening tool like the Columbia Suicide Severity Rating Scale (C-SSRS) has the effect of providing treatment providers with consistent information, establishing standard thresholds for suicide risk and enables treatment providers across settings to communicate with shared language about the risk for suicide of an individual patient. This is particularly important because research has shown that the time following discharge from inpatient psychiatric or substance use treatment is particularly high (Crawford, 2004; Merall, et al., 2012). One study showed that **43%** of suicides for the study population occurred **less than one month after discharge** from a psychiatric inpatient treatment facility (Hunt, et al. 2009). This study added to the overwhelming evidence, that to stop suicides for people with mental health and substance use disorders care needs to be taken with identifying suicide risk, so proper follow-up referrals and contacts can take place.

Gordon’s Gift is a positive step forward for the Kansas State Suicide Prevention Plan and the health of the State of Kansas. Ensuring that those seeking inpatient treatment for mental health or substance use disorders have the proper screening and monitoring for suicide risk is a powerful step towards protecting those most vulnerable to suicide. Intense risk for suicide is often short-lived and manageable when professionals have the knowledge they need to recognize and reduce risk. Lives can be saved. Gordon’s Gift can help save those lives.