Suicide Prevention Leadership in Texas

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Texas houses suicide prevention in the Health and Human Services Commission’s Office of Mental Health Coordination. In 2003, Texas Health and Safety Code 533.040 [1](c) created a school suicide prevention liaison. A bill was passed in 2015 to increase the visibility and focus of the liaison, and the position became the state’s suicide prevention coordinator. This position now serves as the suicide prevention team lead.

The Texas suicide prevention team has grown over time and now includes the following:

- a Zero Suicide Safer Care coordinator who works with 39 community mental health centers and the state hospital system
- a suicide prevention specialist who focuses on K-12 behavioral health coordination and suicide prevention
- an epidemiologist/suicide prevention policy, programs and outcomes specialist who focuses on upstream prevention and analysis of program data
- a youth suicide prevention specialist who serves as the project director for a suicide prevention and early intervention federal grant
- a veteran’s mental health and suicide prevention coordinator who writes and maintains the Texas veteran suicide prevention action plan that was mandated through Texas Senate Bill 578 [2]

Suicide prevention in Texas is also guided by state-level groups that bring public agencies and private partners together to support suicide prevention. The Texas Suicide Prevention Council provides guidance on the state’s suicide prevention plan. The Texas Behavioral Health Advisory Committee and the Statewide Behavioral Health Coordinating Council ensure that the Statewide Behavioral Health Strategic Plan, which includes content on suicide prevention and early intervention, is implemented and monitored.

To connect state-level oversight to local efforts, the Health and Human Services Commission directs Local Mental Health Authorities (LMHAs), which cover 254 counties. To ensure that enough local staff time, skills, and resources are dedicated to suicide prevention, each LMHA is required to have a suicide prevention coordinator who leads
suicide care best practices and participates in a local suicide prevention coalition. These LMHAs and coalitions are encouraged to collaborate with drug and alcohol councils and substance abuse prevention coalitions to address shared risk factors whenever grant funds or trainings are provided by the Texas Health and Human Services Commission.

The strong presence of both state and local staff dedicated to suicide prevention, as well as emphasis on collaboration at the state and local levels, have enabled Texas to understand, respond to, and address suicide prevention and related needs throughout this large and diverse state. The connections made through the councils, committees, and LMHAs ensure that all Texas communities have clear leadership and direction in suicide prevention.

Learn how your state can develop similar infrastructure and read additional examples by visiting the Lead [3] essential element of SPRC’s State Infrastructure Recommendations.

Links within this resource

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