Goals

- Participants will be able to describe key components of CSKT Health Department Suicide Response
Background

- CSKT received grant to prevent suicide
  - Previously the grant was with the Social Services department
  - Later it was transferred to Tribal Health to improve coordination between the prevention, intervention, treatment and post-vention.
- From November 2016 through September 2017, we experienced a suicide cluster. While we reached far and wide for assistance, in the end lessons we already knew were affirmed.

With GLS support several different components were implemented
- How to gather the response team.
- Plan response
Response Team

- CISM trained individuals and others within Tribal Health (TH)
  - Behavior Health Division staff
  - Nursing Division Staff
  - Health and Wellness Division Staff
- Leadership
  - CSKT Tribal Council Member
  - Tribal Health Department Head
  - TH Director of Operations
- Community members
- Reason to Live Native (GLS Grantee)
- Cultural advisors
Immediate Response Plan

- Behavior Health Division Director’s responsibilities:
  - Identify the cause of death
  - Time of death
  - Location
  - Risk history
  - Lethal means
  - Critical Incident Support Intervention with schools and tribal programs
  - Walk-in therapy for Behavioral health and medical providers

- Reason to Live Native (GLS) responsibilities:
  - Psychological mapping
  - Schools support
  - Provide community conversations
  - Searching social media
  - Check-in with staff
Immediate Response Plan

- Community Member
  - Lead community conversation
- Cultural advisors
  - Ensure that we are honoring CSKT cultural and family rituals and services
  - Check-in with staff
- Environmental Preparedness
  - Public safety
- Leadership
  - Human Resource Dept. contact Employee Assistant Program (EAP)
  - Reach out to Tribal Council
  - Approves staff training
  - Identify central point of contact for public information
  - IHS deployment to support our staff
After planning

- **Trainings**
  - QPR
  - ASIST
  - Mending Broken Hearts (Grief counseling)
  - Mental Health First Aid
  - Compassion Fatigue

- **Reduction of lethal means**
  - Distribute Gunlocks with education
  - Distribute DETERRA medication disposal
  - Clinical assessment

- **Cultural component:**
  - Community members: based on cultural and family rituals
  - Response team: Healing the Healer lead by cultural advisor

- Cultural component:
After planning cont.

- Encourage an official response from the CSKT Tribal Council
- Reviewed walk-in mental health clinic for accessibility
- Critical Incident Support Intervention with schools and tribal programs.
- Promoted 1-800 number as well as text line using multi media
- Check-in with survivors of suicide
- Review of literature in relation to suicide response and suicide clusters
- Community conversations to get input on response
Community Conversation

- Safe place for kids
- Afterschool programming
- Sexual abuse/sexual assault healing training
- Community intervention
- Community dinners
- Life skills training
- Bullying policy
- Leadership statement
- Summer Youth Leadership Program
Suicide Prevention Groups

- Groups formed throughout the reservation in response to the suicides
  - Return to the Homeland walk
  - Community lead candlelight vigils
  - Wrapped in Hope: Survivors of Suicide
  - Arlee Warriors Basketball team: Warrior Movement
  - Community based suicide awareness group
Pearls of Wisdom

- Trust your instincts
- Be kind to each other.
- Serve a lot of food.
- Honor your tribal traditions and ways.
- Be flexible.
- Be ready for your team to fall apart as the work is hard, so don’t blame each other. There will be lots of anger and shame but stay true to your feelings.