



Tulare County  
Suicide Prevention Task Force (SPTF)

# Suicide Prevention Plan

2022-2025





### Are you concerned for someone else?

Pain isn't always obvious. Reach out to someone you are concerned about if you observe one or more of these warning signs, especially if the behavior is new, has increased or seems related to a painful event, loss, or change.

#### Warning signs to look for:

- Talking about wanting to die or suicide
- Looking for a way to kill themselves
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Reckless behavior
- Uncontrolled anger
- Increased drug or alcohol use
- Withdrawal
- Anxiety or agitation
- Changes in sleep
- Sudden mood changes
- No sense of purpose

If you are concerned about someone, trust your instincts. Reach out and ask:

**"Are you thinking about suicide?"**

If you think the person is suicidal, take it seriously. Don't leave them alone. Call the National Suicide Prevention & Mental Health Crisis Lifeline at **9-8-8** at any time for assistance or call **9-1-1** for life-threatening emergencies.

If you are concerned about someone, trust your instincts. Reach out and ask a direct question:

**"Are you thinking about suicide?"**

Talking about suicide does not put the idea in someone's head and usually they are relieved. Asking directly and using the word "suicide" establishes that you and the person at risk are talking about the same thing and lets the person know that you are willing to talk.

If you think the person is suicidal, take it seriously. Don't leave them alone. Call the National Suicide Prevention Lifeline at **9-8-8** at any time for assistance or call **9-1-1** for life-threatening emergencies.

## GET HELP NOW

Trained support is available 24 hours a day, 7 days a week.

### Tulare County (24/7)

1-800-320-1616

### 211 Tulare County

Dial 2-1-1

<https://www.211tularecounty.org/>

Text **HOME** to 741741

### Tulare County Warm Line (24/7)

1-877-306-2413

### National Suicide Prevention & Mental Health Crisis Lifeline (24/7)

Dial 9 - 8 - 8

9 - 1 - 1 for life threatening emergencies

### Veterans National Lifeline

1-800-273-8255 (press 1)

### Trevor Project

1-866-488-7386

or text **START** to 678678

### Teen Line

1-310-855-4673

or text **TEEN** to 839863

### Trans Lifeline

1-877-565-8860

# Introduction and Acknowledgements

## Voting Member Categories

Aging Services

Community at large

Community-Based Mental Health

Consumers/Family

Education

Faith-Based Organizations

Law Enforcement

LGBTQ

Media

Tulare County Human Services

Tulare County Medical Society

Tulare County Mental Health

Tulare County Public Health

Survivors of Loss

Veterans

Youth/Young Adults/TAY

The following Suicide Prevention Strategic Plan is intended to provide a broad audience with resources and strategies to prevent suicide in our community. The Tulare County Suicide Prevention Task Force (SPTF) developed this plan by reviewing suicide data, convening SPTF members, gathering input from the community, and with support from California's Mental Health Services Oversight and Accountability Commission. Suicide data specific to Tulare County was reviewed to better understand its impact by geographic region and city, ethnicity, gender, age, and primary method.

Lastly, the plan concludes by outlining specific strategies that can be implemented to prevent suicide and additional local and national resources. Strategies and goals are based on the SPTF's mission and vision, its guiding principles, and the reviewed data.

The SPTF is fully funded by the Tulare County Mental Health Services Act: Prevention and Early Intervention Plan. The SPTF functions as a multi-disciplinary collaborative, combining representatives from government, education, community-based service providers, and community members. Training, activities, and education are provided throughout our community to increase awareness of the signs and symptoms of suicide risk as well as prevention and early intervention best practices.

The mission of the SPTF is to foster the hope of a suicide-free county through education, empowerment, and innovation. The SPTF's vision is a county without suicide. SPTF will accomplish this by implementing a full range of strategies, starting from prevention and early intervention, which will be provided to all at-risk Tulare County residents with targeted programs addressing population-specific needs. Communities need prevention services to promote health and address problems long before they become acute, to effectively reduce suicides and suicidal behavior. Communities need a coordinated system of services to effectively respond to crisis situations. The guiding principles of the SPTF are:

- To promote effective clinical and professional practices.
- To strengthen and enrich current programs and interventions.
- To develop and implement suicide prevention programs.
- To ensure the community is aware of the services and how to access them.
- To improve and expand data collection systems

Tulare County's Strategic Plan aligns with California's Strategic Plan for Suicide Prevention Striving for Zero. *Striving for Zero: California's Strategic Plan for Suicide Prevention 2020–2025* was adopted in November 2019 and can be viewed or downloaded in [English](#) and [Spanish](#).

# Suicide in Our Community

The problem of suicide is complex, and effective suicide prevention requires a combination of efforts working together to address different aspects of the problem. A public health approach is comprehensive, including a range of strategies at the population, community, and individual levels to help prevent problems from occurring and address access to effective care when problems do occur. Programs that have taken the public health approach to suicide prevention have demonstrated reductions in suicidal behaviors as well as other negative outcomes.

**THE SUICIDAL CRISIS PATH MODEL** helps conceptualize a public health approach within the context of an individual's suicidal experience. It provides a framework to match strategies and interventions that would help prevent suicide at each stage of the crisis pathway. For example, at the population level we can enhance life skills and coping skills to increase protective factors.

The following nine strategies adapted from the Suicide Prevention Resource Center (SPRC) form a comprehensive approach to suicide prevention. Each can be advanced through an array of possible activities (i.e., programs, policies, practices, and services).

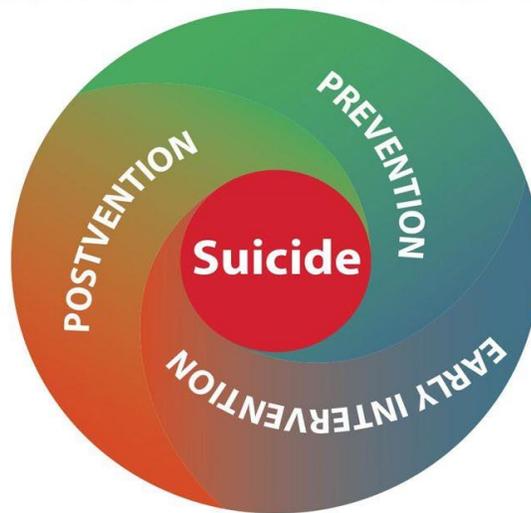
1. Enhance life skills and resilience.
2. Promote social connectedness and support.
3. Increase help-seeking.
4. Identify and assist persons at risk.
5. Ensure access to effective mental health and suicide care and treatment.
6. Respond effectively to individuals in crisis.
7. Support safe care transitions and create organizational linkages.
8. Provide for immediate and long-term postvention.
9. Reduce access to lethal means and promote means safety.

**CONTINUUM OF INTERVENTIONS:** When combining the SPRC's Comprehensive Approach to Suicide Prevention with the Suicidal Crisis Path, we can begin to identify what potential programs and interventions to implement and how they can be most effective.



The Suicidal Crisis Model along the Continuum of Interventions. Image created by San Mateo County Suicide Prevention Roadmap with support from Your Social Marketer, Inc. Based on Suicide Prevention Resource Center Comprehensive Approach to Suicide Prevention and the Suicidal Crisis Path Model developed by Lezine, D.A. & Whitaker. N.J., published in Fresno County’s Community-Based Suicide Prevention Strategic Plan, 2018

## Continuum of Suicide Prevention



**Prevention:** A collection of efforts and protective strategies/factors to reduce the risk of suicide with individuals, families, and communities.

**Intervention:** An effort to prevent individuals from attempting to take their own life intentionally and offer a continuum of supports for individuals after a suicide attempt.

**Postvention:** An intervention conducted after a suicide, largely taking the form of support for the bereaved (family, friends, professionals, and peers). An act with the objective of alleviating different stressors and helping survivors cope with their loss.

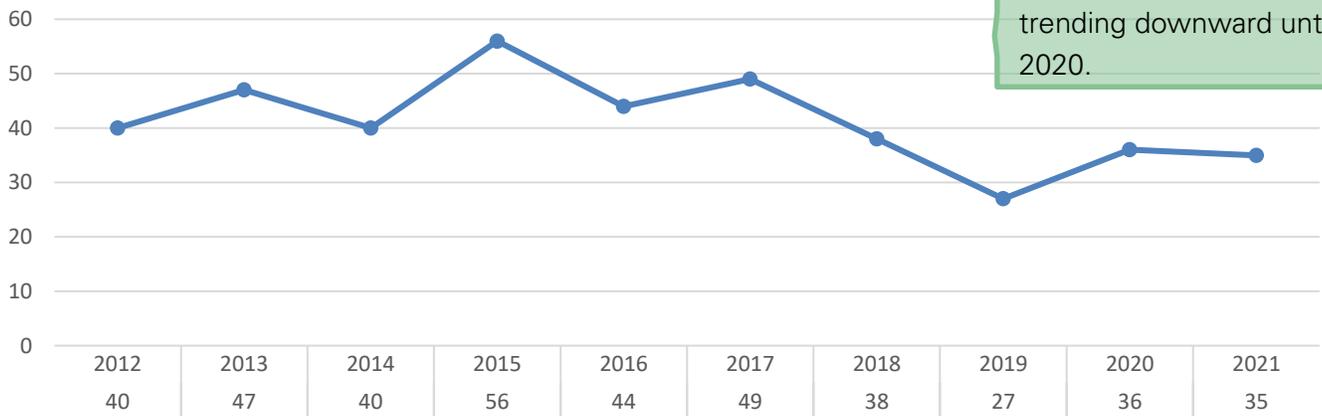
# Suicide Data Summary

Data from the Tulare County Coroner’s Office, Healthy Kids Survey, and Visalia Youth Services risk screening data and a community strategic planning survey were used to understand the problem of suicide in Tulare County. While some data limitations exist (such as limited demographic factors for suicide deaths and lag in suicide ideation and attempt data), these data can help identify populations most at risk for suicide. Key data and findings are presented on this and the following two pages.

## Suicide Deaths

The Coroner’s Office collects all death data, including deaths by suicide. Analysis of the data indicate that over the past 10 years, suicide deaths have trended downward. The most common means used were firearms and ligature. The numbers of suicide deaths were highest for Whites and Hispanics, males, and individuals aged 20 to 39.

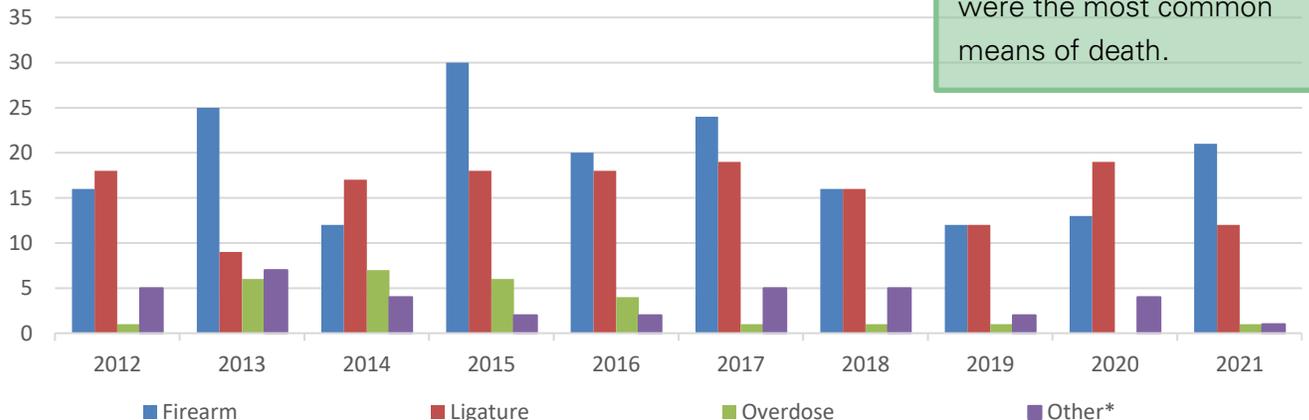
Figure A. Number of Suicide Deaths by Year: Tulare County 2012-2021



**Key Finding:**  
Death by suicide was trending downward until 2020.

Source: Tulare County Coroner's Office

Figure B. Number of Suicide Deaths by Means: Tulare County 2012-2021



**Key Finding:**  
Firearms and ligature were the most common means of death.

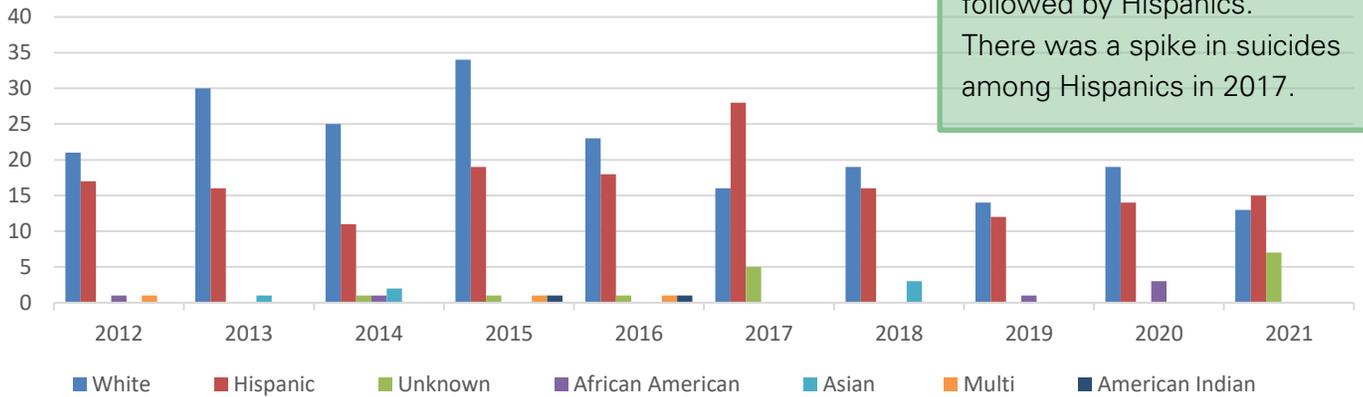
Source: Tulare County Coroner's Office

\*Includes small number of cutting, jumping, poison, suffocation, other, and unknown.



Figure C. Number of Suicide Deaths by Race/Ethnicity: Tulare County 2012-2021

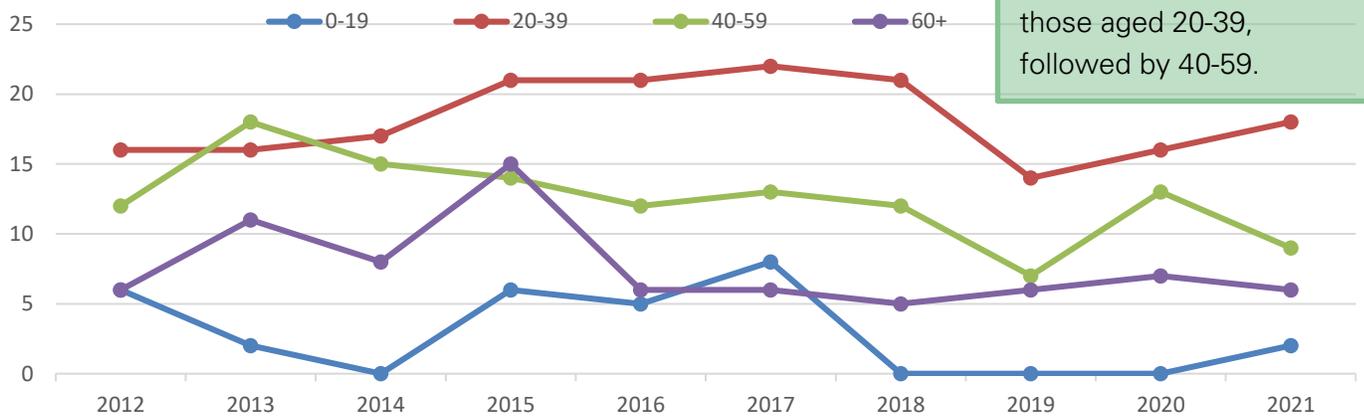
**Key Finding:**  
A majority of deaths were among White individuals followed by Hispanics. There was a spike in suicides among Hispanics in 2017.



Source: Tulare County Coroner's Office

Figure D. Number of Suicide Deaths by Age Group: Tulare County 2012-2021

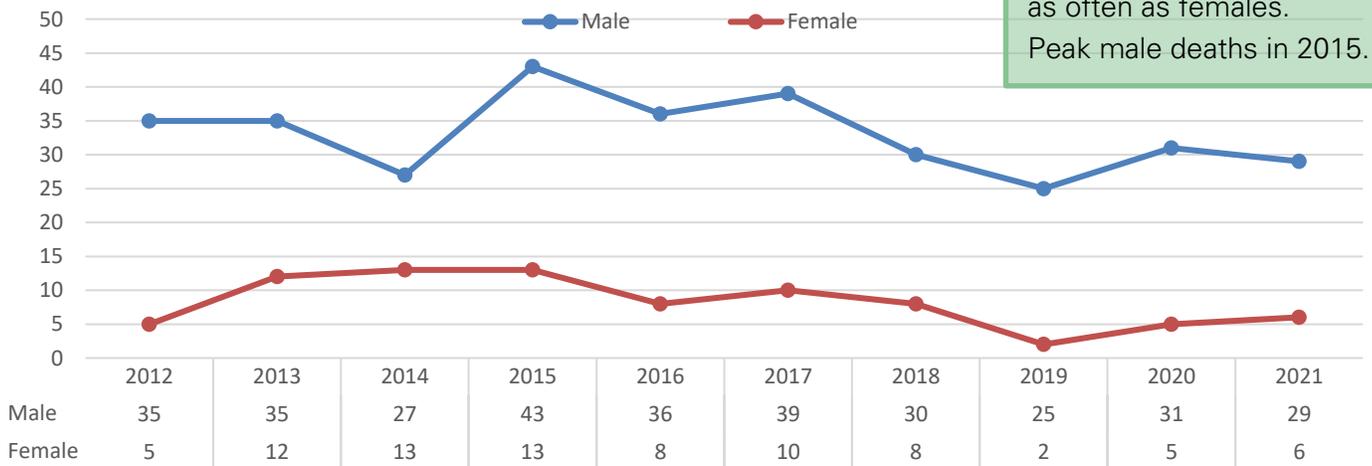
**Key Finding:**  
Starting in 2014, the most deaths were among those aged 20-39, followed by 40-59.



Source: Tulare County Coroner's Office

Figure E. Number of Suicide Deaths by Sex: Tulare County 2012-2021

**Key Finding:**  
In the past ten years, males died by suicide four times as often as females. Peak male deaths in 2015.



Source: Tulare County Coroner's Office

# Suicide Ideation

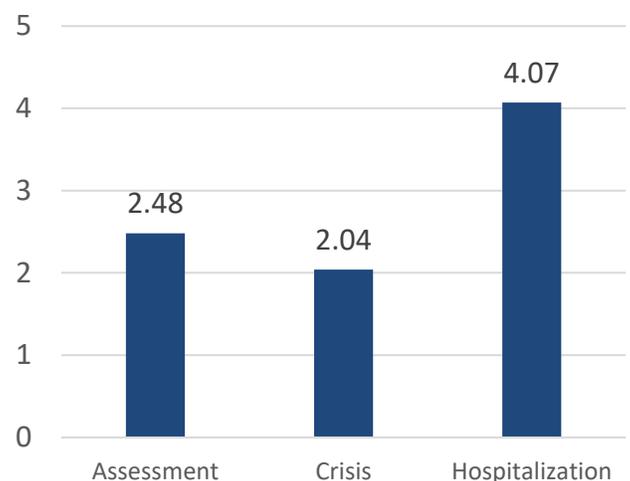
Two data sources were used to understand suicide ideation: the California Healthy Kids Survey (CHKS) and data from Visalia Youth Services' (VYS) use of the Columbia Suicide Severity Rating Scale (C-SSRS). For schools which participated in the CHKS survey, between 14% and 18% of students had seriously considered suicide in the previous 12 months, and between 25% and 33% indicated that sometime in the previous 12 months they had felt sad or hopeless almost every day for two weeks. Furthermore, among students who were assessed by VYS, those who were not "in crisis" had greater suicide severity ratings than those who were (2.48 vs 2.04).

**Table 1. Percent of students reporting suicide ideation and sadness or hopelessness, by year and grade.**

	7 <sup>th</sup> Grade	9 <sup>th</sup> Grade	11 <sup>th</sup> Grade
<b>During the last 12 months, did you ever seriously consider suicide?</b>			
2013-2015	--	18%	17%
2015-2017	--	15%	14%
<b>During the last 12 months, did you ever feel sad or hopeless almost every day for two weeks or more that you stopped doing some usual activities?</b>			
2013-2015	25%	30%	33%
2015-2017	26%	29%	29%

Source: Healthy Kids Survey  
 "--" indicates no data available.

**Figure F. Suicide ideation score according to type of intervention designation: Visalia Youth Services 2020-2021**



Source: Visalia Youth Services C-SSRS

# Community Strategic Planning Survey 2021

In November and December 2021, a link to an online needs assessment survey was sent to the SPTF’s email list of more than 150 people who have done work related to suicide prevention or expressed an interest in it. They were also encouraged to forward the survey to others. Thirty-eight (38) individuals completed the survey. They include 24 mental health professionals, 7 individuals who work in community-based organizations, 7 who work with youth, 6 who survived a suicide attempt or suffered a suicide loss, 5 who work with the aging, 5 who work in the area of substance use, 3 who work in K-12 education, and 2 who work in higher education.

The survey asked a wide variety of questions. They include what suicide-related trainings or presentations they or their organizations have provided or participated in, whether they or their organizations use a suicide screening tool and which one they use, whether they are aware of resources for individuals who have attempted suicide (including specific resources), whether they are aware of resources for people who have lost someone to suicide, and whether they are aware of means restriction or means safety efforts.

One question asked respondents to prioritize 11 possible areas of focus for the SPTF: “Recognizing that all of these priority areas are important, please identify which, in your opinion, should be prioritized to reduce suicide in our county? (Identify your top three priorities.)” The table below shows the top five priority areas selected, with the percentage who selected the areas as a priority shown in the right-hand column.

**Table 2. Top Five Priority Areas Identified by Survey Respondents**

Priority Area	Percentage Who Selected the Area
1. Preparing community members to <b>recognize warning signs and intervene</b> with a loved one.	<b>66%</b>
2. Identifying <b>individuals at risk</b> of suicide effectively and <b>referring them to care</b> in the least restrictive setting possible.	<b>58%</b>
3. Supporting <b>districts and schools</b> with implementing suicide prevention policies and programs.	<b>47%</b>
4. Reducing <b>stigma</b> among residents that prevents help-seeking.	<b>45%</b>
5. <b>Supporting individuals after a suicide attempt.</b>	<b>42%</b>



# Summary of Strategic Plan Goals

SPTF members used the needs assessment survey results as well as other data to develop the goals and objectives in this Suicide Prevention Plan. The SPTF has identified unique goals for each of the continuum of suicide prevention paths as well as goals to support efforts across the continuum. They are listed below.

## Prevention

**Goal 1:** Increase community protective factors and knowledge of the warning signs.

**Goal 2:** Support districts and schools in implementing comprehensive suicide prevention policies and programs in the school setting.

## Intervention

**Goal 3:** Improve the availability and accessibility of timely services and supports for people experiencing suicidal ideation or behavior.

**Goal 4:** Expand community response and support services after a suicide attempt.

**Goal 5:** Create safer environments by reducing access to lethal means.

## Postvention

**Goal 6:** Continue to support and grow the Local Outreach to Suicide Survivors (LOSS) Team.

**Goal 7:** Provide supportive services to those affected by a suicide loss.

## To Support Efforts Across the Continuum of Suicide Prevention

**Goal 8:** Increase community leadership within the SPTF.

**Goal 9:** Increase the visibility of the SPTF and of the available resources.

**Goal 10:** Strengthen the data surveillance systems.



# Prevention

With education and support, anyone can recognize the warning signs of suicide and can learn to communicate effectively with people at risk to determine the type of support needed. Programs and partnerships that enhance connections between providers in different settings and ensure that people are aware of the resources that are available can empower people at risk to recognize their personal warning signs and identify coping strategies and a supportive social network.

## Goal 1: Increase community protective factors and knowledge of the warning signs.

**Objective 1.1:** Continue to support and expand gatekeeper and professional trainings. Assess for any gaps in populations served and expand trainings as needed.

**Objective 1.2:** Develop a strategy to promote trainings, including posting on the SPTF website and other social media platforms.

**Objective 1.3:** Continue to implement a public media campaign to raise awareness of the warning signs of suicide.

**Objective 1.4:** Continue mental health awareness efforts such as Mental Health Awareness Month and Suicide Prevention Week, and promote mental health and wellness through outreach and events.

## Goal 2: Support districts and schools in implementing comprehensive suicide prevention policies and programs in the school setting.

**Objective 2.1:** Partner with the Tulare County Office of Education to assess how districts and schools are aligning with policy mandates for implementing suicide prevention, intervention, and postvention efforts.

**Objective 2.2:** Continue to provide school districts and their schools access to gatekeeper trainings (Applied Suicide Intervention Skills Training, Mental Health First Aid, SafeTalk), risk assessments, re-entry protocols after a suicide attempt, training opportunities for youth, and parent engagement.

**Objective 2.3:** Increase awareness of youth protective factors and warning signs by supporting suicide awareness and prevention campaigns such as the Slick Rock Film Festival and peer-based clubs.

# Intervention

Risk for suicide can be decreased by reducing environmental threats to safety while building individual, family, and community resiliency. Eliminating or reducing access to lethal means creates time and opportunity for intervention during what are often transient crises.

For each strategic plan goal, a series of objectives is identified and listed below. Crisis services and support also can assist with assessing for suicide risk and connection to services and must be widely available, accessible, and varied to benefit the diverse range of people in need of help. For each strategic plan goal, a series of objectives is identified and listed below.

## Goal 3: Improve the availability and accessibility of timely services and supports for people experiencing suicidal ideation or behavior.

**Objective 3.1:** Promote best practices in screening, risk assessment, and safety planning by continuing to provide evidence-based training to providers in key settings and schools to increase the consistency of care.

**Objective 3.2:** Support schools and organizations with the implementation of C-SSRS across all county systems by providing training and information regarding the tool.

**Objective 3.3:** Continue to support programs that strengthen protective factors and reduce risk factors for populations at disproportionate risk for suicide, such as the following:

DRAW Program	<ul style="list-style-type: none"><li>• Depression Reduction and Achieving Wellness is a program aimed at reducing the amount of depression and suicide risk in students age 18 and older in Tulare County with activities in the natural setting of college campuses and vocational schools.</li></ul>
The Source LGBTQ+ Center	<ul style="list-style-type: none"><li>• Offers over 20 programs that support our LGBTQ+ community. Mental health, HIV services, Drop-In Center, youth support, trans resources, HIV testing, The Source food pantry, etc.</li></ul>
TYSB Out Loud Group	<ul style="list-style-type: none"><li>• A peer-led support group for teens who identify as lesbian, gay, bisexual, transgendered or questioning (LGBTQ), have parents who are LGBTQ, or are supportive allies.</li></ul>
Attempt Survivor Peer Support Group	<ul style="list-style-type: none"><li>• A monthly group facilitated by a licensed clinician and a survivor of a serious attempt. This is not a therapeutic group but is intended to create a peer network of support for those who have survived suicidal thoughts and actions. It is a place to connect and find hope.</li></ul>
SOSL (Survivors of Suicide Loss) Peer Support Group	<ul style="list-style-type: none"><li>• A monthly peer support group to help cope with the ever-changing mix of emotions we grapple with after losing someone to suicide. Participants are encouraged to share and to discuss their changing feelings while taking the healing journey.</li></ul>



## Goal 4: Expand community response and support services after a suicide attempt.

**Objective 4.1:** Evaluate the usefulness and effectiveness of suicide attempt support groups and create recommendations to further support and increase the groups.

**Objective 4.2:** Increase awareness and availability of suicide attempt resources after hospitalization by expanding the voucher program to include those who have insurance and are not able to connect to private providers.

**Objective 4.3:** Collaborate with local medical providers and hospitals to better understand how they conduct follow-up after an attempt. Work with them to develop and provide additional resources, support, and information.

## Goal 5: Create safer environments by reducing access to lethal means.

**Objective 5.1:** Promote trainings such as Counseling on Access to Lethal Means to mental health, substance use, and health care providers.

**Objective 5.2:** Collaborate with and support hospitals to ensure that lethal means counseling is provided at discharge.

# Postvention

Supporting those who have lost a loved one after a suicide is an effective way to prevent future suicide. The SPTF recognizes the success of the Local Outreach to Suicide Survivors (LOSS) Team, counseling, and peer support groups. These supports must continue and be further strengthened. For each strategic plan goal, a series of objectives is identified and listed below.

## Goal 6: Continue to support and expand the LOSS (Local Outreach to Suicide Survivors) Team.

**Objective 6.1:** Increase the membership of the LOSS Team through outreach to community partners and the community at large.

**Objective 6.2:** Continue to provide professional opportunities and training for LOSS Team members to help them implement best practices.

**Objective 6.3:** Improve data management systems to track and share information about families and/or communities served while maintaining confidentiality.

**Objective 6.4:** Increase awareness of services and resources through community outreach and presentations.

## Goal 7: Provide supportive services to those affected by a suicide loss.

**Objective 7.1:** Continue to provide counseling services through the voucher program.

**Objective 7.2:** Continue to support and expand the Survivors of Suicide peer support groups.



# To Support Efforts Across the Suicide Prevention Continuum

The SPTF understands that suicide is a complex problem that requires ongoing solutions implemented by many sectors of society. Strengthening both the SPTF and data surveillance systems ensures that suicide prevention gets the attention it deserves and that ongoing feedback and support to local organizations and their suicide prevention efforts is provided. For each strategic plan goal, a series of objectives is identified and listed below.

## Goal 8: Increase community leadership within the SPTF.

**Objective 8.1:** Update organizational structure to reflect community needs.

**Objective 8.2:** Continue to maintain the SPTF's voting membership and its County of Tulare supportive staff. Encourage community members to get involved by attending bimonthly meetings.

## Goal 9: Increase the visibility of the SPTF and of the available resources.

**Objective 9.1:** Increase social media reach and update the SPTF's web page.

**Objective 9.2:** Continue presentations to the community about the resources available through the SPTF.

## Goal 10: Strengthen the data surveillance systems.

**Objective 10.1:** Continue to partner with the Tulare County Coroner's Office to collect local suicide data and track any trends in the data.

**Objective 10.2:** Continue to collect data on current activities, including pre and post evaluations.

**Objective 10.3:** Continue to work on obtaining suicide attempt data.

**Objective 10.4:** Initiate efforts by the LOSS Team to collect data not provided by the Coroner in order to track other suicide data patterns and trends. Data could include:

- SOGIE (Sexual Orientation, Gender Identity/Expression)
- Veteran status
- Marital status
- Ethnicity



# Together we can prevent suicide!

Everyone has a role to play in saving lives and bringing together our communities. To achieve the goals of this strategic plan, we need your help. Whether it is providing us with feedback about the plan, learning how to recognize the warning signs, or finding new ways to connect with individuals, you can make a world of difference.

With the support of community members, community groups, and our many other agency and organizational partners, together we can increase wellness and reduce suicides and attempts across Tulare County. Prevention is possible!

To stay connected with current efforts and learn how to get involved, please visit [www.sptf.org](http://www.sptf.org) or email us at [sptf@tularecounty.ca.gov](mailto:sptf@tularecounty.ca.gov)

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To learn more visit:

[suicideispreventable.org](http://suicideispreventable.org)

# Resources

Striving for Zero, California's Strategic Plan for Suicide Prevention (Mental Health Services Oversight and Accountability Commission)

[https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan\\_Final.pdf](https://mhsoac.ca.gov/sites/default/files/Suicide%20Prevention%20Plan_Final.pdf)

Striving For Zero Learning Collaborative Modules and Resources (Mental Health Services Oversight and Accountability Commission)

<https://mhsoac.ca.gov/initiatives/suicide-prevention/collaborative/>

Know the Signs Strategic Planning for Suicide Prevention Learning Collaborative (California Mental Health Services Authority)

<https://emmresourcecenter.org/resources/strategic-planning-suicide-prevention-learning-collaborative>

Know the Signs (California Mental Health Services Authority)

<https://www.suicideispreventable.org/>

The Surgeon General's Call to Action to Implement the National Strategy for Suicide Prevention

<https://www.hhs.gov/sites/default/files/sprc-call-to-action.pdf>

Preventing Suicide: A Technical Package of Policy, Programs, and Practices (Centers for Disease Control and Prevention)

<https://www.cdc.gov/violenceprevention/pdf/suicidetechnicalpackage.pdf>

Transforming Communities: Key Elements for the Implementation of Comprehensive Community-Based Suicide Prevention (National Action Alliance for Suicide Prevention)

<https://theactionalliance.org/sites/default/files/transformingcommunitiespaper.pdf>

The National Action Alliance for Suicide Prevention

<https://theactionalliance.org/>

Suicide Prevention Resource Center

<https://www.sprc.org/>