

The “A Public Health Approach to Comprehensive Suicide Prevention in Connecticut” Grant



Overview & FAQ

<p>What is the “A Public Health Approach to Comprehensive Suicide Prevention in CT” Grant?</p>	<p>September 2020, the State of Connecticut was awarded a five-year, \$3.5 million (\$700,000 per year) grant from the U.S. Centers for Disease Control and Prevention (CDC) to enhance a range of suicide prevention activities coordinated among several state agencies. The grant initiative is titled, “A <i>Public Health Approach to Comprehensive Suicide Prevention in Connecticut</i>” (CSP), and it will run through August 31, 2025 aligned with the new <i>CT Comprehensive Suicide Prevention Plan 2025</i>.</p>
<p>What is the purpose of the CSP?</p>	<p>CT will use the CSP to expand upon its cross-sector efforts to implement a comprehensive public health approach to suicide prevention to reduce suicide attempts and deaths among two key vulnerable populations in the state:</p> <ul style="list-style-type: none"> ❖ middle-aged adults (ages 35-65), in particular men, with serious mental illness or substance use disorder (SUD); and ❖ adolescents and young adults (ages 10-24), a group disproportionately represented in ED data for a suicide attempt or reported suicide ideation.
<p>Who will administer and advise the CSP?</p>	<p>The CSP will be administered by the CT Department of Public Health (DPH), and co-directed by the CT Departments of Mental Health and Addiction Services (DMHAS), and Children and Families (DCF). The CSP will be evaluated by UConn Health, and advised by the CT Suicide Advisory Board.</p>
<p>How will the CSP work to reduce suicide attempts and deaths?</p>	<p>CSP activities will include, but not be limited to: 1) Launching and promoting the new <i>CT Comprehensive Suicide Prevention Plan 2025</i>; 2) Identifying vulnerable populations using existing data; 3) Performing an inventory of suicide prevention programs in CT; 4) Using the CDC’s <i>Preventing Suicide: A Technical Package of Policy, Programs, and Practices</i> Selecting to guide the selection and implementation of community-based, healthcare-related, and upstream primary prevention strategies using a regional approach; 5) Developing and disseminating a communication plan for stakeholders; and 6) Performing ongoing evaluation to guide efforts and ensure outcomes.</p>
<p>How will state agencies and key stakeholders, especially survivors of suicide loss and those with lived experience as attempt survivors, have a role in the CSP?</p>	<ul style="list-style-type: none"> ❖ DPH, DCF and DMHAS are co-directing the CSP. The three state agencies have years of extensive experience collaborating and braiding federal grant resources to address statewide suicide prevention needs. ❖ The CSP will be advised by the CT Suicide Advisory Board (CTSAB) that is co-chaired by DMHAS, DCF and the CT Chapter of the American Foundation for Suicide Prevention, representing survivors of suicide loss and attempts. CTSAB is the single coalition for suicide prevention, intervention and response in CT. The CTSAB also includes five Regional Suicide Advisory Boards (RSAB) organized by DMHAS service regions and operated by Regional Behavioral Health Action Organizations. CTSAB and RSAB membership is open, broad and inclusive of representatives of multiple state agencies, profit and non-profits, community and faith-based organizations, hospitals, military, schools, higher education, town representatives (e.g. Youth and Family Services, Social Services, Local Health Departments), private citizens, students, survivors, individuals with lived experience, and advocates. Combined, the CTSAB and RSAB membership is made up of well over 1,000 suicide prevention champions.

For more information about CSP 2025, contact one of the Project Directors:
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