

January 3, 2022

Governor Douglas A. Ducey
Office of the Governor
1700 West Washington
Phoenix, Arizona 85007

Dear Governor Ducey:

Pursuant to Laws 2020, Second Regular Session, Chapter 58, Section 8, please find the State Fiscal Year (SFY) 2021 summary of accomplishments in suicide prevention by AHCCCS.

ARIZONA SUICIDE TRENDS

Based on the most recent available data from the Arizona Department of Health Services (ADHS)¹, 2.3 percent of all deaths in Arizona were due to suicide, and suicide was the eighth leading cause of death in 2019. Firearms, suffocation/hanging, and poisoning by drugs were the most reported mechanisms of death by suicide with firearm use being the leading mechanism across Arizona.

There are several suicide disparities observed across the state on levels such as geography, race/ethnicity, age, and veterans. Geographically, rural areas have a rate of 28.7 suicides per 100,000 population as compared to urban areas with 17.2 suicides per 100,000 population. On a race/ethnic level, Native Americans have a rate of 26.8 suicides per 100,000 population as compared to European Americans with 23.1 suicides per 100,000 population. From 2009-2019, all rates across age groups have increased; however, children under 15 have had a 3.4-fold increase in the suicide rate. The age-adjusted suicide rate for veterans was consistently 2-3 times higher than their non-veteran counterparts from 2009-2019 (i.e. 52 vs 21.9 per 100,000 population in 2019).

During FY2021, AHCCCS and ADHS partnered to implement suicide prevention efforts targeting these concerning trends, with particular focus on the impact of the Coronavirus disease 2019 (COVID-19) public health emergency (PHE) as further detailed in this report.

2021 STRATEGIC SUICIDE PREVENTION GOALS AND SUCCESS HIGHLIGHTS

Due to the continued public health emergency surrounding the COVID-19 pandemic and its potential impact on Arizonans' mental health during 2021, AHCCCS and ADHS worked together to update our strategic prevention goals, including through the Arizona Health Improvement Plan to reduce suicide-related events and to combat social isolation and loneliness.² The goals and success highlights for 2021 include:

¹ <https://pub.azdhs.gov/health-stats/report/suicide/documents/suicide-report-2020.pdf>

² <https://www.azdhs.gov/documents/operations/managing-excellence/azhip-mental-well-being.pdf>

1. Increasing utilization of population-based suicide prevention science.

- a. AHCCCS partnered with the Arizona Department of Veterans' Services (ADVS) and the Arizona Coalition for Military Families (ACMF) on the Be Connected Initiative to further provide suicide prevention resources to those who have served in the military and their families, including the development of a gun hygiene tool kit called "Secure Your Weapon"; this toolkit will be used statewide at gun ranges and with Veteran groups to reduce the rate of suicide by firearm.
- b. AHCCCS developed a comprehensive list of evidence-based practice programming for Arizona Indian and Alaska Native communities which has been shared through tribal consultation.
- c. Through the State Opioid Response (SOR) and Substance Abuse Block Grant (SABG), AHCCCS funded the implementation of the PAX Good Behavior Game (GBG) and PAX Tools for Human Service Providers. The PAX GBG is a social emotional "immunization" which has demonstrated statistically significant reductions in suicide in longitudinal studies.
 - i. To date, nearly 2,000 teachers have been trained in PAX GBG implementation through SOR funding, with plans for ADE to directly fund additional training in 2022.
 - ii. In 2021, PAXIS Institute trained 674 Arizona community-based professionals who work directly with children to implement PAX. These included professionals who work with children outside of school in a number of different fields including congregate care staff, clinicians, behavioral health technicians, youth workers, and others.

2. Increasing access to the full continuum of mental health services, including crisis, with a particular focus on remote options when appropriate.

- a. AHCCCS was awarded a 9-8-8 implementation planning grant that was used to establish a stakeholder coalition to evaluate consolidation of current in-state crisis call center services into a singular statewide network inclusive of 988, leveraging existing Regional Behavioral Health Authority (RBHA) crisis call lines and the National Suicide Prevention Lifeline (NSPL) into a single statewide provider.
- b. AHCCCS continued implementation of the Substance Abuse Mental Health Services Agency (SAMHSA) COVID-19 Emergency Response Suicide Prevention (ERSP) grant which provides suicide screening and follow-up services in Pima County to those uninsured and underinsured with suicidal ideation who are 25 years of age and older, primarily through emergency departments, psychiatric facilities, and crisis line referrals.
- c. AHCCCS continued implementation of the Federal Emergency Management Agency (FEMA) and SAMHSA Crisis Counseling Program (CCP) grant in response to the COVID-19 PHE.
 - i. AHCCCS served more than 17,000 unique individuals statewide with primary services including individual crisis counseling, group counseling/public education, and brief education/supportive contact.
 - ii. AHCCCS reached more than 94,000 other contacts through hotline, helpline, lifeline, and other telephone contact; e-mail contact; community networking

and coalition building; materials distributed; mass media; and social networking messages.

- d. AHCCCS continued its expanded coverage of telehealth services³ during the public health emergency, serving 29.4 percent of Medicaid members through one or more telehealth modalities as of July 2021 in a rolling 12 month period.
 - e. The Telehealth Advisory Committee,⁴ as established by Laws 2021, Chapter 320, was launched, which requires the development of telehealth best practices, among other approaches, to improve health care services delivered via telehealth modalities including behavioral health care.
- 3. Focusing on school-aged youth at risk, including through the work of the Substance Abuse Mental Health Administration (SAMHSA) grant, Project Aware, in collaboration with the Arizona Department of Education (ADE).**
- a. AHCCCS and ADE identified evidence-based best suicide prevention trainings for schools to select from, meeting the requirements of the Mitch Warnock Act.⁵
 - b. AHCCCS partnered with the ADHS and ADE to develop the Arizona Educator Peer Support Project, which launched in April 2021. The program was developed in an effort to address the stressors brought on to teachers and school administrators due to the impact of the COVID-19 pandemic and pairs teachers and administrators with a trained peer coach. To date, there have been 59 participants and AHCCCS is continuing this partnership with ADE to expand the training and peer model to local school districts in 2022.
- 4. Increasing the number of public-facing and frontline staff trained in evidence-based suicide prevention.**
- a. Through the work of Project AWARE, workforce development efforts impacted 13,435 school staff and included suicide prevention trainings to 1,761 community members.
 - b. Through the COVID-19 ESRP Grant, 127 individuals were trained in Suicide Alertness for Everyone (SafeTALK) and 108 individuals were trained in Applied Suicide Interventions Skills Training (ASIST).
 - c. AHCCCS held a best practice suicide prevention media training for state agency public information officers in an effort to improve suicide-related media reporting.
 - d. AHCCCS organized the first Four Corners suicide prevention workgroup, with 15 suicide prevention specialists from Arizona, Colorado, New Mexico, and Utah participating.
- 5. Increasing access to resources and services for individuals and communities that have experienced suicide to include supporting suicide survivors and prioritizing their inclusion.**
- a. AHCCCS funded \$10,000 of Local Outreach to Survivors of Suicides (LOSS) materials for distribution to raise community awareness and support for survivors of suicide.
 - b. AHCCCS expanded the distribution of the LOSS materials to all Arizona's counties in coordination with partners at the American Foundation for Suicide Prevention.

³ <https://www.azahcccs.gov/AHCCCS/Initiatives/Telehealth/>

⁴ <https://www.azahcccs.gov/AHCCCS/CommitteesAndWorkgroups/telehealthadvisorycommittee.html>

⁵ https://www.azahcccs.gov/AHCCCS/Initiatives/suicideprevention/training_for_schools.html

- c. AHCCCS identified volunteers in high priority rural counties to be trained in bereavement counseling; these volunteers will help lead LOSS activities to include counseling.

As ADHS is the lead state agency tasked with public health including suicide prevention, oversees the Arizona Health Improvement Plan, houses vital statistics including suicide epidemiological trending, and establishes the suicide mortality review team as required by ARS 36-199, AHCCCS and ADHS determined that transitioning the Suicide Prevention Coordinator role from AHCCCS to ADHS will streamline and support initiatives at a larger scale. Although the position will move to ADHS, the ongoing work and collaboration between the two agencies will continue as initiatives related to behavioral health and crisis support services are essential in achieving Arizona's suicide prevention goals.

Sincerely,



Jami Snyder
Director

cc: The Honorable Karen Fann, President Arizona State Senate
The Honorable Russell Bowers, Speaker, Arizona House of Representatives
Richard Stavneak, Director, Joint Legislative Budget Committee
Matt Gress, Director, Office of Strategic Planning and Budgeting
Christina Corieri, Senior Policy Advisor, Office of the Governor