

VT SPC Coalition Meeting

December 6, 2018

9:00am – 1:00pm

Waterbury State Office Building

Present (29): Chris Allen (AFSP), Christi Anderson (Rrmc), Kara Berg (Champlain College), Dillon Burns (VT Care Partners), Tom Dalaney (UVM VCHIP), Laurie Emerson (NAMI VT), Richard Fales (RMHS), Ross Farnsworth (SSCF Dept. of Corrections), Tim Gendron (Retired, survivor), Charles Gurney (VDH and DAIL), Salley Kerschner (VDH), Nicole Kriotinger (Norwich University), Terri Lavelly (NKHS), Linda Livendale (AFSP), Debra Lopez (private practitioner, VT Psychiatric Assoc.), Mark Margolis (Howard Center), Ruth Marquette (NKHS), Dr. Martha Mathis (Norwich University), Amos Meacham (Pathways VT), Eliot Nelson (UVM), Olivia Parenteau (BFA), Amanda Rohdenburg (Outright VT), Jo Saunders (NCSS), Melissa Southwick (Cathedral Square SASH), Annie Valentine (UVM), Nissa Walke (DVHA), Heather White (AFSP), Andrea Wicher (Rutland Regional Medical Center), Matt Wolf (VFFCMH/YIT)

The main part of our agenda included presentations from a variety of people representing populations at high risk for suicide. These presenters included:

Dr. Karen Fondacaro from New England Survivors of Torture and Trauma and Connecting Cultures talking about New Americans, specifically the Bhutanese refugees she has been working with in the Burlington area. Connecting Cultures works with 30 countries of 70 different languages. Most refugees have a lot of resilience. Karen reviewed risk factor and provided context related to challenges in land of origin, migration, new circumstance where they are resettled. Resettlement causes post-migration living difficulties including language barriers, changing responsibilities in the family (women may be able to find work), and individual homes that prevent more communal experiences (affects child care and socialization). Resettled refugees need opportunities for collective social experiences, including dancing, music, and prayer, which substitute cultures from countries of origin.

Amanda Rohdenburg from Outright Vermont spoke about LGBTQ youth. She reviewed 2017 VT Youth Risk Behavior Survey Results highlighting that LGBTQ youth are 4.5 times more likely to attempt suicide, which is down from 6 times more likely in 2015. She emphasized that suicide is not inherent for this population, but that they experience more rejection and discrimination, which are risk factors for suicide. In 27 states people can still legally be fired for being LGBTQ. In states with marriage equality laws had lower LGBTQ suicide rates (2010). Trans Student Education Resources data sheet on “Why Support for Trans Youth Matters” shows a huge drop in risk and a rise in protective factors for trans youth with supportive parents. Outright provides opportunities for LGBTQ youth to gather to decrease isolation and and create social connections in a supportive environment in 4 Vermont communities. For information on LGBTQ older Vermonters, contact the Pride Center of Vermont.

Laurie Emerson and Richard Fales from NAMI Vermont spoke about those who suffer from mental illness. NAMI is a grass roots organization for those who have lived experience. Data was presented from a NAMI Vermont survey of their membership. Isolation and social anxiety are significant risk factors. A common feeling is being a burden. Acceptance of mental health condition is critical to help seeking and talking about feelings, expressing them through art are key protective factors. The NAMI approach is to start with small steps to accept ones’ self and do something meaningful, recover and become advocates for others. Educating about stigma and shame is a significant issue for individuals,

families and workplaces. Being able to listen and plugging people into open support networks, clubs, etc. are so important in supporting this population.

Charles Gurney from ADAP and DAIL along with **Melissa Southwick** from SASH spoke about suicide risk in older adults. It is a myth that depression is a normal part of aging; it is important to look for signs of depression and get older adults treatment. Medications and alcohol use are contributing risk factors as well as experiences of loss (family home, spouse, friends, mobility, etc.) and feeling isolated. It is important to routinely screen older adults for depression and suicide, find ways to ensure they feel connected, and address issues with medications.

Alison Krompf reported on the AHS Leadership Group, which is an interdisciplinary group across departments and divisions. She introduced the new structure of the team and their goals including collaboration on Act 34 and use of screening tools. She announced that NCSS will be answering Lifeline calls in Vermont. The goal is to field 20% of the calls coming through the line in Vermont. Agency policy issues on tracking suicide were discussed; a common language and protocols are important in the system of care.

Education and Advocacy

- VTSPC representatives will be meeting with the AHS Secretary next week
- VTSPC is collaborating with VT AFSP on a Legislative Advocacy Day in early February
- The Coalition took time in the meeting to write postcard to legislators to raise awareness about Suicide Prevention.