

Suicide Prevention Training 101 Part 2 Transcript

[Jason Murrey]: Hi, good morning again, everybody. My name is Jason Murrey. I wanna give a special thanks to the Central Indiana Education Service Center for allowing me to provide this suicide prevention 101. This is a free webinar. It's about a 45-minute training. This is to be utilized as a refresher. This does not meet the state's requirement for a two-hour in-person suicide prevention training. All right? This is just a refresher on suicide prevention.

[Jason Murrey]: So we start thinking about suicide prevention. First of all, one of the things I wanna look at are the objectives we're gonna cover. So gaining knowledge regarding the impact of suicide on our Hoosier students, having a better understanding of how suicidal thoughts may impact our classroom, but also being able to identify resources and assist colleagues and students who identify that they're experiencing suicidal thoughts.

[Jason Murrey]: We are gonna be talking about suicide today. I don't beat around the bush. I'm not politically correct about suicide. All right? It's the political correctness that has caused more deaths when it comes to suicide, 'cause individuals have a fear of speaking out, fear of talking about it, and fear of how is it that I get help. Is this gonna have an impact on my career? If I identify as a teacher that I'm having struggles, does this make me not fit to be a teacher? If I'm a school nurse and the things that I see as an impact on me, does that make me not fit to be a nurse?

[Jason Murrey]: So it's super important that we have that conversation and knowing that we have this conversation that individuals in the room, chances are, you know somebody who has thought about suicide, who has attempted suicide or may have even died by suicide. You yourself may struggle with thoughts or may have possibly attempted in the past. And so there's gonna be a lot of information just on this suicide prevention 101. It's gonna talk about tips, things to look out for, and things that we can utilize. And chances are, as we discuss something, you might say, "Hey, by learning that I could have been able to save somebody else." And it might make you upset. But I need you to understand that you only know what you know the moment that you know it. All right? Is that fair?

[Jason Murrey]: Okay, so if we don't know something, but when we felt like we were supposed to know it, it's already gotta let yourself off the hook. And it can be hard, but I just want you to think about that. You only know what you know the moment that you know it. So let's talk about the state of Indiana. How many Hoosiers do we have in the state of Indiana? Anybody know? About 6.6 million, give or take a few. When I do this training with the state employees, it's always the Department of Workforce



Development that knows that number off the top of their head. All right? About 6.6 million, give or take a few. How many suicidal deaths that are reported in a given year do you think we have? Anybody wanna throw a number out there? 6.6 million Hoosiers.

[Attendee]: 24,759.

[Jason Murrey]: Okay, 24,759. Very specific. All right. We have about 1,200 recorded or reported suicide deaths. Now, that could be plus or minus, because of the way we report suicides in the state of Indiana, right? A lot of your county coroners, they're elected, especially in our rural counties, it's the mortuary in the county. It's been in the family for generations. And it's usually that county coroner, it's the same persons within the mortuary or they own that. And so they go to school with everybody within the county or in the areas, and they know individuals. And so when somebody says, "That individual died by suicide, but I don't want it to be known as a suicide, we want it to be a natural cause of death." Well, that's how the report goes.

[Jason Murrey]: We were one of the first states in the country that have the Indiana Violent Death reporting system. And we started seeing that some of these deaths on our numbers were not matching up with other neighboring states. And so one of the things that the Indiana Violent Death reporting system that's housed at the Indiana Department of Health started asking for were the police reports. And so now we pull excerpts from the police reports. That also goes in conjunction with the coroner's report, and we're able to identify suicide deaths a little better and get more statistics.

[Jason Murrey]: Because the issue why that's so important is that we compete with 50 other states, or 49 other states, when it comes to federal funds, especially when it comes to suicide prevention funding. And if our numbers look like we're rocking it out and we're underreporting, who do you think gets the funds? Us or another state? It's gonna be another state, right? And we're just worthy of those funds and need that additional help and as much support as we can get. So try not to look at that picture with rose-colored glasses, but to really get an understanding of what suicide looks like in the state of Indiana.

[Jason Murrey]: So if you're not familiar with the American Foundation for Suicide Prevention, they do the Out of Darkness walks in local communities. I know they have one here in Indianapolis coming up, but they also have the youth, or not the youth, the state data sheet, that kind of identifies some various characteristics when it comes to the state of Indiana. I'm sorry, the way this slide shows up, it's a little blurry, but a couple of things to understand is that suicide is the 11th leading cause death of in Indiana. It's the second leading cause of death for ages 10 and 24. All right? The second leading cause of death between ages 10 and 24. The second leading cause of death for ages 25 to 34. We rank 23rd among 50 states. Okay? 121 youth deaths in 2023. So what do we mean by youth? I mean between the ages of 8 years old and 24.



And the reason we go up to 24 is because the federal government offers a grant called the Garrett Lee Smith grant. It is their youth suicide prevention grant, and their top age is 24 years old, okay?

[Jason Murrey]: One in five Indiana high school students seriously considered attempting suicide in the past year. That comes to us from the IYI data book, Indiana Youth Institute. Indiana's youth minority suicide rate is three times higher than that of the national minority suicide rate. In the 36 states that were able to provide the data, we were ranked third in the percentage of students who seriously considered attempting suicide. Indiana youth who identify as LGBTQ+ are five times more likely is attempt suicide than their heterosexual peers. And 42.2% of Indiana's youth suicide deaths are concentrated in five counties: Marion, Delaware, Johnson, Lake, Allen, and Clark County is not too far behind. Overall numbers regarding deaths, the suicide are increasing, all right?

[Jason Murrey]: What do we know about suicide in the last 75 years? We've had the conversations. We've put a lot of thought into it. We've got programs out there like 988. We got 211 to provide resources. We got the crisis text line 741-741. But how many of you have like an HR poster just sitting in the hallway in your offices? And how many of you're like, I've looked at that poster, that's prompted me to make a phone call. Right? Nobody.

[Jason Murrey]: But if it's modeled and it's identified, hey, we pay for any EAP, or an employee assistance program, highly recommend everybody advocates for an EAP, that when it becomes modeled and is shown to us, how do we utilize it, thinking about it with our students, if we were in front of the class and we had 741 up on the board, and we modeled that in class, it's 741-741, that's a crisis text line. And we showed that it took less than two minutes for somebody to reach right back to you. It takes less than 15 seconds. You get an automation and then you get a person. And by modeling it, I'm giving permission for you to utilize that, right? And we create it as part of our culture, as one of our tools that we can utilize to assist students to discuss with parents. All right, and then I also have a link, and I'll share these slides with all the participants so that you're able to click on it. But it's the iyi.org. If you click on their Data tab, it's the Indiana Youth Data book that has all the statistics and information.

[Jason Murrey]: All right, so why are we seeing suicidal deaths? What are some of the things? Let's take a look at the landscape. When we look at it from a psychological lens, we need to understand that there are two very different aspects. There's mental illness and mental health. These are not the same thing, right? We can have good mental health that lasts almost all day. We can have periods of bad mental health that may last 15 seconds. I guarantee they're in this training, these next two trainings, over an hour and a half, you'll probably feel good. You'll be like, "Oh, that Jason guy, just wanna smack him." You may be upset. I may trigger something there that says, "You



know what? Remind me of a time of this or that." You might be sad, you might be happy. All right? When it comes to mental health, it can be all over the place. You probably have some resiliency, maybe have some tools, are able to deescalate some feelings of anxiousness or some feelings of depression.

[Jason Murrey]: And you can do everything right, you may exercise, you may read books, you may cook, you may have good times with friends, you can do everything right. But then your DNA says, "Ah, we're very prone to have mental illness," right? Major depressive disorder. That's a diagnosable disease. It's a major illness. However, chances are there's somebody in the room that has it. But based on medication, working out, talking with people, utilizing journaling, and talking with the counselor, everybody needs somebody to talk to. I don't just say that 'cause I'm a licensed mental health counselor. I say it, 'cause we all need somebody to talk to to break it all down, 'cause we can only hold so much, right? They don't tell us that part in school. They tell us how we're gonna put on the cape and save lives and be great, and it's gonna be phenomenal. And the problem with all the world is that you're not in it to save it yet. And then we get out there and we go, "Woo! We need a little more time on the impact of what we're gonna do on us so that we can be able to provide the help and the care we need for others." Right?

[Jason Murrey]: You can do all the right things, you still got it. But because of what we do today and having that conversation, we're able to take care of ourselves, regardless if it's a mental illness.