Executive Summary

A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado

produced by

Suicide Prevention Coalition of Colorado and

Colorado Office of Suicide Prevention

written by Sara Miller



Colorado Department of Public Health & Environment
Office of Suicide Prevention



Dear Readers,

We are very pleased to share this account of suicide prevention, intervention and postvention in Colorado, which chronicles the rich history and passion of the suicide prevention movement in our beautiful state. As the following pages detail, many individuals and organizations have contributed to some groundbreaking and innovative work over the last 60 years. Many initiatives began with the tragic loss of a loved one to suicide, followed by tireless advocacy of those left behind. All of the initiatives relied on the generous contributions of individuals and organizations throughout Colorado to raise awareness, create change, and save lives.

It is impossible to list the individuals and organizations that helped shape suicide prevention efforts over the last 60 years. This report highlights many of the critical initiatives that have influenced our history as recalled and reported directly by more than 40 of the individuals who played key roles in the success of suicide prevention in Colorado. It is our hope that this history allows readers, both those that have worked in suicide prevention for many years and those new to the movement, to more clearly understand the incredible work that has been done to date in Colorado and its importance to the work we will continue to do over the next 60 years.

This project would have been impossible without the commitment and time of its many contributors. The author, Ms. Sara Miller, spent months meeting with stakeholders, compiling notes, checking references, and writing a compelling document that provides a chronological snapshot of suicide prevention in Colorado. Countless individuals met with Ms. Miller to share their insight and experiences, and their knowledge was paramount to the success of this history. Members of the Suicide Prevention Coalition of Colorado Board reviewed drafts of the document and provided Ms. Miller with invaluable suggestions and filled gaps in the timeline.

While suicide continues to be a critical public health issue in Colorado that requires ongoing contributions from individuals and agencies statewide, it is imperative that future efforts acknowledge and learn from the rich history of suicide prevention and intervention in Colorado.

Jarrod Hindman

Suicide Prevention Unit Manager Colorado Department of Public Health and Environment

Deputy Director of the Depression Center at the University of Colorado

Matt Vogl

Suicide Prevention Coalition of Colorado Board Chair Deputy Director of the Depression Center at the University of Colorado



INTRODUCTION

In 2010, the Suicide Prevention Coalition of Colorado (SPCC) received a grant from Colorado's Office of Suicide Prevention. A portion of the grant was earmarked for the creation of a narrative report documenting the influential people and watershed moments that have made Colorado a national leader in suicide prevention, postvention and intervention. The resulting document, *A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado*, is a chronological report which begins with suicide prevention efforts in Colorado dating as far back as 1953 and progresses to the year 2010.

Alongside Colorado's developing suicide prevention efforts, national and global suicide prevention movements were also growing during this sixty-year period. In the report, readers can see that these state and national efforts are inextricably tied to one another. Colorado is home to leaders in suicide prevention who have furthered our state's work while at the same time contributing to and altering the national conversations about prevention, intervention and postvention.

Throughout the document, readers meet these leaders—those who have influenced the national agenda and those who have made a difference in their own communities. Before *A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado*, the majority of reports and plans focusing on suicide prevention in Colorado were data-driven and strategic. While it is undeniably important to analyze the figures and to document best practices that further successful prevention efforts, it is also important to remember the stories. The stories of influential people and events documented in the pages of SPCC's report are what put the skin and bones on Colorado's skeleton of facts and figures. These stories of passion and informed discovery are what keep the suicide prevention movement alive when the data seems bleak.

The report's backbone is a detailed timeline which places important moments in Colorado's suicide prevention efforts alongside key national events. The timeline offers a glimpse at the unfolding story of Colorado's fight against suicide. The fight has seen impassioned mothers take the stand in legislative hearings and grieving fathers establish nationally-recognized organizations to honor their lost sons. It has also seen the partnerships of disparate groups such as mental health professionals and the survivor community – both impassioned by Colorado's tragic loss of lives and working together for the same cause. These stories of this ongoing movement are what continue to inspire Colorado's citizens to engage in a statewide fight against a preventable problem – suicide.

THE BEGINNING

Colorado's first organized mental health movement began with the establishment of a public mental health hospital, the Colorado Insane Asylum, now named the Colorado Mental Health Institute Pueblo. This hospital was founded in 1879, and served as one of the only mental health facilities in Colorado for 75 years. Finally, in response to the Community Mental Health Act, mental health centers began to spring up throughout Colorado. Arapahoe Mental Health Center, now known as Arapahoe/Douglas Mental Health Network (ADMHN), opened in 1955. In the next 14 years, eight more mental health centers were established including Jefferson Center for Mental Health in 1958; Spanish Peaks Mental Health in 1962; the Center for Mental Health in Montrose (now known as Midwestern Colorado Mental Health Clinic, Inc.) in 1965; and four mental health centers in Denver in 1969 (Bethesda Community Mental Health Center, Denver Center for Mental Health Services, Park East Comprehensive Mental Health Center, and Southwest Mental Health Center).

Simultaneously, crisis hotlines were springing up throughout Colorado. The first, the Suicide and Crisis Control Hotline, was founded by Bill Anderson, a Denver-based minister who had been working in hospitals for many years and recognized a coverage gap for people who were in crisis or suicidal. Anderson realized that individuals needed an immediately available hotline that could be accessed before a person's mental health or suicidal crisis landed them in the hospital.

Perhaps the biggest step for Colorado in the arena of crisis hotlines came with the incorporation of the Pueblo Suicide Prevention Center in 1968. That year, a group of 23 citizens, comprised of Colorado State Hospital Physicians and community leaders banded together to form the Pueblo Suicide Prevention Center (PSPC). PSPC was established as Colorado's first 24-hour emergency *suicide intervention* hotline. PSPC became a member of AAS in 1976, and in 1985, the Center was certified as an AAS crisis center. As of 2010, the Pueblo Suicide Prevention Center was the only certified center in the State authorized to take calls from Colorado callers on the National Suicide Hotline.

During the 1978-79 school year, three students at Cherry Creek Schools took their lives. "These three incidents within 18 months were really in all honesty, the first time that we took notice of suicide as a pervasive problem in our schools," says Dr. Bill Porter. With growing concern on the part of the CCS mental health team about the incidence of suicide and self-destructive behavior in students, Porter and his team conducted a survey of adolescent suicide issues during the 1979-80 school year. This information, together with overwhelming support for the development of a program, led Cherry Creek Schools to embark on the task of creating a process that would effectively deal with the acute problem of self-destructive behavior.

Porter and Thomas C. Barrett, a Cherry Creek School psychologist, developed "Intervention/Prevention: Seeking Solutions to Self-Destructive Behavior." This program consisted of crisis intervention training; teacher in-service trainings; parent trainings; a student curriculum to teach students about the causes, symptoms and resources for help concerning suicide; and strategies addressing the adjustment

problems of students moving into a new school system. This comprehensive school-based program was the first suicide intervention and prevention program of its kind in Colorado.

Soon thereafter, similar school-based programs known as Adolescent Suicide Awareness Program (ASAP) and SafeTEEN were founded by Diane Ryerson-Peake in New Jersey. Within months, the implementation and institutionalization of this comprehensive, school-based youth suicide prevention program had reached 5,000 students. Ryerson-Peake would go on to relocate to Colorado and become an influential person in the suicide prevention movement in the state.

During the first year of Porter and Barrett's program in Cherry Creek School, LaRita Archibald lost her son to suicide in Colorado Springs. Archibald embarked on a campaign to educate herself about the issue of suicide, learning everything she could about the topic through books, while searching for suicide support groups with whom she might share her grief. When she could not find such a group, Archibald set out to create one of her own. In 1980, Archibald hosted the inaugural meeting of HEARTBEAT, one of the first support groups for suicide bereaved in the country. Today more than 50 chapters meet monthly throughout the United States and in places as far away as Newfoundland, Canada and New Zealand. The report details how Archibald's efforts were the first of many within the survivor community which contributed to national postvention efforts.

After losing her son to suicide, Vivian Epstein searched for something similar to Archibald's HEARTBEAT. "I attended several other suicide support groups, but as a parent who has lost a child, you have a different perspective. You are a caretaker of this person who is gone. Consequently, you feel much more responsible for their decision," says Epstein. Epstein founded Parents Surviving Suicide, the first-ever parent support group for survivors. Since its inception, Parents Surviving Suicide has been a much-needed resource for bereaved parents throughout Colorado. With the help of an ongoing grant from Colorado's Office of Suicide Prevention, Parents Surviving Suicide has also supplied educational and prevention-based books on suicide to all but eight libraries in the state of Colorado.

By early 1983, Dr. Bill Porter, Tom Barrett, Eleanor Hamm of the Pueblo Suicide Prevention Center and LaRita Archibald, the founder of HEARTBEAT, were asked to join Colorado Governor Richard Lamm's Child/Adolescent Suicide Prevention Committee of the Colorado Commission on Children and Their Families. One of the Commission's goals was to increase awareness regarding the impact of child/adolescent suicide on families, friends and community. The Commission's charter was not renewed by the state legislature, and the last meeting of the committee as a part of the Colorado Commission on Children and Their Families, was held in July of 1984. Although there was no parent organization to sponsor them, the members of the committee, under the leadership of Dr. Bill Porter, continued to meet monthly for the purpose of carrying out the goals and objectives of the original Commission Committee.

After a year, the committee proposed the development of an organization aimed at implementing the actions needed to solve the problems associated with the dynamics of suicide. In April 1985, the Commission named itself SPARE, the Suicide Prevention Allied Regional Effort, and Colorado's first state

suicide prevention Coalition was formed. On November 6 and 7, 1986, SPARE sponsored the first statewide suicide prevention conference in Colorado.

In addition to a statewide coalition, grassroots suicide prevention efforts brought together mental health professionals, schools and the survivor community in community-based models, too. Throughout Colorado, citizen groups were spreading awareness about suicide prevention and examining the mental/community health continuum from a community perspective. Some of the community-minded coalitions discussed in the report include the Youth Suicide Prevention Coalition of Columbine/Chatfield, Suicide Education and Support Services (SESS) in Weld County, the Suicide Resource Center of Larimer County, the Suicide Prevention Intervention Network (SPIN) and the Suicide Prevention Partnership of the Pikes Peak Region.

After losing their children to suicide, several community advocates formed suicide prevention organizations to honor their loved ones and contribute to the fight against youth suicide. Two such organizations highlighted in the report are the Shaka Franklin Foundation and the Yellow Ribbon Foundation. The Shaka Franklin Foundation was founded by Les Franklin in honor of his son who died by suicide. Franklin realized that prevention went well beyond education—prevention needed to start further upstream. He created the Shaka Franklin Center, a drop-in facility at which at-risk youth could find recreation, support and counseling services. "We needed to create a diversion to this self-destructive behavior that we were seeing in teens all around us. I was a single parent and my kids were latchkey kids. I knew that kids need things after school and on weekends. Activities to keep them active. Activities to make them feel as though they belong," says Franklin.

Meanwhile, Dar and Dale Emme founded the Yellow Ribbon Foundation, a school-based curriculum and suicide prevention training program which teaches about the warning signs of suicide and encourages at-risk youth to ask for help. Today, Yellow Ribbon has two trademarked programs that are part of the Suicide Prevention Resource Center's National Best Practices Registry. In the year 2000, Australian Prime Minister John Howard said, "The Yellow Ribbon Suicide Prevention Program is a valuable and timely contribution to the fight against youth suicide.

In May of 1995, community advocates such as the Emmes began to organize. The galvanizing issue was the demand for legislative action in Colorado regarding youth risk behaviors. Deanne Rice who lost her son to suicide in 1994, wrote a letter to Governor Roy Romer and his wife Bea, inquiring why more was not being done in Colorado to prevent suicide. The letter opened with the words: "I write to you as a desperate plea for your help in bringing the serious problems our youth are facing today to state and national attention." Rice quoted 1990 teen suicide statistics from the CDC's Youth Risk Behavior Surveillance Survey. Her letter highlighted positive steps already taken in Colorado's fight for suicide prevention including Parents Surviving Suicide, the Shaka Franklin Foundation, the Yellow Ribbon Program, and the Larimer County Suicide Prevention Resource Center.

In early 1996, Rice was asked to join a citizen group organized by Jennifer Gamblin of the Mental Health Association Colorado. Gamblin and other members of the public health community had become

concerned that although there were 11 published numbers for suicide/crisis hotlines operating in Colorado, few of the hotlines were being answered. Gamblin gathered a group of likeminded professionals and advocates to discuss concerns about suicide/crisis services and to brainstorm about what could be done. The group included community advocates, survivors who had lost loved ones to suicide, and representatives from existing suicide prevention organizations such as SPPPPR, the Suicide Resource Center of Larimer County and Suicide Education and Support Services of Weld County. Gamblin and several members of this original committee (including Rice) attended a suicide prevention conference in Washington State, shortly after the release of Washington's state plan on teen suicide prevention, the first of its kind in the country.

Gamblin's committee was inspired by Washington state's groundbreaking work in suicide prevention and soon began advocating for the creation of a statewide prevention and intervention plan to battle Colorado's suicide crisis. In March of 1998, Gov. Romer allocated dollars to fund a suicide task force to investigate how other states combat suicide. The Suicide Prevention Advisory Commission officially delved into its charge in April of 1998. In total, the Commission reviewed more than 400 scientific studies and papers about suicide prevention.

Dedicated members of the two groups, Gamblin's Citizens' Advisory Panel and the Suicide Prevention Advisory Committee collaborated to create the *State of Colorado Suicide Prevention and Intervention Plan: The Report of the Governor's Suicide Prevention Advisory Commission*. The report was completed in November of 1998. With their main task achieved, the Governor's Suicide Prevention Advisory Commission and the Citizens' Advisory Panel did not want the statewide plan to become a document that would gather dust on lawmaker's shelves. Dedicated members of the two groups continued to meet and later become a statewide suicide prevention network known as the Suicide Prevention Coalition of Colorado (SPCC). Members of the newly formed Coalition wrote letters to editors of their papers, encouraging Colorado's new Governor, Bill Owens, to implement the recommendations of the state plan.

The report's pivotal recommendation was the formation of a state Office of Suicide Prevention. After hand carrying copies of the report to members of the state legislature, conducting a far-reaching letter writing campaign and testifying in front of Colorado's Joint Budget Committee, members of SPCC were heartened to finally have the Governor's support regarding a 'lead entity' to assume responsibility for the development of an ongoing system for ensuring integrated, coordinated and effective information and services for the prevention of suicide.

After much discussion, it was decided that the newly mandated Office of Suicide Prevention would be housed in Colorado's Department of Public Health. The formation of a two-person Office of Suicide Prevention was signed into law in August, 2000. The formation of OSP culminated almost four years of talking, plotting and planning by state government officials and grassroots suicide counselors. A statewide search was conducted, and Shannon Anderson (now Shannon Breitzman) was appointed the first director of Colorado's Office of Suicide Prevention.

The office acquired a two-year, \$378,000 grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to focus on teen suicide prevention. Subsequent goals included completing a statewide needs assessment regarding youth suicide; developing a statewide strategic plan to address youth suicide prevention (building upon the recommendations developed by the 1998 Suicide Prevention Advisory Commission; and reviewing best practices in youth suicide prevention to select a model program to be implemented in three communities.

While the members of the Suicide Prevention Coalition of Colorado were in the midst of their letter writing campaign regarding the Office of Suicide Prevention, a tragic murder/suicide occurred at Columbine High School in Littleton. Eric Harris and Dylan Klebold shot and killed 12 students and one teacher, wounded 24 others and took their own lives. The actions of Harris and Klebold highlighted the additional need for school safety protocol in Colorado. The Columbine tragedy also highlighted the urgent need for additional suicide prevention and screening in Colorado. A History of Suicide Prevention, Postvention and Intervention in Colorado analyzes the findings of the Governor-appointed Columbine review committee and documents the tireless work of Dylan Klebold's mother, Sue Klebold, in suicide prevention and postvention work.

The year 2000 marked the Colorado Trust's first foray into suicide prevention programming. The Colorado Trust had invested significant time and research into violence prevention. Knowing that violence prevention could translate to suicide prevention, Shannon Breitzman approached the Trust about funding a cadre of trainers to help with the Office of Suicide Prevention's 'Train the Trainers' ASIST program. The program was created with the goal of mobilizing a statewide suicide prevention infrastructure.

That same year, the Trust partnered with United Way to fund Mental Health America of Colorado's Colorado LINK school-based teen-suicide prevention program. The Colorado Trust sought supplemental funding from Mile High United Way to develop a school-based program for suicide prevention administered at Denver Public Schools' North and East High Schools. The grantee team was comprised of Mental Health Association of Colorado, the Yellow Ribbon Suicide Prevention Program and Urban Peak, an organization providing services for homeless and runaway youth.

Following the Colorado Trust's Colorado LINK collaboration with the Mental Health America Colorado and its fact-finding partnership with the Office of Suicide Prevention to understand the suicide-related needs and resources in the state, the Trust released a report compiling and analyzing its findings since the year 2000 titled *Suicide in Colorado*. The report identified the target populations most at risk for suicide in Colorado, existing suicide-prevention resources and gaps that needed to be addressed. Two companion reports accompanied this report: the *Suicide Prevention and Treatment Programs in Colorado* report detailed suicide-related statistics and prevention resources for each Colorado county, and the *Suicide in Colorado Summary* served as an executive overview of the main *Suicide in Colorado* report. While the 1998 state suicide prevention plan provided a roadmap for the organization and mobilization of suicide prevention, postvention and intervention efforts in Colorado, *Suicide in Colorado* provided a thorough analysis of what was already happening in the state and areas in which inadequacies of services could be found.

The needs assessment led by the Colorado Trust and the Office of Suicide Prevention, asked stakeholders from throughout the state to identify the barriers that limited their ability to expand suicide-related programs. The overwhelming majority cited lack of available funding to develop, implement and support suicide prevention programs. In response to these findings in the *Suicide in Colorado* report, the Colorado Trust created a 4-year, \$2.5 million initiative, the Preventing Suicide in Colorado initiative (PSIC). From 2002 to 2006, the Colorado Trust provided much-needed funds to assist 10 diverse communities throughout the state with creating or furthering comprehensive community-based suicide prevention initiatives.

The community grantees for the PSIC program included: Hispanic Youth Suicide Prevention Project of Suicide Education and Support Services of Weld County; the Link for Life program in Mesa County sponsored by the Western Colorado Suicide Prevention Foundation in Grand Junction; Project HOPE coordinated by Southeast Mental Health Services; Tri-County Trust Project: Suicide Prevention in Jefferson, Gilpin and Clear Creek counties coordinated by the Jefferson Center for Mental Health; Montelores Suicide Prevention Initiative sponsored by The Piñon Project; Midwestern Colorado Suicide Prevention/Intervention Coalition serving Montrose, Delta, Ouray, San Miguel, Gunnison and Hinsdale counties sponsored by Midwestern Colorado Mental Health; Suicide Prevention and Advocacy Coalition serving El Paso and Teller counties sponsored by the Suicide Prevention Partnership Pikes Peak Region; and Voz y Corazon sponsored by the Mental Health Center of Denver. A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado provides details about the programs and leaders of these community initiatives.

Amidst all of the generous financial support from The Colorado Trust, the Office of Suicide Prevention, just two years into its existence, was facing its own funding dilemma. Members of the 2001-2002 Colorado Joint Budget Committee mistakenly thought the Colorado Trust was going to fund the Office of Suicide Prevention and proposed that the funding which made the OSP possible be cut from the state budget. Upon receiving word of the potential budget cuts, community advocates immediately organized. Some made phone calls to legislators across the state requesting that the dollars for the Office of Suicide Prevention be restored to the budget. Other advocates stormed the steps of the Capitol, and had meetings with the members of the Joint Budget Committee. Following such a public outcry, the JBC called an unprecedented emergency meeting and voted to put the money back into the budget. The passion and dedication of community advocates once again left their mark on Colorado's suicide prevention history.

With the regular funding restored to the Office of Suicide Prevention, Shannon Breitzman and representatives from the Suicide Prevention Coalition of Colorado began work on the first statewide suicide prevention conference in Colorado since the conferences of the late 1980s organized by SPARE. The first "Wings of Hope" conference was held in Denver in May of 2002 and had over 200 attendees. The conference re-invigorated the desire for statewide conversation and exchange of ideas that would continue for another five years.

Meanwhile, community advocates in Lakewood, Col., were working to address gaps in the suicide prevention model. The Second Wind Fund, was founded in response to multiple suicides at Green

Mountain High School in Lakewood. Second Wind aimed to bridge the gap that was occurring at private therapists, community mental health agencies, and other counseling services for students targeted as at-risk for suicide. The organization recruited licensed therapists who agreed to work with The Second Wind Fund at a reduced rate, and had experience working with at-risk youth. If a student was referred by a qualified referral source, the Second Wind Fund would pay for six counseling sessions for the at-risk student. Within months, Second Wind began meetings its goal: to provide immediate access to professional help for kids at risk for suicide. To date, over 400 schools in Colorado have utilized the program, and SWF has raised over \$3 million to provide counseling to 2,200 students.

"Out of 2,200 referred students, not one has gone on to take their own life. We've also seen the youth suicide rate go down in counties where we've served the most kids for the longest amount of time. The downturn always corresponds with the introduction of the Second Wind Fund program," says Jeff Lamontagne, one of the program's founders. In 2005, the Second Wind Fund began an affiliate program, providing seed money to other communities throughout the state to establish local SWF chapters. By 2010, SWF had nine affiliates covering over 85 percent of youth under age 19 in Colorado. In 2009, people began recognizing the value of the Second Wind Fund model on a national level. That year, the original Second Wind Fund became the Second Wind Fund of Denver, and the umbrella organization re-organized to begin developing affiliates throughout the country.

Nationally, a push was happening for more data-driven research on suicide prevention. In response to the *Reducing Suicide* report published by the Institute of Medicine of the National Academies of Science, the National Violent Death Reporting System (NVDRS) was launched in six states in 2002. The Centers for Disease Control received funding from the federal government to launch the pilot program. Prior to the NVDRS, details about homicides and suicides resided in several different locations: the files of coroners, investigators, police officers and medical examiners. Unfortunately, the facts were not always collected in a uniform manner and were sometimes left out of files altogether. By 2003, the CDC program expanded to include Colorado.

With the inception of the Violent Death Reporting System, the Colorado Department of Public Health was able to compile more detailed analyses of suicide deaths. The Department could ask specific questions about suicide trends: the number of people who had a diagnosis of mental health problems, the number of people who were having intimate partner problems before their death, the number of people who had visited their physician the week immediately preceding their death. Examining this data allowed the CDPH to work with the Office of Suicide Prevention and other state and local violence prevention practitioners to guide prevention programs, policies and practices. A History of Suicide Prevention, Intervention and Postvention in Colorado details some of the innovative programs created as a result of the CVDRS data-collection and analysis.

2003 was also banner year for mental health and suicide awareness and prevention in the schools. Colorado welcomed another school-based innovation thanks to the perseverance of one woman and the financial generosity of the Colorado Trust. Susan Payne was a law enforcement officer in Colorado working as a School Resource Officer. Payne learned that many students had witnessed the signs of

violent events before they occurred but were hesitant to come forward for fear that they would be identified as snitches.

Payne created a local hotline in Colorado Springs for students to report their tips anonymously. The program grew exponentially, and in 1999, Payne presented her program to Colorado Attorney General Ken Salazar with a recommendation for replicating it statewide. Salazar supported Payne's ideas and pushed for the establishment of a statewide hotline reporting concerns of community violence. On September 14, 2004, the Safe2Tell hotline started taking calls. Since then, the number of calls and solid leads has grown. In each of the first two years, Safe2Tell received and followed up on approximately 100 tips. That number nearly tripled in the third year to 286, and in the fourth year grew to 531. Today, operators receive approximately 100 calls per month.

Meanwhile, the Office of Suicide Prevention was gathering tips and information of their own. In response to suggestions in the Suicide Prevention State Plan from 1998, OSP began conducting town hall meetings throughout Colorado. Each town hall meeting was jointly hosted with the local suicide prevention coalition and featured presentations by the Office of Suicide Prevention, the Suicide Prevention Coalition of Colorado and local representatives. These meetings often resulted in community-wide mobilization and the formation of groups such as the Boulder County Suicide Prevention Coalition (now known as the HOPE Coalition) whose goal was to ensure that the suicide prevention continuum was being covered in all areas.

A large part of suicide prevention is recognizing and filling gaps where existing services and programs do not exist. While the HOPE Coalition worked to provide coverage in all areas of suicide prevention in its community, the Carson J Spencer Foundation founded in 2005, wanted to find a niche area in which suicide prevention could take on innovative approaches and react to emerging trends. The Foundation wanted to support suicide prevention programming while supporting something that was entrepreneurial in spirit.

Sally Spencer-Thomas and her family created the foundation in memory of Spencer-Thomas' brother, Carson, who was a successful and passionate entrepreneur in the prime of his career and family life. Finally, the foundation focused its mission on three key elements: coaching young leaders (like Carson) to develop social enterprises for mental health promotion and suicide prevention; delivering innovative and effective suicide prevention programs for working-aged people; and supporting people bereaved by suicide.

The FIRE Within program began with high school students and using Carson's entrepreneurial spirit as inspiration, the foundation aimed to ignite a passion for an entrepreneurial mindset and care for the common good in youth. The program goals were to build business skills and social networks among the next generations of leaders, while simultaneously providing opportunities for existing business leaders to participate in mentoring and service learning. The yearlong curriculum, engages students through self-driven discovery, teaches them what it means to be successful entrepreneurs, leaders and workgroups, and applies these concepts to the public health issue of suicide.

The CJSF also teamed up with the Colorado Violent Death Reporting System to determine what other areas of suicide prevention had been thus far overlooked. "We found a gap in coverage—most people that were dying by suicide were middle-aged men. There were very few practices specifically targeting men and nothing specifically designed to raise awareness and prevention in the workplace," says Spencer-Thomas. In response to this gap, CJSF founded the Working Minds Program. The Working Minds Program is the only one of its kinds in the nation that helps workplaces develop comprehensive suicide prevention programs. The Working Minds Toolkit, which was released in 2009, went on to become part of the National Best Practices Registry for suicide prevention

In 2007, the Office of Suicide Prevention and the Carson J Spencer Foundation teamed up to begin work on a groundbreaking campaign. In response to the same data that prompted the creation of the Working Minds program, the partnership set out to create a statewide public awareness campaign to enhance help seeking behaviors in working aged men. This collaboration garnered national attention from researchers and scholars in suicide at the American Foundation for Suicide Prevention (AFSP) who agreed to fund the creation of this program known as "Manspeak." The goal of the campaign is to reduce the stigma associated with seeking help to improve mental and emotional health. The campaign will offer edgy, intriguing and even darkly humorous messages to men's attention. The goal of the project team is to eliminate some of the stigma men specifically attach to mental healthcare.

In early 2004, the Veterans Administration awarded a Mental Illness Research Education and Clinical Center (MIRECC) to Veterans Integrated Service Network (VISN) 19 in Colorado. Thanks to the work of Dr. Robert Freedman, the chair of the Department of Psychiatry at the University of Colorado Health Sciences Center and Dr. Lawrence Adler, the Chief of Mental Health Services at the Denver Veterans Affairs Medical Center, Colorado was awarded the MIRECC grant, and the Rocky Mountain MIRECC was charged with conducting research, educational activities and clinical work focused on addressing suicidality in the Veteran population.

Another partner in the Denver-based MIRECC is the University of Utah School of Medicine Brain Institute. The Director of the Brain Institute is Dr. Perry Renshaw, who serves on the MIRECC staff. His work with MIRECC has focused on the role of altitude as a novel risk factor for suicide. Renshaw published an article in the September, 2010, online edition of the American Journal of Psychiatry, in which he reports that the risk for suicide increases by nearly one-third at an altitude of 2,000 meters, or approximately 6,500 feet above sea level. It is groundbreaking research such as this that could not only benefit the veteran population, but the civilian population of Colorado, as well.

Also in Colorado, soldiers saw the benefit of the Veterans Administration's and Army's suicide prevention programs implemented by a passionate prevention advocate, Maj. General Mark Graham. Maj. Gen. Graham and his wife Carol lost their oldest son Jeff, an Army Lieutenant when a roadside bomb exploded in Iraq. The following year, their younger son Kevin, a top ROTC cadet at the University of Kentucky, took his own life. Graham became a powerful promoter of reducing the stigma around depression and mental illness in the military and turned his base, Fort Carson in Colorado Springs, into a suicide prevention laboratory.

In April of 2006, Jarrod Hindman took over as director of Colorado's Office of Suicide Prevention. Hindman's primary prevention background was a benefit to Colorado's suicide prevention efforts, providing a broader perspective on addressing suicide as a piece of a larger public health puzzle. Hindman was instrumental in reorganizing the cycle for community-based grants awarded by the Office of Suicide Prevention. Hindman also helped OSP obtain a \$1.2 million from SAMHSA, through the Garrett Lee Smith Memorial Act. This grant allowed for the creation of Project Safety Net, a program that provided funds to seven at-risk communities. The communities selected for Project Safety Net had high suicide death and hospitalization rates among youth, the existence of an established suicide prevention agency and the presence of an active suicide prevention coalition. Participating communities worked with their local coalition and with a subcommittee advisory council of the Suicide Prevention Coalition of Colorado to broaden their suicide prevention programming. OSP also partnered with MHAC to review and update the 1998 Colorado state suicide prevention plan and the 2002 Colorado Trust report *Suicide in Colorado*.

One key finding from the Colorado Trust's report was that some risk factors associated with suicide are heightened during the transition to college. In response to this finding, Colorado's Governor signed into law the, "Colorado Higher Education Student Suicide Prevention Act" and Senate Joint Resolution 13, "Concerning the Promotion of Suicide Education Programs in Higher Education." With the passage of this Act, funds were allocated which allowed Colorado's colleges and universities to become leaders in the state's suicide prevention programming. One such educational institution, Adams State College, created a comprehensive Mental Health and Suicide Prevention Policy, which was at the forefront of efforts by Colorado colleges and universities. Trinidad State Junior College was the recipient of a federal grant from the Garrett Lee Smith Memorial Campus Suicide Prevention Program to develop the Suicide Prevention Outreach and Education (SPOE) Project to address the need for suicide prevention, education and unified referral among a rural eight-county region of Southern Colorado. This program served as a model to colleges and universities throughout the country.

Regis University had also become known for its campus-based suicide prevention efforts thanks to the work of Sally Spencer-Thomas of the Carson J Spencer Foundation. Spencer-Thomas was on the staff at Regis and led the foundation of the University's Active Minds Chapter and spearheaded campus-wide suicide prevention efforts. As part of this work, Spencer-Thomas partnered with the Office of Suicide Prevention, the Suicide Prevention Coalition of Colorado and Regis University to host the inaugural Bridging the Divide: Suicide Awareness and Prevention Summit. Bridging the Divide, an annual event since 2008, has become a regional resource for the West engaging national speakers and important conversations concerning the future of suicide prevention and intervention.

The University of Colorado at Denver was yet another educational institution which became involved in the fight against suicide. In 2008, the Depression Center at the University of Colorado Denver School of Medicine opened. The establishment of the Colorado Depression Center was the first step in a national effort to link centers focused on depression and bipolar disorder. The first Depression Center in the United States was founded in 2001 at the University of Michigan as a comprehensive center devoted to patient care, research, education and public policy in depression and related disorders. The goal was to

bring depression into the mainstream of medical research, care, education and public policy. With the founding of the new Depression Center at the University of Colorado Denver School of Medicine, the national initiative to link centers shifted into full gear. The Depression Center has a community program arm that conducts education and outreach concerning depression, a research arm focused on treatment of depression and bipolar disorder and a clinical arm dedicated to fostering the development of better psychotherapies to treat depression and mood disorders.

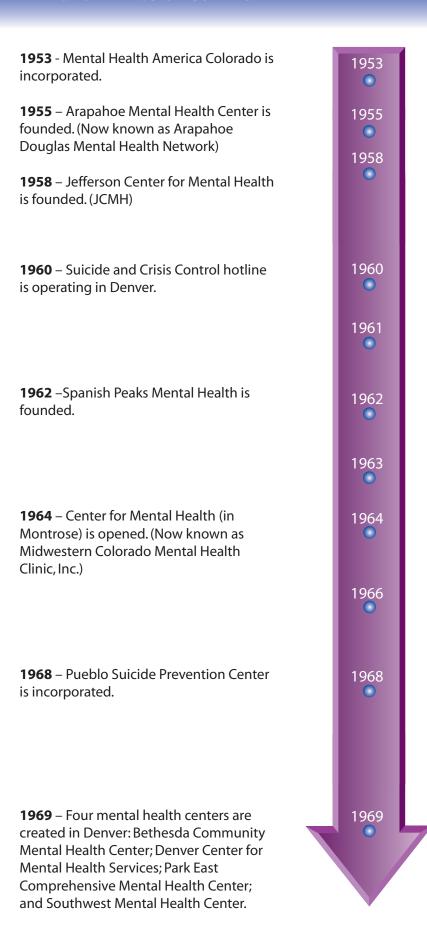
Several years before the opening of the Depression Center, Jeanne Rohner, then CEO of Mental Health America of Colorado, convened a series of interagency and interdisciplinary discussions surrounding the accessibility of mental health services in the Denver metro area. Professionals and community advocates were concerned because Colorado's hospital emergency rooms were overloaded with increasing numbers of people with mental illness and substance abuse disorders who could not find help elsewhere. Increasing numbers of mentally ill people were being held in jails on relatively minor infractions because law enforcement officials were not able to find help for them. The Denver-metro area didn't have a coordinated system of 24-hour emergency mental-health care. The group strategized about these problems for over three years. The result of these planning sessions was the establishment of Metro Crisis Services. Metro Crisis Services was founded in 2009 with the goal of establishing a round-the-clock, free crisis line staffed by trained professionals; creating and maintaining a large online public database with details about all available treatment resources in the metro area; and opening the first of three 24-hour Crisis Centers. Each Center will include an urgent care walk-in clinic and 16 residential beds for short term rapid stabilization. As of 2010, Metro Crisis Services was well into the implementation of its plan.

In 2009, the United States Army convened a Suicide Prevention Task Force. Peter Guterriez, a Research Clinical Psychologist at the VISN 19 MIRECC in Denver, and Thomas Joiner, a leading expert on suicide from Florida State, served on the Army screening task force committee. Gutierrez and Joiner created a proposal for a Military Suicide Research Consortium. In 2009, the Department of Defense Assistant Secretary of Defense (Health Affairs) from the Defense Health Program Enhancement (DHPe) awarded a \$17 million federal grant to Florida State University and the Denver Veterans Affairs Medical Center to establish the Department of Defense Military Suicide Research Consortium (MSRC) in Denver.

The consortium was the first of its kind to integrate Department of Defense and civilian efforts in implementing a multidisciplinary research approach to suicide prevention. Through a multidisciplinary approach and the use of state-of-the-art research methodology, the MSRC will yield new scientific data regarding suicidal behavior. Novel findings will assist in the development of more effective prevention interventions, risk assessment methods and treatments to decrease suicide. Findings also will serve to provide recommendations for improving policy and clinical practice guidelines. The efforts of the consortium are different from previous research in that a coordinated set of studies will be developed, rather than one single project conducted over time. External advisory boards will help identify gaps in the current literature on military suicide, and the consortium will work with a pool of researchers from around the world to develop research proposals and conduct the research.

CONCLUSION

Tracking the history of suicide prevention, postvention and intervention in Colorado does not provide all of the answers to the devastating and ongoing problem of suicide. While this Executive Summary only offers a peek at the dates and facts of Colorado's suicide prevention movement, the full document (A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado) provides an analysis of the hows and the whys of Colorado's evolution as a leader in suicide prevention. The stories of Colorado's leaders, both individuals and organizations are truly inspiring. The passion of these visionaries gave birth to the Suicide Prevention Coalition of Colorado and the foundation of a statefunded Office of Suicide Prevention. The citizens of Colorado were organizing and pushing for statelevel support for suicide prevention before it even became part of the national agenda. Colorado has a virtual directory of leaders who have been trend-setters in the world of suicide prevention – creating school-based education programs, conducting scientific research in the field of suicidology, serving on national committees and federal work groups to advise others about what has and has not worked in suicide prevention. However, when compared to other states in our nation, the funding for Colorado's Office of Suicide Prevention is limited. Better equipped, the Office of Suicide Prevention along with the Suicide Prevention Coalition of Colorado could re-engage these leaders who are based in Colorado and reach out to others who may influence not only Colorado's fight against suicide, but the national battle as well. It is only through a careful analysis of the stories and trends that are detailed in A History of Suicide Prevention, Intervention and Postvention Efforts in Colorado that the citizens and government of Colorado can maintain an informed and educated fight to prevent suicide.



1958 – Los Angeles Suicide Prevention Center opens.

1960 – International Association of Suicide Prevention (IASP) is founded in Vienna, Austria.

1961 – Britain's Parliament adopts the Suicide Act of 1961, which decriminalizes suicide in the UK, but makes assisting one punishable by up to 14 years in jail.

1963 – President John F. Kennedy passes the Community Mental Health Centers Act that funds construction and staffing for comprehensive, community-based mental health centers.

1966 - Center for the Study of Suicide Prevention (renamed the Suicide Prevention Research Unit) is established at the National Institute of Mental Health. (NIMH)

1968 – American Association of Suicidology is founded. (AAS)

First National Conference on Suicidology is held in Chicago, III., by AAS.

Robert Schuller founds New Hope, the first Christian 24-hour suicide prevention center, in California. **1970** - COMITIS Crisis Center begins operation to provide assistance to youth with substance abuse problems. They establish two 24-hour crisis helplines.

1974 – Eleanor Hamm joins the Pueblo Suicide Prevention Hotline.

1976 – Pueblo Suicide Prevention Center (PSPC) becomes a member of AAS.

The Gay, Lesbian, Bisexual, Transgender (GLBT) Community Center of Colorado is formed. (Now known as The Center)

1978 – Three students at Cherry Creek Schools take the lives.

1979 – LaRita Archibald attends the first AAS Conference held in Denver. (Only one session is offered for the bereaved.)

AAS requests that PSPC become the Region 8 Coordinator for Colorado, Wyoming, Montana, Utah, North and South Dakota.

1979-1984 – Governor Richard Lamm creates the Colorado Commission on Children and Their Families. Suicide prevention is one of the commission's priorities.

1980 – LaRita Archibald founds HEARTBEAT and holds the first meeting on November 1.

Julie Perlman becomes the Executive Director of AAS (based in Denver).

1982 – Intervention/Prevention Seeking Solutions to Self Destructive Behavior in Children is published by Barrett and Horsfall. The impetus for this report was the 1978 Cherry Creek Schools' suicides.

1983 – Suicide Prevention Allied Regional Effort (S.P.A.R.E.) begins to organize.



1980

O

1981

1982

1983

1984

1976 – AAS begins accrediting crisis centers nationwide.

1979 – 11th Annual AAS Conference is held for the first time in Denver.

National Alliance on Mental Illness (NAMI) is founded. NAMI is dedicated to improving the lives of individuals and families affected by mental illness.

1980 – Offices of American Association of Suicidology (AAS) move to Denver

1981 – Survivors after Suicide support group is founded in Los Angeles.

1983 – Centers for Disease Control (CDC) Violence Prevention Unit is created. This unit is later incorporated into the National Center for Injury Prevention and Control. One goal is to focus public attention on an increase in the rate of youth suicide.

1984 – AAS founds the National Survivor Committee. (LaRita Archibald is one of the founders.)

1985

1986

1987

1989

1985 – Pueblo (PSPC) is certified as an AAS Crisis Center.

S.P.A.R.E. formally organizes.

Youth Suicide Prevention Coalition, Columbine/Chatfield area is founded.

1986 – S.P.A.R.E. officially holds its first meeting.

S.P.A.R.E. holds first suicide prevention conference in Colorado. (November)

1987 – Mental Health Center of Denver (MHCD) was incorporated as a private, not-for-profit 501(c)3 corporation.

Weld County Suicide Prevention Coalition is founded. (Now known as Suicide Education and Support Services [SESS])

S.P.A.R.E. receives funding from an Alcohol and Drug Abuse Divison (ADAD) grant.

1989 – AAS/AFSP hold inaugural Healing After Suicide Conference in Denver. The conference is chaired by LaRita Archibald.

Suicide Resource Center of Larimer County is founded.

Parents Surviving Suicide support group is started by Vivian Epstein.

1985 – Secretary's Task Force on Youth Suicide is established by the U.S. Secretary of Health and Human Services to review the problem of youth suicide and recommend actions.

1986 – CDC establishes the Division of Injury Epidemiology and Control.

AAS offers first half-day survivors' workshops as part of AAS national conference

The Secretary of Health and Human Services' Task Force publishes "Assessment and Documentation of Youth at Risk for Suicide."

Diane Ryerson-Peake writes Adolescent Suicide Awareness Program, which later becomes SafeTEEN.

1987 – American Foundation for Suicide Prevention (AFSP) is founded.

The United Nations releases a statement that "concerned people from around the globe recognized that suicide and suicidal behaviors are public health problems that affect the health and welfare of families, communities, and entire nations."

1989 – AAS/AFSP hold inaugural Healing After Suicide Conference in Denver.

AAS publishes first issue of *Surviving Suicide*, the national survivors' newsletter.

1990

1992

1993

1994

1995

1990 – Bob and Jan Burnside found HEARTBEAT support group at Lutheran Hospital.

Shaka Franklin Foundation for Youth is founded by Les Franklin.

S.P.A.R.E. gracefully disbands.

Doris Walker starts *Parents Surviving Suicide* newsletter.

1993 – LaRita Archibald co-founds Suicide Prevention Pikes Peak.

HEARTBEAT is incorporated.

Article in the *Denver Post* dubs 1993 the "Summer of Violence"

In response to the murders that spurred the Denver Post article, Governor Roy Romer establishes a statewide Committee on Youth Violence Prevention.

1994 – Yellow Ribbon Youth Suicide Prevention Program is founded.

1995 – "Youth Risk Behavior Survey" is published by Colorado's State Health Department Survey Research Unit.

Community advocate, Deanna Rice, writes a letter to Gov. Roy Romer and his wife Bea, urging them to take action regarding the need for suicide prevention.

Weld County Suicide Prevention Coalition becomes SESS (Suicide Education and Support Services).

Suicide Prevention Pikes Peak founds Suicide Prevention Hotline – now the Kevin and Mark Graham Hotline.

Jennifer Gamblin of Mental Health America Colorado (MHAC) organizes a meeting of likeminded professionals and advocates to discuss the lack of suicide resources in Colorado. **1990** – Suicide Awareness Voices of Education (SAVE) is incorporated, with Adina Wrobleski as the first Executive Director.

1992 – Scott and Leah Simpson form a statewide citizens group in Washington State to expose teenage suicide and find solutions. Washington State lawmakers fund a new, \$2 million prevention program.

1993 – The United Nations (UN) and the World Health Organization (WHO) convene the first Interregional Expert Meeting on the Formulation of National Strategies for the Prevention of Suicide in Calgary.

1994 - Short-film, *Trevor*, wins an Academy Award. The film is a comedy/drama about a gay 13-year-old boy, who when rejected by friends because of his sexuality, makes an attempt to take his life.

1995 – Washington is the first state to launch a plan to prevent suicide.

AAS moves Central Office to Washington D.C. after 14 years in Denver. Alan (Lanny) Berman is appointed Executive Director.

Question Persuade Refer (QPR) is created by Dr. Paul Quinnett. QPR is developed in a joint venture between Spokane Mental Health and the Department of Health, Spokane County, Washington.

1996 – Members of the group organized by Jennifer Gamblin attend a suicide prevention conference in Washington State.

Gamblin organizes a press conference on the steps of the Capitol in conjunction with the inaugural National Suicide Awareness Day.

1997 – 3rd Bi-Regional Adolescent Suicide Prevention Conference is held in Breckenridge. (Sponsored by the Health Resources & Services Administration of the Maternal & Child Health Bureau)

A series of articles is published by Bill Briggs in the *Denver Post* highlighting the chronic suicide prevention problem in Colorado.

Talks begin with Gov. Roy Romer, who tasks Jillian Jacobellis, Division Director of Emergency Medical Services and Prevention Division at the Colorado Department of Public Health, and Patti Shwayder, executive director of the Colorado Department of Public Health and Environment, to gather funds to create a Suicide Prevention Advisory Commission.

Colorado Lifekeeper Quilt is created.

1998 – Gov. Romer allocates \$61,000 to fund the Suicide Prevention Advisory Commission, a state commission to investigate how other states combat suicide.

Suicide Prevention Advisory Commission is created on with Executive Order B 002 98. (March)

Dr. Tom Barrett, Mental Health Director of Colorado, makes a presentation to the Governor's Commission regarding the link between mental illness and suicide.

The Citizens' Advisory Panel on Suicide Prevention is formed. Tom Barrett and Steve Lowenstein are co-chairs. (March)

The work of the Blue Ribbon Suicide Prevention Advisory Commission officially begins. (April)

Work on Colorado's state suicide prevention plan begins.



1996 – AFSP Citizens' Roundtable is formed on Suicide Prevention.

Suicide Prevention Action Network (SPAN) USA is founded by Elsie and Jerry Weyrauch, with the goal of preventing suicide through public education, community action and advocacy.

AFSP holds inaugural National Suicide Awareness Day event.

Prevention of Suicide: Guidelines for the Formulation and Implementation of National Strategies is published by the World Health Organization and the United Nations.

1997 – SPAN petitions the federal government for action with regard to addressing suicide as a national problem.

Senate Resolution 84 (105th Congress) calls for suicide to be recognized as a national problem.

The Trevor Project is founded

National Organization for People of Color Against Suicide is founded. Colorado's Les Franklin is a co-founder and member of the Board of Directors.

The Jason Foundation is founded.

1998 – SPAN hosts a National Suicide Prevention Conference in Reno, Nevada, as a response to the WHO/UN publication Prevention of Suicide: Guidelines for the Formulation and Implementation of National Strategies. (October)

U.S. House of Representatives House Resolution 212 passes "recognizing suicide as a national problem" and "declaring suicide prevention a national priority." (October)

1998

1998 (cont.) - Suicide Prevention and Intervention Plan: The Report of the Governor's Suicide Prevention Advisory Commission is released.

Gov. Roy Romer leaves office. Bill Owens becomes Colorado's 40th Governor.

Rainbow Alley is created at The Center to serve Colorado's GLBT and questioning youth.

1999 – Members of the Blue Ribbon Commission and the Citizens' Advisory Panel personally deliver copies of the state plan to all heads of departments and legislators in Colorado. (January)

Citizens' Advisory and Governor's Blue Ribbon Commission merge to become the Suicide Prevention Coalition of Colorado (SPCC).

Ed Perlmutter helps pass Senate Joint Resolution 99-031 concerning suicide prevention.

Tom Barrett presents a Suicide Prevention Panel at the 1999 Legislative Education Day.

Murder/suicide occurs at Columbine High School in Littleton and adds to the need for suicide prevention in Colorado. (April)

SPCC works with the National Rifle Association on safe storage of weapons. Steve Lowenstein calls for more aggressive screening of handgun owners.

Safe2Tell concept is presented in Colorado Springs.

Community advocate Deanna Rice sends a letter to Gov. Bill Owens requesting that he act on implementing the state suicide prevention plan.

In response to Rice's letter, Gov. Owens asks Jane Norton, Executive Director of Colorado's Department of Public Health and Environment, to "make prevention and intervention a state priority."

Members of SPCC send a letter of request to testify in front of Colorado's Joint Budget Committee. (December)



1999

1999 – National Council for Suicide Prevention is formed.

1-800-SUICIDE is launched by Reese Butler.

Former U.S. Surgeon General, Dr. David Satcher, dedicates the national crisis hotline network (1-800-SUICIDE).

The U.S. Surgeon General releases the *Call to Action to Prevent Suicide* report.

National Survivors of Suicide Day is changed to International Survivors of Suicide Day by U.S. Senate resolution.

International Yellow Ribbon Suicide Awareness and Prevention Week is created by U.S. House Resolution 286.

WHO launches a global initiative for the prevention of suicide.

2000 – Gov. Bill Owens requests \$166,000 from the state Joint Budget Committee (JBC) to launch a two-person Office of Suicide Prevention.

Members of SPCC testify before the JBC in favor of Owens' proposal.

Columbine Review Commission is appointed by Gov. Owens.

Colorado House of Representatives approves House Bill 00-1432 mandating the creation of a State Office of Suicide Prevention. (March)

Gov. Bill Owens signs the establishment of Colorado's Office of Suicide Prevention (OSP) into law with an annual budget of \$157,800 from a general fund appropriation. (June)

Colorado's State Office of Suicide Prevention (OSP) opens in the Colorado Department of Public Health and Environment. (August)

Stephannie Finley is appointed acting interim director. Finley conducts a roadtrip to meet with those who have lost people to suicide and prepares a report for state lawmakers listing what types of suicide prevention programs are active in Colorado.

Shannon (Breitzman) Anderson is selected as Director of Colorado's Office of Suicide Prevention. (October)

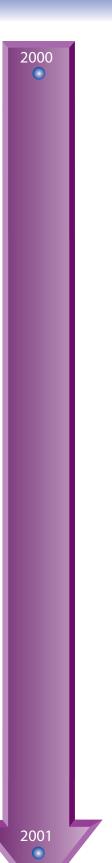
Colorado Trust partners with United Way to fund Mental Health America of Colorado's Colorado LINK school based teen-suicide prevention program.

OSP begins awarding one-year grants for suicide prevention to communities in Colorado.

Colorado receives a two-year, \$378,000 grant from SAMHSA for Partners for Teen Suicide Prevention Project.

2001 – OSP launches a multi-poster graphics campaign aimed at public awareness and education.

Columbine Review Commission releases report.



2000 – The Jed Foundation is founded

2001 – Surgeon General David Satcher unveils the *National Strategy for Suicide Prevention* by the Department of Health and Human Services. (January)

2001 (cont.) - Suicide Prevention Intervention Network (SPIN) becomes a 501(c)3. SPIN is the brainchild of Bob and Jan Burnside.

4 students take their lives at Green Mountain High School in Lakewood, Colo.

Eagle River Youth Coalition is founded in Eagle County.

OSP coordinates a statewide "training the trainers" event using Applied Suicide Intervention Skills Training. (ASIST)

2002 – The Colorado Trust and OSP release *Suicide in Colorado*.

In response to *Suicide in Colorado*, the Colorado Trust creates a 4-year (2002-2006) \$2.5 million Preventing Suicide in Colorado Initiative (PCIS) which funds 10 community initiatives.

Members of the Joint Budget Committee mistakenly think the Colorado Trust is going to fund the OSP. Community advocates rally to ensure that JBC maintains OSP funding in the state general fund.

Second Wind Fund holds first walk in response to suicides at Green Mountain High School.

HEARTBEAT founding chapter becomes a 501(c)3.

SPCC hosts Wings of Hope, the inaugural statewide suicide prevention summit. (May)

2003 – Suicide & Crisis Intervention Lifeline Coalition is created in Routt and Moffat counties.

Colorado Trust funds Safe2Tell based in Colorado Springs.

Colorado receives funding from CDC to participate in National Violent Death Reporting System (NVDRS).

First Second Wind referral is made by Jay Lang at Green Mountain High School.

Active Minds is incorporated in Colorado.

SESS introduces the Hispanic Youth Suicide Prevention Project.



2001 (cont.) - The tragic events of September 11, 2001, cause a shift in the U.S. economy

The University of Michigan Depression Center is founded as the nation's only comprehensive center devoted to patient care, research, education and public policy in depression and related disorders.



2002 – Suicide Prevention Resource Center (SPRC) establishes the Education Development Center, Inc. with funding from SAMHSA.

Reducing Suicide: A National Imperative is published by the Institute of Medicine of the National Academies of Science.

The National Violent Death Reporting System is launched in six states.

Shannon (Breitzman) Anderson presents on behalf of OSP at the AAS national conference.



2003 – Achieving the Promise: Transforming Mental Health Care in America is published by the President's New Freedom Commission on Mental Health.

SPRC/AFSP Evidence-Based Practices Project (EBPP) is launched to identify and disseminate information about evidence-based suicide prevention programs.

Inaugural World Suicide Prevention Day is held. This is an IASP initiative in collaboration with WHO. (September)

2004 – Safe2Tell begins accepting calls. (September)

Voz y Corazon is established at the Mental Health Center of Denver (MHCD).

Shannon (Breitzman) Anderson is invited to participate on the steering committee for the National Suicide Prevention Lifeline to provide consultation from a state perspective on crisis lines.

2005 – SPCC Speakers Bureau is formed.

Mariette Hartley is keynote speaker at the Wings of Hope Conference.

OSP hosts four town hall meetings across the state.

Rural Solutions in Sterling, creates the Life Source Training Project with funding from the Colorado Trust. (October)

Reaching Everyone Preventing Suicide (REPS) is created under the auspices of Steamboat Mental Health with funding from the Colorado Trust.

The Montelores Suicide Prevention Coalition is created under the auspices of The Piñon Project with funding from the Colorado Trust.

Boulder County Suicide Prevention Coalition is formed. (Now known as HOPE Coalition of Boulder County)

Colie's Closet is formed in Boulder to provide funding for treatment of depression.

The Carson J. Spencer Foundation is formed.

The Veterans Administration awards a Mental Illness Research Education and Clinical Center to VISN 19 in Colorado to conduct research, educational activities, and clinical work focused on addressing suicidality in the Veteran population.

The 38th Annual AAS Conference is held in Broomfield, Colorado.

Karen Mason becomes director of OSP.

AFSP hosts first Out of Darkness Walk in Colorado.



2005

2004 – The National Violent Death Reporting System expands to include 17 states.

"A Secret Best Not Kept" is released.

2005 – 1-800-273-TALK (National Suicide Prevention Lifeline) is launched with funding from the Substance Abuse and Mental Health Services Administration (SAMHSA).

The Garrett Lee Smith Memorial Act is passed by the U.S. Congress creating a grant program at SAMHSA to help states, tribes, and colleges/universities to develop and implement youth, adolescent and collegeage early intervention and prevention strategies to reduce suicide.

The Department of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act of 2006, which appropriates \$30 million for suicide prevention, is signed into law.

SAMHSA's National Registry of Evidence-Based Programs and Practices (NREPP) begins reviewing and listing suicide prevention and intervention programs.

The Veterans Administration awards a Mental Illness Research Education and Clinical Center (MIRECC) to Veterans Integrated Service Network (VISN) 19 in Colorado with the direction to conduct research, educational activities, and clinical work focused on addressing suicidality in the Veteran population.

The 38th Annual AAS Conference is held in Broomfield, Colorado.



2006 – SPCC members testify in support of HB 06-1098 concerning teachers professional development.

Jarrod Hindman takes over as director of OSP. (April)

Peter Gutierrez moves to Colorado and begins work at the VA. He is the acting president of AAS. (2006-2008)

Comcast makes Student Voices: Teen Suicide.

Substance Abuse and Mental Health Services Administration (SAMHSA) awards the Office of Suicide Prevention a Garrett Lee Smith grant in the amount of \$400,000 per year for three years to conduct youth suicide prevention efforts in five Colorado counties and at the University of Colorado at Boulder. (October)

Project Safety Net begins (2006-2009) with funding from Garrett Lee Smith grant.

OSP changes its format to a three-year funding cycle for all community grants.

Project HOPE is created at the Southeast Mental Health Center in Lamar to focus on education and awareness, gatekeeper training, screenings and appropriate referrals.

The Triage Project begins as a series of inter-agency and interdisciplinary discussions, convened and sponsored by Mental Health America of Colorado. (This project will become Metro Crisis Services.)

2007 – Kathy Cronkite is the keynote speaker at SPCC's Prisms Fundraiser.

"Analysis of Colorado's Suicide Prevention and Intervention Plan" is written by students at the University of Colorado at Denver Health Science Center Graduate School of Public Affairs.

MHAC and the Heartland Network receive support from the Colorado Trust to review state plan and update the 2002 Colorado Trust report, *Suicide in Colorado*.

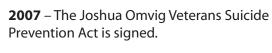


2006 – The SAMHSA Program Priority Matrix is updated to include suicide prevention as one of the matrix priorities.

The Federal Working Group on Suicide Prevention is established.

The United States Air Force Suicide Prevention Program (AFSPP) is launched.

Signs of Suicide (SOS) is launched.



Best Practices Registry for Suicide Prevention (BPR), is launched by SPRC and AFSP to identify, review, and disseminate information about best practices for suicide prevention.

The VA's Suicide Prevention Hotline becomes operational. (July)



2007 (cont.) – Passage of Senate Bill 36 ensures expanded mental health insurance coverage to include nine additional disorders: post-traumatic stress disorder; drug and alcohol disorders; anorexia nervosa and bulimia nervosa; social phobia; panic disorder; general anxiety disorder; agoraphobia; and dysthymia and cyclothymia (both depressive disorders).

The Carson J. Spencer Foundation establishes the Rising Star Scholarship.

OSP partners with AFSP to research, design, and implement a statewide public education campaign targeting men ages 35-54.

The Office of Suicide Prevention is invited to lend expertise to a prevention conference in Rapid City, S.D. The focus is suicide prevention among Native Americans in Colorado, Arizona, Wyoming, Nebraska, South Dakota, North Dakota, and Montana. Over 250 Native Americans attend the conference, which addresses the unique cultural and spiritual aspects of suicide among Native Americans.

2008 – The inaugural Bridging the Divide: Suicide Awareness and Prevention Summit is hosted by Regis University. (May)

The OSP and the Injury Community Planning Group at the Colorado Department of Public Health and Environment begin development of a training for first responders (emergency medical service providers and law enforcement), who are at an increased risk for suicide.

The Shaka Franklin Foundation goes international with expansion to Africa.

The "Don't Erase Your Future" campaign takes place at the University of Colorado Boulder.

The Depression Center at the University of Colorado Denver School of Medicine opens. This is the first step in a national effort to link centers focused on depression and bipolar disorder. (October)

Trinidad State Junior College receives a Garrett Lee Smith grant for campus suicide prevention.



2008 – *Long Way Home* is produced by Outreach Arts

A National Network of Depression Centers (NNDC) is launched with the opening of the Colorado Depression Center. (October)

2008 (cont.) – The Interfaith Network on Mental Illness is founded by NAMI Boulder.

The Colorado School Safety Resource Center (CSSRC) is created by Senate Bill 08-001. (May)

2009 – Preventing Suicide in Colorado: Progress Achieved & Goals for the Future is released by the Colorado Trust, MHAC and OSP. This document is an update to the 1998 State plan.

An announcement is released by the Colorado Department of Public Health and Environment regarding highest suicide rate ever in Colorado

Fort Logan closes its first inpatient beds

Sue Klebold publishes an article about her son Dylan and the tragedy at Columbine High School in *O* Magazine.

Sue Klebold is asked to join the AFSP National Survivor Council.

Fort Carson becomes a Suicide Prevention laboratory for the military. Fort Carson's suicide rates are half the previous year's.

Second Wind Fund flagship affiliate is established.

The Kirwin-Carr Foundation is established.

The Working Minds Toolkit is released by the Carson J. Spencer Foundation.

Suicide Education & Support Services (SESS) becomes a program of North Range Behavioral Health.

Garrett Lee Smith grant is renewed. (2009-2012)

OSP extends Project Safety Net funding.



2009 – The Army Suicide Prevention Task Force is established. (March)

AFSP and SPAN merge.

Department of Veterans Affairs (VA) and Lifeline launch an online chat service for veterans in emotional distress.

2010 - Fort Carson hosts a Suicide Prevention Forum.

Metro Crisis spins off from MHAC (May); Metro Crisis Call center is opened.

Carson J. Spencer Foundation's Working Minds Toolkit is accepted into the Best Practices Registry.

The Military Suicide Research Consortium (MSRC) Department of Defense, through the Military Operational Medicine Research Program is founded in Denver.

SPCC hosts a Town Hall of Hope in Genesee, Colo.

SPCC launches an online statewide suicide prevention calendar.

Carson J. Spencer Foundation establishes the Working Minds award.

Denver Public Schools proudly launches the DPS Health Agenda 2015, outlining district health priorities for the next five years.

2011 - Fort Logan shuts the doors to its adolescent unit.

Metro Crisis begins working toward accreditation with AAS.

The House Education Committee begins work on Bill 1254, a bill designed to re-assess the antibullying guidelines in Colorado public schools.

The Center for Dependency, Addiction and Rehabilitation at the University of Colorado hosts "Confronting Addiction and Suicide: A Forum of Interfaith Community Leaders."

SafeSchools hosts a Youth Suicide Prevention and Intervention Symposium with OSP.

SPCC hosts a Regional Convocation on Suicide Prevention in conjunction with a meeting of the Depression Center Scientists Suicide Research Workgroup. 2010

2010 - The Military Suicide Research Consortium (MSRC) Department of Defense, through the Military Operational Medicine Research Program is founded in Denver.

A study is released by the University of Utah Brain Institute, Salt Lake Veterans Affairs and Case Western University linking altitude and suicide rates.

The National Network of Depression Centers (NNDC) announces the passage of the ENHANCED Act of 2009 as part of the Patient Protection and Affordable Care Act.

The National Action Alliance for Suicide Prevention is established. Colorado's Sally Spencer-Thomas is named Executive Secretary.

Lifeline honors its 2 millionth call. (June)

2011

This project was funded by the Suicide Prevention Coalition of Colorado and the Colorado Office of Suicide Prevention.

For more information:

Suicide Prevention Coalition of Colorado P.O. Box 440311, Aurora, CO 80044-0311 (720) 352-7505

info@suicidepreventioncolorado.org www.suicidepreventioncolorado.org Office of Suicide Prevention Col. Dept. of Public Health & Environment 4300 Cherry Creek Drive South PSD-ISVP-A4, Denver, CO 80246 (303) 692-2539

cdphe.psdrequests@state.co.us www.cdphe.state.co.us/pp/suicide/index.html





Colorado Department of Public Health & Environment
Office of Suicide Prevention



Colorado Department of Public Health and Environment