A large, bright sparkler is the central focus of the top half of the poster, set against a dark blue background with bokeh light effects. The sparks are bright white and yellow, radiating outwards.

*“ Bringing Light to
the Darkness:
Suicide Prevention
Strategies ”*

A circular inset photograph shows a group of five people standing together at night, each holding a lit sparkler. They are dressed in casual to semi-formal attire, and the scene is illuminated by the light of the sparklers.

Suicide Prevention Conference

LOCATION

Marriott Convention
Center at NCED

2901 OK-9, Norman, OK 73071

DATE

April 27, 2017

www.ok.gov/odmhsas

FEATURED SPEAKERS



THOMAS JOINER went to college at Princeton and received his Ph.D. in Clinical Psychology from the University of Texas at Austin. He is The Robert O. Lawton Distinguished Professor in the Department of Psychology at Florida State University (FSU). Dr. Joiner's work is on the psychology, neurobiology, and treatment of suicidal behavior and related conditions. Author of over 550 peer-reviewed publications, Dr. Joiner is the Editor-in-Chief of the journal *Suicide & Life-Threatening Behavior* and was awarded the Guggenheim Fellowship. He received the Dublin Award for career achievement in suicide research from the American Association of Suicidology, as well as research grants from the National Institute of Mental Health and Department of Defense (DoD). The Lawton Professorship and the Dublin Award are the single highest honors bestowed, respectively, by FSU and the American Association of Suicidology.

He is a consultant to NASA's Human Research Program and is the Director of the DoD-funded Military Suicide Research Consortium, a \$30 million project which was recently extended for a second five-year phase at a similar funding level.

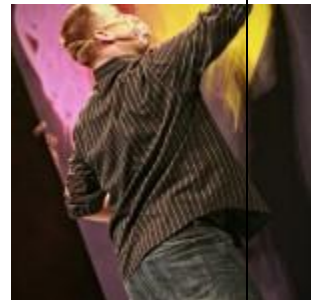
Dr. Joiner has authored or edited seventeen books, including *Why People Die By Suicide*, published in 2005 by Harvard University Press, and *Myths About Suicide*, published in 2010, also with Harvard University Press. Largely in connection with *Why People Die by Suicide*, he has made numerous media appearances, including two appearances on the Dr. Phil Show. He runs a part-time clinical and consulting practice specializing in suicidal behavior, including legal consultation on suits involving death by suicide.



Ben Glenn struggled with Attention Deficit Disorder (ADD) throughout his formative years, ultimately finding it impossible to stay interested in school and leaving following his junior year in college. Although his ADD caused him to struggle academically, it proved to be a perfect companion in his career as a performer, creator, and educator. Rather than let it hold him back, he chose to be inspired by his condition. He uses it as a tool for writing, speaking, and making videos focused on ADHD and personal development.

Ben's speaking engagements began spontaneously after his short-lived collegiate career when he was presented with the opportunity to tell his story at small church camps and conferences. He has since expanded his outreach by working with students, teachers, and by speaking at corporate events. Ben is the published author of seven books and the founder of the Chalkguy LEGO drive.

When he isn't working, Ben enjoys fishing, boxing, and spending time with his wife and two daughters. He credits his daughters for helping him overcome his fear of speaking to elementary age children.



CONFERENCE OVERVIEW

This conference will provide participants with a showcase of emerging research and programs in the suicide prevention field. In addressing the complexity of suicide in our communities, emphasis will also be placed on connecting resources for professionals and families. Participants will hear from local and national experts in the field of suicide prevention.

WHO SHOULD ATTEND

This conference will be of interest to Educators, Mental Health and Substance Abuse Professionals, Physicians, Nurses, Social Workers, Public Health/School Administrators, Employers, Researchers, Crisis Center Staff, Faith Leaders, Consumers, First Responders, Military Personnel, Survivors, and all persons with an interest in suicide prevention.

DATE AND LOCATION

The conference will be held April 27, 2017, at the Marriot Convention Center at NCED, Norman, OK.

REGISTRATION

Early-Bird Rate is 94.25 good through March 30th; after March 30th the regular rate is 145.00.

<http://registration.xenegrade.com/odmhsastraininginstitute/coursedisplay.cfm?schID=1172>

CONTINUING EDUCATION

The Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), Institute for Mental Health and Substance Abuse Education and Training has requested approval of 5.75 credit hours through the Oklahoma State Board of Licensed Social Workers, the Oklahoma Board of Examiners of Psychologists, the Oklahoma Board of Licensed Alcohol and Drug Counselors, the Licensed Professional Counselors Committee, the Licensed Marital and Family Therapist Committee, and the Council on Law Enforcement Education and Training. Continuing education hours are also approved for Certified Behavioral Health Case Managers and credentialed Peer Recovery Support Specialists.

Please check in at the registration desk upon your arrival to verify your attendance. Continuing education credit is not provided without verification. At the completion of the conference, all participants will log into their account **within 30 days of the completion of the conference**, take the evaluation, and receive a certificate of attendance from the ODMHSAS Institute for Mental Health and Substance Abuse Education and Training. For more information, call Human Resources Development at (405) 522-8300.

COMFORT ROOM

There will be a Comfort Room available for anyone needing to speak with a licensed mental health professional. For directions to the Comfort Room, please visit the registration desk and we will be happy to assist you to the location.

CONFERENCE SPONSORS

CREEK NATION

OKLAHOMA CITY INDIAN HEALTH SERVICES

ODMHSAS

AGENDA AT A GLANCE

8:00 – 8:30 am	Registration (Registration desk will be open from 8:00 am to 5:00 pm.)
8:30 – 9:00 am	Opening
9:00 – 10:00 am	Opening Plenary
10:00 – 10:30 am	Morning Break
10:30 – 12:00 pm	Concurrent Sessions
12:00 – 1:30 pm	Lunch on Your Own Oklahoma Suicide Prevention Council Meeting (Everyone is welcome to attend.)
1:30 – 3:00 pm	Concurrent Sessions
3:00 – 3:15 pm	Afternoon Break
3:15 – 3:30 pm	Closing Remarks
3:30 – 4:30 pm	Closing Plenary
4:30 – 5:00 pm	Survivors' Reflection and Remembrance (optional)/Dismissal

8:00 – 8:30 am	Registration (Registration desk will be open from 8:00 am to 4:30 pm)
8:30 – 9:00 am	Opening
9:00 – 10:00 am	<p>Opening Plenary Why People Die By Suicide <i>Thomas Joiner</i></p> <p>In his new theory of suicidal behavior, Thomas Joiner proposes three factors that mark those most at risk of death: the feeling of being a burden on loved ones; the sense of isolation; and, perhaps chillingly, the learned ability to hurt oneself. He tests the theory against diverse facts taken from clinical anecdotes, history, literature, popular culture, anthropology, epidemiology, genetics, and neurobiology--facts about suicide rates among men and women; white and African-American men; anorexics, athletes, prostitutes, and physicians; members of cults, sports fans, and citizens of nations in crisis.</p>
10:00 – 10:30 am	Morning Break
10:30 – 12:00 pm	<p>CONCURRENT SESSIONS</p> <p>1A— Suicide in Men <i>Thomas Joiner</i></p> <p>Come participate in a discussion-based session on suicide in men in the military, on murder-suicide, and on a new syndrome called Acute Suicidal Affective Disturbance.</p> <p>1B—Motivational Enhancement Therapy with Veterans <i>Jeremy Nickel</i></p> <p>Military veterans returning from conflicts demonstrate a high rate of mental health problems (Tanielian and Jaycox, 2008; Burnett-Zeigler, et al, 2011). Research conducted in the past decade has identified numerous barriers to veterans seeking mental health care (Elbogen, et al, 2013). Many veterans do not receive adequate treatment (Seal, et al, 2009).</p> <p>1C—Illuminating Aging <i>Karen Orsi</i></p> <p>An aging body and brain, while a normal part of aging, increases the risk for the development of behavioral health disorders and contributes to this population having one of the highest rates of suicide. The facts of older adult suicide will be presented, to include statistics, protective factors and risk factors. The impact of stigma, self-stigma, ageism and self-ageism will be explored. The 4 D's of older adult suicide - depression, debility, disconnectedness and deadly means -will be examined and recommendations of strategies for prevention will be discussed. Attendees will learn about current collaborative efforts to address older adult behavioral health in Oklahoma and how they can become a partner. Older adult resources will be provided.</p>

	<p>1D—Limiting Access to Lethal Means <i>Ryan Fowler</i> Traditionally suicide prevention has focused on who takes their life, when, where and especially why. We are beginning to understand that how people attempt suicide plays a crucial role in whether they live or die. In this breakout session, you will learn an abbreviated version of the Means Matter Campaign of Harvard Public Health: Counseling Access to Lethal Means (CALM), an American Suicide Prevention Foundation (AFSP), and Suicide Prevention Resource Center (SPRC) registered best practice training.</p> <p>1E— Suicide Trends in Oklahoma <i>Brandi Woods-Littlejohn and Suhayb Anwar</i> Suicide is the most prevalent type of violent death and a top ten leading cause of death in Oklahoma. The Oklahoma Violent Death Reporting System (OKVDRS) is a rich database that collects detailed information and data from multiple sources. An overview of youth and adult suicide, gender differences, and circumstances surrounding suicide in Oklahoma will be presented. In addition, special emphasis on suicide among young adults ages 18-24 and males 25-55 will be presented.</p>
<p>12:00 – 1:30 pm</p>	<p>Lunch Oklahoma Suicide Prevention Council Meeting starts at 12:15 p.m. <i>(Everyone is welcome to attend.)</i></p>
<p>1:30 – 3:00 pm</p>	<p>CONCURRENT SESSIONS</p> <p>2A—Zero Suicide: Integration in a Tribal Health System <i>Dr. Shannon Dial and Barbara Underwood</i> The Chickasaw Nation in partnership with ODMHSAS is in the middle of a three year project implementation of the Zero Suicide Initiative. This project has provided excellent opportunities to fill gaps in our assessment processes, improve identification of those at risk, and provide integrated behavioral health triage to those who present to the Emergency Department. This presentation will inform the audience of our progress and lessons learned thus far.</p> <p>2B—Suicide Prevention Using the SBIRT Model <i>Angela Dickson</i> SBIRT stands for Screening, Brief Intervention, and Referral to Treatment. The SBIRT project was created to provide universal screening to patients who go to primary care clinics. The screening component identifies patients who are at risk of excessively using substances and/or patients with mental health problems. Evidence has shown that those people who go on to complete suicide have visited their primary care provider within 30 days of the suicide. Screen for suicide is part of the screening.</p> <p>2C— History of Suicide of the OK Army National Guard <i>Jessica-Rose Hammack</i> The Oklahoma Army National Guard has experienced 22 suicides in the past 13 years. Each suicide is unique; however, there are common trends found throughout their stories. Hear their stories through analyzed research. See what we can learn from their deaths in hopes others may live on from their experiences. The most common linking risk factor is loss of significant relationship or fear of loss. The Guard experiences different stressors from Active Duty. Guardsmen are not full-time employees; therefore, they must obtain another job. Since Guardsmen are not full-time employees, their access to insurance and the VA is not the same as those serving on Active Duty.</p>

	<p>2D—Acute Risk Factors of Suicides <i>Dr. Clayton Morris</i> Is there a predictive model/can clinicians predict? What are the problems with the data: how do we interpret suicide behavior from non-suicidal self-harm or from suicidal ideation?</p> <p>2E—The Importance of Mental Health First Aide <i>Kodi Pollard</i> Mental Health First Aid takes the fear and hesitation out of starting conversations about mental health and substance use problems by improving understanding and providing an action plan that teaches people to safely and responsibly identify and address a potential mental illness or substance use disorder. When more people are equipped with the tools they need to start a dialogue, more people can get to the help they may need. Mental Health First Aiders can even save lives.</p>
3:00 – 3:15 pm	Afternoon Break
3:15 – 3:30 pm	Closing Remarks
3:30 – 4:30 pm	<p>Closing Plenary From Special Ed to Simply Special <i>Ben Glenn</i> This message details Ben’s personal story of being diagnosed with a learning disability in the 3rd grade. It follows the line of struggles and triumphs that came after his diagnosis and how he learned to overcome those challenges and appreciate himself in the process. Come watch the “Chalk Guy”!</p>
4:30 pm	Dismissal