

Overview of Virginia Suicide Prevention Efforts
Fairfax County Board of Supervisors Legislative Committee
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Suicide Statistics – Fairfax County and Virginia

- In Virginia, on average, one person dies by suicide every eight hours, and suicide is the 11th leading cause of death overall. (*From the American Foundation for Suicide Prevention*)
- In 2016, Fairfax County’s suicide rate was approximately 8.1 per 100,000 persons.
- According to the 2016-2017 Fairfax County Youth Survey, 13.7% of Fairfax County students reported they had seriously considered attempting suicide in the past year, and 5.4% of Fairfax County students reported having attempted suicide in the past year.

Suicide Prevention Efforts in Virginia

- The Virginia Department of Health’s Suicide Prevention Program coordinates statewide training for school personnel, human services providers, faith communities, and others on suicide prevention and intervention, including: identification of individuals at-risk of suicide, screening, counseling, and referral.
- The 2016-2018 biennium budget allocated \$500,000 in FY 2017 and \$500,000 in FY 2018 to be used for a comprehensive statewide suicide prevention program, including public education, evidence-based training, health and behavioral health provider capacity building, and related suicide prevention training.
- The 2016-2018 biennium budget also allocated \$970,521 in FY 2017 and \$1 million in FY 2018 to contract with three poison control centers, and directed the State Health Commissioner to review existing poison control services. As of part of this review, the Commissioner was asked to determine how to best use these services as a resource for patients with mental health disorders and for health care providers treating patients with poison-related suicide attempts, substance abuse, and adverse medication events.
- Several bills were enacted by the 2017 General Assembly relating to raising awareness of suicide and improving prevention efforts.

The following bills highlight key legislation on suicide, however, this is not an exhaustive list of all legislation that could indirectly impact suicide prevention efforts.

2017 GA Enacted Legislation

HB 2258 (Filler-Corn) directs the Department of Behavioral Health and Developmental Services (DBHDS) to report to the Governor and the General Assembly on its activities related to suicide prevention across the lifespan by December 1, 2017.

HJ 548 (Bell, Richard P.)/**SJ 251** (Hanger) designates the week of September 10, in 2017 and in each succeeding year, as National Suicide Prevention Week in Virginia.

SB 1117 (McPike) requires every person seeking initial licensure or renewal of a license with an endorsement as a school counselor to complete training in the recognition of mental health disorder and behavioral distress, including depression, trauma, violence, youth suicide, and substance abuse.

SB 1430 (Reeves) requires baccalaureate public institutions of higher education to develop and implement policies that ensure that after a student suicide, affected students have access to reasonable medical and behavioral health services, including postvention services. The bill defines postvention services as services designed to facilitate the grieving or adjustment process, stabilize the environment, reduce the risk of negative behaviors, and prevent suicide contagion.

2017 GA Failed Legislation

HB 2042 (Murphy) requires continuing education related to suicide assessment, treatment, and management for all licensed doctors of medicine, osteopathy, and chiropractic medicine; licensed physician assistants; licensed nurse practitioners; licensed occupational therapists; licensed registered nurses; licensed practical nurses; licensed physical therapists and physical therapy assistants; licensed counselors, substance abuse treatment practitioners, and marriage and family therapists; licensed psychologists; and licensed social workers.