

Section 2: The Building Blocks Focusing Action

Comprehensive Goals to Prevent Suicide

The Plan gives a framework for getting everyone in Georgia—including *you*—involved in preventing suicide. The Plan is designed to guide individual people, agencies, and organizations, both in local communities and at the regional and state levels. One intention of this Plan is to change individual attitudes, knowledge, and behaviors about suicide. Equally important, the Plan seeks to affect all the systems in Georgia that touch our lives, including education, health care, the media, business, faith, and criminal justice, and to motivate them to help prevent suicide.

The previous section of the Plan told you a little about why suicide prevention is important, how the Plan came into existence, and why we need to evaluate any actions we take in our work for suicide prevention.

This section gives actual goals and ideas you can use. The information offered is not to be considered a “prescription” for what you must do in your community. You know your community best. Consider the ideas below as a menu from which you can select those you believe will work best. By acting on *any* of the ideas listed in this section, you will have a direct impact on suicide prevention efforts in Georgia.



The **building blocks** of the Plan are eleven goals with related objectives based on the *National Strategy for Suicide Prevention: Goals and Objectives for Action*. A goal is a targeted outcome—a result to aim for—which will promote the reduction of suicide. The goals in the Plan are grouped together under three headings **A**wareness, **I**ntervention, and **M**ethodology – **AIM**.

Any single step you take, any one objective you try to tackle, can help prevent suicide. If you take on one goal in your community, and someone else does the same thing in theirs, and on and on, together we will be building a powerful force to save lives in Georgia!

- **Plan Objectives:** For each goal, there are a number of related objectives, which can serve as direction guides. Their purpose is to help you focus on how to achieve the goals.
- **Action Ideas:** Each objective has an action idea, to stimulate your thinking about ways to implement or support that objective in your local community.
- **Evaluation:** If you are carrying out suicide prevention activities, part of your time and your budget needs to be devoted to evaluating the outcomes from your project. Please see the listing of Web resources for information about conducting sound evaluations.

"We need to help people that have no hope or money. We need to support them and not throw them away."

—A Georgia mother who lost a daughter to suicide

Action Step: **A**AWARENESS

The problem of suicide in Georgia is serious—after all, suicide takes more lives than murder in our state. More Georgians need to be made aware of this! And at the same time, they need to be told that many suicides are preventable, and *they* can help fight suicide.

There is no single way to reach every person in Georgia and make them more aware of the problem of suicide but some of the useful approaches are:

- Public information campaigns
- Forums at the community level where friends, neighbors, and professionals can come together and learn about suicide prevention opportunities
- Regional and state conferences
- Web sites

Summary

A variety of approaches are needed to reach all the different types of people that make their home in Georgia.

Goal 1. Promote awareness that suicide is a serious public health problem and that many suicides are preventable.

Objective 1.1 Develop and implement public information campaigns designed to increase all Georgians' knowledge of suicide prevention and an understanding of the role of risk and protective factors in prevention.

Action idea: Develop information materials that community members can distribute to neighbors, friends, and co-workers. Call 1-770-740-0632 —the Plan office —for ideas. Materials should describe suicide risk and protective factors, present available community resources, explain how to join in the effort to prevent suicide in Georgia, and discuss how to increase help-seeking behaviors.

Objective 1.2 Establish regular Georgia suicide prevention conferences designed to foster collaboration with stakeholders on prevention strategies and to inform communities.

Action idea: Hold public forums across the state at the regional level and in local communities. These forums should present the Plan and encourage regions and communities to act on implementing the Plan.

Objective 1.3 Increase the number of public and private Georgia institutions active in suicide prevention that deliver clear and culturally sensitive information through the Internet.

Action idea: Access the Plan web site for information about Plan activities and links to resources for suicide prevention: www.georgiasuicidepreventionplan.org.

Goal 2. Develop broad-based support for suicide prevention.

The only really effective way to prevent a public health problem like suicide is for people from every walk of life, every faith, every ethnic background, and every age group to work together. Taking action to prevent suicide is more than just the job of mental health professionals—*every* Georgian has a part to play in saving lives! Working together will achieve success in preventing suicide.

Objective 2.1 Increase the number of people in Georgia actively involved in some aspect of suicide prevention.

Action idea: At the community level, put outreach activities in place that build on the public information campaigns and actively recruit people from all parts of the community to participate in the Plan.

Objective 2.2 Increase the number of local communities in Georgia actively working to implement the Plan.

Action idea: Recruit and train at least one member of each community in Georgia to be a community organizer for suicide prevention.

Objective 2.3 Include suicide prevention education in ongoing programs and activities carried out by prevention organizations, professional, volunteer, and other groups across Georgia.

Action idea: Visit leaders of these community groups to engage their participation and support in integrating suicide prevention into ongoing programs. Examples of the groups include child abuse, substance abuse, domestic violence, tobacco, and gambling prevention organizations. Other groups include Family Connection Programs, Community Service Boards, Boys and Girls Clubs, United Way Agencies, and faith-based service providers.

Objective 2.4 Increase the number of faith communities in Georgia that adopt policies and programs promoting suicide prevention.

Action idea: Identify faith communities at both the state and community level. Visit their leaders to ask for their cooperation and support. Provide suggested policies and programs promoting suicide prevention, and ask the faith leadership to implement them in their organizations.

Objective 2.5 Expand the Plan Steering Committee with representatives from both the public and private sectors including scientists, suicide survivors, consumers of mental health services, educators, clinicians, community volunteers, public health leaders, and corporate/nonprofit advocates. This Committee provides oversight for Plan implementation, and it works towards collaboration between state wide agencies and organizations.

Action idea: Coordinate with existing prevention programs in related areas, such as substance abuse, child abuse, and gambling prevention; faith communities, Cooperative Extension Service, Community Service Boards, Family Connections, and others.

Objective 2.6 Expand the Plan Advisory Council to provide advice and support for implementation.

Action idea: Recruit active Advisory Council members that are broadly representative of Georgia. The Advisory Council will hold meetings in various parts of Georgia.

Goal 3. Develop and implement strategies to reduce the stigma associated with being a consumer of mental health, substance abuse, and suicide prevention services.

Suicide is often closely linked to mental illness and to substance abuse, and both can be effectively treated. However, the stigma of mental illness and substance abuse prevents many people from getting treatment they need and may also cause family members to try to hide what's happening instead of reaching out for help. They are afraid of how others will react. They are afraid they will face discrimination and prejudice. Stigma has been identified as a strong barrier to future progress in the area of mental health and suicide prevention. Each Georgian can play a significant part in overcoming the barrier of stigma, so that people can receive the help they need.

Objective 3.1 Increase the proportion of the people in Georgia that view mental and other health as co-equal and inseparable components of overall health.

Action idea: Train community volunteers to give educational presentations at local civic groups.

Objective 3.2 Increase the proportion of the people in Georgia that view mental disorders as real illnesses that respond to specific treatments.

Action idea: Develop a public awareness campaign that shows mental illnesses as treatable disorders and not character failings.

Objective 3.3 Increase the proportion of the people in Georgia that view consumers of mental health, substance abuse, and suicide prevention services as pursuing fundamental care and treatment for overall health.

Action idea: Develop a speakers bureau that can make community presentations.

Objective 3.4 Increase the proportion of those suicidal persons in Georgia with underlying mental disorders who receive appropriate mental health treatment.

Action idea: Work to ensure that mental health services are culturally sensitive.

Action Step: INTERVENTION

Goal 4. Develop and implement community-based suicide prevention programs.

Objective 4.1 Improve collaboration among government agencies and among public/private partners in implementing the Plan at the state, regional, and local levels.

Action idea: Representative governmental groups include the Georgia Department of Human Resources (Divisions of Public Health, Mental Health, Mental Retardation and Substance Abuse, Aging Services, and Family and Children's Services); the Georgia Department of Education, Juvenile Justice, Pardon and Paroles, Community Service Boards, County Health Departments, the Department of Highway Safety and the Department of Public Safety. Non-governmental groups include SPAN USA, the National Mental Health Association of Georgia, the National Alliance for the Mentally Ill, the Georgia Council on Child Abuse, the Family Connection, the Georgia Council on Substance Abuse, the Georgia Prevention Network, and Cooperative Extension Service, among many others. Identify a lead agency or organization to coordinate implementation of the Georgia Plan.

Objective 4.2 Establish institutional policies and procedures for referral of persons at risk and for crisis response.

Action idea: Provide knowledgeable presenters to assist with in-service education programs that will keep school system personnel updated about referral and crisis response procedures.

Objective 4.3 Increase the number of school districts with evidence-based programs that are designed to address childhood and adolescent distress and prevent suicide. Call 1-770-740-0632 (The Plan office) for ideas.

Action idea: Support parent-teacher groups and school system personnel in identifying a district-wide suicide prevention program to put into place.

Objective 4.4 Increase the number of colleges and universities in Georgia with evidence-based programs designed to address young adult distress and prevent suicide.

Call
1-770-740-0632
(The Plan office)
for ideas.

Action idea: Work with student counseling service directors at colleges and universities in Georgia to select and implement programs.

Objective 4.5 Increase the number of employers in Georgia that make evidence-based prevention programs for suicide available to their employees.

Action idea: Coordinate activities with employee assistance professionals and human resources directors at local companies.

Objective 4.6 Improve suicide prevention programs for both adult and juvenile offenders in Georgia’s correctional institutions, jails, and detention centers.

Action idea: Invite staff and community advisory board members from correctional institutions to conferences and meetings on mental health services and suicide prevention.

Objective 4.7 Increase the number of elder service organizations that include evidence-based suicide prevention programs designed to identify older people at risk for suicidal behavior and refer them for treatment.

Action idea: Work with directors of the nursing homes in communities to conduct a needs assessment for suicide prevention programs for their residents.

Objective 4.8 Increase the number of family, youth and community service organizations and providers in Georgia with evidence-based suicide prevention programs.

Action idea: Establish round table meetings for local youth-serving organizations to exchange information and promote incorporation of suicide prevention into their ongoing programs.

Objective 4.9 Improve and coordinate crisis help line services in Georgia.

Action idea: Evaluate existing coverage and outcomes to identify areas for improvement.

Goal 5. Promote efforts to reduce access to lethal means of self-harm.

Objective 5.1 Increase the proportion of primary care clinicians, other health care providers and health and safety officials who routinely ask about the presence of lethal means of self-harm in the home and educate about actions to reduce associated risks.

Action idea: Partner with hospital associations, managed care organizations, and professional medical health organizations to provide opportunities for clinicians and other health care providers to learn about decreasing access to lethal means of self-harm.

Objective 5.2 Develop and distribute materials to educate about actions to reduce the accessibility of lethal means of self-harm.

Action idea: Engage community leaders and prevention specialists in development of appropriate materials.

Goal 6. Implement training for recognition of at-risk behavior and delivery of effective treatment.

Many of the conditions associated with suicidal behaviors have effective treatments. Unfortunately, many people are not trained to recognize persons at risk for suicide who could benefit from treatment. Even many health professionals do not have the training to provide proper assessment and treatment, and may not know when to refer persons for specialized care.

This goal addresses the need to provide training to key community gatekeepers as well as professionals. Gatekeepers are community members who regularly come into contact with people who may be at risk for suicide.

Objective 6.1 Provide continuing education for primary care providers that includes the recognition of persons at risk for suicide, information on screening programs, assessment and management of suicide risk, effective treatments, and appropriate conditions for referral to specialty care.

Action idea: Include workshops on suicide prevention at annual meetings of professional associations.

Objective 6.2 Incorporate suicide prevention materials in training programs for physician assistants, physicians, medical residents, nursing care providers, and other health professionals. This training should cover the assessment and management of suicide risk and identification and promotion of protective factors.

Action idea: Work with directors of education at professional schools in Georgia to include suicide prevention training in the basic curriculum. This training should cover the assessment and management of suicide risk and identification and promotion of protective factors.

Objective 6.3 Increase the number of clinical social work, counseling, and psychology graduate programs in Georgia that include suicide prevention training. This training should cover the assessment and management of suicide risk and identification and promotion of protective factors.

Action idea: Work with directors of education at these professional programs to include suicide prevention training in the basic curriculum. This training should cover the assessment and management of suicide risk and identification and promotion of protective factors.

Objective 6.4 Increase the number of social workers, poison control center personnel, outreach workers, case managers, and home visitation program providers who receive job-

related suicide prevention training. This training should cover the assessment of and response to suicide risk and behaviors.

Action idea: Work with the Department of Family and Children's Services to incorporate training on the assessment and response to suicide risk and behaviors into ongoing in-service education.

Objective 6.5 Increase the number of clergy from all faith communities in Georgia who are trained in identification of and response to suicide risk and behaviors, and who are trained to tell the difference between mental disorders and faith crises.

Action idea: Provide speakers to the local ministerial alliance to assist in training programs.

Objective 6.6 Increase the number of educational faculty and staff and youth development staff working outside school settings who receive training on identifying and responding to children and adolescents at risk for suicide.

Action idea: Work with local school systems and youth-serving organizations to provide gatekeeper training for all staff, e.g., teachers, school counselors, bus drivers, custodians, coaches, playground supervisors, and after-school program staff.

Objective 6.7 Increase the number of juvenile justice, justice, correctional and public safety system personnel in Georgia who receive training on identifying and responding to persons at risk for suicide.

Action idea: Work with youth detention centers to provide gatekeeper training for all their staff.

Objective 6.8 Improve education programs and support services available to family members and others in close relationships with people at risk for suicide and survivors of suicide.

Action idea: Work with community mental health centers to incorporate education programs for family members and others in close relationships with people at risk for suicide.

Objective 6.9 Increase the number of community helpers, such as mail carriers, hairdressers, Meals on Wheels volunteers, and senior service volunteers who are trained to recognize, respond to, and refer for help people at risk of suicide and associated mental and substance abuse disorders.

Action idea: Work with local Meals on Wheels programs to provide gatekeeper training to staff and volunteers.

Goal 7. Develop and promote effective professional practices and support services.

Implementing this goal will help to ensure that at-risk people receive the assessment and treatment services they need. It presents ways to help provide appropriate training for key people who deliver these services, and it seeks to ensure that a full range of services will be provided. These services include follow-up for at-risk people so that treatments are continued to reach maximum benefits. Reaching these service providers and helping them do more for suicide prevention can save many lives.

Objective 7.1 Increase the proportion of patients treated for self-destructive behavior by Georgia hospital emergency departments that pursue the proposed mental health follow-up plan.

Action idea: Work with hospital associations to develop tracking procedures that can confirm mental health follow-up appointments.

Objective 7.2 Promote the incorporation of guidelines to use in assessing suicidal risk among people receiving care in primary health care settings, including survivors of suicide, emergency departments, and specialty mental health and substance abuse treatment centers.

Action idea: Sponsor the distribution of posters for emergency rooms that list important steps in assessing suicide risk.

Objective 7.3 Increase the number of mental health and substance abuse treatment centers in Georgia that have clear suicide prevention policies, procedures, and evaluation programs. These programs should be designed to assess suicide risk and to intervene to reduce suicidal behaviors.

Action idea: Work with local mental health and substance abuse directors to offer community and staff in-service suicide prevention education.

Objective 7.4 Enhance screening for depression, substance abuse and suicide risk as a basic standard of care for all state-supported healthcare programs in Georgia's primary care settings, hospice, and skilled nursing facilities.

Action idea: Sponsor depression screening days.

Objective 7.5 Promote guidelines for aftercare treatment programs for individuals exhibiting suicidal behavior (especially those discharged from inpatient hospital units and mental health institutional settings).

Action idea: Work with local directors of specialty treatment centers and offer community participation in developing guidelines that include education and psychological support to families and significant others of those who have exhibited suicidal behavior.

- Objective 7.6** Certain people in Georgia provide key immediate services to suicide survivors as first responders, for instance, emergency medical technicians, public safety officers, funeral directors, and clergy. Provide training that specifically addresses these first responders' own exposure to suicide and the unique needs of survivors.
- Action idea:** Organize suicide survivors in the community to provide seminars on recognizing and managing the personal impact of suicide on first responders.
- Objective 7.7** Increase the availability of appropriate mental health and substance abuse disorder treatment services in Georgia for persons with mental disorders, substance abuse disorders, or a history of trauma or abuse. Increase the number of patients served who complete their course of treatment or continue indicated maintenance treatment.
- Action idea:** Local clinicians follow up with a call or letter to encourage their patients with depression that have discontinued treatment to resume it.
- Objective 7.8** Increase the number of hospital emergency departments in Georgia that routinely provide immediate post-trauma psychological support and mental health education for all victims of sexual assault and/or physical abuse.
- Action idea:** Encourage volunteer training in suicide prevention and victim support. Link them to hospital emergency departments as a resource.
- Objective 7.9** There are people in Georgia receiving care for the treatment of mental health and substance use disorders that are at-risk for suicide. Develop guidelines for providing education to their family members and significant others. Implement the guidelines in Georgia facilities such as general and mental hospitals, mental health clinics, and substance abuse treatment centers.
- Action idea:** A partnership made up of service providers in a community can work together with some family members to develop education guidelines and implement them in their respective facilities.
- Objective 7.10** Extend and improve comprehensive support services for survivors of suicide.
- Action idea:** Provide training for group facilitators and community meeting spaces for survivor of suicide support groups.

Goal 8. Increase access to and community linkages with mental health and substance abuse services.

Services to prevent suicide must be available when and where people need them. That means providing services in lots of different places. Financial barriers such as not having health insurance must come down. Structural barriers such as lack of health care professionals to meet the need must

be overcome. You can help put any one of a variety of outreach goals in place that address personal barriers, such as not knowing what to do or when to seek care, or concerns about confidentiality or discrimination.

Objective 8.1 Compile and update a guide to Georgia suicide prevention resources and services (A Georgia Suicide Prevention Resource Directory.) Provide linkages to The National Suicide Prevention Resource Center.

Action idea: Provide current suicide prevention information to Georgia's existing help lines.

Objective 8.2 Make Georgia the leading state in health insurance plans that cover mental health and substance abuse services on par with coverage for other health.

Action idea: Educate state senators and representatives and the insurance commissioner, in order to build the necessary support for substantial parity legislation. In addition, community members can work with employee organizations and local employers to provide benefits for mental health coverage at the same level as coverage for physical health care.

Objective 8.3 Increase the number of Georgia counties with health and/or social services outreach programs for at-risk populations. These outreach programs should include mental health and substance abuse services and suicide prevention activities.

Action idea: Work with county health and social service agencies to address the need for all staff who make home visits and/or provide case management services to the elderly to be trained to make appropriate referrals to mental health services.

Objective 8.4 Support guidelines for mental health and substance abuse screening with referral procedures for students in schools, colleges and universities. Expand the availability of site-based nurses and counselors to provide assessment and referral after screening.

Action idea: Parents could work with the local school board to institute policies and procedures for assessment, referral, and follow-up to local service providers that would offer same-day initial appointments for high-risk students.

Objective 8.5 Support consistent use of guidelines for mental health screening in sites with at-risk populations such as correctional facilities, detention centers, crisis centers family planning clinics, recreation centers, youth-serving organizations, homeless shelters, employee assistance offices, and alcohol and drug treatment programs.

Action idea: Community members can support ongoing continuing education in screening for providers and the availability of licensed professionals to provide referral services.

Objective 8.6 Support quality care/use management guidelines that detail appropriate responses to suicidal risk or behavior. Implement these guidelines in managed care and health insurance plans that operate in Georgia.

Action idea: Work with managed care organizations in Georgia to develop and implement clinical practice guidelines for suicide risk assessment and management.

Goal 9. Improve reporting and portrayals of suicidal behavior, mental illness, and substance abuse in the entertainment and news media.

Evidence indicates that the way suicide, mental illnesses, and substance abuse are presented in the media may affect the suicide rate.

Objective 9.1 Establish a Georgia coalition of public and private organizations to influence media practices. This group can promote the accurate and responsible representation of suicidal behaviors and mental illnesses and informed media coverage of suicide prevention.

Action idea: Identify survivors and community advocates who will be active participant members of the coalition.

Objective 9.2 Increase the proportion of entertainment and news programs and print coverage in Georgia that reflect accurate and responsible portrayal of suicidal behavior, mental illnesses, and related issues.

Action idea: Offer regular seminars for editors and producers that identify appropriate coverage and misleading or dangerous depictions of suicide, mental illnesses, and treatments.

Objective 9.3 Encourage Georgia journalism schools to include guidance in their course of study on the portrayal and reporting of mental illnesses, substance use disorders, suicide, and suicidal behaviors.

Action idea: Bring survivors and prevention specialists together with journalism professors in developing curriculum materials.

Action Step: *M*METHODOLOGY

Goal 10. Promote and support research and evaluation on suicide prevention.

Advancing research and evaluation increases the knowledge base for effective interventions to prevent suicide. This knowledge can inform decision-making among community groups as they seek to provide quality programs that will make a difference.

Objective 10.1 Increase public and private funding for suicide prevention research and evaluation conducted in Georgia, and for studies on how to put scientific knowledge into practice in Georgia at the state, regional, and community levels.

Action idea: Develop community-researcher-practitioner networks for better suicide prevention research in Georgia.

Objective 10.2 Support development of and access to a registry of prevention activities with demonstrated effectiveness for preventing suicide and suicidal behaviors.

Action idea: Local suicide prevention program planners could review the registry to help guide their selection of activities.

Objective 10.3 Provide training and technical assistance on the evaluation of suicide prevention programs implemented in Georgia.

Action idea: Develop and distribute user-friendly toolkits on program evaluation.

Objective 10.4 Increase the number of jurisdictions in Georgia that will regularly collect and provide information for follow-back studies on suicides.

Action idea: Follow-back studies of suicide gather additional information after a death that can be useful in prevention. Develop community support for follow-back studies so that local jurisdictions will be willing to participate.

Goal 11. Improve and expand surveillance systems.

Remember that surveillance is the ongoing process of collecting information about the “who, what, when, where, how, and how many” of suicide in Georgia. Surveillance systems are key to planning for suicide prevention. We must get information about suicide both from sources developed for this purpose (like vital statistics and medical examiner databases) and from other sources like mental health agencies, psychiatric hospitals, child death review team reports, and emergency departments. To realize success in preventing suicide we need better indicators to measure community-level results and expanded surveillance systems. By helping implement the objectives for this goal, you are helping to improve data available to make informed decisions about suicide prevention.

Objective 11.1 Develop and refine standard procedures for death scene investigations, and implement these procedures in all Georgia’s counties.

Action idea: Provide scientific information about suicide to coroners and medical examiners developing procedures, so the appropriate kinds of investigation evidence can be sought to accurately identify deaths that were suicide.

Objective 11.2 Develop and test a protocol to assist Georgia hospitals in collecting uniform and reliable data on suicidal behaviors by coding external causes of injury and determining associated costs.

Action idea: The Department of Human Resources Division of Public Health could conduct a trial of the protocol and report back findings and recommendations.

Objective 11.3 Implement a violent death reporting system in Georgia that includes suicides and collects information not currently available from death certificates.

Action idea: Use local Fatality Review Committees to provide additional information.

Objective 11.4 Produce reports on suicide and suicide attempts in Georgia, integrating data from multiple state data management systems.

Action idea: Support publication of regular Georgia suicide surveillance reports from the Department of Human Resources Division of Public Health.

Objective 11.5 Establish surveillance systems of risk behaviors for suicide among youth and adults in Georgia.

Action idea: Local community members need to ask their school boards and superintendents to administer the CDC Youth Risk Behavior Survey (YRBS) throughout the school system including all questions about suicidal thinking and behaviors.

Objective 11.6 Develop a set of community level indicators for progress in suicide prevention. Indicators are measures that signal achievement of community level results.

Action idea: Initiate a process for identifying indicators keyed to the Plan and make indicator information accessible in communities across Georgia.

*"We need help now.
The young people here
are greatly at risk."*

—A Georgia minister

Section 3: The Keystone Next Steps . . .

A Continuous Improvement Process

The Plan represents the best efforts of a group of dedicated people who welcome your ideas for community prevention activities and user feedback on the Plan. Please contact us at:

**The Georgia Suicide Prevention Plan
5034 Odins Way, Marietta, GA 30068**

Phone: **770-740-0632** (local Atlanta)
Fax: **770-642-1419**
E-mail: **GSPP@spanusa.org**

This Plan is a living document. That means it is expected to change and to further develop over time, as new opportunities, new community participants, new research, and new conditions arise. Whether you have been involved in the initial development of the Plan or are just now joining, you can make a difference by contributing to the Plan's continued development.

Taking Action

This Plan is comprehensive and wide-ranging. Putting the Plan into action will take place in phases. For the Plan to work, every one of us must be involved. The keystone of the Plan is implementation—getting the Plan to work. This is where **you** are important. In addition to the work of state agencies, implementing the Plan requires broad participation and collaboration from each of us in our own communities. Professionals and community volunteers must work side-by-side, and public agencies and private organizations will have to expand their partnerships so that together Georgia can make a lasting difference in suicide prevention.

Suicide Prevention in Georgia is truly everyone's business!

The essential next steps are designed to:

- ✓ increase support, participation, and collaboration for suicide prevention,
- ✓ develop an operating structure or coordinating body for the Plan that reflects a public/private partnership,
- ✓ involve communities in suicide prevention planning at the local level,
- ✓ provide opportunities for people to share ideas and work together through statewide conferences and local community forums, make technical assistance and resources for suicide prevention widely available,
- ✓ develop or identify useful indicators to benchmark community progress in suicide prevention,
- ✓ improve program evaluation and surveillance, and
- ✓ provide progress reports on Plan implementation.

**Now is the time
for Georgians to realize success
in preventing suicide!**