

# Legislative Fiscal Bureau

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Joint Committee on Finance

Paper #438

## **Suicide Prevention Coordinator (Health Services -- Public Health)**

[LFB 2023-25 Budget Summary: Page 277, #15]

#### **CURRENT LAW**

The Injury and Violence Prevention Program in the Division of Public Health (DPH) conducts statewide surveillance of injuries and violence, provides education, promotes interventions to reduce injuries and violence, and works with local and tribal public health departments to implement related programs. Current law requires DPH to enter into memoranda of understanding with other state agencies to reduce intentional and unintentional injuries. However, DPH is not budgeted state funding or positions to implement specific suicide prevention interventions.

Beginning in September of 2022, Wisconsin was awarded a five-year grant from the Centers for Disease Control and Prevention (CDC) to implement and evaluate a comprehensive suicide prevention program and coordinate efforts with partner organizations. In the first year (2022-23), Wisconsin received \$868,700. As of June, 2023, CDC has awarded similar grants under this program on a competitive basis to 13 other states. DPH currently contracts with a nonprofit organization, Mental Health America of Wisconsin, to coordinate suicide prevention efforts under the Prevent Suicide Wisconsin program, and allocated \$450,000 of these CDC funds to support this contract in 2022-23. Based on preliminary allocation information, DPH awarded an additional \$117,700 to Children's Hospital of Wisconsin for suicide prevention.

DHS also contracts with Family Services of Northeast Wisconsin to operate the state's 988 suicide and crisis lifeline, which accepts calls, texts, and online chats from Wisconsin residents who are experiencing crisis or are having suicidal thoughts. The lifeline operates 24 hours a day, seven days a week and is staffed by mental health professionals and trained volunteers to help callers manage crisis episodes and connect them with local, follow-up services as needed. Wisconsin's 988 lifeline is a member organization of the national 988 suicide and crisis lifeline.

The Department allocates \$2,000,000 annually from the state's federal mental health block grant funds to support this service. The 988 lifeline is discussed in a separate Legislative Fiscal Bureau budget paper.

## **DISCUSSION POINTS**

- 1. Assembly Bill 43 and Senate Bill 70 would provide \$66,800 GPR in 2023-24 and \$87,300 GPR in 2024-25 and 1.0 GPR position, beginning in 2023-24, to create a suicide prevention coordinator position in the Injury and Violence Prevention Program.
- 2. DPH indicates that the coordinator would create new partnerships to support suicide and self-harm prevention efforts, organize current programs, provide training and technical assistance to partner organizations, and develop a suicide prevention communications plan, among other duties.
- 3. Deaths by suicide have grown in Wisconsin in the past decade. In 2021, the most recent year for which data is available, 905 people died by suicide in Wisconsin. That represents an increase of 138 deaths (23%) from 2011, an average increase of 2.1% per year. The per-capita incidence of suicide increased from 12.9 deaths per 100,000 residents in 2011 to 15.1 in 2021.
- 4. Many more people experience suicidal thoughts or attempt suicide than die by suicide each year. Suicide is most common among people ages 45 through 54, but 2017 survey data indicate that 15% of Wisconsin high school students had made a plan to commit suicide. In 2016 and 2017, the most recent years for which data is available, an average of 4,699 people in Wisconsin were hospitalized with injuries from attempted suicide or self-harm each year.
- 5. Self-harm injuries disproportionately affect women, especially women under 25. In 2016–2017 in Wisconsin, 62% of people hospitalized with self-harm injuries were women. Conversely, more men than women die by suicide each year. Between 2013 and 2017, 78% of people who died by suicide in Wisconsin were men. This disparity is partially explained by the fact that men who attempt suicide are more likely than women to use a firearm, which reduces the opportunity for life-saving interventions compared to other methods of suicide.
- 6. Suicide is the leading cause of death for Wisconsin youths (ages 10 through 19). Rates of suicidal ideation and suicide deaths among youth declined in the 1990s and early 2000s, but have since begun to gradually increase. In 2016–2017, 4.9 out of every 1,000 young women ages 15 through 17 and 1.5 out of every 1,000 young men in that age range were admitted to an emergency department with self-harm injuries. This relates to broader stressors and mental health challenges facing youth in Wisconsin, which have increased significantly in recent years. 2021 survey data indicate that 52% of high school students in Wisconsin experience anxiety, and 34% report feeling sad or hopeless every day, ten percentage points higher than reported a decade ago. Youth who experience bullying related to their sexual orientation or gender have a significantly higher risk of suicide.
- 7. Veterans are also disproportionately likely to die by suicide. Veterans make up 7% of Wisconsin's population, but accounted for 17% of suicides in the state in 2013–2017. Veterans

experience significantly higher rates of health concerns that can be related to suicide, including posttraumatic stress disorder, substance use disorder, and depression. Additionally, of veterans who died by suicide in 2013–2017 in Wisconsin, 42% had a prior physical health problem or limitation, compared to 21% of non-veterans who died by suicide.

8. To improve coordination of suicide prevention efforts in Wisconsin, including providing training and technical assistance to partner organizations, the Committee could provide the suicide prevention coordinator position proposed under AB 43/SB 70. [Alternative 1]

## **ALTERNATIVES**

1. Provide \$66,800 in 2023-24 and \$87,300 in 2024-25 and 1.0 position, beginning in 2023-24, to create a suicide and self-harm prevention coordinator position in the DHS Injury and Violence Prevention Program.

ALT 1	Change to Base				
	Funding	Positions			
GPR	\$154,100	1.00			

2. Take no action.

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