



Aitkin County Health & Human Services

204 FIRST STREET NW
AITKIN, MINNESOTA 56431-1291
PHONE 1-800-328-3744 or 1-218-927-7200
FAX # 1-218-927-7210

AITKIN COUNTY HEALTH & HUMAN SERVICES ADVISORY COMMITTEE WORKGROUP

Meeting Minutes

April 3, 2019

Committee Members Present:

Penny Olson
Kristine Layne
Kari Paulsen
Joy Janzen
Steven Teff
Kevin Insley
Lori Chenevert
Cindy Chuhanic
Joel Hoppe
Terri Mathis

Commissioner Mark Wedel

Guests:

Cynthia Bennett, ACH&HS Director
Shawn Speed, Clerk to the Committee
Erin Melz, Public Health Supervisor
Brea Hamdorf, Disease Prevention & Control PHN
Robert Marcum, Citizen

Absent:

Carole Holten
Joell Miranda
Commissioner Laurie Westerlund

I. Call to Order

- a. Joel, in Carole's absence, called to order the workgroup meeting of the Aitkin County Health & Human Services Advisory Committee at 3:00pm on April 3, 2019 at Aitkin County Health & Human Services in the large conference room.

II. Approval of April 3, 2019 Agenda

- a. Steve moved to approve the agenda, Kari seconded, all members voting yes to approve the agenda.

III. Education/Discussion of Project – Cynthia Bennett

- a. Cynthia talked about the purpose of the workgroup and that our project was Suicide Prevention.

IV. Suicide Prevention Presentation – Brea Hamdorf

- a. Brea started by talking about her presentation and how we will be working with the CAPS, Committee for the Awareness and Prevention of Suicide.
- b. We were asked for volunteers to sit in on the CAPS meeting with her.
 - i. Steve, Cindy, and Carole will be a part of that.
 - ii. Meeting is May 13, at HHS, from 1-3pm.
- c. We will be utilizing the Board briefing sheet we already have to brief the Board on the workgroup items we discussed each meeting.
- d. Talked about utilizing elevator talks, short talks, to spread the word about Suicide Prevention.
- e. Brea provided toolkits to the members to utilize when having these talks to people.
- f. We broke into small groups to practice what we would say to people during these elevator talks.
- g. The main focus for these talks this time is to bring it up in various church or religious type group settings.
- h. There was some discussion on different groups people could reach out to or different places people could have these conversations.
- i. Try to make the discussion personal, as most people have had some experience with suicides in their personal lives.
- j. Try to keep track of who you talk to so we have record of it, if needed.
- k. Gave ideas for what to say, how to start the conversation.
- l. Need to get the word out to people that there is help out there and that people need to be more honest if they are having mental health issues when they see their doctors.
- m. If anyone needs help with what to say more, get a hold of Brea.
- n. If you are not comfortable with going more in depth about the subject, give them Brea's information.
- o. There were quite a few organizations thrown out where we could do a presentation to.
- p. If you have ideas for organizations send it to Lori.
- q. Brea will be sending out ideas for conversation starters.
- r. Slides from presentation are attached.

V. Adjournment

- a. The meeting was adjourned at 4:30pm.

Carole Holten, Chairperson

Shawn Speed, Clerk to the ACH&HS Advisory Board

The following documents were included in the packet of information sent to the members for review prior to the meeting or distributed at the meeting:

- Copy of the agenda for the April 3, 2019 meeting.
- Copy of the Suicide Prevention Presentation

Aitkin County Suicide Prevention

Brea Hamdorf ~ Aitkin County Public Health

April 3, 2019

Suicide Facts

- **Suicide is Preventable**
- Suicide is the 8th leading cause of death in MN for all ages
 - 2nd leading cause for ages 15-34
 - In 2017, 783 Minnesotans died by suicide
- An estimated quarter million people become suicide survivors each year.
 - There is one suicide for every estimated 25 suicide attempts
- Only half of all Americans experiencing an episode of major depression receive treatment.
 - 80-90% of people that seek treatment for depression are successfully treated using therapy and/or medication.

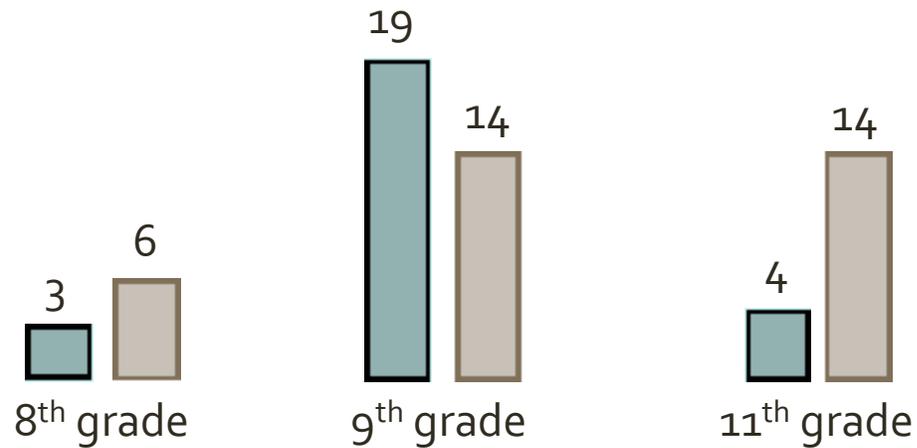
2015 Bridge to Health Survey



Aitkin County Statistics

2016 MN Student Survey

Aitkin County students that reported they seriously
considered attempting suicide , 2016
(count)



■ Yes, during the last year
■ Yes, more than a year ago

Aitkin County Statistics

Community Health Assessment

- Mental Health identified at one of the top 3 areas of health concern for Aitkin County residents
 - 36% of respondents with children at home reported that their children complained about anxiety, depression, or suicidal thoughts in the last month
 - 44% of respondents with children at home reported that their children complained of bullying, sexual harassment, or cyber-bullying in the last month.

Background

- Summer 2017, Stephanie Downey, MDH, reached out to Public Health in regards to the 2016 MN Student Survey.
- Aitkin County youth at higher risk for suicidal thoughts and behaviors.
- Community Readiness Assessment completed to guide next steps
- CAPS: Committee for the Awareness & Prevention of Suicide formed as a result of CRA

Community Readiness Assessment

Six Dimensions of Community Readiness

Dimension A: Community Efforts	To what extent are the efforts, programs, and policies that address prevention?
Dimension B: Community Knowledge of Efforts	To what extent do community members know about local efforts and their effectiveness, and are the efforts accessible to all segments of the community?
Dimension C: Leadership	To what extent are appointed leaders and influential community members supportive of suicide prevention?
Dimension D: Community Climate	What is the prevailing attitude of the community towards suicide prevention? Is it one of hopelessness or one of responsibility and empowerment?
Dimension E: Community Knowledge about the issue	To What extent do community members know about to have access to information on suicide prevention, consequences, and understand how it impacts your community?
Dimension F: Resources for Prevention	To what extent are local resources (people, time, money, space) available to support the prevention effort?

Community Readiness Assessment

Stages of Community Readiness



Community Readiness Assessment

- A total of 7 interviews in 7 different community segments
- 4 interviews in person
- 3 interview over-the-phone
- 30 open-ended questions relating to the six readiness dimensions
- Interviews were transcribed
- Scored independently by 2 Minnesota Department of Health staff

CRA Results

Dimension Specific Scores: 3 Highest scores

Dimension	Score	Interpretation
Dimension A: Community Efforts	3.14	Stage 3: a few community members recognize the need to initiate effort, immediate motivation missing. Stage 4: Some community members have met and have begun a discussion of developing community efforts.
Dimension B: Knowledge of Efforts	3.00	Stage 3: a few community members have heard of efforts, but extent of knowledge is limited. Stage 4: Some members of the community have basic knowledge of the efforts.
Dimension F: Resources	2.86	Stage 2: There are no resources available for dealing with suicide prevention. Stage 3: the community is not sure what it would take, or where the resources would come from to initiate efforts.

CRA Results

Dimension Specific Scores: 3 Lowest scores

Dimension	Score	Interpretation
Dimension E: Community Knowledge about the Issue	2.79	Stage 2: No Knowledge about suicide. Stage 3: A few community members have basic knowledge about suicide and recognize that some people may be affected by the issue.
Dimension D: Community Climate	2.54	Stage 2: the prevailing attitude is “There is nothing we can do” or “Only ‘those’ people do that” Stage 3: the community climate is neutral, disinterested, or believes that suicide does not affect the community as a whole.
Dimension C: Leadership	2.32	Stage 2: Leaders believe suicide is not a concern in the community Stage 3: Leaders recognize the need to do something regarding suicide prevention.

CRA Results

- Overall Community Readiness Score: **2.78**
- Level of Readiness: Denial/Resistance
- Denial/ Resistance: At least some community members recognize that suicide is a concern, but there is limited recognition that it might be occurring locally.



CAPS goals for readiness level

- **Goal 1: Raise awareness that mental illness and suicide exist in the community.**
- **Goal 2: Reduce mental illness stigma**
- **Goal 3: Raise awareness of resources**

CAPS ~ Advisory Committee Collaboration

- Advisory Committee decide that the 2019 group project/focus will be assisting CAPS in the dissemination of information.
- Meet every other month: April, June, August, October
 - 1 hour mental health training
 - 1 hours work session
- Participation in CAPS meetings
 - 1 or 2 advisory members to be part of CAPS to report updates
- Reporting update to Board
 - 1 or 2 advisory members will report updates to Board

Conversations

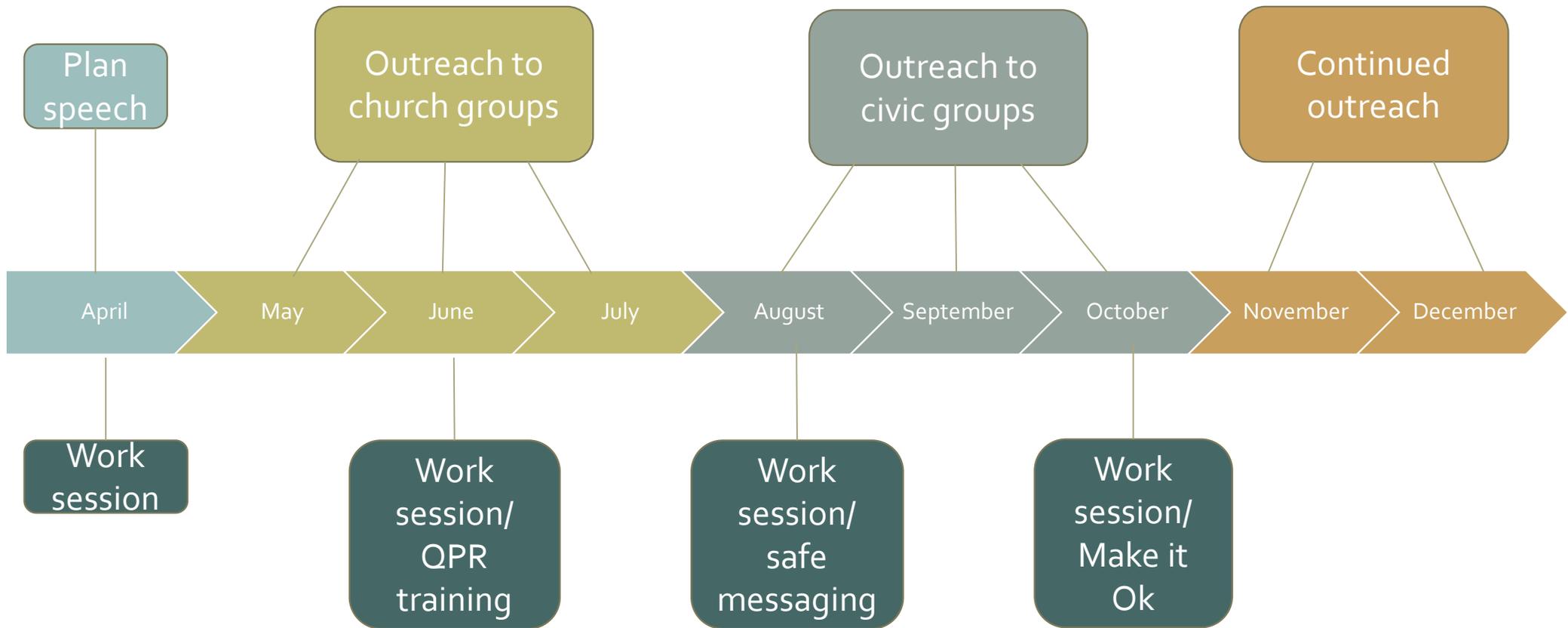
- One-on-one or small group conversation
 - Personalized 5-10 minutes about why mental health & suicide prevention are important
 - Focus on message that mental illness is common and suicide is preventable
 - Promote a positive message
- Offer toolkit of resources
- Refer back to CAPS for further information or presentations

Key points to include in message

- Mental illness is common
 - 1 in 4 people will have a mental illness in their lifetime
- It is ok to talk about mental illness
 - Encourage asking open questions
 - “That must be very difficult, do you want to talk more about it?”
 - “Is there something I can do to help?”
 - Encourage listening without judgement
 - Discourage shutting people out
- Suicide is preventable
 - Most (80-90%) people that seek treatment for depression are successfully treated
 - Most people who are thinking about suicide, do not die by suicide. They can find help and hope.
 - Suicide does not discriminate; people of all ages, genders, backgrounds, and ethnicities can be at risk.

Group Activity

- Small group practice (20 minutes)



Evaluation measures

- Report back
 - Group name
 - Location
 - Date
 - Number of people in group
 - Any comments