STATE OF CONNECTICUT

DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

M. Jodi Rell
Governor

Thomas A. Kirk, Jr., Ph.D.
Commissioner

VIA E-MAIL

August 24, 2007

The Honorable Christopher Murphy
501 Cannon House Office Building
Washington, DC 20515

Dear Representative Murphy:
I am writing to you on behalf of the CT Department of Mental Health and Addiction Services' (DMHAS) Connecticut Youth Suicide Prevention Initiative (CYSPI), funded by the Garrett Lee Smith Memorial Act of 2004, to support the Garrett Lee Smith Memorial Act (GLSMA) Reauthorization of 2007 (the Reauthorization) (S.1514/H.R.2511). The Reauthorization was introduced on May 24, 2007 by Senators Chris Dodd (D-CT), Gordon H. Smith (R-OR), and Jack Reed (D-RI) in the Senate, and Representatives Bart Gordon (D-T) Greg Walden (R-OR) and Danny Davis (D-IL) in the House. It would allow the five-year continuation and expansion of the original GLSMA (P.L. 108-355) that was signed into law by President George W. Bush on October 21, 2004, and will expire at the end of fiscal year 2007. The original purpose of the GLSM is to support youth and young adult targeted suicide prevention efforts nationwide, and if passed, the Reauthorization would expand this purpose to suicide early intervention and prevention strategies for all ages, particularly for youth.

According to the American Association of Suicidology, 32,439 individuals across all age groups completed suicide in 2004, that is 88.6 people per day and one person every 16.2 minutes. It is said that each suicide impacts at least six other people, thus, 194,634 people became survivors of suicide in 2004 in the United States. In 2006, the Connecticut Chief Medical Examiner's Office reported a total of 275 deaths by suicide, one death every 1.3 days, and therefore, 1,650 new survivors in our own state. Hanging, followed by handguns, are the most commonly used methods.

The Centers for Disease Control and Prevention (CDC) reports that suicide is the third leading cause of death among young people ages 15 to 24. In 2004, 4,316 suicides were reported in this age group, and in the past 60 years, the suicide rate has quadrupled for males 15 to 24 years old, and has doubled for females of the same age, and is the second leading cause of death among college students.

The 2005 Connecticut School Health Survey, a survey of 9^{th} –12^{th} -graders administered by the State Department of Public Health and funded by the CDC, found that 15.1% (U.S =16.9%) of students seriously considered attempting suicide during the past 12 months; 13.8 % (U.S.=13.0%) of students made a plan about how they would attempt suicide during the past 12 months; and 12.1 % (U.S.=8.4%; statistically significant) of students actually attempted suicide one or more times during the past 12 months.

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The CYSPI is administered by DMHAS and is funded by the current GLSMA of 2004 through the federal Substance Abuse Mental Health Services Administration-Center for Mental Health Services. Through the CYSPI, DMHAS is collaborating with the CT Departments of Children and Families (DCF), Public Health, Education, and the Judicial Branch, the CT State University System, Wheeler Clinic, United Way of CT, Screening for Mental Health, Inc., and the University of CT Health Center to develop, implement, evaluate, and sustain youth suicide prevention and early intervention programs across CT. Components of the CYSPI include: 1) prevention education at the seventeen CT Technical High Schools, Trumbull High School, and the four CT State Universities; 2) screening and brief intervention services at St. Francis Hospital and Medical Center and Quirk Middle School's School-Based Health Center in Hartford, and at the four CT State Universities; 3) workforce development training; 4) Gatekeeper training; 5) a statewide youth-driven community awareness campaign; and 6) a full evaluation of all components. Please see this link for more detail on the CYSPI: http://www.ct.gov/dmhas/cwp/view.asp?a=2912&q=335130.

In addition, the DCF CT Youth Suicide Advisory Board, established in 1989 via legislative mandate, functions as the advisory body to the CYPSI. The charge of the board is to increase public awareness of the existence of youth suicide, to promote means of prevention and to make recommendations to the Commissioner regarding the prevention of youth suicide. Members include a wide variety of state agencies, community-based organizations, schools, towns, and private citizens.

The CYSPI fully supports the purpose of the GLSMA Reauthorization to: 1) increase funding to this cause; 2) expand the target population beyond youth to all ages; 3) provide grant support to states and tribes that have not yet received a grant the opportunity to obtain one; 4) allow states that have completed a grant, such as Connecticut, but need additional funds to continue their successful programs the opportunity to do so; 5) fund a matching-grant program to colleges and universities; and 6) reauthorize the Suicide Prevention Technical Assistance Center.

The CYSPI appreciates your serious consideration of this crucial bill and your continued commitment to serving the citizens of Connecticut and the United States of America.

Sincerely,

Andrea Iger Duarte, L.C.S.W., M.P.H.
Project Director, Connecticut Youth Suicide Prevention Initiative
Member, National Suicide Prevention Resource Center Steering Committee