



RISING SUN:

Uniting Strengths in the Arctic for Suicide Prevention

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Office for Research on Disparities & Global Mental Health

Office of Rural Mental Health Research

National Institute of Mental Health/NIH

NIH Tribal Consultation Advisory Committee Meeting

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Introduction

RISING SUN (Reducing the Incidence of Suicide in Indigenous Groups: Strengths United through Networks) is a project under the United States' chairmanship of the Arctic Council.

The National Institute of Mental Health is the technical lead for this project.

The Arctic Council



An intergovernmental forum to provide a means for promoting cooperation, coordination, and interaction among the Arctic States, with the involvement of the Arctic Indigenous communities and other Arctic inhabitants.



U.S. Chairmanship (2015 – 2017)



ONE ARCTIC:

SHARED OPPORTUNITIES, CHALLENGES, AND RESPONSIBILITIES

- 1. Improving Economic and Living Conditions in Arctic Communities**
2. Arctic Ocean Safety, Security, and Stewardship
3. Addressing the Impacts of Climate Change

<http://www.arctic-council.org/index.php/en/about-us/arctic-council/u-s-chairmanship/>





SUSTAINABLE DEVELOPMENT WORKING GROUP

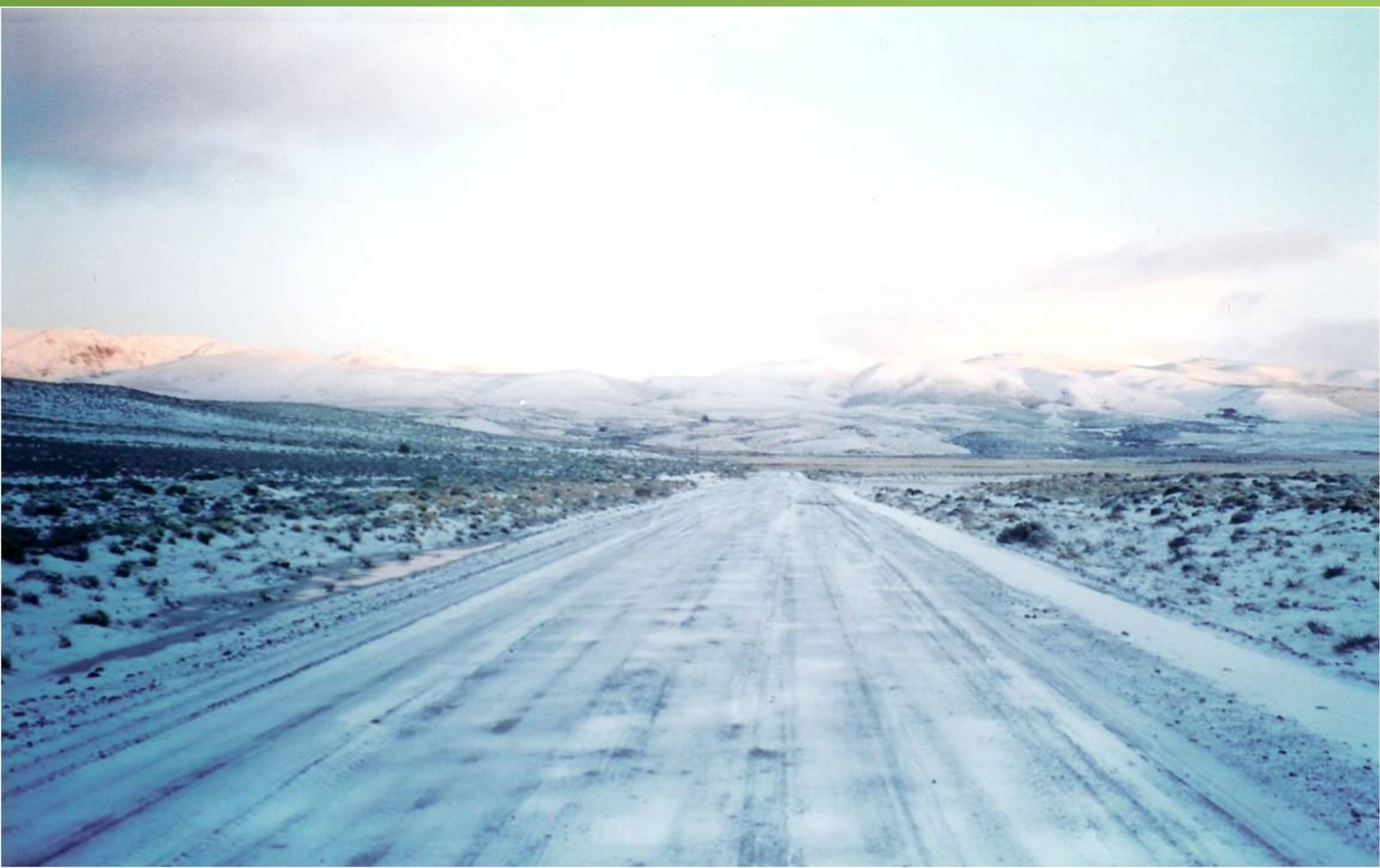


Sustainable Development
Working Group

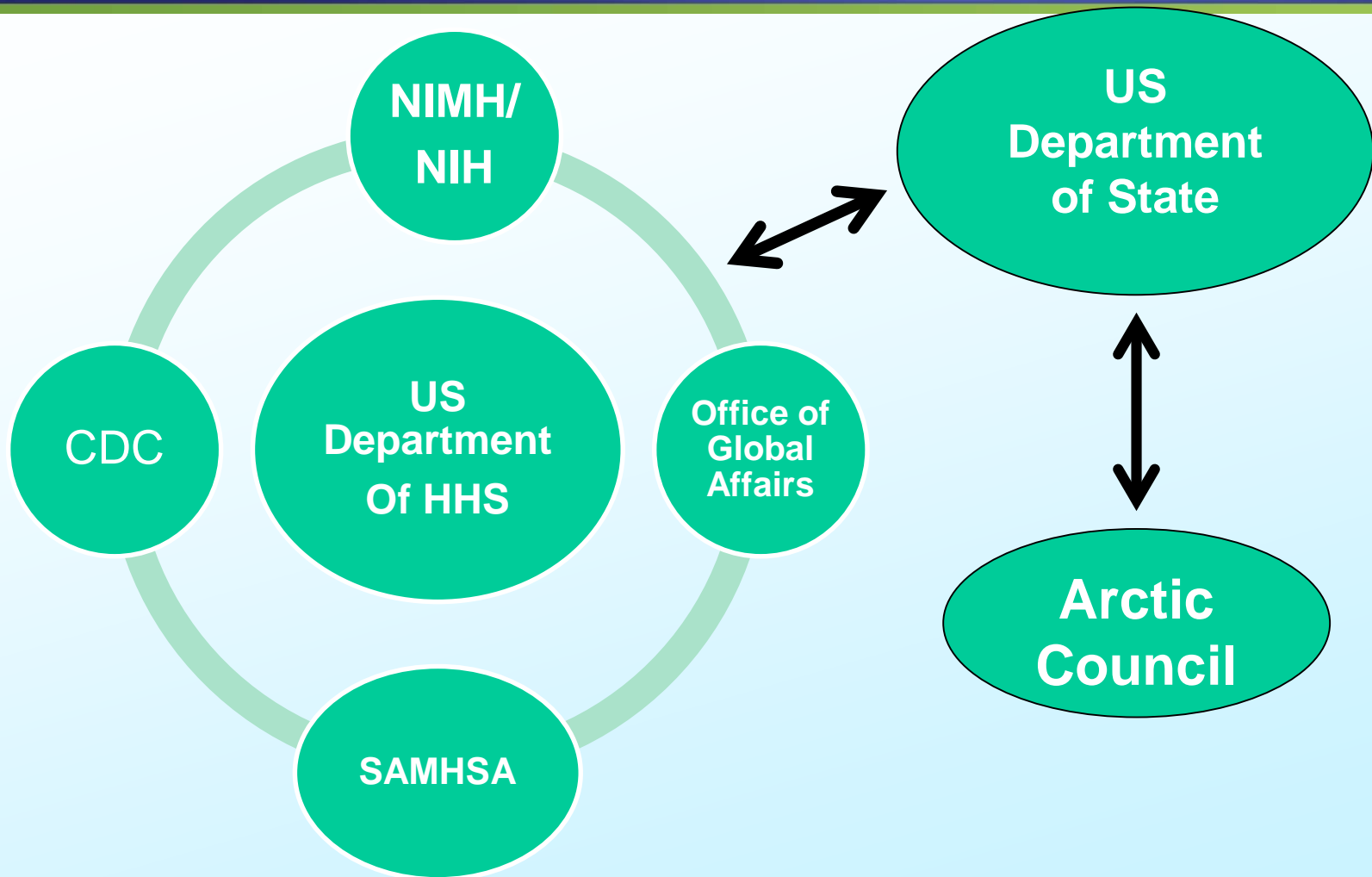
- *Provide a better understanding of freshwater security*
- **Support mental wellness, including suicide prevention and resilience**
- *Mitigate public health risks and reduce black carbon output*
- *Promote better community sanitation and health*



Office for Research on Disparities & Global Mental Health
Office of Rural Mental Health Research



Collaborations in the US Government for RISING SUN



CDC: Centers for Disease Control

HHS: Health and Human Services

SAMHSA: Substance Abuse and Mental Health Services Administration

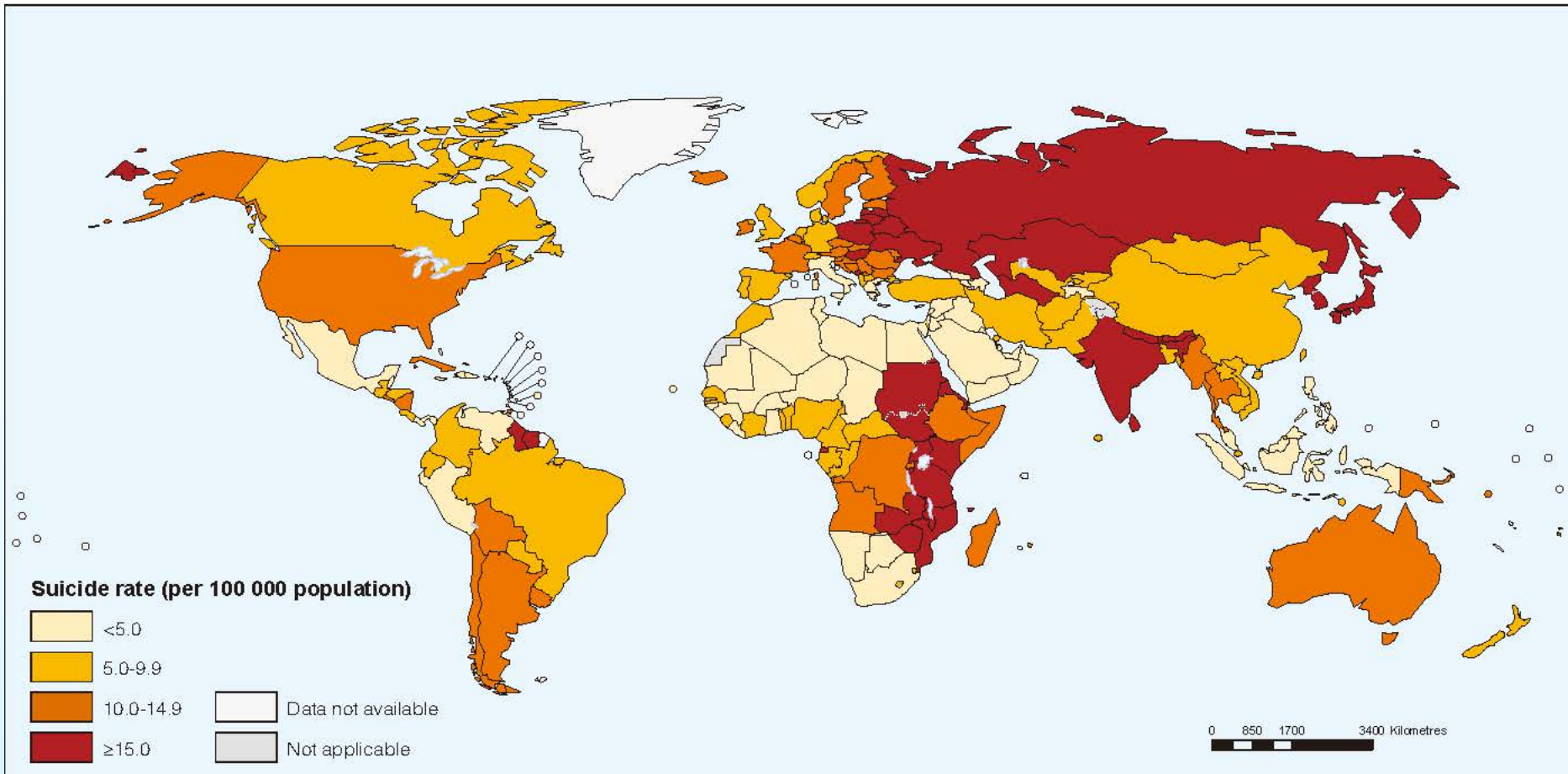


National Institute of Mental Health

Suicide is a global public health threat

WHO, 2014

Map 1. Age-standardized suicide rates (per 100 000 population), both sexes, 2012



Data source is the WHO mortality database, global vital registration and cause-of-death registry provided by WHO member states.

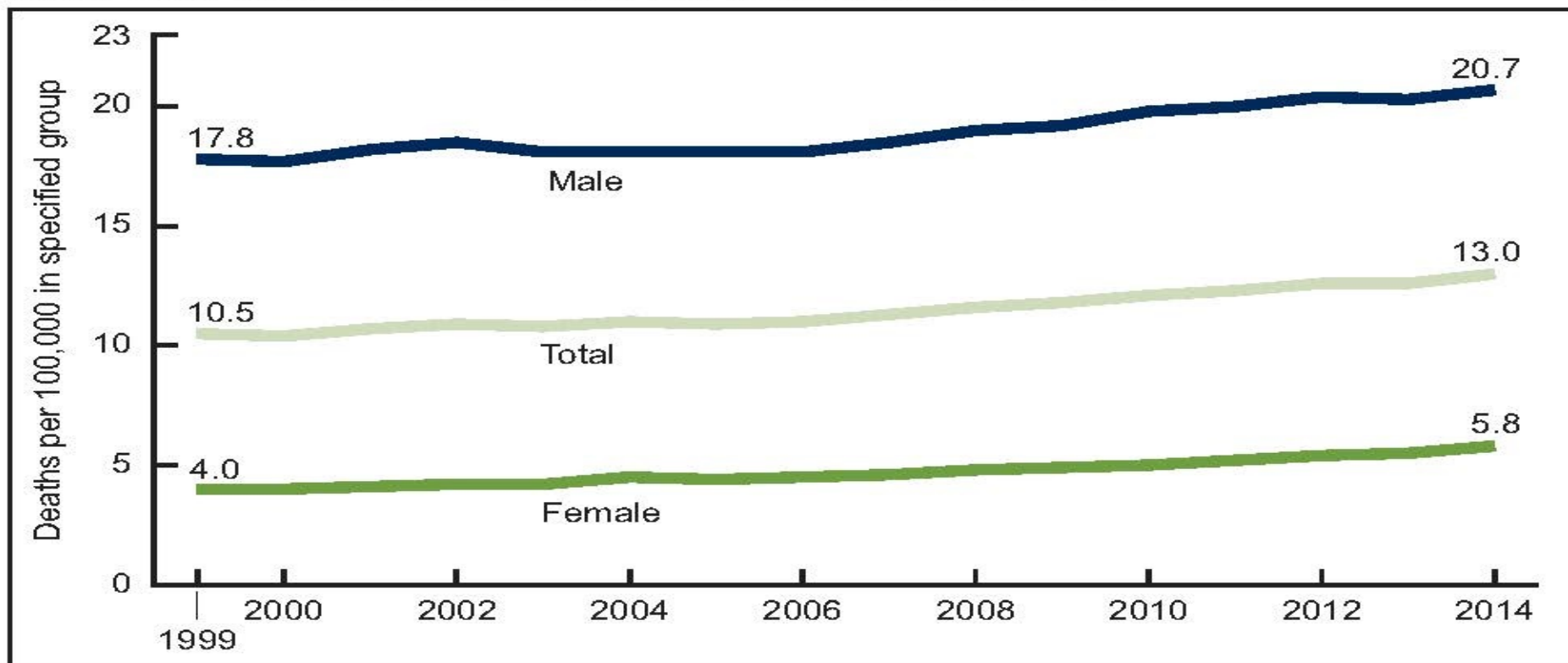


Suicide rates in the United States: 1999-2014

Suicide rates increased from 1999 through 2014, with greater annual percent increases after 2006.

- The age-adjusted suicide rate in 2014, 13.0 per 100,000 population

Figure 1. Age-adjusted suicide rates, by sex: United States, 1999–2014



NOTES: Suicide deaths are identified with codes U03, X60–X84, and Y87.0 from the *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision*. Access data for Figure 1 at: http://www.cdc.gov/nchs/data/data-briefs/db241_table.pdf#1.

SOURCE: NCHS, National Vital Statistics System, Mortality.

Sustainable Development Working Group Mental Wellness Symposium March 2015

- Under the Canadian Chairmanship (2013-2015) – Research groups mapped interventions for mental wellness & suicide prevention in Arctic indigenous communities
- Solutions must be culturally grounded, community-based & community driven (*Sharing Hope, SDWG 2015*)
 - Importance of intervention specificity for communities
 - Importance of culturally appropriate shared interventions across communities (e.g. mental health services, intersectoral cooperation)
- Studies should be solution-focused (instead of problem-focused)
- Communities, clinicians, governments and others must know what works in order to know what to implement more widely
- Few studies with rigorous evaluation



US Chairmanship of the Arctic Council: Opportunities for building on Canadian activities

- Elevated risk of suicide in remote, rural, Arctic communities, yet, considerable variation
- Cultural diversity, geographic isolation, small populations
- Standard research approaches to evaluate effectiveness of interventions are challenging
- “Paddling in the same direction”
(Harmonization of outcomes)
 - Communicate, Evaluate, Share



Reducing the Incidence of Suicide in Indigenous Groups: Strengths United through Networks (RISING SUN)

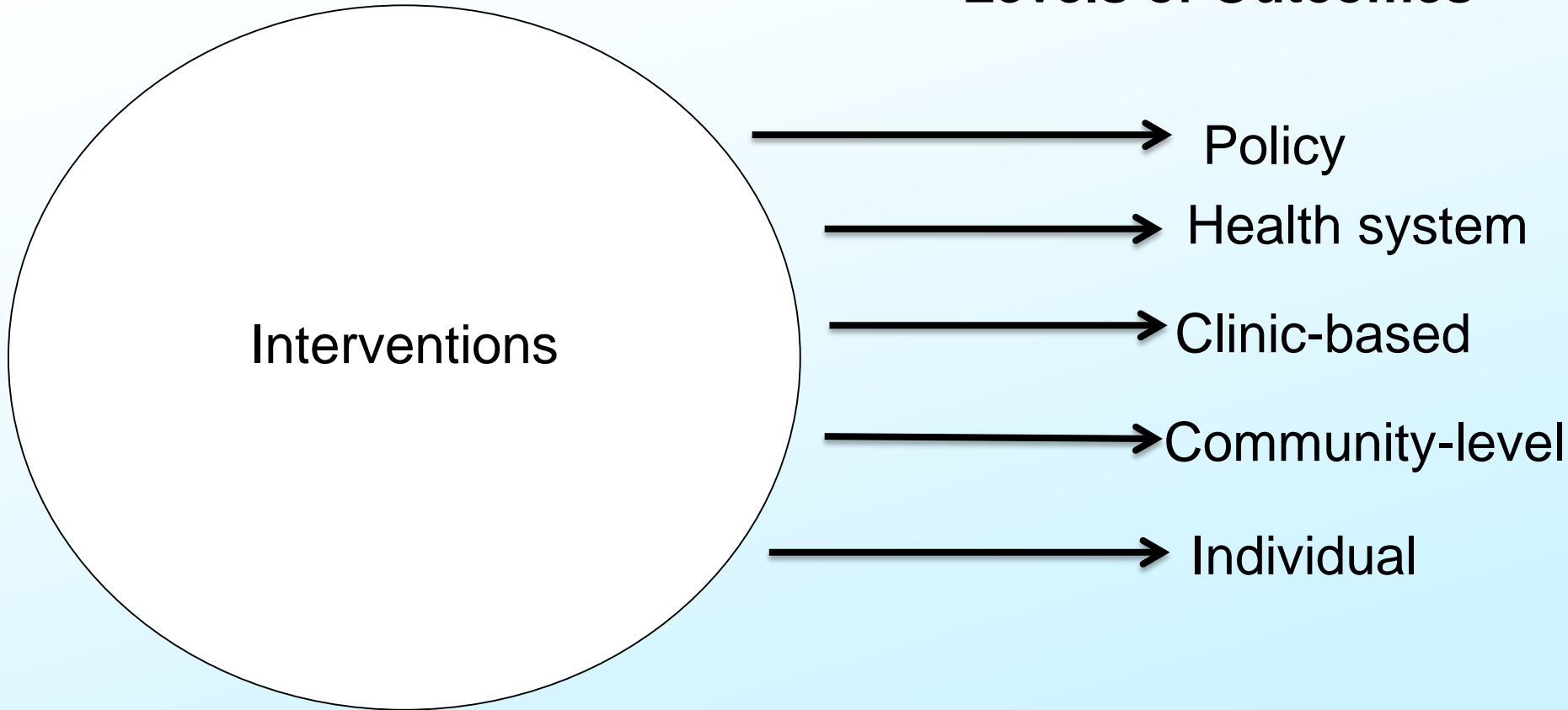
- Facilitates efforts to reduce suicide in Arctic communities
- Uses research tools, stakeholder engagement, consensus-building processes
- Aims to build consensus around outcome measures that can be used to evaluate the effectiveness of suicide prevention programs
- Builds on the work conducted under the Canadian chairmanship

RISING SUN Products

- Toolkit for selection of agreed-upon intervention outcomes that can be used to
 - harmonize evaluation of interventions across sites
 - enable communities to measure what is relevant to their needs
 - Share and compare data across studies of effectiveness
- Partners: Norway, Kingdom of Denmark, Canada, Inuit Circumpolar Council

Recognizes need for holistic perspective on interventions

Levels of Outcomes



RISING SUN Activities

- 3 Workshops
- Delphi process to engage stakeholders across the Arctic

Workshops:

RISING SUN – Workshop 1: Anchorage, AK | Sept 2015

- Need to mobilize community-rooted knowledge and resources
- Need for coordinated regional efforts (care and prevention)
- Adaptation of interventions is possible for adoption by others
- Need for holistic consideration of mental health
 - Social, economic, political, legal, and resource concerns interact

RISING SUN – Workshop 2: Tromsø, Norway | May 2016

Mental Health Among Sámi in Sápmi

- Meanings of identity and power in relation to suicide need to be better understood across the political boundaries of the Nordic countries where Sámi reside

Suicide Prevention Among Sámi Adolescents and Young Adults In Norway

Creating a vision for Sami-Specific Transnational Suicide Prevention: “Dream, but Within Limits” and Setting Priorities

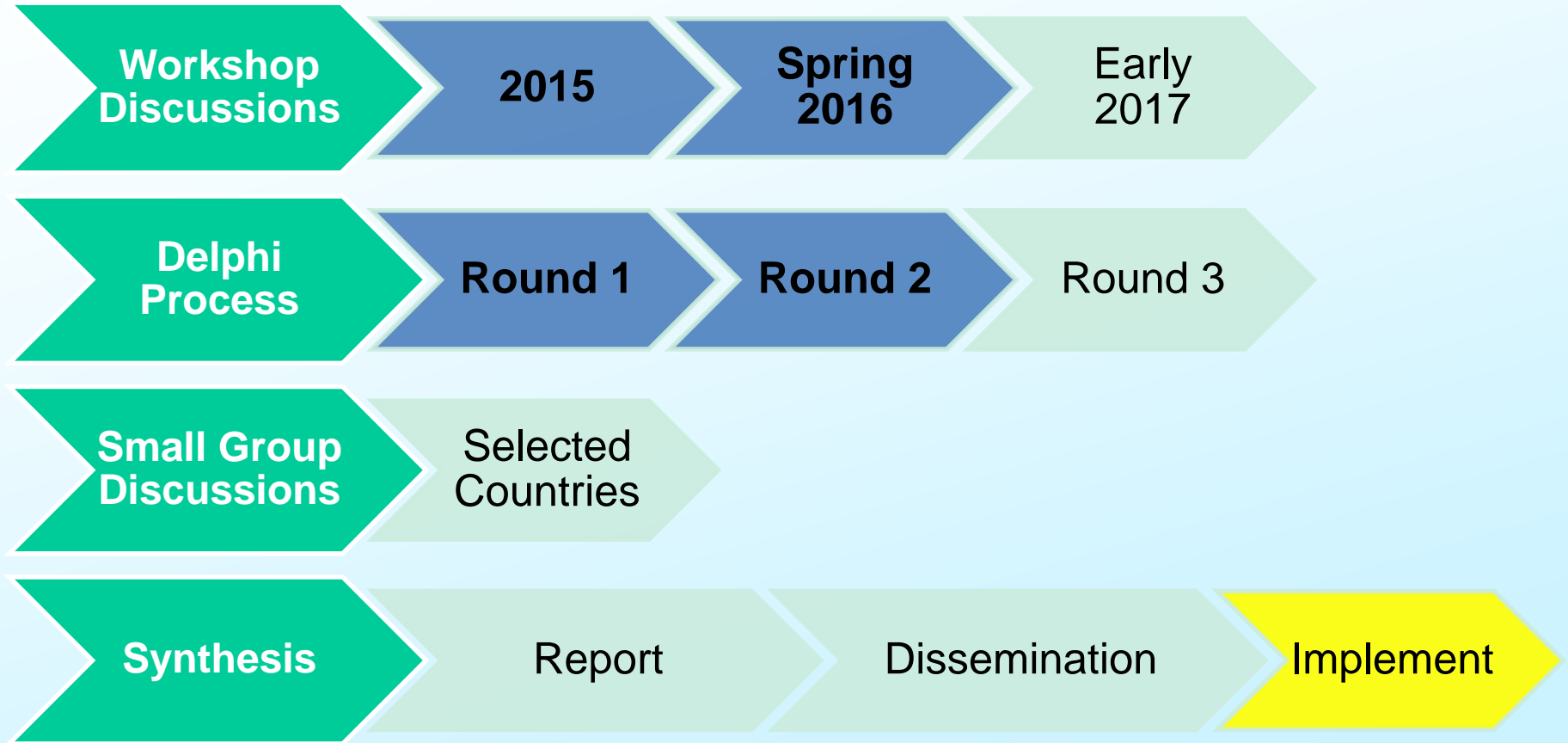
Further discussion of the RISING SUN priority setting activities

Delphi Procedure: Staying connected and coming to consensus...

- Iterative group process for arriving at consensus
- Enables multiple stakeholder participation
- Can be conducted face-to-face and virtually
- Two rounds completed, final round beginning



RISING SUN Progress to Date



Acknowledgments

Office for Research on Disparities & Global Mental Health

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Thank you

