

Social Determinants of Health (SDOH): Addressing Upstream Factors to Strengthen Suicide Prevention and Community Well-Being

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Ice-Breaker

1. What aspects of your community's environment contribute most to your quality of life?
2. If you could live in any other city in the country/world, which one would you choose, and why?

SDOH and Their Impact on Suicide Risk

Non-medical conditions

- Powerful drivers of Suicide Risk

Key Areas of Impact

- Economic Stability
- Social Context
- Neighborhood
- Healthcare Access
- Systemic Factors

How do we address this topic?

An Approach – Upstream

- Proactive Strategy
- Benefits

Examples

- Strengthen Economic Supports
- Reduce Access to lethal means
- Promote Health Connections



Landscape of SDoH in Your Community/State

What programs or interventions addressing SDoH exist in your state and/or community?

Do any of your GLS grant goals, objectives, or activities address SDoH?

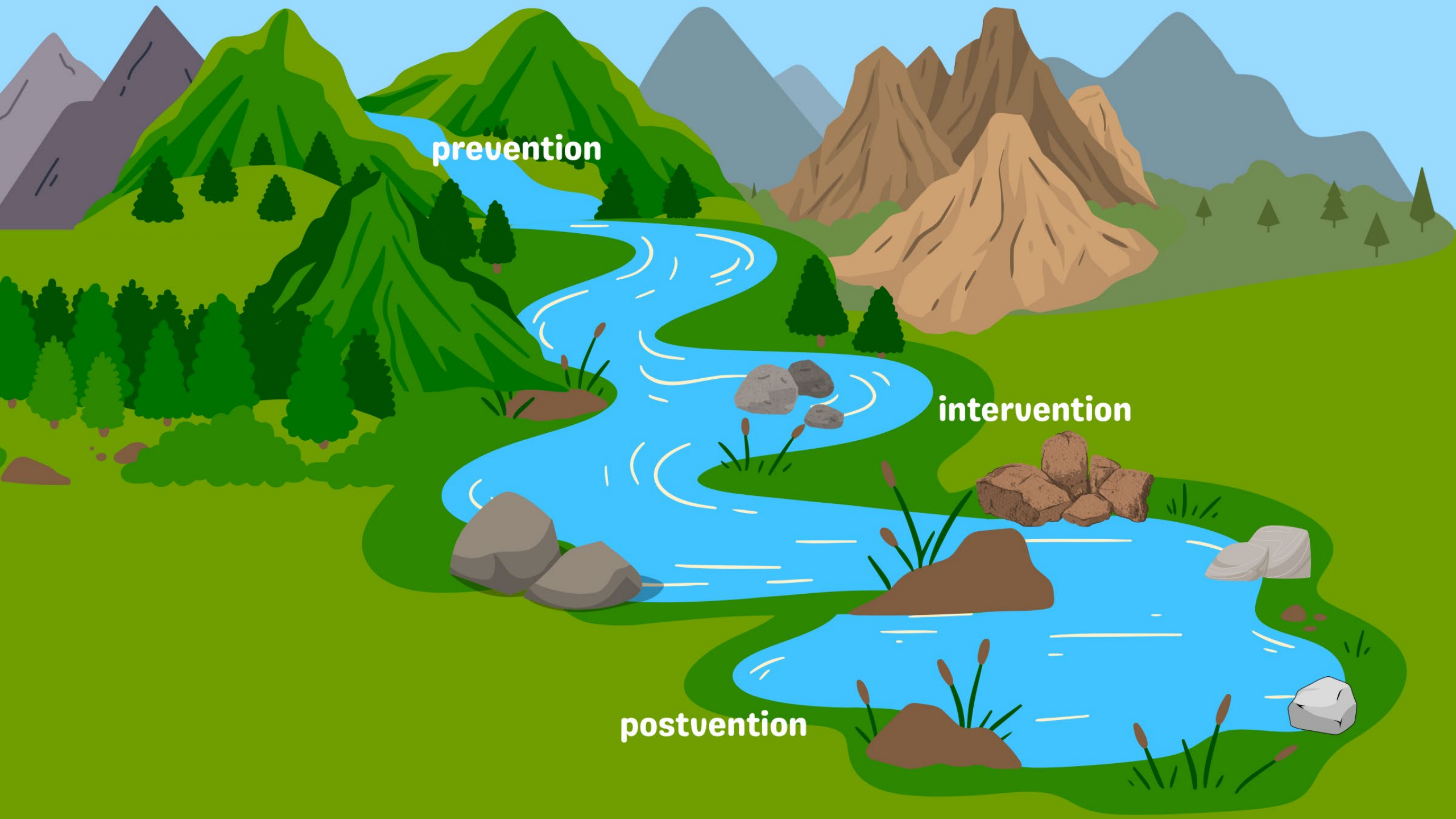
If so, what SDoH(s) are addressed? What goal, objective, or activity under your grant addresses the SDoH(s)?

If not, what challenges are you facing to address SDoH(s)? Could you see your GLS grant introducing programming addressing SDoH?



10 minutes

Upstream Approaches for Suicide Prevention



prevention

intervention

postvention

identifying people with
thoughts of suicide and
connecting them with
life-preserving resources

intervention



caring for people
affected by a suicide
attempt or loss to
mitigate the negative
effects



postvention

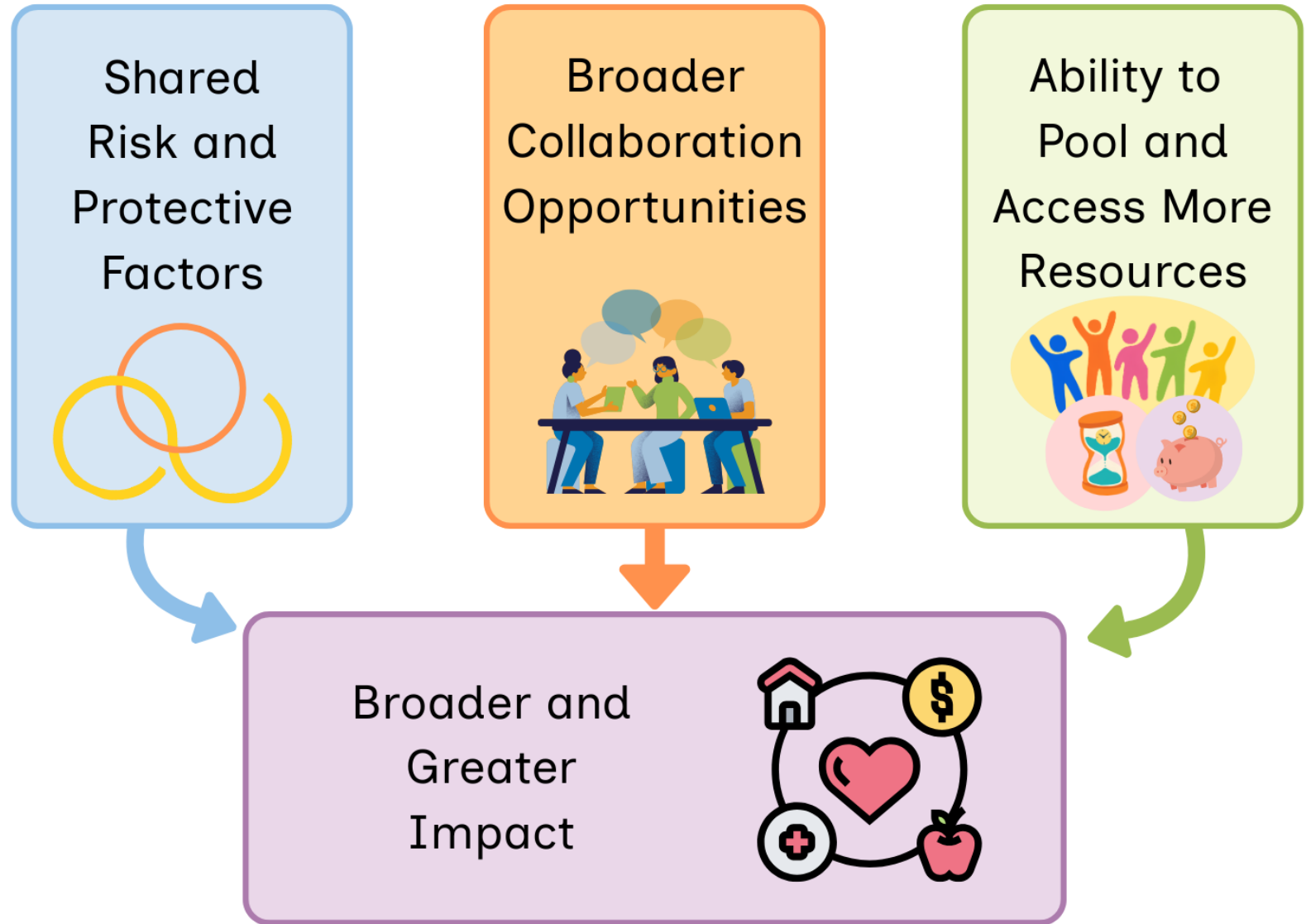


community and societal
efforts to address root
causes of suicide and
strengthen protective
factors and resilience
before risk develops

prevention



Benefits of An Upstream Approach





Strengthen Economic Supports

- Improve financial security
- Stabilize Housing

Improve Financial Security

- Unemployment benefits (financial and employment counseling, financial benefits)
- Cash transfers
- Expanded unemployment benefits during COVID-19 pandemic

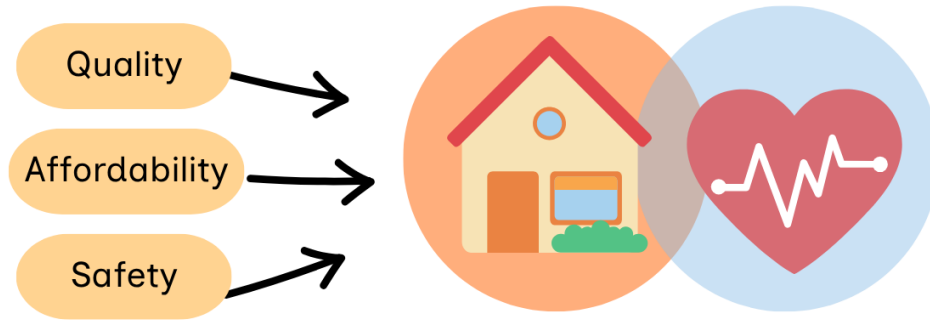


\$1 increase in
minimum wage



3.4% - 5.9% decrease
in suicide rate
among working aged
adults with a high
school diploma or
less

Housing and Health



Biological	Psychosocial		Environmental
communicable and non-communicable disease risk	increased stress	financial strain	air pollution
elevated cortisol and inflammatory markers	abuse and neglect	mental health	food insecurity
immune decline	academic performance and attainment	risky coping strategies	lack of safe recreational spaces
developmental deficits	poor dietary quality	limited social support and isolation	unstable healthcare access

Stabilize Housing

- Rent assistance
 - Associated with lower rates of self-reported depression among low-income renters
- Low-barrier housing
 - Emergency housing services, rapid rehousing, supportive and transitional housing services
- Homelessness prevention
- Foreclosures associated with state suicide rate increases, especially among working-aged adults
- COVID-19 pandemic eviction and foreclosure moratoriums

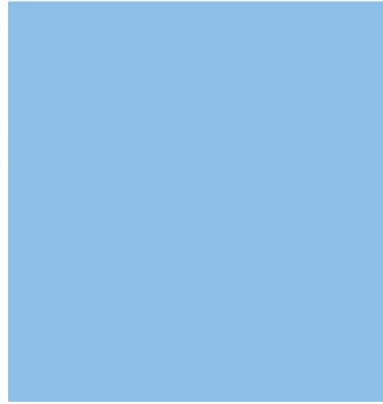




Reduce Access to Lethal Means

1. Reduce Alcohol Outlet Density
 - a) Link between Alcohol Outlet Density and Suicide
 - b) Evidence for Reducing Alcohol Outlet Density to Prevent Suicide
 - c) Implementation and Case Examples
2. Policy – State Laws
 - a) Gun suicide has been rising consistently in the US since 1999
 - b) Nearly six in 10-gun deaths in the US are suicides
 - c) States with no secure storage laws, suicide rates among young people saw a 36% increase

Promote Healthy Connections





Before



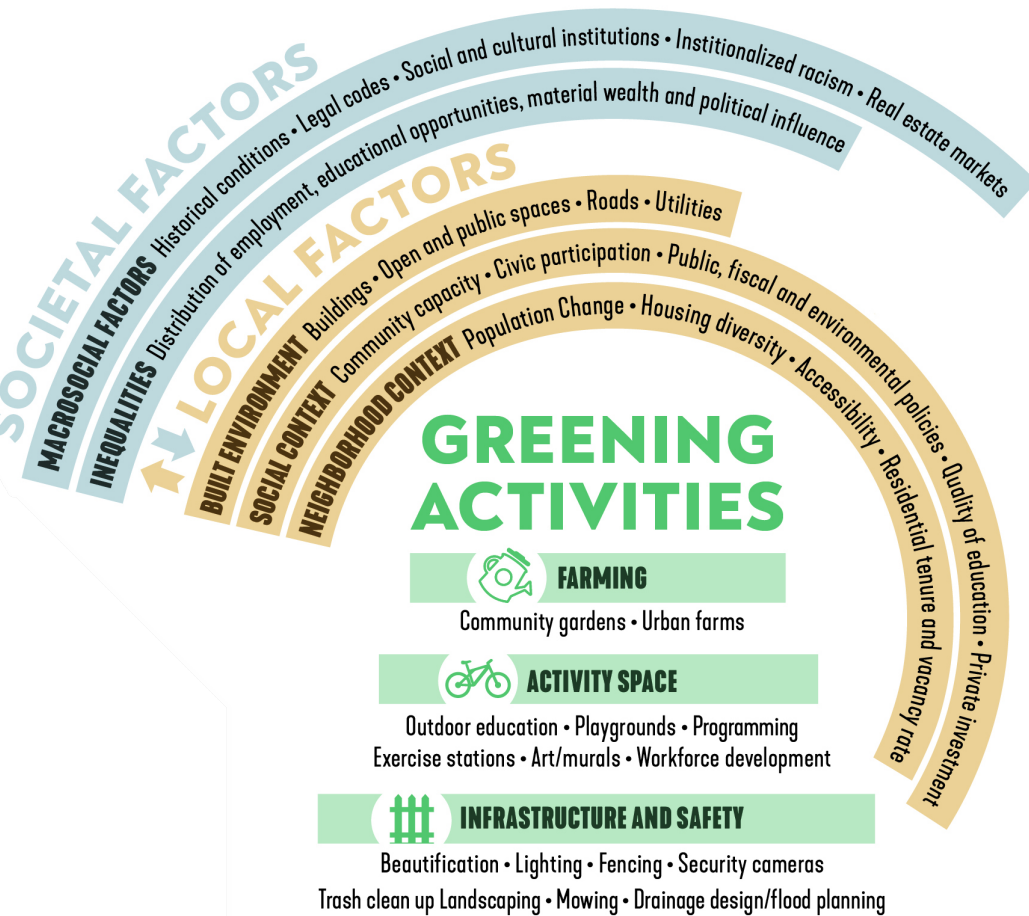
After



GREENING

THEORY OF CHANGE

Project Vital



MECHANISMS OF CHANGE



INDIVIDUAL



INTERPERSONAL



ENVIRONMENTAL



IMPROVE: Dignity • Sense of purpose • Exposure to nature • Knowledge/skill building



IMPROVE: Volunteerism • Trust building • Inspiration maintenance • Social engagement/cohesion
Social control • Cultivation of community leaders • Use of streets and open spaces



IMPROVE: Air and water quality • Aesthetics • Environmental stewardship • Safety enhancement | REDUCE: Heat islands • Places to hide

OUTCOMES



HEALTH AND WELL-BEING



ECONOMY AND SECURITY



SHORT-TERM



IMPROVE: Food access/availability • Physical activity • Attention/executive functioning
School performance • Social connectedness | REDUCE: Stress • Trauma



IMPROVE: Perceived safety • Job creation • Home ownership | REDUCE: House vacancy



LONG-TERM



AND IMPROVE: Mental health, food security, and physical health • Higher earnings
REDUCE: Use of welfare services • Healthcare costs • Crime/violence • Substance use

01

Choose a community-specific suicide prevention SDoH

05

Identify possible barriers and challenges for implementation. Brainstorm 1-2 strategies to address these barriers.

02

Choose an intervention and identify adaptations to make it community or culturally specific.

06

Identify facilitators for implementation and how you might leverage them.

03

Identify potential partners and collaborators. Map the landscape of work already being done around this SDoH.

07

Think about the feasibility of your idea and what you would need to make implementation more feasible.

04

Brainstorm resources already available to you and resources needed for implementation.

08

Brainstorm strategies for community engagement in the planning and implementation process.

Implementing an Upstream Approach



15 minutes

Resources

[Center for Disease Control and Prevention – A Public Health Approach to Suicide Prevention](#)