# Testimony for HB 1390 Suicide Fatality Review Commission

## from Rep. Karla Rose Hanson for the Senate Human Services Committee on 3/13/23

Chair Lee and members of the Committee,

My name is Karla Rose Hanson, and I represent District 44. Today, I'm bringing to you HB 1390, which would create a statewide suicide fatality review commission in North Dakota.

The purpose of this commission is to prevent suicides in North Dakota. Suicide is a significant problem in our state, and it is not getting better. For people in behavioral health, North Dakota's suicide problem is what keeps them up at night. A review commission that is focused on suicide would identify targeted interventions to help stem this problem.

#### Suicide is a serious problem in North Dakota. Suicide by the numbers:

- Suicides are at an all-time high: 159 North Dakotans died by suicide in 2022.
- Adjusting for population, the <u>rate</u> of suicide in North Dakota remains higher than the national average. North Dakota is ranked the 14<sup>th</sup> worst state for its rate of suicide.
- The rate of suicide is disproportionately high in rural areas and with veterans, young people, and people who identify as LGBTQ+. Suicide is the second-leading cause of death for young people in ND (ages 15-24).
- Women attempt suicide at a higher rate, but men are more likely to succeed. In 2021, 80% of North Dakotans who died by suicide in were male and 20% female.
- Crisis calls have increased dramatically in the last 10 years. FirstLink saw a 10-fold increase, taking 1,501 calls related to suicide in 2012 and 15,465 in 2022.
- ND hospital data shows 837 suicide attempts in 2022 with an average age of 30.
- The result: far too many North Dakotans have been touched by the pain of suicide.

While these and other statistics tell us <u>who</u> is dying by suicide, we don't always know <u>why</u>. A suicide fatality review commission will enable a group of people with relevant experience to analyze these cases on a qualitative level – to see what was or wasn't happening 30, 60 or 90 days before the death – and look at the full person.

### The hopeful news is that suicide is preventable. This commission will identify policies and actions to help prevent suicide.

• It would operate like ND's four other statewide fatality review commissions for domestic violence deaths, deaths of children, drug deaths, and maternal mortality.

- Each commission, including this one, brings together a variety of perspectives to review cases, identify risk factors and protective factors in these deaths, and identify opportunities for targeted improvements related to systems, services, and policies.
- Having a statewide suicide fatality review commission is considered a best practice by the CDC and by other states.
- Cass & Clay counties currently have a suicide fatality review commission, which has developed several suggestions for local policy and practice improvements.
- People who work in this space see value in doing this work statewide. For example,
  Dr. Sens, the chair of pathology at UND and the designated forensic pathologist for
  21 eastern counties in ND, believes a statewide suicide fatality review commission is
  critically needed. She is teaching today but her testimony is available for you to read.

#### The bill sets up the key components of the Suicide Fatality Review Commission.

- In short, the primary components of the bill include:
  - Establishing the commission's <u>purpose</u>,
  - o Identifying the types of <u>records</u> needed for case reviews,
  - o Articulating expectations around confidentiality of those records, and
  - Listing <u>potential members that may be appointed</u> by the head of the ND Department of Health & Human Services. The membership is flexible. The bill lists a variety of roles that could be valuable in reviewing cases and making recommendations around improvements to systems, services, and policies. The head of DHHS would have the ability to choose from this list and add other permanent or temporary members to ensure the right people are at the table to analyze these cases and recommend targeted interventions.
- The commission would have assistance from DHHS, and the commission will issue an annual report of its findings and recommendations. This is also important: Because the Suicide Fatality Review Commission would have oversight from DHHS, we enable a stronger tie between the commission's recommendations and the opportunity to implement those recommendations in service delivery. This helps us focus our people and financial resources on the most effective suicide prevention solutions.
- Two potential amendments:
  - o If HB 1165 passes, the committee might change "executive director" to "commissioner" on lines 8, 10 and 11 of page 1 and lines 13-14 on page 3.
  - The committee might consider adding more roles to the list of potential committee members. Stakeholders suggested we add a legislator, an individual from the LGBTQ+ community, and a public health professional.

In summary, I would ask the committee to give a Do Pass recommendation to HB 1390. We are not winning the battle against suicide in ND. A suicide fatality review commission would serve as another mechanism to preventing suicide in our state by identifying trends and targeted solutions – helping to prevent the pain that too many families feel when they lose a loved one. Thank you so much for the consideration.