

June 4, 2019
Suicide Prevention Hearing

Testimony of Seth Diamond, CEO of Westchester Jewish Community Services (WJCS), before the Mental Health and Developmental Disabilities Committee and the Committee on Health regarding recommendations to address the rise in suicides rates.

Good morning. Thank you Senator Carlucci and Senator Rivera for convening this hearing and for the opportunity to speak today before your committees on this serious subject. My name is Seth Diamond and I am the Chief Executive Officer of WJCS.

WJCS is one of the largest human services agencies in Westchester and one of the largest providers of community-based mental health services in the county. The agency provides mental health services, a network of youth development initiatives, programs for people with disabilities, and older adult services in communities from Yonkers to Ossining. Over the past 73 years, WJCS has forged relationships with schools, government, primary care providers and other agencies to offer our most vulnerable residents opportunities to address significant life challenges. WJCS serves 20,000 people a year including 7,000 children.

WJCS provides a range of mental health services through four New York State Office of Mental Health licensed community based mental health clinics, eight satellite clinics including school based clinics, and mobile mental health and care management services for adults and youth throughout Westchester County.

WJCS clinics have taken a two pronged approach to deal with the serious issue of suicide by providing prevention and postvention services.

Prevention services start with an initial screening of all clients who apply for mental health services. When clinics are closed, WJCS offers after-hours emergency care provided by senior clinicians who provide crisis intervention to assure the safety of clients served by WJCS.

WJCS has 40 clinicians intensively trained in Dialectical Behavioral Therapy. DBT is an evidence-based protocol for adolescents and adults to treat suicidal behaviors and severe emotion dysregulation. WJCS clinicians successfully treat hundreds of individuals with DBT, minimizing the risk for suicide and helping the individuals live a meaningful life. It should be noted that many of the services provided through DBT such as telephone coaching calls and team consultation meetings, are not reimbursed by insurance companies, thus further challenging the budget of our not for profit organization.

When tragically a suicide does occur, WJCS implements a postvention protocol offering services to the clinician impacted by the suicide, who in turn, offers ongoing support and therapy to the family. A "Root Cause Analysis" follows to review the leading factors and circumstances surrounding the death, highlighting clinical trends and providing an opportunity for learning, growth and improvement of services.

While the suicide rates have increased significantly in New York, the LGBTQ community is at particular risk. According to the Trevor project, a non-profit focused on suicide prevention efforts among lesbian, gay, bisexual, transgender, and questioning youth, suicide is the leading cause of death among young people ages 10-24. The rate of suicide attempts is 4 times greater for LGBTQ youth and 2 times greater for questioning youth. Youth who come from highly rejecting families are 8.4 times as likely to have attempted suicide as LGBTQ peers who have a low level of family rejection.

Transgender adults are particularly vulnerable. Forty percent of transgender adults report having made a suicide attempt and 92% of those that attempted suicide did so before the age of 25.

Every time an LGBTQ person is victimized by physical or verbal abuse, the likelihood of self-harming behavior increases 2.5 times on average.

In an effort to address the specific needs of the LGBTQ community in Westchester, WJCS formed Center Lane in 1995. Center Lane serves more than 500 LGBTQ and allied youth ages 13-21 in Westchester County annually providing psycho-educational programming in welcoming spaces facilitated by caring, supportive, and knowledgeable adults.

Center Lane is a space for LGBTQ and straight youth allies to interact in a supportive, fun, safe and caring environment. It is a place to make friends, discuss issues important to them, problem-solve with help from peers, and engage as leaders through support groups, individual supportive counseling, recreational and social events, community education, advocacy and leadership training. Center Lane also hosts a support group for TransExpansive youth and parents/guardians called TransParentcy.

Center Lane has had a number of clients deal with mental health issues, suicide ideation, and, unfortunately, suicide attempts. As a result, Center Lane has hired a full time Licensed Clinical Social worker to offer individual counseling and to facilitate support groups.

The need is great. For example, this past year, S, a regular participant at a weekly support group, notified our director that she had attempted suicide earlier that day. As a result, staff contacted the Trevor Project suicide hotline and connected her with WJCS clinicians at the Yonkers clinic where members of our Trager Lemp Center for Treating Trauma and Building Resilience provided her with the support she desperately needed. We arranged an emergency appointment with a WJCS therapist and encouraged her to enter the hospital for treatment. After her release, she came back to Center Lane to rejoin her group and take advantage of supportive counseling going out of her way to express her gratitude.

As you consider this issue I wanted to present a few suggestions that we believe could be helpful in addressing suicide and suicide prevention.

First, provide Youth Mental Health First Aid to all school districts including district administrators, staff and teachers regardless of ability to pay to help identify those that need support.

Youth Mental Health First Aid is an evidence-based certification international course that equips adults with information, tools and a five-step action plan to help young people, ages 12 to 18, experiencing a mental health or substance use challenge or crisis. This “CPR for mental health” promotes early intervention and is a key component to help identify mental health issues in our youth including dispelling the belief that asking someone if they are going to kill themselves puts the idea in their head. The training spends a considerable amount of time assessing suicide and provides an action plan to support an individual crisis.

Second, introduce the WJCS PRIDE curriculum into school settings to enhance sense of community, belonging, and self-advocacy skills.

WJCS recently received an IMPACT 100 Grant to develop a new Pride Curriculum based on feedback received from LGBTQ youth leaders in Westchester. This curriculum explores eight topics including sexuality, coming out and where do I fit in. There are several goals including creating community and building trust with youth outside the program in their communities, transforming their understanding of themselves, finding their voice, developing the confidence essential for long term success, and contributing to the world by learning to advocate for themselves.

Third, increase LGBTQ competencies in educational settings to promote inclusive language and to understand the unique experiences of the LGBTQ community.

Through LGBTQ 101 Trainings, WJCS Center Lane trains school staff, medical practitioners, youth serving professionals, parents and the community at large to understand, respect, and affirm LGBTQ youth, which in turn improves the mental health of the youth. Geared to creating inclusive environments for LGBTQ youth, participants learn something new about the LGBTQ community, feel more confident to meet the needs of the LGBTQ community and learn ways to affirm sexual orientations and gender identities while learning more about themselves as an LGBTQ person or aspiring ally.

Finally, increase integrative treatment.

WJCS currently uses integrative treatment (co-occurring substance use and mental health treatment) as a means of reducing suicide risk since substance use is a key risk factor in suicide attempts. Offering people simultaneous treatment for both suicidal behavior and substance use by one clinician at an agency with integrated treatment services reduces both risks. The traditional method of referring individuals out for substance use treatment is less successful than continuing to work with people integratively though DBT.

Thank you again for giving me the opportunity to speak today. We value our relationship with the state and look forward to continuing our partnership. Please do not hesitate to reach out with any questions.