Every year, state leaders, policymakers and advocates recognize September as National Suicide Prevention Month. According to data from the Suicide Prevention Resource Center, suicide is the second leading cause of death for Americans ages 10-34, the fourth leading cause of death for ages 35-54 and the eighth leading cause of death for ages 55-64. As suicide rates continue to climb, states across the country have taken steps to reduce the number of deaths by suicide and provide access to mental health care prevention and treatment services, particularly for youth.

CSG National Chair Wisconsin state Rep. Joan Ballweg, led Wisconsin’s Speaker’s Task Force on Suicide Prevention. “In 2017, 918 individuals died by suicide in Wisconsin. When a life is lost to suicide, it is more than a single death. It devastates a family and an entire community,” Ballweg said. “Our task force proposals take a much needed step toward decreasing this trend. I was proud to have bipartisan support on these initiatives.”

The task force was created by Wisconsin Assembly Speaker Robin Vos on March 6, 2019, with the purpose of studying and developing recommendations on policy initiatives to reverse the trend of increasing rates of suicide. The task force developed an interim report which provides 10 pieces of recommended legislation. The proposed legislative action includes:

- Creating a suicide prevention program
- Offering grants for firearm retailers to receive training on how to recognize and avoid selling or renting firearms to people who may be considering suicide
- Appropriating funding to the Wisconsin Safe and Healthy Schools Center to build the capacity of school districts to implement prevention and intervention programs
- Issuing tuition assistance grants to low-income farmers
- Procuring local grant funding for coalitions that address and reduce suicide in their communities
- Developing grants to support peer-to-peer suicide prevention programs in high schools
- Including suicide prevention hotlines on student identification cards
- Expanding interim psychologist licenses
- Continuing education for certain health professionals
- Requiring DHS to award a grant to a nonprofit organization to support staff, training and expenses related to operating a text-based or application-based suicide prevention program

In 2018, Virginia passed House Bill 1604, which requires health instruction to add mental health topics (including the relationship between physical and mental health) to health instruction standards, in order to help students "promote health, well-being and human dignity." The bill also directs the Virginia Board of Education to review and update the health Standards of Learning for ninth and tenth graders to include mental health.

Iowa passed House Bill 690 in 2019, which established a children’s behavioral health system and a state board to oversee the system. This legislation requires the state to provide certain children’s behavioral health services including crisis resources. At the signing of the bill, Gov. Kim Reynolds
stated, "This landmark legislation will ensure that young Iowans suffering from mental illness will be treated with dignity and respect on the road to well-being for generations to come."

**Oregon** passed [House Bill 2191](https://olis.leg.state.or.us/liz/2019R1/Downloads/MeasureDocument/HB2191/Introduced) during its 2019 regular session. This law allows Oregon students to take time off for mental health reasons. Mental and behavioral health days will now count as excused absences. Supporters believe that by tracking mental health absences, schools can better gauge and address overall student health. Additionally, the bill aims to reduce stigma and spark conversations around mental health.

If you, or someone you know, is experiencing suicidal thoughts, contact the National Suicide Prevention Hotline at 1-800-273-8255.

By:
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