

Program #40083 - Behavioral Health Promotion, Suicide Prevention and

FY 2026 Adopted

Postvention Services

Department: Health Department **Program Contact:** Anthony Jordan

Program Offer Type: Operating Program Offer Stage: Adopted

Related Programs:

Program Characteristics:

Program Description

As the Community Mental Health Program (CMHP), The Behavioral Health Division is responsible for suicide prevention and postvention per Senate Bills 561/485/918 collectively. Multnomah County has the largest number of suicides by young people, ages 10-24, of any county in Oregon. The Behavioral Health Prevention Services program consists of health promotion, suicide prevention and postvention services that work to reduce these numbers. The program is designed to educate the community about mental health and suicide prevention, and provide postvention supports to communities in need. This program addresses equity through training on access and culturally relevant training topics. The program works with our community to reduce suicide, to build a stronger community safety net, to increase mental health literacy especially around challenges and interventions as well as to increase community involvement and resilience.

The behavioral health prevention element of the program provides the following trainings to County staff and community members through the tri-county collaborative, Get Trained To Help, a collaboration between Clackamas, Multnomah and Washington County Health Department Suicide Prevention Programs. The Get Trained To Help collaborative plays an important role in organizing, promoting and facilitating accessible resources and training to all residents in the Portland Metro. The training portal, gettrainedtohelp.com, allows the community to learn more and register for the following free trainings: Mental Health First Aid (MHFA), Sources of Strength, Applied Suicide Intervention Skills Training (ASIST), Counseling on Access to Lethal Means (CALM), SafeTALK and Question, Persuade and Refer (QPR), Assessing and Managing Suicide Risk (AMSAR), and Collaborative Assessment and Management of Suicidality (CAMS-Care).

The suicide prevention and postvention element of this program focuses on understanding the scope and depth of suicides deaths in the County by tracking and understanding trends that inform prevention, intervention, and postvention efforts. Oregon laws (SB561, SB918, and SB485) require local mental health authorities to communicate and collaborate with youth-serving entities after a suspected youth suicide death. Our Postvention Response Lead is responsible for coordinating county-wide youth suicide postvention supports, activities and initiatives after a youth suicide death, with the goal of decreasing the likelihood of suicide contagion. This looks like providing technical assistance and support to schools or other youth-serving entities across our county. As a secondary objective, this role also supports the suicide prevention activities by facilitating the trainings mentioned above.

In 2021, suicide was the third leading cause of death among Black youth ages 10-24 (nationally). As a result, our programming hired a Black Youth Suicide Prevention Coordinator in FY22. This position is leading a countywide youth suicide coalition (MYSPC), collaborates with a statewide Black youth suicide coalition (BYSPC), and leads our team's work to ensure that all of our prevention and postvention initiatives are also expanded to include culturally relevant and appropriate strategies for all youth. In FY24, MYSPC launched its first round of youth listening sessions to better understand the issues that contribute to suicide and poor mental health. This group will continue to grow and expand our initiatives based on the initial feedback provided by primarily BIPOC youth within our community.

Performance Measures								
Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target			
Output	# of individuals trained in Mental Health First Aid, ASIST, QPR and/or CALM and safeTalk.	1,152	450	580	400			
Outcome	% of individuals who report greater understanding of mental illness and/or suicide prevention.	91%	85%	85%	80%			
Output	Number of Postvention training and technical assistance services offered annually	N/A	N/A	N/A	24			
Outcome	% of Schools or CBO's receiving postvention supports from PSL after a youth suicide.	N/A	N/A	N/A	90%			

Performance Measures Descriptions

Performance measure 1 is tracked via our internal tracking sheet, managed by our Suicide Prevention team. At the conclusion of each training offered, our internal team send out training certifications, verifying the number of participants trained. Performance measure 2 is tracked by internal surveys provided at the conclusion of trainings, and when providing certificates to participants. Measure's 3 and 4 are tracked via internal tracking sheet managed by our Postvention Support Lead.

Legal / Contractual Obligation

OAR 309-019-0150 Community Mental Health Programs 2022-2023 Intergovernmental Agreement for the Financing of Community Mental Health, Addiction Treatment, Recovery & Prevention, and Problem Gambling Services

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Adopted General Fund	Adopted Other Funds
Program Expenses	2025	2025	2026	2026
Personnel	\$217,386	\$295,670	\$263,883	\$279,423
Contractual Services	\$35,000	\$6,562	\$0	\$0
Materials & Supplies	\$3,725	\$18,829	\$0	\$7,600
Internal Services	\$37,876	\$24,531	\$51,550	\$49,661
Total GF/non-GF	\$293,987	\$345,592	\$315,433	\$336,684
Program Total:	\$639,579		\$652,117	
Program FTE	1.30	2.00	1.54	1.76

Program Revenues							
Intergovernmental	\$0	\$345,592	\$0	\$336,684			
Total Revenue	\$0	\$345,592	\$0	\$336,684			

Explanation of Revenues

This program generates \$25,806 in indirect revenues. State - \$84,000 - OHA Suicide Prevention Federal - \$124,712 - Federal PE 60 Suicide Prevention State - \$2,972 - Family & Youth Local 2145 Beer and Wine Tax Federal - \$125,000 - SAMSHA MH Aware. Training TBD

Significant Program Changes

Last Year this program was: FY 2025: 40083 Behavioral Health Prevention Services

Psychological are no longer be a requirement of this program. The data collected from the investigations has been utilized to inform our future work.