

**Request for Approval Under the Generic Clearance for  
Rapid Response Suicide Investigation Data Collection (OMB#: 0920-1243)  
Rapid Response Suicide Investigation Protocol Template**

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**TITLE**

Investigation of an increase in suicide in Ohio, 2022

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**CDC STAFF LEADING INVESTIGATION**

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**INTRODUCTION**

On April 13, 2022, the Ohio Department of Health (ODH) was contacted by their partners at the Ohio Suicide Prevention Foundation and the Ohio Department of Mental Health and Addiction Services regarding possible increases in suicide deaths in the state for the first quarter of 2022. ODH began conducting preliminary data analysis using two different data sources, mortality data and syndromic surveillance, and identified several counties experiencing increases in Q1 2022. ODH requested assistance from CDC to investigate this increase in suicide in Ohio (Attachment 1).

The following circumstances justify the Rapid Response Investigation:

- Public concern about possible increases in suicide deaths in the state for the first quarter of 2022.
- Need to characterize current cases (e.g., common location, demographics).
- Need to examine risk and protective factors to inform prevention strategies.

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**PURPOSE**

The primary purpose of this investigation is to understand the epidemiologic characteristics of those who have died by suicide or experienced self-harm injuries in Ohio, in 2022. Three specific objectives for this response have been identified:

1. Identify increases in suicide by geography and demographic characteristics.
2. Describe the epidemiologic characteristics of those who had died by suicide and experienced self-harm injuries in recent months compared to recent years and identify risk and protective factors.

3. Examine current suicide prevention initiatives and recommend strategies to prevent future suicides.

External Partners:

- Ohio Department of Health (ODH)
- Ohio Department of Mental Health and Addiction Services

Ohio requested technical assistance from CDC to investigate this increase in suicide, including help with analyses to identify geographic and demographic characteristics and to describe the epidemiological characteristics of those who died by suicide. The purpose of data collection will be to assess knowledge and beliefs of local community related to suicide, examine current suicide prevention initiatives, and work with ODH to recommend strategies to prevent future suicides.

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## METHODS

To meet objectives 1, 2, and 3, CDC will:

1. Provide technical assistance to ODH to conduct analyses using Vital Statistics data
2. Abstract and analyze data from the Ohio Violent Death Reporting system (OH-VDRS) and syndromic surveillance data
3. Conduct focus group interviews with key partners identified by ODH (Attachment 2)
4. Conduct one-on-one interviews with partners unable to participate in focus groups (Attachment 3)

This GenIC requests approval for focus groups that will be conducted to better understand impressions for why there has been an increase in suicide deaths (objective 2), and the current suicide and self-harm prevention strategies in Ohio and identify intervention gaps (objective 3). Individuals who are not able to participate in focus groups will be interviewed separately. Other data-related activities for objectives 1 and 2 involve the use of existing state-level data (i.e., vital statistics, OH-VDRS, and syndromic surveillance), which are all routinely collected and abstracted by ODH, and therefore do not entail burden on the public.

Focus group participants and key informants for interviews will be identified by the ODH and will include ODH representatives who focus on suicide prevention activities, the Ohio Suicide Prevention Foundation, the Ohio Department of Mental Health and Addiction Services, who initially contacted ODH about the increased in suicide in certain counties, and other community leaders. Additional participants from affected counties will be identified based on results of Objective 1, and will include county coroners, law enforcement, and county specific suicide prevention groups.

We developed focus group guides (Attachment 2) and interview guide (Attachment 3) for individuals who are not able to participate in the focus groups. Questions in both focus groups and interviews address informants' awareness of increases, etiologic factors leading to increases (objective 2), perceived challenges to suicide prevention (objective 3), and current suicide prevention efforts (objective 3). Additional prevention initiatives will be identified using systematic internet searches as needed.

Respondents:

Ohio Department of Health  
 Ohio Department of Mental Health and Addiction Services  
 County coroners and law enforcement  
 County suicide prevention groups  
 Ohio Suicide Prevention Foundation  
 National Alliance for Mental Health Ohio  
 Ohio Children’s Hospital Association  
 Mental Health America of Ohio

Anticipated burden hours:

Data Collection Instrument Name	Type of Respondent	Data Collection Mode	No. Respondents (A)	No. Responses per Respondent (B)	Burden per Response in Minutes (C)	Total Burden in Hours (A x B x C)/60*
Attachment 2: Ohio Suicide Prevention Focus Group guide	General Public: State and Community Partners	Focus groups	15 (2 county –specific partners; 3 state-level partners)	1	8 minutes	2 hours
Attachment 3: Ohio Suicide Prevention Interview Guide	General Public: State and Community Partners	Individual interviews	5 (county or state partners that cannot attend focus groups)	1	8	1 hour  3 hours

Data analysis plan:

Routinely collected vital statistics, syndromic surveillance, and VDRS data will be analyzed to examine trends in suicide counts, rates, and acute care visits for self-harm overtime and describe characteristics of suicide decedents and self-harm injuries.

The analysis plan for the focus group and interview data will involve identifying key qualitative themes and prevention initiatives, which will be catalogued and examined relative to the CDC’s Suicide Prevention Technical Package to identify gaps (Stone, 2017).

Intended application of findings:

Findings from this investigation will help identify populations and areas in Ohio that may be experiencing increases in suicides, which can help focus prevention initiatives in the state. Results from focus groups and key informant interviews will be used to help identify challenges and gaps in suicide prevention efforts at the county and state level to inform future efforts to prevent suicide in Ohio.

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## **RESULTS AND DISSEMINATION**

Results from all aspects of this investigation will be presented to ODH and Ohio Department of Mental Health and Addiction Services. Reports and scientific publications may potentially be written to further disseminate the information.

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## **INVESTIGATION CONSIDERATIONS**

This submission was reviewed by the NCIPC's Information Systems Security Officer, who determined that the Privacy Act does not apply.(Attachment 4).

This investigation has been classified as non-research and was determined to be exempt from IRB review. The STARS determination has been attached (Attachment 5). No incentives will be provided to participants.

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## **INVESTIGATIVE TEAM**

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## **CITATIONS**

Stone, D.M., Holland, K.M., Bartholow, B., Crosby, A.E., Davis, S., and Wilkins, N. (2017). Preventing Suicide: A Technical Package of Policies, Programs, and Practices. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

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