

1 HOUSE JOINT RESOLUTION NO. 14

2 INTRODUCED BY B. TSCHIDA

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4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF
5 MONTANA URGING THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES TO UPDATE THE
6 MONTANA STRATEGIC SUICIDE PREVENTION PLAN OF 2017 TO TAKE INTO ACCOUNT INDIVIDUALS
7 WITH CHRONIC HEALTH CONDITIONS AND DISABILITIES.

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9 WHEREAS, the rights of individuals with chronic health conditions and disabilities should be taken into
10 consideration in Montana's Strategic Suicide Prevention Plan of 2017.

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12 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE
13 STATE OF MONTANA:

14 That the Department of Public Health and Human Services be urged to include the following language
15 in Montana's Strategic Suicide Prevention Plan of 2017:

16 "Living with chronic or terminal physical conditions can place significant stress on individuals and families.
17 As with all challenges, individual responses will vary. Cancer, degenerative diseases of the nervous system,
18 traumatic injuries of the central nervous system, epilepsy, HIV/AIDS, chronic kidney disease, arthritis, and asthma
19 are known to elevate the risk of mental illness, particularly depression and anxiety disorders. In these situations,
20 integrated medical and behavioral approaches are critical for regularly assessing suicidality.

21 Disability-specific risk factors include encountering a new disability or a change in an existing disability,
22 difficulties navigating social and financial services, stress of chronic stigma and discrimination, loss or threat of
23 loss of independent living, and institutionalization or hospitalization.

24 Until recently, the Montana Strategic Suicide Prevention Plan was considering assisted suicide of the
25 terminally ill as a separate issue from suicide prevention. The active disability community in Montana, however,
26 has been vocal on the need for suicide prevention services for individuals with disabilities. There may be
27 unintended consequences of assisted suicide legislation on individuals with disabilities. Individuals with disabilities
28 have a right to responsive suicide prevention services. The Montana Strategic Suicide Prevention Plan intends
29 to continue to explore the needs of the disability community for these services."

30 BE IT FURTHER RESOLVED, that the Montana Strategic Suicide Prevention Plan of 2017 address

1 recommendations for:

2 (1) developing greater scrutiny of someone's intention to die;

3 (2) identifying and training practitioners to develop expertise in working with disabled individuals who are

4 suicidal;

5 (3) addressing the mistaken assumption that suicide is a rational response to disability;

6 (4) treating mental health conditions of disabled individuals as aggressively as mental health conditions

7 of individuals without disabilities; and

8 (5) encouraging and increasing participation from the disability community and encouraging educational

9 presentations.

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