Finding ways to prevent violent deaths in lowa by understanding contributing circumstances.

Iowa Department of Public Health • University of Iowa Winter 2021

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AVDRS Newsletter



What Have We Been Doing?

Staff have been keeping the ship moving steadily along since Fall. You will note progress on our case initiations and data entry, as well as reports that have been completed/posted if you look at some of the side bars.

The University of Iowa is in the final stages of hiring a full-time abstractor for the program to take over the bulk of Marlene Callahan's work these last few years. Fortunately, Marlene will be around on a part-time basis to help train the new abstractor and help us wrap up our data collection for the 2019 calendar year.

The program has been fortunate to have our work shared with lowa partners and to be part of some national studies. Please look for the sidebar that summarizes these outreach efforts. And – any time you want to share our reports or activities with colleagues - please do so, and let us know!

Grant Activities Update

We have several goals this year to continue improving the program and engage partners in new ways. Here is an update on several of them:

Final work has been done to complete a survey for our advisory committee members. The University of Iowa is managing this survey tool and we want to hear from you about how we can improve the way we collect and promote the data for better prevention efforts. All committee members will be sent a link to complete the survey in early February. Please be looking for it and respond - we want your feedback!

We have a goal to include VDRS data on the public health data portal housed by the Iowa Department of Public Health. This will allow for a search function to filter and find data that is of use to local organizations, counties or others who work in the field of violence prevention. The process was delayed due to the closure of state offices during the pandemic; however, we are starting the process so we can move ahead and try to complete it this year. Stay tuned!

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Update on Cases in the System

After removing duplicate cases, we ended CY 2019 with 648 deaths entered into the database.

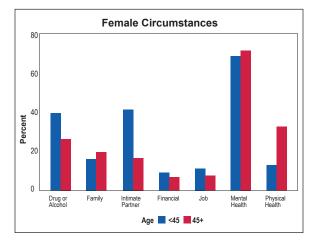
- √ 81% (523 cases) were suicides,
- ✓ 13.5% (88 cases) were homicides
- √ .5% (36 cases) were undetermined

As of January 2021, there have been 655 deaths entered for CY2020.

- √ 78% (512 cases) were suicides
- √ 14% (94 cases) were homicides
- ✓ under 1% (44 cases) were undetermined

These were additional circumstances that contributed to the suicide, but comprised less than 20 percent of cases:

- ✓ Family conflict or problem
- Financial problem
- Job loss or change
- Recent criminal or legal problem
 Recent suicide of friend or family
- School problem
- Disaster exposure



Grant Activities Update continued

We have also added some new representatives to our advisory committee to better reflect data users and organizations who may benefit from our data. In the past year, we have added new representatives from the Veterans Administration, the Department on Aging, Department of Education, and the state's newest homicide survivor organization, lowans for Collective Change to our advisory committee. These new members help better reflect data users and organizations who may benefit from our data. We are still hoping to add a few more individuals by spring, representing housing/homelessness services, LGBTQIA+ service agencies, Tribal Health, youth violence prevention, and campus health center(s).

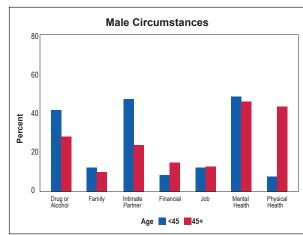
Synopsis of 3-year Report

Using data from 3 years (2016-2018), we analyzed circumstances and toxicology related to suicide deaths in lowa by age and sex.

The largest contributor to these deaths, regardless of age or sex, is a mental health problem. Among younger males and females, the presence of a drug/alcohol or intimate partner problem was also a large contributor. Among those over 45, the presence of a physical health problem was the second largest contributor to the death. Other factors that were influential, but less so, are described in the box to the left.

Among males of all ages, the presence of alcohol was the largest category of drugs found in the toxicology screen of decedents. Next largest included antidepressants, benzodiazepines, and opiates. Among females, the presence of antidepressants was the largest category of drugs identified,

followed by benzodiazepines, alcohol, and opiates. It is noted that antidepressants are present in less than half of males, which indicates they may not be prescribed as often as for females or they may not be compliant with use.

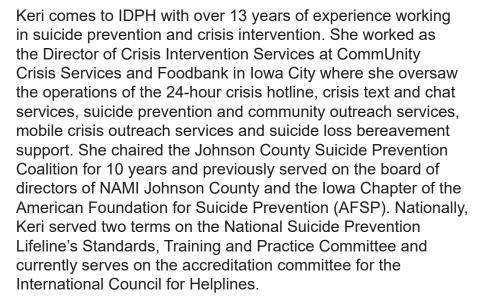


IAVDRS Newsletter



Keri Neblett, LMSW - Suicide Prevention Director, lowa Department of Public Health

Keri joined IDPH in September 2020 as the Suicide Prevention Director. In this position, she is responsible for managing the Zero Suicide Iowa initiative which includes working with the Iowa Provider Network (IPN). The IPN is a network of 20 substance use disorder treatment providers, who are implementing the Zero Suicide framework to provide suicide safer care. Keri is also responsible for facilitating the Iowa Suicide Prevention Planning Group and leads the development of the Iowa Strategy for Suicide Prevention.



Prior to joining IDPH, Keri worked for 3 years as Clinical Assistant Professor and Director of Field Education at the University of Iowa School of Social Work. In this role, she instructed students on best practices in suicide intervention and worked with a team to conduct research on suicide. She co-authored published journal articles on her research and presented her work at national and international conferences on suicide. Keri represents Iowa's efforts to prevent suicide on the IAVDRS Advisory Committee.

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IAVDRS in the News!

IAVDRS was featured in the Fall issue of the Iowa Law Enforcement (the IPOA - Iowa Peace Officer's Associan publication). The article, entitled "Iowa Violent Death Reporting System: What is it and how does it benefit law enforcement?" gave a great overview of the program. We appreciate the support of advisory committee member Mike McKelvey for this promotion!

For the first time, Iowa's VDRS data was included in the annual violent death analysis from 2016 published in the MMWR. The article, published in October 2019, used data from 32 states to describe violent deaths in the U.S. Iowa's data will be included in the annual analyses done moving forward.

IOSME distributed a notice and link to all county medical examiners for the 2018 Suicide Report that was posted on our website this fall. Thank you for helping us get the word out, Dr. Klein!

IAVDRS Newsletter



Johnson County Medical Examiner Department

The IAVDRS works closely with the JCME to obtain and abstract records for the system. We want to highlight the work of the department, and two of the staff who serve on the Advisory Committee.

JCME achieved full accreditation by the National Association of Medical Examiners (NAME) on February 25, 2019 and was reaccredited on February 28, 2020. This significant accomplishment demonstrates that JCME is performing to the highest standards of medicolegal death investigation as set forth by NAME.

In 2019, there were 814 deaths reported to JCME. Of these, 418 were accepted as medical examiner jurisdiction deaths. Of the 418 deaths accepted and investigated by JCME, 189 decedents were Johnson County residents and 176 were residents of other counties in Iowa. Additionally, there were 9 decedents who were in the custody of the Iowa Dept. of Corrections at the time of death and 44 decedents were out-of-state residents. As a result, 45% of deaths accepted and investigated by JCME consisted of Johnson County residents.

Of the 418 deaths accepted and investigated by JCME, the incident location for 201 decedents was Johnson County. One-hundred and seventy three incidents occurred in other lowa counties and 9 incidents occurred while in the custody of the lowa Department of Corrections. Additionally, for 26 decedents, the incident location was out-of-state, with one incident location in the Dominican Republic. Nine decedents had an incident location that was unknown. In 2019, 121 autopsies were conducted by JCME. All JCME autopsies were performed at the University of Iowa Hospitals and Clinics (UIHC).

In 2019, JCME investigated and certified 177 natural deaths, 201 accidental deaths, 26 suicides, 7 homicides, and 5 deaths which were classified as undetermined. Iowa law requires that a medical examiner issue a cremation permit prior to cremation. This practice is to ensure that deaths are properly certified and that deaths within the jurisdiction of the medical examiner are not unreported ("missed cases"). JCME issued 1084 cremation permits to funeral service providers in 2019. Cremation permits were issued to a total of 142 funeral service providers. Of the 1084 cremation permits issued, 5 permits triggered the recognition of missed cases, or less than 1% of all cremation permits issued.

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Along with investigating and certifying deaths, part of JCME's mission is to provide data and support to a variety of public health initiatives including the Johnson County Older Adult and Child Death Review Teams, facilitating and coordinating organ and tissue donation with the Iowa Donor Network, and providing data and support to the lowa Violent Death Reporting System. The Johnson County Older Adult Death Review Team and the Johnson County Child Death Review Team are both facilitated by JCME. The purpose of the Teams is to gain greater understanding of issues associated with the deaths of adults aged 60 and older and children under the age of 18. Information gained from the review of these cases is used to identify trends and risk factors, as well as to educate and mobilize community forces to prevent similar deaths in the future.

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JCME has an essential role in the coordination of organ and tissue donation. In 2019, 14 accepted JCME cases became organ donors. From these 14 individuals, the Iowa Donor Network coordinated the recovery of 28 kidneys, 11 livers, 6 hearts, 2 lungs, and 2 pancreases for transplant. Five accepted JCME cases became tissue donors with the recovery of bone, skin, heart valves, saphenous veins, femoral veins, adipose tissue, and/or joints. One tissue donor can enhance the lives of more than 300 people. JCME fully supports organ and tissue donation and, by policy, JCME refers all out-of-hospital deaths that fall under our jurisdiction to the Iowa Donor Network.

Clayton Schuneman, BA, NREMT, F-ABMDI, is the Administrative Director of the Johnson County Medical Examiner Department. Clayton is a Board Certified Fellow of the American Board of Medicolegal Death Investigators (F-ABMDI), a National Registry Emergency Medical Technician (NREMT), an Iowa Mortuary Operational Response Team (IMORT) Advisory



Clayton Schuneman

Board Committee member, and a National Association of Medical Examiners (NAME) Investigator Affiliate member. Schuneman holds a bachelor's degree in anthropology from the University of Iowa. Clayton was a Medical Examiner Investigator with the County from 2010 to 2017. Prior to that, he was employed by the Iowa Office of the State Archaeologist where he worked for the Burials Program and as a field and laboratory technician.

Kate Bengtson, LMSW, F-ABMDI, is the Medical Examiner Investigative Supervisor for the Johnson County Medical Examiner Department. Kate is a Board Certified Fellow of the American Board of Medicolegal Death Investigators (F-ABMDI), and a National Association of Medical Examiners (NAME)

Kate Bengstson

Investigator Affiliate member. Kate received her BSW and MSW from the University of Iowa School of Social Work. Kate has previous work experience with Iowa City Hospice and Iowa Donor Network and has been affiliated with the Medical Examiner Department since 2010.

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Partnering Together



http://www.idph.iowa.gov

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IOWA VIOLENT DEATH REPORTING SYSTEM

Office of Disability, Injury & Violence Prevention lowa Department of Public Health

515.281.5032

https://idph.iowa.gov/disability-injury-violence-prevention/iavdrs