

Preventing Youth Suicide in Primary Care

Funding cycle: October 1, 2008 – September 30, 2011

Executive Summary

The goal of this project was to increase identification of youth (ages 14-24 years) at risk for suicide and to improve their access to mental health services. The primary means to this goal was through implementation of an early identification system within primary care medical settings in three Pennsylvania counties (Lackawanna, Luzerne, Schuylkill) with high rates of adolescent suicide. This directly met the aim of the RFA for this project: to develop and implement early intervention and prevention programs for suicidal youth.

There were five objectives:

Objective #1: Create a task force of a broad range of stakeholders. These stakeholder groups guided the initial needs assessments and helped identify and address system and policy changes necessary to implement and sustain this suicide prevention system in these three counties. Additionally, they assisted in plans for dissemination across the Commonwealth.

Objective #2: Provide a youth suicide “gatekeeper” training program to participating pediatricians, family physicians, nurse practitioners, and emergency room physicians in the designated counties.

Objective #3: Provide medical practitioners in the three counties free access to a web-based, patient self-report screening tool to assess for suicide and related risk factors. This tool generated a brief report for the provider to review at the time of the visit.

Objective #4: Increase the integration, if not collocation, of behavioral health services with medical services. This collaboration decreased access barriers, reduced delays in assessment and treatment, and provided necessary behavioral health support to medical providers and their patients.

Objective #5: Provide clinical training to behavioral health providers who receive referrals and treat those at risk for suicide. Specifically, nationally renowned experts in cognitive behavioral therapy (Dr. Kerr, Dr. Brent, and/or Kim Poling) and family therapy (Dr. Diamond) provided several workshops throughout the course of the funding period to help local behavioral health providers improve their therapeutic skill set for working with suicidal youth.

This project met the needs of Pennsylvania’s Youth Suicide Prevention Plan and the National Strategy. The Pennsylvania Youth Suicide Prevention Plan is modeled after the National Strategy, and the GLS project met numerous needs across both suicide prevention plans. Specifically, the following goals were met by this project:

Goal #1: promoting awareness of suicide as a public health problem;

Goal #2: developing broad-based support for suicide prevention;

Goal #3: develop and implement strategies to reduce stigma;

Goal #4: identify, develop, and implement suicide prevention programs;

Goal #6: training to recognize risk factors for suicide;

Goal #7: promote effective clinical and professional practices;

Goal #8: improve access to community linkages with mental health services;

Goal #9: promote and support suicide research efforts; and

Goal #10: improve and expand surveillance systems.