Youth Suicide Prevention: Looking Upstream

BEYOND THE BASICS
CONFERENCE - MAINE

Effie Malley, MPA
National Center for the Prevention of Youth Suicide
American Association of Suicidology

National Center for the Prevention of Youth Suicide
April 2012
Introduction
Workshop Outline - Upstream Youth Suicide Prevention

- Define upstream youth suicide prevention
- Describe rationale and evidence base
- Discuss example of risk factor reduction
- Discuss strategies for initiating or strengthening upstream work
ROUND ROBIN:
TELLING THE STORY OF THE VILLAGERS WHO LIVED NEXT TO A WATERFALL.
Upstream youth suicide prevention

- Reduces risk factors or builds protective factors
- Diverts a life trajectory from suicidal behavior
- Focuses on precursors and not on management or treatment

Wyman, 2012
Upstream Youth Suicide Prevention – Rationale for Expanded Paradigm

- Targeting more prevalent, lower risk has potential to lower suicide rates
- ID and refer approach often has MH system limitations
- Treatment model not strengthening protective factors to increase coping, resilience, help-seeking

Wyman, 2012
# Risk and Protective Factors for Youth Suicide

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Protective Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental illness</td>
<td>Psychological well-being</td>
</tr>
<tr>
<td>Substance-related disorder</td>
<td>Self esteem</td>
</tr>
<tr>
<td>Prior suicide attempt</td>
<td>Academic achievement</td>
</tr>
<tr>
<td>Self injury</td>
<td>Connectedness with parents</td>
</tr>
<tr>
<td>Parental/familial discord</td>
<td>Family connectedness</td>
</tr>
<tr>
<td>Family suicidal behavior</td>
<td>Social support</td>
</tr>
<tr>
<td>Poor coping skills</td>
<td>Coping skills</td>
</tr>
<tr>
<td>Social isolation</td>
<td>Physical activity, sports</td>
</tr>
<tr>
<td>Contagion</td>
<td>Safe school, connectedness</td>
</tr>
<tr>
<td>Means availability</td>
<td>Caring adult</td>
</tr>
<tr>
<td>Reduced access to means</td>
<td></td>
</tr>
</tbody>
</table>

- Mental illness
- Substance-related disorder
- Prior suicide attempt
- Self injury
- Parental/familial discord
- Family suicidal behavior
- Poor coping skills
- Social isolation
- Contagion
- Means availability

- Psychological well-being
- Self esteem
- Academic achievement
- Connectedness with parents
- Family connectedness
- Social support
- Coping skills
- Physical activity, sports
- Safe school, connectedness
- Caring adult
- Reduced access to means
Upstream Youth Suicide Prevention – Important Resource

Mental, emotional, and behavioral disorders are preventable from conception through adulthood.
1. Prevention requires a paradigm shift
2. Mental health and physical health are inseparable
3. Successful prevention is inherently interdisciplinary
4. Mental, emotional, and behavioral disorders are developmental
5. Coordinated community level systems are needed to support young people
6. Developmental perspective is key
Reconnecting Youth

- targeted a selective and indicated group of potential HS dropouts
- Uses peer group, teaches life skills, increases parental involvement
- Tracked outcomes incl. SA, grades, MH
- Showed reductions in depression and suicidal behavior
- See NREPP
Evidence for Upstream Youth Suicide Prevention

Communities That Care
• Youth surveyed re risk and protective factors every 2 years
• Community process to choose from effective prevention programs
• Outcomes – lower smoking, drinking, delinquent behavior
• See http://www.communitiesthatcare.net
Evidence for Upstream Youth Suicide Prevention

**Sources of Strength**
- Universal HS program that trains peer leaders in Sources of Strength curriculum and gives ongoing mentoring by adults
- Messaging re adults as competent helpers and okay for youth to get help
- Goal to change norms
- Outcomes changes in norms school-wide and increased protective factors for leaders
Good Behavior Game
- Universal for first and second graders
- Classroom is set up to reward teams for pro-social behavior and for kids learning control
- Showed reductions in depression and suicide ideation
- SAMHSA currently funding 22 sites
Classroom with GBG
Prevention of Depression

- Depression is the most common MI in USA
- NOT like preventing disease: prevention defined as interventions before onset
- What R & P factors to target, when, and who to target

Gladstone et al., 2011
What is the strongest risk factor for youth depression?

Gladstone et al., 2011
Prevention of Depression

Risk group → Symptoms → Onset
Fig. 5. System diagram for behavioral vaccine.

Embry, 2002
How Can You Move Upstream?

- Learn more about upstream
- Join and integrate with other efforts
- Use multiple strategies
- Promotion is the first phase of prevention
- Find kernels to use
- Implementation research has shown complexity and important role of community
Putting Knowledge Into Practice: Overarching Recommendations

- **States and communities** should develop networked systems to apply resources to the promotion of mental health and prevention of MEB disorders among their young people. These systems should involve individuals, families, schools, justice systems, healthcare systems and relevant community-based systems. Such approaches should **build on available evidence-based programs** and involve local evaluators to assess the implementation process of individual programs or policies and to **measure community-wide outcomes**.

Now you can:

• Define upstream youth suicide prevention and give rationale
• Describe upstream programs, and example of risk factor reduction
• Describe strategies for initiating or strengthening upstream youth suicide prevention


Contact

Effie Malley
603-205-5395
emalley@suicidology.org
National Center for the Prevention of Youth Suicide
American Association of Suicidology