Almost 50% of US homes have a firearm.

50% of teens made a suicide attempt within 20 minutes of deciding to end their life.

SIS: A three-step process for preventing youth suicide

SCREEN - Identifying youth at risk saves lives
Screen for 1) suicide and 2) depression at EVERY youth preventative visit using a recommended screening tool
- Include suicide prevention information in your anticipatory guidance
- Recommended screening tools:
  1) Ask Suicide-Screening Questions (ASQ) Toolkit is a free resource to help identify youth at risk for suicide
  2) Patient Health Questionnaire (PHQ-9 For Teens) is a free resource to screen, monitor, and measure depression severity

Have an openminded discussion with ALL families about lethal means in the home
- Instead of asking “Are lethal means, including firearms and medications, secure?” ask “If there are lethal means in your home, like firearms and medications, are they kept locked and away from youth?”

INTERVENE - Counsel families to:
Restrict Access - Store It Safe!
- Keep all lethal means stored locked with no access for youth – this includes firearms, medications and alcohol
- Ensure lethal means and keys to the storage device are stored separately in a location unknown to the youth

Make a Safety Plan
- Name 3 people to reach out to in a crisis – for example, a teacher, friend, or family member
- Increase adult supervision, such as screen monitoring
- Ask how they feel supported – be creative and plan for different situations
- Have agreed upon coping strategies available – see www.ohioaap.org/storeitsafe for additional resources
- Practice healthy skills to train the brain before times of crisis

Be Prepared for a Crisis to Happen
- Remember – the first hour of a crisis is the most overwhelming
- Initial de-escalation of problems is essential so a crisis may pass
- Once the situation has been de-escalated, appropriate care can be sought

SEEK TREATMENT
If there are acute life-threatening concerns, send youth to the ER or call 911
- Review with families when it is a true emergency and how to seek help when needed
If mild or no immediate lethality concerns, enact the safety and communication plan
- Give youth a safe chance to use coping mechanisms
- If crisis continues, be ready to ask for help from professionals - call a counselor or healthcare provider

Provide resources and referrals for families who need help
- Connect with community partners and local resources for suicide prevention
- If you have further questions, refer families to resources:
  - Crisis Text Line - Text 4HOPE to 741741
  - Suicide Prevention Resource Center - www.sprc.org
  - Suicide Prevention Lifeline - www.suicidepreventionlifeline.org
  - Suicide and Crisis Lifeline - Call or Text 988

Suicide is the second leading cause of death in 10-19 year olds

Suicide in teens can be triggered by a seemingly small stressor and happen quickly

At any given time
1 in 5 teens are depressed

Firearms are the leading cause of death by suicide

Barriers to lethal means are effective in reducing suicides
Sample: SIS Flow Chart

Patient age 12-21 arrives for youth preventative visit (well visit or sports physical)

Screen patient for depression using a recommended screening tool (i.e. PHQ-9)
Screen patient for suicidality using a recommended screening tool (i.e. ASQ)

Risk of Depression
+ Mild and no acute lethality concerns
  • Use system resources to educate youth and family and refer to resources
  • Focus on strengths
  Follow-up, as needed

+ Moderate/severe and no acute lethality concerns
  Use system resources to develop treatment plan, which may include:
  • Referral to MH specialist
  • Consider starting medication
  • Crisis/safety planning

PHQ-9 Depression Severity Guide
0-4: None
5-9: At Risk/Mild
10-14: Moderate
15-19: Moderately Severe
20-27: Severe

Risk of Death by Suicide
If using ASQ
“Yes” to any Q1-4
“No” to Q5

“Yes” to Q5
  • Evaluate further for safety
  • Develop follow-up plan
  • Refer for MH Services

• 1:1 supervision of patient
  • Supervised transport to ER for evaluation

Provide phone or in-person follow-up

Ohio AAP Resources
• Family Discussion Guide
• Crisis Rack Card Parent
• Teen Rack Card
• Social Media Toolkit

Sample Safety Plan
• Phone check at 1-2 weeks
• PCP visit within 8 weeks

ASQ Toolkit

Questions?
• Resources from Ohio AAP for families can be found at: www.ohioaap.org/storeitsafe
• The Ohio AAP is one partner, but suicide prevention will be more effective if physicians, communities, organizations, schools, and families work together; find a local suicide prevention coalition at: www.ohiospf.org/coalitions

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