

Suicide Prevention in Adolescents and Young Adults

Statement of the International Society for Psychiatric Mental Health Nurses (ISPN)

Introduction

The International Society for Psychiatric Mental Health Nurses recognizes the need to promote mental health and well-being for all individuals, families, and communities across the world. ISPN's mission is "to support advanced-practice psychiatric-mental health nurses in promoting mental health care, literacy, and policy worldwide. In this policy statement, ISPN will make recommendations to decrease the suicide rate among adolescents and young adults and improve the quality of and access to effective suicide prevention services globally.

Background

Suicide is a significant public health problem and a leading cause of death worldwide. According to the Centers for Disease Control and Prevention (CDC), suicide rates increased approximately 36% between 2000–2021. Suicide was responsible for 48,183 deaths in 2021, which is about one death every 11 minutes. The number of people who think about or attempt suicide is even higher. In 2021, an estimated 12.3 million American adults seriously thought about suicide, 3.5 million planned a suicide attempt, and 1.7 million attempted suicides. Provisional CDC data show that the number of suicide deaths in 2022 is the highest recorded, exceeding the next closest year (2018) by over 1,000 deaths. The CDC identifies suicide prevention as a top priority for public health on the national and global arena. Internationally suicide rates for youth are dropping while rising in the US.

Suicide is the second-leading cause of death among people aged 15 to 24 in the U.S. 20% of high school students report serious thoughts of suicide and 9% have tried to take their lives, according to the National Alliance on Mental Illness (NAMI). Among young adults aged 15 to 24 in the U.S., the suicide rate in 2019 stood at approximately 14 per 100,000 individuals, representing a slightly higher prevalence of one suicide for every 10,000 people in this age group. (NAMI, 2023)

Risk Factors

The CDC identifies several risk factors associated with suicide, including mental illness, substance abuse, previous suicide attempts, access to lethal means, and social isolation (CDC, 2021). In addition to the risk factors identified by the CDC, NAMI includes the following risk factors for teens; serious family problems, breakups or other major relationship losses, history of traumatic experiences such as sexual violence or severe episodes of racial prejudice/violence, bullying, lack of access to mental health care and multiple exposures to suicide in one's family and community or through inappropriate coverage of suicide in the media.

It is crucial to identify adolescents and young adults who may be at risk and provide them with appropriate interventions.

Prevention Strategies and Recommendations

1. **Education and Training:** All health care providers, teachers, youth group leaders and parents should receive training in suicide prevention, including how to recognize warning signs, how to communicate with someone who may be at risk, and how to connect them to appropriate resources.
2. **Follow-up and Support:** All individuals who have attempted suicide, as well as those who have been identified as being at risk, will receive ongoing follow-up and support from mental health care providers to prevent future suicidal behavior. This includes use of 988, a national suicide prevention hotline's 3-digit code (988) to connect with a trained crisis counselor via text message or phone. Using 988 is confidential, free, and available 24/7/365.
3. **Destigmatizing Mental Health:** Efforts should focus on destigmatizing conversations about mental health and suicide. By creating a safe and open environment, individuals are more likely to seek help when needed.
4. **Cultural Appropriateness:** Tailor prevention efforts to be culturally sensitive and inclusive to address the unique needs of diverse populations.
5. **Screening and Assessment:** All individuals seeking services should be screened for suicide risk factors, including history of suicidal ideation, attempts, and mental health diagnoses. Those identified as being at risk must receive a comprehensive assessment to determine their level of risk.
6. **Access to Quality Mental Health Care:** Services must be in place to connect all individuals identified as being at risk for suicide with appropriate mental health care providers, including crisis intervention services and ongoing treatment.
7. **Lethal Means Safety:** Communities must implement policies and procedures to reduce access to lethal means, such as firearms, medications, and other potentially harmful objects.
8. **Exposure to Suicide in the Community and Media:** Community leaders and media executives play an important role in preventing suicides especially in their coverage of suicide attempts. Covering suicide objectively can change perceptions, dispel myths, and inform the public on the complexities of the issue. Social media reports can result in help-seeking when they include helpful resources and messages of hope and recovery.

Summary

Suicide prevention is a crucial element of public health, and ISPN is dedicated to offering effective strategies in this regard. In this statement, we present suicide prevention strategies tailored specifically for adolescents and young adults. Through the implementation of evidence-based approaches, we aim to identify and provide support to teenagers who may be at risk, ultimately working towards reducing the incidence of suicides in our community.

References and Recommended Readings

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Authors: Cynthia Handrup, DNP, APRN, PMHCNS-BC, FAAN, Mitchell Kordzikowski, DNP, MBA, PMHNP-BC, Sally Raphael, MS, APRN-PMH, FAAN

Approved by: ISPN Policy Committee

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Sally Raphel, MS, APRN-PMH, FAAN, Chair

Beth Bonham, PhD, RN, PMHCNS-BC, FAAN

Pam Galehouse, PhD, RN, PMHCNS, CNL

Cynthia Handrup, DNP, APRN, PMHCNS-BC, FAAN

Mitchell Kordzikowski, DNP, MBA, PMHNP-BC, NE-BC

Barb Peterson, PhD, PMHCNS-BC, APRN

Andrea Kwasky, DNP, PMHNP-BC, PMHCNS-BC

Brayden Kameg, DNP, PMHNP-BC, CARN, CNE

Adopted by the ISPN Board of Directors

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