

“13 Reasons Why” and Youth Suicide

[Adolescent Health & Well-Being](#)

Date Posted:

Jun 05, 2017

Image



Guest blogger [Stephen L. Soffer, PhD](#), is a psychologist and director of outpatient services in the Department of Child and Adolescent Psychiatry and Behavioral Sciences at Children's Hospital of Philadelphia (CHOP).

As child and adolescent clinical psychologists, we encounter patients with suicidal thoughts and previous attempts on a regular basis. We're concerned for these patients and make the reduction of suicidal thoughts and prevention of suicide attempts the primary goal for their therapy.

In recent months, there has been more attention and discussions about youth suicide following the release of the Netflix series [“13 Reasons Why”](#). I (Rhonda) read the book a few years ago after some of my teen patients who had chronic suicidal thoughts encouraged me to do so. Since the TV series launched, we have been asking our patients if they are watching it and, if so, discussing their perceptions of it. We think it is critical to understand these and other influences that impact youth, especially vulnerable ones, such as those seen in our outpatient behavioral health practice at the [Department of Child & Adolescent Psychiatry and Behavioral Sciences \(DCAPBS\)](#), if we're going to provide appropriately tailored care.

How Common is Teen Suicide in the U.S.?

Teen suicide is a significant societal problem. In 2015, suicide was the [second leading cause](#) of death for young people ages 15-24 and the third leading cause for those 10-14 years old. A [nationally representative study](#) of adolescents in the U.S. showed that 12 percent seriously considered suicide and four percent made an attempt in their lifetime.

When we look behind the numbers we see that [adolescent girls](#) are more likely to think about suicide and make an attempt than adolescent boys, however, males are more likely to die from suicide. Several [risk factors](#) for suicide include behavioral health problems, substance and alcohol abuse and history of trauma, bullying and

abuse. Youth who have made a suicide attempt have an increased chance of making another attempt and dying by suicide.

Fortunately, there is increasing recognition among pediatric health care clinicians that youth suicide is preventable. Prevention efforts require concentrated attention and investment from organizations that are part of our children's lives, such as schools and health care institutions. [Zero Suicide](#) (a project of the Suicide Prevention Resource Center supported by Substance Abuse and Mental Health Services Administration) is an approach to suicide prevention that attempts to recognize the multi-faceted approach necessary to support health care clinicians and organizations engaged in the challenging work of reducing suicide risk.

Suicide Prevention and Treatment Practices at Children's Hospital of Philadelphia

At CHOP, a team of DCAPBS behavioral health clinicians were trained in the Zero Suicide approach, and have been actively using it to address suicide risk among our patients. We're working to meet several Zero Suicide goals, including increasing awareness among clinical colleagues, providing training, and improving screening and assessment practices of suicide risk. Recognizing that one of the key elements to suicide prevention is accurate and reliable detection, the workgroup has integrated an evidence-based suicide risk assessment tool (the [Columbia Suicide Severity Rating Scale](#), or C-SSRS) into routine patient care encounters. The C-SSRS is improving our ability to identify suicidal ideation and behavior among patients receiving outpatient behavioral health care. This tool is also allowing us to support other pediatric practices by assessing and subsequently addressing the safety risk of suicidal patients.

Additionally, our team is forming an interdisciplinary and interdepartmental task force focused on suicide prevention efforts across CHOP's health care system. Engaging physicians, psychologists, social workers, nurses and patient safety professionals, this task force is working to identify opportunities to improve suicide screening and assessment practices in inpatient and outpatient settings, increase staff awareness and training related to suicide risk factors, and address the need to provide more comprehensive follow-up care for patients at increased risk for suicide.

Efforts to Protect Children at Risk for Suicide Cannot Be Limited to the Hospital Setting

With "13 Reasons Why" renewing awareness of teen suicide for more of our patients and families, we believe that it has never been more important to educate patients and families about youth suicide risk and its prevalence. It's also critical for health care providers to screen for suicide risk.

Further, it is essential that policymakers and government officials recognize and respond to the need for a well-trained and available workforce of behavioral health providers to support the needs of children and adolescents coping with thoughts of suicide. This means ensuring there is adequate and consistent funding allocated to support the education and training of child and adolescent psychiatrists, psychologists and clinical social workers. It is also critical that families and children have access to affordable, comprehensive health insurance plans that include coverage of behavioral and mental health services in order to allow them to be seen by these clinicians.

But this work does not stop at the health care system. Rather, parents and other trusted adults in youths' lives are often the "front line" and need to establish open communication in which the youth can let them know if he/she is seriously considering suicide. All comments of wishes to be dead and wanting to kill oneself must be taken seriously. Youth who express intent and/or plans to kill themselves or have tried to kill themselves need to immediately receive behavioral health treatment (talk therapy and/or medication) to help prevent a potential suicide completion. Listening to the public discourse and engaging in discussions with colleagues and youth about "13 Reasons Why," we recognize the importance of the changes made at CHOP to address youth suicide, which we plan to expand and improve through further clinician education, patient services and research.

For more information on suicide prevention, please see the resources below:

- <http://zerosuicide.sprc.org/>
- <https://afsp.org/>

- www.youthsuicidewarningsigns.org

Stephen Soffer, PhD
