

Blueprint for Youth Suicide Prevention: Strategies for Community and School Settings



A joint initiative of the American Academy of Pediatrics
and the American Foundation for Suicide Prevention,
in collaboration with experts from the National Institute of Mental Health



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Introduction

[Suicide](#) and [suicidal behavior](#) among youth and young adults is a major public health crisis. Suicide is the 2nd leading cause of death among people 10–24 years of age in the United States (US), and [rates](#) have been rising for decades. Our children should grow, thrive, and live long, healthy lives; yet among youth in the US who die, over a quarter die from suicide.

As today's youth navigate their social and emotional development, various forms of health inequities, systemic discrimination, and recent challenges from the COVID-19 pandemic have added stress and barriers to overall health. Stressors such as social isolation, losses, grief, academic and extracurricular disengagement, and financial hardships for families have exacerbated mental health symptoms and other suicide risk factors. [According to a Centers for Disease Control and Prevention \(CDC\) report](#), the proportion of mental health–related emergency department (ED) visits for suicide attempts in early 2021 among adolescents 12–17 years of age increased 31% compared with the same period in 2019.

Suicide is complex but often preventable. Pediatric health clinicians, adults working with youth in school and community settings, families, and peers can play a critical role in identifying and supporting youth at risk for suicide.

Suicide affects all populations. Youth of any race, ethnicity, gender identity, sexual orientation, socioeconomic status, or community may be at risk for suicide.

Health equity is critical to suicide prevention. [Research shows significant disparities](#) in suicide rates, risk, and care for youth across cultures and communities. Race is a social construct, and a history of systemic racism within the healthcare system and scientific research community has resulted in an evidence base that does not include sufficient information about trends in suicidal thoughts, behaviors, and risk factors among Black youth, Indigenous youth, Latino youth, Asian American youth, and youth from other communities of color. Few studies have fully assessed the impacts of racism, discrimination, and historical or intergenerational trauma on suicidal ideation among affected youth; yet [research](#) has shown that experience with discrimination impacts youths' risk for suicidal thoughts. Furthermore, youth access to developmentally and culturally responsive mental health services is limited in many communities, clinics, and schools.

In order to truly serve all youth, there is a critical need for dedicated research and suicide prevention programs to support [Black youth](#), [Indigenous youth](#), [Latino youth](#), [Asian American youth](#), and [youth who identify as lesbian, gay, bisexual, transgender, queer, or two-spirit \(LGBTQ2S+\)](#). There is also a critical need to understand and address suicide prevention in communities that have been marginalized or underserved, including (but not limited to) youth in rural communities, youth in low-resource urban settings, [youth with special healthcare needs](#), youth in the child welfare system, youth who have experienced family disruption, youth who are homeless, and youth involved in the juvenile justice system. Multi-sectoral [strategies](#) are needed to identify and support youth at risk, as well as to address the upstream factors and social determinants of health (SDOH) that cause and intensify disparities.

These sobering realities are a call to action—**pediatric health clinicians and other adults who work with youth can make a difference**. Now more than ever there is an urgent need for national leadership and partnerships to advance youth suicide prevention.

Purpose of this Blueprint

The American Academy of Pediatrics (AAP) and American Foundation for Suicide Prevention (AFSP), in collaboration with experts from the National Institute of Mental Health (NIMH), created this *Blueprint for Youth Suicide Prevention* as an educational resource to support pediatric health clinicians in identifying strategies and key partnerships to support youth at risk for suicide.

To develop this Blueprint, AAP, AFSP, and NIMH convened a [Virtual Summit on Youth Suicide Prevention](#), including listening sessions with partners serving youth from under-resourced communities, as well as federal agencies. Key multidisciplinary collaborators who focus on strategies to promote health equity offered insights that inform this resource.

Data and considerations presented in this Blueprint are based on the current landscape and gaps in science, practice, and programs related to youth suicide prevention. This Blueprint is intended to serve as a complementary effort to ongoing, large-scale comprehensive suicide prevention initiatives supported by the [US Centers for Disease Control and Prevention](#), the [National Action Alliance for Suicide Prevention](#), the [Substance Abuse and Mental Health Services Administration](#), the US Surgeon General's Advisory on [Protecting Youth Mental Health](#), the [Suicide Prevention Resource Center](#), and other leaders in the field.

This Blueprint is designed to outline clinical and community strategies and partnership opportunities that pediatric health clinicians can use to better identify and support youth at risk for suicide. To complement these strategies, AAP and AFSP have created an Advocacy resource to help those interested in advocating for policies to prevent suicide among youth. The National Institute of Mental Health (NIMH) did not contribute to the Advocacy section of this Blueprint and any information described in this section does not necessarily reflect the views of NIMH, the National Institutes of Health, the Department of Health and Human Services, or the US government broadly.

Language note

Throughout this document, we refer to “pediatric health clinicians.” This term is intended to include all health clinicians who provide care to youth and young adults, including (but not limited to) pediatricians, pediatric medical subspecialists, pediatric surgical subspecialists, family physicians, subspecialists, mental and behavioral health professionals, nurses, nurse practitioners, physician assistants, medical assistants, school nurses, and any other clinician who provides health care to youth.

Full content

This PDF includes the “Strategies for Community and School Settings” section of the *Blueprint for Youth Suicide Prevention*. To access the full content, visit www.aap.org/suicideprevention.

Preventing Youth Suicide: Strategies for Community and School Settings

Pediatric health clinicians and all adults who work with youth have opportunities to engage in youth suicide prevention initiatives in their communities. Cross-sectoral partnerships are critical to supporting youth in all places that they live, learn, work, and play.

This section of the Blueprint provides strategies and concrete examples to help pediatric health clinicians, schools, and other community partners work together toward youth suicide prevention efforts. The ideas outlined in this section of the Blueprint are intended to work within large-scale comprehensive approaches to suicide prevention, including those outlined by the [US Centers for Disease Control and Prevention \(CDC\)](#) and [Suicide Prevention Resource Center](#).

Efforts are needed to address disparities in youth suicide risk

To equitably address suicide prevention in community and school settings, it is critical to recognize and address disparities in how mental health symptoms and behavioral problems are recognized and managed.

Youth have disparate opportunities and experiences in school and community settings, due to wide variation in social factors, community resources, and structural forces such as systemic racism and discrimination.

Youth may face additional barriers to mental health support in schools/communities based on many factors:

- Race or ethnicity
- Sexual orientation or gender identity
- Special health care needs, including mental health conditions
- Language differences
- Involvement in the child welfare system
- Under-resourced schools

Note: Suicide rates are not directly tied to race, gender, or any other social construct. Rather, youth may experience discrimination or long-standing health, social, or systemic inequities that may impact their development and risk for suicide.

For example, Black students and American Indian/Alaska Native students are [more likely to receive a disciplinary response](#) to mental health-related behavior changes than white students who are more likely to receive support and referral to mental health services, contributing to a phenomenon known as the “school to prison pipeline.”

Solutions include training for staff using a trauma-informed approach and sustained efforts to address inequities in the school and other settings. For more information on disparities in suicide risk, see the “*Youth Suicide Prevention: Strategies for Clinical Settings*” section of this Blueprint.

Building Community Partnerships

Pediatric health clinicians have expertise in child and adolescent health and understand the unique ways that mental health is impacted at various stages of development. This expertise can be extended beyond the clinic by engaging in cross-sector involvement in the community.

[Team-based care](#) and [collaborative](#) or [integrated](#) care models involving medical providers and community partners (eg, schools, local and state agencies) are crucial and necessary components of providing high-quality care. Team-

based and collaborative/integrated care builds on the foundation of the [medical home](#) by reaching out to a broad array of participants in the life of a child and incorporating them into the care provided. These relationships can be critical to supporting youth suicide prevention in the community.

Groups that pediatric health clinicians can partner with to reduce youth suicide risk

Pediatric health clinicians who are interested in addressing youth suicide prevention at the community level can consider working with key partners across many different fields. The first step in this work is to check in with partners in your community, to find out what suicide prevention initiatives already exist in your area. Consider checking in with potential partners, including:

- Schools or School Districts
- Colleges and Universities
- Parent groups such as your local Parent Teacher Associations/Organizations
- Faith-based/Religious organizations
- Community leaders or tribal elders
- Youth (consider peer-education groups or school clubs)
- Community groups such as a Youth Club, 4H club, or [Boys and Girls Club](#)
- [Scouting or sports organizations](#)
- [Group and residential care organizations](#)
- [Foster and Adoptive Parent Association](#)
- [Organizations serving children with special health care needs](#)
- Mental health organizations
- LGBTQ2S+ organizations
- County mental health clinics or crisis centers
- Organizations involved with the juvenile justice system
- Academic enrichment/Tutoring organizations
- College advising or student-life organizations
- Elected officials
- Youth suicide or bereavement [support groups](#)
- Your [state suicide prevention coordinator](#)
- Your [local chapter](#) of the American Foundation for Suicide Prevention (AFSP)
- Your [local chapter](#) of the American Academy of Pediatrics (AAP)
- Your [local chapter](#) of the National Alliance for Mental Illness (NAMI)

Strategies for authentic engagement with organizations that serve diverse cultural populations

Community engagement is a [key strategy](#) for advancing suicide prevention within diverse communities.

Sustained community engagement can help reduce barriers to care and service use and can increase engagement among under-resourced populations.

Strategies for authentic engagement [include](#):

- Acknowledge the significant differences in mental health lived experiences and unmet mental health needs between marginalized and non-marginalized youth populations
- Convene health providers, researchers, policy makers, and community members to align the needs and perspectives of the population of interest in developing effective approaches for clinical care and research
- Strategies for engagement should consider cultural factors and strengths of the population of interest

- Taking a humble approach to learning from diverse partners, develop strategies and actions collaboratively
- Consider co-developing linguistically and culturally nuanced messages and materials as part of the strategy. Use resources such as [this one](#) from the Suicide Prevention Resource Center
- Communicate and follow up with all partners on a regular basis about progress, barriers, and outcomes

Initiating cross-sectoral partnerships

When building a new partnership to address youth suicide prevention in your community, follow these key steps to develop clear priorities and expectations from the beginning:

- Step 1: Understand the scope of the issue. Before launching a new partnership or program, take a look at the [data on rates of suicidal ideation, behavior](#) among [youth in your community](#)
- Step 2: Find shared goals. Starting at the outset, it is beneficial to clarify the suicide prevention missions and goals for partner organizations involved. These conversations are essential to identifying mission overlap and leveraging organizational differences for greater impact
- Step 3: Consider operational differences. It's critical to identify organizational dissimilarities in operations, communication, language, and time scaling, as partner organizations may envision different project timelines or use different communications strategies
- Step 4: Establish partnership value. Partner organizations may be driven by different objectives. It's important to identify shared organizational values so that both partners can better advocate for the work internally
- Step 5: Identify metrics for success. To bolster partnership longevity and sustainability, it's essential that partners agree upon metrics for success, as well as pinpoint how those metrics will be measured and communicated, both internally and externally. The ability to communicate smaller wins along the way can help partners stay engaged and adopt the cause

Tips for engaging partners in suicide prevention

- Convene your team: include key leaders as well as “natural champions” from all organizations
- Identify shared goals and consider unique needs and factors in your community and organizations
- Seek partnership and input from all populations-of-focus—especially youth and individuals with lived experience—to ensure the prevention program is built to serve the needs of the community-of-focus
- Be aware of the impacts of bias and systemic racism and discrimination on suicide risk in your community: work with partners to recognize and address these issues openly in program development
- Identify potential barriers and brainstorm strategies to address them
- Review and improve existing suicide prevention policies and procedures
- Consider a triage and referral plan for at-risk youth
- Develop and maintain a list of local mental health resources and referrals
- Conduct or encourage training on basic, evidence-based suicide prevention for all organizational staff
- Identify special considerations for youth who have attempted suicide (eg, re-entry to school)
- Consider a [Postvention Plan](#) in the event of suicide loss. This is important not only for schools, but other types of community settings such as faith organizations and other groups
- Agree on shared language about suicide and prevention

Practical Ideas for Pediatric Health Clinicians to Promote Suicide Prevention in the Community

Suicide prevention is an ongoing process. There are many ways that pediatric health clinicians, school personnel, and other adults who work with youth can engage in individual events or ongoing prevention initiatives.

Individual conversations or presentations about youth suicide prevention don't need to be comprehensive or "one and done." Prevention efforts work best when they lead to an ongoing relationship and organizational improvement over time.

Opportunities to engage with schools

- Pediatric clinicians should be aware that schools play an important role in [collaborative care models](#) to promote and support pediatric mental health, and partner with them accordingly
- Speak to your local school board/school administration about the important role that schools can play in preventing suicide. Make sure they are aware of the resource [Model School District Policy for Suicide Prevention](#), which has template policies that schools can customize
 - Schools can operate with a [Multi-Tiered System of Support \(MTSS\)](#) to support students' academic, behavioral, and social-emotional needs through Universal, Selective, and Indicated prevention levels
- Reach out to your local school's counselor, social worker, psychologist, or nurse and offer your support. You can volunteer to:
 - Review and update their local mental health clinician resource list
 - Discuss any challenges they are facing, particularly related to supporting students who are struggling and getting clinical evaluations
 - Make sure they are aware of [youth suicide prevention programs and resources](#) for students, school staff and parents/caregivers
 - Talk about the suicide risk screening program that the school is implementing, and offer to support school nurses/school-based health centers with screening
 - Consider the [Ask Suicide-Screening Questions \(ASQ\) screener](#), which can be used in schools
 - Assist the school with developing their [policy and protocols](#) for responding to youth identified with emerging or current suicide risk
 - Introduce [After A Suicide: A Toolkit for Schools](#) to help schools form crisis teams and be ready if a suicide does happen in their school
- Encourage schools to utilize evidence-based suicide prevention programs and social emotional learning curricula for youth K-12, and to implement school-wide positive behavioral interventions and supports. For example:
 - [Signs of Suicide](#)
 - [Sources of Strength](#)
 - [Good Behavior Game](#)
 - [Youth Aware of Mental Health](#)
- Work with schools to promote diversity and trauma-informed care in the way that they understand and address mental health symptoms in students:
 - Black adolescents with mental health concerns may [express symptoms differently](#) than white peers, often resulting in behavioral or punitive consequences
 - Historical and secondary trauma related to racism and discrimination can impact mental health
 - Systemic racism, unconscious biases, and discriminatory policies can interfere with recognition and treatment of suicide risk among youth of color and youth who identify as LGBTQ2S+
 - Trained mental health professionals and peer-to-peer support programs can promote diversity, equity, and inclusion in building supportive school environments and suicide prevention programs

- Offer to speak to middle or high school students at school or at an after-school club about mental health and suicide prevention. Consider partnering with an [AFSP Chapter](#) to host an evidence-informed program such as [It's Real: Teens and Mental Health](#).
- See the National Association of State Boards of Education (NASBE) for more information on [school policy to prevent youth suicide](#)
- In the event of a suicide in your local school district, reach out to provide support and resources:
 - [After A Suicide: A Toolkit for Schools](#)
 - [Resources for After a Suicide Death](#)
 - [Resource for talking with children and teens following a suicide](#)

Opportunities to engage with colleges and universities

- Connect with campus administrators about the important role that college/universities can play in preventing suicide.
 - Helpful resources:
 - [Suicide Prevention Resource Center's](#) comprehensive resources and information about preventing suicide on campus.
 - [SAMHSA Prevention and Treatment of Anxiety, Depression, and Suicidal Thoughts and Behaviors Among College Students](#)
 - [Jed Foundation's Campus Program](#)
 - AFSP's [Interactive Screening Program](#)
 - [College athletics mental health resources](#)
- Work with college/universities to promote diversity and trauma-informed care in the way that they promote mental and behavioral health in students
- Contact your local college or university in the event of a suicide to ensure they are aware of [Postvention: A Guide to Response to Suicide on College Campuses](#)
- Connect with a university chapter of [Active Minds](#)
- Utilize [Steve Fund](#) resources and guidance for recommendations for colleges, universities, and employers for promoting mental health in students of color

Opportunities to engage with community or parent organizations

- Identify local community prevention efforts, such as a state suicide prevention coalition or volunteer with your local AFSP Chapter, both of which benefit from having a clinician involved
- Contact a local faith-based organization or other community organization and offer to speak to parents/caregivers about [taking care of children's mental health](#)
- Offer to meet with a park district, athletics department, or local sports organization to discuss youth mental health and suicide prevention among athletes
- Engage with parent groups to increase awareness of youth suicide. Utilize [talking points](#) and [resources](#) for speaking to parents/caregivers about suicide and [other mental health conditions](#)

Opportunities to engage with other medical professionals

- Engage with your [AAP chapter](#) or other local medical groups (eg, physician organizations, nursing organizations, or other professional associations) to engage your colleagues in suicide prevention efforts

- Develop working relationships with emergency departments and colleagues in child and adolescent psychiatry, clinical psychology, and other mental health professions to optimally evaluate and manage the care of adolescents who are at risk for suicide
- Familiarize yourself with local, state, and national resources that are concerned with treatment of psychopathology and suicide prevention in youth, including local hospitals with psychiatric units, mental health agencies, family and children’s services, crisis hotlines, and crisis intervention centers

Opportunities to engage with the juvenile justice system

- Connect with leadership and staff in local juvenile detention facilities about the importance of suicide prevention and mental health promotion for justice-involved youth:
 - See the [National Response Plan for Suicide Prevention in Corrections](#) from the National Commission on Correctional Health Care and AFSP
- Promote principles for [comprehensive care delivery for justice-involved youth](#), including:
 - Initial mental health screenings for all youth confined for more than one week
 - Access to mental health and substance use services for youth
 - Use of [trauma-informed care principles](#) in detention facilities
 - Understanding of and care for the unique needs of diverse youth within juvenile justice systems, including youth of color, youth who identify as LGBTQ2S+, and youth with special health care needs
- Encourage ongoing suicide risk assessment within juvenile justice facilities

Opportunities to engage with the child welfare system

- Connect with leadership and staff in local child welfare, group home, and foster care systems about the importance of suicide prevention and mental health promotion for youth involved in the child welfare system
- Promote the use of [trauma-informed care principles](#) when working with youth and families
- Offer resources available at no cost, including:
 - AFSP’s [More than Sad](#) program
 - [Family Acceptance Project Posters](#) to support youth who identify as LGBTQ & Gender-Diverse
 - Crisis Text Line’s [Spread the Word](#) page with posters and social media shareables
- Encourage transition-planning for youth aging out of foster care
 - Ensure this planning includes uninterrupted mental health care and connection with a trusted adult

Opportunities to make your voice heard

- Write a letter to the editor, an op-ed in your local newspaper, or a blog for an online media organization on the important role everyone has in youth suicide prevention initiatives [[link to letter template will go here](#)].
- Participate in advocacy activities that promote positive mental health and suicide prevention. For more resources on advocacy, visit:
 - Advocacy Priorities for Youth Suicide Prevention (See the “*Advocacy Priorities for Youth Suicide Prevention*” section of this Blueprint)
 - [AAP Advocacy resources](#)
 - [AFSP action center](#)

Opportunities to engage after a suicide has occurred in your community

- Reach out to the school leadership team to ensure they are aware of the [After A Suicide: Toolkit for Schools](#). Template language is included for school leaders to communicate with the students, parents/caregivers, media, and broader community to enhance healthy grieving and mitigate risk for suicide contagion
- Reach out to local media to ensure they are following the [guidelines for safe messaging about suicide](#)
- Ensure solid community mental health resources are being made available by the schools to students and parents/caregivers
- Share suicide [loss & healing resources](#) with the family if a patient dies by suicide

Examples of Community-Based Youth Suicide Prevention Programs

Many community- and school-based programs have demonstrated evidence for increasing help-seeking and/or reducing suicide risk among youth.

A selection of evidence-based programs is outlined below as examples that may be useful or replicable in your community. Please note that this list is not intended to be exhaustive, and that inclusion of programs below should not be interpreted as official endorsement by AAP, AFSP, or NIMH.

AFSP's More Than Sad Educator Training

In a wait-list control design study of 1475 teachers across 14 geographically diverse public-school districts in Pennsylvania, teachers who received More Than Sad training demonstrated improvements in knowledge and confidence in recognizing and engaging with at risk students. Self-reported and actual referrals to mental health resources increased among the trained teachers compared with the control group, and these gains persisted at 2-month follow up.

[Read evaluation data here.](#)

[Access program details here.](#)

Celebrating Life Youth Suicide Prevention Program- White Mountain Apache Tribe

Using a comprehensive, multitiered youth suicide prevention program universal, selective, and indicated suicide prevention strategies were systematically employed over a period of six years among the White Mountain Apache of Arizona. Using programs included in this section such as Sources of Strength and ASIST alongside culturally customized curricula for native youth, this multi-pronged initiative achieved very positive results. The overall Apache suicide death rates dropped from 40.0 to 24.7 per 100 000 (38.3% decrease), and the rate among those aged 15 to 24 years dropped from 128.5 to 99.0 per 100 000 (23.0% decrease). The annual number of attempts also dropped from 75 (in 2007) to 35 individuals (in 2012). National rates remained relatively stable during this time, at 10 to 13 per 100 000.

[Access program details here.](#)

CDC's Preventing Suicide: A Technical Package of Policy, Programs, and Practices

This technical package from the US Centers for Disease Control and Prevention (CDC) outlines suicide prevention policy, programs, and practices with the best available evidence to prevent suicide. The package is designed to support communities and states in identifying strategies that are mostly likely to be successful.

[Access program details here.](#)

Garrett Lee Smith (GLS) Memorial Act Grants

Garrett Lee Smith (GLS) Memorial Act grants fund youth suicide prevention activities in the US on college campus, community, and tribal settings in many states. Over a 15-year period, a large portion of counties in the US received financial support through GLS grants to engage in youth suicide prevention initiatives. These programs included outreach, awareness raising, screening, “gatekeeper” training (meaning training for key front-line roles to recognize risk and act), developing coalitions, policies/protocols, and supporting hotlines. Forty percent of GLS grants are awarded in rural areas of the US where suicide rates are higher and where resources for programs and clinical treatment tend to be much lower. Evaluation data from the GLS program has found that the program has both short- and long-term impacts on suicidal behaviors and deaths.

[Read evaluation data here.](#)

[Access program details here.](#)

The Good Behavior Game

A universal classroom behavior management method, tested in first- and second-grade classrooms in inner city Baltimore, Maryland beginning in the 1985–1986 school year. Follow-up at ages 19–21 found significantly lower rates of drug and alcohol use disorders, smoking, antisocial personality disorder, delinquency, and incarceration for violent crimes, and over 50% reduced prevalence of suicidal ideation among students who had been in classes using the Good Behavior Game method.

[Read evaluation data here.](#)

[Access program details here.](#)

Help for Life Program, Québec, Canada

A multi-pronged approach involving 40 organizations in Québec to carry out a province-wide prevention strategy, including media, training, and youth referrals to mental healthcare; the program is credited with contributing to a 33% decrease in suicides in the province from 22.2 per 100,000 in 1999 to 13.7 per 100,000 in 2012.

[Read evaluation data here.](#)

[Access program details here.](#)

Model Adolescent Suicide Prevention Program for American Indian Youth in New Mexico

This public health approach to suicide prevention effort in an American Indian Tribal Nation was associated with a decrease in the number of self-destructive acts by an astonishing 73% over a 15-year period between 1988 and 2002, using lay education, trained peers, and referral to counseling. The frequency of suicide-related behaviors and attempts also declined significantly among adolescents.

[Read evaluation data here.](#)

[Access program details here.](#)

Signs of Suicide

School-based suicide prevention program reaching over 50,000 students, which saw a 40-64% decrease in self-reported suicide attempts across 3 randomized controlled studies; the program utilizes “peer leaders” as well as faculty agents (eg, guidance counselors, educators) to increase awareness of signs of suicide, promote help seeking norms, and encourage community intervention at multiple levels.

[Read evaluation data here.](#)

[Access program details here.](#)

Sources of Strength

Shifted schoolwide coping and help seeking norms, improved students' perceptions of adult availability using student "peer leaders" who deliver messages and conduct prevention activities to enhance healthy coping and help seeking norms.

[Read evaluation data here.](#)

[Access program details here.](#)

Suicide Prevention Education Programs

In addition to the above list of programs with evidence for increasing help-seeking or reducing suicide risk, many suicide prevention education programs are available that support community-based suicide prevention efforts. Examples are listed below. Please note that this list is not intended to be exhaustive, and that inclusion of programs below should not be interpreted as official endorsement by AAP, AFSP, or NIMH.

- [American Indian Life Skills Program](#)
- [ASIST \(Applied Suicide Intervention Skills Training\)](#)
- [Kognito for High School Educators](#)
- [LEADS for Youth: Linking Education and Awareness of Depression and Suicide](#)
- [Lifelines Curriculum](#)
- [safeTALK](#)
- [START](#)
- [Talk Saves Lives](#)
- [QPR](#)
- [Youth Aware of Mental Health](#)

Organizations with Community- and School-Based Suicide Prevention Programs & Resources

Partnering with organizations that have expertise in suicide prevention can be very beneficial to building youth suicide prevention efforts in your community.

A selection of organizations that provide programs and resources for community-based suicide prevention activities is listed below. Please note that this list is not intended to be exhaustive, and that inclusion of programs below should not be interpreted as official endorsement by AAP, AFSP, or NIMH.

National Hotlines for Immediate Support

[988 Suicide and Crisis Lifeline](#): 988 phone, text, and chat

[Veterans Crisis Line](#): 1(800)273-TALK; Press "1" for veterans or active-duty military

[Crisis Text Line](#): Text TALK to 741-741 in US, UK, Canada, Ireland

[Trevor Project](#): Text START to 678-678 or call 1(866)488-7386 or [chat](#)

[Trans Lifeline](#): 1(877)565-8860 in US, 1(877)330-6366 in Canada

AAKOMA Project

- Organization focused on the emotional and behavioral health needs of youth and communities of color
- Youth can register for [free virtual therapy and participate in events](#)

Active Minds

- [Active Minds Chapters in Colleges & Universities](#)

American Academy of Pediatrics

- [AAP suicide prevention campaign toolkit](#)
- Engage with your local [AAP chapter](#)

American Indian and Alaska Native (AI/AN) National Suicide Prevention Strategic Plan

- [National initiative](#) addressing suicide prevention across Tribes, Tribal organizations, Urban Indian organizations, and the Indian Health Service (IHS)
- Resources for [providers](#) and [community members](#)

American Foundation for Suicide Prevention (AFSP)

- Model School Policy on Suicide Prevention, After A Suicide Toolkit, and other [school-based resources](#)
- [Guide for Talking to Children & Teens After Suicide](#)
- [Tips for Parents](#)
- [Gizmo's Pawesome Guide to Mental Health](#) for children grades 2-4
- Find your local [AFSP Chapter](#) to attend a program or get involved

Asian American Health Initiative (AAHI)

- Organization to [support the health and wellness](#) of Asian American populations
- [Resources](#) available in English, Chinese, Korean, Vietnamese, and Hindi

Asian American Racism & Mental Health Resources

- [Resources on Asian American racism and mental health](#), tailored toward students, parents, educators, mental health clinicians, and allies
- Program of Massachusetts General Hospital

Asian & Pacific Islander American Health Forum

- Organization dedicated to improving the health of Asian Americans, Native Hawaiians, and Pacific Islanders
- [Resources](#) to support health care access, quality, and equity

Asian Mental Health Collective

- [Education and resources](#) to support mental health for Asian, Pacific Islander, and South Asian American (APISAA) youth and adults
- [Provider directory](#) for APISAA therapists

Asians Do Therapy

- Organization dedicated to reducing [stigma and increasing accessibility](#) to mental health resources for the Asian community
- [Step-by-step guide](#) to accessing therapy for the first time

Big Brothers Big Sisters of America

- [Community-based](#) and [school-based](#) mentoring programs for youth
- [Mentoring Brothers in Action](#): Mentoring program for Black boys, sponsored as a partnership between Big Brothers Big Sisters and the nation's 3 largest African American fraternities: Alpha Phi Alpha, Kappa Alpha Psi, and Omega Psi Phi
- [Operation Bigs](#): Mentoring program for children of military families
- [Amachi Program](#): Mentoring program for children with incarcerated parents

Black Girls Smile, Inc.

- Mental health literacy [programs and resources](#) for Black girls

Black Emotional and Mental Health Collective

- [Collective](#) of advocates, yoga teachers, artists, therapists, lawyers, religious leaders, teachers, psychologists and activists committed to the emotional/mental health and healing of Black communities
- [Resources, training and programs](#) aimed to remove the barriers that Black people experience getting access to or staying connected with emotional health care and healing

Black Mental Health Alliance

- [Programs and resources](#) to support health and well-being of Black people and communities
- [National directory](#) of Black Psychiatrists of America

The Boris Lawrence Henson Foundation

- [Organization](#) dedicated to eradicating the stigma around mental health in the African American community
- [Directory](#) of mental health providers and programs
- [Programs and services](#) to support mental health

Center for Native American Youth

- National [education and advocacy](#) organization that works to improve the safety, health, and well-being of Native American youth by building direct partnerships with Native youth ages 24 & under

Children's Safety Network

- [Change package, factsheets, and resources](#) related to prevention of suicide and self-harm

The Dougy Center

- [Resources](#) for youth and families who are grieving a suicide loss or other death

DBT In Schools

- Dialectical Behavior Therapy (DBT) is a clinical therapy that has strong evidence for reducing suicide risk
- DBT In Schools has adapted the concepts & skills into a [school-based curriculum format](#)

Erika's Lighthouse

- [Grades 4-12 Classroom Education Programs](#)

Family Acceptance Project

- Resources, education and evidence-based [posters](#) that show how family accepting and rejecting behaviors contribute to risk and well-being for youth who identify as LGBTQ and gender diverse

GLSEN

- [Resources](#) to support safe and inclusive schools for youth who identify as LGBTQ2S+

Inclusive Therapists

- [Mental health community](#) committed to:
 - Justice & equity for all intersectional identities
 - Culturally affirming & responsive client care
 - Centering the needs of marginalized, underserved populations
 - Celebrating all identities and abilities in all bodies
 - Decolonizing & destigmatizing mental healthcare
 - Dismantling systemic oppression & white supremacy in mental healthcare
- [Therapist directory](#) and [resources](#)

Healthy Native Youth

- Health promotion [curriculum and resources](#) for health educators, teachers, and parents working to support American Indian/Alaska Native youth

Jason Foundation

- [Resources and educational materials](#) for youth, parents, educators, and community members to advance youth suicide prevention initiatives

JED Foundation

- Jed Foundation [school-based suicide prevention programming](#)
- [Jed Campus Initiative](#)
- [Jed High School Initiative](#)

Lee Thompson Young Foundation

- Organization aimed to erase stigma associated with mental illness
- [Mental health education for](#) African American communities.

Life is Precious

- [Programs and resources](#) to support Latina teens at risk of suicide
- Individual and group counseling, creative arts therapy, academic support, music, nutrition & wellness activities, and family services

Loveland Foundation

- Organization providing [financial assistance](#) to Black women and girls seeking therapy nationally

MANA, A National Latina Organization® (MANA)

- National grassroots [organization](#) representing the interests of Latina women, youth and families
- [Programs](#) to support Latina adolescents in education, skill-building, development, mentorship, and peer-support

Melanin & Mental Health®

- [Organization](#) that connects individuals with culturally competent clinicians committed to serving the mental health needs of Black & Latinx/Hispanic communities
- [Therapist directory](#)
- [Between sessions](#) podcast
- [Resources](#) to support mental health

Mental Health America

- [Education and outreach to promote mental health](#)

Mental Health First Aid

- [Skill-based training in responding to signs of mental health symptoms and substance use](#)

Mental Health Technology Transfer Center Network

- Mental health resources for [schools and educators](#)
- Resources for supporting Indigenous youth in a holistic manner: [Strengthening Resilience: Promoting Positive Mental Health Among Indigenous Youth](#)

National Action Alliance for Suicide Prevention

- Resources and support to advance suicide prevention initiatives in:
 - [Faith communities](#)
 - [American Indian/Alaska Native populations](#)
 - Youth involved in the [juvenile justice system](#)
 - [Athletes and sports organizations](#)

National Alliance for Children's Grief

- [Education and resources](#) for professionals working with children grieving a death or suicide loss

National Alliance for Hispanic Health

- [Organization](#) working to ensure that health incorporates the best of science, culture, and community
- [Resources](#) and programs to support overall health and wellbeing

National Alliance for Mental Illness

- [NAMI Family Support Groups](#): peer-led support groups for adults with loved ones experiencing mental health symptoms
- [NAMI Family-to-Family Classes](#): free, 8-session educational program for families and loved ones of people with mental health conditions
- Content and resources:
 - [Youth and young adults](#)
 - [Black/African American populations](#)
 - [Hispanic/Latinx populations](#)
 - [Indigenous populations](#)
 - [LGBTQ+ populations](#)
 - [People with disabilities](#)

National American Indian and Alaska Native Mental Health Technology Transfer Center Network

- [Resources](#) to support the mental health of American Indian and Alaska Native populations
- [Resource guide](#) for mental health providers during COVID-19
- School mental health [resources](#)
- [Resources](#) to promote racial equity and cultural diversity

National Asian American Pacific Islander Mental Health Association

- [Programs and resources](#) to support mental health in Asian American and Pacific Islander communities
- [Provider directory](#) for mental and behavioral health services for Asian American, Native Hawaiian, and Pacific Islander populations

National Center for the Prevention of Youth Suicide

- [National center](#) with the goal of reducing the rate of youth suicide attempts and deaths
- [Education and programs](#) to identify and address risk factors and support youth at risk of suicide

National Center for School Mental Health

- [National center](#) with the goal of strengthening school policies and programs for America's youth

National Latino Behavioral Health Association (NLBHA)

- [Organization](#) serving as a unified national voice for Latino populations in the behavioral health arena
- [Behavioral Health Interpreter Training](#)
- [Programs](#) to support behavioral health

National Organization of People of Color Against Suicide

- Resources and [support groups](#) to support youth and families with lived experience of suicide

National Queer Asian Pacific Islander Alliance

- [Provider directory](#) for healers and therapists of Asian and Pacific Islander descent

National Queer and Trans Therapist of Color (QTPOC) Network

- [Resources](#) and [provider directory](#) of QTPOC mental health practitioners

Not Ok App

- [Smartphone application](#) that serves as a pre-crisis tool to help users tell their friends or family when they're "not okay." Users can press a button in the app to immediately send a text to their trusted contacts if they are struggling with their mental health. The app also provides breathing exercises and links to crisis lines

Omega Psi Phi Fraternity, Inc

- [Brother, You're on My Mind](#): Changing the National Dialogue Regarding Mental Health Among African American Men
- [Initiative](#) and [toolkit](#) to help start conversations about mental health
- Partnership with National Institute on Minority Health and Health Disparities

SanaMente/Each Mind Matters

- Spanish-language mental health [resources](#) serving residents of the state of California

Society for Prevention of Teen Suicide

- [Resources for educators, teens, parents, and clinicians](#)

South Asian Mental Health Alliance

- Non-profit [community network](#) to support mental health in South Asian communities

The Steve Fund

- [Organization](#) dedicated to supporting the mental health and emotional wellbeing of youth of color
- [Programs](#) and [resources](#) to support mental health
- Text STEVE to 741-741 for mental health support tailored for youth from communities of color

Subtle Asian Mental Health

- Facebook [group](#) that describes itself as a place for people to talk about mental health issues without judgment

Suicide Awareness Voices of Education

- [Education, training, and resources](#) to raise awareness and prevent suicide

Suicide Prevention Resource Center (SPRC)

- [All SPRC Youth Resources](#)
- [SPRC School Resources for Youth Suicide Prevention](#)

The Trevor Project

- [Programs and Resources for LGBTQ Youth Suicide Prevention](#)

Therapy for Black Girls

- [Resources](#) and [therapist directory](#) for Black women seeking mental health support
- Online space dedicated to encouraging the mental wellness of Black women and girls

Therapy for Black Men

- [Resources](#) and [therapist directory](#) for Black men seeking mental health support

Therapy for Latinx

- [Resources](#) and [therapist directory](#) for Latinx populations seeking mental health support

U.S. Department of Health and Human Services Office of Minority Health

- [Federal agency](#) dedicated to improving the health of racial and ethnic minority populations
- [Resources and information](#) about improving access to mental health care and treatment

We R Native

- [Multimedia health resource](#) created by and for Native American youth and young adults
- [Resources](#) to build mental resilience, address mental health challenges, and access mental health services
- Text-messaging service to promote mental health and well being

Youth Aware of Mental Health Program

- School-based [program](#) that uses dialogue and role-play to address the risk and protective factors associated with suicide

Zero Suicide

- Quality improvement model for [health system suicide prevention initiatives](#)

Zero Suicide in Indian Country

- [Toolkit](#) from Zero Suicide to guide the implementation of Zero Suicide in Indian Country
- Includes forms, tools, and videos others have used in their own implementation

50 Free Anti-Racism and Mental Health Resources

- [Compendium](#) of mental health resources for Asian American and Pacific Islander communities
- Supported by the Fu Foundation School of Engineering and Applied Science at Columbia University