Efficacy of suicide prevention programs for children and youth
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Record Status
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Citation

Authors' objectives
This report aims to assess the evidence on the efficacy/effectiveness of current suicide prevention programs for children and youth.

Authors' conclusions
The suicide prevention programs varied considerably in content, frequency, duration, and delivery making it difficult to draw general conclusions across studies. The programs objectives varied as well and even comparison of programs with similar objectives was not possible because of the dissimilarities within the programs themselves. Few primary studies on the efficacy/effectiveness of suicide prevention programs for children and youth were rated high for methodological quality in terms of their study design, control of confounding factors and testing of validity and reliability of the outcome measurement tools. Two studies using similar approaches for risk stratification provided consistent and encouraging evidence on the effects of the prevention programs in youth at high risk. These studies indicated significant changes in depression, hopelessness, stress, anxiety and anger within the groups. One of studies found an increase in self-esteem and networks support. One study on suicide prevention awareness programs for the general population of students indicated a significant improvement in knowledge and attitude. Two studies evaluated changes in behavioural and coping strategies in the general population. One study noted lowered suicidal tendencies, improved ego identity, and coping ability with a greater effect in females. The other study identified a reduction in suicide risk, such as improved awareness of distress-coping skill, and other positive changes. Two studies published before 1991 indicated that harm may result when students attend a suicide prevention program. All of the primary studies since 1991, except for one, either failed to evaluate the program for harmful effects or showed that no harmful effects were found. The potential for harmful effects indicated in the one study were not verified in a follow up study. Most often the significant finding of change due to the prevention programs were within the groups (pre/post changes) rather than significant differences between the control and experimental groups. Thus, the overall findings of this review suggest that there is insufficient evidence to either support or not to support curriculum-based suicide prevention programs in schools. The generalizability of the results from these studies to the Alberta context is at question since most of the studies were conducted in the United States and their school demographics appear to be different from those in Canada.

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