

Adolescent Health Tribal Action Plan Supplement – Suicide Prevention

In order to better understand the capacity of the Northwest Tribes to prevent and treat suicide, the NPAIHB administered a comprehensive assessment modeled after the *Community Readiness Model* (developed by the Center for Applied Studies in American Ethnicity - CA7AE). The model was tailored by the NW Tribal EpiCenter to include locally-relevant indicators of suicide capacity, and to assess community readiness at the regional level, rather than for individual tribes. While each of the participating tribes reported varying levels of capacity around suicide prevention and treatment, the data were aggregated to determine regional readiness.

In 2008, the capacity assessment was completed by 25 people representing 11 NW tribes and 7 partnering agencies. In 2013, the assessment was completed by 30 people representing 14 NW tribes. Respondents represented a variety of perspectives, including tribal clinics, tribal health departments, community health educators and CHRs, tribal council members, tribal treatment programs, clinic staff, youth program representatives, and other health advocates interested in suicide prevention and treatment.



NW Tribal Suicide Prevention Community Readiness Assessment 2013

Community Readiness Domain	Regional Suicide Readiness 2013
Regional Suicide Prevention and Treatment Efforts	Preplanning (4)
Community Knowledge about local and regional Suicide Prevention and Treatment Services	Preplanning (4)
Leadership	Vague Awareness (3)
Community Climate	Vague Awareness (3)
Community Knowledge about Suicide	Preplanning (4)
*Resources Related to Suicide Prevention and Treatment (staff, funds, space, etc.)	Preplanning (4)

The results of the 2013 Tribal Suicide Prevention Capacity Assessment were tabulated and reviewed by staff at the NPAIHB, and then shared with members of the NPAIHB’s Behavioral Health committee. When asked about what can be improved for regional AI/AN suicide prevention and treatment services, respondents noted the following:

- Funding
- Time
- Confidentiality
- Advertising the suicide prevention programs that do exist
- Community involvement
- Stronger programs needed i.e. CRT and local Crisis Hotline
- Culturally appropriate suicide prevention programs and services
- Community members knowing how to access services
- Resources for treatment

Many of the suggestions offered by respondents were included in the Adolescent Health Tribal Action Plan, outlined below. These steps can be used by program managers or public health professionals, as well as by tribal leaders and policy-makers as they set the agenda for improving their community's health. These recommendations will also guide efforts at the NPAIHB by THRIVE and We R Native, by tailoring health promotion strategies in response to identified needs.

Improvement	2014 NW Adolescent Health Tribal Action Plan
Time and Funding	<p>Goal 1. Increase the capacity of Tribal health programs to improve adolescent health using culturally-appropriate policies, programs, and services.</p> <p>Goal 3. Improve intertribal and interagency communication, coordination, and collaboration across sectors to promote adolescent health.</p>
Advertise existing suicide prevention programs	<p>Goal 1. Strategy 2. Identify and disseminate information about effective, culturally-appropriate adolescent health policies, programs, and services using email, listservs, the www.npaihb.org website, webinars, articles, factsheets, and regional trainings and meetings. Include information on effective prevention strategies, screening tools, treatment options, policy templates, funding opportunities, and related resources.</p> <p>Goal 3. Strategy 4 Maintain a regional listserv to disseminate information about available trainings, funding opportunities, prevention or treatment resources, curricula, interventions, model programs, and tribal successes.</p>
Community Involvement	<p>Goal 1. Increase the capacity of Tribal health programs to improve adolescent health using culturally-appropriate policies, programs, and services.</p> <p>Goal 2. Empower AI/AN adolescents and young adults in the Pacific Northwest to realize their full potential for health and development. Provide them with the support and resources they need to take an active role in their own health and wellbeing.</p> <p>Goal 3. Improve intertribal and interagency communication, coordination, and collaboration across sectors to promote adolescent health</p>
Stronger programs needed i.e. CRT and local Crisis Hotline	<p>Goal 1. Strategy 2. Identify and disseminate information about effective, culturally-appropriate adolescent health policies, programs, and services using email, listservs, the www.npaihb.org website, webinars, articles, factsheets, and regional trainings and meetings. Include information on effective prevention strategies, screening tools, treatment options, policy templates, funding opportunities, and related resources. Strategy 3. When culturally-appropriate tools or interventions are not available, develop, adapt and evaluate new adolescent health interventions designed specifically for AI/AN youth in the Pacific Northwest.</p>

Improvement	2014 NW Adolescent Health Tribal Action Plan
Culturally appropriate suicide prevention programs and services	<p>Goal 1. Strategy 2. Identify and disseminate information about effective, culturally-appropriate adolescent health policies, programs, and services using email, listservs, the www.npaihb.org website, webinars, articles, factsheets, and regional trainings and meetings. Include information on effective prevention strategies, screening tools, treatment options, policy templates, funding opportunities, and related resources. Strategy 3. When culturally-appropriate tools or interventions are not available, develop, adapt and evaluate new adolescent health interventions designed specifically for AI/AN youth in the Pacific Northwest.</p>
Community members knowing how to access services	<p>Goal 2. Strategy 4. Connect AI/AN adolescents and young adults to affordable health and mental health services that are youth-specific and culturally-appropriate. Increase awareness among AI/AN adolescents and their families about how to access available health services.</p> <p>Goal 3. Improve intertribal and interagency communication, coordination, and collaboration across sectors to promote adolescent health.</p>
Resources for treatment	<p>Goal 2. Strategy 4. Connect AI/AN adolescents and young adults to affordable health and mental health services that are youth-specific and culturally-appropriate. Increase awareness among AI/AN adolescents and their families about how to access available health services.</p> <p>Goal 3. Improve intertribal and interagency communication, coordination, and collaboration across sectors to promote adolescent health.</p>