Where Are Potential Screening Sites?

Most screening programs take place in schools because they offer easy access to large numbers of youth. Other potential sites include residential treatment centers, mental health clinics, shelters, and pediatricians' offices.

An Easy, Cost-Effective Method

The Columbia TeenScreen® Program was developed at Columbia University's Division of Child and Adolescent Psychiatry. It has been rigorously researched and evaluated for more than ten years and successfully implemented across the county.

Research conducted on the screening program reveals that it is effective in identifying youth at risk. Specific advantages and impacts of the program are that:

- most depressed and suicidal teens are indeed identified by the screening[9];
- the great majority of those identified are not known by school personnel to have a significant emotional problem[7]; and
- the value of high-school screening in identifying depressed and suicidal individuals extends beyond the high-school years, with screening identifying 65 percent of those who will go on to experience recurrent depression or become suicidal in young adulthood.[10]

Help from the Columbia TeenScreen® Program Staff

The staff will work with groups intensively to make every screening program a success. Through the program, groups will be provided with assistance targeted at community awareness and coalition building, pre-training consultation, on-site training, Voice DISC software, post-training technical assistance, and screening and program materials.

All of the program's components, including screening software, are provided free of charge at this time.

For More Information

Please contact the Columbia TeenScreen® Program by telephone toll free at 1-866-TeenScreen (1-866-833-6727), by email at TeenScreen@childpsych.columbia.edu, or by post at 1775 Broadway, Suite 715, New York, NY 10019.

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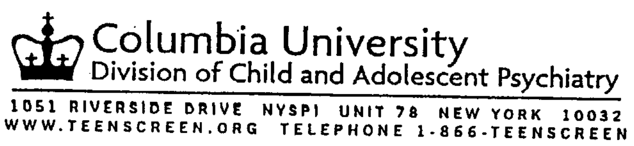

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CHILD & ADOLESCENT PSYCHIATRY AT COLUMBIA UNIVERSITY & NYSPI

Columbia TeenScreen® Program

Identifying Youth at Risk For Mental Illness and Suicide

The Problem

Unfortunately, most young people with mental illnesses suffer unnecessarily because their problems go unrecognized and untreated at a critical period of youth development.

The Columbia TeenScreen® Program focuses on the early identification of many of the most serious problems that affect youth, such as depression and anxiety. The goal of screening is not just identification, but also getting treatment for those in need and preventing suicide—the third leading cause of death for fifteen- to nineteen-year-old American teens.[1]

A National Effort Is Now Underway ...

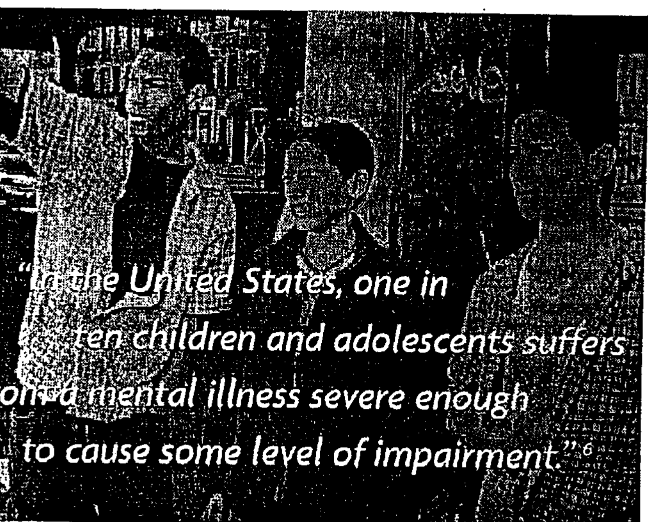
A national initiative to establish the Columbia TeenScreen® Program in communities around the country was begun in 1999. Groups and organizations are invited to join Columbia University and the sixty-plus community partners that are already implementing the Columbia TeenScreen® Program in efforts to combat teen suicide and unidentified mental illness. Our goal is to have every teen in the United States screened for undetected mental illness.

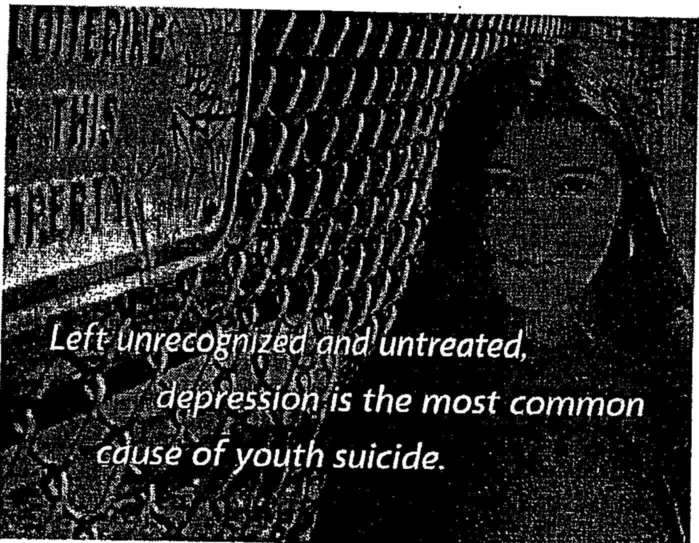
Suicidal Behavior

Teen suicide is a public health crisis. Among American high-school students, 19 percent think about killing themselves, and 9 percent make a suicide attempt.[2] Recent research has revealed that only 36 percent of youth at risk for suicide receive treatment or help for their problems.[3]

Screening Can Identify At-Risk Teens

Research has shown that an average of 90 percent of teenagers who commit suicide suffer from a treatable mental illness.[4,5] Screening teenagers can identify these conditions.





The Risks of Undetected Depression

It is estimated that 830,000 thirteen- to nineteen-year-olds (3 percent) suffer from clinical depression[7] and that a mere 30 percent of those who have resulting impairment received mental health treatment within the last year.[8]

Depression is a condition that usually starts in the teen years and can persist for the remainder of a person's life. Unfortunately, the diagnosis is often missed in adolescence. Consequences in the critical teen years can be lost opportunities for a teen who misses important parts of his/her education, relationships that suffer with family and peers, increased risk for self-medication with drugs and alcohol, school drop-out, and—worst of all—suicide.

How the Screening Program Works

The TeenScreen® Program consists of a five-step process to identify at-risk teens. **Step One** involves obtaining parental consent for screening. Only youth whose parents have agreed are screened. **Step Two** involves completing a brief self-report questionnaire that identifies teens at risk for suicide or depression: those with suicidal ideation, past attempts, or symptoms of depression or substance abuse.

Indications of risk lead a student to **Step Three**, a self-administered comprehensive mental health evaluation on the computerized voice version of the Diagnostic Interview Schedule for Children (Voice DISC) that confirms and provides more information about the answers given in step two. **Step Four** involves review of the DISC information by a mental health professional and a brief face-to-face interview for students who showed evidence of mental illness or suicide risk in step three.

During **Step Five**, a member of the screening staff ensures that parents are informed about the clinical opinion. Students are then referred to a local mental health professional for further evaluation and/or treatment. Ongoing efforts ensure that youth in need of services are provided with options and that needed services are utilized.

The Voice DISC

The Voice DISC is a comprehensive structured interview for nine- to seventeen-year-olds that uses DSM-IV criteria to screen for more than thirty mental disorders found in children and adolescents. The most widely used and studied psychiatric interview of its kind, it is administered via computer. The computer software enables students to hear questions through headphones while reading them on-screen. This method enables students to complete the DISC independently, regardless of their reading skills.

Benefits of the Voice DISC

Upon completion, the Voice DISC provides clinicians with information about possible psychiatric diagnoses and suicide risk. The DISC has been tested in both clinical and community populations.

The Voice DISC has many benefits:

- it provides a diagnostic profile and a list of symptoms and their severity and impact on the person's life;
- it gathers information that allows for a more-focused and - efficient assessment by the clinician; and
- it increases disclosure of suicidality and drug and alcohol abuse because it is self-administered.