



2015

# Final Thoughts

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## Repository Citation

Omar, Hatim A., "Final Thoughts" (2015). *Pediatrics Faculty Publications*. 231.

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**Final Thoughts****Notes/Citation Information**

Published in *Youth Suicide Prevention: Everybody's Business*. Hatim A. Omar, (Ed.). p. 187-188.

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## *Chapter 21*

# FINAL THOUGHTS

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## ABSTRACT

The work to establish the "Stop Youth Suicide Campaign (SYS)" has resulted in contact with many young adults. We realized that the most important thing for the kids was finding a caring person they can trust and talk to. This project has been a learning process for all involved. I learned that I can help and so can everyone else. This community and grassroots approach showed tangible results. It needs caring and dedication and most importantly desire to make a difference. It is hard work, but well worth it. Many people, including myself, are afraid of failure. I suffered every time I thought about someone who died from suicide, but found that I will suffer even more if more kids die. I found that even if I succeed some of the time, it is much better than none of the time.

## INTRODUCTION

Since we started the Stop Youth Suicide Campaign (SYS) in October 2000, I have witnessed a radical change in the state of Kentucky. We now have statewide programs; we have changed laws and became the first state to require training of all school personnel on suicide prevention.

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We have witnessed for the 1st time a drop of youth suicide rates below the national average according to the 2013 Youth Risk Behavior Surveillance done biannually by the Center for Disease Control.

## **LEARNING PROCESS**

Most importantly, I have learned a few things:

- We will never completely eliminate youth suicide
- We can reduce both completed and attempted youth suicide
- Mental health treatment plays a significant role in suicide prevention, but it is not a primary prevention in many cases.
- The health care system needs to eliminate the discrepancy between medical and mental. We are dealing with an individual as a whole and separating mental from medical does more harm than good.
- Teens who feel alone, hopeless and desperate need to have someone they can turn to, but they feel they do not. To change that we need to educate parents, school teachers and personnel, religious leaders and athletic coaches as well as health care providers to use every encounter with teens to tell them whom they can talk to.
- Organizations such as the American Academy of Pediatrics, Society for Adolescent Health and Medicine (SAHM) and many others need to make youth suicide a focal point of their conferences every year. Just as an example, SAHM which is supposed to be the leader in teen health has not dedicated a plenary on teen suicide for years and very few workshops, and that is unacceptable.
- Most importantly I learned that I can help and so can everyone else. Our work in Kentucky utilizing the entire community, grassroots approach, showed tangible results. It needs caring and dedication and most importantly desire to make a difference. It is hard work, but well worth it. Many people, including me, are afraid of failure. I suffered every time I thought about someone who died from suicide, but found that I will suffer more if more kids die. I found that even if I succeed some of the time, it is much better than none of the time.

Youth suicide prevention is duable and should be everybody's business.