



Suicide Prevention Community Assessment Tool¹

This tool is intended for you to complete with your Prevention Network. Prevention Networks are coalitions of change-oriented organizations and individuals working together to promote suicide prevention. Prevention networks might include statewide coalitions, community task forces, regional alliances, or professional groups. Prevention networks may be organized at the national, state, regional, tribal, or local level.

SECTION A: General Information

For this section of the assessment tool, complete a “General Information” segment for each city, town or county your prevention network planned to address in its proposal for purposes of this project. Please list the data source(s) utilized to answer each question.

1. Name of City/Town/County:
2. Population for City/Town/County according to 2000 census:
3. Median household income for City/Town/County:
4. Racial/Ethnic breakdown of population within City/Town/County:
5. Unemployment rate:
6. Percentage of population receiving medical and/or mental health services enrolled in a public or private health insurance plan:

¹This tool is adapted from the Community Assessment Tool developed by the Suicide Prevention Program at the Massachusetts Department of Public Health.



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7. Percentage and number of the following age groups in City/Town/County:

- Children/Youth (0–19 years) _____
- Adults (20-44 years) _____
- Adults (45-64 years) _____
- Seniors (65-84 years) _____
- Seniors (85 and over) _____

8. School dropout rate within City/Town/County:

9. Presence of public transportation within City/Town/County:
_____ Yes _____ No or Other (please state): _____

10. Number of registered voters:

11. List the Refugee and Immigrant communities in the City/Town/County:

Group: _____ Population size: _____
Group: _____ Population size: _____

12. Primary languages spoken in the City/Town/County:

13. List all medical care service providers (i.e. hospitals, health care centers, medical centers) in the City/Town/County:

14. List all mental health service providers (i.e. hospitals with psychiatric units, mental health clinics) in the City/Town/County:

15. Local media which reach your City/Town/County (Please include newspapers, cable television etc):



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16. State number and type of organizations that serve:

- (a) Pre-kindergarten children
- (b) New families
- (c) Youth
- (d) Homeless people/families
- (e) Seniors
- (f) Non-English speaking people
- (g) Victims of domestic violence



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SECTION C: Information about Target Populations

For this section of the assessment tool, please complete a Target Population Information segment for each target population located within each city, town or county your prevention network plans to address. Please include the data source utilized to answer each question.

Population Demographics

1. Population for target group according to 2000 census:
2. Racial breakdown of target group:
3. Unemployment rate (if applicable):
4. Percentage of target group with private or public health insurance:
5. Type of residence (e.g. apartment complex, house) for this population within each city/town:
6. Languages spoken by this population:
7. Estimate of suicides (attempts or completed) among this population in past year:
8. Medical care services most frequently used by this population:
9. Mental health services most frequently used by this population:
10. List any or all suicide prevention services/activities/programs/plans presently taking place within the target population's community :



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SECTION D: Community Suicide Risk Factors and Prevention Resources

For this section of the assessment tool, complete a Suicide Risk Factor and Prevention Resource section for each city, town or county your prevention network plans to address. Please describe the method and justification used for each response given within each category.

Consider risk factors for suicide and resources for suicide prevention for your target population in each of your designated cities/towns. Classify the resources by their level of prevention, as outlined below and identify the connection between risk factors and the resources. You may consider circumstances surrounding recent suicides in your target population to identify population-based risk factors. Also, consider how protective factors can be strengthened in individuals and populations to counteract the prevalent risk factors.

Example:

Risk Factor:

Isolation of elders.

Resource/Asset:

A drop-in center for elders to come and talk to other people.

Limitation:

No easy access (i.e. transportation) to the drop-in center.

What can be done:

Identify existing resources within the community to provide transportation to the drop-in center or encourage city/town to implement a transportation service for elders.



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SECTION E: Community Assets

In each of the categories provided below, list a minimum of five assets available (if applicable) for each of the designated cities/towns. The assets indicated must be useful for suicide prevention within your target population.

1. Prevention network members' individual skills/Capacities:
2. Social, civic betterment groups:
3. Faith-based Organizations:
4. Cultural events/Organizations:
5. Local Institutions (schools/faith):
6. Personal Economic Resources:
7. Space (open and gathering space):
8. Businesses (formal and informal):



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Level of Prevention: Universal

Universal suicide prevention programs target and benefit everyone in the community irrespective of their suicide risk. Some examples include educational materials and workshops, and mental health care.

Section D: Suicide Risk Factors and Prevention Resources			
Risk Factors	Resources/Assets	Limitations/Barriers to implementation	What can be done (please list the activities or events in order of priority)



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Level of Prevention: Selective

Selective prevention programs benefit specific groups whose members have a significantly higher risk of developing suicidal behaviors, e.g. youth who are substance abusers.

Section D: Suicide Risk Factors and Prevention Resources			
Risk Factors	Resources/Asset	Limitations/Barriers to implementation	What can be done (please list the activities or events in order of priority)



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Level of Prevention: Indicated

Indicated prevention programs target and benefit identified high-risk individuals or those who already exhibit suicidal behavior, such as a recent suicide attempt or suicidal ideation.

Section D: Suicide Risk Factors and Prevention Resources			
Risk Factors	Resources/Assets	Limitations/ Barriers to implementation	What can be done (please list the activities or events in order of priority)



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Level of Prevention: Postvention

This includes all measures that would prevent further suicide attempts in the aftermath of a suicide. An example would be the creation of a survivor support group

Section D: Suicide Risk Factors and Prevention Resources			
Risk Factors	Resources/Assets	Limitations/Barriers to implementation	What can be done (please list the activities or events in order of priority)

