Health promotion strategies for adolescents in suicidal situations: scope review protocol

Estratégias de promoção da saúde para adolescentes em situação de suicídio: protocolo revisão de Escopo

Estrategias de promoción de la salud para adolescentes en situaciones de suicídio: protocolo de revisión de alcance

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RESUMO

Objetivo: Identificar estratégias de promoção da saúde para adolescentes em situação de suicídio. Método: Protocolo de revisão de escopo que incluiu todos os tipos de estudos primários, exceto os resumos de eventos, cartas, editoriais e revisões de qualquer natureza. A estratégia de busca foi realizada em três fases. Após a definição da estratégia definitiva, esta foi aplicada e adaptada na MEDLINE/Pubmed, Pubmed Central/NLM, CINAHL, ASP e Fonte Acadêmica/EBSCO; Scopus e Embase/Elsevier, Web of Science/Clarivaty Analytics, Literatura Latino-Americana e do Caribe em Ciências da Saúde (LILACS), BDENF, Coleciona SUS dentre outras da BVS, Scielo, Worldwidescience. Também foi considerado o Google Scholar. As listas de referência de todas as fontes de evidência incluídas foram avaliadas para estudos adicionais. Não houve limite de data de publicação. Seleção e extração dos dados serão realizadas por quatro revisores independentes e, em caso de discordância, um quinto revisor será consultado. Os dados serão apresentados graficamente, em forma diagramática e/ou tabular, acompanhados de resumo narrativo. Critérios de inclusão: estratégias de promoção da saúde para adolescentes em situação de suicídio, acesso a serviços de saúde adequados e intervenções comunitárias eficazes para garantir suporte contínuo, prevenção efetiva e promoção da saúde mental.

Descritores: Adolescente; Estratégias de Saúde; Promoção da Saúde; Prevenção do Suicídio; Suicídio.

ABSTRACT

Objective: Identify health promotion strategies for adolescents in suicidal situations. Method: A scoping review protocol that included all types of primary studies, except event abstracts, letters, editorials and reviews of any kind.The search strategy was carried out in three phases.Once the definitive strategy had been defined, it was applied and adapted to MEDLINE/Pubmed, Pubmed Central/NLM, CINAHL, ASP and Academic Source/EBSCO; Scopus and Embase/Elsevier, Web of Science/Clarivaty Analytics, Latin American and Caribbean Literature in Health Sciences (LILACS), BDENF, Coleciona SUS among others from the VHL, Scielo, Worldwidescience. Google Scholar was also considered. The reference lists of all the sources of evidence included were evaluated for additional studies. There was no publication date limit. Data selection and extraction will be carried out by four independent reviewers and in case of disagreement a fifth reviewer will be consulted. The data will be presented graphically, in diagrammatic and/or tabular form, accompanied by a narrative summary. Inclusion criteria: Health promotion strategies for adolescents experiencing suicide, access to appropriate health services and effective community interventions to ensure ongoing support, effective prevention and promotion of mental health.

Descriptors: Adolescent; Health Strategies; Health Promotion; Suicide Prevention; Suicide.

RESUMEN

Objetivo: Identificar estrategias de promoción de la salud para adolescentes en situación de suicidio. Método: Protocolo de revisión de alcance que incluyó todos los tipos de estudios primarios, excepto resúmenes de eventos, cartas, editoriales y revisiones de cualquier naturaleza. La estrategia de búsqueda se llevó a cabo en tres fases. Tras la definición de la estrategia definitiva, esta se aplicó y adaptó en MEDLINE/Pubmed, Pubmed Central/NLM, CINAHL, ASP y Fuente Académica/EBSCO; Scopus y Embase/Elsevier, Web of Science/Clarivate Analytics, Literatura Latinoamericana y del Caribe en Ciencias de la Salud (LILACS), BDENF, Colecciona SUS entre otros de BVS, Scielo, Worldwidescience. También se consideró Google Scholar. Las listas de referencia de todas las fuentes de evidencia incluidas fueron evaluadas para estudios adicionales. No hubo límite de fecha de publicación. La selección y extracción de los datos serán realizadas por cuatro revisores independientes y en caso de desacuerdo se consultará a un quinto revisor. Los datos se presentarán gráficamente, en forma diagramática y/o tabular, acompañados de un resumen narrativo. Criterios de inclusión: Estrategias de promoción de la salud para adolescentes en situación de suicidio, acceso a servicios de salud adecuados e intervenciones comunitarias eficaces para garantizar apoyo continuo, prevención efectiva y promoción de la salud mental.

Descriptores: Adolescente; Estrategias de Salud; Promoción de la Salud; Prevención del Suicidio; Suicidio.

Introduction

With the Brazilian Psychiatric Reform, the principles of the Unified Health System (SUS), and Law 10.216/01, mental health care has become possible at any level of care, in an inclusive and community-based manner.[1] This scenario favored the creation of a therapeutic relationship between health professionals, especially nurses, and individuals in psychological distress. Such a relationship becomes fundamental for collaborative, comprehensive, and respectful care aimed at meeting basic human needs.[2]

Currently, the care provided within psychosocial care opposes the former hospital-centered model. This "new" model considers the territory in which individuals live and circulate, promoting rehabilitation and social reintegration.[3] It also includes a restructuring of assistance through welcoming practices, intersectoral collaboration, and the building of bonds. These elements aim to promote co-responsibility and autonomy of people with mental disorders.[4–5]

Researchers also highlight the challenge of delivering quality mental health care. It is necessary, however, to discuss ways of addressing these challenges by reflecting on the demands that reach health services.[4–6]

Among those who access health services, adolescents stand out, as they have been showing a worsening of mental health indicators,[7] with a significant increase in mortality due to suicide, which, from the age of 15 onwards, has become the second leading cause of death worldwide.[8–9]

A study using data from 2011 to 2022[10] showed an increase in suicide rates across all regions of Brazil, with a notable rise of 6.14% among the population aged 10 to 24 years. Between 2000 and 2019, the Americas experienced a 17% increase in suicide cases, while in Brazil, the number of cases rose by 43%.[11]

Adolescent suicide is associated with multiple factors, such as mental disorders, family problems, violence, bullying, social exclusion, substance use, history of self-harm, socioeconomic and cultural issues, and those involving technology—screens and social media—which are deeply embedded in adolescents' daily lives and often negatively affect society as a whole.[9 12]

In this context, studies highlight the importance of suicide prevention strategies among adolescents for more effective management of this issue.[9 13] The World Health Organization (WHO)[14] has called on countries to implement the Comprehensive Mental Health Action Plan 2013–2030, which establishes not only mental health prevention strategies but also health promotion measures aimed at reducing suicide rates.[15]

The Comprehensive Mental Health Action Plan 2013–2030 highlights, as one of its fundamental principles, the empowerment of people at risk. Among its proposed actions is the implementation of multisectoral programs for the promotion and prevention of mental health, to be operational by 2030.[14] The plan emphasizes social determinants as a target to improve quality of life and reduce inequalities.[16]

Therefore, in building care strategies, it is essential to include not only prevention but also health promotion at all levels of care, broadening support and fostering adolescents' autonomy when facing suicidal situations.

With this in mind, a mapping of scientific production related to health promotion strategies for adolescents in suicidal situations was considered. Thus,

the objective of this scoping review is to identify health promotion strategies for adolescents at risk of suicide.

A preliminary search in MEDLINE/PubMed, the Cochrane Database of Systematic Reviews, the Regional Portal of the Virtual Health Library (VHL), PROSPERO, and JBI Evidence Synthesis was conducted. Two review protocols were identified, one aiming to identify intersectoral care strategies for adolescents with suicidal behavior and self-harm, and the other to identify interventions to prevent or manage suicide and self-harm in educational settings.

Although related to the theme, these reviews did not address the specific focus of this proposal. Therefore, no current or ongoing reviews specifically addressing this topic were identified during the preliminary search, which justifies the relevance of the present study. Furthermore, the availability of primary studies ensures the feasibility of this review. The guiding research question is: What are the health promotion strategies for adolescents at risk of suicide?

Method

This protocol for a scoping review will be conducted according to the JBI methodology and registered with the OSF. The review will be reported following the guidelines of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR).[17] Any protocol modifications will be reported and justified in the appropriate section of the scoping review methods.

For this review, the inclusion criteria were defined as adolescents aged 10 to 19 years, in line with the WHO definition,[18] which designates this age range as corresponding to adolescence. This definition allows the study to align with international standards and ensures conceptual consistency in the analysis of situations related to suicide risk in this population.

The World Health Organization[14] highlights suicide as a serious public health issue that requires a coordinated response. With timely, evidence-based, and low-cost interventions, it is possible to significantly reduce the occurrence of suicides. Although many occurrences are impulsive, suicidal behavior is strongly associated with disasters, conflicts, violence, abuse or loss, and feelings of isolation. The WHO establishes effective evidence-based interventions, including early identification, assessment, management, and follow-up of individuals affected by suicidal behavior.[14] Therefore, studies addressing health promotion strategies for adolescents at risk of suicide will be included.

The Ottawa Charter defines health promotion as the "process of enabling people to increase control over, and to improve, their health, including participation in this process."[19–21]

Studies included in this review may be conducted in any setting that provides mental health services at any level of care. Other health services will also be considered, given the age range of the participants, although not limited to these.

This scoping review will consider experimental and quasi-experimental study designs, including randomized controlled trials, non-randomized

controlled trials, before-and-after studies, and interrupted time-series studies. Analytical observational studies, such as prospective and retrospective cohort studies, case-control studies, and analytical cross-sectional studies, will also be included. Descriptive observational studies, such as case series, individual case reports, and descriptive cross-sectional studies, will be considered as well. In addition, qualitative studies, such as phenomenology, grounded theory, ethnography, qualitative description, and action research, will be included. Texts, opinion articles, dissertations, and theses will also be considered for inclusion in this scoping review. However, systematic, scoping, and integrative reviews, as well as conference abstracts, letters, and editorials, will be excluded.

Databases and Search Strategy

The search strategy will be conducted in three stages to identify published and unpublished studies. The preliminary search was initially performed using Health Sciences Descriptors (DeCS), Medical Subject Headings (MeSH), and Embase subject headings (Emtree), combined with Boolean operators OR and AND in MEDLINE/PubMed, OSF, PROSPERO, JBI Synthesis, and the Cochrane Library. The objectives were to identify protocols, reviews, and primary articles, as well as new keywords and indexing terms for a comprehensive strategy.

In the second stage, the identified terms will form a final search strategy (Table 1), to be adapted across the databases and information sources defined for this review, namely: MEDLINE/PubMed, PubMed Central/NLM, Cumulative Index to Nursing and Allied Health Literature (CINAHL), Academic Search Premier and Fonte Acadêmica (EBSCO), Scopus, Embase, Educational Resources Information Centre (ERIC), Latin American and Caribbean Health Sciences Literature (LILACS), Nursing Database (BDENF), Index Psychology – Journals of the Regional Portal of the Virtual Health Library (VHL), and Scientific Electronic Library Online (SciELO). Google Scholar and other sources of gray literature, such as World Wide Science.org, will also be considered. No language or time restrictions will be applied.

In the third stage, the reference lists of all included articles will be manually searched.

Table 1 – Search strategy, conducted in January 2025.

Search	Query	Results
#1	Search: Adolescent[mh] OR Adolescence OR Adolescent* OR Teen* OR Teenager* OR Youth*	2,510,154

#2	Search: "Suicidal Ideation"[mh] OR "Suicidal Ideations" OR "Self-Injurious Behavior"[mh] OR "Deliberate Self Harm" OR "Deliberate Self-Harm" OR "Intentional Self Harm" OR "Intentional Self Injuries" OR "Intentional Self Injury" OR "Non Suicidal Self Injury" OR "Non-Suicidal Self Injuries" OR "Non-Suicidal Self Injury" OR "Nonsuicidal Self Injuries" OR "Nonsuicidal Self Injury" OR "Self Destructive Behavior" OR "Self Harm" OR "Self Injurious Behavior" OR "Self Injury" OR "Self-Destructive Behavior" OR "Self-Destructive Behaviors" OR Self-Injuries OR "Self-Injurious Behaviors" OR Self-Injury OR Suicide[mh] OR Suicide* OR "Suicide Prevention"[mh] OR "Suicide Awareness" OR "Suicide Preventions"	154,689
#3	Search: "Health Promotion"[mh] OR Health Campaign*[tiab] OR Health Promotion*[tiab] OR "Health-Supportive Environments"[tiab] OR "Promotion of Health"[tiab] OR Promotional Item*[tiab] OR Wellness Program*[tiab] OR "healthy people"[tiab] OR healthy people program*[tiab] OR "Health Education"[mh] OR Health Education[tiab]	707,115
#4	Search: #1 AND #2 AND #3	981

Selection of sources of evidence

After the database search, the identified references will be uploaded to EndNote 21 (Clarivate Analytics, PA, USA), and duplicates will be removed. Subsequently, the references will be exported to the Intelligent Systematic Review software (Rayyan) for selection management. Documents will be screened by title and abstract according to the inclusion criteria, the process will be conducted by two or more independent reviewers and preceded by a pilot test. After screening, relevant sources will be retrieved and assessed in full text by four reviewers, and decisions will be recorded in Rayyan.

Reasons for excluding full-text sources of evidence that do not meet the inclusion criteria will be documented and reported in the scoping review. Any disagreements arising between reviewers at each stage of the selection process will be resolved through discussion, consensus, and/or consultation with additional reviewers. The results of the search and study inclusion process will be fully reported in the final scoping review and presented in a flow diagram according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews (PRISMA-ScR) (Tricco, 2018).

Data extraction

Data will be extracted from the included articles by two or more independent reviewers using a data extraction tool (Table 2) developed by the reviewers. This tool will undergo a pilot test for reviewer training and,

throughout the process, may be modified, with such changes described in the final version. Extracted data will include specific details on study characteristics (citation, year, country, objective, study design, sample, gender, among others), Participants, Concept, Context (PCC), study methods, and main findings relevant to the review question.
The preliminary version of the data extraction tool will be modified and refined as necessary during the extraction process for each included source of evidence. All modifications will be reported in the scoping review. If applicable, article authors will be contacted to request missing or additional data, when necessary.

Table 2 – Data extraction instrument

Title of the scoping review
Health promotion strategies for adolescents at risk of suicide: scoping review protocol
Objectives of the review
To map health promotion strategies for adolescents at risk of suicide.
Review questions
What are the health promotion strategies for adolescents at risk of suicide?
Inclusion/exclusion criteria
Participants – adolescents (10 to 19 years old)
Concept – Health promotion strategies, suicide
Context – Mental health services
Details and characteristics of the included study
Citation details (e.g., author(s), year, title, journal, volume, issue, pages)
Country of origin
Methodology/methods/type of study
Aim/Purpose
Population
Study population details (age/sex and sample)
Concept
Description of the health promotion strategy
Type of strategy
Health professional/healthcare team
Role of the health professional
Context
Healthcare setting
Level of care

Data analysis and presentation

The evidence directly addressing the objective of the review will be analyzed and presented through a narrative summary, which will describe how the results relate to the review question. In addition, the data will be presented in tables, charts, and diagrams to facilitate understanding.

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