



UPSTATE
FOUNDATION

CAMPAIGN FOR CHILD & ADOLESCENT Mental Health



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Suicide Prevention **Psychiatry High Risk Program at Upstate Medical University**

“Stuck alone with overwhelming pain”

Suicide is a growing concern. Suicide in youth and young adults has risen by 50 percent from 2007 to 2018, and emergency department visits for suicide attempts more than doubled during the same time period. Upstate Medical University is addressing this issue through its Psychiatry High Risk Program (PHRP), an innovative, recovery-based suicide prevention program.

Developed in 2017 by Upstate psychiatrist Dr. Robert Gregory, PHRP provides comprehensive treatment for youth and young adults ages 14 through 40 who are at high risk for suicide; those who Dr. Gregory describe as “stuck alone with overwhelming pain.” PHRP tries to break the downward spiral of recurrent hospitalizations, crisis management and chronic illness by addressing underlying vulnerabilities and providing transformative healing leading to recovery. PHRP has grown by 50 percent per year since its inception; 151 individuals entered the program in 2021. The program’s effectiveness at reducing suicide risk and hospitalizations has attracted national attention and advance publication in the most prestigious journal of public psychiatry.

The core required treatment is weekly psychotherapy with dynamic deconstructive psychotherapy (DDP), an evidence-based treatment that builds resilience by strengthening an individual’s ability to adaptively process emotion-laden experiences, reconcile their source of pain, and develop the capacity for authentic relationships.

In addition to weekly individual psychotherapy with DDP, participants entering the program are also offered family therapy, group therapy and psychiatric medication management as indicated. This comprehensive treatment model is provided by a multidisciplinary team that includes child psychiatrists, nurse practitioner, child psychologist and clinical social workers. The program has been effective for a broad range of conditions, including chronic depression, anxiety disorders, PTSD, borderline personality disorder, eating disorders and addictions.

Community outreach is also an innovative aspect of PHRP, facilitating transitions in care from inpatient and emergency services at Upstate. Team members also provide presentations to community agencies such as CONTACT, and regional psychiatric hospitals and emergency departments.



Rigorous quality assurance is incorporated into the program. Program participants are provided free baseline psychological testing and standardized outcome assessments every three months. Therapists are provided weekly peer case supervision to ensure a continued high level of care. It is Dr. Gregory’s goal that this innovative and effective model becomes a national model of suicide prevention.

CRITICAL SHORT-TERM NEEDS

The most pressing need of the Psychiatry High Risk Program is hiring a case manager to expand services and provide better transitions in care. The program currently has to turn away some children whose families require high case management needs for transportation, financial assistance, housing, or coordination of care with school services or Child Protective Services. The program could also use grant support for other needs, such as non-reimbursed time for clinical social workers to reach out to suicidal kids being held in the emergency department to help their transition into outpatient care.