Suicide is the second leading cause of death among adolescents globally. Data from the Youth Risk Behavior Surveillance System indicate that in the 12 months prior to distribution, 9.8% of Black youth reported a previous suicide attempt as compared to 6.1% of non-Hispanic White adolescents and 8.2% of Hispanic/Latinx youth. Despite this, there are few culturally tailored suicide risk assessments and the relevancy of suicide risk assessment instruments for Black youth has been poorly assessed. We set out to review the most popular tools in regard to assessment among Black youth.

Methods: Search was conducted using PubMed with terms focused on three concepts: suicide, tools, and youth. Initial search yielded 347 articles and the three most popular tools were identified through a combination of expert consultation and number of citations on original publication. Further evaluation of tools with racially and ethnically diverse samples was performed, yielding 11 publications. Studies were analyzed for predictive validity and reliability using sensitivity and specificity, internal consistency and test-retest reliability.

Results: Patient age spanned from 8-21 years with a mean of 14.65±0.9 years. Mean percentage of Black adolescents among total population was 30.8±21.5% with a mean assessment sensitivity of 93.5±7.7%, specificity of 83.9±12.6%, internal consistency of 0.90±0.05 and test-retest reliability of 0.91±0.03. The tool with the greatest number of assessments on racially and ethnically diverse sample populations was the Ask Suicide-Screening Questions, n=6, followed by the Suicidal Ideation Questionnaire Junior, n=3 and the Columbia Suicide Severity Rate Scale, n=2.

Conclusions: There is a paucity of information on the reliability and validity of suicide assessment tools in Black adolescents within current literature. Further validation of popular tools used in pediatric psychiatry among racially diverse populations is needed.