



CSLC SUCCESS STORY: TENNESSEE

SUSTAINING STATEWIDE SUICIDE PREVENTION EFFORTS

Suicide has long been a leading cause of death in Tennessee. But despite widespread concern about the issue, health practitioners in the state had struggled to develop a comprehensive statewide prevention strategy.

In 2018, a team representing multiple agencies decided to take action by joining the Children’s Safety Network’s (CSN) Child Safety Learning Collaborative (CSLC). The team pulled together practitioners from the [Tennessee Department of Health](#) (TDH), the [Tennessee Suicide Prevention Network](#) (TSPN), the [Tennessee Department of Mental Health and Substance Abuse Services](#) (TDMH), the [Tennessee Department of Education](#), and other community partners.

“We thought that the framework of quality improvement that the Children’s Safety Network gives, and all the different resources [available through the CSLC], would help us figure out what we could improve,” says Melissa Muñoz, Program Director of Suicide Prevention at TDH Division of Family Health and Wellness.

Using the support and structure of the 18-month CSLC cohort, the team crafted a collaborative, evidence-based approach to preventing youth suicide in Tennessee. The team has continued to participate in successive CSLC cohorts, strengthening and spreading their prevention work, while launching additional concurrent strategies aimed at improving health outcomes for youth.



PARTICIPATION IN THE CSLC

The use of data to drive decision making is a core component of the quality improvement model of the CSLC. Tennessee leaned heavily into the use of data after joining the CSLC in 2018, with the CSLC's [Suicide Self-Harm Prevention Change Package](#) resource guiding their efforts.

One of Tennessee's most urgent goals was to more accurately identify communities with elevated levels of suicide-related behavior. To do this, they began using the Centers for Disease Control and Prevention's [Electronic Surveillance System for the Early Notification of Community-based Epidemics \(ESSENCE\)](#) program to monitor trends in suicide-related emergency department visits, including suicide attempts, ideation, and intentional self-harm visits weekly.

The team used ESSENCE data to develop and send weekly notifications to multiple levels of prevention practitioners—including school health officials, TSPN regional directors, and staff at [Centerstone](#), a community-based counseling program with locations across the state—when areas of concern emerged. To foster the use of ESSENCE data throughout the state, the Tennessee team created an ESSENCE informational video showing other youth health leaders on how to use the real-time data. They also used ESSENCE data to determine the best time of year to run a positive messaging campaign.

WHAT IS THE CSLC?

The CSLC aims to reduce fatal and serious injuries among infants, children, and adolescents by providing participants access to a national peer network, expert-led trainings, coaching, and technical assistance using the CSN Framework for Quality Improvement and Innovation in Child Safety.



"The collaborative structure of the CSLC facilitated our ability to coordinate with our program partners to increase awareness of the ESSENCE Alert System throughout the state. Because we were in regular communication with our CSLC State team, we were able to get the message about ESSENCE out to a wider network of partners more efficiently."

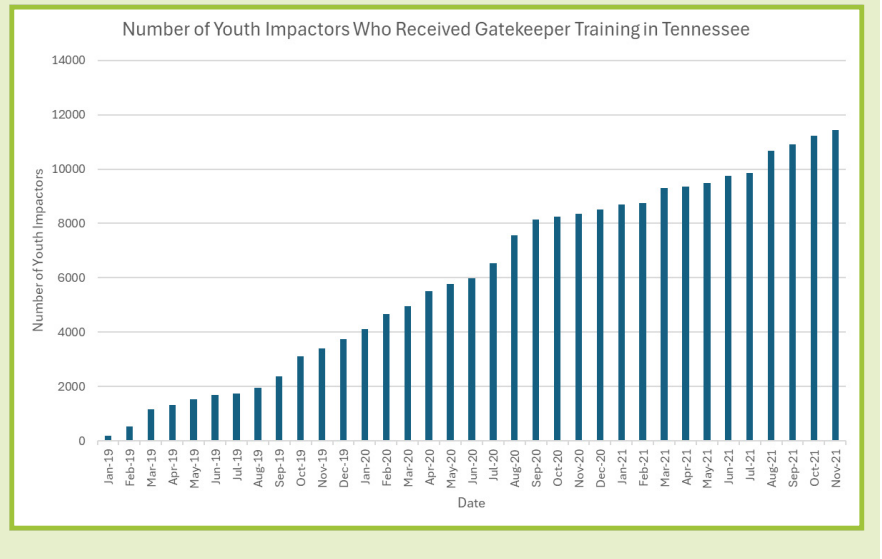
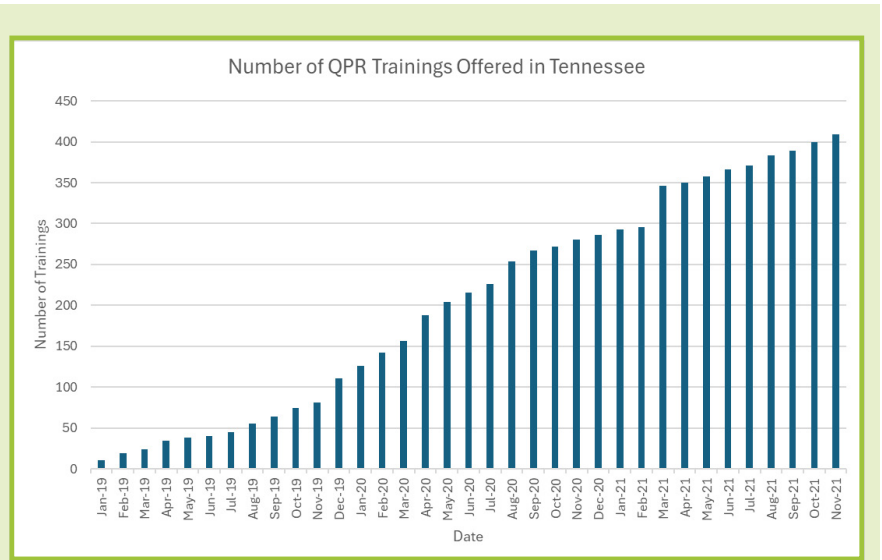


-Melissa Muñoz, TDH, Program Director of Suicide Prevention

ESSENCE data was also integral in identifying and guiding the expansion of [Question-Persuade-Refer \(QPR\)](#) gatekeeper trainings in several high-risk communities. The Tennessee team decided to focus on delivering the training to people who worked directly with youth—known as “youth impactors”—in schools, mental health settings, and home visiting programs. They expanded their definition of youth impactors to include coaches, out-of-school program staff, and community leaders. Between 2018 and 2022, they delivered hundreds of QPR trainings, reaching nearly 12,000 youth impactors throughout the state.

While they were developing their rapid prevention response plan, the Tennessee team also conducted annual needs assessments with a broad range of partners. The purpose of this assessment was to identify gaps in mental health and suicide prevention services, to determine what support was needed, and where current collaborations existed across the state.

The Tennessee team drew heavily upon the findings of the initial needs assessment when they began planning their implementation of a comprehensive public health approach to suicide prevention in 2020. This effort resulted in several key changes in practice, including recommendations for the implementation of a standardized statewide screening for suicide risk, more thorough and increased suicide prevention trainings within school systems, and an increase in upstream prevention strategies as well as in the availability of crisis services and treatment services tailored specifically for children/youth.



“The CSLC resources have come in really handy... the Plan-Do-Study-Act cycle and the 90-day framework have been helpful for providing a structured way to have conversations with partners who are doing the on-the-ground work.”



-Melissa Muñoz, TDH, Program Director of Suicide Prevention

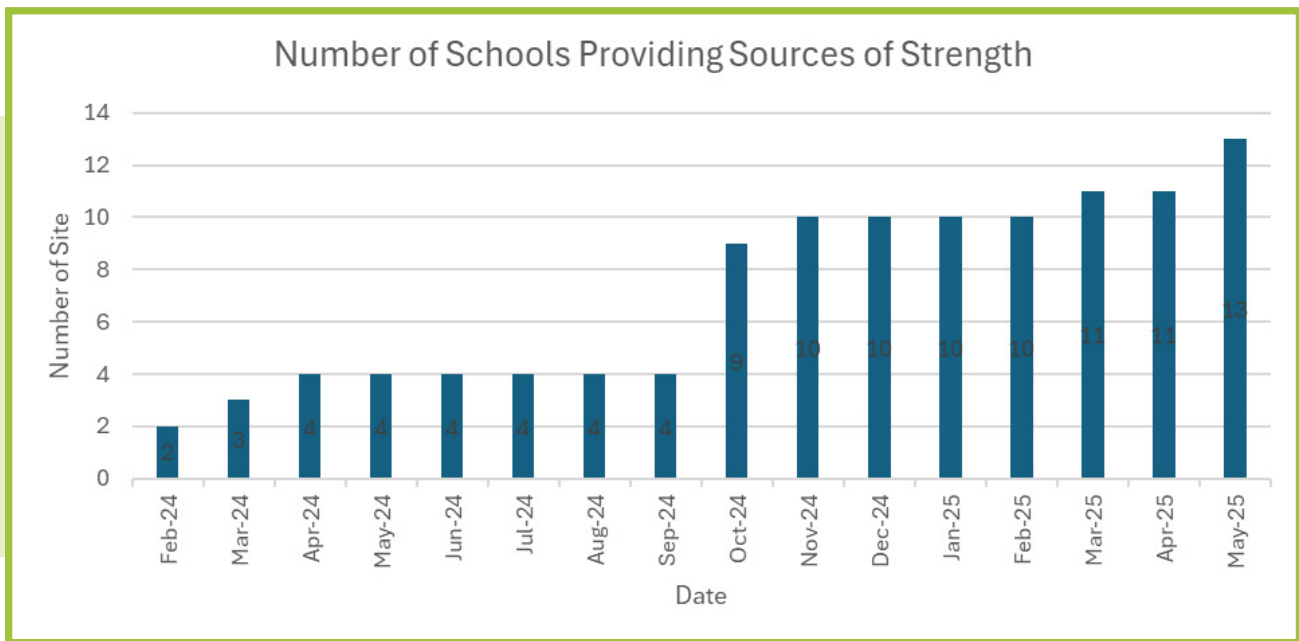
ADDRESSING A PERSISTENT CHALLENGE

Since joining their first CSLC cohort in 2018, Tennessee has continued to participate in the CSLC. They are currently in their eighth year of participation. Over that time, Tennessee has steadily expanded its suicide prevention efforts for youth by leaning on partnerships that they formed during the CSLC and employing the tools and support provided by the CSLC.

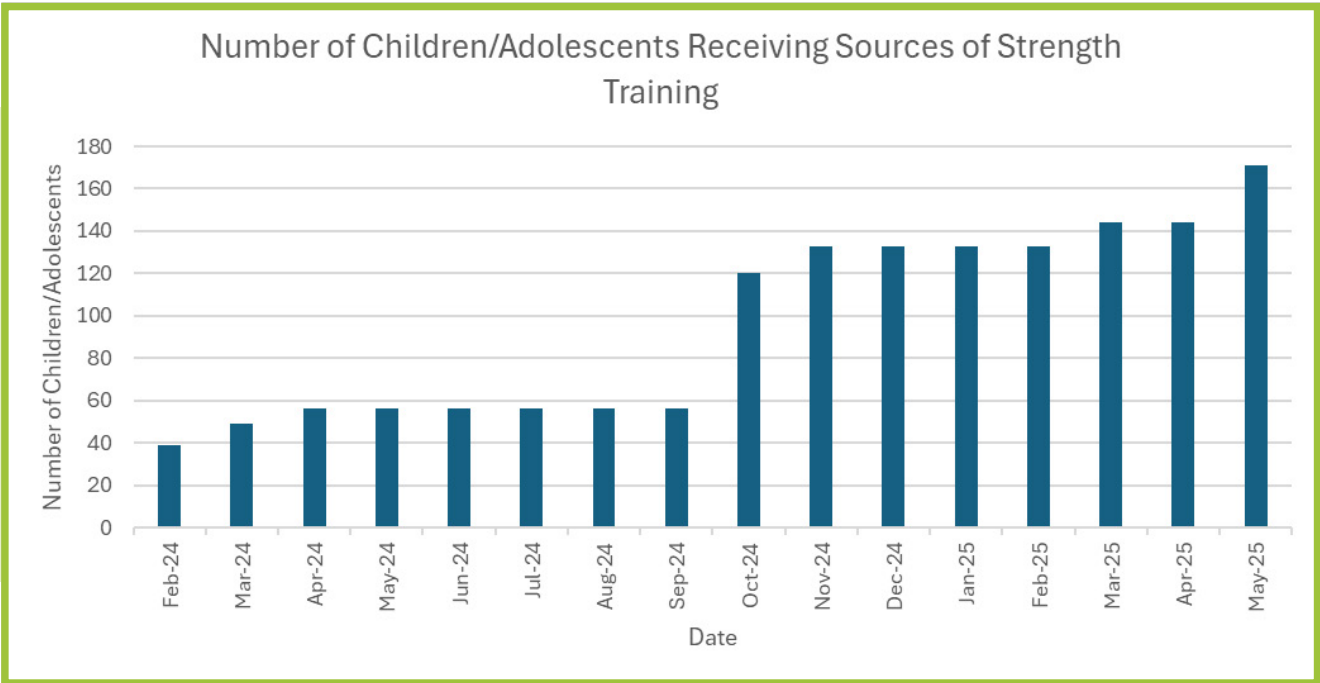
“Being part of CSN has allowed us to connect with national leaders and other states who are doing innovative work in injury prevention,” said Terry Love, TDH Director of Injury Prevention. “Those relationships have helped us sharpen our strategies and better support our local partners across Tennessee. We also make it a priority to regularly share CSN tools and resources with our statewide injury prevention network so that communities across our state can benefit from the latest ideas and best practices to keep kids and families safe.”

One of the state’s biggest initiatives was the expansion of its gatekeeper training strategy, which sought to reach youth impactors. However, data gathered by the state revealed that suicide rates among youth aged 10-17 continued to increase. From 2019 to 2023 the rate of suicide jumped from 4.5 per 100,000 to 6.6 per 100,000—an increase of 47% (Tennessee Department of Health, 2025).¹

In response, the Tennessee team launched a program in 2023 that introduced youth to the evidence-based suicide prevention program Sources of Strength. The Tennessee team conducted this new initiative while continuing to scale and spread their Youth Impactor QPR Training efforts, which were still seen as foundational to addressing youth suicide. Using the quality improvement approach in CSLC resources, the Tennessee team was able to identify 90-day aims and develop Plan-Do-Study-Act (PDSA) cycles to guide their implementation.



¹ Tennessee Department of Health. *Suicide Prevention Annual Report 2025*. Nashville, TN: Tennessee Department of Health; 2025. <https://www.tn.gov/content/dam/tn/health/program-areas/2025%20Suicide%20Prevention%20Annual%20Report.pdf>



“I think the PDSA really helped guide us in terms of thinking through what was working, and what was not working, in terms of our approach and recruitment strategy for Sources of Strength,” said Muñoz.

A LONG-TERM COMMITMENT TO SAVING LIVES

Tennessee’s nearly decade-long participation in the CSLC has helped create the processes and conditions needed for a statewide commitment to youth suicide prevention. The team uses weekly data reports from ESSENCE to guide their decision-making, enabling them to pivot quickly to meet changing needs. They meet regularly with partners and disseminate an annual report to document their statewide impact. They have also developed a youth-focused multi-media campaign to raise community awareness of the various school-related risk factors that contribute to seasonal trend upticks in suicidality among youth, encouraging help-seeking behaviors among middle and high school students in rural counties.

All of this work has attracted positive attention.



“Within our CSLC state team, we have had a lot more engagement from other higher level state partners and other state agencies, which has been really encouraging,” said Muñoz. “This program has caught the attention of commissioners and assistant commissioners from different agencies. There is interest in participating on our CSLC state team and in spreading Sources of Strength further throughout the state and thinking through ways to ensure the sustainability of the program.”



Likewise, other state teams in the CSLC have benefited from Tennessee’s experience. Muñoz and her Tennessee colleagues have become peer leaders within the CSLC, actively sharing their knowledge during webinars and mentoring colleagues from other states on the finer points of using ESSENCE data to inform prevention programs.

Looking ahead, Tennessee suicide prevention leaders are confident they have established the critical need for comprehensive suicide prevention, and that partners and policy makers will help ensure it sustains.

“Even though we don’t have it all figured out for the next five years or so, we have really been strengthening our partnerships with other state agencies,” said Muñoz. “There is a lot of interest across the state in continuing this program.”

A COLLABORATIVE APPROACH

The Tennessee team consisted of partners from the following agencies:

- [Tennessee Department of Health \(TDH\)](#)
- [Tennessee Suicide Prevention Network \(TSPN\)](#)
- [Tennessee Department of Mental Health and Substance Abuse Services \(TDMH\)](#)
- [Tennessee Department of Education](#)

APPLYING CSN'S FRAMEWORK FOR QUALITY IMPROVEMENT AND INNOVATION IN CHILD SAFETY

The Tennessee team used 3 key components of the [CSN Framework for Quality Improvement and Innovation in Child Safety](#) to promote and guide their prevention efforts:

CHILD SAFETY EXPERTISE

Technical assistance provided through CSLC was a key to Tennessee’s success. Before participating in CSLC, Tennessee had largely promoted youth suicide prevention initiatives at statewide conferences but had not cultivated relationships with individual youth-serving organizations. In the CSLC, the team was encouraged to make one-on-one connections with schools and organizations that would be the ones needed to implement Sources of Strength. “That was what caused the shift in not really having a lot of support and interest in the program to really being able to get it off the ground,” said Muñoz.

SYSTEMS IMPROVEMENT

CSLC provided quality improvement tools, such as Plan-Do-Study-Act cycles and 90-day aims, that helped the Tennessee team better determine what was working and what was not. The quality improvement approach helped them navigate challenges related to working with schools. Eventually, they were able to create champions that helped scale up the prevention work to larger districts.

LEADERSHIP AND MANAGEMENT

Engaging support from senior leadership at the TDH and other state agencies has helped Tennessee promote and expand their efforts. It has also allowed them to confront issues to the program’s sustainability, such as staff turnover and changes in funding streams.