What is the Columbia Health Screen (CHS)?

- Used as a screening tool for the risk factors of suicide
- Indicates only the likelihood that a youth is at risk for suicide or has a significant mental health problem; it is not a substitute for a clinical evaluation
- 14-item, self-completion, paper-and-pencil questionnaire
- Can be administered and scored by trained non-professionals
- Usually takes 10 minutes to complete
- Has been used to screen youth from ages 11 to 18 who read at a 6th grade level
- Includes questions about depression, suicidal ideation and attempts, anxiety, alcohol and drug use, and general health problems
- Most questions cover the last three months
- Available in English and Spanish

How was the CHS developed?

- The CHS was developed by the Division of Child & Adolescent Psychiatry of the New York State Psychiatric Institute at Columbia University in New York
- Over a ten-year period, researchers at Columbia University studied the characteristics of youth who died by suicide to identify predictors of suicidal behavior. The Columbia University TeenScreen Program and the CHS were developed from these results.

How is the CHS used in the TeenScreen Program?

- TeenScreen uses the answers to certain questions to decide if a teen should be advanced to the clinical interview stage of the screening process
- If the CHS score is “Positive,” the teen should be advanced to the clinical interview stage of the screening process
- Using the TeenScreen scoring rules will yield a screen positive rate of about 30%

A CHS score is “Positive” if:

- Youth reports suicidal ideation in the last 3 months (Q. 10) OR
- Youth reports a suicide attempt ever (Q. 11) OR
- Youth rates three emotional problems as “Bad” or “Very Bad” (Qs. 4-8) OR
- Youth reports a need for help with an emotional problem (“Yes” to any “a” Qs. 4a-9a) OR
- Youth reports being “More upset” after completing the questionnaire (Q. 14) OR
- Youth refuses to answer question(s) after screener calls attention to unanswered item(s)

Why use the CHS?

- A study of over 2000 high school students showed that the CHS effectively identifies at-risk youth
- Youth are more likely to acknowledge emotional symptoms on questionnaires than they are to report these symptoms on their own
- Research has shown that the questionnaire is useful in predicting the likelihood that a teen has depression, is at risk for suicide, and needs further evaluation

Sample CHS Questions

During the past 3 months, how much of a problem have you had with feeling nervous or afraid? (Response options: No Problem, Slight Problem, Medium Problem, Bad Problem, Very Bad Problem)

During the past 3 months, how much of a problem have you had with feeling unhappy or sad?

During the past 3 months, have you thought of killing yourself?

If youth indicates having a problem in any area, the instrument goes on to ask a series of additional questions regarding their concern about the problem, the extent of the problem they are having, if they have seen a mental health professional about the problem, or if they have an appointment scheduled to see a professional about the problem. Please see above for scoring guidelines.