

## Suicide Prevention: Increasing Relational Capacity

Shelley R. Hart, PhD, NCSP  
Nevada Coalition for Suicide Prevention  
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## “Admiring” the Problem

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## Suicide: A Global Public Health Problem

- 800,000 people die by suicide annually

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“40 Seconds”




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## Suicide: A Global Public Health Problem

- 800,000 people die by suicide annually
- One person dies by suicide every 40 seconds
- 79% of all suicides occur in low- and middle-income countries
- Attempt (25 million globally) and ideation (140 million globally) rates are substantially higher.
- It is a multifactorial, complex and intentional behavior

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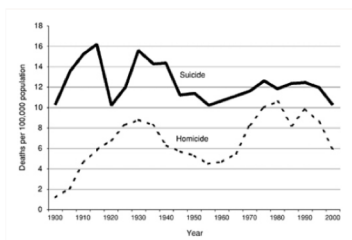
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## Overall, 10<sup>th</sup> leading cause of death in US



Available from: <https://www.nimh.nih.gov/health/statistics/suicide.shtml>

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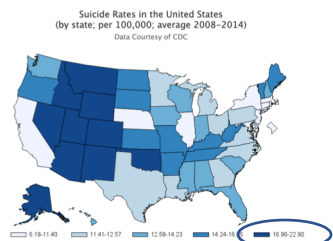
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## Geographic Differences Across the US



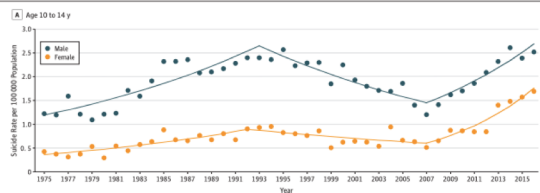
Available from: <https://www.nimh.nih.gov/health/statistics/suicide.shtml>

For 10- to 19-year-olds in the US:

2<sup>nd</sup> leading cause of death!

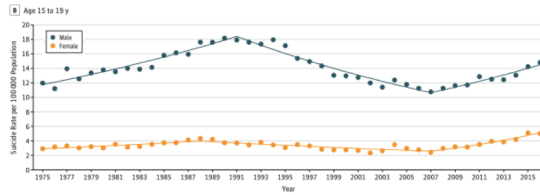
## Trends (10- to 14-year-olds)

Figure 1. Suicide Trends Among Youth Aged 10 to 19 Years in the United States, 1975 to 2016



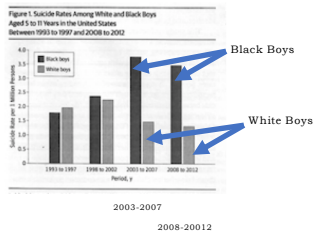
Ruch et al., 2019

## Trends (15-to 19-year-olds)



Ruch et al., 2019

## Trends (5-to 11-year-olds)



Bridge et al., 2015

## Why Does Suicide Happen?

Keeping it "Relational"

## Social Determinants of Health



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## Social Determinants

- Social Integration: degree to which people are bound together in social networks
- Social Regulation: degree to which people's desires and emotions are regulated by societal norms & customs
- Social Disorganization: measured by "broken relationships"

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## Is it "area deprivation" or "social capital"?

- **Area deprivation** = neighborhoods with lower socio-economic status
- **Social capital** = neighborhoods characterized by a web of cooperative relationships between citizens, high levels of interpersonal trust, and strong norms of reciprocity and mutual aid

Congdon (2012) found that area deprivation was not a significant influence on suicide risk, and understanding risk must include social capital.

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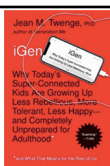
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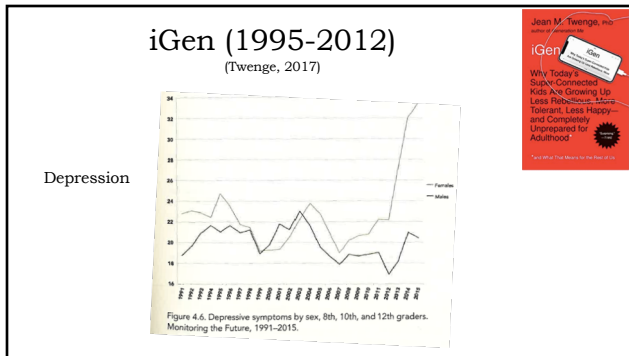
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“Our experiences themselves are just part of the picture. We take facts and experiences and then assign meaning to them. What meaning we assign, mentally, emotionally, and spiritually, is often as important to genetic activation as the facts themselves. We are discovering that our genes dance with our awareness. Thoughts and feelings turn sets of genes on and off in complex relationships. Science is discovering that while we may have a fixed set of genes in our chromosomes, which of those genes is active has a great deal to do with our subjective experiences, and how we process them (Church, 2009, p. 36).”

(Twenge, 2017)

1. In No Hurry (the extension of childhood into adolescence)
2. Internet (time on their phones)
3. In Person No More (the decline of in-person social interactions)
4. Insecure (the sharp rise in mental health issues)
5. Irreligious (decline in religion)
6. Insulated but not Intrinsic (interest in safety & decline in civic involvement)
7. Income Insecurity (new attitudes toward work)
8. Indefinite (new attitudes toward sex, relationships and children)
9. Inclusive (acceptance, equality, and free speech debates)
10. Independent (political views)






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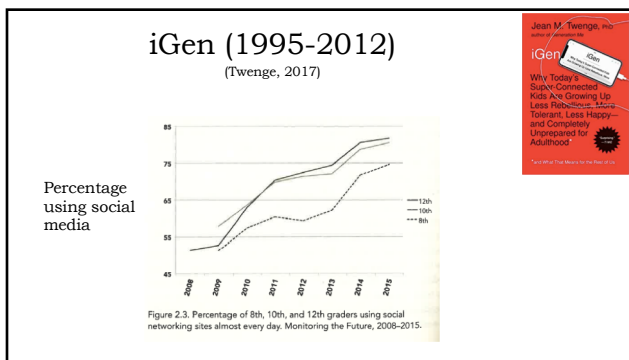
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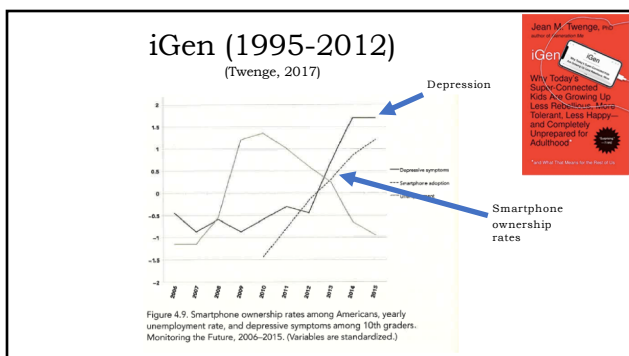
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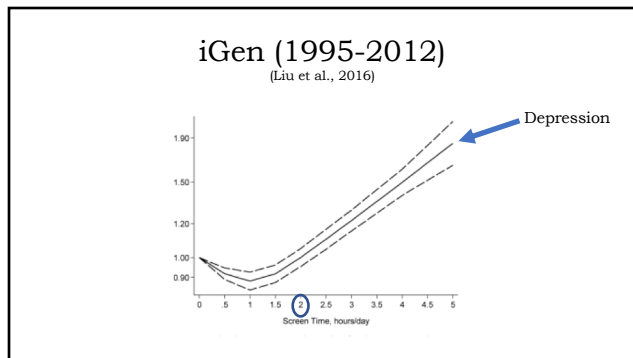
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### Does Type of Media Matter?

- Yes?
  - Boers et al., (2019)
    - Social media & computer use = higher levels of depression
    - Video gaming and television = no difference
    - Over 4 years
- No?
  - Grøntved et al. (2015)
    - Computer & tv use = higher levels of depression
    - 6-12 years later

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### Does Content Matter?

(Bridge et al., 2019)

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### To Facebook or Not To Facebook?

- 9% were more happy
- 36% less lonely
- 33% less depressed




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### Just Use the Parental Controls, Silly!




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### Using Smartphones for Good...

(Coppersmith et al., 2019)

- Suicidal Ideation
  - Moderate to Strong/Weak/None [scale]
    - Wish to die
    - Wish to live
    - Wish to die by suicide
- Social Support
  - Felt much less supported than usual (1) to Felt much more supported than usual (5) [scale]
    - Family
    - Friends
- Controlling For
  - Sadness
  - Burdensomeness
  - Thwarted Belongingness

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## ...Sadfishing...?



## Building Relational Capacity

### Going Further Upstream

## Adverse Childhood Experiences (ACE's)

(Felitti et al., 1998)

Table 1. Prevalence of childhood exposure to abuse and household dysfunction

Category of childhood exposure <sup>a</sup>	Prevalence (%)	Prevalence (%)
<b>Abuse by category</b>		
<b>Psychological</b>		11.1
Did a parent or other adult in the household...		
Often or very often swear at, insult, or put you down?	10.0	
Often or very often say to you that made you afraid that you would be physically hurt?	6.8	
<b>Physical</b>		10.8
Did a parent or other adult in the household...		
Often or very often push, grab, shove, or slap you?	4.9	
Often or very often hit you so hard that you had marks or some injury?	9.6	
<b>Sexual</b>		25.0
Did an adult or person at least 5 years older than you...		
Touch or fondle you in a sexual way?	10.9	
Have sex with you before you were 18?	8.7	
Attempted, used, or engaged in sexual intercourse with you?	8.9	
Actually have oral, anal, or vaginal intercourse with you?	6.0	
<b>Household dysfunction by category</b>		
<b>Substance abuse</b>		25.4
Live with someone who was a problem drinker or alcoholic?	20.5	
Live with someone who used street drugs?	4.9	
<b>Mental illness</b>		18.8
Was a household member depressed or mentally ill?	17.5	
Did a household member attempt suicide?	4.0	
<b>Mother treated violently</b>		12.5
Did your mother (or equivalent)		
Smear, abuse, or hit often, pushed, grabbed, slapped, or had something thrown at her?	11.9	
Scold, yell, or hit you often or very often? Kicked, beaten, hit with a belt, or hit with something hard?	4.5	
Ever threatened with, or hurt by a knife or gun?	6.6	
Ever threatened with, or hurt by a knife or gun?	5.0	
<b>Crimes in the household</b>		
Did a household member go to prison?	5.4	
Any category reported	58.1%	

<sup>a</sup>No response or one or more items listed under the set of questions for each category.

### Early Life Stressors—Timing Matters

(Hambrick et al., 2019)

- Developmental Period
  - Perinatal (0-2 mos)
  - Infancy (2-12 mos)
  - Early Childhood (13 – 24 mos)
  - Childhood (4-11 yrs)
- Domain of Impact
  - Sensory Integration
  - Self-Regulation
  - Relational
  - Cognitive Functioning
- Outcomes
  - Perinatal (Relational Poverty) = Sensory Integration & Self-Regulation
  - Infancy (both) = Cognitive
  - Childhood (both) = Cognitive & Relational

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### Positive Childhood Experiences

(Bethell et al., 2019)

How often or how much as a child they:

1. Felt able to talk to their family about feelings;
2. Felt their family stood by them during difficult times;
3. Enjoyed participating in community traditions;
4. Felt a sense of belonging in high school (not including those who did not attend school or were home schooled);
5. Felt supported by friends;
6. Had at least 2-parent adults who took genuine interest in them; and
7. Felt safe and protected by an adult in their home

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### Perceived Love

(Susukida, Wilcox, & Mendelson, 2016)

- Perceived Love
  - “How much love did the [woman] who spent most time raising you, give you?”
- Family Structure
  - “Did you live with both of your biological parents up until you were sixteen?”

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## Parent-Child Connectedness

(Kuramoto-Crawford, Ali, & Wilcox, 2017)

- Warmth
  - "Most of the time, your [mother] is warm and loving toward you"
- Closeness
  - "How close do you feel about your [mother]?"
- Communication
  - "You are satisfied with the way your [mother] and you communicate with each other"
- Care
  - "How much do you think [she] cares about you?"

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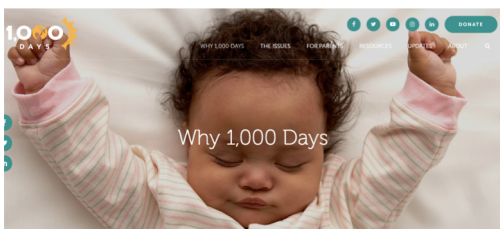
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## The First 1,000 Days




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"When the child successfully accomplishes communication with others... normal development occurs"

--(Tronick & Weinber, 1997).

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*“One of the greatest diseases is to be nobody to anybody.”*

• Mother Teresa

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THANK YOU!

Shelley R. Hart, PhD, NCSP  
[srhart@csuchico.edu](mailto:srhart@csuchico.edu)  
(530) 898-5919



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