Youth Suicide Prevention

Exploring Teen Suicide Trends and Insights

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and
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NC-VDRS Data: Suicide 0-17
Types of Information Gathered by NC-VDRS

- Demographics (victim and suspect)
- Circumstances of the event
- Alcohol/Drug use by the victim
- Type of location where the event happened
- Type of weapon used
- Relationship between the victim and suspect
Understanding Youth Suicide Case Definition

• *Suicides that occur in children younger than age 10 do not meet the VDRS case definition*

• According to the Centre for Suicide Prevention:

• Uncertainty exists around whether children younger than 10 have the developmental maturity to act on suicidal thoughts
  – Children can have the intent to cause self-injury or death
  – Act on these emotions without an understanding of lethality or finality of the act itself

• Suicides in children younger than age 10 are rare
  – When they do occur, largely underreported (commonly reported as accidents)
Examples of Hidden Suicides

Registered suicides

Suicides misclassified within other injury manner-of-death categories (primarily involve less active/more covert methods, eg, drug intoxication/other poisoning and drowning)

Deaths from drug self-intoxication and other self-injury with uncertain or no intent to die, eg, from motor vehicular trauma

Suicides and other self-injury deaths misclassified within natural or ill-defined and unknown causes

Manifest self-injury

Latent self-injury

JAMA, 2018
Suicide Rates by Sex and Race/Ethnicity: North Carolina ages 0-17 (NC-VDRS, 2006-2016)

* Less than 5 deaths, rate suppressed
Suicide Counts by Age and Sex: North Carolina Residents ages 0-17 (NC-VDRS, 2006-2016)

<table>
<thead>
<tr>
<th>Age</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1</td>
<td>11</td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>11</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>11</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>5</td>
<td>34</td>
<td>14</td>
</tr>
<tr>
<td>6</td>
<td>41</td>
<td>17</td>
</tr>
<tr>
<td>7</td>
<td>64</td>
<td>32</td>
</tr>
<tr>
<td>8</td>
<td>77</td>
<td>19</td>
</tr>
</tbody>
</table>

*Note: N = 361
Method of Suicides: N.C. Residents ages 0-17 (NC-VDRS, 2006-2016)

Note: Other includes falls, drowning, motor vehicle, fire/burns and other causes of suicide.
Gendered differences in relation to method

- Body image
- Gender identity
- Access to lethal means
- Peer pressure
- Social media influences

https://www.hsph.harvard.edu/means-matter/lethal-means-counseling/
https://www.sprc.org/resources-programs/calm-counseling-access-lethal-means
https://www.sprc.org/populations/adolescents
Suicide Circumstances: Percentage with Mental Health Problems
N.C. Residents ages 0-17 (NC-VDRS, 2006-2016)

- Current Treatment for Mental Health Illness
  - Females: 36.6%
  - Males: 31.4%

- Current Depressed Mood
  - Females: 25.8%
  - Males: 19.9%

- Ever Treated for Mental Health Illness
  - Females: 45.2%
  - Males: 35.8%

- Current Mental Health Problem
  - Females: 43.0%
  - Males: 36.3%

Note: Number with circumstance information: 319 of 363 (87.9%)
Adverse Childhood Experiences

Adverse childhood experiences (ACEs) are a significant risk factor for substance use disorders and suicide attempts

ACEs include:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Physical neglect
- Emotional neglect
- Intimate partner violence
- Mother treated violently
- Substance misuse within household
- Household mental illness
- Parental separation or divorce
- Incarcerated household member

Suicide Circumstances: Percentage with Problem
N.C. Residents ages 0-17 (NC-VDRS, 2006-2016)

- **Intimate Partner Problem**
  - Female: 32.3%
  - Male: 23.0%

- **School Problem**
  - Female: 20.4%
  - Male: 22.1%

- **Other Relationship Problem**
  - Female: 14.0%
  - Male: 19.5%

- **Recent Crisis**
  - Female: 58.1%
  - Male: 55.8%
Suicide Circumstances: Percentage with Precipitating Circumstances
N.C. Residents ages 0-17 (NC-VDRS, 2006-2016)

- History of Suicidal Thoughts
  - Female: 28.0%
  - Male: 15.9%

- Left a Suicide Note
  - Female: 28.0%
  - Male: 27.4%

- Disclosed Intent to Complete Suicide
  - Female: 31.2%
  - Male: 21.7%

- History of Suicide Attempt
  - Female: 28.0%
  - Male: 12.0%
What stopped you on the brink of suicide?

• Examples from stories written by those who remained alive following a serious suicide attempt, (Donnelly, N, 2013).

• Means Matter Campaign -
http://www.hsph.harvard.edu/means-matter/

BUILDING A Crisis Services Continuum TO MATCH A CONTINUUM OF CRISIS INTERVENTION NEEDS

First Responder
NC START
Outpatient Provider
Family & Community Support
Crisis Telephone Line
LME/MCO Access Center

Peer Support “living room”
Mobile Crisis Team
CIT Partnership
EMS Partnership
24/7 Crisis Walk-In Clinic
Hospital Emergency Dept.

WRAP
Crisis Planning
Integration/Re-integration into Treatment & Support System

Non-Hospital
Crisis Respite Housing
23 hour Observation
Facility Based Crisis
Non-hospital Detox

Hospital Units
Community (including 3-way beds)
State Psychiatric & ADATC

Early Intervention
Response
Prevention
Stabilization

Transition Supports
Critical Time Intervention, Peer Crisis Navigators
LME-MCO Care Coordination, PROACT

http://crissolutionsnc.org/local-community-solutions/
Suicide Attempts – NC Hospital and ED
Number of Suicide Attempt Methods by Sex for Ages 0-17: Hospitalization by North Carolina Residents (Hospital Discharge 2016)

*Note: 620 Hospitalizations for Females and 166 for Males
Number of Self-Inflicted Injuries by Sex for Ages 0-17: ED Visits by North Carolina Residents (NC DETECT, 2016-2017)

*Note: 3,505 ED Visits for Females and 1,008 for Males*
# 2017 High School Youth Risk Behavior Survey

<table>
<thead>
<tr>
<th>Question</th>
<th>North Carolina 2017</th>
<th>United States 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felt sad or hopeless (almost every day for 2 weeks or more in a row so that they stopped doing some usual activities, during the 12 months before the survey)</td>
<td>29.4</td>
<td>31.5</td>
</tr>
<tr>
<td>Seriously considered attempting suicide (during the 12 months before the survey)</td>
<td>16.2</td>
<td>17.2</td>
</tr>
<tr>
<td>Made a plan about how they would attempt suicide (during the 12 months before the survey)</td>
<td>13.8</td>
<td>13.6</td>
</tr>
<tr>
<td>Attempted suicide (one or more times during the 12 months before the survey)</td>
<td>8.2</td>
<td>7.4</td>
</tr>
<tr>
<td>Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (during the 12 months before the survey)</td>
<td>3.1</td>
<td>2.4</td>
</tr>
</tbody>
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Centers for Disease Control
2017 High School Youth Risk Behavior Survey

- **Heterosexual**
  - Seriously Considered Attempting Suicide During Past 12 Months: 12%
  - Made a Plan for Suicide Attempt During Past 12 Months: 5%
  - Made a Suicide Attempt During the Past 12 Months That Resulted in an Injury Needing Treatment by a Medical Professional: 2%
  - Attempted Suicide During the Past 12 Months: 11%

- **Gay, Lesbian, or Bisexual**
  - Seriously Considered Attempting Suicide During Past 12 Months: 43%
  - Made a Plan for Suicide Attempt During Past 12 Months: 38%
  - Made a Suicide Attempt During the Past 12 Months That Resulted in an Injury Needing Treatment by a Medical Professional: 11%
  - Attempted Suicide During the Past 12 Months: 25%
Help students cope with anxiety and resiliency

**Anxiety Strategies**

The Coping Cat

http://www.cebc4cw.org/program/c-a-t-project/detailed

**Resilience Project**

The resilience project is dedicated to helping and protecting today's youth.

Consider therapeutic environments – adapting indoor and outdoor spaces.

https://behindthegardens.home.blog
Help reduce academic anxiety for students living with mental health issues!

Consider a 504 plan for a Student with a mental health diagnosis!

Under Section 504 of the Rehabilitation Act (Pub L No. 93-112, 1973) and the Americans with Disabilities Act (Pub L No. 101-336, 1990), provides for a student who is not eligible for special education under an IEP but who requires accommodations in regular education on the basis of bona fide medical need, as documented by a physician and validation by the educational home.
Welcome to the 4th Grade - Dwayne Reed

https://www.youtube.com/watch?v=XBLcuGunRxU
Crisis Services – Program these into your phones!

Text HOME to 741741
You can text from anywhere in the United States, anytime, about any type of crisis.

Call 1-800-273-8255
The Lifeline provides 24/7, free and confidential support for people in distress, prevention and crisis resources.

https://suicidepreventionlifeline.org/
Questions?
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