

ABSTRACTS

SESSION 2

Understanding Risk and Protective Factors to Inform Prevention Activities

1. Risk and Protective Factors Associated with Suicidal Ideation Among Secondary School Students

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Statement of Purpose: The Healthy Minds Network aims to identify and better understand risk and protective factors related to suicidal ideation among secondary school students. Using data related to mental health, help-seeking behaviors, and related factors among secondary school students, we may be better equipped to identify risk and protective factors associated with suicidal ideation and attempts among this population. **Methods/Approach:** The Healthy Minds Network, in collaboration with the JED Foundation, has developed an online survey study of secondary school student mental health, well-being, and related factors called the Healthy Minds Study for Secondary Schools (HMS2). During the 2020-2021 academic year, schools were recruited to participate in the JED Campus program for high schools and boarding schools. Participation included a baseline assessment of student wellness using the HMS2 questionnaire as a survey tool. With parent/guardian consent, students were invited to complete the survey during structured class time. **Results/Conclusions:** Preliminary data analyses are being conducted. The study team expects to find data consistent with national trends—higher rates of suicidal ideation among female respondents compared to male respondents, and higher rates of suicidal ideation among underrepresented or marginalized populations. Additionally, the study team hopes to contribute identification of risk and protective factors, as well as help-seeking behaviors associated with suicidal ideation. **Innovation and Significance in Field:** This research will aim to further contextualize risk and protective factors for suicide and suicidal ideation among secondary school students.

2. Intersectionality, Social Support, and Youth Suicidality: A Socioecological Approach to Prevention

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Statement of Purpose: This study examined the relationship between social support and suicidality among youth from a public health perspective by using (1) a socioecological framework, and (2) an intersectional approach to social identity. **Methods:** Secondary analysis of cross-sectional survey data (N = 5058) involved means comparisons and a series of standard and hierarchical regression analyses. **Results:** Youth with intersecting marginalized identities (i.e., females and racial and sexual minority youth) were significantly more likely to report higher suicidality scores. Social support at the family, school, and community levels was significantly associated with lower suicidality scores, and the combination of family and school support was associated with the lowest suicidality scores. Finally, family support significantly reduced the relationship between intersecting marginalized identities and suicidality. **Innovation and Significance to the Field:** Findings highlight the importance of protective factors in every context in which youth live, learn, and play. Measuring and reporting social identities as well as their intersections adds to our understanding of both risk and prevention.

3. Youth-Nominated Support Team for Suicidal Adolescents: Acceptability and Feasibility of Implementation in Emergency Departments

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Statement of Purpose: The Youth-Nominated Support Team (YST) program is a psychoeducational approach in which adolescents at elevated risk for suicide nominate “caring adults” as support persons. This pilot study examined the feasibility of YST in the emergency department (ED) and incorporated technology-driven communication with adult support persons. **Methods/Approach:** We approached adolescents, ages 13-17, (N=11) presenting to the ED for a suicide related concern. A research coordinator worked with the youth to nominate up to 4 caring adults, later approved by the parent. Support persons attended a virtual psychoeducational session to discuss treatment plans and strategies for supporting positive behavioral choices. Support persons were encouraged to connect with the youth weekly. YST staff met with support persons weekly for three months, concluding with a follow-up assessment of the youth, parent, and support persons. **Results/Conclusions:** During the study, 39 adolescents were approached, with 15 consenting in the ED, and 12 completing study procedures. Adolescents nominated 31 support persons (80.6% female). The average number of support persons nominated per adolescent was 2.8. The following is the distribution of the relationship between the nominated support persons and youth: Parent 25.8%; Other Adult Relative 35.5% Adult Family Friend 12.9%, Teacher or Staff 12.9%, Religious Leader 6.5%, and Extracurricular Activity Leader 6.5%. Of the 31 nominated adults, 29 completed the psychoeducational session (93.5%). Study limitations include reduced youth enrollment due to hospital COVID-19 precautions and a lack of overnight enrollment coverage. **Innovation and Significance to the Field:** The YST intervention has been shown to be successful in decreasing long-term mortality when applied in an inpatient setting. This study extends this work by examining the feasibility of applying the YST intervention in the ED and incorporating new communication tools for the psychoeducational sessions.

4. Hallucinations, Delusions, Depression, Suicide Ideation and Plan Among Adults with Psychosis in Psychiatric Emergency Care

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Statement of Purpose: Suicide is a leading cause of preventable death among adults diagnosed with schizophrenia spectrum disorders. Suicide has been broadly explored in psychiatric emergency department settings, yet fewer studies have examined suicide thoughts and behaviors among a subclinical population of adults with psychosis. This study examined the relationships between psychosis, depression, and suicidal ideation and plan among a sample of adults in psychiatric emergency care. **Methods/Approach:** An Electronic Medical Record Search Engine was used to obtain data from Psychiatric Emergency Services (PES) of an academic healthcare system in a midwestern region of the United States. Patients included 712 adults between the ages of 18 to 65 who presented to PES from 2013 to 2020 with one or more symptoms of psychosis and either suicide ideation or a recent suicide attempt. Data were examined in SPSS27 using logistic

ABSTRACTS

regressions. **Results:** Patients with psychosis had a two-times greater odds of experiencing suicide ideation when hallucinations were present and eight-times greater odds when depression was present. Also, patients had a two-times greater odds of having a suicide plan when hallucinations were present and three-times greater odds of having a suicide plan when depression was present. **Conclusions:** Findings suggest the importance of synthesizing evaluations of positive symptoms with suicide risk assessments and risk formations, both of which traditionally focus largely on depression and hopelessness. Future research is needed to examine relationships over time, in addition to testing similar models including suicide attempt as an outcome within this vulnerable population. **Innovation and Significance to the Field:** Study findings indicate that risk for ideation and plan are greater when an individual experiences hallucinations and depression. It is essential for these symptoms to be identified in assessment and addressed in treatment as they are both important risk factors for suicide ideation and plan.

5. A Daily Diary Examination of How Adolescents Cope with Suicidal Thoughts

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Statement of Purpose: We sought to investigate how adolescents cope with suicidal thoughts, and whether these coping strategies differ on days when adolescents experience suicidal thoughts vs. on days when they do not. We will also explore whether these coping strategies predict next-day intensity of suicidal urges. **Methods:** 78 adolescents completed a four-week study following psychiatric hospitalization and responded to questions about coping and suicidal thoughts each evening. We aggregated coping strategies (total of 8) into four categories: (1) personal support; (2) professional support; (3) non-cognitive (e.g., relaxation); and (4) cognitive (e.g., positive thinking). Mean levels and mean square of successive differences (a measure of individual variability) of each coping category used, the perceived helpfulness of general coping on that day, and number of different types of strategies used were calculated separately based on type of day (suicidal vs. non-suicidal). **Results:** Across suicidal and non-suicidal days, adolescents on average reported using non-cognitive coping strategies and were least likely to seek out professional support as a coping method. Further, adolescents rated the perceived helpfulness of strategies as high, regardless of type of day, and tended to employ four different strategies (of eight total) on any given day. Paired samples t-tests revealed greater variability in coping variables on suicidal days vs. non-suicidal days for the following: using personal support ($t(41) = -3.09$, $p = .004$), non-cognitive strategies ($t(41) = -2.82$, $p = .007$), and ratings of coping helpfulness ($t(42) = -2.52$, $p = .015$). Next steps will include examining if daily coping predicts next-day intensity of suicidal urges, using linear mixed effects models. **Innovation and Significance to the Field:** Examination of coping when adolescents experience suicidal thoughts vs. when they do not, and the degree of subjective/objective helpfulness of coping, will pave the way for the development of new interventions that facilitate effective coping for suicidal urges.