Intersection of Mental Health and Suicide

In childhood and adolescence
WHERE TO START?

Understanding mental health

SELF-CARE
COPING
EMOTIONAL EXPRESSION
MENTAL HEALTH CONDITIONS
"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity"

Mental health is "a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community"

World Health Organization
WHY IS ADOLESCENT MENTAL HEALTH SO IMPORTANT?

the developing brain creates someone's lifetime mental health foundation
How common are mental health conditions?

50% LIFETIME
20% YEARLY
5% SERIOUS MENTAL ILLNESS
SERIOUS EMOTIONAL DISTURBANCE
Youth Mental Health Issues

50% begin experiencing symptoms by 14
75% begin experiencing symptoms by 24

Anxiety Disorders (32%): 6 years old
Behavior Disorders (19%): 11 years old
Mood Disorders (14%): 13 years old
Substance Use Disorders (11%): 15 years old

40% have more than one diagnosis in their lifetime
Recognizing Signs of Struggle

- ODD BEHAVIOR ≠ A MENTAL HEALTH CONDITION
- EMOTIONAL RESPONSES ≠ A MENTAL HEALTH CONDITION
- BEHAVIORS CAN BE MASKED
- SOME BEHAVIORS ARE MORE SOCIALLY ACCEPTABLE
Why is mental health important?

- Mental Health Affects Our Day-to-Day Lives
- 90% Who Die by Suicide Had Mental Health Conditions
- Only 54% Were Known
Signs of a Mental Health Condition

Changes in eating
Changes in sleep
Changes in energy levels
Vague aches and pains

New or recurrent fears
Persistent sadness
Frequent crying
Self-harm
Talking about death or dying

New or increasing anger
Changes in grades
Loss of interest in activities
Withdrawal
Difficulty concentrating
New or increasing substance use
Risk-taking behaviors
Isolation
HOW TO KNOW IF IT'S A MENTAL HEALTH CONDITION

Intensity

Duration

Domains
Rates were on the rise before the pandemic

- Rates of depression, anxiety, and suicide were all increasing pre-pandemic
- These rates can be expected to rise post-pandemic
Youth Risk Behavior Survey

In every Tennessee classroom there are...

10-11 students who meet the clinical symptoms of depression

5-6 who have contemplated suicide

4-5 who have planned a suicide

3-4 who have attempted suicide

1-2 who have made a suicide attempt that needed treatment by a doctor or nurse
The behavioral health impact of the pandemic

Short term:
- Instability of routine
- Loss of jobs or income
- Isolation
- Fear of illness
- Loss of life

Long term:
- Increases in cost of living
- Decreases in income
- Health outcomes
  - Long-haul Covid-19
  - Behavioral health impacts of Covid-19
- Difficulty accessing mental health care
Suicidality and the Pandemic

June 24-30, 2020 (released August 14, 2020)
- 11% reported suicidal ideation
  - 25.5% of people ages 18-24
- Higher reported rates of ideation for:
  - Hispanic & Black respondents
  - Employed persons
  - Essential workers
  - Unpaid caregivers

March-April, 2021 (released July 2, 2021)
- 8.4% reported suicidal ideation
- Higher reported rates of ideation for
  - Persons under 30
  - Transgender or nonbinary persons
  - Multiracial persons
Mental Health Screenings

- 20% INCREASE FROM 2019
- 2.6 MILLION SCREENINGS IN 2020
Suicide Attempts
Intentional Self-Harm
Suicidal thoughts and feelings

ESSENCE ALERTS

HIGHER THAN AVERAGE VISITS TO ER

2020
78/95 COUNTIES RECEIVED AN ESSENCE ALERT
219 ALERTS STATEWIDE
HIGHEST METRO REGION: DAVIDSON COUNTY
HIGHEST NON-METRO REGION: SOUTHEAST TN
Mobile Crisis

In 2020, there was a decrease statewide for face-to-face assessments and crisis calls:
- 8,351 face-to-face assessments
  - 2019 79,360
  - 2020 71,009
- 3,168 crisis calls
  - 2019 125,695
  - 2020 122,527
Service utilization during the pandemic

- NORMALIZATION OF MENTAL HEALTH
- DIFFICULTY ACCESSING SERVICES
- ADDITIONAL SAFETY PROTOCOLS
- FEAR OF COVID
Suicide Statistics: National Data

The group with the highest suicide rate is middle-aged men
48,000 people died by suicide in 2019 (13.93/100,000) / (13.95 for ages 15-24)
6,488 people ages 10-24
  • Ages 4-9 (12 deaths, 13th leading cause of death for age group)
  • Ages 10-14 (534 deaths, 2nd leading cause of death for age group)
  • Ages 15-24 (5,954 deaths, 2nd leading cause of death for age group)

Suicide Statistics: Tennessee Data

1,161 people in 2018 (16.60/100,000)
1,220 people in 2019 (20.3/100,000)
1 person every 8 hours
National Ranking: 22nd
3rd leading cause of death ages 10-24:
  • Ages 10-17 (39 deaths, 5.7/100,000)
  • Ages 10-19 (61 deaths, 7.13/100,000)
    ○ 2019 Deaths ages 10-19 (55 deaths, 6.4/100,000)
  • Ages 10-24 (139 deaths, 10.68/100,000)
What is suicide?
Death caused by injuring oneself with the intent to die.
Understanding Intent

Self-harm and drug use
30% of suicidal crises last under an hour
For 24-74% of attempters, the time between deciding on suicide and attempting was 10 minutes or less

90% of people who die by suicide had a mental health condition at the time of their death. These disordered thoughts, emotions, and behaviors contribute to suicide risk.
Risk Factors

- Untreated or poorly treated mental illness
- Alcohol or other substance use disorders
- Family discord
- Family history of suicide
- Previous suicide attempts
- Member of a high risk population
- Isolation or lack of social support
- Physical illness
- Sudden loss
- Ease of access to methods
Relationship breakdown
Interpersonal problems
Death or suicide of a loved one
Legal problems
Financial problems
Onset of mental distress
Untreated or unchanged circumstances
Suicidal thoughts
Suicide Attempt
Completion

Distress can begin to cause impairment
Possible tipping point

Unhealthy coping strategies

1 in 25 have fatal repeat attempt within 5 years

80% of people who die by suicide have made at least 1 prior attempt

Access to lethal means & alcohol increase risk
Visits to ED increase during the school year

A 2015 study comparing week-by-week, found a 118% increase in visits to a children's psychiatric ED during weeks when school was in session.

Another study found the rate of hospitalization for school-aged children for suicidal ideation and attempts increased 300% in school months.

Suicide rates also increase

Large decrease in youth suicide over the summer
95% increase for boys in the school year; 33% increase for girls
Steps for Intervention

- CREATE A MENTAL-HEALTH-SUPPORTIVE ENVIRONMENT
- ENCOURAGE SELF-CARE AND HEALTHY COPING
- EDUCATE YOURSELF
- INTERVENE AS APPROPRIATE
Prevention

Model positive sharing of emotions and the challenges in your own life.

Ask questions even when nothing is wrong. Use open-ended and specific questions.

Disclose when appropriate your own mental health condition.

Help them set boundaries that support and prioritize mental health.
Make sleep a priority
And don't underestimate the importance of a healthy diet and exercise

Consistency in routine
Find habits and events that you and your family can do consistently and at similar times in the day

Create rules
Make sure everyone follows them

Foster a sense of belonging
Social connection protects from the effects of distressing life events

Plan intentional time together
This builds trust and gives you the opportunity to notice if a child is struggling
Build resilience

Healthy social relationships
Positive view of self
The ability to manage strong feelings and impulses
Problem-solving skills
Feeling in control
The ability to find positive meaning in life despite traumatic events
Talking about wanting to die or to kill oneself
Making suicide threats
Hopelessness
Increasing use of alcohol or drugs
Changes in sleep
Social isolation
Increased anger
Acting agitated or reckless
Displaying mood swings
Suicide plan and access to means
Utilize your resources

Conversations
Change routines and home life when possible
Crisis Intervention when needed
Medical care
Mental health services
Medication
Barriers to treatment

- WILLINGNESS TO ENTER TREATMENT
- ACCESS TO RESOURCES
- BEHAVIORAL HEALTH WORKFORCE SHORTAGE
- HEALTHCARE PARITY
Encourage hope for yourself and others
Advocate for necessary services
Advocate for system change
Resources

- Suicide and Youth: Risk Factors https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6218408/
- Suicide by Age https://sprc.org/scope/age
- Suicide Risk and Mental Disorders https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6165520/
- CDC Suicide Rising Across the U.S. https://www.cdc.gov/vitalsigns/suicide/index.html
Resources

- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6580142/
- https://jamanetwork.com/journals/jamaotolaryngology/fullarticle/2732497
- https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(21)00084-5/fulltext
- https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm?utm_campaign=2021_july&emci=b0f77fa0-eceb-eb11-a7ad-501ac57b8fa7&emdi=995c40a8-9bf0-eb11-b563-501ac57b8fa7&ceid=7755146
- https://www.cdc.gov/mmwr/volumes/70/wr/mm7026e1.htm
Thank you!