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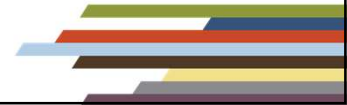
Suicide Prevention: Identifying and Modifying Risk Factors That Can Lead To Suicide Attempts In Latino Youth

Presented by Daniel A. Santisteban, Ph.D. and Maite P. Mena, Psy.D

This event is supported by Cooperative Agreement 1U79SP023012 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA). The views expressed herein do not necessarily reflect the official policies of the Department of Health and Human Services, National Hispanic and Latino Prevention Technology Transfer Center or NLBHA; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government, NHL PTTC or NLBHA.

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Behavioral Health Association **NLBHA**

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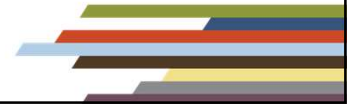
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Suicide Prevention: Identifying and Modifying Risk Factors That Can Lead To Suicide Attempts In Latino Youth

- We will begin the session promptly at 2:00 PM (ET)
- Please post your questions by clicking the Q&A icon on your screen. We will answer questions at the end of the session, and we will try to answer as many as we possible.
- This webinar is being recorded and we will email all attendees once its ready. Also, resources will be distributed at the same time. We will send an email to all attendees once these materials are ready.

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NLBHA's Mission

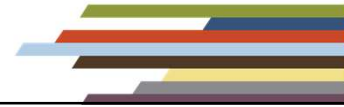
The Mission and Goal of The National Latino Behavioral Health Association is to influence national behavioral health policy, eliminate disparities in funding and access to services, and improve the quality of services and treatment outcomes for Latino populations.



Fredrick Sandoval, MPA
NLBHA Executive Director

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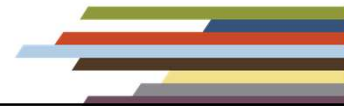
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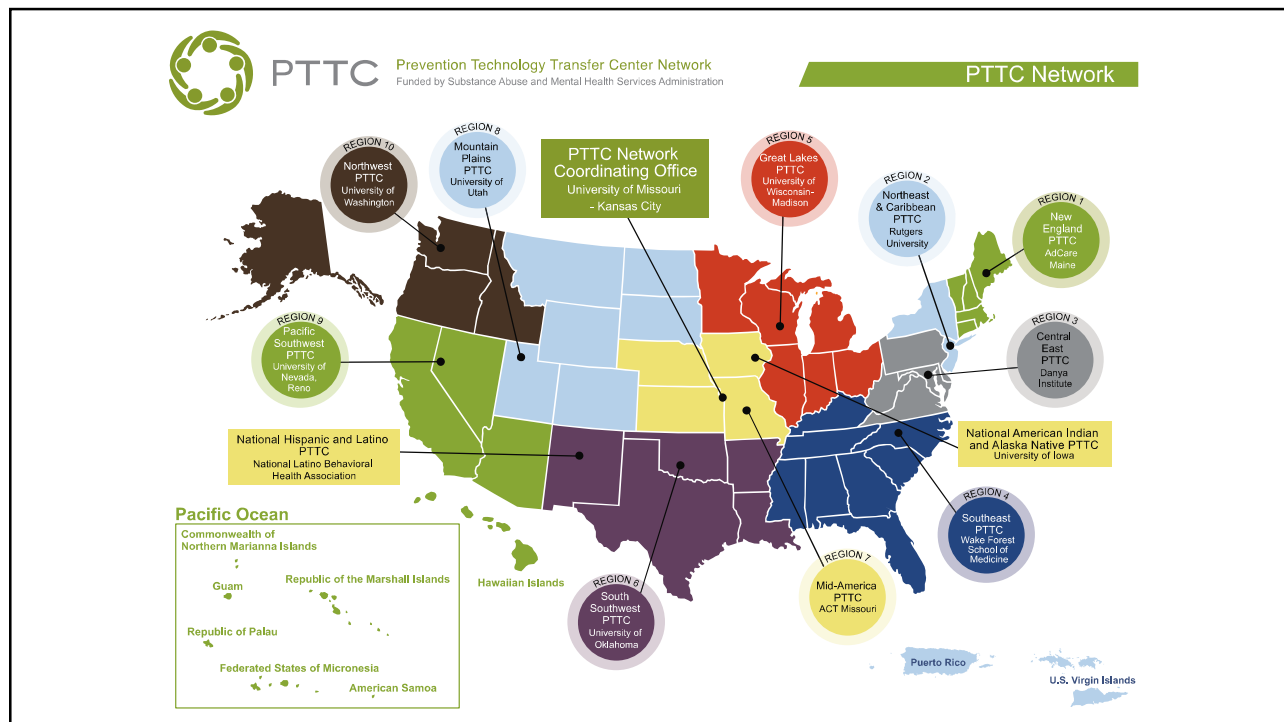
NLBHA PRIORITIES

1. Targeted Capacity Expansion of Mental Health Services for Latinos
2. Latino Behavioral Health Evidenced Based Practices
3. Legislation to increase the number of Counselors/Therapists/Other Behavioral Health Practitioners
4. Funding for Co-Occurring Disorders of Alcohol and Substance Abuse
5. Opioid Crisis in the Latino Community
6. Suicide Prevention

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National Hispanic and Latino Prevention Technology Transfer Center



Pierluigi Mancini, PhD, MAC
Project Director



Dolka Michelle Zelaya, CPS
Project Coordinator



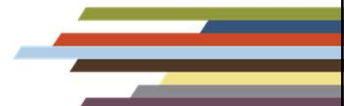
Priscila Giamassi, MPM, CPA
Executive Admin. Assistant



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Today's presenters:



Maite P. Mena, Psy.D



Daniel A. Santisteban, Ph.D.



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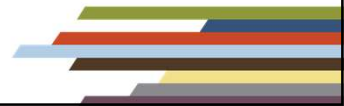
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Suicide Prevention: Identifying and Modifying Risk Factors That Can Lead To Suicide Attempts In Latino Youth

Presented by Daniel A. Santisteban, Ph.D. and Maite P. Mena, Psy.D

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Clarifying Definitions



Prevalence of the Problem

Identifying Risk Factors and the Role of Culture

Modifying Risk Factors to Prevent Suicide Behaviors



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Useful Definitions within the term “Suicidality”

- Self-harm or Non-suicidal self-injury (NSSI): Self-inflicted injurious behavior in which there is evidence that the person did not intend to kill themselves (e.g., cutting, punching self, pulling hair).
- Suicidal Ideation: Thoughts in which self-inflicted death is a desired outcome. This may or may not include a plan.
- Suicide Attempts: Self-inflicted injurious behavior with a non-fatal outcome in which there is evidence that the person did intend to die.
- Suicide



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Self-Harm, Suicidal Ideation, Suicide Attempts, and Suicide are not the same behaviors or individuals



Self-Harming Youth

NSSI youth 7 times more likely to die from suicide

Youth in intense pain or experiencing great frustration and cutting can bring youth back to the moment and out of internal pain

Not necessarily contemplating death or loss of consciousness



Suicide ideation Youth

Thoughts of death and stopping consciousness.

Important to separate ideation from

- Ideation with plans and means, and
- Plans and previous history of attempts and other facilitators (e.g., guns, substance use).



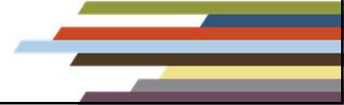
Suicide attempting Youth



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Clarifying Definitions

Prevalence of the Problem



Identifying Risk Factors and the Role of Culture

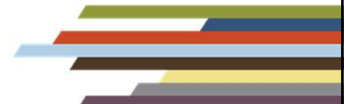
Modifying Risk Factors to Prevent Suicide Behaviors



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Extent of the Problem

Second leading cause of death among adolescents
(CDC, 2017)

2,877 deaths in 2019 in U.S., ages 13-19 years

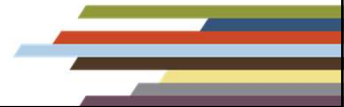
Intervention is designed to prevent later morbidity
and mortality/suicide



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Poll Question #1

Which of the following is true
(check all that apply)?

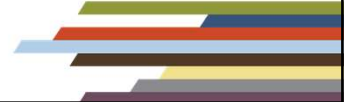
- A.** Females attempt suicide 3-4 times more than males
- B.** Males attempt suicide 3-4 times more than females
- C.** Females complete suicide 3-4 times more than males
- D.** Males complete suicide 3-4 times more than females



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Extent of the Problem

- Self-harm or (NSSI) approximately 17.6 % of youth, more common in females
- Suicidal Ideation (thoughts, plans) Quite common – up to 19% of youth seriously consider suicide.
- Suicide Attempts 3-4 times more common in females
- Suicide 3-4 more common in males

Ivey-Stephenson AZ, Demissie Z, Crosby AE, et al. Suicidal Ideation and Behaviors Among High School Students — Youth Risk Behavior Survey, United States, 2019. MMWR Suppl 2020;69(Suppl-1):47–55. DOI: <http://dx.doi.org/10.15585/mmwr.su6901a6> .



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Clarifying Definitions

Prevalence of the Problem

Identifying Risk Factors and the Role of Culture



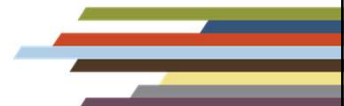
Modifying Risk Factors to Prevent Suicide Behaviors

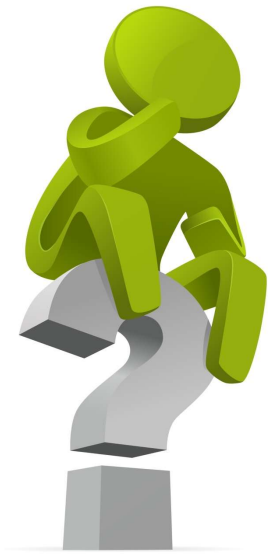


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Poll Question #2

Which of the following can trigger or facilitate a suicide attempt? (check all that apply)?

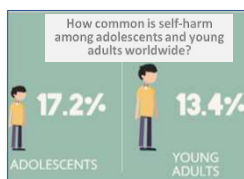
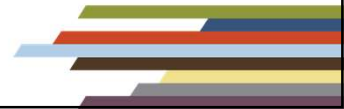
- A. Asking the adolescents questions about suicide risk
- B. Substance use
- C. Glamorizing suicide on TV/Media



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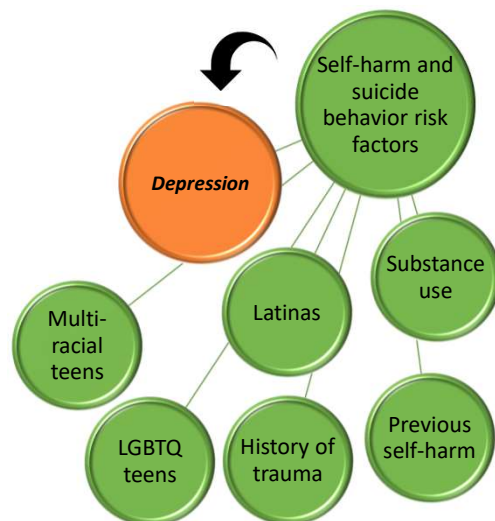
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➔ **5,000 adolescents** in the United States die by suicide every year.

➔ **600,000 United States youth** require medical attention for self-injury each year.



Risk Factors for Suicide-related behaviors and Self-Harm

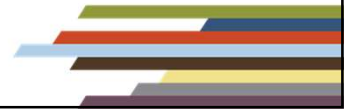
- Depression or Anxiety
- Borderline Personality Disorder
- Previous Attempts
- Emotion Dysregulation
- Poor Self Esteem
- Substance Use
- Bullying and/or Marginalization
- History of abuse
- Lack of family connectedness
- Acculturation
- Cultural dissonance
- Migration experience



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Examples of Triggers to self-harm or suicidal behavior

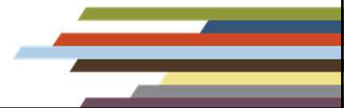
- Break up with partner
- Bullying/harassment/acts of aggressions or racism
- Fight with family member (alienation from loved ones)
- Death of a friend or family member



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Suicide-related behaviors and Self-Harm

Warning Signs:

- Threats of talk of hurting or killing themselves
- Expressing no reason for living
- Agitation, inability to sleep
- Hopelessness, nothing will change
- Social Withdrawal
- Recklessness
- Mood changes
- Increased substance use



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Considering Contextual Factors

- Too often suicide is viewed as an intrapersonal problem with context being overlooked.
- Individual-level factors impact and are impacted by different layers of the environment. They are interconnected.
- Interesting work on the role of culture and context in youth suicide comes from the work of Luis Zayas.

Szlyk, H.S., Gulbas, L., Zayas, L. (2018). "I just kept it to myself": The shaping of Latina suicidality through gendered oppression, silence, and violence. *Family Process*, doi: 10.1111/famp.12384
Standley, C. J. (2020). Expanding our paradigms: Intersectional and socioecological approaches to suicide prevention. *Death Studies*, online first. doi: 10.1080/07481187.2020.1725934

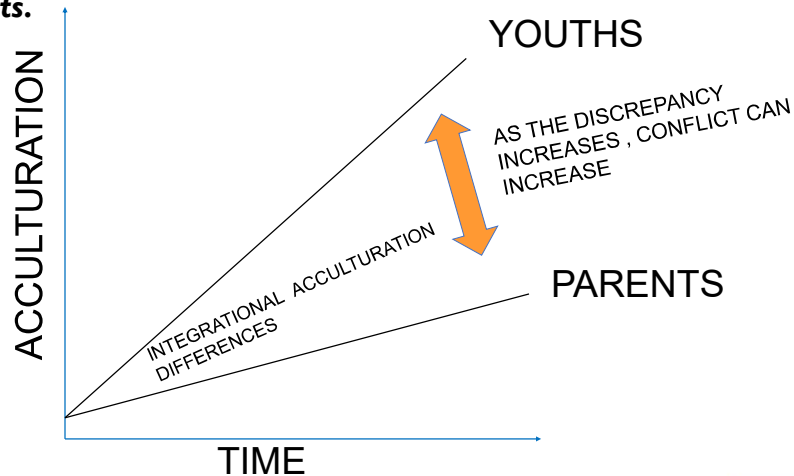


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Some problems in youth may be linked to culture-related conflicts in the family context – largely because youth acculturate much faster than do adults and this can fuel conflicts.



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We have collaborated with an exceptional expert in the field, Dr. Richard Cervantes (developer of the Hispanic Stress Inventory), who conducts research on stressors unique to Latino populations.

In recent research, we found that in Latino:

- Boys, *Acculturation Gap Stress* was associated with *suicidal thoughts* and *Discrimination Stress* was associated with *Suicidal Thoughts* and *Self-Harm Behaviors*.
- Girls, *Family Drug Stress* was associated with *Suicidal Thoughts*. *Acculturation Gap Stress*, *Family Drug Stress*, and *Immigration Stress* were all associated with *Self-Harm Behavior*.

(Cervantes, Goldbach, Varela & Santisteban, 2014)



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LGBTQ Youth and risk

Risk (2-7 times more attempts) is often much higher due to increased discrimination, marginalization, rejection.

The link to culture can also be very important. In some cultures that have a more difficult time accepting LGBTQ youth, there may be more frequent family rejection.

When this happens in children that have a family orientation that endorses the importance of family, this rejection is even more pronounced.



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Poll Question #3

Which of the following is true regarding how culture can impact services for suicide prevention? (check all that apply)?

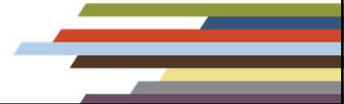
- A.** Latinos parents may feel more stigma related to self-harm and suicide
- B.** Latinos may be less connected to systems that provide services for youth
- C.** Latinos may feel services are not designed to address issues important to them
- D.** Latino families may have a harder time with acceptance of an LGBTQ youth
- E.** Conflicts in the family may be exacerbated by acculturation differences

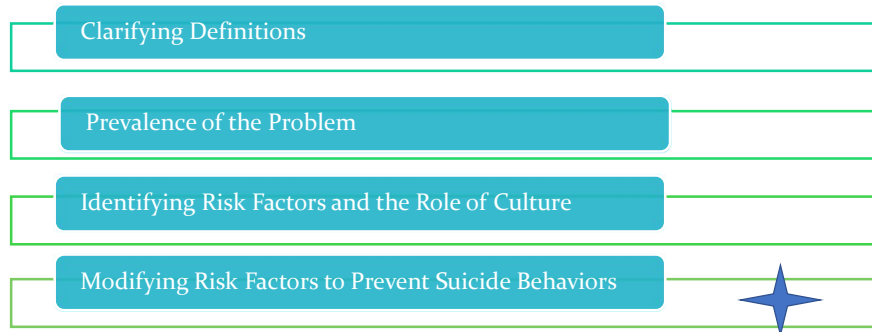


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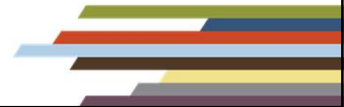
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Prevention efforts can take many forms

Universal Prevention: Universal prevention seeks to reach all people. Strategies include mental health policies, awareness-raising and education, improving access to health care, and population screening.

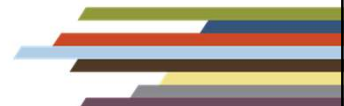
Selective Prevention: Selective prevention interventions begin to identify individuals who have some level of risk. Interventions include gatekeeper training for physicians, counseling of at-risk individuals, the availability of crisis helplines, and interventions for vulnerable people (e.g., those experiencing severe stress).

Indicated Prevention: These interventions include assessment and management of mental disorders associated with suicidal behaviors, community support, and psychosocial follow-up.



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Prevention efforts can take many forms

Universal Prevention:

The intent of universal prevention is to prevent the onset of suicidal thoughts and behaviors by diminishing the effects of individual and environmental risk factors.

Examples include:

- Fostering resilience in youth
- Promoting family, peer, and community connectedness and supports
- Access to culturally appropriate mental health and behavioral health care
- Promoting participation in physical activity such as team sports



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Prevention efforts can take many forms

Indicated Prevention:

This typically includes the treatment of major presenting symptoms and disorders, in the service of preventing suicide. For the treatment of:

- Major Depression
- Emotion Dysregulation/Impulsivity
 - Substance Use
- Co-occurring Disorder

Examples include:

- Dialectical Behavior Therapy for Adolescents
- Cognitive Behavioral Therapy
- Systemic Family Therapy

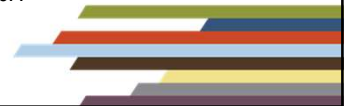
Horowitz, L., Tipton, M.V., Pao, M. (2020). Primary and Secondary Prevention of Youth Suicide. *Pediatrics*, 145, S195. doi: 10.1542/peds.2019-2056H



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Suicide Specific Brief Interventions – Evidence based

- Motivational Interviewing
- Teachable Moment Brief Intervention (TMBI) – a one-time intervention 2 days after an attempt
- Crisis Response Planning & Safety Planning (6 Steps)
- Attempted Suicide Short Intervention Program (ASSIP)

Busby, D.R., Hatkevich, C., McGuire, T.C., King, C.A. (2020). Evidence-Based Interventions for Youth Suicide Risk. *Current Psychiatry Reports*, 22: 5
<https://doi.org/10.1007/s11920-020-1129-6>



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Developing and Carrying Out a Safety Plan

Note that a safety plan is more than a non-suicide pact.

A non-suicide pact states only what NOT to do while a safety plan has specific steps to take

- 1) Making the environment safe – for example getting rid of dangerous medications, fire-arms, etc.
- 2) Identifying the most important and commonly occurring warning signs, thoughts, and feelings
- 3) Developing Internal Coping Strategies – Figuring out which strategies (relaxation, distraction, walks or music) work for the individual to get them through the difficult moment.

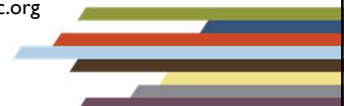


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Suicide Prevention Resource Center, sprc.org



Developing and Carrying Out a Safety Plan

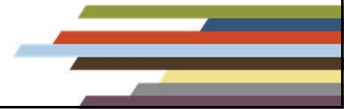
- 4) Identifying people and situations that help in the distraction process.
- 5) Identifying people who can be accessed and talked to when things get a bit more advanced (e.g., down, sad, suicidal). Need more than one because one or two may become overwhelmed.
- 6) Have the names and numbers for hot-lines, treatment or community centers that can be contacted during a crisis.



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Depressed

Low Self-Esteem

Angry

High

Impulsivity



Sadness

- ✓ Hopeless in relation to family conflict
- ✓ Confused about who to support
- ✓ Scared he may need to step in to protect



If you look at the entire family context, his behavior may take on a different meaning

Culturally Informed and Flexible Family Treatment for Adolescents (CIFFTA)

Provides *individual therapy* focused on motivation enhancement, goal setting, identification of triggers & working through identity issues.

Psycho-Educational Modules to teach life skills

Family Therapy to reduce triggers, rejection, and to enhance protective factors.

Cultural factors are integrated at every level (for example, how families cope with immigration and acculturation related stressors).

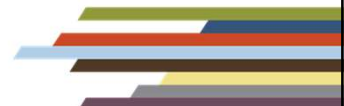
(Santisteban, Mena & McCabe, 2011)
(Santisteban, Mena & Abalo, 2013)
(Santisteban, Czaja, Nair, Mena & Tulloch, 2017)



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CIFFTA Case Study

15-year-old Latina

Presenting Problems

- Cutting starting at age 7
- Sexual abuse history
- Immigration related separation (3 years)

• CIFFTA interventions

Family

- Repair attachment/emotional connection
- Communication

Individual

- Motivational Interviewing
- Preparing for family interactions

Psychoeducational Modules

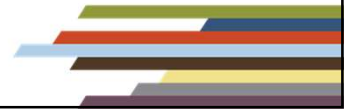
- Separations module
- Acculturation module
- Self-harm
- DBT skills



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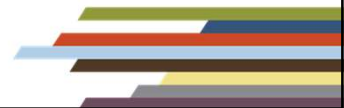
**SAMHSA, NLBHA, PTTC and the
National Institute on Minority Health and Health
Disparities**



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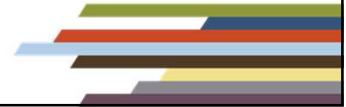
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Resources

- **Talk Saves Lives**™ | AFSP -An Introduction to Suicide Prevention education program <https://afsp.org/>
- **NAMI's Compartiendo Esperanza:** A 90-minute program to increase mental health awareness in Latino communities by sharing the presenters' journeys to recovery and exploring signs and symptoms of mental health conditions. The program also highlight show and where to find help. Compartiendo Esperanza: No Hay Salud Sin Salud Mental Through stories and quotes, this booklet provides mental health information in a sensitive manner. Recovery is possible, and this booklet tells you where to find more information, seek help and be supportive. [You can preview the booklet for free](#) or buy hard copies through the [NAMI Bookstore](#).
- Understanding the Diverse Needs of Children whose Parents Abuse Substances
https://www.who.int/mental_health/prevention/suicide/suicideprevent/en/
- Suicide among Hispanics in the United States:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6103646/#R10>
- Risk and Protective Factors: Hispanic Populations:
http://www.sprc.org/sites/default/files/resource-program/Risk%20and%20Protective%20Factors%20Hispanic_0.pdf
- Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020
<https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm>



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Resources

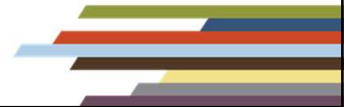
- Communities of Color at Higher Risk for Health and Economic Challenges due to COVID-19
<https://www.kff.org/coronavirus-covid-19/issue-brief/communities-of-color-at-higher-risk-for-health-and-economic-challenges-due-to-covid-19/>
- American Association of Suicidology. "Facts and Statistics."
<https://suicidology.org/facts-and-statistics/>
- National Suicide Prevention Lifeline. 800-273-TALK. www.suicidepreventionlifeline.org
- Society for the Prevention on Teen Suicide. www.sptsusa.org
- Suicide Prevention Resource Center www.sprc.org
- National Action Alliance for Suicide Prevention www.theactionalliance.org
- American Foundation for Suicide Prevention, www.afsp.org
- Trevor Lifeline. A crisis intervention and suicide prevention phone service for LGBTQ available 24/7. www.thetrevorlifeline.org
- Substance Abuse and Mental Health Service Administration (SAMHSA). www.samhsa.gov
- Centers for Disease Control and Prevention (CDC). www.cdc.gov
- National Institute of Mental Health. www.nimh.gov
- National Alliance on Mental Illness. www.nami.org



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Resources

Also, you can visit the following websites for more information.

English: <http://www.suicidepreventionlifeline.org>

National Suicide Prevention Lifeline

Toll Free: 1-888-628-9454 English: 1-800-273-TALK (8255) (TTY): 1-800-799-4TTY (4889)

Crisis Text Line's number (741741).

Spanish: <https://suicidepreventionlifeline.org/help-yourself/en-espanol/>

Línea de Teléfono Nacional de Prevención del Suicidio **1-888-628-9454**.

Lifeline ofrece 24/7, servicios gratuitos en español, no es necesario hablar inglés si usted necesita ayuda.

SAMHSA Behavioral Health Treatment Services Locator Sitio Web: <https://findtreatment.gov>

SAMHSA's National Helpline

Toll-Free: 1-800-662-HELP (24/7/365 Treatment Referral Information Service in English and Español) -Website: <http://www.samhsa.gov/find-help/national-helpline>

SAMHSA's Disaster Distress Helpline

Toll Free: 1-800-985-5990 (español e inglés)

Text in Spanish: Envíe "Háblanos" al 66746 / Text in English: "TalkWithUs" al 66746 / (TTY): 1-800-846-8517

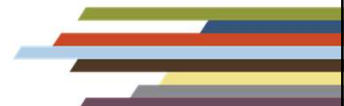
English: <http://www.disasterdistress.samhsa.gov> - Spanish: <https://www.samhsa.gov/disaster-distress-helpline/espanol>



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Resources

- Suicide Prevention (English)
<https://www.youtube.com/watch?v=BmTN0T43Hws&t=1s>
- Prevención del Suicidio (Spanish)
<https://www.youtube.com/watch?v=uKSBB1VINjg&t=1s>
- Prevenção de Suicídio (Portuguese)
<https://www.youtube.com/watch?v=LlgHRf-Nb9c&t=1s>



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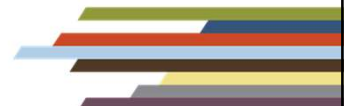
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For more information and **FREE** training and technical assistance you can reach us at:

PTTCnetwork.org/hispaniclatino

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Thank you!
¡Gracias!
Obrigado!

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