



Central East (HHS Region 3)

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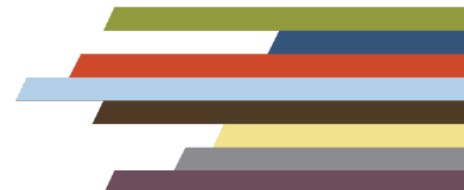
Prevention Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Substance Use and Risk of Suicide

February 10, 2021

Thank you for joining us today.
We will begin promptly at **1:00 PM Eastern.**



Technical Information



Substance Abuse and Mental Health
Services Administration

This training was developed under the Substance Abuse and Mental Health Services Administration's Prevention Technology Transfer Center task order.

For training use only.

Funding for this presentation was made possible by SAMHSA grant no.1H79SP081018. The views expressed by speakers and moderators do not necessarily reflect the official policies of HHS; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

LIVE

This webinar is now live.



It is being recorded
and archived.



Please remain muted.



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Welcome



Central East PTTC Webinar:

Substance Use and Risk of Suicide

The Central East PTTC is housed at the Danya Institute in Silver Spring, MD

Renata Henry
Executive Director

Deborah Nixon Hughes
Project Director



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Each TTC Network includes 13 centers.*



Network Coordinating Office

National American Indian and Alaska Native Center

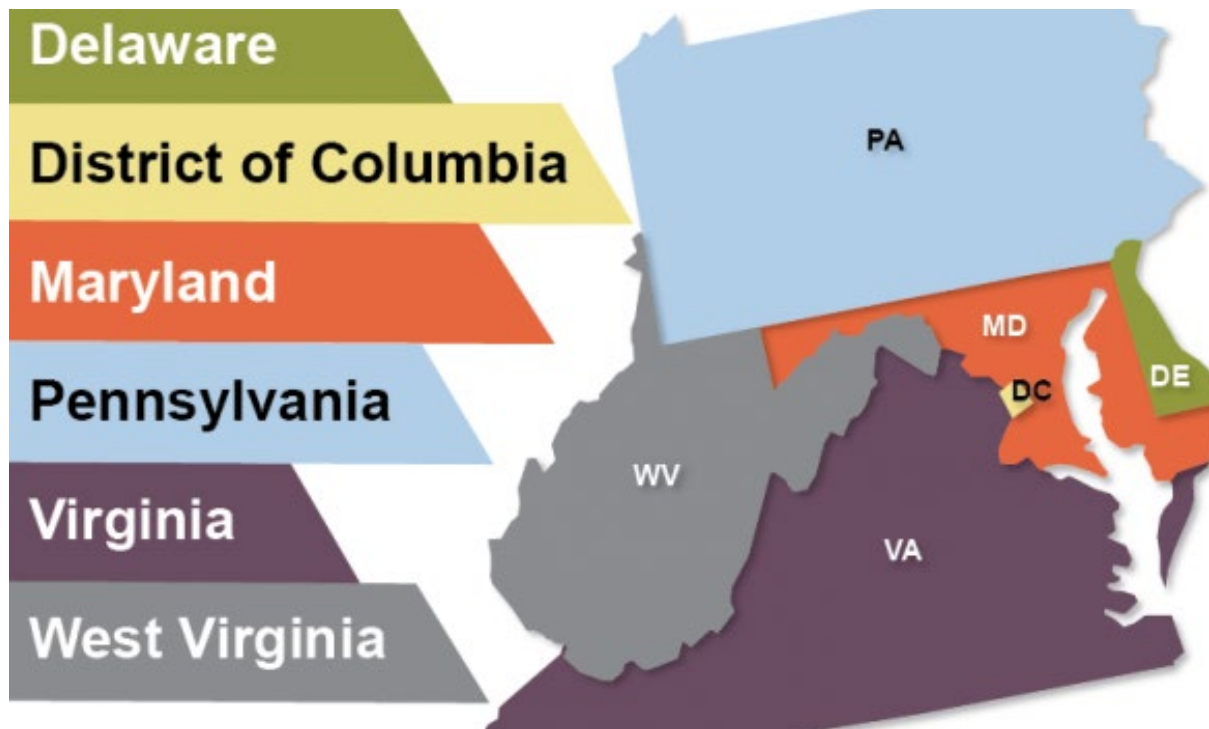
National Hispanic and Latino Center

10 Regional Centers (aligned with HHS regions)

**The ATTC Network also includes 4 international HIV centers funded by the President's Emergency Plan for AIDS Relief.*

Central East Region

HHS REGION 3



Eligibility

Behavioral health and health care providers, consumers, families, state and local public health systems and other stakeholders

**Consistent with
Regional, State
and Local
Needs**

No cost

Data Driven

**EBPs provided
by Subject
Matter Experts**





The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.

What We Do

- **Accelerate** the adoption and implementation of evidence-based and promising treatment and recovery-oriented practices and services
- **Strengthen** the behavioral health awareness, knowledge, and skills of the health care and prevention workforce that address the needs of people with behavioral health disorders
- **Foster regional** and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community
- **Ensure** the availability and delivery of publicly available, free of charge, behavioral health training and technical assistance to health care and prevention professionals



PTTC Mission



To Strengthen **the** Capacity **of the** Workforce to
Deliver Evidence-Based Prevention Strategies **and**
Facilitate Opportunities **for** Preventionists to
Pursue New Collaboration Opportunities, **which**
include Developing Prevention Partnerships **and**
Alliances



Central East PTTC Specialty Area

Engaging and Collaborating with Primary Care Providers for Substance Use Prevention



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PTTC Focus Areas

- Opioid/harm reduction strategies
- Suicide prevention and substance use overdoses
- Youth vaping/tobacco
- Youth alcohol and suicide
- Health equity and the elimination of disparities
- Trauma
- Workforce leadership development series-
strategic planning/SPF; data-informed decision-
making; environmental strategies



Other Resources in Region 3



Central East (HHS Region 3)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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Prevention Technology Transfer Center Network

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Substance Use and Risk of Suicide

February 10, 2021

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Presenters



Josh Esrick
Presenter



Emily Patton
Presenter



Key Objectives

- Examine the scope of suicide risk and the populations most at-risk for suicide
- Summarize the scope of substance use-involved fatalities and the impact of suicide
- Discuss the research on the connections between substance use and risk of suicide
- Overview evidence-based programs for preventing substance use and suicide, as well as other opportunities for collaboration



Central East PTTC Product

- PTTC-produced public product, a literature review covering:
 - Background data on the scope of opioid misuse, alcohol misuse, and risk and rates of suicide
 - How opioids and alcohol increase the risk of suicide
 - Evidence-based prevention strategies that address opioid or alcohol misuse and risk of suicide



Background on Suicide

- In 2019, 47,500 people in the U.S. died from suicide (CDC)
 - 10th leading cause of death overall
 - Has been top-12 every year since 1975
 - 2nd leading cause of death for ages 10-34
- Rates of suicide steadily increased from 1999-2018 (NIMH)
 - Slight decline in suicides in 2019 (2.1%), but a large increase is anticipated for 2020
 - 792,867 U.S. deaths from 1999-2019



Background on Suicide

- Suicide and suicide attempts are types of self-directed violence
 - Lifetime prevalence rate for self-directed violence ~6 percent
 - Estimates range from 1 in 9 to 1 in 25 suicide attempts result in suicide (Canner et al, 2018)
 - About 650,000 people are treated by hospital emergency departments each year after suicide attempts (SAMHSA)



Demographics of Suicide

- Highest rates of suicide occur among American Indians/Alaska Natives and White populations
- Ethnic minorities account for 15% of suicide deaths (Caetano et al., 2015)
- Suicide has increased in younger populations, however most deaths occur for those around middle-age/older adults
- Men experience a suicide death rate 4x higher than women, however women attempt suicide at a higher rate (AFSP, 2020)



Populations Most At-Risk (SAMHSA)

- Individuals who have attempted suicide previously
- Individuals who experience chronic pain
- American Indians/Alaska Natives
- Individuals who have lost someone to suicide
- Individuals in justice and child welfare settings
- Individuals who participate in non-suicidal self-injury
- Members of the armed forces as well as veterans
- Members of the LGBTQ+ community
- Men in midlife and older men
- Individuals who have a mental health and/or **substance use disorder(s)**



Impact of COVID-19

- The nature of pandemics increase the risk factors associated with suicide as well as those for substance abuse (Moutier, 2020; Ornell et al., 2020; CDC, 2020; Firth, 2020; Mann, 2020)
 - Isolation
 - Anxiety/Stress/Depression
 - Physical Health
 - SUD diagnosis
 - At-Risk Populations



COVID-19 (CDC)

- Survey data from the CDC in June of 2020 looked at mental and behavioral health impact of the pandemic
 - 40.9% of respondents reported at least one adverse mental or behavioral health condition
 - 13.3% reported they had started or increased substance use to cope with pandemic-related stress or emotions
 - 10.7% reported they had contemplated suicide in the last 30 days
- Specific populations are disproportionately affected
 - Young adults, Hispanic persons, black persons, essential workers, unpaid caregivers for adults, and those receiving treatment for preexisting psychiatric conditions



Linking Suicide to Substance Use

- Research has shown that substance use, in particular opioid or alcohol misuse, directly increases the risk of suicide (SAMHSA, 2016; CDC)
 - 22 percent of suicides involve alcohol intoxication
 - 20 percent of suicide involve opioids
- Both substance use and thoughts of suicide can stem from underlying mental health issues



Prevalence of Substance Use (SAMHSA)

Recent data (2019) from the United States found that:

- About 1 in 12 individuals experienced a substance use disorder (SUD) = 20.4 million people aged 12 or older
- 10.1 million people misused opioids
 - Most commonly prescription pain relievers, either on their own or in conjunction with heroin
- 5.3% of Americans experienced an alcohol use disorder
 - 65.8 million Americans were regular binge drinkers



Substance Use Fatalities (CDC)

- Between 1999 and 2019, the fatal drug-involved overdose rate increased 319%
- 16,849 fatal overdoses in 1999 compared to 70,630 in 2019
- Fatal opioid overdoses experienced the largest number of additional overdose deaths, from 8,050 in 1999 to 49,860 in 2019
- Estimates of alcohol-induced related deaths are of up to 95,000 every year (NIAAA)



Substance Use and Suicide

- Suicide is the leading cause of death among individuals who are misusing substances
- Those with an SUD experience a 7 percent lifetime risk of a fatal suicide (Miller et al., 2016)
- Both suicide and substance use are connected to and impacted by adverse life experiences
- Substance use and suicide share many of the same risk factors



Alcohol and Suicide

- Alcohol has been closely associated with suicide, with acute alcohol intoxication is present 30%-40% of the time when an attempted suicide occurs (SAMSHA, 2016)
- Heavy alcohol drinkers have a 5-10 times higher risk of suicide
- Those who abuse alcohol experience a 10%-15% lifetime risk for suicide (Pompili, 2010)
- Impulse control, risky behavior, impaired cognitive abilities, and mental health issues can all be influenced by alcohol leading to a higher risk of suicidal behaviors



Opioids and Suicide

- Opioids cover both prescription medications as well as illicit substances, such as heroin
- Frequent opioid misuse (in the past and currently) can increase suicidal ideation, planning, and the number of attempts
- Older adults (age 50+) had an 84% increase in suicidal ideation if they were misusing prescription opioids (Schepis, 2019)
- Opioid overdose is the 2nd most common cause of death (16.2%) for individuals experiencing chronic pain (Ilgen, 2018)
 - One study found opioids present in 52% of chronic pain suicides



Opioids and Suicide

- Some research suggests that there may be an underreporting of opioid related suicides
 - Data from the U.S. National Violent Death Reporting System
 - Designating ‘suicide from drug intoxication’ as a person’s cause-of-death often requires meeting a significantly higher set of criteria than for other common causes of mortality
 - Most common form of attempted suicide is drug ingestion, highest fatalities with firearms and hanging



Summary of Evidence-Based Practices

- Because of the connections between substance use and suicide, there are often opportunities for collaboration between service providers
- But few EBPs *in prevention* exist to address both issues
 - Suicide prevention more commonly collaborates with substance use treatment
- However, the evidence that does exist suggests greater collaborations may be possible
 - Verified screening tools
 - Environmental strategies
 - Others?



Screening Tools

- Studies have identified screening tools effective at identifying people at-risk for substance use and at-risk for suicide
 - Addiction Brief RiskScale Assessment
 - Stratification Tool for Opioid Risk Mitigation
 - Reynolds Adolescent Depression Scale-2: Short Form & Alcohol Use Disorders Identification Test
 - Ask Suicide-Screening Questions & HEADS-ED
- Interactive Voice Recording Surveys can be effective methods of data collection



Collaborating with Screening Tools

- These screening tools can identify people at-risk for substance use and at-risk for suicide
 - Meaning they identify people who may benefit from substance use prevention and suicide prevention services
- Even if there is not a single EBP to address both needs, many EBPs to address either issue exist
- All service providers can benefit from expanded surveillance to identify people in need of services
- Prevention organizations could consider partnering with suicide prevention organizations to expand screening services



Environmental Strategies- Alcohol

- Research identified several environmental strategies significantly associated with reducing rates of alcohol misuse and of suicide, including:
 - Increasing alcohol taxation rates
 - Increasing the minimum legal drinking age
 - Decreasing density of alcohol retail outlets
 - Enforcing zero tolerance laws
 - Implementing alcohol misuse awareness campaigns
 - Municipalizing/nationalizing alcohol retail outlets
 - Regulating extremely high proof alcohol products



Environmental Strategies- Opioids

- Prescriber education significantly associated with reduced rates of opioid misuse, risk of suicide, and unintentional fatal overdose
- Prescription drug monitoring programs are significantly associated with reduced rates of opioids misuse, may reduce risk of suicide as well
- Many other strategies found to reduce rates of misuse and unintentional fatal overdose, but have not been assessed for potential suicide impact



Environmental Strategy Collaboration

- Environmental strategies are broad context changes that often require outside stakeholder support to enact
 - See February 25, 2020 PTTC webinar for more information on environmental strategies
- Substance use prevention and suicide prevention stakeholders could work together to educate and advocate for strategies mutually beneficial to their goals
 - Including developing materials (e.g. for opioid prescribers)



Other Opportunities for Collaboration

- Implementing EBPs is important; they give the greatest confidence that our efforts will be effective
- However, it is only through research, and pilot programs, that new EBPs can be identified and disseminated
- If your needs assessment finds that co-occurring risk of substance use and suicide is an issue in populations that you are serving, consider whether the capacity exists to test new initiatives



Contact Us



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Funded by Substance Abuse and Mental Health Services Administration

a program managed by



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