

COVID-19 & SUICIDE PREVENTION: UNIQUE CONSIDERATIONS AND THE NEED FOR INCREASED AWARENESS

ASSOCIATION OF CLINICIANS FOR THE UNDERSERVED
THURSDAY, NOVEMBER 18, 2021

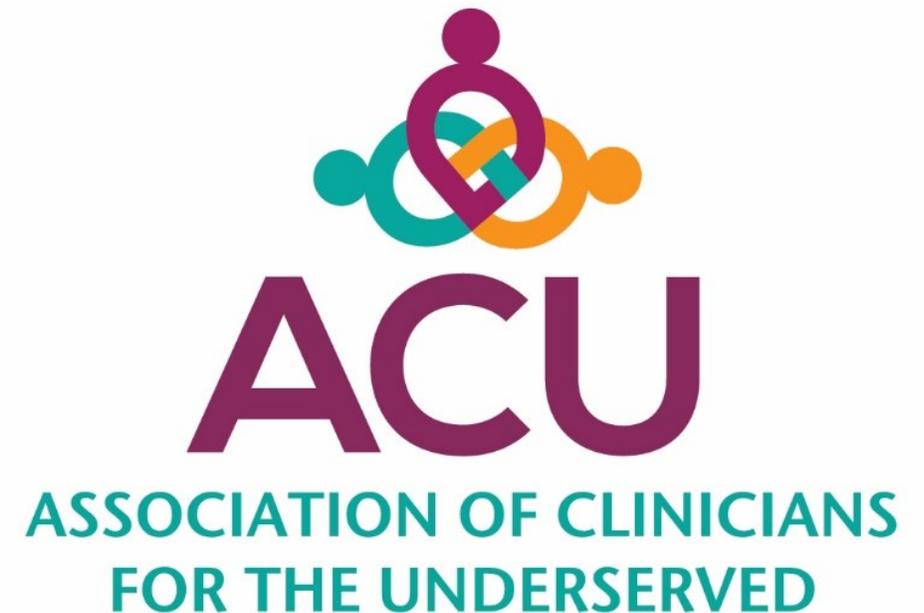
INTRODUCING ACU



A TRANSDISCIPLINARY MEMBERSHIP ORGANIZATION

We unite clinicians, advocates, and organizations in the shared mission to:

- **improve the health of America's underserved populations** and to
- **support the clinical workforce** providing care to those communities.



www.clinicians.org

MORE ON SUICIDE SAFER CARE



FACT SHEET: COVID-19: THE NEED FOR INCREASED AWARENESS AROUND RISK FOR SUICIDE

More resources are available at bit.ly/suicidesafer, including the fact sheet and our Suicide Safer Care toolkit.

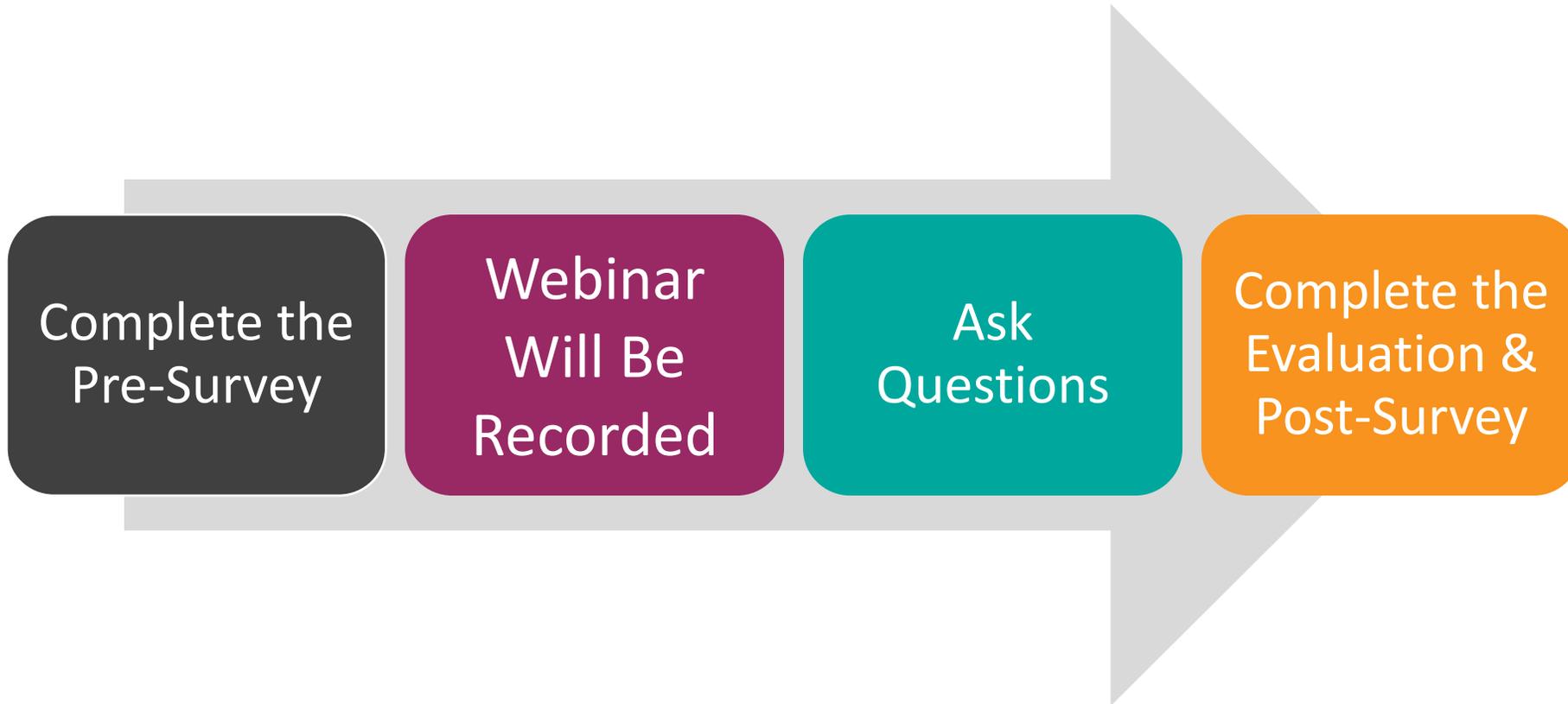


**COVID-19: THE NEED FOR INCREASED
AWARENESS AROUND RISK FOR SUICIDE**

Virna Little, PsyD, LCSW-r, SAP, CCM



WEBINAR HOUSEKEEPING



OUR SPEAKERS



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Considerations for Suicide Safer Care and Increased Mental Health Awareness During the Pandemic

Dr. Virna Little

Dr. Bart Andrews

Public Health Problems

- 2018 deaths among all ages
 - Influenza and pneumonia: ~55,000 deaths a year = 150 per day
 - Among 10 to 24-year-olds: ~241 deaths a year = 4 per week



- Motor vehicle accidents: ~39,000 deaths = 108 deaths a day
 - Among 10 to 24-year-olds: ~7,000 deaths = 19 deaths a day



- Suicide: ~ 48,000 deaths = 132 deaths a day
 - Among 10 to 24-year-olds: ~ 6,800 deaths = 18 deaths a day



CDC, 2018



Impact on Adults

- Job loss, social isolation, the media, fear of the virus, knowing someone who died by the virus, are all factors that have been quickly thrown at all of us who were likely not ready to respond to such significant changes so quickly.
- In June 2020, 13% of adults reported new or increased substance use due to coronavirus-related stress.
- In January of 2021, 41% of adults reported symptoms of anxiety and/or depressive disorder. 40% reported in June of 2020.
- Infection case rates, hospitalizations, and death rates among Black, Latinx, and Native Americans in the U.S. were two to five times higher than among the white population.



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- More deaths in one year than EVER before: 100,306 up from 78,056
- Impact of “stay at home” for individuals with addiction
- Overdose safety planning ([Zerooverdose.com](#))

Overdose Deaths and Covid

During late June, 40% of U.S. adults reported struggling with mental health or substance use^{*}

ANXIETY/DEPRESSION SYMPTOMS



STARTED OR INCREASED SUBSTANCE USE



TRAUMA/STRESSOR-RELATED DISORDER SYMPTOMS



SERIOUSLY CONSIDERED SUICIDE[†]



^{*}Based on a survey of U.S. adults aged ≥18 years during June 24-30, 2020

[†]In the 30 days prior to survey

For stress and coping strategies: bit.ly/dailylifecoping

Impact on Parents and Families

In a survey conducted by Monroe Carell Jr. Children's Hospital at Vanderbilt and Ann & Robert H. Lurie Children's Hospital of Chicago in June of 2020 provided to parents with a child under 18 they found:

- 1 in 3 parents shared they had cancellations or delays with their child's health care.
- 24% shared they lost childcare; most were children aged 0-5.
- 14% reported an increase in their child's negative behavior.
- 1 in 7 (27%) parents expressed that their mental health has declined.

Impact on Children

- Children and adolescents were greatly impacted by the abrupt withdrawal from school, social life, and outdoor activities. Some of them also experienced domestic violence growing. The stress they are subjected to directly impacts their mental health.
- Black, Latinx, and Native American youth have been disproportionately affected by the pandemic.
- Poverty and financial inequality have further exacerbated the effects of the pandemic among poor youth.

Youth Suicidal Behavior and Ideation

- **2019 Youth Risk Behavior Survey (YRBS)**
 - 8.9% of high school students attempted suicide one or more times in the past year
 - 18.8% of high school students reported “seriously considering attempting suicide” in the past year



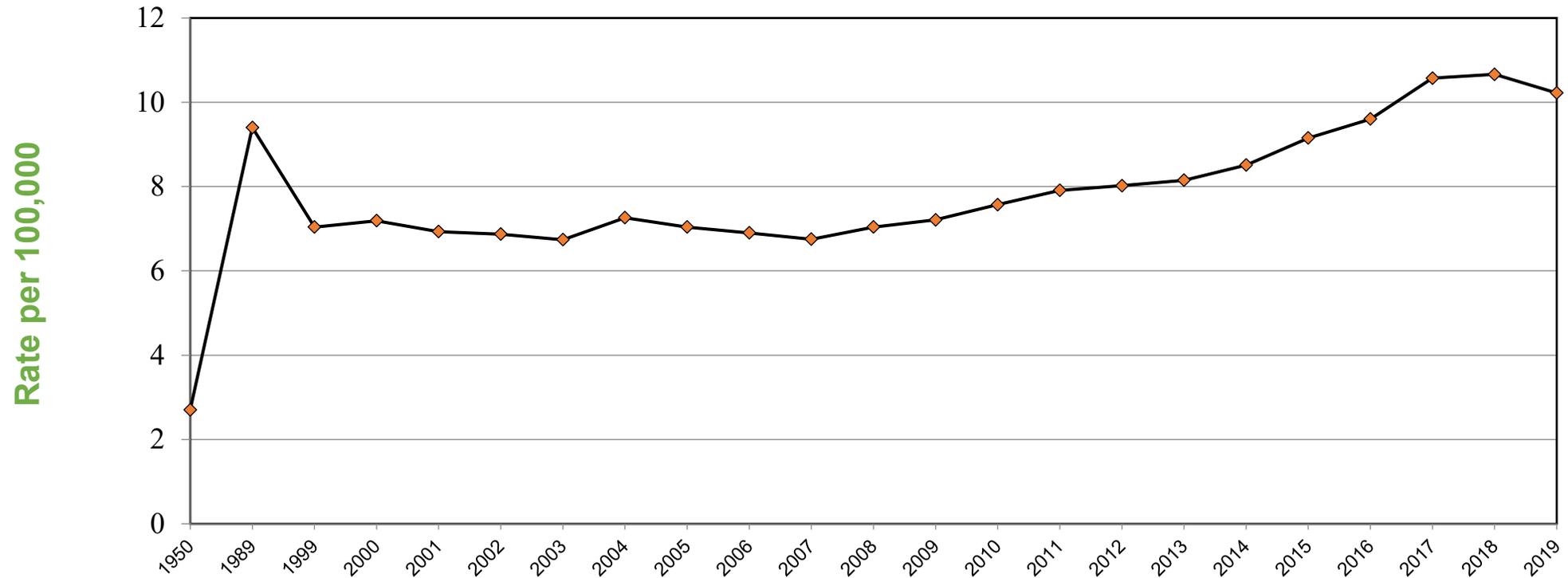
CDC, 2019

Adolescent Suicide Prevention and Medical Settings  SPRC

Youth Suicide in the U.S.

- 2nd leading cause of death for youth ages 10 to 24
- 24,587 total deaths in 2019: 6,488 (26%) deaths by suicide

Suicide Deaths among U.S. Youth Ages 10 to 24



Younger Children and Suicidality

- Children under 12 plan, attempt, and die by suicide
-



BRIEF REPORT

The Importance of Screening Preteens for Suicide Risk in the Emergency Department

Elizabeth C. Lanzillo, BA,^a Lisa M. Horowitz, PhD, MPH,^a Elizabeth A. Wharff, PhD,^b Arielle H. Sheftall, PhD,^{c,e} Maryland Pao, MD,^a Jeffrey A. Bridge, PhD^{c,d,e}

- 29.1% of preteens (10-12) screened positive for suicide risk (Lanzillo et al., 2019)
-

JAMA Pediatrics

RESEARCH LETTER

Suicidal Attempts and Ideation Among Children and Adolescents in US Emergency Departments, 2007-2015

- 43.1% of SA/SI visits to an emergency department were for children ages 5-11 (Burstein et al., 2019)
-

JAMA Pediatrics

Original Investigation

Suicide Trends Among Elementary School-Aged Children in the United States From 1993 to 2012

- Racial disparity for children <12: ↑ rate for black children ↓ rate for white children (Bridge et al., 2015)
-

Impact on Senior Citizens

Older adults have been especially impacted by the coronavirus pandemic

They are at higher risk of serious illness if infected and account for 80 percent of all COVID-related deaths.

Current public health guidelines recommend older adults limit in-person social interactions as much as possible. This contributes to social isolation and loneliness.

Older Hispanic adults reported anxiety or depression at higher rates (33%) than older non-Hispanic White adults (23%), non-Hispanic Black adults (26%) and non-Hispanic Asian adults (17%).

In a survey conducted by KFF in August of 2020, 10,903,904 adults over 65 reported anxiety or depression. This calculates to 1 in 4 compared to 1 in 10 in 2018.

Sadly, many of the senior citizens who died because of the virus did not have funerals or time with their families before they passed away. The significant number of deaths in older adults during the beginning days of the pandemic are horrifying.

Impact on Suicide

The COVID-19 crisis has created many different risk factors.

In a report by ACU called “Covid-19 and Suicide: The Need for Increased Awareness Around Risk for Suicide:”

- Risk factors include unemployment rates being so high as well as gun sales for first time buyers have skyrocketed (guns are the #1 used weapon in death by suicide by men).
- 11% of adults reported thoughts of suicide in the past 30 days. Suicide rates have long been on the rise and may worsen due to the pandemic (Early 2020 data show that drug overdose deaths were significant from March to May 2020, coinciding with the start of pandemic related lockdowns)
- Prior to the pandemic, suicide was found to be the 10th leading cause of death for all ages in the US, with over 47,000 individuals dying by suicide each year.⁹ For individuals ages 10-34, suicide is the 2nd leading cause of death, after unintentional injury.

Evidence suggests that suicide rates may not go up until life after the pandemic. So it is best to monitor for signs and be proactive.

“Let’s dial 988 to stop suicides”

- NASMHPD (National Association of State Mental Health Program Directors) wrote an article presenting The National Suicide Hotline Designation Act of 2020 designating 988 as the national number for suicide prevention and mental health crisis response.
- The goal is to have an improved mental health and suicide crisis response system in the U.S., 988 becomes functional on July 16, 2022
- Currently, The National Suicide Prevention Lifeline developed in 2012 can be reached by dialing 1-800-273-TALK (8255) **This will be replaced by 988**

Table 1. Volume of Calls, Chats, and Texts Received in 2020

	Centers	Calls received	Chats received	Texts received
National Suicide Prevention Lifeline	Over 180 ⁱ	1,833,953 ⁱⁱ	586,703	34,166
Veterans Crisis Line (VCL)	3 ⁱⁱⁱ	679,549	80,053	35,489
Disaster Distress Helpline (DDH)	3 ^{iv}	60,188	n/a	11,444

Identification

- Many offices/ providers are screening for depression
- Ask patients directly (ask what you want to know)
- Social determinants play a role
- Many patients don't have depression
- Substance and alcohol use play a role
- Transitions are a time of risk

"I have started to ask all of my patients about suicide..."



The Patient Health Questionnaire (PHQ-9)

The Patient Health Questionnaire (PHQ-9)

Patient Name _____ Date of Visit _____

Over the past 2 weeks, how often have you been bothered by any of the following problems?

	Not At all	Several Days	More Than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself - or that you're a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

Column Totals _____ + _____ + _____

Add Totals Together _____

10. If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all Somewhat difficult Very difficult Extremely difficult

PHQ-9 modified for Adolescents (PHQ-A)

Name: _____ Clinician: _____ Date: _____

Instructions: How often have you been bothered by each of the following symptoms during the past **two weeks**? For each symptom put an "X" in the box beneath the answer that best describes how you have been feeling.

	(0) Not at all	(1) Several days	(2) More than half the days	(3) Nearly every day
1. Feeling down, depressed, irritable, or hopeless?				
2. Little interest or pleasure in doing things?				
3. Trouble falling asleep, staying asleep, or sleeping too much?				
4. Poor appetite, weight loss, or overeating?				
5. Feeling tired, or having little energy?				
6. Feeling bad about yourself – or feeling that you are a failure, or that you have let yourself or your family down?				
7. Trouble concentrating on things like school work, reading, or watching TV?				
8. Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you were moving around a lot more than usual?				
9. Thoughts that you would be better off dead, or of hurting yourself in some way?				

In the **past year** have you felt depressed or sad most days, even if you felt okay sometimes?
 Yes No

If you are experiencing any of the problems on this form, how **difficult** have these problems made it for you to do your work, take care of things at home or get along with other people?
 Not difficult at all Somewhat difficult Very difficult Extremely difficult

Has there been a time in the **past month** when you have had serious thoughts about ending your life?
 Yes No

Have you **EVER** in your **WHOLE LIFE**, tried to kill yourself or made a suicide attempt?
 Yes No

***If you have had thoughts that you would be better off dead or of hurting yourself in some way, please discuss this with your Health Care Clinician, go to a hospital emergency room or call 911.*

Office use only: _____ **Severity score:** _____



Suicide Risk Screening Tool

Ask Suicide-Screening Questions

Ask the patient:

- In the past few weeks, have you wished you were dead? Yes No
- In the past few weeks, have you felt that you or your family would be better off if you were dead? Yes No
- In the past week, have you been having thoughts about killing yourself? Yes No
- Have you ever tried to kill yourself? Yes No
If yes, how? _____

When? _____

If the patient answers **Yes** to any of the above, ask the following acuity question:

- Are you having thoughts of killing yourself right now? Yes No
If yes, please describe: _____

Next steps:

- If patient answers "No" to all questions 1 through 4, screening is complete (not necessary to ask question #5). No intervention is necessary. (*Note: Clinical judgment can always override a negative screen).
- If patient answers "Yes" to any of questions 1 through 4, or refuses to answer, they are considered a **positive screen**. Ask question #5 to assess acuity:
 - "Yes" to question #5 = **acute positive screen** (imminent risk identified)
 - Patient requires a **STAT** safety/full mental health evaluation.
 - Patient **cannot leave until evaluated for safety**.
 - Keep patient in sight. Remove all dangerous objects from room. Alert physician or clinician responsible for patient's care.
 - "No" to question #5 = **non-acute positive screen** (potential risk identified)
 - Patient requires a **brief suicide safety assessment to determine if a full mental health evaluation is needed**. Patient **cannot leave until evaluated for safety**.
 - Alert physician or clinician responsible for patient's care.

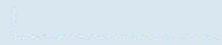
Provide resources to all patients

- 24/7 National Suicide Prevention Lifeline 1-800-273-TALK (8255) En Español: 1-888-628-9454
- 24/7 Crisis Text Line: Text "HOME" to 741-741

The Minimum WHAT (to do)

BEFORE THEY LEAVE YOUR OFFICE

- Suicide Prevention Lifeline or Crisis Text Line in their phone
–1-800-273-8255 and text the word “Hello” to 74174
- Give them a caring message (NowMattersNow.org ↗ “More”)



Safety Plan

NowMattersNow.org Emotional Fire Safety Plan

Select boxes that fit for you. Add your own. Form is based on research and advice from those who have been there. Visit nowmattersnow.org/safety-plan for instructions (coming soon). Do not distribute. ©2018 All Rights Reserved (V 18.05.27)

ON FIRE

Direct advice for overwhelming urges to kill self or use opioids

— **Shut it down** —

Sleep (no overdosing). Can't sleep? Cold shower or face in ice-water (30 seconds and repeat). This is a reset button. It slows everything way down.

— **No Important Decisions** —

Especially deciding to die. Do not panic. Ignore thoughts that you don't care if you die. Stop drugs and alcohol.

— **Make Eye Contact** —

A difficult but powerful pain reliever. Look in their eyes and say "Can you help me get out of my head?" Try video chat. Keep trying until you find someone.

IN A FIRE

Things I Know How To Do for Suicidal Thoughts and Urges to Use (practice outside of crisis situations)

<input type="checkbox"/> Visit NowMattersNow.org (guided strategies)	<input type="checkbox"/> Opposite Action (act exactly opposite to an urge)
<input type="checkbox"/> Paced Breathing (make exhale longer than inhale)	<input type="checkbox"/> Mindfulness (choose what to pay attention to)
<input type="checkbox"/> Call/Text Crisis Line or A-Team Member (see below)	<input type="checkbox"/> Mindfulness of Current Emotion (feel emotions in body)
<input type="checkbox"/> "This makes sense: I'm stressed and/or in pain"	<input type="checkbox"/> "I can manage this pain for this moment"
<input type="checkbox"/> "I want to feel better, not suicide or use opioids"	<input type="checkbox"/> Notice thoughts, but don't get in bed with them
<input type="checkbox"/> Distraction:	<input type="checkbox"/>

Caring Contact

Henry,
I don't know you well yet, I am glad that you told me a little more about your life. I have lots of hope for you – you've been through a lot. I hope you'll remember that and come back to see us. With care, -Nurse Matt

Caring Messages

Caring Messages

We asked over 1000 people. Here are the top results.
Please use and adapt these any way you like for those you care about.

Dear you. Yes you! Remember that one time you felt connected to the universe. No one can take that away from you. It's yours.

— Ursula Whiteside

You may feel you don't matter but you do and see no future. Yet it is there - please let it evolve because the world needs you and your contribution.

— Kristine Laaninen

When things have been rough, I think of things or touch items that give me a sense of pride, joy, encouragement, or hope. Sometimes memories that remind me I'm okay and things often change quickly. I don't know if that would help for you.

— Daniel DeBrule

Please don't stop fighting. You are being prepared for something far greater than this moment.

— Breanna Laughlin

I was trapped in the Dark Place. Drowning in it. Lost in the fog. Sinking in the quicksand. Unable to get out. Slowly, slowly, slowly; I am. You might be able to too. Just get through today.

— Amy Dietz

I've found this Franklin D. Roosevelt quote helpful, "A smooth sea never made a skilled sailor." We'll be prepared for something bigger.

— Ursula Whiteside

Just like winter, the long dark days slowly get shorter until there is more light than dark. Please believe this while you wait to see the light.

— Debbie Reisert

You're a human being, not a human doing. Your worth is intrinsic, and your strength is likely greater than you think it is.

— John Brown

If I could fill the world with more people who feel the world, I would. Understanding suffering is a heavy burden to carry at times for sure - but you are never a burden for feeling it.

— Nina Smith

This is part of a poem from Jane Hirschfield, "The world asks of us only the strength we have and we give it. Then it asks more, and we give it."

— Sara Smucker Barnwell

Things can be completely dark for some of us sometimes. I don't know where you are at today, or if this message can shine through, but I'm here sending you a tiny bit of light - a light beam.

— Ursula Whiteside

Live. If only, at times, because it is an act of radical defiance.

— Ursula Whiteside

Your story doesn't have to end in this storm. Please stay for the calm after the storm. The possibly a rainbow. Maybe not tomorrow or next week, but you can weather this.

— Breanna Laughlin

I've been there- that place where you'd do anything to stop the pain. It's a dark, suffocating birth canal to a better place...Life changes can suck; but nothing ever changing sucks more.

— Kathleen Bartholomew

This is a favorite line of mine from Desiderata, "You are a child of the universe, no less than the trees and the stars; you have a right to be here."

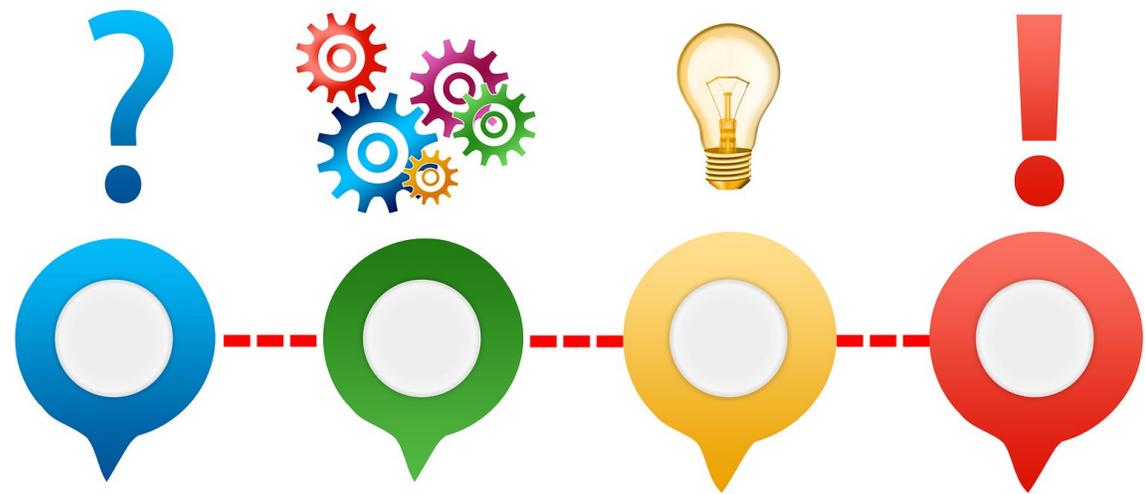
— Andy Bogart

Wanting to be rid of pain is the most human of impulses. You are brave to hold that. You are worth so much. Because you exist. And breathe air. Contingent on nothing else.

— Sara Smucker Barnwell

now
matters
now

Questions



LAST STEPS



Complete Evaluation &
Post-Survey

Further Questions