

# THIRD NATIONAL CONFERENCE

June 3, 2022 | Broadcast virtually



American  
Foundation  
for Suicide  
Prevention



YSRC

BRYN  
MAWR  
COLLEGE

## Harnessing Community Strengths: Changing Systems for Youth Suicide Prevention

# MISSION STATEMENT

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We are an interdisciplinary network of researchers dedicated to the study of youth suicidal behavior among diverse populations (i.e., diversity based on race, ethnicity, socioeconomic status, gender, sexual orientation, and ability), with an emphasis on understanding and decreasing disparities.

Recognizing that contemporary models of suicide tend to rely on research with adult populations – despite a higher onset and growing prevalence of suicidal behavior in adolescence and emerging adulthood – our first goal is to leverage our collective expertise to **improve research on youth suicidal behavior, suicide prevention, and treatment**. Furthermore, the increasing diversity of the US population, particularly among youth, suggests a pressing need for theories and research that address issues of diversity. Thus, our second goal is to **increase research on suicide among underrepresented populations of youth** by fostering multilevel and cross-disciplinary conceptualizations of youth suicide and self-harm in the United States and other parts of the world. Additionally, we want to **disseminate what we know** among families, teachers, clinicians, youth, policy makers, media, and other consumers who are not researchers or academics but for whom suicidal behaviors are of concern. Lastly, we seek to **empower researchers from a variety of backgrounds and disciplines** to advance in their careers by mentoring aspiring and junior researchers interested in the study of youth suicidal behavior.

## **We seek to accomplish these goals by:**

- 1) Helping to increase the diversity of researchers conducting studies of youth suicide;
- 2) Developing multi-site collaborations among researchers with diverse areas of expertise;
- 3) Providing professional development opportunities to researchers to increase the impact of their work; and
- 4) Connecting with community-based providers who serve diverse youth at risk for suicidal behavior.

# SCHEDULE OF EVENTS



*Friday, June 3, 2022 | 11AM – 5PM (ET)*

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## **WELCOME REMARKS – 11AM**

*Regina Miranda, YSRC Director*

## **BUILDING BRIDGES OVER TROUBLED WATERS: THE HAVEN-CONNECT SUICIDE PREVENTION PROGRAM – 11:15AM**

*Sherry Molock, Lena L. Green, Peter A. Wyman*

## **BREAK – 12:30PM**

## **CONCURRENT SESSIONS – 12:40PM**

*Moderated by: Alex Bettis, Lindsay Taliaferro, Jessica Hamilton*

- Innovative qualitative, quantitative, or mixed-methods in youth suicide research
- Suicide research among minoritized youth
- Strengths-based approaches in youth suicide research

## **ENGAGING YOUTH ADVISORY BOARDS IN SUICIDE RESEARCH – 1:40PM**

*Talk 1: Jessica Hamilton, Alex Bettis, Kathryn Fox, Hannah Lawrence, Rachel Vaughn-Coaxum*

*Talk 2: Astraea Augsberger*

- Talk 1: Recognizing and Enhancing Adolescent and Community Health (REACH): Leveraging community based participatory research to enhance youth suicide and depression research
- Talk 2: Overview on the importance of youth engagement in research: Benefits and barriers

*Moderated by: Kiarra Alvarez*

## **BREAK – 2:55PM**

## **CONTEXT –SPECIFIC CONSIDERATIONS IN CALLING 911 TO MANAGE SUICIDE RISK: THE NEED FOR COMMUNITY-DRIVEN SOLUTIONS – 3PM**

*In conversation with: Keyne Law, Jason Tan de Bibiana, Greg Townley, Nikki Grant*

*Moderated by: Alana Rule, Raksha Kandlur, Catherine Glenn*

## **OPEN QUESTION & ANSWER SESSION – 4:15PM**

## **CLOSING REMARKS – 4:55PM**

*Ellen-ge Denton*



# Building Bridges Over Troubled Waters: The HAVEN-CONNECT Suicide Prevention Program

11:15am – 12:30pm (ET)

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**SHERRY MOLOCK**

*George Washington University*



**PETER A. WYMAN**

*University of Rochester  
School of Medicine*



**LENA L. GREEN**

*HOPE Center*

# Concurrent Session 1: Innovative Qualitative, Quantitative, or Mixed-Methods in Youth Suicide Research

12:40pm – 1:40pm (ET)



**ELIZABETH COSBY**

Vanderbilt University

**TITLE** Characterizing High-Risk Adolescents' Disclosures of Suicidal Thoughts and Behaviors

**CO-AUTHORS** Kathryn Fox (University of Denver, Department of Psychology), Taylor A. Burke (Harvard Medical School/Massachusetts General Hospital, Department of Psychiatry), Margaret M. Benningfield, Alex H. Bettis (Vanderbilt University Medical Center, Department of Psychiatry & Behavioral Sciences)

**ABSTRACT** *Introduction:* Disclosure of suicidal thoughts and behaviors (STB) is a critical step in identifying and intervening to support youth at risk. While youth are encouraged to talk to a trusted adult (e.g., parent/guardian), there is limited research in patterns of and responses to STB disclosure among at-risk youth. The present study aims to characterize youth experiences of STB disclosure to inform family-based suicide prevention. *Method:* At inpatient psychiatric admission, N=86 adolescents (Mage=14.69; SD=1.50, 69% female, 65% sexual and/or gender minority [SGM], 72% white) completed self-report measures of demographics and suicidal ideation (SIQ-Jr; M=50.49; SD=24.81). Youth also completed a measure assessing STB disclosure experiences, including who they disclosed STB to directly and how their parents learned about their STB. Youth rated perceived parental response to their STB disclosure (e.g., parental helpfulness, emotional responses) on a 5-point Likert scale. Youth also completed an open-ended item assessing what they wish their parent had done differently in response to their disclosure. *Results:* 42% of youth reported directly disclosing STB to parents. Of those whose parents learned indirectly about their STB, the most common source was learning from another adult, followed by finding evidence (e.g., suicide note). Mean ratings of parents' perceived emotional responses to disclosure were (M ± SD): anxious 4.25 ± 1.11; sad 4.13 ± 1.32; angry 3.00 ± 1.69; shocked 2.89 ± 1.42. Approximately one third characterized their parents' response to disclosure as "very helpful," while approximately one third rated it as "not at all helpful." Qualitative data highlighted several themes related to improving parent-child STB disclosure, including youth desire for parental validation, parental emotion regulation, and earlier intervention. *Conclusion:* These data highlight the variability in patterns of and perceived responses to STB disclosure in at-risk youth. Improving parent-child communication around STB disclosure may be an important target for suicide risk reduction.



**JACLYN KEARNS**

University of Rochester

**TITLE** Nonverbal Response Cards for Reporting of Self-Injurious Thoughts and Behaviors Among Rural Burkinabé Adolescents

**CO-AUTHORS** Tracie Ebalu (University of Pittsburgh), Lucienne Ouermi (Centre de Recherche en Santé de Nouna), Mamadou Bountogo (Centre de Recherche en Santé de Nouna), Ali Sié (Centre de Recherche en Santé de Nouna), David Lindstrom (Brown University), Till Bärnighausen (Centre de Recherche en Santé de Nouna; University of Heidelberg; Africa Health Research Institute; Harvard University)

T.H. Chan School of Public Health), & Guy Harling (Africa Health Research Institute; University College London; University of the Witwatersrand; Harvard T.H. Chan School of Public Health; University of KwaZulu-Natal)

**ABSTRACT** *Introduction:* Self-injurious thoughts and behaviors (SITBs) are a major public health concern among global youth. SITB prevalence is difficult to reliably estimate due, in part, to associated stigma, which can lead to underreporting in face-to-face interviews. While imperfect, self-interviews may help reduce misreporting. However, self-interviews rely on question comprehension by participants, which is particularly difficult in low-literacy populations such as rural Burkina Faso, where only half of adolescents attend school. Nonverbal response cards (NVRC) are a proposed low-tech, low-cost method to reduce underreporting of stigmatized thoughts and behaviors. NVRC maintain the privacy of self-interviews (interviewers do not see responses) while still allowing interviewers to guide the interview process. *Method:* We examined SITB reporting in a trial with a population-representative sample of 1,538 adolescents (12–20 years) in rural and semirural Burkina Faso. Participants were randomized to either a traditional verbal response or NVRC when asked to report on SITBs. Reported prevalence were compared across arms using Chi-square tests. *Results:* Given the random assignment of the response method, the two arms did not differ in gender, age, or education. NVRC arm respondents reported higher levels of a wide range of SITBs compared to verbal response arm respondents. Differences were statistically significant ( $p < 0.05$ ) for lifetime nonsuicidal self-injury, lifetime life not worth living, lifetime active suicide ideation, past 12-month active suicide ideation, and past 12-month suicide plan. Differences were similar in magnitude but not statistically significant for less-common outcomes (lifetime passive suicide ideation and suicide plan); suicide attempts were too rare to analyze. *Conclusions:* While further evaluation is needed in other settings, NVRC generates more affirmative responses to SITB questions—and may provide more accurate estimates—than traditional verbal responses. This is likely to be particularly true in settings where SITBs are more stigmatized and where question comprehension cannot be relied on.

Moderated by: Alex Bettis (Vanderbilt University Medical Center)

# Concurrent Session 1: Innovative Qualitative, Quantitative, or Mixed-Methods in Youth Suicide Research

12:40pm – 1:40pm (ET)



**ERICA RODRIGUEZ**

*Hunter College, CUNY*

**TITLE** A Qualitative Study of Risk Pathways for Suicide Ideation and Behavior among Black Youth Presenting to an Emergency Department

**CO-AUTHORS** Alexis Hopkins (Yale School of Public Health), Lauren Gulbas (University of Texas at Austin), Carolina Hausmann-Stabile (Bryn Mawr College), Colleen Cary Katz (Silberman School of Social Work), Ana Ortin-Peralta (Yeshiva University), Regina Miranda (Hunter College, CUNY)

**ABSTRACT** *Introduction.* There is a pressing need to understand the risk pathways that lead Black youth to suicidal thoughts and behaviors (STBs), and there have been recent calls for researchers to take a “ground zero” approach to suicide prevention among Black youth that incorporates qualitative research methods to gain a “baseline” understanding of suicidal behavior among Black youth. *Method.* In response, this qualitative study examined factors indicative of imminent risk of suicidal behavior among Black youth receiving services at a New York City hospital for suicide ideation or attempts. Participants included 11 self-identified Black adolescents (8 female, 3 male), ages 12–19, who presented to a hospital with suicide ideation (n=7) and/or a suicide attempt (n=4). Interviews were conducted by clinically trained researchers within about a week of the youths’ suicide ideation or attempt and inquired about the circumstances leading up to their suicide ideation or attempts. Interviews were audio recorded, transcribed, and coded in Dedoose. Data were analyzed using a thematic framework that combined deductive and inductive coding for qualitative analysis. We deductively developed broad themes that were then inductively applied to the interviews to identify codes that were salient to their risk pathways for STBs. *Results.* The findings suggest two distinct risk trajectories for suicide ideation and attempts among Black youth: episodic and chronic. Teens with episodic risk trajectories described imminent stressors leading to their STBs. Their STBs were part of the teens’ acute stress response to these situational stressors. Black youth with chronic risk trajectories often did not disclose identifiable stressors for their STBs. Their clinical complaints were related to persistent negative mood states. *Conclusions.* Black youth with episodic risk trajectories would benefit from clinical interventions to improve their coping skills, while those presenting with chronic risk trajectories require multiple levels of care.



**JONATHAN SINGER**

*Loyola University*

**TITLE** Treatment-seeking decisions of African American and Latina parents of suicidal youth

**ABSTRACT** *Introduction:* Little is known about how and why African American and Latina parents seek services for suicidal youth, and even less is known about parents’ attitudes and beliefs about treatment referrals following a hospital discharge. *Method:* In-depth interviews with ten parents (eight mothers and two fathers, nine African American and one Latina) 3-to-6 months after their child was discharged from an urban emergency department following suicidal thoughts and behaviors (STB). *Results:* Six of the 10 parents reported following up with outpatient services because they were continuing with a pre-existing service provider and they believed strongly in the value of mental health services. Parents who did not seek services for their child believed their child’s problems could not be addressed by mental health services, and attributed problems primarily to bullying or an absent parent. All parents believed their child struggled with emotional or behavioral problems. The parents who were concerned with their child’s STB saw this as secondary to other types of problems. Consequently, even parents who were currently engaged in services were not motivated to seek or continue services that focused explicitly on addressing suicide risk. The services parents said they were most interested in included a parenting component, such as peer mentors (e.g. other parents whose child had been through a suicidal crisis), specific skills in how to parent a suicidal youth, how to address youth suicidal behaviors with siblings and other family members, and parent self-care. All parents said their help-seeking behavior and current service use or non-use reflected God’s plan for their child. *Conclusions:* Follow-up with community referrals might improve if services: 1) match parents’ understanding of the problem; 2) include parent-centered services; and 3) acknowledge and build on parent religious beliefs in help-seeking.

*Moderated by: Alexandra Hall Bettis (Vanderbilt University Medical Center)*



# Concurrent Session 2: Suicide Research among Minoritized Youth

12:40pm – 1:40pm (ET)



**EDIN WALL**

*Hunter College, CUNY*



**COLLEEN KATZ**

*Hunter College, CUNY*

**TITLE** Screening & Assessment of Suicidal Behavior in Transition-Age Youth with Child Welfare Involvement

**CO-AUTHORS** Geetha Gopalan, Hannah Leoni-Hughes, Tamsin Pargiter (Hunter College, CUNY), David Collins (The Children's Village)

**ABSTRACT** Transition-age youth with child welfare experience (TAY, ages 17-22) may be at heightened risk for suicidal behavior, with a recent study reporting 40% had experienced suicide ideation and 23.5% had attempted suicide. In this paper, we sought to evaluate a selection of commonly used suicide risk assessment tools with the goal of identifying those that would be most appropriate for use with TAY. Using PubMed and PsycINFO, we conducted a search of the current literature focusing on three key areas: suicide, tools, and youth. Based on an initial search yielding 527 articles, we compiled a preliminary list of 34 assessment tools. Utilizing our research team's expertise of the child welfare agency context and TAY, we evaluated whether the following criteria applied to each assessment tool: (1) could be self-administered or administered by an entry-level staff member without advanced mental health training; (2) could be completed in under 30 minutes; (3) has been successfully tested in diverse populations of adolescents/young adults; (4) retains good psychometric properties and (5) had been tested in the past ten years in the United States. One brief screening tool (the Ask Suicide-Screening Questions (ASQ)) and four assessments (The Suicidal Ideation Questionnaire Junior (SIQ-JR), The Columbia Suicide Severity Rating Scale (C-SSRS), The Self-Harm Behavior Questionnaire (SHBQ), and The Suicide Probability Scale (SPS)) met all criteria. The strengths and limitations of each tool are discussed in detail, as well as the ways that each can be used most effectively in child welfare settings. Ultimately, the importance of systematic, routine assessment across child welfare settings is emphasized, as is the importance of child welfare agencies articulating clear protocols for assessing and addressing suicidal behavior in the youth they serve. Future research should include the establishment of a child-welfare specific "path model," providing staff with risk level-specific protocols.



**ANDREA WIGLESWORTH**

*University of Minnesota  
Twin Cities*

**TITLE** Multi-level examination of impulsivity as a risk factor for suicidality in Native American youth

**CO-AUTHORS** Jason Jose Bendezu, Donovan Roediger, Hannah Weiss, Monica Luciana (University of Minnesota Twin Cities), Evan White (Laureate Institute for Brain Research, Tulsa, Oklahoma), Kathryn R. Cullen, Bonnie Klimes-Dougan (University of Minnesota Twin Cities)

**ABSTRACT** *Introduction:* Native American young people die by suicide at disproportionately high rates compared to age-mates from other ethno racial groups, and predictors of suicidality among these youth remain unclear. Existing literature positions impulsivity as a potential risk factor for suicide risk in Native American young people, though impulsivity has not been examined explicitly. This project aims to examine impulsivity across multiple levels of analysis to better understand how this construct might incur risk for suicide ideation (SI) among Native American youth. *Method:* Data are from the ABCD Study. Native American youths (N = 375) ages 9-10 at Baseline (BL) were included in our analyses. We examined impulsivity at the self-reported (UPPS-P questionnaire), behavioral (failed stops on the Stop Signal Task (SST)), and neurobiological (activation of the right inferior frontal gyrus during the SST) levels. SI (both concurrent BL and Year 1 [Y1]) was pulled from the KSADS. *Results:* At the bivariate level, self-reported negative urgency ( $r = .223$  BL SI,  $r = .174$  Y1 SI;  $p$ 's < 0.01), lack of premeditation ( $r = .124$  BL SI,  $r = .132$  Y1 SI;  $p$ 's < 0.05), and positive urgency ( $r = .154$  BL SI only;  $p$  < 0.01) significantly correlated with concurrent and future SI. However, self-reported lack of perseverance and sensation seeking, behavioral performance, and brain indices did not significantly correlate with concurrent or future SI in bivariate, variable-centered analyses. To determine whether there is meaningful heterogeneity among youth across these indices that is associated with SI, we will use Latent Profile Analysis (LPA). We are in the process of conducting the LPA and refining our indicators, to be presented in June. *Conclusions:* Understanding whether meaningful differences exist within Native American youth at the self-report, behavioral, and neurobiological level on indicators of impulsivity will refine our approach to examining impulsivity as a risk factor for this population in future research.

*Moderated by: Lindsay Taliaferro (University of Central Florida)*

# Concurrent Session 2: Suicide Research among Minoritized Youth

12:40pm – 1:40pm (ET)



**RENJIE ZHANG**

Teachers College, Columbia University

**TITLE** Examining patterns of disclosing suicidal thoughts and behaviors among racial/ethnic minority adolescents

**CO-AUTHORS** Kay (Ki Eun) Shin, Angela "Page" Spears, Christine B. Cha (Teachers College, Columbia Univ.)

**ABSTRACT** *Introduction:* In other areas of psychopathology, it has been shown that racial/ethnic minority youths' disclosure behavior is different from their white counterparts, yet it is not clear why or whether this extends to disclosure of suicidal thoughts and behaviors. To address this knowledge gap, the present study examines patterns of disclosing suicidal thoughts and behaviors among a group of racially and ethnically diverse youth, and the potential role of mental illness stigma. *Methods:* The sample consisted of 191 adolescents (52.9% female) from the US recruited for a brief anonymous online study ranging in age from 13 to 17 years ( $M=15.99$  years,  $SD=1.04$ ). Nearly half (46.6%) of the sample self-identified as a racial/ethnic minority group member, with the other half (53.4%) self-identifying as Non-Hispanic White. Frequency of disclosing suicidal thoughts and behaviors was assessed by asking adolescents to estimate the number of disclosures they have made (lifetime frequency) and their subjective frequency (i.e., ranging from 'once' to 'all the time'). The Internalized Stigma of Mental Illness Scale (ISMI-10) was administered to measure youths' attitudes towards mental health illness. *Results:* Across all groups, the most common person to whom adolescents chose to disclose were acquaintances (vs. families, partner, friends). Compared to non-Hispanic white youth, racial/ethnic minority youth did not display a differential degree of disclosure frequency (i.e., lifetime, subjective),  $t_s=0.8-1.2$ ,  $p_s=0.23-.42$ ,  $d_s=2.94-0.42$ , nor mental illness stigma,  $t=-1.35$ ,  $p=0.18$ ,  $d=0.20$ . Subjective disclosure frequency was associated with greater mental health stigma ( $r=0.24$ ,  $p=0.001$ ), but lifetime disclosure frequency was not ( $r=-0.02$ ,  $p=0.78$ ). *Conclusions:* Counter to expectations, there were no racial/ethnic differences detected in the frequency of disclosing suicidal thoughts and behaviors, nor in attitudes toward mental health. However, among all adolescents, mental health stigma was associated with select measures of disclosure. Further analyses will explore racial/ethnic subgroups to examine trends of disclosure among suicidal adolescents



**HANNAH SZLYK**

Washington University in Saint Louis

**TITLE** Sexual identity, Sex of Sexual Contact, and Suicidal Behaviors Among Black adolescents: Does Sexual Activity Matter?

**CO-AUTHORS** Philip Baiden (The University of Texas at Arlington, School of Social Work); JaNiene Peoples (Washington University in St. Louis)

**ABSTRACT** *Introduction:* While sexual minority (SM) and Black adolescents in the United States face disproportionate suicide risk as compared to their White and heterosexual peers, limited research has investigated identity fluidity and complexity (e.g., sexual identity versus sex of sexual contact) among Black SM individuals as it relates to suicide risk. The objective of this study was to investigate the effects of sexual identity and sex of sexual contact on suicidal behaviors among Black adolescents. *Methods:* Data for this study were obtained from the 2017 and 2019 Youth Risk Behavior Survey. An analytic sample of 4,798 Black adolescents (51.2% female) was analyzed using binary logistic regression. The outcome variables investigated were suicidal ideation (SI), suicide plan (SP), and suicide attempts (SA). The main explanatory variables were sexual identity and sex of sexual contact. *Results:* Among participants, 16.2% reported SI, 14.1% made a SP, and 11.3% reported a SA at least once during the past year. Controlling for other factors, adolescents who self-identified as bisexual, had higher odds of reporting SI (AOR=1.87; 95% CI=1.15–3.04), SP (AOR=2.17; 95% CI=1.40–3.35), and SA (AOR=1.91; 95% CI=1.08–3.37). Similarly, adolescents who had sex with the same sex had higher odds of reporting SI (AOR=2.60; 95% CI=1.00–6.79) and SP (AOR=2.53; 95% CI=1.15–5.60), when compared to those who had never had sexual contact. Symptoms of depression, school bullying, and cyberbullying victimization were associated with higher odds of reporting suicidal behaviors. *Conclusion:* Black SM adolescents who self-identify as bisexual, who are unsure, and/or who have sexual contact with same sex may be at elevated risk of various suicidal behaviors. Thus, "sexual identity" may not be sufficient to detect suicide risk among Black SM youth. Caregivers and school mental health providers may consider tailored strategies to best support this subsample of Black youth.

Moderated by: Lindsay Taliaferro (University of Central Florida)



# Concurrent Session 3: Strengths-based Approaches in Youth Suicide Research

12:40pm – 1:40pm (ET)



**ROBERTO LOPEZ**

George Mason University

**TITLE** The Protective Role of Positive Recognition in the Relation Between NSSI Versatility and Suicidal Ideation

**CO-AUTHORS** Lauren Seibel, Katherine Maultsby (George Mason University); Jennifer Wolff, Anthony Spirito (Warren Alpert Medical School of Brown University), Christianne Esposito-Smythers (George Mason University)

**ABSTRACT** *Introduction:* Non-suicidal self-injury (NSSI) and suicidal ideation (SI) commonly co-occur among youth. The number of methods adolescents use to engage in NSSI (i.e., NSSI versatility), an index of more severe NSSI, is associated with greater SI severity. However, few studies have examined potential moderators of this relation. A positive family environment may buffer against more severe SI among youth with greater NSSI versatility. We hypothesized that better general family functioning, per adolescent and caregiver report, as well as greater caregiver acknowledgement of family and youth characteristics they appreciate (i.e., positive recognition) during an observed discussion, per an independent observer, would moderate the relation between lifetime NSSI versatility and 18-month SI severity. *Method:* The sample consisted of 111 high-risk adolescents (Mage = 15.02, SD = 1.48, 74.8% female, 91.9% White) and caregivers (Mage = 43.44, SD = 6.92, 76.6% female, 86.5% White) enrolled in a randomized clinical trial. Lifetime NSSI versatility (SITBI), depressive symptoms (CDI-2), perceptions of family functioning (FAD), and positive recognition (FAs Task) were assessed at baseline. SI severity was assessed at baseline and 18-months (SIQ-JR). A single path model in Mplus was used to examine relations among these variables. *Results:* After controlling for age, sex, baseline SI severity, baseline depressive symptoms, and treatment condition, only positive recognition ( $b = -1.61$ ,  $p = .026$ , 95%BCa:  $[-3.02, -0.17]$ ) moderated the relation between lifetime NSSI versatility and 18-month SI severity ( $R^2 = .26$ ,  $p = .009$ ). Specifically, NSSI versatility was only positively related to SI severity at low levels of positive recognition. *Conclusion:* Assessment of caregiver positive recognition, particularly through observer ratings, may be a clinically useful method to identify the supportiveness of the family environment for high-risk youth. Bolstering positive recognition in the context of clinical care may help reduce suicide risk among adolescents who engage in multiple NSSI methods.



**NEHA PARVEZ**

Teachers College, Columbia University

**TITLE** Emotion malleability beliefs among self-injurious and suicidal adolescents

**CO-AUTHORS** Rachel J. Nam, Juno Pinder, Kay (Ki Eun) Chin, Christine B. Cha (Teachers College, Columbia University)

**ABSTRACT** *Introduction:* Implicit theories of emotion (ITE) refer to a spectrum of beliefs about the malleability of emotions; entity theories refer to beliefs that emotions are inflexible and fixed, while incremental theories refer to beliefs that emotions are malleable and can be changed. While prior work has demonstrated that greater endorsement of entity beliefs is associated with poor psychosocial outcomes, it is less understood how ITE may specifically relate to common self-injurious thoughts and behaviors (nonsuicidal self-injury [NSSI]; suicidal ideation) during adolescence. *Methods:* In this two-part study, we initially examined ITE in relation to NSSI among community-based adolescents (Study 1;  $n=75$ , 12–19 years), and among suicidal adolescents presenting to the emergency department (Study 2;  $n=108$ , 10–17 years). Adolescents in both studies completed the Self-Injurious Thoughts and Behaviors Interview and Implicit Theories of Emotion Scale at baseline. *Results:* Community-based self-injurers endorsed greater entity theories than non-injurers at a marginally significant level ( $p=.06$ ,  $d=.47$ ), and entity theories predicted a greater lifetime frequency of NSSI ( $\beta=.46$ ,  $p=.002$ ). We did not observe these findings in the hospital-based sample ( $ps>.05$ ). Post-hoc analyses revealed that these findings were influenced by the presence of suicidal ideation (SI). Based on the Integrated Motivational-Volitional model of suicide, we hypothesized that entity theories were a form of ‘emotional entrapment’ that give rise to the development of SI. Indeed, post-hoc findings revealed that among community adolescents, defeat/entrapment was associated with greater entity theories at baseline, and significantly predicted SI at baseline and at 3-month follow-up ( $ps<.05$ ). Further analyses will examine the potential mediating and moderating effects of entity theories on subsequent SI. *Conclusions:* As adolescence is an important developmental period during which beliefs about the world and self are forming, these findings suggest that beliefs about the malleability of emotions are important to examine in relation to self-injurious thoughts and behaviors.

Moderated by: Jessica Hamilton (Rutgers University)

# Concurrent Session 3: Strengths-based Approaches in Youth Suicide Research

12:40pm – 1:40pm (ET)



**CAROLINA VÉLEZ-GRAU**

*New York University*

**TITLE** A qualitative study of the applicability of the interpersonal theory of suicide constructs of belongingness and burdensomeness to ethnocultural minoritized youth.

**CO-AUTHORS** Ifrah Magan and Marya Gwadz (NYU Silver School of Social Work)

**ABSTRACT** *Introduction:* Guided by the Interpersonal Theory of Suicide, this study aimed at understanding the applicability of the theoretical constructs of belongingness and burdensomeness to ethnocultural minoritized youth and their relevance to suicide risk and mental health. *Method:* A qualitative exploratory study was conducted in New York City with 29 self-identified Latinx and Black adolescents aged 13–17. Youth were recruited from two community-based agencies from August–October 2020. Five virtual focus groups were conducted to explore the meaning that these adolescents ascribed to belongingness and burdensomeness. Template analysis was used to analyze the data. *Results:* Themes highlighted dimensions congruent with the IPTS dimensions of belongingness (e.g., reciprocal care, being part of) and burdensomeness (e.g., self-worth, liability). Notably, themes also underscored new dimensions—not found in the existing IPTS—that reflect the unique sociocultural views of Latinx and Black youth. Both belongingness and burdensomeness were centered in the family context. Unconditional acceptance, the burden of not belonging to families, and other cultural aspects of liability were reported by the youth as critical dimensions of these constructs. *Conclusion:* Placing the voices of Latinx and Black youth at the center of our research, as they assigned meaning to concepts of belongingness and burdensomeness, provided critical insight into their lives and mental health experiences. We provide recommendations to build on theoretical constructs that account for the diverse experiences of ethnocultural minoritized youth and discuss implications for clinical practice and future intervention development strategies to increase protective factors and decrease risk factors for suicide behaviors relevant to such youth.

*Moderated by: Jessica Hamilton (Rutgers University)*

# Recognizing and Enhancing Adolescent and Community Health (REACH): Leveraging community based participatory research to enhance youth suicide and depression research

1:40pm - 2:55pm (ET)



**KATHRYN FOX**

*University of Denver*



**HANNAH LAWRENCE**

*Harvard Medical School*



**ALEX BETTIS**

*Vanderbilt University*



**JESSICA HAMILTON**

*Rutgers University*



**RACHEL VAUGHN-COAXUM**

*University of Pittsburgh*

Teens are the experts in their own experiences. The Recognizing and Enhancing Adolescent and Community Health (REACH) Youth Advisory Board is a national collaborative research-based effort to improve the quality and impact of youth suicide research by uplifting teens' voices and ideas through all stages of clinical research on adolescent suicide prevention. In doing so, our science will be stronger and more impactful for teens. This presentation will discuss the development and execution of a Youth Advisory Board (YAB) comprised of youth with lived experiences of depression and/or suicidal ideation and behavior. Our goal is to provide resources and actionable steps that others can use to disseminate the REACH YAB model to other clinical and research groups seeking to promote reproducibility, representation, and application of youth suicide research. The overall goal is to improve the research-to-community translation of clinical science focused on youth suicide prevention.



# Overview on the importance of youth engagement in research: Benefits and barriers

1:40pm - 2:55pm (ET)

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**ASTRAEA AUGSBERGER**

*Boston University*

The presentation will examine existing youth advisory boards in child welfare, municipal government, and the development and implementation of a youth advisory board in a healthcare setting. The talk will emphasize the importance of youth engagement in research, the research on benefits and barriers of youth advisory boards, and key themes emerging from Dr. Augsberger's research. These themes will be illustrated with a case example of the use of youth advisory boards in healthcare.

# Context-specific considerations in calling 911 to manage suicide risk: The need for community-driven solutions

3:00pm – 4:15pm (ET)



**NIKKI GRANT**

*Amistad Law Project*



**KEYNE LAW**

*Seattle Pacific University*



**JASON TAN DE BIBIANA**

*Vera Institute of Justice*



**GREG TOWNLEY**

*Portland State University*

This panel will discuss the implications of calling 911 as a triaging system to manage suicide risk, especially for youth from minoritized backgrounds. The focus of the panel is to engage in conversations to discuss the reliance on calling 911 as a form of suicide prevention, and the need for community-driven alternative methods that are better equipped to handle mental health crises. The session aims to highlight the challenges and potential solutions while considering context and community-specific methods for suicide prevention. The session will also discuss related future research directions to advance context and community-driven youth suicide prevention strategies. This is a YSRC student-driven “conversations focused” event to highlight issues that receive limited research and attention.

# THANK YOU

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## **BRYN MAWR COLLEGE**

*Host*

## **YSRC CONFERENCE PLANNING COMMITTEE**

*Carolina Hausmann-Stabile (Chair, Conference Planning Committee)*

*Alex Bettis*

*Ellen-ge Denton*

*Catherine Glenn*

*Jessica Hamilton*

*Regina Miranda*

*Myeshia Price*

*Abigail Ross*

*Lindsay Taliaferro*

*Carolina Velez-Grau*

*Erica Rodriguez (Conference Planning Assistant)*

## **YSRC STEERING COMMITTEE**

*Kiara Alvarez, Ellen-ge Denton, Catherine Glenn, Carolina Hausmann-Stabile, Regina Miranda*

## **YSRC MEMBERSHIP COMMITTEE**

*Peggy Andover, Nicole Nugent, Abigail Ross*

## **STUDENT MEMBERSHIP DEVELOPMENT TEAM**

*Kerri-Anne Bell*

*Raksha Kandlur*

*Kai Kellerman*

*Olivia Pollack*

*Alana Rule*

*Carly Schuller*

*Ana Sheehan*

*Angela Page Spears*

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