

	CDP Presents A Monthly Webinar Series Dyadic Interventions – Involving Significant Others in Suicide Prevention
<p>Presenter:</p> <div data-bbox="698 409 925 640">  </div> <p>Dr. Alexis May</p>	
<p>Before We Get Started in:</p> <div data-bbox="349 777 625 861"> <h1>01:00:00</h1> </div> <div data-bbox="657 703 1242 924"> <p>Q & A – You can submit a question via the chat at any point during the presentation. Questions will be answered during or the last 10 minutes of the program. While chatting, please make sure to select “All Panelists and Attendees” in chat so all can see your comments and questions!</p> <p>Resources – You can find a PDF of the presentation and additional resources in your CE21 account page.</p> <p>Dial In for Audio (only if having audio problems) Stay Logged In! Dial 646-876-9923 Meeting # 950 8163 9358</p> <p>Help – for assistance, please e-mail Micah Norgard at micah.norgard.ctr@usuhs.edu</p> </div>	

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<p>To receive credit, you must attend the webinar all the way through the Q & A section at the end of the presentation.</p> <p>Please do NOT leave the webinar!</p>	

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Disclaimer

The views expressed are those of the presenter and do not necessarily reflect the opinions of the Uniformed Services University of the Health Sciences, the Department of Defense, or the U.S. Government.



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CDP Presents A Monthly Webinar Series
Dyadic Interventions – Involving Significant Others in Suicide Prevention

Upcoming Training Events:

CDP Presents: Debunking Common Misperceptions about Sleep Interventions	October 12th
Understanding and Treating Chronic Pain in Military Personnel Training via Zoom	November 2 nd – 3 rd
CDP Presents: Psychological Flexibility Training to Enhance Resilience in Service Members via Zoom	November 9 th
Cognitive Processing Therapy (CPT) Training via Zoom	November 16 th – 17 th
Online Prolonged Exposure (PE) for PTSD Training via Zoom	November 30 th – December 1 st

Register now for these upcoming trainings:
www.deploymentpsych.org/trainings

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CDP Presents A Monthly Webinar Series

Dyadic Interventions – Involving Significant Others in Suicide Prevention

Sorry We Missed You!



We have you covered!
Check out last month's series:
Dancing with Ambivalence in Psychotherapy: Moving between Motivational Interviewing and EBPs with Balance and Grace

It was a terrific training in which I learned a great deal and in which the presenter truly embodied the spirit and skills of MI. I'm so glad I attended!

I am just so grateful for these classes. Half of my clients are veterans and these classes make me a better provider. Thank you!

This was a great presentation. Learn something every time to better serve our Service Members.



Watch Archived CDP Presents Webinars at
<https://deploymentpsych.org/archived-webinars>

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CDP's Official PODCAST

Practical For Your Practice

SEASON
02
EPISODE
07

MAKING SPACE
FOR YOUR IMPOSTER SYNDROME

SEASON 2
EPISODE 8

BUT... MY CLIENT IS PREGNANT.!!
HOW AND WHY YOU CAN
TREAT PTSD DURING PREGNANCY.

SEASON 2
EPISODE 9

SO YOU WANT TO BE A
MILITARY PSYCHOLOGIST

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 Google Podcasts

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Enhancing Your Experience

Chat

To: All panelists and attend...
Type message here...

Best Chat Device Headset

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CDP Presents A Monthly Webinar Series

Dyadic Interventions – Involving Significant Others in Suicide Prevention

Presenter:



Alexis M. May, Ph.D.
Assistant Professor
Dept. of Psychology, Wesleyan University

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Disclosures

All faculty, course directors, planning committee, content reviewers and others involved in content development are required to disclose any financial relationships with commercial interests. Any potential conflicts were resolved during the content review, prior to the beginning of the activity.

Dr. May has no financial interests to disclose.

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Dyadic interventions: Involving significant others in suicide prevention

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Disclosures

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Funding:



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PLAN


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Resources

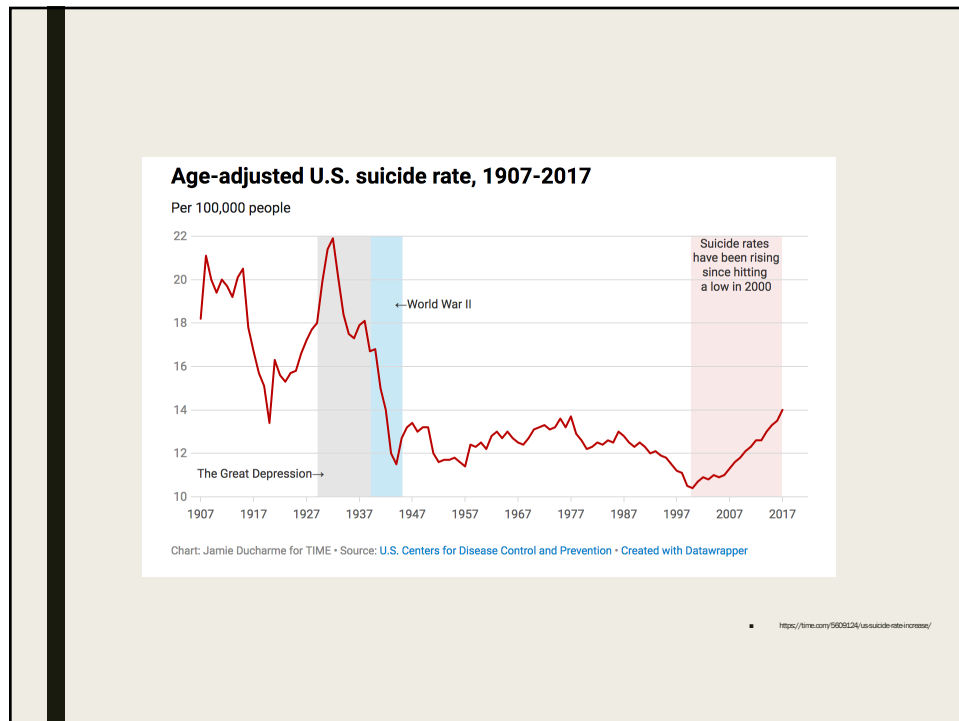
Suicide Prevention Lifeline
Call: 988
24/7, confidential, free

Veteran Crisis Line
Call: 988, press 1
Text: 838255
24/7, confidential, free

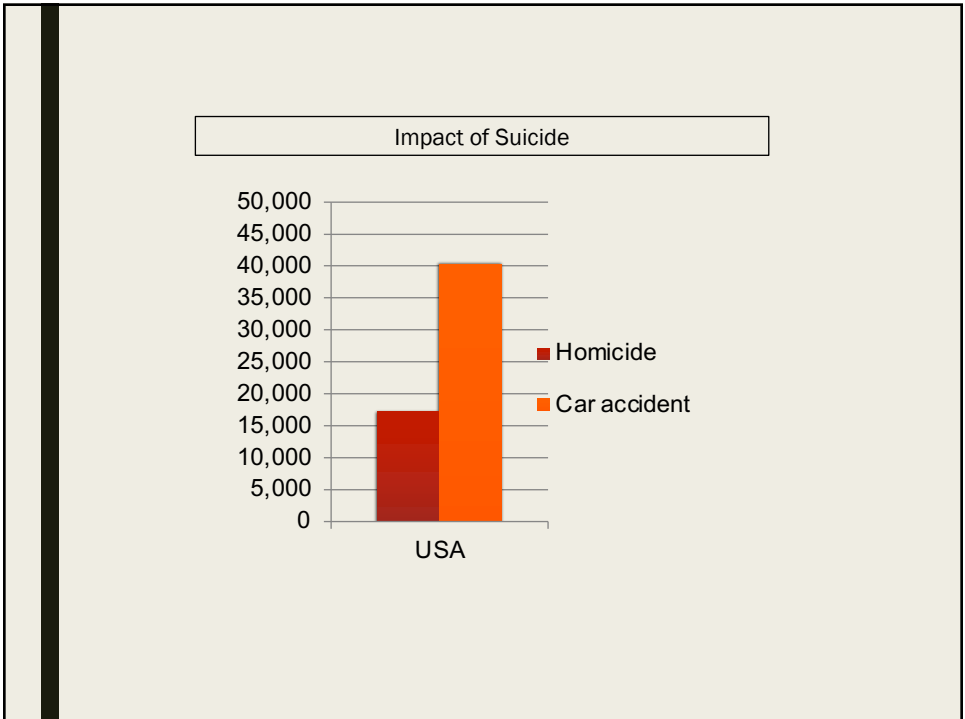
Crisis Text Line
Text: 741741
24/7, confidential, free



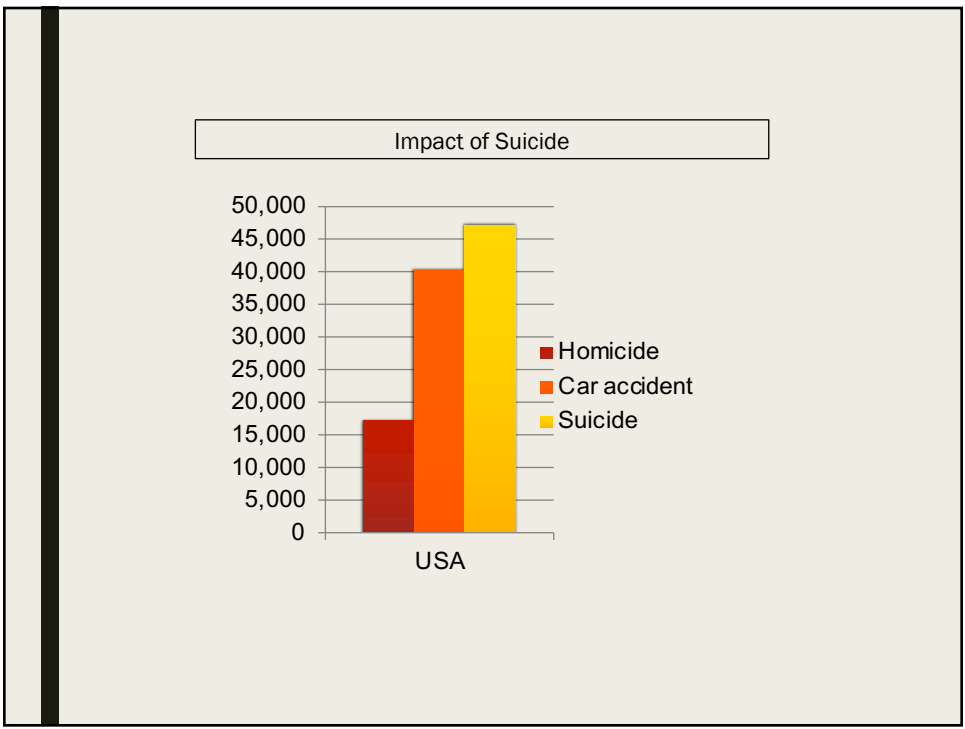
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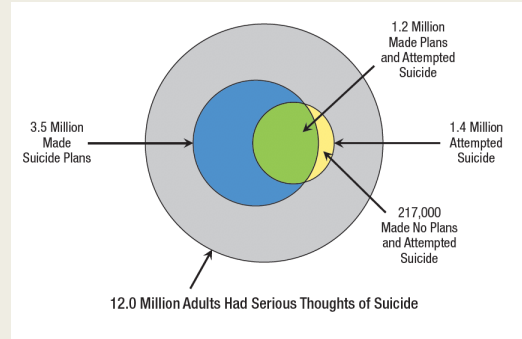


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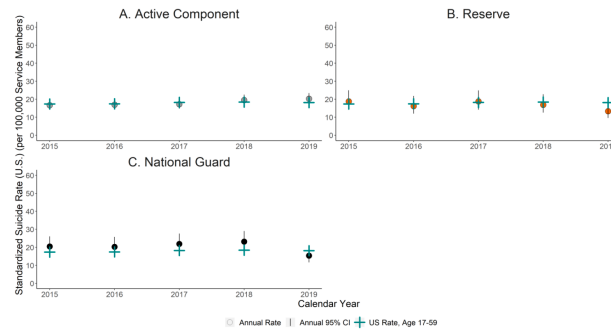
Suicide ideation, Plans and Attempts



Substance Abuse and Mental Health
Administration, (2020).
Retrieved from
<https://www.samhsa.gov/data/>

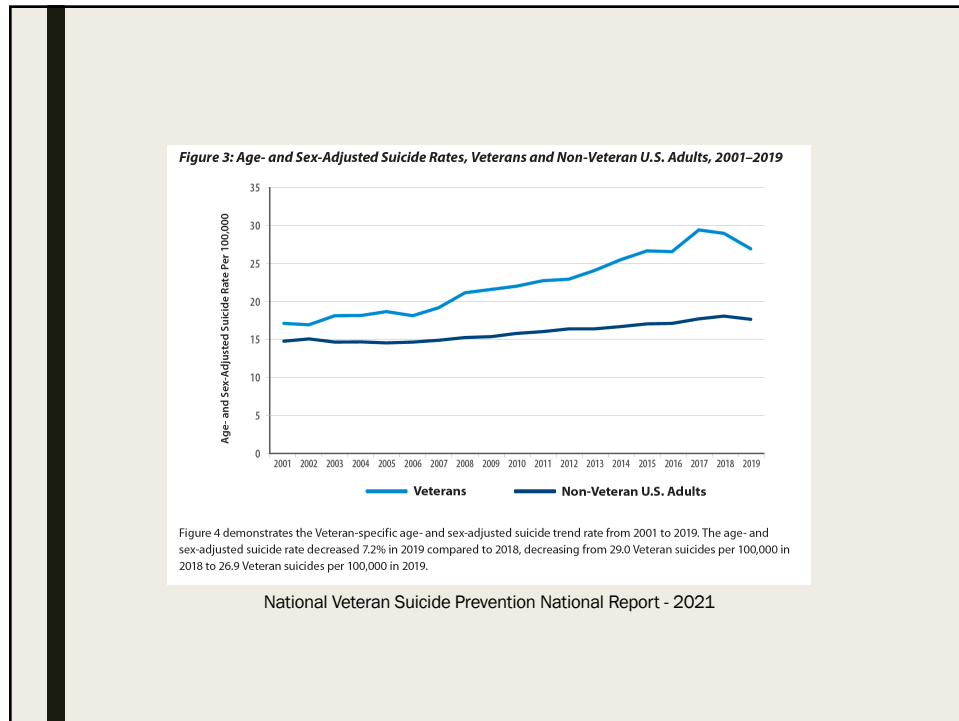
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Figure 4 (A–C). CY 2015–CY 2019 Suicide Mortality Rates, by Military Population, Standardized to the CY 2015–CY 2019 U.S. Adult Population Rate Data¹⁻³



DoD Annual Suicide Report – CY2020

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- Single session Interventions (e.g., CRP, SPI)
- Brief Interventions (e.g., ASSIP)
- Frameworks (e.g., CAMS)
- Multisession (e.g., BCBT, CT-SP)
- Treatment packages (e.g., DBT)







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Review > Psychol Rev. 2010 Apr;117(2):575-600. doi: 10.1037/a0018697.

The interpersonal theory of suicide

Kimberly A Van Orden¹, Tracy K Witte, Kelly C Cukrowicz, Scott R Braithwaite, Edward A Selby, Thomas E Joiner Jr

Philos Trans R Soc Lond B Biol Sci. 2018 Sep 5; 373(1754): 20170268.

Published online 2018 Jul 16. doi: [10.1098/rstb.2017.0268](https://doi.org/10.1098/rstb.2017.0268)

The integrated motivational–volitional model of suicidal behaviour

Rory C. O'Connor¹ and Olivia J. Kirtley²



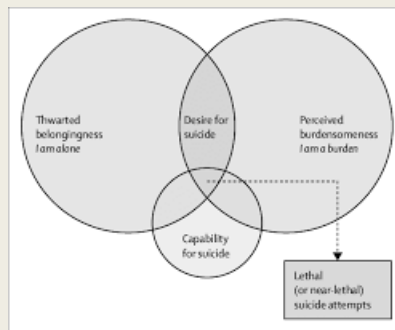
Preventive Medicine
Volume 152, Part 1, November 2021, 106549



The three-step theory of suicide: Description, evidence, and some useful points of clarification

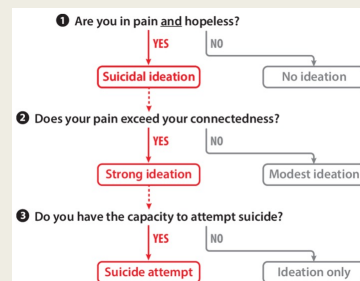
E. David Klonsky^a, Mikayla C. Pachkowski^a, Arezoo Shahnaz^a, Alexis M. May^b

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Interpersonal Theory

3ST



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- Isolation
- Loneliness
- Familial conflict
- Romantic conflict

Reviews

McClelland H, Evans JJ, Nowland R, Ferguson E, O'Connor RC. Loneliness as a predictor of suicidal ideation and behaviour: a systematic review and meta-analysis of prospective studies. *J Affect Disord.* 2020;274:880-896

Calati R, Ferrari C, Brittner M, et al. Suicidal thoughts and behaviors and social isolation: A narrative review of the literature. *J Affect Disord.* 2019;245:653-667

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Romantic relationship are particularly powerful, for good and ill.

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Interventions for many health problems find better outcomes when including friends and family.



- Diabetes Management
- Smoking Cessation
- Problem Gambling
- Substance Use
- Psychosis

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Unique Challenges

1. Suicidal individuals report stigma and negative responses

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Dyadic Suicide Knowledge



May, A. M., Orenshaw, A. O., Lelker, F., Bryan, C. J., & Baucom, B. R. W. (2019). Knowledge of suicide history, current depressive symptoms, and future suicide risk within couples. *Behavior Research and Therapy*.

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Unique Challenges

1. Suicidal individuals report stigma and negative responses
2. Partners report misinformation and lack of confidence

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Unique Challenges

1. Suicidal individuals report stigma and negative responses
2. Partners report misinformation and lack of confidence
3. Suicidal individuals worry about being a burden

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Unique Challenges

1. Suicidal individuals report stigma and negative responses
2. Partners report misinformation and lack of confidence
3. Suicidal individuals worry about being a burden
4. Partners report burnout and exclusion by the health care system

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Emerging Partner-Involved Interventions

■ TR&ST (Khalifian et al., 2021)

Received: 24 November 2020 | Revised: 29 July 2021 | Accepted: 9 September 2021
DOI: 10.1002/cfp.23251

RESEARCH ARTICLE

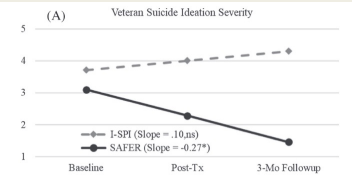
WILEY

Utilizing the couple relationship to prevent suicide: A preliminary examination of Treatment for Relationships and Safety Together

Chandra E. Khalifian^{1,2} | Feea R. Leifker³ | Kayla Knopp^{1,2} | Chelsey R. Wilks⁴ | Colin Depp^{1,2} | Shirley Glynn⁵ | Craig Bryan⁶ | Leslie A. Morland^{1,2,7}

Emerging Partner-Involved Interventions

■ SAFER (Goodman et al., 2022)




Goodman, M., Sullivan, S. R., Spears, A. P., Crasta, D., Mitchell, E. L., Stanley, B., Dixon, L., Hazlett, E. A., & Glynn, S. (2022). A pilot randomized control trial of a dyadic safety planning intervention: Safe actions for families to encourage recovery. *Couple and Family Psychology: Research and Practice*, 11(1), 42–5

Crisis Response Planning

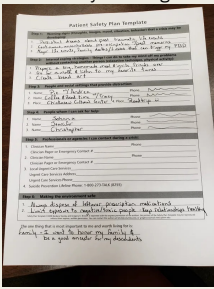
① crying ③ wanting to hit things
 ② getting angry ④ argument of wife
 ⑤ play video games ⑥ photography
 ⑦ work in garage ⑧ writing
 ⑨ go for walk ⑩ games on phone
 ⑪ breathing 10 mins ⑫ listen to music
 ⑬ talk to Bill
 ⑭ Dr. Smith : 555-555-5555 (voicemail)
 ⑮ Hot line : 1-800-273-2755
 ⑯ Hospital or 911

Reasons to live:
 Mom
 wife
 kids (Matt, Kate)
 photography
 motorcycle rides

Lethal Means Counselling



Safety Planning



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Randomized Controlled Trial > J Affect Disord. 2017 Apr 1;212:64-72.
 doi: 10.1016/j.jad.2017.01.028. Epub 2017 Jan 23.

Effect of crisis response planning vs. contracts for safety on suicide risk in U.S. Army Soldiers: A randomized clinical trial

Craig J Bryan ¹, Jim Mintz ², Tracy A Clemans ³, Bruce Leeson ⁴, T Scott Burch ⁴,
 Sean R Williams ³, Emily Maney ³, M David Rudd ⁵

① crying ③ wanting to hit things
 ② getting angry ④ argument of wife
 ⑤ play video games ⑥ photography
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Reasons to live:
 Mom
 wife
 kids (Matt, Kate)
 photography
 motorcycle rides



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Couples Crisis Response Plan (CCRP)

- Single joint session (50 minutes)
 - I. Rationale
 - II. Collaborative Narrative Assessment
 - III. Development of handwritten Crisis Response Plans
 - IV. Effective Communication Practice
- Original CRP elements retained:
 - Development of a personalized plan to
 - (1) detect warning signs
 - (2) use self-management strategies
 - (3) identify reasons for living
 - (4) access social support
 - (5) obtain professional support/crisis services.

Handwritten example of a CCRP plan:

- ① crying
- ② getting angry
- ③ wanting to hit things
- ④ argument of wife
- ⑤ playing videogames
- ⑥ photography
- ⑦ work in garage
- ⑧ writing
- ⑨ go for walk
- ⑩ games on phone
- ⑪ breathing 10 mins
- ⑫ listen to music
- ⑬ talk to Bill
- ⑭ Dr. Smith: 555-555-5555 (voicemail)
- ⑮ Hot line: 1-800-273-2755
- ⑯ Hospital or 911

Reasons to live:

- Wife
- photography
- motivation
- ride
- kids (Matt, Kate)

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CCRP Rationale

1

Increase Knowledge

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CCRP Rationale

1

Increase Knowledge

2

Facilitate
Communication

39

CCRP Rationale

1

Increase
Knowledge

2

Facilitate
Communication

3

Provide
Caregiver
Support

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Couples Crisis Response Plan RCT

- **Participants:** 91 suicidal servicemembers (and their partners) hospitalized for a psychiatric crisis randomized to CCRP or Psychoeducation Control (PC) and followed at discharge, 1 month, 3 months, and 6 months.
- **Aim 1:** To compare CCRP to PC on suicide ideation in the 6 months following treatment.
- **Aim 2:** Test the effect of frequency of CCRP recall and use on suicide ideation and identify if partner involvement increases CCRP recall and use.

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Salt Lake Behavioral Health

Enrollment and intervention @ SLBH



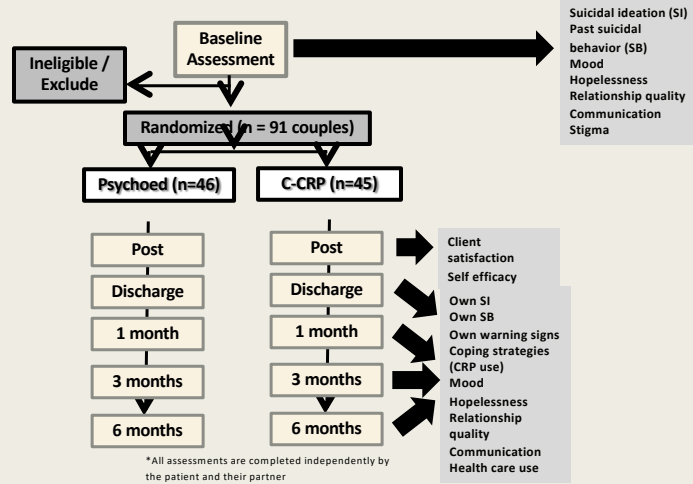
RPI Lab

Follow up assessments @ Wesleyan



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Study Design and Methodology



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Team



PI: Alexis May, PhD
Co-PI: Brian Baucom, PhD
Consultant: Craig Bryan PsyD, ABPP
Project Coordinator: Miles Kovnick, BA
Research Associate: Jill Stevens, MA
Study Therapists: Tyler Cheney, LCSW & Sam Findley, MA
SLBH Chief Clinical Officer: Anna Lieber, MS

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Feasibility

- Desire to participate
- Interest from non-partnered patients
- Telehealth option is key
- Didn't interfere with other treatment

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Acceptability (preliminary)

	PATIENT 1 (Not at all) – 9 (Very)	PARTNER 1 (Not at all) – 9 (Very)
How logical does the intervention seem?	8.0	8.3
How successful do you think this intervention will be in helping you and your partner cope with emotional and suicidal crises?	7.8	7.5
How confident would you be in recommending this intervention to a friend with similar problems?	8.0	8.0
How much improvement in your ability to handle your own suicidal/emotional crises do you think will occur as a result of this intervention?	6.8	6.6
How much improvement in your ability to handle your partner's suicidal/emotional crises do you think will occur?	7.5	7.3

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Acceptability (preliminary)

Range 1 (Excellent) – 4 (Poor)	PATIENT	PARTNER
How would you rate the quality of the service you received?	1.1	1.4
To what extent has the session met your needs ?	1.5	2.0

Quotes from patient feedback

"I wasn't sure what to expect, so I wasn't expecting anything really. I feel the more couples discuss this topic, the more the negative stigma will fade."

"Great opportunity for anyone but extremely grateful that things like these are being studied to help service members."

"I think every military couple should be required to do this upon marriage"

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Questions



amay01@wesleyan.edu

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Next Steps




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