



# Suicide Acceptability among U.S. Veterans:

*Results from the 2010 General Social Survey*

**John Blosnich, PhD, MPH**

Health Science Specialist

VISN-2 Center of Excellence for Suicide Prevention

University of Rochester, Department of Psychiatry, Center for the Study and Prevention of Suicide

**Robert Bossarte, PhD**

Chief, Epidemiology and Population Interventions Core

VISN-2 Center of Excellence for Suicide Prevention

University of Rochester, Department of Psychiatry, Center for the Study and Prevention of Suicide

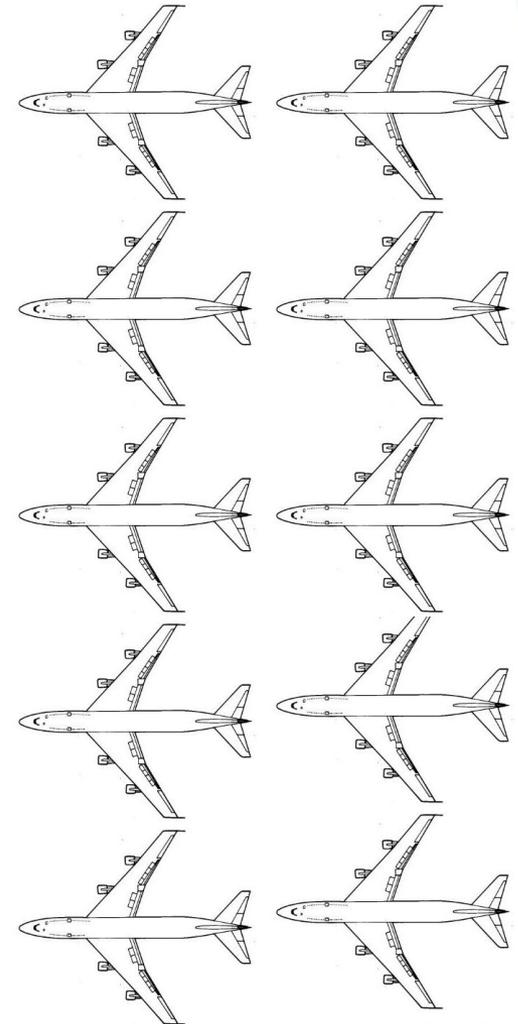
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# Introduction

- Suicide is 10<sup>th</sup> leading cause of death in the U.S. [1]
- In 2009, about 37,000 suicides [1]
- Population-level surveillance of suicide is lacking in U.S.



# Introduction

- Suicide has complex etiology likely spanning biological, cognitive, and social environmental factors
- Many consistent (and interactive) correlates of suicide risk – mood disorders, economic issues, victimization [2-4]

# Introduction

- Suicide acceptability – endorsing suicide as a permissible action
- Associated with suicide planning, suicidal ideation, and suicide attempt [5-8]
- Directionality is unclear - beliefs shape actions, or actions shape beliefs [9,10]

# Introduction

- Literature somewhat discordant about elevated risk for suicide among Veterans in general [11]
- Firearm-related suicide higher among Veterans [12]
- Subpopulations of Veterans have higher suicide risk - OEF/OIF [13], VHA [14], sexual minority [15]

# Introduction

- Evidence suggests *acquired capability* of suicide risk among Veterans [16,17]
- Both physical acclimation to pain and mental acclimation to loss of fear of death contribute to suicidal behavior [18]

# Introduction

Suicide  
acceptability  
associated with  
suicide risk

Veteran suicide  
risk and  
acquired  
capability

- Do personal beliefs about suicide differ among Veterans and non-Veterans?

# Methods

- Data are from the General Social Survey
- February-April 2010 with a probability-based sample of non-institutionalized U.S. adults 18+
- Analytic sample limited to the two sample splits that received Suicide Acceptability survey items (n=1,430)

# Methods

Veteran: “Have you ever been on active duty for military training or service for two consecutive months or more?” and “What was your total time on active duty?”

- No active duty (n=1,275)
- Yes, less than 2 years (n=31)
- Yes, 2-4 years (n=78)
- Yes, more than 4 years (n=44)

# Methods

Suicide Acceptability: “Do you think a person has the right to end his or her own life if this person...(Y/N)

- Has an incurable disease
- Has gone bankrupt
- Has dishonored his or her family
- Is tired of living and is ready to die

# Methods

## Demographics

- Age (in years)
- Sex
- Race/ethnicity (white, black, other)
- Educational attainment (number of years of education)

# Methods

- Chi-square test of independence
- Logistic regression models adjusted for demographic and selected covariates
- Weighted analyses conducted in Stata/SE Ver. 12
- Study approved by University of Rochester IRB

# Results

- Veterans = 10.2% (95%CI: 8.7-11.7)
- More Veterans were white, older, and male than non-Veterans
- Veteran status did not significantly associate with Suicide Acceptability items

# Results

Table 1. Adjusted Odds of Endorsing Suicide Acceptability

	Incurable Illness (n=1,371) AOR (95%CI)	Bankruptcy (n=1,398) AOR (95%CI)	Dishonored Family (n=1,394) AOR (95%CI)	Tired of Living (n=1,380) AOR (95%CI)
<b>Age</b>	0.99 (0.99-1.00)	0.98* (0.97-0.99)	0.98* (0.97-0.99)	0.99 (0.98-1.00)
<b>Education</b>	1.14* (1.09-1.19)	1.15* (1.07-1.23)	1.18* (1.10-1.26)	1.17* (1.11-1.24)
<b>Veteran</b>	1.23 (0.79-1.94)	0.88 (0.45-1.71)	0.93 (0.45-1.93)	1.01 (0.58-1.75)
<b>Sex (Male)</b>	1.49* (1.12-1.97)	1.96* (1.31-2.95)	1.60* (1.05-2.44)	1.59* (1.13-2.23)
<b>Race</b>				
White <sup>1</sup>	-	-	-	-
Black	0.52* (0.37-0.74)	0.99 (0.50-1.94)	0.89 (0.42-1.89)	1.08 (0.66-1.79)
Other	0.85 (0.54-1.33)	1.01 (0.52-1.98)	1.44 (0.78-2.68)	0.97 (0.55-1.73)

# Discussion

- Results suggest Veterans are no different from the general population in terms of this particular suicide risk correlate
- Unclear how suicide acceptability may relate with the concept of *acquired capability*
- Construct may differ among Veteran sub-populations experiencing higher suicide risk

# Discussion

## Limitations

- Un-verifiable self-reported Veteran status
- Suicide acceptability items were limited
- Scenarios used second-person rather than first-person referents
- Explicit measures of suicide not collected

# Discussion

## Future research

- Larger samples of Veterans to facilitate subgroup analysis
- More nuanced/standardized measures to gauge acceptability
- Panel studies to discern directionality

# Introduction

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# Introduction

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