Suicide risk behaviors in adolescents with disabilities: Examining the role of depressive symptoms

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Background: Suicide is the second leading cause of adolescent death in Washington State, and suicide risk behaviors are associated with mortality. Disabled adolescents are more likely than peers to report depressive symptoms and may be at greater risk for suicide. In this study we sought to determine whether disabled adolescents reported more serious suicide risk behaviors than their non-disabled peers, and whether depressive symptoms modified these associations.

Methods: Data from the cross-sectional Healthy Youth Survey were analyzed. The study population included 10,075 8th, 10th, and 12th grade Washington State students who completed the survey in 2008. Adolescent disability status, seriousness of suicide risk, and three suicide risk behaviors were studied in relationship to depressive symptoms using bivariate and multivariate regression models. Analyses were stratified by presence of depressive symptoms in the past year.

Results: Nineteen percent of adolescents reported disabilities. Disabled adolescents experienced significantly fewer protective factors and were more likely to have used illegal substances and been recently bullied, even when they did not report depressive symptoms. After adjusting for demographics and risk factors, linear regression models indicated disability status was associated with increased seriousness of suicide risk regardless of the presence or absence of depressive symptoms (beta-coefficients 0.25, \(P<0.01\); and 0.13, \(P<0.01\), respectively). In adjusted logistic regression models, disabled adolescents with depressive symptoms were more likely to report suicidal ideation (odds ratio (OR)=1.54; 95% confidence interval (CI), 1.29-1.85), suicide plan (OR=1.47; 95% CI, 1.24-1.74), and suicide attempt (OR=1.44; 95% CI, 1.17-1.76) than non-disabled adolescents. Disabled adolescents without depressive symptoms were also more likely to report suicidal ideation (OR=2.00; 95% CI, 1.57-2.54), suicide plan (OR=1.49; 95% CI, 1.14-1.95), and suicide attempt (OR=2.05; 95% CI, 1.50-2.81).

Conclusions: Disabled adolescents reported significantly higher rates of suicide risk behaviors than their non-disabled peers. Disability status was associated with increased seriousness of suicide risk behaviors. Even disabled adolescents who did not experience depressive symptoms in the past year reported significantly more suicide risk behaviors than non-disabled adolescents; they should be specifically included in suicide prevention interventions. Working to increase disabled adolescents’ exposure to multiple domains of protective factors may help to reduce suicide risk among this population.

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