

National Institute of Mental Health (<https://www.nimh.nih.gov/index.shtml>)

The NIMH is a federal agency that conducts research on mental disorders, and is a sub-branch of the member institutions of the National Institutes of Health. It seeks to transform understanding of the issue of mental health through research. Though it has important information across issues of mental health, its page on suicide gives access to a large portion of data that I will be looking at in my project.

American Foundation for Suicide Prevention (<https://afsp.org/>)

The AFSP, like the NIMH, does work in scientific research but is more a financial donor in this sense than an investigator. The AFSP takes work from institutions like the NIMH and allows it to inform their consciousness-raising techniques and advocacy efforts. It provides statistics that will be useful in tracing data sources so that I can construct my data pool. It provides state fact sheets that will help construct the smaller state databases.

Centers for Disease Control and Prevention

In effect, this will be the most direct source of data. The CDC is a national public health institute and collects many data sets regarding health in the United States. Their publicly available data sheets on injury mortality will provide the raw data, but I will be looking to other types of sources for inspiration in the visualization of this data.

Gapminder (<https://www.gapminder.org/>)

Gapminder is a self-branded “fact tank” and aims to fight misconceptions about global development through big data approaches to the world’s problems. This tool is more of a supplementary resource in that it provides estimates of suicide rates (globally) and can be used to compare the United States; moreover, its interface will be useful in exploring correlations in global suicide trends (which I may use not to expand the project globally per se, but rather shed light on what factors I could pay attention to in exploring suicide in the US context).

Social Explorer (<https://www.socialexplorer.com/a9676d974c/explore>)

Social Explorer is a UGA-based resource that provides data maps alongside demographic data. In a broader lens, it provides “mentally-unhealthy day” reports by county in the United States (as well as many other datasets). Beyond the more narrow

scope of suicide, this can be used to bolster the point that many more people are struggling with mental health despite the relative silence on the issue in national discourse.

Racial Identity and Reasons for Living in African American Female Suicide Attempters.
(<http://proxy-remote.galib.uga.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=sih&AN=82983908&site=ehost-live>)

Abstract: This article investigated the association between racial identity and reasons for living in African American women who have attempted suicide. Particular attention was paid to the relation between two elements of racial identity (private regard, racial centrality) and reasons for living, an alternative assessment of suicidal risk. While private regard refers to an individual's beliefs about the African American race, racial centrality describes the importance an individual places on their racial identity. The sample included 82 low-income African American women, ages 18-64, who reported a suicide attempt in the past 12 months. Results indicated that, as predicted, higher private regard was associated with more reasons for living. Contrary to expectations, racial centrality was not correlated with reasons for living nor was there an interaction between private regard and racial centrality indicating that racial centrality did not function as a moderator in predicting participants' reasons for living scores.\

Because I'm trying to tackle such a wide issue, I want some of the research literature to provide some frameworks with which to talk about identity. This is one iteration of that goal.

Women and suicide: beyond the gender paradox.
(<http://proxy-remote.galib.uga.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=sih&AN=94886034&site=ehost-live>)

Abstract: Traditionally, suicide research has focused on male mortality, with little attention paid to the female experience of suicide. This means there has been a lack of research examining how female suicide rates and behaviours have changed over time and between countries. Through an exploration of the World Health Organisation Statistical Information System (WHOSIS) data, this paper aims to analyse changes in the trends of female suicide across the period 1950 to 2009 in 106 countries. By seeking understanding as to how suicidal behaviours are gendered within specific cultures and societies and by unpacking the Gender Paradox using Cultural Scripts Theory, this paper explores some possible culturally relevant explanations for female suicide rates and behaviours worthy of future research attention. Analysing the data and

its limitations, and acknowledging its place within social and cultural constructs, allows for better understanding of the fatal female suicidal behaviour.

I find gender and deconstructions of gender to be a compelling lens for understanding how mental health impacts individuals. To that extent, I want to push beyond the male-centered research and (hopefully, though I imagine the research will be sparse) beyond the binary to better characterize how gender is impacting people differently in their mental health experiences.

Men's sexual orientation and suicide: Evidence for U.S. adolescent-specific risk (<http://proxy-remote.galib.uga.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=sih&AN=71414078&site=ehost-live>)

Abstract: There is strong consensus in the research literature that adolescent and adult men who report same-sex sexual orientations, identities, and behaviors are at higher risk for suicide. Recent studies of general adolescent suicide risk have identified developmental trajectories that peak during the teenage years. Because the adolescent years are characterized by the development and heightened awareness of gender roles and sexual scripts closely tied to dominant cultural ideals of masculinity and heterosexuality, an adolescent-focused developmental trajectory for suicide risk might be particularly relevant for males with adolescent same-sex sexual orientations. Specifically, the risk for suicidal thoughts and attempts for males with same-sex attractions is largely limited to the adolescent years. These results offer new insights for suicide prevention and intervention for male adolescents and adults with same-sex sexual orientations.

Much like race and gender, sexuality is highly impactful as there are a number of studies out that discuss specifically LGB (assumed cis) individuals' mental health experiences. Again, pushing past the binary of gender would be useful in finding a better way to talk about gender identity inclusively.

Suicide and Soul Wound: Stress, Coping, and Culture in the American Indian and Alaska Native Youth Context.

Suicide, the second leading cause of death for American Indian and Alaska Native (AI) youth ages 15 to 24, raises a critical issue for social work research and practice. This paper argues that AI youth suicide is a contemporary manifestation of "soul wound" and expands the definition of soul wound to include present stressors and coping mechanisms for youth that are characterized by a legacy of colonization and cultural oppression. While AI youth come from diverse communities, this paper will demonstrate the importance of examining youth suicide as part of the overall AI experience in the

United States. Using an indigenist stress process model framework, it will subsequently examine four forms of stressors informed by the marginalization of the AI population: psychological strains of historical trauma, environmental stressors, quotidian stressors arising from socioeconomic factors, and adversity from personal and relational role conflicts. AI youth mediate these stressors through coping mechanisms around social support and collective mastery. This paper will conclude with a call to develop an anti-oppressive, culturally relevant social work practice that supports meaningful identity development and collective efficacy.

See article on race/ethnicity for more relevant exploration of this topic and its relation to the project.

ADOLESCENT SUICIDAL BEHAVIOR: DEVELOPMENT OF A THEORETICAL MODEL USING STRUCTURAL EQUATION MODELING.

<http://proxy-remote.galib.uga.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=sih&AN=111282987&site=ehost-live>

Abstract: The occurrence of approximately 4,600 completed suicides and 157,000 suicide attempts each year indicates that adolescent suicide continues to be a pervasive problem in the United States (Centers for Disease Control and Prevention, 2014a). This was an exploratory, quantitative study that sought to contribute to on-going efforts to prevent adolescent suicide. Structural equation modeling was used to develop a theoretical model using dataset number 117 of the National Data Archive on Child Abuse and Neglect to identify and explain relationships between variables that may contribute to suicidal behavior within adolescents. Three models were developed. Variables included in the models were: Biological sex, suicidal behavior, and factor TraumaMood (comprised of three indicator variables for trauma and two for depression). Model 3 demonstrated the best goodness of fit (Satorra-Bentler $X^2 = 11.80$, $p < .160$; CFI = .946; NFI = .981), and was retained. Model 3 acceptably explained about 40% of the variance in adolescent suicidal behavior. Of that 40%, the majority was attributed to depression and PTSD. Model 3 indicated that sex did not substantially contribute to adolescent suicidal behavior on its own, but that it did substantially contribute to PTSD and depression. Two Post-hoc theories were developed. One, that sex has an indirect path to adolescent suicide through depression and PTSD. Two, that internalization may be a latent factor not included in Model 3 that further explains adolescent suicidal behavior. Further research is needed to replicate the study and test the two Post-hoc hypotheses.