

Behavioral Emergencies Update



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President's Column

Lisa Firestone, PhD, Director of Research & Education
The Glendon Association, Santa Barbara, CA

I want to take this opportunity to highlight some important developments relevant to our focus on clinical emergencies, particularly suicide and violence.

Because these are such important issues and the size of our division is small, we have designed a flier that is available on the section website to help recruit new members. At this year's American Association of Suicidology's annual conference, the fliers were distributed to potential new members to the section. We would appreciate our members distributing these fliers in any setting where they may come across psychologists who would be interested in joining our section. Thanks to Phil

Kleespies and his students we now have a directory of internship programs that offer training in psychiatric emergencies which you can access on our section website as well.

With our nation's recent economic woes, it seems particularly important for psychologists to focus attention, and receive training in the prevention of suicide and violence.

Research has demonstrated that suicide rates increase in hard economic times. The CDC recently announced that from 1928-2007 suicide rates for person's ages 25-64 rose and fell with economic conditions. In states where we have recent data, on average there has been an increase in the suicide rates. There has also been a

HEADING TO WASHINGTON DC? APA ANNUAL CONVENTION, AUGUST 4-7

There are many sessions relevant to Section VII members! Check out the the handy tear-out on page 4 listing the sessions sponsored by Section VII during the convention, and we'll see you in DC!



documented increase in calls to our national Suicide Prevention Life Line (800-273 TALK). Regarding violence rates, research has demonstrated that as unemployment increases, the homicide rate increases; similarly, increases in disparity between rich and poor are correlated with increased homicide rates. In addition, as I am sure you are all aware, we have had an alarming increase of the rate of suicide in our military personnel. This has led to the creation of the Department of Defense Military Suicide Research Consortium, with \$17 million for suicide prevention, intervention and postvention. Thomas Joiner, a familiar figure to most of us, and current editor-in-chief of *Suicide and Life Threatening Behavior*, is the co-director of the Consortium with Peter Gutierrez, past president of the American Association of Suicidology. Preliminary research from the Army's STARRS (Study to Assess Risk and Resilience in Service members) program found that the rate of suicide was highest for those soldiers currently deployed 18.3 as opposed to 15.9 after deployment. The rate for women in the military rose from 5.1 to 15.2, while

deployed, and for men from 14.8 to 21.1. The numerous projects that the military is funding should yield invaluable data on suicide prevention and intervention. In addition, the military, and the army in particular have increased their attempts to reach out to at-risk service members through the provision of resources, including the special Suicide Prevention Life Line number for military personnel and the army's suicide prevention website.

Dr. James Gilligan, a Harvard Criminal Psychologist, has written a soon-to-be-released book entitled *Why Some Politicians Are More Dangerous to Your Health Than Others*, which is relevant to the reduction of both suicide and violence. The book tracks changes in both homicide and suicide rates over 104 years starting in 1900 when we began collecting national death surveillance records. The book demonstrates the important link between differential political agendas and the rise and fall of mortality rates. Both violence and suicide rates tend to increase under Republican administrations and decrease under Democratic ones. The intervening variables include the increase in

the gap between the rich and the poor and the reduction or increase of access to services and opportunities for the poor. This book should garner considerable attention upon its release. It outlines the public policy implications of these findings for the reduction of the homicide and the suicide rates. In addition, Dr. Gilligan was one of the expert witnesses in the Supreme Court case, *Brown vs. Plata*, which resulted in the court's ordering the state of California to reduce its prison population by more than 30,000 inmates. Dr. Gilligan has stated that this landmark decision has the potential for correcting two mistakes our country has made with respect to incarceration. One is "mass incarceration", particularly of minorities, and second, the incarceration of the chronically mentally ill. He has described how our prisons have become defacto mental hospitals. His hope is that the decision will provide an opportunity to correct these mistakes, stop over-incarceration, and improve mental health care for our most vulnerable population, the chronically mentally ill. In addition, he hopes for a move toward rehabilitation of prisoners as opposed to a punishment model, which research demonstrates increases violence. Dr.

Gilligan's vision is for a restorative justice model which would incorporate programs that have been demonstrated to be effective in rehabilitating violent offenders. He advocates for a new approach to treating the

mentally ill, either in community mental health settings, or, for the small proportion of the mentally ill who are a danger to society, providing long-term humane care in an appropriate setting.

I would also like to take this opportunity to mention the panel that our section is sponsoring this year at the American Psychological Association's

Annual Convention, *The Link Between Bullying and Suicide*, which will focus on LGBT (Lesbian, Gay, Bisexual, Transgendered) youth. Research has shown that LGBT youth are disproportionately bullied, and that the effects of this bullying increase the risk of suicide attempts into adulthood. Our past president, Dr. Michael Hendricks, will chair the panel. He has recently conducted research on suicide in the transgendered population and found alarmingly high rates. The news media brought attention to the phenomenon following a rash of incidents in which LGBT



Lisa Firestone, PhD

teens were bullied and then died by suicide. Cyber bullying was also implicated in these tragic deaths. One positive result of this media attention was the creation of the “It Gets Better” project, spearheaded by Dan Savage, syndicated columnist and author. The resulting website as well as more than 10,000 user-created YouTube videos, including those from celebrities and politicians, including President Obama, are addressed to LGBT teens. Both the website and the videos stress the fact that their lives will get better, thereby providing hope, an essential ingredient in suicide prevention.

And lastly, in reviewing some positive developments in technology for suicide and violence prevention, I want to bring

awareness to a number smart phone apps. These include the Suicide Crisis Support app by QPR and the “ASK” app (which includes suicide warning signs and crisis line numbers). There are also apps for teen dating violence and domestic violence which include questions for establishing what is inappropriate behavior and where a person can get help. So with much food for thought we hope you join us at APA for our various events, including Lanny Berman, Ph.D., ABPP, Executive Director American Association of Suicidology, receiving the sections Career Achievement Award. Dr. Berman will be presenting with me On Reforming Formulations of Suicide Risk.

Membership Information

**IF YOU HAVEN'T RENEWED YOUR MEMBERSHIP TO SECTION VII, NOW IS THE TIME!
NEW MEMBERS ARE ALWAYS WELCOME!**

**IF YOU HAVE MEMBERSHIP QUESTIONS OR NEED TO REQUEST A MEMBERSHIP FORM,
PLEASE EMAIL, DR. LILLIAN M. RANGE:
lrangle@ohlcc.edu**

**MEMBERSHIP FORMS CAN ALSO BE FOUND ON OUR WEBSITE:
<http://www.apa.org/divisions/div12/sections/section7/>**

**ADDITIONALLY, IF YOU ARE NOT ALREADY A MEMBER OF DIVISION 12 OF APA,
PLEASE CONSIDER JOINING.**

**INFORMATION AS TO HOW TO JOIN CAN BE ACCESSED HERE:
WWW.DIV12.ORG/MEMBERSHIP**

APA Panel

The Link between Bullying and Suicide in LGBT Youth

American Psychological Association Annual Convention, Washington DC

Sunday, August 7, 10:00-11:50am

**Walter E. Washington Convention Center
Room 140B**

Panel Overview

Dr. Bruce Bongar, Pacific Graduate School of Psychology of Palo Alto University, Multicultural Suicide Research Center

Dr. Peter Goldblum Professor, Director of CLEAR, Director of LGBTQ Program

Dr. Paul Poteat, Boston College, Assistant Professor, Counseling Psychology Counseling, Developmental, and Educational Psychology Department

Dr. Caitlin Ryan, San Francisco State University, Director of the Family Acceptance Project, Marian Wright Edelman Institute

Dr. Dorothy Espelage University of Illinois, Urbana-Champaign Professor of Child Development

Panel Title: Exploring the Link between Bullying and Suicide

Panel Chair: Dr. Michael Hendricks, Past President Section VII

Panel Discussant: Dr. Lisa Firestone, Present of Section VII

Topic: Recent Media Accounts of Suicide Due to Bullying: A New Trend or Old News

Summary: A synopsis of their review of the research and media, point out barriers in this area, and make research and policy recommendations based on the current state of the science.

Topic: Moderators of the Effects of Discriminatory Victimization on Suicidality among LGBTQ Youth

Summary: Many LGBTQ youth continue to report discriminatory victimization in schools. The association between victimization and suicidality has been examined prominently in empirical research and its discussion has been elevated following the recent coverage of LGBTQ youth suicides.

Topic: Roles of Families in Reducing Risk for Suicide in LGBT Youth

Summary: Research from the Family Acceptance Project shows that family acceptance protects against suicidal behavior, and parents advocacy is an important accepting behavior to address bullying in LGBT youth.

Topic: Suicide, Bullying Victimization and LGBTQ Youth

Summary: This paper presents data on victimization rates and suicidal ideation/attempts among early and late adolescents who identify as LGBT or straight.

Section VII Sponsored/Relevant Events at the APA Convention



**Tear it out and take it
with you to APA!**



Page

Thursday, August 4 –

SECTION VII BUSINESS MEETING

12:00-12:50pm

East Overlook Room of the Walter E. Washington Convention Center

Friday, August 5 –

DIVISION 12 CONVERSATION HOUR AND AWARD CEREMONY

5:00-5:50pm

Renaissance Washington Hotel, Congress Hall A

Career Achievement Award for Section VII: Lanny Berman, Ph.D., ABPP

Graduate Student Research Awards: Danielle Jahn, lore m. dickey

DIVISION 12 SOCIAL HOUR

6:00-6:50pm

Renaissance Washington Hotel, Congress Hall A

Saturday, August 6 –

SECTION VII PRESIDENTIAL & CAREER ACHIEVEMENT AWARD ADDRESSES

1:00-1:50pm

Presidential Address: Dr. Lisa Firestone, *Objective Assessment, Measures of Suicide and Violence Risk*

Career Achievement Award Address: Lanny Berman, Ph.D., ABPP, *On Reforming Formulations of Suicide Risk*

Walter E. Washington Convention Center, Room 155

SESSION: INSIGHTS INTO SUICIDE

10:00-10:50am

Convention Center, Room 208

Presentation: Psychologist Suicide: Incidence, Impact, Implications

Phillip M. Kleespies PhD

Sunday, August 7 –

SYMPOSIUM: EXPLORING THE LINK BETWEEN BULLYING AND SUICIDE

10:00-11:50am

Walter E. Washington Convention Center, Room 140B

Symposium Chair: Dr. Michael Hendricks, Symposium

Discussant: Dr. Lisa Firestone

Symposium Presenters: Dr. Bruce Bongar, Dr. Peter Goldblum, Dr. Paul Poteat, Dr. Caitlyn Ryan, and Dr. Dorothy Espalage

Psychologist, Heal Thyself?

Phillip M. Kleespies, Ph.D.

VA Boston Healthcare System

In my last article for this newsletter, I mentioned the collaboration between Section VII and the American Psychological Association's Advisory Committee on Colleague Assistance (ACCA) involving an inquiry into the issue of psychologist or colleague suicide. As noted in that article, this inquiry was prompted by two recent psychologist suicides that were brought to the attention of ACCA. A conjoint subcommittee was formed and consisted of the writer (co-chair), Dr. Diane Bridgeman from ACCA (co-chair), Drs. Dan Galper and Lynn Bufka (from the APA Practice Directorate), and Section VII members Drs. Bruce Bongar, Marc Hillbrand, Kimberly Van Orden, and Robert Yufit. This subcommittee reviewed the extant empirical literature on suicide rates for psychologists, evaluated unpublished data on psychologist suicide provided by the National Institute of Occupational Safety and Health (NIOSH), interviewed colleagues of 14 psychologists who had reportedly died by suicide, reviewed published case reports of the impact of therapist suicides on patients or clients, and linked their findings to the literature on professional distress, impairment, and self-care.

Following this inquiry, the committee concluded that there was evidence suggestive of an elevated risk of suicide for psychologists

in past decades. It also concluded that there is a need for further research to confirm if there is a heightened risk of suicide for psychologists in the present day, and to investigate what factors might contribute to such risk. Interviews of colleague-survivors suggested that the impact of a psychologist's suicide can have a wide-ranging effect on family, colleagues, students, interns, and patients or clients.

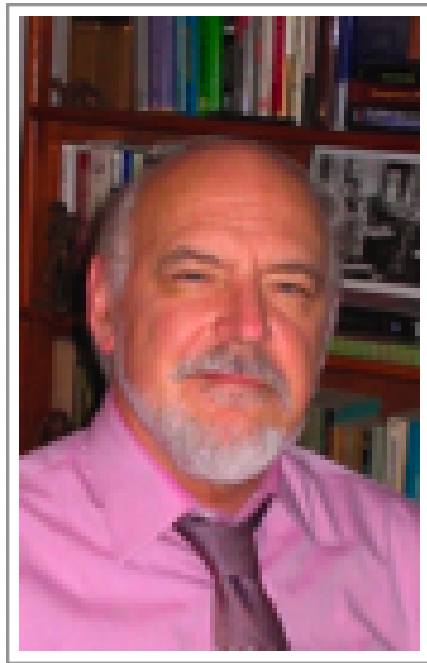
Published case reports of patients or clients who lost a therapist to suicide

The knowledge and expertise that psychologists have in the assessment and treatment of mental disorders does not necessarily make them immune to mental disorders.

suggested that, following the death, they often felt depressed, numb, angry, hopeless and/or abandoned. Some had a sense of guilt about having burdened the therapist with their problems. Many refused to re-engage with a new therapist in the immediate aftermath. The full details of the committee's report can be read in an advance on-line publication (Kleespies, et al., 2011) and it will appear in the future in hard copy in the journal *Professional Psychology: Research and Practice*.

In the process of doing the investigation for the article noted above, it became clear that the knowledge and expertise that psychologists have in the assessment and

treatment of mental disorders does not necessarily make them immune to mental disorders or ensure their optimal functioning (Good, Khairallah, & Mintz, 2009). In fact, large surveys have indicated that psychologists are at risk for mental health problems such as depression, anxiety, substance abuse, and suicidality. Pope and Tabachnik (1994), for example, found that most participants in a national sample of 800 psychologists had been in therapy, and, of those, 61% reported that they had suffered at least one episode of clinical depression. Twenty-nine percent stated that, at some point, they had felt suicidal, while nearly 4% reported having made a suicide attempt. In another survey of over 1000 randomly sampled counseling psychologists, Gilroy, Carroll, and Murra (2002) found that 62% of the respondents self-identified as depressed. Moreover, 42% of those reporting depression stated that they had experienced some form of suicidal ideation or behavior. Finally, it was found that 40-60% of responding practitioners in a 2009 APA Colleague Assistance and Wellness Survey reported at least a little disruption in professional functioning due to burnout, anxiety, or depression. Eighteen percent of the participants in this survey acknowledged that they had had suicidal ideation while



Phillip Kleespies, PhD

dealing with personal and professional stressors or challenges (American Psychological Association, 2010).

Findings such as these might lead one to coin an adage such as “Psychologist, heal thyself”. This statement is, of course, a paraphrase of the biblical admonishment directed at physicians. It may, however, have application to psychologists as well. A number of hypotheses have been advanced to explain the findings noted in the article cited above (Kleespies, et al., 2011): e.g., stresses in the profession of psychology, obstacles to seeking mental health care for psychologists, and/or a self-selection process through which vulnerable individuals choose psychology as a profession. Only further research may shed light on such possible contributing factors. Moreover, to keep things in perspective, it needs to be noted that other health professions such as pharmacists, physicians, and dentists have been found to have elevated rates of suicide (Boxer, Burnett, & Swanson, 1995).

The fact remains, however, that the surveys cited above indicate that a substantial number of psychologists seem to have emotional and mental issues that could impair their functioning. Yet, as Schoener 8

(1999) has pointed out, psychology as a field has not emphasized education about the risks of professional impairment nor education about the possible benefits of wellness practices during training as well as during one's professional career. Thus, Schwebel and Coster (1998) conducted a survey with the heads of 107 APA-approved graduate programs in professional Psychology to learn their views on well-functioning in psychologists. Programmatic efforts to institute means to prevent impairment were weak. While program directors offered many good suggestions for ways to improve education about well-functioning and prevent impairment, they saw lack of time, funding,

and space in the curriculum as great obstacles. Yet, what is the cost in human terms for those psychologists who struggle with impairments and for the patients or clients whom they may poorly serve? Were psychology graduate and internship programs to put greater emphasis on wellness practices and obtaining assistance for impairments (perhaps through confidential contacts with state psychological association colleague assistance programs), it seems plausible that future psychologists would be more likely to perceive the signs of impending personal difficulty and be more aware of options for obtaining assistance.

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Section VII Graduate Student Research Award

Michael L. Hendricks, Ph.D., ABPP
Past President

This year, we received several very good papers in submission for the Graduate Student Research Award. In fact, when the papers were rated independently by three different judges, three papers were ranked very highly, with two of them virtually indistinguishable in the scores. For this reason, the Executive Committee agreed this year to designate two award winners and one runner-up.

The first award winner is Danielle R. Jahn, whose paper is entitled, “The impact of the nature of relationships on perceived burdensomeness and suicide ideation in a community sample of older adults.” Ms. Jahn is completing her doctoral studies at Texas Tech University. The second award winner is Lore M. Dickey, who will obtain his Ph.D. in August from the University of North Dakota. His paper is entitled, “Self-Injury in the Transgender Community.” Both papers were rated and

ranked very highly by all three judges. Both students will be presented with a plaque and a check for \$200 at the Division 12 Awards Ceremony, to be held at 5:00 p.m. on Friday of Convention (see Convention schedule

elsewhere in this newsletter for details). The runner-up for this year’s competition is Brett J. Litwiller, from Eastern Illinois University. His paper is entitled, “Other Risk Behaviors Explain How Victimization Increases Adolescent Suicide Risk”; he will receive a certificate indicating his runner-up status.



**Michael L. Hendricks,
 Ph.D., ABPP**

Both students will present their winning papers in poster format at the Division 12 Awards Ceremony and the Social Hour that follows immediately. (Mr. Litwiller was invited to display his paper as well, but is unable to attend Convention.) Please join us in congratulating all three of these students for their outstanding work and in reading their papers at Convention.

David Drummond, PhD Accepts President Elect Position for Section VII

David Drummond, PhD, is Associate Professor of Psychiatry at Oregon Health Sciences University and a clinical psychologist at the Portland VA Medical Center.

Dr. Drummond directs the VA's Behavioral Threat Management Program (BTMP). This program provides a range of educational and research initiatives engineered to reduce the risk of violence in VA health care facilities. As Director of BTMP, Dr. Drummond is responsible for policy development, training, research, and consultation on matters relating to violence in VA health care facilities. Dr. Drummond reports that surveys conducted with VA employees over several years demonstrate that progress is being made toward the program's goal of violence reduction. Dr. Drummond's and the BTMP team's work in the VA was recognized by Harvard's Kennedy School of Government for being among the "Top 50 Innovations in Government."

In his role as an Associate Professor of Psychiatry at Oregon Health Sciences University, Dr. Drummond also offers training to a wide range of health care professionals outside the

VA. He is a founding member and past officer of the NW Chapter of the Association of Threat Assessment Professionals where he successfully brought together behavioral scientists, law enforcement professionals, corporate security and human resources professionals, and others to address workplace violence, domestic violence, school violence,

Dr. Drummond is responsible for policy development, training, research, and consultation on matters relating to violence in VA health care facilities.



David Drummond, PhD

and terrorism. In addition to having consulted on numerous workplace violence cases, he has also provided "on-the-ground" emergency services as an American Red Cross volunteer on several domestic disasters. For many years, Dr. Drummond provided direct mental health services and supervised other clinicians. He coauthored some of the earliest articles on PTSD in the early 1980's.

He has also published articles and book chapters on violence and PTSD.

Internship Directory

Danielle Jahn, BS, BA

For a number of years, APA's Section on Clinical Emergencies and Crises (Division 12, Section VII) has made available a database of APPIC pre-doctoral internships that provide training in behavioral emergencies. This resource is a valuable tool for students who are looking for internship sites that will expand on their graduate training in assessing and managing risk for suicide and interpersonal violence. Recently, a group of students and professionals associated with this section and with the American Association for Suicidology completed a revision and update to this database. This group included Dr. Phil Kleespies, Chris Corona, Danielle Jahn, and Michael Nadorff.

The information provided in this database was gathered from a survey sent to all APPIC-listed internship training directors. The training directors of over 100 sites responded and indicated that their sites offer training in management of behavioral emergencies. Unlike the previous directory, the revised version is available for download as a Microsoft Excel



Danielle Jahn, BA BS

spreadsheet. This change allows students to search the information and sort sites based on a number of different criteria. The goal of this format change was to create more functionality within the database and thus make the use of the database more efficient for students.

A web-based version of the database is available on the Section VII website (<http://www.apa.org/divisions/div12/sections/section7/>), and a downloadable Excel version is available on the APPIC website (http://www.appic.org/training/7_1_training_subject_rev_1_08.htm#TDResources).

If you have feedback on the database or suggestions for improvement, please email anyone involved in the project. Email addresses can be found

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