ENTANGLED:
Nurses with Mental Health Problems who Die by Suicide

Arianna Barnes, DNP, RN, CCRN, PHN

Providence Mission Hospital, Mission Viejo, CA
Acknowledging the Team

Gordon Y. Ye
Undergraduate Researcher, University of California San Diego School of Medicine, Department of Psychiatry

Cadie Ayers, BA, BS, MS
Health Systems Specialist-Executive Assistant to the Chief Nursing Officer
Department of Veterans Affairs

Amanda Choflet, DNP, RN, NEA-BC
Assistant Professor, San Diego State University School of Nursing

Kelly C. Lee, PharmD, MAS, BCPP
Professor of Clinical Pharmacy, University of California San Diego, Skaggs School of Pharmacy and Pharmaceutical Sciences

Sidney Zisook, MD
Professor, University of California San Diego School of Medicine, Department of Psychiatry

Judy E. Davidson, DNP, RN, MCCM, FAAN
Nurse Scientist, University of California San Diego Health
Research Scientist, University of California San Diego School of Medicine, Department of Psychiatry
Nurses in the United States die by suicide more often than the general population.

Although we know mental health problems is a risk factor for nurse suicide, we do not know the contextual nature of these problems in the nurse’s life before death.
Literature Review

- Nurses die by suicide more often than the general population (Davidson et al., 2020; Davis et al., 2021; Patrician et al., 2020)
- Nurses die by suicide more frequently when compared to those in other occupations (Hawton et al., 2011; Milner et al., 2016; Skegg et al., 2010; Windsor-Shellard & Gunnell, 2019)
- Nurses in Canada found to have higher rates of suicidal ideation, plans, or attempts (Stelnicki et al., 2020)
- 18.3% of Taiwanese nurses surveyed had suicidal ideation (Chin et al., 2019).
Purpose/Aim

Purpose

• explore the death investigation narratives of nurses identified as having diagnosed mental health and substance use problems who died by suicide.

Goal

• inform suicide prevention strategies amongst nurses with mental health problems, meaningful advocacy, and future research opportunities.
Methods/Approach

• **Design:** mixed method research pairing manual thematic analysis with natural language processing

• **Sample:** A purposive sampling of nurses who died by suicide entered into the Center for Disease Control and Prevention's (CDC) National Violent Death Registry System (NVRDS) identified as having a mental health diagnosis including substance use. Non-human subjects research by the institutional review board (#170165) and oversight was provided by the US CDC.

• **Time frame:** 2003-2017

• **Data:** certified medical examiner (CME) and law enforcement (LE) death investigation narratives

• **Analysis:** manual inductive thematic analysis and natural language processing (NLP) using Latent Dirichlet Allocation and pyLDAvis
Results: 5 Themes

1. Mental health treatment
2. Poor general health and chronic pain
3. Substance use
4. Worsening mental health after bereavement
5. Repeating a family member’s suicide
Conclusion
Implication for practice

These findings echo the need for reducing stigmatization of mental health problems in nursing, removing barriers to help-seeking behaviors, and improving access to comprehensive, holistic management to address these entangled problems.

Future research to explore:
- Chronic conditions and mental health in nursing
- Suicide rates in states that do not remove licensure for substance use
- Bereavement experiences in nurses from a personal loss
- Similar means used among family members
References


