

Parsing the Influences of Depression and Insomnia on Suicide Ideation in Young Adults Using Longitudinal Data from South Texas

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BACKGROUND

In the past decade, researchers have begun to examine the relationship between sleep and mental health and have found that sleep problems—especially greater insomnia—are associated with greater depression and suicide behavior (Bernert et al., 2015; Pigeon et al., 2012). The great majority of studies that have assessed sleep and mental health, however, have used cross-sectional methods and the question of whether insomnia is a distinct risk factor for suicide behavior remains equivocal.

RESEARCH PURPOSES

- In the present study, we thus utilized a longitudinal design to examine the relationship of insomnia with depression and suicide ideation.
- In addition, we examined whether insomnia is a distinct risk factor for suicide ideation by assessing its influence on suicide when controlling for the effects of depression.

Correlations between Variables			
	Time 1 Insomnia	Time 1 Depression	Time 1 Suicide Ideation
Time 2 Insomnia	.82***	.59***	.26**
Time 2 Depression	.56***	.82***	.35***
Time 2 Suicide Ideation	.29**	.37***	.86***
<i>Note</i> : ** $p \le .01$,	***p \le .001		

METHODS

Participants

- Participants were 77 undergraduate students enrolled at a south Texas university. Females = 85.7%; males = 14.2%.
- M age = 19.4 (SD = 2.1).

Measures

- <u>Insomnia Severity Index</u> (Bastien et al., 2010) assesses behavioral and emotional insomnia-related symptoms for the past week.
- Center of Epidemiological Studies Depression Scale (Radloff, 1977) measures the frequency and severity of depression symptoms for the past week.
- Depression Symptom Index-Suicidality Subscale
 (Metalsky & Joiner, 1997) measures the frequency and intensity of suicide ideation.

Procedure

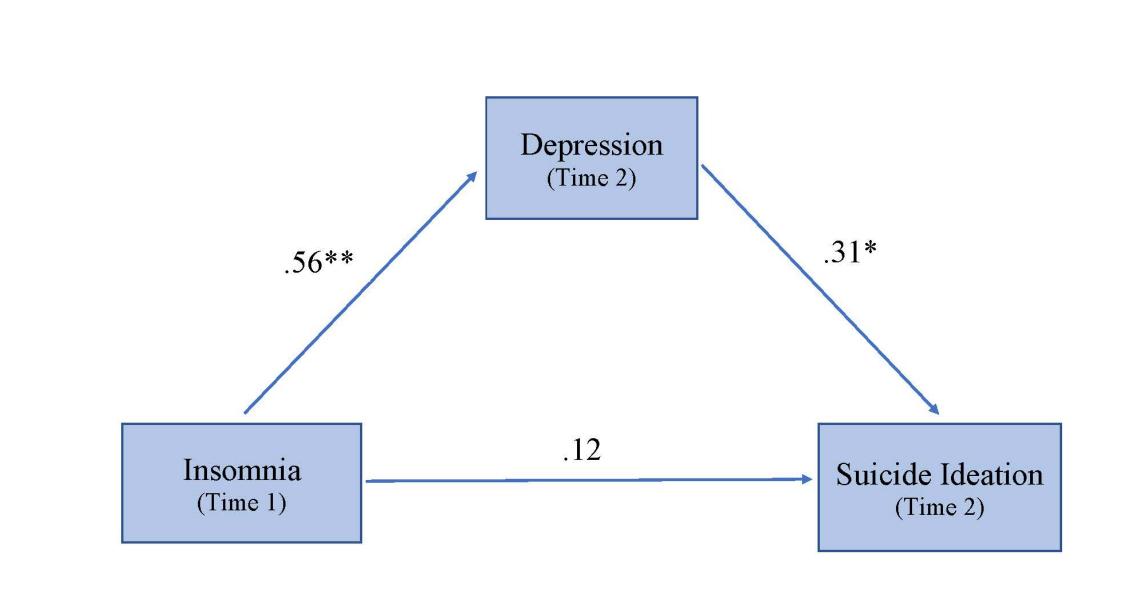
• The present study was part of a larger project on stress, sleep, physical activity, and health. Survey and physiological data were collected from participants during Monday morning lab-based sessions (Time 1) and Friday morning lab-based sessions (Time 2) of the same week.

RESULTS

- The association between Time 1 Insomnia and Time 2 Suicide Ideation (r = .29, p = .005) was no longer significant when controlling for Time 2 Depression (partial r = .10, p = .19).
- The association between Time 1 Depression and Time 2 Suicide Ideation (r = .37, p < .001) remained significant when controlling for Time 2 Insomnia (partial r = .23, p = .02).

RESULTS CONTINUED





Notes: Above values are standardized beta coefficients. *p < .01, **p < .001. Hierarchical Bayesian simulations indicated a significant indirect effect of insomnia (time 1) on suicide ideation (time 2) through depression (time 2) (unstandardized 95% CI = .0074, .0837, p = .01).

SUMMARY & CONCLUSIONS

- Our findings do not suggest that insomnia has a significant direct influence on suicide ideation. Rather, they suggest that insomnia's association with suicide ideation is through depression.
- Given that insomnia was directly and indirectly associated with depression and suicide ideation, insomnia may be a clinically meaningful intervention point and clinicians should thus assess for insomnia in the presence of depression and suicide ideation.
- Future research on sleep problems and suicide behavior should utilize prospective methods with a longer duration and should explore the association between additional sleep disorders (e.g., apnea) and suicide behavior.

Please contact joseph.hovey@utrgv.edu if you have questions about the project and please visit www.jhoveyphd.com if you would like a copy of the presentation.