

Family and socio-economic resources prevent suicide more effectively together

4 March 2014, by Amy Hodges



(Medical Xpress)—Family support and socioeconomic resources (such as education and employment) may be more likely to prevent suicide when a person has both, according to new research from Rice University.

The first-of-its-kind study, "Families, Resources and Suicide: Combined Effects on Mortality," examined how familial and socio-economic resources combine to decrease the occurrence of suicide. It found that while adults living with their spouses were 55 percent less likely to commit suicide than adults living alone, only adults with education beyond high school experienced this benefit; adults with a high school education or less living with their spouses were equally likely as adults living alone to die by suicide. The study also found that unmarried, unemployed adults living with children were 49 percent less likely to commit suicide than unemployed adults living alone. However, unmarried, employed adults living with children were equally likely as employed single adults to die by suicide.

Justin Denney, assistant professor of sociology in Rice's School of Social Sciences and associate director of the Kinder Institute's Urban Health Program, said that suicide has been a leading cause of premature death in the U.S. over the last 50 years; this finding has aroused concern from policymakers, researchers and <u>public health</u> <u>officials</u>. He noted that while suicide comes across as a very individual act, it actually is influenced by <u>social support</u> and integration.

Social support and socio-economic resources, including those found in the home, at work and through <u>educational attainment</u>, are known to have connections to health, Denney said. "My research suggests that household support systems and individual employment status and educational attainment are important contributors of <u>suicide risk</u> and combine in unique ways to decrease the risk of suicide."

The study included data collected from 935,802 participants (1,238 of whom subsequently committed suicide) between 1986 and 2004 in the National Health Interview Survey; that survey includes data about self-rated health, health behaviors and other factors influencing health, such as education and <u>employment status</u>. The participant records were then linked to a national mortality database, so if a respondent died, the survey had a record of the date and cause of death.

Denney said he hopes to expand this research in the future to include other causes of death.

"My previous research has focused heavily on how social and economic characteristics can influence <u>suicide</u> mortality, and I'm interested to expand it to focus on other causes of death," he said.

More information: Denney, J. T. (2014), "Families, Resources, and Suicide: Combined Effects on Mortality." *Journal of Marriage and Family*, 76: 218–231. DOI: 10.1111/jomf.12078



Provided by Rice University

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