

Development and implementation of a self-report screening instrument for suicidality among adolescents age 12-21 of diverse ethnic / cultural backgrounds. (main study includes adolescents age 18-21 only)

Published: 28-04-2010

Last updated: 04-05-2024

The present research protocol aims at the development and implementation of a valid self-report instrument for suicidality among adolescents. The instrument needs to be invariant for ethnicity and needs to register fluctuations in suicide risk and...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Suicidal and self-injurious behaviours NEC
Study type	Observational non invasive

Summary

ID

NL-OMON39769

Source

ToetsingOnline

Brief title

Development screening instrument for suicidality among adolescents.

Condition

- Suicidal and self-injurious behaviours NEC

Synonym

suicide ideation / thoughts about killing yourself

Research involving

Human

Sponsors and support

Primary sponsor: Vrije Universiteit

Source(s) of monetary or material Support: ZonMW

Intervention

Keyword: adolescents, screening, suicide

Outcome measures

Primary outcome

Primary parameters are reported self-harm or attempted suicide on the second measurement, and the severity of suicidal ideation. In addition, risk factors such as depression, hopelessness, impulsivity, hostility, rumination, alcohol & drugs, family-life, life-events, religion, self-image, control/mastery, peergroup, mental pain, loneliness, risk-behaviour, physical/sexual abuse, bullying and anger.

Secondary outcome

Secondary parameters are demographic variables such as age, sex, ethnicity and education.

Study description

Background summary

In the Netherlands annually an average of 46 youths up to the age of 19 die because of suicide. There is a need for a self-report instrument for suicide ideation among teenagers age 12 * 21. Moreover there is a need for an instrument that is invariant for ethnicity. Suicidal behaviour occurs among adolescents of diverse cultural backgrounds. Schools and youth health services are aware of signs of suicidality among youths and want to select those that require immediate

attention and help. There is no valid Dutch instrument in youth care and in youth-GGZ on which decisions for treatment can be made. The instrument should also become available as a selftest on the internet. Many adolescents are surfing the internet anonymously in search for information and advice about suicide.

Study objective

The present research protocol aims at the development and implementation of a valid self-report instrument for suicidality among adolescents. The instrument needs to be invariant for ethnicity and needs to register fluctuations in suicide risk and determine changes over time as a measure for improvement in the treatment in youth-GGZ. The importance of identification of suicidality lies in the fact that untreated suicidality can result in continuing and deterioration of emotional problems, suicide attempts and suicide. Both health benefits (faster and more validated risk assessment) and cost reduction (faster assistance, no unnecessary referrals) are achieved. The development of an instrument for suicidality will alert policy on the issue of adolescents with better information about their living situation.

Study design

1. Inventory of existing screening instruments and formulation item pool. Period May 2009 - August 2009: Based on foreign screening tools, clinical experience of experts and theoretical considerations an item pool was constructed from questions about suicidal thoughts and behaviours and risk indicators for suicidality.
2. testing item pool. January 2010 - December 2012: The item pool is presented to both adolescents under treatment of mental health care services and adolescent's going to school. With the obtained data, the item pool will be reduced, which allows further test construction.
3. Standardization and predictive value of instrument. Period June 2013 - May 2014: The preliminary instrument will be tested for predictive value with 4000 youngsters of 18 to 21 years (50% girls). The tool will be included in this study over a period of 3 months (2 measurements) and related to subsequent developments (self-harm or suicide attempts, the course of depression). Furthermore the influence of demographic factors such as ethnicity and environmental factors on the prediction will be examined. Convergent validity is examined with simultaneous assessment with questionnaires on suicide ideation, depression, hopelessness, impulsivity and hostility.
4. Scientific report and documentation test construction. Period Januari 2014 - December 2014.

Study burden and risks

It could be hypothesised that answering questions about suicidality could instigate suicidal thoughts or even suicidal behaviour.

However, this hypothesis is not scientifically validated in psychology and psychiatry. Gould et al. (2005) studied the effects associated with completing a self-report instrument for suicidality. In this study no iatrogenic effects were found.

In the present research the assessment is short in time, though it will encourage the subjects to reflect on own psychological well-being and possible suicidal ideation. Through follow-up appointments possible psychological burden will be identified and minimized, and if necessary, it can lead to referral to youth mental health care.

Contacts

Public

Vrije Universiteit

Van der Boechorststraat 1
Amsterdam 1081BT
NL

Scientific

Vrije Universiteit

Van der Boechorststraat 1
Amsterdam 1081BT
NL

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

In the pilot study:

Norm population:

- Age 12-21
- Informed consent by adolescent
- Informed consent by adolescent & parent for those under age 18;

Clinical population:

- Age 12-21
 - Consent by adolescent
 - Consent by parent for those under age 18
 - Treatment at GGZ institution.
 - Suicidality based on the following classification made by clinician (which must be motivated):
 - Not suicidal: No indication of suicidality
 - Possibly suicidal: Indication of risk behaviour
 - Most likely suicidal: Indication of suicidal ideation -intention or gestures (verbal or behavioural)
 - Evidently suicidal: Indication of recent suicidal attempt (past two months);
- Main study:;Norm population (Intermediate Vocational Education students) / visitors of 113online website
- Age 18-21
 - Informed consent by adolescent

Exclusion criteria

Mental retardation

Acute psychosis

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	28-06-2010
Enrollment:	4046
Type:	Actual

Ethics review

Approved WMO	
Date:	28-04-2010
Application type:	First submission
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	08-11-2010
Application type:	Amendment
Review commission:	METC Amsterdam UMC
Approved WMO	
Date:	23-04-2014
Application type:	Amendment
Review commission:	METC Amsterdam UMC

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL29670.029.09