

Joint Influence of Attachment Styles and Social Support Network on Lifetime Suicidal Behaviors



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Introduction

- Suicide is a significant public health concern in the United States, and in particular in the U.S Army.
- Attachment style and social support network (SSN) are associated with suicidal behavior (e.g., Wang et al., 2022).
- This study examined how these two factors jointly influence suicide ideation (SI) and suicide attempt (SA).



Method

Data and Participants: We conducted analyses using publicly available data from the New Soldier Study (NSS), a component of the Army Study to Assess Risk and Resilience in Servicemembers (Army STARRS) (Ursano et al., 2014). The NSS sample consists of 38,507 new soldiers who entered Basic Combat Training (BCT) between April 2011 and November 2012.

Method (cont.)

Measures

- ❖ Lifetime Suicidal Thoughts and Behaviors were assessed with a modified version of the Columbia Suicide Severity Rating Scale.
- ❖ Three attachment styles (preoccupied, fearful, and secure) were assessed with four items adapted from the Relationship Questionnaire (RQ, Bartholomew & Horowitz, 1991).
- ❖ SSN was measured with the number of people they felt really close to and who really care for them. A binary variable was created.
- ❖ Socio-demographics. Participant gender, age, sex, race/ethnicity (White vs. other), education (high school graduate or less vs. some college or more), and marital status (currently married vs. not currently married) were included as sociodemographic covariates.

Data Analysis

❖ The three attachment styles and SSN were simultaneously in logistic regression models for each outcome of lifetime SI, SA, and SA among soldiers with SI. Socio-demographic characteristics were included as covariates. Sensitivity analysis was conducted to further control for lifetime mental disorder.

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Conflict of Interest Statement: The Authors declare that there is no conflict of interest.

Results

Table 1. Multivariable Adjusted Odds Ratios

	Total Sample (N = 38,507)		Suicide Ideators (N = 5,334)
	Suicide Ideation	Suicide Attempt	Suicide Attempt
	OR (95% CI)	OR (95% CI)	OR (95% CI)
Socio-demographics			
Female vs. male	1.26 (1.13-1.41)	1.41 (1.05-1.89)	1.23 (0.90-1.69)
Age	0.95 (0.94-0.96)	0.92 (0.88-0.95)	0.96 (0.92-0.99)
Non-White vs. White	0.74 (0.69-0.80)	0.95 (0.76-1.19)	1.26 (0.97-1.59)
High school or lower	0.89 (0.82-0.96)	1.09 (0.86-1.38)	1.26 (0.97-1.63)
Not currently married	1.03 (0.91-1.16)	0.77 (0.56-1.06)	0.77 (0.55-1.07)
Attachment Style			
Preoccupied	2.72 (2.42-3.05)	2.82 (2.28-3.48)	1.41 (1.16-1.72)
Fearful	2.35 (2.14-2.57)	2.84 (2.32-3.48)	1.53 (1.25-1.87)
Secure	0.86 (0.80-0.92)	0.75 (0.62-0.91)	0.84 (0.69-1.02)
Smaller SSN	1.24 (1.16-1.32)	1.52 (1.27-1.83)	1.36 (1.13-1.64)

Note. Odds Ratios which are statistically >1 are highlighted in red and Odds Ratios which are statistically <1 are highlighted in green. Results were similar after controlling for lifetime mental disorder.

Discussion

- ❖ Results indicate that attachment styles and SSN are independent predictors of lifetime SI and SA. Modifying these attachment styles and increasing SSN are therefore possible intervention to lower risk of SA in the total population.
- ❖ A critical next step is to examine their interactions to guide intervention development.

Bartholomew, K., & Horowitz, L. M. (1991). Attachment styles among young adults: a test of a four-category model. *Journal of Personality and Social Psychology*, *61*(2), 226-244. https://doi.org/10.1037//0022-3514.61.2.226

Wang, J., Naifeh, J. A., Herberman Mash, H. B., Morganstein, J. C., Fullerton, C. S., Cozza, S. J., Stein, M. B., & Ursano, R. J. (2022). Attachment Style and Risk of Suicide Attempt Among New Soldiers in the U.S. Army. *Psychiatry*, *85*(4), 387–398. https://doi.org/10.1080/00332747.2022.2062661
Ursano, R. J., Colpe, L. J., Heeringa, S. G., Kessler, R. C., Schoenbaum, M., & Stein, M. B. (2014). The Army study to assess risk and resilience in servicemembers (Army STARRS). *Psychiatry*, *77*(2), 107-119.

https://doi.org/10.1521/psyc.2014.77.2.107