Name of Supervisor: Dr. Marnin J. Heisel, Ph.D., C.Psych.
Department: Psychiatry; Epidemiology & Biostatistics
Office Address: LHSC-Victoria Hospital, Office #A2-515
Email: Marnin.Heisel@lhsc.on.ca
Phone: 519-685-8500, ext. 75981
Supervisor’s website: https://www.schulich.uwo.ca/epibio/people/core_faculty/dr_marnin_heisel.html

Project Title: Investigating and Reducing Suicide Risk among Middle-Aged and Older Women

Project Description – include background, hypothesis, proposed methodology, and expected outcomes (one page maximum; you may attach a page to this form):

Older adults have among the highest rates of suicide worldwide (WHO, 2014) and the older adult population is growing (Statistics Canada, 2010). Research is needed to enhance understanding and inform the development and testing of interventions that reduce late-life suicide risk (CCSMH, 2006). The relative prevalence of non-lethal and lethal suicide behaviour differs by sex; women are far more likely to attempt suicide and men to die by suicide, a so-called “gender paradox” of suicide (Canetto & Lester, 1998). Although theoretical models and interventions regarding suicide risk are being increasingly investigated among men (Heisel et al., 2016; Oliffe et al., 2011, 2012), research is nearly absent on the equally important question of which factors confer psychological resiliency in older women, and thereby lessen their risk for suicide (Heisel & Duberstein, 2016). The current SRTP proposal was designed with these issues in mind.

With project funding from Movember Canada, we developed, refined, tested, and have begun disseminating Meaning-Centered Men’s Groups (MCMG; Heisel et al., 2016, 2018, in press), a 12-session psychological intervention group designed to promote psychological resiliency and prevent suicide ideation in men struggling with the transition to retirement. This approach is consistent with Frankl’s (1985) existential theory, with theory and research on suicide in men (Canetto, 2017; SPRC, 2016), and with our conceptual model (Heisel & Flett, 2014) and findings indicating that recognition of Meaning in Life (MIL) is negatively associated with depression and suicide ideation, positively associated with life satisfaction and psychological well-being (Heisel & Flett, 2006, 2008), is amenable to intervention (Heisel et al., 2015), and protects against the onset or worsening of suicide ideation over time (Heisel & Flett, 2016). Our preliminary findings indicate that MCMG participants find group satisfying, would recommend it to others, and experience significant improvement in psychological well-being and reduction in suicide ideation (Heisel et al., 2018, in press). We are now seeking extramural funding for an RCT of MCMG as compared with a Wait-List control, to further test the immediate and longer-term efficacy of this intervention, and to adapt MCMG for other groups at elevated risk.
Over the course of the MCMG study, we have been repeatedly approached by women eager to learn why we were focusing exclusively on older men, and to impress on us the need for groups for women. Indeed, women are twice as likely as men to be diagnosed with depression, are more likely to seek and participate in mental healthcare, and respond well to suicide prevention programs (De Leo et al., 2002; LaPierre et al., 2011; Oyama et al., 2005). Given these considerations, and principles of equity and social justice, we are proposing to adapt our meaning-centered group intervention for women facing the retirement transition. We aim to conduct one or more focus groups, each with 10-12 women over 55 who are facing retirement, to invite their feedback on our plan to adapt MCMG and seek their input on content and process changes to enhance this intervention for women. We will then recruit 10 women facing retirement into a 12-session, once-weekly course of an adapted meaning-centered group intervention, focusing on issues related to work, retirement, identity, relationships, and aging, as refined during the focus group(s). Participants will be 55 years or older, facing retirement (either before, during, or already retired), and are struggling with that transition. After an eligibility interview, participants will complete pre-, mid-, and post-group assessments of group processes and outcomes, and an exit interview to advise on aspects of the group to be retained, enhanced, or eliminated. The intervention would then be refined further, based on these data, and evaluated for dissemination by way of peer-review conference presentations and journal publication. The SRTP student will be involved throughout this process, as outlined in the objectives below.

* Note: Cited references appear at the end of the SRTP proposal.

**Research Environment** - Description of the number of research personnel, size of lab, etc.:

As a faculty member in Western’s Department of Psychiatry and as a Lawson Scientist, I have access to environmental supports and research space at Victoria Hospital and at the Parkwood Institute Mental Health Care Building. The size of our lab fluctuates over time, given the number of trainees and the status of our funded research projects. At present, I have one part-time Research Assistant working with me, with the expectation of hiring one or more additional personnel to support a grant funded by the Ontario Strategy for Patient Oriented Research Support Unit (OSSU) that is currently awaiting necessary approvals. In recent years, we have had as many as 5-7 lab members, including research personnel, administrative supports, and clinician and graduate student trainees. Medical students participating in the SRTP program will be assured the opportunity for close supervision and research mentorship directly by Dr. Heisel (1-2 hours/week, minimum) and for participating in lab meetings and activities.

**Expected Objectives/Accomplishments for Student for Year 1:**

1) Demonstrate a working knowledge of ethical research practices involving human participants and with research methods in mental health and in suicide prevention. 
   *This will be achieved via SRTP classwork/training sessions, supervision and mentorship, and independent study.*

2) Help coordinate one or more focus groups with middle-aged and older women, to inform the adaptation of a meaning-centered group intervention for those struggling with the transition to retirement, ideally to be delivered during the 2nd year of the SRTP project.
The focus group(s) will aim to identify specific content and processes to be added, deleted, or otherwise modified to better meet the needs of middle-aged and older women in transition. The SRTP student will assist in analyzing and writing-up findings of the focus group(s).

3) Contribute to a manuscript investigating risk and resiliency factors and their association with the presence, onset, and/or exacerbation of suicide ideation among older women. This work will involve a review of the literature on suicide in middle-aged and older women, and retrospective analysis of a combined dataset incorporating data collected in the context of 3 funded studies of late-life suicide prevention (Heisel & Flett, 2006; 2014; Heisel et al., 2015) from which we have already begun publishing (e.g., Wadhwa et al., in press). This manuscript will be developed for submission to a scholarly journal by the end of the 2nd year of the SRTP project, with the SRTP student receiving authorship credit.

Expected Objectives/Accomplishments for Student for Year 2:

1) Demonstrate initial competence in interviewing study participants involved in research on mental health and suicide prevention. The SRTP student will participate in interview training sessions, along with other study personnel to be hired, to be led by Dr. Heisel. The student will also join Dr. Heisel in interviewing study participants (ideally for an adapted meaning-centered group intervention for women facing retirement transition), and will gain in-vivo experience in observing and increasingly participating in mental health research interviews.

2) Disseminate findings of research on suicide prevention among middle-aged and older women. The SRTP student will present retrospective findings from the study of suicide risk and resiliency in middle-aged and older women to a scholarly audience; this can include local presentations to peers at Western through the SRTP program and/or at a local research event (e.g., London Health Research Day; Western’s Department of Psychiatry Research Day), and preparation of an abstract submission for potential presentation at a scientific conference.

As noted above, an additional aim is for study findings to be submitted, in manuscript form, for publication consideration to a peer-reviewed journal (e.g., Canadian Journal of Psychiatry, Suicide and Life-Threatening Behavior, American Journal of Geriatric Psychiatry, Clinical Gerontologist), with the SRTP student receiving authorship credit. The SRTP student would additionally be included in future publications from the adapted meaning-centered intervention for women in transition.

Certifications - if this project will require any certification approvals from one or more of the following offices, please check the appropriate box below. If you know the protocol information, please enter it into the text box provided (or enter the status of the approval in the text box):

- [ ] Human Ethics
- [ ] Animal Use Subcommittee
- [ ] Biohazard

Note: Certification approval should be obtained prior to the start of summer. Projects without this approval will not be a priority for funding.
References


(Originally published 1946).


Suicide Prevention Resource Center (2016). *Preventing suicide among men in the middle years: Recommendations for suicide prevention programs.* Waltham, MA: Education Development Center, Inc.