



Functional analytic psychotherapy (FAP) for older adults at risk for suicide: A conceptual rationale

Ali Molaie, M.A.
University of Nevada, Reno



Introduction

- Adults aged 70 and older have the highest rates of suicide in many regions of the world.¹
- Studies support the role of *social disconnectedness* as a risk factor for suicidal behavior (SB) among older adults.²
- Functional analytic psychotherapy (FAP)*³ targets functional classes of emotional and interpersonal behaviors that interfere with development and maintenance of social connectedness.



- This poster reviews the concordance between social risk factors for SB in older adults and functional classes targeted in FAP.
- Aim:** To provide an initial theoretical rationale for the empirical investigation of a novel application of FAP to elders at risk for suicide.

Methodology

Psychological literature databases were reviewed for:

1) empirical reports that examined markers of social disconnectedness associated with suicide-related outcomes (suicide ideation, attempts, and completion) in adults 50 +.

2) theoretical sources that delineate functional classes of interpersonal behavior targeted in FAP.

Callaghan (2006)⁴ delineated five functional classes: *assertion of needs, bidirectional communication, conflict, disclosure and interpersonal closeness, and emotional experience and expression.*

Methodology (cont.)

Maitland et al. (2017)⁵ delineated eight clinical targets: awareness (*self-awareness, other-awareness*), courage (*expressing emotion, self-disclosure, asking*), and love (*providing safety and acceptance, providing validation and understanding, giving*).

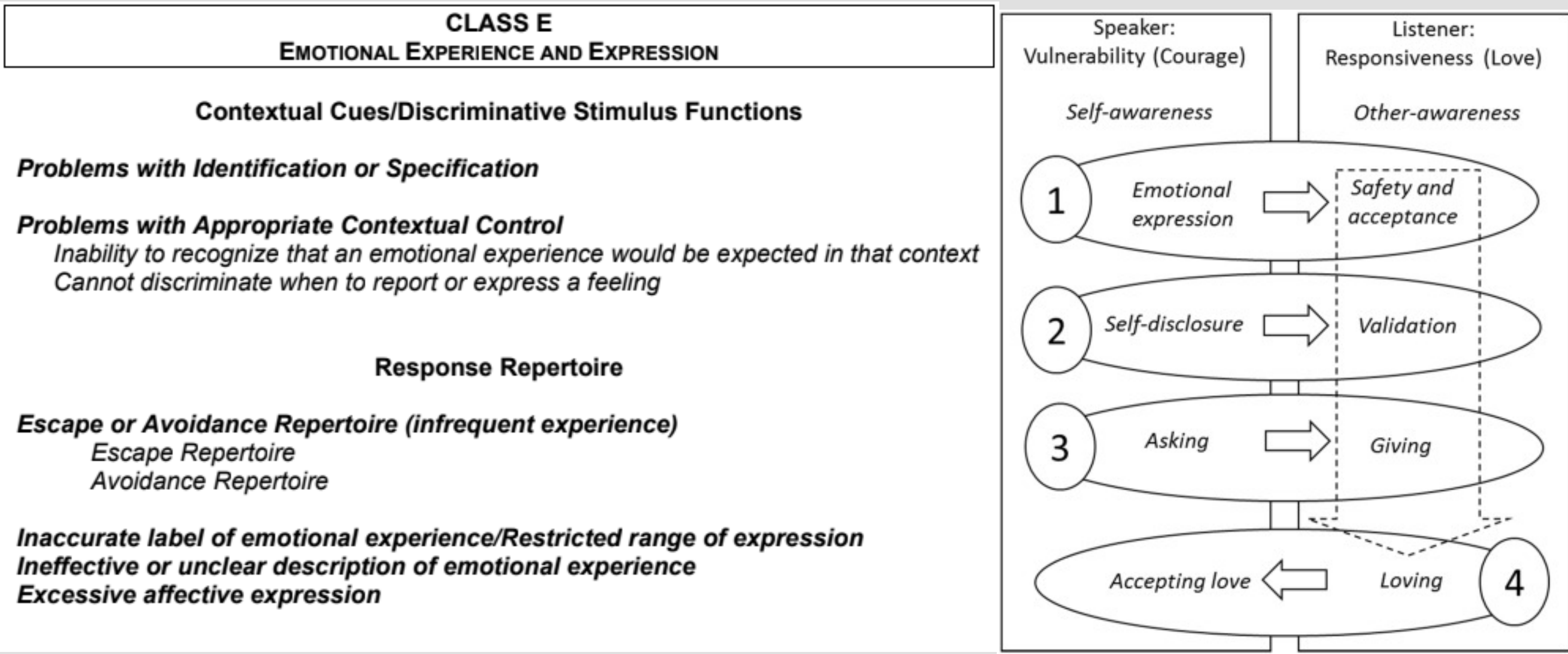


Figure 1. Example of a functional class. From Callaghan (2006). Figure 2. The Awareness, Courage, and Love model. From Maitland et al. (2017).

Results

Table 1. Concordance of social risk factors and functional classes/clinical targets in FAP

Social risk factors	Suicide-related outcome	Functional classes	Clinical targets
Perceived burdensomeness	Ideation ^{6,7,8}	Assertion of needs	Self-awareness; Other-awareness; Asking; Accepting love
Interpersonal sensitivity	Ideation ⁹	Bidirectional communication	Self-awareness; Other-awareness
Interpersonal hostility/aggression	Ideation ¹⁰ Attempt ^{11,12}	Assertion of needs; Conflict; Emotional experience and expression	Expressing emotion; Asking; Providing safety and acceptance
Conflict/ poor relationship/struggle with others	Ideation ¹³ Attempt ^{11,14} Death ^{15,16,17,18,19}	Conflict; Bidirectional communication	Awareness; Courage; Love
Lack of a confidante/low perceived social support	Ideation ^{8,13,20,21,22,23,24,25} Attempt ^{11,14} Death ²⁶	Assertion of needs; Disclosure and interpersonal closeness	Self-disclosure; Asking; Love
Emotion recognition deficits	Attempt ¹⁴	Emotional experience and expression	Other-awareness
Impulsivity	Attempt ²⁷	Emotional experience and expression	Other-awareness
Loneliness	Ideation ^{6,18,19,28}	Disclosure and interpersonal closeness	Self-awareness; Other-awareness
Low warmth/positive emotions	Attempt ¹²	Emotional experience and expression	Providing safety and acceptance
Low self-esteem	Attempt ¹¹	Bidirectional communication	Self-awareness; Other-awareness
Social problem-solving deficits	Attempt ^{14,27}	Bidirectional communication; Conflict	Other-awareness; Providing validation and understanding
Social isolation/low social interaction	Ideation ²⁹ Attempt ^{14,24,28,30} Death ^{15,31}	Disclosure and interpersonal closeness	Self-disclosure; Asking; Accepting love

Conclusions

- Older adults' interpersonal repertoire deficits increase risk for SB.
- Social risk factors can be targeted in FAP.
- The results provide initial theoretical support for empirical investigation of FAP as a secondary intervention strategy to prevent the development of SB in older adults experiencing social disconnectedness.
- Limitations:**
 - Specificity of social risk factors differed between studies.
- Future directions:**
 - Single-subject and group pilot and randomized trials to assess feasibility, acceptability, and efficacy of FAP for this population.

References

1. Corwell, Y., Van Orden, K., & Caine, E. D. (2013). Suicide in older adults. *Psychiatric Clinics*, 34(2), 451-468.

2. Fässberg, M. M., Orden, K. A. V., Duberstein, P., Erlangsen, A., Lapiere, S., Bodner, E., ... & Waern, M. (2012). A systematic review of social factors and suicidal behavior in older adulthood. *International Journal of Environmental Research and Public Health*, 9(3), 722-745.

3. Kohlenberg, R. J. & Tsai, M. (1991). *Functional analytic psychotherapy: Creating intense and curative therapeutic relationships*. New York: Springer.

4. Callaghan, G. M. (2006). The Functional Idiographic Assessment Template (FIAT) system: For use with interpersonally-based interventions including Functional Analytic Psychotherapy (FAP) and FAP-enhanced treatments. *The Behavior Analyst Today*, 7(3), 357.

5. Maitland, D. W., Kanter, J. W., Manbeck, K. E., & Kuczyński, A. M. (2017). Relationship science informed clinically relevant behaviors in Functional Analytic Psychotherapy: The Awareness, Courage, and Love Model. *Journal of Contextual Behavioral Science*, 6(4), 347-359.

6. Cukrowicz, K. C., Cheavens, J. S., Van Orden, K. A., Ragain, R. M., & Cook, R. L. (2011). Perceived burdensomeness and suicide ideation in older adults. *Psychology and Aging*, 26(2), 331-338.

7. Jahn, D. R., Cukrowicz, K. C., Linton, K., & Prabhu, F. (2013). The mediating effect of perceived burdensomeness on the relation between depressive symptoms and suicide ideation in a community sample of older adults. *Aging & Mental Health*, 15(2), 218-220.

8. Rowe, J. L., Corwell, Y., Schuberg, H. C., & Bruce, M. L. (2006). Social support and suicidal ideation in older adults using home healthcare services. *The American Journal of Geriatric Psychiatry*, 14(9), 758-766.

9. Scocco, P., & De Leo, D. (2002). One-year prevalence of death thoughts, suicide ideation and behaviours in an elderly population. *International Journal of Geriatric Psychiatry*, 17(5), 842-846.

10. Scocco, P., Meneghelli, G., Caon, F., Buono, M. D., & De Leo, D. (2001). Death ideation and its correlates: survey of an over-65-year-old population. *The Journal of Nervous and Mental Disease*, 189(4), 210-218.

11. Harrison, K. E., Dombrowski, A. Y., Morse, J. Q., Houck, P., Schrimm, M., Reynolds, C. F., & Szanto, K. (2010). Alone? Perceived social support and chronic interpersonal difficulties in suicidal elders. *International Psychogeriatrics*, 22(3), 445-454.

12. Sedlitz, L., Corwell, Y., Duberstein, P., Cox, C., & Denning, D. (2001). Emotion traits in older suicide attempters and non-attempters. *Journal of Affective Disorders*, 66(2), 123-131.

13. Yip, P. S., Chi, L., Chiu, H., Chi, W., K., Corwell, Y., & Caine, E. (2003). A prevalence study of suicide ideation among older adults in Hong Kong SAR. *International Journal of Geriatric Psychiatry*, 18(11), 1056-1062.

14. Szanto, K., Dombrowski, A. Y., Sahakian, B. J., Mulant, B. H., Houck, P. R., Reynolds, C. F., & Clark, L. (2012). Social emotion recognition, social functioning, and attempted suicide in late-life depression. *The American Journal of Geriatric Psychiatry*, 20(3), 257-265.

15. Reafrakis, A. L. (2002). A case control study of suicide and attempted suicide in older adults. *Suicide and Life-Threatening Behavior*, 32(1), 1-9.

16. Duberstein, P. R., Corwell, Y., Conner, K. R., Eberly, S., & Caine, E. D. (2004). Suicide at 50 years of age and older: perceived physical illness, family discord and financial strain. *Psychological Medicine*, 34(1), 137-146.

17. Hawwood, D., Hawton, K., Hope, T., & Jacoby, R. (2001). Psychiatric disorder and personality factors associated with suicide in older people: a descriptive and case-control study. *International Journal of Geriatric Psychiatry*, 16(2), 155-165.

18. Rubenowitz, E., Waern, M., Wilhelmson, K., & Allebeck, P. (2003). Life events and psychosocial factors in elderly suicides—a case-control study. *Psychological Medicine*, 33(7), 1193-1202.

19. Waern, M., Rubenowitz, E., & Wilhelmson, K. (2003). Predictors of suicide in the old elderly. *Gerontology*, 49(5), 328-334.

20. Alexopoulos, G. S., Bruce, M. L., Hull, J., Sirey, T. A., & Kakuma, T. (1999). Clinical determinants of suicidal ideation and behavior in geriatric depression. *Archives of General Psychiatry*, 56(11), 1048-1053.

21. Awata, S., Seki, T., Kobayashi, Y., Sato, S., Hosawa, A., Omori, K., ... & Tsuji, J. (2005). Factors associated with suicidal ideation in an elderly urban Japanese population: A community-based, cross-sectional study. *Psychiatry and Clinical Neurosciences*, 59(3), 327-336.

22. Bartels, S. J., Coakley, E., Oman, T. E., Constantino, G., Olin, D., Chen, H., ... & Llorente, M. (2002). Suicidal and death ideation in older primary care patients with depression, anxiety, and at-risk alcohol use. *The American Journal of Geriatric Psychiatry*, 10(4), 417-427.

23. Raue, P. J., Meyers, B. S., Rowe, J. L., Heo, M., & Bruce, M. L. (2007). Suicidal ideation among elderly homecare patients. *International Journal of Geriatric Psychiatry*, 22(1), 32-37.

24. Tsch, J., Chiu, H. F., Duberstein, P. R., Chan, S. S., Chi, L., Yip, P. S., & Corwell, Y. (2005). Attempted suicide in elderly Chinese persons: a multi-group, controlled study. *The American Journal of Geriatric Psychiatry*, 13(7), 562-571.

25. Vanderhorst, R. K., & McLaren, S. (2005). Social relationships as predictors of depression and suicidal ideation in older adults. *Aging & Mental Health*, 9(6), 517-525.

26. Turvey, C. L., Corwell, Y., Jones, M. P., Phillips, C., Simonick, E., Pearson, J. L., & Wallace, R. (2003). Risk factors for late-life suicide: a prospective, community-based study. *The American Journal of Geriatric Psychiatry*, 10(4), 398-406.

27. Gibbs, L. M., Dombrowski, A. Y., Morse, J., Siegle, G., Houck, P. R., & Szanto, K. (2009). When the solution is part of the problem: problem solving in elderly suicide attempters. *International Journal of Geriatric Psychiatry*, 24(12), 1396-1404.

28. Wikström, S., Runeson, B., Skog, L., Östling, S., & Waern, M. (2010). Attempted suicide in the elderly: characteristics of suicide attempters 70 years and older and a general population comparison group. *The American Journal of Geriatric Psychiatry*, 18(12), 57-67.

29. Yen, Y. C., Yang, M. J., Yang, M. S., Lung, F. W., Shih, C. H., Hahn, C. Y., & Lo, H. Y. (2005). Suicidal ideation and associated factors among community-dwelling elders in Taiwan. *Psychiatry and Clinical Neurosciences*, 59(4), 365-371.

30. De Leo, D., Padam, W., Secco, P., Lie, D., Bille-Brahe, U., Arensman, E., ... & Lonnqvist, J. (2001). Attempted and completed suicide in older subjects: results from the WHO/EURO Multicentre Study of Suicidal Behaviour. *International Journal of Geriatric Psychiatry*, 16(3), 300-310.

31. Duberstein, P. R., Corwell, Y., Conner, K. R., Eberly, S., & Caine, E. D. (2004). Poor social integration and suicide: fact or artifact? A case-control study. *Psychological Medicine*, 34(7), 1331-1337.