The Center for Research and Outreach

Putting Research to Work for Military Families

Focus: Multiple Branches

Thwarted Belongingness As an Explanatory Link Between Insomnia Symptoms and Suicidal Ideation: Findings From Three Samples of Military Service Members and Veterans

Hom, M. A., Chu, C., Schneider, M. E., Lim, I. C., Hirsch, J. K., Gutierrez, P. M., & Joiner, T. E. (2017). Thwarted belongingness as an explanatory link between insomnia symptoms and suicidal ideation: Findings from three samples of military service members and veterans. *Journal of Affective Disorders*, 209, 114-123. doi:10.1016/j.jad.2016.11.032

SUMMARY: Three studies utilizing self-reported data examined whether thwarted belongingness (i.e., the feeling that one does not belong) explained the link between insomnia and suicidal ideation. Results supported this link among three different samples of Service members and Veterans, suggesting that Service members struggling with issues of insomnia who feel like they don't belong may be at an increased risk for suicidal ideation. Therefore, efforts to reduce sleep issues and thwarted belongingness among Service members may reduce the risk of suicidal ideation.

KEY FINDINGS:

- All three studies found that higher levels of insomnia symptoms were associated with more severe suicidal ideations and greater levels of thwarted belongingness.
- Thwarted belongingness was found in all three studies to explain the link between insomnia and suicidal ideation, even when controlling for other psychological issues (e.g., hopelessness, anxiety, and perceived burdensomeness).
- Insomnia did not explain the link between thwarted belongingness and suicidal ideation in any of the three studies, nor was insomnia directly linked to suicidal ideation.
- Study 2 and Study 3 found that perceived burdensomeness (i.e., the belief that one's death is worth more than one's life) also explained the link between insomnia and suicidal ideation.

IMPLICATIONS FOR PROGRAMS:

Programs could:

- Disseminate information to Service members and their families regarding the importance of sleep to promote psychological well-being and reduce the risk of thwarted belongingness
- Offer workshops that provide Service members and their families with strategies for coping with sleep issues
- Continue to educate military leadership and families about the risk factors and warning signs associated with suicide

IMPLICATIONS FOR POLICIES:

Policies could:

- Continue to support programs that assess and treat insomnia to help reduce the risk of suicide among Service members with sleep issues
- Support programs aimed at helping Service members connect with others to reduce the experience of thwarted belongingness
- Continue to support suicide prevention efforts and campaigns aimed at reducing stigma and other barriers to care for Service members

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METHODS

- Data from 15 independent studies funded by the Military Suicide Research Consortium were used for Study 1.
- Study 2 participants were new Soldiers recruited for participation during an Army Recruiting Course.
- Participants for Study 3 were recruited from the community and completed an online survey; no further information regarding recruitment was given.

PARTICIPANTS

- A total of 937 Service members and Veterans participated in Study 1; the majority of participants were Army (49.6%), male (82.1%), White (67.9%), and between the ages of 18-88 years (M = 38.2).
- A total of 3,386 Army recruits participated in Study 2; the majority of participants were male (91.5%), White (66.2%), and between the ages of 20-57 years (M = 29.9).
- A total of 417 Veterans participated in Study 3; the majority of participants had been in the Army (36.5%) and were male (67.8%), White (86.4%), and between the ages of 20-98 years (M = 50.7).

LIMITATIONS

- The use of abbreviated measures in Study 1 and 2, may influence results by reducing the ability to detect significant effects and accurately make comparisons with Study 3, which utilized full measures.
- Only self-report measures were used and may result in inaccurate or biased data.
- Some of the psychological symptom measures (e.g., depression) were not available across the samples, limiting comparisons across the studies.
- Study 1 data were collected from 15 distinct studies with different recruitment methods, designs, and study aims, which may have influenced the results.

AVENUES FOR FUTURE RESEARCH

Future research could:

- Continue to examine other factors (e.g., perceived burdensomeness) that may explain the link between insomnia and suicidal ideation
- Examine the effectiveness of programs aimed at reducing the risk of suicide among Service members
- Continue to examine perceived barriers to care for Service members dealing with suicidal thoughts and ideations



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