

The effect of parental suicide on adolescents' use of health care services: A within-individual analysis of Norwegian administrative data

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Background

Losing a parent is a stressful event, and several studies show that it is associated with symptoms of distress among adolescents, including increased use of health care services. Adolescents who lose a parent to suicide may differ from their peers also along other characteristics relevant to use of health services, due to a stressful home environment already before the suicide takes place, and/or a genetic predisposition for mental health vulnerability shared across generations.

Objectives and research questions

By studying how the death of a parent affects health care use in a within-individual model, we aim to get closer to a causal estimate of the effect of parental suicide on children's health and health care use.

Data and methods

We estimate the effect of the loss of a parent on use of health care services using individual fixed effects models, allowing us to net out all time-constant individual characteristics. Data on use of health care services, parental mortality and sociodemographic characteristics for parent and child are drawn from Norwegian administrative registers. We compare the effect of suicide to the effect of other parental bereavement from other causes, using data on all Norwegians aged 13-19 in the period 2006-2015 who lost a parent within this time period (N= 67 033 all causes, N=4 769 suicide).

Results and conclusion

Preliminary regression results of a person-quarter data set shows that parental death associates with more use of health care services. We will further explore whether this association is driven by confounders (i.e. disappears when fixed effects are included) and/or is an effect of bereavement (i.e. persists in a fixed effects design).

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