

# Suicide Epidemic Continues Among American Indian Youth

By Jody Vilschick

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Suicide has been the second leading cause of death for 15 to 24-year-old American Indians and Alaska Natives for the past 15 years, so prevention continues to be priority issue for Native American communities and the mental health providers with whom they work.

“The physical, environmental, social, and psychological conditions that confront American Indian youth are well documented. They face alarming rates of unemployment, alcohol and substance abuse, devastating health conditions such as diabetes, nutritional deficiencies, below standard living conditions, and suicide,” says Denis Nissim-Sabat, PhD, senior policy analyst for the American Psychological Association.

The devastating effect of these conditions becomes apparent when looking specifically at adolescent males.

In 1990, American Indian/Alaska Native males ages 15 to 24 had a suicide death rate of 49.1 per 100,000 resident population, compared to a rate of 23.2 for White males in the same age group. African American, Asian/Pacific Islander, and Hispanic males in the same category all had similar rates—15.1, 13.5, and 14.7, respectively.

The suicide death rate for American Indian/Alaska Native males ages 15 to 24 fluctuated in the 1990s, decreasing to 36.6 in 1999. American Indian male youth still have a higher suicide death rate than the rate of 17.2 per 100,000 for all other males in the same age group.

For the Seneca Nation of Indians, headquartered in Irving, NY, suicide prevention counseling is an ongoing project, but one that has been successful.

Karla Carol Button, a suicide prevention counselor for the Seneca Nation of Indians' Human Services Unit said, “We try to see how serious they are—whether they're capable of carrying out a suicide plan, whether they even have a plan.”

Youth are referred to the Health Services Unit through their parents or other family members, or one of the three local high schools. The word has gone out during the past few years about the availability of suicide prevention counseling—with measurable results. Button reports that the last successful suicide occurred five years ago.

Still, there have been a number of attempts. “Usually it's when they're drinking—alcohol is a very big problem, it's so idolized in American culture—and someone's who's drunk does something stupid. Recently, one boy stabbed himself,” Button says.

Button also cites an extremely low high school graduation rate and limited job opportunities. “A lot of what's available around here are jobs in smoke shops and gas stations—not really a satisfying career,” Button says. “A real jobs program and the jobs to go with it would really help increase the self-esteem of our youth.”

The good news Button offers is that for those who do graduate high school, there are a variety of scholarships available for Seneca youth. “New York State gives each Indian student over a thousand dollars a semester and they're usually eligible for other grants,” she says. “Plus the Seneca Nation has its own tuition program that funds books and supplies.”

But the big problem is a pervasive lack of self-esteem among the tribe's youth. “Seneca culture is very important to building self-esteem,” Button says. “That has been stripped away from us over the years—especially through the boarding school program of the late 1800s and early 1900s. Our culture is important because you must figure out who you are first and where you come from to figure out where you are going.”

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## The Saga Continues...

Death is knocking at the door much more frequently as a result of suicide than many care to admit or are even aware. The Centers for Disease Control and Prevention (CDC) reported that more teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia and influenza, and chronic lung disease *combined*. Consider the following facts from *The Surgeon General's Call To Action To Prevent Suicide, 1999*, and other CDC reports:

- Despite the low overall rate of suicide among African Americans, between 1980 and 1996, the rate of suicide among African American males aged 15-19 years increased 105 percent, and almost 100 percent of the increase in this group is attributable to the use of firearms.
- Suicide rates are higher than the national average for some groups of Asian Americans/Pacific Islanders. In Hawaii, the suicide rate for this group is 4 percent higher than the rate for the rest of the population. Asian American women have the highest suicide rate among women age 65 and older.
- During the past decade, the suicide rate among Hispanic youth has been increasing, and compared with White youth, Hispanic youth show higher prevalence of suicidal behaviors, including suicide attempts. More specifically, in 1999, the Youth Risk Behavior Surveillance System, in a nationwide survey of high school students found that in the 12 months preceding the survey, Hispanic students were significantly more likely than White or Black students to have reported a suicide attempt.



For more information on the Surgeon General's report, go to <http://sgreports.nlm.nih.gov/NN/>



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During the 1800s, throughout the United States, the Federal government took young American Indian children between the ages of 3 and 16 from their homes and families and placed them in boarding schools, where they were systematically alienated from their culture and religion.

“Their purpose was to kill the Indian but save the human being,” says Harry Hill, a suicide prevention counselor for the Native American Community Services of Buffalo, NY, and a member of the Iroquois Confederacy in upstate New York. “Parents would walk days to get to their kids, and when they got to the school, they were told the kids were somewhere else. The kids were simply told their parents were dead. Can you imagine a young child being told ‘your mama is dead?’”

Hill blames the generations of abuse—mental, physical, sexual, and emotional—that American Indians experienced for the high suicide rates in the American Indian community. “There have been generations of Native Americans dealing with multiple losses, but without their culture to support them and help them through these losses,” he says.

Hill, through the Native American Community Services, twice a year provides month-long workshops for at-risk American Indian youth who live in urban settings. “We focus on Native American culture and our own teachings to help them deal with suicide and look beyond it. One student described suicide as ‘disrespecting the Creator,’ and that’s really true.

“The Creator has given everyone a gift, a talent, and a work to do. Our job is to walk through our days and accomplish the work we have been given. It is our job to seek it and to find it,” Hill says. He considers the program very successful—in the four years working with the program in Buffalo, there’s only been one suicide of a youth who participated in the program; and in the seven years in which he presented the program in Ontario, Canada, there weren’t any suicides among participating youth.

In the boarding schools, American Indian were taught to value anything but their own identity and culture. “A sense of shame pervades our self-image,” Hill says. “So when it comes time to deal with the idea of suicide or when life gets hard, there’s nothing to help the individual deal with the process.”

“Another risk factor, across all populations, is exposure to suicide—whether you know someone, or you’ve seen a movie about it or read a book about a successful suicide,” Hill says. “Most Native Ameri-

can kids have a family member who’s committed suicide. Whether we like it or not, suicide is a part of our lives right now.”

According to the American Indian and Alaska Native Mental Health Organization, the American Indians most likely to successfully commit suicide have the following social characteristics:

- Often a male between 15 and 24 years of age;
- Single;
- Under the influence of alcohol just before his suicide attempt;
- Has lived with a number of ineffective or inappropriate parental substitutes because of familial disruption;
- Has spent time in boarding schools and has been moved from one to another;
- Has been raised by caretakers who have come into conflict with the law;
- Has often been jailed at an early age;
- Has experienced an emotional loss, such as divorce, desertion, or death in the family; and/or
- Has experienced a past loss through violence of someone to whom he felt attached.

“Sometimes just being there and listening is the key way to prevent suicide,” Hill says. Recently he received a call from a family of a young suicide, asking him to come speak with and counsel the family, including aunts and uncles. “Unknown to me at the time, one of the uncles who was there was also the perpetrator of child abuse of the youth who died,” Hill says. “That uncle came to me and confessed to me, asking me to help him, so he too didn’t commit suicide from the guilt of what he’d done to the boy. He became aware of his own sickness through just talking, and wanted to get help to prevent the damage from going on.”

*For more information, go to the National Strategy for Suicide Prevention Web site at <http://www.mentalhealth.org/suicideprevention/>*

