

Suicide and Latino Youth

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Suicide and Latino Youth

- Latino Demographics
- Latino Suicide Demographics
- Research on Latino male and female suicidality
- Theory on Latino Suicidality
- Intervention/Prevention Research
- Future Directions – where do we go from here

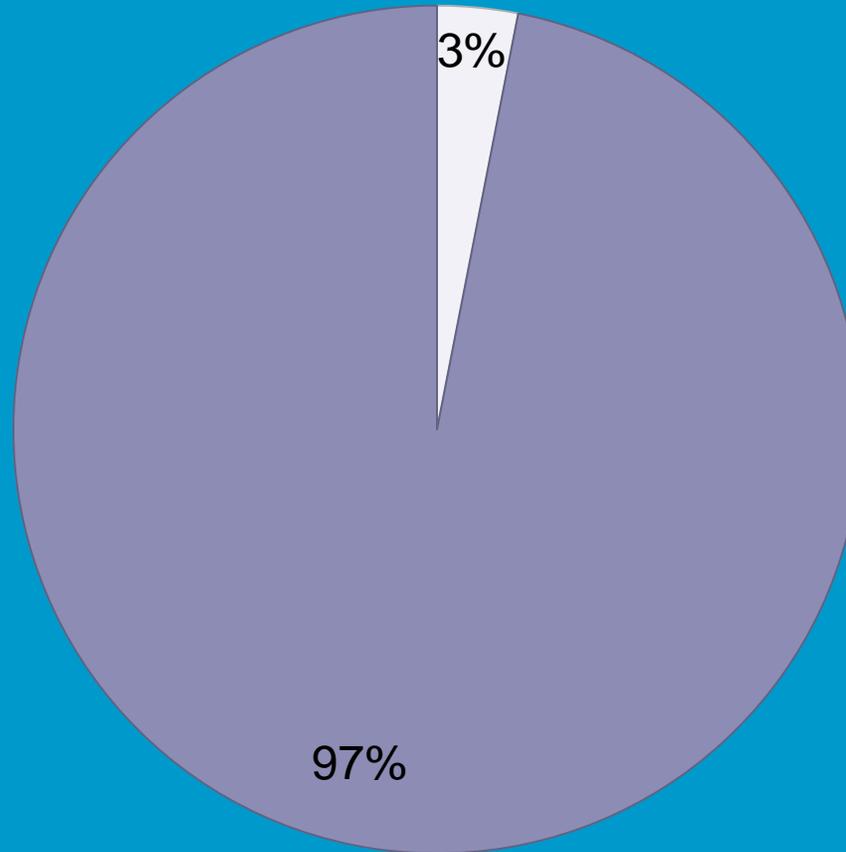
Latino Demographics



- Latinos in the U.S. include a diversity of subgroups including: Mexican, Puerto Rican, Cubans, Central and South American & Caribbean (U.S. Census, 2008)
- Latinos currently comprise 15.4% of U.S. population – largest minority population
- By 2040, Latinos are expected to represent 30% of the U.S. population

Hispanic Population in Ohio-2010 census

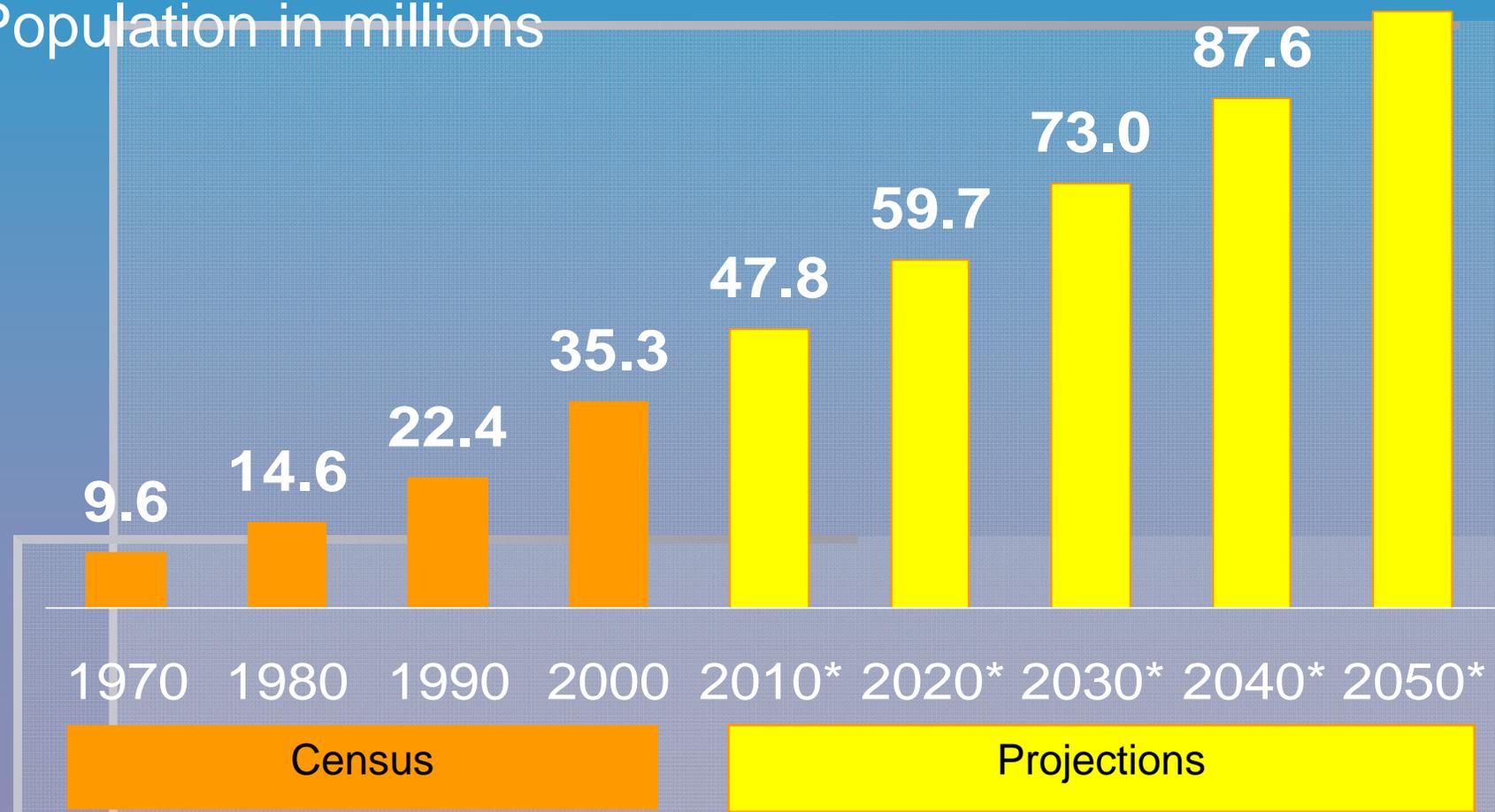
■ Hispanic or Latino ■ Non Hispanic or Latino



Hispanic Population in the United States: 1970 to 2050

Population in millions

102.6



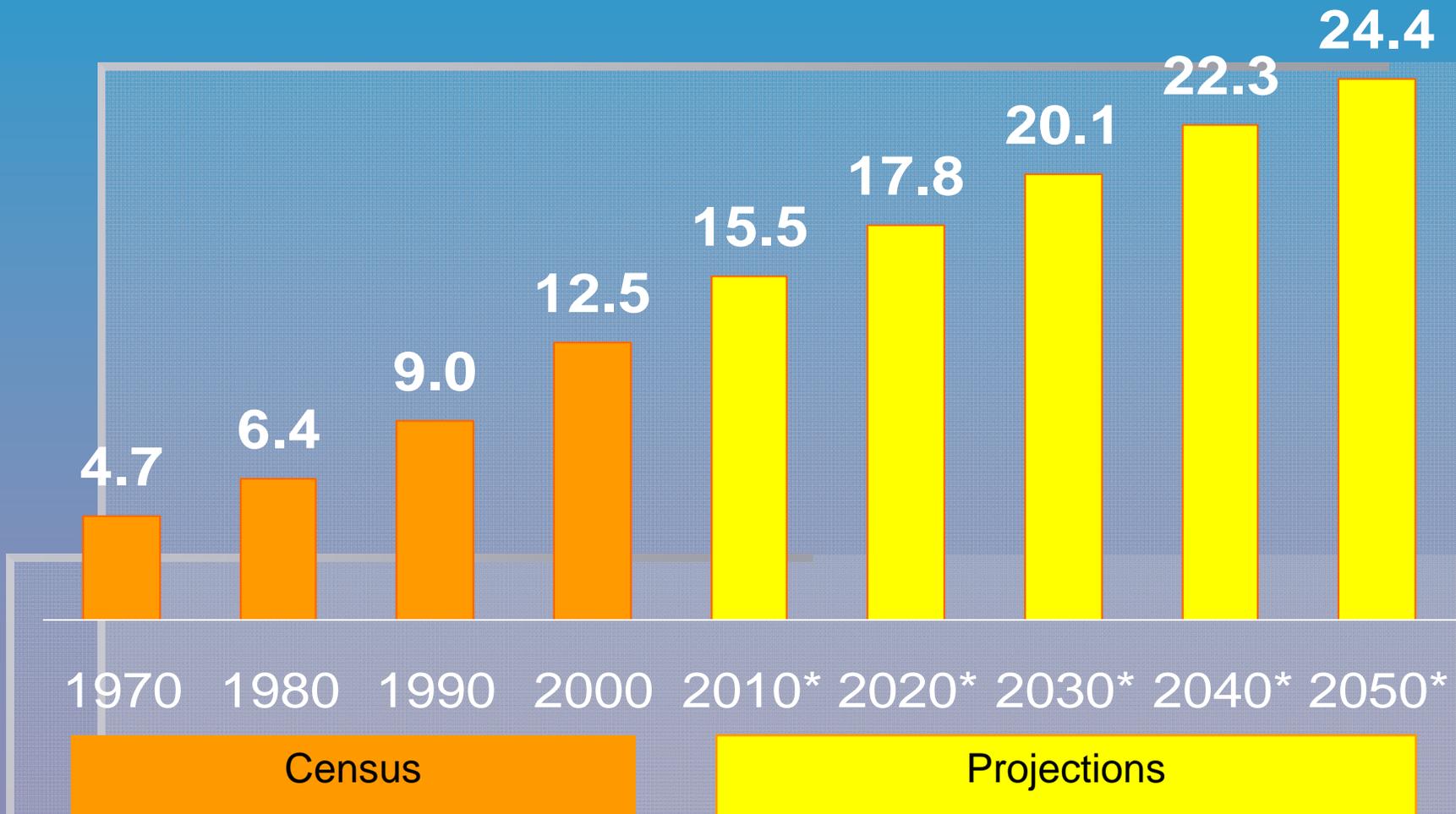
1970 1980 1990 2000 2010* 2020* 2030* 2040* 2050*

Census

Projections

*Projected Population as of July 1

Percent Hispanic of the Total Population in the United States: 1970 to 2050



*Projected Population as of July 1

Latino Demographics

- **24% of the Latino population is less than 18 years of age**
- **The median age of Latinos is 37.2 years**
- **1 of every 4 preschool children in U.S. is of Latino origin**
- **Latinos make up the largest group of minority children in U.S.**
- **Latino children will account for a significant portion of our future employees, taxpayers, and leaders in the U.S.**

Latino Demographics

- 1 in every 3 Latino children live in poverty
- Latinos have a greater poverty rate than any other racial/ethnic group
- 1.1 million Latino children are uninsured (24%)
- Uninsured rate greater than any other racial group
- Latino children more likely to have suboptimal health status
- 26% rated to be at less than excellent or very good health compared to 12% in Caucasian children (America's Children: Key National Indicators of Well being, 2005)
- Highest teen birth rate (53% of Latina girls are pregnant by the age of 20 (National Campaign to prevent teen and unplanned pregnancy, 2008))
- Highest dropout rate in the U.S. estimated 50-60%

Suicide and Latino Youth

- Each year, suicide takes the lives of more than 33,000 Americans (CDC, 2009)
- It is the 3rd leading cause of death for young people ages 10 to 24

Suicide and Latino Youth

- Latino youth are the fastest growing segment of the U.S. population
- Latino youth account for 26% of Latino suicides

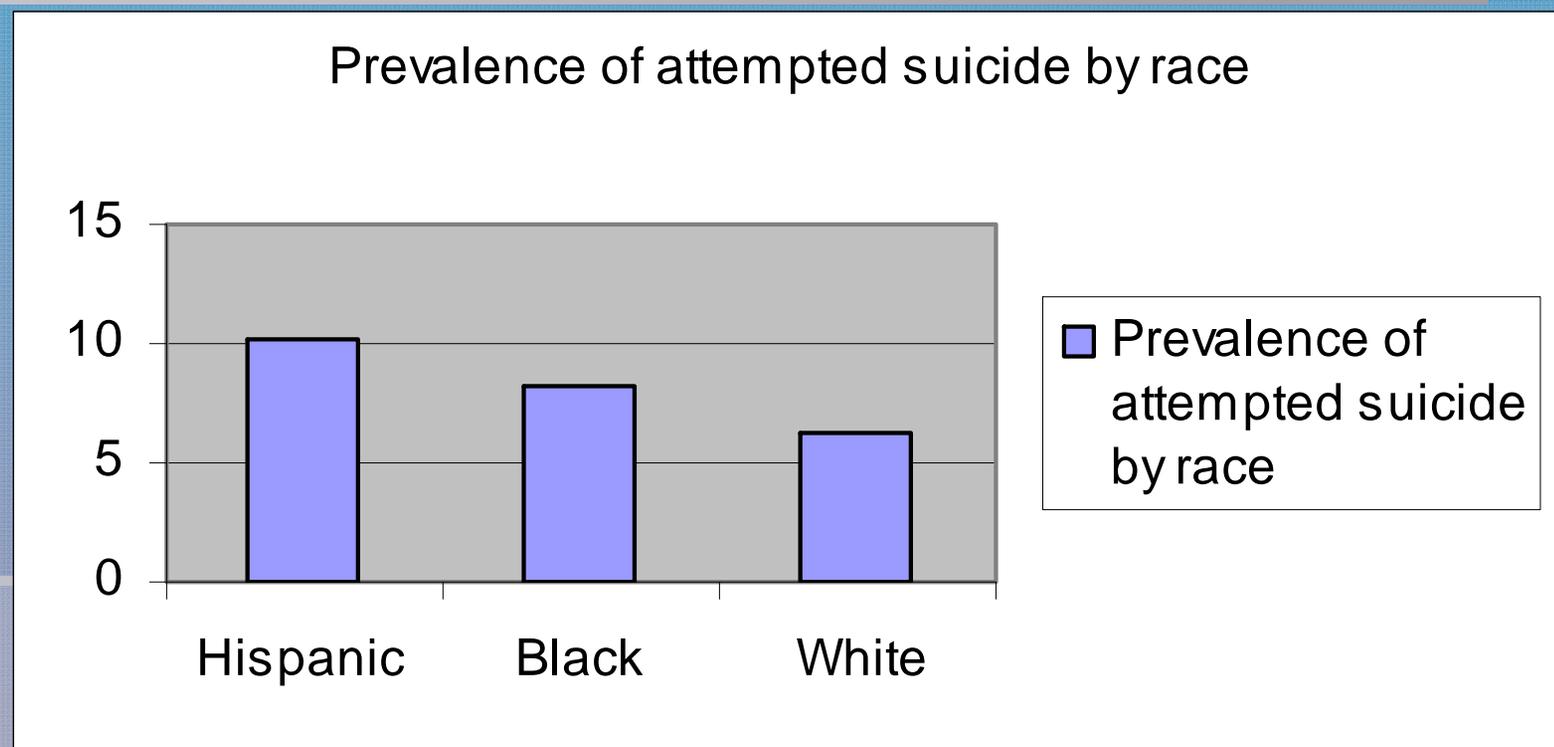


The Facts



- In 2001, suicide was the 3rd leading cause of death among young Latinos (i.e., aged 10-24)

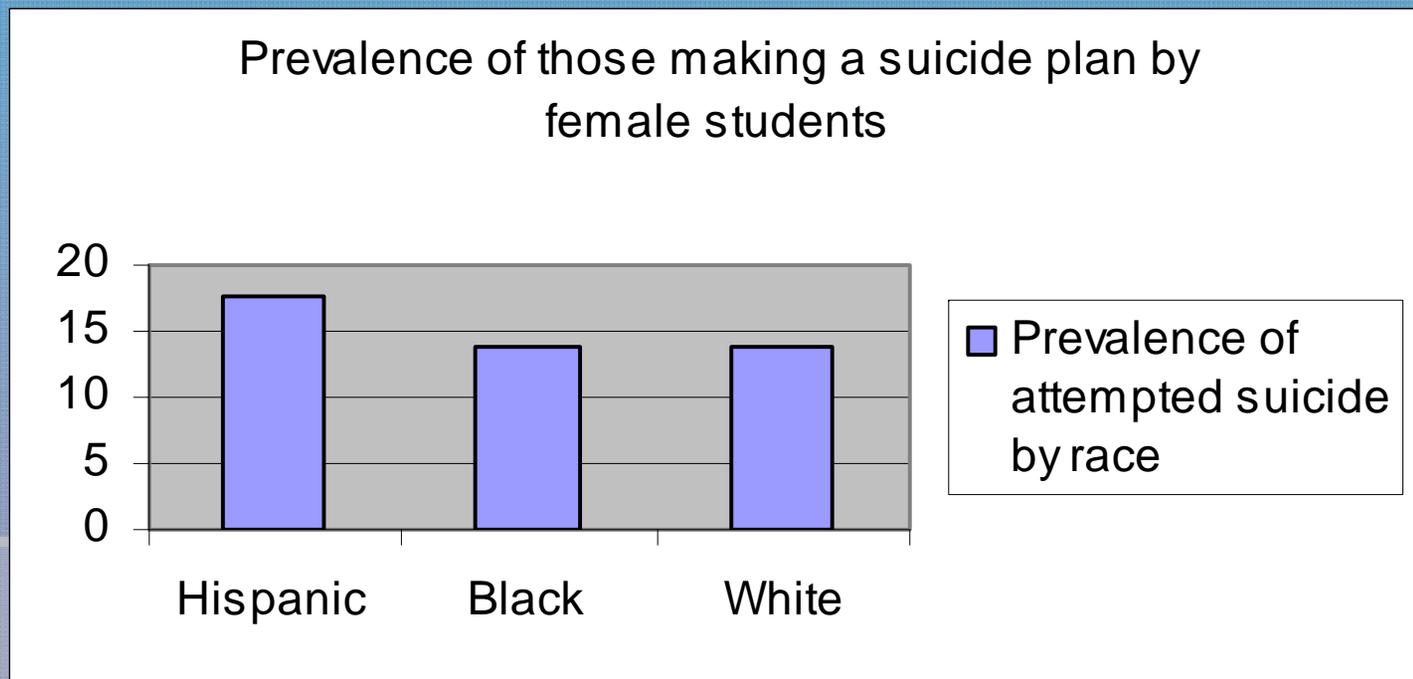
Prevalence of Attempted Suicide by Race



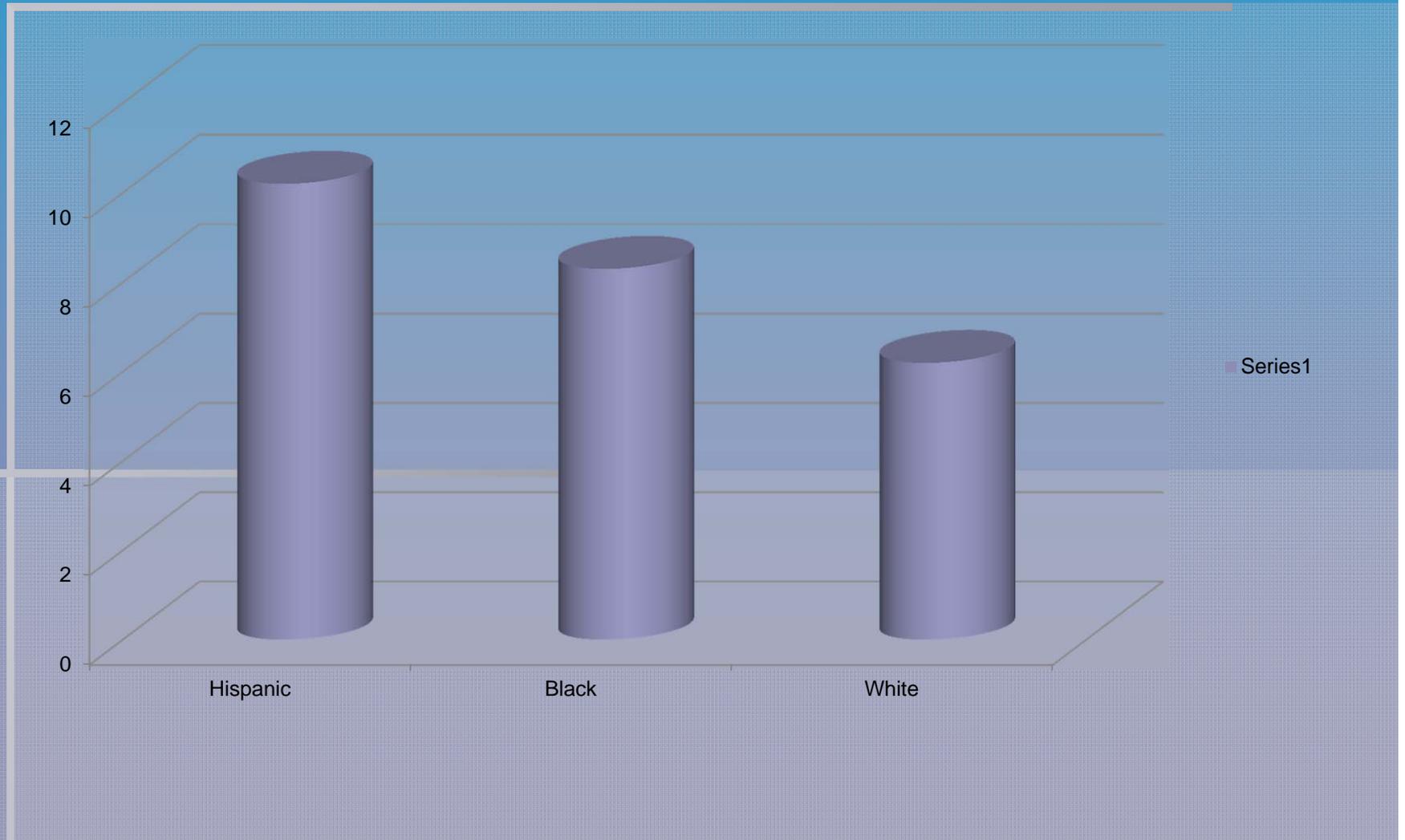
CDC YOUTH RISK BEHAVIOR SURVEY 2011

CDC Youth Risk Behavior Survey (2011)

Prevalence of suicide plan - FEMALES



Prevalence of Attempted Suicide by race



The Facts

- A total of 5,332 Latinos died from suicide during 1999-2001 with 85% (4,531) being male
- Among Latino males aged 10-24 years, firearms account for 52% of all suicides, followed by suffocation (38%) and poisoning (3%)
- Latina females in the same age group, suffocation accounted for 44% of all suicides, followed by firearms (33%) and poisoning (11%).

Understanding the Problem

- Death from teen suicide is only part of the problem, it found that more young people are surviving suicide attempts than actually dying.
- Many Latinos may not be aware of the increasing rate of suicide, suicidal ideation and suicide attempts among Latino youth.
- Nationally, 1 in 5 Latina girls attempt suicide, which is a higher rate than their non-Latino peers (Zayas, et al.,2005)



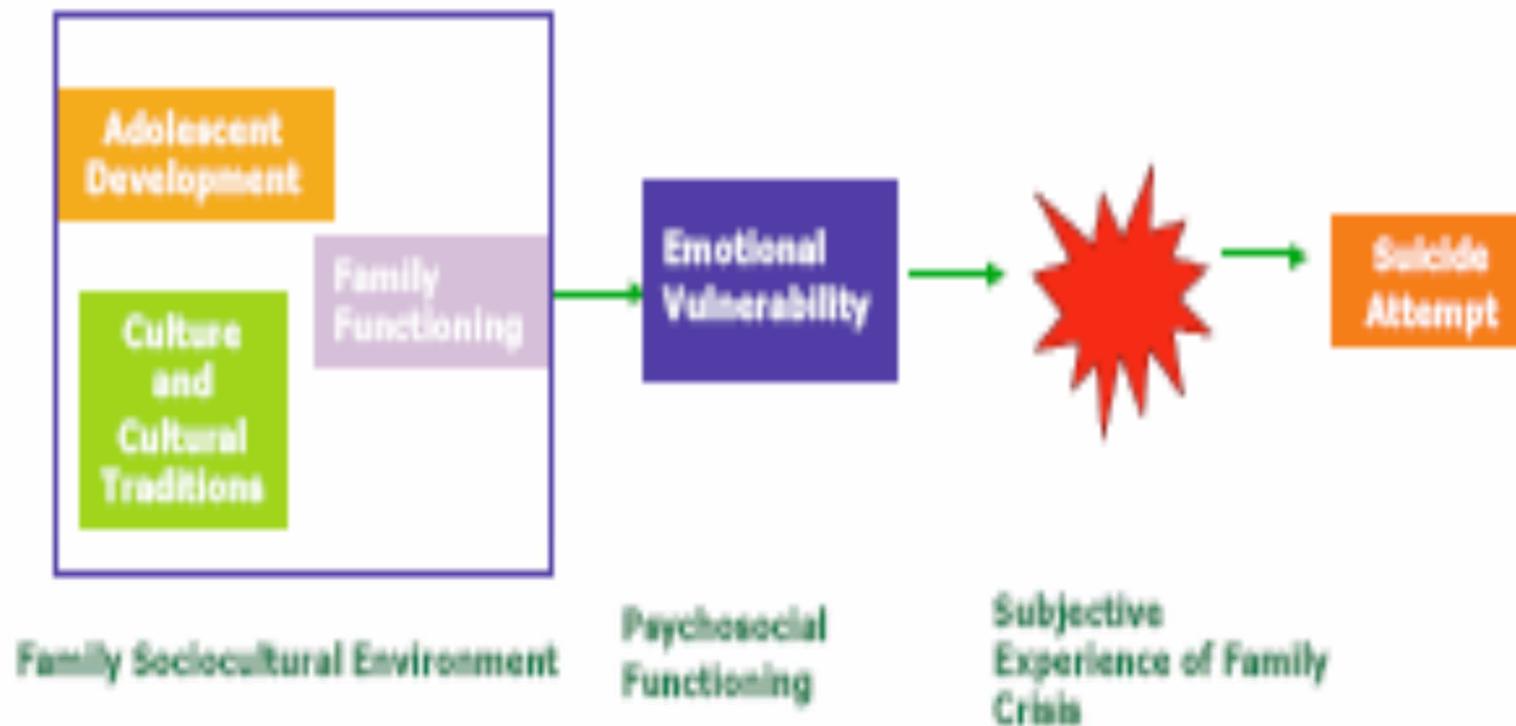
Existing Research

- **1st study on Latina suicidality was conducted by Edgar Trautman in 1961**
- **Trautman was a Psychiatrist at Lincoln Hospital in New York who studied Puerto Rican women in late 1950's.**
 - **Attempts were impulsive escapes from stressful situations**
 - **Often indigested pills and household cleaners**
 - **No real thoughts of death**
 - **No psychotic symptomology**
 - **Attempt related to problems with family especially mother and spouse**
 - **(Trautman, 1961 a.b)**

Existing Research

- **Zayas et al. (2000, 2002, 2005, 2008, 2009)**
- **Researching characteristics of Latina teens who are attempters and non-attempters**

Conceptual Model for Research on Suicide Attempts by Adolescent Hispanic Females (Zayas et al., 2005)



Common Characteristics

Family Functioning

Well-functioning families show

cohesiveness (familism)

adaptability (acculturation & adolescent development)

Families of suicidal teens in general population

- Restrictiveness without flexibility
- Marital discord & separations
- Negative parenting & poor communication
- Other (violence & abuse; substance use)

Cultural Issues

- Cultural family traditions socialize Hispanic women to be passive, demure, and hyper-responsible for family obligations, unity and harmony (Gil & Vazquez, 1997)
- In traditionally structured Hispanic families, the emphasis is on restrictive, authoritarian parenting, especially for girls (Zayas, et. al, 2005).
- Zayas (1987, 1989, 2000) proposed that the interaction of socioeconomic disadvantage, traditional gender-role socialization, acculturation, cultural identity, generational status, and intergeneration (adolescent-parent) conflict converge interactively and additively to influence the suicidal behavior of adolescent Hispanic females, especially ethnic Puerto Rican females.

Emotional Issues

Emotional Vulnerability

Latina attempters share similar psychopathology as non-Latinas

- Low self-esteem
- Hopelessness
- Impulsivity
- Emotional dysregulation/anger
- Depression/anxiety

Coping by

- social withdrawal
- wishful thinking
- blaming others
- passive coping

Emotional Issues

Subjective Experience

- Subjective distress within context of emotional vulnerability
- Threat to integrity of family unity
- Felt to be caused by her behavior

Emotional Issues

The Crisis Event

- Prolonged tension between girl and parents
- Often about a boyfriend, dating, sexuality
- Boyfriend/dating represent autonomy-relatedness struggle
- Intense argument with parents just prior

Common Characteristics in Families

What we're learning

- All girls and moms of non-attempters are bicultural; attempters' mothers are not, more Hispanic-oriented ($p < .05$)
- Attempters more acculturated than non-attempters ($p < .05$)
- All girls more acculturated than all mothers ($p < .05$)
- Attempters' moms lower in affection ($p < .01$) and support ($p < .05$) than mom's of non-attempters (girls' ratings)
- *Attempters' moms report higher family cohesion, expressiveness, and organization, and less conflict than their daughters ($p < .05$)*

Emotional Issues/Characteristics

- Pre-attempt: some girls' emotions accompanied by physical sensations of feeling numb, weak, tired, nervous, or empty
- Attempt described as an impulsive gesture to escape from the emotional pain they were feeling at the moment or period in their lives

(Zayas & Cabassa, 2008)

Additional Factors

Phenomenology of suicide attempts

- Precipitating events included fights with family members, break up with boyfriends, and problems at school.
- Most attempts occurred in close proximity to other people.
- Self-injurious behaviors were a common strategy for many girls to cope with life stressors.

(Zayas & Cabassa, 2008)

Characteristics of Non-Attempters

Communication better between non-attempters and parents

- Non-Attempters communicate more openly with parents
- Non-attempters trust parent's wisdom and value their opinion
- Non-attempters more able to take parents' perspectives
- *Groups differ in the meaning they attach to parent's rules and expectations*

(Kyriakakis et al., 2007)

Clinical Intervention

Clinical Interventions

- Assessment
 - Depression
 - Past suicidality
- Individual therapy
 - In context of family-centered care
- Family Therapy
 - Expectation by teen and parents for involvement
 - Structural/systemic changes needed: development and perspective-taking
- Schools' roles
 - Identification
 - Start prevention in middle school
- Physicians' roles
- Parenting interventions
 - Where streams meet
- Psychoeducation for girls and parents
 - Understanding development and cultural differences

Need for Research and Awareness

- **Less research on Latino males although males are more lethal in their attempts**
- **Latino males had higher rates of suicidal ideation than African American and Caucasian youth (CDC, 2004)**
- **Locke & Newcomb (2005) – studied 349 inner city Latino youth and young men of primarily Mexican descent**

Risk Factors & Protective Variables

- **Risk Factors**

- Childhood maltreatment (emotional and sexual abuse) predicted suicidality but physical abuse did not
- Hard drug use
- Mother with alcohol related problems

- **Protective Variables**

- Problem solving confidence
- Good relationship with parents
- Being law abiding

(Locke & Newcomb, 2005)

Prevention/Treatment

- **Drug use treatment and prevention efforts should screen for suicidality**
- **Treatment should focus on fostering self-efficacy and confidence in problem solving skills**
- **Work on relationship between parents and teen**
- **Encouraging bonding or associating with pro-social peers and engaging in pro-social behaviors**
- **Psycho-ed with parents on relationship between maltreatment particularly emotional and sexual abuse and suicidality in Latino males.**
- **(Locke & Newcomb, 2005)**

Prevention/Treatment

- In order to understand suicide and suicide attempts in Hispanic adolescents, one must understand the Hispanic culture.
- Prior to creating interventions, one must consider and integrate Latino cultural beliefs and values as the basis for the development of the culturally competent intervention.
- Consideration of common elements of the Latino culture is a viable mechanism to improving treatment adherence. These shared elements (behavior factors) include language, familismo, respecto, personalismo, espiritismo, and fatalismo (Antshel, 2002).

Prevention/Treatment

- **Engagement of families of adolescents is important in Latinos due to the fact of their given views of centrality of family (Goldston et. al., 2008)**
- **Parents play an important role in suicide prevention by recognizing the signs of mental health difficulties among youths and seeking help when appropriate (Goldston et. al., 2008).**
- **Latino parents must be included in every facet of planning the development of prevention interventions targeting Latino families.**
- **Effective Interventions should build on the strong spiritual and religious beliefs of Latinos which value the sanctity of life.**
- **Church based interventions can be quite effective in working with Latino families.**

- Saving Our Youth



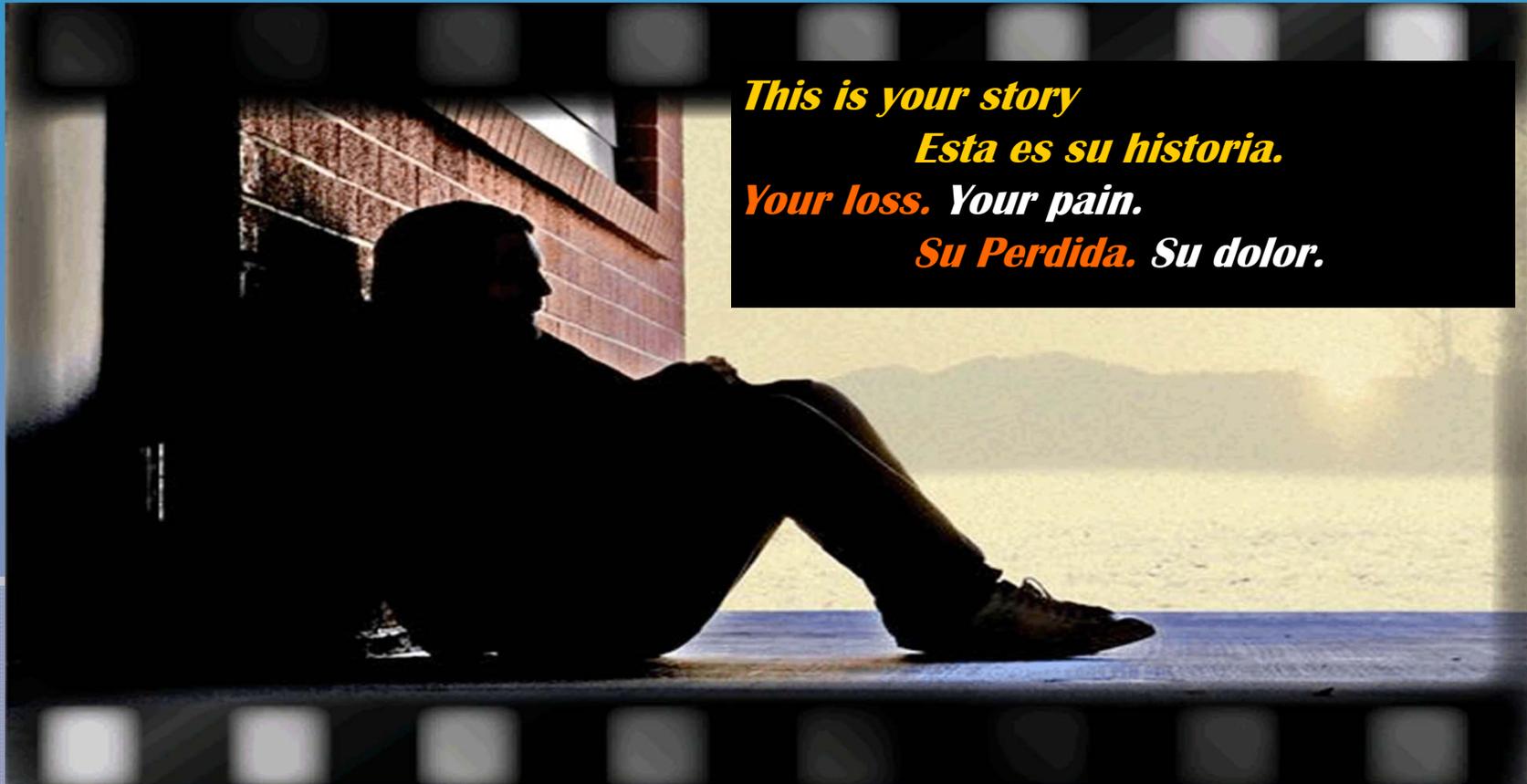
Salvando a nuestros
jóvenes

Research

Two phase research project

- 1. **Parent Phase – assess Latino’s parents perception about suicidality in teens and how they would like to learn about the topic**
- 2. **Teen Phase – assess Latino teens perceptions about issues they struggle with and what they need from their parents/adults in order to overcome those issues and not attempt suicide**
- **(Unable to identify any research on how to actually approach Latino parents and teens on this topic)**

Looking for Latino/Hispanic family members who have experienced the trauma of a suicide or suicide attempt in their families to help us understand the impact on the family and how the family copes with the tragedy.



This is your story
Esta es su historia.
Your loss. Your pain.
Su Perdida. Su dolor.

For more information on how to participate in this study, please contact:

Marisa Burgos, BSN, R.N. at 216-466-4962 or

Dr. Evelyn Rivera- Mosquera , Clinical Psychologist, at 216-256-1308

Purpose

- To address the lack of research on suicide prevention for Latino families since very little to no literature was found on this topic.
- To begin to understand the cultural dynamics which may be unique to Latino families' perceptions, reactions, and how the family coped with the suicide/attempt.
- To collect data on Latino family members' needs and their personal recommendations for prevention resources targeting the Latino community.

Resources

- **Suggested combination of expert/professional in this area (Psychology) to conduct the programs**
- **Need to involve churches**
- **Prevention services**
- **Resources/services available in Spanish**
- **Recognition of importance of religion in healing and coping**
- **Support groups for family members**
- **Various sessions on different topics**
- **Sensitivity towards surviving family**
- **Parents and youth separately**
- **Possible one on one contact after psycho-ed sessions**

**Do you know someone
thinking about suicide?**

For help call:

216-623-6888



CELEBRATING
40

Years of Treatment & Recovery

Cuyahoga County Community Mental Health Board




- **Suicide Prevention Services**

- suicidehotlinecolumbus/

- 24 hours / 7 days

- Suicide Prevention Hotline
(614) 221-5445

- Teen Suicide Hotline
(614) 294-3300

- Senior Hotline
(614) 294-3309

- TTY
(614) 221-5445

NATIONAL

SUICIDE
PREVENTION

LIFELINE™

1-800-273-TALK

1-800-273-8255

www.suicidepreventionlifeline.org

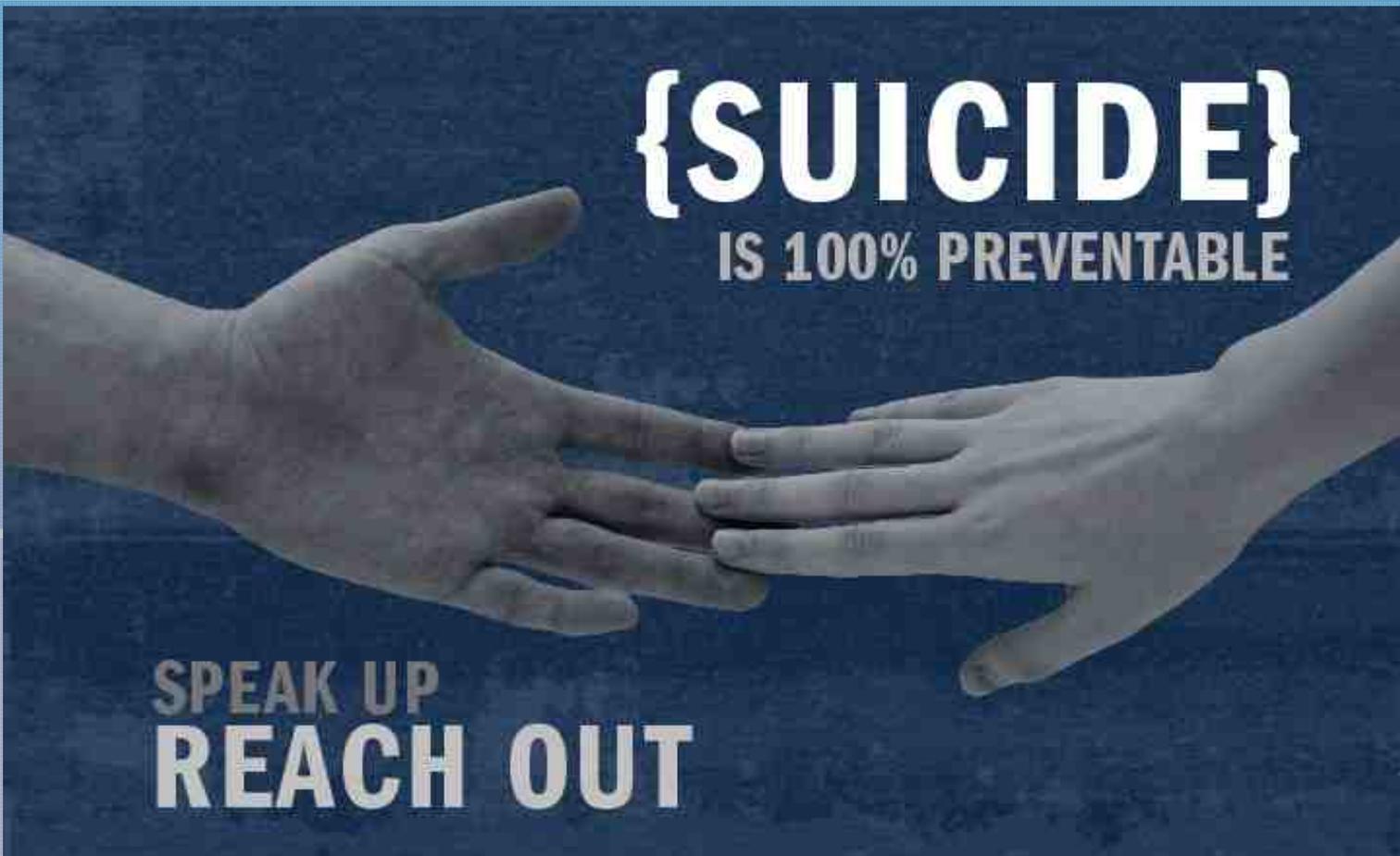
RED

para la
PREVENCIÓN
de
SUICIDIO

NACIONAL

1-888-628-9454

www.suicidepreventionlifeline.org

A graphic featuring two hands, one from the left and one from the right, reaching towards each other. The hands are positioned as if about to clasp or support each other. The background is a dark, textured blue. The text is overlaid on this background.

{SUICIDE}
IS 100% PREVENTABLE

SPEAK UP
REACH OUT

Where do we go from here

- Acknowledgement of the problem
- Combat stigma of mental health
- Culturally sensitive services
- Prevention and Interventions in Spanish
- Need to engage our churches
- We need to build resiliency and coping skills in our teens and families

JOIN THE OHIO LATINO MENTAL HEALTH NETWORK

EMAIL: evelyntrivera@sbcglobal.net
to join in your area across the state
of Ohio

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