

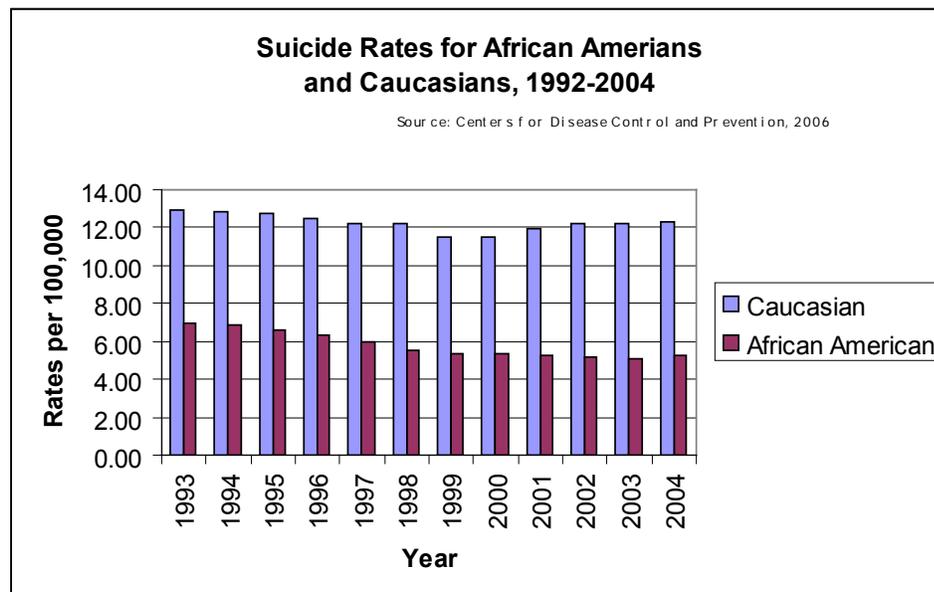


AMERICAN ASSOCIATION OF SUICIDOLOGY

Dedicated to the Understanding and Prevention of Suicide

African American Suicide Fact Sheet¹

- In 2005, 1,992 African Americans completed suicide in the U.S. Of these, 1,621 (81%) were males (rate of 8.7 per 100,000). The suicide rate for females was 1.8 per 100,000.
- In 2005, there were only 371 African American female suicides. The ratio of African American male to female was better than 4:1. The suicide rate among African American females was the lowest of all racial/gender groups.
- As with all racial groups, African American females were more likely than males to attempt suicide and African American males were more likely to complete suicide.
- From 1993 to 2004, the rate of suicide for African Americans (all ages) showed a small but steady decline (from 6.9 in 1993 to 5.1 in 2003). For Caucasians, the rate declined until 1999 (from 13.0 in 1993 to 11.5 in 2000), and then increased slightly since 2000 (see graph below).



- Suicide was the third leading cause of death among African American youth², after homicides and accidents. The suicide rate for young African American youth was 6.75 per 100,000 (n = 437).

¹ In this fact sheet, unless otherwise specified, the information presented refers to the latest available data (i.e., 2005 data).

² The term 'youth' refers to individuals 15 to 24 years of age.

- For African American youth, the rate of male suicide (11.7 per 100,000) was almost 7 times higher than that of females (1.71 per 100,000).
- African American youth suicide rates were generally low until the beginning of the 1980's when rates started to increase radically. Between 1981 and 1994, the rate increased 78%. Since then, the rate has decreased, from 11.48 in 1994 to 6.75 in 2005.
- Although Caucasian youth are twice as likely as African American youth to complete suicide, the rate of suicide grew faster in this time period among African American youth than among Caucasian youth.
- From 1981-1994, the suicide rate increased 83% for 15-24 year old African American males and 10% for African American females. Since 1994, the rates for males have decreased 67% for males and 23% for females.
- Males accounted for the vast majority of African American elderly (65 and older) suicides.
- Firearms were the predominant method of suicide among African Americans regardless of gender and age; in 2005, 50% of all African American suicides were by firearm.

Things We Can Do to Help:

- Help remove the stigma and myths that suicide contradicts gender and cultural role expectations:
 - Religious stigma of suicide as the “unforgivable sin”;
 - African American men are macho and do not take their own lives;
 - African American women are always strong and resilient and never crack under pressure.
- Remove barriers to treatment.
- Improve access to mental health treatment.
- Remove stigma associated with mental health treatment.
- Increase awareness in cultural differences in the expression of suicidal behaviors:
 - African American are less likely to use drugs during a suicide crisis;
 - Behavioral component of depression in African Americans is more pronounced;
 - Some African Americans express little suicide intent or depressive symptoms during suicidal crises;
- Develop liaisons with the faith community.
- Recognize warning signs and help a friend or family member get professional help.

Warning Signs of Suicide

The mnemonic IS PATH WARM? can be used to remember the warning signs of suicide:

I	Ideation
S	Substance Abuse
P	Purposelessness
A	Anxiety
T	Trapped
H	Hopelessness
W	Withdrawal
A	Anger
R	Recklessness
M	Mood Change

A person in acute risk for suicidal behavior most often will show:

Warning Signs of Acute Risk:

Threatening to hurt or kill him or herself, or talking of wanting to hurt or kill him or herself; and/or,

Looking for ways to kill him or herself by seeking access to firearms, available pills, or other means; and/or,

Talking or writing about death, dying or suicide, when these actions are out of the ordinary.

These might be remembered as expressed or communicated **IDEATION**. If observed, seek help as soon as possible by contacting a mental health professional or calling 1-800-273-TALK (8255) for a referral.

Additional Warning Signs:

Increased **SUBSTANCE** (alcohol or drug) use

No reason for living; no sense of **PURPOSE** in life

ANXIETY, agitation, unable to sleep or sleeping all the time

Feeling **TRAPPED** – like there's no way out

HOPELESSNESS

WITHDRAWING from friends, family and society

Rage, uncontrolled **ANGER**, seeking revenge

Acting **RECKLESS** or engaging in risky activities, seemingly without thinking

Dramatic **MOOD** change

If observed, seek help as soon as possible by contacting a mental health professional or calling 1-800-273 TALK (8255) for a referral.

If you or someone you know is suicidal,
please contact a mental health professional
or call 1-800-273-TALK (8255).

For More Information:

American Association of Suicidology

www.suicidology.org

National Organization for People for Color Against Suicide

www.nopcas.com

National Center for Injury Prevention and Control

www.cdc.gov/ncipc/wisqars

Sources

The information for this fact sheet was gathered from the National Center for Injury Prevention and Control (NCIPC) website (www.cdc.gov/ncipc/wisqars/default.htm) run by the Center for Disease Control and Prevention (CDC), the National Institute of Mental Health website (www.nimh.nih.gov/) as well as the National Organization for People of Color Against Suicide (NOPCAS) website (www.nopcas.com).

American Association of Suicidology

The goal of the American Association of Suicidology (AAS) is to understand and prevent suicide. AAS promotes research, public awareness programs, education, and training for professional, survivors, and all interested persons. AAS serves as a national clearinghouse for information on suicide. AAS has many resources and publications, which are available to its membership and the general public. For membership information, please contact:

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