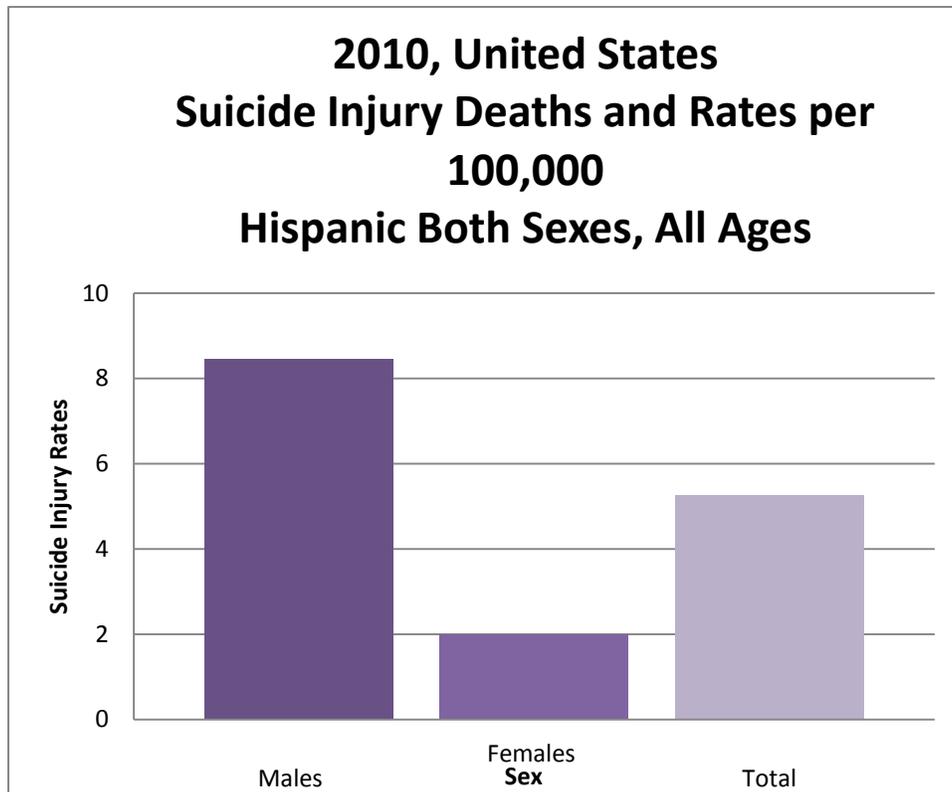




## AMERICAN ASSOCIATION OF SUICIDOLOGY

### HISPANIC SUICIDE FACT SHEET

BASED ON 2010 DATA



In 2010, the Hispanic population accounted for 16.3% of the total United States population.

- Approximately 6.6 million (17%) of the 50.5 million people in the United States ages 15 to 24 were of Hispanic origin.<sup>1</sup>

Suicide was the third leading cause of death for Hispanic Americans aged 15 to 24 and the fourth leading cause of death for those aged 25-34.

In 2010, the Center for Disease Control and Prevention reported that for Hispanic Americans:

- The suicide rate for all ages was 5.85 per 100,000 compared to 13.09 for Non-Hispanics of all ages.

- The suicide rate for adolescents aged 15 to 19 was 5.58 per 100,000 compared to 7.99 for all Non-Hispanic adolescents.
- The highest suicide rate 19.42 per 100,000 was found among males aged 80-84 compared to 36.65 of Non-Hispanic males aged 80-84.

*Thus, the suicide rate among Hispanics is lower than that for Non-Hispanics among all age groups.*

#### Immigration status and Suicide:

- Across Metropolitan Statistical Areas (MSAs), affluence, cultural assimilation, mobility, and divorce were related to suicides among Hispanics.<sup>1</sup>
- Across MSAs immigrants have a slightly higher rate of suicide (5.4) than non-immigrants (5.0).<sup>2</sup>

#### Hispanic Adolescents and Suicide Ideation and Attempts<sup>3</sup>

- 32.6% of Hispanic high school students report feeling sad or hopeless in the last 12 months. This proportion is greater than that reported by their Non-Hispanic classmates. The proportion was higher for Hispanic females (41.4%).
- 16.7% of Hispanic adolescents have reported seriously considering attempting suicide in the last 12 months and 14.7 reported making a suicide plan – proportions higher than reported by their Non-Hispanic classmates.
- Hispanic female high school students reported a higher percentage of suicide attempts (13.5%), than White Non-Hispanic (7.9%) or Black Non-Hispanic (8.8%) female students.

*Note: -- Although rates of completed suicide among youth are lower than those for Non-Hispanics, school-aged Hispanic youth self-report higher rates of feeling sad or hopeless, of thinking about suicide, and of attempting suicide.*

#### Suicide and Substance Abuse:

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<sup>1</sup> Wadsworth T, Kubrin CE. 2007. Hispanic suicide in US metropolitan areas: examining the effects of immigration, assimilation, affluence, and disadvantage. *American Journal of Sociology*, 112(6), 1848-1885.

<sup>2</sup> Wadsworth T, Kubrin CE. 2007

<sup>3</sup> Youth Risk Behavior Surveillance – United States, 2009 (CDC)

- Hispanic youth born in the United States have a higher prevalence of alcohol and substance use than Hispanic youth born outside the United States.<sup>4</sup>
- Stress caused by the immigration experience, minority status, and increased levels of acculturation can influence, and have been associated with, the increased abuse of alcohol and other substances by Hispanic youth.<sup>5</sup>

#### Alcohol and Suicide among Racial/Ethnic Populations, 17 States, 2005-2006:

- Alcohol was detected in the blood of 33.2% of decedents of all races/ethnicities who died by suicide, and in 39% Hispanics who died by suicide.<sup>6</sup>
- Hispanic suicide decedents aged 40-49 and 60 and older, had the highest concentrations of alcohol in their blood, compared to Non-Hispanic suicide decedents of those age groups.
- Hispanic Suicide decedents aged 20-29 had the highest concentration of alcohol in their blood compared to Hispanic decedents of all other age groups.

#### The following hypotheses have been presented regarding suicidal behavior among Hispanics<sup>7</sup>:

- Family needs are placed above individual needs and respect to the parents and elders is of major importance.
- Suicidal behavior among Hispanic females may be related to the stress caused by the expectation of obligation to the family.
- “Family closeness and good relations with parents have been found to be a resiliency factor for suicidality among Latino males and females”<sup>8</sup>
- Hispanic adolescents may also experience stress with the conflict between placing family needs above individuals needs and what is taught in the mainstream culture about the importance of individuality
- Recently immigrated Hispanic families may not fully understand the health care system and may be reluctant to seek help in the fear of being reported as undocumented
- Hispanic families may avoid seeking mental health help because they feel that suicide should be dealt with by the family or faith community first
- Language differences are a barrier to seeking mental health help

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<sup>4</sup> Cannon and Levy. 2008. Substance-Using Hispanic Youth and Their Families: Review of Engagement and Treatment Strategies. *The Family Journal*. 16; 199-204.

<sup>5</sup> Cannon and Levy. 2008.

<sup>6</sup> CDC. MMWR Weekly, June 19, 2009 / 58 (23); 637-641.

<sup>7</sup> Goldstond, D.B., Molock, S.D., Whitbeck, L.B., Murakami, J.L., Zayas, L.H., & Hall, G. C. N. 2008. Cultural considerations in adolescent suicide prevention and psychosocial treatment. *American Psychologist*, 63, 14-31.

<sup>8</sup> Goldston, D.B. et al. 2008.

- Although most suicidal Hispanic youth are born in the United States and know English, many times they prefer for their parents to be involved in their treatment, and often their parents cannot speak English, thus are placed at a disadvantage because they need bilingual clinicians or trained interpreters

#### Treatment and Prevention:

- Involving the family in treatment is very important since the Hispanic culture places grave importance on the well-being of the family; with adolescents the involvement of the parents is essential to treatment<sup>9</sup>
- Professionals who are in the position to identify people and adolescents at risk for suicidal behavior should take into consideration that distress is not always expressed the same way by all people of different backgrounds<sup>10</sup>
- Future research should look for cultural differences within different Hispanic groups
- Immigration, acculturation, collectivism, and interdependence should be considered in treatment<sup>11</sup>
- It is essential to eliminate language barriers and have trained interpreters available for the families who need them
- It is estimated that by the year 2030, minority children will outnumber white children in the United States. As a consequence, the treatment of mental health for minorities is essential in the future well being of the country<sup>12</sup>

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<sup>9</sup> Goldston, D.B. et al. 2008.

<sup>10</sup> Goldston, D.B. et al. 2008.

<sup>11</sup> Goldston, D.B. et al. 2008.

<sup>12</sup> Youth Risk Behavior Surveillance – United States, 2005 (CDC)

## **American Association of Suicidology**

AAS is a membership organization for all those involved in suicide prevention and intervention, or touched by suicide. AAS is a leader in the advancement of scientific and programmatic efforts in suicide prevention through research, education and training, the development of standards and resources, and survivor support services. For membership information, please contact:

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