

Suicide among American Indians and Alaska Natives, particularly adolescents, has increased on many reservations from 200% to 300% in the past 29 years (Berlin, 1987), becoming a topic of vital interest. Death by suicide is more frequent among this group than its white counterpart. The factors associated with these different rates within and across ethnic groups remain somewhat unclear. However, cultural norms are believed to affect suicide rates as well as the design, implementation, and evaluation of preventive interventions directed to youths at risk.

Most U.S. teenagers are faced with problems of adjustment, life meaning, and success in a fast-paced society, particularly during an economic recession. Indian/Native youths are faced with even greater challenges. Minority status, fewer economic and educational advantages, and cultural differences add to the difficulties of transition to adulthood. Indian adolescents must choose from at least two not totally clear paths: Indian and non-Indian.

The National Center for American Indian and Alaska Native Mental Health Research (herein referred to as the National Center), with the support of the National Institute of Mental Health, convened nationally recognized experts working on a variety of projects that relate directly to the identification of risk factors for and prevention of suicide among adolescents in general and among Indian and Native communities specifically. Held in October 1990 in Estes Park, Colorado, the meeting was co-sponsored by the Committee on the American Academy of Child and Adolescent Psychiatry and the Indian Health Service's Office of Mental Health Programs. It was a unique opportunity to summarize the state of suicide research in the context of this special population.

Focus of Conference

The conference comprised two and one-half days of presentations and discussions organized in five parts considering the epidemiology of suicide behavior, clinical and developmental features, programmatic efforts, influence of special settings, and state and federal experiences. The initial 46 participants were chosen for their contribution to the state-of-the-art research, preventive service experience, and/or theory on sociocultural factors in the perception, risk, and prevention of suicide within the general population as well as within American Indian and Alaska Native communities. Moreover, the presence of high-ranking administrative officials from the Indian Health Service, Mental Health Programs Branch, and the National Institute of Mental Health was felt to

increase the direct, substantial impact of the proceedings on public policy in this area.

National suicide experts who assisted in drawing parallels between the mainstream literature on suicide and the Indian/Native experience were represented. We believe it is critical to maintain a comparative perspective in order to best understand the culturally unique and the more generic elements of suicide in this special population. Thus, the contributors and conferees constituted a diverse mix of disciplines; specifically, anthropology, criminal justice, education, psychiatry, psychology, public health, public administration, sociology, and social work. At the last moment, federal budgetary problems precipitated a travel freeze for all federal employees. This unfortunate situation decreased the number in actual attendance to 32.

Eleven major overview and position papers were prepared by 14 of the participants and addressed a variety of topics in these areas. Major discussants were assigned to each area and seen as a means of stimulating critical discussion. Papers were revised after the conference with the benefit of expert reaction and opinion. These revised papers, together with portions of the discussion later selected and abstracted by the editors, constitute the major elements of this document.

The first morning of the conference offered a general overview and introduced the major epidemiological issues surrounding adolescent suicidal behavior. The afternoon turned to clinical and developmental considerations, as well as state and federal experiences. The second day concentrated on current programmatic efforts from the field as well as influential aspects of special institutional settings. The last morning of the conference was set aside for research policy recommendations and for closing remarks. An initial draft of the recommendations with respect to adolescent suicide research planning and policy was circulated after the meeting and was modified according to additional input by the participants.

Overview

The ensuing set of papers offers a comprehensive review of relevant research knowledge of adolescent suicidal behavior among American Indians and Alaska Natives, the identification of gaps in the current knowledge base, and promising new areas for study and outlines the recommendations and priorities that such research should follow.

Part 1 contains two papers that are specific to the epidemiology of American Indian adolescent suicidal behavior. "Indian Adolescent Suicide: The Epidemiologic Picture in New Mexico," by May and Van Winkle, examines the characteristics and trends of suicidal death among Indian youth, specifically the Navajo, Pueblo, and Apache in New Mexico from 1957 to 1987. Using 5-year age intervals of youth aged 5 to 29 years, this chapter shows that rates of suicide have fluctuated over the study time

period. A more in-depth look at the data suggests that Navajo youth have lower average suicide rates than the Apache or Pueblo youth; however, their average rates have risen the most in the major time periods covered. While suicide rates are high and are a definite concern between ages 10 and 19, the highest rates among all three cultural groups are found in 20- to 29-year-olds. May and Van Winkle conclude with suggestions for future research, including more social and psychological autopsies for the study of "significant conditions" accompanying suicide, and a more accurate, complete study of the effects of alcohol involvement as well as suicide contagion on Indian youth.

"A Study of Suicide Attempts Comparing Adolescents to Adults on a Northern Plains American Indian Reservation," by Zitzow and Desjarlait, was in response to a rural community concern of an increase in suicide attempts. This chapter examines documented suicidal behavior over a 5-year time period. This study gives us a close look at suicidal attempt characteristics and the differences between adults and adolescents within an Indian community. Zitzow and Desjarlait's interests lie in how the timing of attempt, precautions against discovery, notification of attempt, final preparatory acts, motivation, perception of lethality, and period of contemplation prior to the attempt relate to the overall seriousness of suicide intent and how this differs between adults and adolescents. This paper highlights four theoretical suicide types: "the ruminating planners," "the want to dies," "the confused reactives," and "the manipulating ambivalents." Implications for prevention and postintervention activities suggest considering the characteristics and behaviors of attempters prior to and after each suicide attempt.

Part 2 comprises two papers specific to clinical and developmental features of Indian adolescent suicide. "Indian Adolescent Suicide: Clinical and Developmental Considerations," by Bechtold, stresses that demographic risk factors explored across cultures also should be explored in detail within American Indian cultures. Cultural-specific patterns, thus, can be and have been found. Bechtold begins by detailing characteristics of Indian adolescent suicide that relate to the phenomenon of suicide in general as well as to culturally specific patterns. He reviews the nature of "suicide clustering" and its impact on one American Indian community. The paper also argues that clinical assessment of suicide risk is not complete until developmental risk factors have been considered. One hardly can disagree with his statement that "as adolescent development progresses, so also does the risk for suicide." After outlining culturally sensitive risk factors, Bechtold concludes with suggestions for evaluation, treatment, and further research.

"Depressive and Suicidal Symptoms in Indian School Children: Findings From the *Flower of Two Soils*," by Sack, Beiser, Baker-Brown, and Redshirt, examines depressive symptoms and suicidal ideation among two cohorts of children over a 3-year time period. Depressive

symptoms as indicated by self-report were found to be lower among Indian children than among Caucasian children. Their findings suggest this trend may reverse as these children enter puberty and adolescence. However, a smaller sample of Indian children consistently endorsed suicidal items at a higher rate than their Caucasian comparison group. This study concludes that depressive symptoms at this particular age are multifaceted and resemble those found in previous studies of adolescent Caucasians.

Part 3 presents three exemplary preventive intervention efforts currently available within communities that are addressing suicidal behavior and related risk factors among Indian adolescents. "The Zuni Life Skills Development Curriculum: A Collaborative Approach to Curriculum Development," by LaFromboise and Howard-Pitney, describes a school-based intervention specifically focused on adolescent suicide prevention. This paper details the development, implementation, and evaluation of a skills-based prevention curriculum addressing risk factors for suicidal behavior in one of the southwest Pueblos. The paper begins with background information about skill-training and its relevance to this particular cultural group and suicide prevention. LaFromboise and Howard-Pitney then describe the initiation of the curriculum development, emphasizing collaborative efforts between the community and university researchers. Using both process and outcome evaluations of pilot efforts, the curriculum and evaluation plan then was revised and modified to meet the needs of the community, school, and researchers. This chapter presents an excellent overview of a rare opportunity when researchers are able to be involved in the design and implementation of preventive efforts initiated by a community. Through such involvement, they were able to include a comprehensive evaluation component in this suicide-specific preventive intervention.

"PRIDE: Substance Abuse Education/Intervention Program," by Dorpat, outlines a school-based educative and preventive effort addressing the significant risk factor of substance use and abuse for suicide. The paper describes a curriculum that was developed and implemented for elementary through high school students in an urban Indian reservation located in the Pacific Northwest. PRIDE (Positive Reinforcement in Drug Education) is a comprehensive program that addresses all aspects of the substance abuse issue, stressing self-awareness and self-esteem. Dorpat offers a program history and overview and details its implementation during the 1988–1989 school year. Student outcomes also are described as they relate to self-report of suicidal behavior.

"The Blue Bay Healing Center: Community Development and Healing as Prevention," by Fleming, describes a comprehensive community development approach to substance abuse prevention (Blue Bay Healing Center). The center's primary goal is the prevention of substance abuse and related behavior such as suicide among youth on the Flathead

Reservation by breaking the generational cycle associated with this problem. The paper outlines the development of a culturally relevant treatment modality that engages the entire reservation population in the healing process. Fleming summarizes suicide prevention efforts prior to the development of the Blue Bay Concept as well as the history and implementation of the intervention. Results of two evaluative efforts also are presented.

Part 4 contains two papers that are specific to two special institutional settings — boarding schools and detention environments — that historically have been thought to contribute to adolescent problem behaviors. “Suicide Ideation and Suicide Attempt Among American Indian and Alaska Native Boarding School Adolescents,” by Dinges and Duong-Tran, describes the development and validation of suicide ideation and suicide attempt screening measures for high-risk Indian/Native adolescents attending a northwestern Bureau of Indian Affairs boarding school. This report focuses on the suicide ideation and suicide attempt components of a screening for early identification of Indian or Native adolescents currently experiencing or potentially at risk for major mental illness, psychological dysfunction, or substance abuse. The authors found that the sensitivity of these indices was encouraging for the purposes of broad-base screening among an Indian/Native adolescent population. In closing, Dinges and Duong-Tran argue that contrary to popular criticisms of the deficiencies of boarding schools, their potential as protective environments in which high-risk students can be identified and receive timely and appropriate treatment is greatly underestimated.

“American Indian Adolescent Suicidal Behavior in Detention Environments: Cause for Continued Basic and Applied Research,” by Duclos, LeBeau, and Elias, highlights a very overlooked population: adolescents in custody. The paper begins with an overview of the detention environment for Indian adolescent offenders, with a special focus on the reservation setting. A profile of detained youth is presented from available juvenile offender data. The literature addressing suicidal behavior in this setting is reviewed, highlighting the dearth of information available, especially concerning American Indian youth. Preliminary data are presented with a discussion of the significant difficulties encountered in and near Indian country. Finally, Duclos, LeBeau, and Elias suggest future in-depth topics for basic and applied research within this unique treatment arena and cultural group.

Part 5 comprises the two papers emphasizing state and federal experiences and responses to Indian/Native adolescent suicide. “When Communities Are in Crisis: Planning for Response to Suicides and Suicide Attempts Among American Indian Tribes,” by DeBruyn, Hymbaugh, Simpson, Wilkins, and Nelson, outlines a system of crisis intervention planning in response to suicides and suicide attempts within Indian communities. This includes the development of suicide surveillance systems, crisis response teams, and consistent community education. The informa-

tion and data presented are based on the efforts of the Special Initiatives Team, Mental Health Programs of the Indian Health Service. These efforts include crisis response and consultation to tribes throughout the United States on suicide, domestic violence, and child abuse.

"The State's Role in Suicide Prevention Programs for Alaska Native Youth," by Forbes, describes a major program funded and administered by the state, that is intended to prevent youth suicide among Alaska Natives. Ongoing secondary and tertiary prevention efforts by the state's mental health system as well as data on completed suicides through 1988 are presented. Forbes discusses and critiques the state's prevention efforts, pointing out the information needed to plan more effective suicide prevention programs.

A synopsis by Shore of current knowledge of Indian/Native adolescent suicide follows. This chapter reports Indian/Native specific case and research studies and summarizes conference issues and concerns. It thus becomes the appropriate precursor to the conference-generated research agenda and recommendations to the National Institute of Mental Health, Substance Abuse and Mental Health Services Administration (SAMHSA), and other groups or organizations for the continued support of both basic and applied research on the prevention of suicide among Indian and Native adolescents.

This volume represents a major resource document for future research and policy formulation. We hope that this monograph also will further stimulate appropriate research in partnership with American Indian and Alaska Native communities. There is a great deal of excitement in these communities over the potential for preventing suicide and its concomitant suffering. The chord of hope that has been struck by the exemplary programs and by research presented in this volume acknowledges the local strengths and resources that all too often are overlooked in the face of the overwhelming problems that plague many tribes. This conference presented an exciting and timely opportunity for stimulating critical discussion of a number of concerns, programmatic as well as theoretical, that underpin the understanding and prevention of suicide among Indian/Native adolescents. The challenge now is to take stock of the contributions presented herein in a systematic fashion that will serve as the basis for the next generation of studies and their application.

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Reference

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