
RING THE ALARM

THE CRISIS OF BLACK YOUTH SUICIDE IN AMERICA EXECUTIVE SUMMARY



**A REPORT TO CONGRESS FROM THE CONGRESSIONAL BLACK CAUCUS
EMERGENCY TASKFORCE ON BLACK YOUTH
SUICIDE AND MENTAL HEALTH**

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EXECUTIVE SUMMARY

INTRODUCTION

Over the last several years, data has emerged indicating an alarming increase in the suicide rates for Black children and teenagers over the past generation. While research has also shown climbing rates for youth from other racial and ethnic groups, this trend in Black youth runs counter to historical data showing lower rates of suicide among Black Americans. It challenges the public perception that Black youth simply do not commit suicide. Additional research about suicidal behaviors has raised questions about whether the path from suicidal thoughts to attempts is well understood in Black youth, and whether we have the knowledge and tools to intervene before the worst happens.

A GROWING CRISIS

In youth ages 10 to 19 years, suicide is the second leading cause of death, and in 2017, over 3,000 youth died by suicide in this age group. Over the past decade, increases in the suicide death rate for Black youth have seen the rate rising from 2.55 per 100,000 in 2007 to 4.82 per 100,000 in 2017. Black youth under 13 years are twice as likely to die by suicide and when comparing by sex, Black males, 5 to 11 years, are more likely to die by suicide compared to their White peers. Finally, the suicide death rate among Black youth has been found to be increasing faster than any other racial/ethnic group.

When examining suicidal ideation and behavior results have been mixed. Nonetheless, a new study using the Youth Risk Behavior Survey (a national school survey of adolescent health behaviors developed by the Centers for Disease Control and Prevention) paints a further alarming picture for Black high-school aged youth. That study's findings indicated that suicide attempts rose by 73% between 1991-2017 for Black adolescents (boy and girls), while injury by attempt rose by 122% for Black adolescent boys during that time period. This would suggest that Black males are engaging in more lethal means when attempting suicide. Although Black youth have historically not been considered at high risk for suicide or suicidal behaviors, current trends suggest the contrary.¹

The suicide death rate among Black youth has been found to be increasing faster than any other racial/ethnic group.

THE CHALLENGE AHEAD

The narrowing racial gap in suicide rates tells us that this emergent issue among Black youth warrants attention now. A cadre of Black researchers from across the United States has been ringing the alarm to raise awareness about this disturbing trend.

Yet, very few research dollars have been committed by entities such as the National Institutes of Health (NIH), National Institute of Mental Health (NIMH) and the Substance Abuse and Mental Health Services Administration (SAMHSA) to investigate into what is happening; specifically, for evidence-based interventions relating to mental health and suicide risk; and studies about risk factors, protective factors, mental health utilization and engagement, as they pertain to Black youth. Black scientists—those most closely connected to this population—are 10 percentage points less likely than White scientists to be awarded NIH research funding; and a recent study by NIH scientists concluded that research topics proposed by Black scientists are less likely to be funded than those proposed by White researchers.

Despite a growing body of research on Black youth suicide and mental health, news coverage of suicide trends among American

¹ *To see the reference information for the aforementioned research, please see the full report.*

youth too often fails to mention specific developments related to Black youth suicide, which urgently need addressing.

THE FIRST STEPS TOWARD ACTION

These are among the reasons that on December 6, 2018, U.S. Representative Bonnie Watson Coleman (D, NJ —12th District), who has been a long-standing advocate of the mental health needs of the Black community, convened a congressional hearing that included some of the country's leading Black researchers and practitioners to discuss mental health solutions for the increasing rates of suicide among Black youth. An outcome of that hearing was a recommendation for the Congressional Black Caucus to establish a taskforce to further examine Black youth suicide and devise solutions, with regard to both legislation and other interventions.

On April 30, 2019, the Congressional Black Caucus (CBC) established the Emergency Taskforce on Black Youth Suicide and Mental Health (the Taskforce), with Rep. Watson Coleman as the chair. Upon its creation, the Taskforce empowered a Working Group of experts composed of the country's leading Black academic, research and practicing experts.

The Taskforce and the Working Group were charged with identifying causes and solutions for Black youth suicide and mental health needs; developing and producing a report by the end of 2019; and describing the latest research, as well as practices and policy recommendations.

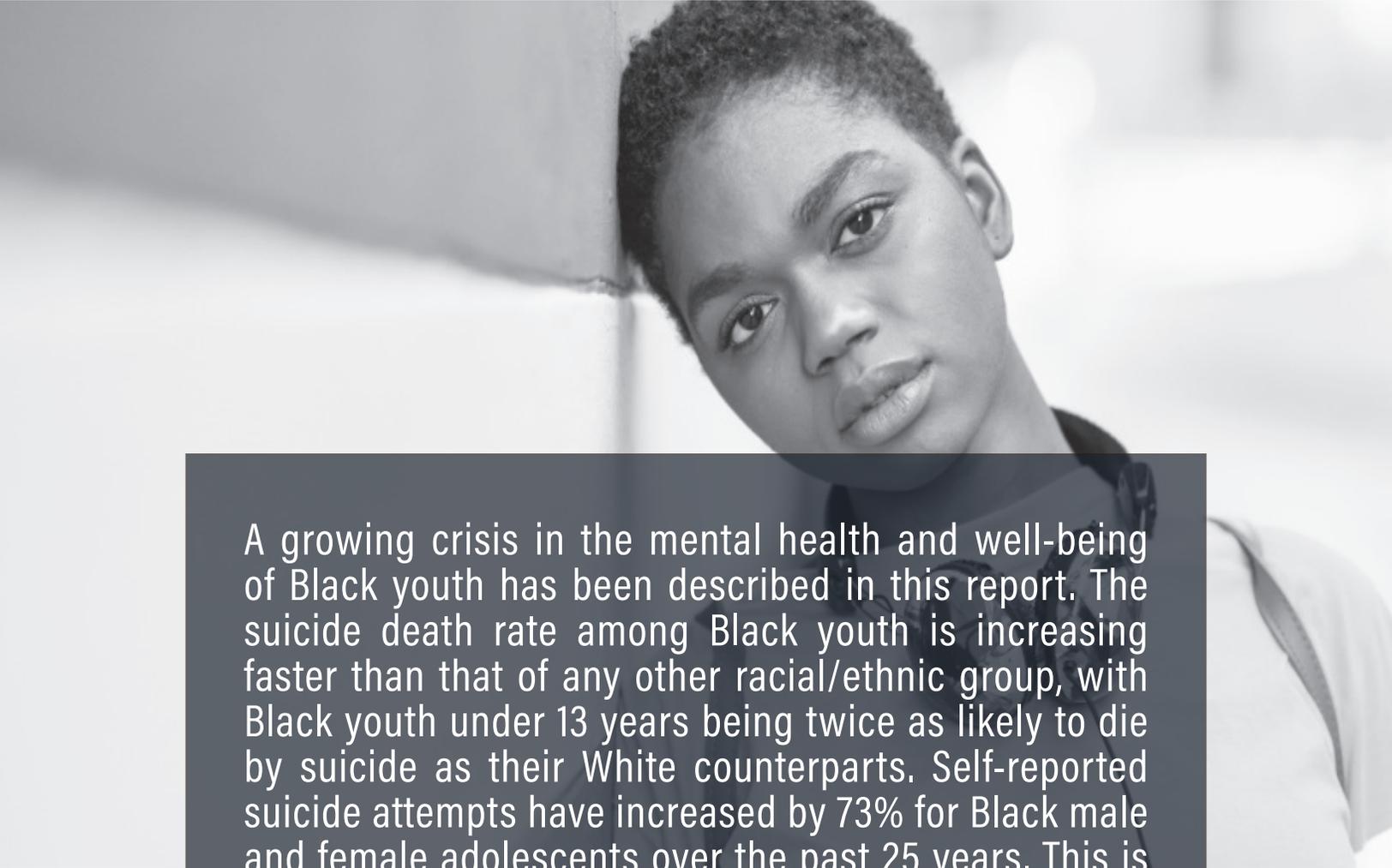
As part of the fact-gathering process, the CBC and the Taskforce held a number of hearings on Black youth suicide, including ones that focused on the impact of social media and the role of the faith community. They also held a hearing to ascertain Black youths' perspectives on the issue of suicide and mental health. Taraji P. Henson, founder of the Boris L. Henson Foundation (which focuses on mental health), testified about mental health stigma and the barriers Black people face in accessing treatment during a special hearing on June 7, 2019.

THE PATH FORWARD

The intention of this report is to raise awareness; provide an overview on the existing body of research; identify gaps in research, policy and practice; highlight best practices for practitioners; and create a resource document for all who come into contact with Black youth in healthcare, schools and other settings.

The work of this Taskforce, in partnership with the CBC, will be ongoing and will include legislation; demonstration projects; regional roundtables; trainings; and engagement of policy makers on the federal, state and local levels. Most importantly, the Taskforce would like for this report to serve as a vital resource for the parents and caregivers of Black youth.

RECOMMENDATIONS



A growing crisis in the mental health and well-being of Black youth has been described in this report. The suicide death rate among Black youth is increasing faster than that of any other racial/ethnic group, with Black youth under 13 years being twice as likely to die by suicide as their White counterparts. Self-reported suicide attempts have increased by 73% for Black male and female adolescents over the past 25 years. This is while self-reported suicidal thoughts and plans have decreased, pointing to a need to examine why they may be going straight to attempts.

Meanwhile, Black adolescents are significantly less likely to receive care for depression—a major risk factor for suicide—with pervasive structural inequities, social determinants of health, stigma and mistrust of healthcare providers creating daunting barriers to treatment.

Knowing the depth and scope of the crisis facing our Black youth, we are making the following policy, practice and research recommendations for addressing their needs relating to suicide and mental health.

Our overarching goals for these recommendations are to:

1. Increase the amount of research into topics relating to Black youth mental health and suicide through National Institutes of Health (NIH) and National Institute of Mental Health (NIMH) funding.
2. Increase funding and resources for Black researchers who are focused on these topics.
3. Demonstrate and promote evidence-based interventions and best practices for clinicians, school personnel, teachers, parents and others who interact with Black youth.
4. Amplify the work of the Taskforce and its Working Group through strategic collaboration, outreach and technical assistance to state and local governments, as well as through public-private partnerships.

Our specific recommendations come under the following categories:

- NIH/NIMH Funding and Attention
- Demonstration Projects
- Promoting Best Practices
- Community Engagement and Awareness
- National Website and Repository for Data on Suicidal Behavior
- Engagement of State and Local Governments
- Ongoing Work of the Task Force

NIH/NIMH FUNDING AND ATTENTION

Research findings by this body point to an urgent need for more research relating to Black youth suicide and mental health. Yet, Black scientists—those most closely connected to this population—are 10 percentage points less likely than White scientists to be awarded NIH research funding. A recent study by NIH scientists underscores the problem, concluding that research topics proposed by Black scientists are less likely to be funded than those proposed by White researchers; with community or population-level research, health disparities research and patient-focused interventions—proposed with greater frequency by Black scientists—garnering among the lowest grant award rates.

In light of the funding gap, we recommend that the dearth of NIH- and NIMH-funded research relating to Black youth mental health and suicide be addressed through federal legislation and engagement of those agencies. Research areas of focus should include, but not be limited to:

1. Risk and protective factors for suicidal behaviors among Black youth
2. Mental health motivation, utilization and engagement among Black youth with an emphasis on examining motivation for mental health treatment

3. Risk and protective factors, as well as mental health utilization and engagement, among Black LGBTQ+/SGL youth.
4. Practical, systemic and cultural barriers to treatment
5. The effectiveness of depression screenings by professionals across health care professions and institutions for helping to identify Black youth at risk for suicide
6. The effect of social media usage on Black youth
7. Evidence-based interventions relating to mental health and suicide risk; in particular, those that are age-appropriate, and culturally and linguistically relevant for Black youth

In addition, this body recommends the following:

- That the CBC, together with the Taskforce, shall convene a roundtable with NIH and NIMH to discuss funding, interventions and evidence-based practices and a road map for identifying the best ones.
- That the CBC, together with the Taskforce, shall convene hearings on the issue of the dearth of research funding relating to Black youth mental health and suicidal behavior, and how to increase that funding.
- Engagement of NIH and NIMH about funding to address the dearth of evidence-based approaches to the treatment of depression or suicide prevention that are tested in large enough samples of Blacks to help establish an evidence base for this population.
- That federal funding be provided to demonstrate evidence-based interventions that show the effect of placing social workers and other mental health professionals in schools, proportionate to the number of students in each school.



DEMONSTRATION PROJECTS

A primary objective of this Taskforce is to ensure that we continue to advance best practices that are guided by the research led by experts, researchers and clinicians working with Black youth. Demonstration projects will provide opportunities to test, assess and advance such best or promising practices. We recommend funding and demonstrating evidence-based interventions targeting Black youth suicidal behaviors and depression, in schools and other settings, through government, public-private partnerships and in collaboration with faith-based organizations.

**Let this report
serve as an
urgent call to
action for all
Americans.**

PROMOTING BEST AND PROMISING PRACTICES

One remedy for closing the racial gap in mental health services that is described in the Research section of this report is to examine best and promising practices for addressing the needs of Black youth. Therefore, this body recommends the following:

1. Establish online and regional training academies for school-based personnel and mental health providers on how to recognize signs of depression, suicidal behaviors and other mental health problems.
2. Fund the development of a model curriculum for administrators, teachers, other school personnel, parents and community-based organizations and around mental health and suicide, leveraging the expertise of the Working Group of the Taskforce. Such a curriculum would include training in anti-bias, anti-oppressive and gender equity practices.
3. Developing culturally-effective guidelines for national suicide and mental health hotlines and organizations relating to Black youth, leveraging the expertise of the Working Group of the Taskforce.
4. Identify and promote best and promising practices for increasing the pipeline of social workers and other mental health providers to address the dearth of school-based personnel who can address the mental health needs of Black students, with the goal of placing a proportionate number of social workers and other mental health providers in each school relative to the student body population.
5. Develop a certification program for medical personnel, clinicians, school personnel and others who interact with Black youth in an educational or healthcare setting, to ensure they are trained to address the mental health needs of Black youth.
6. Develop a screening tool for use by providers across healthcare professionals and institutions relating to suicidal thoughts, ideation and self-harm, as well as a protocol on how to treat and connect Black youth to care.
7. Identify and implement highly universalized models, such as Mental Health First Aid and Zero Suicide.

COMMUNITY ENGAGEMENT AND AWARENESS

The research, practices and recommendations described in this report will only be effective if lawmakers, policy makers, school and medical personnel who interact with Black youth, parents, media, members of the faith community, other stakeholders and members of the general public are aware of them. Toward that end we recommend establishing and funding an awareness campaign about Black youth suicidal behaviors and engage the following populations:

- Youth
- LGBTQ+/SGL Youth
- Clergy
- Parents
- Elected Officials
- Fraternal and Civic Organizations

NATIONAL WEBSITE AND REPOSITORY FOR DATA ON SUICIDAL BEHAVIOR

It is imperative that the nation collects better data on Black youth suicidal behaviors and makes that information available to researchers and the public through an online repository. Such a repository should include the following relevant document types:

- Fact sheets
- Research
- Reports
- Legislation
- A searchable database of experts by region
- Best and promising practices
- A glossary of terms

ENGAGEMENT OF STATE AND LOCAL GOVERNMENTS

It requires more than federal action to address the mental health needs of Black youth and the rising rates of suicidal behavior in this population. Research, education and evidence-based solutions must occur at the local government level, connecting with communities and families. Toward that end, we make the following recommendations:

1. Amplify the work of the Taskforce at the state and local level, by engaging state and city legislative bodies.
2. Establish taskforces on Black Youth Suicide and Mental Health at the local government level.
3. Provide technical assistance and support to local taskforces through legislation.

ONGOING WORK FROM THE CBC

The growing crisis in Black youth suicide and mental health will not abate with the issuance of this report or actions to carry out its recommendations. We urge the following steps to ensure that the work continues, with far-reaching impact.

1. Provide oversight in order to continue the critical work begun by the taskforce
2. Establish an annual convening and/or conference on Black Youth Suicide and Mental Health under the auspices of the CBC
3. Garner resources and support for the pursuit of public-private partnerships through legislation
4. Propose and introduce legislation with the goal of addressing Black youth suicide and mental health trends ¹

The information contained in this report sets out a blueprint for action and for saving precious, young lives. Following the aforementioned recommendations will prove that we, as a nation, are no longer willing to lose any Black youth to suicide.

¹ To see the reference information for research cited in this section, please see citations 109 and 110 in the Reference section of the full report.