

# Hispanic Adolescent Females and Suicide Risk

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As of 2010, the Hispanic<sup>1</sup> population in the United States (U.S.) reached 50.5 million, making Hispanics the largest ethnic or racial minority group in the country.<sup>1</sup> Although Hispanics have historically been at decreased risk for suicide compared to other ethnic or racial groups, risk has steadily risen since 2000, especially among Hispanic adolescent females.<sup>2</sup>

Results from the 2015 national school-based Youth Risk Behavior Survey indicated that Hispanic adolescent females (grades 9-12) in the U.S. reported the highest prevalence of seriously considering attempting suicide (25.6%), making a suicide plan (20.7%), and attempting suicide (15.1%) in the last year compared to non-Hispanic female and Hispanic/non-Hispanic male peers.<sup>3</sup> Furthermore, the prevalence of suicide attempts that had to be treated by a doctor or nurse was also highest among Hispanic adolescent females (4.5%), indicating greater potential lethality of these attempts. Interestingly, prevalence of suicidal behaviors seems to be lower among female adolescents (aged 12 to 17) in Puerto Rico (11%).<sup>4</sup>

In 2016, the rate of suicide among Hispanic adolescent females (aged 13 to 19) was 3.36 per 100,000 in the U.S.<sup>5</sup> This rate was lower than suicide rates among non-Hispanic females (4.83 per 100,000), Hispanic males (7.38 per 100,000), and non-Hispanic males (13.29 per 100,000) of the same age.<sup>5</sup> Notably, as with non-Hispanic adolescent females, suicide rates among Hispanic adolescent females have almost doubled since 1999, whereas rates have only shown a slight increase among Hispanic/non-Hispanic adolescent males.

## Risk Factors

Studies have found that depression and being born in the U.S. are associated with increased suicide ideation among Hispanic adolescent females.<sup>6</sup> Beyond this, however, problematic interpersonal relationships seem to be particularly linked with suicide ideation in this population. Among a nationally representative sample of Hispanic female high school students, suicide ideation was associated with having a suicidal friend, lower perceived father support, and overall parental caring.<sup>7</sup> Among Mexican American adolescent females (but not males), having friends who were disconnected from school has also been associated with increased odds for suicide ideation.<sup>8</sup> Furthermore, family dysfunction due to drug use and violence has also been associated with suicide ideation among Hispanic adolescent females,<sup>9</sup> whereas acculturation gap and immigration stress have not.

Quality of relationships is also especially relevant for suicide attempts among Hispanic adolescent females. Low levels of parental care and family connectedness have been associated with greater odds of suicide attempts, as well as ideation, in this population.<sup>10</sup> Suicide attempts have also been associated with having a suicidal friend, as well as lower perceived teacher and parental support among this population.<sup>7</sup> Low levels of mother-daughter mutuality (i.e., reciprocal empathy and engagement) has also been found to predict higher internalizing and externalizing behavior among Hispanic adolescent females, which, in turn, predicted attempts.<sup>11</sup>

Similarly, parent-adolescent conflict has been associated with higher levels of internalizing behaviors and lower self-esteem among adolescent Hispanic females, which in turn were associated with suicide attempts.<sup>12</sup> Indeed, researchers have concluded that Hispanic adolescent females with a recent suicide attempt had done so following a breakup with a

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<sup>1</sup> The term Hispanic is used throughout this article as it refers to persons specifically of Spanish-speaking origin or ancestry in the United States. The term Latino/a, on the other hand, refers to persons of Latin American origin or ancestry, which includes Brazil and Haiti (but excludes Spain and Europe). Although distinct, the two terms are often used interchangeably in the literature.

boyfriend or an intense fight with their mother.<sup>13</sup> Importantly, Hispanic adolescent females with a history of a suicide attempt were also more likely to report negative coping skills, such as withdrawal and wishful thinking.<sup>13</sup>

### **Protective Factors**

Familism, a social value that places the needs of the family before those of the individual, seems to be related to suicide resiliency among Hispanic adolescent females. Familism has been identified as a protective factor against parent-adolescent conflict for Hispanic adolescent females.<sup>12</sup> Familism has also been associated with a greater likelihood that a Hispanic adolescent female belongs to a tight-knit family (i.e., high cohesion and low conflict) than an intermediate (i.e., moderate-to-low cohesion and moderate-to-high conflict) or loose-knit family (i.e., low cohesion and high conflict). In turn, Hispanic adolescent females are less likely to have attempted suicide if in a tight-knit family compared with other family environment types.<sup>14</sup> Although familism seems to serve a protective factor for Hispanic adolescent females, it also has been linked to increased internalizing behavior;<sup>12</sup> thus, may not always be beneficial.<sup>15</sup>

Quality of parental relationships seems to have a more consistent role in protecting against suicide ideation and behaviors among Hispanic adolescent females. For example, parental interest in school life and parental caring was negatively associated with suicide ideation among Hispanic adolescent females.<sup>6</sup> Better mother-daughter relationships due to greater cultural involvement<sup>16</sup> and greater mother-daughter mutuality<sup>13</sup> are associated with a reduced likelihood of a suicide attempt history among Hispanic adolescent females. Hispanic adolescent females without prior suicide attempts also report using emotion regulation and problem-solving coping skills more frequently to cope with social conflict than those with a history of attempts.<sup>13</sup>

### **Barriers to Care and Suicide Prevention Interventions**

Hispanic adolescent females and males report less favorable attitudes toward help-seeking at school if upset than their non-Hispanic White counterparts.<sup>17</sup> They also report less favorable attitudes toward seeking help from an adult for a suicidal friend.<sup>17</sup> Problematically, although school engagement is associated with disclosure of suicide ideation or seeking help among Hispanic male adolescents in Hispanic-representative schools, it is not for females.<sup>18</sup>

Hispanic youth are also less likely to seek out advice from a friend for another suicidal friend or to characterize those who die by suicide as mentally ill.<sup>19</sup> Hispanic adolescents (aged 12-17) are also less likely to report mental health service use than non-Hispanic White peers,<sup>20</sup> even when controlling for need for care and ability to secure service. It has been suggested that low mental health literacy, stigma, and beliefs about treatment may be barriers to mental health care for Hispanics.<sup>21</sup> Culturally-tailored approaches may be needed to impact attitudes about suicide and help-seeking among Hispanics.

One culturally-tailored prevention intervention is Familias Unidas,<sup>22</sup> a family-based intervention designed to prevent and reduce risky behaviors (e.g., drug/alcohol use and risky sexual behavior) among Hispanic adolescents by improving family functioning. Familias Unidas consists of eight multi-parent group sessions focused on parenting-skills, followed by four family sessions. Familias Unidas has been shown to prevent and reduce conduct problems, risky behaviors, and internalizing symptoms (e.g., depression) among Hispanic adolescents compared to prevention-as-usual/community controls.<sup>23-26</sup> Although not designed as a suicide prevention program, Familias Unidas has also significantly reduced suicide attempts among Hispanic adolescents with low levels of baseline parent-adolescent communication.<sup>27</sup>

The need for suicide prevention interventions for Hispanic female adolescents has spurred various efforts, although the efficacy of these interventions has not been tested. Dialectical Behavior Therapy (DBT), for example, has been culturally-tailored for treating Hispanic adolescent females and their parents. Specifically, supplemental dialectical corollaries (i.e., extreme patterns) and treatment targets have been proposed for DBT with this population.<sup>28</sup> These dialectical corollaries include: “old school versus new school” and “overprotecting versus underprotecting.” Respective treatment targets include: incorporating aspects of both cultures and modifying maladaptive parental cognitions.

Another untested program is Life is Precious, a community-based after-school program in New York City aimed at reducing suicidal behavior among Hispanic female adolescents (ages 12-18) with a history of suicide ideation or attempts.<sup>29</sup> Life is Precious helps adolescents and families address risk factors by building communication skills, providing academic support, fostering creative expression, and providing wellness support (health foods and exercise). Unlike Familias Unidas, parental/familial participation is not required. Participation is on a drop-in basis with no set curriculum, although participants must be receiving mental health treatment. Although an uncontrolled study, during the program period (4-24 months), suicide ideation decreased and no participant attempted or died by suicide (N = 107).<sup>30</sup>

Other programs geared toward Hispanic adolescent females that may be beneficial but require further testing include (a) Project Wings, (b) a socio-cognitive behavioral treatment for suicidal behavior (SCTB-SB), and (c) an emergency room (ER) intervention. Project Wings is a 16-session school-based mental health group program designed to improve well-being among Hispanic adolescent females.<sup>31</sup> Although not designed to address suicidality specifically, Project Wings has demonstrated feasibility and trends toward reduced stress and depression, and increased connectedness.<sup>32</sup> SCTB-SB was piloted among Puerto Rican adolescents who have experienced a suicidal crisis for 3-6 months; initial results indicating improvements in or maintenance of low ideation, along with partial or total diagnosis remission and improvements in risk factors.<sup>33</sup> Finally, An ER intervention consisting of specialized ER care for mother-daughter dyads following a suicide attempt by female adolescents (a majority of which were Hispanic) has been associated with lower depression scores compared to standard ER care after 18-months.<sup>34-36</sup>

## **Conclusion & Recommendations**

Hispanics are the largest ethnic/racial minority group in the U.S., and are expected to constitute over 25% of the population by 2060.<sup>37</sup> At the same time, suicide risk has increased drastically among Hispanics in the last two decades,<sup>2</sup> especially among women and adolescents. Preventing suicide among Hispanics must be considered a public health priority.

Hispanic youth and community leaders have suggested that culturally tailored prevention interventions for Hispanic youth should: (1) utilize multiple sustainable strategies (e.g., public awareness/educational outreach, skill-building activities), (2) raise awareness about depression in culturally meaningful ways, and (3) promote social connection and cultural enrichment.<sup>38</sup>

Importantly, Hispanic female adolescents have identified that providers who facilitated communication, promoted autonomy, and fostered emotional connection post-suicide attempt helped them become active agents in their treatment and recovery.<sup>39</sup> They also described restrictive care settings (e.g., emergency departments and inpatient units) more negatively than outpatient care. With this in mind, family-based outpatient interventions may therefore be beneficial for Hispanics female adolescents,<sup>40</sup> particularly those that promote cultural engagement and familial/social connection.

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