



Working with Youths and Suicide in a substance abuse setting

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Statewide Suicide Prevention Council

- The Statewide Suicide Prevention Council was established in 2001, by the Alaska Legislature, after a series of “suicide clusters”
- The Council is responsible for advising legislators and the Governor on ways to improve Alaskans’ health and wellness by reducing suicide, improving public awareness of suicide and risk factors, enhancing suicide prevention efforts, working with partners and faith-based organizations to develop healthier communities, creating a statewide suicide prevention plan and putting it in action, and building and strengthening partnerships to prevent suicide.

Suicide was considered an “epidemic” when the Council was created.

- Back then, in 2000, the age-adjusted rate of suicide for all Alaskans was 21.2/100,000 People— an average of 135 lives lost each year.
- In 2000, the suicide rate in rural Alaska was nearly three times that in urban Alaska.
- Not much has changed since then. In 2009, the (provisional) age-adjusted rate was 20.2/100,000 People with 140 lives lost.

statewide age-adjusted rate

- Between 2000 and 2009, there were 1,369 confirmed suicide deaths in Alaska.
- At least one suicide occurred in 176 Alaskan communities.
- Over the last ten years, the rate of suicide has remained consistently high.
- The statewide age-adjusted rate has been 20/100,000 people or higher for eight of the ten years.
- Some regions have had age-adjusted rates much higher than that as you see in the table beside. The data is provided by the Bureau of Vital Statistics. 2009 data is provisional.

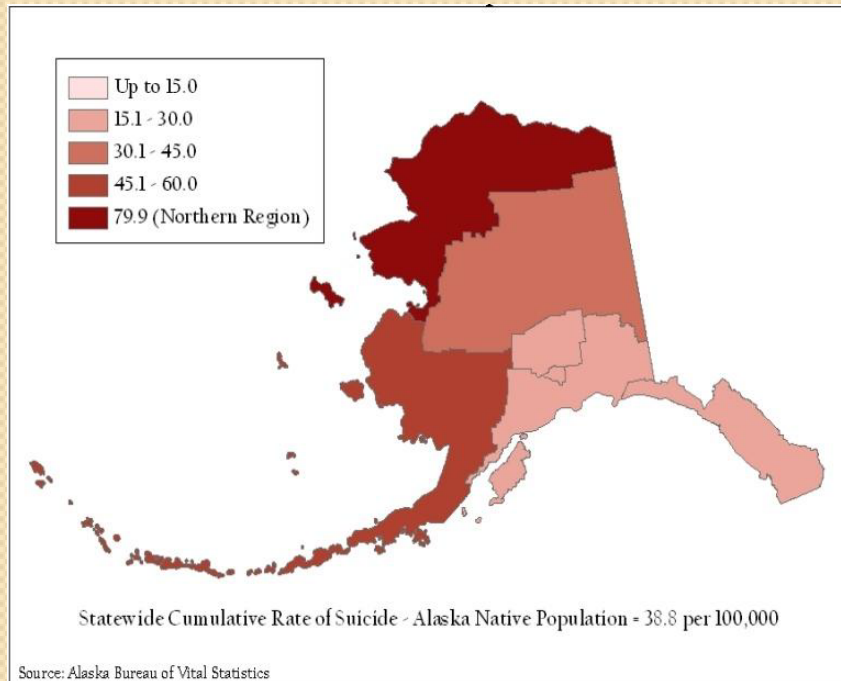
Suicides By Region of Residence: Age-Adjusted Rates¹

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
North Slope Borough	103.3*	**	**	**	**	**	**	**	**	**
Northwest Arctic Borough	**	**	93.5*	**	**	**	102.1*	**	99.4*	**
Nome	63.5*	63.2*	118.2*	**	63.7*	106.0*	65.0*	**	59.9*	84.9*
Bethel/Wade Hampton	62.5*	**	36.7*	57.8*	96.2	60.2*	46.0*	55.0*	75.4*	55.8*
Dillingham/Bristol Bay/Lake and Peninsula Borough	**	**	**	**	**	**	**	**	0.0	**
Kodiak Island Borough	**	0.0	**	**	0.0	**	**	**	**	**
Aleutians	**	**	0.0	**	**	**	**	0.0	**	**
Anchorage/Mat-Su Borough/Kenai Peninsula	17.6	14.1	18.3	18.6	20.4	16.0	16.6	20.7	17.6	16.7
Valdez-Cordova	**	**	**	**	**	**	**	**	**	**
Interior	18.4	19.2*	17.0*	19.8*	19.7	13.9*	17.3*	21.3	33.7	12.9*
Southeast	13.4*	15.2*	19.5*	7.8*	14.3*	10.6*	14.0*	25.0*	23.3*	27.4*
Total	21.1	16.5	20.9	20.5	23.3	19.5	20.0	23.1	24.7	20.2

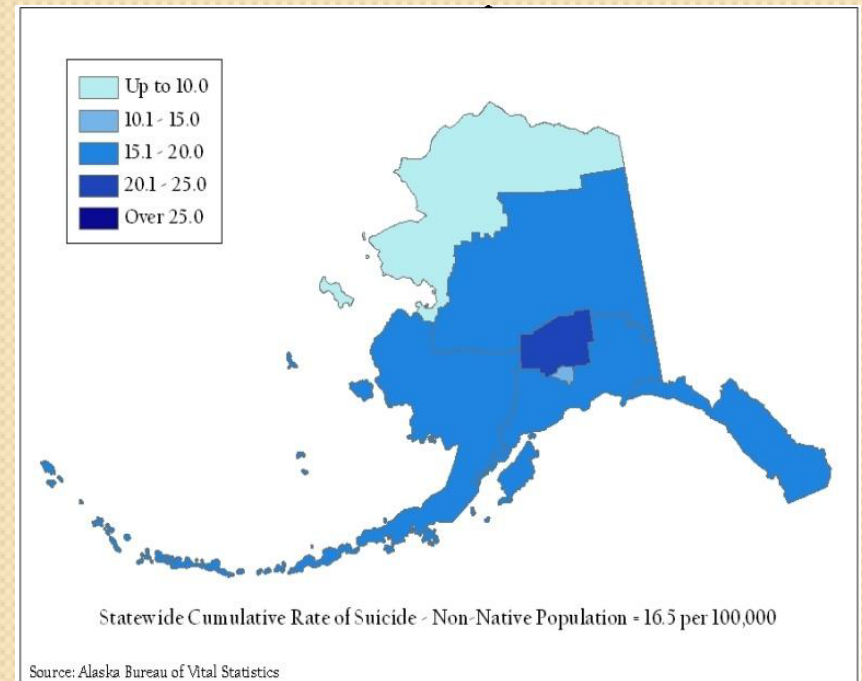
Suicide and Ethnicity

- Suicide rates among Alaska Native peoples are higher than for any other ethnicity in the state, and are the highest of any ethnicity in the United States.
- In 2009, the age-adjusted rate for Alaska Native peoples was 32.8/100,000 people.
- For Caucasian the age-adjusted rate was 17.7/100,000.14 That is a difference of nearly 2:1.
- Looking at Alaska suicide rates over time shows that same disparity, with a cumulative crude rate of 38.8/100,000 for Alaska Native peoples and 16.5/100,000 for non-Native peoples.

Crude Rate of Alaska Native by Alaska Department of Labor Region



Suicide Crude Rate of Non-Native Suicide by Alaska Department of Labor Region



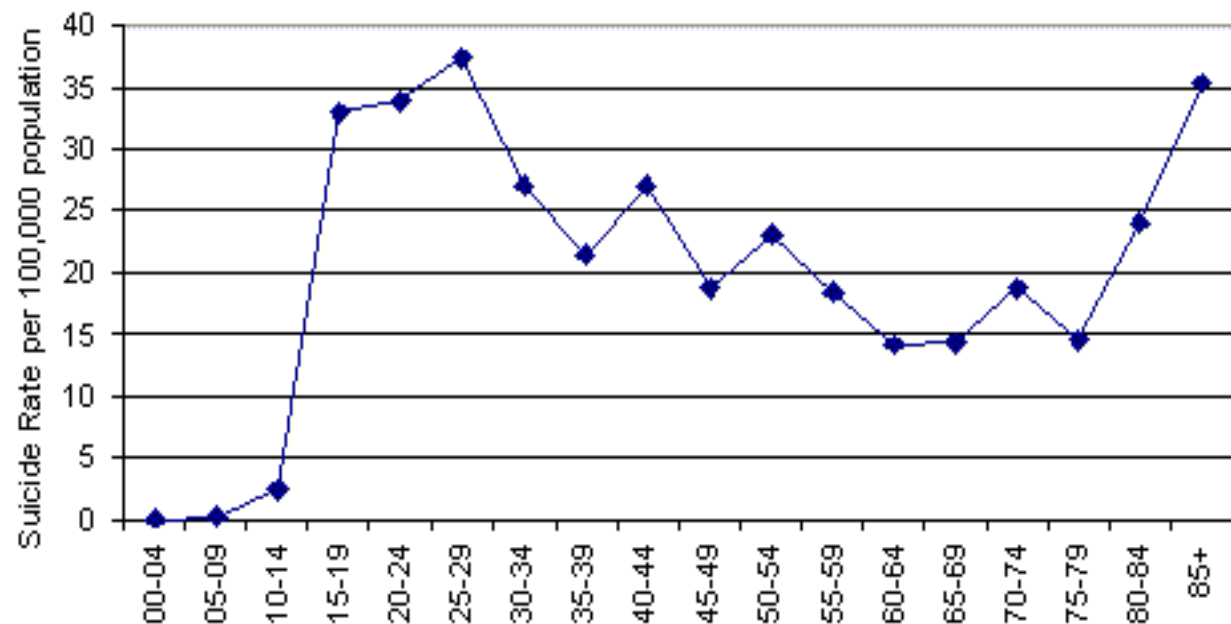
Alaska Native individuals are twice as likely to commit suicide as individuals of other ethnicities.

Suicide and Age

- In Alaska, young people age 15-24 continue to have the highest rates of suicide.
- The age-specific suicide rate for **young men age 15-24 is 56.1/100,000** and for **young women is 16.6/100,000**.
- For Alaska Natives, the rate for this age group is **141.6/100,000 for young men** and **50.3/100,000 for young women**

Suicide and Age

Alaska Suicide Rate by Age
1994-2000

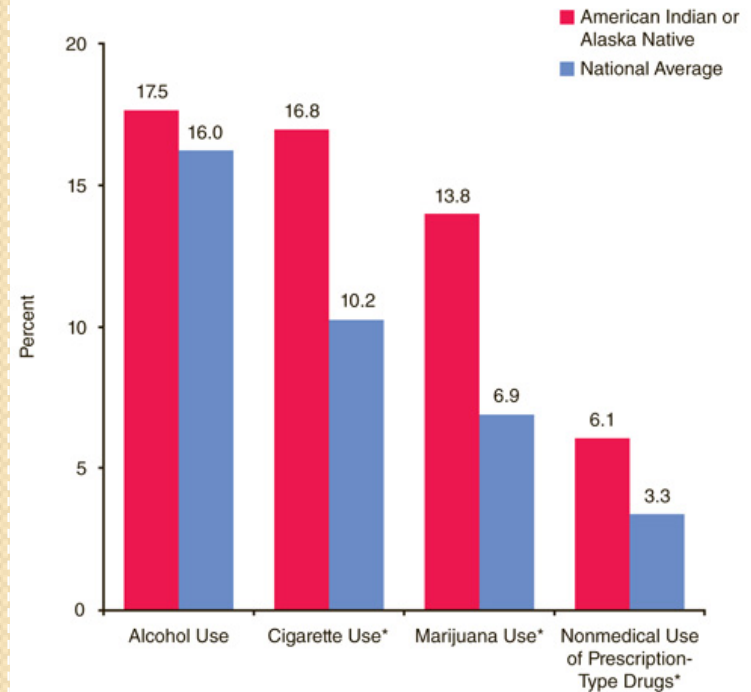


Note: Suicide rates are age-adjusted. Source: CDC WISQARS Injury Mortality Report

Past Month Substance Use

- Substance use rates were generally higher among American Indian or Alaska Native adolescents compared with national averages (Figure 1).
- The greatest differences were found for cigarette use (16.8 vs. 10.2 percent) and marijuana use (13.8 vs. 6.9 percent).
- The rate of nonmedical use of prescription-type drugs among American Indian or Alaska Native adolescents was almost twice that of the national rate (6.1 vs. 3.3 percent).
- The rate of past month alcohol use among American Indian or Alaska Native youths was similar to the national rate.

Figure 1. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Compared with the National Average: 2004 to 2009



* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.

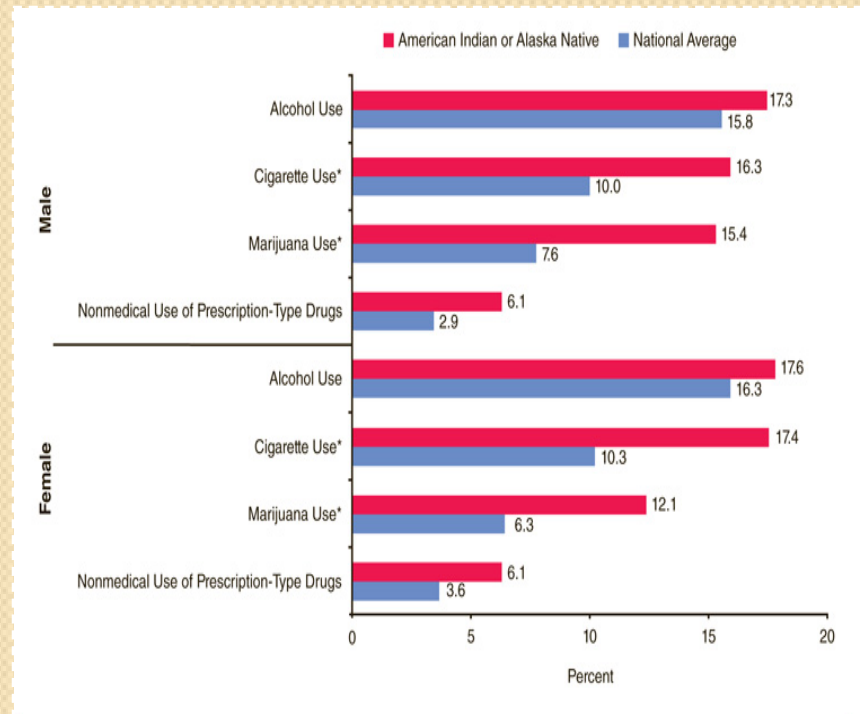
Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Substance Abuse and Adolescents

Substance Use by Gender

- Compared with the national averages the rate of past month for adolescent females, **adolescent American Indian or Alaska Native females** had higher rates of cigarette use (17.4 vs. 10.3 percent) and marijuana use (12.1 vs. 6.3 percent); rates of past month for alcohol use and nonmedical use of prescription-type drugs were similar (Figure 2).
- Similar patterns were found among adolescent males, with **16.3 percent of American Indian or Alaska Native males smoking cigarettes** compared with 10.0 percent of males in the Nation and with **15.4 percent of American Indian or Alaska Native males using marijuana** compared with 7.6 percent of males in the Nation as a whole.

Figure 2. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Compared with the National Average, by Gender: 2004 to 2009



* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.

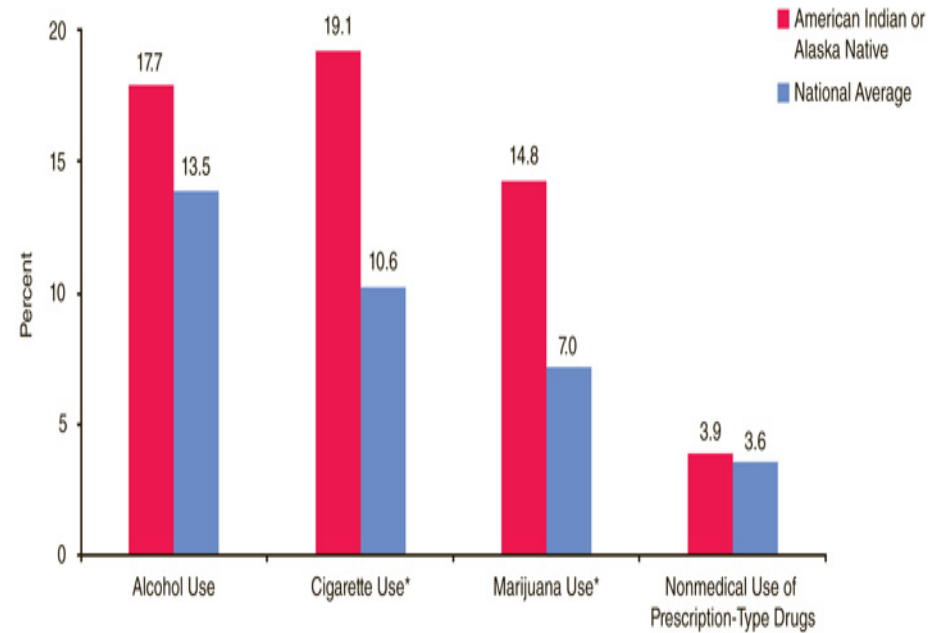
Source: 2004 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Substance Abuse and Adolescents

Substance Use among Adolescents Living in Poverty

- The rate of past month **cigarette use among American Indian or Alaska Native adolescents living in poverty was higher** than the national average for adolescents living in poverty (19.1 vs. 10.6 percent) (Figure 3).
- The rate of past month use of **marijuana** (14.8 vs. 7.0 percent) (Figure 3).
- Rates of past month **alcohol use and nonmedical use of prescription-type drugs** did not differ significantly from the national averages for adolescents living in poverty.

Figure 3. Past Month Substance Use among American Indians or Alaska Natives Aged 12 to 17 Living in Poverty Compared with the National Average Living in Poverty: 2005 to 2009



* The difference between American Indian or Alaska Native adolescents and the national average is statistically significant at the .05 level.

Source: 2005 to 2009 SAMHSA National Surveys on Drug Use and Health (NSDUHs).

Substance Abuse and Adolescents

Substance Abuse and Adolescents

Open for Discussion

- According to the last few Charts or Figures, These data highlight the need for ongoing efforts to develop and implement behavioral health services for American Indian or Alaska Native adolescents.
- Furthermore, with **562** federally recognized tribal nations and Alaska Native villages where more than 200 tribal languages are spoken, prevention and treatment efforts aimed at American Indian or Alaska Native adolescents **should** be appropriately sensitive to the rich diversity of cultures among this population.
- For example, effective prevention approaches may include those that incorporate American Indian or Alaska Native values, are provided in non-stigmatized settings, and involve the development of behavioral health systems that support traditional practices and teachings.

American Indian or Alaska Native adolescents drug and alcohol prevention and treatment *should* be appropriately sensitive and may include or incorporate American Indian or Alaska Native value

- When **implementing** interactive activities in the treatment center, for American Indian and Alaska Native youth: Avoid stereotypes.
- Identify and **apply cultural norms and traditions that emphasize pride and health** in order to discourage substance abuse.
- Determine the particular American Indian or Alaska Native characteristics of your target group, such as tribalism, Indian identity, spirituality, acculturation, and biculturalism. **Treatment and Activities must reflect both ethnic-specific and tribal-specific components.**
- Praise and use as **role models contemporary and historical figures who are of specific significance for each American Indian/Alaska Native tribe.**
- Highlight American Indian/Alaska Native contributions to the development of the United States and the emergence of world civilization.
- **Include American Indian/Alaska Native culture and traditions.**
- Support practices and events that **promote ethnic cultural pride and higher self-esteem** among American Indians/Alaska Natives.

American Indian or Alaska Native adolescents drug and alcohol prevention and treatment *should be appropriately sensitive and may include or incorporate American Indian or Alaska Native value (CONT)*

- **Include positive messages** (*e.g., it is a matter of pride to be drug free*).
- **Promote respect for elders and promote interest in disappearing traditions.** (*Traditions are very important for our young generation to cherish and respect*)
- Acknowledge that there may be culturally acceptable use of a substance in specific settings, such as peyote use during Native American ceremonies or tobacco use in ceremonies.
- Facilitate skills training for achieving bicultural competence to offset pressures that might increase risk of substance abuse.
- Target the interventions, according to experts' recommendations, at reducing substance abuse initiation among youth as well as reducing actual use among older users.
- Involve the target audience in the development of substance abuse prevention campaign themes and messages and/or the design and implementation of additional interactive activities.

Suicide and Substance Abuse

- Alcohol and drugs play a role in the suicide problem in Alaska, **but are not a cause of suicide.**
- **We know this from three sources of Alaska-specific information.**
 - I. Alaska medical examiner's office
 - performs a post mortem examination (autopsy) in some — but not all — suicide deaths.
 - From those exams, **there is an indication that alcohol and/or drug use was involved in the majority of suicide decedents examined.**
 - 33% of suicide decedents tested for drugs and/or alcohol, **44% tested positive for alcohol and 48% one or more other drugs.**

Suicide and Substance Abuse

2. The Alaska Psychiatric Institute

- reports that alcohol and/or drug use is involved in an average of 48.44% of all admissions to the state psychiatric hospital

➤ Note: To be admitted to API under the law, a person must be a danger to himself or to another person, so not all of these admissions involved the risk of suicide.

However, the data does show that substance abuse is a factor in a significant number of psychiatric emergencies requiring hospitalization.

Suicide and Substance abuse

3. The Alaska Trauma Registry.

- tracks hospitalizations for poisonings – **of which overdoses on alcohol and/or drugs account for the majority.**
- The Alaska Trauma Registry published a review of suicide hospitalizations for 2001-2002.
 - ✓ During that time, 77% of hospital visits resulting from suicide attempts (or other self-harm) **involved an overdose on medications.**
 - ✓ Of those medication overdoses, **64% were prescription medications.**
 - ✓ **Tylenol was the most common medication** on which children age 0-19 years overdosed.



Causes For Overdose

- One of the most common causes is **depression** which can develop for many different reasons including an **inability in being able to cope, being overcome with negative thoughts or anxiety, or** some even believing that those around them **would benefit from their life not existing any longer.**

Depression and Adolescents Suicide

- As we stated before, one of the risk factors associated with Adolescent suicide is drug abuse.
 - Drug abuse is one of those things that can really affect the chemical balance in the brain, intensifying feelings of depression and sadness.
- Also the **withdrawal symptoms** that come with the Adolescent drug abuse as in the case of **drug dependency**.
 - Can lead to feelings of helplessness and hopelessness.
 - Also the drug (legal or illegal) could become increasingly necessary to the user, both physically and mentally, and this can lead to unpleasant feelings associated with being out of control.
 - Other problems arise when the adolescent is not on the drugs such as the drug effect after use is wearing off or the adolescent is attempting to quit. The adolescent may feel, **like Physical sickness, and feelings of lowness** (or “crashing” or “coming down”) which are usually very unpleasant and **can contribute to feelings of depression and suicidal thoughts.**

Symptoms Associated with Adolescent Drug Abuse

- In order to forestall Adolescent suicide stemming from drug abuse, it is important to recognize **the symptoms of Adolescent drug abuse**. Recognizing these symptoms can help you save someone life from suicide.
 - Some of these Symptoms include:
- ✓ News friends (**often of questionable character**)
- ✓ Increased secretiveness
- ✓ Pulling back from family and friends
- ✓ At times paying lesser attention to their appearance and hygiene
- ✓ Dropping grades at school for no particular reason
- ✓ Lack of interest in extracurricular activities and prefer to hang out with new friends

Depression Associated to Adolescent drug abuse

- Sometimes adolescent drug abuse is not the main cause of depression leading to suicide.
- There are occasions that stresses it self, a single or multiple life events may cause depression and may contribute to adolescent drug abuse.
 - Sometimes adolescents feel so depressed, and so overwhelmed with life, that they turn to drugs to help them feel better and cope with life. (This is known as self-medicating), and it can lead to Adolescent drug abuse.
 - This drug abuse could, in turn, lead to increasingly severe depression which, if not treated, could result in Adolescent suicide.

Some of the factors that can trigger Adolescent depression are:

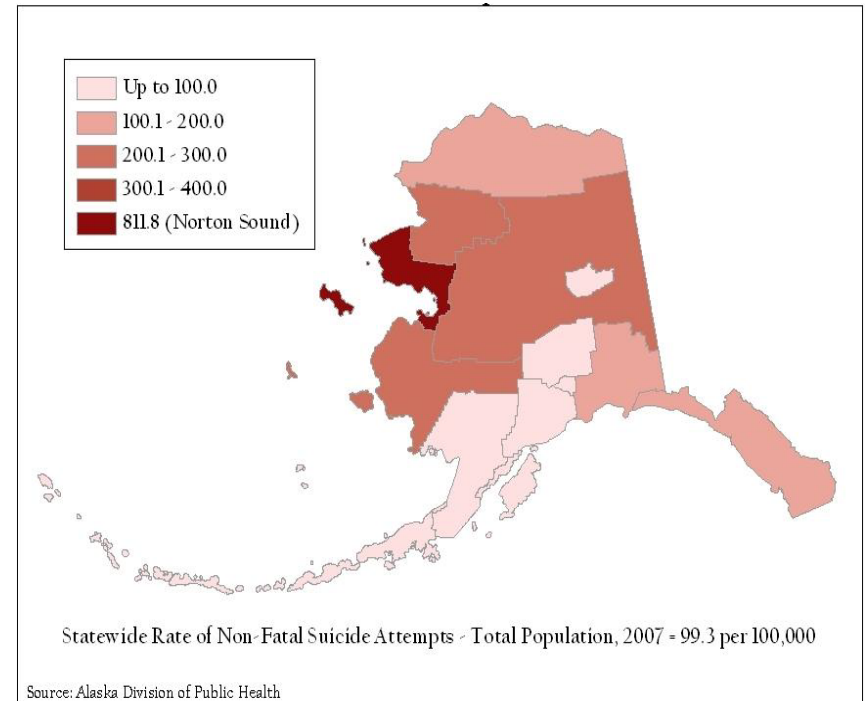
- ✓ Stressful situations at home, work or school
- ✓ Exposure to violence (mental, physical, sexual or emotional)
- ✓ Loss of a loved one
- ✓ Divorce of parents
- ✓ Change in economic or social situation
- ✓ Changing schools
- ✓ Moving to another town or city not having their friends or having trouble making new friends

Treating Adolescent drug abuse and depression to prevent suicide

- Proper treatment of Adolescent drug abuse is necessary in order counteract the effects that can lead to depression and in some cases to suicide.
- There are a variety of treatment options available for our adolescents to include:
 - In and out patient treatments.
- It is important to remember that helping an Adolescent with drug abuse problems **involves support and love from family and friends as well.**

Suicide Attempts

- The number of attempted suicides is just as important as completed suicides.
- In 2007, The Alaska Trauma Registry (*the most recent year's data available*), the suicide attempt rate was 99.3/100,000 people. That's nearly *five attempted suicides to each completed suicide.*



The **Norton Sound area** (Nome, St. Lawrence Island, and the Seward Peninsula) **had the highest rate of non-fatal suicide attempts. In 2007.** That same year, Fairbanks, Anchorage, Mat-Su and the Aleutians had a rate of less than 100 non-fatal attempts per 100,000 people

Some suicide warning signs in Adolescents

- Adolescent suicide is a real problem in the United States.
 - Pressures and a variety emotional, social and family issues to confront, many Adolescents find themselves having suicidal thoughts or ideations. To help reduce the numbers of suicide attempts and adolescent suicide numbers, we need to be able to recognize the early suicide warning signs. Not all warning signs are present in the following list.
- Some of the adolescent suicide warning signs are:
 - ✓ Disinterest in favorite extracurricular activities
 - ✓ Substance abuse to include alcohol and/or drugs use
 - ✓ Behavioral problems
 - ✓ Withdrawing from family and old friends
 - ✓ Sleeping habits changes
 - ✓ Changes in eating habits
 - ✓ Begins to neglect hygiene and/or other matters of personal appearance
 - ✓ Emotional distress brings on physical complaints
 - ✓ Hard time concentrating and paying attention
 - ✓ Declining grades at school to include the loss of interest in schoolwork or activities
 - ✓ Risk taking behaviors
 - ✓ Complains more frequently of boredom
 - ✓ Does not respond as before to praise

Some suicide warning signs in Adolescents (Cont)

- There are some things that Adolescents might do or say that could indicate that they are contemplating, or even planning, suicide.
- Many Adolescents **share their thoughts and feelings in a desperate attempt to be acknowledged** and in many cases, they don't know how to deal with their feelings and problems and are looking for someone to help them find assistance.
- Here are some of the indications of a suicide plan:
 - ✓ Actually says, "I'm thinking of committing suicide" or "I want to kill myself" or "I wish I could die."
 - ✓ There are also verbal hints that could indicate suicidal thoughts or plans, to include such phrases as: "**I want you to know something, in case something happens to me**" or "**I won't trouble you anymore.**"
 - ✓ Some Adolescents even begins **to give away** some of their favorite belongings, **or promising** them to friends and family members.
 - ✓ Some others **throws away important possessions**, which are meaningful to them.
 - ✓ Some other Adolescents **begin to write suicide notes**.
 - ✓ Others will start **Expressing bizarre or unsettling thoughts** on occasions, such as Dramatic mood swings

How to effectively Prevent Adolescent Suicide

- One of the most important aspects of the Adolescent suicide prevention is support, such as family, relatives and friends.
- Some Adolescents needs to know that we support and love them and that we are willing to help them to find hope in life again.
- As we mentioned on the past 2 slides, another effective way to prevent Adolescent suicide is to recognize the signs of suicidal thoughts and feelings, and seek professional help.
- Some of the most effective Adolescent suicide prevention programs consist of identifying and treating the following problems:
 - ✓ Mental and learning disorders
 - ✓ Substance abuse problems
 - ✓ Problems dealing with stress
 - ✓ Behavior Problems
- All of the above issues can be difficult for an Adolescent to cope with and could lead to feelings of helplessness and discouragement, which in turn can turn to self-destructive thoughts , in order for the adolescent to make an escape from the pressures of life.
- Getting help for underlying problems, which almost always include Adolescent depression and substance abuse can lead to a more effective adolescent suicide prevention.
- Also our support as a the adolescent enters therapy can help them more effectively recover and know that there are people who want to help them deal with the issues of life.

References

- Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (October 4, 2011.) *The NSDUH Report: Substance Use among American Indian or Alaska Native Adolescents*. Rockville, MD.
- The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2004 to 2009 data used in this report are based on information obtained from 135,311 persons aged 12 to 17, including 1,907 American Indians or Alaska Natives. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.