



Suicide Prevention Commission

Youth-Specific Initiatives Work Group

Recommendation to Support Black, Indigenous, and Youth of Color

(approved by the Suicide Prevention Commission on April 30, 2021)

In Colorado, as well as nationally, health disparities among Black, Indigenous, and People of Color lead to a lack of access, services, care, and research regarding behavioral health.¹ Economic and racial segregation impact access to education, employment, and health care. In the United States, injustice and segregation contribute to lasting mental health impacts. Because suicidal despair, attempts, and deaths by suicide impact all races, ethnicities, cultures, and communities, it is imperative that suicide prevention efforts support all populations.

According to the 2019 [Healthy Kids Colorado Survey](#), approximately 45 percent of Colorado youth attending public high schools identify as a race/ethnicity other than white.² Three indicators related to mental health and/or suicidal despair are indicative of disparities that impact students who are Black, Indigenous, and Youth of Color here in Colorado:

Table 1. Mental Health Indicators as Reported by Students on the Healthy Kids Colorado Survey (2019)*

2019 Healthy Kids Colorado Survey Results			
Race/Ethnicity	Percentages of students who reported, in the past 12 months:		
	making at least one suicide attempt.	feeling sad or hopeless.**	having at least one trusted adult to ask for help with serious problems.
Native Hawaiian or other Pacific Islander, non-Hispanic	15.8%	41.7%	66.3%
American Indian or Alaska Native, non-Hispanic	15.8%	37.4%	66.9%
Multiple Race or Hispanic Other Race	11.1%	40.0%	69.7%
Hispanic only or Hispanic White	9.4%	38.0%	68.4%
Black or African-American, non-Hispanic	8.6%	31.7%	66.6%
Asian, non-Hispanic	6.6%	29.5%	68.6%
White, non-Hispanic	6.1%	32.5%	76.5%

* cdphe.colorado.gov/center-for-health-and-environmental-data/survey-research/healthy-kids-colorado-survey-data

** Complete indicator reads: "feeling so sad or hopeless they stopped doing usual activities almost every day for 2+ consecutive weeks."

Nationally: Racial disparities within mental health are well-documented and show a significant and lasting impact on a variety of health outcomes, including national suicide-related indicators, such as suicidal despair, suicide attempts, and suicide deaths. For

¹ Goldston, D. B., Molock, S. D., Whitbeck, L. B., Murakami, J. L., Zayas, L. H., & Hall, G. C. (2008). Cultural considerations in adolescent suicide prevention and psychosocial treatment. *The American Psychologist*, 63(1), 14-31. doi.org/10.1037/0003-066X.63.1.14

² The Healthy Kids Colorado Survey (HKCS) is an essential tool that state and local communities use to better understand the health and choices of middle and high school students. The HKCS collects anonymous, self-reported information from Colorado middle and high school students every other year. The HKCS is separated into two similar yet separate survey instruments, one administered to grades 6-8 (referred to as the middle school survey) and one administered to grades 9-12 (the high school survey).

example, Black youth suicide fatalities rose from 2.55 per 100,000 in 2007 to 4.82 per 100,000 in 2017, and Black males between the ages of 5 and 11 years are more likely to die by suicide compared to white peers.³ Suicide death rates for Black youth (ages 5-11 years) have been increasing faster than any other racial group. Hispanic youth (ages 10 to 14) have higher rates of suicidal ideation compared to their white peers,⁴ and Hispanic teenagers make up the highest rates of suicide attempts compared to any other youth group.⁵ Among American Indian and Alaska Native (AI and AN) communities, suicide rates are highest among youth and young adults, ages 15-34. In 2019, the suicide rate among AI and AN youth (ages 10 to 24) was 2.5 times higher than the national average.⁶ Asian-American college students were more likely than white American students to have had suicidal thoughts and have attempted suicide.⁷

These health disparities reflect systems of discrimination, historical trauma, trauma as the result of oppression and poverty, and institutionalized racism. It is necessary to have culturally-informed support and programs to address racial disparities in order to prevent suicidal despair, attempts, and deaths by suicide among Black, Indigenous, and Youth of Color.⁸

The Youth-Specific Initiatives Work Group of the Suicide Prevention Commission puts forth the following comprehensive recommendations to support Black, Indigenous, and Youth of Color (ages 0-24) in Colorado.

- These recommendations apply to individuals working and volunteering at youth-serving organizations, such as schools, after-school programs, workforce development centers, faith-based organizations, parks and recreation departments, behavioral health providers, recreation centers, libraries, human services, juvenile justice and child welfare systems, first responders, and more. These recommendations are intended to support *all* Black, Indigenous, and Youth of Color, as well as immigrant families. We encourage communities to address your unique needs based on data, lived experience, and community leadership.
- These research-based recommendations align with: the Congressional Report, [Ring the Alarm: the Crisis of Black Youth Suicide in America](#); the JAMA study, "[Trends in Suicide Among Youth aged 10-19 years in the United States, 1975 to 2016](#)", and with the lived experience and expertise of Black, Indigenous, and People of Color in Colorado who contributed to and informed these recommendations.

³ Watson Coleman B. (2019). Ring the Alarm: The Crisis of Black Youth Suicide in America. *Congressional Black Caucus Emergency TaskForce on Black Youth Suicide and Mental Health*. watsoncoleman.house.gov/uploadedfiles/full_taskforce_report.pdf

⁴ Silva C, Van Orden KA. (2018). Suicide among Hispanics in the United States. *Current Opinion in Psychology*, 22, 44-49. doi:10.1016/j.copsyc.2017.07.013

⁵ Zayas, L. H., & Pilat, A. M. (2008). Suicidal behavior in Latinas: explanatory cultural factors and implications for intervention. *Suicide & Life-Threatening Behavior*, 38(3), 334-342. doi.org/10.1521/suli.2008.38.3.334

⁶ Nicoa, & Says, N. (2019, September 09). American Indian Suicide Rate Increases. Retrieved January 04, 2021, from www.nicoa.org/national-american-indian-and-alaska-native-hope-for-life-day

⁷ Kisch, J., Leino, E. V., & Silverman, M. M. (2005). Aspects of suicidal behavior, depression and treatment in college students: Results from the spring 2000 National College Health Assessment Survey. *Suicide and Life-Threatening Behavior*, 35, 3-13.

⁸ Gee, G. C., & Ford, C. L. (2011). Structural racism and health inequities: Old issues, new directions. *Du Bois Review: Social Science Research on Race*, 8(1), 115-132. doi.org/10.1017/S1742058X11000130

Recommendation: Create supportive⁹, inclusive, and safe communities, especially for Black, Indigenous, and Youth of Color.

Sub-recommendations and strategies to support overarching recommendation:

- 1. Encourage adults, students, and community members to participate in educational opportunities around equity and anti-racism that inform systemic practices, curriculum development, school policies, and interpersonal interactions.**

Research shows that anti-racism and social justice training help rectify interpersonal and societal inequities within schools and mental health systems.¹⁰ Educational opportunities regarding inequities can help adults understand disparities regarding suicide-related indicators that Black, Indigenous, and Youth of Color experience.

- 2. Support workforce development to ensure that school-based workforces (including staff, teachers, mental health professionals, administrators, and other potential trusted adults) reflect the populations that they are serving.**

90% of US public school teachers are white, middle-class, and native English speakers.¹¹ 87% of Colorado teachers are white and 70% of school districts do not have any Black teachers.¹² About 40% of Colorado students identify as Black or Hispanic. Research has shown that many white educators are underprepared to meet the needs of an increasingly diverse youth population.

- 3. Encourage schools to facilitate data collection through state-wide resources and instruments, such as the [Healthy Kids Colorado Survey](#) and Smart Source, to inform systematic change.**

The Healthy Kids Colorado Survey (HKCS) and Colorado Healthy Schools Smart Source (Smart Source) are Colorado's only comprehensive surveys on the health and well-being of young people and school health policies and practices that support youth health. Statewide, regional and local results are widely used by public, private, and community organizations to better understand the youth they serve and support youth in making healthy choices. In 2019, over 100,000 youth took HKCS in 503 schools across Colorado and 695 schools participated in Smart Source. Increasing participation and trust in both surveys can help communities identify prevention priorities.

- 4. Support restorative justice and transformative justice practices and responses to youth substance use, misconduct, and behavioral health situations.¹³ Restorative responses should include educational workshops or resources highlighting information, alternative**

⁹ Support, in this context, is defined as: advocating, promoting, funding, and coordinating to accomplish recommendation.

¹⁰ Jones, S. (2020, September 22). Reducing Racism in Schools: The Promise of Anti-Racist Policies. Retrieved January 05, 2021, from education.uconn.edu/2020/09/22/reducing-racism-in-schools-the-promise-of-anti-racist-policies

¹¹ Meckler, L., & Rabinowitz, K. (2019, December 27). America's schools are more diverse than ever, yet teachers are still mostly white. Retrieved January 04, 2021, from www.washingtonpost.com/graphics/2019/local/education/teacher-diversity/

¹² Breunlin, E. (2020, January 30). Most Colorado public school teachers are white, but almost half of their students are not. Can the state close the gap? Retrieved February 22, 2021, from coloradosun.com/2020/01/30/colorado-lawmakers-want-to-increase-teacher-diversity/

¹³ Restorative justice (in schools and in the juvenile justice system) is an inclusive victim- and community-led process intended to restore relationships that have been harmed. Transformative justice is a framework and approach of harm reduction in violence prevention and response methods to avoid state, criminal, or legal systems, and to promote community/social interventions that prevent harm from occurring. Restorative practices can include self and community methods to promote self-care, self-compassion, resilience, joy, etc.

responses, and support for youth, parents/guardians, teachers, staff, administrators, and school resource officers (if applicable)/local law enforcement.

School administrators are more likely to see Black students as problematic, and they are more likely to punish Black students compared to their white peers.¹⁴ Discriminatory practices or unconscious biases from school administrators have lasting effects on students.¹⁵ According to *Ring the Alarm* (2019),¹⁶ Black youth may express symptoms of depression (such as through behavioral and conduct behaviors) differently than do white youth. Black youth are more likely to be pushed into the juvenile justice system, where there is even less adequate treatment available for mental and behavioral concerns. Research shows that restorative justice reduces post-traumatic symptoms compared to customary justice procedures.¹⁷

Alternatives to policing and incarceration can support mental health and prevent suicidal despair; for example, certain discriminatory events, such as police abuse or being discouraged from education independently increased the odds of someone reporting lifetime suicidal thoughts and behaviors.^{18,19} Additionally, police stops are related to a higher number of symptoms of depression among both white and Black young adults, even after controlling for prior depression; among white young adults, the association was fully explained by self-reported criminal behavior, whereas, for Black young adults, the association persisted after controlling for criminal behavior and justice contact.²⁰

Restorative practices are on the rise.²¹ House Bill 12-1345, enacted in Colorado schools in 2012, required school districts to remove zero-tolerance school discipline policies and encourage the use of restorative justice practices instead and implement training and education in restorative practices.²²

5. Increase collaboration between youth-serving organizations throughout the community with intentional support for Black, Indigenous, and Youth of Color who identify as LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning).

LGBTQ+ youth populations of any race and ethnicity are likely to report higher rates of poor mental health than their cisgender, heterosexual peers.²³ LGBTQ+ African American populations are more likely to face discrimination and victimization compared to any other group in the United States.²⁴ According to a study by Mueller et al as cited in *Ring the Alarm* (2019), white and Latinx LGB youth are significantly more likely to be bullied than their white heterosexual peers. Additionally, Black LGB youth are more likely to report suicidal thoughts than their white heterosexual peers.

¹⁴ Riddle, T., & Sinclair, S. (2019). Racial disparities in school-based disciplinary actions are associated with county-level rates of racial bias. *Proceedings of the National Academy of Sciences*, 116(17), 8255-8260. doi:10.1073/pnas.1808307116

¹⁵ Watson Coleman B. (2019). Ring the Alarm: The Crisis of Black Youth Suicide in America. *Congressional Black Caucus Emergency TaskForce on Black Youth Suicide and Mental Health*. watsoncoleman.house.gov/uploadedfiles/full_taskforce_report.pdf

¹⁶ i.b.i.d.

¹⁷ Lloyd, A., & Borrill, J. (2019). Examining the Effectiveness of Restorative Justice in Reducing Victims' Post-Traumatic Stress. *Psychological Injury and Law*, 13(1), 77-89. doi:10.1007/s12207-019-09363-9

¹⁸ Oh, et.al. (2020). Major Discriminatory Events and Suicidal Thoughts and Behaviors Amongst Black Americans: Findings from the National Survey of American Life. *Journal of Affective Disorders*. 263. 47-53. doi.org/10.1016/j.jad.2019.11.128

¹⁹ See also DeVlyder et.al. (2018). Association of Exposure to Police Violence with Prevalence of Mental Health Symptoms Among Urban Residents in the United States. *JAMA network open*. doi:10.1001/jamanetworkopen.2018.4945

²⁰ Baćak, V., & Nowotny, K. M. (2020). Race and the Association Between Police Stops and Depression Among Young Adults: A Research Note. *Race and Justice*, 10(3), 363-375. doi.org/10.1177/2153368718799813

²¹ Restorative practices in schools. (n.d.). Retrieved February 19, 2021, from www.rjcolorado.org/restorative-justice/restorative-practices-in-schools

²² Colorado school Safety Resource CENTER Restorative ... (n.d.). Retrieved February 19, 2021, from cdpsdocs.state.co.us/safeschools/CSSRC%20Documents/CSSRC-Restorative-Practices-Guide%20mlr6.2.2020.pdf

²³ i.b.i.d.

²⁴ All Black Lives Matter: Mental Health of Black LGBTQ Youth. (2020, October 05). Retrieved January 12, 2021, from www.thetrevorproject.org/2020/10/06/all-black-lives-matter-mental-health-of-black-lgbtq-youth/

6. Encourage community organizations to intentionally seek out input, participation, and leadership from Black, Indigenous, and People of Color by building authentic relationships to promote partnership and to strive to strengthen diversity, equity, and inclusion.

Encouraging children and teens to seek social support from peers, family members, and community leaders can promote emotional well-being and help to reduce the negative health impacts of race-related stress.²⁵ Studies show that a strong social network can help reduce stress, isolation and loneliness.²⁶ Recent research has also shown that high-achieving university students attribute their success to having a support system made up of same-race peers and same-race leadership.²⁷ These same-race support systems understand racial oppression and tend to not carry internalized racism towards each other.

7. Support the expansion of peer support and peer-led services to help establish positive peer associations that can foster a sense of acceptance and belonging.

Research shows that peer support interventions are positive youth development tools.²⁸ Peer support intervention also helps establish positive peer association.

8. Encourage organizations to raise awareness of suicide prevention and provide community education around mental health through culturally appropriate methods that are based on a community perspective.

Many current mental health systems are based on Western cultural traditions and Western understandings of the human condition, so cultural practices are often missed.²⁹ Community-based ethno-cultural services are a positive resource in the community and can help improve culturally appropriate practices for mental health services.³⁰

9. Support workforce development to ensure that professionals providing mental and behavioral health services in Colorado reflect the populations they serve.

Mistrust is common in mental and behavioral health systems because Black, Indigenous, and Youth of Color are more likely to receive misdiagnoses and treatments that do not reflect their needs.³¹ Very often health care providers unfamiliar to their patient's lived experience ignore their symptoms. Mental and behavioral health providers tend to be primarily white; however, these white providers often serve a diverse population. Health systems that welcome cultural competence education and diverse hiring practices help reduce behavioral health disparities.³²

²⁵ Britt Evans, P. (2020, September 19). The Other Pandemic: Unpacking the Mental and Physical Health Consequences of Racism. Retrieved December 17, 2020, from www.chicago-psychotherapy.com/cp-blog/2020/9/19/racism-is-a-pandemic

²⁶ Your crew matters: How to build social support. (2020, August 29). Retrieved January 04, 2021, from www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/social-support/art-20044445

²⁷ Harper, S. (2006). Peer Support for African American Male College Achievement: Beyond Internalized Racism and the Burden of "Acting White." *The Journal of Men's Studies*, 14(3), 337-358. doi:10.3149/jms.1403.337

²⁸ Quimby, D., Richards, M., Santiago, C. D., Scott, D., & Puvar, D. (2018). Positive peer association among Black American youth and the roles of ethnic identity and gender. *Journal of Research on Adolescence: The Official Journal of the Society for Research on Adolescence*, 28(3), 711-730. doi.org/10.1111/jora.12363

²⁹ Gopalkrishnan N. (2018). Cultural diversity and mental health: Considerations for policy and practice. *Frontiers in Public Health*, 6, 179. doi.org/10.3389/fpubh.2018.00179n

³⁰ See also Molock et. al. (2007) for further justification for the need for culturally-driven suicide prevention programming: "[T]eens in our study...felt uncomfortable with their ability to recognize common sings... They also considered suicidal behaviors to be aberrant in the African American community, in spite of their exposure." Molock, S. D., Barksdale, C., Matlin, S., Puri, R., Cammack, N., & Spann, M. (2007). Qualitative study of suicidality and help-seeking behaviors in African American adolescents. *American journal of community psychology*, 40(1-2), 52-63. doi.org/10.1007/s10464-007-9122-3

³¹ Watson Coleman B. (2019). Ring the Alarm: The Crisis of Black Youth Suicide in America. *Congressional Black Caucus Emergency TaskForce on Black Youth Suicide and Mental Health*. watsoncoleman.house.gov/uploadedfiles/full_taskforce_report.pdf

³² McGregor, B., Belton, A., Henry, T. L., Wrenn, G., & Holden, K. B. (2019). Improving behavioral health equity through cultural competence training of health care providers. *Ethnicity & Disease*, 29(Suppl 2), 359-364. doi.org/10.18865/ed.29.S2.359