



**Tennessee Suicide  
Prevention Network**

*"Saving Lives in Tennessee"*

## Suicide and Hispanics

- Between 1999 and 2004 there were 40 reported suicides among Hispanics in Tennessee, at a rate of 4.8 per 100,000, slightly lower than the national Hispanic rate of 5.09 per 100,000, which itself is roughly half of the overall U.S rate of 10.75 per 100,000.
- During this period, suicide was the eighth-leading cause of death among Hispanics in the state (as compared to the eleventh-leading cause nationally) and the third-leading cause of death within the 10-24 age group (same as the national ranking).
- Firearms were the most common means of death employed by Hispanic suicide victims in Tennessee, used in 65% of the deaths. Nationally, firearms are a factor in only 43.1% of Hispanic suicide deaths.
- The highest rate occurs among males over the age of 85, at 30.7 per 100,000.
- Hispanic suicide victims in the United States are five-and-a-half times more likely to be male than female.
- Numerous studies suggest that Hispanic children and adolescents experience more mental health problems than non-Hispanic Caucasian youth. This finding is supported by the 2005 Youth Risk Behavior Survey, which suggests young Hispanics are at greater suicide risk than their non-Hispanic counterparts. They are 6% more likely to have seriously considered attempting a suicide attempt within a 12-month period, 11.5% more likely to have made a suicide plan, and 34.5% more likely to have made a suicide attempt.
- Additionally, the Tennessee Department of Education's 2007 Tennessee Youth Risk Behavior Survey (YRBS), found that the rates of suicidal ideation and attempts among Hispanic high-school age children were far above the general population. Nearly twice as many Hispanic respondents reported feeling a period of sadness or hopelessness for two weeks or more severe enough to pull them away from their usual activities during a twelve-month period, compared with Tennessee youth overall (43.9% vs. 26.8%). They were twice as likely to consider suicide as a legitimate solution to their problems (27.4% vs. 14.1%) and develop a suicide plan (21.3% vs. 10.2%), three times more likely to attempt suicide (24% vs. 7.4%), and nearly five times more likely to require medical attention for a suicide attempt (10% versus 2.2%).
- A 2001 Surgeon General's report observed that few than 1 in 5 individuals of Hispanic origin informs a general health care provider. Less than 1 in 11 contacts a mental health professional.
- Population studies have found that American-born Hispanics have higher rates of mental illness than immigrants of Hispanic origin. However, recent immigrants may be at increased risk for depression and suicidal ideation due to cultural adaptation stresses.
- Certain aspects of Hispanic cultures may serve as protective factors against suicide and suicide attempts. These include social support provided by an extended family unit, religious prohibitions against suicide, and a fatalistic life orientation that may condition people to accept and adapt to adverse events. However, these factors may also dissuade troubled individuals and their loved ones from seeking needed interventions and compromise community mental health outreach efforts.

Sources: Tennessee Department of Health, US Department of Health and Human Services, *Cultural Diversity and Ethnic Minority Psychology, Aggression and Violent Behavior*.

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