

Pandemic Unveils Growing Suicide Crisis for Communities of Color

Although the suicide rate is highest among middle-aged white men, young people of color are emerging as particularly at risk.

August 30, 2021 By Aneri Pattani and Kaiser Health News

If you or someone you know is in crisis, call the [National Suicide Prevention Lifeline](#) at 1-800-273-8255 or text HOME to the Crisis Text Line at 741741.

Rafiah Maxie has been a licensed clinical social worker in the Chicago area for a decade. Throughout that time, she'd viewed suicide as a problem most prevalent among middle-aged white men.

Until May 27, 2020.

That day, Maxie's 19-year-old son, Jamal Clay — who loved playing the trumpet and participating in theater, who would help her unload groceries from the car and raise funds for the March of the Dimes — killed himself in their garage.

"Now I cannot blink without seeing my son hanging," said Maxie, who is Black.

Clay's death, along with the suicides of more than 100 other Black residents in Illinois last year, has led locals to [call for new prevention efforts](#) focused on Black communities. In 2020, during the pandemic's first year, suicides among white residents decreased compared with previous years, while they increased among Black residents, according to state data.

But this is not a local problem. Nor is it limited to the pandemic.

Interviews with a dozen suicide researchers, data collected from states across the country and a review of decades of research revealed that suicide is a growing crisis for communities of color — one that plagued them well before the pandemic and has only been exacerbated since.

[Overall suicide rates in the U.S. decreased](#) in 2019 and 2020. National and local studies attribute the trend to a [drop among white Americans](#), who make up the majority of suicide deaths. Meanwhile, rates for Black, Hispanic and Asian Americans — though lower than their white peers — continued to climb in many states. (Suicide rates have been consistently high for Native

Americans.)

“COVID created more transparency regarding what we already knew was happening,” said [Sonyia Richardson](#), a licensed clinical social worker who focuses on serving people of color and an assistant professor at the University of North Carolina-Charlotte, where she researches suicide. When you put the suicide rates of all communities in one bucket, “that bucket says it’s getting better and what we’re doing is working,” she said. “But that’s not the case for communities of color.”

Losing Generations

Although the suicide rate is [highest among middle-aged white men](#), young people of color are emerging as particularly at risk.

Research shows Black kids younger than 13 die by suicide at nearly [twice the rate of white kids](#) and, over time, their suicide rates have grown even as rates have decreased for white children. Among teenagers and young adults, suicide deaths have [increased more than 45%](#) for Black Americans and about 40% for Asian Americans in the seven years ending in 2019. Other concerning [trends in suicide attempts](#) date to the '90s.

“We’re losing generations,” said [Sean Joe](#), a national expert on Black suicide and a professor at Washington University in St. Louis. “We have to pay attention now because if you’re out of the first decade of life and think life is not worth pursuing, that’s a signal to say something is going really wrong.”

These statistics also refute traditional ideas that suicide doesn’t happen in certain ethnic or minority populations because they’re “protected” and “resilient” or the “model minority,” said [Kiara Alvarez](#), a researcher and psychologist at Massachusetts General Hospital who focuses on suicide among Hispanic and immigrant populations.

Although these groups may have had low suicide rates historically, that’s changing, she said.

Paul Chin lost his 17-year-old brother, Chris, to suicide in 2009. A poem Chris wrote in high school about his heritage has left Chin, eight years his senior, wondering if his brother struggled to feel accepted in the U.S., despite being born and raised in New York.

Growing up, Asian Americans weren’t represented in lessons at school or in pop culture, said Chin, now 37. Even in clinical research on suicide as well as other health topics, kids like Chris are underrepresented, with [less than 1%](#) of federal research funding focused on Asian Americans.

It wasn’t until the pandemic, and the concurrent [rise in hate crimes against Asian Americans](#), that Chin saw national attention on the community’s mental health. He hopes the interest is not short-lived.

Suicide is [the leading cause of death](#) for Asian Americans ages 15 to 24, yet “that doesn’t get

enough attention,” Chin said. “It’s important to continue to share these stories.”

Kathy Williams, who is Black, has been on a similar mission since her 15-year-old son, Torian Graves, died by suicide in 1996. People didn’t talk about suicide in the Black community then, she said. So she started raising the topic at her church in Durham, North Carolina, and in local schools. She wanted Black families to know the warning signs and society at large to recognize the seriousness of the problem.

The pandemic may have highlighted this, Williams said, but “it has always happened. Always.”

Pandemic Sheds Light on the Triggers

Pinpointing the root causes of rising suicide within communities of color has proven difficult. How much stems from mental illness? How much from socioeconomic changes like job losses or social isolation? Now, COVID may offer some clues.

Recent decades have been marked by growing economic instability, a widening racial wealth gap and more public attention on police killings of unarmed Black and brown people, said [Michael Lindsey](#), executive director of the New York University McSilver Institute for Poverty Policy and Research.

With social media, youths face racism on more fronts than their parents did, said [Leslie Adams](#), an assistant professor in the department of mental health at Johns Hopkins Bloomberg School of Public Health.

Each of these factors has been shown to affect suicide risk. For example, experiencing racism and sexism together is linked to a threefold increase in suicidal thoughts for Asian American women, said [Brian Keum](#), an assistant professor at UCLA, based on preliminary research findings.

COVID intensified these hardships among communities of color, with disproportionate numbers of [lost loved ones](#), [lost jobs and lost housing](#). The murder of George Floyd prompted widespread racial unrest, and Asian Americans saw an increase in hate crimes.

At the same time, studies in [Connecticut](#) and [Maryland](#) found that suicide rates rose within these populations and dropped for their white counterparts.

“It’s not just a problem within the person, but societal issues that need to be addressed,” said Shari Jager-Hyman, an assistant professor of psychiatry at the University of Pennsylvania’s school of medicine.

Lessons From Texas

In Texas, covid [hit Hispanics especially hard](#). As of July 2021, they accounted for [45% of all COVID deaths](#) and disproportionately lost jobs. Individuals living in the U.S. without authorization were generally not eligible for [unemployment benefits](#) or [federal stimulus checks](#).

During this time, suicide deaths among Hispanic Texans climbed from 847 deaths in 2019 to 962 deaths in 2020, according to preliminary state data. Suicide deaths rose for Black Texans and residents classified as “other” races or ethnicities, but decreased for white Texans.

The numbers didn’t surprise Marc Mendiola. The 20-year-old grew up in a majority-Hispanic community on the south side of San Antonio. Even before the pandemic, he often heard classmates say they were suicidal. Many faced dire finances at home, sometimes living without electricity, food or water. Those who sought mental health treatment often found services prohibitively expensive or inaccessible because they weren’t offered in Spanish.

“These are conditions the community has always been in,” Mendiola said. “But with the pandemic, it’s even worse.”

Four years ago, Mendiola and his classmates at South San High School began advocating for mental health services. In late 2019, just months before covid struck, their vision became reality. Six community agencies [partnered to offer free services](#) to students and their families across three school districts.

[Richard Davidson](#), chief operating officer of Family Service, one of the groups in the collaborative, said the number of students discussing economic stressors has been on the rise since April 2020. More than 90% of the students who received services in the first half of 2021 were Hispanic, and nearly 10% reported thoughts of suicide or self-harm, program data shows. None died by suicide.

Many students are so worried about what’s for dinner the next day that they’re not able to see a future beyond that, Davidson said. That’s when suicide can feel like a viable option.

“One of the things we do is help them see ... that despite this situation now, you can create a vision for your future,” Davidson said.

A Good Future

Researchers say the promise of a good future is often overlooked in suicide prevention, perhaps because achieving it is so challenging. It requires economic and social growth and breaking systemic barriers.

Tevis Simon works to address all those fronts. As a child in West Baltimore, Simon, who is Black, faced poverty and trauma. As an adult, she attempted suicide three times. But now she shares her story with youths across the city to inspire them to overcome challenges. She also talks to politicians, law enforcement agencies and public policy officials about their responsibilities.

“We can’t not talk about race,” said Simon, 43. “We can’t not talk about systematic oppression. We cannot not talk about these conditions that affect our mental well-being and our feeling and desire to live.”

For Jamal Clay in Illinois, the systemic barriers started early. Before his suicide last year, he had

tried to harm himself when he was 12 and the victim of bullies. At that time, he was hospitalized for a few days and told to follow up with outpatient therapy, said his mother, Maxie.

But it was difficult to find therapists who accepted Medicaid, she said. When Maxie finally found one, there was a 60-day wait. Other therapists canceled appointments, she said.

“So we worked on our own,” Maxie said, relying on church and community. Her son seemed to improve. “We thought we closed that chapter in our lives.”

But when the pandemic hit, everything got worse, she said. Clay came home from college and worked at an Amazon warehouse. On drives to and from work, he was frequently pulled over by police. He stopped wearing hats so officers would consider him less intimidating, Maxie said.

“He felt uncomfortable being out in the street,” she said.

Maxie is still trying to make sense of what happened the day Clay died. But she’s found meaning in starting a nonprofit called [Soul Survivors of Chicago](#). Through the organization, she provides education, scholarships and shoes — including Jamal’s old ones — to those impacted by violence, suicide and trauma.

“My son won’t be able to have a first interview in [those] shoes. He won’t be able to have a nice jump shot or go to church or even meet his wife,” Maxie said.

But she hopes his shoes will carry someone else to a good future.

[This article](#) was published by Kaiser Health News on August 23, 2021. It is republished with permission.

KHN senior correspondent JoNel Aleccia contributed to this report.

This story is a collaboration between KHN and “Science Friday.” Listen to the conversation between KHN national correspondent Aneri Pattani and John Dankosky, Science Friday’s director of news and radio projects. [Click link above for audio.]

[KHN editor’s note: For the purposes of this story, “people of color” or “communities of color” refers to any racial or ethnic populations whose members do not identify as white, including those who are multiracial. Hispanics can be of any race or combination of races.]