New York Must Establish a Black Youth Suicide Prevention Task Force

WHAT’S AT STAKE

COVID-19 has upended the lives of New York’s children and families, causing unprecedented loss of life alongside destabilizing unemployment, food insecurity and loss of health insurance – traumas disparately shouldered by communities of color. Young New Yorkers have had their routines drastically shift amidst repeated transitions to remote schooling and loss of in-person supports and socialization opportunities. The past year’s public reckoning with systemic racism and deep-rooted inequities has only compounded these traumas.

Given that suicide was the second leading cause of death among New York youth ages 15 to 19 and the third leading cause of death among children ages 5 to 14 pre-pandemic 1, it is imperative the State increase investments in youth suicide prevention – particularly for Black youth, who are at heightened suicide risk. Events like that occurring earlier this year in Rochester – in which a nine-year-old Black girl was pepper-sprayed by police while suffering a mental health crisis – only make more urgent the need for a system-wide response that includes creating a Black Youth Suicide Prevention Task Force.

BLACK YOUTH SUICIDE IN NEW YORK: TROUBLING TRENDS

Black youth are classified as a high-risk suicide population in New York, 2 a characterization supported by New York data from the Centers for Disease Control and Prevention’s biennial Youth Risk Behavior Survey (YRBS) – particularly when stratifying metrics by race and ethnicity. A higher percentage of New York’s Black high school YRBS respondents reported feeling sad or hopeless almost every day for two or more consecutive weeks than white respondents for all but two survey years between 1999 and 2019, with approximately 34.1 percent of Black high school respondents to the 2019 YRBS reporting feeling sad or hopeless 3 (FIGURE 1).

From 1997 to 2019, the percentage of New York’s Black high school YRBS respondents reporting attempting suicide at least once within the prior year increased by 8.8 percent, while the percentage of white respondents reporting a suicide attempt decreased by 16.4 percent. This disparity reflects a trend demonstrated by every YRBS since 2003, in which Black youth’s rate of self-reported suicide attempt is between 0.2 and 5.6 percentage points higher than that of white youth.

New York’s Black high school YRBS respondents are also the only racial or ethnic group whose rate of self-reported injurious suicide attempt requiring medical attention increased from 2017 to 2019, with the 2019 percentage of Black high school respondents reporting an injurious suicide attempt equivalent to the combined percentage of White and Asian youth reporting the same (FIGURE 2).

Rather than being an anomaly, New York’s data reflects stark national trends. Nationwide, the suicide death rate among Black youth is increasing faster than that of any other racial or ethnic group, with self-reported Black adolescent suicide attempts rising by 73 percent between 1991 and 2017 and injury by suicide attempt growing by 122 percent for Black adolescent boys during this time period.  

**FIGURE 2.** Share of New York High School Students Reporting an Injurious Suicide Attempt in 2019, By Select Racial or Ethnic Group

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>4.2%</td>
</tr>
<tr>
<td>Black</td>
<td>3.8%</td>
</tr>
<tr>
<td>White</td>
<td>2.0%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.8%</td>
</tr>
<tr>
<td>Multiple Race</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

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**NEW YORK’S PATH FORWARD: ESTABLISHING A BLACK YOUTH SUICIDE PREVENTION TASK FORCE**

New York must bolster mental health supports and increase investments in suicide prevention resources for Black youth. The Children’s Defense Fund – New York (CDF-NY) urges the Legislature to pass S.3408 (Brouk) / A.1716 (Jean-Pierre), which would establish a Black Youth Suicide Prevention Task Force in New York to examine mental health practices and improve suicide prevention resources for Black youth ages 5 through 18. Establishing this Task Force would also enable New York to make additional progress towards meeting its Prevention Agenda Objectives of decreasing the percentage of adolescents in Grades 9 to 12 who felt sad or hopeless for two or more weeks in a row in the past year by 25 percent to 21.5 percent and decreasing the suicide mortality rate for youth ages 15 to 19 years by 6 percent to 4.7 per 100,000. The precarity of Black children’s lives, the disparate impact of the pandemic in their

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communities and the digital divide disproportionately impacting New Yorkers of color 7 – and making it harder for vulnerable youth to access mental health services via telehealth – only heightens the urgency of this crisis. New York must act now. The stakes could not be higher.

CONTACTS: Ben Anderson | banderson@childrensdefense.org or Melissa Genadri | mgenadri@childrensdefense.org