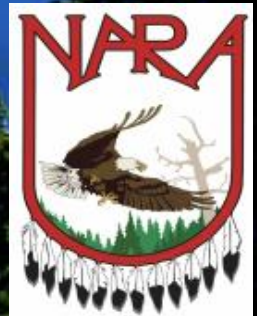


# Native Youth Suicide Prevention Program Enhanced Evaluation

## *The Power of Protection*

AAS Annual Meeting  
San Francisco, CA  
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# Native Youth Suicide Prevention Program

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# Native Youth Suicide Prevention Program



**Grantee:** Native American Rehabilitation Association of the Northwest

**Serving:** 9 Tribal communities, PSU & Portland Area AI/AN community

**Program:** Based upon traditional, spiritual and cultural beliefs, and integrated with best practices

- Emphasis on training, building community infrastructure and protocols, youth identification and intervention

**Funding:** Received another 3 years GLSMA (Oct 2008-Sept 2011)











# NYSP-Enhanced Evaluation



## Purpose:

-  Assess impact of GLSMA tribal activities at community level
-  Look at relationship between risk and protective factors and suicidal behaviors

## Methods:

-  Archival data (statewide school survey - OHT)
-  Oregon Native Youth Survey (Tribal communities)
-  Focus Groups (youth)





# The Epidemiology of AI/AN Youth Suicidality



- ☉ Suicide is the second leading cause of death for AI/AN youth aged 10-24
- ☉ Between 1999-2005, suicide rates for AI/AN youth ranged from 14 to 20 per 100,000
  - White youth – 8 per 100,000
- ☉ One study found that 16% of AI/AN youth reported attempting suicide in the previous 12 months
  - 9% of youth from the general population





# Theoretical Approach

 CDC Strategic Direction: “Connectedness”

 “Transactional-ecological framework”

~Alacantra & Gone (2007)

- Complex interactions between people and their social ecology can help us understand suicidal behaviors
- Interactions at all levels: individual, peer, family, school, and especially community





# Research Questions

*(Each compares AI/AN and non-AI/AN youth)*

1. What are the risk and protective factors associated with suicide attempts?
2. How do cumulative risk and protective factors affect attempts?
3. Where does the cumulative risk and protective factor model fall short, (i.e., which youth does it correctly identify and which youth does it miss)?





# Methods



## Dataset: OHT data for 2006

- 503 AI/AN youth; 10,651 non-AI/AN youth

## Variables

- 132 out of 200 variables identified for initial consideration
- 62 variables with correlations having an absolute value of .15 or greater
- 29 variables included in final analysis – 24 risk factors & 5 protective factors







# Results





# What are the **risk** factors associated with suicide attempts?



<b>Native</b>	<b>Non-Native</b>
<b>Sad or hopeless (last 2 weeks)</b>	<b>Beck's Depression Index (6-item)</b>
<b>Have emotional condition (e.g., anxiety, depression)</b>	<b>Sad or hopeless (last 2 weeks)</b>
<b>Used inhalants (past 30 days)</b>	<b>Have emotional condition (e.g., anxiety, depression)</b>
<b>Beck's Depression Index (6-item)</b>	<b>Physically forced to have sex (ever)</b>





# What are the factors that **protect** youth against suicide attempts?



 Protective factors are the same for both AI/AN and non-AI/AN youth:

- Eats breakfast 5-7 days per week (2)
- Makes decisions with family (3)
- Good/excellent physical health (5)
- Confidence in being able to work out problems (1)
- Good grades - A's or B's (4)





# Do risk and protective factors work the same for AI/AN and non-AI/AN youth?

- ❁ Native youth average more risk factors than non-Native youth (6.4 vs. 4.7)
- ❁ There were no significant differences between Native and non-Native youth for average number of protective factors
- ❁ Being AI/AN did not lead to suicide attempts – *having high #s of risk factors did*







# What did we learn about risk factors and suicide attempts?



- Youth who attempted suicide had a significantly higher number of risk factors
  - Each additional risk factor is associated with a 25% increase in the odds of attempted suicide
- Girls have more risk factors than boys on average, and are more likely to attempt suicide
- Younger youth are more likely to report attempting





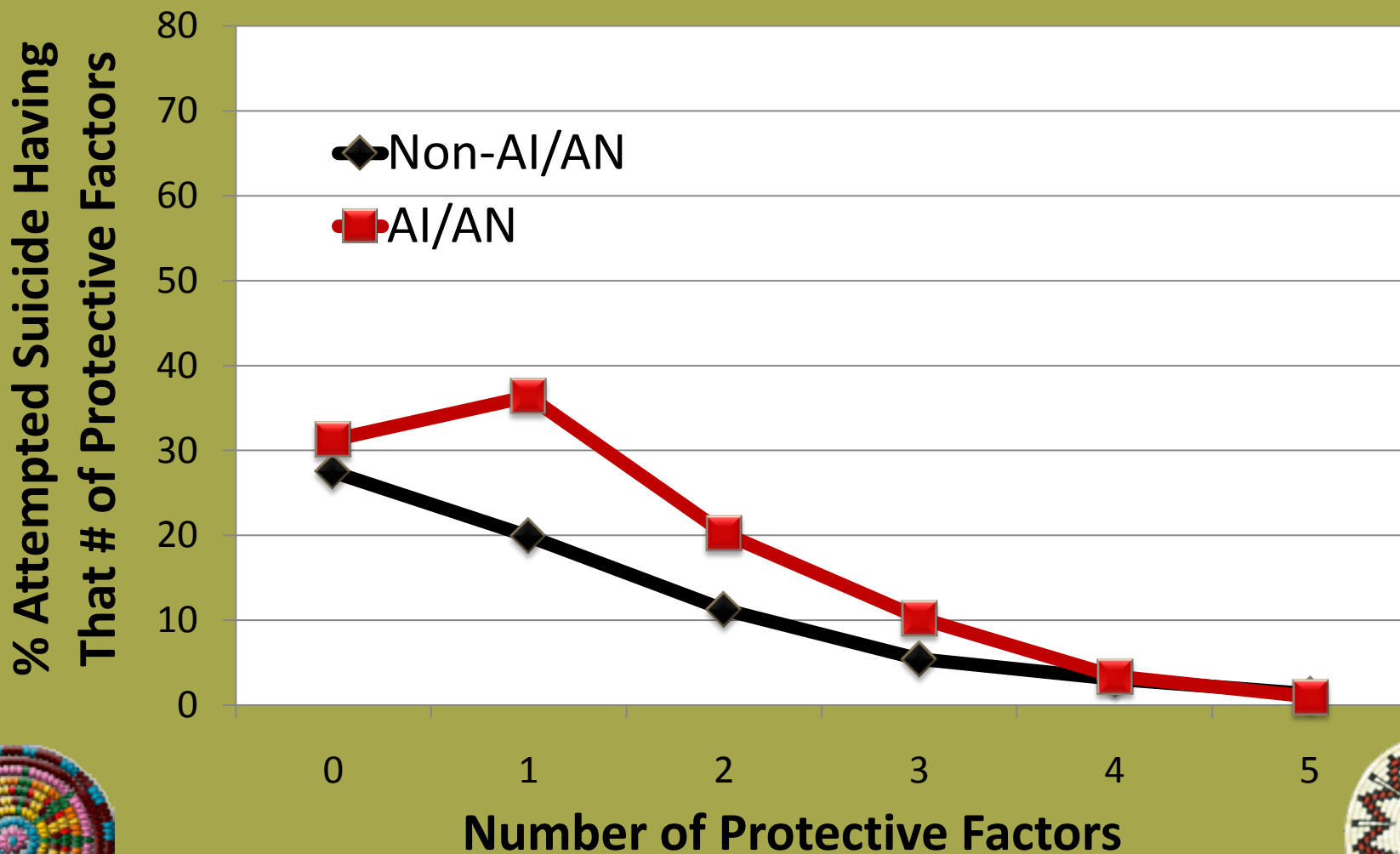
# What did we learn about protective factors & suicide attempts?

 Youth with more protective factors are less likely to attempt suicide.

- Each additional protective factor is associated with a 44% decrease in the odds that a youth will attempt suicide
- Youth with 4 or 5 protective factors are statistically at lower risk for suicide attempts

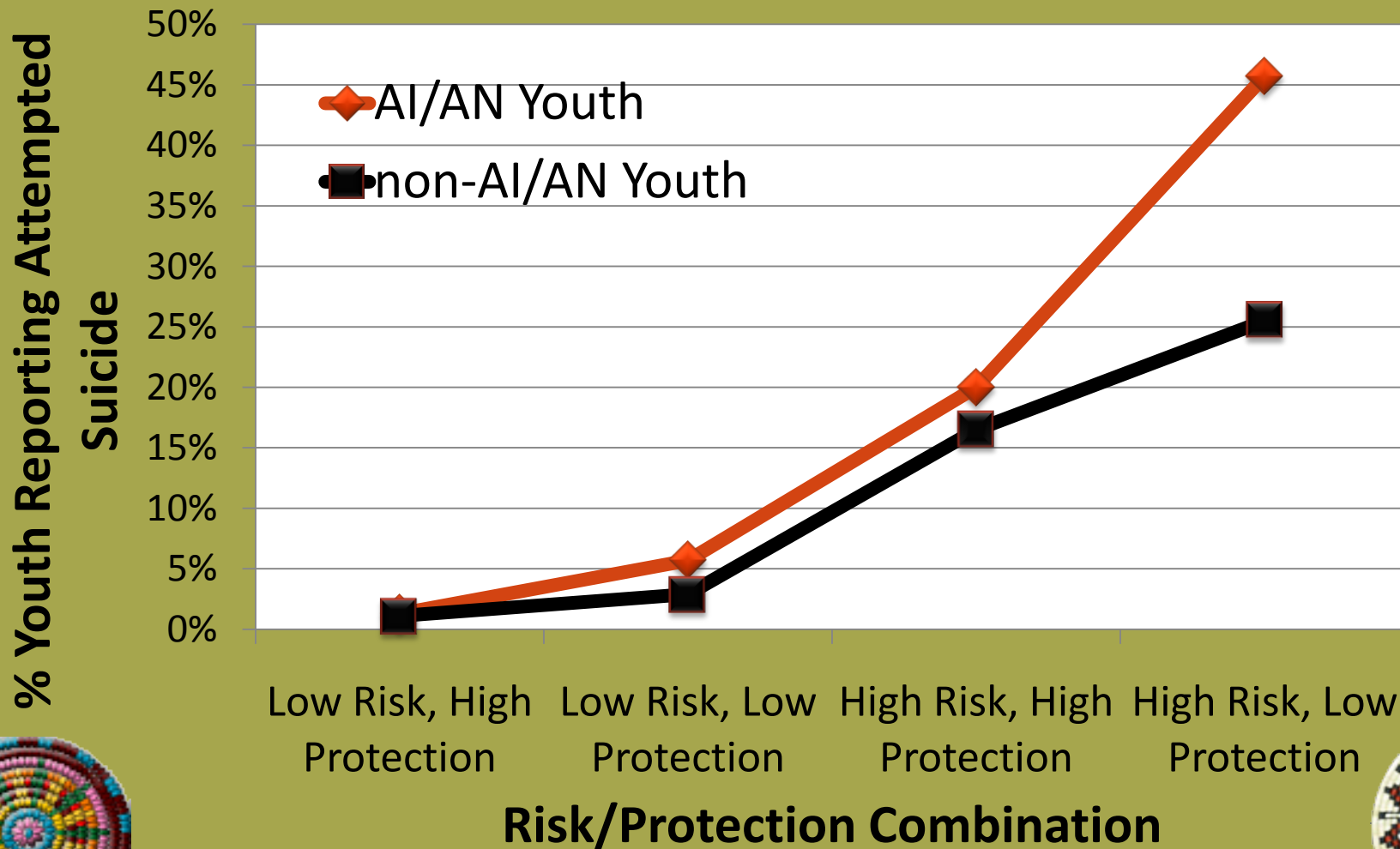


# Proportion of Youth with Reported Suicide Attempt according to Cumulative Number of Protective Factors





# Proportion of Youth with Reported Suicide Attempt for Risk and Protection Combination Groups







# Are there some youth who attempt suicide, but who appear low risk?



- ❁ 2% of youth with 8 or fewer risk factors still attempted suicide
- ❁ 2% of youth with 4 or 5 protective factors still attempted
- ❁ These “low risk” youth have 3 red flag areas:
  - Depression , OR
  - General poor emotional health, OR
  - Harassed in the past 30 days





# What do these findings mean for prevention staff and community members?

- ☼ Protective factors can dramatically reduce attempts, especially for youth with lots of risk factors
- ☼ Being AI/AN is not a risk for suicide attempt – being higher risk is
- ☼ Not all high risk youth attempt suicide
- ☼ Some low risk youth DO attempt (3 red flags)





# Questions?



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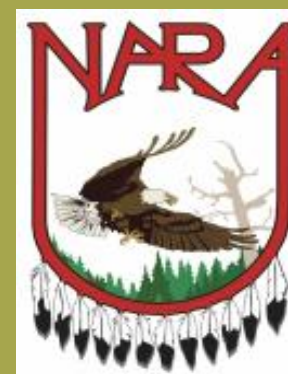
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improving programs*



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