

## Suicide trends in school-aged children reveal racial disparity

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Suicide is a leading cause of death among children younger than 12 years. Suicide rates in this age group have remained steady overall for the past 20 years, but a study published today in *JAMA Pediatrics* from The Research Institute at Nationwide Children's Hospital is the first national study to observe higher suicide rates among black children compared to white children.



"Little is known about the epidemiology of <u>suicide</u> in this age group," said Jeff Bridge, PhD, lead researcher of the study and principal investigator at the Center for Innovation in Pediatric Practice at The Research Institute at Nationwide Children's. "Prior research has typically excluded <u>children</u> younger than 10 years old and investigated trends only within specific older <u>age groups</u>."

The analysis in this report showed that suicide ranked 14th as a cause of death among 5- to 11-year old <u>black children</u> in 1993-1997 but rose to 9th in 2008-2012. For <u>white children</u>, suicide ranked 12th in 1993-1997 and 11th in 2008-2012. Rates have remained stable in Hispanic and non-Hispanic children.

The findings in this study highlight an emerging racial disparity in the epidemiology of childhood suicide, Dr. Bridge said. The reasons why this disparity exists are not well defined. Factors influencing black youth—including increased exposure to violence and traumatic stress; early onset of puberty; and lower likelihood to seek help for depression, suicidal thoughts and suicide attempts—may be contributing to the disparity, but the specific impact of each of these risks is unclear, according to the study.

"Parents and <u>health care providers</u> need to be aware that children under the age of 12 can and sometimes do think about suicide," Dr. Bridge said. "It is important to ask children directly about suicide if you are concerned about a child: 'Are you having thoughts about killing yourself?' Research has refuted the notion that asking children directly about suicide may trigger subsequent suicidal thinking or behavior. It does not hurt to ask."

Additionally, parents need to be aware of the warning signs of suicide, Dr. Bridge continued. "If their child is unhappy for an extended period, withdrawing from friends or school activities or increasingly irritable,



then parents should be concerned about those behaviors and consider taking the child to see a mental health professional."

Dr. Bridge, who is also associate professor of Pediatrics at The Ohio State University, points out that further studies are needed to monitor these emerging trends and identify risk, protective and predictive factors relevant to <u>suicide prevention</u> efforts in children younger than 12 years.

"We are currently working on a follow-up study to investigate precipitants of suicide that distinguish children under the age of 12 from early adolescents," said Dr. Bridge. "We may need to tailor suicide prevention interventions for younger children if we find that the factors contributing to child suicide are different than those associated with adolescent suicide."

**More information:** Bridge JA, Asti L, Horowitz LM, Greenhouse JB, Fontanella CA, Sheftall AH, Kelleher KJ, Campo JV. Suicide trends among elementary school-aged children in the United States, 1993-2012: Increasing incidence in black children. *JAMA Pediatrics*. 18 May 2015. DOI: 10.1001/jamapediatrics.2015.0465

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