

'He's not crazy. He's hurting': Suicides are rising for young black and Latino men in Texas

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Hip-hop is therapy for Tye Harris.

Tonight's session is at the Granada Theater. He takes the stage in his red Adidas joggers and a jean jacket. He's nervous, but he pulls the mic close to him. It's time to channel T.Y.E, his alter ego and more confident side.

The lights dim and his hip-hopera begins:

"Something is unusual, with me

"I feel a little off balanced. I feel a little bit strange.

"Some people call me peculiar. Some people call me deranged."

His rap unfolds his mental [health](#) struggles dating to his childhood in Dallas. The 24-year-old lays bare his experience to the audience, including two [suicide attempts](#).

Now, he's trying to help other people with his music.

For communities of color in Texas, [suicide rates](#) are on the rise for [young men](#), as are reported thoughts of suicide.

While the numbers still trail those of whites, the suicide rate has grown faster for young black and Latino males in Texas over the last 10 years, a Dallas Morning News analysis of federal Centers for Disease Control and Prevention data found.

Among [black males](#) 24 and younger, there were 9.2 suicides per 100,000 people in 2017, the most recent data available, compared with a rate of 3.7 suicides in 2007. It was the most dramatic increase among demographic groups, with the suicide rate more than doubling.

For young Hispanic males, the suicide rate increased about 55 percent to

7.6 suicides per 100,000 over the past decade. Suicides by young white males increased by 43 percent to a rate of 15 per 100,000.

Suicide was the third-leading cause of death for black and Latino males under 24 in Texas, after accidents and homicide, according to CDC data.

Black and Latino male high school students also have shown increased suicidal thoughts, according to youth survey data from the CDC.

But those communities are still largely silent about the problem, hindered in part by cultural and economic factors.

No one direct cause is behind the suicide rate increases, [mental health experts](#) say, but they point to inequities that have taken a toll on the [emotional health](#) of young black and Latino men.

While [mental health problems](#) affect every demographic, these young men are more likely to live in poverty, experience trauma or be exposed to violence. And they are less likely than whites to seek help, experts say. The cost of mental health treatment adds another barrier to care.

And for some, the ongoing immigration crisis causes anxiety, with fears about deportation.

When boys struggle with their emotions, they often don't talk about it, said Dr. Brian Dixon, a Fort Worth, Texas-based psychiatrist. Dixon said negative childhood experiences—like abuse, parental separation or family incarceration—can lead to trauma and mental health disorders in children.

Boys who haven't had behavioral treatment or learned coping skills can become "actor-outers," Dixon said. It's a contrast to girls, he said, who are often "actor-inners" and become withdrawn.

With boys, "you get the signs and symptoms of dealing with trauma: They scream, cuss. Some will use drugs to self-medicate, or they fight," Dixon said.

It's a spiral that rapper Harris knows well. Now he wants to share what he's learned about mental health as he works to cope with anxiety and trauma.

"All of my music is first to teach, second to relate and third is to entertain," Harris said. "That's my goal. And, hopefully, trying to get somebody to get out of killing themselves."

Childhood chaos

Growing up, Harris didn't have the words to describe his nervousness and confusion.

His first episodes started in middle school. He would sit in class and stare at the board while the teacher was talking. He felt anxious as students started to be called on to read aloud.

"I couldn't focus for some reason. Sometimes, I would cry for no reason," Harris said. "I wouldn't tell nobody I would cry."

His home life was chaotic, too. His mother worked two jobs to make ends meet. His father left the family shortly after Harris was born to pursue his dreams as a musician.

"There's no compromise in chasing his dreams," Harris said of his father. "The thing that I love about him is the thing that I hate about him. You know, we came second."

His mother wanted her two sons to have a father figure, so she sought

out pastors, coaches and teachers. Sometimes, he felt uncomfortable when her boyfriends thought they could take his father's place.

Harris started to hear voices as a teen and said he experienced hallucinations, often seeing snakes or shadowlike people. Sometimes, the voices sounded like loud, wild whispers. Other times the voices would tell him he was worthless or stupid. He thought they were just figments of his day-dreaming.

"I didn't think my mind was playing tricks on me," Harris said.

Harris said that he and some other boys who struggled in school would disrupt class and act as if they didn't care about school. Now, he realizes this was how he masked his feelings.

"You get anxiety that, 'Maybe, I might fail,' " he said. "So you want to get away from what you're feeling for no reason, so you just do dumb [expletive]. Then, you start [expletive] around and throw your life away."

'He's not crazy. He's hurting'

For some young men, mental health issues can lead to thoughts of suicide, and some take steps toward it.

In 2017, 14 percent of male Latino high school students in Texas said they seriously considered attempting suicide, compared with 10 percent in 2007, according to survey data from the CDC.

For white high schoolers, the level stayed fairly steady, at 13 percent in 2017.

While black male [high school students](#) surveyed in recent years generally had lower suicide ideation and planning compared to whites, they were

more likely to respond that they had attempted suicide.

In the most recent comparable figures, just over 12 percent of black male students said in 2011 that they attempted suicide, compared with 6 percent of white students and about 9 percent of Latinos. The sample size for black teens in Texas was too small to yield conclusive numbers for 2017.

Advocates have looked for ways to educate young people and their families, hoping to start conversations at home about mental health.

The Rev. Donald Parish Jr., who founded A Steady Hand, a mentoring organization for boys, said he often sees anxious and depressed students. Ninety-eight percent of Carter students are black or Latino and 73 percent are low-income.

Parish, who is a pastor at True Lee Missionary Baptist Church, said he's concerned about the effects of toxic stress on children who live in poverty and unstable homes.

"I think mental health has been stigmatized for black men, and my Latino brothers. We can't have that conversation because we worry that our brothers are going to laugh at us," Parish said.

"We just say stuff like, 'Man, he's crazy,' " he said. "He's not crazy. He's hurting."

Challenges for care

One further challenge in Texas: Accessible and affordable resources are scarce in the state, data from a federal agency shows.

Texas had the fewest number of mental health facilities, both public and

private, per capita among states, according to 2018 data.

In Dallas County, which has 2.5 million people, there were 16 mental health treatment facilities, according to a Dallas Morning News analysis of data from the Substance Abuse and Mental Health Services Administration and census data. (These overall numbers don't include military treatment facilities, individual private practitioners, small group practices not licensed as a mental health clinic, jails and prisons.)

At least 183 black and Latino males 24 and younger died by suicide in Dallas County between 2007 and 2017, compared to 149 white males, according to CDC data. These figures may underrepresent actual amounts because some suicide deaths are reported with undetermined causes or attributed to another cause.

Further investment in mental health treatment is crucial, said Margarita Alegria, who is the chief of the Disparities Research Unit at Massachusetts General Hospital and a professor at Harvard Medical School.

For the last 30 years, she has studied mental health disparities within ethnic communities.

Alegria and other experts have found that social determinants—a person's circumstances related to childhood, housing, education, health care and income—can have a direct effect on a person's mental health. For example, people living with food insecurity are more likely to live with mental disorders. Better housing programs helped reduce the use of inpatient psychiatric hospitals.

Early intervention and resources are especially needed for young people, Alegria said. She said "kids are paying the price" for unaddressed systemic problems.

"The problem has been that we have not invested in them, and we are taking away the little services that they have," Alegria said. "We're not really helping them, and then we say they're the problem."

Norma Westurn, director of Centro de Mi Salud, an Oak Cliff-based behavioral facility, said parents need to recognize the warning signs that kids may need help: isolation, mood swings, changes in appetite.

"Parents don't understand sometimes why a child struggles in their own mind," Westurn said.

That was the case for one 15-year-old Latino boy from a southern Dallas County suburb, who believes his depression deepened when he felt he had no one to talk to and bottled up his feelings. (The News is not naming the teen because he is a minor.)

He described how groups of kids would taunt one another on Snapchat and Instagram, and that would turn into fights. When someone made fun of his appearance, a fight ended with the other boy bleeding. The incident landed him in alternative school.

"I don't always fight. But for me—fighting—it's just that I hold up a bunch of anger from years and I just let it go," he said.

Relationships with girls were another source of stress. How does dating work? How do you deal with rejection?

It was a conversation he felt he couldn't have with his immigrant Mexican parents. When he would complain or felt sad, his mother would tell him he should be thankful for everything the family had worked to do for him.

Westurn said it's a typical and often harmful reaction within immigrant

families.

"How can you be suicidal when you have a house, clothes, everything?" Westurn recalls parents saying to kids in sessions. "[The children] are trying to adjust to American culture, but without support."

The teen, who had never been to therapy, had an emotional breakdown and attempted suicide while at school last fall. He was rushed to the hospital, where doctors determined he was depressed.

To put Latino families at ease about mental health treatment, Westurn makes her behavioral treatment center very Latino-centric, with Diego Rivera prints and signs in Spanish. The entire staff is bilingual to help bicultural families.

"You need to know the culture to know why they feel what they feel," said Westurn, who is of Brazilian descent.

Deep depression

Experts say the transition to college and adulthood can trigger more serious mental health issues.

Harris said he felt he'd finally made it "out of the 'hood," but then the stress of adulthood, coupled with the trauma he dealt with as a child, nearly broke him.

After graduating from Carter, he received a scholarship to study vocal performance at Abilene Christian University.

But once he arrived, he struggled emotionally and academically at school, where more than 63 percent of the student body is white. The anxiety he felt as a child in class started to return. He felt subtle put-

downs from other students.

"White folks telling me that I was too hood ... I didn't think I was hood. It defeated the whole process of trying to get out of that," he said. "I was so mentally vulnerable to that."

A music professor noticed that Harris was struggling and suggested he visit the mental health center on campus. But getting therapy did not go well when Harris had a white therapist who didn't understand his upbringing.

The only thing Harris found comfort in was music. He set up his first studio in his college dorm, sang in a choir and studied opera.

But the negative voices in his head got louder and darker. The depression became so extreme, he didn't want to get out of bed. He said he didn't want to live.

After a year of school, Harris said, he was kicked out of the dorms for fighting with his roommate. He later dropped out.

His mother was disappointed in him, he said, asking what he was going to do next. He was working at a hotel as a dishwasher. He had no money but dreamed of becoming a rapper. Harris felt crippled by depression.

"I felt like I was starting to get trapped," Harris said. "I thought, 'Damn, I hope I'm not still here washing dishes in 15 years.'"

His family and police intervened when he made suicidal threats, and he spent nearly two weeks being treated at a mental health facility.

Learning to cope

Since Harris started rapping more than four years ago, people have told him that his music changed their perspective on mental health. Many of them are black men.

Every day is still a challenge for him. He's scared of going back to therapy. He doesn't want to take prescribed medication, because the meds dull his senses.

But he says he's learning to cope better with how his mind works. He's found journaling his emotions during episodes helps. Sometimes, that process inspires more songs.

Harris, who describes himself as deeply Christian, wrote a rap called "Eternity," inspired by a song his music professor taught him.

"[The professor] explained it as a gradual arrival to heaven, and it resonated with me," Harris said. "When I made the song, I was coming out of the hospital. I was coming out of depression."

It's a popular song that's also resonated with fans. And one he performed for those who came to see him at the Granada.

And only God knows. It's in his control. Only in his control.

I saw Eternity. Heaven is currently.

He's learned heaven is what he can make while he's alive.

Every time he performs, he pauses the music to speak about mental health and explain the backstory to his songs. When he speaks about his suicide attempts, there's always a mixed reaction from the crowd, with some clapping in support and others unsure how to respond.

"I just hope they're listening," he says.

Finding help for a mental health crisis

The Suicide and Crisis Center hotline: 214-828-1000.

The National Suicide Prevention Lifeline: 1-800-273-TALK (8255),
online chat at suicidepreventionlifeline.org or text TALK to 741741.

American Association of Suicidology: suicidology.org

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