Suicide and the Young

As in the Caribbean, suicide in Caribbean America is still seen as a family ‘shame’ that needs to be hidden. Some years ago a young man died in the streets. A sibling disclosed at the wake that the brother would occasionally spend time by her home as he was living in the streets. On that night the young man called his sister around two or three in the morning requesting to drop by her. She told him that it was very late and she needed to sleep, so he could drop by in the morning, as he knew where the spare key was kept. Next morning they learnt of the suicide of the young man but told the public that he dies by a drug overdose. That young man, who came from an affluent family and whose father was well known in the community, was in the streets because of differences with a parent.

Also, some years ago, a young lady, again from an affluent family, died by suicide. Both her parents were highly qualified professionals whose college student daughter had apparently failed to maintain her straight A’s during the semester prior to her death. This apparently angered her parents who let their daughter know how they felt. This exchange was the trigger for the suicide.

In the US suicide is the SECOND leading cause of death for ages 10-24. More teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza, and chronic lung disease, COMBINED. Each day in our nation, there are an average of over 3,041 attempts by young people grades 9-
12. If these percentages are applied to grades 7 & 8, the numbers would be higher. Four out of five teens who attempt suicide give clear warning signs. Teens who have attempted suicide in the past are likely to attempt suicide again, generally, about 1/3 of all teen suicide victims had tried to commit suicide before.

The Youth Risk Behavioral Surveillance System (a biannual survey, conducted by the Centers for Disease Control and Prevention) 2017 found that 17.2% of teens nationwide seriously considered attempting suicide and that 13.6% of students nationwide had made a suicide plan during the 12 months before the survey.

The fact is that youngsters spend more time at home than anywhere else so families are in the best position to identify warning signs and seek help for at risk members. These signs may include teens showing signs of depression, inability to sleep or sleeping too much, irritability, refusal to talk, difficulty coping with stress, grief or other life challenges as well as drinking or drug use. Other risk factors or symptoms of depression or suicide may include suicidal tendencies like self-mutilation where a teen may be harming themselves through cutting, burning, and so on. About 90 percent of people who commit suicide have previously shown signs of depression.

In effect, parents must always be alert to what’s happening in the lives of their teenagers; they should always find out how their teenagers are doing and if anything’s bothering them. And in addressing any problems parents must not use language that would alienate their teenagers, make them feel unloved and unwanted, make them act in anger and/or haste or make them feel, alone and lonely. Regardless of what the issues are parents must let their teenagers know that they are loved and that they can always depend on parental help and support.

As well parents should not impose their views about how things should be on their teenagers since the issues parents faced when they were growing up and the environment of those time are not quite the same as what exists today. Among other things, parents have to work towards the following:

- Cutting down, if not eliminating nagging and lecturing which generally cause children to stop listening to what is being said and to become resentful as well. Keep conversations brief, don’t repeat things too often and if
necessary, develop a set of consequences with children so they take ownership for their behavior and actions and embrace the consequences;

➢ Desist from interrupting when children are expressing themselves so they feel what they have to say is given value;

➢ Do not be directly critical of children. If necessary enter into a discussion about behavior and/or actions and work with children to understand where they may have been wrong and what would be better options;

➢ Absolutely do not keep dwelling on the past, as children need to know that they can start over with a clean slate. If a pattern develops then maybe have a supportive and caring family intervention;

➢ Desist from trying to control children through guilt because this is a sure way to negatively affect relationships and children’s self esteem as well;

➢ Do not use sarcasm as this can have negative effects on children in many ways;

➢ Work with children to help them solve their problems, instead of imposing solutions as this can lead to resentment. Offer guidance and scope for them to find solutions as children need to learn by themselves and know that they are capable and trusted;

➢ Never put down children, even as a joke. This can lead to children feeling rejected, unloved and inadequate.

➢ Never use threats as these can lead to children feeling powerless and resentful.

With respect to relationships, especially if pregnancy is involved parents must reach out for assistance to ensure that their teenagers are safe. The bottom line is that we all make mistakes as part of the growing up process. In fact even as adults we still continue to make mistakes. So when our teens make mistakes we must understand that its not the end of the world or even the end of life. Life goes on and as parents, we must first help our teenagers deal with the consequences of mistakes made and then help them learn from those mistakes and move on in life. And, when necessary, we must reach for help if we feel that we are not fully capable of providing the help needed by our teenagers. For more
information call 1-800-SUICIDE or contact The Caribbean Voice – see contact info below.

**PS: Catch our Internet radio and FB live program The Mind Body Connection every Monday on Island Zone Radio from 8 to 10 PM with hosts Shanaz Hussain and Hiram Rampersaud. Log on to The Caribbean Voice Media page on FB for videos of all programs. Also The Caribbean Voice can help you access help for any and all mental health issues. Please email us at caribvoice@aol.com, call 646-461-0574 (Annan), 917-767-2248 (Hiram), 631805-6605 (Shanaz), 646-202-3971 (Neela) or 516-286-8952 (Dr. Rodney). In Guyana call Bibi at 621-6111 and in T&T call Keisha at 686-3623 or Czerina at 7268-775. Also check out our website at www.caribvoice.org for more information.**