

## TEENS, DRUGS & SUICIDE

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Every hour of every day, fifty-seven American children and adolescents try to end their young lives.<sup>1</sup> Each year, sixty-five hundred young Americans die at their own hands.<sup>2</sup> An additional one million youngsters pass through a suicidal crisis.<sup>3, 4</sup> Since 1950, suicides of ten- to twenty-year-olds have more than quadrupled.<sup>5</sup> It is the third leading cause of death for teenagers--accounting for one-fourth of all adolescent deaths--and the rates are growing at an alarming pace.<sup>6, 7</sup>

Although the reasons young people try to kill themselves vary as widely as their ethnic, racial, economic and family background, the vast majority of these teens share one critical thing in common: they try to kill themselves while under the influence of alcohol or drugs.<sup>8</sup> Drug-related suicide is one of the main reasons why American teenagers are the only age group in the United States whose mortality rate has gone up during the past two decades.<sup>9</sup>

Even experts sometimes overlook the deadly connection between drugs and suicide because it often seems deceptively indirect. In fact, as an immediate cause of death drugs are actually in decline, especially among females.<sup>10</sup> In 1970 forty percent of the suicides by young women were with drugs; one-third were with firearms. In 1984, more than half of the suicides by 15- to 24-year-old women were done with a firearm; less than 20 percent used drugs.<sup>11</sup>

But as a factor in suicides--whether by shooting, hangings, wrist-slashing, or car crashing--the influence of drugs is virtually omnipresent.

\* Drugs or alcohol are found in the system of half of all adolescent who kill themselves, and in fully 85 percent of adolescent and children who survive a suicide attempt.<sup>12</sup>

\* One recent study found that more than half of young suicides victims could be diagnosed as substance abusers.<sup>13</sup>

\* In a survey of high school students, one out of four drug abusers reported they had seriously considered suicide within the last month, compared to one out of twenty-five nonusers.<sup>14</sup>

\* Drugs and alcohol can influence a suicide long before the deadly decision is made. A family history of alcohol and drug abuse is common among preadolescents with suicidal behavior, and both fathers and mothers of suicide-attempting adolescents have significantly more alcoholism than parents of nonattempters.<sup>15, 16</sup>

\* Alcohol and drugs play a crucial part in parental violence and sexual abuse--family dynamics which are frequently associated with suicidal acts in youngsters<sup>17</sup>.

Despite the distressingly high rates of crack, crystal and marijuana use among teens, alcohol remains the number one substance associated with teen suicides. The epidemic increase in alcohol abuse among adolescents has occurred during the same period as the increase in the adolescent suicide rate.<sup>18</sup> One 1987 study found that young suicide victims with detectable blood alcohol levels rose from 13 percent in 1968 to 1972 to 46 percent in 1978 to 1983.<sup>19</sup> Overall, alcohol is a factor in nearly half of America's suicides and accidental deaths and a substantial number of teens are drunk at the time they commit suicide.<sup>20, 21</sup> Even the rise of firearms as the choice of death is related to alcohol intoxication.<sup>22</sup>

A high proportion of adolescent suicide victims have been found to have chronic problems with alcohol abuse.<sup>23</sup> This mirrors what we know about chronic adult alcoholics: they commit suicide at rates that are from 6 to 12 times that of the general population.<sup>24</sup> But most investigators now support a direct link between both long term and short term alcohol abuse and suicide.<sup>25</sup>

Long term alcohol abuse leads to a host of difficulties, such as disruption of social relationships, depression, hopelessness, and social isolation. Social isolation can be particularly devastating. If the young alcoholic suffers a significant interpersonal loss, it's often at a time when his or her support system has fallen away. Such youths are at extremely high risk for suicide.<sup>26</sup> Two researchers who studied 34 outpatient children found that three-quarters had experienced a significant loss within a few days before their attempted suicide.<sup>27</sup> These are losses that many young people learn to cope with, but psyches that have been destabilized by alcohol and drugs are far less likely to handle these stresses successfully. Moreover, long-term intoxication causes the depletion of the neurotransmitter serotonin, which is a known risk factor for suicide.<sup>28</sup>

Short term alcohol abuse can be equally deadly. It impairs judgement and causes despondency which may lower the threshold for suicidal behavior.<sup>29</sup> It may also be the earliest objective sign that the youngster is in trouble.

As a symptom of possible suicidal ideas or actions, drug and alcohol use by teens cries out for action. In the vast majority of cases, of course, drug use does not

lead to an overt suicide attempt attempt. But we are increasingly recognizing what Karl Menninger observed years ago. Alcohol and drug abuse are merely ways of suiciding slowly.<sup>30</sup>

## SIDEBAR MATERIAL

### A NOTE TO COUNSELORS

Because suicide is invariably the expression of a family disturbance, the whole family needs treatment when suicide is attempted by a young person.<sup>31</sup> Treating the attempter as the only disturbed member of the family system scapegoats the victim and leaves the precipitating problems obscured and festering. This is a form of denial that seeks to protect the family while parts of it are dying. We have the greatest sympathy for families in which there has been a suicide attempt and we urge those families to see that attempt as a cry for help arising from the family for the family. The suicide attempter can be thought of as a person on a watchtower crying out the alert for the groups safety. Do these children really want to die? Probably not, since virtually all teen suicides--nine out of ten--take place at home, when parents are awake and about. According to Dr. Mary Giffin, "These children are crying out to be seen, saved, and stopped."<sup>32</sup>

A teen's first suicide attempt may be a child's way of solving a problem. If nothing changes, the second attempt may be more thoroughly planned.

## ENDNOTES

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  9. The other reasons are alcohol- and drug-impaired driving. See Surgeon General's report, cited in Peggy Mann, Marijuana Alert, New York:McGraw-Hill, 1985, pp. 18-19. In Johnston, Jerry Why Suicide?, New York: Thomas Nelson Publishers, 1987, p. 65.
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