

BLACK SUICIDE: AN EPIDEMIC?

by

Roberta Kimmel

There is a popular belief in the United States that very few blacks commit suicide. "We don't do that; we're too in love with life," commented one black observer. But consider these startling statistics:

- Suicide is more common among black males aged 25-29, and among black females 15-19, than it is among whites in the same age brackets.
- The suicide rate for blacks aged 15-34 is now higher than it has been in more than fifty years. Between 1970 and 1975 the rate for males in the 25-29 age bracket increased 42%.
- Among whites, suicide is most likely to occur in middle life or old age, but among blacks the incidence of suicide is highest for the young: 47% of black suicides occur in the 25-34 age bracket.

Clearly this phenomenon, which may be read as symptomatic of deeply embedded social problems, has serious implications for the black population. These suicide statistics not only represent a tragic loss to bereaved family and friends; they also mean an acute loss of human resources whereby the black community is deprived of youthful manpower, the benefits of earned wages, procreative and nurturing sources, and a host of other contributions that these individuals might have made to society.

The patterns of black suicide rates, their implications, and current assessments of the causes are addressed in recent research by sociologist Robert Davis, a Project Associate at the Poverty Institute. Suicide, Davis points out, is still an uncommon occurrence among older blacks, and although it is on the rise among black women (a fact that has generated a good deal of publicity) the core of the problem lies in the rapidly rising incidence of suicide among black males. The ratio of black male to black female suicide is a startling 3.4 to 1 for the total black population and 4 to 1 for the 20-34 age bracket.

Theories of Suicide

Existing explanations of the phenomenon of suicide are largely speculative, for few empirical studies of motive exist. Sociologists are only now beginning to tackle the topic of death in general, and suicide, with its painful implications of failure within family and social networks of support, presents formidable methodological problems.

In the classic treatise *Suicide*, Emile Durkheim proposed that the suicide tendency is the result of collective forces acting upon the individual. Durkheim's Law states that suicide varies inversely with the degree of integration of the group to which the individual belongs. Modern proponents of this theory maintain that a disruption of social relations is the primary causative factor in suicide.

There are many psychoanalytic theories of suicide; relevant here are the psychological and social psychological schools of thought. In its simplest form, the former stresses the aggressive nature of suicide. The urge for self-preservation is so strong, Freud maintained, that the act is di-

Robert Davis, "Black Suicide and the Relational System: Theoretical and Empirical Implications of Communal and Familial Ties," Institute for Research on Poverty Discussion Paper no. 481-78.

Robert Davis, "Black Suicide in the Seventies: Current Trends and Perspectives," Institute for Research on Poverty Discussion Paper no. 483-78.

rected against another person with whom the individual has identified. Adler, too, emphasized interpersonal factors—the effect of suicide on others—but proposed that suicide results from a lack of social relations that make life purposeless.

Some explanations directly address black suicide. Most frequently cited is the *urban stress* (or frustration-aggression) *hypothesis*. It postulates that compounded urban stresses associated with migration, poverty, unemployment, racism, poor housing, and poor education result in violence which often though not always takes the form of suicide.

Proponents of the *status integration theory* believe that as blacks work their way into the middle and upper middle classes they inherit the economic, social, and psychological tensions of their white counterparts. The more upwardly mobile blacks become, the more intense are problems of adjustment and assimilation into the American mainstream. A corroding sense of internal alienation may ultimately result in self-destruction.

The *black family deficit theory* portrays the black family as being unable to meet the fundamental needs of its members for survival, socialization, and transmittal of a viable cultural heritage.

Not least, there are some who argue that the increase in black suicide has been overestimated. It is, they claim, an artifact of statistical reporting: Coroners are investigating ambiguous black deaths much more thoroughly today than in the past.

A Different Model

Davis sets forth a model that speaks more directly than any of the above theories to the concentration of suicide among young blacks. He builds on the "*external restraint theory*," which holds that suicides vary inversely with such restraining factors as low social status and the insulation that strong communal and familial ties provide. Davis proposes that restraints which have previously tended to produce a solidarity among blacks—for example, the stresses of overt racism and discrimination—have weakened for young blacks:

Recently . . . there has been an increase in social opportunities (more prestige, better jobs, higher education, etc.) and social status for some blacks. Generally speaking, young black males and females have experienced an uplifting of goals, aspirations, and expectations as a result of the perceived change toward greater opportunities within American society. Concurrently, this loosening of restraints has produced a false sense of freedom and security that has led to individualism and utilitarianism, which have tended

to loosen or weaken the communal and family ties previously serving as a buffer against suicide.

A Statistical Analysis

To examine the possibility of a link between weakening communal and family ties and suicide, Davis has analyzed data for 1970 and 1975 from three sources: annual reports published by the National Center for Health Statistics (1970 and 1975), U.S. Bureau of the Census statistics (1970), and the Current Population Survey (1971 and 1976). Although the state data are for "nonwhites," blacks constitute 90-94% of this category; further, by limiting the sample to the 17 states with the largest black populations, Davis has increased the probability of including black suicides.

Davis looks at two variables which might be viewed as limiting access to stable, positive relations within the black community: immigration, since it implies the necessity of dealing with new urban stresses, and living alone, since some researchers claim that people in this situation tend to lack close interpersonal ties. Immigration is measured by the percentage of blacks five years of age and older who moved into a state between 1965 and 1970. Living alone is measured by the percentage of a state's black population living in a one-person household. In addition, the relationship between black suicide and educational level (as a proxy for socioeconomic status) is examined.

Results

For both 1970 and 1975, immigration is found to be strongly correlated with black suicide. Living alone, however, appears unrelated to the suicide rate. A striking finding concerns the level of education: States having a low percentage of blacks with fewer than nine years of schooling display high black suicide rates. Social theorists have argued that suicides are more common among the upper and middle classes than among the lower class, and this seems to be demonstrated by these results. In sum, Davis concludes, "the current increase in black suicide can be attributed, at least in part, to young, upwardly mobile blacks who are isolated from their families, communities, and social institutions."

Future research by Davis will be aimed at clarifying the relationship between social mobility and social stress, and between social stress and mortality. Detailed mortality tapes from the National Center for Health Statistics will be analyzed in conjunction with migration and socioeconomic data for the 125 largest standard metropolitan statistical areas. Given that suicide is but one reflection of stress, the question whether other forms of stress-related mortality (i.e., homicide, accidents, cirrhosis of the liver due to chronic alcoholism) have increased among blacks at equally dramatic rates for the 20-34 age group bears investigation.

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These books will be available from the publisher, Academic Press, 111 Fifth Avenue, New York, New York 10003.