The Need for Data

In 2001, the White Mountain Apache Tribe (WMAT) Tribal Council established a suicide prevention task force (now the Celebrating Life Prevention Team) in response to community members’ pleas for help following a series of suicide losses, many of them young people. One of the task force’s first steps was to create a referral form for all first responders and task force members to fill out after interacting with individuals expressing suicidal behaviors. This initiative became a mandate for all suicidal behaviors to be reported. Soon thereafter, the tribe partnered with the Johns Hopkins University (JHU) to expand and improve its surveillance, and a secure database was developed that now tracks a unique level of detail on suicide and related problems, as well as risk and protective factors in the community. The WMAT Suicide Surveillance System is the only registry of its kind in the United States to gather data on suicidal behavior from both community and clinical settings.

Getting the Data

Thanks to a Tribal Council mandate, all medical, school, social service personnel, and first responders working in the tribe’s jurisdiction now report any observed or documented suicidal ideation, attempts, and deaths to the Celebrating Life staff. Community members are also required to report suicidal behaviors, and participation in the system has grown steadily. Over time, the system has been expanded to include non-suicidal self-injury and binge use of alcohol and drugs as reportable behaviors. The Celebrating Life staff, (trained paraprofessionals from the community) conduct in-person follow-up visits on every report, which often includes direct support for people who are in emotional pain, as well as referrals to additional social, mental, or behavioral health services when needed.

Analyzing the Data

The definitions used by WMAT for reportable behaviors are modeled on the Columbia Classified Algorithm for Suicide Assessment (C-CASA). Through this survey measure, as well as intake information gathered at follow-up visits, the WMAT surveillance system has recorded the following information for more than 3,000 individuals:

- Demographic information, including age and gender
- Tribal affiliation
- Type of suicidal behavior
- Date and location of behavior
- Method of suicide attempt or suicide death
- History of previous suicidal behavior
- Possible precipitating events
- Possible protective factors
- Referral information

This rich data has allowed for an in-depth examination of patterns in suicide deaths, attempts, and ideation on the reservation, which in some cases differ significantly from wider patterns in the general population and among American Indians and Alaska Natives (AI/AN) in the United States.

“In 2001, community members went before the Tribal Council and told them something needed to be done to try and prevent suicides, so that other families wouldn’t have to go through what they had experienced.”

—Novalene Goklish, Senior Program Coordinator, White Mountain Apache Youth Suicide Prevention Program
What The White Mountain Apache Tribe Learned

Based on the data collected, the tribe has learned that 60 percent of its suicide deaths and 70 percent of non-fatal attempts in the community are among youth less than 25 years old. Even though guns are easily accessible on the reservation, young men who take their lives are more likely to die by hanging than by firearms, which has important implications for prevention. They have also seen that suicide deaths have decreased since the beginning of the registry in 2001. Patterns are also beginning to emerge around precipitating events for suicide attempts by young people, with family conflicts appearing to be the most common. Since the beginning of the project, the annual number of reports to the system has increased, especially reports of less severe suicidal behavior. Researchers hypothesize that, as awareness of mental health issues and the Surveillance System have grown, people are recognizing the importance of helping friends and family they are concerned about before their distress potentially increases.

What Comes Next?

The WMAT Surveillance System relies on participation by community members, so the team offers regular in-service trainings across the reservation in a range of settings. Together with the JHU researchers, the WMAT team is also exploring new tools such as geo-spatial mappings and social network analysis to understand details of suicidal behavior on the reservation—especially related to clusters and contagion. Because the surveillance data have shown that youth need to build protective factors, the program is introducing new school-based interventions, including a pilot curriculum designed for tribal elders to lead with students. The Celebrating Life team is also often invited to provide technical assistance beyond the reservation as other tribes become interested in starting projects similar to the WMAT Surveillance System.

Figure 1. Apache Surveillance System Process Data: 2007–2011

**DATA RESOURCES**

Locating and Understanding Data for Suicide Prevention (online course): [http://training.sprc.org/](http://training.sprc.org/)

CSTE Tribal Epidemiology Toolkit: [http://go.edc.org/data5](http://go.edc.org/data5)

Accessing Data about Suicidal Behavior among American Indians and Alaska Natives (fact sheet): [http://go.edc.org/eval5](http://go.edc.org/eval5)


Interpreting Suicide Data: Special Considerations for Small Populations: [http://go.edc.org/Data11](http://go.edc.org/Data11)