The White Earth Suicide Intervention Team was created in 1990 in response to an extraordinarily high rate of suicide attempts and completions on the White Earth Reservation. The all-volunteer team provides many services previously absent or lacking, including 24-hour support for the attempter and his or her family, encouragement of voluntary or involuntary hospital admission for all attempters, referrals to mental health services and suicide education.

In 1990, the citizens of the White Earth Reservation faced a severe mental health crisis. Four tribal members had committed suicide within a several week period and the community feared that a cluster of copycat suicide attempts (and completions) might follow. To put the problem in perspective, White Earth had suffered an average of only one suicide per year over the previous five years, and although American Indians experience higher rates of suicide than members of the U.S. population overall, the 1990 suicide rate at White Earth had reached a level 8.5 times higher than the American Indian average.

The suicides rocked the tight-knit community. Overcoming the denial, fear and shame frequently associated with suicide, dozens of tribal members spoke out at an open-mike event sponsored by the Tribal Council. Besides helping individuals and families deal with their losses, the event led to a great upsurge of grassroots support for community action. After the meetings, a group of community members came together and, with the Council’s official support (expressed through the passage of a tribal resolution), the White Earth Suicide Intervention Team (WESIT) was formed.

The Team chose to focus their efforts on suicide intervention because they believed that, with limited time and scarce financial resources, this was an area in which their work could have the most impact. Examining the situation, the Team identified a number of systemic, but rectifiable problems associated with the methods of suicide response at White Earth. For instance, few survivors were hospitalized for the recommended 72-hour period immediately after their attempts – most were simply examined and released from local hospitals’ emergency rooms. Prior to the establishment of WESIT, emergency response personnel had no one to contact for support and direction in dealing with suicide attempts and completions. Beyond an ability to attend to victims’ immediate medical needs, even hospital staff lacked information about how to best deal with individuals who attempted suicide. Further, because individuals responding to each crisis were focused mainly on the victim, the mental health needs of families and friends on the scene were often left unattended.

WESIT is a highly creative and effective institutional response to these needs. It is an all-volunteer organization, composed of Indian Health Service (IHS) and Tribal Mental Health staffers, concerned community members, and clergy and spiritual leaders. The 20-plus member team works closely with tribal dispatchers and emergency medical technicians (EMTs), tribal police, non-Indian local law enforcement officials, and emergency room staff at area hospitals to support suicide victims within the White Earth tribal community. The Team’s on-call members accompany tribal EMTs and police officers to the scene of a suicide attempt or completion, or to the hospital, and intercede on behalf of victims and their families. In the case of an attempted
suicide, WESIT has been instrumental in compelling the non-Indian hospitals that serve White Earth members (White Earth does not have its own hospital) to admit victims for 72-hour holds. In the case of a completed suicide, WESIT provides immediate, on-the-scene counseling to friends and family and lays the groundwork for further mental health care by providing referrals to other social services. The Team is able to respond 24 hours a day through an agreement brokered with the IHS’s and Tribe’s health programs—Team members who work for the IHS or for Tribal Mental Health cover daytime calls, while a rotating on-call team member handles calls during nights and weekends.

WESIT complements these direct intervention activities with a variety of other activities undertaken at its monthly meetings. In particular, the Team uses these meetings to debrief, discuss issues of concern, strategize, craft policy, train and introduce themselves to the continually changing set of individuals and organizations with which they work.

Statistically, WESIT’s effectiveness can best be demonstrated by the impact its efforts have had on post-attempt hospitalizations. In 1990, 77 percent of the resident White Earth tribal members who attempted suicide were released from emergency rooms within hours after arrival. By 1996, as a direct result of the Team’s interventions, the number had fallen to 6 percent. These holds are significant, since research shows that most terminal suicide re-attempts occur in the 72-hour period following the first attempt. Thus, WESIT’s success in increasing hospitalization rates has dramatically decreased the number of suicide completions resulting from repeated attempts.

WESIT’s effectiveness is also demonstrated through the partnerships it has created with on- and off-reservation emergency response and health care providers. The tribal emergency medical technicians and dispatchers, local law enforcement officers, and emergency room nurses with whom WESIT works all attest to the Team’s effectiveness as a partner in health care provision. These professionals note especially that, because of the WESIT members’ comprehensive training and personal knowledge, the volunteers are able to assist in the care of victims, family and friends in a way that helps the partners perform their own jobs better.

Finally, WESIT has been a catalyst in renewing community hope. In 1990, there was great despair at White Earth, and the community feared that it might not be able to overcome this difficult problem. While it is impossible to eliminate all suicides in any community, WESIT has turned the tide of opinion at White Earth, showing that something can be done in terms of intervention at the most critical moments. Especially since the “degrees of separation” between individuals in the community are small, helping just one family through a suicide attempt or completion has positive reverberations throughout the entire Tribe.

There are numerous reasons why the White Earth Suicide Intervention Team works so well. For one, WESIT keeps its focus narrow. The emphasis on intervention keeps everyone’s goal simple and helps ensure that the Team’s time, energy, and financial resources are put to their best use. Second, WESIT has substantial political support. Despite several leadership changes over the last decade, WESIT has retained support of the tribe’s politicians, as evidenced by their public statements and resolutions. Third, WESIT emphasizes training. WESIT’s distributes a comprehensive training manual to its members and conducts on-going training at its monthly meetings. The later consists of everything from presentations on the latest research information about effective suicide intervention techniques to the introduction of new nurses in the emergency room of a local hospital. In addition to being educational, such training has the added benefit of sustaining WESIT by convincing the ever-changing group of players that the Team is itself a legitimate, useful and professionally competent partner. Fourth, WESIT practices on-going recruitment. This is necessary because, as an all-volunteer entity, it is no one’s paid job to be part of WESIT. Recruitment also provides respite, as it keeps the group large enough to allow committed Team members to rotate between on-call and non-call positions. Finally, while some would see the Team’s all-volunteer staff as a weakness, WESIT members themselves cite this status as a strength and a major component of their success. For example, clients know Team
members do the work because they really care – no one “forces” them to be there, which makes
their messages, especially the more difficult ones (such as, “You have to stay in the hospital for
the next three days”) easier to hear.

Significantly, this program has promoted the White Earth Tribe’s capacity for self-determination
and self-governance. Most striking is how WESIT proves that tribes can, on their own, do
something to combat one of the most serious social problems in Indian Country. As one WESIT
member stated, WESIT “is not a federal or state program. It was not mandated by any agency. It
has no outside program funding. The need existed simply to do something for our people to
reduce the threat of suicide and to preserve our people.” Further, as this quote implies, self-
determination and self-governance proceed only with the preservation of the people. Not only are
many people alive today as a result of WESIT’s efforts, but by helping to improve the physical
and mental health of White Earth’s citizens, the Team preserves and promotes a sense of
positive accomplishment and pride. A final way WESIT promotes self-determination and self-
governance is by fostering fruitful partnerships with non-tribal entities. WESIT has compelled non-
tribal emergency service and health care providers to address the needs of their Indian clients,
and by being good “ambassadors” for the Tribe, WESIT has accomplished this difficult task in a
way that has improved government-to-government and agency-to-agency relationships.

Two aspects of the WESIT approach suggest that many other communities in Indian Country
could benefit through replication of this program. First and most regrettably, WESIT addresses a
problem shared by much of Native America. Thus, the program’s potential for replication is
supported by a great need. Second, WESIT is inexpensive. The volunteer team relies on tribal
funds alone, and this funding is minimal. The White Earth Tribal Council provides a room for the
team’s monthly meeting, pays for their lunch, and has provided radios so that on-call team
members can be in better contact with tribal dispatchers. (Of course, this final investment is
critical. As one member states, “Our radios are our lifeline when going out on a call.”) But team
members donate their time and even mileage, so costs are kept low.

The White Earth Suicide Intervention Team is a low-cost, fully volunteer effort to address one of
the most pressing social and health problems in Indian Country – suicide. Too often, communities
(Indian or non-Indian) assume that without a large expenditure and without help from outside,
progress against important social problems is not possible. WESIT provides compelling evidence
to the contrary.

Lessons:

• Grassroots movements and community-based organizations can help tribal governments
  make important advances against critical social problems.

• There can be benefits to limiting the scope of an organization’s mission. A narrow focus
  can help maintain volunteers, promote the best use of limited resources and maximize a
  group’s impact.

• Well-trained and qualified staff, volunteer or paid, have a dual payoff for any organization
  – they do their work more effectively and they garner respect for the organization from the
  outside world.