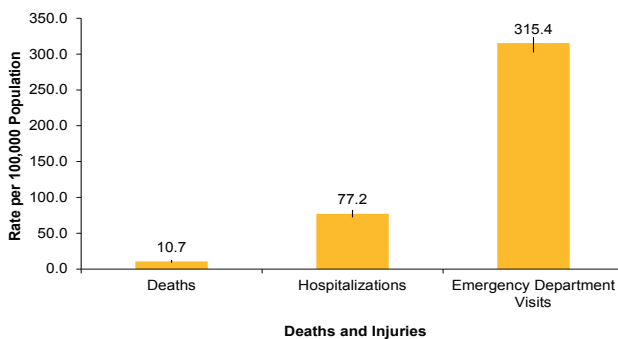


Teen Suicide in Utah, 2005-2009

Introduction

An average of 22 Utahns ages 15-19 die from suicide each year.¹ However, many more teens are hospitalized or treated in an emergency department (ED) for suicide attempts than are fatally injured (**Figure 1**). On average, two Utahns 15-19 years of age are treated in the ED or hospitalized every day because of suicide attempts.¹ All suicide attempts should be taken seriously. Those who survive suicide attempts are often gravely injured and many have depression or other mental health problems.

Figure 1: Rate of Suicides and Suicide Attempts, Ages 15-19, Utah, 2005-2009



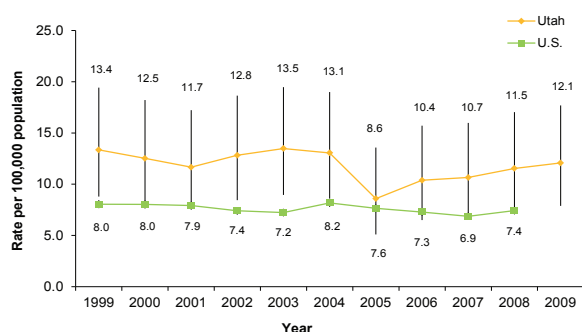
Utah high school students reported the following:²

- 26.0% felt sad or hopeless,
- 15.4% seriously considered attempting suicide,
- 11.5% made a suicide plan,
- 7.2% attempted suicide one or more times, and
- 3.2% of students suffered an injury, poisoning, or an overdose that had to be treated by a doctor or nurse due to a suicide attempt.

Utah and U.S.

Utah's teen suicide rate has been consistently higher than the national rate for the last decade (**Figure 2**). Utah had the 12th highest teen suicide rate in the U.S.³

Figure 2: Rate of Suicides by Year, Ages 15-19, Utah and U.S., 1999-2009



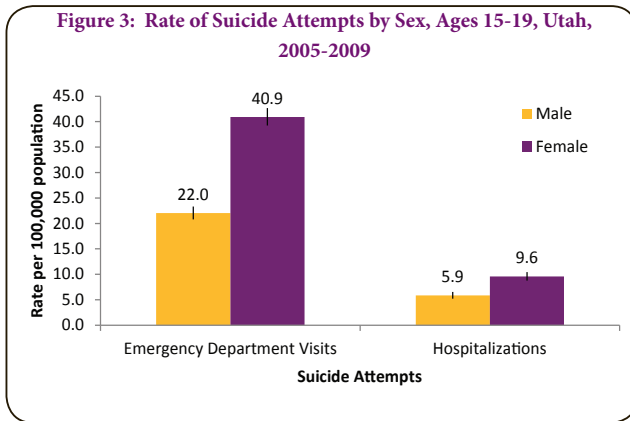
Utah Trends

The 2009 Utah teen suicide rate was 12.1 per 100,000 population ages 15-19.¹ Suicide is the 2nd leading cause of death for this age group.¹

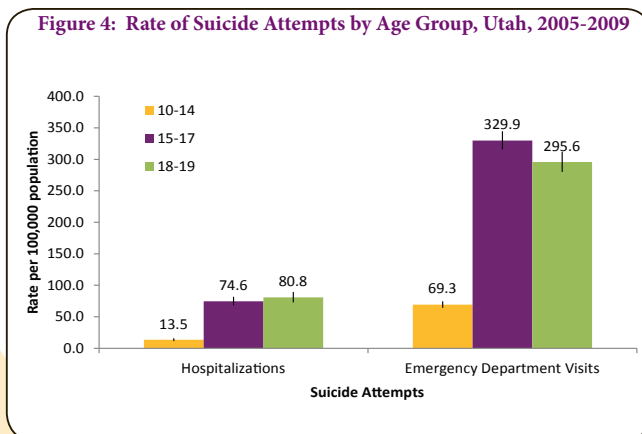


Age and Sex

More females attempt suicide than males. In Utah, teen females had a significantly higher ED visit and hospitalization rates for suicide attempts compared to teen males (Figure 3).¹



In addition, suicide attempt rates increase significantly after age 14. Teens ages 15-17 have a significantly higher ED visit rate compared to teens ages 18-19 (Figure 4).¹



Teen males (16.8 per 100,000 population) had a significantly higher

suicide rate than teen females (4.6 per 100,000 population).¹

Location of Injury

The majority of youth suicides occurred at a home or an apartment (71.7%). The second most common location were natural areas, such as fields or mountains (8.3%).⁴

Geographic Location

Salt Lake Valley Local Health District (LHD) had significantly higher teen ED visit rates for suicide attempts than the state rate. Tooele County LHD had a significantly higher teen hospitalization rate for suicide attempts compared to the state rate. There were no significant differences in teen suicide rates by LHD.

Additional suicide data by small areas are available in the *Utah Violence and Injury Small Area Report* at <http://health.utah.gov/vipp>.

Method of Injury

Poisoning was the most common method of suicide attempts for teens. Suffocation was the most common method of teen suicide.¹

Risk Factors

- Previous suicide attempt(s)
- History of depression or mental illness
- Alcohol or drug abuse

- Family history of suicide or violence
- Easy access to lethal methods (such as guns or pills)
- Stressful life event or loss
- Relationship or school problems

There were differences in mental and behavioral health circumstances surrounding teen, adult, and older adult suicides. Teen males had significantly higher substance abuse problems compared to older adult males (**Figure 5**). No differences were seen among teen females.⁴

Differences were also seen in life stressors. Teen males had significantly higher other relationship problems and school problems compared to adult and older adult males. They also had significantly higher intimate partner problems (**Figure 6**). Teens had a significantly higher history of suicide attempts compared to older adult males.⁴

Teen females had significantly higher school problems compared to older adult females and significantly higher other relationship problems compared to adults (**Figure 7**).⁴

Figure 5: Percentage of Reported Mental and Behavioral Health Suicide Circumstances by Teen, Adult, and Older Adult Males, Utah, 2005-2009

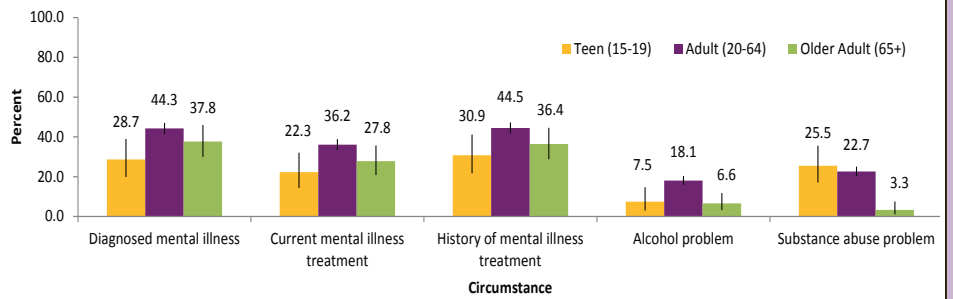
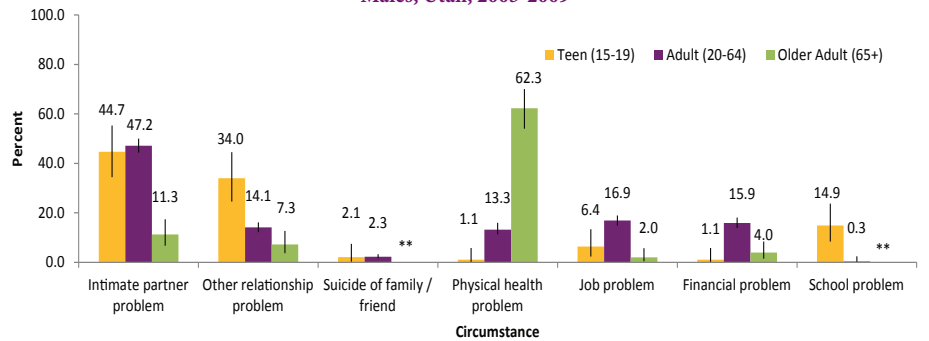
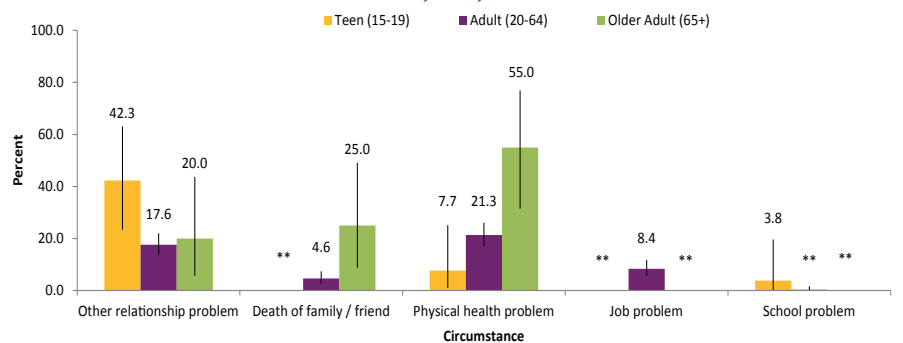


Figure 6: Percentage of Reported Life Stressor Suicide Circumstances by Teen, Adult, and Older Adult Males, Utah, 2005-2009



**The rate has been suppressed because the estimate is unreliable.

Figure 7: Percentage of Reported Life Stressor Suicide Circumstances by Teen, Adult, and Older Adult Females, Utah, 2005-2009



**The rate has been suppressed because the estimate is unreliable.



Prevention Tips

- Call for help. Help is available 24 hours a day 7 days a week. Call 1-800-273-TALK.
- Take any threat of suicide seriously.
- Do not leave the person alone.
- Listen to and don't judge anyone you think may be in trouble.
- Take action. Remove guns or pills to prevent a suicide attempt.

Cost

For the years 2005-2007, the average total charges per year for ED visits and hospitalizations for suicide attempts among Utah teens ages 15-19 was \$3.1 million.¹

Resources

- National Suicide Prevention Lifeline www.suicidepreventionlifeline.org (800) 273-TALK (8255)
- Suicide Prevention Resource Center www.sprc.org
- National Alliance on Mental Illness Utah Chapter www.namiut.org
- Preventing Suicide: A resource for media professionals www.who.int/mental_health/prevention/suicide/resource_media.pdf

References

- 1 Utah's Indicator Based Information System for Public Health (IBIS-PH), 2005-2009 data [cited 2011 Apr]
- 2 U.S. Centers for Disease Control and Prevention (CDC). Youth Risk Behavior Surveillance System (Youth online) [ONLINE]. (2009) National Center for Chronic Disease Prevention and Health Promotion, CDC (producer). [cited 2011 Apr]
- 3 CDC, Web-based Injury Statistics Query and Reporting System (WISQARS), 2007 data [cited 2011 Mar]
- 4 Violence and Injury Prevention Program, 2005-2009 Utah Violent Death Reporting System, Utah Department of Health

Last updated: November 2011



If your life has been affected by suicide, the Utah Department of Health wants to hear from you. Share your story with the Utah Health Story Bank at www.health.utah.gov/bhp/sb/.

Our Mission

We are a trusted and comprehensive resource for data related to violence and injury. Through education, this information helps promote partnerships and programs to prevent injuries and improve public health.

(801) 538-6141
vipp@utah.gov
www.health.utah.gov/vipp