Teen Suicide in Utah, 2005-2009

Introduction

An average of 22 Utahns ages 15-19 die from suicide each year. 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. 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.

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.

Utah Trends

The 2009 Utah teen suicide rate was 12.1 per 100,000 population ages 15-19. Suicide is the 2nd leading cause of death for this age group.
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). 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).

Teen males (16.8 per 100,000 population) had a significantly higher suicide rate than teen females (4.6 per 100,000 population).

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%).

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.


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

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

**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]
3 CDC, Web-based Injury Statistics Query and Reporting System (WISQARS), 2007 data [cited 2011 Mar]

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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.