

Suicide in Utah, 2006-2010

Young Adults (18-24 years)

Introduction

An average of 402 Utahns die from suicide and 4,152 Utahns attempt suicide each year. Young adults ages 18-24 comprise 12.1% of Utah's population, and:

- **13.9%** of all suicides in Utah, and
- **24.2%** of all suicide attempts* in Utah.

More young adults are hospitalized or treated in an emergency department (ED) for suicide attempts than are fatally injured (**Figure 1**).¹

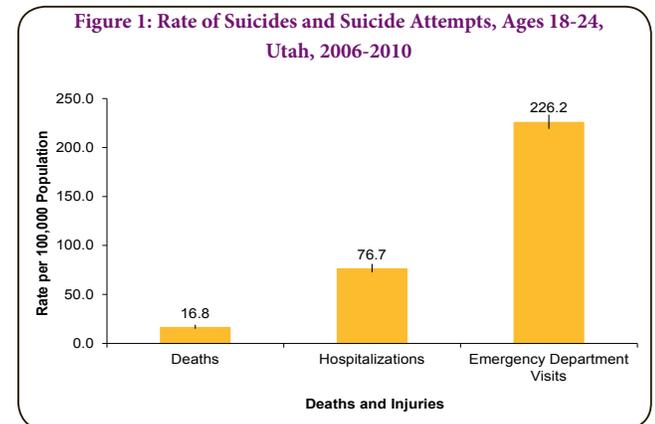
*Suicide attempts include persons who are hospitalized or treated in an ED for self-inflicted injuries.

- **Three** young adults are treated for suicide attempts **every day** in Utah.

All suicide attempts should be taken seriously. Those who survive suicide attempts are often seriously injured and many have depression and other mental health problems.

Utah Trends

The 2010 Utah young adult suicide rate was 16.5 per 100,000 population among 18- to 24-year-olds.¹ Suicide is the second leading cause of death for this age group.¹

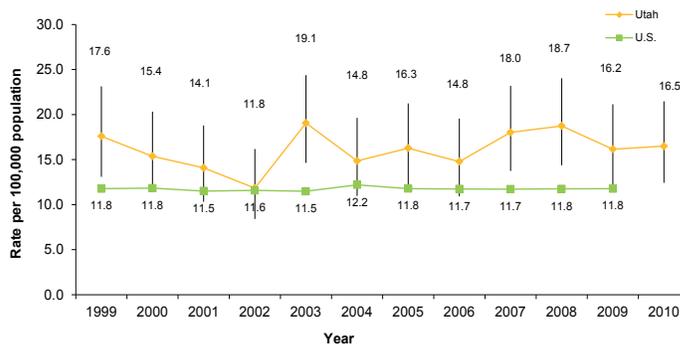


“ My 23-year-old sister was hospitalized twice for suicide attempts. She was in an abusive relationship at the time. It's hard to explain the roller coaster of emotions I went through as I tried to understand her situation. I felt totally alone until I began talking to others about it. It's shocking how many other families have struggled with suicide and abuse, too. ”

Utah and U.S.

Utah's young adult suicide rate has been consistently higher than the national rate for more than a decade (**Figure 2**). Utah had the 11th highest young adult suicide rate in the U.S. for the years 1999-2010³

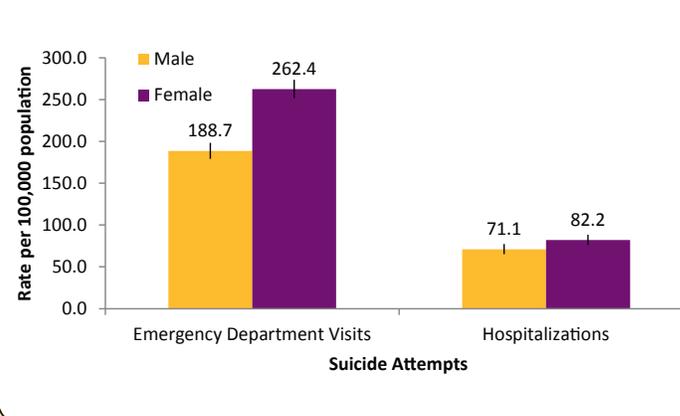
Figure 2: Rate of Suicides by Year, Ages 18-24, Utah and U.S., 1999-2010



Age and Sex

More Utah women attempt suicide than men. In Utah, young adult women had higher ED visit and hospitalization rates for suicide attempts compared to young adult men (**Figure 3**).¹

Figure 3: Rate of Suicide Attempts by Sex, Ages 18-24, Utah, 2006-2010



Young adult men (29.6 per 100,000 population) had a significantly higher rate of completed suicide than young adult females (4.5 per 100,000 population).

Location of Injury

The majority of young adult suicides occurred at a home or an apartment (66.2%), followed by a motor vehicle (10.6%), and natural areas, such as fields or mountains (8.1%).³

The following small areas had significantly higher rates than the state rate:

Highest Young Adult Suicide Rates¹

- TriCounty LHD, Holladay*, and Ben Lomond*

*Insufficient number of cases to meet the UDOH standard for data reliability, interpret with caution.

Highest Young Adult Hospitalization Rates for Suicide Attempts¹

- Ben Lomond, Tooele County, Carbon/Emery Counties, Lehi/Cedar Valley, West Jordan/Copperton (2008 and before), St. George, Downtown Ogden, Holladay, Midvale, Clearfield/Hill AFB, and West Valley West

Highest Young Adult ED Visit Rates for Suicide Attempts¹

- West Valley West, Sandy Center, West Valley East, Murray, Holladay, West Jordan/Copperton (2008 and before), Magna, Midvale, Riverton/Draper, Kearns, Jordan Northeast (2009 and after), Taylorsville, West Jordan

North (2008 and before), Lehi/
Cedar Valley, American Fork/
Alpine, NE Sandy, South Jordan,
and Clearfield/Hill AFB

Method of Injury

Poisoning was the most common method of injury leading to young adult ED visits and hospitalizations for suicide attempts.¹ Firearms use was the most common method of young adult suicide death.¹

Risk Factors

Risk factors for suicide may include:

- Previous suicide attempt(s)
- History of depression or mental illness
- Alcohol or drug abuse
- Easy access to lethal methods (such as guns or pills)
- Stressful life event or loss
- Relationship or school problems
- Family history of suicide or violence

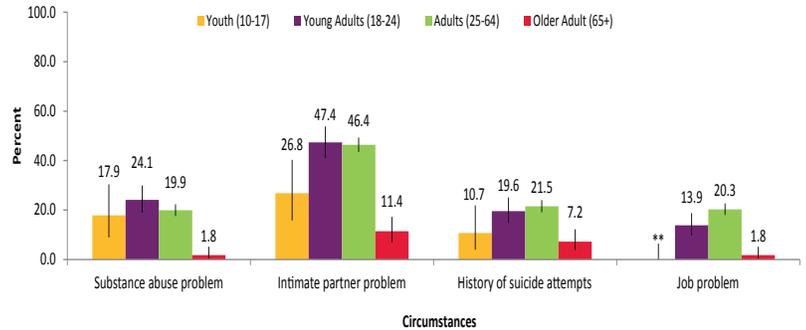
Suicide Death Circumstances

Utah males ages 18 to 24 had significantly higher rates of the following when compared to at least one other age group³ (Figure 4):

- Substance abuse problems

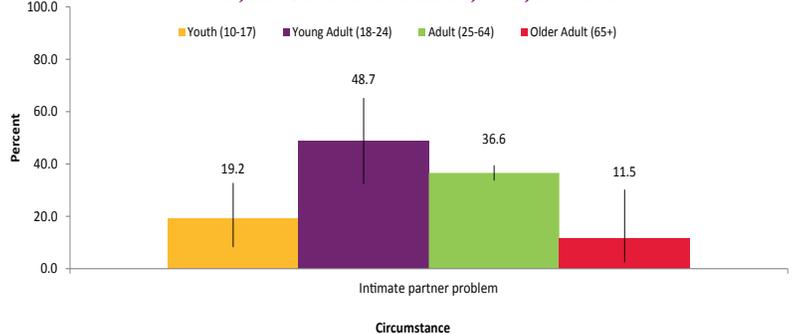
- Intimate partner problems
- Job problems
- Previous suicide attempt(s)

Figure 4: Percentage of Reported Suicide Circumstances by Youth, Young Adult, Adult, and Older Adult Males, Utah, 2006-2010



Utah females ages 18 to 24 had significantly higher rates of intimate partner problems⁴ (Figure 5).

Figure 5: Percentage of Reported Intimate Partner Problems by Youth, Young Adult, Adult, and Older Adult Females, Utah, 2006-2010



Cost

The average total charges per year for ED visits and hospitalizations for suicide attempts was \$4.8 million for Utah young adults.¹

Prevention Tips

- Call for help. Help is available 24 hours a day 7 days a week. If you live in Utah, call the State-wide CrisisLine at **801-587-3000** or call the National Suicide Prevention LifeLine at **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.

Resources

- National Suicide Prevention Lifeline www.suicidepreventionlifeline.org 1-800-273-TALK (8255)
- Utah Poison Control Center <http://uuhsc.utah.edu/poison/> 1-800-222-1222
- 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

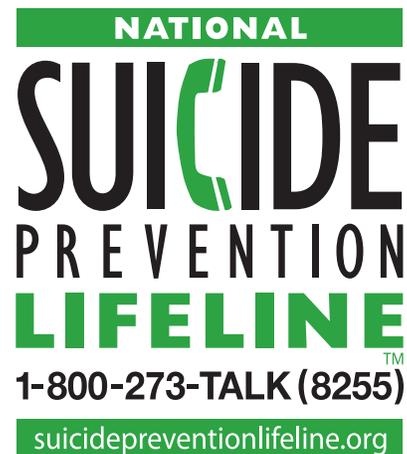
References

- 1 Utah's Indicator Based Information System for Public Health (IBIS-PH), 2006-2010 data [cited 2012 July]
- 2 CDC, Web-based Injury Statistics Query and Reporting System (WISQARS), 2005-2009 data [cited 2012 July]
- 3 Violence and Injury Prevention Program, 2006-2010 Utah Violent Death Reporting System, Utah Department of Health

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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

VIPP is a trusted and comprehensive resource for data and technical assistance related to violence and injury. This information helps promote partnerships and programs to prevent injuries and improve public health.

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