

Suicide in Utah, 2012

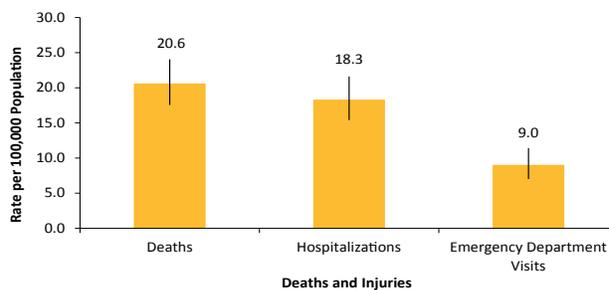
Older Adults (65+ years)

Introduction

An average of 501 Utahns die from suicide¹ and 3,968 Utahns attempt^{*2} suicide each year. Adults 65 years of age and older comprise 9.3% of the Utah population,³ **10.7%** of all suicides¹ and **1.7%** of all suicide attempts.^{*2}

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

Figure 1: Rate of Suicides (2010-2012) and Suicide Attempts (2009-2011), Ages 65+, Utah



One older adult dies as a result of suicide every week in Utah.

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

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 2012 Utah older adult suicide rate was 20.6 per 100,000 population ages 65+.^{1,3} Data from the Utah Behavioral Risk Factor Surveillance System show that males and females 85 years and older had the highest prevalence (8.0% and 12.4%) of reported thoughts of hurting themselves or that they would be better off dead.⁴

“ I suffered a debilitating and life-changing injury and lost much of my independence as a result. I struggled with depression. I never thought I’d struggle with suicidal thoughts. ”



Utah and U.S.

Utah's older adult suicide rate has frequently been higher than the national rate (Figure 2). Utah had the 25th-highest older adult suicide rate in the U.S. for the years 2008-2010.⁵

Figure 2: Rate of Suicides by Year, Ages 65+, Utah and U.S., 1999-2012

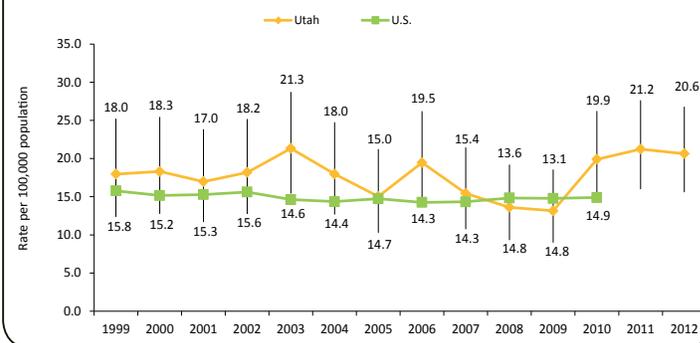
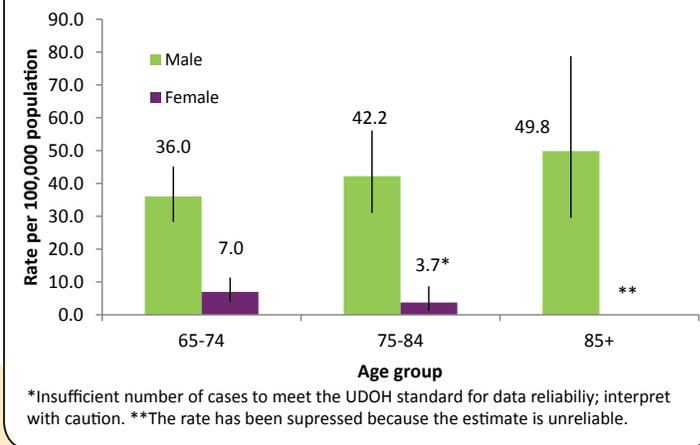


Figure 3: Rate of Suicides by Age Group and Sex, Ages 65+, Utah, 2010-2012



Age and Sex

Older adult males had a significantly higher suicide rate compared to older adult females (39.3 and 4.9 per 100,000 population ages 65+). Older adult males also had significantly higher suicide rates compared to older adult females in every age group (Figure 3).¹

Location of Injury

The majority of older adult suicides occurred at a residence (78.8%), followed by a motor vehicle (10.2%).⁵

The following small areas had significantly higher rates of suicide, hospitalization, and ED visits for suicide attempts than the state rate:

Highest Older Adult Suicide Rates¹

- South Salt Lake*, Other Southwest District*, and Washington County (Other)

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

Highest Older Adult Hospitalization Rates for Suicide Attempts²

- No small area had a significantly higher older adult hospitalization rate for suicide attempts compared to the state rate.

Highest Older Adult ED Visit Rates for Suicide Attempts²

- No small area had a significantly higher older adult ED visit rate for suicide attempts compared to the state rate.

Method of Injury

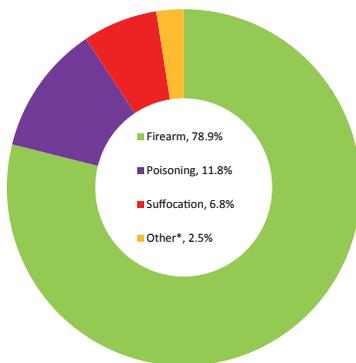
Use of a firearm was the most common method of suicide deaths for Utah older adults, followed by poisoning and then suffocation (Figure 4).¹

Risk Factors

Risk factors for suicide among older adults may include:

- Physical health problem
- Easy access to lethal methods (such as pills or firearms)
- Stressful life event or loss

Figure 4: Percent of Older Adult Suicides by Method of Injury, Ages 65+, Utah, 2010-2012

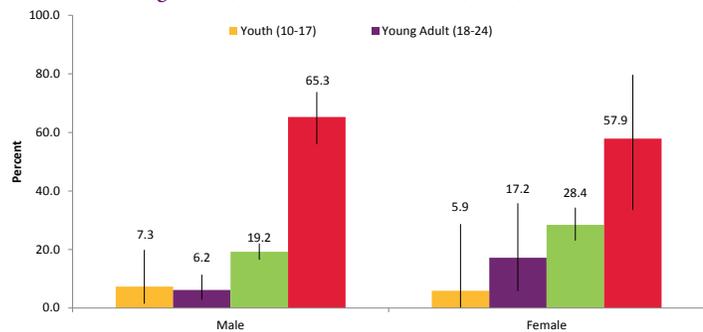


*Includes Cut/Pierce, Fall, Other Specified and Unspecified

Suicide Death Circumstances⁶

Utah older adults had significantly higher rates of physical health problems when compared to at least one other age group (Figure 5).

Figure 5: Percentage of Reported Physical Health Problems by Youth, Young Adults, Adults, and Older Adults, Utah, 2009-2011



Cost

The average total charge per year for ED visits and hospitalizations for suicide attempts was \$1.1 million for Utah older adults.²

Prevention Tips

- Call for help. Help is available 24 hours a day 7 days a week. If you live in Utah, call the **UNI Crisisline and Mobile Crisis Outreach Team** 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 medications to prevent a suicide attempt.



Resources

- 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
- Hope 4 Utah hope4utah.com

References

- 1 Utah Death Certificate Database, Office of Vital Records and Statistics, Utah Department of Health: 2010-2012 data queried via Utah's Indicator-Based Information System for Public Health (IBIS-PH) [cited 2014 January].
- 2 Utah Inpatient Hospital Discharge Data, Office of Health Care Statistics; Utah Emergency Department Encounter Database, Bureau of Emergency Medical Services, Utah Department of Health; 2009-2011 data queried via Utah's Indicator-Based Information System for Public Health (IBIS-PH) [cited 2014 January].
- 3 Population Data: National Center for Health Statistics (NCHS) through a collaborative agreement with the U.S. Census Bureau, IBIS Version 2012; data queried via Utah's Indicator-Based Information System for Public Health (IBIS-PH) [cited 2014 January].
- 4 U.S. Centers for Disease Control and Prevention (CDC), Web-based Injury Statistics Query and Reporting System (WISQARS), 2008-2010 data [cited 2014 January].
- 5 Utah Violent Death Reporting System, Violence and Injury Prevention Program, Utah Department of Health 2009-2011.

Last updated: May 2014

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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