Introduction

An average of 402 Utahns die from suicide and 4,152 Utahns attempt suicide each year. Youth ages 10-17 comprise 12.4% of the Utah population, and:

- 3.7% of all suicides in Utah, and
- 15.7% of all suicide attempts* in Utah.

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

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

- Two youth 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.

In 2011, Utah high school students reported:

- 26.7% felt sad or hopeless
- 14.3% seriously considered attempting suicide
- 12.4% made a suicide plan
- 7.2% attempted suicide one or more times
- 3.1% of students suffered an injury, poisoning, or an overdose that had to be treated by a doctor or nurse due to a suicide attempt.

We had no clue that our son was having suicidal thoughts. We didn’t know how much he was hurting inside… the pain, depression, loneliness, and worthlessness he felt. There is no healing for the families left behind.

Utah Trends

The 2010 Utah youth suicide rate was 6.1 per 100,000 population among 10- to 17-year-olds. Suicide is the second leading cause of death for this age group.
Utah and U.S.
Utah’s youth suicide rate has been consistently higher than the national rate for more than a decade (Figure 2). Utah had the 17th highest teen suicide rate in the U.S. for the years 1999-2010.3

Age and Sex
Suicide rates increase significantly after age 14 (Figure 3).1

Location of Injury
The majority of youth suicides occurred at a home or an apartment (79.3%), followed by natural areas, such as fields or mountains (4.9%).4

Davis County had the highest percentage of 10th and 12th grade students who had made a suicide plan in the past year (10.9%).5

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

Highest Youth Suicide Rates1
- Clearfield/Hill AFB*

*Insufficient number of cases to meet the UDOH standard for data reliability, interpret with caution.
Highest Youth Hospitalization Rates for Suicide Attempts
- Carbon/Emery Counties, Magna, Kearns, and Clearfield/Hill AFB

Highest Youth ED Visit Rates for Suicide Attempts
- Brigham City, West Valley East, Magna, Midvale, West Jordan/Copperton (2008 and before), Riverdale, Kearns, and West Valley West

Method of Injury
Poisoning was the most common method of injury leading to youth ED visits and hospitalizations for suicide attempts. Suffocation was the most common method of suicide death among youth.

Risk Factors
Risk factors for suicide may include:
- 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

Suicide Death Circumstances
Utah males ages 10 to 17 had significantly higher rates of the following when compared to at least one other age group (Figure 5):
- Other relationship problems ("Other" is anyone who is not a boy/girlfriend or intimate partner)
- School problems

Utah females ages 10 to 17 had significantly higher rates of other relationship problems (Figure 6). "Other" is anyone who is not a boy/girlfriend or intimate partner.
Youth Suicide in Utah, 2006-2010

Cost
The average total charges per year for ED visits and hospitalizations for suicide attempts was $2.2 million for Utah youth.¹

Prevention Tips

• Call for help. Help is available 24 hours a day 7 days a week. If you live in Utah, call the Statewide 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)

• 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]
5 Prevention Needs Assessment Survey, 2011, Utah Department of Human Services

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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.