People's Health

Outcomes • Planning • Evaluation



Know the facts: Local suicide rate doubles state rate

DID YOU KNOW?

- Suicide is now the 10th leading cause of death for Americans and the second leading cause of death among teenagers (15-19).
- Factors that can put a person at risk for suicide include history of previous attempts, family history, alcohol or drug abuse, depression or other mental illness, stressful life event or loss, and easy access to lethal methods.
- Suicide is often related to depression, which can be treated with medicine and psychotherapy/counseling.
- Alcohol increases impulsivity, which is a significant risk factor for suicide. Intoxicated people are more likely to attempt suicide using more lethal methods.
- From 2017-2019 in Shasta County, 80% of gun deaths were suicides and 46% of all suicides were completed with firearms.

Contributing Staff:

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Find more health information at
www.shastahhsa.net. Click on
"Health and Safety," then "Current
Health Concerns."
Questions? Email
shastahealthdata@co.shasta.ca.us

WHERE WE WERE (BASELINE):

20.4 suicides per $100,\!000$ population during 1999-2001 (3-year average annual age-adjusted rate) in Shasta County.

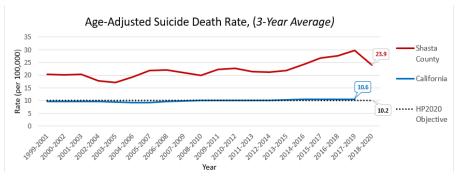
WHERE WE ARE:

23.9 suicides per 100,000 population during 2018-2020 (3-year average annual age-adjusted rate, 2020 data is preliminary) in Shasta County.

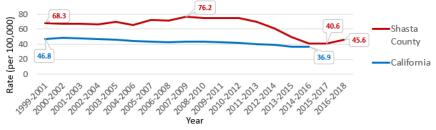
WHERE WE WANT TO BE:

The Healthy People 2020 goal is to reduce suicides to no more than 10.2 per 100,000 population (age-adjusted rate).

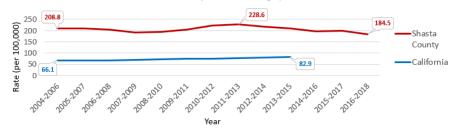
DEFINITION: Number of suicides and suicide rate (age-adjusted deaths per 100,000 population, ICD-10 codes U03.0, U03.9, X60-X84, and Y87.0, and suicide listed as the manner of death on the death certificate), and number of suicide attempts resulting in hospitalization and hospitalization rate for Shasta County residents (ICD-9 codes 950.0-958.9), 1999-present.



Age-Adjusted Rate of Non-Fatal Suicide Attempts that result in a Hospitalization, (3-Year Average)



Age-Adjusted Rate of Non-Fatal Suicide Attempts that Result in an ER Visit, (3-Year Average)

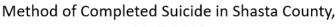


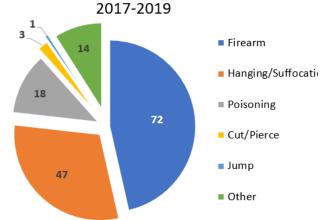
KEY POINTS:

- In 2016, there were over 500,000 emergency department visits for self-inflicted injuries and 44,965 deaths due to suicide in the U.S., 51% of them by firearms.
- California's suicide death rates have slowly risen from 9.6 per 100,000 in 1999 to 10.6 in 2019.
- In Shasta County, the Age-Adjusted Suicide Death Rate increased from 20.4 in 1999-2001 to 23.9 per 100,000 in 2018-2020. Hospitalization rates decreased between 1999-2001 and 2014-16, however, from 68.3 to 45.6 per 100,000 and ER visit rates decreased from 204.3 to 184.5.

PRIMARY PREVENTION ACTIVITIES:

- Promote healthy relationships with family and friends, and help people who are at risk of suicide connect with community activities and organizations to prevent social isolation.
- Work to eliminate the stigma of mental illness and increase the percentage of clinically depressed people who receive treatment.
- Reduce access to firearms by depressed people through safe firearm storage, including use of trigger locks, gun cabinets, separation of ammunition from an unloaded firearm, and/or temporarily storing firearms at a responsible relative's or friend's home.
- Train health care providers to more effectively identify and address depression that may lead to suicide attempts, particularly in the elderly, among whom depression may not be as obvious.
- Reduce substance abuse (particularly alcohol) and incidence of chronic disease among seniors.
- Advocate for crisis intervention services.
- Learn the warning signs of suicide and appropriate interventions, such as those taught in Question, Persuade, Refer (QPR) classes.
- Get involved with local suicide prevention efforts—visit www.shastasuicideprevention.com.





From the desk of Karen Ramstrom, DO, MSPH Shasta County Public Health Officer



Suicide is an important public health problem that does not get enough attention, in part because of the social stigmatization and blaming of victims and their families and friends. This might lead to underreporting of suicide attempts and inadequate healthcare for people who attempt suicide. We can all learn to recognize the warning signs, including hopelessness, substance abuse, anger, anxiety, withdrawal and mood changes. Some factors that can help protect a person from suicidal thoughts and behavior include skills in problem solving, easy access to mental health facilities, family and community support, and cultural beliefs that discourage risky behaviors and suicide.

Suicide prevention is everybody's business. To your health!

Data source: Shasta County Public Health; California Department of Public Health, Office of Vital Statistics and Office of Statewide Health Planning and Development (OSHPD); CDPH Vital Statistics Death Statistical Master Files; Vital Records Business Intelligence System (VRBIS); http://epicenter.cdph.ca.gov; https://wonder.cdc.gov; California Department of Finance Demographic Research Unit; Centers for Disease Control and Prevention; Healthy People 2020; American Association of Suicidology.