



SUICIDE AMONG MEN IN MIDDLE YEARS IN WA



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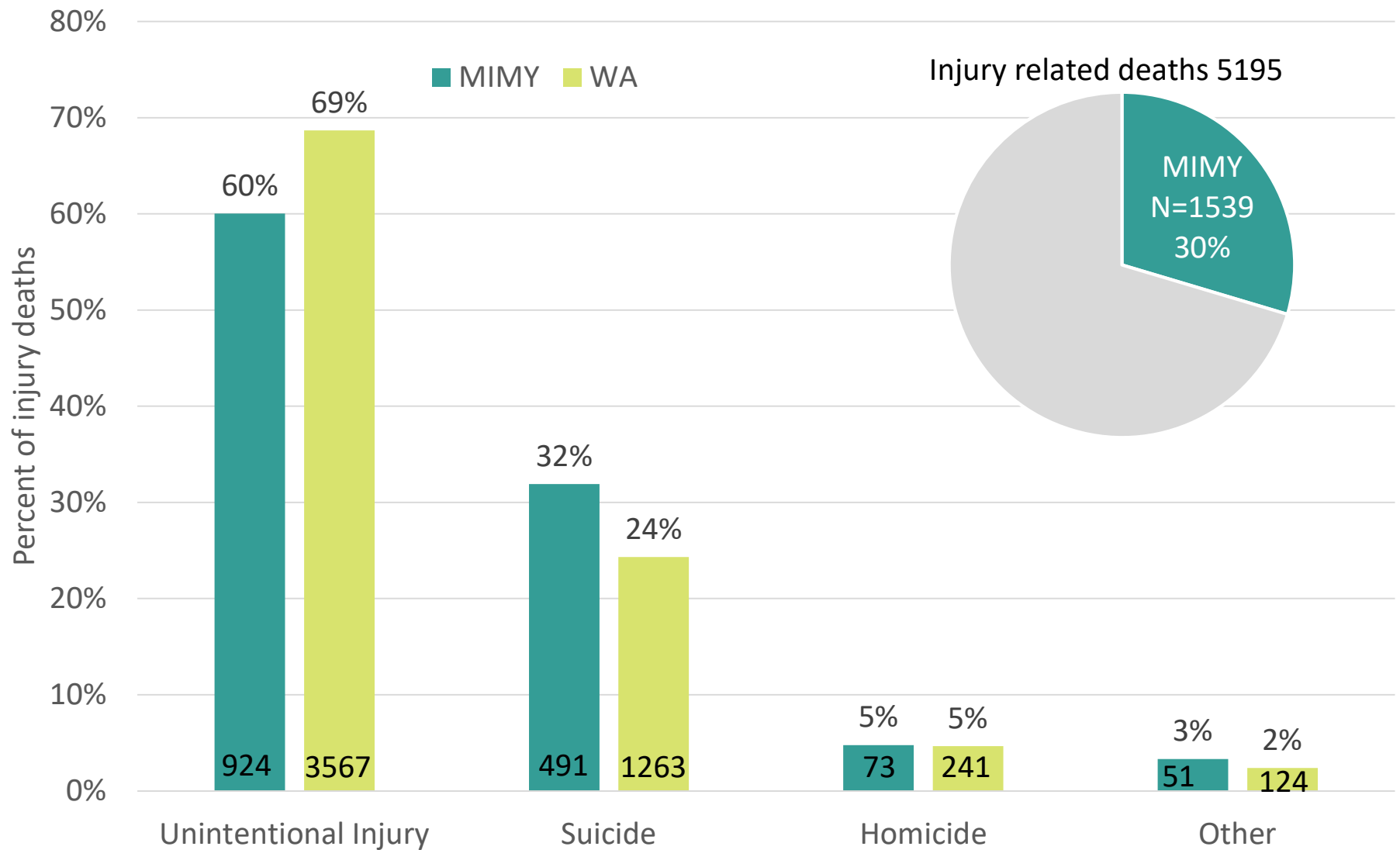


MIMY Suicide Data in Washington state

Data Sources

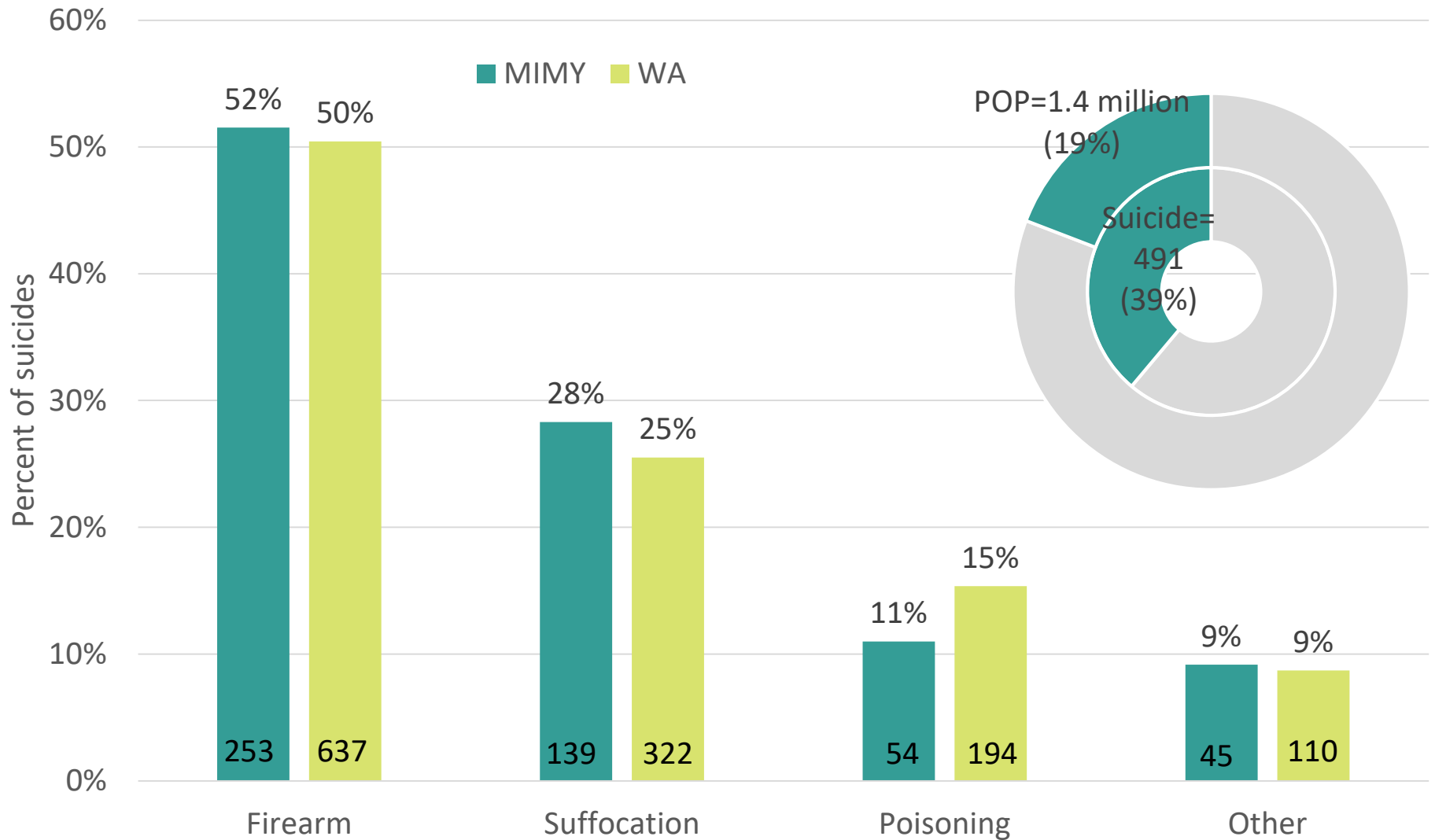
- WA-Death certificates
- WA- Violent Death Reporting System (WA-VDRS)
 - All WA-VDRS data includes injuries related to violent deaths, sustained in Washington state, regardless of residency and location of death.

Injury related deaths (N=5195) in WA, 2019



Source: WA death certificates-CHAT

Suicide (n=1263) by means in WA 2019

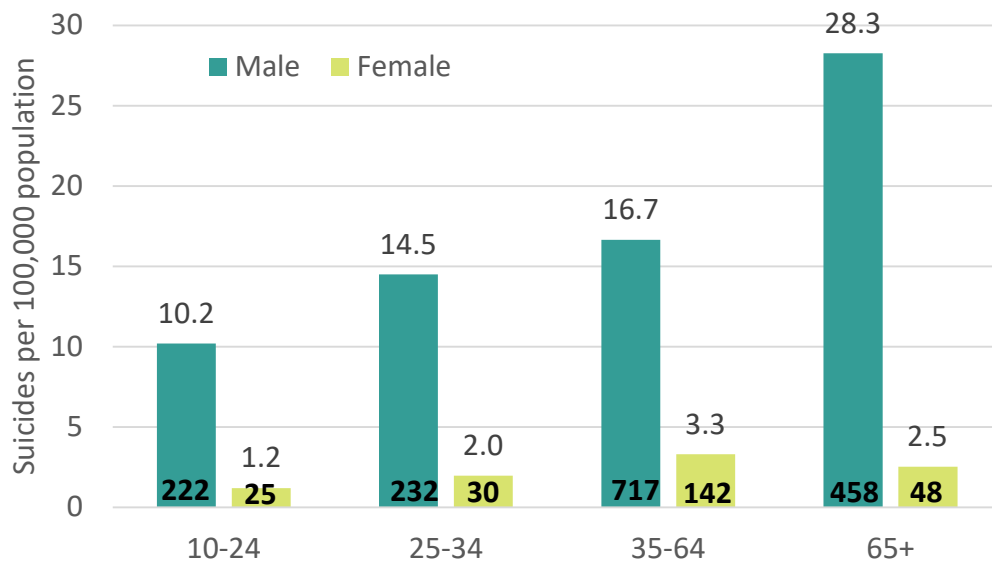


Source: WA death certificates-CHAT

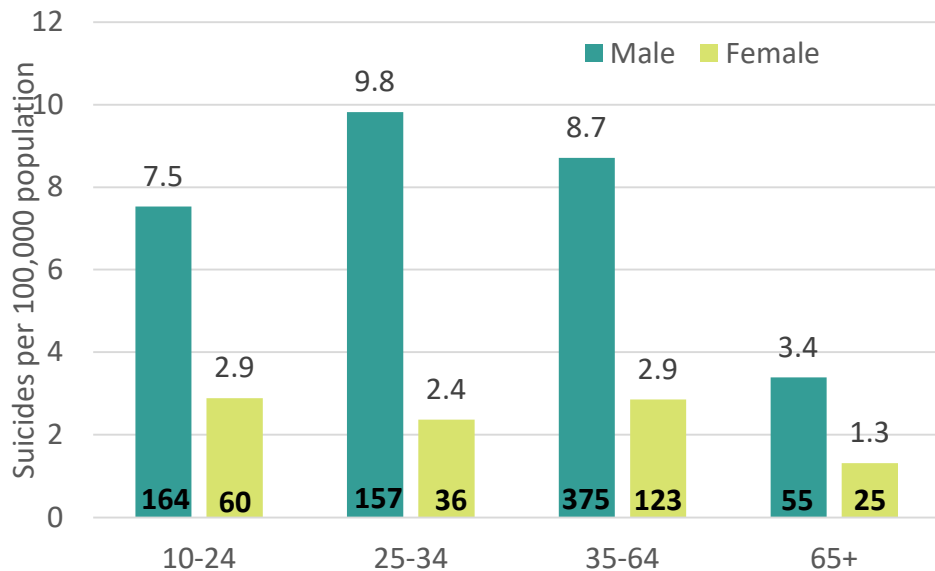
Suicide rate and count by age group and sex among the three most common means in WA 2017-2019

Source: WA death certificates-CHAT

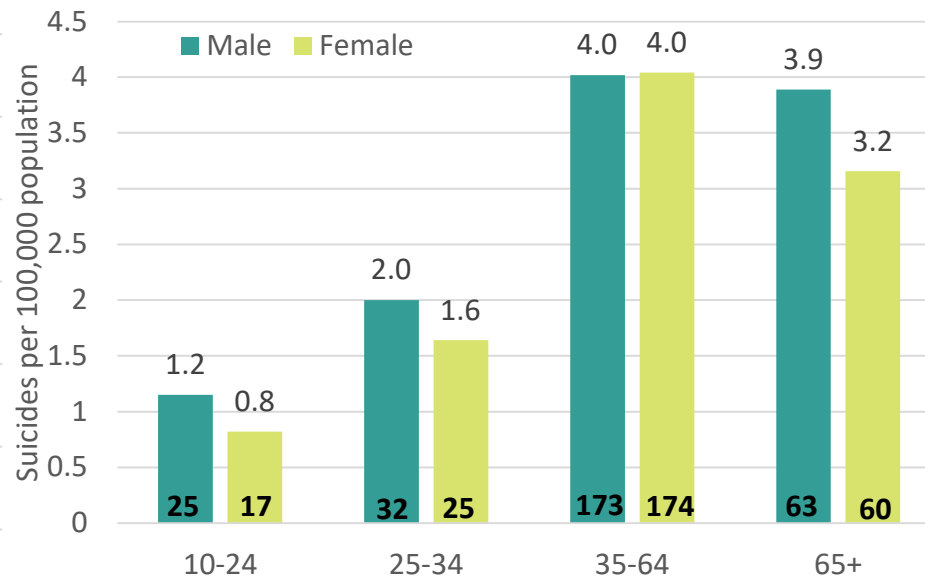
Firearm-related Suicide



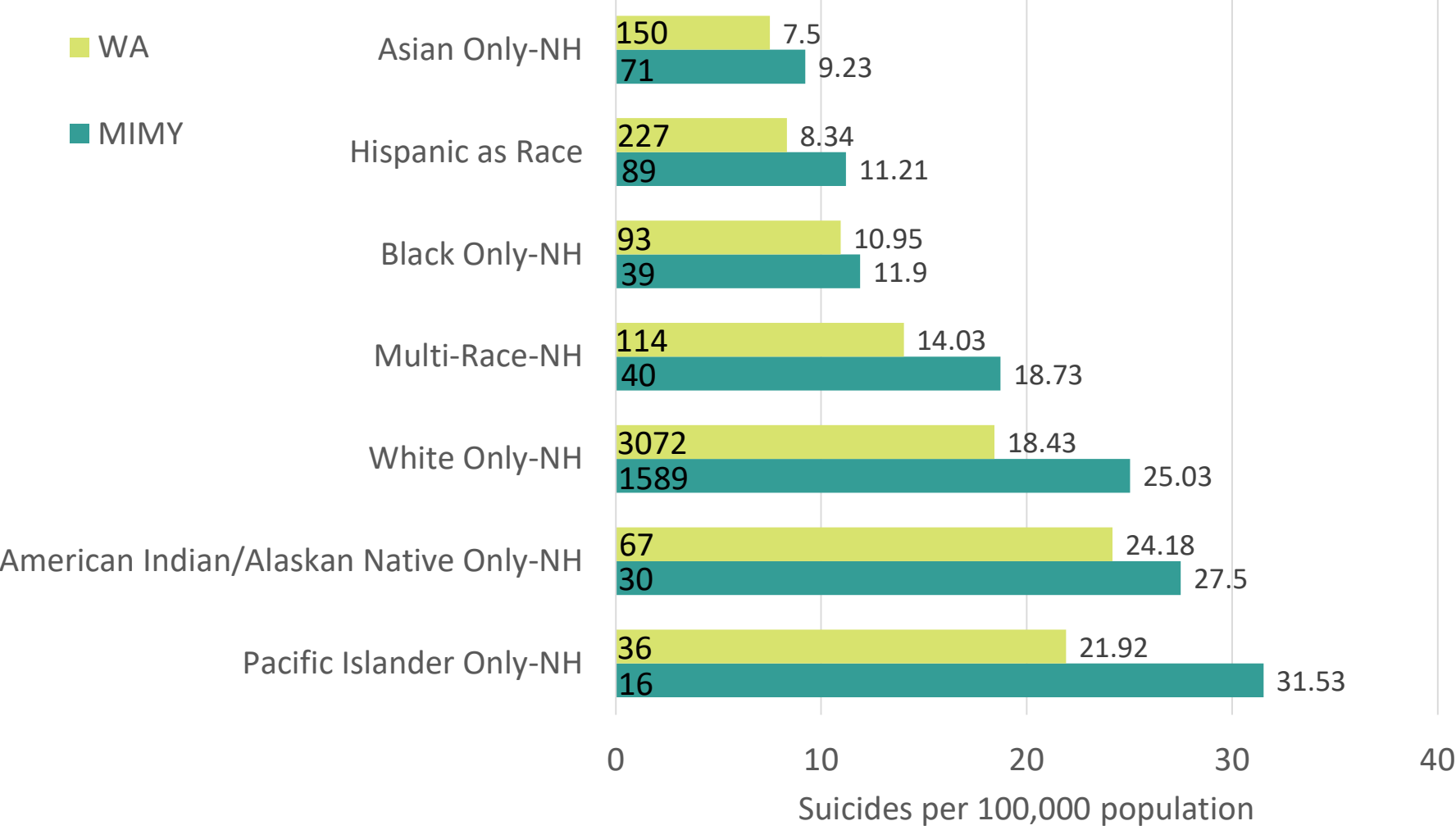
Suffocation-related Suicide



Poisoning-related Suicide

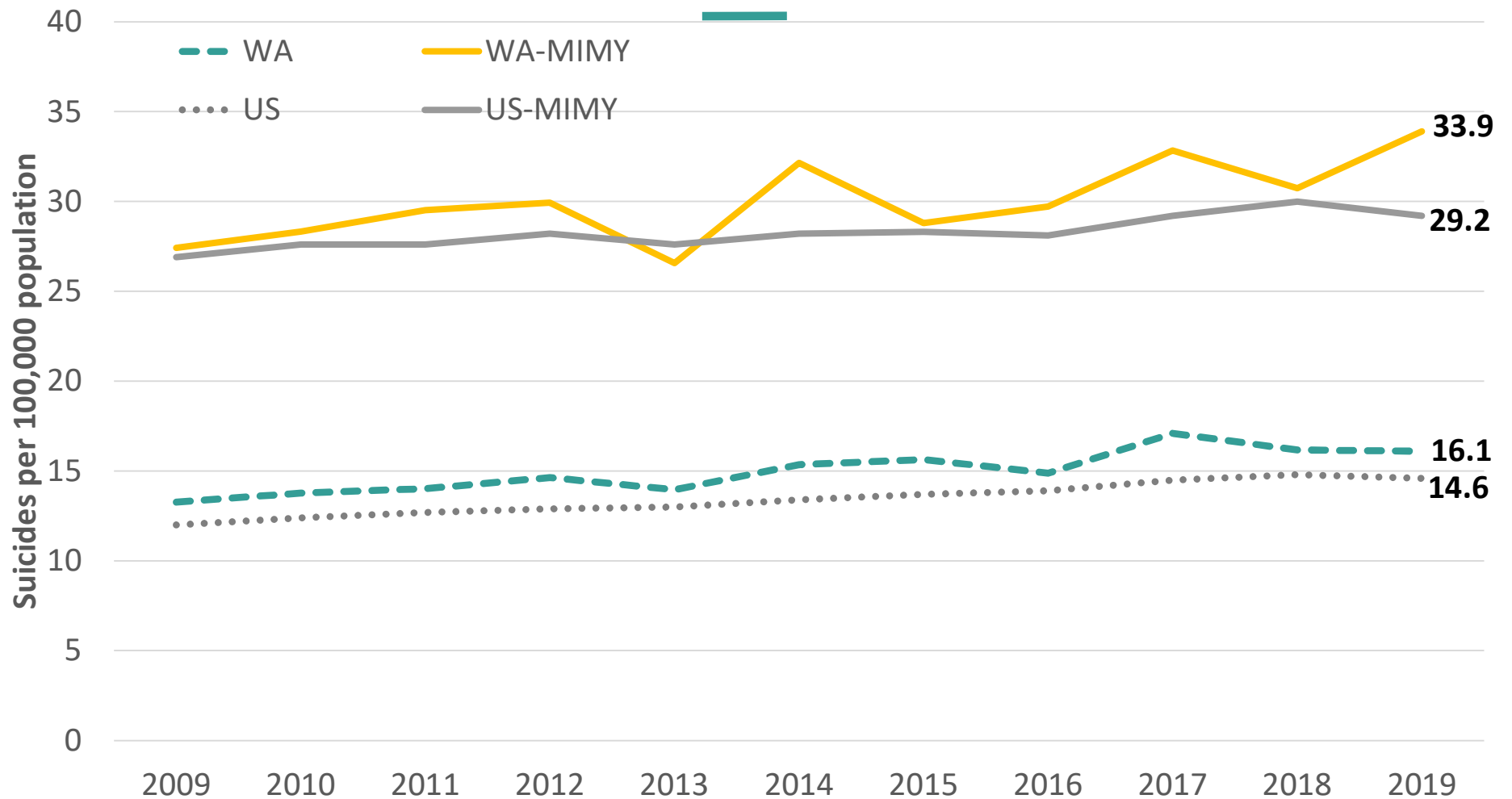


Suicide rate and count by race/ethnicity in WA 2017-2019



Source: WA death certificates-CHAT
 *: the rate is not reliable with the deaths less than 17.
 NH: Non-Hispanic

Suicide rate in WA, US, and in MIMY, 2009-2019



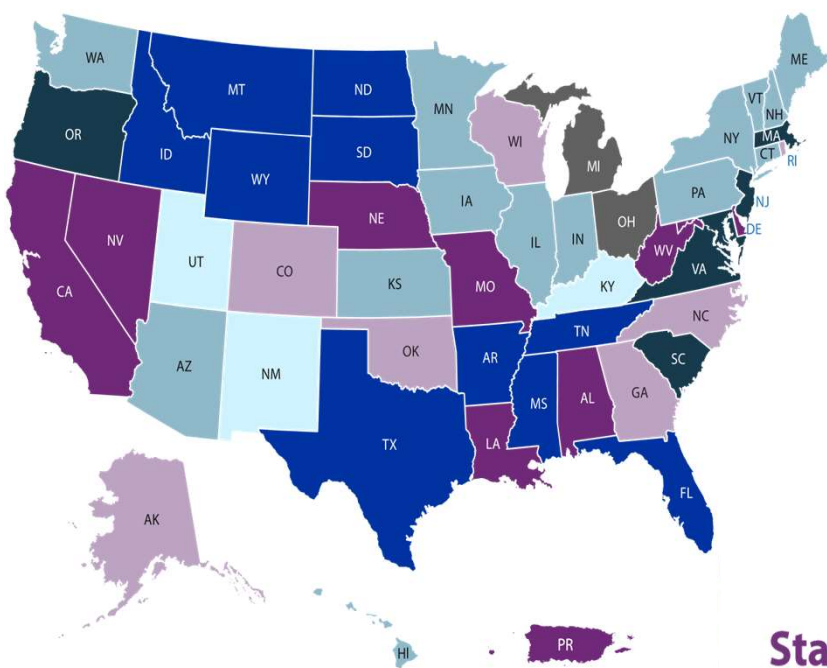
Source: WA death certificates-CHAT

CDC WONDER

Take home messages-suicide in MIMY

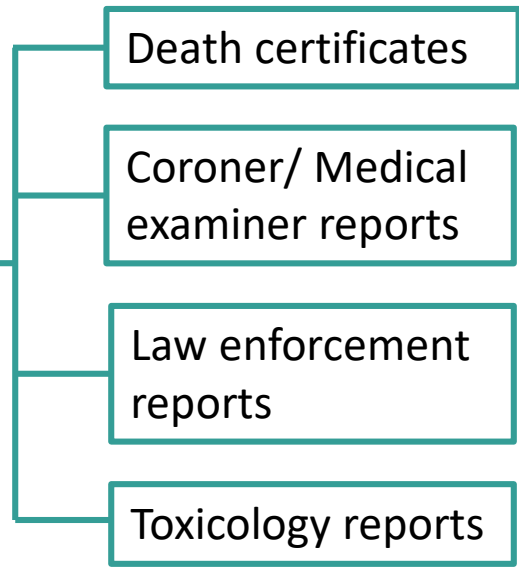
- MIMY represent **20%** of population, and account for **40%** of all suicides in WA.
- The suicide rate in MIMY has remained **high** for more than 10 years (34 suicides per 100,000 in 2019).
- More than **50%** of the suicide were **firearm** related.
- The suicide rate in MIMY was **highest** among **Non-Hispanic Pacific Islander** and **AIAN**.

National Violent Death Report System (NVDRS), WA-VDRS



NVDRS

- Unintentional firearm death
- Suicide
- Homicide
- Legal intervention
- Undetermined death

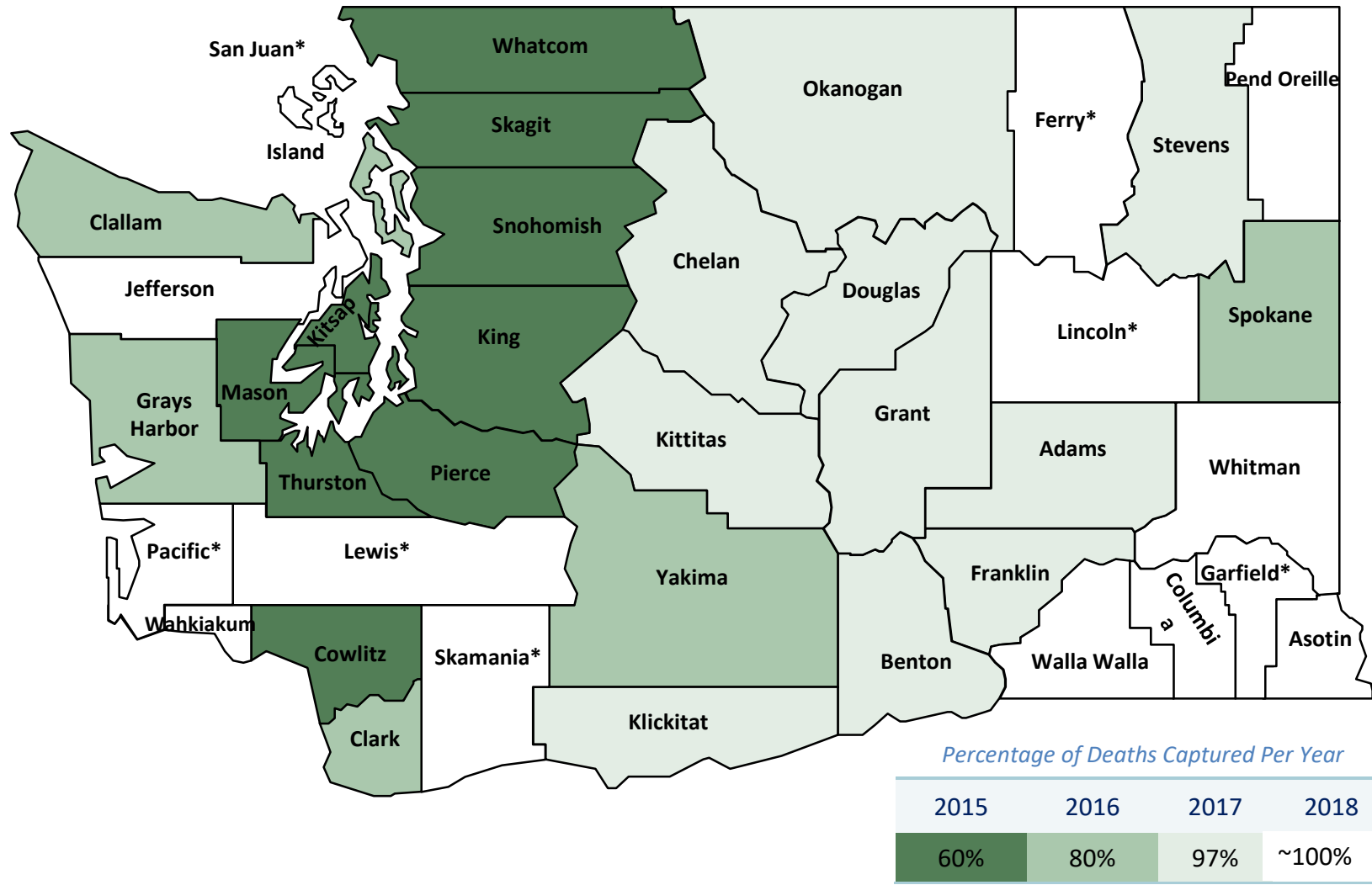


States added by year:

- 2002: MA, MD, NJ, OR, SC, VA
- 2003: AK, CO, GA, NC, OK, RI, WI
- 2004: KY, NM, UT
- 2009: MI, OH
- 2014: AZ, CT, HI, IA, IL, IN, KS, ME, MN, NH, NY, PA, VT
- 2016: AL, CA, DE, DC, LA, MO, NE, NV, Puerto Rico, WV
- 2018: AR, FL, ID, MS, MT, ND, SD, TN, TX, WY

WA → **WA-VDRS**

WA-Violent Death Reporting System Implementation Timeline

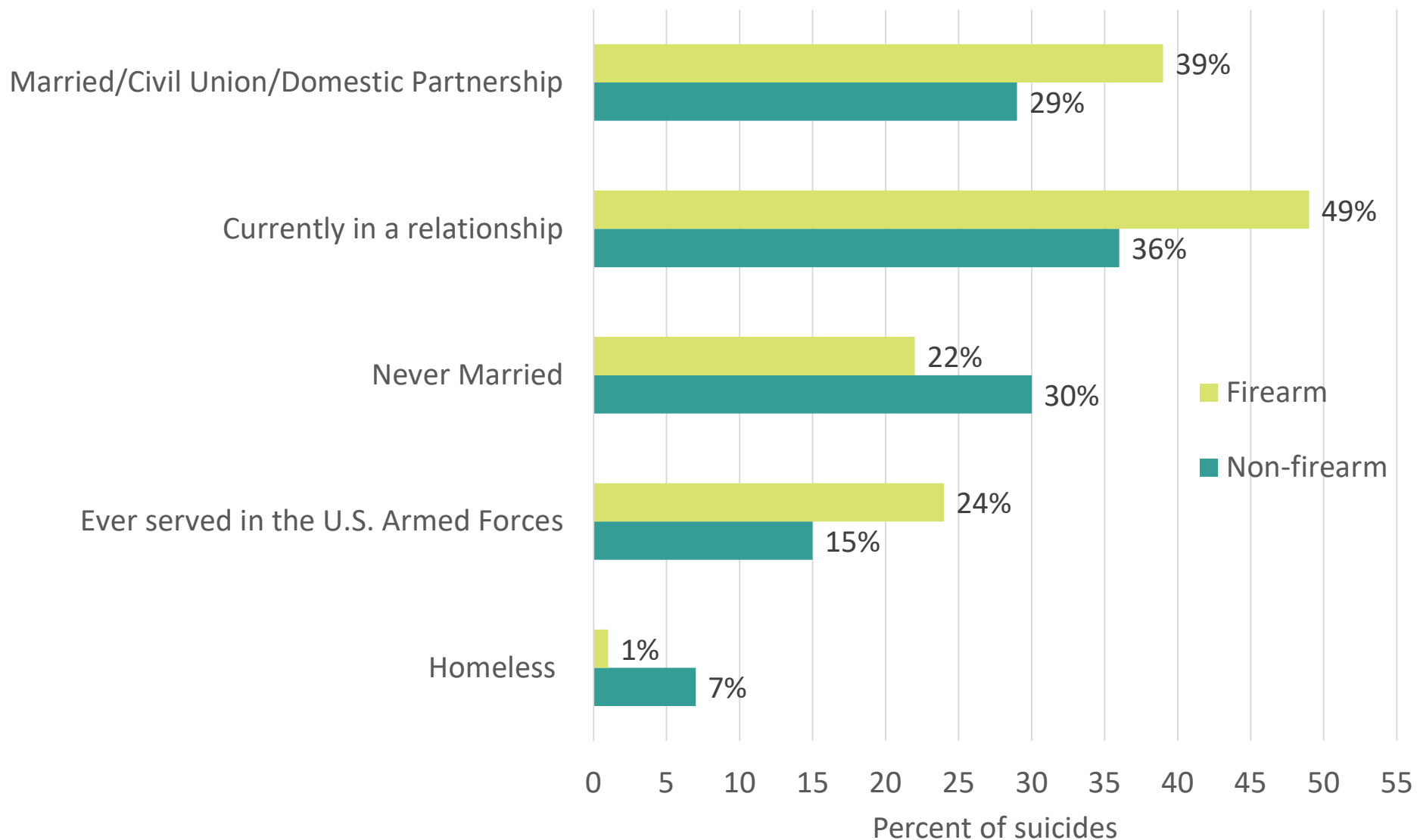




SUICIDE DATA, WA-VDRS 2015-2018

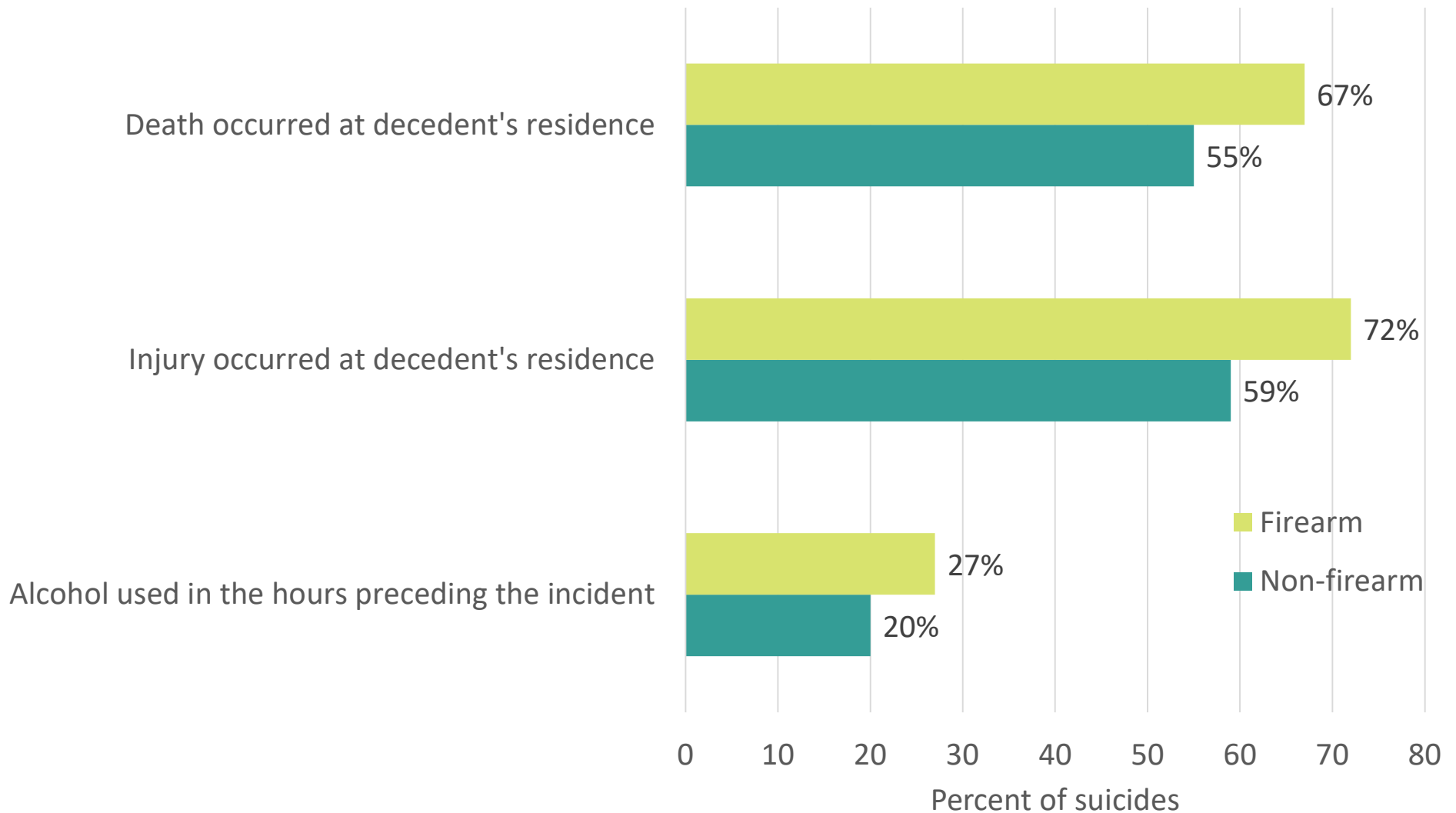
ALL WA-VDRS DATA INCLUDES INJURIES RELATED TO VIOLENT DEATHS, SUSTAINED IN WASHINGTON STATE, REGARDLESS OF RESIDENCY AND LOCATION OF DEATH.

Who?, Marital status, veteran, homeless in MIMY, 2015-2018



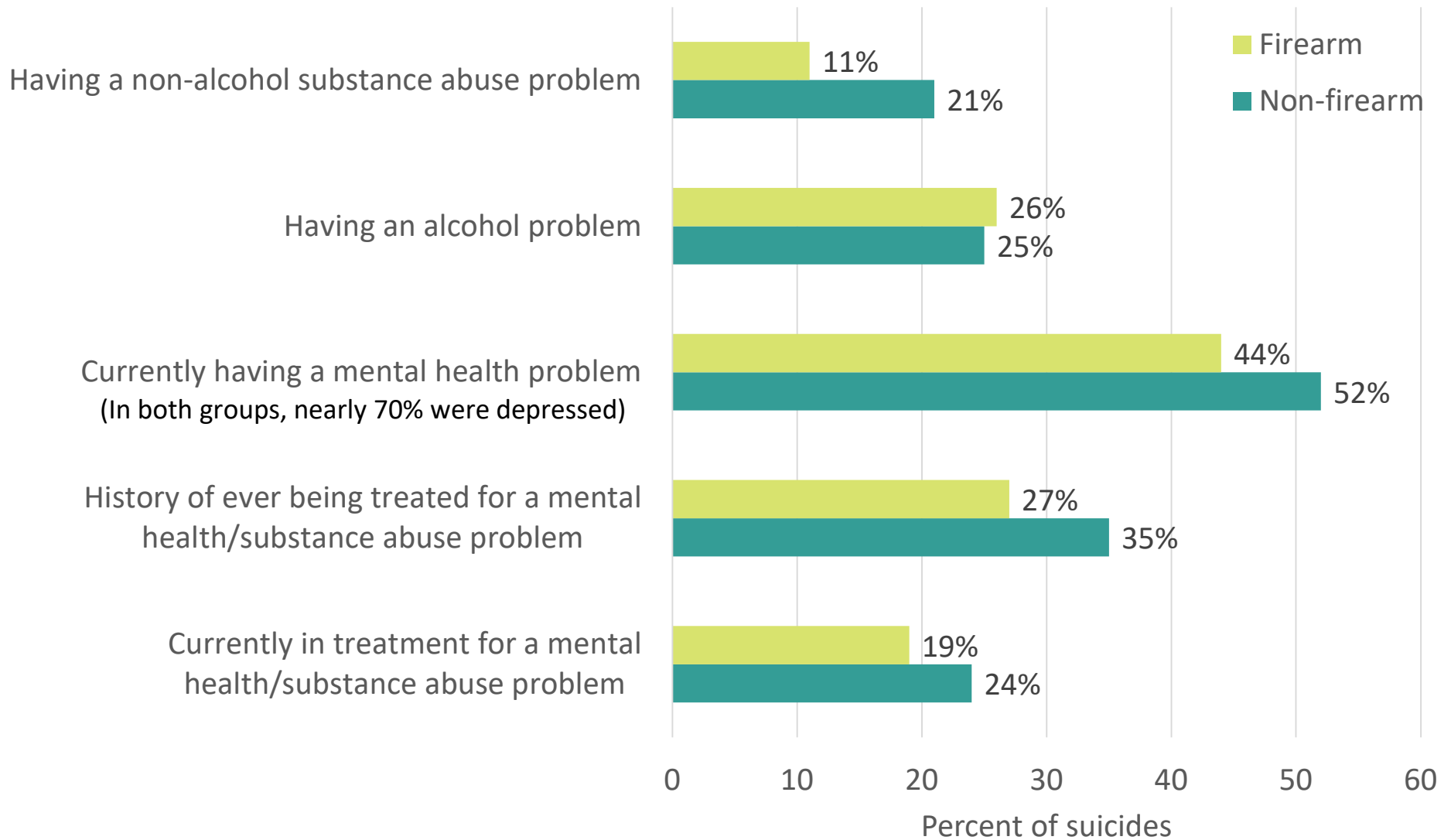
Source: WA-VDRS

Where? Death and injury at decedent's residence, alcohol used before the incident in MIMY, 2015-2018



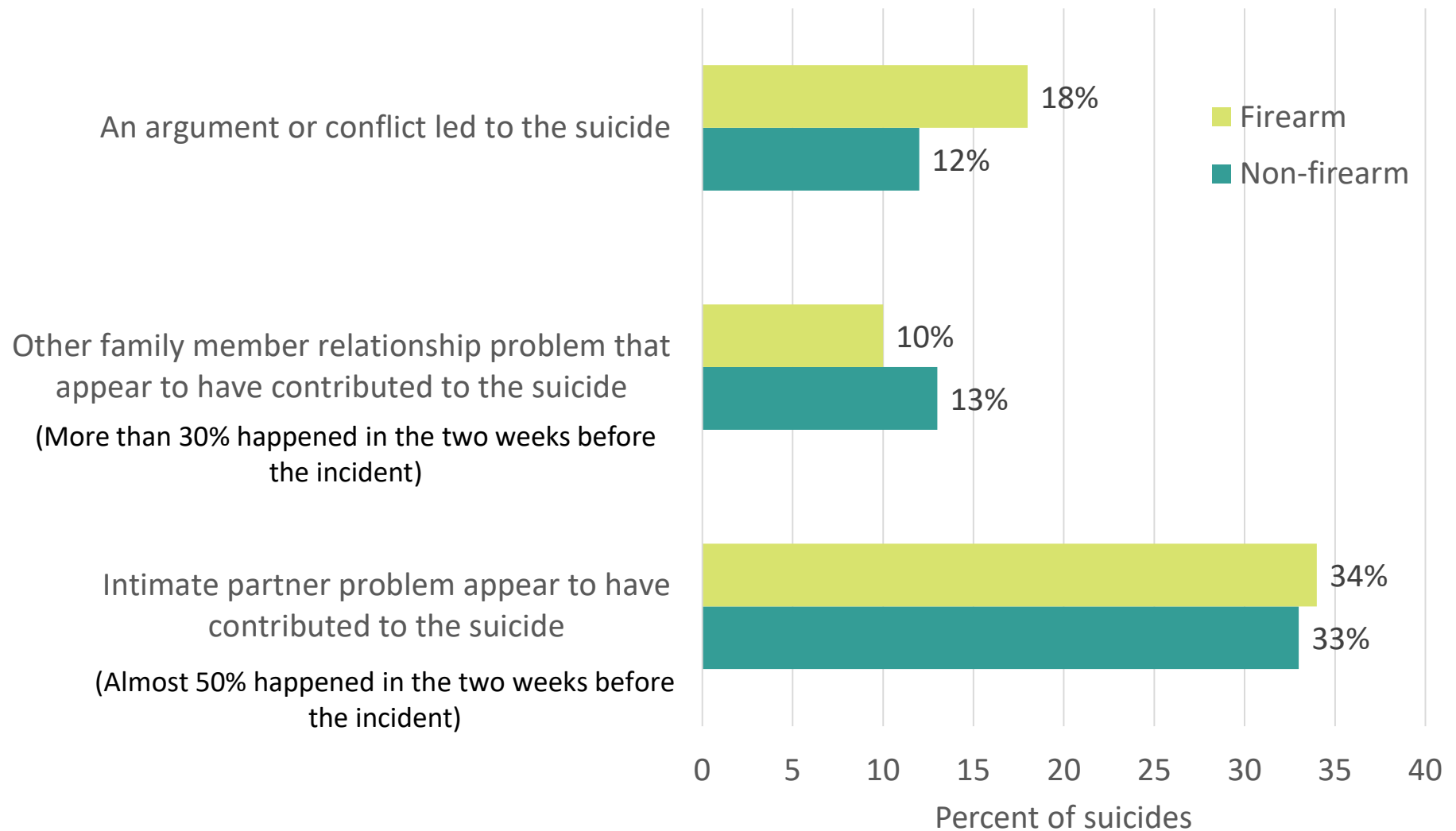
Source: WA-VDRS

Why? Mental/substance use problems in MIMY, 2015-2018



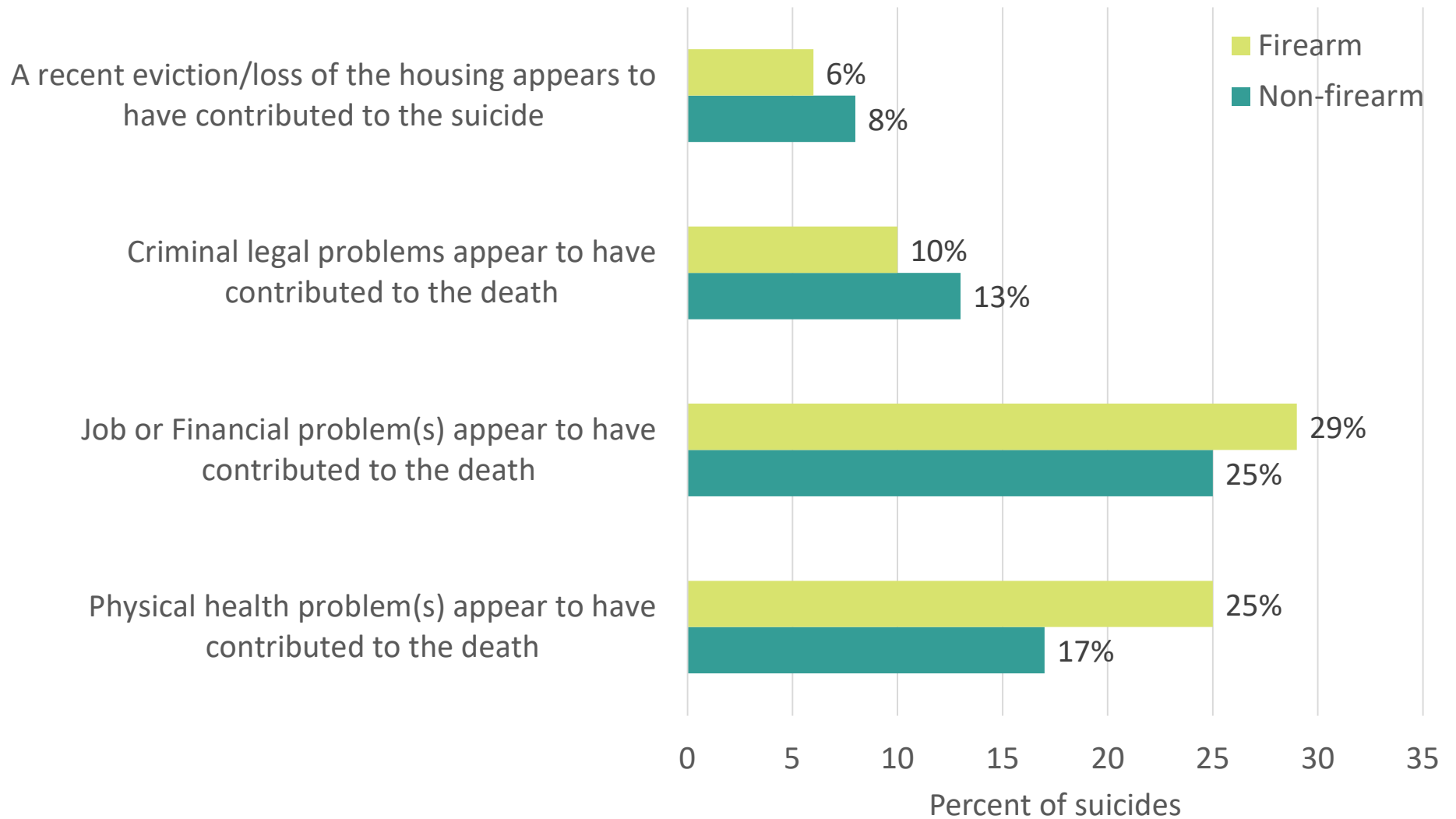
Source: WA-VDRS

Why? Family member problems, conflict contributed to the death in MIMY, 2015-2018



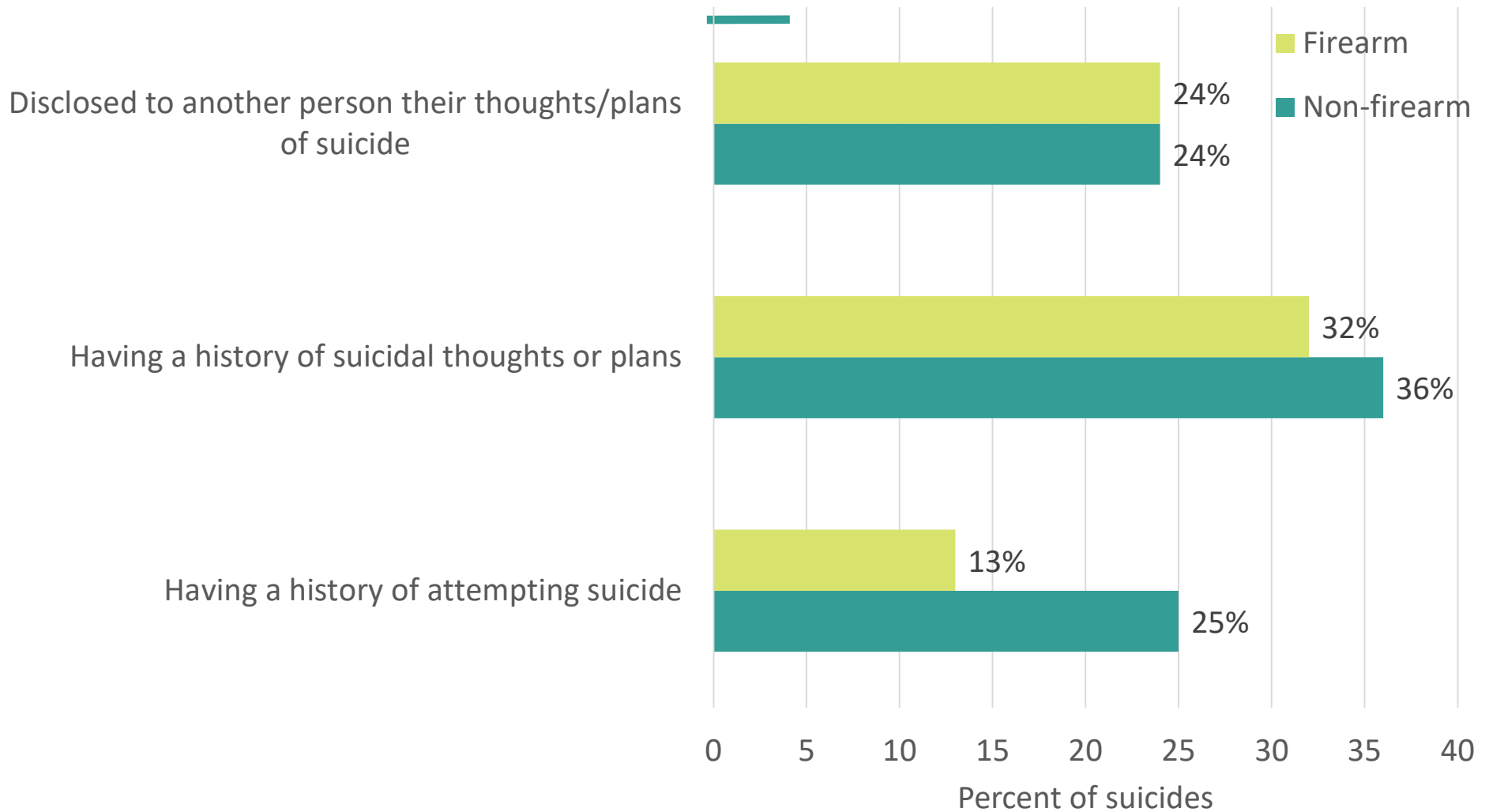
Source: WA-VDRS

Why? Financial/job, physical health, legal, housing problems contributed to the death in MIMY, 2015-2018



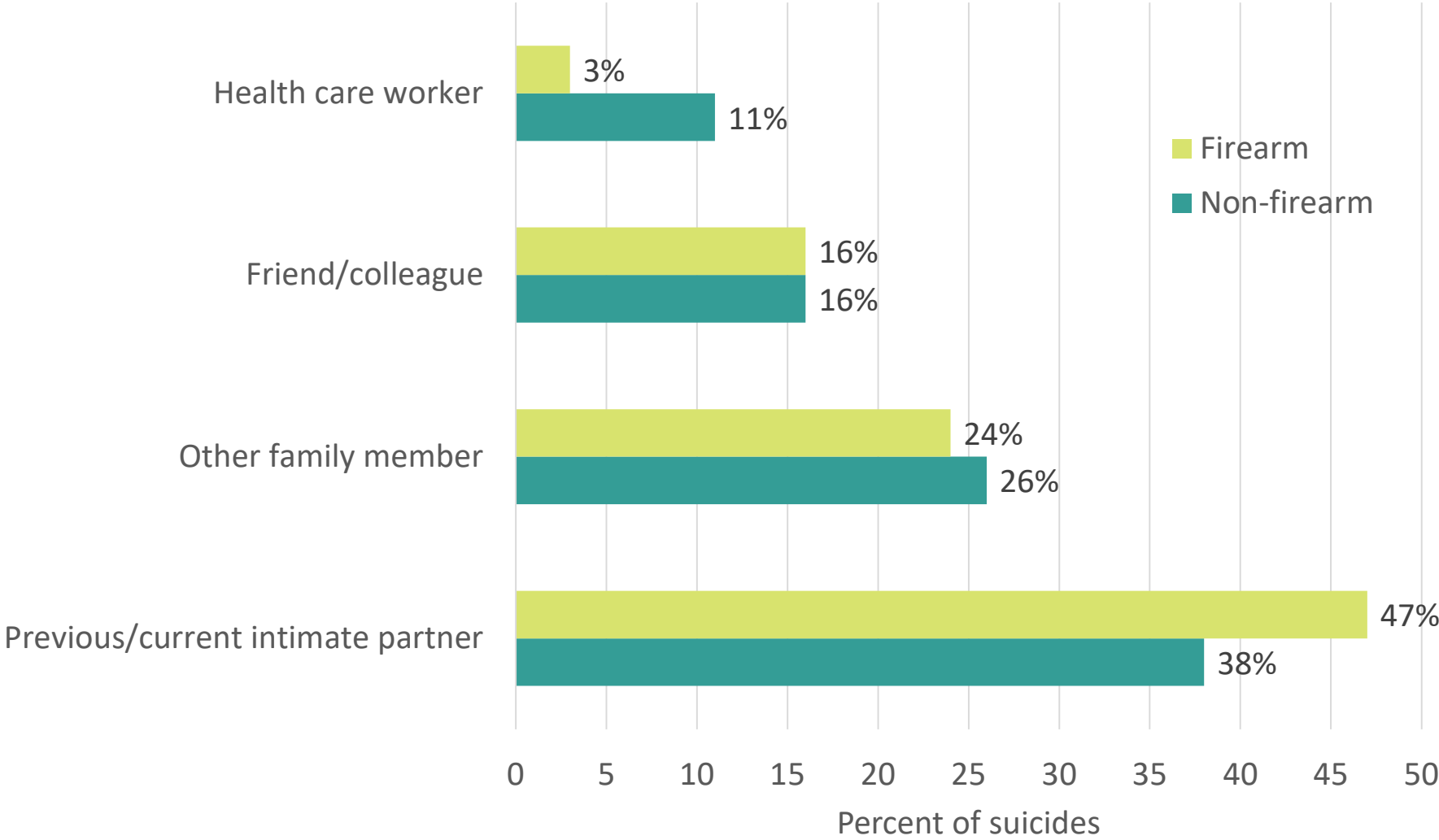
Source: WA-VDRS

Why? History of suicide attempt, suicidal ideation in MIMY, 2015-2018



Source: WA-VDRS

Why? 24% of Decedents disclosed suicide intention in MIMY, 2015-2018



Source: WA-VDRS

WA-VDRS MIMY Suicide Take home message

❖ Circumstances present in firearm-related suicides vs. non-firearm related suicides:

- Never married: **higher** in non-firearm-related suicides (30%), compared to firearm-related suicides (22%) .
- Currently having a mental health problem: **higher** in non-firearm-related suicides (52%), compared to firearm-related suicides (44%).
- Non-alcohol substance abuse problem: **higher** in non-firearm-related suicides (21%), compared to firearm-related suicides (11%).
- Suicide attempt history: **higher** in non-firearm-related suicides (25%), compared to firearm-related suicides (13%).

WA VDRS MIMY Suicide Take home message

❖ Circumstances present in firearm-related suicides vs. non-firearm related suicides:

- Alcohol used in the hours preceding the incident: **higher** in firearm-related suicides (27%), compared to non-firearm-related suicides (20%).
- Physical health problem: **higher** in firearm-related suicides (25%), compared to non-firearm-related suicides (17%).
- Job or financial problem: **higher** in firearm-related suicides (29%), compared to non-firearm-related suicides (25%). More than **30% of those** happened in two weeks before the incidents.
- Injury occurred at the decedent's residence: **higher** in firearm-related suicides (72%), compared non-firearm-related suicides (59%).

Factsheets

2015-2018 fact sheets available for:

- All Suicide data
- Suicide in Men in the middle years
- Suicide in Older Adult
- Suicide in Young Adult
- Suicide in Youth
- Suicide in Veterans

Download at:

<https://www.doh.wa.gov/YouandYourFamily/InjuryandViolencePrevention/SuicidePrevention>

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Veterans Suicide Data | 2015-2018

National Violent Death Reporting System (NVDRS) 4,090 suicides 2015-2018

NVDRS is the only state-based surveillance system that pools more than 600 unique data elements from reports, law enforcement reports, coroner/medical examiner reports, and toxicology reports. NVDRS data cover all types of violent deaths, including intentional injury deaths, suicides, and homicides. Between 2015 and 2018, 4,090 violent deaths were reported to the National Violent Death Reporting System from suicide were veterans (wh...

Who, When, Where, How a Veteran Dies

NVDRS collects data on the **Who** help us better understand **Why** firearm was more prevalent among veterans. Nearly 40% of veterans who die 15% had Post-Traumatic Stress (PTSD) or depressed moods. About 25% of veterans who die from suicide were intimate partners (40%), family members, or friends.

Suicide Means, Circumstances

Circumstances examples:

- Girlfriend moved out
- Firearm broke off the engagement
- Had escalating marriage difficulties
- Had three suicide attempts

Age: 19 to 34

Means:

- 60% by firearm
- 2% by hanging, strangulation, suffocation

Circumstances:

- 44% had intimate partner problems
- 32% with mental health problems
- 30% suspected of alcohol use interfering with the incident

17%

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Sharing Suicide Data to Save Lives

National Violent Death Reporting System (NVDRS) 1619 violent deaths 2018

NVDRS is the only state-based surveillance system that pools more than 600 unique data elements from:

- Death certificates
- Coroner/medical examiner reports
- Law enforcement reports
- Toxicology reports

NVDRS data covers all types of violent deaths, including intentional injury deaths, suicides, and homicides. In 2018, 1619 violent deaths were reported to the National Violent Death Reporting System (NVDRS). 2018 is the first year that NVDRS data is available for Washington State.

Who, When, Where, How and Why

NVDRS collects data on the **Who**, **When**, **Where**, **How**, and **Why** they died by suicide. Studies show that re-creating the scene can help us understand why they died by suicide. In Washington, means and circumstances relationship and life stressors—characteristics of the majority of suicides happen at home.

Age: 18 to 24

Means:

- 53% by firearm
- 32% by hanging, strangulation, suffocation

Circumstances:

- 32% had an intimate partner
- 30% had suicide attempt
- 22% had non-alcohol related problems

Age: under 18

Means:

- 60% by hanging, strangulation, suffocation
- 29% by firearm

Circumstances:

- 42% had a family relationship
- 23% had a school problem
- 21% had a recent argument

4%

WASHINGTON STATE VIOLENT DEATH REPORTING SYSTEM Sharing Data to Prevent Youth Suicide | 2015-2018

Youth Suicide

The Washington state suicide rate among youth (10-17 years old) has been rising (from 3.5 per 100,000 in 2010 to 4.9 per 100,000 in 2018), and has remained higher than the national rate in the same time frame. Since 2017, suicide has surpassed accidental deaths, making it the leading cause of death among youth. Nearly 70% of youth who died by suicide were males and 65% were Non-Hispanic whites.

Results from Washington State's 2018 Healthy Youth Survey (HYS) show that, in the past year, 10% of 10th graders reported attempting suicide, with a significantly higher percentage of gay, lesbian, and bisexual students (22%) reporting attempting suicide than straight students (7%).

What Happened and Why

The Washington Violent Death Reporting System (WA-VDRS) is part of the National Violent Death Reporting System (NVDRS) that collects more than 600 unique data elements from death certificates, coroner/medical examiner reports, law enforcement reports, and toxicology reports on **who**, **when**, **where**, and **how** of suicides to help us better understand **why** they occurred.

Between 2015 and 2018, 4,090 suicides were reported into WA-VDRS. Of those, 4% were youth under 18 years old. Approximately 75% of youth suicides occurred at home; 42% had mental health problems with 76% diagnosed as depression; and, more than 25% disclosed their suicide thoughts or plans to another person. If a firearm was used, nearly 50% were owned by a family member or friend.

#BeTheTo

The National Action Alliance for Suicide Prevention and the National Suicide Prevention Lifeline promote #BeTheTo's five action steps for communicating with and supporting someone who may be suicidal. Visit [#BeTheTo](#) for information about how and why to take action.

| WA-VDRS Youth Suicides | |
|--|--|
| MALES | FEMALES |
| 44% died by firearm | 69% died by suffocation/hanging/strangulation |
| 26% had treatment for mental health/substance abuse problems | 54% had treatment for mental health/substance abuse problems |
| 36% had history of suicide thoughts and/or plans | 52% had history of suicide thoughts and/or plans |
| 16% had history of suicide attempt | 41% had history of suicide attempt |
| 47% had problems with a family member | 33% had problems with a family member |
| 26% had problems at or related to school | 30% had problems at or related to school |

Examples of family or school problems: arguments with family members; discipline from parents; fighting or being bullied at school; failing grades or failure to meet graduation requirements.

ASK

• Ask the tough questions directly. Are you thinking about killing yourself?

BE THERE

• Listen to their reasons for feeling hopeless and in pain.

• Listen with compassion and empathy—no dismissing or judgment.

KEEP THEM SAFE

• Ask if they've thought about how they would do it.

• Separate them from anything they could use to hurt themselves.

HELP THEM CONNECT

• Connect them with a support system such as their family, friends, clergy, coaches, co-workers, or therapists.

• Encourage them to call 800-273-TALK (2555).

FOLLOW UP

• Check in on a regular basis.

• Making contact in the days after a crisis can make the difference in keeping them alive.

Resources

Means: Reducing a suicidal person's access to highly lethal means is an important part of suicide prevention. Learn more about means reduction at [Harvard's Means Matters](#).

Location: The majority of Washington suicides occur in the home. Learn how to reduce access to lethal means before and during a crisis at [Washington's Safer Homes](#).

Circumstances: Suicide is complex and many factors contribute to thoughts of suicide. Learn more from [CDC's Vital Signs](#).

BeThe1To: If you think someone you know is considering suicide, talk to them and connect them to the support they need. [Learn 5 Steps](#) you can take to be a supportive and empathetic listener for them.

Lived Experience: If you are thinking of suicide or made a suicide attempt, please know that help is available. Along with supportive family and friends, people who have experienced thoughts of suicide and suicide attempt survivors have created strong peer communities. Learn more at [Now Matters Now](#).

Postvention: It's important to support the individuals, families, and communities affected by suicide loss, to reduce the cycle of trauma and increased suicide risk. Learn more at the [American Foundation for Suicide Prevention](#).



Chat: [SuicidePreventionLifeline.org](#)
Talk: 1-800-273-TALK (8255)

Crisis Help



Support for increased stress due to COVID-19: [WAListens.org](#)
Talk: 1-833-681-0211





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Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at civil.rights@doh.wa.gov. TTY users dial 711.