Preventing Suicide Requires a Comprehensive Approach

Some Groups Are At Higher Risk for Suicide

Veterans

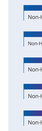
Veterans have an adjusted suicide rate that is 57.3% greater than the non-veteran U.S. adult population.

Tribal Populations

Suicide is the 9th leading cause of death among AI/AN people.

Adults

Adults (35-64 years) account for almost half of all suicides in the U.S.



LGB Youth

High school students identifying as lesbian, gay, or bisexual attempt suicide at a rate five times higher than heterosexual students.

Certain Industries & Occupations

Suicide rates are highest among men working in certain industries (Mining, Quarrying, and Oil and Gas Extraction) and occupations (Construction and Extraction).

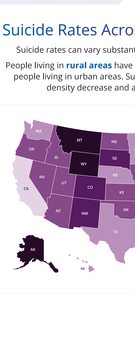
People with Disabilities

Adults with disabilities are three times more likely to report suicidal ideation compared to adults without disabilities.

Suicide rates are higher among certain racial and ethnic groups.

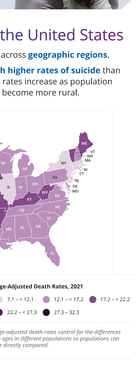
Male Suicide Rates, by Race and Ethnicity, 2021

Age-adjusted rates per 100,000 population



Female Suicide Rates, by Race and Ethnicity, 2021

Age-adjusted rates per 100,000 population

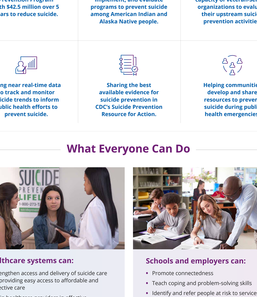


**Other racial and ethnic groups have unstable rates and are therefore not included.*

Suicide Rates Across the United States

Suicide rates can vary substantially across **geographic regions**.

People living in **rural areas** have **much higher rates of suicide** than people living in urban areas. Suicide rates increase as population density decrease and areas become more rural.



Age-Adjusted Death Rates, 2021

7.1 – < 12.1 | 12.1 – < 17.2 | 17.2 – < 22.2 | 22.2 – < 27.3 | 27.3 – 32.3

Age-adjusted death rates control for the differences in ages in different populations so populations can be directly compared.

States with the highest suicide rates in 2021:

1. **Wyoming** 32 per 100,000
2. **Montana** 32 per 100,000
3. **Alaska** 31 per 100,000
4. **New Mexico** 25 per 100,000
5. **South Dakota** 23 per 100,000

Everyone Can Help Prevent Suicide

What CDC is Doing

CDC is working with partners at the federal, national, state, territorial, tribal, and local levels to achieve the nation's goal to **reduce suicide rates by 20% by 2025**.

CDC uses data to track and monitor suicide trends. CDC researches the causes of suicide and what works to prevent it.

CDC Supports Suicide Prevention By:

Funding the Comprehensive Suicide Prevention Program with $42.5 million over 5 years to reduce suicide.

Funding tribes to increase their capacity to adapt, implement, and evaluate programs to prevent suicide among American Indian and Alaska Native people.

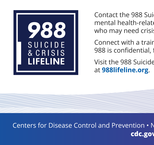
Working with the CDC Foundation to build the capacity of veteran-serving organizations to evaluate their upstream suicide prevention activities.

Using near real-time data to track and monitor suicide trends to inform public health efforts to prevent suicide.

Sharing the best available evidence for suicide prevention in CDC's Suicide Prevention Resource for Action.

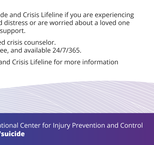
Helping communities develop and share resources to prevent suicide during public health emergencies.

What Everyone Can Do



Healthcare systems can:

- Strengthen access and delivery of suicide care by providing easy access to affordable and effective care
- Train healthcare providers in effective intervention, treatment, and follow-up for patients at risk for suicide
- Cover mental health conditions on par with physical health



Schools and employers can:

- Promote connectedness
- Teach coping and problem-solving skills
- Identify and refer people at risk to services and resources for mental health, substance use disorder, or other needs
- Strengthen organizational policies that support students and employees at risk and have plans for responding to people showing warning signs

The public health sector can:

- Convene multi-sectoral partnerships to plan, prioritize, and coordinate suicide prevention efforts with the greatest likelihood of preventing suicide
- Partner with schools, workplaces, and community organizations to implement programs that create safe, healthy, and supportive environments
- Track and monitor suicide trends
- Share the best available evidence for suicide prevention

States and communities can:

- Implement comprehensive prevention, including prevention policies, programs, and practices with the best available evidence from CDC's *Suicide Prevention Resource for Action*
- Strengthen economic supports, including household financial security and housing stabilization policies
- Promote safe and supportive environments, including reducing access to lethal means among persons at risk for suicide

The media can:

- Practice safe reporting and messaging about suicide
- Share helpful resources
- Encourage people to seek help if needed
- Promote messages of hope and healing

Everyone can:

- Identify and support people at risk for suicide
- Learn the warning signs, how to ask the right questions, and how to respond to someone at risk
- Help reduce access to lethal means among people at risk

If you or someone you know is in crisis, please contact the **988 Suicide and Crisis Lifeline**

Call or text **988** or chat at **988lifeline.org**

988 SUICIDE & CRISIS LIFELINE

Contact the 988 Suicide and Crisis Lifeline if you are experiencing mental health-related distress or are worried about a loved one who may need crisis support.

Connect with a trained crisis counselor.
988 is confidential, free, and available 24/7/365.

Visit the 988 Suicide and Crisis Lifeline for more information at **988lifeline.org**.

Centers for Disease Control and Prevention • National Center for Injury Prevention and Control
cdc.gov/suicide