Suicide rates went up more than 30% in half of states since 1999.

More than half of people who died by suicide did not have a known mental health condition.

Nearly 45,000 lives lost to suicide in 2016.

Suicide rising across the US

More than a mental health concern

Suicide is a leading cause of death in the US. Suicide rates increased in nearly every state from 1999 through 2016. Mental health conditions are often seen as the cause of suicide, but suicide is rarely caused by any single factor. In fact, many people who die by suicide are not known to have a diagnosed mental health condition at the time of death. Other problems often contribute to suicide, such as those related to relationships, substance use, physical health, and job, money, legal, or housing stress. Making sure government, public health, healthcare, employers, education, the media and community organizations are working together is important for preventing suicide. Public health departments can bring together these partners to focus on comprehensive state and community efforts with the greatest likelihood of preventing suicide.

States and communities can

- Identify and support people at risk of suicide.
- Teach coping and problem-solving skills to help people manage challenges with their relationships, jobs, health, or other concerns.
- Promote safe and supportive environments. This includes safely storing medications and firearms to reduce access among people at risk.
- Offer activities that bring people together so they feel connected and not alone.
- Connect people at risk to effective and coordinated mental and physical healthcare.
- Expand options for temporary help for those struggling to make ends meet.
- Prevent future risk of suicide among those who have lost a friend or loved one to suicide.

Want to learn more?
Visit: www.cdc.gov/vitalsigns
PROBLEM: Suicide rates increased in almost every state.

Suicide rates rose across the US from 1999 to 2016.

Differences exist among those with and without mental health conditions. People without known mental health conditions were more likely to be male and to die by firearm.

**No known mental health conditions**

<table>
<thead>
<tr>
<th>Sex</th>
<th>Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>16% Male</td>
</tr>
<tr>
<td>Poisoning</td>
<td>10%</td>
</tr>
<tr>
<td>Suffocation</td>
<td>27%</td>
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**Known mental health conditions**

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Many factors contribute to suicide among those with and without known mental health conditions.

- **Relationship problem (42%)**
- **Problematic substance use (28%)**
- **Job/Financial problem (16%)**
- **Loss of housing (4%)**
- **Crisis in the past or upcoming two weeks (29%)**
- **Physical health problem (22%)**
- **Criminal legal problem (9%)**

Note: Persons who died by suicide may have had multiple circumstances. Data on mental health conditions and other factors are from coroner/medical examiner and law enforcement reports. It is possible that mental health conditions or other circumstances could have been present and not diagnosed, known, or reported.

WHAT CAN WE DO TO PREVENT SUICIDE?

Preventing suicide involves everyone in the community.

Provide financial support to individuals in need.

States can help ease unemployment and housing stress by providing temporary help.

Strengthen access to and delivery of care.

Health care systems can offer treatment options by phone or online where services are not widely available.

Create protective environments.

Employers can apply policies that create a healthy environment and reduce stigma about seeking help.

Connect people within their communities.

Communities can offer programs and events to increase a sense of belonging among residents.

Teach coping and problem-solving skills.

Schools can teach students skills to manage challenges like relationship and school problems.

Prevent future risk.

Media can describe helping resources and avoid headlines or details that increase risk.

Identify and support people at risk.

Everyone can learn the warning signs for suicide, how to respond, and where to get help.

Know the Suicide WARNING SIGNS

- Feeling like a burden
- Being isolated
- Increased anxiety
- Feeling trapped or in unbearable pain
- Increased substance use
- Looking for a way to access lethal means
- Increased anger or rage
- Extreme mood swings
- Expressing hopelessness
- Sleeping too little or too much
- Talking or posting about wanting to die
- Making plans for suicide

5 STEPS TO HELP SOMEONE AT RISK

1. Ask.
2. Keep them safe.
3. Be there.
4. Help them connect.
5. Follow up.

Find out why this can save a life by visiting: www.BeThe1To.com

SOURCE: www.BeThe1To.com
WHAT CAN BE DONE

THE FEDERAL GOVERNMENT IS
• Tracking the problem to understand trends and the groups at greatest risk (for example, see www.cdc.gov/violenceprevention/nvdrs).
• Developing, implementing, and evaluating suicide prevention strategies.
• Supporting local, state, tribal, national, and other partners to prevent suicide (for example, see https://go.usa.gov/xQBGc).

STATES AND COMMUNITIES CAN
• Identify and support people at risk of suicide.
• Teach coping and problem-solving skills to help people manage challenges with relationships, jobs, health, or other concerns.
• Promote safe and supportive environments. This includes safely storing medications and firearms to reduce access among people at risk.
• Offer activities that bring people together so they feel connected and not alone.
• Connect people at risk to effective and coordinated mental and physical healthcare.
• Expand options for temporary assistance for those struggling to make ends meet.
• Prevent future risk of suicide among those who have lost a friend or loved one to suicide.

HEALTH CARE SYSTEMS CAN
• Provide high-quality, ongoing care focused on patient safety and suicide prevention.
• Make sure affordable and effective mental and physical healthcare is available where people live.
• Train providers in adopting proven treatments for patients at risk of suicide.

EMPLOYERS CAN
• Promote employee health and well-being, support employees at risk, and have plans in place to respond to people showing warning signs.
• Encourage employees to seek help, and provide referrals to mental health, substance use, legal, or financial counseling services as needed.

EVERYONE CAN
• Ask someone you are worried about if they’re thinking about suicide.
• Keep them safe. Reduce access to lethal means for those at risk.
• Be there with them. Listen to what they need.
• Help them connect with ongoing support. You can start with the Lifeline (1-800-273-8255).
• Follow up to see how they’re doing.
• Find out why this can save a life by visiting: www.BeThe1To.com.

The media can avoid increasing suicide risk (e.g., by not using dramatic headlines or providing explicit details) and encourage people to seek help.
View recommendations at: www.ReportingOnSuicide.org

If you need help for yourself or someone else, please contact the National Suicide Prevention Lifeline
Talk: 1-800-273-TALK (8255)
Chat: www.suicidepreventionlifeline.org

For more information, please contact
Telephone: 1-800-CDC-INFO (232-4636)
Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30333
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www.cdc.gov/vitalsigns/suicide
www.cdc.gov/mmwr

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