

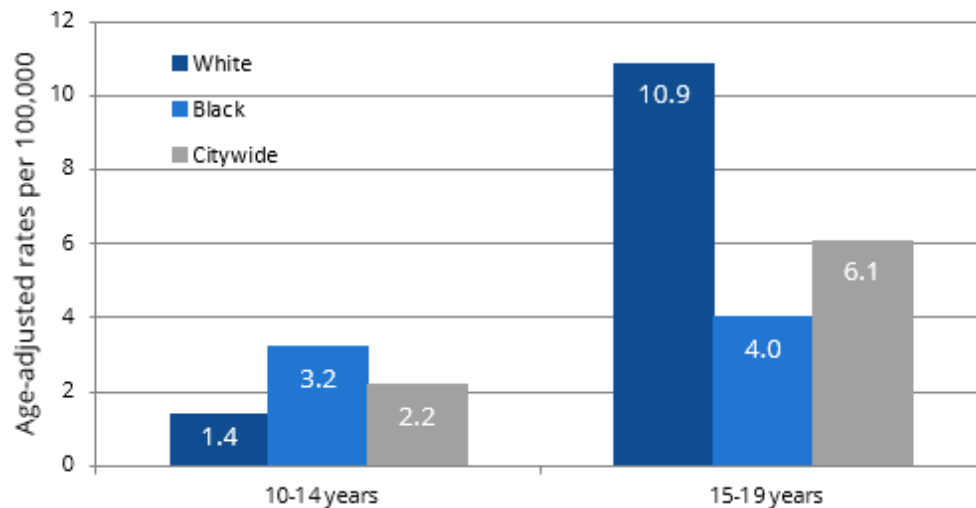


## Youth Suicide Rates in Philadelphia

Suicide is the second leading cause of death among adolescents aged 10-19 in the U.S.<sup>1</sup> In 2017, approximately 1 in 5 deaths in youth were attributed to suicide.<sup>1</sup> Risk factors for youth suicide include a previous suicide attempt, psychiatric disorders (such as major depression, bipolar disorder, generalized anxiety and personality disorder traits), substance use, lack of social support, and availability of lethal means.<sup>2,3,4</sup> Many of the common risk factors for suicide attempts and ideation can be exacerbated by adverse childhood events, family discord, fights with friends, poverty, and legal trouble.<sup>3,4</sup> Rates of youth death by suicide in the US have been increasing.<sup>1</sup> This issue of CHART provides an overview of youth suicide mortality, attempts, and ideation in Philadelphia.

### Youth suicide death rates highest for younger Blacks, and older Whites

Suicide Mortality Rates by Race/Ethnicity and Age Group,  
Philadelphia, PA 2015-2017



Note: The number of cases of youth suicide among other race/ethnic groups, including Hispanics, were too low to calculate reliable rates.

- In 2015-17, suicide mortality rates were three times higher among 15-19 year olds than 10-14 year olds.
- Youth suicide rates among younger youth (age 10-14) were twice as high among Black youth; however, the inverse was true for older youth (age 15-19), with youth suicide rates more than twice as high among older White youth.

Source: Vital Statistics for Philadelphia, Pennsylvania Department of Health, 2015-2017

## Males and youth aged 15-19 have the highest suicide counts

Suicide Counts by Race/Ethnicity, Sex, and Age Group,  
Philadelphia, PA 2015-2017

	Female	Male	Black	White
<b>10-14 years old</b>	6	2	6	1
<b>15-19 years old</b>	5	18	7	11

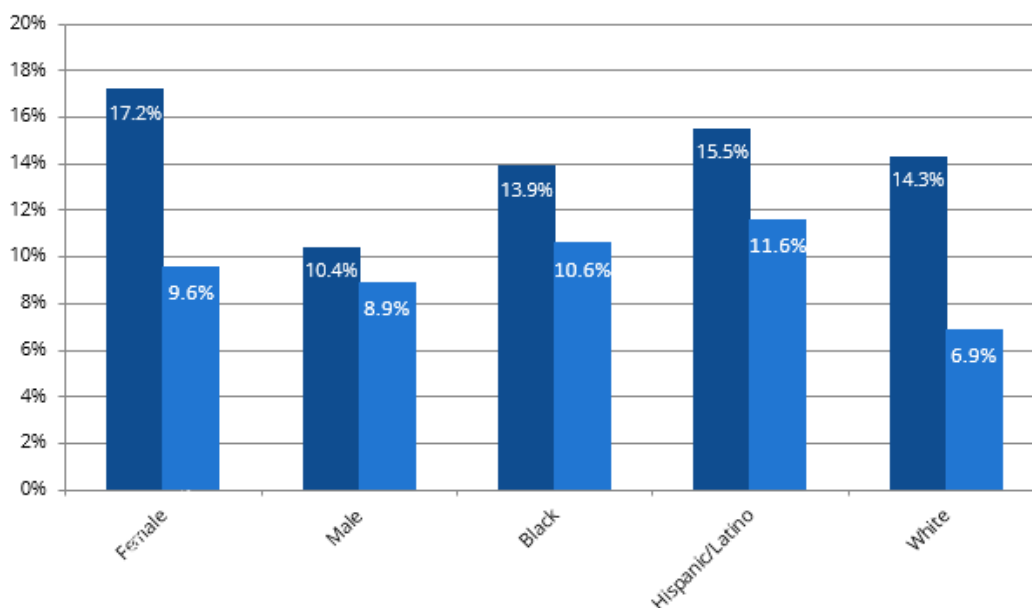
Note: The number of cases of youth suicide among other race/ethnic groups, including Hispanics, were too low to calculate reliable rates.

- Females represented 75% of suicides for the age group 10-14.
- In contrast, males made up more than 75% of suicides for ages 15-19.
- In total, males aged 15-19 represented over 50% of Philadelphia's youth suicide deaths from 2015 to 2017.
- Black youths accounted for 75% of deaths by suicide for the 10-14 years old age group, but white youths made up almost 50% of deaths by suicide for the 15-19 years old age group.

Source: Vital Statistics for Philadelphia, Pennsylvania Department of Health, 2015-2017

## Suicide ideation and attempts are common, but decreasing

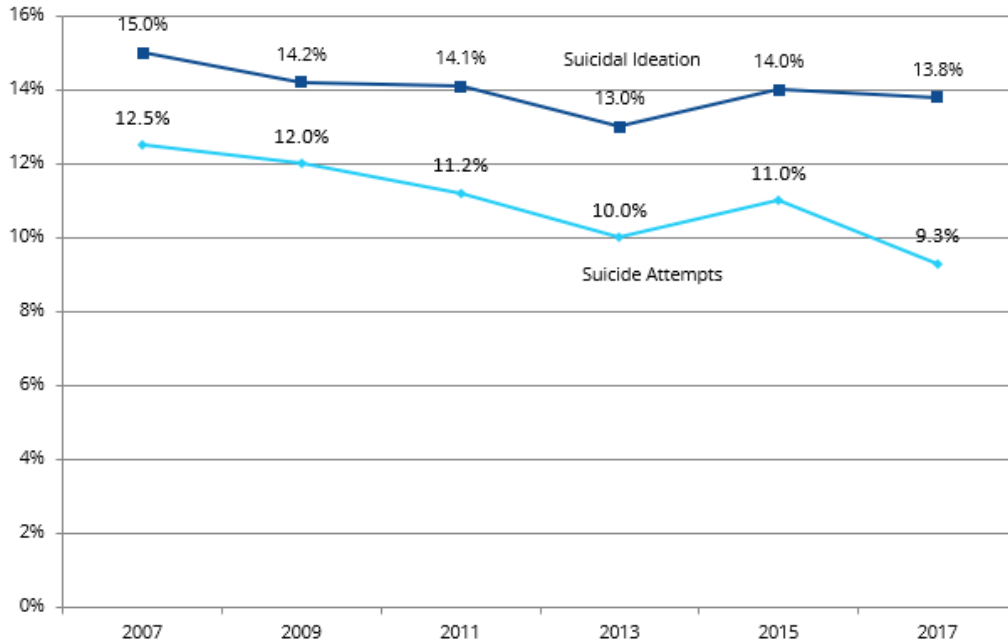
Percent of Youth Having Suicidal Ideation or Attempting Suicide,  
Philadelphia, PA 2017



- An estimated 17% of female youths reported having had suicidal ideation in the past year. This is considerably higher than males, in which 10% experienced suicidal ideation.
- Suicidal ideation was common across races, with Hispanic/Latino youths having a slightly higher proportion of reported suicidal ideation at 16% than white youths (14%) and black youths (14%).
- Males are more likely to attempt suicide using more lethal means such as firearms, whereas females participate in less lethal behaviors, resulting in higher mortality rates for adolescent boys despite similar reported attempt rates.<sup>4,10,11</sup>

Source: Youth Risk Behavior Study (YRBS), 2017

### Percent of Youth Having Suicidal Ideation or Attempting Suicide, Philadelphia, PA 2007-2017

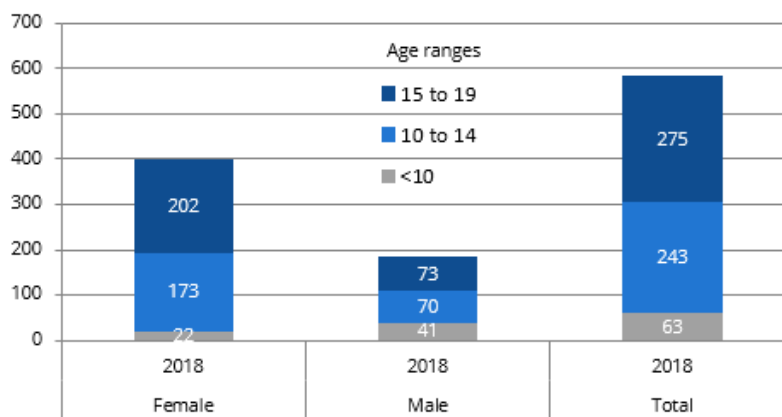


- Since 2007, there has been an overall estimated 1% decrease in youths self-reporting suicidal ideation.
- There has been an estimated 3% decrease in self-reported suicide attempts among Philadelphia youth since 2007.

Source: Youth Risk Behavior Study (YRBS), 2017

### Female youths have more suicide-related emergency department visits than male youths

Suicide-Related Emergency Department Visits by Sex and Age Group, Philadelphia, PA 2018



- Females have higher counts of suicide-related emergency department (ED) visits than males. In 2018, females accounted for approximately two thirds of suicide-related ED visits.
- Because males are more likely to utilize more lethal means (e.g. firearms) to attempt suicide and females are more likely to use less lethal means (e.g. prescription medication), female youths have a greater chance of going to a hospital for treatment after a suicide attempt.<sup>4,10,11</sup>

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## What can be done

### The City of Philadelphia is:

- Operating a 24/7 call center (215-686-4420) to support individuals, or loved ones, experiencing a behavioral health crisis.
- Running 24/7 Crisis Response Centers around the city to evaluate and assist individuals experiencing mental health or addiction-related crises.
- Offering free Mental Health First Aid courses to teach how to notice and react to signs that indicate a behavioral health crisis. A certification that focuses specifically on youth mental health is an offering.
- Leading a citywide [Suicide Prevention Task Force](#) to advocate for system improvements around suicide prevention.
- Partnering with CeaseFirePA in support of common-sense firearm reforms that will limit access to guns for individuals experiencing behavioral health crises.
- Supporting family members and friends who have lost loved ones to suicide through Survivors of Suicide Loss support groups.

### Health care providers can:

- Receive training to recognize suicidal or depressed behavior and offer treatment or refer for treatment.<sup>3,5,6,7</sup>
- Implement [Safety Planning](#) policies and procedures, including counseling on access to lethal means.
- Screen for suicidal behavior in primary care settings, schools, and juvenile detention centers.<sup>3,5,8</sup>
- Treat patients for substance use and mental health disorders so these suicide risk factors can be mitigated.<sup>8</sup>
- Engage with the [Philadelphia Suicide Prevention Task Force](#) to learn more about the Zero Suicide Model for healthcare providers.
- Support individuals who are transitioning from acute care back into their communities by facilitating a smooth transition into further care and maintaining follow up.

### People can:

- Call the National Suicide Prevention Lifeline at 1-800-273-8255 or the City of Philadelphia's Suicide and Crisis Intervention Line at 215-686-4420 if having thoughts of suicide.
- Engage in an open, honest conversation and ask a loved one they are worried about directly if he or she is having thoughts of suicide. Many people think that asking the question increases the risk of suicide, but in fact, it does the opposite.
- Take an [online behavioral health screening](#) for a mental health checkup to understand your own risk, or encourage loved ones to take a screening.
- Reduce access to lethal means of suicide, especially firearms. Keep guns and weapons locked in a secure box if they are kept in the home. Store ammunition locked and separated from firearms.<sup>5,6,7,8,9</sup>
- Provide social support in follow up care of those who attempted suicide by extending a conversation to them to ensure that you are there to help.<sup>6</sup>
- Work to decrease stigma by normalizing conversation about mental health and checking in on friends and family.<sup>6,7</sup>
- Responsibly report suicide in ways that do not glorify the act but instead educate on how to seek help.<sup>3,5,6,7</sup>

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## Resources

- Immediate help from the National Suicide Prevention Lifeline at 1-800-273-8255 or the City of Philadelphia's Suicide and Crisis Intervention Line at 215-686-4420.
- Free crisis text line: text HOME to 741741.
- [Assessment Centers and Crisis Response Centers in Philadelphia](#) from the Department of Behavioral Health and Intellectual disAbility Services.
- Free Mental Health First Aid class [registration](#).
- [Suicide Prevention Task Force](#).
- Find support: <https://afsp.org/find-support/>.

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## Resources

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All PDPH CHARTs are available on <http://www.phila.gov/health>.