

North Dakota Suicide Prevention Plan 2005

EXECUTIVE SUMMARY

Suicide is a public health problem, and, as such, many suicides are preventable.

- From 1994 through 2003, 797 people committed suicide in North Dakota. This averages to about 80 people per year or almost seven each month.
- For the years 1997 through 2001, suicide was the seventh leading cause of death in North Dakota.
- Between 1994 and 2002, the North Dakota suicide rate was higher than the national average for eight of the nine years.
- An average of 382 people are hospitalized because of suicide attempts per year in North Dakota, and an average of one person attempting suicide per day needs serious medical attention. The average medical cost per case of suicide attempt is \$7,516.
- The average age group 15 to 19 year-olds account for 32 percent of suicide attempts and has the highest hospitalization attempt rate.
- The highest average suicide rates for 1994 through 2003 were in the 45 to 54 age group (17.6) and the 15 to 24 age group (16.8).
- Almost six males commit suicide for every female who commits suicide in North Dakota, while females account for 58 percent of suicide attempts.
- Although North Dakota has observed a slight decrease in male suicide rates in this decade, they are still above the national average. Female suicide rates have increased steadily over the past 25 years, bringing North Dakota even with the national average for females.
- North Dakota is now experiencing an upward trend in suicides in the middle-aged population of North Dakota, specifically the 25 to 34, 35 to 44, and 45 to 54 age groups. Due to this new trend, North Dakota has a need to expand its suicide prevention plan to encompass all ages.
- Since the Adolescent Suicide Prevention Project started, suicide fatalities for the 10 to 19 age group decreased 47 percent in 2000 – 2004 as compared to the 10-year average in the 1990s. In the same time period, suicide fatalities in the 10 to 24 age group decreased 35 percent.

- Suicide by firearms is almost three times more prevalent than the next most common method of suicide: hanging/suffocation.
- Although the white population had seven times more deaths by suicide than the Native American population in the last 10 years, because of the population base, the suicide rates for Native Americans were almost three times that of the white population. In some tribal areas of North Dakota, the rate was five times higher than that of the white population.

Priority Goals, Strategies and Possible Action Steps:

Major implementation strategies to reduce the incidence of suicide in North Dakota include:

- Strategies should be selected using evidence-based research.
- Strategies must be outlined and implemented at both the state and community levels.
- Suicide prevention is ever changing, and this plan is intended to be fluid and should evolve as new knowledge is identified.

Recommendations:

The Suicide Prevention Task Force, through a consensus-building strategy, identified four priority areas for the state suicide prevention plan. The following recommendations were made to help reduce the number of suicides and the ongoing injuries related to suicide.

- Dedicate sufficient personnel and fiscal resources to address the issue of statewide suicide prevention activities over a structured and long-term basis.
- Increase education and public awareness of, and reduce the stigma about, the issue of suicide as a leading cause of death and a significant public health issue in North Dakota for all ages.
- Reduce the danger and harm of suicidal behavior.
- Promote assets and resiliency to all people, with attention toward building healthy relationships.

** According to the U.S. Centers for Disease Control and Prevention from 1999 through 2002 suicide was the second leading cause of death for North Dakotans in the 15 to 34 age group and the third leading cause of death for the 10 to 14 age group. **