

Overview

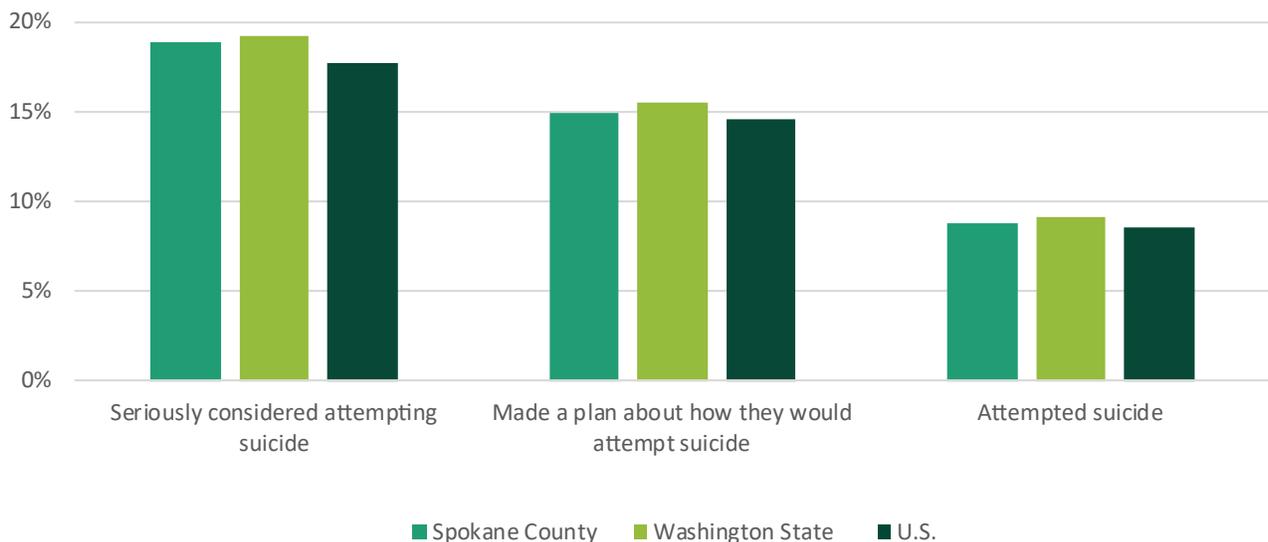
This is an overview of youth suicide trends and patterns in Spokane County. These data can be used by public health officials, researchers, practitioners, and the public to better understand the burden of youth suicide and the need for effective prevention efforts.

By the Numbers

In 2016, 18.9% of Spokane County youth *seriously considered attempting* suicide, 15.0% *made a plan* about how they would attempt suicide, and 8.8% *attempted* suicide one or more times. The prevalence of suicide-related behaviors in Spokane County is similar to that in Washington state and the U.S.



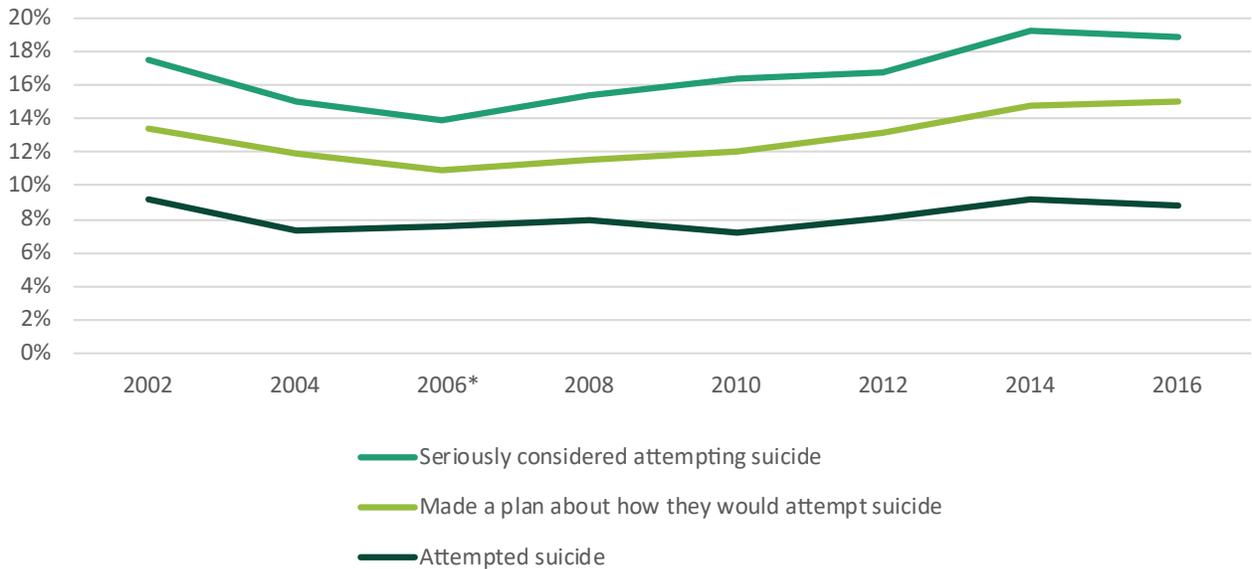
Figure 1. Suicide - Related Behavior in Youth, by County, Spokane County, 2016



Source: 2016 Healthy Youth Survey (8th, 10th, 12th grade students); 2015 National Youth Risk Behavior Survey (9th to 12th grade students). Information access from: https://www.cdc.gov/healthyyouth/data/yrbs/pdf/trends/2015_us_suicide_trend_yrbs.pdf

The proportion of youth who *seriously considered attempting* suicide slightly increased in the last decade, from 13.9% in 2006 to 18.9% in 2016.

Figure 2. Suicide - Related Behavior in 8th, 10th, and 12th Grade Youth, Spokane County, 2002 - 2016



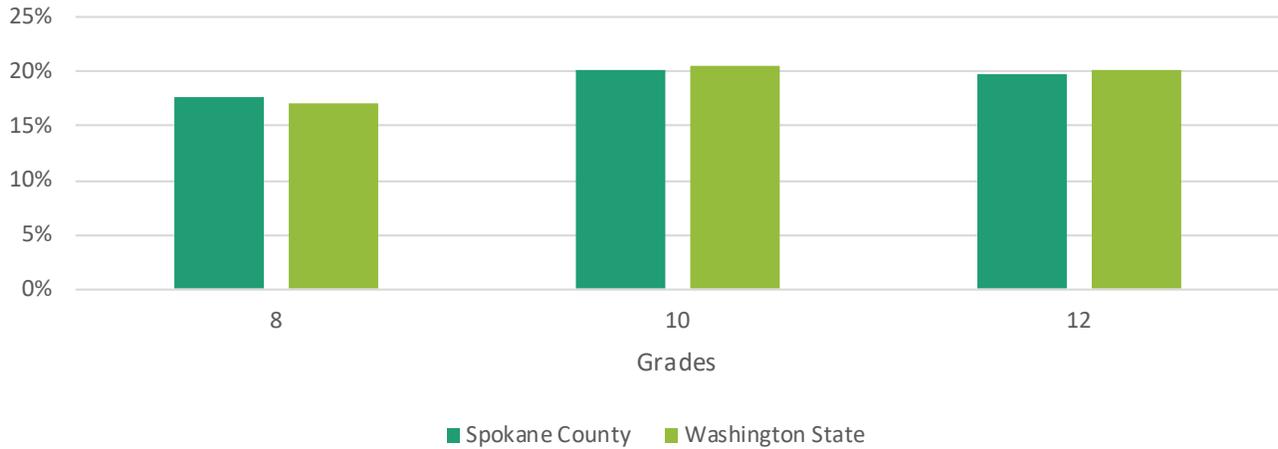
Source: 2002-2016 Healthy Youth Survey

*2006 data are estimated using 2004 and 2008 survey results because the data were not available for 2006

Demographics

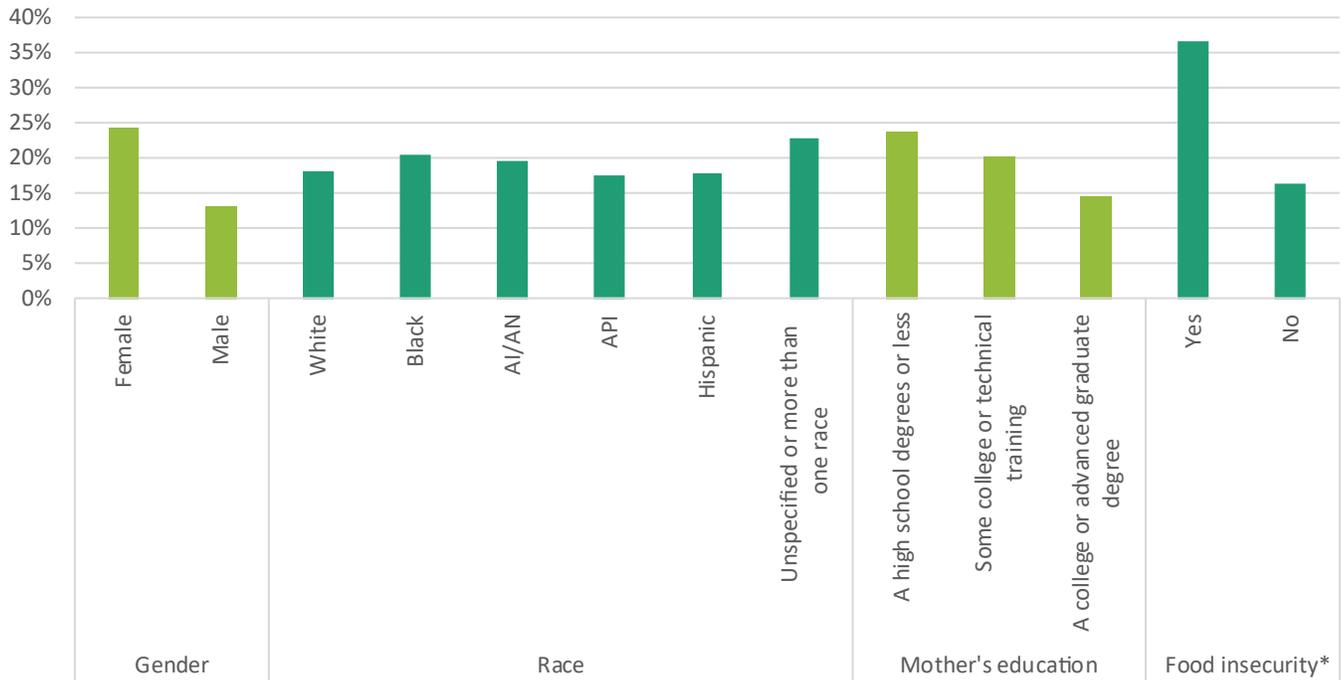
- In 2016, 10th and 12th grade students had a higher rate (20.0%) of having *seriously considered attempting* suicide compared to 8th grade students (17.6%) in Spokane County.
- Female youth (24.3%) were more likely than male youth (13.3%) to have *seriously considered attempting* suicide.
- Youth who reported race with 'unspecified' or 'more than one race' had the highest rate of suicide attempt (22.8%), followed by black (20.6%), American Indian/Alaska Native (19.6%), and white (18.1%) youth.
- Mother's education and food insecurity (as a proxy of household income) were associated with youth's suicide-related behavior. Youth whose mothers have a high school degree or less had 1.6 times the risk of having *seriously considered attempting* suicide compared to those whose mothers have a college education or advanced graduate degree (23.9 % vs 14.6%). Youth who reported that their family did not have enough money for food had 2.2 times the risk of *having seriously considered attempting* suicide (36.6% vs 16.3%). See the next section on Risk Factors for more information on suicide-related risks.

Figure 3. Youth Who Seriously Considered Attempting Suicide by Grade, Spokane County, 2016



Source: 2016 Healthy Youth Survey

Figure 4. Characteristics of Youth Who Seriously Considered Attempting Suicide, Spokane County, 2016



Source: 2016 Healthy Youth Survey

AI/AN: American Indian or Alaskan Native
 API: Asian or Asian American or Native Hawaiian or other Pacific Islander

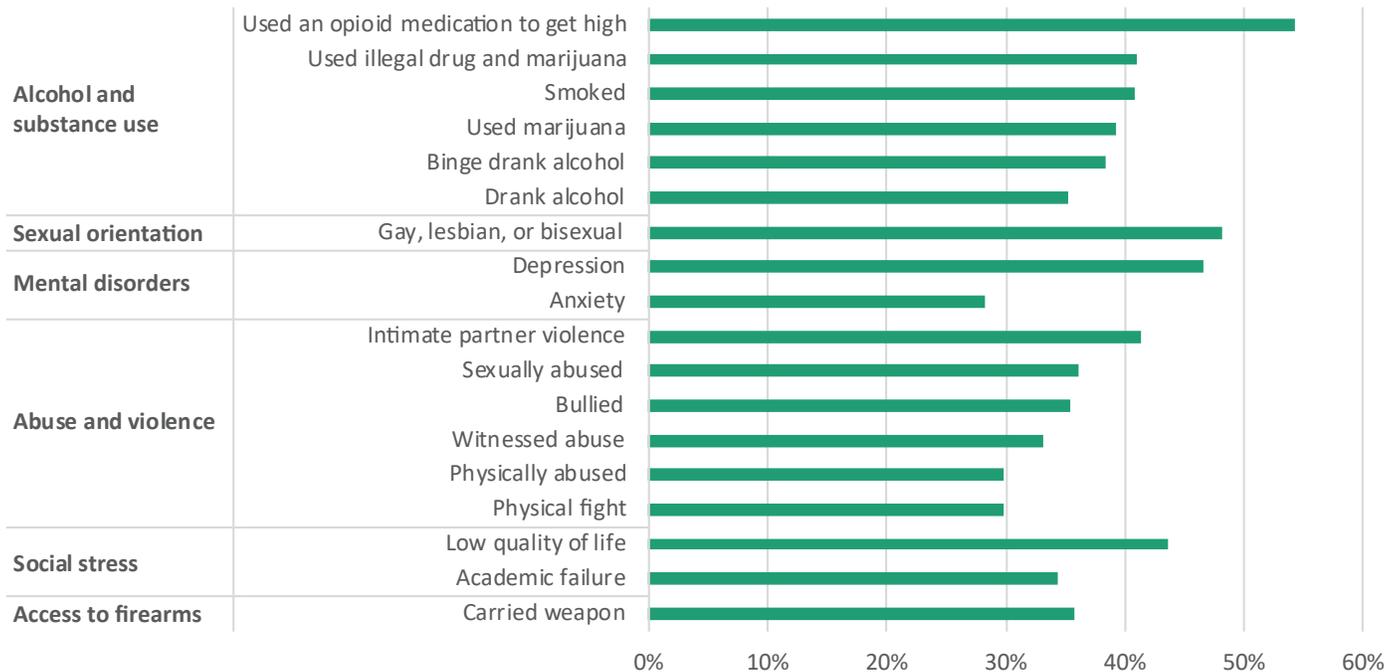
*Food insecurity used as a proxy for income

Risk Factors

Several factors increase the likelihood of youth attempting suicide, such as mental disorders, alcohol and substance abuse, previous suicide attempt, history of physical or sexual abuse, family history of suicide-related behavior, access to firearms, social stress, and social isolation.

- In Spokane County, youth who used opioid pain medication to get high in the past month had the highest rate of having *seriously considered attempting* suicide (54.2%), followed by youth who identified themselves as gay, lesbian, or bisexual¹ (48.2%), and those who reported feeling depressed, sad, or hopeless almost every day for the last two weeks (46.5%). Information for other risk factors are presented in figure 5.

Figure 5. Percent of Youth Who Seriously Considered Attempting Suicide by Risk Factor, Spokane County, 2016



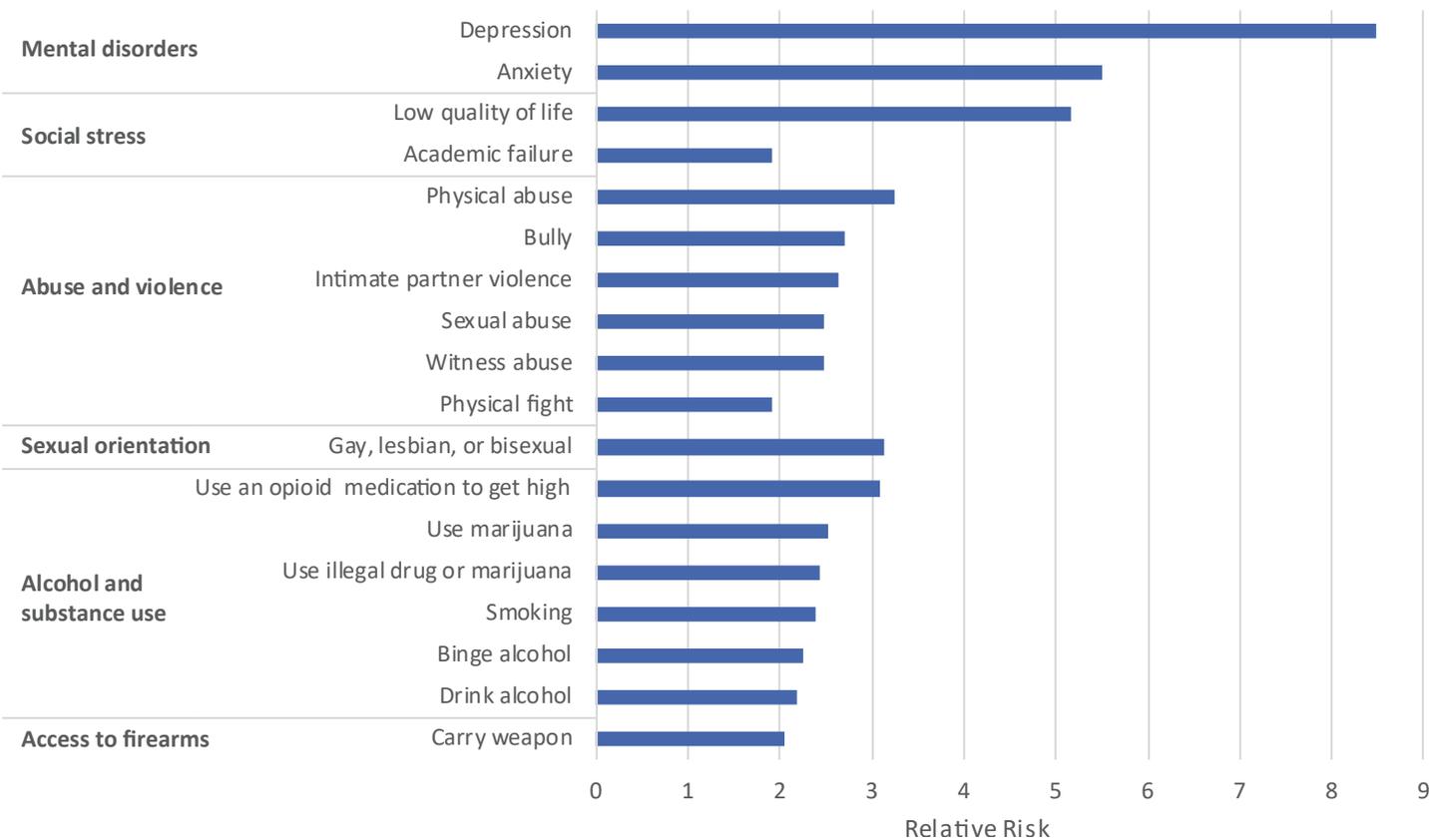
Source: 2016 Healthy Youth Survey

- Relative risk compares the risks of experiencing a negative outcome, in this case having contemplated suicide, between two different groups (i.e. those exposed and not exposed to the risk factors). It is a useful statistic for comparing different risk factors to identify those of potentially greater importance. Figure 6 shows the relative risk by different factors of youth having *seriously considered attempting* suicide. For example, youth who felt depressed, sad, or hopeless almost every day for the last two weeks were 8.5 times as likely to have *seriously considered attempting* suicide compared to youth without depression (46.5% vs 5.5%). In contrast, a greater proportion of youth who had *seriously considered attempting* suicide used an opioid medication to get high (54.2%), but their relative risk for having seriously considered attempting suicide was lower (3.1 times).

1. The Healthy Youth Survey does not presently evaluate gender identity. However, efforts are underway to assess gender identity on future surveys.

- In Spokane County, the top three relative risks for youth to have seriously considered attempting suicide were depression, anxiety, and low quality of life. Youth associated with these three factors had the strongest likelihood of having seriously considered attempting suicide compared to youth who did not have these risk factors (figure 6).

Figure 6. Relative Risk for Youth Having Seriously Considered Attempting Suicide, Spokane County, 2016



Source: 2016 Healthy Youth Survey

Protective Factors

Protective factors can point to solutions to address risks of suicide, such as providing effective clinical care for mental disorders, enhancing family attachment, or having social support or opportunities for prosocial involvement.

- In Spokane County, youth having opportunities for prosocial involvement in the family had the lowest rate of having *seriously considered attempting* suicide (12.7%), followed by youth interacting with prosocial peers (13.7%), and youth who reported being able to get help from adults or people in school (14.0%). Information for other protective factors are presented in figure 7.
- Youth who can get help from adults had a 70.4% reduction in risk of having *seriously considered attempting* suicide compared to those who reported not being able to get help. Youth who could get help from parents had a 67.4% reduction in risk. In contrast, youth who reported receiving suicide prevention education in school only had a 13.0% reduction in risk. It demonstrates that social support is more important and effective than suicide prevention education in reducing youth suicide (figure 8).
- Youth reported that when they feel depressed, they are more likely to ask for help from a parent/guardian (36.3%), friend or peer (33.1%), or sibling or cousin (18.3%). However, about 7.9% of youth reported that they do not have anyone to talk to when feeling depressed (figure 9).

PROSOCIAL DEFINED

Prosocial involvement in family is defined as good if youth do fun things with their family, if they participate in family decisions, if they can ask their parents for help, etc.

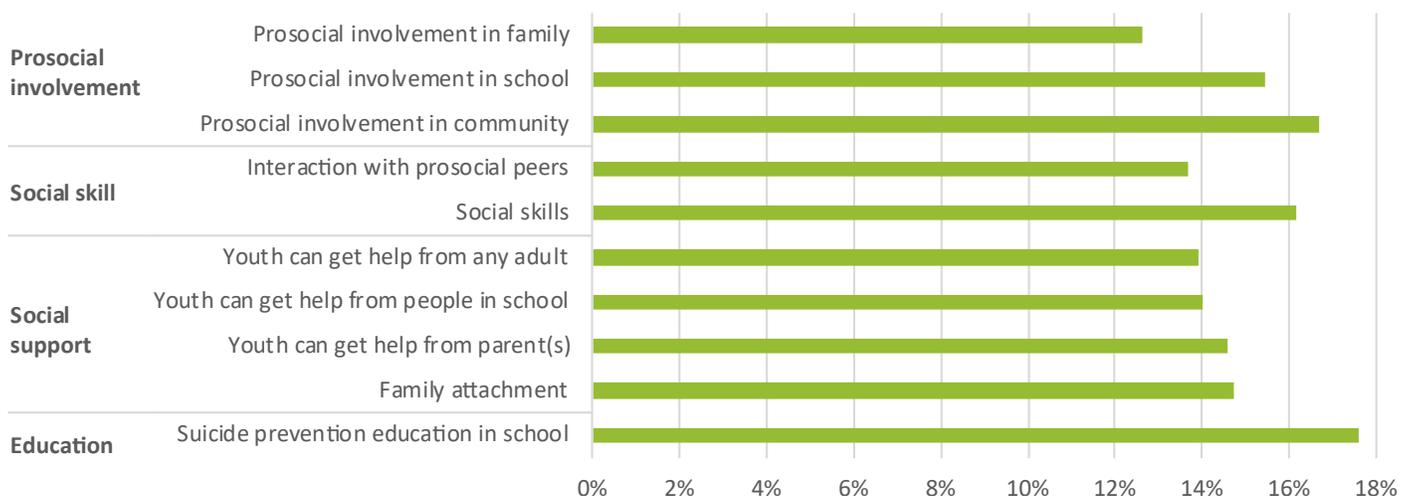
Prosocial involvement in school is defined as good if youth have chances to talk with teachers, opportunities to get involved with special activities, be a part of classroom activities and discussions, help decide things, etc.

Prosocial involvement in community is defined as good if youth have access to recreational opportunities, if they have other adults they can talk to in their community or neighborhood, etc.

Interaction with prosocial peers is defined as good if have close friends and peers that are committed to staying drug free, participate in sports and clubs, attend religious activities, try to do well in school, etc.

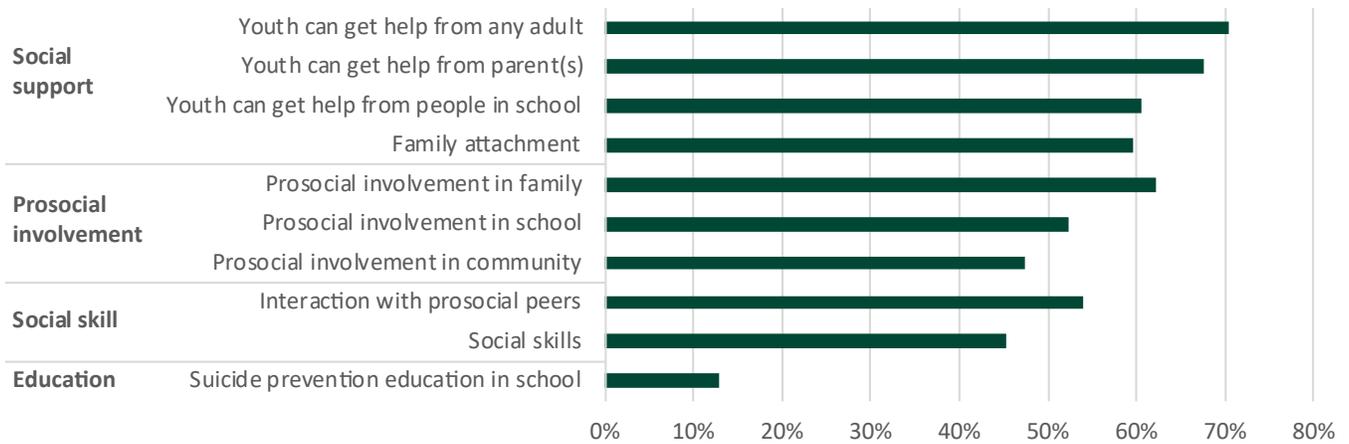
Family attachment is defined as good if youth eat dinner with family, get along with parents, or have good family management.

Figure 7. Percent of Youth Who Seriously Considered Attempting Suicide by Protective Factor, Spokane County, 2016



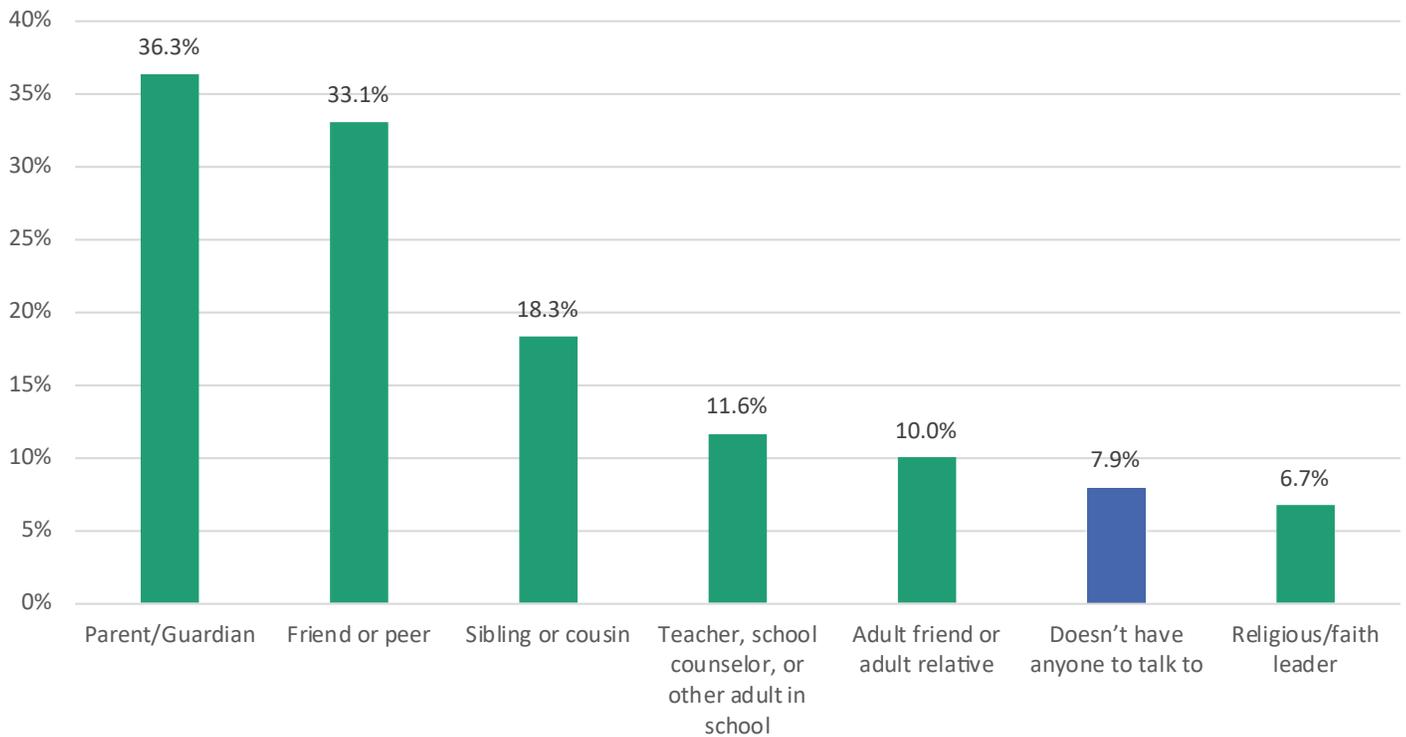
Source: 2016 Healthy Youth Survey

Figure 8. Reduction in Risk for Youth Who Seriously Considered Attempting Suicide, Spokane County, 2016



Source: 2016 Healthy Youth Survey

Figure 9. Who 8th, 10th, and 12th Grade Youth Would Most Likely Turn to For Help When Feeling Sad or Hopeless, Spokane County, 2016



Source: 2016 Healthy Youth Survey

Summary

The prevalence of youth who have *seriously considered attempting* suicide in Spokane County is similar to that in Washington state and the U.S. Older youth, female youth, and youth with lower family income are more likely to have *seriously considered attempting* suicide. There are multiple factors that increase likelihood of suicidal thought, though it's important to understand that risk factors are not causal—simply experiencing a risk factor will not cause a negative outcome. Rather, a cumulative level of risk factors increases the likelihood of a negative outcome, like suicide. Mental disorders, alcohol and substance abuse, and sexual orientation are key risk factors related to youth who have *seriously considered attempting* suicide. In contrast, there are key factors that can mitigate risk, when present. Social support from family and friends/peers is a key protective factor to buffer youth from suicidal thoughts.

