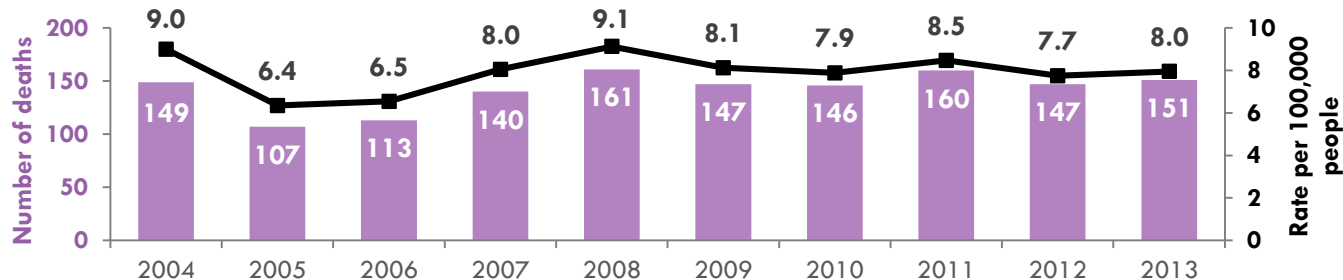


Santa Clara County: Suicide

Key findings

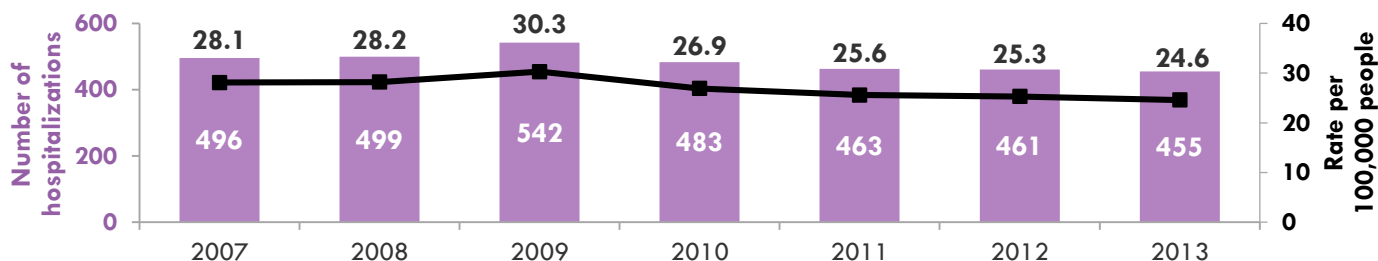
- In 2013, suicide was the leading cause of injury deaths and accounted for 22% of injury deaths.
- The death rate from suicide has decreased since 2004.
- The number and rate of hospitalizations for suicide have decreased since 2007 but have increased for emergency department (ED) visits until 2013.
- The rate of deaths is highest among Whites, and the rate of hospitalizations and ED visits for suicide is highest among African Americans.
- The death rate from suicide is highest among residents ages 45 and older. The rate of hospitalizations and ED visits for suicide is highest among adults ages 15 to 19.
- The death rate from suicide is higher for males than females, but rates for hospitalizations and ED visits are higher among females than males.

Number and age-adjusted rate of deaths from suicide, 2004-2013



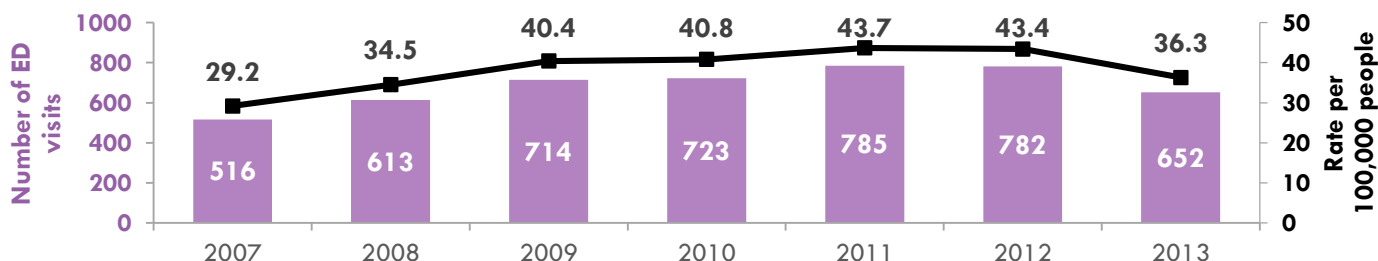
Source: Santa Clara County Public Health Department, 2004-2013 Death Statistical Master File¹

Number and age-adjusted rate of hospitalizations for suicide, 2007-2013



Source: Office of Statewide Health Planning and Development, 2007-2013 Patient Discharge Data¹

Number and age-adjusted rate of emergency department (ED) visits for suicide, 2007-2013



Source: Office of Statewide Health Planning and Development, 2007-2013 Emergency Department Data¹

Note: In each graph above, the colored bars represent the number and the black line represents the age-adjusted rate per 100,000 people.

Number, percentage, and age-adjusted/age-specific rates of deaths from suicide by demographic characteristics, 2004-2013

		Deaths		
		Average annual number of deaths	% of deaths from suicide*	Rate per 100,000 people ⁺
Santa Clara County		142	N/A	8.0
Gender	Male	105	74	12.1
	Female	37	26	4.1
Age group	0-14	<1	<1	0.1
	15-19	5	4	4.5
	20-24	11	8	9.5
	25-29	9	6	6.9
	30-34	10	7	7.2
	35-44	24	17	8.3
	45-54	34	24	13.4
	55-64	23	16	13.6
	65+	25	18	13.5
Race/ethnicity	African American	4	3	8.0
	Asian/Pacific Islander	26	18	5.0
	Latino	19	13	4.6
	White	90	63	11.6

Source: Santa Clara County Public Health Department, 2004-2013 Death Statistical Master File¹

Number, percentage, and age-adjusted/age-specific rates of hospitalizations and emergency department (ED) visits for suicide by demographic characteristics, 2009-2013

		Hospitalizations			ED visits		
		Average annual # of visits	% of hospitalizations for suicide*	Rate per 100,000 people ⁺	Average annual # of visits	% of visits for suicide*	Rate per 100,000 people ⁺
Santa Clara County		481	N/A	26.5	731	N/A	40.9
Gender	Male	166	35	18.3	258	35	27.9
	Female	315	65	35.3	474	65	54.9
Age group	0-14	14	3	3.8	50	7	13.9
	15-19	68	14	58.6	166	23	142.3
	20-24	58	12	51.4	104	14	92.2
	25-29	41	8	30.9	83	11	63.1
	30-34	35	7	25.6	58	8	42.5
	35-44	88	18	31.4	115	16	41.3
	45-54	90	19	33.9	99	14	37.2
	55-64	46	10	23.6	39	5	20.0
	65+	41	8	20.0	15	2	7.5
Race/ethnicity	African American	24	5	48.9	36	5	74.7
	Asian/Pacific Islander	78	17	13.9	93	13	16.7
	Latino	102	22	20.6	221	31	40.4
	White	243	52	39.2	330	46	58.7

Source: Office of Statewide Health Planning and Development, 2009-2013 Emergency Department Data and 2009-2013 Patient Discharge Data¹

Note: *Represents the percentage of deaths, hospitalizations, or ED visits in each category, e.g., the percentage of deaths or visits for suicide that were male or female. ⁺Rates for age groups are reported as age-specific rates per 100,000 people. All other rates are age-adjusted rates per 100,000 people. Numbers and percentages may not sum to county totals or 100% because some categories are not presented (race/ethnicity), due to missing data, or due to rounding. N/A indicates fields where data are not applicable. (--) indicates not reportable due to small number of deaths, hospitalizations, or ED visits.

Santa Clara County: Suicide

Annual economic cost of suicide

Costs	Deaths (N=151)	Hospitalizations (N=446)	ED visits (N=651)
Medical	\$658,000	\$5,227,000	\$2,374,000
Work loss	\$187,216,000	\$9,410,000	\$751,000
Combined	\$187,875,000	\$14,637,000	\$3,125,000

Source: Santa Clara County Public Health Department, 2013 Death Statistical Master File; Office of Statewide Health Planning and Development, 2013 Emergency Department Data and 2013 Patient Discharge Data; Centers for Disease Control and Prevention, Web-based Injury Statistics Query and Reporting System, 2010

Note: For annual economic costs, data are for non-fatal hospitalizations and non-fatal treat and release ED visits only and so may not match numbers reported in other tables and graphs. Costs are expressed in 2013 U.S. prices for hospitalizations and ED visits and in 2010 California prices for deaths.

Suicide attempts among adults

	Ever seriously consider attempting suicide in past 12 months	Sought help for suicidal thoughts (among those who considered suicide in past 12 months)
Santa Clara County	2% 95% CI: 1.5-3.0	54% 95% CI: 38.8-70.0

Source: Santa Clara County, Behavioral Risk Factor Surveillance Survey, 2013-14

Suicide attempts among high school students

		Seriously considered suicide in past 12 months
Santa Clara County		17
Gender	Male	14
	Female	20
Race/ethnicity	African American	22
	Asian/Pacific Islander	17
	Latino	17
	White	15

Source: California Healthy Kids Survey, 2009-10

Calls to the Santa Clara County Suicide & Crisis Hotline, October 2013 – September 2014

	Number of callers
Santa Clara County	23,067

Source: Santa Clara County, Suicide and crisis hotline, 2013-14

Santa Clara County: Suicide

Resources

National Suicide Prevention Lifeline: <http://www.suicidepreventionlifeline.org/> (24hour/7 days)

Santa Clara County Department of Mental Health: <http://www.sccgov.org/sites/mhd>

Santa Clara County Suicide & Crisis Hotline: 1-855-278-4204 (24 hour/7 days; Languages: English, Spanish)

Centers for Disease Control and Prevention: <http://www.cdc.gov/violenceprevention/suicide/>

Technical notes

Suicide or attempted suicide is defined as confirmed or suspected fatal or non-fatal injury or poisoning resulting from a deliberate violent act inflicted on oneself with the intent to take one's own life or with the intent to harm oneself. This category includes suicide, suicide attempt, and other intentional self-harm.²

Injury data are presented as counts and rates:

- Counts represent the total number of events (e.g., deaths, hospitalizations) that occur in a defined period of time, such as one year.
- Rates consist of the count divided by the number of people in the population at risk (e.g., Latinos in Santa Clara County), multiplied by a standard number (e.g., 100,000). When comparing data over time or between different populations, rates are often used instead of counts to make it possible to compare outcomes between populations that differ in size.
- Rates are "age-adjusted" to account for differences in the age profiles in populations over time or between different populations, in this case using weights corresponding to the 2000 U.S. population.
- Age-specific rates are similar to overall rates. Age-specific rates represent the number of cases in a specific age group, divided by the number of people in Santa Clara County in that age group and multiplied by a standard number (e.g., 100,000) to enable comparison between age groups that differ in size.
- Trends are generally presented as single-year estimates over time. However, in some Quick Facts, a "moving average" is presented, which consists of combining data for overlapping three-year periods. Moving averages stabilize fluctuations that can be misleading when counts from a specific type of injury are low from year to year.

¹Denominator is based on the following sources: State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000–2010. Sacramento, California, September 2012 (years 2000–2009); State of California, Department of Finance, State and County Population Projection, 2010–2060. Sacramento, California, January 31, 2013 (years 2010–2013)

²Centers for Disease Control and Prevention. Injury Center: 4.0 Definitions for WISQARS™ Nonfatal.

<http://www.cdc.gov/ncipc/wisqars/nonfatal/definitions.htm>. Last modified 3/27/2007. Accessed 4/10/2015.