

## Resource Sheet #3-1: Where to Find Suicide-related Data

### Mortality

- The major sources of mortality data are listed on the Suicide Prevention Resource Center (SPRC) website: [www.sprc.org/links](http://www.sprc.org/links)
- The National Center for Injury Prevention and Control is a web portal to the Centers for Disease Control and Prevention (CCDC) data. <http://www.cdc.gov/ncipc/>
- 2002 Official USA Data may be found on the website of the American Association of Suicidology <http://www.suicidology.org/displaycommon.cfm?an=1&subarticlenbr=21>
- The National Violent Death Reporting System (NVDRS), located at <http://www.injurypreventionweb.org/info/data.htm> The NVDRS provides charts of injury mortality trends for each State with the mechanism of suicide death for ages 1-24 years.

### State Data

- Suicide Prevention Resource Center website [www.sprc.org](http://www.sprc.org). Fact sheets have been developed for each State. <http://www.sprc.org/statepages>
- American Association of Suicidology website: <http://www.suicidology.org> Go to 'About Suicide' then go to Suicide Statistics. Click on each graph.

#### Exercise: Answer the following questions:

- Which population grouping (in the nation) has the highest number of suicides? (**Whites**)
- Which population grouping (in the nation) has the highest suicide rate? (**Males**)
- Where is your State ranked compared with other States? (**For example, Maryland was 45<sup>th</sup> with a suicide rate of 8.7 deaths/100,000 and 477 completed suicides in 2002**)
- CDC Web-based Injury Statistics Query & Reporting System (WISQARS) [www.cdc.gov/ncipc/wisqars/](http://www.cdc.gov/ncipc/wisqars/)

**Exercise:** Go to “Fatal Injury Report” and click on “Data from 1999 and later” Pick the following:

1. Intent or manner – pick “suicide”
2. Cause or mechanism – pick “firearm”
3. Census region/State –pick your State (for example, Maryland)
4. Race – pick “white”
5. Sex – pick “Female” (Choose the latest year)

**Answer: 15 suicide deaths by firearms in a population of 1,841,786 white females with an age-adjusted suicide rate of .78/100,000 (note: rates based on 20 or fewer deaths may be unstable)**

**Go back and click Sex—Male : 182 suicide deaths by firearms in a population of 1,772,249 white males with an age-adjusted suicide rate of 10.35/100,000**

Go back and continue with Males.... and choose

**Age group: 65 to 85+:** 54 suicide deaths by firearms in of a population of 199,719 males aged 65-85+ with an age-adjusted suicide rate of 27.47/100,00

**Age group 15-19 to 35-39:** 56 suicide deaths by firearms in of a population of 601,452 males aged 15-39 with an age-adjusted suicide rate of 9.44/100,000

### **Additional sources for State suicide data**

- Vital Statistics Records
- Medical Examiner and Coroner Data
- Child Fatality Review Committee or a Domestic Violence Review Committee

### **County Data**

- National Center for Injury Prevention and Control <http://www.cdc.gov/ncipc/maps/> Go to “Create State Map” and pick “Your State”. Pick “Suicide” and click “Map”

### **Morbidity (Attempt) Data**

- Suicide Prevention Resource Center (SPRC) website: [www.sprc.org/links](http://www.sprc.org/links)
- CDC WISQARS web site at <http://www.cdc.gov/ncipc/wisqars/>
- Hospital Emergency Room Data
- Hospital Discharge Data
- Youth Risk Behavior Surveillance System (YRBSS)  
<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>

## Risk Factor Data

**Behavioral Risk Factor Surveillance System (BRFSS)** <http://www.cdc.gov/brfss/>. Data available for 11 States regarding firearms.

**Youth Risk Behavior Surveillance System (YRBSS)**  
<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>

## Medical Examiner's and Coroner's files

These data-sets rely on death certificates and include a limited amount of demographic data, e.g., age, sex, race; and other data regarding the death such as the location of the event (e.g., home) and mechanism of death (e.g., gun shot wound to the head).

## Linked data-set files

In recent years, epidemiologists have begun to link death certificate data to data available from other sites such as, police department files. Linked data-sets offer opportunities to study deaths that are connected, such as homicide-suicides.

Linked data sets provide in-depth understandings of individual data elements such as the type of gun used in a suicide, where and when it was purchased, if and how it was stored, e.g., in a locked or unlocked place.

**Example:** The National Violent Death Reporting System being developed by the CDC is a multi-State linked data-set project.

## Large-scale, population-based surveys

As discussed earlier, since 1991, the CDC has conducted a biannual study of high school students across the U.S., the Youth Risk Behavior Surveillance Survey (YRBSS), which offers cross-sectional and trend analyses of self-reported suicide ideation, plans, and attempts.

## Psychological autopsy studies

Psychological autopsy studies are intensive, retrospective studies of suicides involving interviews with knowledgeable informants and analyses of available documents and records, e.g., educational, criminal, military, employment, mental and physical health, etc.

Psychological autopsy studies allow for a wealth of meaningful personal and historical information to help develop composite pictures of information such as the role of mental disorders, history of legal troubles, significant physical diseases, drinking behavior, etc. along the decedent's pathway to suicide.

Psychological autopsy studies offer the most significant information regarding suicide when they are done in case-control formats which allow for the discrimination of significant differences between deaths by intentional injury (suicides) and, for example, deaths by unintentional injury (accidents).

**Case-control studies: comparison of 2 or more groups of subjects to seek statistically significant differences between groups.**

For example, individuals hospitalized after a suicide attempt may be compared to those released from the emergency department after an attempt to help define characteristics of more (those requiring inpatient care) versus less lethal attempters. For example, suicides attempters can be studied relative to whether they have or do not have a diagnosis of a mood disorder.

**Additional risk factor data sources:**

- Peer-reviewed journals
- Periodicals
- Newspapers and newsletters
- Books
- Reports prepared by State legislatures, advisory boards, State and local departments, offices, and commissions, foundations, community groups, nonprofit organizations
- Community surveys
- Health services program data such as client intake information, client and/or staff surveys, waiting lists, service records
- Interviews with experts in the field, feasibility studies, or needs assessments

**Key Documents**

- National Strategy for Suicide Prevention: Goals and Objectives for Action. Go to [www.sprc.org/library/nssp.pdf](http://www.sprc.org/library/nssp.pdf)
- President's New Freedom Commission on Mental Health Report: Achieving the Promise. Go to [www.sprc.org/library/freedomcomm.pdf](http://www.sprc.org/library/freedomcomm.pdf)
- The Institute of Medicine report, Reducing Suicide: A National Imperative. Go to [www.suicidology.org](http://www.suicidology.org) Go to links of interest. Click on Featured link: Reducing Suicide

**National Violent Death Reporting System**

The CDC has launched a new data system in a handful of states called the National Violent Death Reporting System (NVDRS). Its purpose is to collect more detailed information on suicides and homicides than is currently collected on the death certificate. For suicide, this database will provide information about the victim's mental health, treatment status, substance abuse problems, and associated circumstances (such as job problems or relationship problems. Toxicology screen results (which test for the presence of drugs and alcohol in the victim) are also included in the data system. Personal identifiers are not included. Limited accessibility at present.

For more information For more information about the purpose of the NVDRS, visit [http://www.hsph.harvard.edu/hicrc/nviss/about\\_parent\\_nvdr.htm](http://www.hsph.harvard.edu/hicrc/nviss/about_parent_nvdr.htm) and click on "National

Violent Death Reporting System Brochure." For more information about the pilot version of the NVDRS, visit <http://www.hsph.harvard.edu/hicrc/nviss/>

## **National Registry of Evidence-based Programs and Practices (NREPP)**

### **State and local data sources**

Institutions and agencies collect information that can be extremely valuable for defining and understating a state or community's suicide problem. However, a lot of this information, especially at the state and local levels, is neither accessible nor collected for the purpose of suicide prevention. Accessing and analyzing these data systems can require a lot of time and effort.

If you have the resources though, you may get a more precise picture of the suicide problem in your state, county, or community than cannot be obtained from other data sources discussed.

- Emergency Medical Service (EMS) data
- Trauma Registries
- Poison Control Centers
- Psychiatric hospitals and the health clinics of colleges and universities
- Media reports of suicide
- State or regional reports
- Special studies/psychological autopsies

### **Other national data sources**

- National Center for Health Statistics [www.cdc.gov/nchs/](http://www.cdc.gov/nchs/) Search "suicide"
- Morbidity and Mortality Weekly Report [www.cdc.gov/mmwr/](http://www.cdc.gov/mmwr/)

### **Organizations and Web sites**

American Association of Suicidology ([www.suicidology.org](http://www.suicidology.org)) Click on "Links of interest"

American Foundation for Suicide Prevention ([www.afsp.org](http://www.afsp.org))

Suicide Prevention Action Network ([www.spanusa.org](http://www.spanusa.org)) Click on "Suicide Prevention and Survivor Resources"

Suicide Prevention Resource Center ([www.sprc.org](http://www.sprc.org)) click on "Featured Resources"