

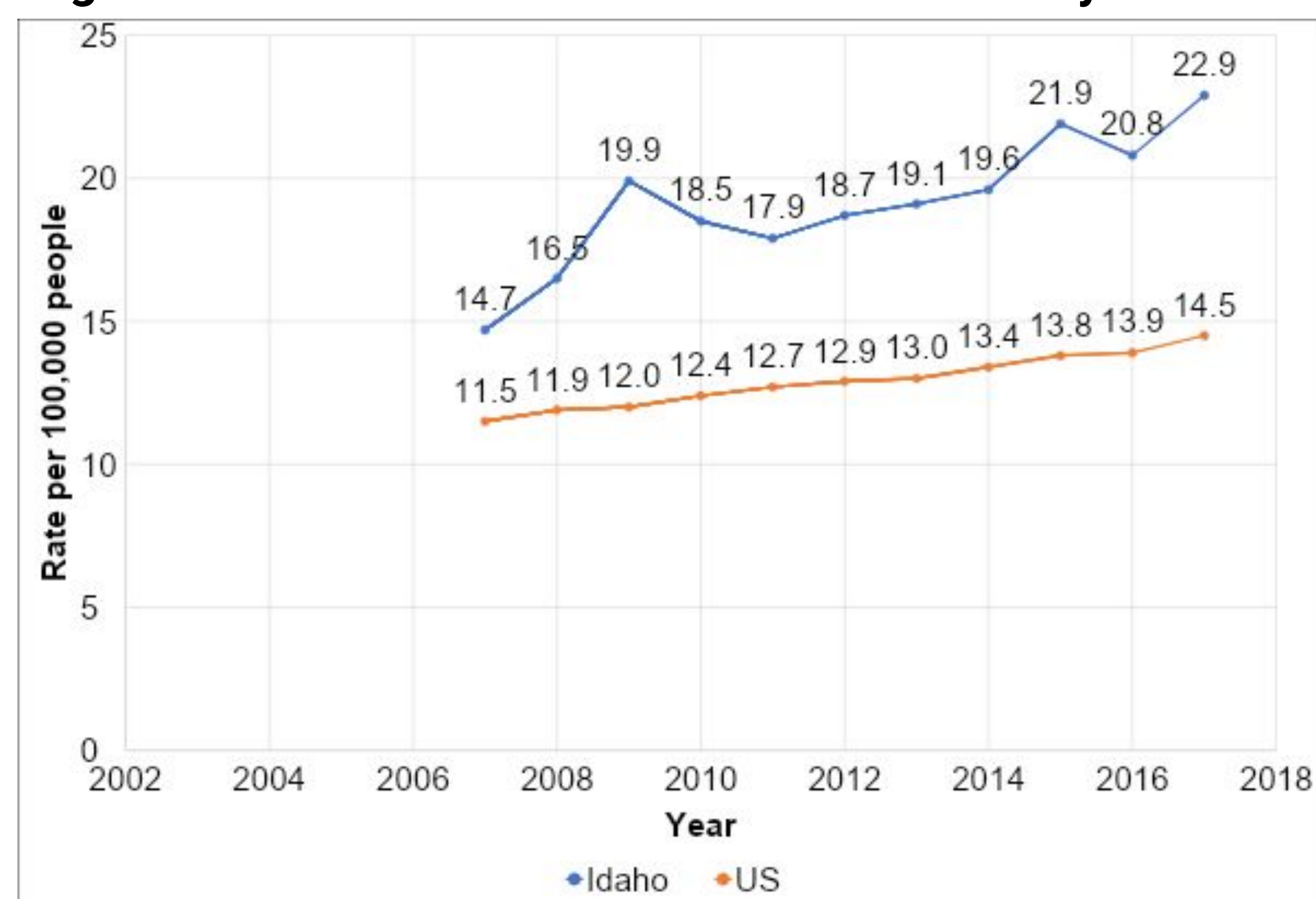
# Idaho Suicide Prevention: A Comprehensive Analysis of Suicide Needs and Resource Assessments in Idaho

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## PURPOSE

Idaho has the fifth highest suicide rate in the nation (23.8 per 100,000 people in 2018), and a rate that has been consistently higher than the national suicide rate for the past decade.

Figure 1: Idaho and U.S. Crude Suicide Rates by Year



## DESIGN & METHODS

Assessments and data sources were collected from:

- State subject matter experts
- Idaho Suicide Prevention Action Collective (ISPAC)
- Institute of Rural Health-Idaho State University (IRH-ISU) project team

Over 40 sources were reviewed and analyzed with 21 sources deemed useful related to suicide prevention in Idaho.

Information extracted includes:

- Target population
- Goals
- Methods/Activities
- Efforts/Plans,
- Needs/Gaps

## IDAHO SUICIDE PREVENTION PLAN (ISPP) GOALS AND CORRESPONDING GAPS

Goals	Gaps
1 - Integrate and coordinate suicide prevention activities across multiple sectors and settings	Coordinated suicide prevention activities needs to be improved Lack of collaboration and communication among public and private suicide prevention stakeholder groups
2 - Implement research-informed communication efforts designed to prevent suicide by changing knowledge, attitudes and behaviors	Need for increased awareness/education related to suicide.
3 - Increase knowledge of the factors that offer protection from suicidal behaviors and promote wellness and recovery	Recognize cultural differences and transfer this information to un-represented populations
4 - Promote responsible and accurate portrayals of suicide and mental illness in media reporting and the safety of online content related to suicide	Stigma associated with a mental health diagnosis serves as a barrier
5 - Develop, implement and monitor effective programs that promote wellness and prevent suicide and related behaviors	Shortage of mental health providers Mental health services are difficult to access due to affordability and/or transportation and can be lacking in quality
6 - Reduce access to lethal means of suicide among individuals with suicide risk	Use of a firearm is the most common mechanism in suicide deaths Gunlock campaigns and means restriction involving firearms are duplicative
7 - Expand knowledge of community and clinical service providers on the nature, related behaviors and prevention of suicide	Insufficient awareness and education related to suicide Lack of availability of training/education resources for educators related to suicide
8 - Embed suicide prevention as a core component of health care services	Lack of affordable health care for those in need Ratio of population to mental health providers is inadequate to support need
9 - Promote and implement effective clinical and professional practices for assessing and treating those identified as being at risk for suicidal behaviors.	Lack of awareness of mental health services in Idaho
10 - Increase knowledge of the factors that offer protection from suicidal behaviors and promote wellness and recovery.	Support is needed for those affected by a suicide attempt or bereaved by suicide
11 - Increase timeliness and usefulness of state and local surveillance systems relevant to suicide prevention and improve the ability to collect, analyze and use this information for action	Lack of data related to individuals in prisons, housed in medical facilities, or who speak a language other than English Under-reporting of mental health problems and suicide due to social norms Lack of reliable and/or consistent data collection methods or available data related to mental health and suicide

## ACKNOWLEDGEMENTS

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## RESULTS

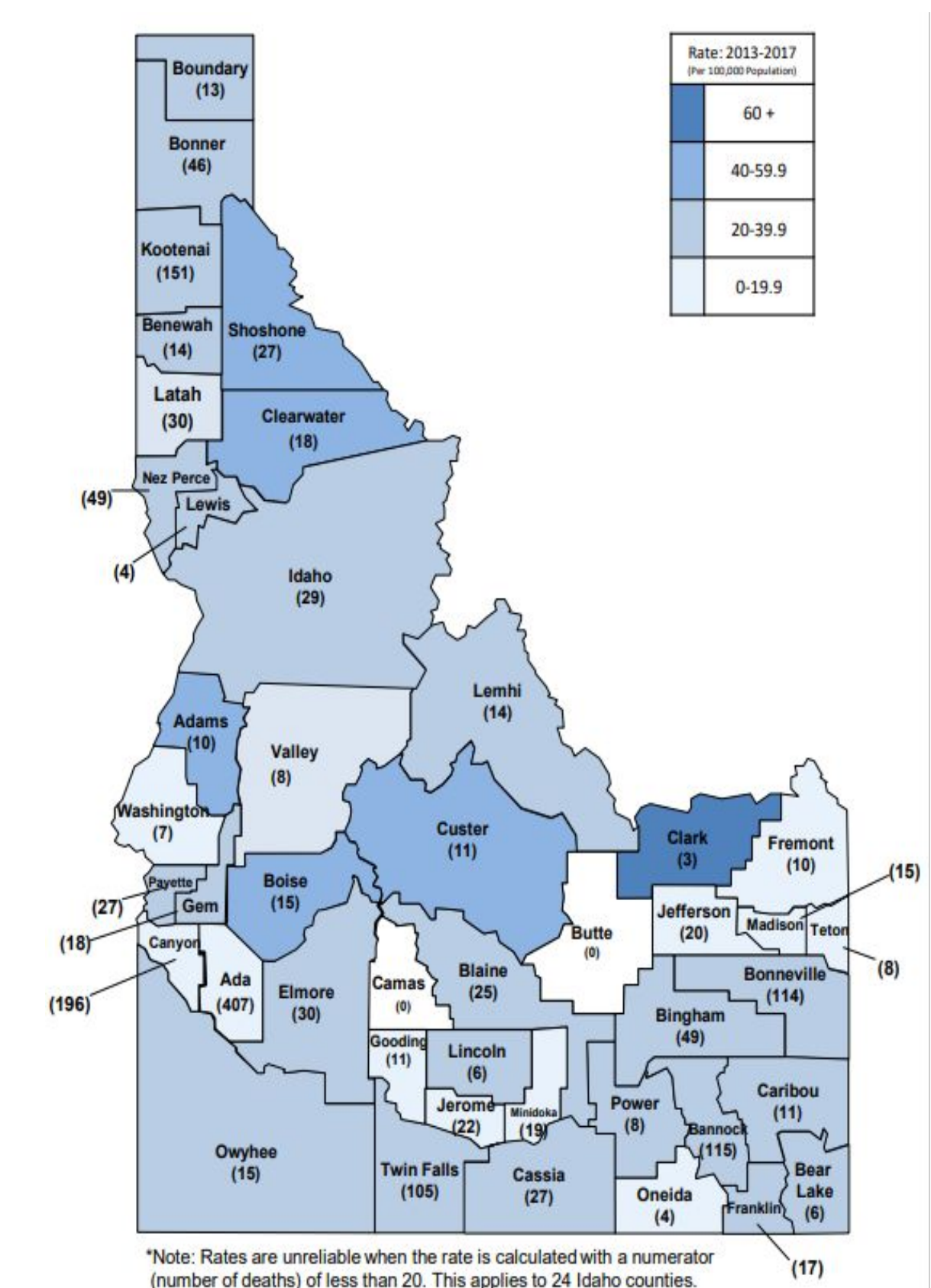
Data collected from 2014-2018 reveals:

- Males have a higher suicide rate
- Non-Hispanic American Indian/Alaska Native have the highest age-adjusted rate (AAR)

Figure 2: Number and Age-Adjusted Rate of Suicides by Race, Ethnicity, and Sex from 2014-2018

Race and Ethnicity	Total		Male		Female	
	# of Deaths	ARR	# of Deaths	ARR	# of Deaths	ARR
Total	1,844	22.2	1,439	34.7	405	10.0
Non-Hispanic	1,746	23.7	1,358	36.9	388	10.8
White	1,682	23.8	1,312	37.3	370	10.7
Black	9	-	6	-	3	-
American Indian/Alaska Native	47	44.6	36	66.6	11	-
Asian/Pacific Islander	7	-	4	-	3	-
Hispanic	97	10.0	80	15.9	17	-

Figure 3: Rate of Suicide by County from 2013-2017



Counties with the highest rates of suicide were:

1. Clark
2. Adams
3. Boise
4. Clearwater
5. Custer
6. Shoshone

## RECOMMENDATIONS

While there are limitations in Idaho's suicide data, it is known that suicide continues to be a significant issue in Idaho. Improvements are needed in:

- Suicide awareness
- Screening
- Training
- Access to mental health services