

STARK COUNTY
SUICIDE REPORT

2017



Introduction

This report is an overview of suicide deaths in Stark County for 2017. Contextual information for Ohio and United States is provided where available.

This report is intended to enhance awareness about the magnitude of suicide among the Stark County community as well as identify areas of greatest need and consequently guide prevention strategies. According to the Center for Disease Control (CDC), there is no single cause for a death by suicide, as suicide is a convergence of individual, relationship, cultural, and societal risk factors. Risk factors are characteristics associated with suicide and are not direct causes.

If using this information for reporting purposes, please utilize safe messaging guidelines as certain types of public messaging about suicide can increase risk among vulnerable individuals. For safe messaging guidelines:

<http://suicidepreventionmessaging.org/strategy/how-strategy-fits-framework>

<http://reportingonsuicide.org/>

Language Matters

Language matters when discussing issues of suicide as language reflects our attitudes and influences the attitudes of others. Use the phrase “died by suicide” instead of “committed suicide” or “completed suicide.” The word “commit” is associated with a crime and “complete” is associated with success. A suicide death is a tragedy and should not be associated with a crime or success. By changing the way we talk about suicide, we can change the way we think about suicide and reduce the stigma associated with mental illness and suicide.

Where do we go from here?

Suicide Prevention Resource Center (SPRC) identifies suicide prevention as comprehensive: it requires a combination of efforts that work together to address different aspects of the problem. The model SPRC identifies nine strategies that form a comprehensive approach to suicide prevention and mental health promotion. Each strategy is a bold goal that can be advanced through a range of possible activities such as programs, policies, practices, and services. Stark County Mental Health & Addiction Recovery is working with its partners to build upon each of these strategies. One specific example of this effort is Zero Suicide. Stark County has taken a vested interest in Zero Suicide, which requires a system wide approach to improve care of individuals. Fifteen behavioral health and healthcare organizations participated in a Zero Suicide Academy in August 2018 and are working to adopt the seven steps of the model to create system change and improved outcomes.

For more information on a comprehensive approach to suicide prevention please visit: <https://www.sprc.org/effective-prevention/comprehensive-approach>

You Can Help

Given the stigma around mental illness and suicide, most people do not know who to speak to. If you are concerned about a family member or friend, have an honest conversation with them. Talk with that person in private, listen to their story, tell them you care, encourage them to seek treatment, and ask directly if they are thinking about suicide. If a person says they are considering suicide, stay with them and call the Stark County Crisis Hotline anytime at 330-452-6000 or National Suicide Prevention Lifeline anytime at 1-800-273-TALK (8255).

Call to Action

The Stark County Suicide Prevention Coalition welcomes individuals or organizations that would like to join us to promote suicide prevention activities, reduce stigma around suicide and mental illness, and to empower individuals to get involved in saving lives. Our vision is a community with Zero Suicides. If you are interested in working together to save lives, contact Elena Aslanides-Kandis at 330-430-3949 or Elena.Kandis@StarkMHAR.org

If you or someone you know are in crisis, please immediately contact:

Crisis Hotline anytime at 330-452-6000 or

National Suicide Prevention Lifeline anytime at 1-800-273-TALK (8255) or

Domestic Violence help line anytime at 330-453-SAFE (7233) or

Crisis Text Line Text 4hope to 741 741 anytime

Stark County Suicide Report 2017

| YEAR | STARK COUNTY SUICIDES | STARK COUNTY RATE PER 100,000 | NATIONAL RATE PER 100,000 | STARK COUNTY POPULATION |
|--------------|-----------------------|-------------------------------|---------------------------|-----------------------------|
| 1980 | 47 | 12.4 | 11.9 | 378,823 1980 CENSUS |
| 1981 | 53 | 14.0 | 12.3 | |
| 1982 | 41 | 10.8 | 12.2 | |
| 1983 | 40 | 10.6 | 12.1 | |
| 1984 | 55 | 14.6 | 12.4 | |
| 1985 | 50 | 13.2 | 12.3 | |
| 1986 | 48 | 12.7 | 12.8 | |
| 1987 | 44 | 11.6 | 12.7 | |
| 1988 | 41 | 10.8 | 12.4 | |
| 1989 | 49 | 13.0 | 12.2 | |
| 1990 | 30 | 8.2 | 12.4 | 367,585 1990 CENSUS |
| 1991 | 38 | 10.4 | 12.2 | |
| 1992 | 45 | 12.1 | 12.0 | 372,123 1992 CENSUS EST. |
| 1993 | 38 | 10.2 | 12.1 | |
| 1994 | 45 | 12.0 | 12.0 | 374,615 1994 CENSUS EST. |
| 1995 | 34 | 9.1 | 11.9 | |
| 1996 | 35 | 9.3 | 11.6 | |
| 1997 | 43 | 11.5 | 11.4 | |
| 1998 | 53 | 14.1 | 11.3 | |
| 1999 | 33 | 8.8 | 10.7 | |
| 2000 | 37 | 9.9 | 10.7 | 378,098 2000 CENSUS |
| 2001 | 36 | 9.6 | 10.8 | |
| 2002 | 32 | 8.5 | 11.0 | |
| 2003 | 38 | 9.9 | 10.8 | |
| 2005 | 43 | 11.3 | 11.0 | 380,608 2005 CENSUS EST. |
| 2006 | 44 | 11.3 | 11.1 | |
| 2007 | 35 | 9.4 | 11.5 | |
| 2008 | 45 | 11.6 | 11.8 | |
| 2009 | 40 | 10.5 | 12.0 | |
| 2010 | 58 | 15.4 | 12.0 | 375,586 2010 CENSUS |
| 2011 | 49 | 13.1 | 12.7 | |
| 2012 | 56 | 14.9 | 12.9 | |
| 2013 | 62 | 16.5 | 13.0 | |
| 2014 | 57 | 15.2 | 13.4 | |
| 2015 | 59 | 15.7 | 13.8 | 375,736 (CEN. EST.) |
| 2016 | 77 | 20.4 | 13.9 | |
| 2017 | 70 | 18.8 | 13.7 | |
| | | | | |
| TOTAL | 1,700 | | | |

Stark County Suicide Rates Compared to National Suicide Rates

In 2017, there were 70 individuals who died by suicide, the second highest number recorded in Stark County since the community began keeping statistics in 1980. The American Foundation for Suicide Prevention reports that on average there are 25 suicide attempts for every suicide. Based on this data Stark County had an estimated 1750 suicide attempts in 2017.

According to the Center for Disease Control for the calendar year 2016 (latest year for national statistics), suicide is the tenth (10) leading cause of death in the United States and is the second (2) leading cause of death for people ages 10 to 34. In 2016, 44,965 individuals died by suicide in the United States. Per the American Association of Suicidology (AAS), an average of one person every 11.7 minutes killed himself/herself, with a total of 122.9 lives lost to suicide each day. An estimated 25 suicide attempts occurred for each suicide completion, or an estimated 1,124,125 suicide attempts. According to a SAMHSA study of suicide in 2016, 1.3 million adults (18 and up) attempted suicide. This translates to one suicide attempt every 28 seconds in the United States in 2016.

Stark County Mental Health & Addiction Recovery continues to monitor and study local suicide data to inform the community and utilize this information to expand and enhance efforts in Stark County to impact and reduce the number of suicide deaths.

Risk Factors for Suicide

Suicide is a complex behavior. According to American Foundation for Suicide Prevention, there is no single cause for suicide. Suicide most occurs when stressors and health issues converge to create an experience of hopelessness and despair. National psychological autopsy studies reflect that more than 90% of individuals who died by suicide had one or more mental illness disorders and/or substance abuse disorders. Major depression is the psychiatric diagnosis most commonly associated with suicide. The risk of suicide in people with major depression is about 20 times that of the general population. The risk of suicide in persons with alcohol dependence is 50-70% higher than the general population, according to the American Association of Suicidology.

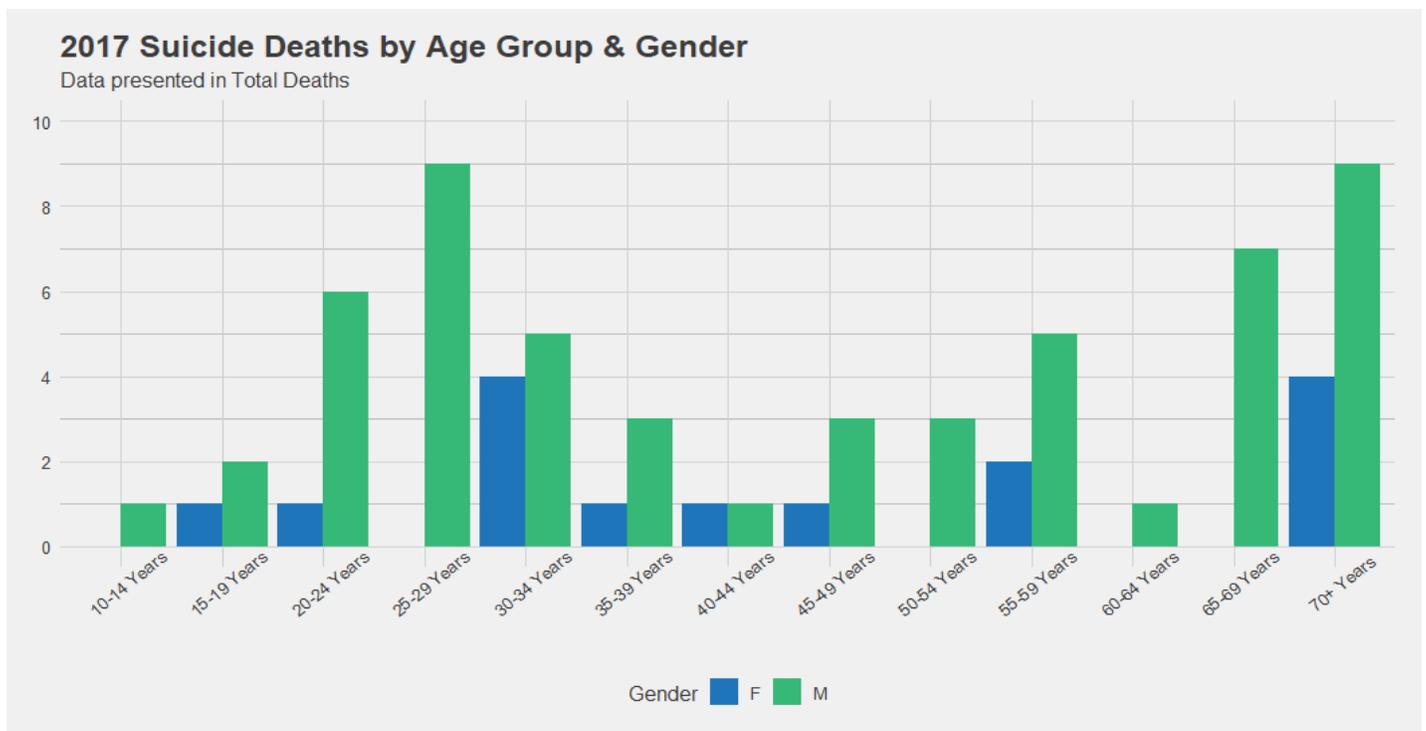
Risk factors are characteristics or conditions that increase the chance that a person may try to take their life. Stark County does not have an accurate account of the two top risk factors for suicide: mental illness and substance use disorders. Information about the individual who died by suicide is gathered by the coroner's investigators who interview family members who may or may not have specific information about the mental illness and/or substance abuse issues of their loved ones. However, information about a variety of risk factors is obtained by these investigators as they speak with family members.

In 2017, common risk factors identified by family members who shared information they had with the Stark County coroner's investigators include (in no order): major medical concerns; history of mental illness; especially depression; relationship/divorce issues; substance abuse; veteran status; and previous suicide attempts.

Age

Of the 70 individuals who died by suicide in 2017, the youngest individual was a 14-year-old white male and the oldest individual was an 88-year-old white male. The charts below list the percentages and numbers of suicides in Stark County by age groups. According to national research organizations, suicide rates for men rise with age, most significantly after age 75. The suicide rates for women typically decline after age 60, after peaking in middle adulthood, ages 45-49. The following information shows individuals who died by suicide broken down by age group and gender.

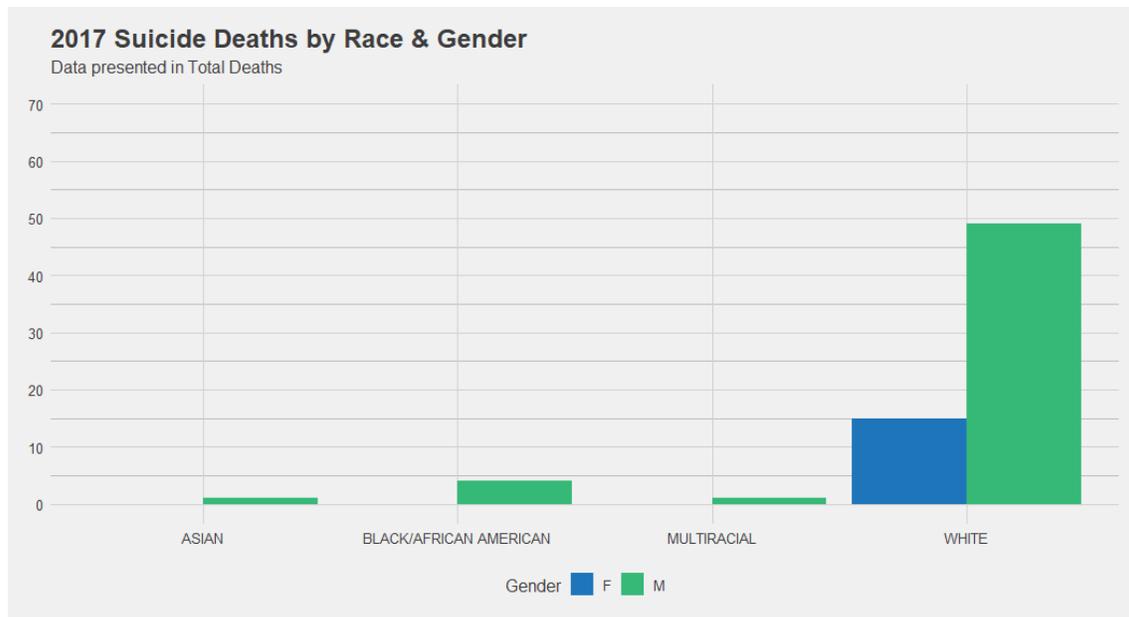
| Age Groups | Females | Males |
|------------|---------|-------|
| 10-14 yrs | 0 | 1 |
| 15-19 yrs | 1 | 2 |
| 20-24 yrs | 1 | 6 |
| 25-29 yrs | 0 | 9 |
| 30-34 yrs | 4 | 5 |
| 35-39 yrs | 1 | 3 |
| 40-44 yrs | 1 | 1 |
| 45-49 yrs | 1 | 3 |
| 50-54 yrs | 0 | 3 |
| 55-59 yrs | 2 | 5 |
| 60-64 yrs | 0 | 1 |
| 65-69 yrs | 0 | 7 |
| 70 + yrs | 4 | 9 |
| Totals | 15 | 55 |



Gender & Race/Ethnicity

Suicide cuts across all genders, ages, economic levels, social, race and ethnic boundaries. Nationally in 2016, males died by suicide at the rate of 3.4 suicides for each female suicide. However, females continue to attempt suicide at the rate of 3 attempts for each male attempt. In Stark County in 2017, males died by suicide at a rate: 55 males (78.6%) to 15 females (21.4%). Nationally, suicide rates for whites in 2016 were 109.7 per day; non-whites were 13.1 per day. White males had the highest suicide rate, 31,032 of the nation's 44,965 suicides. Black females had the lowest rate of suicide death, 564 of the nation's 44,965. The information below reflects the breakdown of Stark County suicides by gender and race/ethnicity.

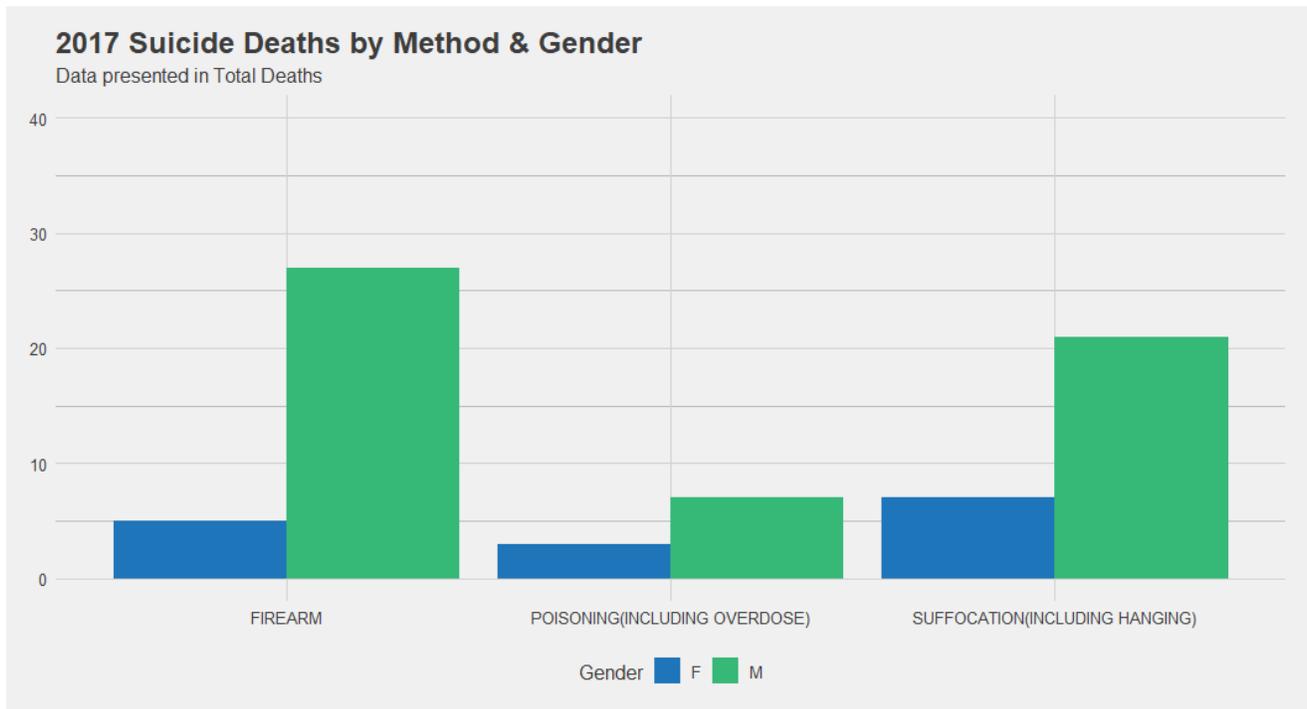
| Race/Ethnicity | Female | Male | Total Percentage of Stark County Suicides in 2017 |
|------------------------|------------|------------|---|
| Asian | 0 | 1 (1.4%) | 1.4% |
| Black/African-American | 0 | 4 (5.7%) | 5.7% |
| Multiracial | 0 | 1 (1.7%) | 1.7% |
| White | 15 (21.4%) | 49 (70%) | 91.4% |
| Total | 15 (21.4%) | 55 (78.6%) | 100% |



Methods of Suicide

According to the national statistics for 2016, firearms continue to be the leading method for suicide, at 51%. Suffocation/hanging and poisoning are the next two highest methods, 25.9% and 14.9% respectively. In Stark County, firearms also continued to be the leading method in 2017 at 45% of all suicide deaths. The chart below identifies the methods used by both genders to complete suicide in 2017 in Stark County.

| Stark County 2017 | Firearms | Poisoning (including overdoses) | Suffocation (including hangings) | Total Suicides |
|------------------------|----------|---------------------------------|----------------------------------|----------------|
| Females | 5 | 3 | 7 | 15 |
| Males | 27 | 7 | 21 | 55 |
| Total by Method | 32 | 10 | 28 | 70 |



Suicides by Month in Stark County

The question often arises if suicides increase during the holidays. National statistics from the CDC do not support this idea and data reports that suicides typically rise in the Spring and Summer months (see link below). Most recently, as reported by the AAS, more suicides occur during the spring and summer months. The charts below identify the months suicides occurred in Stark County in 2017. There is no evidence of a pattern in either male or female suicide deaths.

<https://www.cdc.gov/ViolencePrevention/suicide/holiday.html>

| Stark County 2017 | January | February | March | April | May | June | July | August | September | October | November | December |
|-------------------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|
| Females | 0 | 0 | 0 | 2 | 1 | 2 | 1 | 1 | 1 | 2 | 3 | 2 |
| Males | 8 | 8 | 4 | 7 | 4 | 3 | 3 | 5 | 2 | 3 | 5 | 3 |
| Total | 8 | 8 | 4 | 9 | 5 | 5 | 4 | 6 | 3 | 5 | 8 | 5 |

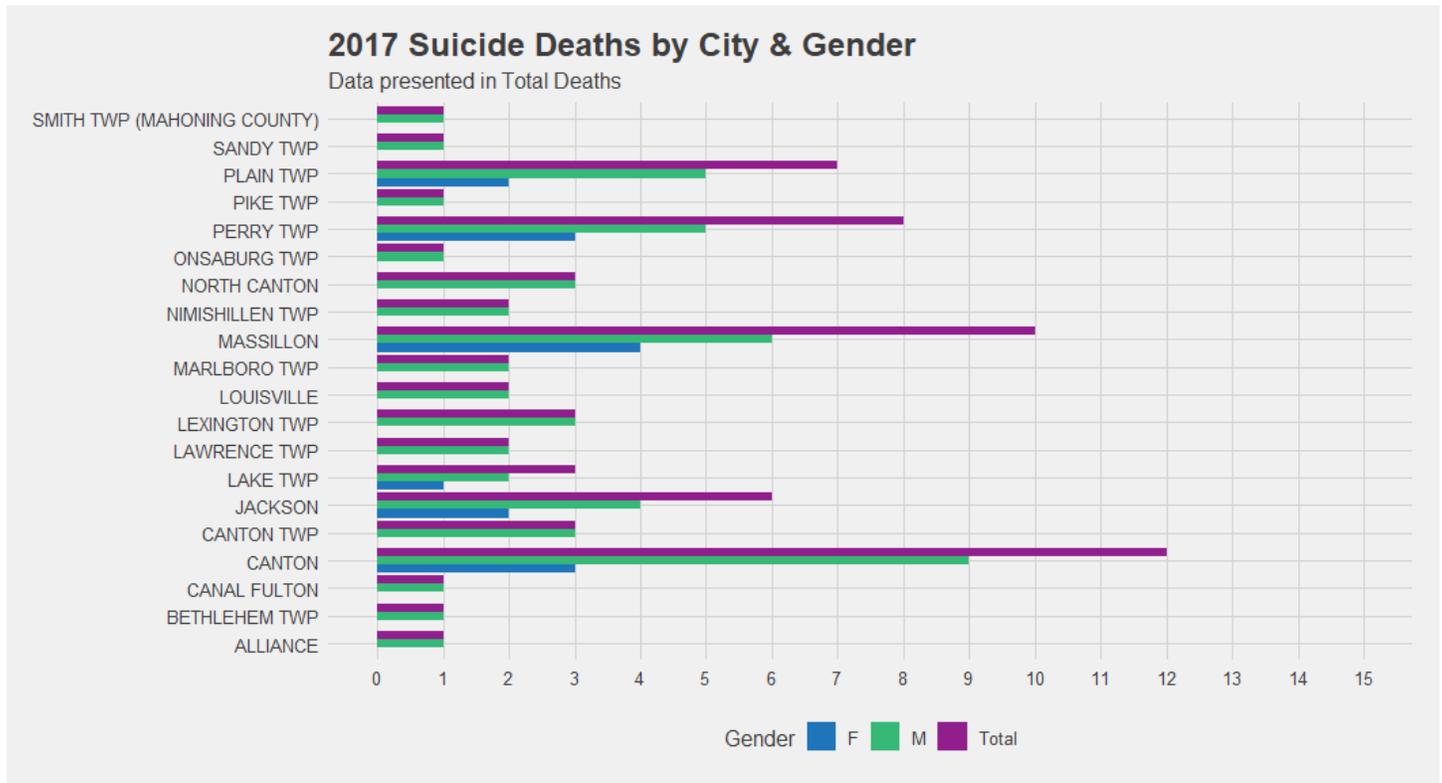
Stark County Locations

As demonstrated by the suicide numbers below, cities and townships, both large and small, experience suicides. Suicide does not discriminate based on a person's residence, which is typically the chosen location for a suicide death. Annual reports by the AAS reflect that certain states and their locations tend to have a higher occurrence of suicide; the highest number of suicide deaths tend to happen in the inter-mountain states. In the United States for the calendar year 2016 (the latest year for which statistics are available), Montana, Alaska, Wyoming, New Mexico, Utah, Idaho, & Nevada – all states in the West/Mountain Divisions – took seven of the top ten ranked states for numbers of suicides.

Also according to the AAS, in 2016, Ohio was ranked 30 out of a total of 50 states and the District of Columbia. Ohio's rate was 14.7 suicides for every 100,000 individuals, higher than 13.9 which was the national average. In 2016, Stark County had a rate of 20.4 suicides for every 100,000 individuals. Conversely, in 2017, Stark County had 70 suicides, or 18.8 suicides for every 100,000 individuals which is slightly lower than 2016's numbers.

| Stark County 2017 | Females | Males | Total | % |
|-------------------------|---------|-------|-------|-------|
| Alliance | 0 | 1 | 1 | 1.4% |
| Bethlehem Twp | 0 | 1 | 1 | 1.4% |
| Canal Fulton | 0 | 1 | 1 | 1.4% |
| Canton | 3 | 9 | 12 | 17.1% |
| Canton Twp | 0 | 3 | 3 | 4.3% |
| Jackson Twp | 2 | 4 | 6 | 8.6% |
| Lake Twp | 1 | 2 | 3 | 4.3% |
| Lawrence Twp | 0 | 2 | 2 | 2.9% |
| Lexington Twp | 0 | 3 | 3 | 4.3% |
| Louisville | 0 | 2 | 2 | 2.9% |
| Marlboro Twp | 0 | 2 | 2 | 2.9% |
| Massillon | 4 | 6 | 10 | 14.3% |
| Nimishillen Twp | 0 | 2 | 2 | 2.9% |
| North Canton | 0 | 3 | 3 | 4.3% |
| Osnaburg Twp | 0 | 1 | 1 | 1.4% |
| Perry Twp | 3 | 5 | 8 | 11.4% |
| Pike Twp | 0 | 1 | 1 | 1.4% |
| Plain Twp | 2 | 5 | 7 | 10% |
| Sandy Twp | 0 | 1 | 1 | 1.4% |
| Smith Twp (Mahoning Co) | 0 | 1 | 1 | 1.4% |

The chart below shows the suicides per area as they were investigated by the law enforcement department responsible for that jurisdiction in Stark County, 2017. Law enforcement agencies investigate suicides to rule out the possibility of homicide; suicides are no longer considered a crime in the United States.



For those bereaved by suicide

Losing a loved one to suicide may be one the most difficult life circumstances one may face. Survivors of suicide, or people who have lost a loved one to suicide, can experience grief that is intense, complex, and long term. Grief does not follow a linear path and is unique to each individual. Healing does occur. Support groups for survivors of suicide do exist and can be extremely helpful in navigating the grief process. For information on joining the Survivors of Support group, contact Elena Aslanides-Kandis at 330-430-3949 or Elena.Kandis@StarkMHAR.org

To learn more about suicide risk factors and warning signs:

<https://starkmhar.org/prevention-resources/suicide-prevention-coalition/suicide-risk-factors-warning-signs/>
<https://afsp.org/about-suicide/risk-factors-and-warning-signs/>

To learn more about Stark County Mental Health & Addiction Recovery’s Care Network and options for treatment:

<https://starkmhar.org/care-network/care-network-providers/>