



SHORT SUBJECTS

CALEVDRS SERIES

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S-12-006

Characteristics of Suicide: Data from California's Electronic Violent Death Reporting System (CalEVDRS)

On average, nine Californians die by suicide every day – or 3,300 each year.³ Californians have made suicide prevention a priority: Voters passed Proposition 63 (the Mental Health Services Act) in 2004,⁵ then-Governor Schwarzenegger directed California's Department of Mental Health (CDMH) to develop a statewide strategic plan on suicide prevention in September 2006,⁴ and California legislators passed bills to prevent discrimination and harassment in California schools¹ and to prioritize mental health services for veterans.²

These efforts can best be supported by accurate, detailed and timely data. This brief describes suicides using data from California's Electronic Violent Death Reporting System (CalEVDRS). CalEVDRS combines information from death certificates, police investigations and coroner files. This fact sheet uses data from nine counties providing complete records from 2009.

Of the 1,377 CalEVDRS suicides in 2009, most were isolated incidents. Only 20 were part of homicide-suicides. There were also 78 "legal intervention" deaths. Legal intervention deaths are those which result from interactions with law enforcement officers. Both "suicide" and "homicide" circumstances are captured in CalEVDRS for these instances.

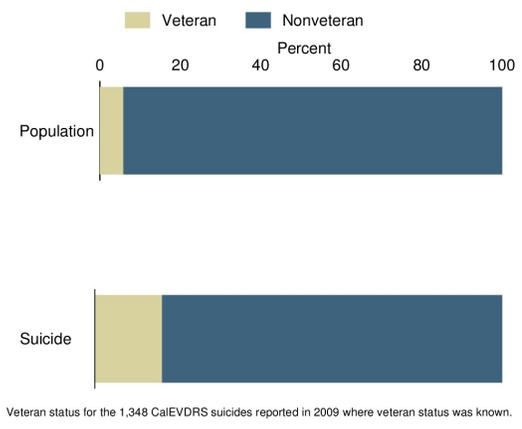
SUICIDE VICTIMS

Suicide victims were of all ages but disproportionately veterans and male. Although veterans account for only six percent of the population in CalEVDRS counties, they accounted for 17 percent of suicide victims and eight percent of legal intervention. See Figure 1. Males accounted for almost three-quarters of all suicide victims in CalEVDRS.

SUICIDE CIRCUMSTANCES

Information is not always available on suicide circumstances. At least one circumstance was known/coded for 1,228 (89%) of CalEVDRS suicides

Figure 1. Proportionately More Veterans Commit Suicide than Nonveterans



in 2009. Highlights of the death investigation data are below:

Suicide investigations, especially for male and minority victims, did not typically reveal a mental health problem and were even less likely to reveal a history of treatment. Thirty-five percent of victims had evidence of a mental health problem. Three-quarters of these victims were diagnosed with depression and 14 percent were diagnosed with bipolar disorder. Only 28 percent of victims with a mental health problem were in current treatment and 40 percent had ever been treated. Women victims (48% vs. 31 % for men) and Whites (39% vs. 27% for other race groups) were more

CalEVDRS Partnership

CalEVDRS is a partnership between the CRB and the California Department of Public Health, with funding provided by The California Wellness Foundation. CRB has partnered with CDPH to publicize the information available through this database. The 14 counties currently participating in CalEVDRS represent 58 percent of California's population and over half of its suicides. CalEVDRS data can be accessed at EpiCenter (<http://Epicenter.cdph.ca.gov>). For information about CalEVDRS, please contact SAC@cdph.ca.gov.

likely to have a mental health problem and were more likely to receive treatment for their mental health problems.

Thirty-seven percent of the suicide victims were documented to have a “current depressed mood.” This is a proxy for undiagnosed depression and is coded based on observations of the victim by friends and family members. Two-thirds of those thought to have a “current depressed mood” were not diagnosed with a mental health problem.

One in five suicide victims were coded as having either an alcohol or drug problem. Male victims had a higher incidence of alcohol or drug problem (22%) than did females (14%). Hispanics (25%) and Whites (22%) were more likely to have an alcohol or drug problem than Blacks (11%) or Asian/Pacific Islanders (6%).

One in four suicide victims was coded as having a relationship problem – 20 percent had an intimate partner problem, 5 percent had another relationship problem and 1 percent had both. Males were more likely than females (27% vs. 14%) and Hispanics were almost twice as likely as other races/ethnicities (39% vs. 21%) to have a relationship problem precipitate their suicides.

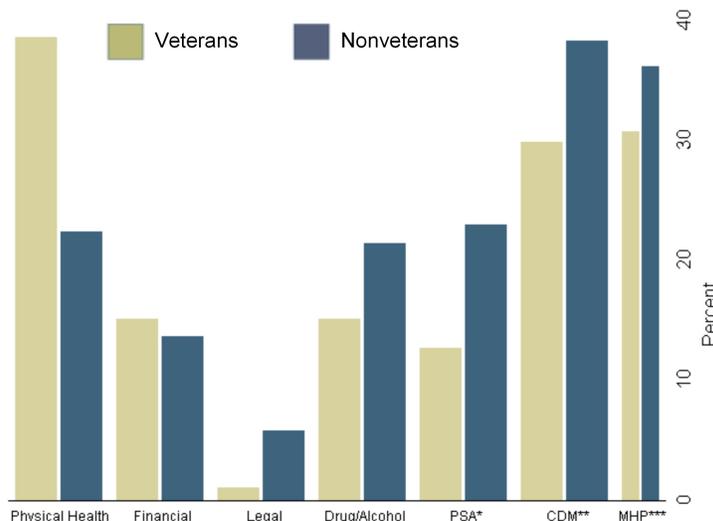
One of every five suicide victims was documented as having job or financial problems – 14 percent had financial problems, 10 percent had a job problem, and four percent had both.

Firearms were the most commonly used weapon/mechanism in single victim suicides (39%) and homicide-suicides (78%). Of the firearm suicides with known firearm type, 80 percent were committed with handguns. Hanging/strangulation/suffocation was the next most common mechanism of suicide (32%), followed by poisoning (18%).

VETERAN SUICIDE CIRCUMSTANCES

Veterans and nonveterans differed in their suicide circumstances. Veterans were less likely than nonveterans to be diagnosed with mental health problems, to have a current depressed mood, to have a documented alcohol or substance abuse problem, to have a current legal problem or to have a history of suicide attempts. Veterans were much more likely than nonveterans to have physical health problems prior to their suicide. See Figure 2.

Figure 2. Veterans and Non-veterans Have Different Suicide Circumstances



*PSA: Previous Suicide Attempt **CDM: Current Depressed Mood ***MHP: Mental Health Problem
Data for 1,228 suicides in 2009 where at least one circumstance was known.

TOXICOLOGY

Thirty-one percent of suicide victims tested positive for alcohol. Antidepressants (9%) and opiates (8%) were the next most common drugs.

ENDNOTES

- 1) Assembly Bill No. 394 (2007). Ch. 566.
http://www.leginfo.ca.gov/pub/07-08/bill/asm/ab_0351-0400/ab_394_bill_20071012_chaptered.pdf.
- 2) Assembly Bill No. 3083. (2008). Chapter 591.
http://www.leginfo.ca.gov/pub/07-08/bill/asm/ab_3051-3100/ab_3083_bill_20080930_chaptered.pdf.
- 3) California Department of Public Health, Safe and Active Communities Branch. EPICenter website available at <http://epicenter.cdph.ca.gov>.
- 4) Department of Mental Health. (2008). California Strategic Plan on Suicide Prevention: Every Californian is Part of the Solution.
http://www.dmh.ca.gov/Prop_63/MHSA/Prevention_and_Early_Intervention/docs/SuicidePreventionCommittee/FINAL_CalS_PSP_V9.pdf.
- 5) Mental Health Services Act: Fiscal References FY2010-11.
http://www.dmh.ca.gov/Prop_63/MHSA/docs/FiscalReferences/MHSAFY1011Updates.pdf.

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