Indicator Overlap for Substance Abuse and Mental Health Indicators: Suicide

The topic of behavioral health and primary care integration, increased rates of suicide and depression amongst youth, and bullying have become defining factors to the continued evolution of the field of prevention in the state of Louisiana. The Louisiana State Epidemiology Workgroup (SEW) has developed a series of data briefs to provide details on the aforementioned topics. This data brief is the second in a set of two and will discuss the youth mental health indicator suicide.

Suicide is a serious mental and public health problem that affects people of all ages and all sectors of the community. According to the Centers for Disease Control and Prevention (CDC), suicide is the third leading cause of deaths among 15–24 year olds. Exposure to suicidal behavior of others and history of depression or mental illness were among several risk factors cited for suicide (citation).

In 2013, 18.5% of high-schoolers in Louisiana reported seriously considering attempting suicide during the 12 months prior to the Youth Risk Behavior Survey (YRBS). Figure 1 is a depiction of the percentage of students who answered yes to the question “Have you ever considered attempting suicide” in the 2014 CCYS. Over 20% of 8th, 10th, and 12th grade CCYS participants answered yes to this question. In a classroom size of 25, that percentage equals approximately four students.

**Figure 1.** Percentage of Students in 6th, 8th, 10th, and 12th Grade in Louisiana Who Answered Yes to “Have You Ever Considered Attempting Suicide?” (Source: CCYS)

Figure 2 shows a comparison of the percentage of students in 9th–12th grade who reported attempting suicide in Louisiana and at the national level in the past year for 2009, 2011, and 2013. Approximately 13% of high-schoolers in Louisiana reported attempting suicide in 2013, in comparison to the national average of 8 percent. The rate of attempted suicide among youths has consistently been higher than the national rate. Efforts to promote awareness of depression and mental illness amongst children and adolescents as well as continued support from peers, parents, school faculty, and members of the community will help to decrease suicide attempts and improve the mental and emotional status of our youth.

**Figure 2.** Percentage of Students in 9th–12th Grade Who Reported Attempting Suicide One or More Times During the 12 Months Before the Survey: 2009–2013 (Source: YRBS)

The co-occurrence of mental illness and chronic disease in individuals has been illustrated through data allocated by the National Hospital Discharge Survey (NHDS) and the National Ambulatory Medical Care Survey (NAMCS). Depression was found to co-occur in 17% of cardiovascular disease cases, 23% of cerebrovascular (stroke) cases, and with more than 40% of individuals with cancer in 20122 (American Heart Association, 2012). Children and young adults have also experienced an increase in the prevalence of physical and mental illness. Nearly one of five youths aged 2–19 years was obese in 20101. Obesity is directly associated with the chronic diseases diabetes and cardiovascular disease and is increased by the health risk behaviors of drinking alcohol, smoking, and lack of physical activity. These health risk behaviors can increase susceptibility to antisocial behavior, bullying, anxiety, depression, and in severe cases, suicide. Based on this data, the integration of behavioral health services and primary care services is paramount to the improvement of our state and our nation’s health and wellness.