Suicide is the second leading cause of death among 10-24 year old youth. In 2013, 118 youth died by suicide.

Males take their lives at a dramatically higher rate than females.

Almost half of all youth suicides in 2013 involved firearm use.

- Suicide is the second leading cause of death among 10-24 year olds in Missouri, exceeded only by unintentional injury (including motor vehicle accidents). In 2013, 310 youth died by unintentional injury, and 118 died by suicide.
- Most (75%) of youth who died by suicide in 2013 were 18-24.
- Among all youth suicides in 2013, the highest percentage was by white males (68%).
- No African American female youth died by suicide.

- Youth suicide rates in Missouri have remained fairly stable over time and are higher than rates nationally (8.8 per 100,000 compared to 7.3 from 2003 to 2013).
- The largest number of youth suicides occurred in the St. Louis and Kansas City metropolitan areas. Counties with the highest suicide rates are in rural Missouri.
Older males (18-24) use firearms far more than females in the same age group to take their lives (53% compared to 38%).

Females 10-17, use suffocation more often than other means. Among female youth 18-24, suffocation and firearms are used most frequently.

Among females 18-24, 19% ended their lives using poison in the 2009-2013 time period. Only 5% of males in this age range used poison. No youth under 18 used poison.

From 2009-2013, an average of 50% of all youth suicides involved firearms.

In 2013, 49% of youth who died by suicide used firearms.

In the 2009-2013 time period, an average of 38% of youth used some means of suffocation.

In the 2009-2013 time period, among males 10-17, suffocation was the primary means of suicide, followed by firearms. Firearm use was the primary means of suicide among males ages 18-24.

The means by which youth take their lives has remained relatively steady over time, though there was an increase in deaths by suffocation between 2010 and 2011.

From 2009-2013, firearms tend to be the means of suicide for youth more than suffocation on average.
Among youth 10-19, intentional self-injury rates are higher among females than males. However, there is no difference by sex for youth 20-24.

The suicide rate for young males is five times that for females, but the intentional self-injury rate is higher among females, suggesting that males may be more likely to die by suicide without ever receiving emergency room or other hospital services.

In 2012, intentional self-injury rates were highest for both males and females ages 18-19.

In 2012, youth aged 15-17 years old had the highest reported intentional self-injury rates of any age group followed by 18-19 year old youth.

*Intentional self-injury data are from the Department of Health and Senior Services (DHSS) Missouri Information for Community Assessment (MICA) and were obtained from in-patient hospital or emergency room records of individuals treated for intentional self-injuries.
Suicidal Ideation

According to the Missouri Student Survey (2014), 12% of middle and high school students reported seriously considering suicide in the year prior to the survey, 9% said they had made a suicide plan and 5% said they attempted suicide. Of those who attempted suicide 3% were male and 7% were female.

While more females than males seriously considered, planned or attempted suicide, attempts requiring medical attention were more similar between males and females.

White students were less likely than students of any other racial/ethnic group to report that they had attempted suicide in the past year.

Suicidal ideation was highest among 8th and 9th grade students. The percentage reporting they needed a doctor or nurse’s care for a suicide attempt was similar among younger and older youth.

Suicide data are from the Department of Health and Senior Services (DHSS) Missouri Information for Community Assessment (MICA) with the following exceptions: 1) means data from 2007-2011 and Missouri/U.S. comparison data are from the Centers for Disease Control Web-based Injury Statistics Query and Reporting System (WISQARS); and 2) data on suicidal ideation are from the 2012 Missouri Student Survey. “Firearms” include pistols, rifles, and shotguns; “Suffocation” includes hanging and asphyxiation; “Poisoning” includes drug overdoses; and “Other” includes jumping, cutting, drowning, and unspecified/other.

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