

Suicide rates in Canada increasing in girls aged 10-19

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Suicide rates in Canada are increasing for girls but decreasing for boys, with suffocation now the most common method for both sexes, according to an article in *CMAJ* (*Canadian Medical Association Journal*).

Suicide is the second most common cause of death for Canadians aged 10-34, particularly in those aged 10-19 years. Previous studies of young people aged 15-25 years in Canada indicate that <u>suicide</u> rates are fairly stable, although there is little literature on suicide in children aged 10-14 years.

Researchers from the <u>Public Health Agency</u> of Canada looked at <u>mortality data</u> from Statistics Canada between 1980 and 2008 to determine suicide patterns in children and adolescents aged 10-19 years. They found that, while the suicide rate for Canadians in that age group decreased an average of 1% each year from 1980-2008, there were variations by age and sex.

In 2008, there were 233 suicides in young Canadians, accounting for 20% of all deaths for people aged 10-19 years. For children 10-14 years old, the suicide rate was 1.2 per 100 000, and 88% of these were by suffocation.

Suicide rates for boys and male adolescents remained stable or declined compared with increased rates for females in these age groups. Suicide rates for girls aged 10-14 years increased from 0.6 per 100 000 in 1980 to 0.9 per 100 000 in 2008. Rates for female adolescents increased from



3.7 to 6.2 per 100 000 during the same period. Deaths by suffocation for females increased by an annual average of 8% in both <u>age groups</u>. Among female adolescents, deaths from guns or poison decreased significantly (an average of 7.8% and 4.6% respectively per year).

The trend of suicide by suffocation moving to younger ages may be partly due to cases of the "choking game" (self -strangulation without intent to cause permanent harm) that have been misclassified as suicides.

"The prevalence and influence of the Internet and social media in the lives of young Canadians cannot be discounted in this discussion and warrants further research to understand its risks related to suicide," the authors write. "The term 'cybersuicide' has evolved to describe the numerous websites, chat rooms and blogs promoting suicide and suicidal ideation. Such sites are obviously troubling; yet, paradoxically, the Internet and social media also hold potential benefits for the prevention of suicide."

In a related commentary, Dr. Laurence Kirmayer from the Jewish General Hospital and the Department of Psychiatry, McGill University, Montréal, Quebec, writes that, while the Internet has helped spread information on self-harm and suicide, "social and economic deprivation in a region is associated with higher rates of suicide."

"Economic inequities may expose young people to a wide range of stressors and negative life events in their families and communities, as well as diminish their own hopes and expectations for a positive future with meaningful opportunities for work and life," writes Dr. Kirmayer.

He notes that the suicide rate for Aboriginal young people is three to five times higher than that for non-Aboriginal young people and that looking at regional differences in national data might be helpful in addressing the issue in this demographic.



"Understanding the impact of these larger social determinants on young people's identities, resilience and well-being may hold the key to further reductions in suicide in the years to come," Kirmayer concludes.

More information: www.cmaj.ca/lookup/doi/10.1503/cmaj.111867 Commentary: www.cmaj.ca/lookup/doi/10.1503/cmaj.120509

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