

U.S. suicide rates rising faster outside cities

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(HealthDay)—Although the U.S. suicide rate has been rising gradually since 2000, suicides in less urban areas are outpacing those in more urban areas, according to a new federal report.

"Geographic disparities in [suicide](#) rates might be associated with suicide risk factors known to be highly prevalent in less [urban areas](#), such as limited access to mental [health care](#), made worse by shortages in behavioral health care providers in these areas, and greater social isolation," the researchers from the U.S. Centers for Disease Control and Prevention wrote.

It's also possible that economic pressures may have played a role, the study authors noted. The biggest increase in the suicide gap occurred beginning in 2007-2008, when the U.S. economy was experiencing a severe recession.

Another possibility the researchers pointed to is the country's opioid epidemic. In the early years of the current study, opioid misuse was more common in less urban areas.

About 600,000 U.S. residents died by suicide from 1999 to 2015, the CDC researchers said. The highest annual suicide rate occurred in 2015.

Suicide by hanging went up notably during the study period. The report said the rate of non-firearm suicide, particularly from suffocation—which includes hanging—went up more than the increase in gun-related suicides.

Men were four times more likely than women to kill themselves, the findings showed. By age, the highest [suicide rates](#) were among 35- to 64-year-olds, and people 75 and older.

Whites and American Indian/Alaska Natives had the highest rates of suicide. They also had the sharpest increases during the study period. For whites, the rate jumped from about 15 to 18 per 100,000 people. For American Indian/Alaska Natives, the suicide rate went from almost 16 up to 20 per 100,000 people.

Suicide rates for blacks and Hispanics were much lower. These rates increased only modestly from 1999 to 2015, the report said.

For the study, the researchers looked through annual county-level data on deaths and population. They broke the information down into six classification levels, including large, medium and small metropolitan areas, towns and cities that weren't considered a part of a metropolitan area, and rural regions.

The study authors, led by Scott Kegler, underscored that suicide is preventable. They recommended strengthening economic support during financial downturns, along with teaching coping and problem-solving skills.

In addition, the authors noted, there's a need to reduce shortages of [health care providers](#) in rural areas.

Efforts to "promote social connectedness" might also be a tool to combat social isolation, the researchers said.

"There is a growing need for comprehensive suicide prevention employing a broad public health approach," the researchers emphasized.

The new report can help identify geographic areas that have the highest risk. This can help better focus prevention efforts, the study authors suggested.

The study was published in the March 17 issue of the CDC's *Morbidity and Mortality Weekly Report*.

More information: The U.S. Centers for Disease Control and Prevention has information on [suicide prevention](#).

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