Suicide and Firearm Injury in Utah: Linking Data to Save Lives

Background

This report was requested by the Utah State Legislature (2016 HB 440) and required the Utah Department of Human Services (DHS) to collect and analyze data for a Suicide Prevention and Gun Study. This report was produced by researchers at the Harvard T.H. Chan School of Public Health to provide legislators, firearm owners, suicide prevention and mental health advocates, clinicians, and others with practical data on the characteristics of firearm deaths, particularly suicide.

Firearms are a valued part of the fabric of many homes in Utah as half of Utah households have guns. The purpose of this report is to help stakeholders craft prevention strategies that are responsive to the local problem and that build on the strengths and values of those most affected by firearm suicides: gun owners and their families.

In this report, researchers linked data from Utah’s Violent Death Reporting System to criminal background checks, concealed carry permit status, and hospital data to deepen understanding of the issue—and opportunities for prevention. The study also examines Behavioral Risk Factor Surveillance System survey data on firearm ownership and a thorough review of data findings and implications for prevention can be found in the full report. Here are some highlights:

1. Most suicides in Utah are by firearm

**FINDING:** Suicides outnumber homicides 8-to-1 in Utah and suicides have increased by about one-third since 2008. Suicides make up 85% of firearm deaths in Utah and firearms are the leading method of suicide. The higher suicide rate in rural counties is driven by higher firearm suicide rate. Rural areas have the highest rates of firearm ownership and are also more likely to have an unlocked and loaded firearm at home. Rifles and shotguns account for 62% of rural youths’ firearm suicides, which many parents do not realize. With parents/guardians having legal authority over nearly 90% of the firearms used in suicides of youth under 18, parents are key to prevention.

**ACTION:** Given the lethality of firearms, if a proportion of Utahns who would otherwise attempt suicide with a firearm were prevented from using a gun, there would likely be fewer suicide deaths. One way to achieve this is if family members help keep guns (as well as keys/combinations) from a loved one at risk for suicide, ideally storing guns away from home. Clinicians, gun owners, and others can work together to develop messaging and storage options that are sensitive to local values and realities. The Utah Division of Substance Abuse and Mental Health (DSAMH) and partners have initiated a public education campaign aimed at educating individuals and families on suicide risk and increasing safe storage.

2. Healthcare systems play an important role in comprehensive, community-oriented prevention

**FINDING:** About half of people who died by suicide were seen in a hospital in the year before their death, but only one-third were seen for a behavioral health problem and 1 in 10 seen for a suicide attempt. People who died by gun were least likely to have been treated for self-harm in year before death. Thus, hospitals are an important venue for prevention; however, focusing only on those in the hospital for a suicide attempt will miss 90% of suicides and focusing only on those presenting with a mental health or substance abuse issue will miss two-thirds.

**ACTION:** DSAMH encourages all health and behavioral healthcare systems to adopt Zero Suicide, a programmatic and continuous improvement initiative that takes a multi-setting, system-wide approach to improve coverage, care, and outcomes for patients at risk of suicide. DSAMH hosts a Zero Suicide Learning Collaborative and invites all interested providers to join us (kmyers@utah.gov). In addition, healthcare settings are well-positioned to convey the safety message of storing guns away from home or otherwise inaccessibly to the patient until he or she recovers. Many providers lack training on these conversations. We encourage providers of all clinical backgrounds to learn Counseling on Access to Lethal Means (CALM). This free online training provides concrete tools and language on how to communicate about means restriction in an effective, supportive, and engaging method.
FINDING: Alcohol was the most common “test positive” for those dying by firearm, suffocation, and non-drug suicide methods. Many suicide decedents were facing one or more life crises. Relationship problems were by far the most common circumstance noted in suicide deaths. Health problems were often noted among older decedents. Arguments were noted as playing a precipitating role in about one-quarter of suicides. Suicides involving a gun had a unique characteristic: one-in-three occurred in the midst of the argument.

ACTION: Given the prominence of life crises preceding suicide, religious leaders, social services staff, divorce and defense attorneys, and others could educate those in crisis about 1) strategies for safely handling suicidal thoughts if they emerge, and 2) strategies for storing guns away from home or inaccessibly until things improve. DSAMH and partners throughout the state offer a variety of Gatekeeper Trainings (such as QPR and Mental Health First Aid). These trainings are for individuals with regular face-to-face contact with large numbers of community members and prepare them to identify persons at risk of suicide and refer them to treatment or supporting services as appropriate. Much like CPR or First Aid, the more people trained to recognize a crisis the more likely we are to intervene. We encourage all community members to become trained as gatekeepers. Request training here.

Most people who die by suicide could pass a background check for firearm possession

FINDING: Most suicide decedents (about 87%) could have passed a background check for firearm possession on their day of death. Concealed firearm permit (CFP) analysis found: one in four men who took their lives with a firearm had a current or lapsed permit to carry a concealed firearm; 11% of suicide decedents overall were current permit holders, 2% had lapsed permits, and a handful had their permit suspended, revoked, or denied; overall, Utahns with and without a current permit to carry a concealed firearm had similar suicide rates.

ACTION: Since most people who took their own lives would be able to pass a background check, friends and family play an important role in urging loved ones in crisis to store their guns away from home or otherwise inaccessibly until the situation improves. Utah recently began including a suicide module in CFP classes. This has great potential as 1 in 10 people age 21 and over are concealed carry permit holders in Utah. Evaluating such efforts is important. DSAMH has also awarded funds to local communities to expand this outreach effort to other community venues – like gun shows, gun shops, PTA meetings, shooting ranges, etc. A major goal of these efforts and for future efforts is to help change social norms regarding keeping a gun from a loved one who is struggling in the same way the “friends don’t let friends drive drunk” has had some impact on drunk driving.

Homicides are very rare in Utah and homicides by a stranger are almost non-existent

FINDING: Since one of the most important reasons to keep a gun for self-defense is to guard against a fatal attack, this report requested that data be provided on the incidence and characteristics of homicide-suicide and of homicide. Over a ten-year period, 63 people in Utah killed another person before taking their own lives. In most cases, the victims were the current or former intimate partner of the perpetrator or a family member. Homicides by a stranger are rare in Utah. When they do occur, they are often precipitated in part by the victim’s own criminal activity or by an escalating, mutual argument. Still, homicides of non-criminally involved victims, for example during a home invasion or store robbery, do occur an estimated 3-4 times a year across the entire state.

ACTION: Gun owners in Utah are encouraged to consider this information when weighing the benefits and risks of keeping a firearm available to protect against the threat of home invasion, robbery or other external threats.

Conclusion

Utah has already established itself as a leader in bringing gun stakeholders into the conversation about suicide prevention and developing innovative outreach strategies. HB 440 has now established Utah as a leader in linking data from disparate data sources to best learn from yesterday’s tragedies and how to prevent tomorrow’s.