
- Suicide is the 9th leading cause of death in Missouri.
- Missouri’s suicide rate is 15th highest in the nation.
- Suicide is the 2nd leading cause of death among 10-17 year olds. More than 60% of these suicides are firearm related.
- A large majority (75%) of those who die by suicide are White males. However, the greatest decrease in suicides from 2018-2019 was among Black males.
- Suicide rates are highest among 25-64 year olds.
- 60% of all suicides involve firearms, followed by suffocation (24%) and poisoning/overdose (11%).
- Rural areas in Missouri have slightly higher suicide rates than urban areas.
Suicidal Thoughts and Attempts

- 25% of college students in Missouri had suicidal thoughts in the past year and 2.1% attempted suicide (Missouri Assessment of College Health Behaviors (MACHB), 2020).
- 9.8% of middle school and 11.9% of high school seriously considered suicide in the past year (Missouri Student Survey (MSS, 2020).

Suicides by Age, Race and Sex

- Suicides decreased slightly among all age groups.
- Highest suicide rates were among adults 25-64.
- Youth rates in 2014 were much lower than older age groups; increased in 2016 and 2017 but leveled off in 2019.
- Suicides are consistently higher among Whites.
- Suicides among Blacks increased between 2015 and 2018 but decreased between 2018 and 2019.
- Suicides are consistently higher among males than females. Greater decrease in female suicides in 2019 compared to males.
Suicide rates are highest in the Kansas City and southwest regions of the state and lowest in the St. Louis metropolitan area.

The number of suicides is highest in the St. Louis metropolitan area (342) followed by the Kansas City area (278). Numbers are lowest in northeast and northwest Missouri (39 and 38 respectively).

Suicides by Region

- Rural areas in Missouri have slightly higher suicide rates than metropolitan areas.
- Differences in rural and urban suicide rates are less compared to prior years.

Suicides among LGBQQ and Transgender Youth

- Lesbian, gay, bisexual, questioning and queer (LGBQQ) and transgender youth are much more likely to have thoughts of suicide and to attempt suicide compared to their peers (MACHB, 2020; MSS, 2020).
- LGBQQ college students and 6th-12th graders attempted more than two times more often than their peers in the last year.
- Almost all transgender Missouri college students have thought about suicide in their lifetime (90%) Almost 80% of transgender youth considered suicide in the last year.
Suicide in Missouri: Where We Stand

January 2021

Suicides by Method*

- 60% of Missourians who died by suicide in 2019 used a firearm to end their lives.
- Males are more likely to use firearms than females.
- Firearm-related suicides increase with age.
- Overdose/poisoning deaths have decreased by almost 5% since 2015.

Leading Causes of Death among Missouri Residents by Age, 2019

<table>
<thead>
<tr>
<th>Rank</th>
<th>10 to 17</th>
<th>18 to 24</th>
<th>25 to 34</th>
<th>35 to 44</th>
<th>45 to 64</th>
<th>65+</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accidents</td>
<td>Accidents</td>
<td>Accidents</td>
<td>Accidents</td>
<td>Cancer</td>
<td>Heart disease</td>
<td>Heart disease</td>
</tr>
<tr>
<td>2</td>
<td>Suicide</td>
<td>Homicide</td>
<td>Suicide</td>
<td>Heart disease</td>
<td>Heart disease</td>
<td>Cancer</td>
<td>Cancer</td>
</tr>
<tr>
<td>3</td>
<td>Homicide</td>
<td>Suicide</td>
<td>Homicide</td>
<td>Cancer</td>
<td>Accidents</td>
<td>Chronic lower respiratory disease</td>
<td>Accidents</td>
</tr>
<tr>
<td>4</td>
<td>Cancer</td>
<td>Chronic lower respiratory disease</td>
<td>Cancer</td>
<td>Heart disease</td>
<td>Suicide</td>
<td>Chronic lower respiratory disease</td>
<td>Alzheimer's disease</td>
</tr>
<tr>
<td>5</td>
<td>Heart disease</td>
<td>Heart disease</td>
<td>Cancer</td>
<td>Homicide</td>
<td>Diabetes</td>
<td>Stroke</td>
<td>Stroke</td>
</tr>
<tr>
<td>6</td>
<td>Congenital anomalies</td>
<td>Congenital anomalies</td>
<td>Diabetes</td>
<td>Liver disease</td>
<td>Suicide</td>
<td>Accidents</td>
<td>Alzheimer's disease</td>
</tr>
<tr>
<td>7</td>
<td>Congenital anomalies</td>
<td>Stroke</td>
<td>Liver disease</td>
<td>Diabetes</td>
<td>Stroke</td>
<td>Kidney disease</td>
<td>Diabetes</td>
</tr>
<tr>
<td>8</td>
<td>Influenza and pneumonia</td>
<td>Diabetes</td>
<td>Stroke</td>
<td>Stroke</td>
<td>Kidney disease</td>
<td>Diabetes</td>
<td>Kidney disease</td>
</tr>
<tr>
<td>9</td>
<td>Influenza and pneumonia</td>
<td>Pneumonitis due to solids and liquids</td>
<td>Influenza and pneumonia</td>
<td>Influenza and pneumonia</td>
<td>Septicemia</td>
<td>Influenza and pneumonia</td>
<td>Suicide</td>
</tr>
<tr>
<td>10</td>
<td>Diabetes</td>
<td>Influenza and pneumonia</td>
<td>Complications of pregnancy</td>
<td>Septicemia</td>
<td>Influenza and pneumonia</td>
<td>Parkinson's disease</td>
<td>Influenza and pneumonia</td>
</tr>
</tbody>
</table>
Resources

**Suicide Prevention Lifeline.** 24/7 free and confidential support for people in distress and best practices for professionals. Call 1-800-273-TALK (8255). For veterans, press 1, for Spanish, call 1-888-628-9454, for hearing impaired, call 711 then 1-800-273-8255. To chat, go to https://suicidepreventionlifeline.org/chat/.

**Crisis Text Line:** Text MOSAFE to 741741.

**Missouri Ask Listen Refer on-line gatekeeper training:** https://www.moasklistenrefer.org/main.

**Missouri Crisis Hotlines:** Go to https://dmh.mo.gov/mental-illness/program-services/behavioral-health-crisis-hotline and select a hotline for each county.

**Missouri Suicide Prevention Network:** For additional resources related to suicide prevention in Missouri, go to https://www.mospn.org/.

If you would like more information about suicide prevention efforts in Missouri, go to: https://dmh.mo.gov/mental-illness/suicide/prevention.

References


University of Missouri-St. Louis (2020). Missouri Student Survey.


Notes

All 2019 Missouri mortality data were obtained from the Missouri Department of Health and Senior Services. These data are provisional and subject to change. Rates were calculated using 2018 population data and were age-adjusted except for graphics including age. U.S. suicide rates were obtain from the U.S. Center for Disease Control and Prevention’s WISQARS data repository. Data are based on place of decedent residence, not location of suicide.

* Rate is unreliable; numerator less than 20 (MOPHIMS)


*** “Firearms” include pistols, rifles and shotguns. “Other” includes jumping, cutting, drowning and unspecified/other”.

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