

The National Institute of Mental Health: https://www.nimh.nih.gov/health/statistics/suicide.shtml#part_154969

The National Institute of Mental Health: www.nimh.nih.gov

Suicide

If you are in crisis, call the toll-free National Suicide Prevention Lifeline at **1-800-273-TALK (8255)**, available 24 hours a day, 7 days a week. The service is available to anyone. All calls are confidential. <http://www.suicidepreventionlifeline.org>.

Suicide is a major public health concern. Suicide is among the leading causes of death in the United States. Based on recent nationwide surveys, suicide in some populations is on the rise.

Definitions

Suicide is defined as death caused by self-directed injurious behavior with intent to die as a result of the behavior.

A **suicide attempt** is a non-fatal, self-directed, potentially injurious behavior with intent to die as a result of the behavior. A suicide attempt might not result in injury.

Suicidal ideation refers to thinking about, considering, or planning suicide.

Additional information about suicide can be found on the [NIMH health topics page on Suicide Prevention](#).

Suicide is a Leading Cause of Death in the United States

According to the [Centers for Disease Control and Prevention \(CDC\) WISQARS Leading Causes of Death Reports](#), in 2018:

Suicide was the tenth leading cause of death overall in the United States, claiming the lives of over 48,000 people.

Suicide was the second leading cause of death among individuals between the ages of 10 and 34, and the fourth leading cause of death among individuals between the ages of 35 and 54.

There were more than two and a half times as many suicides (48,344) in the United States as there were homicides (18,830).

Table 1 shows the ten leading causes of death in the United States, and the number of deaths attributed to each cause. Data are shown for all ages and select age groups where suicide was one of the leading ten causes of death in 2018. The data are based on death certificate information compiled by the CDC.

Table 1

Leading Cause of Death in the United States (2018) Data Courtesy of CDC							
	Select Age Groups						
Rank	10-14	15-24	25-34	35-44	45-54	55-64	All Ages
1	Unintentional Injury 692	Unintentional Injury 12,044	Unintentional Injury 24,614	Unintentional Injury 22,667	Malignant Neoplasms 37,301	Malignant Neoplasms 113,947	Heart Disease 655,381
2	Suicide 596	Suicide 6,211	Suicide 8,020	Malignant Neoplasms 10,640	Heart Disease 32,220	Heart Disease 81,042	Malignant Neoplasms 599,274
3	Malignant Neoplasms 450	Homicide 4,607	Homicide 5,234	Heart Disease 10,532	Unintentional Injury 23,056	Unintentional Injury 23,693	Unintentional Injury 167,127
4	Congenital Abnormalities 172	Malignant Neoplasms 1,371	Malignant Neoplasms 3,684	Suicide 7,521	Suicide 8,345	CLRD 18,804	CLRD 159,486
5	Homicide 168	Heart Disease 905	Heart Disease 3,561	Homicide 3,304	Liver Disease 8,157	Diabetes Mellitus 14,941	Cerebrovascular 147,810

[Download PNG image](#)

	Select Age Groups						
Rank	10-14	15-24	25-34	35-44	45-54	55-64	All Ages
6	Heart Disease 101	Congenital Anomalies 354	Liver Disease 1,008	Liver Disease 3,108	Diabetes Mellitus 6,414	Liver Disease 13,945	Alzheimer's Disease 122,019
7	CLRD 64	Diabetes Mellitus 246	Diabetes Mellitus 837	Diabetes Mellitus 2,282	Cerebro-vascular 5,128	Cerebro-vascular 12,789	Diabetes Mellitus 84,946
8	Cerebro-vascular 54	Influenza & Pneumonia 200	Cerebro-vascular 567	Cerebro-vascular 1,704	CLRD 3,807	Suicide 8,540	Influenza & Pneumonia 59,120
9	Influenza & Pneumonia 51	CLRD 165	HIV 482	Influenza & Pneumonia 956	Septicemia 2,380	Septicemia 5,956	Nephritis 51,386
10	Benign Neoplasms 30	Complicated Pregnancy 151	Influenza & Pneumonia 457	Septicemia 829	Influenza & Pneumonia 2,339	Influenza & Pneumonia 5,858	Suicide 48,344

CLRD: Chronic Lower Respiratory Disease

Suicide Rates

Data in Figure 1 and Figure 2 are courtesy of the CDC's National Center for Health Statistics ([NCHS Data Brief No. 362, April 2020](#)).

Trends over Time

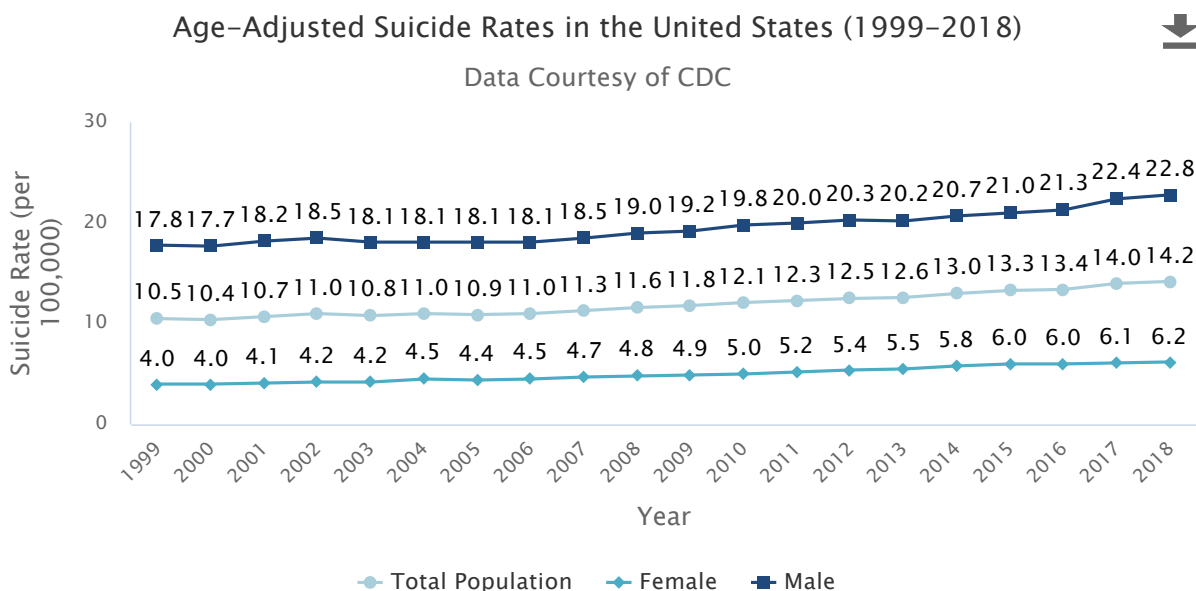
Suicide rates are based on the number of people who have died by suicide per 100,000 population. Because changes in population size are taken into account, rates allow for comparisons from one year to the next.

Figure 1 shows age-adjusted suicide rates in the United States for each year from 1999 through 2018 for the total population, and for males and females presented separately.

During that 20-year period, the total suicide rate in the United States increased 35% from 10.5 per 100,000 in 1999 to 14.2 per 100,000 in 2018.

In 2018, the suicide rate among males was 3.7 times higher (22.8 per 100,000) than among females (6.2 per 100,000).

Figure 1



Demographics

Because suicide rates take population size into account, they can be a useful tool for understanding the relative proportion of people affected within different demographic groups.

Figure 2 shows the crude rates of suicide within sex and age categories in 2018.

Among females, the suicide rate was highest for those aged 45-64 (10.2 per 100,000).

Among males, the suicide rate was highest for those aged 75 and older (39.9 per 100,000).

Figure 2

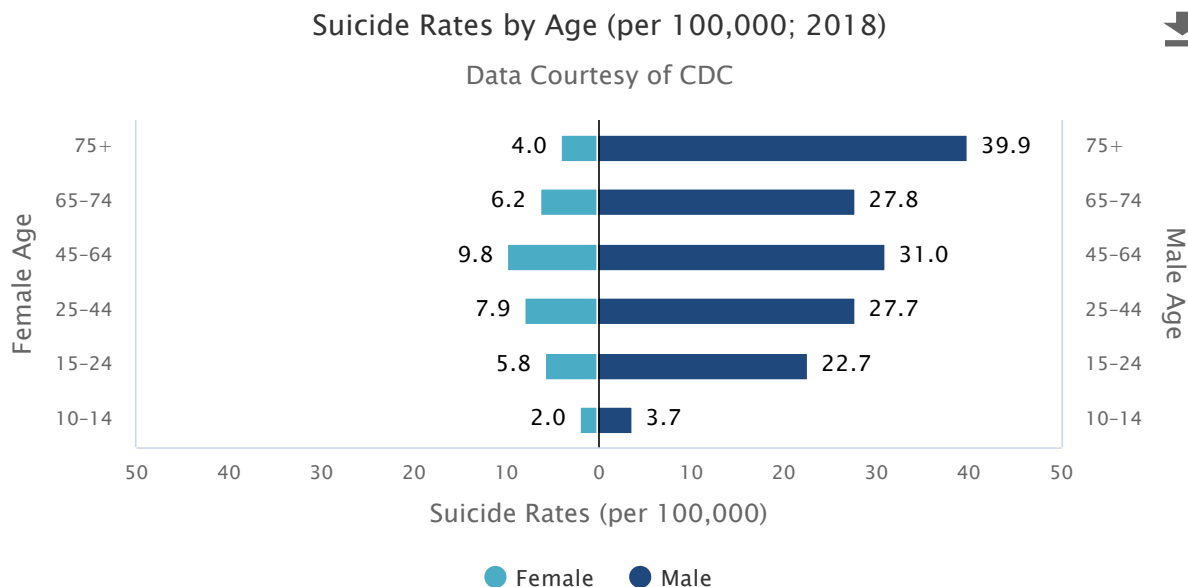
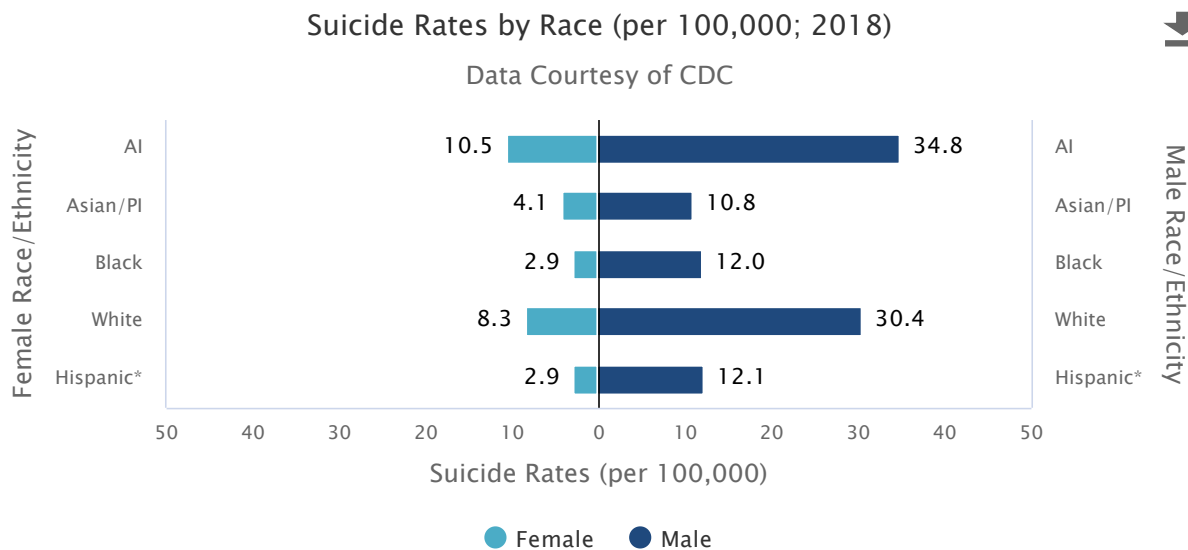


Figure 3 shows the rates of suicide for race/ethnicity groups in 2018 based on data from the CDC's [WISQARS Fatal Injury Data Visualization Tool](#).

The crude rates of suicide were highest for American Indian, Non-Hispanic males (34.8 per 100,000) and females (10.5 per 100,000), followed by White, Non-Hispanic males (30.4 per 100,000) and females (8.3 per 100,000).

Figure 3

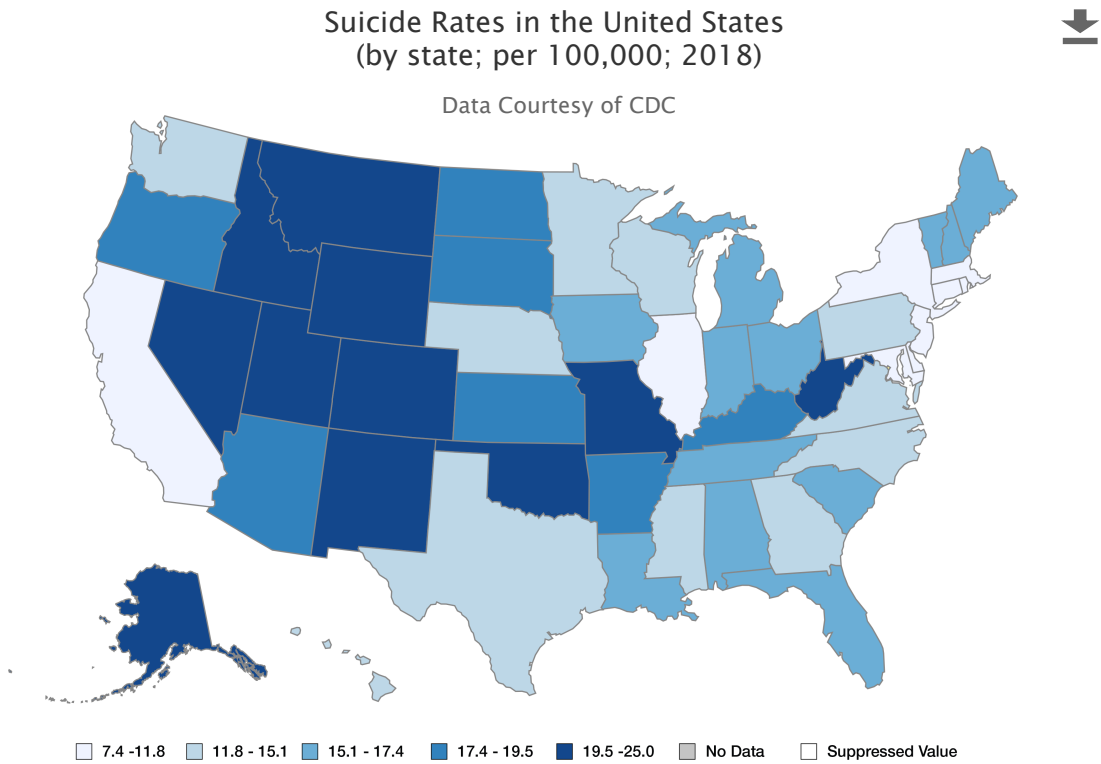


*Persons of Hispanic origin may be of any race; all other racial/ethnic groups are non-Hispanic
AI = American Indian, PI = Pacific Islander

Suicide Rates by State

Suicide rates are not the same from state to state. Based on data from the CDC [WISQARS Fatal Injury Data Visualization Tool](#), Figure 4 shows a map of the United States with each state's age-adjusted suicide rate in 2018 indicated by color.

Figure 4



Suicide by Method

Data in Table 2 and Figure 5 are courtesy of the [CDC WISQARS Leading Causes of Death Reports](#).

Number of Suicide Deaths by Method

Table 2 includes information on the total number of suicides for the most common methods. In 2018, firearms were the most common method used in suicide deaths in the United States, accounting for about half of all suicide deaths (24,432).

Table 2

Suicide by Method (2018) Data Courtesy of CDC	
Suicide Method	Number of Deaths
Total	48,344
Firearm	24,432
Suffocation	13,840
Poisoning	6,237
Other	3,835

[Download PNG image](#)

Percent of Suicide Deaths by Method

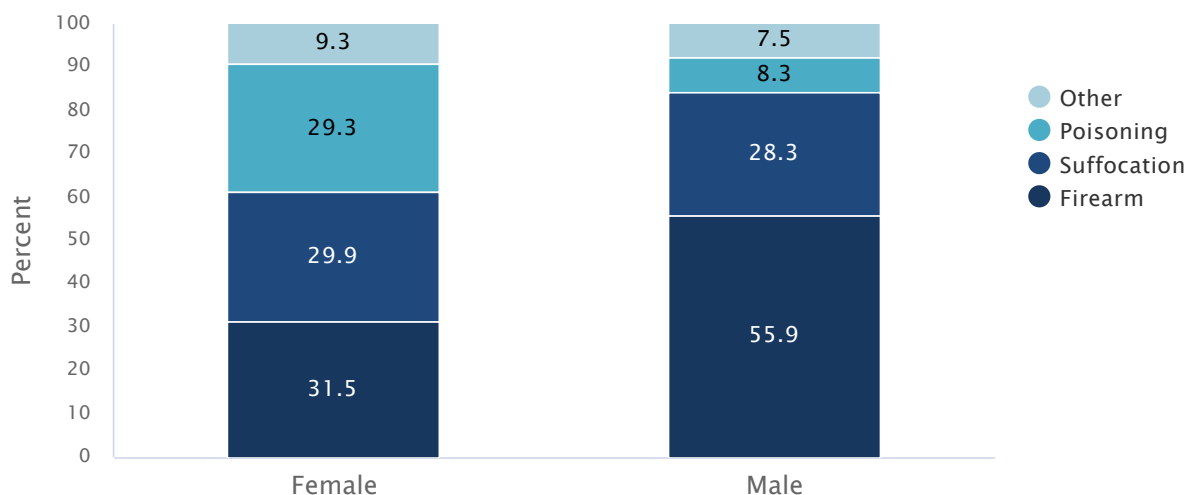
Figure 5 shows the percentages of suicide deaths by method among males and females in 2018. Among males, the most common methods of suicide were firearm (55.9%) followed by suffocation (28.3%). Among females, the most common methods of suicide were firearm (31.5%), suffocation (29.9%), and poisoning (29.3%).

Figure 5

Percentage of Suicide Deaths by Method in the United States (2018)



Data Courtesy of CDC



Suicidal Thoughts and Behaviors Among U.S. Adults

Data in Figure 6, Figure 7, and Figure 8 are based on data from the 2019 National Survey on Drug Use and Health (NSDUH)¹ by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Figure 6 shows that 4.8% of adults age 18 and older in the United States had serious thoughts about suicide in 2019.

Among adults across all age groups, the prevalence of serious suicidal thoughts was highest among young adults aged 18-25 (11.8%).

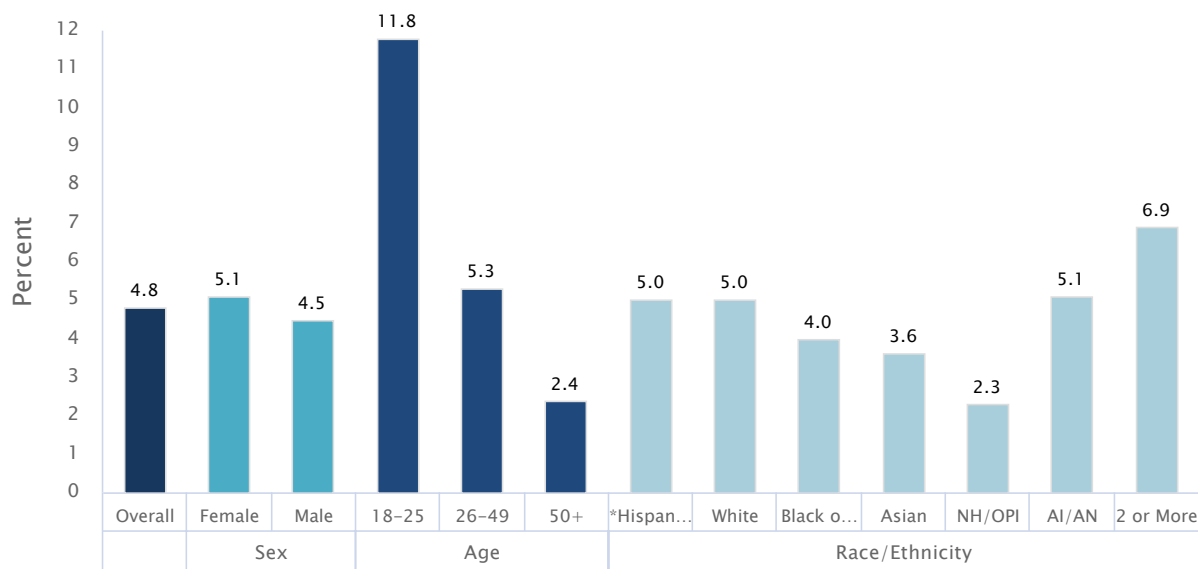
The prevalence of serious suicidal thoughts was highest among adults age 18 and older who report having multiple (two or more) race (6.9%).

Figure 6

Past Year Prevalence of Suicidal Thoughts Among U.S. Adults (2019)



Data Courtesy of SAMHSA



* Persons of Hispanic origin may be of any race; all other racial/ethnic groups are non-Hispanic
 NH/OPI = Native Hawaiian / Other Pacific Islander / AI/AN = American Indian / Alaskan Native

Figure 7 shows that in 2019, 0.6% of adults age 18 and older in the United States report they attempted suicide in in the past year.

Among adults across all age groups, the prevalence of suicide attempt in the past year was highest among young adults 18-25 years old (1.8%).

Among adults age 18 and older, the prevalence of suicide attempts in the past year was highest among those who report having multiple (two or more) races (1.5%).

Figure 7

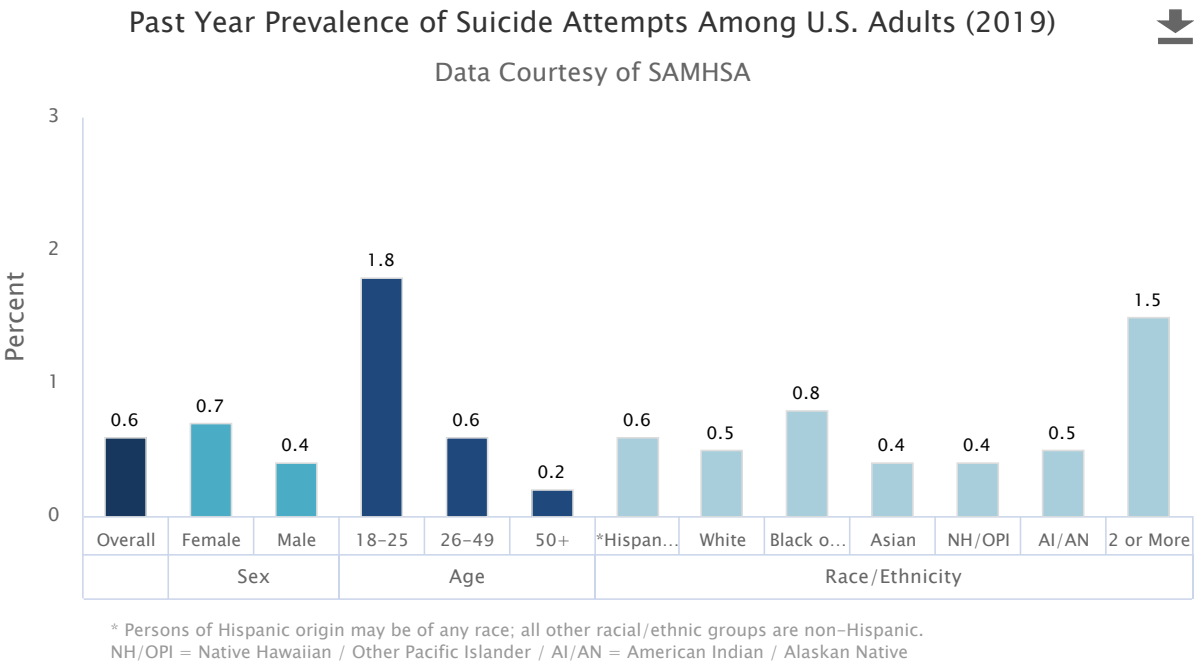
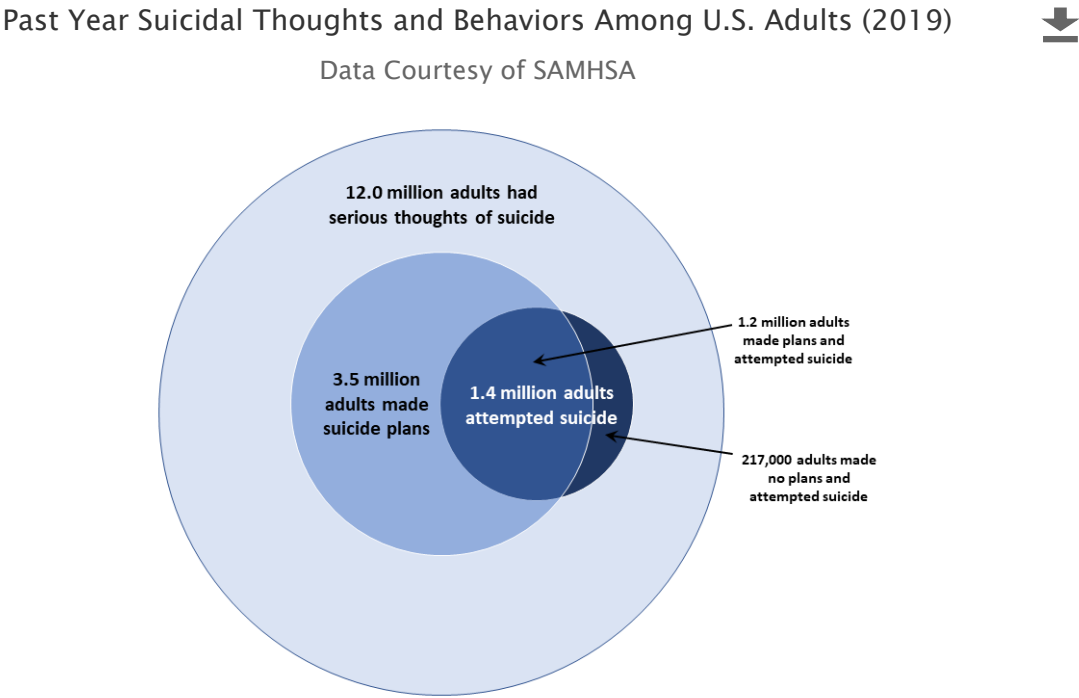


Figure 8 shows that in 2019, 12.0 million adults aged 18 or older reported having serious thoughts of suicide, and 1.4 million adults attempted suicide during the past year.

Figure 8



Data Sources

Statistical Methods and Measurement Caveats

National Survey on Drug Use and Health (NSDUH)

Population:

NSDUH participants are representative of the civilian, non-institutionalized population aged 12 years old or older residing within the United States. Only adults 18 years and older are asked about suicidal thoughts and behavior.

The survey covers residents of households (persons living in houses/townhouses, apartments, condominiums; civilians living in housing on military bases, etc.) and persons in non-institutional group quarters (e.g., shelters, rooming/boarding houses, college dormitories, migratory workers' camps, and halfway houses).

The survey does not cover persons who, for the entire year, had no fixed address (e.g., homeless and/or transient persons not in shelters); were on active military duty; or who resided in institutional group quarters (e.g., correctional facilities, nursing homes, mental institutions, long-term hospitals).

Data regarding sex (i.e. male and female) of the respondent is self-reported during the survey interview.

Interview Response and Completion:

In 2019, 35.1% of the NSDUH adult sample did not complete the interview.

Reasons for non-response to interviewing include: refusal to participate (23.9%); respondent unavailable or never at home (6.2%); and various other reasons, such as physical/mental incompetence or language barriers (5.0%).

People with suicidal behavior may disproportionately fall into these non-response categories. While NSDUH weighting includes non-response adjustments to reduce bias, these adjustments may not fully account for differential non-response by suicide behavior status.

Please see the [2019 National Survey on Drug Use and Health Methodological Summary and Definitions report](#) for further information on how these data were collected and calculated.

If You are in Crisis

If you are in crisis, call the toll-free [National Suicide Prevention Lifeline](#) (NSPL) at **1-800-273-TALK (8255)**, available 24 hours a day, 7 days a week. The service is available to anyone. All calls are confidential.



Additional Resources

[National Suicide Prevention Lifeline](#)

[Veterans Crisis Line](#)

[National Action Alliance for Suicide Prevention](#)

[National Library of Medicine - Suicide](#)

[National Strategy for Suicide Prevention](#)

[NIMH Multimedia on Suicide Prevention](#)

[NIMH Suicide Prevention](#)

[Take 5 To Save Lives](#)

[StopBullying.gov](#)

Last Updated: January 2021

[STATISTICS HOME](#)