

### Suicide across Canada

Suicide is a community health issue of concern in Canada, and locally in Waterloo Region. It is a leading cause of premature and preventable death. The causes of suicidal behaviour are complex. The interaction of many different factors, such as mental health, personality traits, the strength and health of relationships, and even our culture and environment, increase the risk of someone intentionally hurting themselves or attempting suicide. Some groups of people are at an increased risk of suicide, especially youth,

late middle-aged and older adults, Aboriginal communities, sexual minorities, people in prisons or jails, and people who have already attempted suicide before.

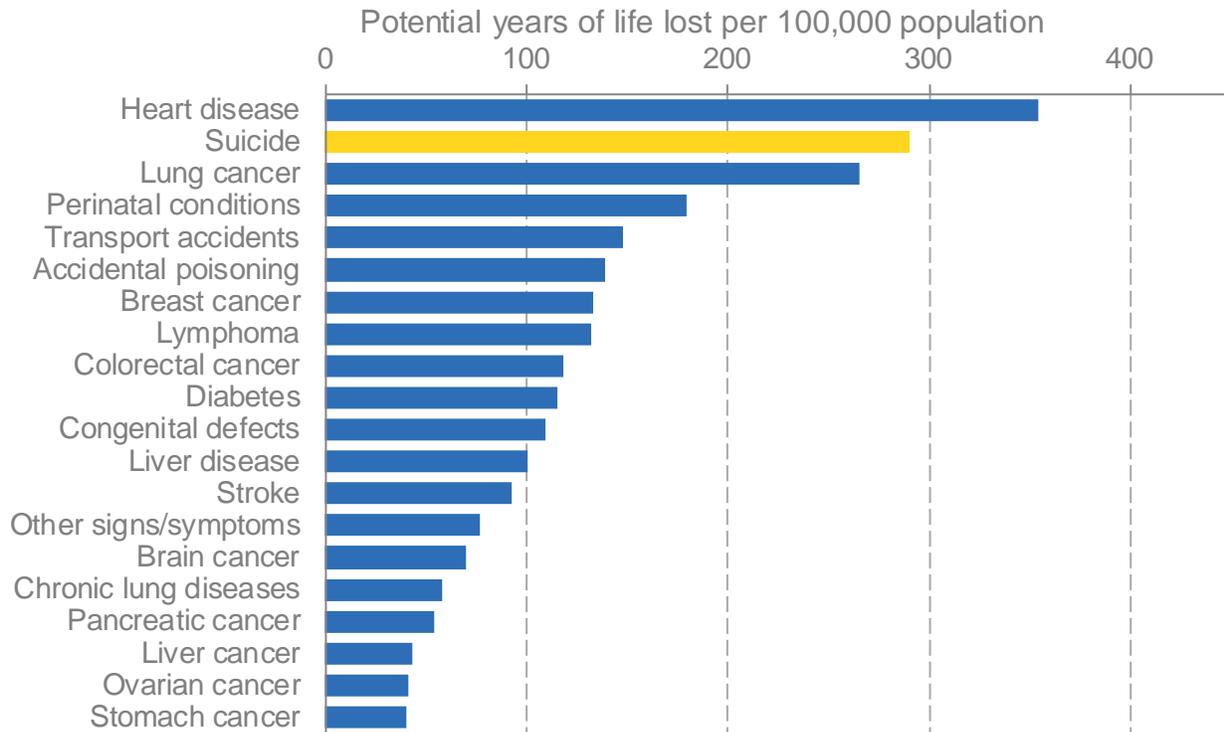
In 2012, nearly 4,000 Canadians died by suicide, making it the 9<sup>th</sup> leading cause of death in the country. Men are three times more likely to die by suicide than women in Canada, and non-fatal incidents of intentional self-harm are much more frequent in women than men.

### Suicide in Waterloo Region

**A premature death is a death that occurs before a person reaches age 75. While any age cut-off may be used, age 75 years is an international standard to approximate life expectancy.**

In Waterloo Region, suicide is the **16<sup>th</sup>** leading cause of death, and the **2<sup>nd</sup>** leading cause of premature death. On average, 57 people die by suicide in Waterloo Region every year. The majority of these suicide deaths are in men. Middle-aged men are at particularly high risk of suicide, with 21.2 deaths per 100,000 men aged 50 to 59 years for 2008 to 2012. The overall local suicide mortality rate was 11.2 deaths per 100,000 people in 2012. Over the past ten years the local suicide rate fluctuated, but it has not been significantly different than the rate for all of Ontario.

**Figure 1: Leading causes of premature death in Waterloo Region, 2008 to 2012**



**51.8%** of local suicide deaths are related to hanging, strangulation or suffocation

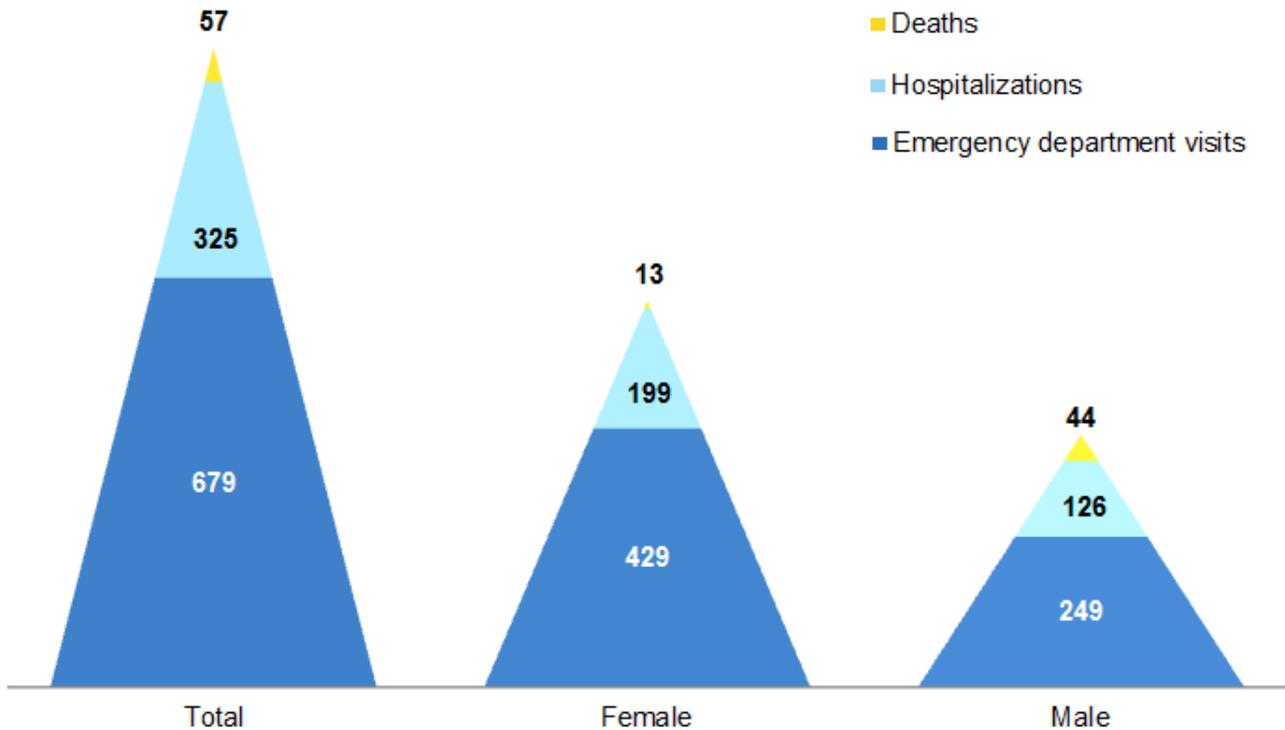
Over half of local suicide deaths are related to hanging, strangulation or suffocation, and almost one-fifth are drug or alcohol-related (18.9 per cent). Use of firearms and jumping from high places are both less common in Waterloo Region compared to Ontario overall. The only local suicide deaths by firearms were in men; no local women have died by suicide with firearms in the past five years.

### Intentional self-harm behaviour in Waterloo Region

Hospitalizations and emergency department (ED) visits represent the most serious and non-fatal incidents of intentional self-harm in Waterloo Region and Ontario. Rates for intentional self-harm ED visits and

hospitalizations are consistently higher in Waterloo Region than for Ontario. On average, there are 325 hospitalizations and 679 additional ED visits for Waterloo Region residents every year.

**Figure 2: Average annual number of intentional self-harm incidents in Waterloo Region, 2011 to 2015**



ED visit rates for intentional self-harm have increased in the past 10 years in Ontario and Waterloo Region, but the local increases have been higher and are mainly a result of increased visits in females, especially adolescent girls.

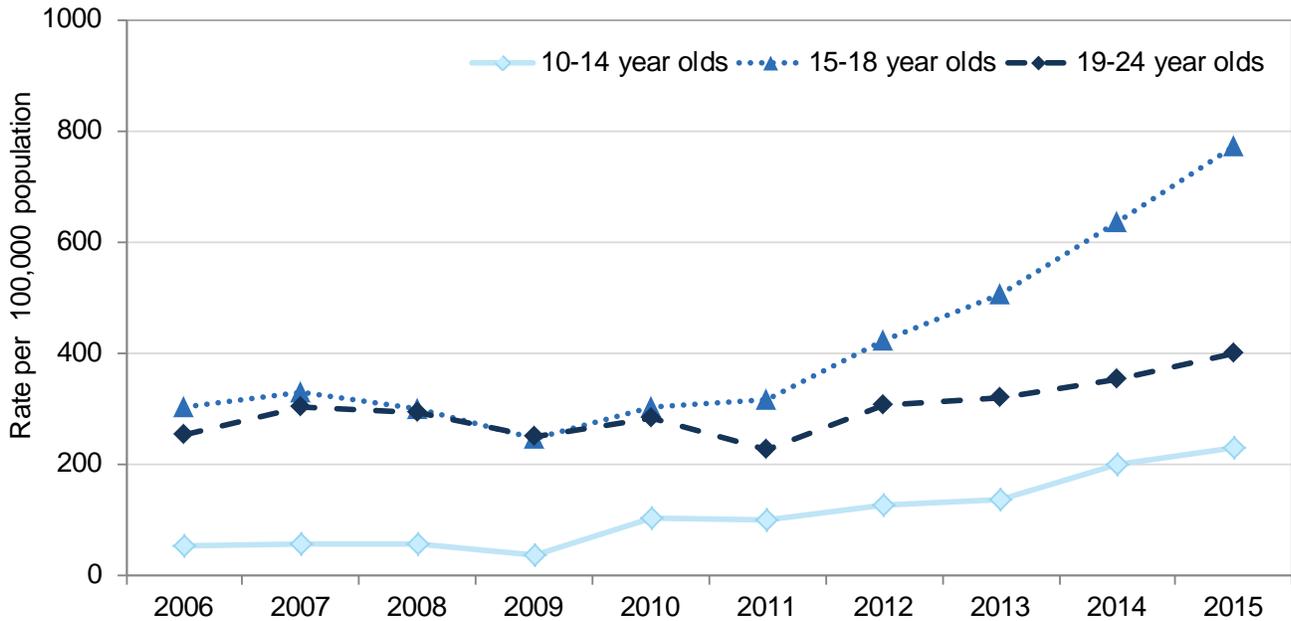
Around **70%** of intentional self-harm ED visits in Waterloo Region are drug or alcohol-related, and a quarter are related to injury with a sharp object. The proportions for hospitalizations are similar, and these local trends are similar to Ontario.

## Suicide and intentional self-harm in local youth

Youth are at an increased risk of intentional self-harm and suicide. ED visits and hospitalizations for self-harm behaviours have significantly increased over time, with the largest increases occurring after 2011. The

highest rates were in youth aged 15 to 18 years. There were 2.5 times as many ED visits for intentional self-harm in 15 to 18 year olds in 2015 compared to ten years prior.

**Figure 3: Emergency department visit rates for intentional self-harm in Waterloo Region youth, 2006 to 2015**



Girls represent the majority of these ED visits for self-harm, with rates between 2 to 6.5 times higher than boys in the same age group. Provincial rates in youth self-harm ED visits are also increasing, but the rates in Waterloo Region youth are increasing faster.

than for all of Ontario. Youth self-harm visits were more likely to be related to injury with a sharp object compared to adults, although like adults, hanging, strangulation or suffocation was still the most common injury type for youth suicide deaths.

**57.1** suicide deaths per 100,000 in youth 19 to 24 years old

versus

**8.7** suicide deaths per 100,000 in youth 10 to 18 years old

Local youth aged 19 to 24 years were significantly more likely to die by suicide than those aged 10 to 18 years in 2012.

Like adults, male youth are more likely to die by suicide than females.

Nearly three-quarters of Ontario youth aged 10 to 18 years suicide deaths were related to hanging, strangling or suffocation (71.4 per cent) compared to less than half of suicide deaths overall (44.2 per cent). Use of firearms or jumping from a high place were also more common in youth. Overall, trends in youth suicide deaths in Waterloo Region were similar to Ontario.

## Data notes

It is understood by researchers that all data sources on suicide deaths underestimate the true number of suicides. This underestimation occurs because sometimes an individual's intent was unclear, and as a result some suicides may be categorized as accidents or 'unknown intent'. Also, sometimes an individual may intentionally harm him or herself, but not intend to end their life. For this reason, ED visits and hospitalizations for self-harm are not necessarily suicide attempts, and the data cannot distinguish between the two types of self-harm behaviours.

For more details on local suicide statistics, please refer to the full report:

[http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/Suicide\\_WR\\_HealthStatus\\_2016.pdf](http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/Suicide_WR_HealthStatus_2016.pdf)

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Alternate formats of this document are available upon request. Please call 519-575-4400 (TTY: 519-575-4608) to request an alternate format.

For more information including suicide warning signs, risk factors and what you can do to help a loved one, visit [www.wrspc.ca](http://www.wrspc.ca).



**1 844 437 3247**  
(HERE247)

Call anytime to access  
Addictions, Mental Health  
& Crisis Services  
Waterloo-Wellington-Dufferin

### Are you:

- feeling desperate and hopeless?
- alone with no one to talk to?
- worried you might hurt yourself or someone else?

### If you have:

- made a plan
- the means to hurt yourself or someone else (e.g., you have pills or a weapon)
- attempted suicide or hurt yourself before

**Call 911 or your local emergency response service or get to the nearest emergency hospital NOW.**