



# Suicide-related Public Health Surveillance Update Jan 22<sup>nd</sup>, 2024

#### **Data Sources**

Oregon Violent Death Reporting System (ORVDRS) suicide deaths.

Emergency department (ED) and urgent care center (UCC) suicide-related visits.

Oregon 988 Suicide & Crisis Lifeline (Oregon 988) call, text, and chat data.

#### **Summary of Findings**

- Suicide deaths in 2023 are similar to previous years. Mortality data is being processed and numbers for recent months may change.
- Suicide-related visits to EDs and UCCs in 2023 are similar to 2022.
- Suicide-related visits to EDs and UCCs for youths ages 18 in 2023 are similar to 2022.
- Oregon 988 volume is influenced by many factors such as willingness to seek assistance, awareness of 988, or high-profile suicides of celebrities. Calls have increased annually since 2016. Calls in 2023 align with this trend and reflect the change from a 10-digit to a 3-digit number with the launch of 988 in July of 2022. No increases beyond the variation expected have been identified. See items of note below for further information.
- The percent of suicide-related visits to emergency departments and urgent care centers in 2023 is similar to 2022.

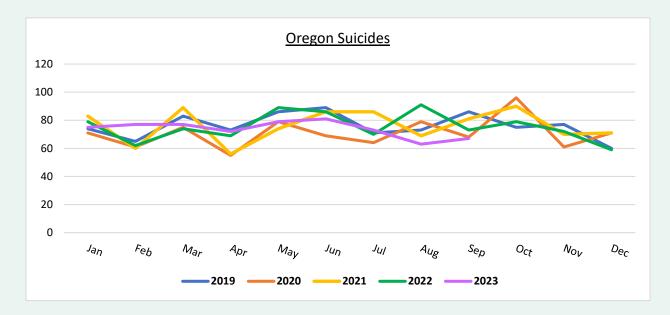
#### **Items of Note**

- Oregon 988 includes two call centers: Lines for Life and Northwest Human Services. Both are
  affiliates of the former 10-digit National Suicide Prevention Lifeline. Lines For Life began
  contributing data to this report in 2020, and Northwest Human Services data has been added as
  of July 2023. Data represents calls, texts, and chats from 988 contacts seeking support for
  suicide, substance use, and other mental health related crises. Call data for 2019 and 2020 were
  supplied to OHA by Lines for Life.
- 988 was launched in mid-July of 2022 in order to improve access to behavioral health crisis services. More information about 988 is available at the link below.

https://www.oregon.gov/oha/hsd/amh/pages/988.aspx

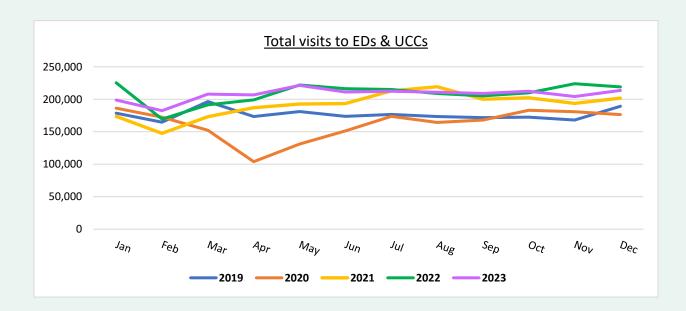
# **Details of Findings: ORVDRS suicide deaths**

Suicide deaths in 2023 are similar to 2022. Mortality data is still being processed and numbers for recent months may change.

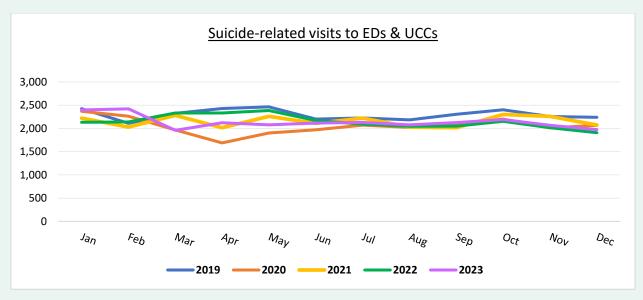


## **Details of Findings: EDs and UCCs**

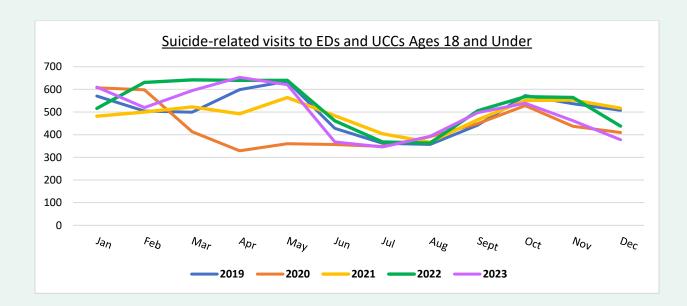
Total visits for all health concerns to EDs and UCCs in 2023 are similar to 2022.



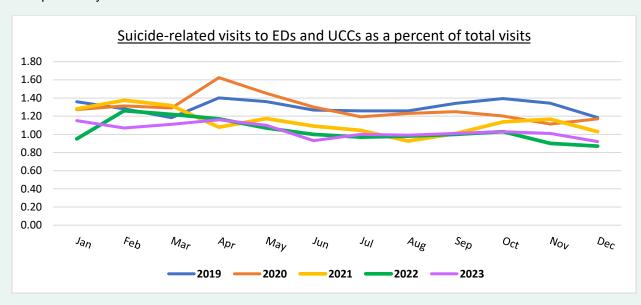
Suicide-related visits to EDs and UCCs in 2023 are similar to 2022.



Suicide-related visits to EDs and UCCs for youths ages 18 in 2023 are similar to 2022.

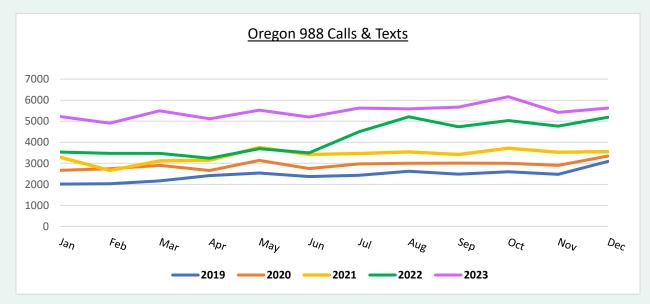


The percent of suicide-related visits to emergency departments and urgent care centers in 2023 is lower than previous years.



## **Details of Findings: Oregon 988**

Oregon 988 call, text, and chat volume is influenced by many factors such as willingness to seek assistance, awareness of 988, or high-profile suicides of celebrities or community members. Calls have increased annually since 2016. Calls in 2023 align with this trend.



#### **Methods/ Data Sources**

**Oregon Violent Death Reporting System (ORVDRS)** includes combined and abstracted data from medical examiners, death certificates, and law enforcement.

#### **Emergency Departments (EDs) and Urgent Care Centers (UCCs)**

The Oregon Health Authority (OHA) queried Oregon Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE) for suicide-related visits to Emergency Departments (EDs) and Urgent Care Centers (UCCs) using the <u>self-harm and suicide-related visits</u> query developed by the International Society for Disease Surveillance (ISDS) Syndrome Definition Committee with input from the Centers for Disease Control and Prevention, Division of Violence Prevention.

#### Oregon 988

Oregon 988 includes two call centers, Lines for Life and Northwest Human Services. Both are affiliates of the former 10-digit National Suicide Prevention Lifeline. Lines For Life began contributing data to this report in 2020, and Northwest Human Services data has been added as of July 2023. Data represents calls, texts, and chats from 988 contacts seeking support for suicide, substance use, and other mental health related crises. Call data for 2019 and 2020 were supplied to OHA by Lines for Life.

# **Strengths**

To assess suicide-related visits to EDs and UCCs, OHA used the query developed by the International Society for Disease Surveillance (ISDS) Syndrome Definition Committee.

OHA evaluated 6,112 visits from January 1 through March 22, 2020, to determine the positive predictive value of this query. To be considered a true positive, a visit must contain a minimum of two suiciderelated terms: chief complaint and discharge diagnosis. OHA further evaluated visits with non-suicide chief complaints using triage notes, when available. The positive predictive value of this query for this period is 98.6%.

## **Considerations & Limitations**

Data derived from emergency department and urgent care center visits are still being received/updated and minor fluctuation is anticipated.

Not all people in Oregon have access to an emergency department or urgent care center. People with suicidal ideations may forgo medical assistance.

Classification of suicide deaths may be delayed by required pathology.

**Oregon ESSENCE** 

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