



State of Illinois
Illinois Department of Public Health

2010 Suicide Prevention Report

August 2011

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Nationally

- ✓ On average in the United States, every 16 minutes a person dies by suicide.
- ✓ It is estimated that there are 25 attempts for every death by suicide in the United States. For young people, it is estimated that there are 100 - 200 attempts for every death by suicide.
- ✓ Each suicide intimately affects at least six other people.

Illinois

- ✓ More than 1,000 Illinoisans die by suicide each year.
- ✓ Firearms are the leading method of suicide.
- ✓ Persons 70 years of age and older have the highest suicide rate.
- ✓ Males complete suicide 4.4 times more often than the rate of females. Females attempt 45 percent more than males.

BACKGROUND

The problem of suicide in Illinois challenges everyone -- advocates, child welfare workers, clergy, communities, educators, families, health care providers, hospital personnel, law enforcement, mental health professionals, physicians, policy-makers, prevention specialists and public health professionals. Ten years ago the Illinois Department of Public Health (Department) led the effort to address the problem, to reduce the number of suicides and to lessen its stigma.

The initial statewide effort to address suicide began in 2001 with the establishment by the Department of the Illinois Suicide Prevention Coalition. The coalition held meetings from 2001 through 2003 with the original purpose of developing a state suicide prevention plan. The first plan was completed in 2003 and included recommendations for establishing a comprehensive approach to suicide prevention that included survivors, families, suicide service providers, state agencies and community advocates.

In 2004, the Illinois General Assembly passed the Suicide Prevention, Education and Treatment Act (Public Act 093-0907) (<http://www.ilga.gov>), which required the Department to establish a Suicide Prevention Strategic Planning Committee.

To unify planning work and advance suicide prevention, in 2007, joint effort was begun by the Illinois Suicide Prevention Strategic Planning Committee and the Illinois Suicide Prevention Coalition. The committee represented statewide organizations and state agencies that focus on the prevention of suicide and the improvement of mental health treatment, along with others that provide suicide prevention or survivor support services.

The committee was charged with: 1) developing the Illinois Suicide Prevention Strategic Plan (http://www.idph.state.il.us/about/chronic/Suicide_Prevention_Plan_Jan-08.pdf) ; 2) incorporating recommendations for a public awareness media campaign, education initiatives, and pilot programs to provide training and direct service into the plan; and, 3) submitting an annual report to the General Assembly. In 2007, legislation was passed and signed into law on January 1, 2008 to change the name of the committee to the Illinois Suicide Prevention Alliance.

This report narrative captures the 2010 work of the Department, the alliance, and other state suicide prevention efforts.

ACCOMPLISHMENTS

The Illinois Suicide Prevention Alliance met three times during 2010 (January 13, April 20 and July 14.) Highlights of the work accomplished in 2010 are:

- Completed and distributed the 2009 Suicide Prevention Report.
- Promoted increased awareness of education about suicide and suicide prevention efforts.
- Provided guidance to organizations to enhance their capacity to address the issue of suicide related issues

The alliance's activities and recommendations regarding education, awareness, training and organizational capacity assessments were completed in conjunction with Mental Health America of Illinois, which was awarded a grant to assist.

A. Education and Training

The educational and training efforts focused on increasing the capacity of professionals and community members to gain the knowledge and skills to increase and improve identification and treatment of suicidal behavior and provide timely support and/or referral to potentially suicidal individuals. Specific 2010 accomplishments include:

- A two-day, college-focused gatekeeper training for teams of faculty from 16 of Illinois' colleges and universities called Campus Connect, which was developed by Syracuse University and designed to increase knowledge, awareness and skills concerning college student suicide and suicide prevention efforts. Almost 100 college and university faculty were trained and these individuals were to work with their campuses and communities to train others. A two-day training for Illinois Department of Corrections (IDOC) administrators, upper-level supervisors and clinical mental health staff was provided by Dr. Dean Aufderheide, a licensed clinical and forensic psychologist with the Florida Department of Corrections. Special focus was on risk factors related to imprisonment, precipitating factors in prison suicides and protective factors of prison environment. More than 200 IDOC staff was trained and the trainings were video-taped for later use in professional development sessions with additional staff.

B. Public Awareness

Efforts focused on increasing public awareness of suicide prevention and decreasing the stigma around suicide and mental and emotional problems.

Accomplishments:

- Implementation of phase two goals for *It Only Takes One* public awareness campaign. Outcomes included: 200 million media hits to the campaign through the website, billboards and a partnership with radio stations that feature community outreach street teams in Chicago, central Illinois and southern Illinois; 10,000 educational pieces distributed at various events and educational seminars promoting IOTO; and more than 100 posts on the IOTO Violet Registry website, which is an interactive social networking site for constituencies involved in or

interested in suicide prevention. The goal is to establish a virtual networking universe where the suicide prevention community can create public or anonymous profiles and build groups (e.g., post on message boards, dialog in chat rooms, post videos and photos, and promote events.)

C. Community Outreach Efforts

The community outreach efforts focused on increasing the number of partners and collaborations to assist with the implementation of suicide prevention efforts on the local level.

Accomplishments:

- Developed and distributed Suicide Prevention Month materials in September 2010 and in May 2010 for Mental Health Month to community organizations.
- Tracked various actions occurring throughout the state, including:
 - Events to recognize staff involved in suicide prevention
 - Articles in newspapers and magazines
 - Campus wide events
 - Candle light vigils
 - Heath fairs
 - Letters to clergy
 - Letters to the editor
 - Memorial wall
 - Presentation of the movie *To Save A Life*
 - Presentations to churches
 - News release from state directors
 - Awareness campaign promotions
 - Radio interviews
 - Trainings
 - Walkathons
- Participated in the development of the State Injury Indicator's Report by the U.S. Centers for Disease Control and Prevention. The report is a surveillance effort to identify trends and gain a broader picture of the burden of injuries, including suicide and suicide attempt data, across the nation.

D. Data Collection and Analysis Efforts

Data collection and analysis efforts focused on increasing the quality and availability of statewide and community data for planning, surveillance and evaluation of suicide.

Accomplishments:

- Served as a resource by providing statistics on crisis calls, death reporting, legislation tracking and data analysis for injury prevention programs.
- Provided updated data and information to the Suicide Prevention Resource Center for its Illinois Suicide Data Fact Sheet.

SUICIDE PREVENTION EFFORTS BY PARTNER AGENCIES

The following is a list of suicide prevention activities achieved in 2010 by partner agencies.

American Foundation for Suicide Prevention Illinois Chapter

- Increased the number of volunteers providing leadership, outreach and advocacy within the suicide prevention field by tripling the number of board members and expanding the chapter's core volunteers.
- Tripled the number of attendees at their annual Out of the Darkness Chicagoland Community Walk, which is support local prevention efforts, and research into prevention and national legislative initiatives.
- Operated survivor support initiatives, including the Survivor Outreach Program, International Survivor of Suicide Day event, Lifekeeper Memorial Quilt Program, Survivor Outreach Program Resource Packets distribution and group facilitator training.
- Prevention activities, including distributing *More Than Sad* suicide prevention training for high schools to regional offices of education and schools; Depression and Bipolar Awareness Day and ongoing programs, such as the Legislative Field Advocate Program.
- Provided educational and awareness materials to the community, many available in English and Spanish, including:
 - *The Truth about Suicide: Real Stories of Depression in College*
 - Standardized Presentations on Suicide Prevention
 - Physician Depression and Suicide Prevention
 - *Struggling in Silence/Out of the Silence Outreach*
 - *Fatal Mistakes: Families Touched by Suicide*
 - *After Suicide Loss: Coping With Your Grief*
 - *Child Survivors of Suicide: A Guide for Those Who Care for Them*
 - *Surviving after Suicide Loss: A Resource and Healing Guide*

Blessing Hospital, Quincy

- Co-sponsored and promoted the National Suicide Prevention Campaign for Teens with the Substance Abuse and Mental Health Services Administration, AdCouncil and Inspire USA Foundation by hosting a news conference with schools, mental health centers and social service agencies. Promoted the campaign to the Illinois Suicide Prevention Alliance, Illinois Hospital Behavioral Health Constituency Section Steering Committee, Adams County school principals, social workers, counselors and psychologists ,and the school superintendents in Adams and Pike counties.
- Established web links, on the hospital website, to the *It Only Takes One* suicide prevention campaign (www.itonlytakesone.org) and the ReachOut initiative (<http://us.reachout.com/>); and published a full page article, *Help and Support are Only a Click Away*, in the hospital magazine Personal Blessing.

- Interviewed by WTAD radio about suicide prevention.
- Conducted 12 presentations on *Teen Depression and Suicide* during public health classes at Quincy Senior High School.
- Gained approval from nine high schools in Adams and Pike counties to display teen suicide prevention posters.
- Submitted a letter to the editor in the Quincy Herald Whig for National Suicide Prevention Week.
- Mailed letters to area churches with the Blessing Hospital brochure – *Suicide Guide to Warning Signs and Suicide Prevention Resources*.

Erika's Lighthouse: A Beacon of Hope for Adolescent Depression, Winnetka

- Trained hundreds of teachers and staff in six high schools and six middle school districts to support the revision to the school code made in 2010 that expanded which school personnel were mandated to have suicide prevention training (Public Act 096-0951). The focus of the trainings was to help school professionals recognize the signs of depression in students and understand how to guide them to help.
- Established a teen club and teen programs at New Trier High School as a model that is being replicated in other schools. Six high schools were trained to create a teen panel presentation on depression awareness.
- Presented the agency's video *Real Teenagers Talking About Depression*, and spoke on teen depression to students, educators, parents and mental health professionals in 14 high school districts, seven junior high school districts, Loyola University, Northwestern University, the Chicago School of Professional Psychology, two workshops for parents, six community agencies and a program in collaboration with NorthShore University HealthSystem.
- Held its 7th Annual Rock and Rally Walkathon where more than 650 people attended.

Illinois State Board of Education conducted presentations comparing suicide rates among lesbian, gay and bisexual students versus heterosexual students using 2009 Youth Risk Behavior Survey data at:

- 2010 American School Health Association Conference in Kansas City.
- 2010 CDC Division of Adolescent and School Health Funded Partners Meeting in Kansas City.
- 19th Annual Illinois Statewide HIV/STDs Prevention Conference in Springfield.

LifeSavers Training Corporation, Carbondale

- Conducted three LifeSavers Training Retreats in southern Illinois, training more than 130 high school students in suicide prevention and life skills.
- Inaugurated the college-level LifeSavers program at Southern Illinois University Carbondale and John A. Logan College.
- Sponsored a candle light vigil for Survivors of Suicide Day.

- Presented a suicide prevention program for a teen conference at Southern Illinois Community College and for Eldorado School's Youth Conference for middle-school students.
- Conducted teen suicide training for staff at Joppa schools.
- Filmed a half-hour video on teen suicide prevention for LifeSavers for Tri-State Christian Television.

Mental Health America of Illinois

- Provided free and voluntary mental health screenings through its Columbia TeenScreen Program and the Signs of Suicide (SOS) Program to 700 youth in the metropolitan Chicagoland area. Screenings identified signs and symptoms of depression, anxiety, substance abuse, suicidal thoughts and suicide attempts. Referrals to mental health, physical health and after school programs were provided to 120 of the youth and families who participated.
- Nearly 250 adults received free and voluntary mental health screenings through school, community and business health fairs, National Depression Screening Day and community events. Approximately 60 individuals were referred for additional mental health services.
- Educated 9,000 youth, adults and families on mental health, mental illnesses and suicide prevention through presentations and health fairs in schools, communities, senior living facilities, community organizations and businesses.
- Distributed 10,000 education materials on various mental illnesses, suicide prevention and resources for locating services at various community events.

SchoolDistrict U-46, Elgin

- Presented on depression and teen suicide to 650 sophomore students at South Elgin High School.
- Presented to a total of 700 freshman students on the role of the school social worker and how students can access the school social worker if they are concerned about a social/emotional problem.
- Presented at a national conference in St. Louis on the topic of post-vention to school social workers.

NEXT STEPS

Over the next five years, the alliance seeks to develop and enhance comprehensive suicide prevention, early intervention and post-vention programs and services, building vital support across diverse communities.

The following initiatives are recommended next steps in carrying out the goals of the Illinois Suicide Prevention Strategic Plan:

- * **Develop and Evaluate Five Model Suicide Prevention Comprehensive Pilot Programs, when funds are available (Three-year effort)** - To include suicide prevention, intervention and post-vention in order to provide replicable, evidenced-based outcomes that other communities and service providers can use with adaptations.
- * **Implement a Suicide Prevention, Early Intervention and Training Initiative**
 - 1) To develop and enhance the capacity of community gatekeepers statewide through community-based mini-grants to increase suicide prevention and early intervention skills through local education by experts in the field.
 - 2) To assess the current capacity and network of crisis lines in Illinois.
 - 3) To enhance professional development abilities among multiple disciplines, especially mental health, social service, clergy, first responders and school personnel through a statewide conference on suicide prevention.
 - 4) To develop and enhance the capacity of health service providers statewide to increase suicide prevention and early intervention skills through local education by experts in the field.
 - 5) To develop and enhance the capacity of service providers to the aging population on suicide prevention and early intervention skills.
 - 6) To develop and enhance service provider skills to traumatized children in the child welfare system on suicide prevention and early intervention.
- * **Continue to Implement the Suicide Prevention Public Awareness Campaign** - To develop and implement a public awareness campaign to reduce the stigma of suicide and increase awareness of risk factors, including mental illnesses, and to promote linkage to human services for at-risk individuals.
- * **Develop and Implement a Suicide Prevention Community Outreach Initiative** - To build capacity to promote local suicide prevention efforts by building/expanding 20-25 new effective and efficient coalitions and partnerships.
- * **Improve and Implement Suicide Prevention School-based Initiatives** - To support the following school-based initiatives:
 - 1) Professional development related to suicide prevention.

- 2) Grants to school districts to develop and implement suicide prevention initiatives within their curricula; to increase in-school mental health support; and to conduct staff development and educate students, parents, and other caregivers.
- * **Improve Suicide Prevention Data Collection and Analysis** - To provide the following services:
 - 1) Develop and implement the Illinois Violent Death Reporting System statewide in order to collect more effective and accurate data on suicide deaths.
 - 2) Work with an epidemiologist to analyze suicide attempt data, train providers on how to collect better data and provide county data reports.
 - * **Support Suicide Prevention Evaluation and Research** - To support research-based evaluation methods and technical assistance to plan for replication of suicide prevention efforts according to outcome measures.

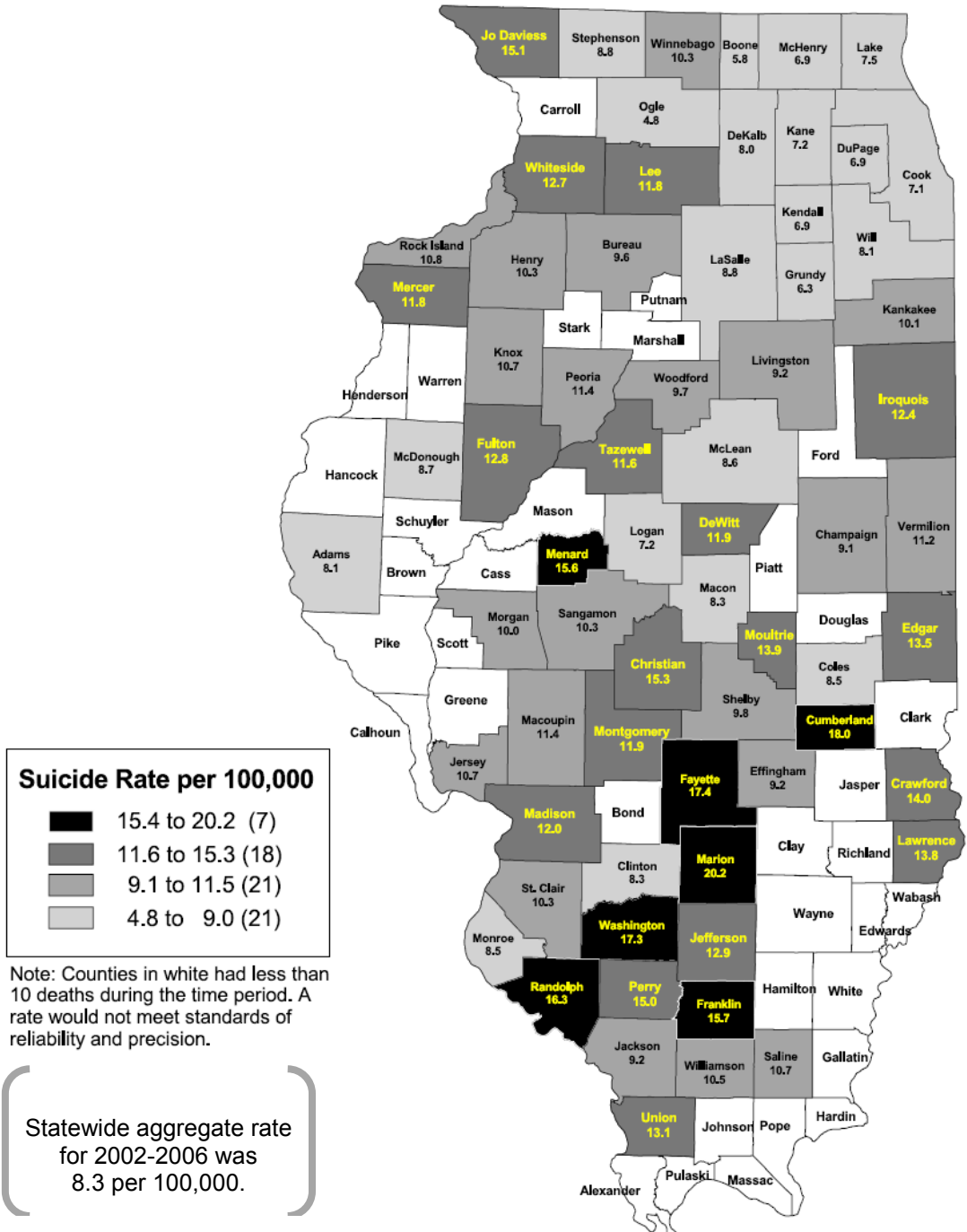
ILLINOIS SUICIDE PREVENTION ALLIANCE (ISPA) MEMBERS in 2010

APPOINTED MEMBER	AGENCY
Jill Allen	Illinois State Police
Judy Ashby	LifeSavers Training Corporation
Wendy Blank	Illinois Department of Corrections
Amy Brausch	Eastern Illinois University
Sherry Bryant	Survivor
Reshma Desai	Illinois Violence Prevention Authority
Paul Fleming	Survivor
Sam Gaines	Illinois Department of Public Health
Carol Gall (Wozniowski)	Mental Health America of Illinois (<i>Co-Chair</i>)
Thomas Mannard	Illinois Council Against Handgun Violence
Eric Davidson	Illinois Higher Education Center
Jennifer Martin	Illinois Department of Public Health
Mary Mayes	Illinois Department on Aging
Steve Moore	American Foundation for Suicide Prevention
Jessica O'Leary	Office of the Illinois Attorney General
Judy Rehder	Illinois Department of Children and Family Services
Patricia Reedy	Illinois Department of Human Services
Sharneice Snyder	Jason Foundation at Streamwood Behavioral Health Systems
Glenn Steinhausen	Illinois State Board of Education (<i>Co-Chair</i>)
Shannon Sullivan	Illinois Safe Schools Alliance
Lora Thomas	NAMI Illinois - National Alliance on Mental Illness
Stephanie Weber	Suicide Prevention Services

STAKEHOLDERS	AGENCY
Amy Ashland	Streamwood Behavioral Health Systems/Jason Foundation
Mariann Blacconiere	Hines VA Center
Chris Boyster	Illinois Center Against Handgun Violence
Lori DeYoung	VA Hospital
Mark Flotow	Illinois Department of Public Health
Chuck Johnson	Blessing Hospital
Judy King	Greater Grand Mental Health Advisory Board
Stan Lewy	Survivor
Ariel Mindel	Mental Health America of Illinois
Terra Riseman	Hines VA Hospital
Mike Rohlings	Southern Illinois Regional Social Services
Iris Travis	Hines VA Hospital
Cynthia Watts	Marion VA Center

SUICIDE RATES BY COUNTY

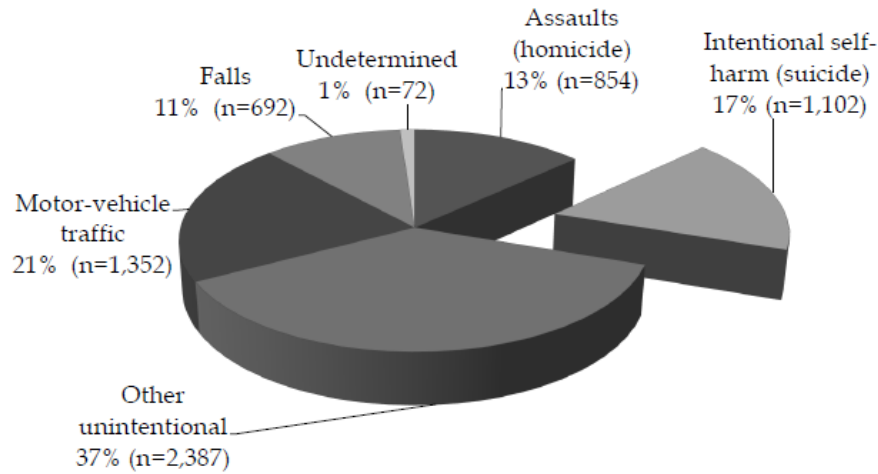
Suicide Rate per 100,000 2002-2006 Aggregated



Source: Illinois Department of Public Health, Center for Health Statistics

Illinois Suicide Data

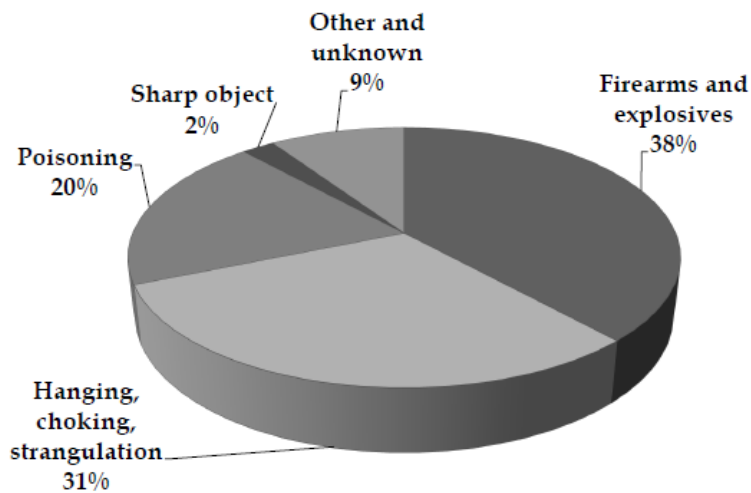
Total Injury Death by Intent, Illinois, 2007



Source: Illinois Department of Public Health, Center for Health Statistics

- Motor vehicle-related deaths account for 21 percent of total injury deaths. It is unknown how many of these are intentional crashes, yet it is assumed that a portion are suicides.

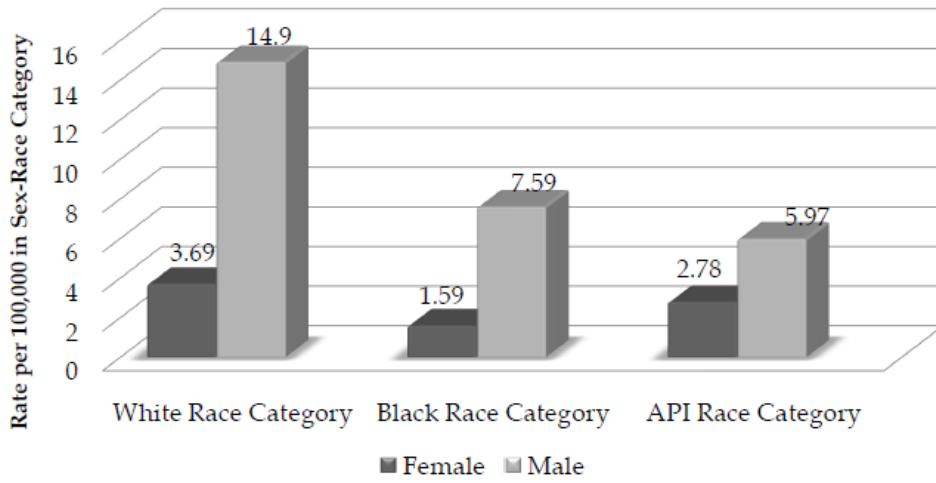
Suicide by Method, Illinois, 2005-2007



Source: Illinois Department of Public Health, Center for Health Statistics

Illinois Suicide Data

Suicide Rate by Race Category and Sex, Illinois, 2005-2007

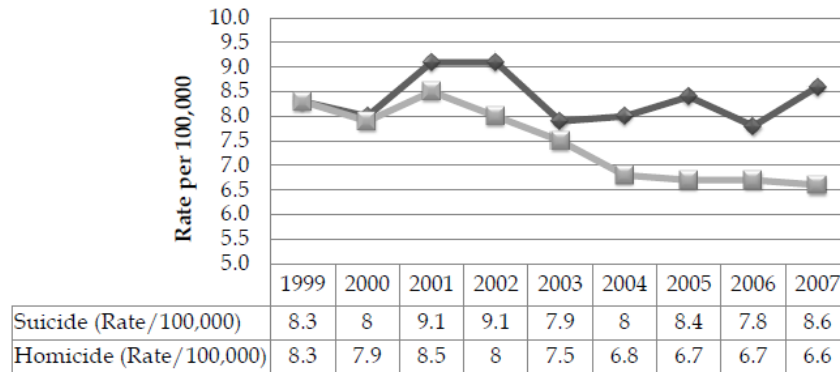


Source: Illinois Department of Public Health, Center for Health Statistics

Illinois Suicide and Homicide Data

The next two graphs review violence-related data and demonstrate there are consistently more deaths due to suicide than homicide and more hospital discharges due to self-inflicted injuries than assault-related injuries. By increasing the awareness of the burden of suicide, suicide prevention professionals aspire that one day suicide prevention will receive the same level of attention and resources the prevention of homicide and assaults receives.

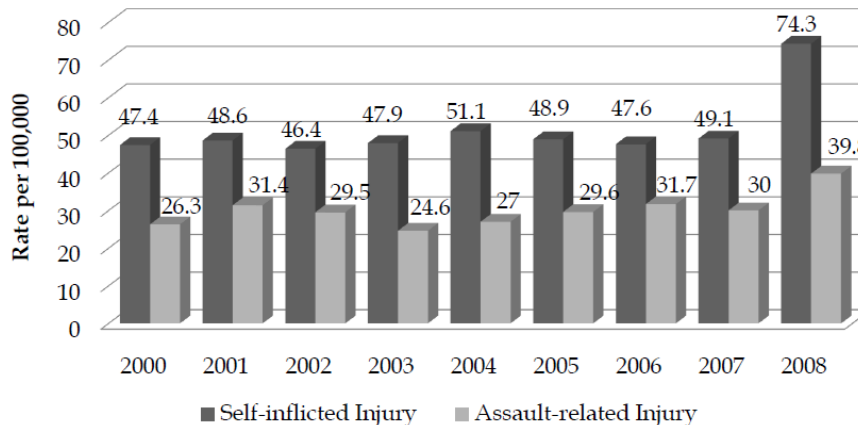
Trend in Suicide and Homicide, Illinois, 1999-2007



	1999	2000	2001	2002	2003	2004	2005	2006	2007
Suicide (number)	1012	1000	1131	1142	1001	1023	1073	1007	1102
Homicide (number)	1012	987	1064	1005	953	868	860	859	854

Source: Illinois Department of Public Health, Center for Health Statistics

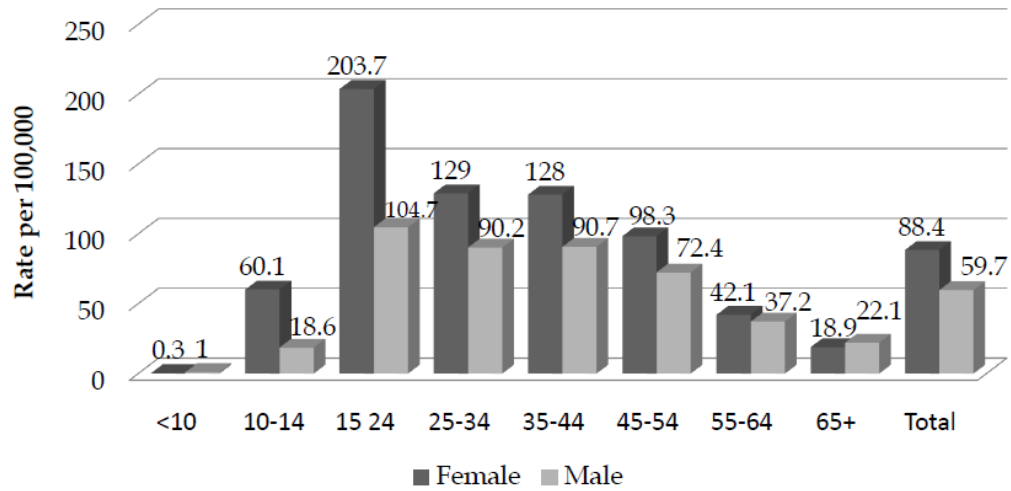
Trend in Self-inflicted & Assault-related Injury Hospital Discharges, Illinois Residents, 2000-2008



Source: Illinois Department of Public Health, Division of Patient Safety and Quality

Illinois Hospital Discharge Data by Age and Sex

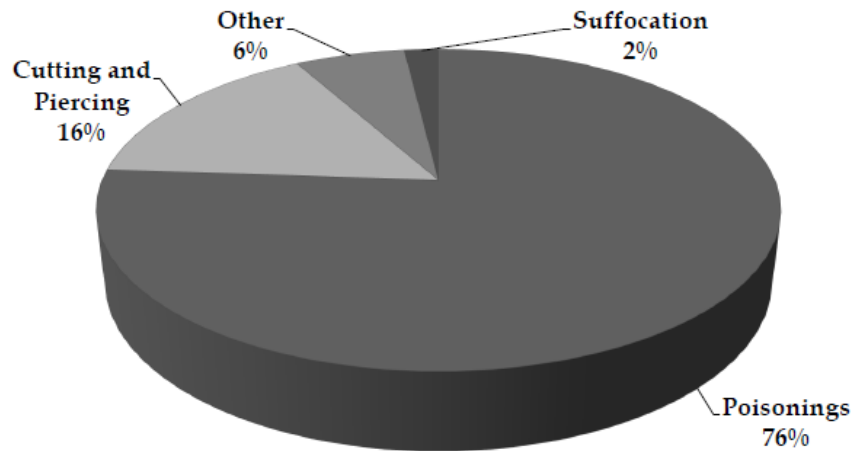
Self-inflicted Injury Hospital Discharges by Age and Sex, Illinois Residents, 2008



Source: Illinois Department of Public Health, Division of Patient Safety and Quality

Illinois Hospital Discharge Data by Type

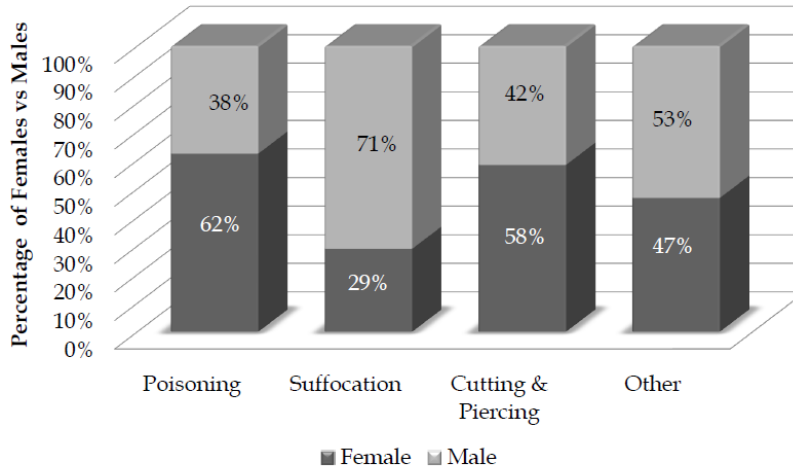
Self-inflicted Injury Discharges by Type, Illinois Residents, 2009



Source: Illinois Department of Public Health, Division of Patient Safety and Quality

Illinois Hospital Discharge Data by Type and Sex

Self-inflicted Injury Discharge by Type/Sex, Illinois Residents, 2006-2009

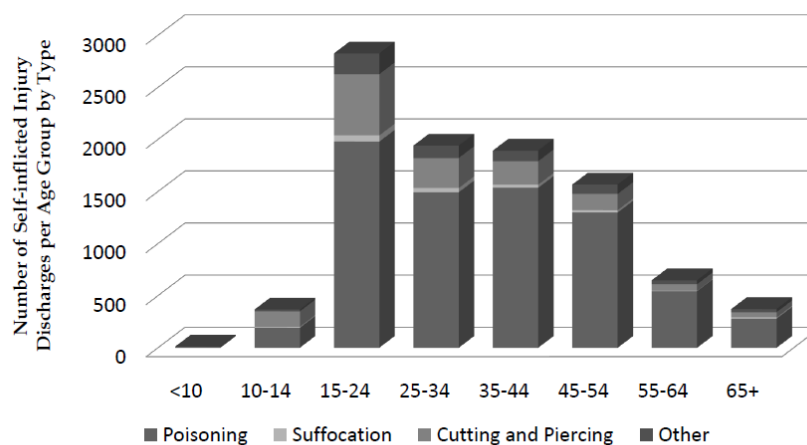


Source: Illinois Department of Public Health, Division of Patient Safety and Quality

- From 2006-2009, 62 percent of the Illinois residents discharged from the hospital for self-inflicted injury due to poisoning were females; 38 percent were males.
- From 2006-2009, 71 percent of the Illinois residents discharged from the hospital for self-inflicted injury due to suffocation were males; 29 percent were females.
- From 2006-2009, 58 percent of the Illinois residents discharged from the hospital for self-inflicted injury due to cutting and piercing were females; 42 percent were males.

Illinois Hospital Discharge Data by Type and Age

Self-inflicted Injury Discharge by Type/ Age Illinois Residents, 2009



Source: Illinois Department of Public Health, Division of Patient Safety and Quality

YOUTH RISK BEHAVIOR SURVEY RESULTS

2009 YOUTH RISK BEHAVIOR SURVEY RESULTS
Illinois High School Survey
Summary Table - Weighted Data

QNZ3: Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months

	Percentage	Total 95% confidence interval	N	Percentage	Male 95% confidence interval	N	Percentage	Female 95% confidence interval	N
Total	27.8	(24.5 - 31.3)	3,006	22.9	(20.2 - 25.9)	1,439	32.9	(27.7 - 38.6)	1,554
Age									
15 or younger	27.3	(23.7 - 31.3)	925	18.1	(15.2 - 21.4)	416	36.5	(29.6 - 44.0)	505
16 or 17	27.7	(23.3 - 32.4)	1,610	23.5	(19.4 - 28.1)	776	32.0	(25.5 - 39.4)	830
18 or older	29.3	(24.6 - 34.5)	466	30.9	(22.8 - 40.4)	246	27.7	(22.6 - 33.5)	218
Grade									
9th	26.6	(23.2 - 30.3)	755	18.9	(15.1 - 23.4)	331	34.8	(28.3 - 41.9)	423
10th	30.2	(22.0 - 40.0)	713	22.9	(15.3 - 32.8)	354	37.7	(26.0 - 50.9)	357
11th	26.7	(23.0 - 30.6)	844	22.8	(17.5 - 29.3)	406	30.6	(24.6 - 37.4)	437
12th	27.6	(24.3 - 31.1)	637	28.3	(23.9 - 33.0)	318	26.9	(22.4 - 31.8)	319
Race/Ethnicity									
Asian	35.7	(25.1 - 47.8)	101	-	-	52	-	-	49
Black*	28.2	(24.5 - 32.3)	768	21.2	(16.4 - 26.9)	330	34.6	(29.9 - 39.6)	435
Hispanic/Latino	30.7	(25.7 - 36.2)	740	24.4	(18.8 - 31.0)	353	36.6	(29.8 - 44.0)	386
White*	26.2	(21.1 - 32.1)	1,181	22.0	(18.6 - 26.0)	601	30.8	(22.8 - 40.1)	580
All other races	-	-	48	-	-	25	-	-	21
Multiple races	37.4	(29.5 - 46.0)	107	-	-	50	-	-	57

Note: There were 45 students who were excluded from the analysis for QNZ3.
 N = Number of students.
 *Non-Hispanic.
 - = Less than 100 students in the subgroup.

YOUTH RISK BEHAVIOR SURVEY RESULTS

2009 YOUTH RISK BEHAVIOR SURVEY RESULTS
Illinois High School Survey
Summary Table - Weighted Data

QNZ5: Percentage of students who made a plan about how they would attempt suicide during the past 12 months

	Percentage	95% confidence interval	N	Percentage	95% confidence interval	N	Percentage	95% confidence interval	N
	Total			Male			Female		
Total	11.3	(10.1 - 12.7)	3,002	9.7	(8.2 - 11.4)	1,433	13.0	(11.3 - 14.9)	1,557
Age									
15 or younger	13.9	(11.3 - 17.0)	918	12.0	(8.5 - 16.5)	410	15.9	(13.0 - 19.3)	506
16 or 17	10.0	(8.4 - 11.8)	1,617	8.7	(7.1 - 10.6)	780	11.3	(9.0 - 14.3)	833
18 or older	10.1	(7.1 - 14.1)	461	8.1	(3.5 - 17.9)	242	11.8	(8.9 - 15.5)	217
Grade									
9th	11.3	(8.4 - 15.1)	755	10.6	(6.8 - 16.1)	326	12.0	(9.3 - 15.3)	428
10th	13.1	(10.5 - 16.2)	716	8.5	(5.5 - 12.9)	359	17.8	(14.1 - 22.1)	355
11th	11.0	(8.9 - 13.5)	849	10.5	(7.9 - 13.9)	409	11.4	(8.3 - 15.5)	439
12th	9.2	(6.9 - 12.3)	628	8.0	(4.0 - 15.5)	310	10.4	(7.4 - 14.5)	318
Race/Ethnicity									
Asian	15.6	(8.7 - 26.3)	100	-	-	51	-	-	49
Black*	13.0	(10.5 - 15.9)	774	10.3	(7.2 - 14.5)	333	15.3	(11.0 - 21.0)	438
Hispanic/Latino	11.1	(8.3 - 14.7)	740	10.8	(6.9 - 16.5)	351	11.5	(6.4 - 19.7)	388
White*	10.2	(8.4 - 12.4)	1,178	8.6	(6.9 - 10.7)	598	12.0	(9.2 - 15.6)	580
All other races	-	-	45	-	-	23	-	-	21
Multiple races	16.7	(9.0 - 28.9)	107	-	-	50	-	-	57

Note: There were 49 students who were excluded from the analysis for QNZ5.
 N = Number of students.
 *Non-Hispanic.
 - = Less than 100 students in the subgroup.

YOUTH RISK BEHAVIOR SURVEY RESULTS

Lesbian, gay and bisexual youth were identified by the National Strategy for Suicide Prevention as populations at risk of suicide. Data from the U.S. Centers for Disease Control and Prevention’s Youth Risk Behavior Survey (YRBS) from Chicago and other states have shown that gay, lesbian, bisexual and transgender youth are significantly more likely than their peers to be at increased risk across a number of factors, including intentional violence, sexual assault, suicide, drug and alcohol use, risky sexual behaviors, and mental health problems. In 2009, Illinois YRBS data found when lesbian, gay and bisexual youth are compared to their non-gay peers they are more than three times more likely to report considering suicide in the past 12 months and to have made a suicide plan in the past 12 months. Additionally, they were almost five times more likely to have attempted suicide in the past 12 months.

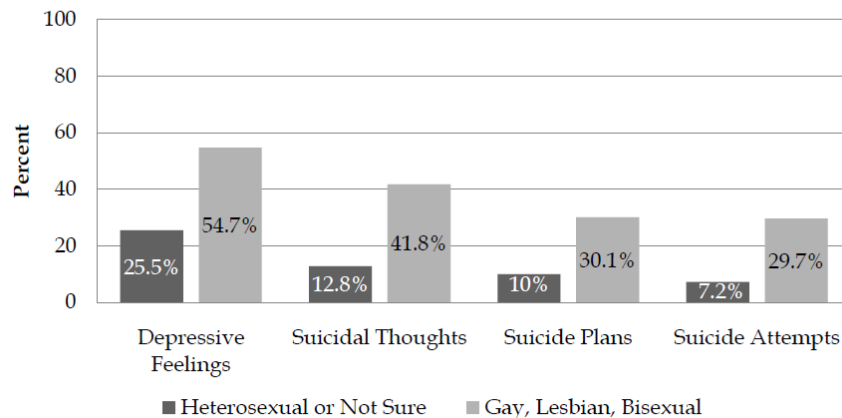
The below chart cross-tabulates the four questions on the YRBS administered in Illinois with regards to depressive feelings and suicide-related questions:

- During the past 12 months...
 - Did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
 - Did you ever seriously consider attempting suicide?
 - Did you make a plan about how you would attempt suicide?
 - How many times did you actually attempt suicide?

The following questions were added to the Illinois YRBS to assess student’s sexual orientation:

- During your life, with whom have you had sexual contact?
- Which of the following best describes you?
 - Heterosexual (straight). Gay or lesbian. Bisexual. Not sure

Depressive Feelings and Suicide-Related Questions of High School Students by Sexual Orientation, 2009



Source: 2009 Youth Risk Behavior Survey Results;
Children’s Memorial Research Center, Child Health Data Lab

Copies of this report are available at
http://www.idph.state.il.us/pub_home.htm

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