Provincial Suicide Mortality Review

Highlights from the Research

Diagnostic Impression by Region:

The North has more SU & No Diagnosis, while the South & Winnipeg have more MH and Winnipeg alone has more COD.

Gender by Region:

Higher rates of death by suicide under 25 years in the North & over the age of 45 in the South & Winnipeg.

Age by Region:

Persons 45 and older are more likely to have a MH Diagnostic impression; those under 45 are more likely to have SU only, and those younger than 25 are more likely to have no diagnosis.

Age Controlling for Gender by Mental Health Only

Females over age 45 were more likely to have MH only.
**Means of Death by Diagnostic Impression**

- None (N=55): 16% hanging, 14% firearms, 25% drugs & alcohol, 15% other (jumping, cutting, poisoning, carbon monoxide, motor vehicle related).
- COD MH & SU (N=65): 5% hanging, 20% firearms, 40% drugs & alcohol, 34% other.
- MH Only (N=87): 4% hanging, 18% firearms, 32% drugs & alcohol, 34% other.
- SU Only (N=43): 6% hanging, 26% firearms, 52% drugs & alcohol, 22% other.

* Other (jumping, cutting, poisoning, carbon monoxide, motor vehicle related)

- Firearms are nearly exclusively used with MH only or no diagnosis, while hanging is more equally distributed across all diagnostic groups, and other means are more often chosen by the MH only group.

**Intervention vs. Risk by Disorder**

- MH Only group is more likely to receive some type of intervention but has fewer known risks ($\chi^2=64.56, p=.001$), while the COD group has 2 or more risk behaviors but receives less intervention ($\chi^2=98.686, p=.001$).

**Ethnic Origin by Diagnostic Impression**

- None (N=27): 14% Aboriginal, 86% Non-Aboriginal.
- COD MH & SU (N=37): 25% Aboriginal, 75% Non-Aboriginal.
- MH Only (N=34): 38% Aboriginal, 62% Non-Aboriginal.
- SU Only (N=24): 50% Aboriginal, 50% Non-Aboriginal.

*Cells counts too small to report

- Aboriginal death by suicide reflect the total Aboriginal population but deaths by persons of aboriginal origin continue to be over represented.

**Winnipeg Community Area Profile by Ethnic Origin**

- River East / St. Vital: 63% Aboriginal, 37% Non-Aboriginal.
- Fort Garry / St. James: 64% Aboriginal, 36% Non-Aboriginal.
- Assiniboine / St. James: 66% Aboriginal, 34% Non-Aboriginal.
- Downtown / Point Douglas: 70% Aboriginal, 30% Non-Aboriginal.
- Overall Total (N=144): 68% Aboriginal, 32% Non-Aboriginal.

**Contrasting Profiles of 2 WPG Community Areas**

- Downtown / Point Douglas has more deaths in COD & SU group than any other area.
- Utilize research findings to improve risk assessments
- Use study to facilitate planning with communities and in particular explore risk factors within communities and unique dynamic at play
- Future research should consider linking data jurisdictions and sectors for example exploration of treatment prevalence and help seeking behaviour
- Consider adopting a process to complete psychological autopsies for deaths by suicide