



ISSUE

Individuals with a diagnosed mental health condition are at higher risk of suicide, representing about 46 percent of suicide victims according to the Centers for Disease Control and Prevention (CDC).¹ There are additional steps Texas could take to tackle the suicide crisis.

RECOMMENDATION

- Establish a statewide suicide prevention plan that includes required training for health care professionals.
- Permanently expand telemedicine and telehealth coverage, making services Medicaid reimbursable.
- Increase outreach and educational programming on existing suicide prevention and mental well-being resources. Outreach should target communities at risk, given health disparities that often lead to suicide.
- Require school districts to have plans in place to address suicide prevention, intervention, and postvention, especially in the age of COVID-19 and virtual learning. Mandate that new and existing educators receive reoccurring suicide prevention training to better recognize students at-risk.
- Reduce access to lethal means for individuals experiencing suicide ideation.
- Ban mental health providers from engaging in conversion therapy for LGBTQIA+ youth.

BACKGROUND

Since 2000, the Texas suicide rate has risen nearly 36 percent.² In 2019, suicide was the 11th leading cause of death in Texas, and second for those aged 15-34.³ In 2017, one in eight high school students in Texas reported attempting suicide. Males in Texas are over 3.7 times more likely than females to die by suicide, and White Texans are over two times as likely to die by suicide as Asian, Black, and Hispanic Texans.⁴ In 2017, the national suicide rate for US military veterans was 1.5 times the rate for non-veteran adults.⁵ Rural areas see high suicide rates largely due to: residents' lack of access to mental health services, high rates of gun ownership, and long distances to hospitals which makes it difficult to provide timely medical care.^{6,7,8} Individuals are particularly at risk of suicide after experiencing reductions in health care access. Mental health parity laws, which facilitate access to mental health services, can reduce suicide rates.⁹ Expanding access to broadband, telemedicine, and telehealth services would provide rural Texans and those with accessibility issues with better access to mental healthcare that could reduce the risk of suicide.

Due to COVID-19, researchers predict we will see an increase in suicides nationwide.¹⁰ Based on suicide trends from the 2007 Great Recession, a 20 percent increase in unemployment from COVID-19 could result in an estimated 18,000 more Americans dying by suicide.¹¹ When considering other pandemic-related factors not seen during the Great Recession, the suicide rate could vary broadly. Black Texans could be at even higher risk of suicide given their disproportionately higher death rates from COVID-19.¹² Even though adult Black Americans are more likely than adult White Americans to report "feelings of sadness, hopelessness, worthlessness, or that everything is an effort," Black Americans are less likely to seek out treatment and more likely to end treatment prematurely.^{13,14} The history of discrimination in healthcare has led many people of color to hold a fundamental mistrust of some healthcare services.¹⁵ In order to treat mental health issues such as suicide ideation, policies should not only increase access to care, but should also include outreach efforts to encourage services to be utilized by historically marginalized populations.

While all suicide attempts have an 8.5 percent death rate, those involving firearms are the number one cause of suicide death and have an 89.6 percent mortality rate.¹⁶ Reducing access to lethal means by individuals who pose a danger to themselves or others is fundamental to decreasing suicide death rates. Policies such as safe storage mandates for firearms, expanded background checks on gun purchases, and extreme risk protection orders that assess for dangerousness, not mental health diagnosis, could help prevent access to lethal means by these people.

Individuals in the lesbian, gay, bisexual, trans, queer, intersex, and asexual (LGBTQIA+) community are at especially higher risk of suicide than the average population. Hostile environments, discrimination, prejudice, denial of civil and human rights, harassment, family rejection, and more can result in mental health conditions that contribute to suicide ideation.¹⁷ The CDC reported that LGBTQIA+ youth are more likely to seriously consider suicide than heterosexual peers.¹⁸ Texas should take steps to improve the mental health outcomes of these individuals by banning conversion therapy by mental health providers.

SUMMARY

Rising suicide rates in Texas represent a growing concern for the state and mental health advocates. Suicide impacts all demographics uniquely, and the COVID-19 pandemic is expected to amplify mental health issues such as suicide. By increasing access to care, reducing access to lethal means, dismantling stigmas against seeking mental health treatment, and reducing discriminatory disparities, the suicide rate in Texas can be diminished.

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