

Suicide rates up for most race, ethnic groups in 2018 to 2021

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From 2018 to 2021, age-adjusted suicide rates increased among most

race/ethnic groups, according to research published in the Feb. 10 issue of the U.S. Centers for Disease Control and Prevention *Morbidity and Mortality Weekly Report*.

Deborah M. Stone, Sc.D., from the CDC in Atlanta, and colleagues examined changes in racial and ethnic age-adjusted and age-specific suicide rates during 2018 to 2021.

The researchers found that non-Hispanic American Indian or Alaska Native (AI/AN) persons had the highest age-adjusted 2021 suicide rates (28.1 per 100,000) overall and experienced the highest relative percentage change during 2018 to 2021 (26 percent increase; from 22.3 to 28.1 per 100,000). During 2018 to 2021, age-adjusted rates also increased significantly among non-Hispanic Black or African Americans (19.2 percent increase; from 7.3 to 8.7 per 100,000) and for Hispanic persons (6.8 percent increase; from 7.4 to 7.9 per 100,000).

The only group to show an overall age-adjusted rate decline was non-Hispanic Whites (3.9 percent decline; from 18.1 to 17.4 per 100,000). During 2018 to 2021, [suicide rates](#) increased significantly overall and among AI/AN, Black, Hispanic, and non-Hispanic multiracial persons aged 25 to 44 years (5.0, 33.7, 22.9, 19.4, and 20.6 percent, respectively). Rates decreased significantly overall and among Asian, Hispanic, and White persons aged 45 to 64 years (−12.4, −15.9, −9.3, and −11.5 percent, respectively).

"As the [nation](#) continues to respond to the short- and long-term impacts of the COVID-19 pandemic, remaining vigilant in prevention efforts is critical, especially among disproportionately affected populations where longer-term impacts might compound preexisting inequities in suicide risk," the authors write.

More information: Deborah M. Stone et al, Notes from the Field:

Recent Changes in Suicide Rates, by Race and Ethnicity and Age Group—United States, 2021, *MMWR. Morbidity and Mortality Weekly Report* (2023). [DOI: 10.15585/mmwr.mm7206a4](https://doi.org/10.15585/mmwr.mm7206a4)

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