

# SUICIDE: NEW JERSEY 2017 FACTS & FIGURES

## Suicide Death Rates

	Number of Deaths by Suicide	Rate per 100,000 Population	State Rank
New Jersey	789	8.27	49
Nationally	44,193	13.26	

Suicide is the **11th leading** cause of death overall in New Jersey.



On average, one person dies by suicide **every 11 hours** in the state.

Based on most recent 2015 data from CDC



Suicide cost New Jersey a total of **\$813,656,000** of combined lifetime medical and work loss cost in 2010, or an average of **\$1,131,650** per suicide death.

## IN NEW JERSEY, SUICIDE IS THE...

**3rd leading** cause of death for ages 10-34

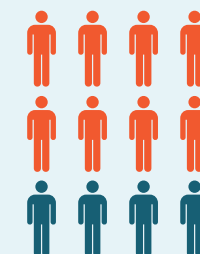
**4th leading** cause of death for ages 35-44

**5th leading** cause of death for ages 45-54

**9th leading** cause of death for ages 55-64

**18th leading** cause of death for ages 65 & older

**Nearly twice as many** people die by suicide in New Jersey annually than from homicide; the total deaths to suicide reflect a total of **14,758** years of potential life lost (YPLL) before age 65.



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## SUICIDE PREVENTION PROGRAMS AND INITIATIVES

- In 2004, the New Jersey legislature established the Youth Suicide Advisory Council to advise and make recommendations to the Department of Children and Families (DCF) for youth suicide reporting, prevention and intervention.
- The Traumatic Loss Coalitions for Youth Program at Rutgers-University Behavioral HealthCare is an interactive, statewide network that offers collaboration and support to professionals working with school-age youth. The program is funded/overseen by the DCF Division of Children's System of Care and operates as a county-based collaborative.
- The *New Jersey Youth Suicide Prevention State Plan* was updated in 2015 and is accessible at <http://www.sprc.org/sites/default/files/New%20Jersey%202015-preventionplan.pdf>.
- New Jersey law (§18A:6-112) requires that public school teaching staff members complete at least 2 hours of instruction in suicide prevention in each professional development period. The instruction must be provided by a licensed health care professional with training and experience in mental health issues, and must include information on the relationship between suicide risk and incidents of harassment, intimidation, and bullying and information on reducing suicide risk in students who are members of high risk communities.

## GET INVOLVED

Two AFSP Chapters serve communities across New Jersey. For more information or to volunteer, please contact:

### AFSP – CENTRAL NEW JERSEY

[centralnj@afsp.org](mailto:centralnj@afsp.org)

### AFSP – NORTHERN NEW JERSEY

[northernnj@afsp.org](mailto:northernnj@afsp.org)

### BECOME AN ADVOCATE IN NEW JERSEY

AFSP's New Jersey advocacy volunteers build relationships with public officials and advocate on behalf of sound suicide prevention policy.

To get involved, contact:

Nicole Gibson

Director of State Policy & Grassroots Advocacy

[ngibson@afsp.org](mailto:ngibson@afsp.org)

## LEADING THE FIGHT AGAINST SUICIDE

We fund research, offer educational programs, advocate for public policy and support those affected by suicide. Headquartered in New York, AFSP has local chapters in all 50 states



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