

## Suicide by Ligature Data

Suicide by ligature, also known as suicide by hanging, has become a **growing public health concern in our County.**

- According to the Medical Examiner-Coroners' data: Hanging is the **number one method of suicide in the County**, exceeding firearms, and representing 40% of suicides between 2018-2022.<sup>[2]</sup>
- Suicide by ligature has a **high case fatality rate**, similar to firearms.<sup>[1]</sup>
- **More common with certain identities:** youth, males, racial and ethnic minorities, single individuals, non-veterans, and foreign-born individuals.<sup>[3]</sup>
  - Women are still at risk, when taking into account the difference in suicide rates between male and females.
  - Individuals who identify as LGBTQ+ are at increased risk for suicide in general, but it is unknown if they are at heightened risk for ligature use as there is limited research with this population.
- 10% of suicides by hanging occur in institutional settings such as hospital/prisons, while **90% of suicides by hanging occur in the community** such as houses and public spaces.<sup>[4]</sup>

## Resources to Provide to Caregivers

Caregivers have available support and resources in our County and nationally to support their loved ones, such as:

- Mental Health and Substance Use Crisis Services:
  - For local area codes: **988**
  - For non-local area codes: **1-800-704-0900, Press 1**
- General Information and Referrals to Mental Health/Substance Use Services
  - **1-800-704-0900**
- Crisis Text Line
  - For English, text **RENEW** to **741741**
  - For Spanish, text **COMUNIDAD** to **741741**



For more information, contact  
[SuicidePrevention@hhs.sccgov.org](mailto:SuicidePrevention@hhs.sccgov.org)

[1] Baker, S. P. et al. (2013). Increase in suicide by hanging/suffocation in the U.S., 2000-2010. *American Journal of Preventive Medicine*, 44(2), 146-149.

[2] County of Santa Clara Open Data Portal. ME-C Data Dashboard. (2022). *ME-C Cases dataset* [Dataset]. County of Santa Clara.

[3] Liu et al. (2013). Sociodemographic predictors of suicide means in a population-based surveillance system: Findings from the National Violent Death Reporting System. *Journal of Affective Disorders*, 151(2), 449-454

[4] Gunnell et al. (2005). The epidemiology and prevention of suicide by hanging: A systematic review. *International Journal of Epidemiology*, 34(2), 433-442.



## Suicide by Ligature: A Provider's Guide

County of Santa Clara  
Suicide Prevention Program

## Combatting the Rise in Suicide by Hanging

The **accessibility** of ligatures and ligature points in one's environment is a **primary reason** that people choose this method. **To counteract this as a provider, you can:**

- **Assess** for use of **common ligatures/ligature points** with clients as a possible plan for suicide, along with other common methods such as firearms and pills.
  - **DO NOT** do a full **assessment of all possible ligatures/ligature points**, so as to avoid putting ideas into people's minds.
- **Common ligatures** include:
  - belts, ropes, cables, scarves, etc.
- **Common ligature points** include:
  - beams, trees, ceiling fans, windows, doors/doorknobs, curtain or shower rods.
- Create an **appropriate safety plan** that covers: triggers, social support, coping strategies, safe spaces, environmental safety, reasons for living, and resources.



### • Thoughts/Verbal

- Thoughts/statements that life is not worth living, thinking about hurting oneself, that others are better off without them, or having suicidal thoughts.

### • Feelings

- Hopeless, desperate, trapped, unbearable emotional pain
- Abandoned or betrayed
- No sense of purpose
- Sudden mood changes
- Feeling ashamed of oneself

### • Physical

- Unbearable chronic pain
- Trouble coping with health changes

### • Behavioral

- Giving away prized possessions
- Impulsive or reckless behavior
- Putting affairs in order
- Increased substance use
- Withdrawing from others
- Not caring for personal hygiene or health

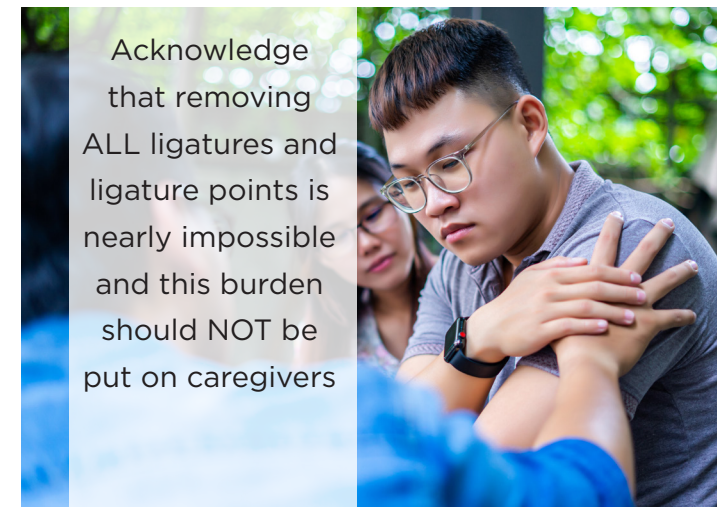
### • Situational

- Conflict with/rejection from one's family, support system, and/or community
- Exposure to trauma
- Discrimination or being treated unfairly because of who you are
- Not having others who understand you
- Trouble adjusting to a new culture
- Failure to meet expectations



Despite some common misconceptions, suicide by hanging is an **extremely distressing death** that affects both the deceased and their loved ones. Discussing ligatures with caregivers is crucial to ensure that they are aware of this method. **As a provider, you can:**

- Share **common ligatures and ligature points to monitor or reduce in the home**, along with other common means such as firearms and pills.
- Provide guidance on **when a loved one should be taken to the hospital**, and emphasize that 24/7 monitoring and reducing all ligature methods in the home is difficult.
- Discuss **suicide warning signs**, as well as **culturally specific warning signs**.
- Ensure they are **aware of asphyxiation "games"** that can be common among youth.
  - In these games, youth are encouraged to choke themselves until they pass out, and this can lead to unintentional death.



Acknowledge that removing ALL ligatures and ligature points is nearly impossible and this burden should NOT be put on caregivers