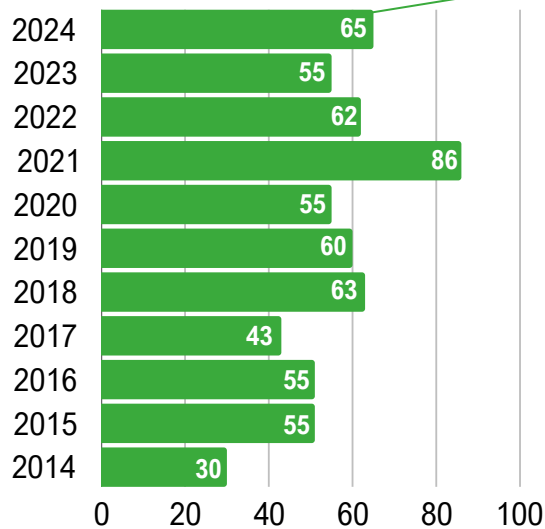


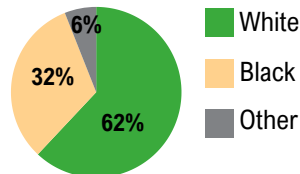
YOUTH SUICIDE IN GEORGIA

Suicide was the **third** leading cause of death for Georgia children aged 5-17 in 2023.¹

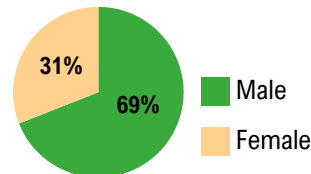
BREAKING DOWN THE 2024 DATA²



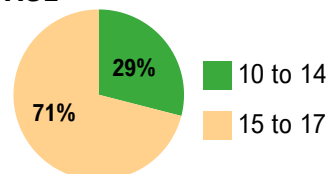
RACE



GENDER



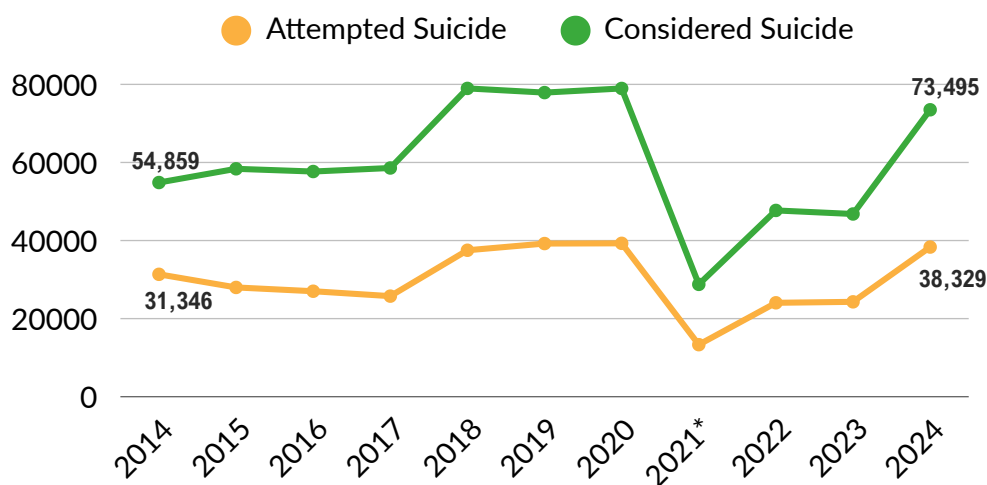
AGE*



*There were no deaths for the 5-9 age range.

The number of children, aged 5-17 in Georgia, who visited emergency rooms for reasons related to suicide **more than doubled** between 2010 and 2024.³

YOUTH VOICE: WHAT GEORGIA STUDENTS SAY ABOUT SUICIDE⁴



In 2024:

116,513
students reported having seriously considered harming themselves

70,881
students reported having harmed themselves

*Responses to the Student Health Survey declined following 2021, with 418,705 responses recorded in 2022 compared to 725,229 in 2020. However, in 2024, participation returned to pre-pandemic levels, with 713,456 responses submitted. *The Georgia Student Health Survey was not administered during the 2020-2021 school year. Instead, the GaDOE developed a brief Student Wellness Survey to highlight non-academic barriers to learning.



If you or someone you know is struggling with anxiety, depression or suicidal ideation, call 988, the National Suicide and Crisis Lifeline.

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WARNING SIGNS OF SUICIDAL BEHAVIOR

There are many warning signs that can signal someone is at risk for suicide. The risk is higher if the behavior is new or has increased, or if the changed behavior is related to a painful event, loss, or change. The risk is also greater with the presence of multiple warning signs. Warning signs include: ⁵

- Talking about being hopeless or wanting to die
- Expressing feelings of being trapped or in unbearable pain
- Increased use of alcohol or drugs
- Looking up ways to end their life online
- Withdrawing from previously enjoyed activities
- Changes in sleep patterns
- Saying goodbye, visiting unexpectedly, and giving away possessions
- Sudden aggression
- Mood changes like depression or anxiety
- Unexpected calmness or sudden sense of relief after distress

PROTECTIVE FACTORS TO PREVENT SUICIDE

There are a range of protective factors at the individual, relationship, and community levels that can buffer individuals from suicidal thoughts and behaviors. ⁶

Individual Protective Factors:

- Effective coping and problem-solving skills
- Reasons for living (i.e., family, friends, pets, etc.)
- Strong sense of cultural identity

Relationship Protective Factors:

- Support from partners, friends, and family
- Feeling connected to others

Individual Protective Factors:

- Feeling connected to school, community, and other social institutions
- Availability of consistent and high quality physical and behavioral healthcare

COMPREHENSIVE PREVENTION STRATEGIES AND EXAMPLES⁷



Identify and assist persons at risk

Examples: training for community leaders, suicide screening, teaching warning signs, referral to professional help (e.g., 988 Suicide and Crisis Lifeline, My GCAL line and app)



Ensure access to effective treatment

Examples: safety planning, evidence-based treatment, and reducing financial, cultural, and logistical barriers to care



Reduce access to means of suicide

Examples: educating families, distributing gun safety locks, changing medication packaging, installing barriers on bridges



Promote social connectedness and support

Examples: social programs for specific population groups, promote healthy peer norms, and engage community members in shared activities



Support safe care transitions and organizational linkages

Examples: formal referral protocols, interagency agreements, cross-training, follow-up contacts, rapid referrals, and patient/family education



Respond effectively to individuals in crisis

Examples: mobile crisis teams, walk-in crisis clinics, hospital-based psychiatric emergency services, and peer-support programs



Provide coping and problem solving skills

Examples: skills training, including parenting programs and education programs that support resilience



Provide immediate and long-term support after a suicide

Examples: protocols to respond effectively and compassionately after a suicide, supports for people bereaved by suicide

SCAN BELOW TO SEE
FACTSHEET CITATIONS



REFERENCES FOR YOUTH SUICIDE IN GEORGIA

- 1 Georgia Bureau of Investigation. Annual Report (2023). Retrieved May 8, 2025 from <https://dofs-gbi.georgia.gov/document/document/2023-cfr-annual-report/download>.
- 2 Georgia Department of Public Health, Office of Health Indicators for Planning. (2024). Online analytical statistical information system: Mortality, Intentional Self-Harm (Suicide), 5-17 Years of Age. Retrieved September 9, 2025 from <https://oasis.state.ga.us/oasis/webquery/qryMortality.aspx>.
- 3 Georgia Department of Public Health, Office of Health Indicators for Planning. (2024). Online analytical statistical information system: Emergency Room Visits Web Query, ER Visits by Residents, Intentional Self-Harm (Suicide), 0-17 Years of Age. Accessed September 9, 2025 from <https://oasis.state.ga.us/oasis/webquery/qryER.aspx>.
- 4 Georgia Department of Education. Georgia Student Health Survey, Statewide, 2023-2024. Retrieved May 8, 2025 from <https://apps.gadoe.org/GSHSSurveyResults/Pages/default.aspx>.
- 5 American Foundation for Suicide Prevention. "Risk factors, protective factors, and warning signs." Retrieved May 8, 2025 from <https://afsp.org/risk-factors-protective-factors-and-warning-signs/#warning-signs>.
- 6 Centers for Disease Control and Prevention. "Risk and Protective Factors." Retrieved May 8, 2025 from <https://www.cdc.gov/suicide/risk-factors/index.html>.
- 7 Centers for Disease Control and Prevention. "Strategies to prevent suicide." Retrieved May 8, 2025 from <https://www.cdc.gov/suicide/prevention/>.