

SUICIDES IN ARKANSAS

Annual Report 2023

**Arkansas Department of Health
Injury & Violence Prevention**

4815 W. Markham St, Slot 10

Little Rock, AR 72205



Contents

	Page
Overview	
Suicide overview	3 - 6
Data disclaimer	7
All Suicide Deaths in Arkansas	
Deaths by county	8
Demographic characteristics	9
Methods of suicide	10
Veteran Suicide Deaths in Arkansas	11
Non-fatal Suicide Outcome Emergency Department (ED) Visits in Arkansas	
Visits by county	12
Demographic characteristics	13
Methods of non-fatal suicide outcomes	14
Resources	
988 Suicide & Crisis Lifeline	15
Suicide prevention resources	16
Crisis lines	17
Suicide prevention toolkits	18
Report references	19
Contact information	20

Suicide Overview

What is suicide?

Suicide is the intentional act of taking one's own life. It often stems from overwhelming emotional pain, mental illness, or crisis situations where the person feels hopeless and sees no way out. In 2023, according to the Arkansas Department of Health (ADH) Vital Records and Statistics Branch, there were 625 suicide deaths in Arkansas, with an age-adjusted rate of 20.2 per 100,000 people. Of the 625 suicide deaths in Arkansas, 111 were veterans with an age-adjusted rate of 61.8 per 100,000 people. According to the Centers for Disease Control and Prevention (CDC), there were more than 49,300 suicide deaths nationwide in 2023, with an age-adjusted rate of 14.1 per 100,000 people.¹

Warning signs to watch for²

- Signals someone may be in crisis (not always present):
 - Talking about being a burden or wanting to die
 - Withdrawing or isolating
 - Increased anxiety
 - Feeling trapped or in unbearable pain
 - Increased substance use
 - Seeking access to lethal means
 - Increased anger or rage
 - Extreme mood swings
 - Sleeping too little or too much
 - Expressing hopelessness
 - Making suicide plans or posting about wanting to die

Suicide Overview (cont.)

What factors increase suicide risk?

- Individuals with mental health conditions like depression, bipolar disorder, or schizophrenia
- People misusing alcohol or drugs
- Those facing recent major stressors (loss, divorce, financial issues)
- Individuals who experience stigmatization, bullying, or a lack of support
- Those with chronic illness or pain
- People with a family history of suicide or previous suicide attempts

Key Points

- Suicide is rarely caused by just one event or issue.
- At several levels, many factors can increase risk, while others can reduce risk.
- Everyone can contribute to prevention.

Suicide Warning Signs:

<i>Verbal Clues:</i>	<i>Behavioral Clues:</i>	<i>Emotional Clues:</i>
<ul style="list-style-type: none"> • “I wish I were dead.” • “I’m a burden.” • “I can’t take this anymore.” 	<ul style="list-style-type: none"> • Withdrawing from activities or social groups • Saying goodbye or making final plans • Searching online for suicide methods • Increased substance use • Giving away prized possessions • Sudden calmness after a depressive episode 	<ul style="list-style-type: none"> • Hopelessness • Desperation • Feeling trapped • Severe anxiety or irritability

Suicide Overview (cont.)

Risk & Protective Factors of Suicide²

Factor Level	Risk Factors Examples	Protective Factors Examples
Individual	<ul style="list-style-type: none"> • Previous suicide attempt • History of depression or other mental illness • Serious illness (chronic pain) • Criminal/legal problems • Job or financial problems • Impulsivity or aggression • Substance use • Adverse childhood experiences • Hopelessness • Violence victimization or perpetration 	<ul style="list-style-type: none"> • Effective coping & problem-solving skills • Reasons for living (family, friends, pets)
Relationship	<ul style="list-style-type: none"> • Bullying • Family/loved one's history of suicide • Loss of relationships • High conflict or violent relationships • Social isolation 	<ul style="list-style-type: none"> • Support from family, friends, partners • Feeling connected to others
Community	<ul style="list-style-type: none"> • Lack of access to health care • Suicide clusters • Acculturation stress • Community violence • Historical trauma 	<ul style="list-style-type: none"> • Connection to school, community, social institutions • Access to consistent, high-quality physical & behavioral health care
Societal	<ul style="list-style-type: none"> • Stigma around mental illness/help-seeking • Easy access to lethal means • Unsafe media portrayals of suicide 	<ul style="list-style-type: none"> • Reduced access to lethal means among at-risk individuals • Cultural, religious, or moral objections to suicide

Suicide Overview (cont.)

How to Support Someone Who May Be Suicidal³:

- 1. Ensure privacy.** Ask to talk in a private, safe space before beginning the conversation.
- 2. Listen to their story.** Give them your full attention without judgment or interruption.
- 3. Express care.** Let them know you genuinely care about their well-being.
- 4. Ask directly about suicide.** Calmly ask if they are thinking about suicide. Direct questions do not increase risk—they open the door for honesty.
- 5. Encourage treatment or resources.** Suggest reaching out for professional help and share immediate support like calling or texting 988 for the Suicide & Crisis Lifeline.
- 6. Provide ongoing support.** Offer to follow up, check in, and walk alongside them through their recovery process.
- 7. Use respectful language.** Avoid demeaning comments, shaming, or offering oversimplified advice.
- 8. Limit access to means.** If safe and appropriate, reduce access to items that could be used for self-harm.

Early intervention can save lives.

Not every journey is easy; for some, it may be difficult to talk about their feelings, thoughts about suicide, or how to get help. By working together to recognize the signs, raise awareness of suicide, and open the conversation with each other, you can make a difference and save Arkansans' lives.

This report provides information on suicide deaths, veteran suicide deaths, and non-fatal suicide outcomes in Arkansas for 2023.

Data Disclaimer

- **Mortality Data:**

- The suicide death data were collected using the injury codes present in death certificates from the Injury Matrix of E-code Grouping, provided by CDC (International Classification of Diseases (ICD-10)).
- The Arkansas mortality data for this report were compiled using the county of residence.
- The age-adjusted rates were calculated using the 2000 U.S. standard population.
- The veteran age-adjusted rates were calculated using the Veteran Population Projection Model 2018 standard population.

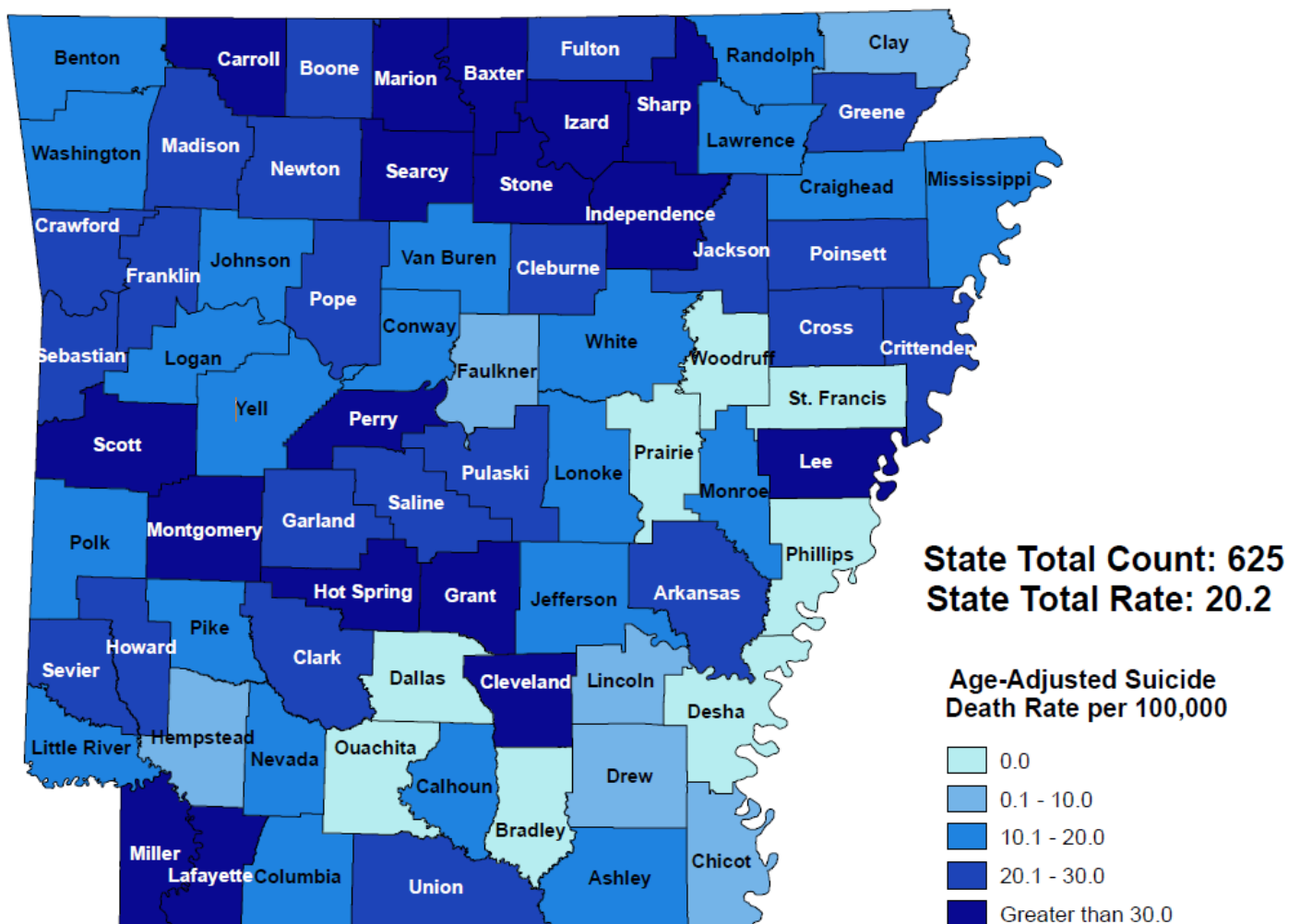
- **Morbidity Data:**

- Non-fatal suicide outcome codes were used from the Injury Matrix of ICD-10 injury diagnosis codes, provided by CDC.
- Rehabilitation and psychiatric hospitals were excluded.
- Arkansas hospitalization data for this report were compiled using the county of residence.
- The age-adjusted rates were calculated using the 2000 U.S. standard population.

Suicide Deaths in Arkansas

The age-adjusted suicide death rates describe the number of suicide deaths per 100,000 people adjusted by age using the 2000 U.S. standard population. In 2023, the state total suicide deaths in Arkansas were 625 with an overall age-adjusted rate of 20.2 per 100,000 people compared to 14.1 per 100,000 people nationwide. Seventeen Arkansas counties report an age-adjusted suicide death rate greater than 30.0 per 100,000 people in 2023, while eight counties did not report any death by suicide.

2023 Arkansas Age-adjusted Suicide Rates per 100,000 People by County of Residence*



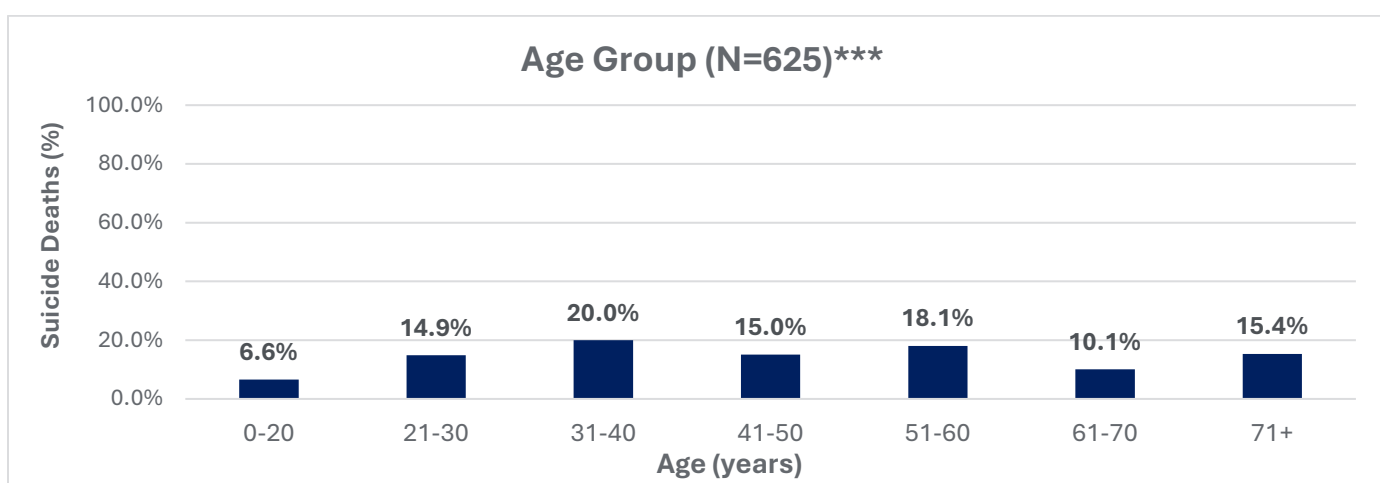
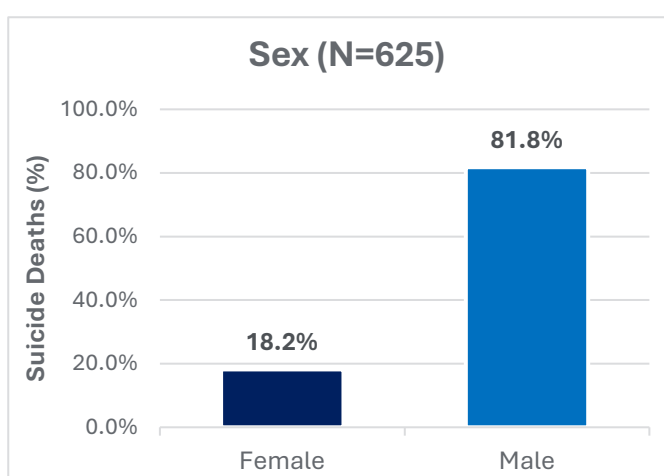
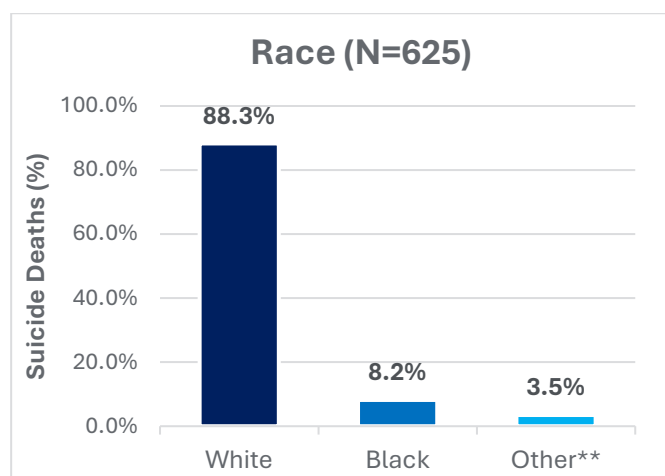
*Data are provisional

Data source: Arkansas Department of Health, Vital Statistics

Demographic Characteristics of Suicide Deaths

Certain populations in Arkansas have a higher percentage of suicide deaths in 2023. Most individuals that died by suicide were White (88.3%) and males (81.8%). The age distribution for suicide deaths showed the highest rate in ages 31 to 40 years at 20.0% and 51 to 60 years at 18.1%.

Suicide Deaths: Demographic Characteristics, Arkansas Residents, 2023*



*Data are provisional

**Other includes other race, American Indian/Alaskan Native/Pacific Islander, and Asian

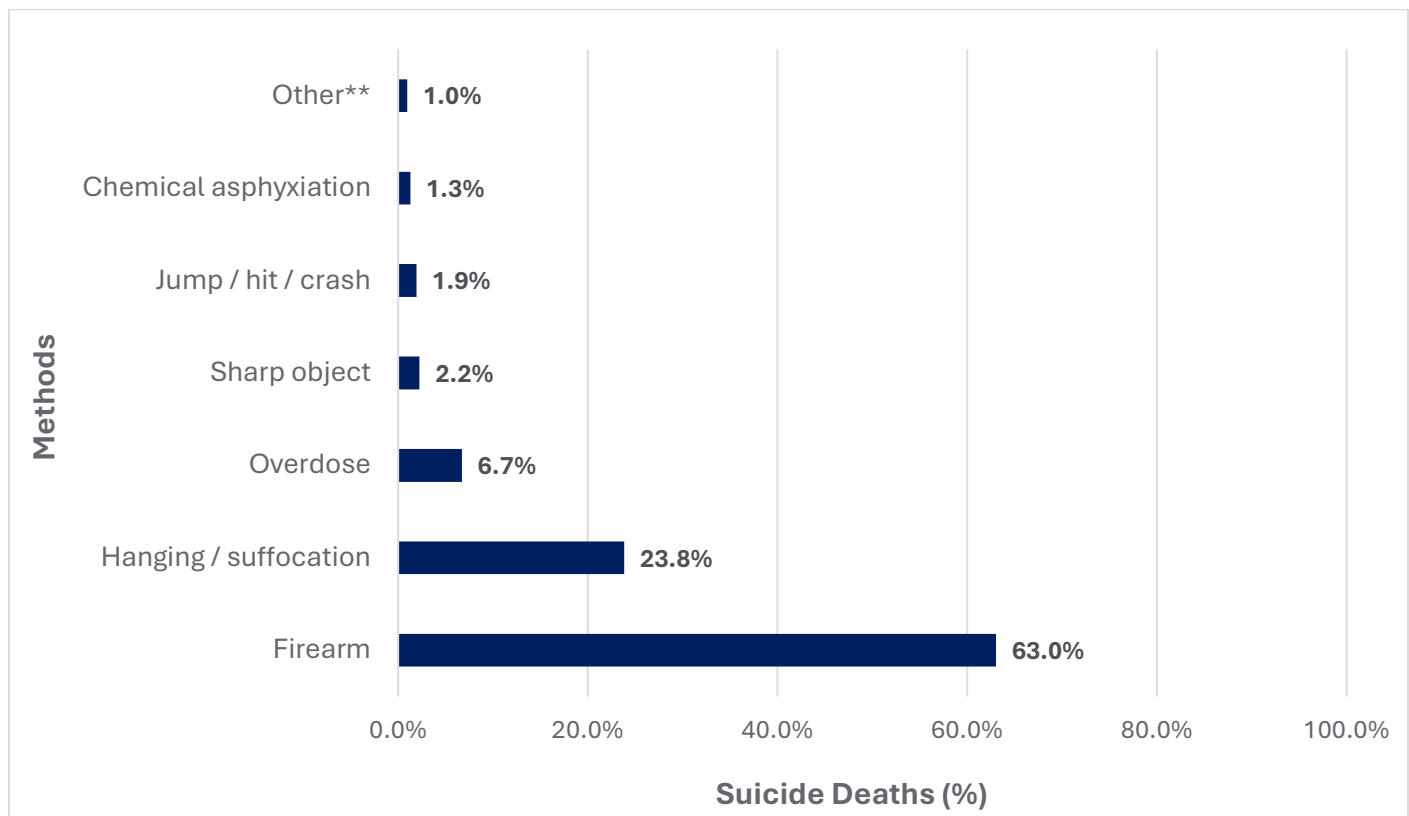
***Percentages may not equal 100% due to rounding of decimal place.

Data source: Arkansas Department of Health, Vital Statistics

Suicide Deaths by Method

The methods in which someone died by suicide is something that varies in Arkansas. Firearm related suicide deaths were the highest at 63.0%, followed by hanging and/or suffocations at 23.8%, and overdose suicide deaths at 6.7%. The least prevalent methods include jump/hit/crash (1.9%), chemical asphyxiation (1.3%), and other (1.0%).

Suicide Deaths by Method, Arkansas Residents, 2023*



*Data are provisional

**Other: includes alcohol, drowning/submersion, and other specified means

Data source: Arkansas Department of Health, Vital Statistics

Veteran Suicide Deaths in Arkansas

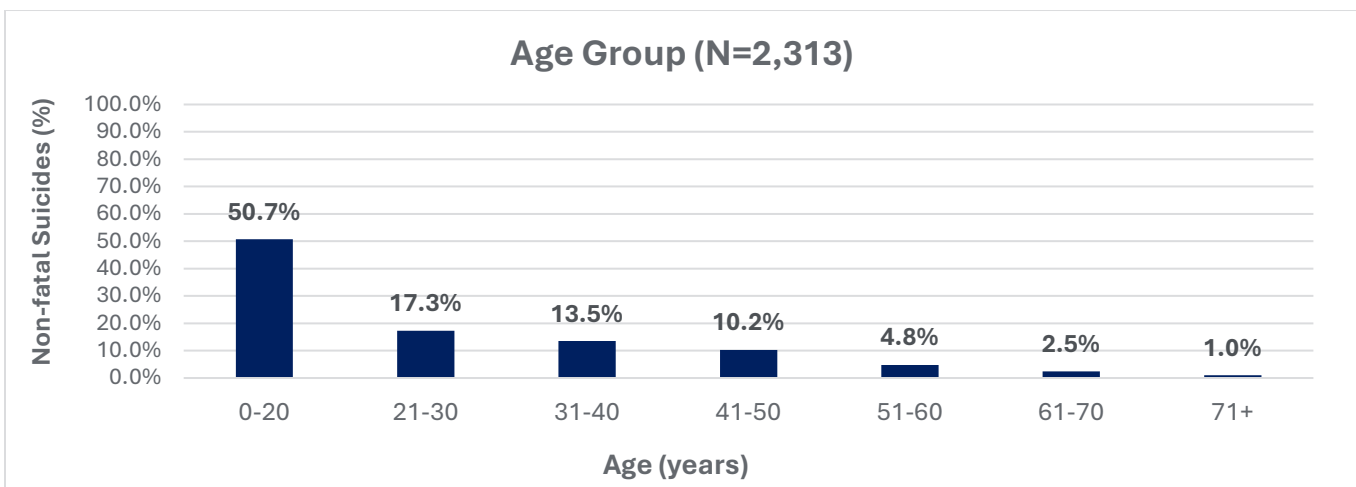
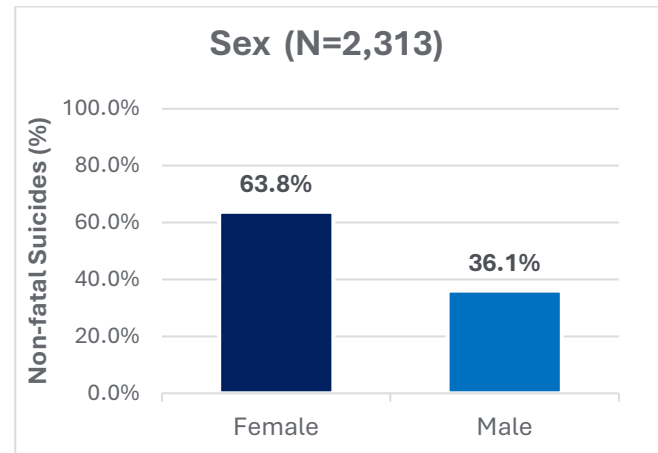
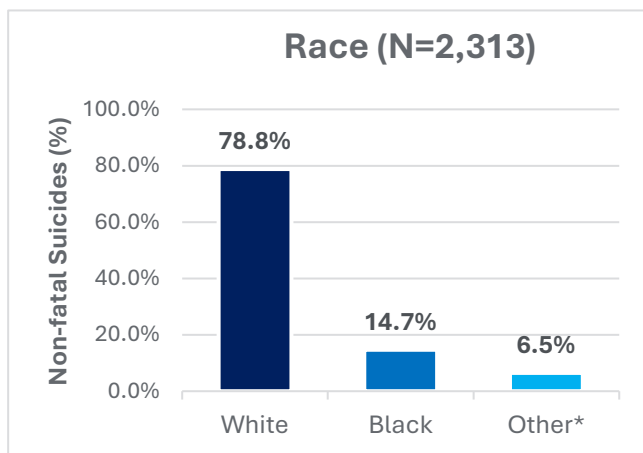
The veteran age-adjusted suicide death rates describe the number of veteran suicide deaths per 100,000 people adjusted by age using the Veteran Population Projection Model 2023 standard population. In 2023, Arkansas reported 111 veteran suicide deaths with an age-adjusted rate of 65.4 per 100,000 people. Twelve counties reported suicide death rates greater than 150 per 100,000 people in 2023, while thirty-five counties did not report a veteran suicide death.

A dashboard is in development at the Arkansas Department of Health that will display comprehensive suicide data, including veteran suicide information in Arkansas. The dashboard will be publicly available on the Arkansas Department of Health's website. For more information and updates on the suicide dashboard please visit Injury and Violence Prevention's website for [Suicide Prevention and Education](#).

Demographic Characteristics of Emergency Department Visits for Non-fatal Suicide Outcomes

Certain populations in Arkansas have a higher percentage of going to the emergency department for non-fatal suicide outcomes in 2023. Of the 2,313 non-fatal suicide outcomes, most were White (78.8%) and female (63.8%). The age distribution for non-fatal suicide outcomes showed the largest in ages 0 to 20 years (50.7%) followed by 21 to 30 years (17.3%).

Emergency Department Visits for Non-fatal Suicide Outcomes: Demographic Characteristics, Arkansas Residents, 2023



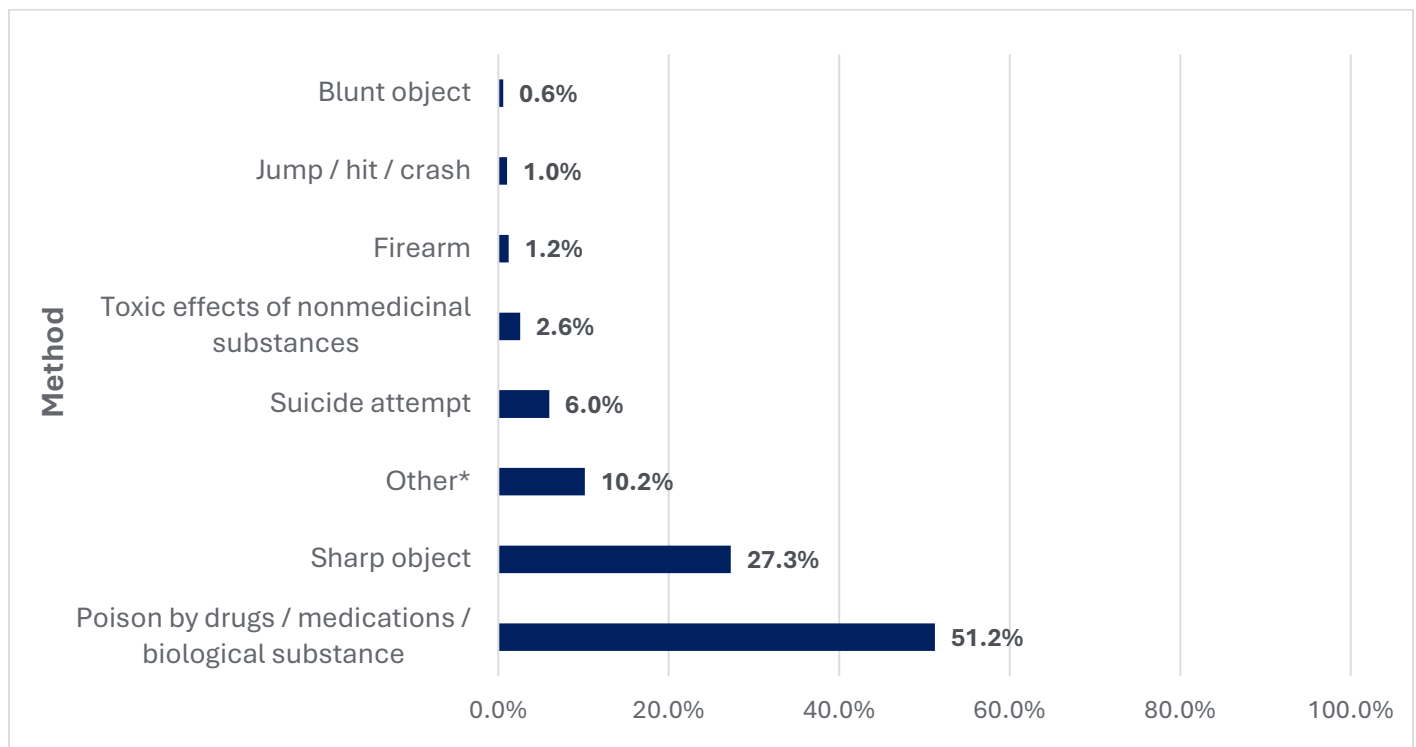
*Other includes American Indian/Alaskan Native/Pacific Islander, Asian, and any other race reported

Data source: Arkansas Department of Health, Hospital Discharge Data System

Non-fatal Suicide Outcome Emergency Department (ED) Visits by Method

The self-injury methods which someone went to the ED for non-fatal suicide outcomes or intentional self-harm also varied in Arkansas. The highest method for non-fatal suicide outcomes that resulted in an ED visit were self-harm by poisoning by drugs/medications/biological substances at 51.2% followed by self-harm by sharp object at 27.3%. The third largest were other methods at 9.8%, which included a combination of means such as asphyxiation, suffocation, hanging, drowning/submersion, smoke/flames/vapors/hot objects and other specified means.

Emergency Department Visits for Non-fatal Suicide Outcomes/Intentional Self-harm by Method, Arkansas Residents, 2023**



*Other: includes asphyxiation, suffocation, hanging, drowning/submersion, smoke/flames/vapors/ hot objects and other specified means

**Percentages may not equal 100% due to rounding of decimal place.

Data source: Arkansas Department of Health, Hospital Discharge Data System

988 Suicide & Crisis Lifeline- Arkansas Lifeline Call Center

What is 988?

988 is the nationwide number for the Suicide & Crisis Lifeline, providing free, confidential, and 24/7 support for anyone experiencing suicidal thoughts, emotional distress, or a mental health or substance use crisis.

Why was 988 created?

The 988 crisis line, a service providing life-saving access to crisis services, launched on July 16, 2022. It connects callers directly with trained call specialists who can de-escalate, offer support, and link individuals to local care.

988 in Arkansas

The Arkansas Department of Health (ADH) operates the Arkansas Lifeline Call Center, which has been a part of the national 988 Suicide & Crisis Lifeline network since 2017. This center handles calls from Arkansas area codes 501, 870, and 479, ensuring that callers are supported by people who understand local resources and needs.

If you or someone you know needs support, call 988.

Veterans: Call 988, then press 1 to connect with the Veterans Crisis Line.

More info: <https://988lifeline.org>



Suicide Prevention Resources

- The American Foundation for Suicide Prevention
 - <https://afsp.org/>
- Arkansas Suicide Prevention
 - <http://www.arsuicideprevention.org>
- Warning Signs for Suicide
 - <http://www.suicidology.org/resources/warning-signs>
- Arkansas Suicide Prevention Network
 - <http://www.arsuicideprevention.org/aspn.html>
- Funeral Director's Guide to Supporting Suicide Survivors
 - <http://www.sprc.org/sites/default/files/migrate/library/funeraldirectors.pdf>
- Suicide Safety Planning Guide
 - <http://www.sprc.org/sites/default/files/SafetyPlanningGuide%20Quick%20Guide%20for%20Clinicians.pdf>
- National Action Alliance for Suicide Prevention
 - <http://actionallianceforsuicideprevention.org/>
- Garland County Suicide Prevention Coalition
 - <https://garlandcountysuicidepreventioncoalition.com/>
- Veterans Impact-Central Arkansas Veterans Mental Health Council
 - <http://www.veteransimpact.org/home.html>
- We Are The 22
 - <https://www.facebook.com/wearethe22>

Crisis Lines

988 Suicide and Crisis Lifeline:	Dial 988
Veteran's Crisis Line:	Dial 988 then press 1
Suicide Crisis Spanish Line:	Dial 988 then press 2 or 1-888-628-9454
Suicide Crisis Deaf Line:	1-800-799-4889
Crisis Text Line:	Text "MHFA" to 741741
SAMHSA National Help Line:	1-800-662-HELP (4357)
NAMI Helpline (people living with mental illness):	1-800-844-0381 or text "NAMI" to 741741
Disaster Distress Helpline:	1-800-985-5990 or text "TalkWithUs" to 66746
National Domestic Violence Hotline:	1-800-799-SAFE (7233)
National Sexual Assault Hotline:	1-800-656-HOPE (4673)
Arkansas Central Hotline (alcoholism-related):	1-501-664-7303
Arkansas Poison Hotline:	1-800-222-1222
(for poison exposures, drug interactions)	or 1-800-376-4766

Suicide Prevention Toolkits

- [Zero suicide toolkit for Medical & Behavioral Healthcare Settings](#)
- [Model School Policy on Suicide Prevention](#)
- [After A Suicide Toolkit](#)
- [Suicide Safety Planning Guide](#)
- [Suicide Safety Planning Template](#)

Report References

1. “Suicide Data and Statistics.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, www.cdc.gov/suicide/facts/data.html. Accessed 15 Sept. 2025.
2. “Risk and protective factors for suicide.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, <https://www.cdc.gov/suicide/risk-factors/>. Accessed 15 Sept. 2025.
3. “Risk factors, protective factors, and warning signs.” American Foundation for Suicide Prevention, <https://afsp.org/risk-factors-protective-factors-and-warning-signs/>. Accessed 15 Sept. 2025.

Contact Information

**Arkansas Department of Health
Substance Misuse and Injury Prevention**

4815 West Markham Street, Slot 10

Little Rock, AR 72205

Phone: 501-683-0707

ADH.injuryprevention@arkansas.gov

**Arkansas Department of Health
Suicide Prevention Program**

4815 West Markham Street, Slot 10

Little Rock, AR 72205

Phone: 501-537-6745

Report Prepared by

Chelsea Clay, MPH

Injury Epidemiologist

Arkansas Department of Health