Suicide Among Girls & Women:
What Utahns Need to Know

RESEARCH SUMMARY

UTAH WOMEN & LEADERSHIP Project
NO. 55 | JULY 30, 2026

Suicide is a complex public health issue that affects individuals, families, and communities across Utah. Although men are more likely to die by suicide, women and girls face unique biological, social, and environmental risk factors that influence suicidal thoughts and behaviors. Understanding these gender-specific experiences is essential for strengthening prevention efforts, expanding support, and fostering communities where women feel connected, valued, and able to seek help.

SUICIDE

- Remains a leading cause of death.
- Affects women through unique risk factors.
- Risk increases with trauma and abuse.
- Prevention requires connection, support, and inclusion.

UTAH IMPACT

Suicide remains a significant public health concern in Utah. Between 2018 and 2020, Utah's age-adjusted suicide rate was 21.4 per 100,000 residents, with an average of 657 suicide deaths each year. Utah ranked ninth in the nation for suicide rates in 2020, and suicide was the eighth leading cause of death among Utahns. In addition, an average of 70 Utahns were treated each day for self-inflicted injuries in 2019. More deaths in Utah result from suicide than from motor vehicle crashes, breast cancer, or several other chronic physical health conditions. These data highlight the prevalence and widespread impact of suicide on individuals, families, and communities across the state.

GENDER DIFFERENCES

Although men are more likely to die by suicide, women are more likely to attempt suicide, a phenomenon known as the "gender paradox" of suicidal behavior. In 2020, Utah recorded 136 female suicide deaths, with an age-adjusted rate of 8.9 per 100,000 women. Suicide also accounted for an estimated 3,339 years of potential female life lost in Utah, demonstrating the significant impact of suicide on women's lives. This pattern shows that looking only at suicide deaths can underestimate the broader burden of suicidal thoughts, attempts, and self-harm experienced by women.

WHY THIS MATTERS

Every suicide represents a profound loss of potential, connection, and contribution. Suicide prevention is about more than responding in moments of crisis; it is about creating communities where women and girls feel connected, supported, valued, and empowered before they reach a breaking point.

MENTAL HEALTH

Mental health challenges play a central role in suicide risk among women. Serious mental illness affects 7% of females compared to 4.2% of males, and approximately 29% of women receive treatment for mental health disorders compared to 17% of men. Biological factors, psychosocial stressors, and hormonal influences may contribute to women's increased vulnerability to certain mental health conditions. As a result, access to appropriate care and support is especially important. Reducing stigma around mental health and improving access to services can help women receive care earlier and reduce suicide risk.

WOMEN'S HEALTH

Girls and women experience unique biological and reproductive factors that can influence suicide risk. Hormonal changes during puberty, menstruation, pregnancy, and menopause can affect mental health. The impact can be especially severe after childbirth, as postpartum psychosis is associated with a sevenfold increase in suicide risk during the first year postpartum. Fertility challenges, miscarriage, stillbirth, and unwanted pregnancies have also been associated with the increased risks of mental health concerns and suicidal behaviors. These findings highlight the need for greater awareness and support during key reproductive and hormonal transitions across a woman's lifespan.

Eating disorders, which are more common among women, are also strongly associated with suicidality. Suicide is the second leading cause of death among individuals with anorexia nervosa, and anorexia is estimated to increase suicide risk by as much as 50-fold. Both anorexia and bulimia have been linked to a greater likelihood of suicide attempts, underscoring the importance of prevention, early intervention, and specialized treatment. Because eating disorders often coexist with depression, anxiety, and other mental health challenges, comprehensive treatment approaches are especially important.

TRAUMA EFFECTS

Abuse, trauma, and intimate partner violence are among the strongest risk factors for suicidal behavior among women. Nearly 13% of Utahns report being sexually abused before age 18, and more than three-fourths of sexual assault victims in Utah were assaulted before their eighteenth birthday. Additionally, 33.6% of Utah women experience intimate partner violence in their lifetime. These experiences can have lasting mental health effects and increase vulnerability to suicidal thoughts and behaviors. Trauma-informed services and early intervention can support healing and help reduce long-term suicide risk.

SOCIAL CONNECTION

Social connection can be a powerful protective factor against suicide, while isolation and exclusion can increase risk. For some women, faith communities and other social networks can provide connection and purpose, while dis-connection may contribute to emotional distress. Strong support systems are especially important for girls and young women as they navigate challenges related to identity, mental health, family, school, and peer relationships.

STRENGTHENING SUPPORT

Suicide is preventable. Addressing suicide among Utah women requires recognizing that many factors associated with suicidal behavior are responsive to intervention. Communities, families, educators, healthcare providers, employers, faith organizations, and policymakers all have a role to play in strengthening protective factors and reducing risk. Prevention efforts are most effective when they prioritize empathy, inclusion, and early identification of individuals who may be struggling.

Women need targeted support. Utah can strengthen its response by expanding awareness of gender-specific risk factors and ensuring prevention programs address women's unique experiences. Increased attention to eating disorders, postpartum mental health, trauma recovery, intimate partner violence, fertility-related challenges, and serious mental illness can help women receive support before reaching a crisis point. Investing in education, evidence-based intervention, and accessible mental health services can help women build resilience and connect with needed resources.

Connection saves lives. Reducing suicide among Utah women and girls requires fostering cultures of belonging and support. Communities that promote social connection, reduce mental health stigma, encourage help-seeking, and create welcoming environments for all women can strengthen protective factors against suicide. By prioritizing acceptance, empowerment, and meaningful support systems, Utah can help more women and girls live healthy, productive, and fulfilling lives.

HELPING UTAH WOMEN

You can help women and girls thrive by fostering connection, support, and a sense of belonging in your family, workplace, school, and community. See below for calls to action and resources to help reduce suicide risk and strengthen well-being for all Utahns.

Data Source: UWLP Snapshot No. 43 (2022)

WHAT YOU CAN DO

- **Learn More**: Explore resources in the UWLP Health Across the Lifespan Resource Kit.
- **Review:** Find goals, perceptions, and community partners on the Health Across the Lifespan Spoke webpage.
- **Get Involved:** Connect to the grassroots initiative, A Bolder Way Forward.
- **Take Action:** Help move the needle and discover additional Calls to Action for individuals, groups, organizations and communities.

If you or someone you know is struggling with mental health or thoughts of suicide, call (801) 587-3000, text 988, or visit SafeUT for 24/7 crisis support.

Attend a "QPR" training to learn how to help save a life from suicide.

Know the warning signs of suicide. Let people know you are concerned, listen attentively and without judgement and offer to help connect them with help.

Learn more at **www.utwomen.org**

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