



Suicide Prevention Overview

Suicide Risk Factors

- Mental health disorders, in particular:
 - Depression or bipolar (manic-depressive) disorder
 - Alcohol or substance use disorder or dependence
 - Schizophrenia
 - Post traumatic stress disorder
 - Borderline or antisocial personality disorder
 - Conduct disorder (in youth)
 - Psychotic disorders and/or symptoms
 - Anxiety disorders
 - Impulsivity and aggression

Suicide Risk Factors

- Previous suicide attempt
- Family history of attempted or completed suicide
- Serious medical condition and/or pain
- The large majority of people with mental health disorders or other suicide risk factors do not engage in suicidal behavior

Environmental Factors

- Some people with major risk factors can be at increased risk due to environmental factors
 - A highly-stressful life event
 - Prolonged stress due to adversities
 - Exposure to another person's suicide, or to graphic or sensationalized accounts of suicide
 - Access to lethal methods of suicide

Factors that Lower Risk

- Receiving effective mental health care
- Positive connections to family, peers, community, and social institutions such as marriage and religion that foster resilience
- Skills and ability to solve problems

Suicide Risk by Gender

- Seventh leading cause of death for males and fifteenth leading cause for females (2007 data)
- Four times as many males as females died by suicide
- Firearms, suffocation and poison were the most common methods of suicide
- Males were more likely to use firearms
- Females were more likely to use poison

Suicide Risk by Gender

- Five times as many males as females ages 15 to 19 died by suicide
- Six times as many males as females ages 20 to 24 died by suicide

Suicide Risk by Age

- Older Americans are disproportionately likely to die by suicide
 - 14.3 of every 100,000 people ages 65 and older died by suicide in 2007 compared to 11.3 in the general population
 - 47 of every 100,000 non-Hispanic white men 85 or older died by suicide

Level of Suicide Risk

- Low: Some suicidal thoughts, no plan; says he or she won't complete suicide
- Moderate: Suicidal thoughts, vague plan not very lethal; says he or she won't complete suicide
- High: Suicidal thoughts, specific lethal plan; says he or she won't complete suicide
- Severe: Suicidal thoughts, specific lethal plan; says he or she will complete suicide

Warning Signs

- Talking about wanting to kill themselves or saying they wish they were dead
- Looking for a way to kill themselves, such as hoarding medicine or buying a gun
- Talking about a specific suicide plan
- Feeling hopeless or having no reason to live
- Feeling trapped or desperate, or needing to escape from an intolerable situation

Warning Signs

- Having the feeling of being a burden to others
- Feeling humiliated
- Having intense anxiety and/or panic attacks
- Losing interest in things, or losing the ability to experience pleasure
- Insomnia
- Acting irritable or agitated

Warning Signs

- Becoming socially isolated and withdrawn from friends, family and others
- Showing rage, or talking about seeking revenge for being victimized or rejected

Common Misconceptions

- People who talk about suicide won't really do it
- Anyone who tries to complete suicide must be “crazy”
- If a person is determined to complete suicide nothing is going to stop them
- People who complete suicide were unwilling to seek help
- Talking about suicide may give someone the idea to act on it

Helping a Suicidal Person

- Mental Health First Aid
 - Assess for risk of suicide or harm
 - Listen nonjudgmentally
 - Give reassurance and information
 - Encourage appropriate professional help
 - Encourage self-help and other support strategies

Helping a Suicidal Person

- Get professional help
- Follow-up on treatment
- Be proactive
- Encourage positive lifestyle changes
- Make a safety plan
- Remove potential means of suicide
- Continue your support over the long haul

When Talking to a Suicidal Person

DO:

- Be yourself
- Listen
- Be sympathetic, non-judgmental, patient, calm and accepting
- Offer hope
- Ask if the person is having thoughts of suicide

When Talking to a Suicidal Person

DO NOT:

- Argue with the suicidal person
- Act shocked, lecture on the value of life, or say that suicide is wrong
- Promise confidentiality
- Offer ways to fix their problems, give advice, or make them justify their suicidal feelings
- Blame yourself

Telephone Resources

Alliance Health Behavioral Health Crisis Line

877-223-4617

24 hours a day, 7 days a week

988 Suicide and Crisis Lifeline

24 hours a day, 7 days a week

Callers have the option to speak with a Peer Support Specialist, someone living in recovery from mental illness and/or substance use disorder