



## PREVENTING SUICIDE

### *A Preventable Public Health Issue*

#### **WHAT IS SUICIDE?**

Suicide occurs when a person ends their life. It is the 11th leading cause of death among Americans, but suicide deaths are only part of the problem. More people survive suicide attempts than actually die. They are often seriously injured and need medical care.

Suicide is recognized as a chronic epidemic. Despite the overwhelming numbers, the tragedy of suicide is hidden by stigma, myth and shame. The stigma surrounding suicide serves to restrict prevention and intervention.

Additionally, many people have the mistaken notion that talking about suicide causes it to happen. Today, experts agree that suicide is preventable.

#### **WHO IS AT RISK**

Suicide does not discriminate based on race, gender or age. However, there is a higher risk of suicide for those who have been diagnosed with a mental illness. In fact, the risk of suicide is increased by more than 50 percent in individuals affected by depression. Studies also show that roughly 90 percent of individuals who die by suicide have one or more mental disorders.

Also, some groups are at higher risk than others. Men are four times more likely than women to die from suicide. However, three times more women than men report attempting suicide. In addition,

suicide rates are higher among young people and those older than age 65.

#### **RISK FACTORS**

Risk factors are characteristics that make it more likely that an individual will consider, attempt, or die by suicide. It is important to note factors identified as increasing risk are not factors causing or predicting a suicide attempt. Risk factors for suicide can include:

- Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders and certain personality disorders
- Alcohol and other substance use disorders
- Hopelessness
- Impulsive and/or aggressive tendencies
- History of trauma or abuse
- Major physical illnesses
- Previous suicide attempt
- Family history of suicide
- Job or financial loss
- Loss of relationship
- Easy access to lethal means
- Local clusters of suicide
- Lack of social support and sense of isolation
- Stigma associated with asking for help
- Lack of health care, especially mental health and substance abuse treatment
- Cultural and religious beliefs, such as the belief that suicide is a noble resolution of a personal dilemma
- Exposure to others who have died by suicide (in real life or via the media and Internet)

## PROTECTIVE FACTORS

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Protective factors are characteristics that make it less likely individuals will consider, attempt, or die by suicide. Examples of protective factors include:

- Effective clinical care for mental, physical and substance use disorders
- Easy access to a variety of clinical interventions
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution and handling problems in a non-violent way
- Cultural and religious beliefs that discourage suicide and support self-preservation

## WARNING SIGNS

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The following signs may mean someone is at risk for suicide. The risk of suicide is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change. If you or someone you know exhibits any of these signs, seek help as soon as possible by calling the National Suicide Prevention Lifeline at [1-800-273-TALK](tel:1-800-273-TALK) (8255).

- Talking about wanting to die or to kill themselves
- Looking for a way to kill themselves, such as searching online or buying a gun
- Talking about feeling hopeless or having no reason to live
- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or isolating themselves
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

## WARNING SIGNS FOR YOUTH

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Suicide may be imminent, particularly if behavior is new or increased and related to anticipated or actual painful event, loss or change. Warning signs include:

- Talking about or making plans for suicide
- Expressing hopelessness about the future
- Displaying severe emotional distress, sadness, or pain
- Showing worrisome behavioral clues or marked changes in behavior, especially:
  - Significant withdrawal from social connections/situations
  - Increased agitation or irritability
  - Anger or hostility that seems out of character or out of context
  - Changes in sleep (increased or decreased).

Individuals often do not seek help because of the stigma associated with asking for help, limited access to treatment, the shame they feel about having these thoughts or no one recognizes their call for help.

## LOOKING FOR HELP

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When a person encounters written, spoken, or other communication of suicide, they should take it seriously. They should be direct to the person in distress and ask questions such as “Are you thinking about killing yourself?” “Are you considering taking your own life?” and “Do you ever feel like things would be better if you were dead?” A person should not judge anyone they believe might be thinking of suicide and should avoid acting shocked if a youth says he or she is considering suicide. In these situations, one should not be sworn to secrecy or make promises that they won’t tell anyone.

Any suspicion that a youth is thinking about suicide should be communicated to a mental health professional or supervisor *immediately*. The person who communicates suspicion to a mental health professional should stay with the youth until assistance arrives. One should *not* leave a suicidal

youth alone while they seek assistance for the youth.

Some behaviors may indicate that a person is at immediate risk for suicide. The following three behaviors are a prompt to immediately call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or a mental health professional, as well as stay with the person while they wait for assistance, upon hearing or seeing a person that is:

- Talking about wanting to hurt or kill themselves
- Looking for ways to kill themselves (such as searching online or seeking access to pills, weapons, or other means)
- Talking about feeling hopeless or having no reason to live

Other behaviors may also indicate a serious risk – especially if the behavior is new, has increased, and/or seems related to a painful event, loss or change:

- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or isolating themselves
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

## **RESOURCES**

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Information about suicide can be obtained from the following organizations:

- **National Action Alliance for Suicide Prevention** - <http://actionallianceforsuicideprevention.org>
- **Suicide Prevention Resource Center**- <http://www.sprc.org>
- **National Suicide Prevention Lifeline** - <http://www.suicidepreventionlifeline.org>; (800) 273-TALK (8255)

- **National Center for Injury Prevention and Control**  
<http://www.cdc.gov/ViolencePrevention/suicide>
- **It Only Takes One** – public awareness campaign for Illinois – [www.itonlytakesone.org](http://www.itonlytakesone.org)

*Information compiled from the following sources:*

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- U.S. Centers for Disease Control and Prevention
- Illinois Department of Public Health
- Illinois Suicide Prevention Strategic Plan
- National Suicide Prevention Lifeline
- Youth consensus meeting on warning signs