



# Alliance

BEHAVIORAL HEALTHCARE

## Suicide Prevention

# Suicide Risk Factors

- Mental Health disorders, in particular:
  - Depression or bipolar (manic-depressive) disorder
  - Alcohol or substance abuse 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



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# 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

# Common Misconceptions

- 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

- National Suicide Prevention Lifeline  
(800) 273-8255

TTY – hearing and speech impaired

(800) 799-4TTY

(800) 799-4889

- Alliance Behavioral Healthcare  
(800) 510-9132