Risk of Suicide

Facts about suicide:

- In 1998, 3,699 Canadians were known to have ended their lives by suicide. Because of the uncertainty and under-reporting of suicide this number is considered low.
- Between 30-70% of people who are known to have committed suicide were identified to have a major depressive disorder.
- Without treatment an estimated 20% of people with mood disorders will end their lives by suicide.
- Suicide accounts for at least 24% of all deaths among 15-24 year olds and 16% among 25-44 year olds.
- Individuals between 15-44 years of age account for 73% of hospital admissions for attempted suicide.
- The mortality rate due to suicide among men is 4 times the rate among women.
- Over 80% of people with a mood disorder improve with treatment.

A greater risk of suicide

Not all people who experience a mood disorder are at increased risk for suicide.

However, there is evidence to suggest that people with depression and bipolar disorder are at considerably higher risk. Those with depression or bipolar disorder, who do consider suicide, are most vulnerable during a depressive episode. The risk of suicide multiplies if the person is also actively using drugs and/or alcohol. A past experience with self-harm is also known to increase the risk.

Surprisingly, it is often after treatment has been started, and recovery is underway, that people may be most vulnerable to acting on suicidal impulses. This may be because medications restores the person’s energy before their mood has had a chance to return to normal. Research also suggests that people may be at greater risk for suicide soon after being discharged from hospital.
**Signs to watch for**

- Voicing thoughts of suicide and having a specific plan.
- Signs of depression.
- Showing changes in behaviour, appearance, or mood.
- Loss of interest in friends, hobbies, and activities of interest.
- Expressions of hopelessness, helplessness, or despair.
- Voicing concerns regarding being a ‘burden’ on others.
- Preparing for death by:
  - Giving away prized personal objects
  - Making a Will,
  - Putting personal affairs in order,
  - Telling others their final wishes.
- There may be a brightening in the person’s mood after the decision to end their life has been made.

**What can you do to help?**

**Listen**

- Stay calm and be willing to listen.
- Allow the person time to talk about their feeling.
- Be accepting - do not judge what they are saying or feeling
- Ask the person if they are feeling suicidal and have a plan.
- Take all threats of suicide seriously.

**Take Action**

- Call the family doctor and let him/her know what is going on.
- In a crisis, take the person to the local Hospital Emergency Department.
- Provide medical staff with information to help them make a good assessment.
- Remove any available means for suicide (e.g. firearms, medications).
- Discourage the use of alcohol or drugs, which can increase depression and impulsivity.
- Reassure them that thoughts of suicide do not need to be acted upon.
- Reassure them that:
  - Feelings do change.
Problems can be solved.
They are not alone and help is available.
You will support them in getting the help they need.
• Ask them to promise not to act on their suicidal thoughts.
• Support the person in getting ongoing professional help for their mood disorder (crisis centre, doctor, psychiatrist, or mental health counsellor).
• Help them find additional supports (self-help group, mental health counsellor, clergy etc.)
• Do not swear secrecy - tell someone who can help!

Talking about suicide isn’t the problem

"I am afraid that if I talk about suicide they might just do it".

Talking about suicide does not make people act on those feeling. In fact, the opposite is true. Having the courage to talk about suicide may be one of the most helpful things you can do. It helps the person recognize the need for help and that you care. Stay supportive. Encourage them to get professional help. But leave counselling to the professionals!

Over time, and with experience, people who struggle with suicidal impulses do learn that these frightening feelings will pass and with treatment the pain of depression does go away. Being a caring and concerned friend or family member is all you can or should try to be.

Factors that protect people from suicide

• Access to appropriate to medical care for mental, physical or substance abuse problems.
• Having family and/or social supports.
• Religious or cultural beliefs, which discourage suicide.
• Having access to a supportive community - such as a self-help group or church.
• Improving skills in problem solving, communication and conflict resolution.
• A sense of humor, personal resilience, a feeling of mastery and hope for the future.

(Visit www.mooddisorderscanada.ca and click on Consumer & Family ~ more information and look for “Building Resilience”)

3
Factors that put people at greater risk for suicide

- A past suicide attempt is one of the strongest predictors of risk.
- The presence of major mental illness such as depression, bipolar disorder.
- Feelings of shame and an unwillingness to get psychiatric help because of stigma.
- Abuse of alcohol or drugs particularly in the presence of a mental illness.
- A pattern of impulsive or aggressive behavior.
- The presence of an additional serious physical illness.
- A family history of suicide or suicide attempts.
- A family history of mental illness or substance abuse.
- Recent crisis or loss (separation or divorce, death of a loved one, job loss, financial worries).
- Social isolation.
- Intense feelings of anger.
- Feeling cut off from other people because of sexual identity, culture or race.

Why do people commit suicide?

Not all people who experience a mood disorder consider suicide. However, for a small number of people, suicide seems like a rationale and reasonable way to end what they feel as unbearable and unending psychological pain. They do not want to die - they just want their pain to end.

Thinking may become clouded by depression. The way they see the world may be changed by illness. They may be consumed by guilty thoughts and/or are obsessed with feelings of failure. All hope is gone. Because of their illness, they may begin to believe that others would be better off without them. No amount of reassurance can alter the way they feel. Suicide seems like the only solution to the problems they are facing.

For a few, psychosis may lead to internal voices that may command self-destruction. When this is happening treatment is essential and hospitalization is the safe and appropriate course of action to take.
For others, coping with suicidal feelings can be a long, ongoing battle. During periods of greater stress, when important relationships are strained, or when there are sudden unexpected losses the balance towards suicidal thinking may tip. Long-term supportive counselling can help to enhance personal resilience and improve one's ability to cope with problems, communicate feelings and develop a supportive social network to provide support during.

**After a suicide attempt, what can I do to help?**

People who truly care may want to pull away after a suicide attempt.

You may feel unsure about what you can do to be helpful. You may feel embarrassed to talk about what has happened. You may also feel angry and resentful about the suicide attempt or be fearful about what the future may hold. There are strong taboos against suicide in our culture. You may hold deep opinions about whether it is “right or wrong.” This can make it difficult to talk about. Here are some suggestions that might help.

**Stay connected and supportive:**

- Visit the person if they are in hospital - in the same way you would if they had a heart attack. Bring flowers, call or send a card. This is a time when you may be needed most.

- Offer your support and be prepared to listen. Let the person talk without offering judgment or advice. Listening is often enough. You do not have to ‘fix’ the problem.

- Recognize that when people are ill they may say or do things that are out of character. Don’t try to argue with them. Accept how they are feeling.

- Reflect genuine interest, concern and a belief they will get better. Offer hope and reassurance for the future.

- Learn more about mood and anxiety disorders. (Visit [www.mooddisorderscanada.ca](http://www.mooddisorderscanada.ca) and click on Consumer & Family ~ Resources). Understand the warning signs of suicide and plan how you can intervene in a helpful manner.
• Make sure that ongoing treatment is in place. Help the person get support to deal with problems they are facing and develop ways to strengthen their supports and community connections.

• Face your own fears and concerns. Get support just for you. This can help you understand what has happened and ways to cope if you are feeling overwhelmed.

• Maintain a balance in your life and look after your own self-care.

**Additional Resources**

*Suicide Information*

*Suicide in Canada Report*

*Rapport sur l'atelier de recherche en matiere de suicide au Canada*