

Fact Sheet



Suicide

What is Suicide?

Suicide is death caused by self-inflicted injury with the intent to die. Suicide is the tenth leading cause of death in the U.S. One person dies by suicide about every 11 minutes. It is the second leading cause of death among people ages 10 to 34.

Suicide in Children and Teenagers

Suicide in children and teenagers can follow stressful life events. What a young person sees as serious and insurmountable may seem minor to an adult — such as problems in school or the loss of a friendship. In some cases, a child or teen may feel suicidal due to certain life circumstances that he or she may not want to talk about, such as:

- Having a psychiatric disorder, including depression
- Loss or conflict with close friends or family members
- History of physical or sexual abuse
- Problems with alcohol or drugs
- Physical or medical issues, for example, becoming pregnant or having a sexually transmitted infection
- Being the victim of bullying
- Being uncertain of sexual orientation
- Reading or hearing an account of suicide or knowing a peer who died by suicide

If you have concerns about a friend or family member, asking about suicidal thoughts and intentions is the best way to identify risk.

Groups of People Who Have Higher Rates of Suicide:

- American Indian/Alaska Native and non-Hispanic White people
- Young people who are lesbian, gay, bisexual, transgender
- Veterans
- Rural dwellers

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What Are The Situations - Risk Factors - That Could Lead Someone to Consider Suicide?

Although you may not know what might cause a friend or loved one to attempt suicide, these are some known factors that increase an individual's risk of suicide:

Individual Factors

- Has attempted suicide in the past
- Has a mental health condition, such as depression and mood disorders, schizophrenia, anxiety disorders
- Has long-term pain or a disabling or terminal illness
- Expresses feelings of hopelessness
- Has money or legal problems
- Has violent or impulsive behavior
- Has alcohol or other substance abuse problems
- Has easy access to self-harm methods, such as firearms or medications

Relationship Factors

- Has a history of physical, emotional or sexual abuse; or neglect or bullying - has lost relationships through break-up, divorce, or death
- Has a family history of death by suicide
- Is socially isolated; lacks support

Community, Cultural, Societal Factors

- Lacks access to healthcare services, especially mental health and substance abuse treatment
- Is ashamed to ask for help, especially help for mental health conditions - holds cultural or religious belief that suicide is a noble option to resolving a personal dilemma
- Has become aware of an increased number of local suicides or an increase in media coverage of deaths by suicide

What Are Some of the Most Common Suicide Warning Signs?

- **Being sad or moody:** The person has long-lasting sadness and mood swings. Depression is a major risk factor for suicide.
- **Sudden calmness:** The person suddenly becomes calm after a period of depression or moodiness.
- **Withdrawing from others:** The person chooses to be alone and avoids friends or social activities. They also lose interest or pleasure in activities they previously enjoyed.

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- **Changes in personality, appearance, sleep pattern:** The person's attitude or behavior changes, such as speaking or moving with unusual speed or slowness. Also, they suddenly become less concerned about their personal appearance. They sleep much more or much less than typical for that person.
- **Showing dangerous or self-harmful behavior:** The person engages in potentially dangerous behavior, such as driving recklessly, having unsafe sex, or increasing their use of drugs and/or alcohol.
- **Experiencing recent trauma or life crisis:** Examples of crises include the death of a loved one or pet, divorce or break-up of a relationship, diagnosis of a major illness, loss of a job or serious financial problems.
- **Being in a state of deep despair:** The person talks about feeling hopeless, having no reason to live, being a burden to others, feeling trapped, or being in severe emotional pain.
- **Making preparations:** The person begins to put their personal business in order. This might include visiting friends and family members, giving away personal possessions, making a will and cleaning up their room or home. Often the person will search online for ways to die or buy a gun. Some people will write a note before attempting suicide.
- **Threatening suicide or talking about wanting to die:** Not everyone who is considering suicide will say so, and not everyone who threatens suicide will follow through with it. However, every threat of suicide should be taken seriously.

It is important to note that suicide is not a normal response to stress. **Suicidal thoughts or actions are a sign of extreme distress and should not be ignored.** If these warning signs apply to you or someone you know, get help as soon as possible, particularly if the behavior is new or has increased recently.

5 Steps You Can Take to Help Someone in Emotional Pain

1. **Ask:** "Are you thinking about killing yourself?" It's not an easy question, but studies show that asking at-risk individuals if they are suicidal does not increase suicides or suicidal thoughts.
2. **Keep them safe:** Reducing a suicidal person's access to highly lethal items or places is an important part of suicide prevention. While this is not always easy, asking if the at-risk person has a plan and removing or disabling the lethal means can make a difference.
3. **Be there:** Listen carefully and learn what the individual is thinking and feeling. Research suggests that acknowledging and talking about suicide may reduce rather than increase suicidal thoughts.
4. **Help them connect:** Save the 988 Suicide & Crisis Lifeline number (call or text 988) and the Crisis Text Line number (741741) in your phone so they're there if you need them. You can also help make a connection with a trusted individual like a family member, friend, spiritual advisor, or mental health professional.

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5. **Stay connected:** Staying in touch after a crisis or after being discharged from care can make a difference. Studies have shown the number of suicide deaths goes down when someone follows up with the at-risk person.

Treatments and Therapies

Brief Interventions

- Safety Planning: Personalized safety planning has been shown to help reduce suicidal thoughts and actions. Patients work with a caregiver to develop a plan that describes ways to limit access to lethal means such as firearms, pills, or poisons. The plan also lists coping strategies and people and resources that can help in a crisis.
- Follow-up phone calls: When at-risk patients receive further screening, a Safety Plan intervention, and a series of supportive phone calls, their risk of suicide goes down.
- Psychotherapies such as Cognitive Behavioral Therapy (CBT) and Dialectical Behavioral Therapy (DBT) have been effective forms of treatment.
- Prescription medications can also be beneficial for some individuals. All treatments and therapies require a healthcare provider to work with the person in need.

Toolkit

- 988 Suicide & Crisis Lifeline
- https://988lifeline.org/?utm_source=google&utm_medium=web&utm_campaign=onebox
<https://www.cdc.gov/suicide/index.html>

Research and Resources

- <https://my.clevelandclinic.org/health/articles/11352-recognizing-suicidal-behavior>
<https://www.mayoclinic.org/diseases-conditions/suicide/symptoms-causes/syc-20378048>
<https://www.nimh.nih.gov/health/topics/suicide-prevention>
- <https://www.webmd.com/depression/guide/depression-recognizing-signs-of-suicide>

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