

## 8.5: Suicide Prevention

### If You Know Someone in Crisis

Call the toll-free [National Suicide Prevention Lifeline](https://www.suicidepreventionlifeline.org) at **1-800-273-TALK (8255)**, 24 hours a day, 7 days a week. The service is available to everyone. The deaf and hard of hearing can contact the Lifeline via TTY at 1-800-799-4889. All calls are confidential.



### Introduction

Suicide is a major public health concern. Over 40,000 people die by suicide each year in the United States. Suicide is complicated and tragic but it is often preventable. Knowing the warning signs for suicide and how to get help can help save lives.

### Signs and Symptoms

The behaviors listed below may be signs that someone is thinking about suicide:

- Talking about wanting to die or wanting to kill themselves
- Talking about feeling empty, hopeless, or having no reason to live
- Making a plan or looking for a way to kill themselves, such as searching online, stockpiling pills, or buying a gun
- Talking about great guilt or shame
- Talking about feeling trapped or feeling that there are no solutions
- Feeling unbearable pain (emotional pain or physical pain)
- Talking about being a burden to others
- Using alcohol or drugs more often
- Acting anxious or agitated
- Withdrawing from family and friends
- Changing eating and/or sleeping habits
- Showing rage or talking about seeking revenge
- Taking great risks that could lead to death, such as driving extremely fast
- Talking or thinking about death often
- Displaying extreme mood swings, suddenly changing from very sad to very calm or happy
- Giving away important possessions
- Saying goodbye to friends and family
- Putting affairs in order, making a will

### Risk Factors

Suicide does not discriminate. People of all genders, ages, and ethnicities can be at risk. Suicidal behavior is complex and there is no single cause. In fact, many different factors contribute to someone making a suicide attempt. But people most at risk tend to share certain characteristics. The main risk factors for suicide are:

- Depression, other mental disorders, or substance abuse disorder
- Certain medical conditions
- Chronic pain
- A prior suicide attempt
- Family history of a mental disorder or substance abuse
- Family history of suicide
- Family violence, including physical or sexual abuse
- Having guns or other firearms in the home
- Having recently been released from prison or jail
- Being exposed to others' suicidal behavior, such as that of family members, peers, or celebrities

Many people have some of these risk factors but do not attempt suicide. It is important to note that suicide is not a normal response to stress. **Suicidal thoughts or actions are a sign of extreme distress, not a harmless bid for attention, and should not be ignored.**

### Do gender and age affect suicide risk?

Men are more likely to die by suicide than women, but women are more likely to *attempt* suicide. Men are more likely to use deadlier methods, such as firearms or suffocation. Women are more likely than men to attempt suicide by poisoning. The most recent figures released by the CDC show that the highest rate of suicide deaths among women is found between ages 45 and 64, while the highest rate for men occurs at ages 75+. Children and young adults also are at risk for suicide. Suicide is the second leading cause of death for young people ages 15 to 34.

### What about different racial/ethnic groups?

The CDC reports that among racial and ethnic groups, American Indians and Alaska Natives tend to have the highest rate of suicides, followed by non-Hispanic Whites. African Americans tend to have the lowest suicide rate, while Hispanics tend to have the second lowest rate.

## 5 Action Steps for Helping 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. Findings suggest acknowledging and talking about suicide may in fact reduce rather than increase suicidal thoughts.
4. **Help them connect:** Save the National Suicide Prevention Lifeline’s number in your phone so it’s there when you need it: 1-800-8255 (TALK). You can also help make a connection with a trusted individual like a family member, friend, spiritual advisor, or mental health professional.
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

Research has shown that there are multiple risk factors for suicide and that these factors may vary with age, gender, physical and mental well-being, and with individual experiences. Treatments and therapies for people with suicidal thoughts or actions will vary as well. NIMH has focused research on strategies that have worked well for mental health conditions related to suicide such as depression and anxiety.

### Psychotherapies

Multiple types of psychosocial interventions have been found to be beneficial for individuals who have attempted suicide. These types of interventions may prevent someone from making another attempt. Psychotherapy, or “talk therapy,” is one type of psychosocial intervention and can effectively reduce suicide risk.

One type of psychotherapy is called cognitive behavioral therapy (CBT). CBT can help people learn new ways of dealing with stressful experiences through training. CBT helps individuals recognize their own thought patterns and consider alternative actions when thoughts of suicide arise.

Another type of psychotherapy, called dialectical behavior therapy (DBT), has been shown to reduce the rate of suicide among people with borderline personality disorder, a serious mental illness characterized by unstable moods, relationships, self-image, and behavior. A therapist trained in DBT helps a person recognize when his or her feelings or actions are disruptive or unhealthy, and teaches the skills needed to deal better with upsetting situations.

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