



The Salvation Army

Suicide Harm Reduction Information



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Introduction

Suicide is a hard word to hear and a difficult conversation to have but that's exactly why we need to talk about it.



Suicide is the act of harming yourself with the intent to end life.

The reasons that people attempt suicide are complex and multi-faceted. To acknowledge that's how we feel, or others close to us and around us may be feeling is hard to contemplate. However, in this contemplation is the acknowledgement that suicide involves severe emotional or physical pain to the point that a person finds it unbearable. This is a conversation that we need to have; we need to break the silence.



It can be difficult for people to understand why someone would want to harm themselves, but suicide is one of the leading causes of death in the UK and Ireland.

This information will support our understanding of the reasons why a person might consider suicide, the link between mental health and suicide, and the role of suicidal thoughts.

In a separate document we also have some tools to help someone who is contemplating suicide and have some resources available that may help us offer relief and connection so that we help to reduce harm.



Why do people consider suicide?

There are so many potential reasons that a person may consider suicide. Quite often, it is the result of long-term difficulties with the thoughts we are having, the way we feel, or experiences that we have that we feel we cannot bear any longer.

Among other things, a person contemplating suicide may feel:

- sadness or grief
- a strong sense of shame
- feeling worthless
- intense feelings of guilt
- that they are a burden to others
- that they have no worth or value
- that life is not worth living
- that they are trapped, either physically or emotionally
- that things will never get better
- intense physical or emotional pain



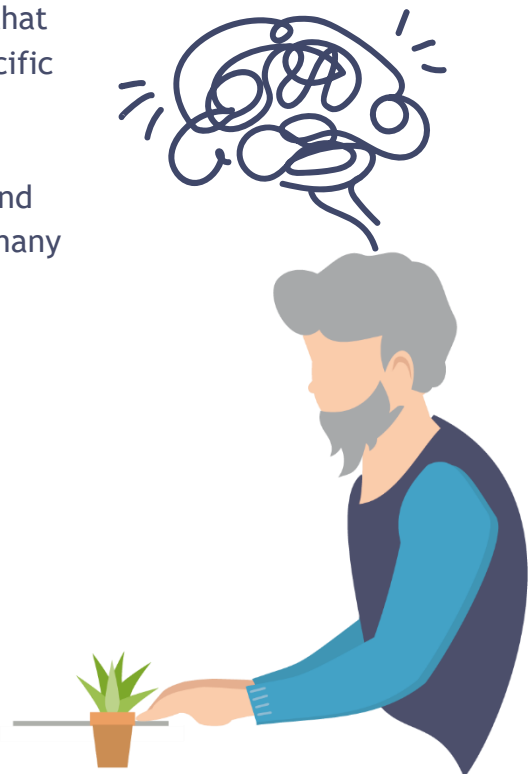
There are so many factors can contribute to a person feeling this way. It's vital that we don't talk about suicide and the feelings that surround it in a way that induces shame and secrecy.

If this is how you are feeling, it's vital to know - this doesn't mean that there is something wrong with you. Things have happened to you, and there are so many things that are strong with you.

MIND list the following examples of scenarios that may lead to suicide:

- the loss of a loved one
- bullying, discrimination, or abuse
- the end of a relationship
- a major change in life circumstances, such as divorce, unemployment, retirement, or homelessness
- receiving a diagnosis of a life changing illness
- problems with money
- being in prison
- pregnancy or pregnancy loss
- expressing sexual or gender identity in an environment that is not accepting of this
- certain cultural practices, such as forced marriage
- surviving a traumatic event

However, it's important that we acknowledge that suicide does not always occur because of a specific incident or life event, and not everyone who experiences these events will consider suicide. People respond to adversity in different ways and this ability to respond can be influenced in so many ways and vary from day to day.



What are the risk factors?

Part of what makes suicide so complicated is that no sole factor can predict with high accuracy who will actually die by suicide. However, recognising possible signs of suicidal thoughts and being open to talking about suicidal ideation can help us better understand the risk.



It is important to know that dying by suicide is not caused by weakness, a personality flaw, or selfishness. These are stigmatised explanations of why suicide happens and can discourage people who are experiencing suicidal thoughts from asking for help.



Research tells us that suicide is more prevalent among certain groups. These include:

- people who are male
- people experiencing homelessness
- people struggling with mental health or substance use
- people who have a family history of suicide
- people who have experienced family violence or abuse, such as physical, sexual, or psychological abuse
- people who are in prison
- people who have a severe or chronic illness

This list represents those people at the highest risk, but this does not mean that people not on this list are not also at risk. Males are more likely to die by suicide than females. However, females are more likely to attempt suicide. Attempted suicide occurs when a person tries to end their life but does not die as a result of their actions.



Suicide and mental health

Having a mental illness can increase the risk of dying by suicide, but the relationship between the two isn't always that simple. To understand the connection between mental illness and suicide, it can be helpful to look at how mental illness affects someone's quality of life.

Some ways that mental illness can contribute to suicide include:

- unequal access to mental health care and treatment
- lack of social support or feeling like you don't have anybody to go to
- feeling isolated, lonely, or misunderstood
- difficulty maintaining relationships
- decreased quality of life due to increased stress, (e.g. being unable to maintain a job)
- increased impulsivity, which may occur in those with borderline personality disorder



Some mental health conditions, like depression and substance use disorder, are most commonly associated with suicide. However, other conditions like anxiety disorders, eating disorders, and personality disorders may also increase suicide risk. Living with mental ill health is a significant risk factor for suicide.

Some examples of conditions that may contribute to suicidal thoughts or intent include:

- substance use
- depression
- borderline personality disorder
- anxiety-based disorders
- psychosis

What is important to note is that although mental health conditions can increase the risk of suicide, they are also very common. Additionally, according to the U.K. charity [Samaritans](#), not everyone who considers suicide has a diagnosed mental health condition.

Social isolation, a lack of support, and untreated or mistreated mental health conditions place people at higher risk of suicide, while having appropriate access to healthcare and support lowers this risk.



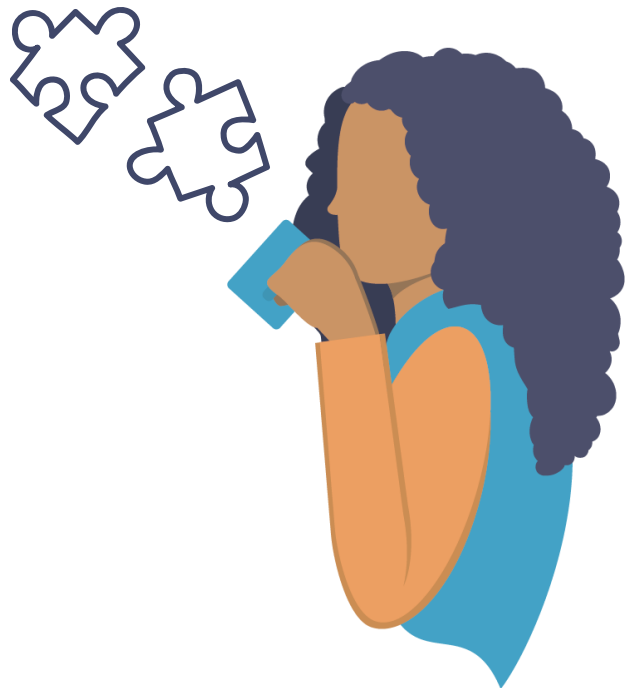
History of trauma

Experiencing trauma can significantly affect you at any age. However, childhood trauma is one of the more significant long-term risk factors for suicide. Some examples of childhood trauma include emotional neglect, physical abuse, losing a parent, sexual assault, and bullying.



Unfortunately, these risk factors are accumulative, meaning the more traumatic life events you experience, the higher your risk of attempting suicide.

Trauma can impact us long into our adult years, causing challenges like post-traumatic stress disorder (PTSD), depression, low self-esteem, shame, isolation, and attachment issues that can make it hard to maintain relationships.



Identity

Gender, race, sexual orientation, and age all impact suicide risk. While women attempt suicide more often than men, men die by suicide at higher rates.



Across all genders, most suicides occur between the ages of 35 and 44, although age-related risks differ across ethnicity.

Certain marginalised communities, like people in the LGBTQ+ community, have a higher risk for suicide. Studies show that up to 43% of transgender people have reported attempting suicide. It's important to note that being transgender is not a suicide risk factor. Trans people often experience discrimination, bullying, and stigma—all of which can increase suicide risk.



People with disabilities are at-risk for suicide as well. One survey found people with disabilities are three times more likely to report suicidal ideation compared to people without disabilities.



Veterans, people who live in rural areas, and excluded communities are also disproportionately impacted by suicide. Suicide does not discriminate when it comes to identity, but the trauma exposure, stress, discrimination, and societal challenges that certain groups face may put them more at risk.



What are the warning signs that someone may be considering ending their life?

Some people exhibit warning signs (these are often termed **invitations** – although often subconscious) that they are considering suicide. It is important to take notice if someone is:

- talking about wanting to die
- sudden recklessness
- sudden increase in risk taking behaviour
- speaking about feeling empty or despondent
- talking about feeling trapped, feeling hopeless, or being in unbearable pain
- talking about being a burden to others
- planning or looking for ways to harm themselves, stocking up on medications, or searching online
- withdrawing from family and friends
- using drugs and alcohol more often
- getting rid of significant belongings
- eating or sleeping more or less than normal
- acting in an anxious, agitated, or reckless manner
- experiencing severe mood shifts



However, not everybody exhibits these warning signs when they are considering suicide. The best way to find out for certain whether or not someone is considering suicide is to talk to them.

Talking about suicide

Some people believe that talking about suicide can cause others to experience suicidal thoughts. However, research has shown this is not true. In fact, it may even decrease the risk by allowing people to share any thoughts and feelings that they are struggling with.

Although talking to someone about their thoughts of suicide may feel intrusive, it could save their life. Some examples of ways to start a conversation include:

- “How have you been feeling?”
- “Do you ever feel so bad you think about suicide?”
- “Have you been having suicidal thoughts?”

Samaritans recommend listening to what the person has to say without judgment, using a technique known as active listening. This involves:

- focusing on the other person, with no distractions
- asking open-ended questions
- giving someone time to articulate what they want to say
- repeating things back to them, to show understanding

Does having suicidal thoughts mean that someone will kill themselves?

Experiencing suicidal thoughts does not always mean that a person will kill themselves. Samaritans state that around 1 in 5 people think about suicide at some point in their lives. Often, this is in response to a temporary feeling or situation.



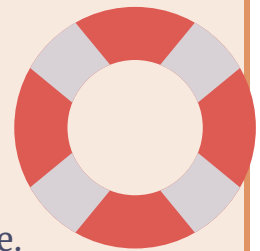
In many cases, people who experience thoughts about suicide do not act on them. However, if a person has suicidal intent, it means that they have made a decision and intend to act on these thoughts.



This is an important distinction to make, as having suicidal intent indicates that someone needs immediate help. You can help by:

- **asking the question:** Ask the person if they have a plan to end their life. If so, ask them how and when they plan to do it.
- **calling for help:** If a person is in immediate danger, call 999, or contact the local Crisis Team.
- **taking their reasons seriously:** While talking to the person, do not try to convince them that their problems are not that bad. Instead, listen to them, acknowledge how they feel, and reassure them that it is possible to get help.
- **not keeping their plan a secret:** Although trust is important, keeping a person's planned method of suicide a secret can put their life at risk. It is essential to let colleagues, managers, professionals or caregivers know how they intend to end their life, so that they can share the support.

People who consider suicide do not always want to die. Often, people consider suicide because they feel hopeless and cannot think of a way out of their current situation. Intervention can help a person regain a sense of hope or show them another perspective.



Suicide prevention

If you know someone at immediate risk of suicide:

**Ask the question:
“Are you considering suicide?”**



Listen to the person without judgment.



**Call 999 or communicate with
the crisis team**



**Stay with the person until help
arrives, if it is safe to do so.**



**Ask them if they would like you to remove
any medications, or other potentially harmful
objects. Do not do this
without consent.**



What if they are doing it for attention?

It is a common misconception that people who talk about or attempt suicide do so for attention and, therefore, do not need help. Any suicidal thoughts or behaviours indicate severe distress. As a result, it is important to take them seriously.

Even if a person does not intend to kill themselves, talking about suicide or acting in a self-destructive manner can indicate that they need support.



Protective factors

A range of protective factors can help people build resilience and nurture hope. These are personal and environmental measures that can help individuals who are at a higher risk of suicidal behaviour.

- acceptance and connection
- support without condition
- developing or maintaining positive relationships with friends, family, and community members
- boosting self-respect and developing a sense of purpose or self-motivation to reduce feeling low. Stress and depression can be overwhelming for a person.
- **socializing:** Staying in touch with people can improve mood. It also means that there are people there to talk to when a person is feeling low.
- **being active:** Exercise can improve mood. If a person is not used to exercising, they can try gentle walks.
- **limiting alcohol intake:** People may use alcohol as a way to cope with their emotions. However, alcohol may amplify feelings of depression.
- **having a routine:** Not having a routine can affect eating and sleeping patterns.
- **seeking help:** Many support groups, therapists, psychiatrists, and counsellors are available to provide help.

Language and stigma

The language we use when we talk about suicide matters.

For example, despite its common usage, experts now advise against using the phrase "committed suicide." Instead, we should use the more neutral phrases, "died by suicide" or "took their own life." Saying someone "committed" suicide stigmatises the act of dying by suicide and makes it sound as if someone committed a crime.



Similarly, it's important to avoid framing someone's suicide attempt as "successful" or "unsuccessful." Surviving a suicide attempt is not a failure and dying by suicide is not a success. Instead, you can simply state if the person died or survived after a suicide attempt.



Most of all don't panic

Suicidal thoughts can exist on a spectrum. Having a person open up about their suicidal thoughts doesn't always mean they are in immediate danger. Ask if they have a suicide plan or access to items they may use to harm themselves.

This information can help you understand their level of risk.

Remember: Asking someone about their suicidal thoughts will not increase their risk of suicide, **so don't be afraid to ask directly.**



Simply sitting with someone in their pain can be powerful. You likely won't be able to solve all the factors contributing to their suicidal thoughts in one conversation, but don't dismiss the power of listening. Often, feeling connected to someone or something can temporarily heal feelings of hopelessness and help reduce suicidal thoughts.

We also have some tools available in a separate document that you might find helpful.

