



## **Suicide: when life itself hangs in the balance**

According to World Health Organization (WHO) estimates, in the year 2000, nearly one million people worldwide died by suicide. Suicide attempts were ten to twenty times that number. This translates to, on average, one suicide death every 40 seconds and one suicide attempt every 3 seconds. This sad observation extends to Canada where, for certain age groups, there are more deaths by suicide than road accident deaths.

### **What you don't know can kill you**

Suicide prevention has become a health priority in Canada, and especially in Quebec, which has one of the highest suicide rates in the world. The first step, for everyone, is to learn and raise awareness about effective suicide prevention strategies: recognizing signs of distress, talking about them, and getting involved.

Sometimes, family members, close friends, or health professionals may be able to pick up on warning signs and take immediate and appropriate action; for instance, if they notice repeated expressions of helplessness or worthlessness such as "I'm worthless", "I'm in the way", "I'd be better off dead", or a desire to be left alone, depressive thoughts, or changes in behaviour (loss of interest in personal care or appearance, irritability or changes in eating habits). Other suicidal tendencies include sudden mood swings from anxiety to cheerfulness, giving away prized possessions, or talking about going away. It is worth pointing out that the majority of victims are men, especially those in the 16–29 and 40–44 age groups, and young homosexuals.

In some cases, there may be no obvious signs that someone has suicidal thoughts, and since each case is different, it's wise to avoid passing judgement on a suicide victim's circle of friends and family for not listening or paying attention. Human relationships can be complicated!

### **The triggers**

While there is no single factor that will automatically lead a person to contemplate suicide, there are contributing factors that could trigger the event. In addition to

personality traits, past experiences, and lack of support during a difficult period, the following events or behaviours may have an influence: physical or mental illness; job loss or unemployment; isolation, lack of support; social isolation/marginalization, rejection (e.g. sexual orientation); family conflict; divorce, break-up; failure; depression; death of a loved one; or alcohol, drug or gambling addiction.

### **You can make a difference**

Are you worried about someone you care about? Then approach that person with total honesty, which is still the best policy. Talking openly about suicidal thoughts won't make the person more suicidal, or put ideas into their head, but can save a life. The following questions will help you assess the immediate risk for suicide: How? Where? When? Be direct and ask if he or she has a suicide plan. You want to find out whether the method, date and location have already been chosen. If the person answers all these questions, you must get help fast. If the answers are unclear, be aware that it's perfectly normal to worry and to want to intervene. Ask the person's friends or family to help if for some reason you're unable to, encourage the person to see a doctor or mental health professional, give the number of a local crisis or suicide line, or call 911 if the person needs emergency assistance.

Whether you're the person who is depressed, discouraged, or drained, or you know someone who fits the description, make sure you get the help you or that person needs. If you feel overwhelmed by the situation, Health *InSight* Support Services can provide the professional support and guidance you need.

When life hangs in the balance, there is always a lifeline.

24/7 support available: 1 877 480-2240

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