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# Suicide

Thousands of people in the UK end their lives by suicide each year.

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Every year, around 800 000 people die by suicide globally.<sup>1</sup> In the UK in 2018, there were 6,507 deaths by suicide (a rate of 11.2 deaths per 100,000 people).<sup>2</sup>

Rates vary across the nations of Great Britain, with the highest rate in 2018 observed in Scotland (16.1 deaths per 100,000 people), followed by Wales (12.8 deaths per 100,000 people) and England (10.3 deaths per 100,000 people). Overall, men accounted for three-quarters of UK deaths by suicide in 2018.<sup>2</sup>

Suicide and suicide attempts can have lasting effects on individuals and their social networks and communities. The causes of suicide are many, and it is important to understand the psychological processes that underlie suicidal thoughts, and the factors that can lead to feelings of hopelessness or despair.<sup>3</sup>

In recognition of this, the 2019 theme for [World Mental Health Day](#) (as set by the World Federation for Mental Health) is "Mental Health Promotion and Suicide Prevention".

## Risk factors

Suicide behaviours are complex, there is no single explanation of why people die by suicide. Social, psychological, and cultural factors can all interact to lead a person to suicidal thoughts or behaviour. For many people, an attempt may occur after a long period of suicidal thoughts or feelings, while in other cases, it may be more impulsive.

Several risk factors commonly act together to increase vulnerability to suicidal behaviour. The World Health Organisation has classified these into the different groups below<sup>4</sup>

### Societal

- difficulties accessing or receiving care
- access to means of suicide
- inappropriate media reporting
- stigma associated with mental health, substance abuse or suicidal behaviour which prevents people from seeking help

### Community

- poverty
- experiences of trauma or abuse
- experiences of disaster, war, or conflict
- experiences of discrimination

### Relationships

- isolation and lack of social support
- relationship breakdown
- loss or conflict

### Individual

- previous suicide attempts
- self-harm behaviours
- mental ill-health
- drug and alcohol misuse
- financial loss
- chronic pain
- family history of suicide

## Protective factors

Protective factors are those that can help to reduce vulnerability to suicidal behaviour. The consideration of how best to support and enhance people's access to protective factors is an important part of preventing suicide. Some examples of protective factors include:<sup>4-5</sup>

### Societal

- the ability to easily access effective mental health support and treatment when needed

### Community

- being in full-time employment
- having supportive school environments for children and young people

### Relationships

- having strong and supportive social connections (such as positive relationships with family, friends, partners etc.)

### Individual

- problem-solving skills and coping skills that help people to manage in difficult circumstances
- feeling hopeful or optimistic toward the future even in times of stress

## Suicide, mental health and self-harm

People with a diagnosed mental health problem have been found to be at a higher risk of suicidal thoughts and behaviour.<sup>6-8</sup> Self-harm behaviour has also been found to be a risk factor. While many people who engage in self-harming behaviour do not wish to die, there is research to suggest that individuals who self-harm are at an increased risk of attempting or completing suicide<sup>9-10</sup>

## Suicide prevention

A whole-system approach is needed for suicide prevention and work can be done at each of the "[levels of prevention](#)" to address the risk and protective factors for suicide.<sup>1</sup> Local government, primary care, health and criminal justice services, voluntary organisations and local people affected by suicide all have a role to play. Suicide prevention can also be part of larger projects that address the wider determinants of health and wellbeing (i.e. the ways in which our environment and society can affect our health).

The National Suicide Prevention Strategy for England has identified several areas for action for suicide prevention.<sup>11-12</sup> These include:

- 1 Reducing risk of suicide in high-risk groups (such as young men, people with a history of self-harm, people in contact with the criminal justice system)
- 2 Improving mental health for all and using tailored approaches to mental health support to help reach specific groups (such as children and young people, minority ethnic groups, the LGBT+ community and people with chronic health conditions)
- 3 Reducing access to means of suicide
- 4 Providing better information and support for those bereaved or affected by suicide
- 5 Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour
- 6 Supporting more research, data collection and monitoring

Each of us can help by paying attention to the wellbeing of people in our community such as friends, colleagues, and indeed anyone who you may be worried about. A simple 'how are you' can open the conversation. Listening and being open and understanding can help those at risk by letting them know it is okay for them to share.

The isolation often felt by those experiencing suicidal thoughts or recovering from a suicide attempt can be reinforced by judgement or stigma in which their behaviour is viewed as manipulative or selfish. Showing care and respect for the people behind the behaviour, can help people to share their feelings and access the support they need.<sup>13</sup>

It can often feel difficult to start these conversations. Samaritans has tips on [how to be a good listener](#).<sup>14</sup> Further information on ways to support someone with suicidal thoughts is available from [Rethink Mental Illness](#).<sup>15</sup>

## Help and support

**If you have seriously harmed yourself, or you don't feel that you can keep yourself safe right now seek immediate help by calling 999, or going straight to A&E.**

If you are experiencing suicidal thoughts and need support, you can:

- **Call your GP** and ask for an emergency appointment
- **Call NHS 111** (England) or **NHS Direct** (Wales) for out-of-hours to help
- **Contact your mental health crisis team** if you have one
- **Phone a free helpline** such as:

- 1 [Samaritans](#) offer a 24-hours a day, 7 days a week support service. Call them FREE on 116 123. You can also email [jo@samaritans.org](mailto:jo@samaritans.org)
- 2 [CALM](#) (Campaign Against Living Miserably) have a helpline (5pm – midnight) and webchat to support men
- 3 [Papyrus](#) is a dedicated service for young people up to the age of 35 who are worried about how they are feeling or a novice concerned about a young person. You can call the HOPElineUK number on 0800 068 4141, you can text 07786 209697 or email [pat@papyrus-uk.org](mailto:pat@papyrus-uk.org)

## Further information and resources

- [Rethink](#) information page on [suicidal thoughts](#)
- [Mind](#) information page on [suicidal thoughts](#)
- [Support After Suicide Partnership](#) offers practical and emotional support for people bereaved or affected by suicide
- [Samaritans](#) directory of organisations that provide advice or specialist support for a range of issues, including bereavement, debt, relationships etc.

## + References

- 1 [Share on Facebook](#)
- 2 [Share on Twitter](#)
- 3 [Share on LinkedIn](#)
- 4 [Share by E-Mail](#)

## RELATED CONTENT

Suicide

## HELPFUL SITES

- [Samaritans](#)
- [PAPYRUS – Prevention of Young Suicide](#)
- [The International Association for Suicide Prevention \(IASP\)](#)
- [Myths about suicide](#)
- [Maytree](#)

**Do you need urgent help?**

If your mental or emotional state quickly gets worse, or you're worried about someone you know - **help is available**.

You're not alone; talk to someone you trust. Sharing a problem is often the first step to recovery.

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