

# World Suicide Prevention Day

September 10<sup>th</sup> 2017



*Take a minute, change a life*

Facts and Figures



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International Association for Suicide Prevention

September 10, 2017

# World Suicide Prevention Day



Take a minute, change a life.



**800,000** people die by suicide annually,  
representing 1 person every 40 seconds





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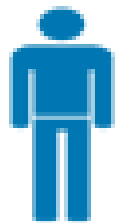
# World Suicide Prevention Day



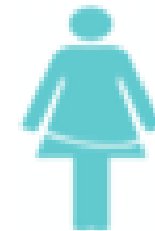
Take a minute, change a life.



- Suicide is the **15th leading cause of death** globally, account for 1.4% of all deaths and
- The global suicide rate is **11.4** per 100 000 population



15.0/100 000 for males



8.0/100 000 for females



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- Suicide is the leading cause of death in **people aged 15-24** in many European countries
- Globally suicide rates among this age group are **higher in males** than females
- Self-harm largely occurs among older adolescents, and globally is the **2nd leading cause of death for older adolescent girls**



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- In 2012, **76%** of global suicide occurred in low- and middle-income countries 39% of which occurred in the South-East Asia Region





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- In **25 countries** (within WHO member states) suicide is currently still criminalized
- In an additional **20 countries** suicide attempters may be punished with jail sentences, according to Sharia law





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- Suicide is the result of a **convergence of risk factors** including but not limited to genetic, psychological, social and cultural risk factors, sometimes combined with experiences of trauma and loss





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- **Depression** is the most common psychiatric disorder in people who die by suicide
- **50%** of individuals in high income countries who die by suicide have major depressive disorder at their time of death







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- For every 1 suicide **25** people make a suicide attempt





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- **60 people** are affected by each suicide death
- This equates to **48 million** people bereaved by suicide worldwide every year





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Relatives and close friends of people who die by suicide are a **high-risk group** for suicide, due to:

- The psychological trauma of a suicide loss
- Potential shared familial and environmental risk
- Suicide contagion through the process of social modelling, and
- The burden of stigma associated with this loss



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Suicide prevention strategies aim to prevent suicide among targeted high-risk groups but also at a universal level

Effective suicide prevention strategies need to incorporate public health policy strategies and healthcare strategies, incorporating measure with the **strongest evidence of efficacy** such as:

- Restriction of access to lethal means
- Treatment of depression
- Ensuring chain of care, and
- School-based universal prevention





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Suicide prevention programmes face ongoing challenges including:

- Insufficient resources
- Ineffective coordination
- Limited access to surveillance data on suicide and self-harm
- Lack of enforced guidelines
- Lack of independent and systematic evaluation



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- Since the 2014 WHO Global Report Preventing Suicide, **progress in suicide prevention is ongoing**, particularly in countries where no suicide initiatives were active, such as Guyana, Suriname and Bhutan
- Many countries have initiated their 2nd national suicide prevention programme, including: Scotland, England, Ireland and the United States





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Take a minute, change a life.



- This World Suicide Prevention Day and everyday **take a minute** to reach out to someone - a complete stranger, close family member or friend - this can **change a life**





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## *The importance of community*

- We are all part of a community, linked to family, friends, work colleagues, neighbours or teams.
- Sometimes we become isolated and disconnected from our communities.
- We have the responsibility to support and empower those who become vulnerable in our communities.







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## *Reaching out to those in the community*

- If you are worried about someone in your community reach out and ask them **“are you okay?”**
- By simply checking in with them and offering non-judgemental support you can make a difference.





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## *Empowering our community*

- Encourage those in distress to tell their own story in their way and at their pace.
- By engaging in active listening and reaching out to those who are vulnerable in the community together we can build resilient and strong communities





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## *No one has all of the answers*

- People are often reluctant to intervene when they are worried for others.
- They may not feel knowledgeable enough or may not feel like the right person.
- It is important to know that people in distress are often not looking for specific advice, but merely to be listened to with compassion and empathy.





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## *Learn from people who reach out*

- People with lived experience of suicidal behaviour or suicide bereavement have a lot to teach us.
- By listening to these often inspiring individuals we are learning and they may become empowered to seek help.



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Join us on social media

Connect with us on Facebook and Twitter to share your support of WSPD

Light a candle



Light a candle near a window at 8pm to show your support for suicide prevention



Cycle around the globe

Join us in cycling to show that we are connected in our aim to prevent suicide



Get involved in an event

Take part in or organise a local or national event to highlight suicide prevention



To find out more visit our WSPD webpage at:

<https://iasp.info/wspd2017/>



*Take a minute, change a life*

## References:

WHO, 2014; Mishara & Weisstub 2016; Arsenault-Lapierre *et al.*, 2004; Cavanagh *et al.*, 2003; Pitman *et al.*, 2016; Zalsman *et al.*, 2017

Find out more at [iasp.info/wspd2017/](https://iasp.info/wspd2017/)