

Center for Behavioral Health Studies

Commonly Asked Questions About Suicide

A Major Social Problem

As many as one in six people will become seriously suicidal at some point in their life. Suicidal thinking is typically associated with an underlying mental illness. Most often it is linked with clinical depression, anxiety disorders, chemical dependency, and other disorders which produce profound emotional distress and interfere with effective problem-solving.

The good news is that there are many effective treatments available to address mental illness, and the majority of people who receive appropriate treatment improve or recover. While suicide is a complex behavior, early recognition and treatment of underlying mental illness can reduce the risk for suicide.

What Causes a Person to Commit Suicide?

Among the immediate motives for suicide are despair, hopelessness, illness, humiliation, loss of employment, loss of a relationship, death in the family, guilt, or psychotic delusions. It is estimated that 90-95% of suicides involve depression and other brain disorders. Many high risk factors can lead a person to commit suicide:

Depression—Between 30% and 70% of suicide victims suffered from major depression or bipolar disorder.

Substance Abuse—An estimated 50% of suicides involve substance abuse. The rate of suicide in alcoholics is 3 to 4 times the average, and for narcotics users it is 5 times the average. Often, depression is also a factor in these cases.

Schizophrenia—One-third of people with schizophrenia attempt suicide and 5-10% eventually succeed. The majority of people

with schizophrenia who are suicidal are young, unemployed males with no families. They are usually isolated and may also have substance abuse problems. Additionally, suicidal behavior may result from hallucinations or delusions which are symptoms of schizophrenia.

Adolescence—Young people (age 15-24) account for 20% of male suicides and 14% of female suicides. Suicide attempts are among the leading causes of hospital admissions in people under 35. Elderly white males have the highest suicide rate of any other group. An estimated 40% of all suicide victims are people over 60. This may be an increasing problem as baby boomers become older.



What are the Warning Signs?

- Previous suicide attempts
- Depression or bipolar disorder
- Substance abuse
- Talk of death or interest in death
- Verbal cues such as "You'd be better off without me" or "Maybe I won't be around anymore..."
- Having a specific plan on how to commit suicide
- Expressions of hopelessness or helplessness

Preventing Suicide/Crisis Intervention

In order to prevent suicide, the underlying mental illness must be treated. Therefore, it is critical for someone displaying the warning signs listed above to get help from a mental health professional.



Most suicidal people try to seek help in some way. For instance, while many people won't ask for help directly, the majority will reveal their suicidal thoughts when asked.

If a Friend or Relative is Suicidal

- Trust your instincts and believe that the person may attempt suicide and take that threat seriously.
- Talk with the person about your concerns and show you care and want to help.

- Ask direct questions. The more detailed their plan, the greater the immediate risk.
- Remove all guns from the home. (63% of all adolescent suicides are committed with a gun.)
- People needing immediate attention should seek the help of trained mental health professionals with encouragement from family and friends even if the person resists.

No suicide attempt or talk of suicide should be dismissed or treated lightly.

Editorial Staff

Editor in Chief:
David W. Cunningham

Assistant Editors:
Kay Seder
Hugh Kilbourne

Art/Graphics Designer:
Lenny Joyce



Rimrock Foundation
P.O. Box 30374
Billings, MT 59107

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