Understanding

Suicide

Fact Sheet   2008

Suicide occurs when a person ends their life. It is the 11th leading cause of death among Americans. But suicide deaths are only part of the problem. More people survive suicide attempts than actually die. They are often seriously injured and need medical care.

Most people feel uncomfortable talking about suicide. Often, victims are blamed. Their friends, families, and communities are left devastated.

Why is suicide a public health problem?

- More than 32,000 people kill themselves each year.[1]

- More than 395,000 people with self-inflicted injuries are treated in emergency rooms each year.[1]

How does suicide affect health?

Suicide, by definition, is fatal. Those who attempt suicide and survive may have serious injuries like broken bones, brain damage, or organ failure. Also, people who survive often have depression and other mental health problems.

Suicide also affects the health of the community. Family and friends of people who commit suicide may feel shock, anger, guilt, and depression. The medical costs and lost wages associated with suicide also take their toll on the community.

Who is at risk for suicide?

Suicide affects everyone, but some groups are at higher risk than others. Men are 4 times more likely than women to die from suicide.[1] However, 3 times more women than men report attempting suicide.[2] In addition, suicide rates are high among young people and those over age 65.

Several factors can put a person at risk for attempting or committing suicide. But, having these risk factors does not always mean that suicide will occur.

Risk factors for suicide include:

- Previous suicide attempt(s)

- History of depression or other mental illness

- Alcohol or drug abuse

- Family history of suicide or violence

- Physical illness

- Feeling alone

Note: These are only some risk factors. To learn more, go to www.cdc.gov/injury.

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How can we prevent suicide?

The goal is to stop suicide attempts.

- **Learn the warning signs of suicide.**
  Warning signs can include changes in a person's mood, diet, or sleeping pattern. The American Association of Suicidology (www.suicidology.org) has detailed information on what to look for and how to respond.

- **Get involved in community efforts.**
  The National Strategy for Suicide Prevention lays out a plan for action. It guides the development of programs and seeks to bring about social change. For more information, go to www.mentalhealth.samhsa.gov/suicideprevention/strategy.asp.

How does CDC approach suicide prevention?

CDC uses a 4-step approach to address public health problems like suicide.

Step 1: Define the problem
Before we can prevent suicide, we need to know how big the problem is, where it is, and whom it affects. CDC learns about a problem by gathering and studying data. These data are critical because they help decision makers send resources where needed most.

Step 2: Identify risk and protective factors
It is not enough to know that suicide affects certain people in certain areas. We also need to know why. CDC conducts and supports research to answer this question. We can then develop programs to reduce or get rid of risk factors.

Step 3: Develop and test prevention strategies
Using information gathered in research, CDC develops and tests strategies to prevent suicide.

Step 4: Ensure widespread adoption
In this final step, CDC shares the best prevention strategies. CDC may also provide funding or technical help so communities can adopt these strategies.

For a list of CDC activities, see *Preventing Suicide: Program Activities Guide* (www.cdc.gov/ncipc/dvp/Preventing_Suicide.pdf).

Where can I learn more?

If you or someone you know is thinking about suicide, contact the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255).

National Institute for Mental Health
www.nimh.nih.gov

Substance Abuse and Mental Health Services Administration
www.samhsa.gov

Suicide Prevention Resource Center
www.sprc.org

Surgeon General's Call to Action to Prevent Suicide
www.surgeongeneral.gov/library/calltoaction/default.htm

References

1. Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System (WISQARS) [Online]. (2008). National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (producer). [cited 2008 Jun 16]. Available from: URL: www.cdc.gov/ncipc/wisqars.

2. Krug EG, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, editors. World report on violence and health [serial online]. 2004 May. [cited 2006 Aug 9]. Available from: URL: www.who.int/violence_injury_prevention/violence/world_report/wrvh1/en