

# SUICIDE STATISTICS

Globally, nearly **800.000 SUICIDES** ARE RECORDED ANNUALLY


More than people dying by war + homicide combined <sup>1</sup>

**56.000** of which are in the EU<sup>2</sup>

If you, or someone you know, are thinking of suicide or are in immediate danger, please contact your local emergency services, your doctor and/or your nearest mental health crisis center


[www.iasp.info/resources/Crisis\\_Centres](http://www.iasp.info/resources/Crisis_Centres)

**TEEN SUICIDES ARE RISING**



**Suicides among 10-19 year olds increased by 56% between 2007 and 2016<sup>10</sup>**

**2nd** Suicide is the leading cause of death in 15-29 year olds <sup>4</sup>



**UP TO 90% OF SUICIDE VICTIMS SUFFERED FROM A MENTAL DISORDER<sup>5</sup>**



**RISK OF SUICIDE IN PEOPLE SUFFERING FROM:**

- Depression<sup>7</sup> is **4x** higher
- Major depression is **20x** higher

**45%** of suicide victims met their primary care physician in the month prior to suicide <sup>6</sup>

**LIFETIME RISK OF SUICIDE IN PEOPLE WITH:**

- Mood disorders<sup>8</sup> **4%**
- Schizophrenia<sup>9</sup> **5%**



**48%** of 9-12 graders who spend **5+ hours** on electronic devices a day have at least one **suicide-related outcome<sup>10</sup>**



**29%** of 9-12 graders who spend **-1 hour** on devices a day have at least one **suicide-related outcome<sup>11</sup>**



**RISK OF SUICIDE is 30 to 100 times higher** in the year following self-harm

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1 WHO, Mental Health: Suicide Data [https://www.who.int/mental\\_health/prevention/suicide/suicideprevent/en/](https://www.who.int/mental_health/prevention/suicide/suicideprevent/en/)

2 Eurostat, Just over 56 000 persons in the EU committed suicide (2018)

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4 WHO (2018), Preventing suicide A community engagement toolkit.

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11 Twenge, J. M., Joiner, T. E., Rogers, M. L., & Martin, G. N. (2018). Increases in Depressive Symptoms, Suicide-Related Outcomes, and Suicide Rates Among U.S. Adolescents After 2010 and Links to Increased New Media Screen Time. Clinical Psychological Science, 6(1), 3-17.







# What works in **PREVENTING SUICIDE**

## MEANS RESTRICTION

Controlling hot-spots  
reduced suicide by

**86%**  
since 2005

If you, or someone  
you know, are thinking  
of suicide or are in  
immediate danger,  
please contact your local  
emergency services,  
your doctor and/or your  
nearest mental health  
crisis center  
[www.iasp.info/resources  
/Crisis\\_Centres](http://www.iasp.info/resources/Crisis_Centres)

Controlling analgesics decreased suicides by **43%** since 2005



## EARLY IDENTIFICATION

Treatment and effective management are key to ensuring that people  
receive the care they need <sup>12</sup>

## PRIORITISING **PREVENTIVE INTERVENTIONS**



**COMMUNITY  
SUPPORT  
REDUCES  
SUICIDAL  
BEHAVIOUR** <sup>15</sup>



## CRISIS HELPLINES

Comprehensive school-based awareness  
programmes have been shown to reduce  
suicide attempts and suicidal thoughts <sup>19</sup>

**Effective  
pharmacological and psychological  
treatments**  
of depression are important in  
suicide prevention <sup>13</sup>



**Suicide rates in  
schizophrenia patients going through  
early intervention  
services are lower by  
3.1%** <sup>14</sup>

## ACCESS TO HEALTHCARE

**Schizophrenia:** a longer delay in  
treatment increases the level of suicidality

**0.2% suicide deaths**  
occurred in brief intervention and  
contact groups compared to  
**2.2%**  
in treatment-as-usual groups <sup>16</sup>



**25%** become suicidal during  
this phase and have  
already attempted suicide  
before contact with services

Difficulties in **ACCESSING TREATMENT**, feelings of **hopelessness** or **isolation** are risk factors for suicide <sup>17</sup>

## INTERVENTIONS FOR VULNERABLE GROUPS

A number of  
vulnerable groups  
have been identified  
as having a higher  
risk of suicide <sup>18</sup>

## POLICIES TO REDUCE **HARMFUL USE OF ALCOHOL**

Those with substance  
abuse disorders  
**are 6 times  
more likely**  
to complete suicide  
than those without



The rate of completed suicide among **men** with  
alcohol/drug abuse problems is  
**2-3 times higher**  
than among those without a problem

Among **men aged 40 years**  
and older who had died by suicide,  
**76.5%**  
had a history of alcohol abuse

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<sup>12</sup> WHO (2014) Preventing suicide: A global imperative

<sup>13</sup> Gil Zalsman, Suicide prevention strategies revisited: 10-year systematic review (2016)

<sup>14</sup> Chan, S. K., Chan, S. W. Y., Pang, H. H., Yan, K. K., Hui, C. L. M., Chang, W. C., ... Chen, E. Y. H. (2018). Association of an early intervention service for psychosis with suicide rate among patients with first-episode schizophrenia-spectrum disorders. JAMA Psychiatry, 75(5), 458-464.

<sup>15</sup> WHO (2014) Preventing suicide: A global imperative

<sup>16</sup> Fleischmann A, Bertolote JM, Wasserman D, De Leo D, Bolhari J, Botega NJ, De Silva D, Phillips M, Vijayakumar L, Várník A, Schlegelbusch L, Thanh HT, Effectiveness of brief intervention and contact for suicide attempters: a randomized controlled trial in five countries. (2008)

<sup>17</sup> Centers for Disease Control and Prevention, Diseases and Conditions, Suicide (Page last reviewed: June 2018; Accessed in Jan 2019)

<sup>18</sup> WHO (2014) Preventing suicide: A global imperative

<sup>19</sup> Prof. Dr. Gil Zalsman, Evidence-Based Suicide Prevention (2018)