



County Durham and Darlington

Suicide Facts and Figures



Committed to improving the mental health of our population

Facts and Figures

Suicidal behaviour is a major health problem worldwide. Each year more than 1 million people die by suicide and between 100 and 200 million people engage in suicide attempts. The risk of suicide-related behaviour is thought to be determined by a complex interplay of biological, psychological and social issues.

The National Suicide Prevention Strategy for England Annual Report on Progress 2008 showed a fall in the overall rate of suicide in England amongst the general population, taking it to its lowest rate on record. However, Office of National Statistics figures for 2008 show an overall increase in the rate it is estimated that in England and Wales, at least 140,000 people go to hospital each year having attempted suicide.

The North East has traditionally had a suicide rate that is higher than that of England.

Common misconceptions about suicide

Myth

People who talk about suicide won't really do it.

Fact

Almost everyone who dies by suicide or attempts suicide has given some clue or warning. Do not ignore suicidal threats. Statements like "you'll be sorry when I'm dead", "I can't see any way out", - no matter how casually or jokingly said may indicate suicidal feelings.

Myth

Anyone who tries to kill themselves must be crazy.

Fact

Most suicidal people are not psychotic or insane. They must be upset, grief-stricken, depressed or despairing, but extreme distress and emotional pain are not necessarily signs of mental illness.



Talking about suicide may give someone the idea.



You don't give a suicidal person morbid ideas by talking about suicide. The opposite is true – bringing the subject of suicide and discussing it openly is one of the most helpful things you can do.



If a person is determined to kill themselves, nothing is going to stop them.



Even the most severely depressed person has mixed feelings about death, wavering until the very last moment between wanting to live and wanting to die. Most suicidal people do not want death; they want the pain to stop. The impulse to end it all, however overpowering, does not last forever.



People who die by suicide, are people who were unwilling to seek help.



Studies of suicide victims have shown that more than half had sought medical help within six months before their deaths.



People who threaten suicide are just seeking attention and shouldn't be taken seriously.



People may talk about their feelings because they want support in dealing with them. The response of those close to a person who has attempted suicide can be important to their recovery and giving them the attention they needed to save their life.

Suicide and men

- Three-quarters of suicides in the UK are by men
- Men aged 30-39 are highest risk of suicide, followed by men aged 40-49
- Suicide is the second most common cause of death in men aged 15-44, after accidental death.

Suicide and young people

- Suicide is the second most common cause of death in people aged 15-24, behind accidental death
- It is estimated that 7-14% of adolescents will self-harm at some point in their life.

Suicide in teens

Teenage suicide is a serious and growing problem. The teenage years can be emotionally turbulent and stressful. Teenagers face pressures to succeed and fit in. They may struggle with self-esteem issues, self-doubt, and feelings of alienation. For some, this leads to suicide. Depression is also a major risk factor for teen suicide.

Other risk factors for teenage suicide include:

- Childhood abuse
- Recent traumatic event
- Lack of a support network
- Hostile school or social environment
- Exposure to other teen suicides.

Suicide and the elderly

- In England in 2008, 321 people aged 75+ took their own lives. This represents 7.5% of all deaths from suicide.

Suicide and women

- More women say they have considered suicide, but far more men than women die by suicide every year.

Suicide and mental illness

- Research has shown that almost all people who end their life by suicide have a mental illness, most commonly depression
- About 10-15% of people with bipolar disorder will die by suicide
- About 4% of people with schizophrenia will die by suicide, often soon after their illness starts.

General demographic factors

- Male
- Age <50
- Low socioeconomic status
- Unmarried, separated, divorced, widowed
- Living alone / homeless
- Unemployed or retired
- Lesbian, Gay, Bisexual, Transgender
- Black Minority Ethnic.

Background history

- Deliberate self-harm (especially with high suicide intent)
- Childhood adversity (e.g. sexual abuse, bereavement)
- Family history of suicide, alcoholism and/or
- Family history of mental illness
- Previous suicide attempts
- Substance use issues
- Recent discharge from inpatient psychiatric care
- Recent release from prison.

Mental illness diagnosis

- All types of mood disorders including bi-polar affective disorder, depressive episode, and recurrent depressive disorder. In many instances, depression is masked and patients present only with somatic complaints such as headaches, chest pains, difficulty in breathing, difficulty in swallowing, nausea, vomiting, abdominal pain, lower back pain, skin rashes, frequent urination, diarrhoea, skin and muscle discomfort
- Schizophrenia – especially for young unemployed males, recurrent relapses, fear of deterioration, positive symptoms of suspiciousness and delusions, depressive symptoms. Early stages, early relapse
- Personality disorder diagnosis
- Anxiety Disorders Physical Illness especially chronic conditions and/or those associated with pain and functional impairment.

Recent discharge from inpatient psychiatric care is associated with an increased risk of suicide as the person may not be able to cope with the realities of a difficult situation.

Alcoholism

- Especially early onset, long history, high level of dependence, depressed mood, poor physical health, poor work performance, family history of alcoholism, recent disruption or loss of major interpersonal relationship.

Psychological and psychosocial factors

- Hopelessness
- Impulsiveness
- Low self-esteem
- Life event
- Relationship instability
- Lack of social support.

Self harm and attempted suicide

Whilst self harm is a communication of intense distress, people who self harm are at a high and persistent risk of suicide.

Useful Tools

[Depression and Low Mood - A Self Help Guide](#)

[Sleep Problems - A Self Help Guide](#)

[Help is at hand - A resource for people bereaved by suicide and other sudden traumatic death](#)

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