



Suicide Facts

get the Facts

“Listen with warmth. Treat with respect. Empathize with emotions. Care with confidence.”

Research has shown that the majority of those dying by suicide or making suicide attempts have a recognizable mental health illness (including in particular, mood disorders, substance use, schizophrenia and antisocial behaviours). These account for well over 50% of suicides and suicide attempts.

The risk for suicide is high among individuals with schizophrenia. It is estimated that 20 to 40% make suicide attempts and over 10% of individuals with schizophrenia eventually complete suicide.

People who are thinking about taking their lives believe that suicide is the only way to escape the inner pain they are going through. They may be overwhelmed with unemployment, homelessness, social isolation, hopelessness and depression – all factors that contribute to mental illness; or they may be experiencing a major loss, such as the death of a loved one, losing a job, or the break-up of an important relationship.

Individuals considering suicide may have very mixed feelings about ending their life, so by talking about it, your support and concern may help the person with suicidal thoughts to feel less lonely and isolated.

Who is most at risk of suicide?

- Individuals exhibiting paranoid (suspicious) behaviour.
- Individuals in the early stages of the illness, when one is confused and/or perplexed.
- Early in their recovery, when outwardly their symptoms are better but internally they feel vulnerable .
- Early in a relapse, when they feel they have overcome the problem, but the symptoms recur.
- Soon after discharge from hospital.
- A stressful life event.
- People who are depressed or who have strong feelings of hopelessness (i.e. feeling no reason for living; feeling no sense of purpose in life).
- People who have tried to commit suicide before.
- People who have thoughts of suicide or who are preoccupied with death.
- Young people who have frequent relapses of their illness (particularly males)
- People with a history of substance use.

What are the warning signs of suicide?

- A previous suicide attempt.
- Talking or writing about suicide.
- Sudden calmness or happiness (dramatic mood changes).
- Suicide may be more likely to occur when the person is in a period of improvement after a relapse, or during periods of depressed mood.
- Getting one's affairs in order, or giving away prized possessions.
- Hearing voices that talk about doing something dangerous.
- Thoughts of violence towards others.
- Increased substance (alcohol or drug) use .
- Withdrawal from friends, family members or activities.
- Anxiety or agitation, feeling trapped like there's no way out.
- Rage, uncontrolled anger, seeking revenge.

What can families and friends do?

- Be alert to the warning signs of suicide.
- Take any talk of suicide seriously. Talk with them about some of the reasons for choosing suicide and most importantly express empathy.
- Talk about it openly. For example, asking if they have a plan. Bringing up the subject will not cause the person to act upon it. Do not leave him or her alone.
- It is important to ask them directly about suicidal thoughts. Do not avoid using the word 'suicide'. It is important to ask the question without dread, and without expressing a negative judgment. For example: “are you having thoughts of suicide?” or “are you thinking about killing yourself?”
- Don't keep weapons or large quantities of drugs in your house.
- Developing a contract that includes a person available 24 hours a day (suicide helpline, professional helper or family member)
- Never keep a person's suicidal plan a secret.

If you experience these feelings, get help! If someone you know exhibits these symptoms, offer help!

Contact:

- A community mental health agency .
- A private therapist or counsellor.
- A school counsellor or psychologist .
- A family physician .
- A suicide prevention or crisis center (i.e. a crisis telephone support line).
- Draw on the support of family and friends, talk every day to at least one person you trust about how you are feeling.
- Talk to your family doctor; he/she can refer you to services in the community, including counselling and hospital services.
- Get involved in self-help groups by talking to someone who has “been there”.
- Avoid making major decisions which you may later regret.
- Call 911 immediately if someone is attempting suicide.

For further information on this, and other issues surrounding schizophrenia, please contact the Schizophrenia Society of Ontario

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This information should not be used as a substitute for the advice of a professional. Consult a physician or a lawyer to discuss your individual facts and circumstances. For more info contact the Schizophrenia Society of Ontario