Risk Factors and Warning Signs

Risk Factors for Suicide

Risk factors for suicide are characteristics or conditions that increase the chance that a person may try to take her or his life. Suicide risk tends to be highest when someone has several risk factors at the same time.

The most frequently cited risk factors for suicide are:

- Mental disorders, in particular:
  - Depression or bipolar (manic-depressive) disorder
  - Alcohol or substance abuse or dependence
  - Schizophrenia
  - Borderline or antisocial personality disorder
  - Conduct disorder (in youth)
  - Psychotic disorders; psychotic symptoms in the context of any disorder
  - Anxiety disorders
  - Impulsivity and aggression, especially in the context of the above mental disorders

- Previous suicide attempt
- Family history of attempted or completed suicide
- Serious medical condition and/or pain

It is important to bear in mind that the large majority of people with mental disorders or other suicide risk factors do not engage in suicidal behavior.

Environmental Factors That Increase Suicide Risk

Some people who have one or more of the major risk factors above can become suicidal in the face of factors in their environment, such as:

- A highly stressful life event such as losing someone close, financial loss, or trouble with the law
- Prolonged stress due to adversities such as unemployment, serious relationship conflict, harassment or bullying
- Exposure to another person’s suicide, or to graphic or sensationalized accounts of suicide (contagion)
- Access to lethal methods of suicide during a time of increased risk

Again, though, it is important to remember that these factors do not usually increase suicide risk for people who are not already vulnerable because of a preexisting mental disorder or other major risk factors. Exposure to extreme or prolonged environmental stress, however, can lead to depression, anxiety, and other disorders that in turn, can increase risk for suicide.

Protective Factors for Suicide
Protective factors for suicide are characteristics or conditions that may help to decrease a person’s suicide risk. While these factors do not eliminate the possibility of suicide, especially in someone with risk factors, they may help to reduce that risk. Protective factors for suicide have not been studied as thoroughly as risk factors, so less is known about them.

Protective factors for suicide include:

- Receiving effective mental health care
- Positive connections to family, peers, community, and social institutions such as marriage and religion that foster resilience
- The skills and ability to solve problems

Protective factors may reduce suicide risk by helping people cope with negative life events, even when those events continue over a period of time. The ability to cope or solve problems reduces the chance that a person will become overwhelmed, depressed, or anxious. Protective factors do not entirely remove risk, however, especially when there is a personal or family history of depression or other mental disorders.

**Warning Signs for Suicide**

In contrast to longer term risk and protective factors, warning signs are indicators of more acute suicide risk.

Thinking about heart disease helps to make this clear. Risk factors for heart disease include smoking, obesity, and high cholesterol. Having these factors does not mean that someone is having a heart attack right now, but rather that there is an increased chance that they will have heart attack at some time. Warning signs of a heart attack are chest pain, shortness of breath, and nausea. These signs mean that the person may be having a heart attack right now and needs immediate help.

As with heart attacks, people who die by suicide usually show some indication of immediate risk before their deaths. Recognizing the warning signs for suicide can help us to intervene to save a life.

A person who is thinking about suicide may say so directly. “I’m going to kill myself.” More commonly, they may say something more indirect: “I just want the pain to end,” or “I can’t see any way out.”

Most of the time, people who kill themselves show one or more of these warning signs before they take action:

- Talking about wanting to kill themselves, or saying they wish they were dead
- Looking for a way to kill themselves, such as hoarding medicine or buying a gun
- Talking about a specific suicide plan
- Feeling hopeless or having no reason to live
- Feeling trapped, desperate, or needing to escape from an intolerable situation
- Having the feeling of being a burden to others
- Feeling humiliated
- Having intense anxiety and/or panic attacks
- Losing interest in things, or losing the ability to experience pleasure
- Insomnia
- Becoming socially isolated and withdrawn from friends, family, and others
- Acting irritable or agitated
- Showing rage, or talking about seeking revenge for being victimized or rejected, whether or not the situations the person describes seem real

Individuals who show such behaviors should be evaluated for possible suicide risk by a medical doctor or mental health professional.

**What To Do When You Suspect Someone May Be at Risk for Suicide**
Take it Seriously

50% to 75% of all people who attempt suicide tell someone about their intention.
If someone you know shows the warning signs above, the time to act is now.

Ask Questions

Begin by telling the suicidal person you are concerned about them.
Tell them specifically what they have said or done that makes you feel concerned about suicide.
Don't be afraid to ask whether the person is considering suicide, and whether they have a particular plan or method in mind.
These questions will not push them toward suicide if they were not considering it.
Ask if they are seeing a clinician or are taking medication so the treating person can be contacted.
Do not try to argue someone out of suicide. Instead, let them know that you care, that they are not alone and that they can get help. Avoid pleading and preaching to them with statements such as, “You have so much to live for,” or “Your suicide will hurt your family.”

Encourage Professional Help

Actively encourage the person to see a physician or mental health professional immediately.
People considering suicide often believe they cannot be helped. If you can, assist them to identify a professional and schedule an appointment. If they will let you, go to the appointment with them.

Take Action

If the person is threatening, talking about, or making specific plans for suicide, this is a crisis requiring immediate attention.
Do not leave the person alone.
Remove any firearms, drugs, or sharp objects that could be used for suicide from the area.
Take the person to a walk-in clinic at a psychiatric hospital or a hospital emergency room.
If these options are not available, call 911 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) for assistance.

Follow-Up on Treatment

Still skeptical that they can be helped, the suicidal person may need your support to continue with treatment after the first session.
If medication is prescribed, support the person to take it exactly as prescribed. Be aware of possible side effects, and notify the person who prescribed the medicine if the suicidal person seems to be getting worse, or resists taking the medicine. The doctor can often adjust the medications or dosage to work better for them.
Help the person understand that it may take time and persistence to find the right medication and the right therapist. Offer your encouragement and support throughout the process, until the suicidal crisis has passed.