



SIEC ALERT

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SIEC ALERT is a topical review of current literature relevant to suicide prevention.

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AIM to Prevent Suicide: The U.S. Surgeon General's Call to Action

This issue of SIEC ALERT extracts the essential parts of the Surgeon General's Call to Action to Prevent Suicide* (1999), an evidence-based blueprint for reducing suicide on a national scale. Experts from across North America agreed upon a three part suicide prevention plan, built on awareness, intervention, and research. Fifteen key recommendations, plus a consensus-based list of suicide risk and protective factors are reprinted here.

Awareness: Appropriately broaden public awareness of suicide & its risk factors

- Promote public awareness that suicide is a public health problem, and as such, many suicides are preventable. Use information technology appropriately to make facts about suicide and its risk factors and prevention approaches available to the public and to health care providers.
- Expand awareness of and enhance resources in communities for suicide prevention programs and mental and substance abuse disorder assessment and treatment.
- Develop and implement strategies to reduce the stigma associated with mental illness, substance abuse, and suicidal behavior and with seeking help for such problems.

Intervention: Enhance services and programs, both population-based & clinical care

- Extend collaboration with and among public and private sectors to complete a **National Strategy for Suicide Prevention**.
- Improve the ability of primary care providers to recognize and treat depression, substance abuse, and other major mental illnesses associated with suicide risk. Increase the referral to specialty care when appropriate.
- Eliminate barriers in public and private insurance programs for provision of quality mental and substance abuse disorder treatments and create incentives to treat patients with coexisting mental and substance abuse disorders.
- Institute training for all health, mental health, substance abuse and human service professionals (including clergy, teachers, correctional workers, and social workers) concerning suicide risk assessment and recognition, treatment, management, and aftercare interventions.
- Develop and implement effective training programs for family

members of those at risk and for natural community helpers on how to recognize, respond to, and refer people showing signs of suicide risk and associated mental and substance abuse disorders. Natural community helpers are people such as educators, coaches, hairdressers, and faith leaders, among others.

- Develop and implement safe and effective programs in educational settings for youth that address adolescent distress, provide crisis intervention and incorporate peer support for seeking help.
- Enhance community care resources by increasing the use of schools and workplaces as access and referral points for mental and physical health services and substance abuse treatment programs and provide support for persons who survive the suicide of someone close to them.
- Promote a public/private collaboration with the media to assure that entertainment and news coverage represent balanced and informed portrayals of suicide and its associated risk factors including mental illness and substance abuse disorders and approaches to prevention and treatment.

Methodology: Advance the science of suicide prevention

- Enhance research to understand risk and protective factors related to suicide, their interaction, and their effects on suicide and suicidal behaviors. Additionally, increase research on effective suicide prevention programs, clinical treatments for suicidal individuals, and culture-specific interventions.
- Develop additional scientific strategies for evaluating suicide prevention interventions and ensure that evaluation components are included in all suicide prevention programs.
- Establish mechanisms for federal, regional, and state interagency public health collaboration toward improving monitoring systems for suicide and suicidal behaviors and develop and promote standard terminology in these systems.
- Encourage the development and evaluation of new prevention technologies, including firearm safety measures, to reduce easy access to lethal means of suicide.

* U.S. Public Health Service, The Surgeon General's Call to Action to Prevent Suicide. Washington, DC: 1999
Written by: Lucy Davidson, Lloyd Potter, and Virginia Ross
available from Suicide Prevention Advocacy Network SPAN USA
website: <http://www.spanusa.org>
SIEC# 990854

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Risk and Protective Factors From A Call to Action

The Surgeon General's strategy points out that suicide risk and protective factors form the empirical base for suicide prevention. Risk factors are associated with a greater potential for suicide and suicidal behaviour while protective factors are associated with reduced potential for suicide.

A better understanding of risk factors can help dispel the myths that suicide is a random act or that it results from stress alone.

Risk factors include:

- ✓ Previous suicide attempt
- ✓ Mental disorders - particularly mood disorders such as depression & bipolar disorder
- ✓ Co-occurring mental and alcohol and substance abuse disorders
- ✓ Family history of suicide
- ✓ Hopelessness
- ✓ Impulsive and/or aggressive tendencies
- ✓ Barriers to accessing mental health treatment
- ✓ Relational, social, work, or financial loss
- ✓ Physical illness
- ✓ Easy access to lethal methods, especially guns
- ✓ Unwillingness to seek help because of stigma attached to mental and substance abuse disorders and/or suicidal thoughts
- ✓ Influence of significant people - family members, celebrities, peers who have died by suicide - both through direct personal contact or inappropriate media representations
- ✓ Cultural and religious beliefs - for instance, the belief that suicide is a noble resolution of a personal dilemma
- ✓ Local epidemics of suicide that have a contagious influence
- ✓ Isolation, a feeling of being cut off from other people

Protective factors can include an individual's genetic or neurobiological makeup, attitudinal and behavioral characteristics, and environmental attributes.

Protective factors include:

- ★ Effective and appropriate clinical care for mental, physical, and substance abuse disorders
- ★ Easy access to a variety of clinical interventions and support for help-seeking
- ★ Restricted access to highly lethal methods of suicide
- ★ Family and community support
- ★ Support from ongoing medical and mental health care relationships
- ★ Learned skills in problem solving, conflict resolution, and nonviolent handling of disputes
- ★ Cultural and religious beliefs that discourage suicide and support self-preservation instincts

For more discussion on national strategies...*

SIEC #2000102

I.A.S.P. Executive Committee (1999). I.A.S.P. guidelines for suicide prevention. *Crisis*, 20(4):155-163.

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Lester, D. (1992). State initiatives in addressing youth suicide: Evidence for their effectiveness. *Social Psychiatry & Psychiatric Epidemiology*, 27: 75-77.

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Suicide Prevention Advocacy Network (1998). Advancing the national strategy for suicide prevention: Linking research and practice. National Suicide Prevention Conference, (October 15-18, 1998: Reno, Nevada). 20 p.

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Taylor, S. J., Kingdom, D., & Jenkins, R. (1997). How are nations trying to prevent suicide? An analysis of national suicide prevention strategies. *Acta Psychiatrica Scandinavica*, 95: 457-463.

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United Nations Policy Coordination & Sustainable Development. (1996). Prevention of suicide: Guidelines for the formulation and implementation of national strategies. New York: United Nations. Department of Policy Coordination & Sustainable Development. 29 pp.

SIEC #990561

Upanne, M. (1999). A model for the description and interpretation of suicide prevention. *Suicide and Life-Threatening Behavior*, 29(3): 241-255

*Photocopies available from SIEC for documents on this list. (Cost per article: \$8.00 plus postage. Prepayment is not necessary. Please quote SIEC # when ordering.)



psssstt! SIEC has a growing collection of national strategies from around the globe! Contact us if you are interested....

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