

# Did You Know?

## Global Facts

The World Health Organization estimates that over 800,000 people die by suicide each year — that's one person every 40 seconds<sup>1</sup>.

Suicide accounted for 1.4% of all deaths worldwide, making it the 15th leading cause of death in 2012. Effective and evidence-based interventions can be implemented at population, sub-population and individual levels to prevent suicide and suicide attempts.

No single determinant, including mental illness, is enough on its own to cause a suicide. Rather, suicide typically results from the interaction of many factors, for example: mental illness, marital breakdown, financial hardship, deteriorating physical health, a major loss, or a lack of social support<sup>2</sup>.



## Suicide in Canada

Suicide is a leading cause of death for people in Canada aged 15-24, preceded only by accidents (unintentional injuries)<sup>3</sup>.

In the 15-19 year demographic, the suicide rate is 12 per 100,000 for males and 5 per 100,000 for females. Among Canadians aged 20-24, the suicide rate is 19 per 100,000 for males and 5 per 100,000 for females<sup>4</sup>.

9.5% of university students have stated that they have seriously considered suicide within the past twelve months. Almost half of students also say that they experience more than average stress levels<sup>5</sup>.

Youth, ages 15-24, are the most likely to suffer from selected mental disorders. Almost 1 in 5 report symptoms of substance misuse and mood and anxiety disorders<sup>6</sup>.

Known risk factors for suicide include: previous suicide attempt, family history of suicidal behaviour, a serious physical or mental illness (such as operational stress injuries).



# Did You Know?

## What You Can Do

Don't assume that people who think about or talk about suicide are not serious, are being dramatic, or that their suicidal thoughts will simply go away on their own - they often don't.

Keep in mind that helping loved ones doesn't mean you can or should solve their problems, treat their illness or take away their pain. Helping doesn't mean that you should assume personal responsibility for someone else's safety or for stopping their suicidal thoughts or actions. It means listening, caring, supporting, and helping the person get the professional mental health help they need, when and where they need it.

If the situation isn't urgent but you or the person you are concerned about is distressed, help is available. Helping to make calls and appointments can be very important to getting someone help in a timely manner.

## Times of Crisis

If you or someone you know is thinking about suicide, cannot make the thoughts go away, feel like acting on the thoughts, have a plan for how to die by suicide, or have access to the means with which to end life, you need to get help immediately! Call 911, go to the nearest hospital emergency room or urgent care clinic, or call a crisis line or distress centre.



## What You Can Do for You!

Think about your emotional well-being. Assess your emotional health regularly. Consider the particular demands or stresses you are facing and how they are affecting you. Give yourself permission to take a break from your worries and concerns. Recognize that dedicating even a short time every day to your mental fitness will reap significant benefits in terms of feeling rejuvenated and more confident<sup>7</sup>.

1. "Suicide Data". 2016. World Health Organization. [http://www.who.int/mental\\_health/prevention/suicide/suicideprevent/en/](http://www.who.int/mental_health/prevention/suicide/suicideprevent/en/).
2. Suicide In Canada. 1994. [Ottawa]: Health Canada.
3. "Fact Sheet - Help To Prevent Suicide". 2013. Mental Health Commission Of Canada. [http://www.mentalhealthcommission.ca/sites/default/files/MHCC\\_Suicide\\_Prevention\\_Facts\\_FINAL\\_Bilingual\\_1.pdf](http://www.mentalhealthcommission.ca/sites/default/files/MHCC_Suicide_Prevention_Facts_FINAL_Bilingual_1.pdf).
4. "UNIVERSITIES AND MENTAL HEALTH: DEVELOPING A REGIONAL APPROACH TO HELPING STUDENTS | Association Of Atlantic Universities". 2014. [atlanticuniversities.ca/policy-advocacy/public-policy-paper-series/universities-and-mental-health-developing-regional](http://www.atlanticuniversities.ca/policy-advocacy/public-policy-paper-series/universities-and-mental-health-developing-regional).
5. "CANADIAN Reference Group Executive Summary". 2013. Cacuss. [http://www.cacuss.ca/\\_Library/documents/NCHA-II\\_WEB\\_SPRING\\_2013\\_CANADIAN\\_REFERENCE\\_GROUP\\_EXECUTIVE\\_SUMMARY.pdf](http://www.cacuss.ca/_Library/documents/NCHA-II_WEB_SPRING_2013_CANADIAN_REFERENCE_GROUP_EXECUTIVE_SUMMARY.pdf).
6. "Student Mental Health And Wellness". 2012. Queen's University. <http://www.queensu.ca/principal/sites/webpublish.queensu.ca.opvcwww/files/files/CMHFinalReport.pdf>.