

Suicide Risk and Protective Factors

Risk factors: associated (by empirical study) with an increased occurrence of suicidal behavior (The list is neither prioritized nor exhaustive)

Individual

- Mental disorders
 - Depression
 - Schizophrenia
 - Anxiety disorders
 - Borderline personality disorder
- "States of mind"
 - Hopelessness
 - Impulsivity
 - Low self-esteem
 - Psychic pain
- Behaviors
 - Social withdrawal
 - Alcohol or drug abuse
 - Aggressive tendencies and/or history of violent behavior
 - Previous suicide attempt
- Older age
- Race
 - White
 - Native American
- History
 - Previous psychiatric treatment
 - History of trauma or abuse
 - Some major physical illnesses; severe impairment of physical health
- Suicidal ideation
- A&D
- Access to means (firearms, poisons, etc.)

Peer/Family

- History of interpersonal violence, conflict, abuse, bullying
- Family history of substance abuse
- Social isolation: low or lack of social support
- Exposure to suicide
- Stigma associated with help-seeking behavior
- Barriers to accessing health care, especially mental health and substance abuse treatment
- No longer married
- Loss of close attachment/relationship (divorce, death of spouse, etc.)
- Access to means (firearms, poisons, etc.)

Community

- Access to lethal means (firearms, poisons, etc.)
- Unemployment or financial loss
- Relational or social loss/humiliation
- Local clusters of suicide that have a contagious influence
- Barriers to health care and mental health care
- Stigma
- Exposure to suicide (media, memorials, etc.)

Society

- Certain cultural and/or religious beliefs (e.g., suicide is a noble resolution of a personal dilemma)
- Societal breakdown
- Residence in the western U.S.
- Rural/remote area
- Cultural values and attitudes
- Media influence
- Alcohol and drug misuse and/or abuse
- Economic instability
- Peer values

Protective factors: associated (by empirical study) with an decreased occurrence of suicidal behavior (The list is neither prioritized nor exhaustive)

Individual

- Cultural and religious beliefs that discourage suicide and/or support self-preservation
- Support through ongoing health and mental health care relationships
- Coping/problem-solving skills
- Resiliency, self-esteem, direction, mission, determination, perseverance, optimism, empathy
- Intellectual competence, especially in youth
- Reasons for living
- Sense of connectedness
- Sobriety
- Membership in a Twelve Step program if in recovery from a substance abuse problem or addiction

Peer/Family

- Family cohesion, especially important for youth
- Sense of social support
- Interconnectedness
- Married and/or a parent
- Access to comprehensive health care
- Membership in a Twelve Step program if in recovery from a substance abuse problem or addiction
- Membership in Al-Anon or other support groups

Community

- Access to health care and mental health care
- Access to substance abuse treatment
- Social support, close relationships, caring family members, participation and bond with school or business
- Respect for help-seeking behavior
- Skills to recognize and respond to signs of risk
- Access to Twelve Step programs and other support groups, such as Al-Anon

Society

- Urban/suburban area
- Access to health care and mental health care
- Cultural values affirming life
- Media influence

Source: Resource Sheet 1-1, Strategic Planning For Suicide Prevention: Core Community Competencies Workshop, Suicide Prevention Resource Center

