



# Understanding Risk Factors for Suicide

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Suicide is a complex public health crisis requiring comprehensive understanding of interconnected risk factors. This presentation examines the biological, psychological, social, and environmental elements that contribute to suicide risk, enabling better recognition, intervention, and prevention.

# The Scope and Seriousness of Suicide

Suicide remains a leading cause of death globally, claiming over 700,000 lives annually. The burden extends far beyond mortality—each suicide affects families, communities, and healthcare systems profoundly. Understanding risk factors is essential for healthcare professionals, educators, employers, and family members seeking to prevent tragic outcomes.

Most people who experience suicidal thoughts do not attempt suicide. Recognition of warning signs and risk factors enables timely intervention and connection to life-saving support services.





# Mental Health Conditions: The Strongest Link Strongest Link

Approximately 90% of individuals who die by suicide have an underlying mental health disorder. Depression, bipolar disorder, schizophrenia, anxiety disorders, and personality disorders substantially elevate risk.

## **Depression**

Persistent hopelessness and despair; the strongest single predictor of suicide risk

## **Substance use disorders**

Extreme mood fluctuations increase impulsivity

## **Anxiety Disorders**

Chronic worry and panic can intensify emotional distress and hopelessness

## **Psychotic Disorders**

Command hallucinations or delusions may directly compel suicidal behaviour

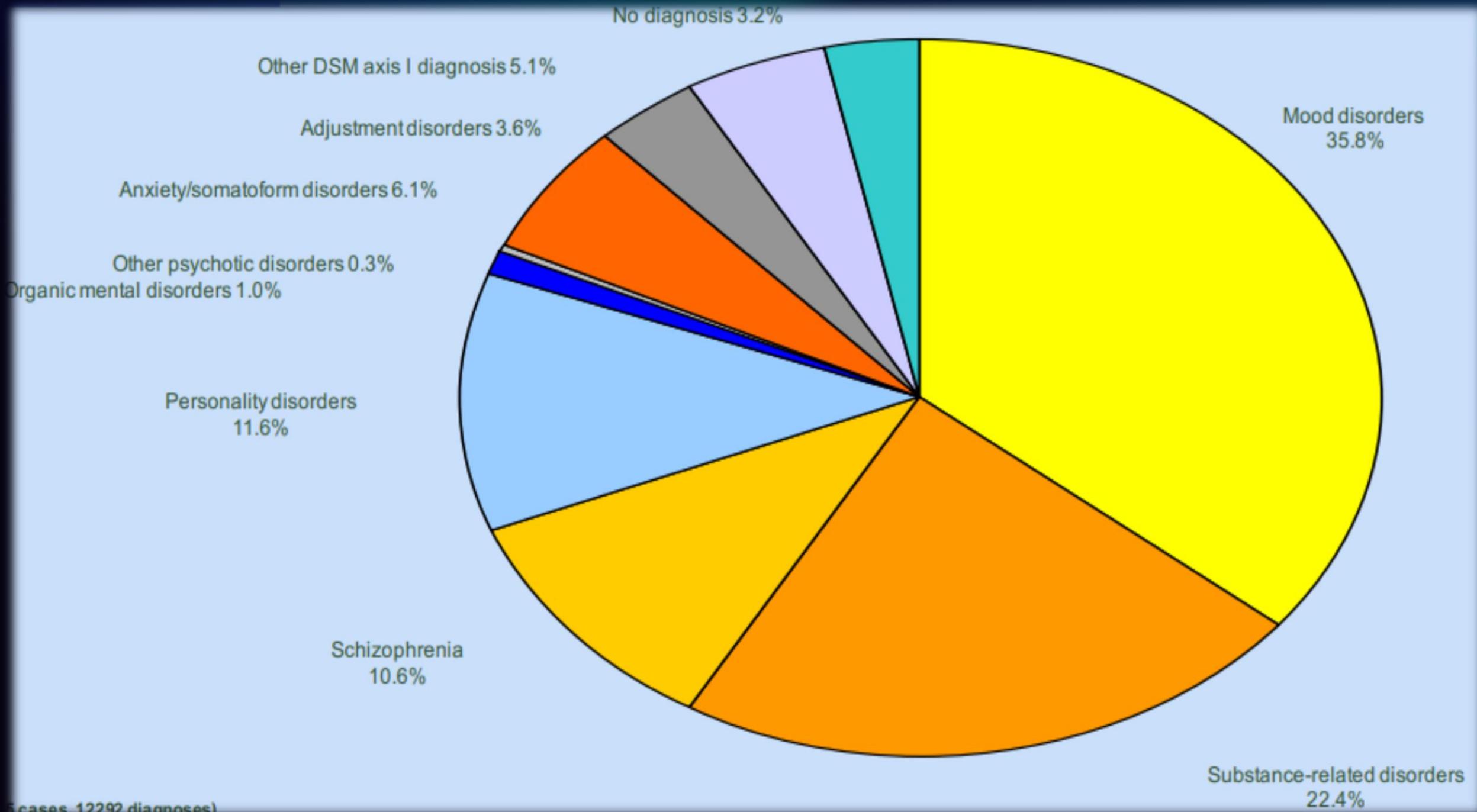
# Substance Abuse: Fuelling Impulsivity and Despair

## The Dangerous Connection

Alcohol and drug abuse are present in approximately 30–40% of suicide deaths. Substances impair judgment, increase impulsivity, and amplify emotional pain. They may also worsen underlying mental health conditions and reduce access to coping mechanisms.

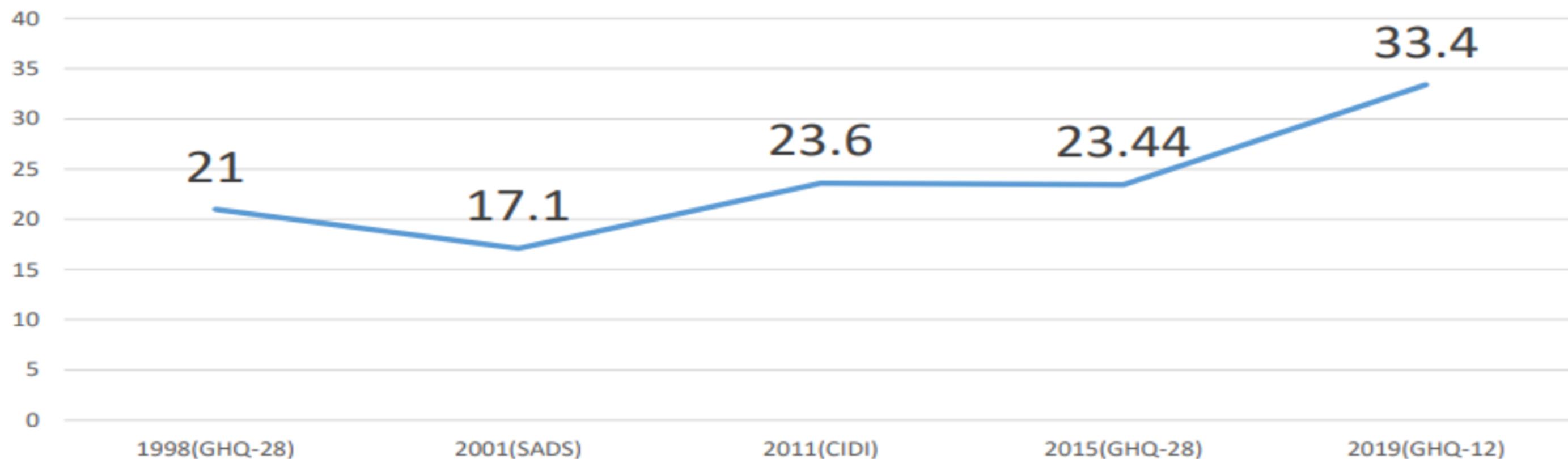
- Alcohol lowers inhibition and increases acting on suicidal thoughts
- Opioids intensify depression and isolation
- Stimulants trigger anxiety, paranoia, and mood instability





(5 cases, 12292 diagnoses)

# روند شیوع اختلالات روانی در جامعه ایران بر اساس پیمایش های ملی سلامت روان طی ۲۵ سال گذشته





# Previous Suicide Attempts: A Major Red Flag

A history of previous suicide attempts is one of the most significant predictors of completed suicide. Individuals who have attempted suicide before are at substantially elevated risk of future attempts, particularly within the first year following an attempt.

1

## Immediate Risk Period

Highest risk occurs in the weeks and months immediately following an attempt

2

## Normalisation of Method

Previous attempts may make suicidal behaviour feel more achievable or acceptable

3

## Persistent Distress

The underlying crises driving the first attempt often remain unresolved

4

## Increased Lethality

Subsequent attempts often involve more dangerous methods or higher intent

# Social and Environmental Factors: Isolation, Loss, and Adversity

Suicide risk increases significantly within specific social contexts and during major life transitions. Protective social connections reduce risk substantially, whilst isolation and loss amplify vulnerability.



## Bereavement and Loss

Death of loved ones, relationship dissolution, or significant life changes trigger despair and hopelessness



## Social Isolation

Lack of meaningful connections, social rejection, or perceived loneliness removes protective factors



## Occupational Crisis

Unemployment, job loss, or workplace bullying creates financial stress and identity disruption



## Interpersonal Conflict

Domestic violence, family discord, or chronic relationship strain intensifies emotional pain



# Biological and Genetic Predispositions

Suicide risk has identifiable neurobiological foundations. Genetics, brain chemistry, and physiological stress responses influence vulnerability to suicidal behaviour independently of life circumstances.

## Neurobiological Factors

- **Serotonin dysregulation:** Low levels associated with impulsivity and depressed mood
- **Hypothalamic-pituitary-adrenal (HPA) axis dysfunction:** Abnormal stress response systems
- **Prefrontal cortex abnormalities:** Reduced impulse control and decision-making capacity

## Genetic Influence

- **Familial clustering:** Suicide runs in families independent of shared environment
- **Heritability estimates:** Approximately 30–50% of suicide risk is genetically influenced
- **Gene-environment interaction:** Genetic vulnerability requires environmental triggers

# Demographic Considerations: Age, Gender, and Cultural Influences

Suicide risk varies significantly across demographic groups, reflecting different stressors, access to means, and cultural attitudes toward mental illness and help-seeking.

## Youth and Young Adults

Second leading cause of death for ages 10–34; identity struggles and social pressures elevate risk



## Older Adults

Men aged 65+ have highest completion rates; isolation and health decline are key factors

## Gender Disparities

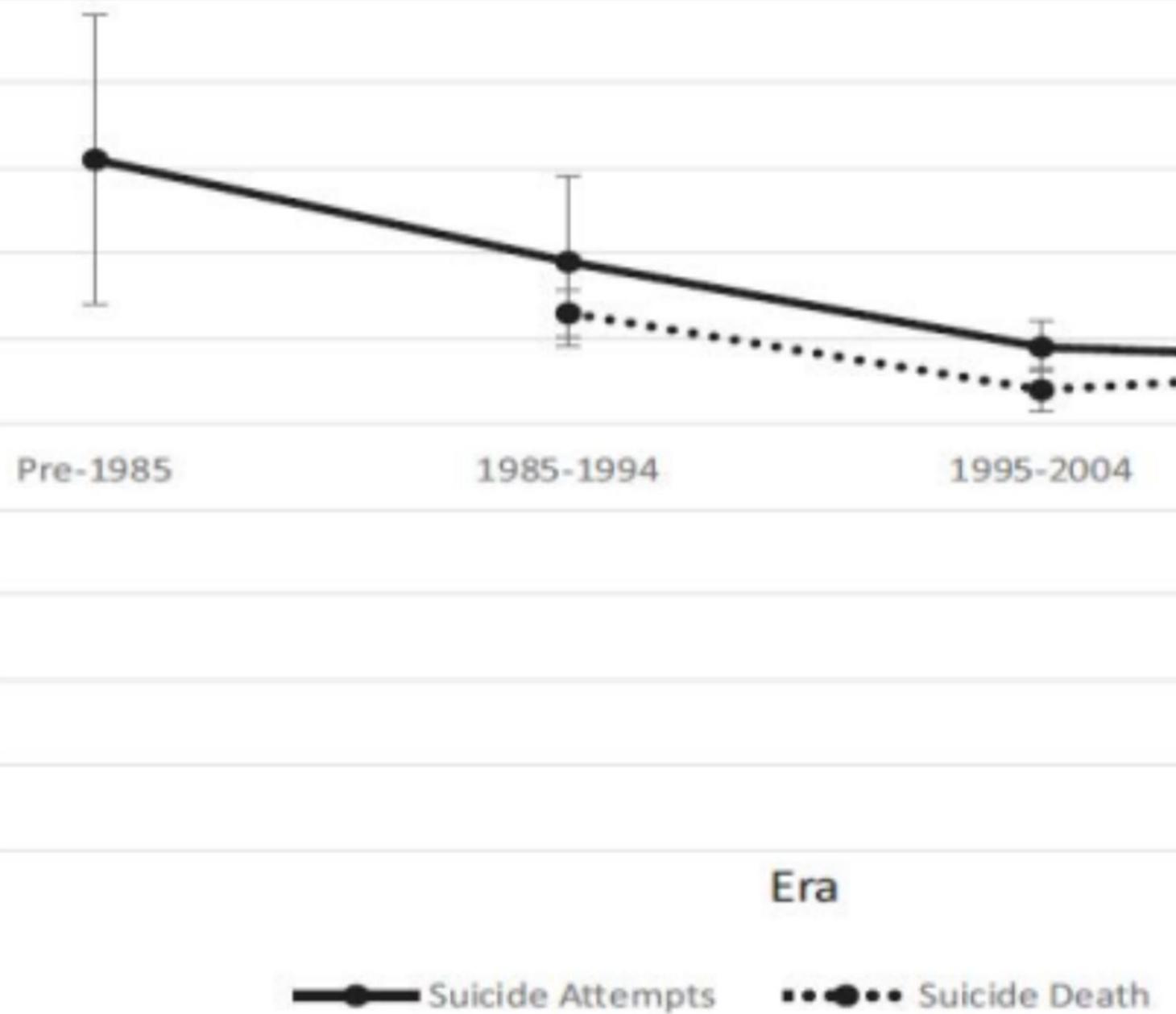
Males die by suicide 3–4 times more often than females; females attempt more frequently but use less lethal methods



## Cultural and Minority Factors

LGBTQ+ individuals, Indigenous populations, and racial minorities face elevated risk due to discrimination and systemic barriers





## Risk Factors

1. Prior psychiatric hospitalization
2. Prior suicide attempt
3. Suicide ideation
4. Socioeconomic status (lower)
5. Stressful life events

# Recognising the Warning Signs of Suicide: A Vital Guide

Suicide is preventable. By learning to recognise the warning signs, you can make a life-saving difference. This guide equips you with the knowledge and confidence to identify when someone may be in crisis and how to respond with compassion and care.





# Direct Verbal Cues: What to Listen For

## Explicit Statements

"I want to kill myself" or "I'm going to end it" should always be taken seriously. Never dismiss such statements as attention-seeking.

## Indirect Language

Listen for subtler phrases like "You'd be better off without me," "I'm a burden," or "Nobody would miss me." These reveal suicidal ideation.

## Farewell Indicators

Comments about saying goodbye, giving away possessions, or getting their affairs in order warrant urgent concern and immediate action.



# Behavioural Changes: Recognising Shifts

## Shifts in Actions and Routines

Sudden changes in behaviour often signal distress. These shifts may be dramatic or subtle, but they warrant attention and gentle inquiry.



### **Reckless Behaviour**

Increased alcohol or drug use, risky driving, or dangerous activities suggest someone is self-harming or has lost regard for their safety.



### **Neglect of Self-Care**

Sudden disregard for hygiene, appearance, or health routines—skipping meals, irregular sleep, or abandoning exercise—can indicate depressive crisis.



### **Preparation Activities**

Researching methods, acquiring means (weapons, medication), writing notes, or arranging finances are serious red flags requiring immediate intervention.



# Emotional Indicators: Spotting Red Flags in Mood and Outlook

## Hopelessness and Despair

Persistent beliefs that nothing will improve or that problems are unsolvable signal severe emotional distress requiring compassionate intervention.

## Sudden Mood Shifts

Extreme calmness after depression or unexplained cheerfulness despite crisis may indicate someone has made a suicidal decision and found "relief".

## Loss of Purpose

Expressions of worthlessness, guilt without cause, or diminished interest in activities once enjoyed point to clinical depression or crisis.

# Social Withdrawal and Isolation: The Danger of Disconnection

## Warning Signs

- Withdrawing from friends and family
- Declining invitations or social events
- Reduced communication or engagement
- Loss of interest in hobbies and clubs
- Increased time spent alone or online

## Why It Matters

Social isolation amplifies despair and removes protective factors. When someone isolates, they lose crucial support systems and reinforce negative thoughts. Regular human connection is vital for mental health.

Early outreach to isolated individuals—checking in, maintaining contact, inviting participation—can be lifesaving.



# Increased Risk Factors: Identifying Vulnerable Individuals

Certain populations and circumstances elevate suicide risk significantly. Understanding these factors helps identify those needing extra support and monitoring.

## Mental Health Conditions

Depression, bipolar disorder, anxiety disorders, and personality disorders substantially increase risk.

## Substance Misuse

Alcohol and drug abuse reduce inhibitions, increase impulsivity, and intensify depressive symptoms.



## Recent Loss or Crisis

Bereavement, relationship breakdown, job loss, or financial hardship create vulnerability and desperation.

## Previous Attempts

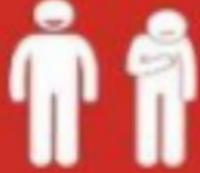
Prior suicide attempts are among the strongest predictors of future risk and require ongoing monitoring.



Activate Windows  
Go to Settings to activate Windows.

Are you or someone you know on a path to suicide?

# Know the **WARNING SIGNS!**

<b>I</b>		<b>P</b>		<b>W</b>		Ideation Substance Abuse
<b>S</b>		<b>A</b>		<b>A</b>		Purposelessness Anxiety Trapped Hopelessness
		<b>T</b>		<b>R</b>		Withdrawal Anger
		<b>H</b>		<b>M</b>		Recklessness Mood Change



# Final Thoughts: Prevention, Hope, and Community Support

Suicide is preventable. By recognising warning signs, reaching out with compassion, and knowing where to find help, we collectively save lives. Mental health challenges are treatable, crises are temporary, and recovery is possible.

**If you're struggling:** Please reach out. Your life has value. **If someone you know is at risk:** Take action now—your intervention matters profoundly. Together, we can build a culture of support, compassion, and hope.

 **Remember:** Asking about suicide does not plant the idea. Speaking honestly about mental health saves lives. You are not alone, and neither are they.