

Injury prevention and suicide

Who is at risk of intentional injury?

Anyone can be at risk of intentional injury. Here are some examples of high-risk groups:

CHILDREN WHO SELF-HARM

Children often harm themselves because of harms done to them. The intention of their self-harming behaviours may not be to die by suicide, but if not treated by a mental health professional, can escalate to suicidal behaviour (Centre for Suicide Prevention, 2014).

YOUTH WHO ENGAGE IN RISK-TAKING BEHAVIOUR

Youth who harm themselves are at greater risk for suicide and have underlying mental health issues or are trying to escape overwhelming and negative emotions (Klonsky, et al., 2014). Risk-taking behaviours, such as promiscuity, driving while intoxicated,

or indulging in substance abuse, often lead to intentional and unintentional injury. Early intervention for youth effectively reduces suicide rates, however youth receive the least mental health assistance of all age groups (Standing Senate Committee on Social Affairs, Science and Technology, 2006). Getting vulnerable youth the medical and psychological attention they need should be a suicide prevention priority both nationally and provincially (Kutcher, 2008).

YOUNG AND MIDDLE-AGED MEN

Generally, there is a reluctance by men to seek assistance for mental health issues. Men who live with depression and do not seek help may be at increased risk for suicide. This is especially true if there are co-occurring disorders such as substance abuse. Men will often mask their stress and cope with their depression through harmful behaviours and actions (Ogrodniczuk, 2011). Men die by suicide three times more often than women (Statistics Canada, 2014).

In 2010 injuries cost Canadians

\$26.8 billion

with suicide and self-harm accounting for

\$2.9 billion

Parachute, 2015

What is it?

Injury prevention aims to reduce harm and increase safety for individuals, families and communities. There are two types of injury: intentional and unintentional.

UNINTENTIONAL INJURIES INCLUDE THOSE CAUSED BY:

- traffic collisions;
- falls;
- choking and suffocation; or
- fires and burns.

INTENTIONAL INJURY INCLUDES:

- self-harm;
- suicide; or
- domestic violence.

Intentional injuries fundamentally differ from unintentional injuries, because intentional injuries are intended to cause harm, and are directly linked to mental health issues. Self-harming is a way for people with mental health concerns to ease their extreme psychological pain.

More people die by suicide than in motor vehicle collisions in many provinces: it's often the leading cause of injury death.

In British Columbia (2011):

526 suicides

292 motor vehicle deaths

In Ontario (2010):

1175 suicides/
self-harm

735 transport incident deaths

BC Ministry of Justice, 2010; Parachute, 2015

Evidence-based strategies to prevent intentional injuries in Canada

1. REDUCE ACCESS TO LETHAL MEANS

TO PREVENT DEATH BY HANGING:

- Redesign closet rods, window fittings and furniture to reduce ligature points.

TO PREVENT DEATH BY DRUG POISONING:

- Regulate dosages by reducing pack size of potentially lethal pills.
- Dispose of unwanted medications properly.
- Make ongoing recommendations to governments regarding the classification and access of medications by health professionals and the public where concerns arise.

TO PREVENT DEATH BY FIREARM:

- Use locked gun storage.
- Restrict access to firearms.

TO PREVENT DEATH BY CARBON MONOXIDE POISONING:

- Require all cars to have catalytic converters.

TO PREVENT DEATH BY JUMPING:

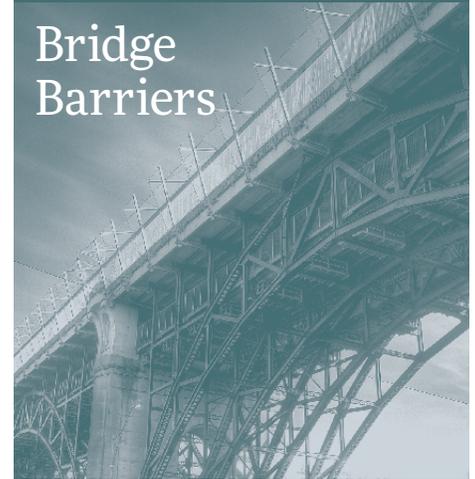
- Post phone number of the local distress centre on bridges and other high places.
- Construct bridge barriers (Institute for Health Economics, 2010).

2. EDUCATE

Skills-training programs, such as the Applied Suicide Intervention Skills Training (ASIST) workshop, aim to equip community members with the knowledge and skills to intervene with someone at risk of suicide.

CASE STUDY

Bridge Barriers



Constructing physical barriers on bridges is a highly effective injury and suicide prevention initiative. In the face of opposition, the City of Toronto erected bridge barriers on the Bloor Viaduct. The construction of this suicide barrier allowed the second deadliest suicide bridge in North America to become virtually free of suicides. Some theories suggest that bridge barriers do not deter suicide and that people will look for another means of suicide, however, research has shown that after the installation of the Bloor Viaduct barriers, the overall suicide rate in the city of Toronto decreased.

READ MORE AT bit.ly/2tR5FPj

Image courtesy of Paul Bica

RESOURCES: A SELECTION OF CANADIAN INJURY AND SUICIDE PREVENTION STRATEGIES

- *Alberta Injury Control Strategy, 2003* bit.ly/2tNGFoz
- *Injury Free Manitoba: A Provincial Injury Prevention Strategy, 2006* bit.ly/2uZCckH
- *A Culture of Safety: NWT Injury Prevention Strategy: 2007-2012 Implementation Plan* bit.ly/2tneRr7
- *Nova Scotia's Renewed Injury Prevention Strategy: Taking it to the Next Level, 2009* bit.ly/2urrkiv
- *Ontario's Injury Prevention Strategy: Working Together for a Safer, Healthier Ontario, 2007* bit.ly/2vCRbkD

VIEW THE REFERENCE LIST ONLINE www.suicideinfo.ca/resource/injury-prevention-suicide/



FOR MORE INFORMATION,
VISIT SUICIDEINFO.CA



Commission de
la santé mentale
du Canada



Canadian Mental
Health Association
Mental health for all



centre for
suicide prevention

Financial contribution from



Health Canada
Santé Canada

References

Canada, Parliament, Senate. *Standing Senate Committee on Social Affairs, Science and Technology. (2006). Out of the shadows at last: Transforming mental illness and addiction services in Canada.* Retrieved from <http://www.parl.gc.ca/content/sen/committee/391/soci/rep/rep02may06-e.htm>

Centre for Suicide Prevention. (2014). *The 5 things we wish all teachers knew about self-harm and suicide.* (PowerPoint slides). Retrieved from https://www.suicideinfo.ca/wp-content/uploads/2014/11/Self_harm.pdf

Institute for Health Economics. (2010). *Means restriction for suicide prevention.* Retrieved from <http://www.ihe.ca/advanced-search/means-restriction-for-suicide-prevention>

Klonsky, E.D., Victor, S.E., & Saffer, B.Y. (2014). Nonsuicidal self-injury: What we know, and what we need to know. *The Canadian Journal of Psychiatry, 59*(11), 565-568.

Kutcher, S., & Szumilas, M. (2008). Youth suicide prevention. *Canadian Medical Association Journal, 178*(3), 2.

British Columbia Ministry of Justice. (2010). *B.C. Coroners Service: 2010 Annual Report.* Retrieved from <http://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/reports/annual/2010.pdf>

Ogrodniczuk, J., & Oliffe, J. (2011). Men and depression. *Canadian Family Physician, 57*(2), 153-155.

Parachute. (2015). *The Cost of Injury in Canada.* Parachute: Toronto, ON. Retrieved from: http://www.parachutecanada.org/downloads/research/Cost_of_Injury-2015.pdf

Statistics Canada. (2014). *Suicides and suicide rate, by sex and by age group (Both sexes no.).* Retrieved from <http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/hlth66a-eng.htm>

ABOUT THE CENTRE FOR SUICIDE PREVENTION

Anyone can learn to identify someone at risk of suicide and get them help.

Call us.

We are the Centre for Suicide Prevention. For 35+ years we've been equipping Canadians with knowledge and skills to respond to people at risk of suicide. We can equip you too. We educate for life.

ABOUT THE MENTAL HEALTH COMMISSION OF CANADA

The Mental Health Commission of Canada (MHCC) is a catalyst for improving the mental health system and changing the attitudes and behaviours of Canadians around mental health issues.

ABOUT THE CANADIAN ASSOCIATION FOR SUICIDE PREVENTION

The Canadian Association for Suicide Prevention (CASP) was incorporated in 1985 by a group of professionals who saw the need to provide information and resources to communities to reduce the suicide rate and minimize the harmful consequences of suicidal behaviour.

If you are in crisis, call your local crisis line.

suicideprevention.ca/need-help



FOR MORE INFORMATION,
VISIT SUICIDEINFO.CA



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada



CASP/ACPS



Canadian Mental
Health Association
Mental health for all



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