

OHIO SUICIDE PREVENTION FOUNDATION

The Relationship Between Mental Illness and Suicide Risk

Nearly 20% of adults experience a mental illness each year, equal to about 50 million Americans.¹ This population is at increased risk of suicide compared to the general population, but it's important to understand that individual disorders contribute different levels of risk and types of risk factors,^{2,3,4,5,6} while the stigma of seeking help creates its own barrier.

No one is immune to suicide, including individuals who do not have a mental illness. However, mental health issues – regardless of whether they meet the criteria of a disorder – often precede a suicide. It's estimated that approximately 90% of individuals who die from suicide had a mental illness, often undiagnosed and untreated.²

Levels of Risk

Research consistently shows that the likelihood of dying by suicide is low, even for those who have a mental illness.² A 2015 study found that the lifetime risk of suicide for someone with a behavioral health disorder is 3.4%. The risk for those without a behavioral health disorder is 0.3% — a 3-point difference.² Put another way, while most people who die by suicide have a mental illness, most people with mental illness do not die by suicide. This is because mental illness does not cause suicidal behavior; rather, painful circumstances often combine with mental illness to make individuals feel as though there is no other way out.³ This is especially true as a result of the pandemic, which has contributed to increased suicide rates in some parts of Ohio.

Almost half of people who die by suicide also had depression, but other behavioral health disorders contribute to suicide risk as well²:

1. **Anxiety Disorders:** Up to 71% of people who attempt suicide have an anxiety disorder, including panic disorder, post-traumatic stress disorder and generalized anxiety disorder.⁴
2. **Bi-Polar Disorder:** Up to 1 in 2 people who have been diagnosed with bipolar disorder attempt suicide sometime during their lifetime.²
3. **Borderline Personality Disorder (BPD):** A 2008 literature review found that up to 80% of those diagnosed with BPD attempt suicide.⁵
4. **Schizophrenia:** An estimated 40% of people diagnosed with schizophrenia attempt suicide.²

Warning Signs

Regardless of whether someone has a behavioral health disorder, it's essential to monitor for certain warning signs.⁸ Sudden, unexplained changes in mood, appearance, weight, eating habits, sleeping habits, or substance use could indicate that someone is struggling with thoughts of suicide. It's also alarming if someone expresses wanting to die or that they feel trapped, helpless, hopeless, or like a burden. When these warning signs appear, it's vital to ask that person if they're considering suicide and to connect them to help.

“Mental illness does not cause suicidal behavior.”

Lowering the Risk

1. A support system of loving friends and family can lower suicide risk by promoting resilience, help-seeking, and healthy living.^{6,7} By monitoring symptoms of unmanaged mental illness and signs of suicidal thinking and behavior, members of a support system may have the chance to intervene with a loved one. They can encourage the person at risk to challenge suicidal thinking, access counseling, and stay safe.
2. Lethal means safety can be practiced by anyone who is considering suicide as well as clinicians, friends, and family members connected to that person.⁷ This approach involves separating the person at risk from methods they can use to kill themselves.⁷
3. Treatment for mental illness can benefit people who are considering taking their own lives.⁶ Counseling, sometimes combined with medication, can help individuals manage symptoms of mental illness by teaching healthy coping mechanisms and strategies to control difficult emotions.⁷ Counselors should also engage in safety planning with clients who disclose suicide ideation. This practice integrates treatment, lethal means safety, and family/friend supports into a complementary, interconnected approach.

Additional Resources

- Man Therapy 20-Point Head Inspection: Man Therapy is a free mental health resource built for “manly men.” Using the 20-Point Head Inspection, men can learn more about their own mental health and if they should consider counseling or other support. <https://mantherapy.org/head-inspection/question>
- Mental Health America (MHA): MHA educates and advocates around mental health issues. Visit their website for wellness tips, getting help for self and others, and more. <https://mhanational.org/>
- National Alliance on Mental Illness (NAMI): NAMI is also focused on education and advocacy. Check out their website to learn about specific mental health conditions and signs of untreated mental illness. <https://nami.org/About-Mental-Illness>

Reference List

1. Prevalence of Mental Illness 2022. Mental Health America. <https://www.mhanational.org/issues/2022/mental-health-america-prevalence-data>. Published 2022. Accessed March 25, 2022.
2. Holmstrand C, Bogren M, Mattisson C, Brådvik L. Long-term suicide risk in no, one or more mental disorders: The Lundby study 1947–1997. *Acta Psychiatrica Scandinavica*. 2015;132(6):459-469. doi:10.1111/acps.12506
3. Robb-Dover K. Mental Health Diagnoses That Can Pose Risks of Suicide. FHE Health – Addiction & Mental Health Care. <https://fherehab.com/learning/mental-health-suicide-risk/>. Published June 15, 2021. Accessed March 25, 2022.
4. Nepon J, Belik SL, Bolton J, Sareen J. The relationship between anxiety disorders and suicide attempts: findings from the National Epidemiologic Survey on Alcohol and Related Conditions. *Depress Anxiety*. 2010;27(9):791-798. doi:10.1002/da.20674
5. Oumaya M, Friedman S, Pham A, Abou Abdallah T, Guelfi J-D, Rouillon F. Borderline personality disorder, self-mutilation and suicide: literature review. *L'Encéphale*. 2008;34(5):452-458. doi:10.1016/j.encep.2007.10.007
6. Substance Abuse and Mental Health Services Administration, Abt Associates. U.S. Department of Health and Human Services; 2016. <https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4935.pdf>. Accessed March 25, 2022.
7. Hogan MF, Grumet JG. Suicide Prevention: An Emerging Priority for Health Care. *Health Affairs*. 2016;35(6):1084-1090. doi:10.1377/hlthaff.2015.1672
8. Get Help. Ohio Suicide Prevention Foundation. <https://www.ohiospf.org/get-help/>. Published October 18, 2021. Accessed March 30, 2022.

ABOUT OHIO SUICIDE PREVENTION FOUNDATION

OSPF gives hope to those in crisis, strength to those in the struggle, and comfort to those in grief. OSPF is a non-profit organization that works tirelessly to help all of Ohio's communities reduce the risk of suicide. Our work includes supporting those impacted by suicide, raising awareness of mental health issues, and coordinating community resources and evidence-based prevention strategies across the state.



(614) 429-1528 / OhioSPF.org

