

Suicide and the Economy: What's The Connection?

By Kenneth Norton LICSW

During times of economic hardship questions are frequently raised by clinicians, health care providers, media and others about the relationship between job loss, credit problems, foreclosures, and other economic factors. The Suicide Prevention Resource Center which is the federal suicide prevention technical assistance center sponsored by SAMHSA (Substance Abuse Mental Health Services Administration) addressed some of these issues in a briefing paper available at www.sprc.org. Many of the points in this article are taken from this paper.

Discussions about this topic are tricky particularly when the media is involved because research has demonstrated that how media reports on suicide may increase risk and/or contribute to suicide contagion. So news reports that focus on the economy as a cause of suicide may themselves increase the risk that vulnerable individuals may act on suicidal thoughts. (Look for a future article in the NH NASW News which will talk more about media reporting on suicide and the importance of safe messaging).

When looking at the impact of the economic recession and suicide it is critical first and foremost, to acknowledge that suicide is a very complex issue. Therefore, it is almost impossible to ever say that any suicide death is the result of a single causal factor. During the current recession hundreds of thousands of people have lost jobs, or had homes foreclosed on, or lost all their retirement savings. Yet despite this fact, relatively few actually engage in suicidal behavior.

What is clear is that the economic downturn can be a contributing (rather causal) factor in suicide deaths. Unemployment, foreclosures and other economic losses often result in feelings of shame, humiliation, and despair for individuals and can lead to isolation, a lack of sense of connectedness or belonging and hopelessness. These are themselves significant risk factors for suicide, and they can in turn lead to more serious manifestations such as increased substance use, addiction and/or depression. For some people who may already have significant risk factors or fewer personal supports to draw upon, economic hardships may lead them to suicidal thoughts, attempts or to taking their own life. Thus rather than causing suicide on its own economic factors can combine with other risk factors and become the straw that breaks the proverbial camel's back.

Economic distress can also result in secondary impacts on individuals. They may lose health care coverage, and/or the ability to pay for expensive deductibles or medications. Particularly in rural areas their transportation options may become limited which can hinder access to mental health care. These factors make it less likely that individuals will seek out treatment when necessary. Another secondary impact is in the area of relationships. Parents who find themselves struggling financially may take several minimum wage jobs working long hours to try and make ends meet leaving less time at home. This may erode important supports and the time they spend with family and result in increased risk for their children or perhaps an aging parent.

Recession can extend well beyond the individual and can cause systemic failures. Revenue in the form of taxes and fees often drop dramatically resulting in wholesale slashing of social services budgets and programs. Likewise, on the private side charitable giving drops precipitously and a tanking stock market drastically reduces grant making to non profit organizations. This may result in drastic cuts to mental health, affordable housing, and other necessary human services and presents increased barriers to accessing timely and appropriate care during a period when the demand for social services and supports far outstrips its availability. Though much harder to measure directly, there is little doubt that reduced access to health and mental health care and erosion of the social service safety net also contributes to increased risk for suicide.

Another frequently asked question is have suicide rates increased *during* (if not as a result of) the economic recession? Official death data for the US is kept by the Center For Disease Control (CDC). The most recent data currently available is 2006 so typically the CDC is at least 24 months behind. So we won't expect official

2009 data until the Spring of 2011 and hopefully we will be well out of the recession by then. Unofficial data year to date in NH indicates we are seeing a slight increase in suicides thus far in 2009 though it is too soon to tell if the trend will hold through the remainder of the year or whether it will be statistically significant.

During these difficult times it is important that we as social workers are especially vigilant to the wide ranging impacts that economic hardships have on individuals, families, and their support systems and/or the social service delivery systems and recognize that these impacts can contribute toward increased risk for suicide. We should do our best to empower people to make an extra effort to stay connected with family and friends, and to seek out treatment and support before situations rise to the level of a crisis. If unemployed they should consider making productive use of their time in ways that will increase their feelings of self worth and connectedness with others by volunteering and/or seeking out job retraining.

It is everyone's responsibility to prevent suicide. Warning signs include: talking about death or dying, isolation, anger/rage, hopelessness, increased use of alcohol or other drugs and mood changes. If you are worried about someone you think is at risk of suicide call the National Suicide Prevention Lifeline 1-800-273-TALK (8255).

This is the tenth in a series of articles for the NH NASW newsletter on suicide prevention. Series articles include: Suicide Prevention: A Public Health Issue, Suicide Prevention Efforts in NH, Survivors of Suicide, Restricting Access to Lethal Means, Suicide Prevention and Veterans, No Harm Contracts, Suicide and Older Adults, Suicide Risk in Lesbian, Gay and Transgender Youth, Clinicians as Survivors, and Media, New Media, Safe Messaging and Suicide Prevention. These articles can be viewed in the Newsroom/Articles section of the Connect website at www.theconnectproject.org. Ken Norton is the Director of NAMI NH's Connect Suicide Prevention Project and can be reached at (603) 225-5359 or knorton@naminh.org.