

National Organizations

American Association of Suicidology

<http://www.suicidology.org/web/guest/stats-and-tools>

This association is a membership based organization. Non-members can locate fact sheets, statistics, books and publications, links, professional organizations, videos, and IS PATH WARM? Training.

American Psychological Association (APA): Depression and Suicide in Older Adults Resource Guide

<http://www.apa.org/pi/aging/resources/guides/depression.aspx>

This resource guide summarizes the latest journal articles, books, reports, and resources for consumers and professionals. Links to additional resources from the committee on aging and other aging organizations are available from this site.

National Alliance on Mental Illness (NAMI): Suicide: Learn, more, learn to help

[http://www.nami.org/Content/ContentGroups/Helpline1/Suicide -
Learn more, learn to help.htm](http://www.nami.org/Content/ContentGroups/Helpline1/Suicide_-_Learn_more_learn_to_help.htm)

This site contains information about the signs of depressions and questions to ask to assess suicidal intent.

National Institute of Mental Health (NIMH): Older Adults: Depression and Suicide Facts

<http://www.nimh.nih.gov/health/publications/older-adults-depression-and-suicide-facts-fact-sheet/index.shtml>

The site provides a brief overview of the statistics on depression and suicide in older adults, including common questions.

National Suicide Prevention Lifeline

<http://www.suicidepreventionlifeline.org/>

Calls are routed to the nearest crisis center from a network of 140 crisis centers. Services are available 24/7 at 1-800-273-TALK (8255). Site also includes list of suicide prevention organizations and peer support organizations.

Substance Abuse and Mental Health Services Administration (SAMHSA): Suicide Prevention

<http://www.samhsa.gov/prevention/suicide.aspx>

This site offers links to national resources and federal activities including reports and statistics.

Suffolk Cognitive Behavioral

<http://www.suffolkcognitivetherapy.com/worksheets.htm>

This site offers a coping strategies checklist that suggests a number of behavioral, cognitive, interpersonal, and general coping strategies.

Suicide Prevention Resource Center

<http://www.sprc.org/>

This resource center provides prevention support, training, best practices registry, and statics. Additional information is available: colleges and universities best practices, American Indian/Alaska Native best practices, and state level statistics.

Literature Reviews

Cattell, Howard. "Suicide in the Elderly." *Advances in Psychiatric Treatment*. Web. 09 Feb. 2011. <<http://apt.rcpsych.org/cgi/eletter-submit/6/2/102>>.

Minayo, Maria Cecilia De Souza, and Fatima Goncalves Cavalcante. "Suicide in Elderly People: a Literature Review." *SciELO - Scientific Electronic Library Online*. Web. 09 Feb. 2011. <http://www.scielo.br/scielo.php?pid=S0034-89102010000400020&script=sci_arttext&tlng=en>.

Nock, Matthew K., G. Borges, E. J. Bromet, C. B. Cha, R. C. Kessler, and S. Lee. "Suicide and Suicidal Behavior." *Epidemiologic Reviews* 30.1 (2008): 133-54.

Yeates, MD, Conwell, and Caitlin Thompson, PhD. "Suicidal Behavior in Elders." *National Institute of Health*. Web. 09 Feb. 2011. <<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2735830/>>.

Glossary of Suicide Prevention Terms

As part of the National Strategy for Suicide Prevention's Goals and Objectives for Action, a glossary of terms is included to clarify the usage of terms in discussion of suicide prevention. For the full 206 page document, download from <http://store.samhsa.gov/shin/content//SMA01-3517/SMA01-3517.pdf>

Activities – the specific steps that will be undertaken in the implementation of a plan; activities specify the manner in which objectives and goals will be met.

Anxiety disorder- an unpleasant feeling of fear or apprehension accompanied by increased physiological arousal, defined according to clinically derived standard psychiatric diagnostic criteria.

Best practices – activities or programs that are in keeping with the best available evidence regarding what is effective.

Biopsychosocial approach – an approach to suicide prevention that focuses on those biological, psychological and social factors that may be causes, correlates, and/or consequences of mental health or mental illness and that may affect suicide behavior.

Bipolar disorder – a mood disorder characterized by the presence of history of manic episodes, usually, but not necessarily, alternating with depressive episodes.

Causal factor – a condition that alone is sufficient to produce a disorder.

Comprehensive suicide prevention plans – plans that use a multifaceted approach to addressing the problem; for example, including interventions targeting biopsychosocial, social and environmental factors.

Comorbidity – the co-occurrence of two or more disorders, such as depressive disorder with substance abuse disorder.

Connectedness – closeness to an individual, groups or people within a specific organization; perceived caring by others; satisfaction with relationship to others, or feeling loved and wanted by others.

Consumer – a person using or having used a health service.

Contagion – a phenomenon whereby susceptible persons are influenced toward suicidal behavior through knowledge of another person's suicidal acts.

Culturally appropriate – a set of values, behaviors, attitudes, and practices reflected in the work of an organization or program that enables it to be effective across cultures; includes the ability of the program to honor and respect the beliefs, language, interpersonal styles, and behaviors of individuals and families receiving services.

Culture – the integrated pattern of human behavior that includes thoughts, communication, action, customs, beliefs, values, and institutions of a racial, ethnic, faith or social group.

Depression – a constellation of emotional, cognitive and somatic signs and symptoms, including sustained sad mood or lack of pleasure.

Effective – prevention programs that have been scientifically evaluated and shown to decrease an adverse outcome or increase a beneficial one in the target group more than in a comparison group.

Elderly – persons aged 65 or more years.

Environmental approach – an approach that attempts to influence either the physical environment (such as reducing lethal) or the social environment (such as providing work or academic opportunities).

Epidemiology – the study of statistics and trends in health and disease across communities.

Evidence-based – programs that have undergone scientific evaluation and have proven to be effective.

Frequency – the number of occurrences of a disease or injury in a given unit of time; with respect to suicide, frequency applies only to suicidal behaviors that can repeat over time.

Gatekeepers – those individuals in a community who have face-to-face contact with large numbers of community members as part of their usual routine; they may be trained to identify persons at risk of suicide and refer them to treatment or supporting services as appropriate.

Intervention – a strategy or approach that is intended to prevent an outcome or to alter the course of an existing condition (such as providing lithium for bipolar disorder or strengthening social support in a community).

Means – the instrument or object whereby a self-destructive act is carried out (i.e. firearm, poison, medication).

Means restriction – techniques, policies, and procedures designated to reduce access or availability to means and methods of deliberate self-harm.

Methods – actions or techniques which result in an individual inflicting self-harm (i.e. asphyxiation, overdose, jumping).

Mental disorder – a diagnosable illness characterized by alterations in thinking, mood, or behavior (or some combinations thereof) associated with distress that significantly interferes with an individual's cognitive, emotional or social abilities; often used interchangeably with mental illness.

Morbidity – the relative frequency of illness or injury, or the illness or injury rate, in a community or population.

Objective – a specific and measurable statement that clearly identifies what is to be achieved in a plan; it narrows a goal by specifying who, what, when and where or clarifies by how much, how many, or how often.

Outcome – a measurable change in the health of an individual or group of people that is attributable to an intervention.

Postvention – a strategy or approach that is implemented after a crisis or traumatic event has occurred.

Prevention – a strategy or approach that reduces the likelihood of risk of onset, or delays the onset of adverse health problems or reduces the harm resulting from conditions or behaviors.

Protective factors – factors that make it less likely that individuals will develop a disorder; protective factors may encompass biological, psychological or social factors in the individual, family and environment.

Rate – the number per unit of the population with a particular characteristic, for a given unit of time.

Resilience – capacities within a person that promote positive outcomes, such as mental health and well-being, and provide protection from factors that might otherwise place that person at risk for adverse health outcomes.

Risk Factors – those factors that make it more likely that individuals will develop a disorder; risk factors may encompass biological, psychological or social factors in the individual, family and environment.

Selective prevention intervention – intervention targeted to sub-groups of the population whose risk of developing a health problem is significantly higher than average.

Sociocultural approach – an approach to suicide prevention that attempts to affect the society at large, or particular subcultures within it, to reduce the likelihood of suicide (such as adult-youth mentoring programs designed to improve the well-being of youth).

Social services – organized efforts to advance human welfare, such as home-delivered meal programs, support groups, and community recreation projects.

Suicidal act (also referred to as suicide attempt) – a potentially self-injurious behavior for which there is evidence that the person probably intended to kill himself or herself; a suicidal act may result in death, injuries, or no injuries.

Suicidal behavior – a spectrum of activities related to thoughts and behaviors that include suicidal thinking, suicide attempts, and completed suicide.

Suicidal ideation – self-reported thoughts of engaging in suicide related behavior.

Suicidality – a term that encompasses suicidal thoughts, ideation, plans, suicide attempts, and completed suicide.

Suicide – death from injury, poisoning, or suffocation where there is evidence that a self-inflicted act led to the person's death.

Suicide attempt – a potentially self-injurious behavior with a nonfatal outcome, for which there is evidence that the person intended to kill himself or herself; a suicide attempt may or may not result in injuries.

Universal prevention intervention – intervention targeted to a defined population, regardless of risk; (this could be an entire school, for example, and not the general population per se).