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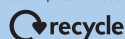
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Suicide: children and young adults

Ian Peate FRCN OBE, Editor in Chief, *British Journal of Nursing*



Suicide was the leading cause of death among children and young adults in Scotland between 2011 and 2020. Public Health Scotland (PHS) (2022a) determined that around a quarter (25.7%) of all deaths in those aged 5–24 years was due to probable suicide, more than the combined number of young people who died from road accidents and accidental poisonings. In Scotland, the highest suicide rate among males and females is among those aged 35–54 years (PHS, 2022b).

Among those aged 5–24 years, the average suicide rate overall was 6.6 deaths per 100 000, significantly lower than the average 17.5 deaths per 100 000 people among those aged 25 years and over (PHS, 2022a). In the period covered by the PHS report 820 young people living in Scotland died by suicide, or an average of seven deaths per month.

More young people need help with their mental health: not all of them are receiving it or as quickly as they need it. The years of COVID-19 restrictions, constant uncertainty, lack of investment in services, along with disrupted schooling, are likely to be key factors associated with the rise in referrals for young people. The same applies to other countries in the UK. Other possible reasons are increased awareness of mental health issues and how to seek help, including among young people, who still face long waiting times and may be at risk and in distress while they wait.

There is a correlation between the least well off and the affluent, with least well-off Scots twice as likely as to take their own lives than their more affluent counterparts (PHS, 2022a). In 2020, the rate of probable suicide among those living in the most affluent areas was 5.1 per 100 000 compared with 12.4 per 100 000 for those living in the poorest areas.

The most commonly used methods, among males

in both age groups and women aged 15–24 years overall, was hanging, strangulation and suffocation. These methods were more prevalent among 5–24 year-olds (63.9% of deaths) than among those aged 25 years and over (45.9% of deaths). Deaths from self-poisoning, drowning or submersion were significantly less common. The widespread use of hanging brings a major challenge to prevention. In institutional settings, the risk can be reduced, with the environment carefully risk assessed, however most of these incidents take place in the community. To date, there has been no proven, effective strategy to prevent suicide by hanging.

Among 5–24-year-olds, suicides were significantly less likely to take place in the home or residential institution than among those aged 25 years and over. The former were also significantly less likely to have had contact with health services in the period before death (65.6%) than the older age group (79.8%). Those not in contact with services prior to death may have had unmet needs, which they had not felt able to articulate. They and those close to them may not have been aware of the indicators of psychological distress and symptoms of mental ill health that can increase the risk of suicidal thoughts and behaviours.

Those who plan and commission services will have to give thought to improving how their organisation works and how they respond to those in need, and to consider how they reach and deliver services for groups at high risk. Every suicide brings heartbreak. Governments must make suicide prevention a priority and every one of us has to work relentlessly to do so, ensuring that those who are affected have access to appropriate support. Our understanding of the circumstances and inequalities associated with suicide deaths continues to grow – and this learning can help us as we design, implement and evaluate more effective preventive actions in future. **BJN**

Public Health Scotland. Suicide among young people in Scotland.

A report from the Scottish Suicide Information Database. 2022a. <https://tinyurl.com/2eey2wt> (accessed 17 January 2023)

Public Health Scotland. A profile of deaths in Scotland 2011–2019. A report from the Scottish Suicide Information Database (ScotSID). 2022b. <https://tinyurl.com/39tb5fhf> (accessed 17 January 2023)

For those in crisis or struggling to cope help is available

- In an emergency, dial 999
- 24/7: NHS 24 Mental Health Hub, service provides urgent mental health assessment. Call 111
- Samaritans. A helpline for anyone feeling low or considering suicide. Call 116 123