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Improving the Safety of Lethal Means Prevents Suicide



Issue

About half of Americans who died by suicide in 2016 used a firearm, while just more than a quarter suffocated or hanged themselves. The remaining quarter either poisoned themselves or used other means.¹ Researchers have consistently found that when you reduce access to or improve or enhance the safety of the means by which individuals attempt suicide, you reduce suicide.^{2,3,4,5,6} Also, individuals generally do not seek other ways to attempt suicide if the safety of one method is improved — a so-called substitution effect.^{6,7,8}

Key Findings

Firearms

People with access to firearms were more than three times as likely as those without access to die by suicide. Reducing access to firearms could reduce related suicides by 32% among youths and by 6.5% among adults. Safer storage of firearms in the home, practiced by only 22.5% of Veterans who own firearms, may help. People who kept their firearms locked or unloaded were at least 60% less likely than those who stored their firearms either unlocked, loaded, or both to die from firearm-related suicide.

Countries that promote firearm safety have fewer firearm-related suicides.¹³ States that implemented firearm safety measures have seen suicides decrease 2%–5% without a substitution effect. An estimated 600 suicides per year could be prevented if all states had a waiting period.¹⁴

Poison

Several studies have documented the effectiveness of restricting the sale of medications and improving packaging and dosing safety in preventing suicide. 5,8,9,15,16,17

Suffocation

Suicide by suffocation or asphyxiation may be harder to address due to the number of readily available household objects that can be used.¹⁸ Modifications to the designs of relatively weak anchor points may be helpful.¹⁹ VA medical centers' use of the Mental Health Environment of Care Checklist has led to a sustained reduction in inpatient suicides, including hanging-related suicides.²⁰

Other Means

The fourth most common means of suicide in the U.S. is jumping from tall structures. Studies have found that the installation of physical barriers, such as rails or fences, at suicide hotspots prevented suicides and generally did not result in a substitution effect.^{21,22}

Implications

Reducing access to the means individuals use to attempt suicide, or improving the safety of those means, saves lives. People who attempt suicide by less lethal means are more likely to survive.²³ Also, many people who attempt suicide are not determined to die.²⁴ Ninety percent of people who attempt suicide and survive do not later go on to die by suicide.²⁵

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Ways You Can Help

- Ask Veterans at low risk for suicide whether they keep firearms in their homes. Discuss ways they can protect
 themselves and others in their home from unintentional harm, including by safely storing firearms. Safe storage
 means storing firearms unloaded and in a secure location, such as a firearm safe, when not in use. Avoid sounding
 judgmental; begin conversations with open-ended questions (e.g., "Do you have any concerns about the accessibility
 of your weapons?"). Focus on Veterans' health. Mental health professionals are equipped to advise Veterans about
 the potential health risks of firearms and collaboratively brainstorm harm-reduction measures.
- Counsel Veterans at risk for suicide, and their families or other household members, on temporarily storing firearms outside
 the home until it is again safe, if viable according to state law.²⁶ If not possible, discuss other ways to reduce access to lethal
 means (e.g., suggest removing firing pins or having someone other than the Veteran hold the keys to their gun safe).
- Discuss safe storage or disposal of opioids and other drugs with Veterans before they reach a crisis point. The VA Center
 for Medication Safety has information on safe medication disposal: www.pbm.va.gov/vacenterformedicationsafety/
 vacenterformedicationsafetyprescriptionsafety.asp.

There is no single cause of suicide. It is often the result of a complex interaction of risk and protective factors at the individual, interpersonal, community, and societal levels. To prevent Veteran suicide, we must maximize protective factors and minimize risk factors at all of these levels.

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