Suicide and Suicidal Ideation in the United Kingdom

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A data analysis has revealed a decline in the United Kingdom’s suicide rate during a period when there was no decline in suicidal ideation. The authors suggest that the study may demonstrate the value of implementing key aspects of the British National Suicide Prevention Strategy as well as the need to target the mental health of specific groups at high risk for suicide for improvement.

The analysis revealed that suicide rates fell in the UK from 2000 to 2007, despite the fact that the rate of suicidal ideation did not fall during the same period. The authors suggest that if the drop in the suicide rate over this period had been caused by an overall improvement in mental health, the rate of suicidal ideation should also have declined. They speculate that the difference between these trends may reflect success in two goal areas of the National Suicide Prevention Strategy (published in 2002): focusing prevention efforts on especially high-risk groups, and reducing access to lethal means. Starting in 2005, the pain medication co-proxamol was phased out of the market because of its high rate of use in fatal self-poisoning. This change was accompanied by a major reduction in deaths from analgesic poisoning as well as a reduction in probable suicide deaths by self-poisoning (2005-2007).

The 2007 data revealed that women 44-50 years of age had a high rate of suicidal ideation as well as the highest age-adjusted rate of common mental disorders. The authors suggest that these findings, combined with data showing that this age group also has the highest suicide rate among women, have “clear implications for treatment access, availability, and delivery in primary care.” Other groups that should be prioritized for increased action based on relatively high rates of both suicide and suicidal ideation include young men, and people over the age of 80. The 2007 survey also revealed that fewer than 75 percent of adults with mental disorders were receiving treatment, which the authors suggest supports the emphasis of the UK’s “second-generation” National Suicide Prevention Strategy (published in 2012) on improving mental health among specific groups at high risk for suicide, including “older people with depression, disability, and chronic painful conditions; younger people vulnerable due to social and economic circumstances; and people with untreated depression.”

This study used data from the 2000 and 2007 British National Psychiatric Morbidity Surveys, household surveys of about 6800 people over the age of 15.


SPRC Commentary
This article provides evidence to support the utility of a national suicide strategy. Anyone interested in working to prevent suicide in the United States should become familiar with the 2012 US National Strategy for Suicide Prevention [1].

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