



Key Points

What is the issue?

There is a cultural perception that men between the ages of 35 and 64 have power and influence, are independent and competent, and are capable of taking care of both themselves and their families. Yet surprisingly, men in the middle years of life have a suicide rate that is twice as high as the national average. Historically, however, men in this age group have not been the focus of suicide prevention efforts.

"Men in the middle years historically have received less attention in the suicide prevention field, even though they account for a high number of suicide deaths."

Jeff Sung, Psychiatrist

Why is this issue important?

Forty percent of suicide deaths are men between the ages of 35 and 64. If we want to reduce the suicide rate in this country, we need to address the suicide issue among men in the middle years. Our review of the literature suggests that some of the current suicide prevention approaches may not be effective for men in the middle years.

What are the challenges to addressing the problem?

Access to firearms:

- Men are more likely than women to use firearms when making a suicide attempt.
- Firearms are the most lethal method of suicide—if a person uses a gun to end emotional pain, it will likely be fatal.

Research on treatment:

- Most research on suicide prevention treatments has been conducted on women, the majority of whom were under 30 years old.
- We can't assume what works for women will work for men.

Conventional mental health treatment:

- Many men at risk of suicide will not seek conventional treatment in mental health or health care settings.

How can we overcome these challenges?

Collaborate to reduce access to firearms:

- Mental health and health care providers: Talk to men about reducing their access to firearms during a crisis period
- Firearm dealers and organizations: Provide information on suicide prevention and the role of firearms in suicide.

Invest in research relevant to men:

- Recruit male study participants and report on treatment effects based on gender

Tailor mental health treatment to men:

- Practice person-centered care by engaging men in ways that work for them:
 - » Go to where men at-risk of suicide can be found: Online, workplaces, unemployment offices, family court, justice systems, substance abuse agencies, homeless shelters
 - » Use the messages that are most effective with this population.
- Pursue upstream prevention, which is earlier identification of and intervention for men with suicide risk factors such as depression, substance abuse, and violence.

Suicide Prevention Resource Center

Web: <http://www.sprc.org> | E-mail: info@sprc.org | Phone: 877-GET-SPRC (438-7772)