



CASP CANADIAN ASSOCIATION
FOR SUICIDE PREVENTION

ACPS ASSOCIATION CANADIENNE POUR
LA PRÉVENTION DU SUICIDE

Hope And Resiliency Should Be Reflected In All Suicide Prevention Activities And Messaging

Suicide Prevention is Everyone's Responsibility

No single discipline or level of societal organization is solely responsible for suicide prevention; individuals in many roles and at all levels of community/society and government can and should contribute to the prevention of suicide related behaviours. Suicide prevention therefore requires collaboration where no discipline or stakeholder is privileged over another.

Talking About Suicide Makes a Difference

Language is key to caring, understanding and being non-judgmental. When talking about suicide or suicide related behaviours, use language of hope and comfort that helps to avoid shame, and excludes the words “committed”, “successful suicide” or “failed suicide attempt”. Instead using terms such as “died by suicide” and “suicide attempt” are preferred. Suicide Prevention is aided by addressing the stigma of suicide and mental illness.

Prevention, Intervention and Postvention

Hope, Help, and Healing are the three areas of focus when working in the area of suicide.

They can be understood as the before, during and after experiences of thoughts of suicide, attempts or death. Everyone has a role and contribution to preventing suicide in one or more of these areas. You don't have to be an expert. You do need to know how to take care of yourself and help another person get to safety if the need arises.

- Prevention is the umbrella in working toward reducing deaths by suicide; increasing awareness, eliminating stigma, knowing what to do in the event that



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you or someone you know experiences thoughts or behaviours associated with suicide. It's also having the awareness before someone is in crisis.

- Intervention includes coping and intervening in the event that you or someone you know is experiencing suicidal thinking or behaviours.
- Postvention includes the skills and strategies for taking care of yourself or helping another person heal after the experience of suicide thoughts, attempts or death.

Certain Segments of Our Society, Especially Those Who Have Been Marginalized, are at Greater Risk of Suicide

Within the Canadian population, the unique conditions resulting from marginalization, institutionalized trauma, colonialism, structural violence, racism, prejudice, acculturation and homophobia have contributed to First Nations, Inuit and LGBTQ+ people having higher rates of suicide related behaviours.

In Canada, older white males also have among the highest suicide rates with contributing factors including cultural expectations and gender/societal roles.

Societal Attitudes and Conditions Have a Profound Effect on Suicide and Suicide Prevention

Suicide risk can be reduced with individual and societal commitments to social justice, equality and equity including but not limited to addressing and speaking out on such issues as stigma, homophobia, racism, institutional poverty, misogyny, abuse, oppression, and patriarchy along with ensuring access to effective and appropriate psychological and medical treatment and support.

Suicide prevention should cover the life span.

Suicide Prevention should be embedded into the mosaic of community resources

Suicide Prevention operates most effectively when its activities are coordinated and integrated and takes the continuum of prevention, intervention and postvention into account.



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Suicide Prevention is strengthened when it is guided by the Principles of Trauma Informed Care

There is a well-established link between psychological trauma and suicide.

Given the prevalence of psychological trauma in our society, CASP believes suicide prevention should include a belief in the fundamental right for every person to receive services that are driven by the principles of trauma informed care.

Knowing When and How to Ask about Suicide Saves Lives

Every person can know when and how to ask about and talk to someone about suicide – just like we know what to do with physical pain.

Suicide Prevention requires the support of open and direct talk about suicide safety and training, to be comfortable in asking about suicide and helping in suicide risk situations regardless of station or discipline in the community.

Suicide Prevention Strategies and Programming Must be Knowledge-Based

Knowledge-informed strategies are based in research, culture and lived experience.

Suicide prevention must be informed and guided through the pivotal role of bereaved survivors and those with lived experience of suicidality.

Suicide prevention requires a respect of our multicultural and diverse society that embrace a shared and mutual responsibility to support the dignity of human life and each person.

Suicide Prevention Leaders and Supporters Encourage Diverse Points of View

CASP believes that suicide prevention leaders assume a responsibility to challenge and question our routine ways of thinking about suicide and have a curiosity and appreciation of diverse points of view.

Commitment to a Community Based Approach

CASP is committed to a community based, life building/affirming, person-centered, and holistic approach to Suicide Prevention that recognizes the interconnectedness of the body, mind and spirit.

Suicide & Mental Illness

There is no single mental illness diagnosis that is exclusively responsible for death by suicide. The majority of people who live with a mental illness do not attempt nor die by suicide. Some estimated facts:

- 85%-98% of people diagnosed with depression do not die by suicide.
- 80%-97% of people diagnosed with bipolar illness do not die by suicide.
- 85%-94% of people diagnosed with schizophrenia do not die by suicide.

Risk for death by suicide is increased if a person suffers from depression alongside schizophrenia, bipolar illness, substance abuse, anxiety disorders. Those who struggle with a diagnosed personality disorder can be up to 3x more likely to die by suicide those without and risk is increased if they also struggle with a substance abuse disorder. It is important to get treatment for a mental illness.