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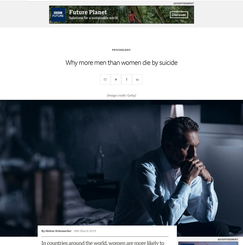
Why more than women die by suicide

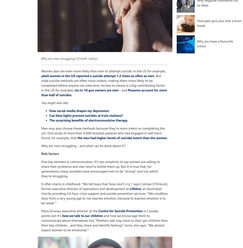

Zenga credit: Getty

By Helena Schumacher - 19th March 2019

In countries around the world, women are more likely to be diagnosed with depression and to attempt suicide. So why is the male suicide rate still several times higher than female?

Suicide is a complex issue with a tangled multitude of causes – and it is not something that suicide rescue we can take fully know the ways behind it.

Still, as mental health awareness has grown, there is greater public understanding about potential contributing factors. One of the questions that has persisted, though, is why more men than women in most countries take their own life. **Why women tend to have higher rates of depression diagnoses**


Why are men struggling? Credit: Getty

Women also are even more likely than men to attempt suicide. In the US for example, **adult women in the US reported a suicide attempt 1.5 times as often as men.** But male suicide methods are often more violent, making them more likely to be successful. Men are **three times more likely to die by suicide than women** in the US for example, **six to 10 per owners are men**. and **firearms account for more than half of suicides.**

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Men may also choose these methods because they're more intent on completing the act. In the US, for example, that the **men had higher levels of suicidal intent than the women.**

Why are men struggling – and what can be done about it?

Risk factors

One key element is communication. It's too simplistic to say women are willing to share their problems and men tend to battle them up. But it is true that, for centuries, men and women have encouraged men to be "strong" and not admit they're struggling.

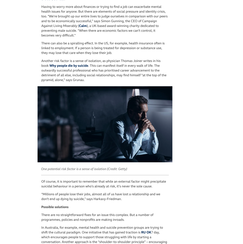
In other charts in childhood. "We tell boys that 'boys don't cry'," says Colman O'Driscoll, the executive director of operations and development at **Lifeline**, a Australian charity providing 24-hour crisis support and suicide prevention services. "We condition them to be men's young age to not express emotions, because to express emotions to be 'weak'."

Maria Gruszka, executive director at the **Centre for Suicide Prevention** in Canada, pitches **a lot as talk to our children** and that we encourage them to communicate about themselves too. "Mothers talk way more to their girl children than they do to their male children and identify feelings" Gruszka, she says. "The utmost expert scientist to be emotion."

From a young age, we condition men to think that crying is a sign of weakness (Credit: Getty)

But men may be less likely to admit when they feel vulnerable, whether to themselves, friends, or a GP. They also can be more reticent than women to ask for a doctor. A UK British Medical Journal study found **general primary care consultation rates were 1.5 times higher for women than men**, and women were more likely to seek out primary care physicians received antidepressant prescriptions, were 8% lower in men than women.

"Men seek help for mental health less often," Harkaya-Friedman says. "It's not that men don't have the same issues as women – but they're a little less likely to know they need help and discuss or mental health conditions that are putting them at greater risk for suicide."

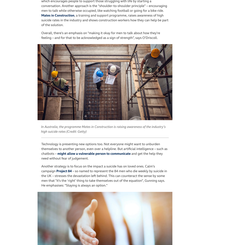

Men seek help for mental issues less often (Credit: Getty)

If a person is not even cognisant they have a condition causing their distress, then they're less aware anything could be done to help them. Only a third of people who have a mental illness are in mental healthcare treatment at the time, says Harkaya-Friedman.

Dangerously, rather than seeking help when struggling established channels, some men may attempt to "self-medicate".

"There tends to be more substance use and alcohol use among males, which may just reflect the stigma they're feeling – but we know it compounds the issue of suicide," says Harkaya-Friedman.

Indeed, **men are nearly twice as likely as women to meet criteria for alcohol dependence.** But **drinking can deepen depression and increase impulsive behaviours** and **disinhibition is known risk factor for suicide.**

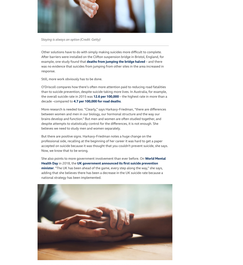

There tends to be more substance and alcohol use among men, which can be a dangerous attempt to "self-medicate" (Credit: Getty)

Other risk factors can be related to family or work. When clients at economic downturn that results in increased unemployment, for example, there tends to be an associated increase in suicide – typically 18-24 months after the downturn. One 2015 study found that **for every 1% increase in unemployment there is 0.19% increase in suicide rate.**

Having to worry more about finances or trying to find a job can exacerbate mental health issues for anyone. But there are elements of social pressure and identity crisis, too. "Men are the breadwinners, and if they're unemployed or underemployed, that can be the economically successful," says Simon Gunning, the CEO of Lifeline Australia's Against Losing Mentality **Crisis**, a UK based award-winning charity dedicated to suicide prevention. "I think there are economic factors and control issues. It becomes very difficult."

There can also be a sampling effect, in the US, for example, health insurance often is related to employment. If a person is being screened for depression or substance use, they may lose that care when they lose their job.

Another risk factor is a sense of isolation, as physician Thomas Joiner writes in his book **Why people die by suicide**. This can manifest itself in every walk of life. The "social" aspect of suicide prevention is important, Gunning says, because people are deprived of all ties, including social relationships, may find himself "at the top of the pyramid, alone," says Gruszka.


Elon presented risk factors as a sense of isolation (Credit: Getty)

Of course, it is important to remember that while an extreme factor might precipitate suicide behaviour in a person who's already at risk, it's never the sole cause.

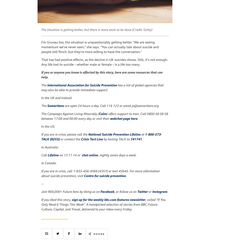
"Millions of people lose their jobs, almost all of us have lost a relationship and we don't end up taking by suicide," says Harkaya-Friedman.

Possible solutions

There are no straightforward fixes for an issue this complex. But a number of programmes, policies and nonprofits are making inroads.

In Australia, for example, mental health and suicide prevention groups are trying to shift the cultural paradigm. One initiative that has gained traction is **RU OK?**, a nonprofit organisation dedicated to suicide prevention. Its slogan is "Ask, listen, encourage. Another approach is the "Movember to shoulder campaign," encouraging men to walk while otherwise occupied, like watching football or going for a bike ride. Lifeline Australia's Gunning says the campaign has contributed to a decline in suicide rates in the relevant and shows how communities and families can help the part of the solution.

Overall, there's an emphasis on "making it okay for men to talk about how they're feeling, and for that to be acknowledged as a sign of strength," says O'Driscoll.


In Australia, the programme Movember to Continuation is raising awareness of the industry's high suicide rate (Credit: Getty)

Technology is presenting new options too. Not everyone might want to unburden themselves to another person, even over a helpline. But artificial intelligence – such as chatbots – **might allow a vulnerable person to communicate** and get the help they need without fear of judgement.

Another strategy is to focus on the impact a suicide has on loved ones. Calvin Harkaya-Friedman, the director of suicide prevention at the Jed Foundation in the UK, stresses the devastation left behind. This can sometimes "the same by some mean that "It's the right" thing to take themselves out of the equation", Gunning says. He emphasises: "Empathy is always an option."

Staying in always an option (Credit: Getty)

Other solutions have to do with simply making suicides more difficult to complete. After barriers were installed on the Clifton suspension bridge in Bristol, England, for example, suicides dropped by 90% in the following years. Some people who jump from sees no evidence that suicide from jumping from other sites in the area increased in response.

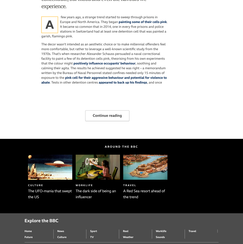
Still, more work obviously has to be done.

O'Driscoll compares how there's often more protection and to reducing road fatalities than there is for suicide. In Australia, for example, the road fatality rate has dropped the overall suicide rate is 2011 was **12.4 per 100,000**. The highest suicide rate in a decade - compared to **4.7 per 100,000 for road deaths.**

Where research is needed too. "Clearly," says Harkaya-Friedman, "there are differences between women and men in our biology, our hormonal structure and the way our brains are wired. Research has shown that the rate of suicide attempts in women is despite attempts to statistically control for the differences. It is not enough. The believes we need to study men and women separately.

But there are positive signs. Harkaya-Friedman notes a huge change on the professional side, resulting at the beginning of the year. It was hard to get a paper published on suicide prevention. Now, it's straight that you can publish suicide into scan. Now, we know that to be wrong.

She also points to more government involvement than ever before. The **World Mental Health Day** in 2019 **UK government announced its first suicide prevention minister**. "The UK has been ahead of the game, every step along the way," she says, "and I think that's why we have seen a decrease in the UK suicide rate because a national strategy has been implemented.


The situation is getting better, but there's more work to be done (Credit: Getty)

For Grusza, too, the situation is unquestionably getting better. "We are seeing improvements," she says. "We are seeing more people talking about suicide and people with family, but they're more willing to have the conversation."

That has had positive effects, as the decline in UK suicide shows. Still, it's not enough. Any life lost to suicide – whether male or female – is a life too many.

If you or anyone you know is affected by this story, here are some resources that can help:

The **International Association for Suicide Prevention** has a list of global agencies that may also be able to provide immediate support.

In the UK and Ireland:

The **Samaritans** are open 24 hours a day. Call 116 123 or email jo@samaritans.org.

The Campaign Against Living Miserably (**Calm**) offers support to men. Call 0800 58 58 58 between 17:00 and 00:00 every day or visit their **website/live chat** here.

In the US:

Call 988 to stay, please call the **National Suicide Prevention Lifeline** at **1-800-273-TALK (8255)** or contact the **Crisis Text Line** by texting **741-741** or **741741**.

In Australia:

Call **Lifeline** on 13 11 14 or **chat online**, nightly seven days a week.

In Canada:

If you are in crisis, call 1-833-456-4566 (416/647-4566) or text 45645. For more information about suicide and prevention, visit **Centre for suicide prevention**.

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PSYCHOLOGY

How colours affect the way you think

Image credit: Ken Tanigawa/Getty Images

By Mark Ellwood - 14th Oct 2019

Our world is awash with a rainbow of colours, but certain shades can have a surprising impact on our ability to concentrate, our mood and even the flavours we experience.

A few years ago, a strange trend started to sweep through offices in Europe and North America. They began **painting rooms of their cold, grey offices in a shade of pink**. The idea was that the calming hue would make employees – stations in Switzerland that at least one dentistry – and that was painted a warm, flamingo pink.

The decor wasn't intended as an aesthetic choice or to make individual offenders feel more comfortable. It was a deliberate attempt to calm the inmates. In the late 1970s, That's where researcher Alexandra Schauss persuaded a secure correctional facility to paint a few of its detention cells pink, theorizing from his own experiments that the colour had a tranquillising effect on psychiatrically disturbed people. Calming their rights. This results he achieved suggested he was right – a recommendation written by the Bureau of Naval Personnel stated confines needed only 15 minutes of exposure to the **pink cell for their aggressive behaviour and potential for violence to abate**. Tests in other detention centres **appeared to back up this finding**, and soon

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