

Suicide and Substance Use Basics

Audience: This resource was developed for health and social service providers.

Content warning: These topics may be uncomfortable for some readers. For help with a mental health crisis or concerns about suicide, call Canada Suicide Prevention Service: 1-833-456-4566. Talk Suicide Canada website: https://talksuicide.ca/

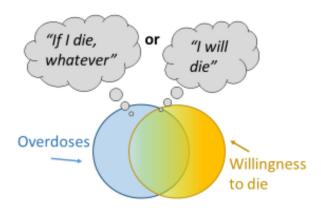
1. Suicide is about managing pain. In the context of suicidality, substance use is frequently about managing pain.

Substance use in the context of suicidality is often a response to trauma and both are used to manage psychological pain. Unmet needs can lead to unbearable psychological pain that the person tries to manage with substances that numb the pain or escape their reality by thinking about, planning, and attempting suicide.

2. Suicide and substance use stigma multiply when the two intersect.

Considered by many to be immoral or 'wrong', suicide and substance use stigma often prevent people from reaching out for help. People may feel pressured to be strong and risk looking weak if they need help dealing with their problems. A non-judgmental attitude will help people who are feeling suicidal to feel more comfortable and contribute to better clinical interactions and outcomes.

Overdoses & willingness to die



5. Substance use can protect against suicidality.

Sometimes substances help to distract from suicidal thoughts or lessen the intensity of unbearable psychological pain, thereby, reducing the need to escape through suicide. People are acutely aware that health care professionals intend on motivating people to reduce or stop using substances and this pressure may contribute to further distress and discomfort seeking health care. Accepting the role of substance use in people's lives will help them to continue living.

For help with a mental health crisis or concerns about suicide, call Canada Suicide Prevention Service: 1-833-456-4566. Talk Suicide Canada website: https://talksuicide.ca/

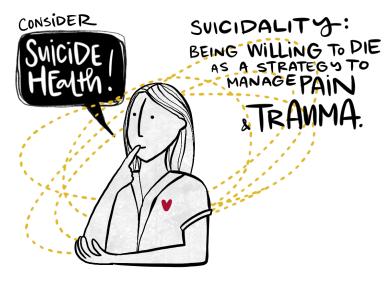
There is support available to help.

3. Many people who overdose on opiates may believe and hope that their use might end their lives;

Up to 50% of all overdoses are falsely identified as accidental overdoses, when in fact they are suicide attempts. Services for people using opiates must include suicide care.

4. Non-lethal overdose attempts are not 'attention-seeking'.

A common assumption is that if a person really wanted to die, then they would have used more lethal means or already killed themselves. Although non-lethal suicide attempts are sometimes a way of reaching out for help, people who make attempts are willing to die for the chance to receive help.



Financial contribution from

