Information Sheet: Socioeconomic Deprivation and Suicidal Behaviour

This sheet is based on information from the Samaritans’ report “Dying from Inequality”, a review of evidence by Samaritans and nine leading social scientists. The report seeks to answer why socioeconomic deprivation relates to suicidal behaviour.

How does socioeconomic deprivation relate to suicidal behaviour?

It’s been well known for some time that suicide is an inequality issue as disadvantage and vulnerability, including losing your job, being in debt and having insecure housing, mean you are more likely to die by suicide. So much so, that if you’re male, in the lowest social class, and living in the most deprived areas, then you are up to ten times more likely to die by suicide than those in the highest social class living in the most affluent areas. Rates of hospitalised self-harm are also twice as high in the most deprived neighbourhoods compared to the most affluent, which is significant because more than 50% of people who die by suicide have previously self-harmed.

What evidence is there for this?

Samaritans reviewed three types of evidence to try and answer this question:

Societal: political, economic and social policies related to, for example, economic change, employment, social support and the labour market; stigmatised attitudes towards people on the basis of their socioeconomic standing or their suicidal behaviour.

Community: the local economic, social, cultural and physical environment, including, for example, geographical location, job opportunities, service availability and accessibility, and home ownership.

Individual: demographic characteristics, such as gender and age; socioeconomic position, including occupational social class and type of employment; mental health; and health-related behaviours.

What sorts of things increase risk?

The socioeconomic disadvantages that increase the risk of stress, negative life events, and a rise in suicide risk include:

- Living in an area of high unemployment and/or at a time of an economic downturn where there is a sharp rise in unemployment, and a lack of local job opportunities.
- Job insecurity and downsizing, or working in non-traditional and more precarious situations such as part-time, irregular and short-term contracts and/or with various employers.
- Living in poorer areas, where there is typically a higher concentration of insecure tenure and low cost (social) rented housing.
- Lack of local support services, including mental health services.
- Poverty and unmanageable debt, including being declared bankrupt and/or losing one’s own home.
- Poor educational attainment.

There are also a range of non-socioeconomic determinants which contribute to suicidal behaviour, such as public attitudes and stigma, poor quality physical environment, experiencing negative events in childhood, relationship breakdown, social isolation, feelings of defeat or humiliation and poor physical and mental health.

There is a cumulative effect to suicide risk if a person experiences multiple negative experiences.
What can be done to address this risk?

There are a range of actions that can be taken to reduce the risk based on socioeconomic deprivation, some of which require the lead of government, but others that need leadership and energy at a community or individual level. The recommendations in Samaritans’ report include:

- National suicide prevention strategies need to target efforts towards the most vulnerable people and places, in order to reduce geographical inequalities in suicide.

- Effective cross-governmental approaches are required, with mental health services improved and protected. Suicide prevention needs to be a government priority in welfare, education, housing and employment policies.

- Workplaces should have in place a suicide prevention plan, and provide better psychological support to all employees, especially those experiencing job insecurity or those affected by downsizing.

- Poverty and debt need to be destigmatised so that individuals feel valued and able to access support without fear of being judged.

- Every local area should have a suicide prevention plan in place. This should include the development and maintenance of services that provide support to individuals experiencing socioeconomic disadvantage.

- Staff and volunteers in services accessed by socioeconomically disadvantaged individuals or groups should receive specialist training in recognising, understanding and responding to individuals who are in distress and may be suicidal (even if they do not say they are feeling suicidal).

- People bereaved or affected by suicidal behaviour, and therefore at higher risk of suicide themselves, should be offered tailored psychological, practical and financial support particularly in disadvantaged communities.

How might you reach this high-risk group of people locally?

At a local level there are opportunities to identify and work with high-risk groups by working with a variety of partners such as:

- Frontline services that provide information, advice and support to people who are experiencing socioeconomic disadvantage. This may include, for example, staff and volunteers at job centres, food banks, debt and advice services.

- Frontline services who work with people who experience other risk factors such as relationship breakdown, childhood adversity, physical and mental health problems, drug and alcohol misuse.

- Local employers, including those who have downsized, employ staff on part-time, irregular and short-term contracts, are based in an area of disadvantage, and employ a large proportion of people who are socioeconomically disadvantaged.

Reference

1 Samaritans (2017). Dying from Inequality: Socioeconomic disadvantage and suicidal behaviour