



# Suicide Prevention in Our Highest Risk Populations

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# Key Learning Points

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- ✓ Top 10 populations of people at the highest risk for committing suicide
- ✓ Why these are the highest risk populations
- ✓ How we can support these populations and help decrease their suicide risk



## Top 10 Populations at Risk

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## Suicide Prevention in our Highest Risk Populations

# 1. LGBTQ+

### About this group:

- Transgender and non-binary individuals are at highest risk
- Studies show LGBTQ+ youth are 4 - 6 times more likely to attempt suicide than their peers

### Causes:

- Rejection by family or peers
- Bullying, harassment, or violence
- Internalized homophobia/transphobia
- Lack of access to affirming mental health care
- Legal and systemic discrimination
- High rates of depression, anxiety, and trauma



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## 2. Middle-Aged Men

### About this group:

- More frequent in high-income countries
- Ages 45 - 64 are highest

### Causes:

- Financial stress, job loss, or underemployment
- Divorce, social isolation, or loss of purpose
- Substance use
- Societal expectations to suppress emotions or avoid seeking help
- Access to lethal means (especially firearms)



## 3. Indigenous and First Nations Peoples

### Causes:

- Intergenerational and historical trauma (e.g., colonization, residential schools)
- Cultural disconnection
- Poverty, lack of access to healthcare and education
- Systemic racism, discrimination, and oppression
- Higher exposure to violence, addiction, and suicide contagion



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## 4. Veterans and Active-Duty Military Personnel

### Causes:

- PTSD
- Moral injury
- Traumatic brain injury (TBI)
- Difficulties with reintegration
- Higher exposure to violence, addiction, and suicide contagion



## 5. Individuals with Mental Health Disorders

### About this group:

- **About 90%** of people who die by suicide have a diagnosed mental disorder.
- Most often major depression, bipolar disorder, schizophrenia, borderline personality disorder, and PTSD.

### Causes:

- Biological vulnerabilities (e.g., brain chemistry)
- Chronic hopelessness, psychosis, or mood instability
- Stigma and lack of treatment access
- Social isolation and functional impairment
- Side effects of medication or treatment resistance



## 6. People with Substance Use Disorders

### About this group:

- Many suicides involve alcohol or drug intoxication at the time of death.

### Causes:

- Impaired judgment and impulse control during intoxication
- Co-occurring mental health conditions (depression, trauma)
- Feelings of shame, guilt, and hopelessness
- Physical and psychological dependence
- Social disconnection and marginalization



# 8. Individuals Experiencing Acute Life Crises

### About this group:

- Especially dangerous if the person lacks a support system or coping skills.
- Acute crisis, meaning a sharp and severe event that is difficult to manage. This person may require urgent support.

### Causes:

- Recent traumatic life events (e.g., death, divorce, job loss, eviction)
- Feelings of hopelessness or no way out
- Lack of coping skills or social support
- Pre-existing mental health issues
- Impulsive behavior, often with easy access to lethal means



## Suicide Prevention in our Highest Risk Populations

# Social Readjustment Rating Scale

## [Social Readjustment Rating Scale: Holmes & Rahe Stress Scale](#)

[www.simplypsychology.org/srrs.html](http://www.simplypsychology.org/srrs.html)

Life Event	Mean Value
1. Death of spouse	100
2. Divorce	73
3. Marital Separation from mate	65
4. Detention in jail or other institution	63
5. Death of a close family member	63
6. Major personal injury or illness	53
7. Marriage	50
8. Being fired at work	47
9. Marital reconciliation with mate	45
10. Retirement from work	45
11. Major change in the health or behavior of a family member	44
12. Pregnancy	40
13. Sexual Difficulties	39
14. Gaining a new family member (i.e.. birth, adoption, older adult moving in, etc)	39
15. Major business readjustment	39
16. Major change in financial state (i.e.. a lot worse or better off than usual)	38
17. Death of a close friend	37
18. Changing to a different line of work	36
19. Major change in the number of arguments w/spouse (i.e.. either a lot more or a lot less than usual regarding child rearing, personal habits, etc.)	35
20. Taking on a mortgage (for home, business, etc..)	31
21. Foreclosure on a mortgage or loan	30
22. Major change in responsibilities at work (i.e. promotion, demotion, etc.)	29
23. Son or daughter leaving home (marriage, attending college, joined mil.)	29
24. In-law troubles	29
25. Outstanding personal achievement	28
26. Spouse beginning or ceasing work outside the home	26
27. Beginning or ceasing formal schooling	26
28. Major change in living condition (new home, remodeling, deterioration of neighborhood or home etc.)	25
29. Revision of personal habits (dress manners, associations, quitting smoking)	24
30. Troubles with the boss	23
31. Major changes in working hours or conditions	20
32. Changes in residence	20
33. Changing to a new school	20
34. Major change in usual type and/or amount of recreation	19
35. Major change in church activity (i.e.. a lot more or less than usual)	19
36. Major change in social activities (clubs, movies,visiting, etc.)	18
37. Taking on a loan (car, tv,freezer,etc)	17
38. Major change in sleeping habits (a lot more or a lot less than usual)	16
39. Major change in number of family get-togethers (""")	15
40. Major change in eating habits (a lot more or less food intake, or very different meal hours or surroundings)	15
41. Vacation	13
42. Major holidays	12
43. Minor violations of the law (traffic tickets, jaywalking, disturbing the peace, etc)	11

# 9. People in the Justice System

**About this group:**

- Incarcerated individuals or those recently released from prison.

**Causes:**

- Loss of autonomy, dignity, and safety in prison
- Abuse or trauma experienced while incarcerated
- Often untreated mental illness and addiction
- Lack of support post-release (housing, employment)
- Isolation and stigma
- Reintegration challenges



# 10. People with Chronic Illness or Disability

**About this group:**

- Includes chronic pain, cancer, neurological disorders, or physical disabilities
- i.e. Diabetes, COPD, Fibromyalgia, ALS, etc.

**Causes:**

- Social isolation: difficult to find employment, challenges with mobility or transportation, physically separated from family and friends (hospital, LTC)
- Chronic pain and reduced quality of life
- Feelings of hopelessness or being a burden
- Compare themselves to healthier people
- Loss of independence
- Financial burden



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## More on Chronic Illness and Disability

### Study completed in The Lancet

- 1/1/17 - 12/31/21 (4 years)
- 47 million people involved
- People in the study were matched by socioeconomic class, age, race, and gender.
  - Baseline suicide rate was 9.5/100,000
  - Diagnosis with a low survival cancer – 21.6/100,000
  - Diagnosis with chronic heart disease – 16.1/100,000
  - COPD – 22.4/100,000
  - Degenerative neurologic disorder (Alzheimer's disease, Parkinson's disease, Huntington's disease, ALS) – 114.5/100,000



# More on Chronic Illness and Disability

**Why:**

- Social isolation
  - Difficult to employ
  - Hard to go out with friends
  - Feel "different" from others (physically or mentally)
- Chronic suffering and reduced quality of life
- Feelings of hopelessness or being a burden
  - Worry that nothing will change
  - Grief
  - Feel they are "too much" for anyone to care for
  - Compare themselves with healthier people
  - Occasional hostile interaction with a family member
- Loss of independence or mobility
- Co-occurring depression or anxiety
- Financial burden
- Lack of adequate pain management
  - Pain alone doubles the risk of suicidal ideation. This increases with the severity of pain and the consistency of the pain.
  - Ambiguous pain - "making it up"
  - Poor sleep really aggravates the pain cycle and can increase chronic disease symptoms (HTN, pain, seizures, etc.)

# Common themes among high-risk groups

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- Mental health care access
  - Lack of confidence in treatment
  - Fear of medications
  - Stigma of seeking help
- Trauma
- Discrimination
- Socioeconomic status
- Social media
- Impulsivity, lack of coping skills
- Feelings of shame, guilt, and hopelessness
- Access to lethal means
- Lack of a support system

# Creating Change

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- We are aware of who is at highest risk and why. How do we change it?
- What may lead to the prevention of suicidal ideation?
- Remember, any one change can make a large difference.

# Protective Factors

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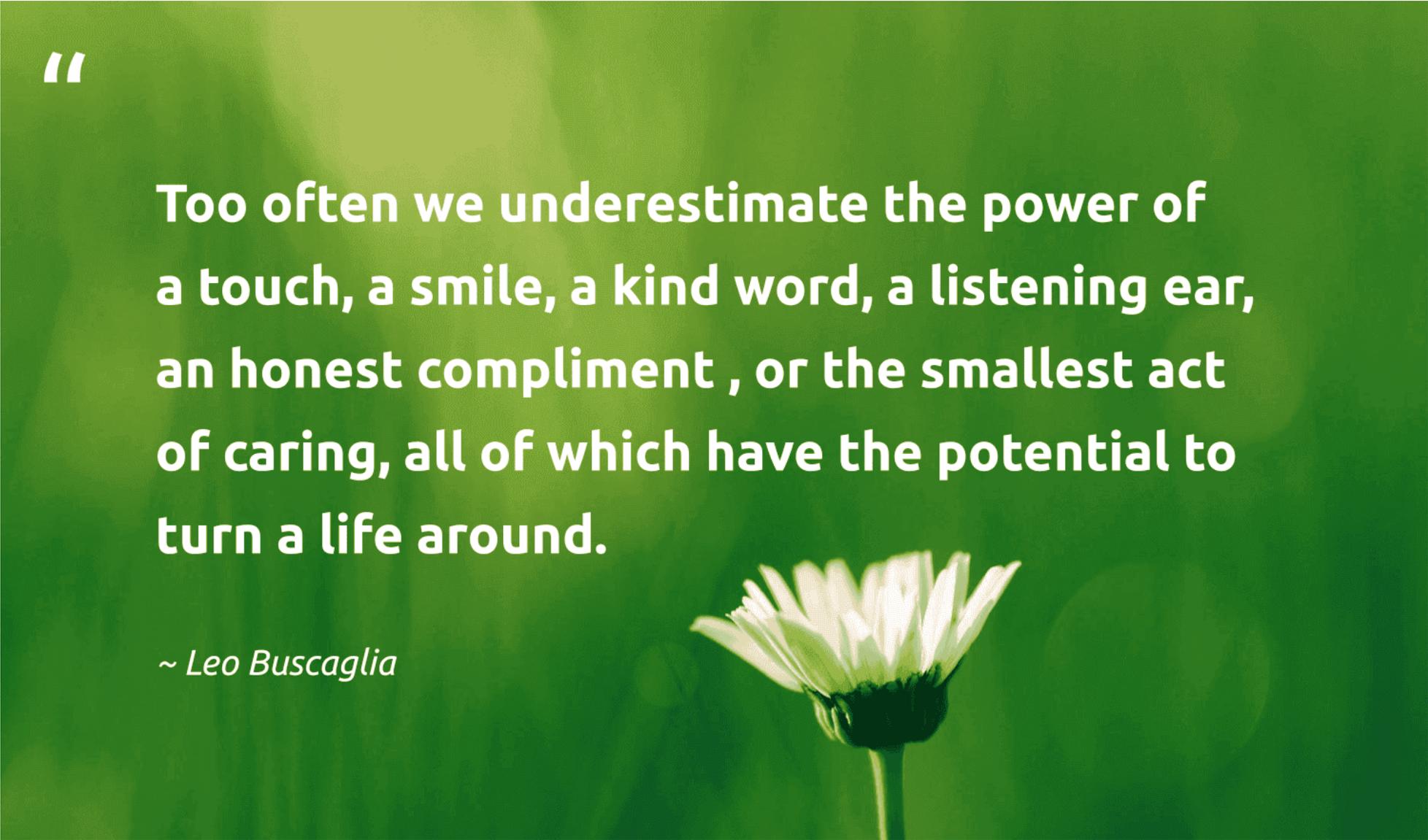
- Changing mindset
  - Optimism
  - Purpose in life
  - Coping skills
  - Spiritual beliefs
  - Remove substances
- Policy level
  - Public awareness and reducing the stigma
  - Decrease in media and social media coverage of making suicide sensational
  - Zero tolerance for bullying – no excuses
  - Zero tolerance for discrimination
- Support
  - Family
  - Friends
  - School – trusted adults for students
  - Workplace
  - Community involvement
  - Creation of a space where it is ok to discuss emotions
  - Mental health provider
  - Any supportive group to make them feel connected

# Creating Change

- Hope, purpose, and optimism
- Model healthy relationships
- Ability to discuss emotions with a trusted resource
- Coping skills
- Therapy can help with many above

**Most importantly, one small change, offer of help, discussion, or question can make the difference for someone.**





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**Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment , or the smallest act of caring, all of which have the potential to turn a life around.**

*~ Leo Buscaglia*



**PRESENTED BY**

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# **Glencoe Regional Health**

Glencoe Regional Health is an independent not-for-profit health care system headquartered in Glencoe, Minnesota.

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