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Mental illness isn't the only reason for suicide



By Anne Summers
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The recent revelation that each day more than eight Australians kill themselves was startling and confronting but perhaps even worse was learning that another 200 of us attempt suicide every day and do not succeed.

We should be grateful to Julia Gillard, the former Australian prime minister who was recently elected the Chairman of the board of *beyondblue*, for bringing these grim statistics to our attention. A few days ago, in a speech at the University of Adelaide, she elaborated on the figures with the welcome announcement that she would lead beyondblue from its former mission of awareness raising to one of suicide prevention.



Suicide results in tragic outcomes for everyone, including those left behind. Photo: Rob Homer

With the numbers so high – our suicide rate far exceeds the road toll – and rising, it is time to stop tip-toeing around this ultra-sensitive topic and start a frank, and realistic, national conversation about why this is happening.

Prevention is not realistically possible until we do this.

Gillard conceded in her speech there is limited hard evidence on how to prevent suicide and "new thinkings and new collaborations" will be needed if we are to be at all effective.

A first step, I would argue strongly, would be to stop viewing suicide solely through the prism of mental illness. Most public discussion on the topic, including Gillard's own speech and everything I could find on *beyondblue's* website, assumes that suicide is solely the result of depression or anxiety. Therefore, the argument goes, in order to reduce suicide we need to address – and remove – the stigma attached to mental illness.

While the need to destigmatise mental illness goes without saying, we can no longer ignore other, perhaps equally important, factors that also drive people to take their own lives.

High on the list is economic distress. It is a sad fact that some people kill themselves because they have insufficient money and cannot see any way their finances are going to improve. Farmers, struggling single parents and elderly people are known to have succumbed to despair about money.

Perhaps we find it easier to blame everything on mental illness rather than deal with the ramifications of banks foreclosing on farms, or pensioners or single parents having their government payments cut to levels where mere survival is a borderline proposition.

Elderly men are especially prone to suicide, with Australian men over 85 having the highest rate. They kill themselves at the rate of 39.3 per 100,000 – compared with the overall rate for men of 19.4 per 100,000. Many of these men are lonely (they may have recently lost a partner), they are sometimes incontinent and unable to care for themselves and they don't have the money to pay for care. Others – and some elderly women come into this category too, although their suicide rate is a lot lower – will do literally anything to avoid going into a retirement home.

Chronic pain also drives people to end their lives. You would think that modern medicine could alleviate pain but this is not always the case and there is plenty of evidence that some people decide they just cannot deal with it any more.

Writer Nikki Gemmell has written about her mother's suicide, a lonely act that shocked her and her family even though their mother had complained constantly of the pain and had foreshadowed that she might end her life. This death evokes another suicide-related issue: euthanasia. Had her mother been legally able to end her life, with her family around her, might it have been a better death? asks her anguished daughter. As it stands, Gemmell does not know whether her mother's final act was one of empowerment or despair. But, as she acknowledges, even the legalisation of euthanasia would not have helped her mother because Australian parliaments seem willing to contemplate only doctor-assisted euthanasia legislation for people with terminal illnesses. Gemmell's mother's condition was chronic but not terminal. As a society we do not allow mature people the right to doctor-assisted suicide. Instead, we force them to illegally import the drugs that guarantee a quick and peaceful end, or else to use the violent methods of self-harm that are the preponderant methods of suicide in this country.

Of course, these arguments do not apply to the vast majority of suicides by those who are younger and whose motivation for wanting to kill themselves can be known for sure only if their attempt fails and we can try to talk to them.

The Way Back, a one-on-one program being trialled by *beyondblue* with people who have attempted suicide is, I am told, finding that economic distress, loneliness and the desire to escape pain are among the reasons people give for having tried to end their lives. Just as we should not automatically brand a person who survives a suicide attempt as mentally ill, nor should we assume that depression and anxiety, crippling as they can be, are the sole causes of suicide in Australia.