

Rural and remote communities and suicide

Suicide rates are higher in Canada's rural areas (Hirsch & Cukrowicz, 2014; Barry et al., 2020). People there also experience poorer health, lower life expectancy, and are less likely to have their healthcare needs met (Eckert et al., 2004).

While there is no universal definition of "remoteness," Statistics Canada's Remoteness Index defines remote communities by taking into account their size and proximity to urban centres (Subedi et al., 2020).

RESOURCES

Rural Suicide Prevention Toolkit

A valuable resource from the Rural Health Information Hub and the University of Minnesota Rural Health Research Center to help organizations implement suicide prevention programs in rural communities

bit.ly/3KaV6eI

After Rural Suicide: A Guide for Coordinated Community Postvention Response

A guide created to support California's rural counties in developing a formal, locally-controlled, and coordinated response after a suicide

bit.ly/3A19b9Z

Around

20%

of Canada's people live in rural areas, which are defined as having populations under 1,000 and fewer than 400 inhabitants per square kilometre

(Statistics Canada, 2016).

Why are people in rural and remote communities at risk?

Certain factors can place some people at a higher risk for suicide than others, and when multiple risk factors outweigh those that build resiliency, the likelihood that a person may think about suicide increases (Sharam et al., 2021).

1

Issues of confidentiality

People living in rural and remote communities may be reluctant to seek help when it relates to their mental health, as they may have concerns about confidentiality in smaller rural settings, where a person's neighbour could also be their counsellor.

2

Easy access to firearms

Gun ownership is far more prevalent in rural areas compared to urban areas, and firearms are the most lethal suicide method (Arnautovska et al., 2014; Morgan et al., 2016; Jones-Bitton et al., 2020).

3

Isolation

Rural and remote communities can be small and tight knit but also sparsely populated, which means fewer resources that can offer support and connection.

The same wide-open spaces that many people enjoy may contribute to feelings of isolation or disconnection, depending on the circumstances. People feeling isolated or depressed need to know they don't have to feel that way. Support is available.

4

Access to mental health services

Smaller communities typically have fewer mental health professionals or limited access to other infrastructure like recovery centres and psychiatric wards. They may also have limited access to high-speed internet which is a barrier to accessing virtual services (Innovation, Science and Economic Development Canada, 2019). Services delivered by phone can be a helpful alternative.

5

Being seen as less of a priority

Rural and remote communities may receive fewer resources from governments for mental health services. Many people feel that not enough has been done at the government level to acknowledge these populations as a priority for these services.

6

Rugged individualism

People living in rural settings may have been socialized to be independent and self-reliant. These traits could possibly make some people reluctant to seek help, believing that their problems are their own to fix. Yet this is a tendency that may lead to negative coping mechanisms and ultimately result in suicide (Creighton et al., 2017; Hirsch & Cukrowicz, 2014).

Rural priority populations

As outlined below, certain rural and remote populations may be more likely to consider suicide due to additional factors not experienced by others. Governments need to address the mental and physical health needs of these priority populations, and make services for them accessible, i.e., easy to get to, easy to find, confidential, and inexpensive. People who work with these populations should also be trained in suicide prevention.



Older adults

Older adults, especially men, have high rates of suicide in rural areas (and in general). They are also more likely to own firearms than those living in urban areas, something that increases their risk of suicide. The fact that they may have spent their working years in individualized, isolated, demanding careers, such as farming or ranching, makes it less likely that they will reach out for help. The chronic shortage of mental health professionals trained to help older adults in rural areas makes getting the right kind of support even more difficult (Gomez et al., 2020; Neufeld et al., 2015; Arbore, 2019).



People in sexual and gender minorities

People living in rural and remote communities who identify as 2SLGBTQ+, especially those who are young, may be more likely to consider suicide, as they may struggle to feel a sense of belonging and community. They may also be more likely to face discrimination in their communities (including schools and the healthcare system). In addition, health and mental health services to meet their specific needs may be less accessible (Rhodes et al., 2018; Israel et al., 2017).



Young people

Access to in-person mental health services is often limited in rural and remote communities, and for young people, who are generally less likely to access these services, getting professional help may be even harder. Since those willing to seek out these services may not have the financial means or transportation to access them, they may not be able to find help when they are struggling and considering suicide (Rhodes et al., 2018).



Men

Men die by suicide three times as often as women, and much of this is due to their socialization. Because of it, men – especially those living in rural and remote communities – may be more likely to suppress their emotions and not seek help. Young men in rural communities are also more likely than those in urban centres to die by suicide due to the same kind of socialization (Creighton et al., 2017).



Warning signs

- Any significant change in behaviour or mood is a warning sign that someone may be thinking about suicide. For example:
 - › Losing interest in a previously enjoyed hobby or activity
 - › Disconnecting from friends or family (not calling as much, not going out)
 - › Changes in sleeping or eating patterns
- Statements of hopelessness or talk of being a burden can also be warning signs:
 - › “I’m struggling but I don’t want to have to rely on others for help. . . . I don’t want to be a burden.”

(American Association of Suicidology, 2020)



Acute Warnings Signs

If you notice any of the following signs, get the person help immediately. Call 9-1-1 or the Canada-wide crisis line at 1-833-456-4566:

- › Threatening to hurt or kill themselves
- › Talking or writing about dying or suicide
- › Seeking out ways to kill themselves



Prevention Opportunities

What can reduce risk?

Many factors can contribute to building resiliency in people living in rural and remote communities:

- Supportive and strong relationships
- Access to confidential mental health care (in-person, on the phone, online)
- The ability or willingness to share and express emotions
- The readiness to look for support when it's needed
- The safe storage of firearms: locking them away, removing ammunition, and storing ammunition separately

(Houle et al., 2008; American Psychological Association, 2005)

What can we all do to help reduce suicide in remote and rural communities?

Individually, we can create a safe space for these people to share and express emotions through open, non-judgmental conversation and gentle questioning. We can also check in regularly with the people in our lives. This helps build connection and trust.

If someone you know is exhibiting warning signs, talk with them. You can start by mentioning your concerns: “I haven’t heard from you much these days. Is everything okay?”

Keep the conversation going by asking questions and listening to what they’re saying. You don’t have to offer solutions. If you’re still worried about them, ask: “Are you thinking about suicide?” If they say yes, don’t panic.

Let them know you’re there for them and help them access mental health supports, including giving them the crisis line number, 1-833-456-4566.



If someone you know is exhibiting warning signs, talk with them.



What can rural and remote communities do to help reduce suicide?

- Rural and remote communities can ensure access to the mental health supports that are available in-person, online, or by phone (Rojas et al., 2020). They can make people aware of these supports through information campaigns, including campaigns about suicide prevention (bit.ly/3zY77zO), that reduce stigma and increase help seeking and help offering.
- Community programs or campaigns that destigmatize men's depression and suicide and address the "dominant ideals of masculinity" can be effective for preventing suicide in rural settings (Creighton et al., 2017).
- Rural home care providers may consider training their workers in suicide prevention to help prevent deaths (Gomez et al., 2020; Neufeld et al., 2015; Arbore, 2019)
- Healthcare providers can identify people who may be thinking about suicide by being alert to subtle cues that may indicate they are struggling, such as body language and tone of voice. Better training is needed to ensure that these professionals are able to detect depression (Ogrodniczuk & Oliffe, 2011; Paraschakis et al., 2016).

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ABOUT THE CENTRE FOR SUICIDE PREVENTION

Anyone can learn to identify someone at risk of suicide and get them help.

Call us.

We are the Centre for Suicide Prevention. For 40 years we've been equipping Canadians with knowledge and skills to respond to people considering suicide. We can equip you too. We educate for life.

ABOUT THE MENTAL HEALTH COMMISSION OF CANADA

The Mental Health Commission of Canada (MHCC) is a catalyst for improving the mental health system and changing the attitudes and behaviours of Canadians around mental health issues.



If you are in crisis, call 1.833.456.4566.
First Nations people and Inuit can also call 1.855.242.3310

hopeforwellness.ca
suicideprevention.ca/need-help

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