



Nurse suicide: Breaking the silence



More research and awareness are needed.

THE RECENT SUDDEN DEATHS of fashion designer Kate Spade and TV host Anthony Bourdain have propelled the topic of suicide into the headlines. These two celebrities were well-known, seemingly happy people with wealth, popularity, and social status who often were seen in public with smiles on their faces. We now know that concealed behind those smiles were uncontrolled depression and suicidal ideations, which in the end, claimed their lives. Knowing that their families and the public could be so fooled by their successful behavioral “cover-up” begs the question: What’s being hidden in plain view by our nursing colleagues?

Worldwide, one death by suicide occurs every 40 seconds, which means that more than 1,000,000 people die by suicide each year. In the United States, we know that 45,000 people died by suicide in 2016, up 30% since tracking began in 1999. And we know that suicide occurs across all professions. In June 2018, the Centers for Disease Control and Prevention (CDC) reported that suicide is a leading cause of death for Americans and warned that U.S. suicides are “increasing at an alarming rate.”

Suicide is called an alarming, silent, irreversible, and devastating mental health scourge. So why is a huge, developing health trend not getting a lot of public attention? What data do we have specific to the health professions and especially nursing? The answers lie between the headlines because numeric facts pertaining to nurse suicide in the United States are few.

Alarming absence of U.S. data on nurse suicide

The United Kingdom, Japan, and Denmark have been tracking nurse suicide rates for over 10 years. In the United States, however, little credible data exist. To learn why, read the National Academies of Medicine 2018 paper “Nurse suicide: Breaking the silence” (nam.edu/nurse-suicide-breaking-the-silence). I’m appalled at the state of the current science and data specific to nursing.

In today’s complex, chaotic healthcare environment, nurses have more and more responsibility, accountability, and pressure, and they’re expected to get their work done in less and less time. Caring and compas-

Help is here

- If you or someone you know is in crisis, call **911** immediately.
- If you are experiencing difficult or suicidal thoughts, call the National Suicide Hotline at **1-800-273 TALK (8255)**.

sion come at a price. The high-pressure nursing environment, associated demands, and human impact (burn-out, cumulative stress, and moral distress) are well-documented in research and literature, so is it any shock to know that despair, depression, and hopelessness can result? The American Association of Critical-Care Nurses, the American Nurses Association, and the American Organization of Nurse Executives have all called for action to optimize a healthy work environment. The urgency for that work couldn’t be greater.

Unfinished business, unfinished lives

Establishing the true incidence of nurse suicide in the United States is unfinished business for nursing. It will take profession-wide attention and action to fix the variation in reporting mechanisms, incomplete availability of nurse gender data, and the organizational silence that prevents acknowledging suicide when it occurs. One bright light is the San Diego County pilot of their Healer Education Assessment and Referral Program, which is being led by the University of California, San Diego. But we need a lot more. What else can we do to stop the scourge? How can we recognize the unfinished lives of the nurses who have died by suicide?

I’ve been touched by the suicide death of someone I never fathomed could have considered such an act. Don’t be fooled like I was. September is Suicide Prevention Awareness Month (nami.org/Get-Involved/Awareness-Events/Suicide-Prevention-Awareness-Month), but every day of every month is an important time to consider whether your colleagues are at risk. Check out the warning signs at nami.org/Learn-More/Mental-Health-Conditions/Related-Conditions/Risk-of-Suicide and watch for our continuing nursing education article on this topic in the October issue of *American Nurse Today*.

Visit americannursetoday.com/?p=50088 for a list of selected references.

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