

# Male Suicide in Ireland, factors and high-risk groups

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In Ireland suicide disproportionately affects men, with considerably higher numbers of male victims than female. Three out of every four suicide victims are male.

This White Paper presents an overview on male suicide in Ireland, factors that contribute to deaths and the sub-groups of men who are at the greatest risk. These findings point towards the need for a gendered approach to suicide intervention and mental health support services.

## Male Suicide in figures

Ireland has the 17th highest rate in Europe for suicide, and the 4th highest rate for males aged 15–24 years old<sup>1</sup>. Of the 390 people who died by suicide in Ireland in 2019\*, 77% were men, with a rate of 12.9 per 100,000 people, compared to the female suicide rate of 3.6 per 100,000<sup>2</sup>.

Since 2010, middle aged men have been the highest age demographic for suicide in Ireland. In 2016 and 2018, the highest rate was among those aged 55-64 years, and between 2010 and 2015 this was among 45-54 year olds<sup>3</sup>. In 2021\*, (*Data up to 2019 is final, data for 2021 is based on deaths registered and is therefore provisional*), provisional data shows that 3 in 4 victims were male (302 of 399 deaths in total). The highest number of these men were aged 35-44 years old (69 deaths), followed by men aged 45-54 (64 deaths)<sup>4</sup>. While middle aged men have been at the greatest risk of suicide for the past decade, the rate for younger men is significantly higher than the European average.

## Violent Suicide Methods

Men are more likely to choose violent suicide methods, such as hanging or shooting, which is believed to result in higher rates of completed suicides in males (WHO 2002). In Ireland, the most common suicide methods for men between 2007 and 2012 were by hanging (74%), drowning (9%) and firearms (6%)<sup>5</sup>.

In cases of self-injury, research suggests a higher lethality of self-harm acts used by men compared to women. In addition, the findings show a higher lethality of an equivalent act to females and a higher risk of suicide following self-harm<sup>6</sup>. The highest rate for self-harm in males was among 20-24 year olds (543 per 100,000), which represents one in every 184 males aged 20-24<sup>7</sup>.

## **RISK FACTORS**

A range of factors, both social and economic, can influence male suicide. Multiple factors may influence individuals — studies have suggested a link between unemployment, stress at work, financial difficulties and suicide, especially in men. For instance, a job loss can lead to financial stress and provide a further risk factor of social isolation<sup>8</sup>.

### **Financial Pressures**

Economic difficulties may be linked to suicide in men, with Irish men living in deprived areas being twice as likely to die by suicide compared to those living in the least deprived areas<sup>9</sup>. At the time of the recession, male suicides in Ireland rose sharply between 2009 and 2014<sup>10</sup>. By the end of 2012, the rate of suicide in men was 57% higher than predicted based on pre-recession trends, whereas the female rate was reported to remain almost unchanged,<sup>11</sup> which may indicate that financial pressures was a factor.

### **Unemployment**

Fewer job opportunities may impact male suicide, research suggests. The economic recession in Ireland resulted in fewer employment opportunities for young men, with those from lower socio-economic backgrounds impacted the most. Manual jobs were less readily available, while the crisis saw cuts to salaries and working hours. Meanwhile, property prices and rental costs remained high following the Celtic Tiger boom years, with considerable impact on those from modest economic backgrounds<sup>12</sup>

Yet financial pressure is not the only factor that must be considered. It is difficult to ascertain whether unemployment is a significant factor when considered in isolation<sup>13</sup>. In the years 2002-2008, the unemployment rate dropped, but the suicide rate was not affected<sup>14</sup>.

### **Mental Illness**

Ireland has one of the highest rates of mental health illness in Europe, ranking 3rd out of 36 countries<sup>15</sup>. Men are less likely to report mental health issues and seek help from health practitioners than women. This could be explained by reluctance to access medical support among men and a failure to diagnose depression<sup>16</sup>. A slower diagnosis rate and a lack of support such as access to antidepressants could contribute to the high rate of male suicide<sup>17</sup>.

Men's reluctance to seek advice on mental health concerns, and their perceived lack of support networks, might reduce the probability of them seeking help in an urgent manner following an act of self-harm<sup>18</sup>. This underlines the need for a gendered suicide prevention campaign aimed specifically at men.

### **Substance Abuse**

Higher alcohol consumption in men is also linked to suicide. Alcoholism and misuse of other substances is linked to 25-50% of all suicides<sup>19</sup>. An Irish study indicated that this particularly affects young men and reduction of alcohol intake in young people may help reduce suicide numbers.<sup>20</sup>

Drinking may increase impulsivity and lower inhibitions, resulting in a greater risk of suicidal acts in a time of stress<sup>21</sup>. Severe alcohol intoxication levels at the time of suicide are more frequently seen in men<sup>22</sup> and it is believed that men may drink alcohol to cope in a crisis<sup>23</sup>. Drinking may be viewed by some men as a so-called 'masculine' alternative to a more 'feminine' approach of seeking help<sup>24</sup>.

## Drugs

*A SPRING 2022 STUDY PUBLISHED BY THE HEALTH RESEARCH BOARD (HRB)<sup>46</sup> COMPARED CHARACTERISTICS OF SUICIDE TO NON-SUICIDE DRUG POISONING DEATHS, BY SEX, IN IRELAND. THE AUTHORS CONCLUDED THAT FACTORS ASSOCIATED WITH SUICIDE DRUG POISONING DEATHS (SDPD) INCLUDED BEING MALE AND OF OLDER AGE, SUFFERING FROM MENTAL ILLNESS OR CHRONIC PAIN AND HAVING A HISTORY OF A PREVIOUS OVERDOSE.*

## Social Isolation

Suicidal thoughts and attempts are three times higher among divorced men and two times higher among separated men, compared to those who are married<sup>25</sup>. Isolation and an absence of social connections is a major factor in suicide.

As men enter their 30's, friendships often begin to decline<sup>26</sup>, leading to narrower social circles in middle age (40-59 years old)<sup>27</sup>. Men tend to have fewer close friends than women and even if they have social networks, they report higher levels of loneliness<sup>28</sup>. This indicates that middle aged men may not be accessing the support they need. Research has found that men do not notice their lack of social interaction until they begin to experience anxiety<sup>29</sup>.

A rising population of older men and an increase in single occupancies in homes has led to men being at risk of experiencing loneliness. This would suggest a need for services that are targeted specifically towards older men<sup>30</sup>.

## High-Risk Subgroups

The Connecting for Life policy - Department of Health (2015) found that certain groups were at higher risk of suicide, including:

- Minority groups: members of the LGBTQ community, the travelling community, the homeless community, those in contact with the criminal justice system, those who have experienced domestic, clerical, institutional, sexual or physical abuse, asylum seekers, refugees, migrants and sex workers.
- Demographic cohorts: middle-aged men, young people and the economically disadvantaged.
- Occupational groups: health care professionals and professionals working in social isolation, such as farmers.

Studies suggest that the presence of numerous 'at risk' characteristics in a group or individual significantly increases the risk of suicide<sup>31</sup>. Prevention strategies may not always consider the social, economic and cultural context in which identities of masculinity interact with multiple risk factors<sup>32</sup>.

## Manual Labour Workers

According to the CSO, the number of suicides by date of occurrence in 2019 (whose construction sector occupation title included Builder, Roofer, Painter, Tiler, Plasterer, Plumber, Electrician, Carpenter, Stone Mason) was 39. Of these 39 suicides, all were Males.

A study found that 50% of Irish men who died by suicide in 2008-2012 were construction workers. The Construction Industry Federation found that an estimated 1,039 men from a construction or production background died by suicide in Ireland during this four-year period. The total number of suicide deaths for

this period was 2,137<sup>33</sup>. This highlights that if the country enters recession and there are job losses in the construction industry, this may become an 'at risk' group once more.

### Farmers

On average, 25 farmers die every year by suicide, according to figures released by the Central Statistics Office (CSO) to the Farming Independent<sup>34</sup>. Again, according to the CSO the number of suicides by date of occurrence in 2019, whose occupation title was in the Farming sector, was 22. Of these 22 suicides, all were Males.

A study published by Teagasc on May 9<sup>th</sup> 2022 showed 27% of farmers in Ireland reported their wellbeing as 'below average' or 'poor'. The most common causes of stress were related to finances, workload and the weather. In 2020, the percentage of male farm holders was 86.6% compared to 90.3% in 1991.<sup>35</sup>

### Prisoners

A significant number of deaths in prison are by suicide. The rate of suicide in Irish prisons from 2011-2014 was 47 per 100,000 prisoners<sup>36</sup>, equivalent to 0.047 per 100 prisoners. Prison healthcare records of all deaths identified by the Irish prison service for 5 years between 2009 and 2014 were reviewed and of the 38 deaths included, 15 (39%) were given a verdict of suicide at inquest<sup>37</sup>

### The Travelling Community

A 2015 study exploring the mental health of the travelling community reported that male Travellers have suicide rates which are 6.6 times greater than the general population of Ireland, accounting for more than one in ten Traveller deaths<sup>38</sup>. The study also found that there is a strong stigma attached to mental health problems within the Traveller community, resulting in help-seeking behaviour being less likely. Embarrassment and fear of discrimination appear to be barriers to accessing services.

### Students

According to the CSO, the title "University student" as the occupation title wasn't present in the dataset. The number of suicides by date of occurrence in 2019, whose occupation title included "student", was 23. Of these 23 suicides, 18 were males and 5 were females.

### Sexual and Gender Minorities

Research suggests gay men consider suicide with a stronger intention to die compared with heterosexual males.<sup>39</sup> Some men face stigma and anxiety due to their sexual identity, which can be linked to higher frequency of suicide among gay men. Stigmatisation of homosexuality may be linked to traditional concepts of masculinity and the prevalence of religious values in Ireland<sup>40</sup>

According to the survey Speaking from the Margins: Trans Mental Health and Wellbeing in Ireland, almost one third of transgender people have attempted suicide, and almost 80% have considered it.<sup>41</sup>

## **OTHER CONTRIBUTING FACTORS**

### Mental health literacy

The concept refers to the ability of an individual to recognize the signs of mental illness and the determine the right time to seek help. This also entails access to information on mental health awareness. In addition to not being able to accurately point out the symptoms of mental illness, men are less likely to show critical concern when they are going through depression. Less mental health literacy among men is also attributed

to rigidity and too much conformity to the societal masculine standards.

### Men's masculinity and suicide

The tendency of strict adherence to traditional masculine norms is also a contributing factor to men suppressing depressive characteristics. Men have been conditioned to avoid emotional vulnerability as a sign of strength and thus most of the victims avoid seeking help.

Concepts of toughness, strength, and self-reliance are perceived to catalyze the mental health risks within the male population. Young boys will not adopt professional help-seeking behavior as long as it is perceived as a gender-specific quality. Young Irish men are unfamiliar with the concept of seeking help because doing so may jeopardize their in-group membership, personal image, public image, or financial obligations (Lynch et al., 2018). Men who are adaptive to the traditional masculinity norms are susceptible to psychological stress, and maladaptive coping patterns among other psychological disorders. Further to the strict adherence to unhealthy societal patterns is a lack of mental health literacy and men are considered to have less likelihood of coming out to seek help.

*ANNE CLEARY OF THE UCD GEARY INSTITUTE OF PUBLIC POLICY IS THE AUTHOR OF 'THE GENDERED LANDSCAPE OF SUICIDE – MASCULINITIES, EMOTIONS AND CULTURE'. HER MAY 2022 PAPER 'UNDERSTANDING SUICIDE AND DEVELOPING REALISTIC PREVENTION STRATEGIES'<sup>43</sup> involved a baseline study of a consecutive sample of 52 men, aged between 18 and 30, who had been admitted to hospital because of a clinically serious suicide attempt. Its findings showed that many participants had experienced childhood traumas that affected their ability to cope with a variety of issues later in life. The traditional view of masculinity, with an emphasis on strength and 'emotional stoicism' was enforced in the family setting as well as the wider community, particularly in school. This caused a barrier to verbalising difficult experiences and thus to seeking help.*

A 2020 Australian study examined the impact of masculinity on the relationship between anxiety specific mental health literacy and mental health help-seeking in adolescent males. 1,732 males aged 12 to 18 participated online while still at school. It found that participants in this cohort with a low or average personal alignment with norms of hegemonic masculinity, greater anxiety mental health literacy was positively associated with more favourable attitudes towards formal and informal help-seeking<sup>47</sup>. It concluded that mental health initiatives which consider the impact of masculinity and gender stereotypes have the potential to significantly improve help-seeking in this particular population.

### Stigma

Stigma, prejudice, and discrimination against those suffering from mental illness is unfortunately all too commonplace. There is also the issue of self-stigma, Lack of understanding or fear can lead to stigma and can be found in professional, social and cultural contexts. Having a mental illness is stigmatised in our society because men are traditionally viewed as strong, successful breadwinners who can take care of themselves and their families. This can create a climate where people are afraid to speak up about their health or accept their diagnoses and can have dangerous consequences. Despite the significant obstacles, we can make progress by educating people about mental health and its true impact, reshaping perceptions of so-called 'manhood'. Reducing the stigma of mental illness may encourage more people to seek treatment and, as a result, help them better manage their symptoms and lead happier lives.

2022 is the European Year of Youth. One of its key objectives is to enhance young people's development



across several areas including mental health, professional, social and personal. The EU Youth Strategy 2019-2027 has ended the stigmatisation of mental health issues and the promotion of social inclusion for all young people as its key objectives<sup>48</sup>.

### **Conclusion**

Research by academics from Maynooth University, the National College of Ireland and Trinity College Dublin revealed that of a representative sample of 1,100 adults living in Ireland, more than one in ten had attempted suicide. One of its authors, Dr Philip Hyland, Associate Professor of Psychology at the Department of Psychology at Maynooth University noted that just 5% of Ireland's total government health expenditure is assigned to mental health. This figure is far below the 12% recommended by the World Health Organisation (WHO). The study was published by Cambridge University Press in the journal *Epidemiology and Psychiatric services* on July 1<sup>st</sup> 2022 under the title 'State of Ireland's mental health: findings from a nationally representative survey'.<sup>44</sup>

Suicide, with its high number of male victims, involves many complex and interrelated risk factors, many of which relate specifically to men. There is a particularly pressing need now for a targeted approach to mental health awareness, education and suicide prevention among young and middle-aged men in Ireland.

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