



Suicidal ideation during the perinatal period

The perinatal period refers to the period of time from conception to the end of a baby’s first year.

Introduction

Suicide is a major contributor to global death rates and a leading cause of maternal deaths. Depression is considered to be a major risk factor for suicide. In South Africa, about one in five women experience depression in the perinatal period.

Definitions in relation to suicide

- **Ideation:** thoughts about committing suicide
- **Intent:** planning to commit suicide
- **Attempt:** following through with the act of trying to commit suicide

Suicidal ideation and intent may be extremely distressing for the mother. Suicidal behaviour and complete suicide may have devastating and intergenerational consequences for the family.

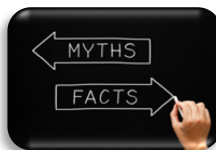
Risk factors

There are a number of factors that are linked to suicide ideation among women in the perinatal period. These include:

- A diagnosis of depression or anxiety
- Exposure to intimate partner violence
- Living in poverty
- Living in a dangerous environment
- Exposure to substance abuse
- A past suicide attempt

It is important to note that these risk factors do not necessarily mean that a woman will attempt suicide, it merely suggests that the risk for developing suicidal ideation is much higher.

Myth buster



MYTH: Suicide only occurs in people suffering with a mental health problem.

MYTH: If someone thinks about suicide, they are determined to die.

MYTH: Suicide happens suddenly, without warning.

FACT: Some people have suicidal thoughts or behaviours without having a mental health problem.

FACT: Thinking about suicide may or may not lead to planning or acting out these thoughts.

FACT: Most suicides often follow after some warning signs.

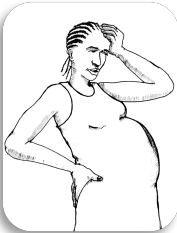
Symptoms and warning signs

Care providers and family may be able to detect symptoms and signs of suicidal ideation and thus possibly prevent further distress or the development of suicidal behaviour.

Some of the signs may include:

- Talk of suicide or dying “If I died, would you miss me?” or “It would be better if I were not here or dead.”
- Depressive symptoms, including feelings of guilt, hopelessness or no sense of the future.
- Feeling isolated or wanting to be alone “No one understands me”.
- Obsessive thinking - thinking ‘too much’, especially about harming oneself or dying
- Giving things away (clothes, expensive gifts) – “When I am gone, I want you to have this.”

Prevention



Mothers’ emotional needs can go undetected during the perinatal period where there is much attention on the baby. We suggest care providers routinely ask questions about suicidality during mental health or physical health screening. After establishing a caring relationship, the mother can be asked how she is doing and about thoughts or plans for self-harm.

A past history of suicide attempt should prompt extra care. It is essential to refer a mother with suicidal plans and behaviours for counselling, and perhaps medication, or make a plan for her safety until she can get treatment.

Conclusion

Women who are suicidal during the perinatal period often face numerous difficulties. The successful identification of these related factors, together with the necessary support, can assist in addressing their suicidal thoughts.

Suicidality in the perinatal period can be treated and prevented.