Public Perception of Mental Health and Suicide Prevention Survey Results

August 2020
# Introduction

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INTRODUCTION

Background & Objectives

The National Action Alliance for Suicide Prevention (Action Alliance), the Suicide Prevention Resource Center, the Education Development Center, and the American Foundation for Suicide Prevention (AFSP) commissioned The Harris Poll to conduct a nationally representative sample of U.S. adults in order to...

**Assess** the public's knowledge about suicide and the role they may play in being there for someone who is struggling or in crisis.

**Uncover** the public's perception of barriers that may prevent individuals from trying to help someone at risk for suicide.

**Understand** the impacts the COVID-19 pandemic has had on America's mental health and desire for care reform.

**Explore** changes in knowledge and attitudes and assess the impact of unified suicide prevention messaging efforts over time since the baseline research was conducted in 2018.
INTRODUCTION

Research Method

Mode:
Online survey

Length:
22 questions

Qualification Criteria:
• US residents
• Adults Ages 18+

Sample Size:
N=2,072

Field Dates:
July 22 – 24, 2020

Weighting:
Data weighted to ensure results are projectable to U.S. adults ages 18+

Method Statement (first paragraph must be included in all press materials):

This survey was conducted online within the United States by The Harris Poll on behalf of EDC and AFSP from July 22 - 24, 2020 among 2,072 U.S. adults ages 18 and older. This online survey is not based on a probability sample and therefore no estimate of theoretical sampling error can be calculated.

Figures for age within gender, region, race/ethnicity, household income, education, marital status, and size of household were weighted where necessary to align them with their actual proportions in the population. Propensity score weighting was used to adjust for respondents' propensity to be online.

All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and postsurvey weighting and adjustments. Therefore, The Harris Poll avoids the words “margin of error” as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Respondents for this survey were selected from among those who have agreed to participate in Harris Poll surveys. The data have been weighted to reflect the composition of the adult population. Because the sample is based on those who agreed to participate in panels, no estimates of theoretical sampling error can be calculated.

The 2018 research was conducted utilizing the same research method among n=2,015 US Adults between August 28 -30, 2018.

No edits were made to the trended questions between 2018 and 2020.

Statistically significant year-over-year differences are indicated with black and red circles throughout:

- Indicates a significant increase since 2018
- Indicates a significant decrease since 2018
Executive Summary
EXECUTIVE SUMMARY

Mental Health Beliefs & Experiences

**Personal mental and physical health are seen as equally important...**

78% think that mental health and physical health are equally important. For those who don’t, mental health (15% vs 8% for physical) is nearly 2Xs more likely to be seen as important and has even grown in priority since 2018 (11% mental health; 9% physical health).

**...but aren’t treated that way in the health care system.**

However, half (51%) believe that physical health is treated as more important than mental health in our current health care system.

**Majority of adults self-report personal experiences with mental health conditions**

60% have thought they had a mental health condition.

Most commonly anxiety (37%) and depression (35%).

**Many adults personally touched by suicide**

Over half (55%) know someone who has had suicidal thoughts or behaviors.

As in 2018, approximately 1 in 4 U.S. adults (24%) has personally thought about or attempted suicide.
EXECUTIVE SUMMARY

Mental Health Services and Support

Top places Americans would turn to obtain helpful resources/tips about coping with thoughts of suicide or helping a loved one who might be struggling:

- Mental Health Provider (50%)
- Dr. or Other Primary Care Health Professional (43%)
- Hotline/Crisis Line (41%)

Many have relied on virtual mental health services

- 25% telehealth with their regular mental HCP
- 19% telehealth with a different mental HCP
- 20% mental health app on their phone

26% Have ever used telehealth with a mental health care provider
EXECUTIVE SUMMARY

Attitudes Towards Suicide

Suicide is not seen as inevitable; most adults believe there are indications ahead of time and something can be done to try to help.

- 93% feel suicide is preventable at least sometimes
- 78% would be interested in learning how to play a role in helping someone who may be suicidal

Nearly all think something could help reduce the number of people who die by suicide

- Predominantly access to care, education, jobs, or housing (76%*), training for providers and leaders (69%*), and training for individuals or the public (67%*).

While a majority feel people show signs before dying by suicide, relatively few feel they can identify those signs

- 7 in 10 feel suicidal people show signs
- Only 1 in 5 believe that if someone wants to die by suicide, there is nothing anyone can do to help them.
- 1 in 3 feel they can tell when someone is suicidal

Many identify barriers that prevent people who are thinking about suicide from seeking help:

- Feeling like nothing will help (67%)
- Lack of hope (63%)
- Not knowing how to get help (55%)
- Embarrassment (55%, down sharply from 2018 at 63%).

* Represents a net of individual responses. Details can be found on page 29.
EXECUTIVE SUMMARY

Conversations Around Suicide

3 in 4 are comfortable being there for a loved one who might be struggling

Most feel comfortable talking to others if they are struggling with suicide

Adults show greater comfort levels talking about mental health than suicide

Majority say there are barriers that prevent them from discussing suicide with others

Though only 34% are very comfortable

58% are comfortable talking openly about mental health in public

49% are comfortable talking openly about suicide in public

More than 3 in 5 comfortable talking about struggles with a clinician (68%) or loved one (61%)

Not knowing the right words (31%) and not having enough knowledge (28%) are top barriers, on the rise from 2018

58% are comfortable talking openly about mental health in public

49% are comfortable talking openly about suicide in public

Not knowing the right words (31%) and not having enough knowledge (28%) are top barriers, on the rise from 2018
EXECUTIVE SUMMARY

Coping With Suicide

When faced with a specific situation of someone they know dealing with mental health or suicidal issues, a vast majority say they would do something:

- 90% would do something if they were worried about someone’s mental health
- 95% would do something if someone close to them was thinking about suicide

2 in 5 (40%) feel only clinical professionals can help someone who is suicidal, on the raise since 2018 (36%).

However, about 6 in 10 do say there are barriers to helping someone with suicidal thoughts:

- 30% fear they would make them feel worse
- 24% worry talking about it would increase the likelihood of action
- 22% would not know what to say/do

Half feel that seeing a mental health professional is a sign of strength:

- However, like in 2018, around one-third think it’s something most people cannot afford (34%),
- something that people do not know where to find (32%) or not accessible for most (26%).

If personally dealing with suicidal thoughts, nearly three quarters would tell someone:

But there is little consensus on who that person would be, split between:

- Mental health provider (34%)
- Family member (33%)
- Spouse (32%)
- Friend (30%)
EXECUTIVE SUMMARY

Personal Steps to Support Mental Health During COVID-19

The best way that the people or groups U.S. adults interact with most right now can show them support during COVID-19 is by:

- 26% Spending time listening or talking with them
- 17% Asking how they are doing

Most are doing something right now to support their mental health and well-being during COVID-19:

- 41% Exercising
- 38% Getting enough sleep
- 37% Eating healthy

Almost 9 in 10 feel the media should have some role in mental health and suicide prevention.

- 2 in 3 Say COVID-19 has made them more empathetic
- HALF Are more open to talking about mental health since COVID-19
- ¾ Are more aware of the importance of taking care of their mental health
Executive Summary

Mental Health Considerations Nationally

81% say that, as a result of the pandemic, it’s more important than ever to make suicide prevention a national priority.

A majority offer a great deal/a lot of support for initiatives to help promote mental health and suicide prevention during the COVID-19 pandemic:

- Continuing to offer covered telehealth therapy services as a permanent option: 58%
- Providing increased services for individuals in settings that most affected by COVID-19: 56%
- Asking patients about their mental health as a regular part of every primary care visit: 54%
- Increasing investment in approaches to prevent or intervene, before a mental health crisis occurs: 51%
- Providing mental health care where patients already receive their health care: 57%
- Providing access to mental health services tailored to needs of communities that have experienced higher rates of COVID-19: 55%
- Increasing specialized crisis response teams to respond to mental health crises vs. sending police: 53%
- Efforts that encourage people to talk more openly about challenges related to mental health and suicide: 51%
Experiences by Age
## Personal Experience with Mental Health Challenges and Suicide

*In general, younger adults have greater familiarity and experience with mental health and suicide.*

### More younger adults report having struggled with depression or anxiety.

<table>
<thead>
<tr>
<th></th>
<th>18-24 (B)</th>
<th>25-34 (C)</th>
<th>35-44 (D)</th>
<th>45-54 (E)</th>
<th>55-64 (F)</th>
<th>65-74 (G)</th>
<th>75+ (H)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety</td>
<td>53%(\text{EFGH})</td>
<td>53%(\text{EFGH})</td>
<td>43%(\text{FGH})</td>
<td>38%(\text{FGH})</td>
<td>26%(\text{G})</td>
<td>18%</td>
<td>21%</td>
</tr>
<tr>
<td>Depression</td>
<td>49%(\text{FGH})</td>
<td>43%(\text{FGH})</td>
<td>39%(\text{FGH})</td>
<td>41%(\text{FGH})</td>
<td>27%(\text{H})</td>
<td>23%(\text{H})</td>
<td>12%</td>
</tr>
</tbody>
</table>

### Younger adults are more likely to have attempted suicide.

<table>
<thead>
<tr>
<th></th>
<th>18-24 (B)</th>
<th>25-34 (C)</th>
<th>35-44 (D)</th>
<th>45-54 (E)</th>
<th>55-64 (F)</th>
<th>65-74 (G)</th>
<th>75+ (H)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have made a suicide attempt</td>
<td>14%(\text{FGH})</td>
<td>16%(\text{FGH})</td>
<td>12%(\text{FGH})</td>
<td>10%(\text{GH})</td>
<td>5%</td>
<td>4%</td>
<td>1%</td>
</tr>
</tbody>
</table>

### And are more likely to have worried about a loved one considering suicide or known someone who has thought about or attempted suicide:

<table>
<thead>
<tr>
<th></th>
<th>18-24 (B)</th>
<th>25-34 (C)</th>
<th>35-44 (D)</th>
<th>45-54 (E)</th>
<th>55-64 (F)</th>
<th>65-74 (G)</th>
<th>75+ (H)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have worried that someone I know might be thinking about suicide</td>
<td>33%(\text{EFGH})</td>
<td>23%(\text{GH})</td>
<td>28%(\text{FGH})</td>
<td>21%(\text{GH})</td>
<td>16%</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Someone I know has talked to me about thoughts of suicide</td>
<td>40%(\text{DEFGH})</td>
<td>34%(\text{FGH})</td>
<td>27%(\text{FGH})</td>
<td>23%(\text{FGH})</td>
<td>12%</td>
<td>10%</td>
<td>8%</td>
</tr>
<tr>
<td>Someone I know has attempted suicide but didn't die</td>
<td>37%(\text{CDEFGH})</td>
<td>25%(\text{FGH})</td>
<td>23%(\text{FH})</td>
<td>18%(\text{H})</td>
<td>13%</td>
<td>15%</td>
<td>10%</td>
</tr>
</tbody>
</table>
## Mental Health Support and Resources

Younger adults place a larger priority on mental health than their older counterparts but are somewhat more critical of seeking out professional help and more likely to turn to intimate connections like family, friends, or colleagues.

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Provider</strong></td>
<td>38%</td>
<td>39%</td>
<td>48%</td>
<td>51%</td>
<td>56%</td>
<td>59%</td>
<td>61%</td>
</tr>
<tr>
<td><strong>Doctor</strong></td>
<td>29%</td>
<td>35%</td>
<td>36%</td>
<td>43%</td>
<td>49%</td>
<td>59%</td>
<td>63%</td>
</tr>
<tr>
<td><strong>Friend</strong></td>
<td>29%</td>
<td>27%</td>
<td>30%</td>
<td>29%</td>
<td>14%</td>
<td>19%</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Social Media</strong></td>
<td>23%</td>
<td>12%</td>
<td>14%</td>
<td>13%</td>
<td>4%</td>
<td>3%</td>
<td>1%</td>
</tr>
<tr>
<td><strong>Coworker</strong></td>
<td>11%</td>
<td>9%</td>
<td>14%</td>
<td>7%</td>
<td>4%</td>
<td>2%</td>
<td>*</td>
</tr>
</tbody>
</table>

Younger adults are more likely to describe their mental health as more important than physical health. And while still a minority, adults under 55 are more likely to feel mental health is being treated like a bigger priority in the health care system.

<table>
<thead>
<tr>
<th><strong>Mental Health</strong></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Own mental health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More important</td>
<td>34%</td>
<td>26%</td>
<td>17%</td>
<td>13%</td>
<td>5%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td><strong>In health care system</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More important</td>
<td>9%</td>
<td>18%</td>
<td>14%</td>
<td>8%</td>
<td>3%</td>
<td>2%</td>
<td>-</td>
</tr>
</tbody>
</table>

Despite seeing it as a bigger priority and having greater exposure to mental health issues, younger adults are still more likely to flag some negative characteristics of visiting a mental health professional:

<table>
<thead>
<tr>
<th><strong>Mental Health</strong></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A sign of weakness</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More important</td>
<td>17%</td>
<td>10%</td>
<td>7%</td>
<td>6%</td>
<td>3%</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td><strong>A last resort</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More important</td>
<td>13%</td>
<td>14%</td>
<td>8%</td>
<td>5%</td>
<td>8%</td>
<td>5%</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Ineffective</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More important</td>
<td>9%</td>
<td>5%</td>
<td>7%</td>
<td>3%</td>
<td>4%</td>
<td>1%</td>
<td>*</td>
</tr>
</tbody>
</table>

Older adults ages 55+ are most inclined to rely on professionals when they require information and resources about coping with suicide. Younger adults also prioritize mental health providers as their top choice but are also more likely to turn to personal connections.
Conversations Surrounding Mental Health

For the most part, younger adults are more at ease talking about suicide, but are also more likely to see barriers to having open conversation.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
<td>F</td>
<td>G</td>
<td>H</td>
</tr>
<tr>
<td>Younger adults ages 25-44 are the most comfortable discussing suicide with friends and loved ones. This cohort is also the most comfortable talking openly about suicide and mental health in public.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comfortable talking to a friend or loved one if struggling with thoughts of suicide</td>
<td>62%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>69%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>71%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>62%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>55%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>54%</td>
<td>44%</td>
</tr>
<tr>
<td>Comfortable talking openly in public about mental health</td>
<td>60%</td>
<td>65%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>62%&lt;sup&gt;F&lt;/sup&gt;</td>
<td>59%</td>
<td>52%</td>
<td>54%</td>
<td>52%</td>
</tr>
<tr>
<td>Comfortable talking openly in public about suicide</td>
<td>45%</td>
<td>54%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>56%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>53%&lt;sup&gt;FH&lt;/sup&gt;</td>
<td>44%</td>
<td>44%</td>
<td>33%</td>
</tr>
</tbody>
</table>

If they were personally having thoughts of suicide, younger adults would also be more likely to reach out to tell a friend or social media network. Older ages 65+, on the other hand, are more likely to rely on a primary care doctor than their younger peers.

<table>
<thead>
<tr>
<th>Method of Communication</th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friend</td>
<td>44%&lt;sup&gt;EFGH&lt;/sup&gt;</td>
<td>35%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>35%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>30%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>24%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>25%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>15%</td>
</tr>
<tr>
<td>Social media</td>
<td>12%&lt;sup&gt;FH&lt;/sup&gt;</td>
<td>11%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>12%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>8%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>3%</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Primary care doctor</td>
<td>11%</td>
<td>22%&lt;sup&gt;B&lt;/sup&gt;</td>
<td>24%&lt;sup&gt;B&lt;/sup&gt;</td>
<td>20%&lt;sup&gt;B&lt;/sup&gt;</td>
<td>27%&lt;sup&gt;B&lt;/sup&gt;</td>
<td>34%&lt;sup&gt;BCDE&lt;/sup&gt;</td>
<td>43%&lt;sup&gt;BCDEF&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

That said, younger adults are more inclined to see barriers in talking about suicide publicly – especially not knowing the right words to say or fearing a negative impact on their reputation. Adults ages 75+ are by far the most likely to say they don’t have enough knowledge.

<table>
<thead>
<tr>
<th>Barriers to Talking About Suicide Publicly</th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cite any barriers (NET)</td>
<td>83%&lt;sup&gt;DEFGH&lt;/sup&gt;</td>
<td>79%&lt;sup&gt;DEFGH&lt;/sup&gt;</td>
<td>70%&lt;sup&gt;G&lt;/sup&gt;</td>
<td>65%&lt;sup&gt;G&lt;/sup&gt;</td>
<td>63%</td>
<td>55%</td>
<td>64%</td>
</tr>
<tr>
<td>I don’t know the right words to say</td>
<td>39%&lt;sup&gt;EFG&lt;/sup&gt;</td>
<td>37%&lt;sup&gt;EFG&lt;/sup&gt;</td>
<td>31%</td>
<td>26%</td>
<td>28%</td>
<td>25%</td>
<td>35%</td>
</tr>
<tr>
<td>Fear of negative impact on reputation</td>
<td>30%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>27%&lt;sup&gt;FGH&lt;/sup&gt;</td>
<td>25%&lt;sup&gt;EFH&lt;/sup&gt;</td>
<td>16%&lt;sup&gt;H&lt;/sup&gt;</td>
<td>13%</td>
<td>10%</td>
<td>6%</td>
</tr>
<tr>
<td>Don’t feel I have enough knowledge</td>
<td>26%</td>
<td>32%</td>
<td>23%</td>
<td>25%</td>
<td>29%</td>
<td>28%</td>
<td>42%&lt;sup&gt;BDEFG&lt;/sup&gt;</td>
</tr>
</tbody>
</table>
Preventability of Suicide and Actions in Crisis

Older adults ages 55+ are more likely to take concrete action if someone they know is contemplating suicide. Their younger peers are more likely to feel that nothing can be done to help and see barriers to getting personally involved.

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Feel suicide can be prevented often/all the time (NET)</strong></td>
<td>58%</td>
<td>50%</td>
<td>49%</td>
<td>44%</td>
<td>40%</td>
<td>46%</td>
<td>43%</td>
</tr>
<tr>
<td></td>
<td>EFGH</td>
<td>EFGH</td>
<td>EFGH</td>
<td>EFGH</td>
<td>EFGH</td>
<td>EFGH</td>
<td>EFGH</td>
</tr>
<tr>
<td><strong>“I can tell when someone is suicidal” Agree (NET)</strong></td>
<td>47%</td>
<td>42%</td>
<td>46%</td>
<td>35%</td>
<td>24%</td>
<td>15%</td>
<td>14%</td>
</tr>
<tr>
<td></td>
<td>EFGH</td>
<td>FGH</td>
<td>EFGH</td>
<td>FGH</td>
<td>GH</td>
<td>GH</td>
<td>GH</td>
</tr>
</tbody>
</table>

Younger adults ages 18-24 are more likely than other age cohorts to think that suicide can **often/always** be prevented. Older adults ages 55+ are also least likely to feel they can tell when someone is suicidal.

That said, adults under age 55 are more likely to feel that if someone wants to die by suicide, there is nothing anyone can do to help. Likewise, the younger cohorts are more likely to see barriers to helping someone close to them who is thinking about suicide.

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>“If someone wants to die by suicide, there is nothing anyone can do to help them” Agree (NET)</strong></td>
<td>26%</td>
<td>28%</td>
<td>33%</td>
<td>21%</td>
<td>11%</td>
<td>12%</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>EFGH</td>
<td>EFGH</td>
<td>DEFGH</td>
<td>FG</td>
<td>FG</td>
<td>FG</td>
<td>FG</td>
</tr>
<tr>
<td><strong>Cite any barriers to helping someone (NET)</strong></td>
<td>81%</td>
<td>78%</td>
<td>65%</td>
<td>56%</td>
<td>56%</td>
<td>46%</td>
<td>46%</td>
</tr>
<tr>
<td></td>
<td>DEFGH</td>
<td>DEFGH</td>
<td>DEFGH</td>
<td>G</td>
<td>G</td>
<td>G</td>
<td>G</td>
</tr>
<tr>
<td><strong>Afraid would make them feel worse</strong></td>
<td>49%</td>
<td>36%</td>
<td>29%</td>
<td>23%</td>
<td>27%</td>
<td>24%</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>CDEFGH</td>
<td>CDEFGH</td>
<td>CDEFGH</td>
<td>C</td>
<td>C</td>
<td>C</td>
<td>C</td>
</tr>
<tr>
<td><strong>Afraid talking about it would increase the likelihood of attempting suicide.</strong></td>
<td>35%</td>
<td>30%</td>
<td>26%</td>
<td>24%</td>
<td>15%</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td></td>
<td>EFGH</td>
<td>FGH</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
</tr>
</tbody>
</table>

Nearly everyone would take action if a loved one were thinking about suicide, but those 55+ are more likely to rely on professional care:

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Encourage to seek help from a mental health professional</strong></td>
<td>57%</td>
<td>44%</td>
<td>55%</td>
<td>56%</td>
<td>67%</td>
<td>77%</td>
<td>69%</td>
</tr>
<tr>
<td></td>
<td>C</td>
<td>C</td>
<td>C</td>
<td>C</td>
<td>CDE</td>
<td>BCDEF</td>
<td>CDE</td>
</tr>
<tr>
<td><strong>Encourage them to seek help from a Dr. or PCP</strong></td>
<td>34%</td>
<td>43%</td>
<td>39%</td>
<td>46%</td>
<td>55%</td>
<td>60%</td>
<td>54%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Help them make/take them to an appointment</strong></td>
<td>35%</td>
<td>36%</td>
<td>37%</td>
<td>41%</td>
<td>48%</td>
<td>55%</td>
<td>51%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BCD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Mental Health Experiences During COVID-19

Older adults are more likely to have taken various steps to keep their mental health strong since the start of the COVID-19 pandemic. Their younger peers have found it more difficult to access the care they need.

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exercising</td>
<td>34%</td>
<td>39%</td>
<td>35%</td>
<td>37%</td>
<td>51%</td>
<td>50%</td>
<td>41%</td>
</tr>
<tr>
<td>Getting enough sleep</td>
<td>30%</td>
<td>37%</td>
<td>30%</td>
<td>33%</td>
<td>44%</td>
<td>45%</td>
<td>52%</td>
</tr>
<tr>
<td>Eating healthy</td>
<td>25%</td>
<td>36%</td>
<td>39%</td>
<td>34%</td>
<td>35%</td>
<td>48%</td>
<td>48%</td>
</tr>
<tr>
<td>Staying in touch virtually with family and friends</td>
<td>32%</td>
<td>26%</td>
<td>29%</td>
<td>27%</td>
<td>36%</td>
<td>43%</td>
<td>52%</td>
</tr>
<tr>
<td>Sticking to a routine</td>
<td>23%</td>
<td>25%</td>
<td>29%</td>
<td>29%</td>
<td>38%</td>
<td>34%</td>
<td>46%</td>
</tr>
<tr>
<td>Increasing screen time</td>
<td>37%</td>
<td>22%</td>
<td>20%</td>
<td>25%</td>
<td>19%</td>
<td>23%</td>
<td>25%</td>
</tr>
<tr>
<td>Sleeping too much</td>
<td>31%</td>
<td>16%</td>
<td>11%</td>
<td>8%</td>
<td>6%</td>
<td>4%</td>
<td>3%</td>
</tr>
</tbody>
</table>

To support mental health and well-being during the COVID-19 pandemic, older adults are more likely to be taking healthy steps. Adults ages 18-24 are the most likely, by far, to have increased screen time and to be sleeping too much.

Younger adults are more inclined to say it is difficult to access the mental health care they need in the wake of the pandemic. Those ages 35-44 are also the most likely to say that, since the start of the pandemic, they are more open to talking about mental health.

"It is more difficult to access the mental health care I need in the wake of the pandemic." Agree (NET)

<table>
<thead>
<tr>
<th></th>
<th>18-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65-74</th>
<th>75+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exercising</td>
<td>61%</td>
<td>65%</td>
<td>62%</td>
<td>51%</td>
<td>42%</td>
<td>36%</td>
<td>24%</td>
</tr>
<tr>
<td>Getting enough sleep</td>
<td>65%</td>
<td>62%</td>
<td>51%</td>
<td>42%</td>
<td>36%</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>Eating healthy</td>
<td>48%</td>
<td>61%</td>
<td>70%</td>
<td>56%</td>
<td>40%</td>
<td>45%</td>
<td>31%</td>
</tr>
<tr>
<td>Staying in touch virtually with family and friends</td>
<td>56%</td>
<td>40%</td>
<td>45%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>Sticking to a routine</td>
<td>48%</td>
<td>61%</td>
<td>70%</td>
<td>56%</td>
<td>40%</td>
<td>45%</td>
<td>31%</td>
</tr>
<tr>
<td>Increasing screen time</td>
<td>56%</td>
<td>40%</td>
<td>45%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>Sleeping too much</td>
<td>56%</td>
<td>40%</td>
<td>45%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
</tr>
</tbody>
</table>
Detailed Findings
Mental Health Beliefs & Experiences
8 In 10 Say Physical And Mental Health Are Equally Important To Own Health

However, less than a third feel they are treated as equally important by our current health care system, similar to 2018.

**Importance of Physical and Mental Health to Own Health**

<table>
<thead>
<tr>
<th>Year</th>
<th>Mental Health Is More Important</th>
<th>They Are Equally Important</th>
<th>Physical Health Is More Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>15%</td>
<td>78%</td>
<td>8%</td>
</tr>
<tr>
<td>2018</td>
<td>11%</td>
<td>80%</td>
<td>9%</td>
</tr>
</tbody>
</table>

**Importance of Physical and Mental Health in Current Health Care System**

<table>
<thead>
<tr>
<th>Year</th>
<th>Mental Health Is Treated As More Important</th>
<th>They Are Treated As Equally Important</th>
<th>Physical Health Is Treated As More Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>9%</td>
<td>31%</td>
<td>51%</td>
</tr>
<tr>
<td>2018</td>
<td>7%</td>
<td>27%</td>
<td>55%</td>
</tr>
</tbody>
</table>

Indicates a significant increase since 2018
Indicates a significant decrease since 2018

Q10 Considering your own health, do you think that mental health or physical health is more important, or are they equally important?
Q15 Which of the following best describes how you think the importance of mental health and physical health are treated in our current health care system?
Seeing Mental Health Professional Is Sign Of Strength, But Inaccessible

While half see it as sign of strength, more than one in three feel it is something most people cannot afford and one quarter say it is not accessible for most people.

Seeing A Mental Health Professional Is…

- A sign of strength: 51% (2020), 50% (2018)
- Something most people can’t afford: 34% (2020), 36% (2018)
- Something people do not know where to find: 32% (2020), 32% (2018)
- Not accessible for most people: 26% (2020), 25% (2018)
- A last resort: 8% (2020), 7% (2018)
- A sign of weakness: 7% (2020), 4% (2018)
- Ineffective: 5% (2020), 3% (2018)
- Not as good as seeing their minister, pastor, priest, or rabbi: 4% (2020), 4% (2018)
- Not necessary because people should stand on their own: 4% (2020), 3% (2018)

13% of respondents in 2020 felt none of these options accurately reflected their opinion, compared to 14% in 2018.

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)
Q20 Which of the following best reflects your opinion? Please select all that apply.
MENTAL HEALTH BELIEFS & EXPERIENCES

Depression And Anxiety Are Most Common Mental Health Issues

6 in 10 have thought they have a mental health condition, on par with 2018.

**Self-Report Experience with Any Mental Health Condition**

2020: 60%

2018: 57%

### Mental Health Issue Experienced

- **Anxiety**: 37% (2020) vs. 35% (2018)
- **Depression**: 35% (2020) vs. 36% (2018)
- **Social Anxiety Disorder**: 19% (2020) vs. 18% (2018)
- **Obsessive Compulsive Disorder (OCD)**: 10% (2020) vs. 11% (2018)
- **Panic Disorder**: 10% (2020) vs. 9% (2018)
- **Generalized Anxiety Disorder (GAD)**: 10% (2020) vs. 9% (2018)
- **Posttraumatic Stress Disorder (PTSD)**: 9% (2020) vs. 9% (2018)
- **Alcohol Use Disorder**: 8% (2020) vs. 9% (2018)
- **Bipolar Disorder**: 8% (2020) vs. 5% (2018)
- **Eating Disorder (e.g., anorexia, bulimia)**: 8% (2020) vs. 4% (2018)
- **Drug Use Disorder**: 6% (2020) vs. 4% (2018)
- **Other mental health condition**: 1% (2020) vs. 1% (2018)

**Notes**

- 38% did not report (2018: 41%)
- 2% did not respond (2018: 2%)

**Questions**

Q30 Have you ever thought that you have any of the following? Please select all that apply.
MENTAL HEALTH BELIEFS & EXPERIENCES

More than Half of Americans Know Someone who Has Thought About Suicide

And nearly a quarter have personally thought about or made a suicide attempt.

**Personal Experience with Suicide**

- **55%** know someone (53% 2018)
- **24%** Personally have thought about or have made an attempt (23% 2018)

**BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)**

Q90 Which of the following are true for you? Please select all that apply.
Attitude Towards Suicide
**BELIEFS AROUND SUICIDE**

**Eight In 10 Disagree That If Someone Wants To Die, Nothing Can Be Done**

About seven in 10 feel most suicidal people usually show signs beforehand, but only a third feel they can tell.

**2020 Agreements With Statements About Suicide**

<table>
<thead>
<tr>
<th>Statement</th>
<th>2020 Agree (NET)</th>
<th>2018 Agree (NET)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I would be interested in learning how I might be able to play a role in helping someone who may be suicidal.</td>
<td>7%</td>
<td>78%</td>
</tr>
<tr>
<td>Most people who die by suicide usually show some signs beforehand.</td>
<td>8%</td>
<td>71%</td>
</tr>
<tr>
<td>Only clinical professionals (e.g. doctors, mental health professionals) can help someone who is suicidal.</td>
<td>24%</td>
<td>40%</td>
</tr>
<tr>
<td>I can tell when someone is suicidal.</td>
<td>27%</td>
<td>33%</td>
</tr>
<tr>
<td>If someone wants to die by suicide, there is nothing anyone can do to help them.</td>
<td>48%</td>
<td>21%</td>
</tr>
</tbody>
</table>

**BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)**

Q55 How much do you agree or disagree with each of the following statements?

- Indicates a significant increase since 2018
- Indicates a significant decrease since 2018
**BELIEFS AROUND SUICIDE**

**Vast Majorities Believe Suicide Can Be Prevented at Least Sometimes**

Nearly half (47%) feel it can be prevented all the time or often.

**Frequency of Which Suicide Can Be Prevented**

- **2020**
  - At least sometimes: 93%
  - All the time/often: 47%

- **2018**
  - At least sometimes: 94%
  - All the time/often: 44%

Indicates a significant increase since 2018

Indicates a significant decrease since 2018

---

**Q60** Do you think suicide can be prevented...?
BELIEFS AROUND SUICIDE

Adults See Many Barriers Keeping Suicidal People From Seeking Help

Top factors include feeling like nothing will help, lack of hope, embarrassment (though less than in 2018), and not knowing how to get help.

Verbatim Responses

“People will look at them different, as if they are crazy and need to be committed”
Female, 56

“Thinking nobody will help them”
Male, 56

“Being reported to the authorities if you’re on public assistance and being forced to leave your home”
Female, 89

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)

Q70 What do you think are some of the barriers that prevent people who are thinking about suicide from seeking help? Please select all that apply.

Indicates a significant increase since 2018
Indicates a significant decrease since 2018

7% not at all sure (2018: 5%)
BELIEFS AROUND SUICIDE

Americans Point to Many Ways to Help Reduce Number of Deaths by Suicide

Most commonly educating the public about suicide prevention, providing better access to mental health care, or educating first responders.

### Actions to Help Reduce the Number of People who Die by Suicide

<table>
<thead>
<tr>
<th>ACCESS (NET)</th>
<th>76%</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICAL ACCESS (SUB-NET)</td>
<td>69%</td>
</tr>
<tr>
<td>Providing better access to mental health care</td>
<td>52%</td>
</tr>
<tr>
<td>Providing better access to health care in general</td>
<td>45%</td>
</tr>
<tr>
<td>Providing better access to medication</td>
<td>43%</td>
</tr>
<tr>
<td>Providing better access to education</td>
<td>33%</td>
</tr>
<tr>
<td>Providing better access to jobs</td>
<td>29%</td>
</tr>
<tr>
<td>Providing better access to housing</td>
<td>26%</td>
</tr>
<tr>
<td>TRAINING/EDUCATION FOR PROFESSIONALS (NET)</td>
<td>69%</td>
</tr>
<tr>
<td>Educating first responders to identify and help people who are suicidal</td>
<td>47%</td>
</tr>
<tr>
<td>Providing better training for health care providers on how to identify and help someone who is thinking about suicide</td>
<td>44%</td>
</tr>
<tr>
<td>Educating community leaders such as teachers and clergy about how to identify and help people</td>
<td>44%</td>
</tr>
<tr>
<td>Educating the media</td>
<td>28%</td>
</tr>
<tr>
<td>TRAINING FOR INDIVIDUALS/PUBLIC (NET)</td>
<td>67%</td>
</tr>
<tr>
<td>Educating the public about suicide prevention</td>
<td>53%</td>
</tr>
<tr>
<td>Teaching problem-solving skills as a way to prevent suicide</td>
<td>38%</td>
</tr>
<tr>
<td>Training in life skills and resilience</td>
<td>33%</td>
</tr>
<tr>
<td>RESEARCH (NET)</td>
<td>41%</td>
</tr>
<tr>
<td>Conducting or funding research into how to help people who are thinking about suicide or have made a suicide attempt</td>
<td>36%</td>
</tr>
<tr>
<td>Conducting or funding research into why people die by suicide</td>
<td>27%</td>
</tr>
<tr>
<td>Improving the ability to identify at-risk populations</td>
<td>37%</td>
</tr>
<tr>
<td>Providing programs to assist those impacted by COVID-19</td>
<td>29%</td>
</tr>
<tr>
<td>Sharing stories of people who have thought about or attempted suicide</td>
<td>28%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
</tr>
<tr>
<td>Nothing would help</td>
<td>1%</td>
</tr>
<tr>
<td>Not at all sure</td>
<td>8%</td>
</tr>
</tbody>
</table>
Conversations Around Suicide
CONVERSATIONS AROUND SUICIDE

**Americans Display Relatively Low Comfort Levels With Talking About Suicide**

Greater comfort levels exist for talking about mental health publicly, compared to suicide specifically.

<table>
<thead>
<tr>
<th>Conversation</th>
<th>2020 Comfortable</th>
<th>2018 Comfortable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being there for or helping a loved one who might be struggling or having thoughts of suicide</td>
<td>6%  19%  41%  34%</td>
<td>75%  76%</td>
</tr>
<tr>
<td>Talking to a clinician (primary care doctor, mental health professional) if you have or are struggling with thoughts of suicide</td>
<td>11%  22%  42%  26%</td>
<td>68%  66%</td>
</tr>
<tr>
<td>Talking to a friend or loved one if you have or are struggling with thoughts of suicide</td>
<td>12%  27%  38%  23%</td>
<td>61%  59%</td>
</tr>
<tr>
<td>Discussing suicide with your friends and loved ones</td>
<td>13%  27%  38%  22%</td>
<td>60%  58%</td>
</tr>
<tr>
<td>Talking openly in public about mental health</td>
<td>15%  26%  36%  22%</td>
<td>58%  56%</td>
</tr>
<tr>
<td>Talking openly in public about suicide</td>
<td>22%  29%  30%  19%</td>
<td>49%  45%</td>
</tr>
</tbody>
</table>

**BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)**

Q120 How comfortable do you feel...?

- **Indicates a significant increase since 2018**
- **Indicates a significant decrease since 2018**
CONVERSATIONS AROUND SUICIDE

Nearly 7 In 10 Say Something Would Keep Them From Talking About Suicide

Many barriers have increased since 2018, including not knowing the right words to say, lack of knowledge, and fear of reputation impacts.

Barriers to Taking About Suicide with Others

Say nothing would prevent them from talking about suicide with others

- I don’t know the right words to say: 32% 2020, 37% 2018
- Don’t feel I have enough knowledge: 28% 2020, 22% 2018
- I’m not comfortable with the topic: 19% 2020, 17% 2018
- Fear of negative impact on me or my reputation: 19% 2020, 16% 2018
- I haven’t had the opportunity: 17% 2020, 14% 2018
- Other: 1% 2020, 2% 2018

Verbatim Responses

“I tried to talk to a mental health professional about my feelings once and they called the police and had me committed without trying to help beforehand”
Female, 40

“It’s something I’ve struggled with too and I don’t feel like talking about my past”
Female, 19

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)
Q140 Which of the following would prevent you from talking about suicide with others? Please select all that apply.
Coping with Suicide
DEALING WITH SUICIDE

Nine in 10 Would Take Action If Worried About Someone’s Mental Health

Though many actions less commonly selected in 2020 compared to 2018.

90% Would do something if they were worried about someone’s mental health (91% 2018)

Top Actions for When Worried About Someone’s Mental Health

- Encourage them to seek help from a mental health professional (58% 2018)
- Offer to listen to their concerns (52% 2018)
- Encourage them to seek help from a doctor or primary care health professional (47% 2018)
- Tell them I am worried about them (45% 2018)

Additional Actions Taken

- 7% wouldn’t know what to do (6% 2018)
- 3% would do nothing; it’s none of their business (3% 2018)

Q105 Which of the following describe what you would do if you were worried about the mental health of someone you know? Please select all that apply.

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)

34% Would do something if they were worried about someone’s mental health (91% 2018)
## DEALING WITH SUICIDE

### Most Would Encourage Seeking Help or Offer to Listen to Someone Suicidal

Though many actions less commonly selected in 2020 compared to 2018.

**95%**

Would do something if someone close was thinking about suicide (94% 2018)

### Top Actions for Dealing with Someone Close Thinking of Suicide

<table>
<thead>
<tr>
<th>Action</th>
<th>2020</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourage them to seek help from a mental health professional</td>
<td>60%</td>
<td>64%</td>
</tr>
<tr>
<td>Offer to listen to their concerns</td>
<td>52%</td>
<td>60%</td>
</tr>
<tr>
<td>Encourage them to seek help from a doctor or primary care health professional</td>
<td>47%</td>
<td>53%</td>
</tr>
<tr>
<td>Stay with them until they could get help</td>
<td>47%</td>
<td>50%</td>
</tr>
<tr>
<td>Tell them you are worried about them</td>
<td>43%</td>
<td>49%</td>
</tr>
<tr>
<td>Help them make/take them to an appointment</td>
<td>43%</td>
<td>50%</td>
</tr>
</tbody>
</table>

### Additional Actions Taken

<table>
<thead>
<tr>
<th>Action</th>
<th>2020</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offer to help them with everyday tasks to support them while they manage the crisis</td>
<td>39%</td>
<td>44%</td>
</tr>
<tr>
<td>Talk with their friends or family about your concerns</td>
<td>37%</td>
<td>44%</td>
</tr>
<tr>
<td>Provide them with a phone number for a crisis hotline or other resource</td>
<td>33%</td>
<td>38%</td>
</tr>
<tr>
<td>Encourage them to seek help from clergy</td>
<td>31%</td>
<td>32%</td>
</tr>
<tr>
<td>Call a crisis hotline</td>
<td>29%</td>
<td>36%</td>
</tr>
<tr>
<td>Tell them everything will be ok</td>
<td>22%</td>
<td>23%</td>
</tr>
<tr>
<td>Visit a website for information</td>
<td>19%</td>
<td>23%</td>
</tr>
<tr>
<td>Take them to the emergency room (ER)</td>
<td>18%</td>
<td>22%</td>
</tr>
<tr>
<td>Call 9-1-1</td>
<td>17%</td>
<td>23%</td>
</tr>
<tr>
<td>Report them through a social media suicide prevention reporting function</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Leave them alone</td>
<td>4%</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Indicates a significant increase since 2018
Indicates a significant decrease since 2018

*BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)
Q80 Which of the following describe what you would do if someone close to you was thinking about suicide? Please select all that apply.*
Six in 10 Say Something Might Stop Them From Helping Someone Close

Three in 10 adults would be afraid they would make their friend/loved one feel worse.

I would be afraid that I would make them feel worse.
I would be afraid that talking about it would increase the likelihood of them attempting suicide.
I wouldn’t know what to say or do.
I wouldn’t be able to fix the problems they are facing.
I am not a doctor or medical professional.
I did not feel close enough to the person to ask if they needed help.
I wouldn’t want to get involved.

Barriers to Trying to Help Someone Close with Suicidal Thoughts

Say nothing would prevent them from trying to help

Report at least one barrier would prevent them from helping someone who is thinking about suicide

Verbatim Response

“If they were physically going to harm me”
Female, 59
DEALING WITH SUICIDE

Nearly Three Quarters Say They Would Talk About Suicidal Thoughts

Most commonly, adults would talk to their mental health provider, family member, spouse/significant other, or friend.

Admitting Suicidal Thoughts

Would tell someone if they were having thoughts of suicide

- 73% (2020 & 2018)
- 12% would tell no one (12% 2018)
- 12% are not sure (13% 2018)
- 3% declined to answer (2% 2018)

Person to Whom Adults Would Tell about Thoughts of Suicide

Mental health provider: 34% (2020) 33% (2018)
Family member (other than spouse/significant other): 33% (2020) 31% (2018)
Spouse/significant other: 32% (2020) 33% (2018)
Primary care doctor: 25% (2020) 27% (2018)
Hotline/Crisis line: 21% (2020) 20% (2018)
Clergy/Faith leader: 14% (2020) 13% (2018)
Social media network: 7% (2020) 4% (2018)
Coworker: 5% (2020) 4% (2018)
Other: 1% (2020) 1% (2018)

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)
Q95 If you were having thoughts of suicide, who would you tell? Please select all that apply.
Where Specific Groups May Turn if Experiencing Thoughts of Suicide

These groups had notable differences from their peers to turn to various sources if they were having thoughts of suicide.

**South**
- Clergy/Faith Leader (17%)
- Friend (35%)
- Hotline/Crisis Line (26%)

**West**
- Friend (35%)
- Family Member (38%)
- Hotline/Crisis Line (26%)

**Midwest**
- Family Member (38%)
- Hotline/Crisis Line (26%)

**Lower Income (less than $75K)**
- PCP (24% < $50K, 31% $50K-$75K)

**Unemployed**
- PCP (28%)

**Parents**
- Spouse/Partner (38%)

**Hispanic**
- Family Member (40%)

**Age 18-24**
- Friend (44%)
- Social Media (12%)
- Coworker (9%)

**Age 25-34**
- Friend (35%)
- Social Media (11%)
- Coworker (9%)

**Age 35-44**
- Friend (35%)
- Social Media (12%)
- Clergy/Faith Leader (16%)

**Age 45-54**
- Friend (30%)
- PCP (24%)

**Age 55-64**
- Spouse/Partner (37%)
- PCP (34%)

**Age 65-74**
- PCP (27%)
- Hotline/Crisis Line (26%)

**Age 75+**
- PCP (34%)
- Hotline/Crisis Line (26%)

*Base: Qualified Respondents 2020 (n=2072)*

Q95 If you were having thoughts of suicide, who would you tell? Please select all that apply.
DEALING WITH SUICIDE

Adults Would Seek Resources From Mental Health or Primary Care Provider

Additional sources for coping tips are a hotline/crisis line and internet searches.

Top Sources for Resources/Tips About Coping with Suicide for Self or Loved One

- **50%** Mental health provider (51% 2018)
- **43%** Doctor or primary care health professional (45% 2018)
- **41%** Hotline/Crisis line (40% 2018)
- **35%** Internet search (35% 2018)

Additional Sources

- **25%** Family member (other than spouse)
- **24%** Friend
- **24%** Spouse/Significant other/Partner
- **22%** Clergy/Faith leader
- **10%** Social media network
- **8%** News media
- **7%** Coworker
- **7%** Other

- **2%** No one (4% 2018)
- **9%** Not sure (9% 2018)

**Q150** Where would you go to obtain helpful resources or tips about coping with thoughts of suicide or helping a loved one who might be struggling with thoughts of suicide? Please select all that apply.

BASE: QUALIFIED RESPONDENTS 2020 (n=2072), 2018 (n=2015)

Indicates a significant increase since 2018

Indicates a significant decrease since 2018

39
Mental Health Impacts of the COVID-19 Pandemic
Since COVID, Greater Awareness of Importance of Taking Care of Mental Health

Two-thirds say COVID-19 has made them more empathetic and half say they are more open to discussing mental health.

**Since the start of the COVID-19 pandemic, I am more aware of the importance of taking care of my own mental health.**

- Strongly disagree: 7%
- Somewhat disagree: 20%
- Somewhat agree: 44%
- Strongly agree: 29%

**Agree (NET): 73%**

**My mental health hasn’t changed much since the start of COVID-19.**

- Strongly disagree: 9%
- Somewhat disagree: 21%
- Somewhat agree: 37%
- Strongly agree: 33%

**Agree (NET): 70%**

**COVID-19 has made me a more empathetic person.**

- Strongly disagree: 9%
- Somewhat disagree: 25%
- Somewhat agree: 45%
- Strongly agree: 21%

**Agree (NET): 66%**

**Since the start of the COVID-19 pandemic, I have become more open to talking about mental health.**

- Strongly disagree: 14%
- Somewhat disagree: 34%
- Somewhat agree: 38%
- Strongly agree: 14%

**Agree (NET): 52%**
MENTAL HEALTH IMPACTS OF THE COVID-19 PANDEMIC

Many Rely on Positive Coping Mechanisms During COVID-19

However, some engage in more negative activities including sleeping too much, eating less healthy, drinking more, or using recreational drugs.

Top Mental Health Coping Mechanisms During COVID-19

- Exercising: 41%
- Getting enough sleep: 38%
- Eating healthy: 37%
- Staying in touch virtually: 33%
- Sticking to a routine: 30%
- Reading/Watching the news: 29%

Additionally:

- Exercising: 41%
- Getting enough sleep: 38%
- Eating healthy: 37%
- Sticking to a routine: 30%
- Reading/Watching the news: 29%
- Meditating: 16%
- Volunteering/participating in charity work: 10%
- Limiting time on social media: 13%
- Learning a new hobby: 17%
- Eating less healthy: 10%
- More recreational drugs: 8%
- Sleeping too much: 11%
- Gaining a greater understanding of inequities and the systemic problems that impact on communities of color: 12%
- Avoiding or limiting reading/watching the news: 20%
- Being more intentional about self-care: 21%
- Increasing screen-time: 24%
- Having in-person conversations with those in my household: 25%

Q210 For better or worse, which of the following, if any, are you doing to cope with or support your own mental health and well-being during the COVID-19 pandemic? Please select all that apply.

Verbatim Responses:

"Making masks for others" Female, 69
"Keeping busy/ mind off problems" Male, 59
"Prayer" Male, 59

"Not doing anything": 12%
MENTAL HEALTH IMPACTS OF THE COVID-19 PANDEMIC

Americans Most Commonly Seek Conversation as Support During COVID-19

Others would like to be asked how they are doing or offers of prayer.

Best Way Person/Groups Interact can Support During COVID-19

- Spend time listening and talking with me: 26%
- Ask how I am doing: 17%
- Pray with me or pray for me: 12%
- Help me identify or advocate for basic needs, such as food, housing, and/or mental health services: 10%
- Help ease my mind about COVID-19 related stress: 10%
- Give me some time alone: 8%
- Have conversations about other social issues in the context of COVID-19 (e.g., systemic racism, racial justice, etc.): 6%
- Provide me an opportunity to reflect on COVID-19's impact on my life: 5%
- Help me navigate relationship/communication challenges with others: 4%
- Other: 3%

Verbatim Responses

- "Be normal" Male, 59
- "Help me with ordering supplies" Female, 67
- "We need to be there for other people that need support" Female, 75
- "Wear face masks and social distancing" Female, 64

Q205 Thinking about a person or group you interact with most right now, what would be the best way that they can show you support during COVID-19? Please select only one.
Accessing Necessary Health Care During the COVID-19 Pandemic
Half of Americans Find it More Difficult to Access Needed Mental Health Care

At the same time nearly half disagree.

“*It is More Difficult to Access the Mental Health Care I Need in the Wake of the Pandemic.*”

- **51%** Agree
- **18%** Somewhat agree
- **31%** Somewhat disagree
- **36%** Strongly disagree

**BASE: QUALIFIED RESPONDENTS 2020 (n=2072)**

**Q215** How much do you agree or disagree with each of the following statements?
A Quarter Have Used Telehealth With Regular Mental Health Provider

About 1 in 5 have used with another mental health provider or have used a mental health app.

Use of Mental Health Services

- Telehealth with my regular mental health care provider: 75% No, I have never used, 15% Yes, before/prior to the COVID-19 pandemic, 12% Yes, since the start of the COVID-19 pandemic
- Mental health app on my phone: 80% No, I have never used, 20% Yes, before/prior to the COVID-19 pandemic, 12% Yes, since the start of the COVID-19 pandemic
- Telehealth with a new or different mental health care provider than the one I regularly see: 81% No, I have never used, 10% Yes, before/prior to the COVID-19 pandemic, 10% Yes, since the start of the COVID-19 pandemic

26% Have ever used telehealth with a mental health care provider (21% since COVID)
National Health Care Policies During the COVID-19 Pandemic
4 in 5 Feel it is More Important than Ever to Make Suicide Prevention a National Priority

More than a third strongly agree.

“As a Result of the Pandemic, it’s More Important Than Ever to Make Suicide Prevention a National Priority.”

81% Agree
(36% strongly; 45% somewhat)

19% Disagree
(14% strongly; 5% somewhat)
Majorities Support Initiatives to Promote Mental Health and Suicide Prevention

Americans most commonly show a lot/great deal of support for telehealth therapy, mental health care where patients already receive care, and increased services for those who live/work in highly affected areas.

**Support of Initiatives to Help Promote Mental Health and Suicide Prevention During COVID-19**

- **Continuing to offer, and have health insurance cover, telehealth therapy services as a permanent option for patients**
  - Not at all: 4%
  - A little: 11%
  - A moderate amount: 27%
  - A lot: 28%
  - A great deal: 30%
  - Support A Lot/ A Great Deal (NET): 58%

- **Providing mental health care where patients already receive their health care**
  - Not at all: 3%
  - A little: 11%
  - A moderate amount: 29%
  - A lot: 29%
  - A great deal: 28%
  - Support A Lot/ A Great Deal (NET): 57%

- **Providing increased services for individuals who live or work in settings that have been most affected by COVID-19**
  - Not at all: 4%
  - A little: 11%
  - A moderate amount: 30%
  - A lot: 28%
  - A great deal: 28%
  - Support A Lot/ A Great Deal (NET): 56%

- **Providing access to mental health/suicide prevention services tailored to specific communities/populations that have experienced higher rates of COVID-19**
  - Not at all: 4%
  - A little: 11%
  - A moderate amount: 30%
  - A lot: 27%
  - A great deal: 28%
  - Support A Lot/ A Great Deal (NET): 55%

- **Asking patients questions about their mental health as a regular part of every primary care visit**
  - Not at all: 5%
  - A little: 9%
  - A moderate amount: 32%
  - A lot: 26%
  - A great deal: 28%
  - Support A Lot/ A Great Deal (NET): 54%

- **Increasing use of specialized crisis response teams to respond to mental health crises instead of sending police**
  - Not at all: 6%
  - A little: 12%
  - A moderate amount: 30%
  - A lot: 26%
  - A great deal: 27%
  - Support A Lot/ A Great Deal (NET): 53%

- **Increasing investment in approaches designed to prevent or intervene early, before a mental health crisis occurs**
  - Not at all: 4%
  - A little: 12%
  - A moderate amount: 32%
  - A lot: 27%
  - A great deal: 24%
  - Support A Lot/ A Great Deal (NET): 51%

- **Efforts that encourage people to talk more openly about challenges related to mental health and suicide**
  - Not at all: 4%
  - A little: 14%
  - A moderate amount: 31%
  - A lot: 27%
  - A great deal: 24%
  - Support A Lot/ A Great Deal (NET): 51%

- **Improving data collection systems to provide real-time data on mental health and suicide issues**
  - Not at all: 6%
  - A little: 13%
  - A moderate amount: 35%
  - A lot: 24%
  - A great deal: 22%
  - Support A Lot/ A Great Deal (NET): 46%
Nearly 2 in 5 Feel Media Exaggerates Mental Health and Suicide Crisis

Yet, many see a role for media in mental health and suicide prevention, most commonly educating people about assistance programs or treatments related to COVID-19, education about risks as a result of COVID-19, providing information/resources, or stressing importance of seeking help.
Demographics
Demographics

**Age**
- 18-34: 29%
- 35-44: 17%
- 45-54: 16%
- 55-64: 17%
- 65+: 21%

**Race**
- White: 68%
- Black or African American: 12%
- Asian or Pacific Islander: 7%
- Native American/Alaskan Native: 3%
- Other race: 8%
- Decline to answer: 1%

**Gender**
- Male: 48%
- Female: 52%

**Hispanic Ethnicity**
- Yes, of Hispanic origin: 16%
- No, not of Hispanic origin: 83%
- Decline to answer: 2%

**Children in HH**
- 0 kids: 63%
- 1 to 2 kids: 32%
- 3+ kids: 5%

**Locale**
- Urban: 34%
- Suburban: 49%
- Rural: 17%

**Region**
- Midwest: 20%
- Northeast: 17%
- South: 38%
- West: 24%
Demographics

Education

- Less than high school: 3%
- Completed some high school: 7%
- High school graduate or equivalent (e.g., GED): 16%
- Job-specific training programs after high school: 4%
- Completed some college, but no degree: 12%
- Associate’s degree: 17%
- College graduate (e.g., B.A., A.B., B.S.): 3%
- Completed some graduate school, but no degree: 15%
- Completed graduate school (e.g., M.S., M.D., Ph.D.): 7%

Income

- Less than $15,000: 7%
- $15,000-$24,999: 7%
- $25,000-$34,999: 11%
- $35,000-$49,999: 17%
- $50,000-$74,999: 13%
- $75,000-$99,999: 12%
- $100,000-$124,999: 24%
- $125,000 or more: 2%
- Decline to answer: 2%

Marital Status

- 28% Single, never married
- 54% Married or civil union / living with partner
- 18% Divorced / separated / widowed

Employment

- 42% Employed full time
- 8% Employed part time
- 7% Self-employed full time
- 6% Not employed, but looking for work
- 2% Not employed and not looking for work
- 4% Not employed, unable to work
- 22% Retired
- 6% Student
- 7% Homemaker