

Suicide Prevention for High Bridges

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Abstract

Jumps from bridges constitute a large portion of suicides in industrialized countries. Public opinion has changed in a way that bridge owners are evaluating to take action, even if no third parties are endangered by falling bodies. Research on the sequence of suicidal actions shows that countermeasures exist and prevention is possible. Options for both, non-constructive and constructive measures are presented in a systematic way and illustrated with examples.

Keywords: Hotspot, Werther effect, mythos effect, railing.

1 Introduction

Jumping from bridges with large drop height is one of the preferred suicide methods for people that do not request help and want to terminate their life. The public has accepted this fact until recently as a consequence of conceding free will to adult persons. At the Golden Gate Bridge in San Francisco, the official counting of witnessed suicides stopped shortly before the thousandth event was registered to prevent further followers. Until 2014, the number of suicides since the bridge opened in 1937 is estimated to be about 1'600.

In Berne, the most popular jumping-off point was the Minster Terrace with a low balustrade of only one meter in height, 35 m above an urban zone. At the end of the 1990's, the population no longer accepted the risk and psychological strain caused by suicides to pedestrians and especially children playing underneath. A net was mounted 7 m below the balustrade that prevented further jumps. Surprisingly, the number of suicides did not increase at the nearby bridges across the Aare valley. Subsequent research on bridges all over Switzerland showed that organizational as well as suitable constructive measures exist to decrease the number of deliberate lethal jumps from high bridges.

2 Research on suicide by jumping from bridges in Switzerland

2.1 Statistics

1'350 to 1'550 persons actively terminate their life in Switzerland every year, which results in a rate of 17,5 suicides per 100'000 persons. The fatalities due to suicides are about three times as high as due to traffic accidents and higher than in other comparable countries [1]. Reasons might be that in Switzerland, actively terminating one's life is not prohibited by law and more or less socially accepted. Therefore, doctors that certify death are not forced to hide the real reason of a fatality, as it might be the case in more religious cultures, which means that only few cases are disguised. Furthermore, suicide seems to be a luxury problem that does not occur when people struggle for daily life. Since 2010, the Swiss Federal Statistics Office differentiates between socalled (medically) assisted suicides, which are also quite popular and even attract foreigners, and