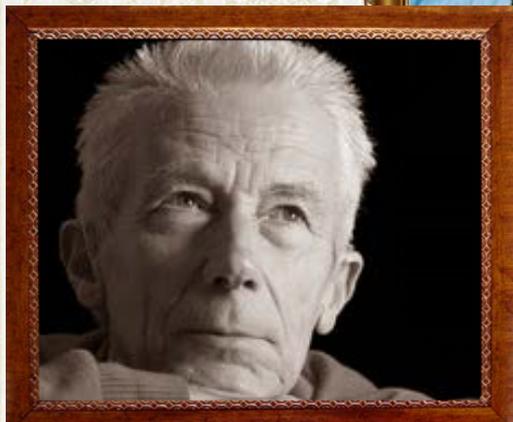


UPDATED & EXPANDED
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Plus 65

At the end of the day...

Senior's Suicide Prevention Resource Toolkit



**“You can only perceive real
beauty in a person
as they get older.”**

Anouk Aimee

**“As we grow old...
the beauty steals inward.”**

Ralph Waldo Emerson

**“Old Age is no place
for sissies.”**

Bette Davis

**“Once you’re over the
hill, you begin to
pick up speed.”**

Charles M. Schulz

Statistics

People 65 years and older, particularly men, have the **highest suicide rate** of any other group.

This contradicts a **popular misconception** that the highest rate is among the young.

The **Baby Boomers** (those born between 1946 and 1964) have had higher suicide rates than previous generations. They are amongst the largest population cohorts in Canada and have just begun entering the 65 and over age range. This could translate into a tremendous increase in suicides in the coming years (Canadian Coalition for Mental Health, 2008).

Men 65-and-older have very high rates of suicide. It consistently approaches or surpasses the rate of 20 per 100, 000 (Statistics Canada displays the rates in five-year intervals—60-65, 66-70, etc.) (Statistics Canada, 2011).

In the USA, older Americans are also disproportionately likely to die by suicide - 14.3 of every 100,000 people. The rate is highest for non-Hispanic white men 85-and-older - 49.8 per 100,000. The rate for the general population is 11 per 100,000 (National Institute of Mental Health, 2010).

Myth: Depression is inevitable with aging

Only 1 - 2 % of persons over age 60 have a major depressive disorder. This is lower than the general population. A study in 2012 found that 6.9% of American adults experience major depression in a given year (SAMHSA, 2008; NIMH, 2012).





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The older someone is, the greater risk of suicide.

Suicide Attempts and Suicides

- Young people: 200+ attempts for every suicide
- General population: 100+ attempts for every suicide
- +65 adults: 2-4 attempts for every suicide (Marcus, 1996)

Why?

- Older adults intentions are harder to gauge - they tend to talk about it (suicide) less, display less equivocal warning signs
- Social isolation - many live alone so there is less chance of survival in an attempt
- More deliberation and determination to end their lives
- Tend to use more lethal means (like firearms) when attempting suicide
- Cause of death may be less rigorously investigated in older persons

(Centre for Suicide Prevention, 1998)

Myth Talking with a family member about suicide will incite them to become suicidal

Fact On the contrary, it may allow someone who has been harbouring suicidal thoughts to discuss them. Fear and shame may have kept them silent. They have a greater chance of getting the help they need if they can talk about how they feel with someone who cares.

Warning Signs

Warning Signs of Acute Risk:

- Threatening to hurt or kill him/herself, or talking of wanting to hurt or kill him/herself
- Looking for ways to kill him/herself by seeking access to firearms, available pills, or other means, and/or
- Talking or writing about death, dying, or suicide, when these actions are out of the ordinary

Additional Warning Signs:

Mnemonic “IS PATH WARM” makes it easier to remember the signs to look for:

- **I**deation (thinking and talking of death)
- **S**ubstance Abuse
- **P**urposelessness
- **A**nxiety/Agitation
- **T**rapped (feeling that there is no way out, no where to get help, a wish to get away from everything)
- **H**opelessness/Helplessness
- **W**ithdrawal (isolating oneself from those around you)
- **A**nger
- **R**ecklessness
- **M**ood Changes



(American Association of Suicidology, 2012)

Risk Factors

- Suicide ideation
- Personal history of suicidality
- Experience of a suicide loss
- Living alone/social isolation
- Physical handicaps
- Mental illness
- Negative life events and transitions
- Loss (health, relationships, independence)
- Major life changes, such as retirement, change in financial status, and moving from a home or community
- Depression



Protective Factors

- Good health/health practices
- Strong social network and contact
- Family/friends support



- Active interests
- Restricted access to highly lethal methods
- Feeling a purpose in life

(Canadian Coalition for Seniors Mental Health, 2008)

Myth Someone threatening to kill him/herself is only attention-seeking

Fact All suicidal threats should be taken seriously. This is especially significant among older persons, where suicidal attempts are carried through more often than younger groups.

Theories of Suicide

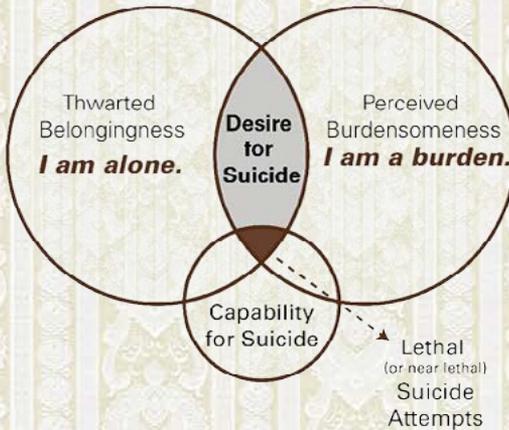
Joiner's Interpersonal Theory of Suicide

Thomas Joiner's Interpersonal Theory of Suicide (2005) is one of the most acclaimed suicide theories to emerge in recent years. It can be applied to all age groups but is useful to help explain the prevalence of older adult suicides (especially older males).

Joiner stresses that three factors need to be present for a suicide to be carried out:

- Thwarted Belongingness is a **lack of meaningful connections** to others/a strain or loss of previously solid relationships.
- **Perceived Burdensomeness** is where the individual feels that he or she is a burden to the world. They also believe and that they not only fail to make meaningful contributions to society but that they are also a potential liability.

Combined, these two factors create the **desire for suicide**.



Acquired Capability for Suicide, the third factor, involves the degree to which an individual is able to initiate a suicide attempt. An habituation to fear and pain is a prerequisite for serious suicidal behavior. Repeated exposure to painful events and behaviours, such as self-injury, may de-sensitize a person to the formidable idea of suicide and make the suicidal act easier to carry out.

A Case Study

Iris Stanley is one senior who has considered suicide. A once-active senior who loved hiking and swimming, Stanley, 71, had trouble coping after she came down with a number of illnesses at once and ended up in a wheelchair. Her decline was so sudden and so severe, she prepared to end her own life.

“I was frustrated and angry at my own body. I had always lived an active healthy life, I was totally floored,” she tells CTV News.

“My life to me was not enjoyable. It wasn’t what I wanted or what I expected. It just didn’t seem worthwhile anymore.”

Stanley won’t say how or what she planned to do. Stanley did say, however, she changed her mind after thinking about what her suicide would do to her adult children.

“I sat there and had everything ready (for the suicide). I thought of my son and my daughter, and they weren’t prepared for it. They weren’t aware of how ill I was,” she says. “So I didn’t do it.”

Instead, she looked for, and found, help for her depression.

Stanley is just one of many Canadians who has found the stress of aging can be too much. Many seniors have to cope with illness as they age, as well as the stress of losing spouses and friends, and their own independence.

Dr. Leon Kagan, the director of Geriatric Psychiatry at the University of Alberta, says many seniors cope well with aging. It’s when they begin to lose their independence that they become at risk for depression.

“What makes them vulnerable to suicide is, I would say, the isolation that develops, more than anything,” he says.

“These older individuals are having everything taken away from them in terms of their work, their health, their families and finding their role diminished.... And for some of them, taking their own life seems like it might be the only option that they have.”

Dr. Marnin Heisel, a clinical psychologist and an assistant professor in the Departments of Psychiatry at the University of Western Ontario, says part of the problem is that many doctors aren't always looking for suicide risk among their older patients. And many seniors don't realize they can seek out mental health support.

"Suicide can be a hidden problem. We tend not to hear about in older adults. It tends to be an issue that gets neglected," he says.

(Retrieved from <http://bit.ly/1w7xlsr>)





Related Links

Publications from the Canadian Coalition for Seniors' Mental Health

Suicide prevention for older adults: a guide for family members

http://www.ccsmh.ca/pdf/ccsmh_suicideBooklet.pdf

Late Life Suicide Prevention Toolkit

<http://www.ccsmh.ca/en/projects/suicide.cfm>

Suicide: Assessment and Prevention for Older Adults (pocket brochure for clinicians) (May 2008)

http://www.ccsmh.ca/pdf/CCSMH_suicideBrochure.pdf

Other Publications

A fact sheet on depression and suicide in older adults put out by The National Institute of Mental Health (United States)

<http://1.usa.gov/12F3pt0>

Fact Sheet of Suicide and Older Adults put out by the American Association of Suicidology

<http://bit.ly/1A8LXIF>

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Mental health for all