



SIEC ALERT

SIEC ALERT is a quick reference guide to some of the newest resources in the field of suicide prevention.

Contact us if you'd like to be added to our free mailing list, or if you have an idea for a future topic!
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Suicide Among the Aged

There is a common perception that suicide rates are highest among adolescents. However, statistics show that elderly people, especially males, have rates that are higher than those among teens and among the population as a whole. For example, crude rates for Canadian males show the following:

Year	Males All Ages*	Males 15-19*	Males 65+*	Males 80+*
1995	21.52	21.37	22.25	27.98
1994	20.48	20.39	23.98	32.02
1993	21.00	19.39	24.39	29.13
1992	20.66	20.04	22.92	27.53
1991	20.62	22.03	25.52	33.05

(*rate per 100,000 population, raw data from Statistics Canada, 1995)

In the United States, the ratio of completed to attempted suicide is 1:4 among the elderly, compared to 1:25 in the general population (McIntosh, 1997). Reasons for this include (Conwell, 1995: 563):

- ❖ Frailty of elders - injuries may cause more physical damage and their recuperative abilities may be less.
- ❖ The social isolation of many elders leaves less opportunity for rescue.
- ❖ Elderly people tend to use more lethal methods and they often have stronger suicidal intent.
- ❖ Causes of death may be less rigorously investigated in older persons (Moore, 1998).

RISK FACTORS FOR ELDERLY SUICIDE

- ❖ Increasing age
- ❖ Male gender, especially for Caucasians
- ❖ Being single or divorced, or living alone
- ❖ Social isolation/closed family systems which do not encourage discussion or help-seeking
- ❖ Poor physical health or the belief that one is ill
- ❖ Hopelessness and helplessness
- ❖ Loss of health, status, social roles, independence, significant relationships
- ❖ Depression
- ❖ Fear of institutionalization
- ❖ Ageism

CAN ELDERLY SUICIDE BE PREVENTED?

Many people, including some health care professionals, argue that suicidal ideation and behaviours in the elderly cannot be treated. These arguments include (Perkins & Tice, 1994: 444):

- ❖ Old people are rigid in their beliefs and cannot or will not change.
- ❖ The elderly lack the necessary energy for intervention.
- ❖ Old people are near death and thus do not need attention.
- ❖ The suicides of old people are rational, philosophical decisions.

Fortunately, conventional therapies can be as effective for the elderly as any other population. In addition, there are many societal initiatives that can lessen the number of elderly suicides, including ("The Choice, ", 1996: 3, 5):

- ☆ The provision of economic supports for seniors including adequate pensions, affordable housing and health care.
- ☆ Better preparation for retirement including the development of interests and support networks outside of the workplace.

Other strategies that can help reduce the incidence of elderly suicide:

- ☆ Education about the warning signs of depression and suicide. One study found that well over 75% of older people who completed suicide had had recent contact with a physician (Perkins & Tice: 447).
- ☆ Recognition of the value of elderly persons and greater respect for their experience and knowledge.
- ☆ Assisting older persons to find/maintain/renew meaning and purpose-in-life (Moore, 1998).

Thank you to Dr. Sharon Moore, Program Chair, Centre for Health Studies, Mount Royal College for reviewing and making suggestions to improve this Alert.

Suicide Affects All of Us. Let's Talk About it.

SIEC SOURCES:

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SIEC #960038

The choice: Suicide among the elderly. **Injury Prevention News**, 9(2): 1-5.

SIEC #980000

Cohen, D., Llorente, M. & Eisdorfer, C. (1998). *Homicide-suicide in older persons.* **American Journal of Psychiatry**, 155(3): 390-396.

SIEC #931034

Courage, M. M., Godbey, K. L., Ingram, D. A., Schramm, L. L. and Hale, W. E. (1993). *Suicide in the elderly: Staying in control.* **Journal of Psychosocial Nursing**, 31(7): 26-31.

SIEC #950162

De Leo, D., Carollo, G. and Buono, M. D. (1995). *Lower suicide rates associated with a tele-help/tele-check service for the elderly at home.* **American Journal of Psychiatry**, 152(4): 632-634.

SIEC #960061

Devons, C. A. J. (1996). *Suicide in the elderly: How to identify and treat patients at risk.* **Geriatrics**, 51(3): 67-68, 70-73.

SIEC #960043

Gulbinat, W. H. (1996). *The epidemiology of suicide in old age.* **Archives of Suicide Research**, 2(1): 31-42.

SIEC #920541

Lapierre, S., Pronovost, J., and Dubé, M. (1992). *Risk factors associated with suicide in elderly persons living in the community.* **Canada's Mental Health**, 40(3): 8-12.

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Moore, S. L. (1997). *A phenomenological study of meaning in life in suicidal older adults.* **Archives of Psychiatric Nursing**, 11(1): 29-36.

SIEC #950695

Perkins, K. and Tice, C. (1994). *Suicide and older adults: The strengths perspective in practice.* **Journal of Applied Gerontology**, 13(4): 438-454.

SIEC #940226

Reynolds, C. F., Small, G. W., Stein, E. M. and Teri, L. (1994). *When depression strikes the elderly patient.* **Patient Care**, 28(4): 85-92, 95-98, 101-102.

SIEC #950440

Richman, J. (1995). *The lifesaving function of humor with the depressed and suicidal elderly.* **The Gerontologist**, 35(2): 271-273.

SIEC #940835

Richman, J. (1994). *Psychotherapy with suicidal older adults.* **Death Studies**, 18(4): 391-407.

SIEC #930147

Rosowsky, E. (1993). *Suicidal behaviour in the nursing home and a postsuicide intervention.* **American Journal of Psychotherapy**, 47(1): 127-142.

SIEC #940532

Stoner, M. S. (1994). *Suicide and the elderly: Can the LP/VN Help?* **The Journal of Practical Nursing**, 44(1): 36-41.

SIEC #940132

Valente, S. M. (1993-94). *Suicide and elderly people: Assessment and intervention.* **Omega**, 28(4): 317-331.

SIEC #930858

Zweig, R. A. and Hinrichsen, G. A. (1993). *Factors associated with suicide attempts by depressed older adults: A prospective study.* **American Journal of Psychiatry**, 150(11): 1687-1692.

SIEC INFORMATION KIT

"Elderly Suicide"

Some of the articles shown above can be found in our Information Kit. Save by purchasing the kit!
Price: **\$12.00** per kit (plus postage & handling)
Prepayment not required.