



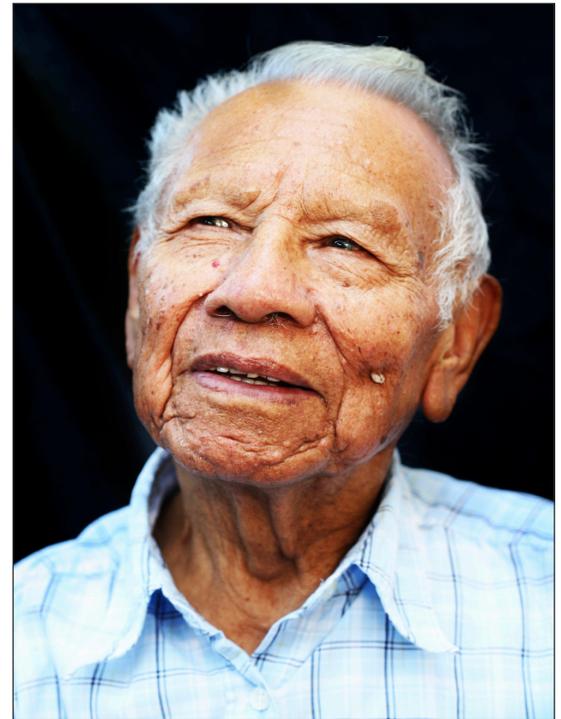
Responding to Suicide Risk in Older Adults

Suicide is an important problem among older adults. Suicide rates are particularly high among older men, with men ages 85 and older having the highest rate of any group in the U.S.¹

Suicide attempts by older adults are much more likely to result in death than attempts among younger persons. Several factors increase this risk:

- Older adults plan more carefully and use more deadly methods.
- Older adults are less likely to be discovered and rescued
- The physical frailty of older adults means they are less likely to recover from an attempt.

Those who work closely with older adults need to be able to recognize and respond to immediate signs of suicide risk. By supporting the well-being of older adults and ensuring that those at risk for suicide are identified and receive the treatment they need, suicide *can* be prevented.



Understand the Factors that Increase Risk

Risk factors are the medical and mental health conditions, personal characteristics, life circumstances, and situations that influence or are associated with a higher likelihood of problem outcomes such as suicide. Risk factors for older adults include the following:^{2,3}

- Depression and other mental health issues
- Substance abuse
- Physical illness, disability, or pain
- Current life circumstances such as social isolation, living alone, loss of family member(s) or spouse, lack of close relationships, and financial problems

Know the Signs of Immediate Risk

Some behaviors may indicate that an older adult is at immediate risk for suicide. These three signs should prompt you to take action *right away*:

- Talking about wanting to die or kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Talking about feeling hopeless or having no reason to live

If You See Signs of Immediate Risk, Take Action

If you work with older adults and see any of the signs of immediate suicide risk, take the following steps right away:

¹ Centers for Disease Control and Prevention. (2014). WISQARS fatal injury reports, national and regional, 1999–2014. Retrieved from http://webappa.cdc.gov/sasweb/ncipc/mortrate10_us.html

² Conwell, Y., Van Orden, K., & Caine, E. D. (2011). Suicide in older adults. *Psychiatric Clinics Of North America*, 34(2), 451-468.

³ Beeston, D. (2006). *Older people and suicide*. Staffordshire, UK: Staffordshire University, Centre for Ageing and Mental Health.

1. Contact a mental health professional or the National Suicide Prevention Lifeline (1-800-273-8255).
2. If the person is in immediate danger of attempting suicide, call 911.
3. Stay with the person until he or she has been connected to further help. Talk with the person in a supportive way.

Recognize Serious Signs of Risk

Other behaviors may also indicate serious—although less immediate—risk, especially if the behavior is new; has increased; and/or seems related to a painful event, loss, or change:

- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings

Reach Out to an Older Adult Who May Be at Risk

To help older adults who are not at immediate risk for suicide but about whom you are concerned, you can take these steps:

- Talk with the individual in a supportive and caring way.
- Encourage the individual to see a mental health professional, and offer to provide him or her with a referral.
- Suggest that the individual connect with family or friends who can provide ongoing support.
- Continue to stay in contact with the individual and provide encouragement.

Source:

- Suicide Prevention Resource Center. (2015). *The Role of Senior Living Community Professionals in Preventing Suicide*. Waltham, MA: Education Development Center, Inc.