QPR Institute

What you need to know about older adults

1. Older adults are at higher risk for suicide than any other age group in America. As our population ages, and unless we all take positive action steps now, suicide rates can be expected to rise among our oldest citizens.
2. Among the most serious risk factors for elders are the onset of mental disorders, and especially major depression. Also, older people are especially vulnerable to feelings of hopelessness and despair.
3. Older people, like younger people, are often reluctant to seek or ask for help, even when they are experiencing serious physical, psychological and emotional pain. Also like young people, older adults fear becoming a "burden" to those around them.
4. When older adults make a suicide attempt it is *always* serious and should never be minimized as a "gesture" or "attention seeking." Unlike some suicide attempts among younger people that may be a "cry for help," older adults most often *intend* to die in their attempt. Consider that for every 100 to 200 youth suicide attempts, one person dies. But in people over age 65, there are only 4 attempts for every completed suicide.
5. Lastly, the onset of some medical disorders can increase the risk for suicide in older persons. Therefore, doctors should be especially alert to the possibility of suicide in their older patients, and especially when symptoms of depression or expressions of hopelessness are present.

For QPR to be effective for older adults, the friends, spouses, children, grandchildren and care providers of our older citizens must be alert to the possibility of depression and suicide and act quickly to intervene when suicide warning signs or communications are present.

Because of the stigma about having a "mental health problem" and the older person's fears about treatment or hospitalization, you must not only be bold in talking frankly with a potentially suicidal older person, you may also need to be persistent. If you're not sure what to do, consult with friends and family, seek professional advice and be sure to inform the older person's doctor of your observations and concerns.

Remember, the most common untreated mental disorder of late life is depression; treat it and you will help save a life!

Sources:

American Association of Suicidology, Statistical update, 1999
Dr. Yates Conwell, et.al, *Risk factors for suicide in later life*, Biological Psychiatry 2002
Suicide Prevention in Later Life, Consensus Conference, Washington D.C., 2002, hosted by the University of Rochester Center for the Study and Prevention of Suicide