



Addressing Suicide Prevention in Older Adults in Maine

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A Strategy Direction for MSPP/NAMI Maine and the Maine Medical Association

Older adults are the fastest-growing segment of the U.S. population (Ortman, Velkoff, & Hogan, 2014). Baby Boomers began to turn 65 in 2011. By 2030, the U.S. Census projects that more than 20 percent of the U.S. population—almost 73 million adults—will be 65 or older (Ortman et al., 2014). Maine has the highest median age of any state in the United States and can reasonably expect the pattern of aging to continue. Maine's proportion of elderly residents is projected to almost double between 2000 and 2030. By 2030, however, the US Census Bureau projects that Mainers age 65 and over will constitute 26.5% of the state's population.

Suicide is an important problem affecting older adults.

- In 2014, 7,693 people ages 65 or older (16.6 per 100,000) died by suicide in the United States, compared to 13.4 per 100,000 among all age groups (CDC, 2014).
- The rates of suicide among men over the age of 70 is the highest of any age or gender group in the US, at 31.4 per 100,000 population.
- After falling for much of the last half century, suicide rates among older adults have been rising over the past half-decade, both in Maine and across the US.
- Though the incidence and rates of suicide in Maine are much higher among older adult men (7 times higher rate than women at 5.0 per 100,000), most of the increase in rates over recent years has been among women (US CDC WISQARS, 2016).
- While suicidal thoughts and attempts are more common among older women than older men (SAMHSA, 2013), men's attempts are more likely to be fatal.
- Older adults, especially males are more likely to use a firearm in a suicide attempt. Of those who died by suicide in 2014, 77% of the males used a firearm, compared to 35% of females. (US CDC, WISQARS).

The risk factors for suicide among older adults include:

- Presence of a mental health concern, especially depression.
- Loss of primary support system including death of a spouse,
- Transitions that follow loss of functional ability due to illness or advanced age, including transition into a skilled facility or loss of independence at home,
- Withdrawal and/or isolation from social and family supports.
- Serious physical illness (especially in men).
- Access to firearms as a means of suicide.

The life factors that are protective of suicide risk include:

- Presence of primary support from a spouse or partner,
- Taking part in activities that include social connection.
- Having a close friend/confidant
- Lack of stress and discord,
- Ability and supports to manage current living situation,
- Good health, especially mental health.

Opportunities for suicide prevention for community programs working with older adults in Maine.

The Maine Suicide Prevention Program (MSSP) offers a range of suicide awareness and prevention training to people in professional and non-professional roles in the state. The different training opportunities include:

Suicide Prevention Gatekeeper Training

- A full-day training for adults in school and community settings provides up-to-date information about suicide, teaches basic suicide intervention skills, increases personal confidence and the ability to effectively respond to suicidal behavior, and identifies helpful resources.

Suicide Prevention Awareness Sessions

- A one to two hour presentation on suicide prevention for a general audience and tailored to specific groups. This training provides basic information on suicide, recognition of people at risk and how to respond and connect someone at risk with help.

Protocol Development Training and technical assistance

- Become prepared as an organization to address suicide risk in the people you serve. Training provides background information and templates to guide protocol development.

The training can address the needs of paid staff and also prepare community volunteers to be effective at recognizing someone at risk and to connect them with the help that just might save their life.

For more information and to discuss training needs:

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