

Hearing Their Call

Imagine you're walking along the deserted shores of a lake. You suddenly hear some screams for help. Looking out across the lake, you see a person who has fallen out of a boat, has no life preserver, and is sinking.

What would you do? Lecture about safety? Reminisce how you did the same thing once? Say you'd love to help, but you need to go eat supper?

Would you say any of these things? Of course not. You'd take immediate, life-saving action. You'd find a way to provide instant help. People who are depressed or considering suicide are very much like this figure in the lake. They're drowning – in pain and feelings of hopelessness. They need someone to care. They signal their desperation. They are crying for your help.

What Would You Say

Just as with this person in the lake, depressed people don't need your opinions or your similar experiences. They don't even need (or want) solutions. What these people want the most is for you to *listen* – with sincerity and care, with interest and without judgment.

Suppose you have an elderly male relative or friend named Nick about whom you're worried. Perhaps Millie, his wife of 52 years, recently died of cancer, and for the first time ever, he has stopped going to church. Go see him as soon as possible. Bring along some of his favorite cookies. Tell him you were

wondering how he's been feeling lately. Nick might say, "Not too well." Then softly reply, "Do you miss her, Nick?" His eyes might well up with tears. Kindly take his hand and say, "Do you want to talk, Nick? I'd love to listen to what's on your mind."

Nick might not know where to start or what to say. Help him by asking questions such as these: "How do you feel when you wake up in the morning and realize she's gone?" "What hurts most about her not being here?" "What are you feeling, right now, this very minute?"

Gently offer your questions. Let Nick know that he can talk to you safely and confidentially. Demonstrate that you will listen patiently, that you care very much.

Did you notice how the previous questions directed themselves to Nick's feelings? It's called *steering into the pain*. You want suicidal or depressed people to talk about and explore their feelings of despair, hopelessness, anger or hurt.

One of the most harmful misconceptions about suicide is the fear that you'll "plant the idea" if you raise the issue of suicide. *Nothing could be further from the truth*. By raising the issue, you will *not* push people into considering or attempting suicide. You will be showing you care.

What Signs To Look For

As you study the signs in the following list, keep in mind a fact that has been discovered through several

studies. Many older adults who kill themselves have visited a primary-care physician at a time that is in startling proximity to their suicide: 20 percent within 24 hours; 40 percent within one week; and 70 percent within one month.

People who are depressed or suicidal frequently show their feelings in any of these ways:

- Talking about, writing about, hinting at or threatening suicide. (Such threats precede four out of five deaths by suicide.)
- Abuse of drugs (e.g., prescriptions or alcohol)
- Feelings of hopelessness or helplessness
- Drastic changes in personality or behavior (e.g., a person might take needless risks)
- Losing interest in favorite activities such as hobbies or volunteer work
- Sleeping too little or too much
- No appetite or overeating
- Previous suicide attempts (people with past attempts are especially high-risk)
- Giving away prized possessions
- Fatigue, lethargy or apathy
- Social withdrawal and isolation
- Drastic changes in appearance
- Prepares for death by making out a will and final arrangements
- Is preoccupied with death and dying

This list is not complete, these are just some of the more common signs.

Facing the Numbers

Every 80 minutes, every day, a person over the age of 65 kills himself in the U.S. Men account for more than 80 percent of the elderly who take their lives every year. The highest rates are, by far, among white men aged 85 or older.

Higher depression rates are expected to cause the elderly suicide rate to *double* by the year 2030.

Older people average about four attempts per every completed suicide. Younger people have 100 to 200 attempts per completion. The devastating ratio among the elderly might stem from their method of choice: More than 70 percent kill themselves using firearms.

Suicide rates for the elderly are highest in nursing homes and assisted-living facilities. In approximately one out of three elderly suicides, alcohol has played a major role. The abuse of prescription drugs is also common. Contrary to popular belief, only 2 percent to 4 percent of people who kill themselves have been diagnosed with a terminal illness at the time of their death.

The high rate of suicide among the elderly is strongly associated with depression, despair and stress brought on by a variety of factors: the death of a spouse or other loved ones; forced retirement; the loss of a lifetime home; forced geographic changes; having to care for a relative who is ill or otherwise incapacitated; the inability to work or play because of illness; and seemingly insurmountable financial problems.

Other Help You Can Offer

Ask your elderly relative or friend to consider contacting the Samaritans. He can call us at any time of the day or night and talk to someone who really cares. *Every conversation with the Samaritans is free, confidential and anonymous, and no calls are ever traced.* **The Samaritans Hotline number is (401) 272-4044 (Providence calling area and out-of-state) or (800) 365-4044 (statewide).** Feelings of depression and suicide are treatable, with the right help. The Samaritans can show the road to that help if it is wanted.

What can't be emphasized enough is that a person who is suicidal or depressed is helped most by being listened to, not lectured or advised. Don't offer solutions or try to make him feel better. Don't tell him how much he has going for him and how much he has to live for. Don't debate whether suicide is right or wrong. Don't lecture on the value of life.

What your depressed or suicidal friend most wants and needs is to feel safe with you, to know that you can be trusted. He needs someone who will be patient, someone who will say, "I care" – and shows it not by talking, but by listening.

The elderly are especially susceptible to depression, because they suffer numerous critical losses more often than does any other age group. Depression is not, however, a normal part of aging. It instead can be a signal that the end of aging is near.

The Golden Tears:

Suicide among the Elderly, And How You Can Help



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Rhode Island's Suicide Prevention
and Education Center**

**Free, Confidential
Hotline:**

**272-4044
or
(800) 365-4044**

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