Suicide thoughts and behaviour in later life

Professor Trish Hafford-Letchfield

19 September 2025

Acknowledgement of other team members

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Drawings by @JolieGoddman

Overview of presentation

- What is unique about suicide in later life and its context
- A conceptual framework to help understand how suicide thought, and behaviour might present and develop
- Sharing findings and reflections on a study into lay perspectives on suicide thought in later life
- Highlighting the principles of time, space and compassion when working with people in later life
- A short educational film designed to illustrate a common dilemma described in research.
- Question for discussion
- Conclusion – pointers for practice

Overview of issues impacting on later life

- What is different in presentation and what is the same?
- What we know and don’t know about prevalence
- Inequalities in the life course and later life
- Where do we make space for screening, assessment and help-seeking?

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ARTICLE

A scoping review exploring the 'grey area' of suicide-related expression in later life: Developing a conceptual framework for professional engagement

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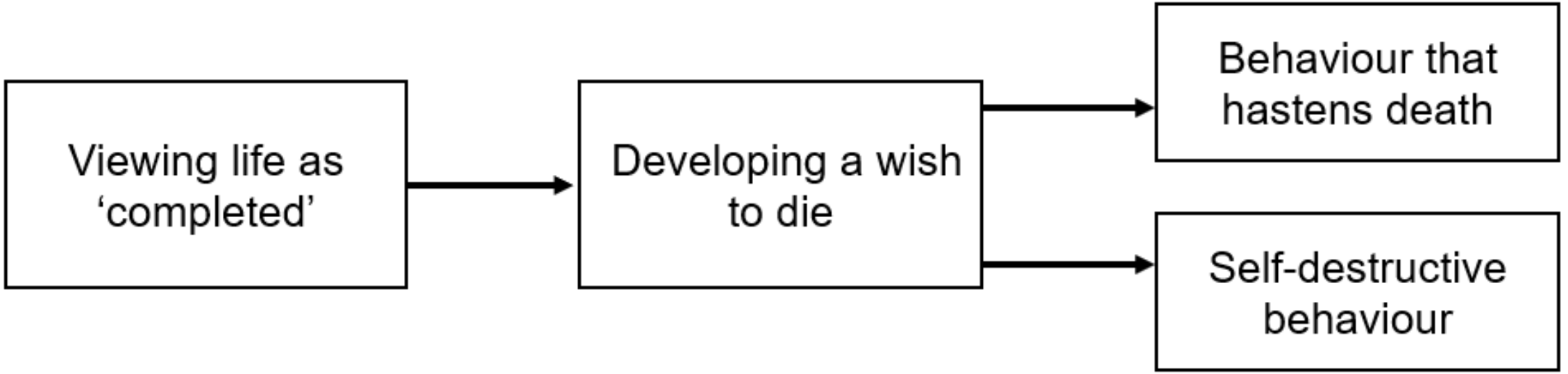

Protective factors:
Social connectedness; satisfaction in one's social life; high level of purpose; perceived control over one's life; low levels perceived burdensomeness and/or hopelessness; low levels of functional disability

Conceptual framework

How can a conceptual framework help?

- Promoting a holistic approach inclusive of social and environmental determinants
- Screening and assessment
- Community participatory research methods in which marginalised voices are prioritised
- Reflecting diversity in relation to risk and protective factors
- Development of early intervention strategies to target grey areas that focus on enhancing health, resources and values about later life
- Recognise the impact of service culture and service quality on experience and making changes

https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2022.1009503/full

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Talking really does matter: Lay perspectives from older people on talking about suicide in later life

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What is the social care contribution to Suicide Prevention?

Greater awareness of breadth of suicide expression and greater sensitivity to how it might present can provide greater opportunities to recognize and respond to suicide-related expression and behaviors (Frost and Cowie, 2019) and importance of capturing older people's own perspectives.

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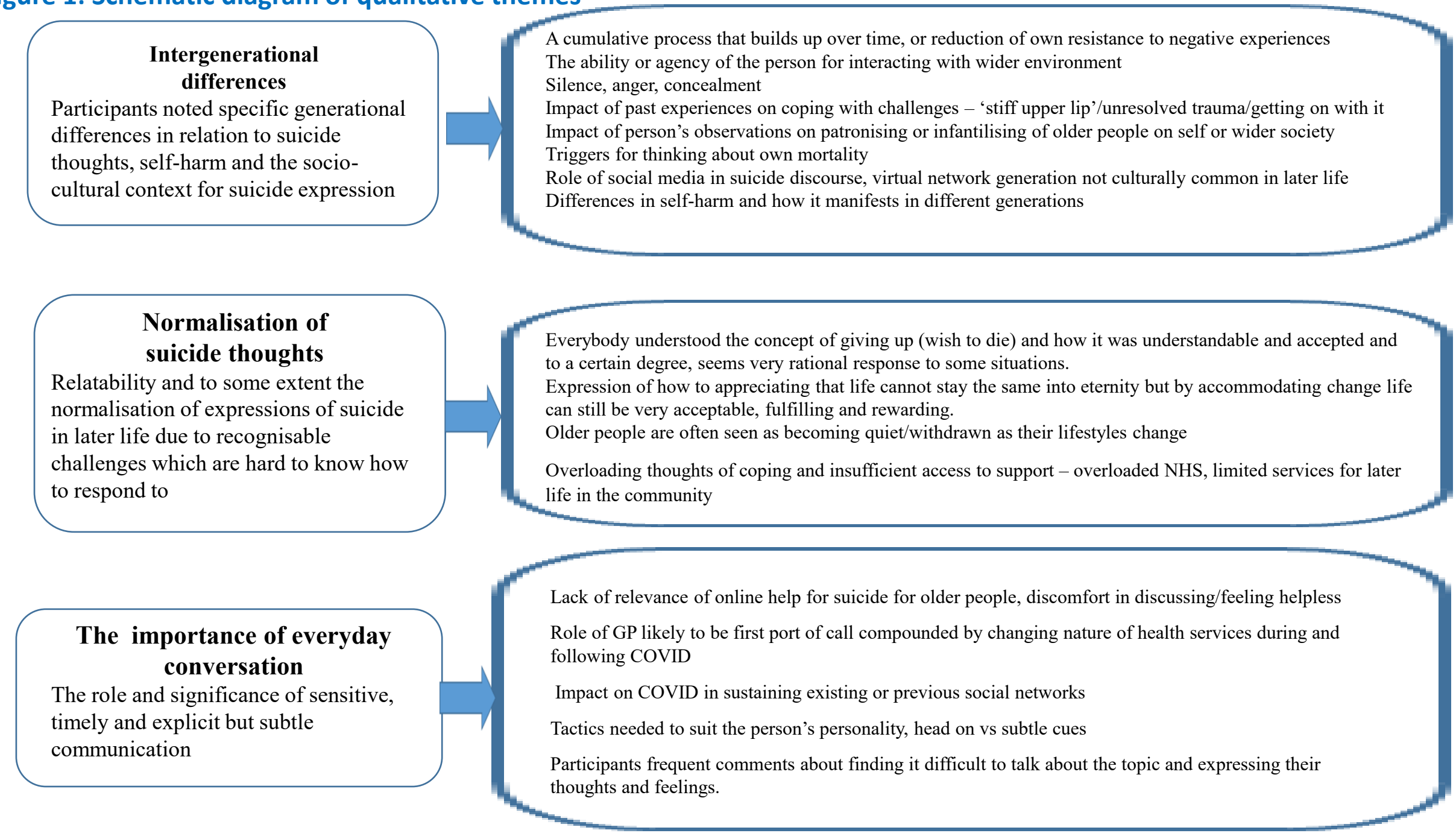
Study design

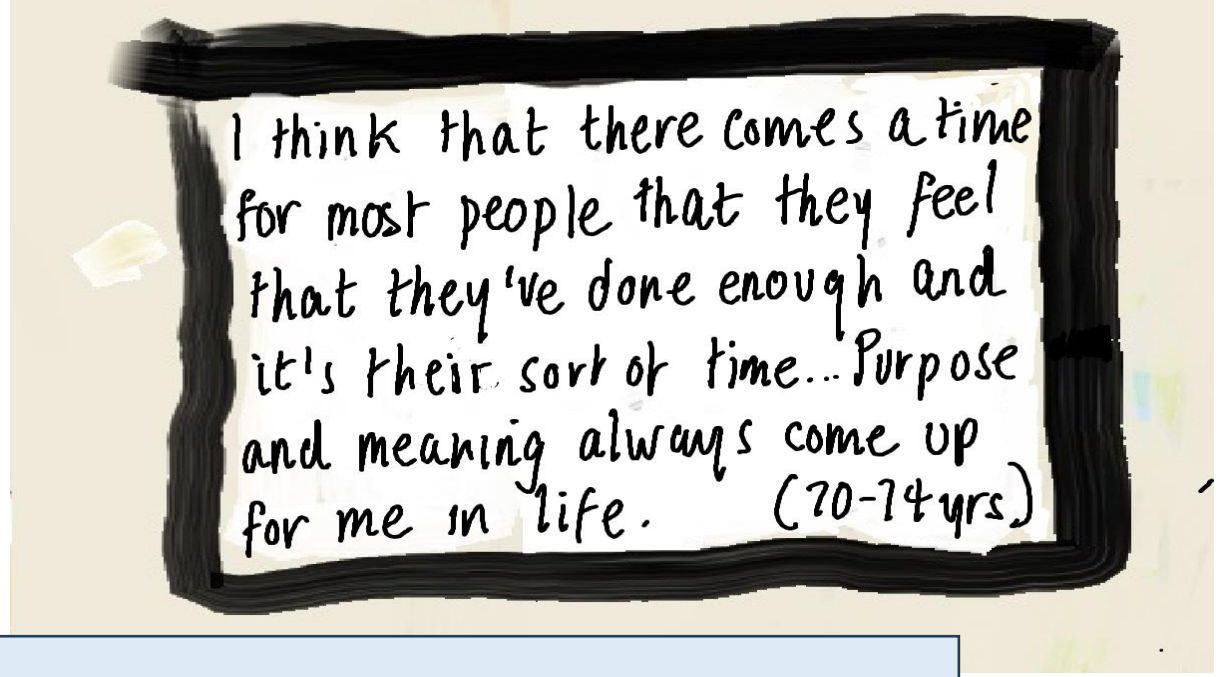
- Exploratory - to determine and better understand the nature of suicidal thoughts in everyday life experienced by older adults in community settings.
- In-depth one-to-one interviews with **lay** older people.
- Open questions and topics framed in third person
- Purposive and opportunity sampling – broad range of insights/opinions
- No prior knowledge or experience required
- 70 yrs +
- Challenges with gatekeepers

Figure 1: Schematic diagram of qualitative themes



Normalisation of suicide thoughts

Relatability and to some extent the normalisation of expressions of suicide in later life due to recognisable challenges which are hard to know how to respond to



"Giving up, giving in. They're different, but when does one actually lead to the other? And at what point does the idea of keeping on, keeping, on, keeping going...which I think many older people have this tremendous capacity to keep going, but does there come a point at which this seems to be too much of an effort, it seems counterproductive" (75-79 yrs)

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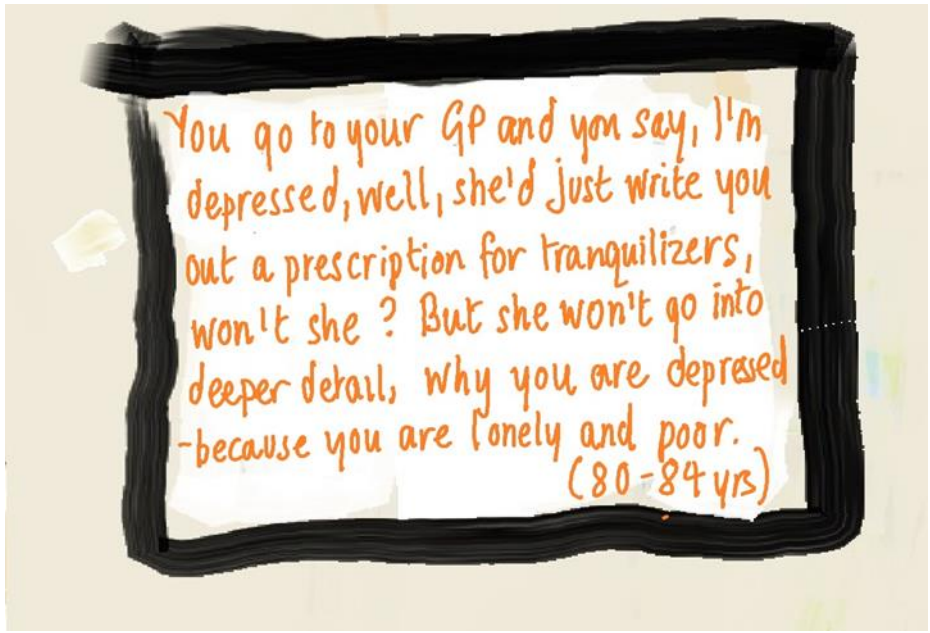
"Entering my 7th decade felt like a real marker in terms of thought processes, and discussions with friends of similar age turn to the inevitable time limit of years ahead of me. I no longer see time stretching out before me but have a realization that years are limited which focuses my mind on how to use the time I have left, and I have concentrated on living in the moment as much as I can. There is a sense of loss, grief and change with this decade and with that some feelings of depression and giving up". (70-74yrs).

"Well, I suppose it can be quite difficult for older people who are not used to sharing their emotions or talking about their emotions. They find that very difficult. They've been brought up to keep a stiff upper lip and not to think too much about themselves really. Well, a lot of them don't even understand their feelings". (86-89yrs)

The importance of everyday conversation

The role and significance of sensitive, timely and explicit but subtle communication



Key messages

- Emphasis on positive or successful ageing can exclude stigmatised or taboo topics such as suicidal thoughts so they are ignored or less discussed
- They however appear to be common among peer groups and to some degree, normalised
- As an enabling factor, this awareness of finitude could be better acknowledged or discussed given those that express a desire to talk about or discuss end of life plans are often silenced or dismissed as being overly morbid.

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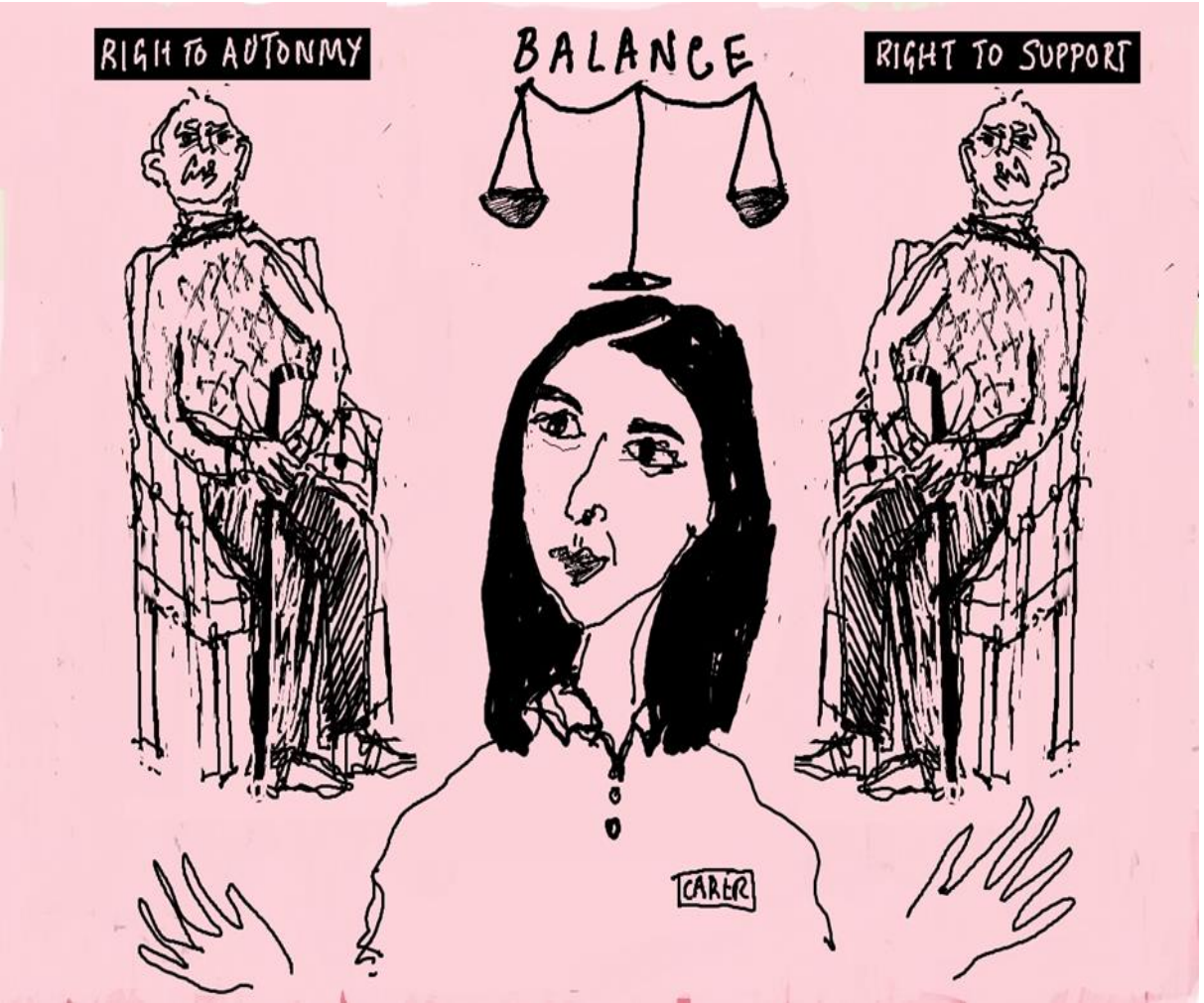
Improving opportunities for disclosure/authentic discussion



- Informal and 'off-hand' comments that express feelings/engagement with suicide thought might indicate that individuals are more comfortable discussing these topics in colloquial through informal (friends) rather that formal networks (health/care)
- Progressing from passive (thoughts/wish to die) to active expression are also more likely to engage in implicit rather than explicit behaviours
- As these expressions are often difficult to identify particularly where there are complex health or multi-morbidities requires someone who knows the individual well to notice subtle changes in their attitude/behaviour.
- Skilled assessment requires training and support for paid carers so they can use their relationships to open up discussion and signposting/ support helpseeking.

Wider impact of ageism

(Subtle not intentional but includes being patronized or subject to communication which disregards wellbeing and equal access to support and services with other age groups.

Participants Identified everyday ageism in their day-to-day interactions – a barrier to discussing their suicide thought

What helps moderate everyday ageism and perhaps suicide thoughts?

The taboo of talking about suicide, the silence and taking a protective stance illustrated in recruitment reluctant to engage older people which they thought was harmful

Self-stigma/internalised ageism

Throwaway comments study highlight further need for compassion and quality in care that pays attention to nuancing or tailoring of mainstream suicide prevention and psychosocial interactions with people in later life.

Relationships and language key to enabling discussion as part of multilevel strategies

Community based care professionals learning to identify implicit/passive suicide expressions in later life and being willing to address it

Informal 'natter' does matter

Also recognising other lifecourse factors (trauma, suicide bereavement, loss of autonomy) that can enrich assessments and interventions in care settings

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Time, Space, Compassion

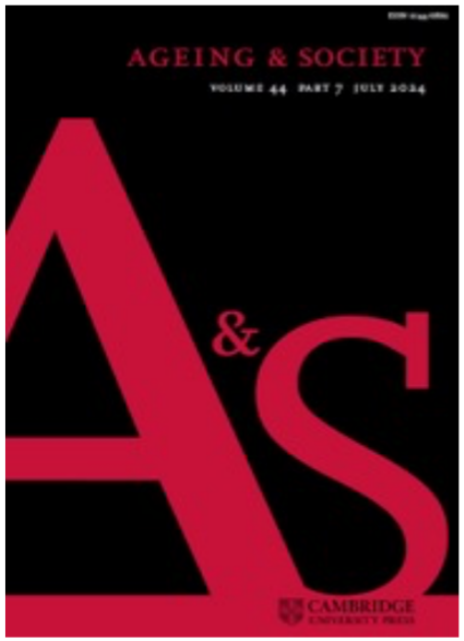
4 Cs

Compassion

Complexity

Care

Connection



Ageing & Society

Article contents

'He just gave up': an exploratory study into the perspectives of paid carers on supporting older people living in care homes with depression, self-harm, and suicide ideation and behaviours

Published online by Cambridge University Press: **16 November 2018**

Trish Hafford-Letchfield, Helen Gleeson, Peter Ryan, Barbara Billings, Ruth Teacher, Matthew Quaife, Ann Flynn, Stefano Zanone Poma and Silvia Vicentini

Show author details

https://youtu.be/sVyCDiLTcjQ

5.17m

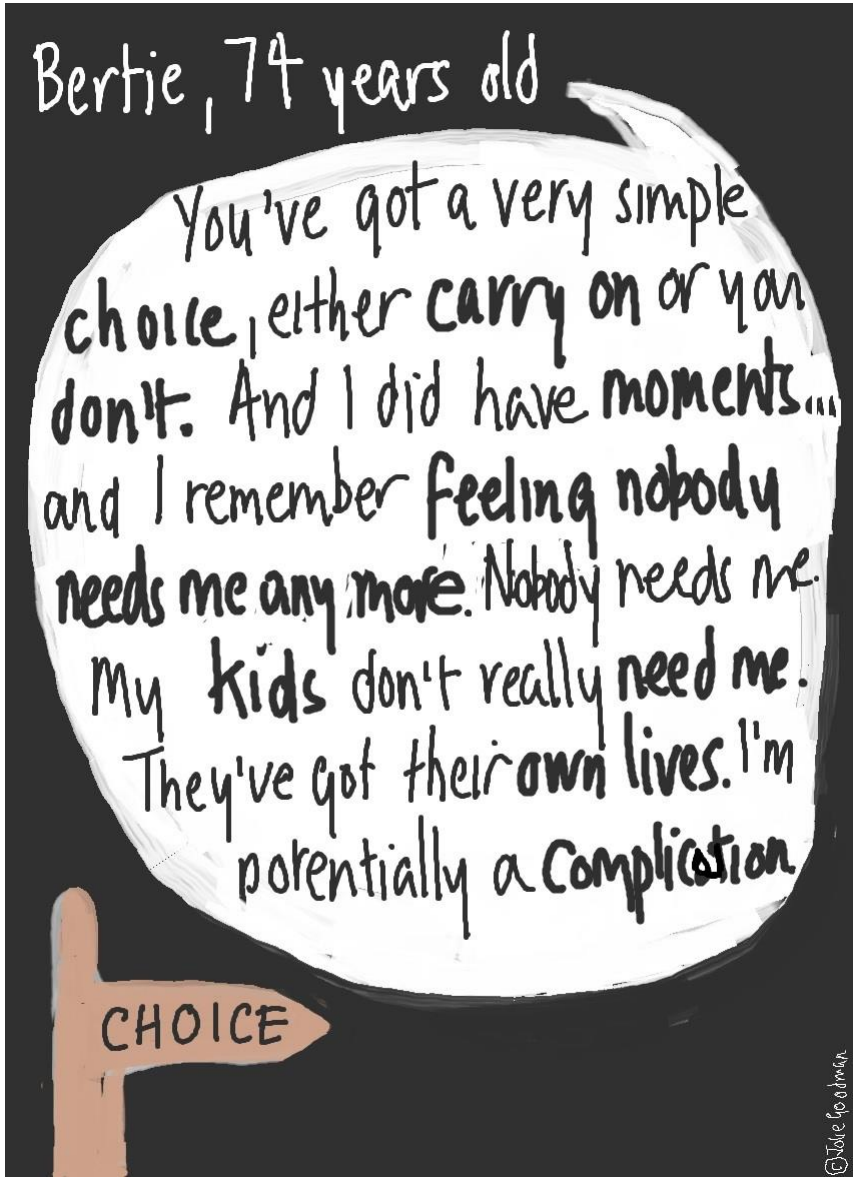
TURNING TO THE WALL

A short educational film which draws on research that explores dilemmas and challenges in working with people living in care settings.

Over to you

We are evaluating the response to the film so please let us have your immediate thoughts and reactions that describe your experience of the film – before we open up to a wider discussion

(put in the chat)



What should happen next?

Future directions

- Importance of life sustaining conversations important for those using home and community based services and who face additional barriers to accessing mental healthcare
- Unexplored potential for peer support – given what participants said about their common ground and being more open in peer groups
- Some people may perceive their end of life positively and open to discussing the issues.
- Innovative approaches to suicide prevention to bring it into the home (Salvatore, 2015; Westcott et al, 2022) – training vols or carers who interact on a regular basis ‘natural helpers’
- Research on outcomes following low-level interventions to inform SP strategies.

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SUMMARY

Understanding transition of thought to actions better is critical particularly as older individuals experiencing ideation may not make progression to suicide attempt

Importance of professionals and providers being more open to discuss suicide topics in later life, communicating this willingness in an informal setting

Addressing the cultural factors that can mediate the effects of other factors on suicide risk.

Staff training for those working everyday, improved signposting and assessment area for development.

Innovative approaches that involves older people as stakeholders in SP

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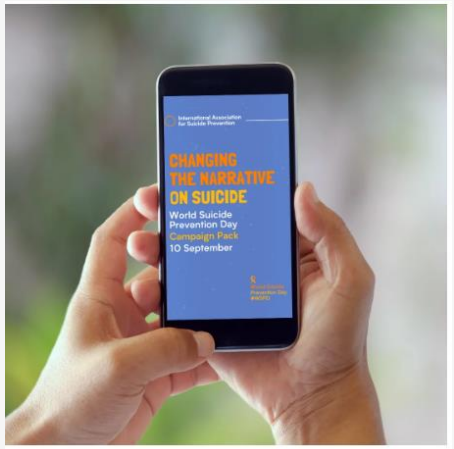
President's Message

For too long, suicide has been shrouded in silence, stigma and misunderstanding. This has not only hindered open conversations but it's also prevented many from seeking the help that they so desperately need. By starting the conversation, we can change the narrative on suicide, from one of despair to one of hope. IASP President, Professor Rory O'Connor provides his address for this World Suicide Prevention Day.



World suicide prevention day 10th September

- The call to action encourages everyone to start the conversation on suicide and suicide prevention
- Theme 2024-2026:

"Changing the narrative on suicide"

Thanks for listening

Please get in touch if you are interested in our more detailed CPD/workshop

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