Elderly Suicide Fact Sheet

- The elderly made up 12.5% of the population; they accounted for almost 15.9% of all suicides.

- The rate of suicide for the elderly for 2006 was 14.2 per 100,000.

- There was one elderly suicide every 99.2 minutes. There were about 14.5 elderly suicides each day, resulting in 5,299 suicides in among those 65 and older.

- Elderly white men were at the highest risk with a rate of approximately 31 suicides per 100,000 each year.

- White men over the age of 85, who are labeled “old-old”, were at the greatest risk of all age-gender-race groups. In 2006, the suicide rate for these men was 48.4 per 100,000. That was 2.5 times the current rate for men of all ages (17.8 per 100,000).

- 84.6% of elderly suicides were male; the rate of male suicides in late life was 7.7 times greater than for female suicides.

Suicide Rates for Ages 65 to 85+

1 “Elderly” refers to persons over the age of 65. Information presented refers to the latest national data (2006).

June 23, 2009
• The suicide rate for the elderly reached a peak in 1987 at 21.8 per 100,000 people. Since 1987, the rate of elderly suicides has declined 28% (down to 14.2 in 2006). This is the largest decline in suicide rates among the elderly since the 1930’s.

• The rate of suicide for women typically declines after age 60 (after peaking in middle adulthood, ages 45-49).

• Although older adults attempt suicide less often than those in other age groups, they have a higher completion rate. For all ages combined, there is an estimated 1 suicide for every 25 attempted suicides. Among the young (15-24 years) there is an estimated 1 suicide for every 100-200 attempts. Over the age of 65, there is one estimated suicide for every 4 attempted suicides.

• Firearms were the most common means (72%) used for completing suicide among the elderly. Men use firearms far more often than women.

• Alcohol or substance abuse plays a diminishing role in later life suicides compared to younger suicides.

• One of the leading causes of suicide among the elderly is depression, often undiagnosed and/or untreated.

• The act of completing suicide is rarely preceded by only one cause or one reason. In the elderly, common risk factors include:
  
  - The recent death of a loved one;
  - Physical illness, uncontrollable pain or the fear of a prolonged illness;
  - Perceived poor health;
  - Social isolation and loneliness;
  - Major changes in social roles (e.g. retirement).

**Sources**

The information for this fact sheet was gathered from the National Center for Injury Prevention and Control (NCIPC) website ([http://www.cdc.gov/ncipc/wisqars/default.htm](http://www.cdc.gov/ncipc/wisqars/default.htm)) operated by the Centers for Disease Control and Prevention (CDC).

**American Association of Suicidology**

AAS is a membership organization for all those involved in suicide prevention and intervention, or touched by suicide. AAS is a leader in the advancement of scientific and programmatic efforts in suicide prevention through research, education and training, the development of standards and resources, and survivor support services. For membership information, please contact:

*American Association of Suicidology*

5221 Wisconsin Avenue, N.W.  
Washington, DC  20015  
(202) 237-2280  
(202) 237-2282 (Fax)  
info@suicidology.org  
www.suicidology.org