

The Elderly & Suicide – Research & Prevention

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**Microanalyses of Suicidal Episodes –
an Accident Perspective**

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Models for understanding suicidality

- **Prescientific** Religion, morality
- **Scientific**
- **Causality** Mental disorder
Psykosocial problems
- **Descriptive process** Suicidal process
- **Functional process** Metacognitions

Content

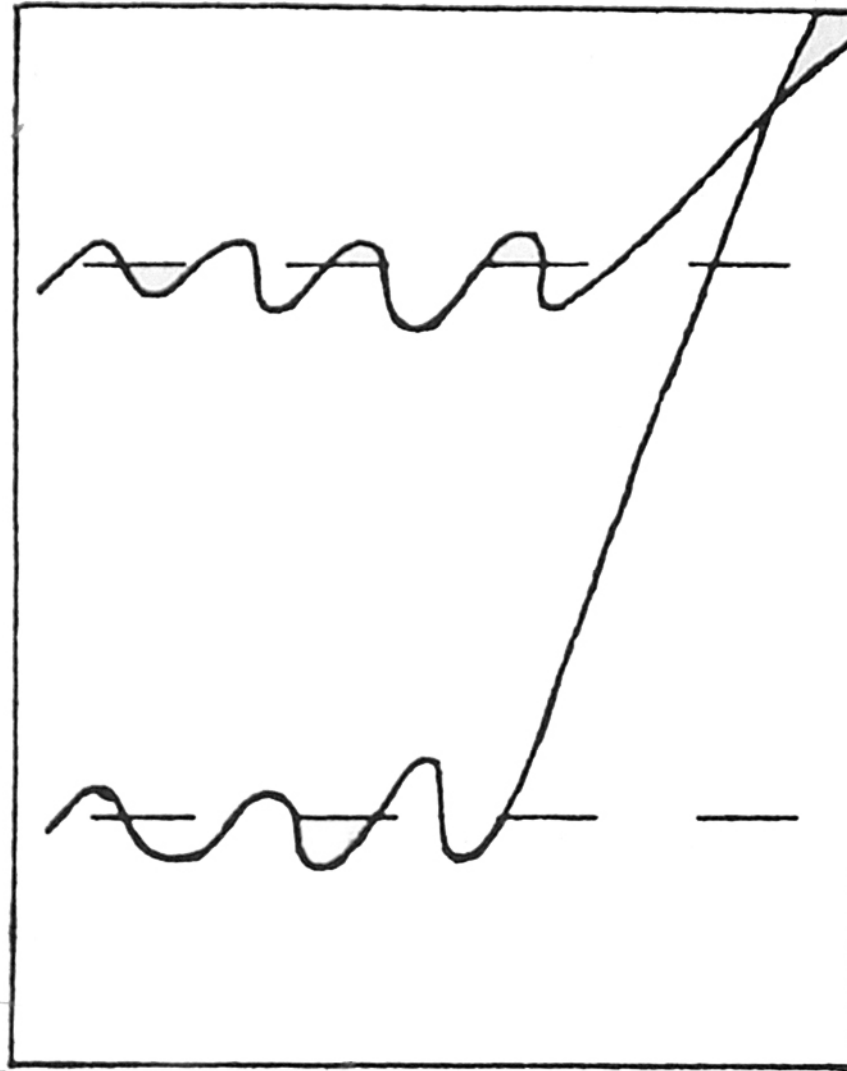
- **1. Advances in CBT understanding of suicidality**
- **2. Accident prevention research**
- **3. Pilot case study**
- **4. Discussion / When heaven is near...**

Advances in CBT-understanding of suicidality

- **Normality and survival value, problemsolving**
- **Two researchers, *Kelly, Beck, Michel***
- **Helplessness, hopelessness, black future**
Clark & Beck 1999
- **The language of suicide, *Firestone 2006, Beskow 2005***
- **Suicidal modes, *Beck 1997***
- **Suicidality reduces the problemsolving capacity,**
Williams 2005
- **Baseline suicidality and acute suicidal episodes**
Jobes 2006, Rudd 2007

Achievement-Demand model I

Ref Beskow 1983



Definitions of accidents

- Physical accident

To be overwhelmed by so rapid and strong physical forces that you cannot cope with them – *cognitive insufficiency*

- Emotional accident

To be overwhelmed by so rapid and strong emotional forces that you cannot cope with them – *cognitive insufficiency*

Methods for study of accidents

- **CREAM – Cognitive Reliability and Error Analysis Method,**

Ref. Hollnagel E. Barriers and Accident Prevention, Ashgate, 2004

- **DREAM – Drivers Reliability and Error Analysis Method,**

Ref Ljung Aust M et al. Accident investigations, 2007

- **SCREAM – Suicidal Cognitions Reliability and Error Analysis Method**

Ref Beskow et al. Microanalysis of suicidal episodes, Submitted

Pilot Case Study

Married 54 years old woman

- **Psychiatric history**
- **Four suicidal episodes:**

Subway

Art museum

Music

Disconnected

Quality of care of suicidal persons

- **Step 1. Every suicidal person needs a case manager and a resource group**
- **Step 2. The care of suicidal persons should personally and technically have the same quality as heart intensive care**

Public mental health

Everyone should:

- **Be able to talk about life, death and suicide**
- **Have basic knowledge about anxiety, depression, violence and suicidality**
- **Be able to talk to people with such problems and where to refer them if necessary**

When heaven is near...
A suicide prevention project

- **Project owners**

**National Swedish Association for
Suicide Prevention and Support to the
Survivors, SPES**

**West-Swedish Network for Suicide
Prevention**

- **Grant**

National Board of Health and Welfare

When heaven is near...

Content

- Goal: Increased competence fore care-givers and relatives to talk about and meet suicidal persons according to the public mental health demands
- Topics: Difficult conversations, normal dying, anxiety/depression/violation, suicidality, survivors
- Methods: Training of group leaders

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