



“BELIEFS AND ATTITUDES ABOUT OLDER ADULT SUICIDE AMONG ITALIAN OLDER ADULTS.”

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INTRODUCTION

In Italy, suicide rates are highest among older adults; also, men have higher rates than women. Beliefs and attitudes matter in the vulnerability to suicide. As predicted by cultural scripts of suicide theory (Canetto, 1997), suicide is most likely among individuals and in communities where suicide is most acceptable and under the circumstances that are viewed as most likely in that community (Winterrowd, Canetto & Benoit, 2015).

This study explored beliefs and attitudes about older adult suicide in Italy. Specifically, it examined older adults' views and attitudes about older adult women and men who committed suicide, depending on suicide precipitant (i.e., illness, widowhood, economic difficulties, and retirement), and with attention to respondents' personal characteristics (e.g., sex) and background (e.g., religion). Individuals age 60 and older (N = 400; 49% female) participated in the study.

AIMS

I. Evaluate the effect of the precipitant and the sex of the actor on people's opinions and attitudes.

We expect more positive opinions and attitudes towards elderly men who die by suicide than older suicidal women; especially when suicide is in response to a disease, compared to when it is performed in response to financial difficulties, retirement or loss of relationship (widowhood).

II. Evaluate the effect of the sex of the interviewee and his masculinity and femininity on the empathy assessments given towards the person who took his life.

We expect that men and masculine person see people who die by suicide with less empathy than women and androgynous person.

III. Investigate the presence of differences related to the sex of the respondents on the evaluations provided for the suicidal person.

We assumed that men are less negative towards the suicidal person than women.

IV. Investigate whether people who claimed to be religious had provided different assessments about the suicidal person.

We hypothesized that people who consider themselves observers and who attend religious services at least once a month are more negative in their judgment towards the suicidal person than those who are not observant or who attend religious services less than once a month.

METHODS

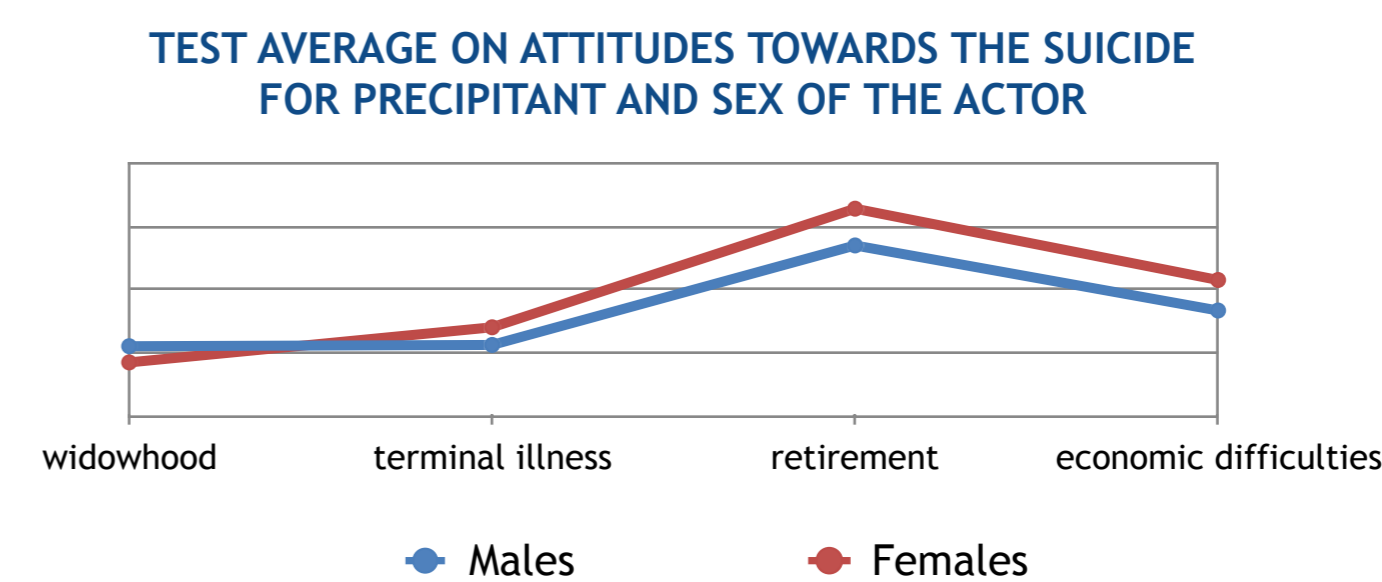
Participants: 400 individuals (49% female) aged 60-88, recruited in different socio-cultural contexts of the municipality of Lucca.

Procedure: Participants received a packet containing an informed consent and one of eight vignettes about an old person, female or male, who engaged in fatal suicidal behavior in response to one of four precipitants (i.e., illness, widowhood, economic difficulties, and retirement).

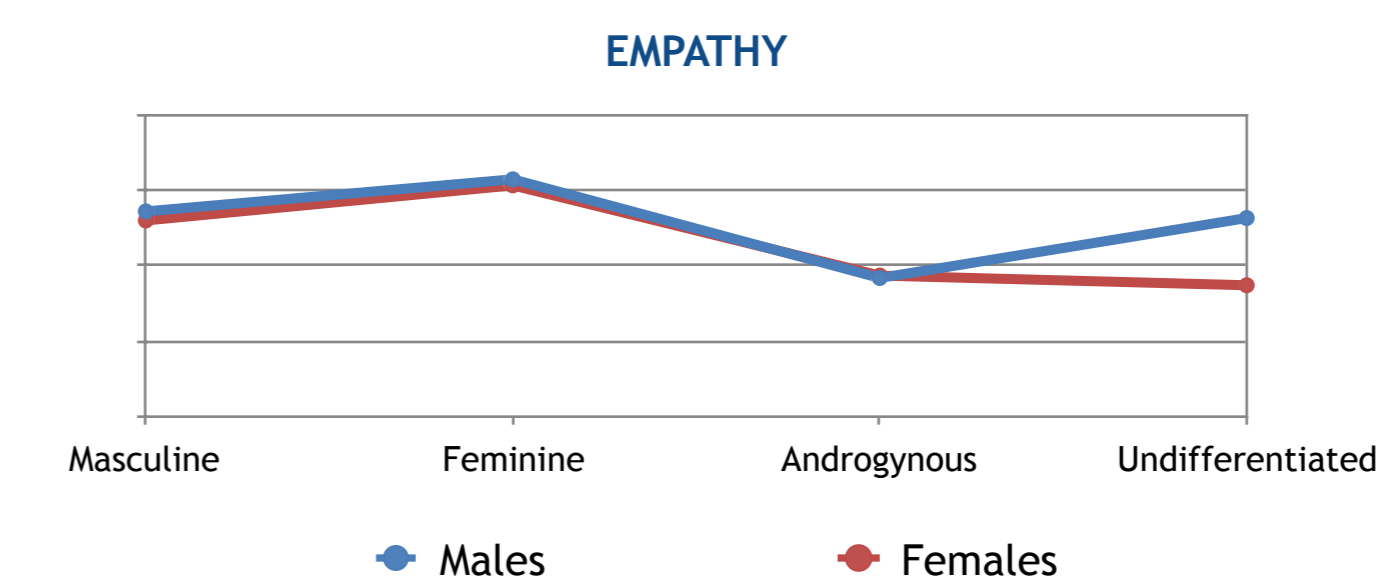
Measures: Respondents evaluated the suicidal individual with regard to character (Deluty, 1988-1989a, 1988-1989b, as adapted by Dahlen & Canetto, 1996) and femininity/masculinity (F/M). Their gender identity was measured via the Personal Attribute Questionnaire (Spence & Helmreich, 1978). Respondents also fill a socio-demographic questionnaire entering information about: sex, age, years of study, sentimental situation, living, working and economic context; furthermore, any experiences related to the suicide of friends and relatives and any personal ideation and / or suicidal behavior are investigated.

RESULTS

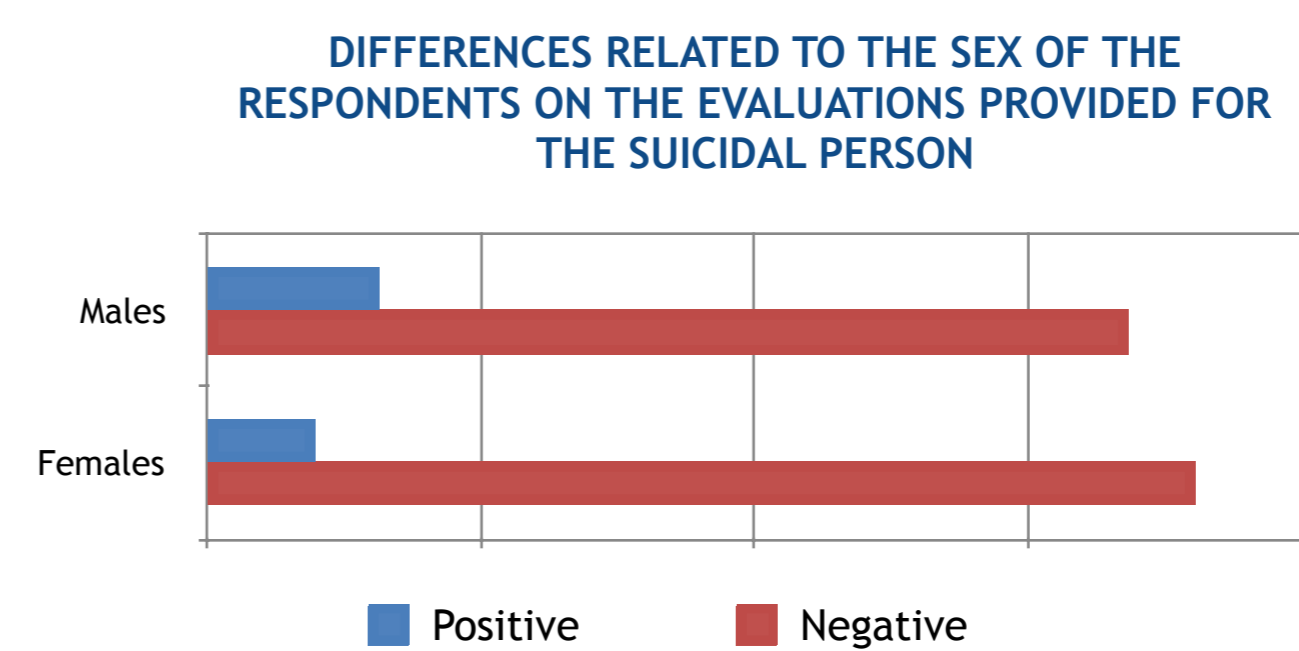
I. There is a **non-significant main effect of the sex of the actor** ($F(1; 389) = .66, p = .42$) as well as the interaction of the same independent variable with the precipitant ($F(3; 389) = 2.20, p = .09$). On the other hand, **the main effect of the precipitant was statistically significant** ($F(3; 389) = 24.50, p < .001$): in particular, the **retirement** ($M = 100.69 \pm 16.44$) **was the precipitant evaluated more negatively**, while the **precipitant evaluated more positively was widowhood** ($M = 79.92 \pm 22.09$).



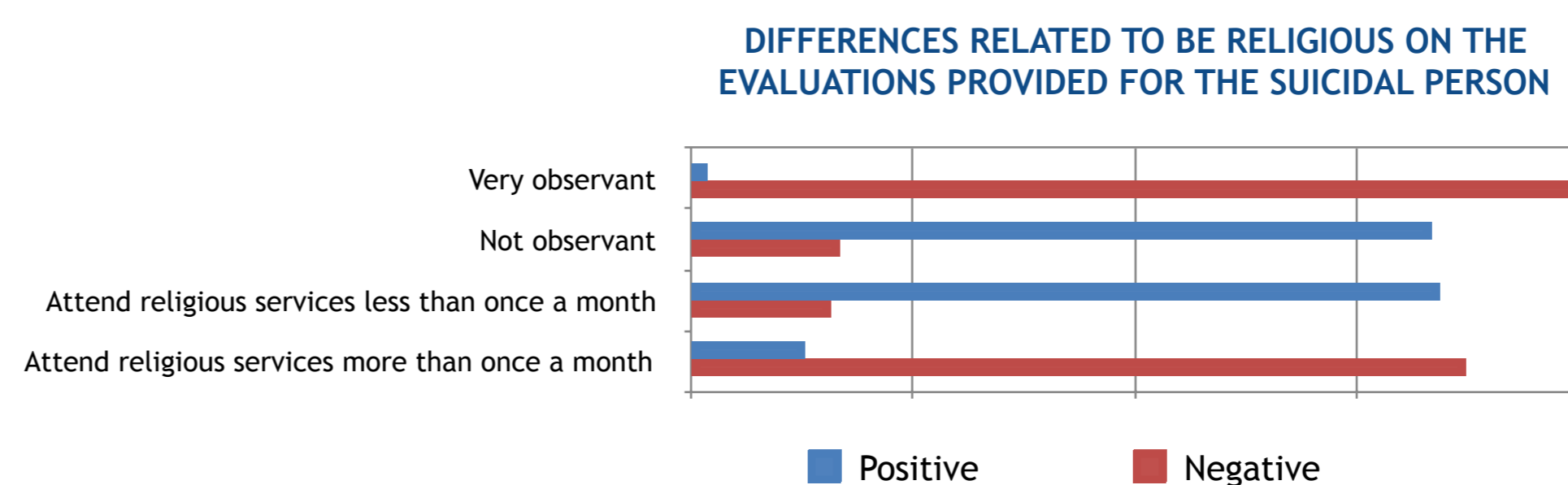
II. The main effect of the respondents' sex was not statistically significant ($F(1; 385) = 1.04, p = .31$), while the recoding carried out on PAQ scores ($F(3; 385) = 6.83, p < .001$): in particular, the **persons categorized as feminine were those who had declared to be less empathic** ($M = 4.90 \pm 2.18$), while the **most empathic category was the one formed by androgynous people** ($M = 3.33 \pm 2.21$).



III. There is a statistically significant difference based on the gender of the respondent ($F(1; 395) = 7.79, p < .01$): in particular, the **males evaluated in a less negative way** ($M = 84.24 \pm 22.82$) **compared to females** ($M = 90.21 \pm 21.70$) **the suicidal person**.



IV. The differences observed among the groups of people who differed in being more or less observant of religious dictates were statistically significant ($F(2; 394) = 10.70, p < .001$): **very observant persons are those who have provided the most negative assessment of the suicidal person** ($M = 101.69 \pm 19.70$), while people who declared themselves not observing have provided the most positive assessment ($M = 83.25 \pm 23.75$). The same type of analysis was conducted with independent variable attendance of religious services more or less than once a month: the two groups provided significantly different assessments ($F(1; 395) = 7.94, p < .01$): in particular, **people who reported going to religious services less than once a month provided significantly more positive assessments** ($M = 84.49 \pm 22.33$), of people who go more frequently ($M = 87.13 \pm 22.46$).



DISCUSSION

The importance of the role played by the various suicide precipitants in the evaluation of the same is highlighted; for the Italian reference group, the most positive precipitant was widowhood, while the precipitant was more negatively assessed than retirement. Regarding the differences between the sex of the respondents, men were the least judging against the suicidal person, while women were the less empathetic. Moreover, religion professed by respondents plays a significant role in judgments about the suicidal person; the people who declared themselves believers and practitioners gave a more negative judgment towards suicide.

Older men's more permissible suicide attitudes, relative to older women, in Italy as in the United States, might be a factor in their higher suicide rates in both countries. The findings of this study support attention to suicide-permissibility attitudes among Italian older men as an important issue in the prevention of their higher suicide mortality.

A limit concerned the recruitment of participants, many people contacted for the compilation of the questionnaire, refused to compile it once they learned that it dealt with the topic of suicide, the stigma and the prejudice against this issue seems to be always very present.

In this regard it would be useful to structure some psycho-educational and training interventions for the social and health staff and specific tools to investigate depression and suicidal risk in the third age; and also organize psycho-educational interventions aimed to eliminate the taboos and the stigma related to suicide and presenting it as a health emergency that can be addressed by providing people with information and the tools to use in case of need and difficulty.

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