Q&A: Suicide Assessment: The Tough Questions

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Learning objectives

- Attendees will learn methods to develop a safe space for suicide assessment to occur
- Attendees will learn three (3) methods for suicide assessment
- Attendees will identify no less than three (3) aspects of counter transference that can impact the therapeutic relationship

Disclaimer

- Sometimes talking about the topic of suicide can bring up several emotions
- For some, the emotions can include anger, sadness, irritation and even frustration
- It is important to consider your own personal feelings of suicide as part of your own self reflection



• **Suicide** is defined as an act or instance of taking one's own life voluntarily and intentionally

• Suicide Attempt is a non-fatal, selfdirected, potentially injurious behavior with an intent to die as a result of the behavior; might not result in injury

Definitions

 Suicidal Ideation is thinking about or planning a suicide attempt. This can range from fleeting thoughts to a detailed plan

Video: Suicidal Thoughts



Assessment: Warning Signs of a Crisis

- Abusive behavior to self and others, including substance use or self-harm (cutting)
- Isolation from school, work, family, friends
- Loses touch with reality (psychosis) unable to recognize family or friends, confused, strange ideas, thinks they're someone they're not, doesn't understand what people are saying, hears voices, sees things that aren't there
- Paranoia





Generate and explore alternatives

Follow-up

Deal with feelings and emotions (including active listening and validation)

Identify major problems (including the "last straw" or crisis precipitants)

Establish rapport and rapidly establish relationship

Plan and conduct crisis assessment (including lethality measures) Robert's Seven Stages of Intervention

Lethality assessment

- Rather than grilling the client for assessment information, use an artful interviewing style that allows this information to emerge as the client's story unfolds.
- A good assessment is likely to have occurred if the clinician has a solid understanding of the client's situation



- "Do you want to kill yourself?"
- "Are you thinking about suicide?"
- "Do you have a plan?"
- "Is there anyone that helps you when you don't feel great?"



What can I say?

- "Would it be ok if I sit with you for a little bit"
- "Can I come back/call you tomorrow and check in?"

Video: Self-Care & Compassion



Wrap up

• Suicide can feel like one of the scariest and challenging things to talk about.

 Many survivors of suicide attempts often cite that if even one person had asked if they were ok, they would not have made the attempt.

