

5 THINGS TO KNOW ABOUT SUICIDE RISK ASSESSMENT



1 **RUMOR: YOU WILL PUT THOUGHTS IN SOMEONE'S HEAD IF YOU ASK ABOUT SUICIDE**

You are not going to put thoughts of suicide into someone's head by asking if they have thoughts of killing themselves. If they were not thinking about suicide, asking them will not make them now think about it.

2 **TRUTH: BE DIRECT IN ASKING ABOUT SUICIDAL THOUGHTS**

It is critical to ask your client directly if they want to kill themselves vs "do you feel like hurting yourself". These are two different things. You can want to "hurt yourself", and still not want to die.

3 **TRUTH: IT IS IMPERATIVE TO ASK CLARIFYING QUESTIONS**

Absolutely clarify what a client is saying when they make an ambiguous sounding statement like "It's just not worth it", "I'm so confused", "Nobody cares anyhow".

4 **RUMOR: IT IS NOT IMPORTANT TO KNOW IF YOUR CLIENT HAS A HISTORY OF SUICIDAL THOUGHTS OR ATTEMPTS**

Always ask if the client has any recent or current suicidal thoughts, taken any steps yet to try to kill themselves, have a plan, or have intent to follow through with ending their life. These are added risk factors that you need to be aware of in assessing your client's risk for suicide.

5 **TRUTH: IT IS IMPORTANT TO HAVE A COLLABORATIVE SAFETY PLAN WITH YOUR CLIENT**

Come up with a realistic safety plan that the client will follow if their suicidal thoughts increase in severity or frequency. This is different than a safety contract..