Suicide Assessment

Warning Signs:

Warning signs should be attended to and not be ignored or perceived as an attention getter. These warning signs are a way to reach out and ask for help. Common warning signs for suicide assessment include the following signs/symptoms:

A. Verbal

DIRECT: “I am going to kill myself.”

INDIRECT: “You are all going to be sorry, when I am no longer here.”
“Life is not worth living anymore.”

B. Psychological

• long term depression
• feeling helpless
• feeling hopeless
• feeling overwhelmed
• feeling sad

C. Emotional

• pre-occupation with death
• lack of appetite/overeating
• sleep disturbances
• poor concentration
• isolation
• crying

D. Behavioral

• low self esteem
• inability to perform daily tasks
• previous suicide attempts
• suicide note
• engaging in risky or impulsive behavior
• sudden poor school or job performance
• giving away important things
• lack of interest in things previously enjoyed
• sudden refraining from activities with family and friends
• sudden unexplained recovery from depression, sudden positive outlook- like the person is fine

E. Situational

• school or career problems
• loss of job/career
• death of a loved one or peer
• suicide of a loved one or peer
• relationship break-up/separation/divorce
• multiple losses
• terminal illness
Things you should ask and do:

- Are you thinking of hurting yourself (committing suicide)?
- How long have you been thinking about suicide (frequency, intensity, duration)?
- Do you have a plan? Get specific information if there is a plan.
- Do you have the means to carry out the plan (accessibility of a weapon, pills, drugs, etc.)?
- Have you attempted suicide in the past?
- Has someone in your family committed suicide?
- Is there anything or anyone to stop you (religious beliefs, children left behind, pets, etc.)?
- Depending on the responses:
  - Set up a suicide contract
  - Provide the client with emergency/crisis numbers
  - Explore what resources are available, e.g. family support, friends, etc.
  - Develop a plan to deal with potential weapons, medications, drugs, etc
  - Increase frequency of counseling sessions, possible phone check-ins
  - Assess the need for getting the client assessed for medications
  - Assess the need to contact the “crisis team” if available at your agency
  - Get the client hospitalized if necessary