TRAINING OUTPOST

MANAGING SUICIDAL DISCLOSURES

D·PREP
SAFETY DIVISION

Given the emotional nature of our work, there are times when one of the parties involved may become overwhelmed to the point of expressing suicidal thoughts or actions. Any suicidal disclosure, whether vague or direct, immediately takes precedence over the investigation and the information gathering or interviewing should be paused until the level of suicide risk is assessed and a risk mitigation plan is created with a licensed clinical staff member.

Suicide can be best described as a loss of hope in a better future and a way to escape an unbearable pain. Suicide risk is about understanding the idea to action. This means people first have an idea of wanting to kill themselves and then this progresses to action steps outlining the details. These details could include where it might happen, when it may occur, what they would use to kill themselves.

While some may express the desire to kill themselves directly, others will share vague comments and hints that require a more detailed exploration of what they meant by the comment and where they are on the idea to action continuum. Even if the student appears to be sharing vague suicidal thoughts to gain sympathy in the process or perhaps even act in a passive aggressive way, it is essential to treat any suicidal threat seriously, stop the interview process and get them to a proper assessment.

Unless you have specific training and licensure in suicide assessment and treatment, your goal is to make an immediate warm handoff to the next level of assessment. Depending on your state, this will be a licensed clinical staff member, law enforcement or hospital/medical personnel.