

SUICIDE

The intentional, direct, and conscious taking of one's own life.
Sue, Sue, & Sue

When a client comes to me and reports that they have suicidal thoughts or plan, there are a number of unstated assumptions:

1. The person is **not** coming to me to assist them in taking their life
2. Society considers suicide a form of murder and places me, as a clinician, in the possession to protect the person from their desire or plan to kill themselves
3. The person is ambivalent about taking their life (why otherwise tell me?)
4. The person wants an alternative to suicide
5. More often than not, the people I see who report suicidal thoughts are depressed. Depression is a mood and moods change. The desire to be dead will decrease and no longer exist as the person's depression goes into remission

What to do, if you have good reason to believe someone is a risk to take their life? Take some action

“I care enough about you to risk you being angry at me.”