



Building Professional Excellence- Part 3
Session 5: Preventing Child and Adolescent Suicide: Skills Application

Webinar Follow-up Question and Answer Session with Dr. David Capuzzi.

1. Question from Sara Pesic

Can he say a sentence or two about unusual interest in how others are feeling?

Answer

If a suicidal child or adolescent is not bottomed out with depression, he/she may have the energy to listen to peers and ask about how that person is feeling in the hopes that there could be a reciprocal response that would enable some catharsis to take place.

2. Question from Sara Pesic

What would be a sentence to say to a client acknowledging but not normalizing?

Answer

"I hear the stress, desperation, and frustration in your voice and understand why you are having these thoughts about suicide. What would help you to feel more in control?"

3. Question from Sara Pesic

What research do you have to support that contracts work?

Answer

I never use a contract unless I can't get the client help for a time period that I think is too long; contracts are a crutch to use only when necessary because you cannot count on them working and they should never be substituted for on-going counseling.

4. Question from Allen Vosburg

What should the suicide contract include?

Answer

I write the contract in front of and with the client. We list how the client will spend time, who the client will invite to be with her/him, and what number to call if things seem unmanageable. The contract is only in place until on-going counseling begins. The client and I both sign the contract and I make copies, put one in the client's folder and send the client home with copies to post in her/his room, on mirrors on the refrigerator etc. I let parents know. The posted contract reminds the client that someone cares and is out there to help. If necessary, in desperate situations in which there will be a longer interim before on-going counseling can begin, I combine a contract with a suicide watch.

5. Question from David Strohm

I have recently that suicide contracts aren't as useful as they were once thought to be. Could you comment on this?



Answer

I agree for the reasons and comments above.

6. Question from Candis Carr

I understand that suicide contracts are no longer recommended. Can you talk about the pros and cons?

Answer

It is better to use a contract for the short term than nothing at all. For example, today I am at the central coast of Oregon. There is no hospital adolescent psych unit in close proximity and the client would have to be transported and admitted in Portland, ideally, and maybe Eugene or Salem. There may not be local practitioners available today to work with such a client. Contracts can never, however, be considered "fool proof" and a substitute for counseling.

7. Question from Denise Latour

Is a copy of your checklist available?

Answer

I use questions like the ones on the power-point. They are not exhaustive and I often make up a question based on what I hear that connects with all the elements of what was presented last week and this week. For risk and protective factors, I just remember what they are and don't check things off on a paper form. I have always thought that if I have to use a physical form/checklist, I probably am not ready to be working with such a high risk clientele and need more supervised practice.

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