

\*\*\*Please visit <https://www.evidentlybetter.org/bulletins/suicide-prevention/> to view our webpage featuring key links and emerging reports about suicide prevention.\*\*\*

## Studies

### [Psychological safety on mental health wards: more than preventing harm](#)

Restraint, seclusion and locked doors may contain physical risk, but at what psychological cost? New qualitative research asks former inpatients what psychological safety means, and how restrictive practices helped or harmed it.

### [The impact of patient death and suicide on mental health professionals: mixed-methods study](#)

Patient suicide has a heavier impact on clinicians, qualitatively distinct from other patient deaths. Blame shapes defensive responses in suicides, and internal questioning in non-suicidal deaths. The low-risk paradox and perceived unachievability of zero-suicide policies call for re-evaluation. Acknowledging predictability limits and clinicians' support needs can help systems navigate the complex impact of patient suicides.

### [Recognizing Risk, Responding with Care: The Development of a Crisis Response Program for Suicidal and Homicidal Ideation in Children with Autism](#)

Children with autism experience a higher risk of suicidal and homicidal ideation compared to their peers, but accurate assessment relies on the child's ability to verbalize their thoughts and respond to questions. Research indicates that clinician assessments may miss suicidal ideation, compared to self-report, even in verbal children assessed by trained professionals.

### [Between Protocol and Presence: Clinicians' Work in Suicide Risk Assessment](#)

The first domain describes how participants make sense of risk through categorical thinking, emotional attunement and relational orientation. The second examines practice, including balancing protocols with flexibility, resisting pathologising and coercive approaches, engaging risk transparently and using conversations to support clients. The third highlights the emotional and ethical toll, marked by anxiety, moral distress and uncertainty.

### [Sources of Strength for School-Based Suicide Prevention: Key Implementation Strategies Based on School Professional Perspectives](#)

This study identified implementation barriers and school personnel-informed strategies for delivering Sources in high school settings and translated these findings into a co-designed implementation toolkit. Across schools, the most actionable strategies centered on (a) multi-method approaches to identifying representative and committed Peer Leaders, (b) expanding Adult Advisor capacity beyond school support staff, (c) integrating Sources into existing school structure to increase reach, and (d) strengthening sustainability through administrative support and proactive communication with trainers and partners. Findings from this work informed the development of an implementation toolkit that can be used by schools and school psychologists just getting started with Sources and those hoping to sustain efforts over time. Future work should test these strategies prospectively and incorporate student perspectives to further refine and evaluate supports for school-based suicide prevention.

### [Development of the inventory of clinician attitudes about suicide prevention](#)

The ICASP represents a promising tool for measurement of MHP suicide prevention attitudes in clinical supervision, self-reflective practice and training evaluation. Findings support portions of the Dynamic Balance Model of MHP suicide prevention attitudes. Future psychometric research directions are discussed.

### [Who Gets by With Help From Friends? Multilevel Associations Between Loneliness, Friend Support, and Emotion Regulation in Adolescents With and Without Self-Injury](#)

Findings from the current study point to loneliness as a powerful social process in adolescent females' experience of emotion dysregulation. Loneliness was positively associated with emotion dysregulation in adolescent females broadly. Interestingly, although average levels of friend support were negatively associated with emotion dysregulation, that negative association was not shown for those who engage in NSSI. However, all youth showed less emotion dysregulation at assessments when they perceived their friends as more supportive than usual. These findings highlight the importance of peer processes in relation to adolescent females' emotion dysregulation, and the need to provide additional supports for adolescents with NSSI to help them with emotion dysregulation.

### [Types of ethnic-racial identity belongingness predicting mental health and suicide ideation: Exploring racial and gender differences among Latine-White and Black-White Multiracial adolescents](#)

Findings indicated that youth had relatively high belongingness to their minoritized, White, and Multiracial identities, but there were significant mean differences among the race-gender groups. Further, minoritized identity belongingness was associated with less depressive symptoms and suicide ideation among all youth, and less anxiety symptoms for all youth except Latino-White males. Interestingly, Multiracial identity belongingness was associated with less anxiety symptoms for only Latino-White males but was not significant for the other three race-gender groups. Multiracial identity belongingness was also associated with less depressive symptoms for all youth but not associated with suicide ideation for any youth. White identity belongingness was not associated with outcomes across youth. Findings highlight the importance of focusing on nuances in ERI and impacts on Multiracial youths' mental health and suicide ideation, while also considering racial and gender group differences.

### [Experiences of accessing psychological therapies for self-harm: A qualitative study of stakeholders' perspectives](#)

Findings highlight important organisational barriers and potential facilitators that individuals who self-harm may face when accessing psychological interventions. Results prompt the need for inclusive and easily accessible services.

### [Predicting Next-Day Passive Suicidal Ideation in At-Risk Youth](#)

Short-term passive SI remains an underutilized but important target for suicide prevention. Forecasting next-day passive SI using ML is feasible and highly accurate. Within-person, time-varying features outperformed baseline factors, even in early days post-discharge. Additional research on SI facets, such as duration, is needed. Integrating passive SI into personalized intervention frameworks may enhance the precision of suicide prevention efforts.

[A Randomized Controlled Trial With an Internal Pilot of a Co-Designed App Targeting Upstream Suicide-Related Risk and Protective Factors Among International Students](#)

Bud was feasible, acceptable, and safe but did not outperform an active psychoeducational comparator over 4 weeks.

[Long-Term Therapy Experiences in Post-suicidal Men: Safety, Gender and Iatrogenic Harm](#)

This study explored the lived experience of long-term individual psychotherapy, 20 or more sessions, for men with a history of suicidality. Six men who had experienced an unsuccessful or arrested suicide attempt participated in semi-structured interviews. Data were analysed using reflexive thematic analysis within a critical realist paradigm. Three themes were identified: creating a safe space in therapy; the push and pull of gender proximity; and iatrogenic harm in institutional care. Findings establish that long-term relational work, not technique, was the primary agent of recovery. A preference for older female therapists reflects reparative developmental dynamics rooted in early relational trauma. Institutional care, characterised by pharmacological prioritisation and inaccessibility, constituted a source of harm that drove all participants towards private provision. Clinical and commissioning implications are discussed.