

# Suicide Care: Tips for Health Care Providers

Content warning: These topics may be uncomfortable for some readers. For help with a mental health crisis or concerns about suicide, call Canada Suicide Prevention Service: 1-833-456-4566. Talk Suicide Canada Website: <https://talksuicide.ca/>

**Audience:** This resource was developed for health and social service providers



**Tip:** Believe people when they say they are thinking of killing themselves.

**Reason:** *Thinking about suicide is serious. People are often willing to die by suicide to meet their needs. Believing them helps them to feel connected to life.*



**Tip:** Provide space for the person to explore their reasons for dying without arguing with them that they should live. Rather, listening to understand will help people to want to live.

**Reason:** *Talking about suicide itself will not make it worse, but rather, is an opportunity to help people feel cared for and heard. Oftentimes, reasons for living will come out of this conversation.*



**Tip:** Recognize all of the reasons for the suicidality beyond 'behavioural' factors.

**Reason:** *Suicidality and self-harm are complex and exist in a context of trauma and sociopolitical forces. People don't hurt themselves without having significant reasons. It is not merely "manipulative".*



**Tip:** Take non-lethal suicide attempts seriously: it is not "attention-seeking".

**Reason:** *Suicidality may be a way of reaching out for help, but they are always willing to die in the process.*



**Tip:** Accept that the person feels hopeless and is thinking of suicide.

**Reason:** *Feeling pressured to 'be positive' further isolates the person.*



**Tip:** Connect the person with people that they can trust.

**Reason:** *Knowing that they can rely on others will help them to feel safe. The goal is never for the person to be 'independent' or 'self-reliant' until they are ready.*



**Tip:** Engage the person in conversation or activities like getting the body moving with a short walk in the immediate vicinity, moving the interaction to a safe space where you can look outside, or doing a puzzle together while on close observations or 'suicide watch'.

**Reason:** *This is more effective than merely 'doing a quick visual' to see that the person is not harming themselves, an intervention that may be dehumanizing.*



**Tip:** Advocate for changes that address the social determinants of health and other factors that contribute to suicidality. For example, promote anti-racist health care environments by challenging culturally unsafe policies for Indigenous people. For example, avoid assuming that higher suicide rates within Indigenous communities means that suicidality is inherent to Indigenous peoples, but rather understand that this is a symptom of trauma contributed by imposing social injustice through historical and ongoing colonialism.

**Reason:** *Interventions for people with suicidality usually focus on changing the individual's thoughts and behaviours, risking blaming people for their problems. Recognizing and addressing systemic inequities that contribute to suicidality will strengthen people's capacity to continue living.*

For help with a mental health crisis or concerns about suicide, call Canada Suicide Prevention Service: 1-833-456-4566. Talk Suicide Canada website : <https://talksuicide.ca/>

There is support available to help.

## How to cite this document

Taylor, Petrea (2022). Suicide Care: Tips for Health Care Providers. Vancouver, BC.  
Retrieved from [www.equiphealthcare.ca](http://www.equiphealthcare.ca)

Financial contribution from



Public Health  
Agency of Canada

Agence de la santé  
publique du Canada