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# Beck Scale For Suicidal Ideation Questionnaire

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Closing the Exits

Problem Solving as a Predictor of Suicidal Thoughts and Behaviors

Comprehensive Handbook of Psychological Assessment, Volume 2

Personality Assessment

Nonsuicidal Self-Injury

A Guide to Assessments That Work

The Recognition and Management of Early Psychosis

SUICIDAL IDEATION IN PATIENTS

The Prediction of Suicide

Identifying the Missing Piece of Suicide Prevention

The American Psychiatric Publishing Textbook of Suicide Assessment and Management

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ECOLOGICAL MOMENTARY ASSESSMENT

An Analysis of the Cultural Assessment of Risk for Suicide with African American Adults

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A Clinician's Guide to Suicide Risk Assessment and Management

Guidance for Working with Suicidal Clients

Cognitive Therapy for Suicidal Patients

Suicide

Suicidal Ideation Among Korean Adolescents

Assessment of People-At-Risk

ASSIP – Attempted Suicide Short Intervention Program

Formative Risk Assessment

Developing Clinical Skills in Suicide Assessment, Prevention, and Treatment

Risk Factors for Suicidal Behavior Among Bhutanese Refugees Resettled in the United States

Manual

Therapeutic Approaches, Comorbidity, and Outcomes

BSI, Beck Scale for Suicide Ideation

Suicide Prevention in the 70's

Assessment of Childhood Disorders, Fourth Edition

Handbook of Schizophrenia Spectrum Disorders, Volume III

The Interpersonal Theory of Suicide

Family Variables and Their Relation to Adolescent Suicidal Ideation Among a Multi-racial Sample of Urban High School Students

*Beck Scale For Suicidal Ideation  
Questionnaire*

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## **MAURICE WHITAKER**

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Closing the Exits Guilford Press

BSI, Beck Scale for Suicide Ideation Manual  
An Analysis of the Cultural Assessment of Risk for Suicide with African American Adults

*Problem Solving as a Predictor of Suicidal Thoughts and Behaviors* CRC Press

Grounded in extensive research and clinical experience, this manual provides a complete guide to interpersonal psychotherapy for depressed adolescents (IPT-A). IPT-A is an

evidence-based brief intervention designed to meet the specific developmental needs of teenagers. Clinicians learn how to educate adolescents and their families about depression, work with associated relationship difficulties, and help clients manage their symptoms while developing more effective communication and interpersonal problem-solving skills. The book includes illustrative clinical vignettes, an extended case example, and information on the model's conceptual and empirical underpinnings. Helpful session checklists and sample assessment tools are featured in the appendices.

*Comprehensive Handbook of Psychological Assessment, Volume 2* Hogrefe Publishing

This study tested Joiner's (2007) Interpersonal Theory of Suicide

by assessing 270 Army veterans' post-discharge interpersonal experiences and help-seeking, and identifying predictors of suicidal ideation (SI). It was hypothesized that perceived burdensomeness (PB) and thwarted belongingness (TB) would significantly predict SI, while acquired capability (AC) would predict SI after controlling for the effects of PB and TB on SI; Army veterans' help-seeking intentions would negatively predict SI after controlling for PB, TB, and AC; and veterans who had been discharged for 1 or more years ( $n = 165$ ) would have higher SI than those discharged for less than 1 year ( $n = 105$ ). Measures included the Interpersonal Needs Questionnaire-10 (INQ-10), the Acquired Capability for Suicide Scale-Fearlessness About Dying (ACSS-FAD), the Beck Scale of Suicidal Ideation (BSS), and the General Help-Seeking Questionnaire (GHSQ). Hierarchical regression analyses and MANOVA were used to test the hypotheses and to find differences between the two groups of veterans. PB and TB were significant predictors of SI, though AC was not significant, and veterans' help-seeking intentions did not predict SI. Army veterans' time since discharge positively predicted SI, and veterans who were discharged longer than a year have higher levels of SI. Results are consistent with the literature and support the need for further research regarding Army veterans and their levels of SI help-seeking behaviors, though they should be interpreted with caution due to a methodological issue in the use of the INQ-10 in this study.

**Personality Assessment** Routledge

Comprehensive Handbook of Psychological Assessment, Volume 2 presents the most up-to-date coverage on personality assessment from leading experts. Contains contributions from

leading researchers in this area. Provides the most comprehensive, up-to-date information on personality assessment. Presents conceptual information about the tests.

**Nonsuicidal Self-Injury** Jason Aronson, Incorporated

This book offers mental health clinicians a comprehensive guide to assessing and managing suicide risk. Suicide has now come to be understood as a multidimensionally determined outcome, which stems from the complex interaction of biological, genetic, psychological, sociological and environmental factors. Based on recent evidence and an extensive literature review, the book provides straightforward, essential information that can easily be applied in a wide variety of disciplines.

**A Guide to Assessments That Work** Amer Psychological Assn Shneidman presents basic ideas of the common characteristics of suicide. He offers a fresh definition of the phenomenon, which includes direct implications for preventive action.

*The Recognition and Management of Early Psychosis* SAGE Publications India

The treatment of early psychosis has been bedevilled by an entrenched pessimism, stemming from the asylum era and the Kraepelinian model of schizophrenia. More recently, however, there has been a surge of interest in preventively oriented treatment of patients showing the first signs of psychotic illness, with the realization that these illnesses are frequently highly responsive to early treatment. This is the first text to focus on the potential of early detection of psychosis, and the practicalities of treatment. Based on the pioneering experience and research of a now well-established prevention and intervention centre, and with contributions from international authorities, the book

outlines a framework for intervention, reviews the evidence available to guide clinical practice, and describes models of treatment. Incorporating many personal narratives and case histories, it is strong on theory, sensitive on practical issues, and will challenge, inform and guide clinicians.

**SUICIDAL IDEATION IN PATIENTS** Amer Psychological Assn Suicide is a major public health concern, particularly on college campuses. A number of risk factors have been identified in the prediction of suicidal thoughts and behaviors, including difficulty with problem solving. However, great variability exists in how problem solving is defined and measured in the literature. While problem solving has traditionally been conceptualized as a major component of executive functioning involving higher order intellectual or cognitive processes, social problem solving (SPS) involves one's beliefs and emotional reactions to stressful problems that are encountered in everyday life. The current study aimed to validate existing research that both neuropsychological measures of problem solving and SPS measures are separately correlated with deliberate self-harm behaviors and suicidal ideation. In addition, this study tested the hypothesis that social problem solving mediates the relationship between the neuropsychological measures of problem solving and the outcome measures of deliberate self-harm and suicidal ideation. The study sample consisted of 191 undergraduate students at Drexel University who were recruited via a participant management software. Graduate student assessors administered a demographics questionnaire, Short Portable Mental Status Questionnaire, Iowa Gambling Task (IGT), Tower of London (ToL), Social Problem-Solving-Revised: Short Form (SPSI-R:S), Deliberate

Self-Harm Inventory, and Beck Scale for Suicide Ideation. If a participant reported a current wish to die or any intent to end his/her life, the assessor administered the Suicide Behaviors Questionnaire-Revised and completed an evidence-based suicide risk assessment and safety planning intervention. At completion of the study, each participant received a debriefing statement and list of counseling and emergency services. A bivariate correlation matrix determined that self-harm behaviors and suicidal ideation were significantly correlated with the SPSI-R:S, but not the IGT or ToL. Using individual regression analyses, the IGT and ToL were not found to be significant predictors of deliberate self-harm or suicidal ideation. The data therefore did not fulfill the basic requirements of the proposed mediation models. Exploratory analyses showed that when entered into the same model, the SPSI-R:S was the only problem-solving measure to make a unique statistically significant contribution to the prediction of deliberate self-harm and suicidal ideation. This study is among the first to assess the relative importance of neuropsychological and SPS constructs of problem solving in the prediction of suicide-related outcomes. The findings suggest that clinicians should consider evaluating individuals' social problem solving as part of a comprehensive suicide risk assessment, with a focus on emotional reactions to stress rather than the more intellectual or cognitive aspects of problem solving. Given the relationship between SPS and suicidal thoughts and behaviors, college students may benefit from Emotion-Centered Problem-Solving Therapy with an emphasis on handling real-world stressful problems and regulating negative emotions that interfere with effective problem solving.

*The Prediction of Suicide* National Academies Press  
Suicidal Behaviour: Assessment of People-At-Risk provides a psychometric analysis of various aspects associated with suicidal risk assessment to understand the suicidal personality and predict suicidal behaviour. It includes articles by experts in the field covering suicide research carried out globally. The collection is divided into two sections-the first focuses on the theoretical issues and the second on the applied and practical issues related to suicidal behaviour among specific populations. The main features of the articles include: - the diverse aspects of the problem in various socio-cultural contexts - prevention strategies, along with analyses of varied paradigms of suicidal behaviour, for the benefit of mental health practitioners and researchers - a focussed discussion on specific population - a comprehensive review of research in the field - reviews of suicide risk assessment tools The discussion begins with a contextualisation of the psychological factors implicated in the aetiology of suicidal behaviour with the help of a biopsychosocial model and is followed by an empirical analysis. The theoretical issues are then examined from various perspectives. This compilation will serve as a supplementary reader for students of psychology, psychiatry, psychiatric social work and counselling. It will also be useful for mental health professionals as well as those undertaking research on suicide.

Identifying the Missing Piece of Suicide Prevention Open Dissertation Press

An innovative and highly effective brief therapy for suicidal patients - a complete treatment manual. Attempted suicide is the main risk factor for suicide. The Attempted Suicide Short

Intervention Program (ASSIP) described in this manual is an innovative brief therapy that has proven in published clinical trials to be highly effective in reducing the risk of further attempts. ASSIP is the result of the authors' extensive practical experience in the treatment of suicidal individuals. The emphasis is on the therapeutic alliance with the suicidal patient, based on an initial patient-oriented narrative interview. The four therapy sessions are followed by continuing contact with patients by means of regular letters. This clearly structured manual starts with an overview of suicide and suicide prevention, followed by a practical, step-by-step description of this highly structured treatment. It includes numerous checklists, handouts, and standardized letters for use by health professionals in various clinical settings.

*The American Psychiatric Publishing Textbook of Suicide Assessment and Management* Transaction Publishers

Identifying psychological factors that can predict suicide risk is essential for reducing suicide rates. Shneidman (1993) postulated that psychache (or psychological pain) is a unique predictor of suicide when controlling for other relevant factors such as depression and hopelessness. Previous cross-sectional research has established a relationship between psychache and suicidality, leaving the question of whether or not feelings of psychache actually precede suicidal behaviours unanswered. Two studies were undertaken to increase knowledge on the relationship of depression, hopelessness, and psychache to suicidality. Psychological variables were examined prospectively to allow inferences to be drawn on their causal implications for suicidality. In Study 1, students (n = 1475) completed the Beck Depression

Inventory, Beck Hopelessness Scale, Psychache Scale, Beck Scale for Suicide Ideation and provided information about prior suicidal behaviour. Regression analyses revealed that psychache was most strongly associated with suicidality, but that depression and hopelessness still contributed unique variance in the prediction of some suicidal outcomes. In Study 2, a subset of suicide ideators and attempters completed identical materials 10 weeks later (n = 90) and then another 10 weeks after that (n = 56). Again, regression analyses revealed that psychache was most strongly associated with suicidality. When looking at changes over time, dropping one predictor at a time could not overcome problems of multicollinearity, as most models were significant, but with no individual prediction from the factors. Results from models with significant regression coefficients revealed that psychache, hopelessness, and depression may be causes for suicide ideation. Theoretical and practical implications for the statistical prediction of suicide risk are discussed.

14 - SUICIDAL IDEATION INSTABILITY IN PATIENTS HOSPITALIZED FOR DEPRESSION: AN EXPLORATORY STUDY USING SMARTPHONE ECOLOGICAL MOMENTARY ASSESSMENT Elsevier Health Sciences Suicide is the third leading cause of death among adolescents and young adults (Centers for Disease Control [CDC], 2011). However, no evidence-based suicide prevention programs currently exist that utilize formative assessment measures to screen for individuals deemed at-risk (National Registry of Evidence-based Programs and Practices [NREPP], n.d.). Given that timely intervention may prevent premature death, there is a dire need to create a direct, formative measure to account for the time-sensitive nature of the data. Glover and Albers (2007)

suggest that universal screening measures should be feasible, contextually appropriate, and technically adequate. Borrowing from the literature base of school-based behavior assessment, a widely used, formative measure known as Direct Behavior Rating (DBR; Chafouleas, Riley-Tillman, & McDougal, 2002) was adapted to create a formative suicide risk assessment measure, known as the Direct Behavior Risk Rating (DBRR). The DBRR is a no-cost, 5-item measure that is designed to identify students at-risk for engaging in suicidal activity. The present study tested the hypotheses that DBRRs demonstrate concurrent validity with regard to the Beck Scale for Suicidal Ideation (BSI; Hypothesis 1), demonstrate overall classification accuracy with regard to BSI risk status (Hypothesis 2), and identify cut scores associated with optimal conditional probability statistics (Hypothesis 3). Compared to single DBRR items, the DBRR-Multiple Item Scale (DBRR-MIS) demonstrated a moderate to strong correlation with the BSI and appropriate discriminatory power when modeled against the BSI as the criterion, respectively. Adequate cut scores were identified for the DBRR-MIS for potential differentiation of risk status. However, as the purpose of a screening measurement tool is to achieve an optimal percentage of correct decisions (i.e., true positives & true negatives), results of receiver operating characteristic (ROC) curve analyses indicated that the DBRR-MIS displays a disproportionate balance among probability statistics (i.e., positive predictive power & negative predictive power), resulting in over-identification of those at risk. Given that limited resources often thwart screening implementation in educational settings, further research is needed to improve the technical adequacy of the DBRR. Initial findings indicate that, upon

continued examination, the DBRR-MIS may be an innovative method of assessing suicide risk among the student population. *An Analysis of the Cultural Assessment of Risk for Suicide with African American Adults* Guilford Press

**Introduction** Suicidal ideation (SI) can fluctuate over short periods of time. There is a lack of knowledge regarding SI instability (SII) in patients with depression. **Objectives** To use ecological momentary assessment (EMA) to explore the correlates of SII in adults hospitalized for depression and SI. **Methods** Thirty-nine adult patients hospitalized voluntarily for depression (unipolar or bipolar) and SI were recruited. Smartphones with visual analogue scales were used to rate current depressed mood, anger/irritability, feeling socially connected, and SI three times a day throughout hospitalization. Intensity was defined as the mean of all ratings. Instability was defined as the mean squared successive difference between ratings. The Beck Depression Inventory (BDI), Beck Scale for Suicide Ideation (BSS), and Affective Lability Scales (ALS) were completed at baseline and study exit. **Results** SII was moderately correlated with SI intensity, depression instability, and social connection instability. Social connection instability was not associated with SII after controlling for depression instability. Baseline ALS, BDI, and BSS scores were not significantly associated with SII, nor were BDI and BSS change scores. Participants with multiple past suicide attempts experienced greater SII, but participants with one past attempt did not differ from participants without past attempts. **Conclusions** EMA effectively captures SII in hospitalized patients. SII is associated with EMA-derived depressed mood instability, although mood instability questionnaires may not accurately

predict SII during hospitalization. More research examining the significance of SII is warranted, particularly in relation to future suicide attempts and hospitalizations.

*(Servier Edn)* Oxford University Press

In this workshop, Dr. King provides information on tools that can be used for suicide assessment for youth and describes how to use the tools in clinical practice. She details the individual, familial, and school-related risk factors for suicide attempts and/or suicide in youth. Dr. King also describes how to integrate and prioritize information from the assessment procedure. She highlights clinically useful assessment tools such as the Suicidal Ideation Questionnaire-JR, the Beck Hopelessness Scale, and the Columbia Suicide Severity Rating Scale. Case examples are used to demonstrate the skills needed to devise a solid formulation.

Runtime: 121 minutes.

*Research, Policy and Practice* Cambridge University Press

This book offers a theoretical framework for diagnosis and risk assessment of a patient's entry into the world of suicidality, and for the creation of preventive and public-health campaigns aimed at the disorder. The book also provides clinical guidelines for crisis intervention and therapeutic alliances in psychotherapy and suicide prevention.

*Suicide Risk Assessment and Formulation in Children and Adolescents* Springer

The need for evidence-based practice in mental health services is becoming clearer by the day and, until recently, the trend of emphasizing services with supporting empirical evidence has been almost exclusively limited to a focus on treatment options. *A Guide to Assessments That Work* fills a void in the professional

literature by addressing the critical role that assessment plays in providing evidence-based mental health services. To optimize its usefulness to readers, this volume addresses the assessment of the most commonly encountered disorders or conditions among children, adolescents, adults, older adults, and couples.

Strategies and instruments for assessing mood disorders, anxiety disorders, couple distress and sexual problems, health-related problems, and many other conditions are also covered in depth. With a focus throughout on assessment instruments that are feasible, psychometrically sound, and useful for typical clinical requirements, a rating system has been designed to provide evaluations of a measure's norms, reliability, validity, and clinical utility. Standardized tables summarize this information in each chapter, providing essential information on the most scientifically sound tools available for a range of assessment needs. Using the tools provided in *A Guide to Assessments That Work*, readers can at a glance determine the possible suitability and value of each instrument for their own clinical purposes. This much needed resource equips readers with the knowledge necessary for conducting the best evidence-based mental health assessments currently possible.

#### **A Preventive Approach** Hogrefe Publishing

The *International Handbook of Suicide Prevention* showcases the latest cutting-edge research from the world's leading authorities, and highlights policy and practice implications for the prevention of suicide. Brings together the world's leading authorities on suicidal behaviour, renowned for their suicide prevention research, policy and practice. Addresses the key questions of why people attempt suicide, the best interventions, treatments and

care for those at risk, and the key international challenges in trying to prevent suicide. Describes up-to-date, theoretically-derived and evidence-based research and practice from across the globe, which will have implications across countries, cultures and the lifespan.

#### **Assessment, Treatment, and Prevention of Suicidal Behavior** BSI, Beck Scale for Suicide Ideation Manual

An Analysis of the Cultural Assessment of Risk for Suicide with African American Adults. Existing suicide research and detection guidelines for mental health clinicians are informed largely by research based on Caucasian populations (Anglin, Gabriel, & Kaslow, 2005). However, traditional suicide warning signs may not apply to ethnic minorities (American Association of Suicidology, 2007; Walker, Utsey, Bolden, & Williams, 2005). African Americans, in particular, express suicidality in manners that differ from their Caucasian counterparts, which may make detection efforts difficult for clinicians who have been trained to detect 'classic' suicide warning signs (American Association of Suicidology, 2010). While some investigations have researched culturally relevant suicide risk and protective factors for African Americans in relation to suicide behaviors, up until recently, this research has not been synthesized that clinicians might use it to systematically inform treatment. A new theory, the Cultural Model of Suicide, examines individual and contextual risk and protective factors for suicide in four empirically-derived culturally-based categories: 1) cultural sanctions, 2) idioms of distress, 3) minority stress, and 4) social discord. Informed by research investigating the cultural meaning of suicide (Lester, 2011), the model also identifies cultural meanings as a culture's



views on the reasons that would precipitate a suicide attempt by a member of that culture, and as a construct that gives significance to the aforementioned four factors (Chu, Goldblum, Floyd, & Bongar, 2011). A new psychological assessment tool, derived from the Cultural Model of Suicide, The Cultural Assessment of Risk for Suicide measure (CARS; Chu et al., 2013), assesses for cultural risk for suicide and explores cultural meanings of suicide among ethnic minorities across the domains of the four factors mentioned above. The current study aimed to 1) characterize a comprehensive picture of cultural risk among suicidal African Americans across the aforementioned four factors, and 2) determine African Americans' cultural meaning of suicide. It was hypothesized that 1) the four CARS factors (cultural sanctions, idioms of distress, minority stress and social discord) would be significantly predictive of suicidal ideation for African Americans and would differentiate between African Americans who had versus had not attempted suicide, and 2) the notion of 'psychological weakness' would be reported as a cultural meaning of suicide among African Americans. A secondary analysis was performed on data collected using: the Cultural Assessment of Risk for Suicide (CARS; Chu et al., 2013) including responses to an open ended question querying for participants' opinions on the most common reasons why an individual might commit suicide; the suicide item from the Beck Depression Inventory (BDI-II; Beck & Steer, 1987), the number of suicide attempts item from the Beck Scale for Suicide Ideation (BSI; Beck & Steer, 1991), and a demographic form, among African American adults (n=94). Results showed that cultural sanctions was not predictive of suicidal ideation, but did accurately

differentiate between those participants who had versus had not reported a history of suicide attempt(s). Idioms of distress was predictive of suicidal ideation and accurately differentiated between those participants who had versus had not reported a history of suicide attempt(s). Minority stress was predictive of suicidal ideation and accurately differentiated between those participants who had versus had not reported a history of suicide attempt(s). Social Discord was predictive of suicidal ideation, but did not accurately differentiate between those participants who had versus had not reported a history of suicide attempt(s). Descriptive analyses showed that the most frequently occurring themes for non-suicidal African Americans were those pertaining to the psychological weakness category. Definition of Suicide Designed to save time and assist busy practitioners, this book guides standardized assessment and documentation of a patient's condition by providing ready-to-use forms that represent the 'gold standard' of current practice. *An Analysis of the Cultural Assessment of Risk for Suicide with Vietnamese American Adults* Charles PressPub There are a number of books recently published on assessment scales for depression and anxiety. However, these books are generally more detailed than clinicians require, are specific to one or other condition, or involve specialty populations such as children or geriatrics. To meet the needs of clinicians treating patients with depressive and anxiety disorders, this volume aims to bring together empirically validated assessment scales. In a concise and user-friendly format, *Assessment Scales in Depression and Anxiety* illustrates the assessment scales used in clinical trials and research studies; shows how to select an

assessment scale and to decide which scale to use for a particular clinical situation; and provides sample assessment scales for clinicians to use in their practice.

Treating Suicidal Behavior John Wiley & Sons

Suicide prevention is a major goal of the Public Health Service of the US government. This has been the case since the 1960s when the National Institute of Mental Health established a center for the study and prevention of suicide. Since then, however, the knowledge and research gathered has not bought about the reduction of suicide. Suicide: Closing the Exits was written to change this trend. This book reports a program of research

concerned with preventing suicide by restricting access to lethal agents, such as guns, drugs, and carbon monoxide. It may seem implausible that deeply unhappy people could be prevented from killing themselves by "closing the exits," but the idea is not a new one and has been discussed widely in the literature. The authors argue that restricting access to lethal agents should be considered a major preventive strategy, along with the psychiatric treatment of depressed and suicidal individuals and the establishment of suicide prevention centers to counsel those in crisis. Suicide represents a major contribution to the literature. As such, it should be read by all medical practitioners, policy makers, and psychologists.

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