

The Samaritans of New York

Checklist for Responding to a Person in Distress

Common sense, experience and research has shown that every individual--whether a family member, friend, loved one, caregiver or health care provider--who provides emotional support or responds to a person who is in distress, depressed or in crisis is more effective when he/she has a clear idea of how they plan to approach that person as well as some form of specific goal or plan of the steps they are going to follow before they begin this process.

The “checklist” below provides a basic overview of the steps to follow, questions to ask yourself and the issues that will need to be addressed when responding to any person who is in need of emotional support or a crisis response. [See: *A NYC Guide to Suicide Prevention, Planning and Resources* for additional information, research and resources.]

Starting with the right approach and attitude

What am I hoping to accomplish during this meeting or session? What do I need to do to give this person my undivided attention? What approach am I planning to take as we begin? What aspects of my own agenda do I have to be aware of and keep in check (such as remembering to separate the person from his/her problems)?

Creating a ‘safe environment’

How comfortable and supportive is this environment? What can I do to minimize possible interruptions or distractions? What tone and attitude do I want to present from the start? How can I make sure that I establish a good rapport with this person and listen *actively* to what he or she is saying? What concerns might this person have--such as confidentiality, being stigmatized, losing control, etc.--that I want to remind myself of?

Focusing on the individual’s experience or situation

What fears, concerns and/or difficulties is this person dealing with? What has been this individual’s history in accessing and/or getting help? What challenges and obstacles (if any) has he/she has faced? What coping mechanisms (if any) has the individual utilized in the past? What is his/her current living and support situation?

Identifying warning signs, risk and protective factors

What is the focus of the individual’s thoughts and feelings at this time? What are the other factors, background, history, environment that increase his/her potential risk? What affects, behaviors, actions is he/she experiencing or exhibiting that demonstrate risk? What behaviors, relationships and activities are signs of coping/resilience?

Assessing suicide ideation and determining degree of risk

As the person is talking, is he or she expressing thoughts about suicide? Does he/she have a specific plan? Does he/she have the means available to implement that plan? Has he/she set a specific time to act on that plan? Has he/she ever attempted suicide before or is there a family history of trauma, or mental illness or suicide? Considering the thoughts and feelings expressed, the number and degree of risk factors and warning signs and his/her suicide assessment, what is this person’s *degree of risk*?

Exploring options, utilizing resources and providing ongoing support

What do I have to do to remind myself that this is an ongoing process? Which resources do I want to think about that are appropriate to this scenario? What ongoing support system can be developed and who and what might it consist of? What *backups* and *bridging* services can be utilized so that this person’s care does not solely rely on me? What supports and debriefing mechanisms can I use to make sure I have support, as well?

KEY GOALS TO ALWAYS REMEMBER...	ENHANCE PROTECTIVE FACTORS REDUCE ACCESS TO LETHAL MEANS
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