**Vignettes and Sample Dialogue for Risk Management Role Plays**

Participating in role plays is one method for training research personnel to effectively respond to risk scenarios. The example vignettes and conversations below can provide some initial guidance to research personnel related to the kinds of statements to actively listen for in role plays or when working with participants.

Role Play Vignettes

1. 65 year old male flagged during the screening assessment with a score on the BSS-SR of 10. Items endorsed included having a weak wish to live, a weak desire to kill himself, frequent thoughts about killing himself, unsure that he can keep himself from committing suicide, and considered ways of killing himself, but has not worked out the details. He feels hopeless that his life will get better in the future. He hoped that if he stopped drinking, his problems would go away and his mood would improve, however he has been sober for 3 weeks now and nothing is changing. He is participating in groups and meets with his counselor once per week.

2. 22 year old man flags for suicidal ideation, stating that he occasionally feels down but it’s no big deal. He denies having any urges or plans to harm himself, stating that he’s never thought about those types of things. During the conversation, however, he flippantly mentions that he just got released from the hospital and while he was there they put him on a special watch because he tried to hang himself with a bed sheet.

3. 47 year old male struggles with current suicidal ideation surrounding guilt related to the death of his girlfriend. The patient and his girlfriend were both IV heroin users and 3 months ago, they both overdosed while using. The patient awoke from the overdose and found his girlfriend had died from the OD and he had lost all circulation to his arm from forgetting to remove the tie from his arm. He was taken to the hospital where he required an intensive operation to remove the dead muscle from his forearm. He has constant, severe pain from this injury which constantly reminds him of the death of his girlfriend. He has tried to OD several times since the incident, hoping that each time he wouldn’t wake up.

4. 29 year old woman has been struggling with depression and PTSD since returning from her latest deployment. She states that she feels like she has no support at home from her husband and she feels disconnected from her children. She has been taking Xanax to sleep, but reports needing to take 5-8 pills per night because the recommended dosage doesn’t work. A few nights ago, after drinking heavily she got into a fight with her husband and stormed out of the house. She got into her car and drove into a tree. She states that she couldn’t deal with feeling so alone and wanted to die when she crashed the car.

5. 58 year old man presents with high intent to kill himself. He states that he has been depressed “all of his life” and feels there is no one who will be able to help him. He has tried repeatedly in the past to end his life but has been unsuccessful each time. He states that he has tried everything to make himself feel better including medications, therapy, inpatient, outpatient, etc. and nothing has worked. He says he is just waiting until he has an opportunity and then he is going to try again to kill himself, but he doesn’t specify how. He says it’s only a matter of time before he kills himself. He is very adamant that he does not want anyone to know about his plans since they will try to stop him, and he’s already made up his mind.

6. 35 year old man states that he has been feeling increasingly suicidal since he recently relapsed to drinking and using cocaine. He had been clean for just over a year when he lost his job and began to feel hopeless about his future. He has stopped seeing his therapist at the VA because he feels like they don’t understand what he’s going through and he does not have anyone he is currently receiving treatment from. He states that he has a gun at home and recently he has found himself taking it out of the safe at night and leaving it by his bed just in case he needs it.

7. Erick is a 34-year-old male who recently relapsed and is drinking heavily. The last time Erick relapsed, he and a friend were out drinking, and Erick passed out behind the wheel while driving home. Not only was he injured in the accident, but his friend was killed. Since then, he has been dealing with feelings of guilt. He reports that the pain he is experiencing is a constant reminder of his mistake. Since his relapse, his drinking has increased, and he has also been abusing his prescription pain medications. He does not believe that his use of prescription medications is a problem because he is dealing with a severe injury from the accident. His behavior while intoxicated has become more and more violent in the past month, and his wife is constantly threatening to leave him and take the kids due to his verbal abusiveness while drinking. Erick claims that nobody in his life understands what he is going through - nobody understands his pain or his guilt. He feels that he doesn’t have anyone to talk to because they all blame him for the accident. Erick admits that he feels everyone would be better off if he was no longer alive – his wife wouldn’t be burdened with taking care of him due to his injuries as well as his violent behavior, and he wouldn’t have to face the shame he feels from his mistakes. Erick says he owns a gun and has access to pills.

8. Joe, aged 45, frequently fights with his wife. There is talk of divorce, since Joe has slapped his wife at least once. Joe has divorce, since Joe has slapped his wife at least once. Joe has been trying to find a job for the past 3 months, since he would like been trying to find a job for the past 3 months, since he would like to be able to provide for his family, however he feels to be able to provide for his family, however he feels hopeless hopeless that he will ever find a job. Joe has been trying to cut down on that he will ever find a job. Joe has been trying to cut down on drinking, however lately he has been drinking every night and has drinking, however lately he has been drinking every night and has stopped attending his AA meetings. The other day at a meeting, stopped attending his AA meetings. The other day at a meeting, Joe gave his 6month sobriety chip away to a friend, because he Joe gave his 6month sobriety chip away to a friend, because he said it “didn’t mean anything anymore”. said it “didn’t mean anything anymore”.

9. Ericka is a 34 year-old female old female who recently suffered an injury suffered an injury at work. work. Ericka, a factory worker was Ericka, a factory worker was supposed to be supposed to be watching the line but watching the line but had had spent the night before drinking heavily and was not as alert. Not only spent the night before drinking heavily and was not as alert. Not only was she injured, she injured, but several of but several of her co-workers were injured. workers were injured. Since S then, then, she has been dealing with feelings of guilt. has been dealing with feelings of guilt. She reports that the reports that the pain she is experiencing is a constant reminder of is experiencing is a constant reminder of her mistake. mistake. Recently, her Recently, her drinking has drinking has increased and she has been abusing has been abusing her prescription pain medications. prescription pain medications. She does not believe that is use of does not believe that is use of prescription medications is a problem because prescription medications is a problem because she is dealing with a is dealing with a severe injury. Ericka injury. Ericka claims that nobody claims that nobody understands what she is going through going through -nobody understands nobody understands her pain or guilt. Ericka admits that she feels everyone would be better off if feels everyone would be better off if she was no longer was no longer alive. alive. Ericka says she owns a gun and has access to pills.

Sample Dialogue

**EXAMPLE 1: Determining suicide intent**

*Participant:* I feel like my family would be better off without me. I feel like such a burden to them because I am such a failure. *[identification of thoughts, increased risk factors]*

*Staff:* It sounds like you’ve been struggling with feeling like a burden. Could you tell me a little more about how you’ve been feeling recently, maybe in the past week? *[clarification of timing of thoughts]*

*Participant:* This past week has been bad. I’ve been feeling really lost, really down. I’m struggling to see a way out.

*Staff:* You mentioned feeling lost and down, I’m wondering if you’ve been thinking about ending your life in the past week? [***explicit*** *clarification of suicidal thoughts]*

*Participant:* I don’t know. Maybe a little bit. I just don’t want to hurt my family anymore.

*Staff:* It sounds like your family is very important to you. When you’ve been thinking about maybe ending your life, have you had times when you’ve wanted to act on those thoughts? *[clarification of intent to act*]

*Participant:* No, not recently. In the past I’ve made suicide attempts and I don’t think I’ve felt the same recently. I just am struggling with finding my place right now.

*Staff:* That’s a very common struggle for a lot of people, especially people in treatment. I’d like to give you a resource card if that’s okay with you that has the National Suicide Prevention Lifeline number on it. You can call this number for help if your thoughts of suicide start to get worse, or you feel like you might not be able to keep yourself safe*.* *[determination of low risk, provide resources]*

**EXAMPLE 2: Determining current suicidal thoughts**

*Participant:* I feel like my family would be better off without me. I feel like such a burden to them because I am such a failure. *[identification of thoughts, increased risk factors]*

*Staff:* It’s difficult to feel that way. Have you had any thoughts of ending your life?

*Participant:* No. Even though I feel like my family would be better off without me, I know they would be really sad if I wasn’t here anymore. I don’t want to do that to my kids. [*determination of no risk]*

**EXAMPLE 3: Determining current suicidal thoughts, intent, and plan (and also preparation of plan)**

*Participant:* I often feel like I want to die. Everything is just so difficult. *[identification of thoughts, increased risk factors]*

*Staff:* How often do you feel like you want to die?

*Participant:* I think about it all the time. I feel like it’s all I think about these days.

*Staff:* That must be difficult for you. Could you tell me a little bit about what you think about, or what those thoughts look like to you? ***[explicit*** *clarification of suicidal thoughts]*

*Participant:* I just keep thinking about why I didn’t die the last time I tried to kill myself, and how I can make sure that this time I wouldn’t fail. Last time I overdosed I didn’t take enough, I just got really sick, but I still woke up. I just need to be sure I take enough the next time.

*Staff:* It’s sounds like you’ve been thinking about how you would end your life, by overdosing. Do you have any intention of overdosing to end your life? *[clarification of intent to act]*

*Participant*: Yes, that’s what I would do so I could just go to sleep and it would be painless, and my family wouldn’t find a big mess.

*Staff:* Have you made any steps or plans towards overdosing? For example, do you have the drugs you would need or anything else ready? *[clarification of plan/ preparatory behaviors]*

*Participant:* I don’t have them right now, but I could easily get them with one phone call. I have the number in my phone, and I have enough money saved up to be able to buy enough this time.

*Staff:* It sounds like right now you are really struggling, and I’m wondering if you’ll be able to keep yourself safe after our meeting today. On a scale from 0 to 5, where 0 is you don’t feel like you can keep yourself safe, and 5 is you feel like you can keep yourself safe, where would you fit on that scale right now? [*clarification of intent to act on plan/ preparatory behaviors]*

*Participant*: I don’t know, probably like a 1.

*Staff:* I appreciate you sharing where you are right now on that scale. At the beginning of our meeting, I mentioned that one of my jobs is to make sure you are safe, and I’m worried that right now it may be hard for you to stay safe. I’d like to connect you with some additional help. One resource we have available is the National Suicide Prevention Lifeline, which is available for anyone struggling with thoughts of suicide. What would you think about calling them together right now and talking with someone about how you’re feeling? [*determination of imminent risk, connect to resource]*

*Participant:* I mean, I don’t know if I need them right now. I might need them later, but it’s not like I have anything to end my life with right now. I just don’t want to be a burden for them. Can I just take their number and call later?

*Staff:* I understand that it may not feel like you need to call them now. At this point, I would really like you to talk to someone about how you are feeling. I know this can be scary and you may be worried about sharing these thoughts with other people, but I need to be sure that you can be safe once you leave here. I’d like to call my supervisor and have them speak with you. Can we do that together now? *[problem solve resource connection, clarification of limits of confidentiality]*

*Participant:* Sure, if you have to, go ahead.