

**WORLDWIDE STUDY OF DEFINITIONS AND TERMS FOR
SUICIDAL BEHAVIORS©
QUESTIONNAIRE**

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**Australian Institute for
Suicide Research and Prevention**





Dear Collaborator,

Welcome to the worldwide study of definitions and terms of suicidal behaviors. We would appreciate if you would take a moment to answer this questionnaire. Your participation in this study is very important to us.

This study is performed under the auspices of the International Association for Suicide Prevention (IASP), Task Force on Nomenclature and Classification. It aims at better understanding how terms for suicidal behavior vary across countries and cultures. This variability has hampered research efforts for decades. The use of a common language could help implement efficient research that allows comparability and avoids resource-consuming duplication of efforts.

You have been invited to contribute to this study having been identified as an expert in the field of suicidal behavior. We would appreciate if your answers could reflect the professionals' (e.g. researchers, practitioners) most common experience when working in your country.

We expect it will take you approximately 20 minutes to answer this questionnaire.

This research forms a component of an academic program at the Australian Institute for Suicide Research and Prevention (AISRAP), Griffith University. It is to be part of a PhD thesis of which Dr Benjamin Goodfellow is a candidate, Prof. Diego De Leo is the principal supervisor, and Dr Kairi Kolves is the associate supervisor.

The conduct of this research involves the collection, access and/ or use of your identified personal information. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements. A de-identified copy of this data may be used for other research purposes. However, your anonymity will at all times be safeguarded. For further information consult the University's Privacy Plan at <http://www.griffith.edu.au/about-griffith/plans-publications/griffith-university-privacy-plan>.

Nevertheless, if you choose to, your contribution will be acknowledged by name and professional role in the appropriate section of any document originating from this investigation. We are aware that answering this questionnaire may be time consuming for you and we would like to offer you the opportunity of co-authorship in the main publications originating from this study should you wish to. Please advise us if you do via e-mail.

Once the study results are analysed you can be provided a convenient, plain language summary of results upon request (e.g. via email).

There are no foreseeable risks associated with participation in this research. All research data (survey responses and analysis) will be retained in a password protected electronic file at Griffith University for a period of five years before being destroyed.

Griffith University conducts research in accordance with the National Statement on Ethical Conduct in Human Research. If you have any concerns or complaints about the ethical conduct of this research project, you are encouraged to contact the Manager, Research Ethics on +617 3735 4375 or research-ethics@griffith.edu.au. Griffith University ethics reference number for this study is 2017/601.

If you have any questions, please contact the principal supervisor Prof Diego De Leo at the Australian Institute for Suicide Research and Prevention
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On behalf of AISRAP and IASP, thank you for taking the time to answer this questionnaire.

Prof Diego De Leo
Dr Benjamin Goodfellow
Dr Kairi Kõlves

GENERAL INFORMATION

Do you consent to be acknowledged by name and professional role in any outputs related to this research?

- Yes
 No

Please provide your full name, title, and affiliation:

Please type answer in provided space where relevant. Please choose one best answer when several options are provided.

1 Information on site

1.1 What is the name of your country?

1.2 What is the estimated population of your country?

1.3 What is (are) the main language(s) in your country?

2 Information about yourself

2.1 Do you consider yourself a

- Clinician
 Researcher
 Both
 Other, please specify _____

2.2 What is your main profession?

- Medical doctor
 Psychologist
 Nurse
 Demographer
 Epidemiologist
 Other professional, please specify _____

NOMENCLATURE, DEFINITIONS, TERMS

You will now read a series of statements regarding definitions and terms. Please choose one *best* statement for each question. Remember, there are no right or wrong answers.

Questions about *suicide*

In your country, what is the meaning of the word *suicide*?

5. Please choose one single statement to complete the sentence: **Suicide** is an act that

- Necessarily leads to death
- May result in survival

Comments on question 5

6. Statements regarding **intent**: please tick *Yes* if you agree with statement in table, or *No* if you don't

| Statements | Yes | No |
|--|-----------------------|-----------------------|
| Suicide is an act that can only be done with an intent to die | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that may be done with an intent other than an explicit intent to die | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that may be done with an ambiguous or unclear intent | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that may be done with an intent to take the risk of dying | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that may be done without explicit intent to die | <input type="radio"/> | <input type="radio"/> |

Comments on questions in section 6



7. Statements regarding **knowledge** of the consequences of the act: please tick Yes if you agree with statement in table, or No if you don't

| Statements | Yes | No |
|--|-----------------------|-----------------------|
| Suicide is an act that is necessarily performed with certainty of a fatal result | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that can be performed with the knowledge of a fatal result, but person is not certain of that result | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that can be performed without any knowledge of the consequences of the act | <input type="radio"/> | <input type="radio"/> |
| Suicide is an act that can be performed with the certainty that the result will not be fatal | <input type="radio"/> | <input type="radio"/> |

Comments on questions in section 7

8. Please choose one single statement to complete the sentence: **Suicide** is an act that

- Is initiated and necessarily carried out by oneself to the end of the action
- Is initiated by oneself, but not necessarily carried out by oneself to the end of the action
- Can be initiated and carried out by oneself or by someone else

Comments on question 8

9. Please provide alternate terms for the word **suicide** if you think it is not appropriate for describing what the previous questions were asking about. Please explain your reasons.

Questions on *different types of suicidal behavior or self-harm*

Please choose one single statement to complete the sentences

10. In your country, when professionals (e.g. clinicians, researchers) talk about other types of suicidal behavior than suicide, the most common understanding is that when a person harms him- or herself, **with the intention to die, and survives**, his or her act is:

- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self-mutilation
- Non-fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)

Comments on question 10, or suggestions for alternate terms

11. In your country, when professionals (e.g. clinicians, researchers) talk about other types of suicidal behavior than suicide, the most common understanding is that when a person harms him- or herself **without any intention to die, and survives**, his or her act is:

- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self-mutilation
- Non-fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)

Comments on question 11, or suggestions for alternate terms

12. In your country, when professionals (e.g. clinicians, coroners, researchers) talk about types of possible suicidal behavior, the most common understanding is that when a person harms him- or herself **without any intention to die, and dies**, his or her act is:

- A suicide
- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self-mutilation
- Fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)
- An accident
- An undetermined death (open verdict)

Comments on question 12, or suggestions for alternate terms

13. In your country, when professionals (e.g. clinicians, researchers) talk about other types of possible suicidal behavior than suicide, the most common understanding is that when a person harms him- or herself, but, for whatever reasons, **cannot state his or her intentions and the person survives**, his or her act is:

- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self mutilation
- Non-fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)
- An accident
- An undetermined event

Comments on question 13, or suggestions for alternate terms

14. In your country, when professionals (e.g. clinicians, researchers) talk about other types of possible suicidal behavior than suicide, the most common view is that when a person harms him- or herself, but **does not want to state his or her intentions and the person survives**, his or her act is:

- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self mutilation
- Non-fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)
- An accident
- An undetermined event

Comments on question 14, or suggestions for alternate terms

15. In your country, when professionals (e.g. clinicians, coroners, researchers) talk about possible types of suicidal behavior, the most common view is that when a person **dies as a consequence of harming him or herself**, but his or her **intentions in doing so cannot be known or inferred**, his or her act is:

- A suicide
- A suicide attempt
- Parasuicide
- Self-harm
- Deliberate self-harm
- Non suicidal self-injury
- Self-mutilation
- Non-fatal suicidal behavior
- Self-directed violence
- Self-injurious behavior (including self-poisoning/overdosing with medication)
- An accident
- An undetermined death (open verdict)

Comments on question 15, or suggestions for alternate terms

Questions on *suicidal ideation*

Please choose one single statement to complete the sentences

16. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal ideation, the most common understanding is that when someone who **occasionally thinks of suicide** when confronted to distress, this person has:

- A normal pattern of thinking
- Suicidal ideation
- Passive suicidal ideation
- Active suicidal ideation
- Death wishes
- Reactive suicide ideation

Comments on question 16, or suggestions for alternate terms

17. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal ideation, the most common understanding is that when someone who **continuously thinks of suicide but has no suicidal intent**, this person has:

- A normal pattern of thinking
- Suicidal ideation
- Passive suicidal ideation
- Active suicidal ideation
- Persistent suicide ideation
- Death wishes

Comments on question 17, or suggestions for alternate terms

18. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal ideation, the most common understanding is that when someone who **hopes for death** but has no thoughts of killing him- or herself, this person has:

- A normal pattern of thinking
- Suicidal ideation
- Passive suicidal ideation
- Active suicidal ideation
- Death wishes

Comments on question 18, or suggestions for alternate terms

19. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal ideation, the most common understanding is that when someone **hopes for death by killing him- or herself**, this person has:

- A normal pattern of thinking
- Suicidal ideation
- Passive suicidal ideation
- Active suicidal ideation
- Death wishes

Comments on question 19, or suggestions for alternate terms

Questions on *suicidal ideation or behavior*

Please choose one single statement to complete the sentences

20. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when someone **states suicidal intention without engaging in behavior**, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt

Comments on question 20, or suggestions for alternate terms

21. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when someone **mimics (i.e. acts in a way that has the appearance of) suicidal behavior without sustaining any injuries**, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt

Comments on question 21, or suggestions for alternate terms

22. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when someone **has decided how and when to perform a suicidal act**, but does not actively prepare anything, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt

Comments on question 22, or suggestions for alternate terms

23. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when **someone prepares a suicidal act** (e.g. assembles pills, buys a gun, attaches a rope, visits a bridge), **but does not initiate it and thus does not sustain any injuries**, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt

Comments on question 23, or suggestions for alternate terms

24. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when someone **initiates a suicidal act** (e.g. stands or sits on the edge of a high bridge, ties a rope around his or her neck), **but stops him or herself before sustaining any injuries**, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt

Comments on question 24, or suggestions for alternate terms

25. In your country, when professionals (e.g. clinicians, researchers) talk about suicidal behavior or ideation, the most common understanding is that when someone **initiates a suicidal act** (e.g. stands or sits on the edge of a high bridge, ties a rope around his or her neck), **but is stopped by someone else** before sustaining any injuries, this person:

- Is engaging in suicidal behavior
- Is experiencing suicidal ideation
- Is experiencing passive suicidal ideation
- Is experiencing active suicidal ideation
- Has made a suicide attempt
- Has made a suicide threat
- Has made a suicide communication
- Has made a suicide plan
- Is engaging in preparatory suicidal behavior
- Has made an interrupted suicide attempt
- Has made an aborted suicide attempt



Comments on question 25, or suggestions for alternate terms

General comments

26. Please take a moment to give us some general comments on this study, your impressions and reflections, especially regarding the cultural aspects that might be overlooked. This study was purposefully conducted in English language, but we do realize how challenging it can be to translate some of the contents of this questionnaire. Thank you for your help.

On behalf of AISRAP and IASP, thank you for taking the time to answer this questionnaire. Your help will be valuable in order to take important steps towards a common language in suicidology.