

# Nursing Approaches to Suicide Prevention in Psychiatric Units

Maeve Gracie\*

Department of Nursing Science, University of Torino, 10043 Torino, Italy

## Introduction

Suicide prevention in psychiatric units is an essential aspect of nursing practice, requiring a comprehensive approach that incorporates understanding, assessment, intervention and support strategies. Nurses, as the most frequent point of contact for patients in these settings, are in a unique position to identify risk factors and provide crucial support for individuals experiencing suicidal ideation or behaviors. Effective suicide prevention requires not only knowledge of the clinical signs of suicide risk but also the development of therapeutic relationships and interventions tailored to each patient's unique needs [1]. Nurses in psychiatric units must be familiar with the risk factors for suicide, including mental health disorders such as depression, bipolar disorder, schizophrenia and personality disorders. Other contributing factors might include substance abuse, trauma, previous suicide attempts, chronic illness and environmental stressors like family conflict or financial difficulties. Understanding these risk factors is critical in providing early identification of patients at higher risk for suicide, allowing for timely interventions [2]. A key nursing responsibility in suicide prevention is conducting thorough, individualized assessments. This assessment goes beyond simply asking about suicidal thoughts and extends to evaluating the patient's support system, coping mechanisms and the presence of protective factors such as strong family ties or involvement in therapy. Nurses must assess both the severity of the patient's suicidal ideation and the means by which they might act on these thoughts. They should also consider any contributing psychiatric symptoms, such as delusions or hallucinations, that might increase the risk of suicide [3].

## Description

Once a suicide risk is identified, immediate intervention becomes a priority. Nurses must collaborate with other members of the healthcare team, including psychiatrists, psychologists and social workers, to create a comprehensive care plan.

**\*Address for Correspondence:** Maeve Gracie, Department of Nursing Science, University of Torino, 10043 Torino, Italy; E-mail: Gracie.maeve@unito.it

**Copyright:** © 2025 Gracie M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.

**Received:** 24 February, 2025, Manuscript No. apn-25-165314; **Editor Assigned:** 26 February, 2025, PreQC No. P-165314; **Reviewed:** 10 March, 2025, QC No. Q-165314; **Revised:** 17 March, 2025, Manuscript No. R-165314; **Published:** 24 March, 2025, DOI: 10.37421/2573-0347.2025.10.423

This plan may involve the use of therapeutic techniques like Cognitive Behavioral Therapy (CBT) or Dialectical Behavior Therapy (DBT), which are particularly effective for patients with suicidal ideation. Nurses may also assist in facilitating these therapies or provide support during sessions. Additionally, medication may be prescribed to manage underlying psychiatric conditions, such as antidepressants or antipsychotics and nurses must be attentive to the effects and side effects of these medications [4]. Psychiatric nursing units are structured environments designed to maintain patient safety and nurses play a crucial role in ensuring that these safety protocols are in place. This might involve environmental modifications, such as removing potentially harmful objects and ensuring close supervision of high-risk patients. Nurses must also provide emotional support by offering a non-judgmental, empathetic presence. Establishing a rapport with patients can often be the first step in helping them feel understood and less isolated. In addition to direct care, nurses must educate patients and their families about suicide prevention and coping strategies. Providing psychoeducation can help patients understand their illness, recognize the early signs of suicidal thoughts and develop healthier coping mechanisms. It is equally important for families to be involved in the care process, as they can offer essential support when the patient returns home. Nurses can offer guidance on how families can recognize warning signs and respond appropriately. Regular monitoring and follow-up are also essential components of suicide prevention. Suicide risk is dynamic and can change rapidly, so ongoing assessment and adjustments to care plans are necessary. Nurses must document their observations and communicate with the team to ensure that any changes in the patient's condition are addressed promptly. Continuous vigilance, combined with ongoing therapeutic interventions, can help reduce the likelihood of suicide. Nurses themselves also need to be supported in their efforts to prevent suicide. The emotional toll of working in psychiatric units can be significant and nurses may face burnout or compassion fatigue from dealing with the high-stress nature of suicide prevention. As such, it is important for healthcare organizations to provide resources for nurse well-being, such as debriefing sessions, counseling and peer support groups. Nurses must also be trained to manage their emotions effectively when working with patients in distress, as this can significantly impact the quality of care they provide. Overall, suicide prevention in psychiatric units requires a multifaceted approach, where nurses play a pivotal role in assessing, intervening and supporting patients throughout their recovery.

By building trust, providing emotional support, educating patients and families and collaborating with the healthcare team, nurses can make a significant impact in reducing suicide rates among individuals in psychiatric care. As the frontline caregivers, they are instrumental in creating environments where patients feel safe, valued and empowered to seek help when experiencing suicidal thoughts [5].

## Conclusion

Nursing approaches to suicide prevention in psychiatric units are crucial in reducing the risk of suicide among vulnerable patients. By fostering a therapeutic environment based on trust, empathy and respect, nurses can play a pivotal role in recognizing early signs of distress and intervening effectively. Collaborative efforts with multidisciplinary teams, continuous education and evidence-based practices, such as the use of risk assessments and tailored care plans, are essential for providing comprehensive support to patients at risk. Ultimately, prioritizing suicide prevention in psychiatric units through vigilant, compassionate and informed nursing practices can significantly contribute to the well-being and safety of patients, helping to mitigate the devastating effects of suicide.

## Acknowledgement

None.

## Conflict of Interest

None.

## References

1. Stunkard, A.J., T. Sorensen, F. Schulsinger and S. Kety, et al. "Use of the Danish Adoption Register for the study of obesity and thinness." *Res Publ Assoc Res Nerv Ment Dis* (1983): 115-120.
2. Jayawickrama, Ravisha S., Briony Hill, Moira O'Connor and Stuart W. Flint, et al. "Efficacy of interventions aimed at reducing explicit and implicit weight bias in healthcare students: A systematic review and meta-analysis." *Obes Rev* 26 (2025): e13847.
3. Barra, Maryanne and Samantha S. Singh Hernandez. "Too big to be seen: weight-based discrimination among nursing students." *Nurs Forum* 53 (2018) 529-534.
4. Oliver, Tracy L., Rebecca Shenkman, Lisa K. Diewald and Suzanne C. Smeltzer. "Reflective journaling of nursing students on weight bias." *Nurse Educ Today* 98 (2021): 104702.
5. Joseph, Ellen C and Trisha L. Raque. "Feasibility of a loving kindness intervention for Mitigating Weight Stigma in nursing students: a Focus on Self-Compassion." *Mindfulness* 14 (2023): 841-853.

**How to cite this article:** Gracie, Maeve. "Nursing Approaches to Suicide Prevention in Psychiatric Units." *J Adv Practice Nurs* 10 (2025): 423.