



Effectiveness of Suicide Safety Planning Interventions: A Systematic Review Informing Occupational Therapy

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Suicide Statistics

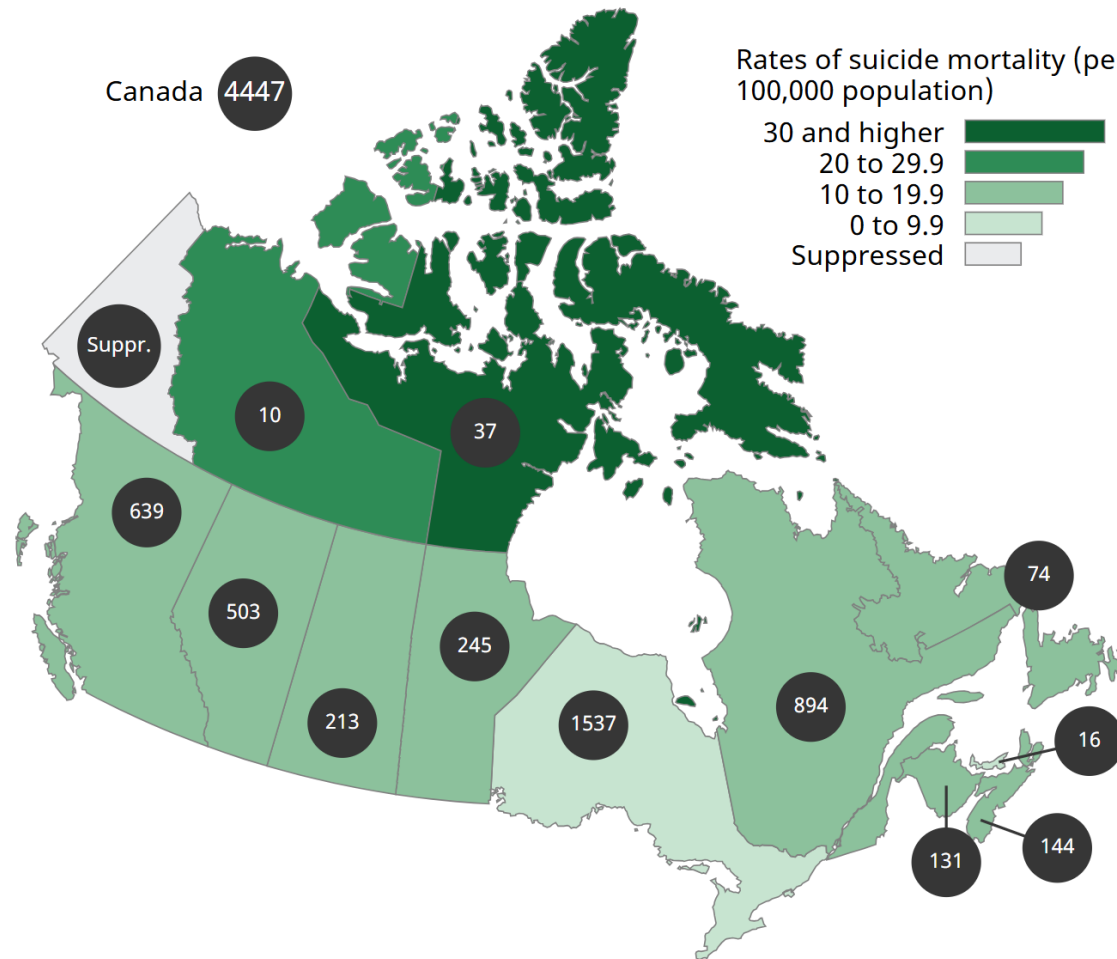
Suicide is a serious public health problem and a leading cause of mortality internationally [1]

Suicide deaths increased by 8.6% from 2021 – 2023, but have since stabilized [5]

In 2022 in Canada, 13 people died by suicide every day [5]

Suicide rate among men in 2022 was almost 3x the rate of women [5]

Figure 1: Number and rates (per 100,000 population) of suicide mortality in Canada, by province and territory, in 2023



<https://health-infobase.canada.ca/mental-health/suicide-self-harm/suicide-mortality.html>

Rationale

Suicide Safety Planning [SSP] is a key approach used in the mitigation of suicide risk and behaviour in community settings

Knowledge syntheses have focused on identifying a range of strategies for suicide prevention and intervention [2]

- **Few focus on the *effectiveness* of SSPs, and on a range of psychosocial outcomes**

Safety Planning vs. “Contracting”

Safety Planning

- A structured, written document
- Developed collaboratively
- Multiple components

Contracting for Safety

- A verbal agreement
- Provider-led
- One component: agree to contact a provider for support when suicide is imminent

STANLEY - BROWN SAFETY PLAN

STEP 1: WARNING SIGNS:

1. _____
2. _____
3. _____

STEP 2: INTERNAL COPING STRATEGIES – THINGS I CAN DO TO TAKE MY MIND OFF MY PROBLEMS WITHOUT CONTACTING ANOTHER PERSON:

1. _____
2. _____
3. _____

STEP 3: PEOPLE AND SOCIAL SETTINGS THAT PROVIDE DISTRACTION:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Place: _____ 4. Place: _____

STEP 4: PEOPLE WHOM I CAN ASK FOR HELP DURING A CRISIS:

1. Name: _____ Contact: _____
2. Name: _____ Contact: _____
3. Name: _____ Contact: _____

STEP 5: PROFESSIONALS OR AGENCIES I CAN CONTACT DURING A CRISIS:

1. Clinician/Agency Name: _____ Phone: _____
Emergency Contact : _____
2. Clinician/Agency Name: _____ Phone: _____
Emergency Contact : _____
3. Local Emergency Department: _____
Emergency Department Address: _____
Emergency Department Phone : _____
4. Suicide Prevention Lifeline Phone: 1-800-273-TALK (8255)

STEP 6: MAKING THE ENVIRONMENT SAFER (PLAN FOR LETHAL MEANS SAFETY):

1. _____
2. _____

The Stanley-Brown Safety Plan is copyrighted by Barbara Stanley, PhD & Gregory K. Brown, PhD (2008, 2021). Individual use of the Stanley-Brown Safety Plan form is permitted. Written permission from the authors is required for any changes to this form or use of this form in the electronic medical record. Additional resources are available from www.suicidesafetyplan.com.

Methodology

Systematic review of effectiveness using the Joanna Briggs Institute including:

- 1) Title and abstract screening**
- 2) Full-text review**
- 3) Critical appraisal**
- 4) Narrative synthesis**

Research Question: What is the effectiveness of SSP interventions in existing interdisciplinary literature?

Methods

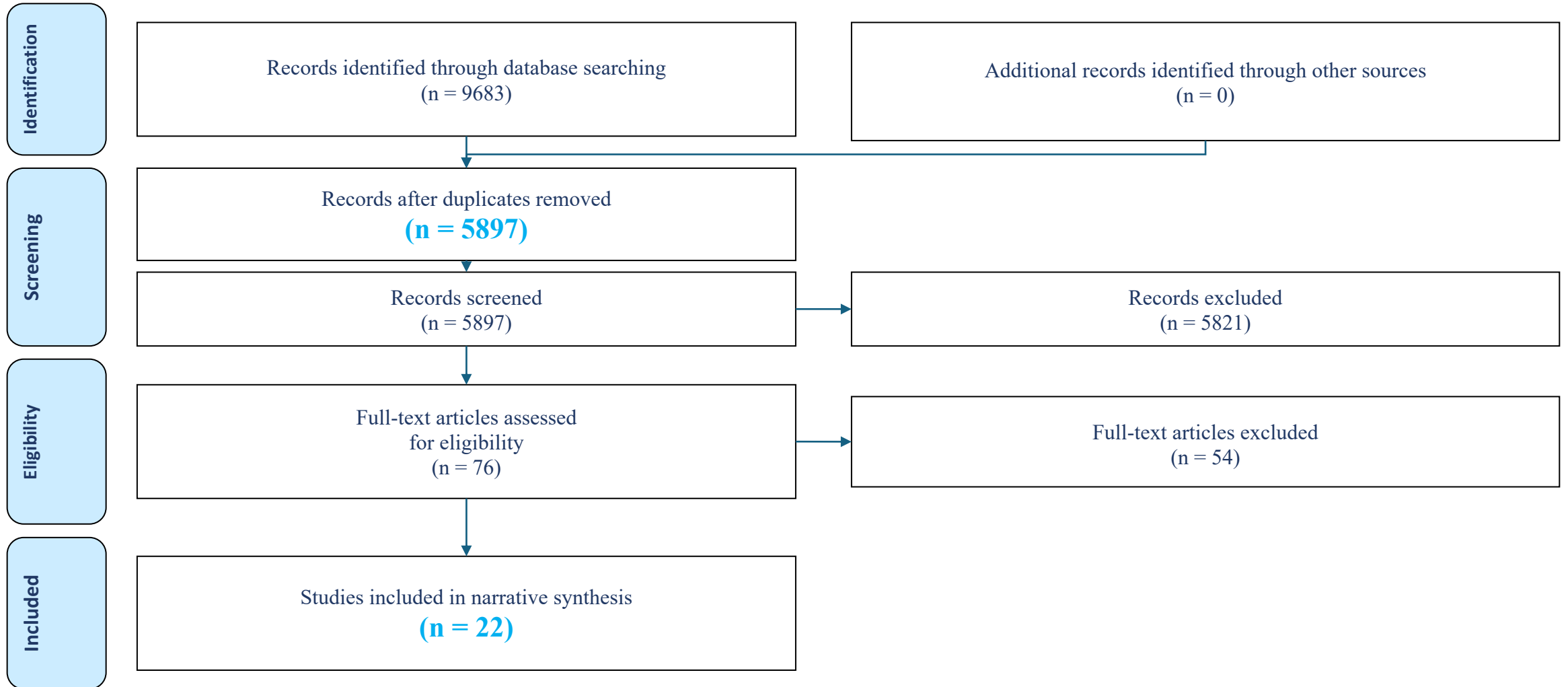
Five databases: Medline, PsychInfo, CINAHL, EMBASE, and Sociological Abstracts

Two independent raters on title and abstract screening/full-text review

Critical appraisal using the JBI Checklists for RCTs and Quasi-Experimental Studies [3, 4]

Narrative synthesis involved categorizing studies according to intervention type

Findings



Findings

Standard and
enhanced safety
planning
interventions

(n=11)

Safety planning
integrated with other
approaches

(n=6)

Electronically
delivered safety
planning
interventions

(n=5)

Findings

Standard and Enhanced Safety Planning Interventions (n=11)

- = statistically significant positive effect on the outcome
- = no statistically significant effect
- ◇ = mixed findings

	SI	SB	MHS	Res	SU
Standard and enhanced SP interventions					
Enhanced Crisis Response Plan ¹	●				
Enhanced Crisis Response Plan ²		●	●		●
Enhanced Crisis Response Plan ³	●	●			●
Standard Crisis Response Plan ¹	○				
Standard Crisis Response Plan ²		●	●		◇
Standard Crisis Response Plan ³	●	●			●
Safety Planning Intervention ¹³		◇			
Standard Crisis Response Plan ¹⁸				○	
Enhanced Crisis Response Plan ¹⁸				●	
Safety Plan Intervention ²⁰					◇
Safety Plan Intervention* ²¹					
Contact and Safety Planning Intervention ²²	○	●	○		
Crisis Coping Cards ²³		●	●		
Crisis Postcard Intervention ⁵		●			
Systematic review of safety planning interventions ¹⁷	○	●			

Findings

Safety Planning Integrated With Other Approaches (n=6)

- = statistically significant positive effect on the outcome
- = no statistically significant effect
- ◇ = mixed findings

	SI	SB	MHS	Res	SU
SP integrated with other approaches					
Mindfulness-Based Cognitive Therapy and Safety Planning ⁶	●		◇		
Mindfulness-Based Cognitive Therapy and Safety Planning ⁷	●		●	◇	
Project Life Force ¹²	●		●		
Attempted Suicide Short Intervention Program ¹⁴		●			●
Home-Based Mental Health Evaluation ¹⁵					
Collaborative Assessment and Management of Suicidal ideation and behaviour ⁸	◇		●	◇	

Findings

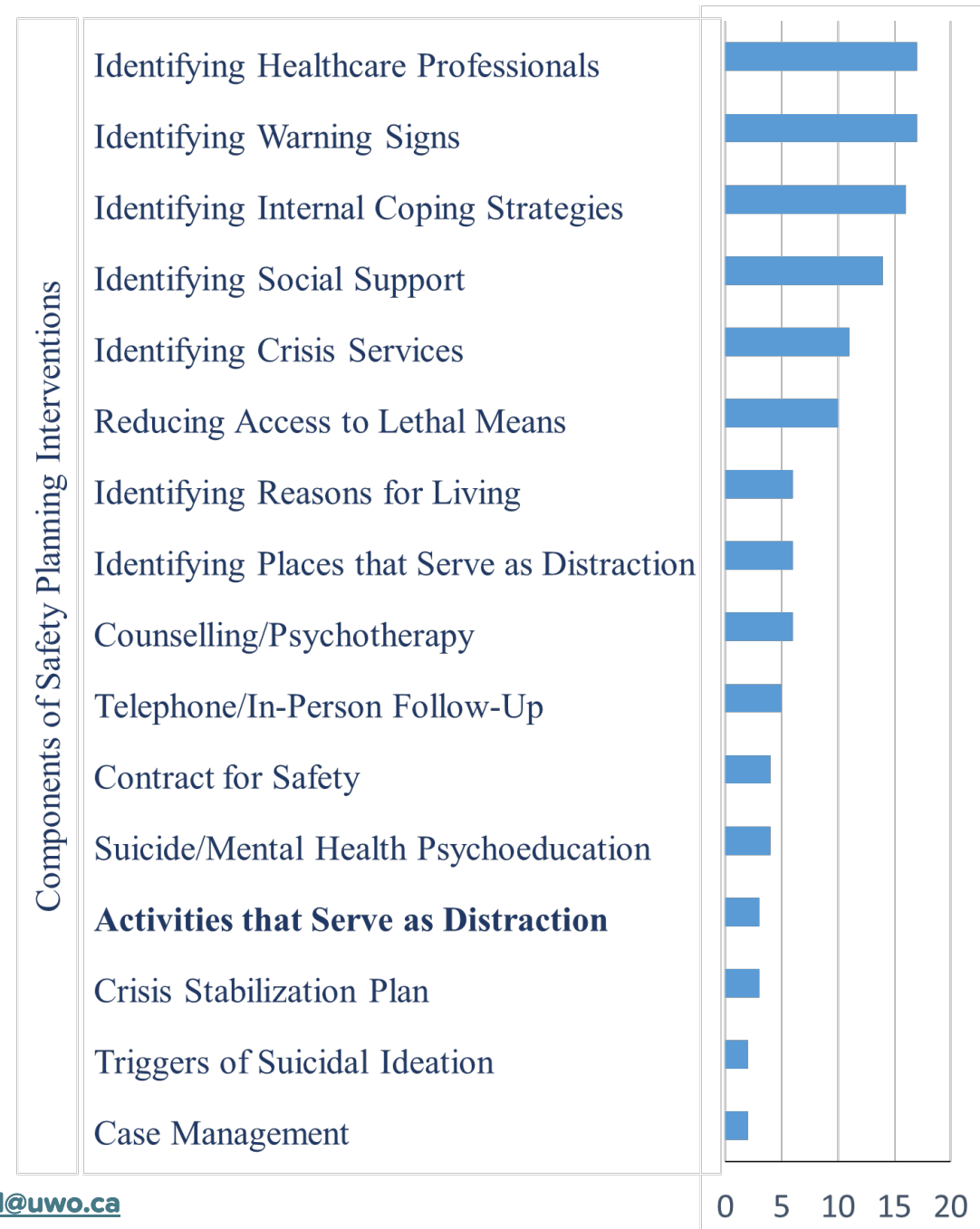
Electronically Delivered Safety Planning Interventions (n=5)

- = statistically significant positive effect on the outcome
- = no statistically significant effect
- ◇ = mixed findings

	SI	SB	MHS	Res	SU
Electronically delivered SP interventions					
Web-Based Safety Planning Application ⁴	●				●
BeyondNow App ¹⁶	●			○	
Internet Based Safety Plan* ¹⁹					
Jaspr Health ¹¹	●				
Virtual Hope Box ⁹	○			●	

Findings



Components of included safety plans



Original Article / Article originaux



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Carrie Anne Marshall , Pavlina Crowley, Dave Carmichael, Rebecca Goldszmidt, Suliman Aryobi, Julia Holmes, Corinna Easton , Roxanne Isard, and Susanne Murphy

Abstract

Background. Suicide safety planning (SSP) is a suicide prevention approach that involves developing a collaborative plan between a service provider such as an occupational therapist and a person who is at risk of suicide. **Purpose.** To synthesize effectiveness studies on SSP. **Method.** Using the Joanna Briggs Institute methodology, we conducted a systematic review of effectiveness studies including a: (1) title and abstract screening; (2) full-text review; (3) critical appraisal; and (4) narrative synthesis. **Findings.** We included 22 studies. Critical appraisal scores ranged from 38.5 to 92.3 ($m = 63.7$). The types of interventions included were: standard and enhanced SSP ($n = 11$); electronically delivered SSP ($n = 5$); and SSP integrated with other approaches ($n = 6$). Only three studies identified meaningful activity as a component of SSP. Evidence across a range of studies indicates that SSP is effective for reducing suicide behavior (SB) and ideation (SI). While some studies have demonstrated effectiveness for reducing symptoms of mental illness, promoting resilience and service use, the number of studies exploring these outcomes is currently limited. **Implications.** Occupational therapists support individuals expressing SI, and SSP is a necessary skill for practice.



Discussion

While used extensively in practice, there is limited reliable evidence supporting the effectiveness of SSPs on suicide ideation and suicide behaviour

Even fewer studies have explored the effectiveness of SSPs on the symptoms of mental illness, indices of resilience, and service use

Little attention has been dedicated to the role of meaning in the mitigation of suicide risk in included studies

Future Directions

More research is needed to identify the effectiveness of SSPs on key psychosocial outcomes – symptoms, resilience, service use

Attention to *meaning* in the mitigation of suicide risk in SSPs is needed

Activities can be an important pathway to finding meaning in life

- **Can be incorporated into SSPs as a coping strategy**
- **Needs to be evaluated in future research**

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[**www.sjmhlab.com**](http://www.sjmhlab.com)



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