

Unit 3: Suicide and Depression Worksheet
Online Assignment (1H)
Due 6/9/2025 by 0800

Directions: Use Chapters 11 and 16 in the textbook to answer the questions below. Place your completed assignment in the “Unit 3: Suicide Prevention Online Assignment” Dropbox by 0800 on 6/9/2025.

In order to receive full credit (1H class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignment not completed in its entirety by the due date and time will result in missed class time and must be completed by the end of the semester to pass the course.

1. How do age, race, and gender affect suicide risk?
 - The highest rate of suicide occurred is from 45-64 years old. Race typically white males over the age of 80. With gender; women attempt more, but men are more successful.

2. Your neighbor tells you he is going to visit his sister-in-law in the hospital. The sister-in-law has been hospitalized after attempting suicide. Your neighbor asks, “What should I say when I go to visit Jane?” What suggestions might you give him?
 - I would suggest to communicate caring and provide support, acknowledge/ accept her feelings and don't air out your own issues, stay with her, give encouragement, help her seek further professional care possibly, and provide love, hope, and encouragement.

3. John's father committed suicide when John was a teenager. John's wife, Mary, tells the mental health nurse that she is afraid John “inherited” that predisposition from his father. How should the nurse respond to Mary?
 - My first response would be that suicide cannot be a passed down trait. It can be prevented, John may have some learned mental health issues related to his father, but will not just commit suicide like this father.
 - Next, I would respond by asking questions on how John is acting, if he has depressive moods/ tendencies, does he see mental health services, and is he willing to.
 - There are also environmental factors such as: employment, does he have housing, is their marriage ok, is work stressful, are the kids ok, and is their financial difficulties.

4. The nurse notes that the mood of a patient being treated for depression and suicidal ideation suddenly brightens and the patient states, “I feel fine now. I don't feel depressed anymore.” Why would this statement alert the nurse of a potential problem?
 - There is possibly an increased suicide risk. You must reassess the patient and their mood. Just because they feel better doesn't mean they still aren't suicidal and having ideations. This patient is at risk of stopping their medications because they feel better.

5. Alterations in which of the neurotransmitters are most closely associated with depression?
 - Serotonin is the neurotransmitter associated with depression.

6. Depression in adolescence is very hard to differentiate from the normal stormy behavior associated with adolescence. What is the best clue for determining a problem with depression in adolescence?
 - The key indicator of adolescence exhibiting signs of depression are a visible change in behavior that lasts for 7 weeks.

7. Behaviors of depression often change with the diurnal variation in the level of neurotransmitters. Describe the difference in this phenomenon between moderate and severe depression.
 - Moderate depression tends to show a typical positive mood variation, where symptoms are worse in the morning and will improve later in the evening. With severe depression the patient may exhibit less diurnal variability, with symptoms remaining consistently low throughout the day.

8. All antidepressants carry a black box warning. What is it?
 - A warning that the drug may increase suicidal thoughts and ideations. Antidepressants take time for the effects to start. Other suicide prevention measures (nonpharmacological) are needed. The nurse and patient need to prepare for this.