

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/351990931>

# Suicidal Thoughts and Urges Questionnaire (STUQ), version 1.0

Method · May 2021

DOI: 10.13140/RG.2.2.10302.82244/2

CITATIONS

0

READS

371

1 author:



[Zachary J Williams](#)

Vanderbilt University

80 PUBLICATIONS 273 CITATIONS

[SEE PROFILE](#)

Some of the authors of this publication are also working on these related projects:



Decreased Sound Tolerance in Autism [View project](#)



Autism Intervention Research Network on Physical Health (AIR-P) [View project](#)

# Suicidal Thoughts and Urges Questionnaire

**Instructions:** On this questionnaire are groups of statements. Check the box next to the one statement in each group that describes you best for the **PAST TWO WEEKS, INCLUDING TODAY**. If multiple statements in a group seem to apply to you, pick the one lower down on the list. **BE SURE TO READ ALL OF THE STATEMENTS IN EACH GROUP BEFORE MAKING YOUR CHOICE.**

## 1) Frequency of suicidal thoughts:

*If you respond "Never" to this question, you have finished the questionnaire. Do not answer the other questions.*

- ☐ **Never:** I do not typically think about wanting to die or killing myself.
  - ☐ **Rarely:** I think about wanting to die or killing myself once per week or less.
  - ☐ **Sometimes:** I think about wanting to die or killing myself every few days.
  - ☐ **Often:** I think about wanting to die or killing myself almost every day.
  - ☐ **Very Often:** I think about wanting to die or killing myself more times per day than I can count.
- 

## 2) Frequency of suicidal urges or impulses:

- ☐ **Never:** I do not have sudden urges or impulses to kill myself.
- ☐ **Rarely:** I have sudden urges or impulses to kill myself, but they happen once per week or less.
- ☐ **Sometimes:** I have sudden urges or impulses to kill myself multiple times per week.
- ☐ **Often:** I have sudden urges or impulses to kill myself on more days than not.
- ☐ **Very Often:** I have sudden urges or impulses to kill myself multiple times every day.

## 3) Control over suicidal thoughts:

- ☐ **Full Control:** If I need to, I can stop thinking about death or suicide without an issue.
- ☐ **Some Control:** I can usually stop thinking about death or suicide, but it takes some effort.
- ☐ **Limited Control:** I can stop thinking about death or suicide, but only with a great deal of effort.
- ☐ **No Control:** I am almost completely unable to stop myself from thinking about death or suicide.
- ☐ **No Attempt to Control:** I do not want to stop myself from thinking about death or suicide.

## 4) Suicide plan and intent:

- ☐ **None:** I do not think about ways of killing myself.
- ☐ **Minimal:** I consider possible ways of killing myself, but never seriously.
- ☐ **Limited:** I have seriously considered the different ways I could kill myself (with or without actually wanting to die), but I have not made specific plans.
- ☐ **Plan but no Intent:** I have a specific plan of how I would kill myself, but I don't think I will carry it out.
- ☐ **Definite Plan and Intent:** I have a specific plan on how I would kill myself, and I hope to carry it out.

**Please see reverse side for additional questions**

**Protective factors and attitudes:**

***Please mark all of the reasons that you have for NOT wanting to die or not acting on your suicidal thoughts/urges. (Check all that apply to you at least somewhat)***

- ☐ I believe I have (or can find) a purpose in life or a reason to live.
- ☐ When I really think about it, I do not want to die.
- ☐ I have people in my life (e.g., family, friends, colleagues) who depend on me.
- ☐ I love and enjoy my family/friends too much and could not leave them.
- ☐ My suicide could be harmful or traumatic to others (e.g., children growing up without a parent, friends/family becoming depressed or attempting suicide).
- ☐ I want to be alive to watch my children grow up or watch other people achieve life milestones (e.g., marriage, graduation).
- ☐ I am afraid of death/dying.
- ☐ I am afraid of the actual "act" of killing myself (the pain, blood, violence, etc.).
- ☐ I am concerned what other people would think of me (e.g., that I was weak, selfish, or not in control of my life).
- ☐ I consider suicide morally wrong (e.g., it's against my religious or personal beliefs).
- ☐ Other reason(s) for wanting to stay alive (*please specify below*):

---

## Crisis Resources

***If you are in danger of acting on suicidal thoughts or are in any other life-threatening crisis, please call emergency services in your area (911 in the US) or go to your nearest hospital emergency room. If you know someone who is suicidal, try to get the person to seek help immediately.***

- For the **National Suicide Prevention Lifeline (US)**, call **1 (800)-273-8255**
- For the **Crisis Text Line**, Text HOME to **741741** (US/Canada) or **85258** (UK)
- Further crisis resources can be found at <https://www.speakingofsuicide.com/resources/>

## STUQ Scoring Instructions

The Suicidal Thoughts and Urges Questionnaire (STUQ) has four “expanded-format” items (*Frequency of suicidal thoughts; Frequency of suicidal urges or impulses; Control over suicidal thoughts; Suicide plan and intent*), which are scored on a five-point scale from 0 to 4. **A total score (range 0–16 points) can be derived from summing up the responses to questions 1–4.** Normative values for these scores are not yet available, but higher scores indicate a greater level of suicidality.

### **STUQ items are scored as follows:**

- **Frequency of suicidal thoughts** (Item 1)
  - **Never** = 0 (if response of “Never” to item 1, total STUQ score is 0)
  - **Rarely** = 1
  - **Sometimes** = 2
  - **Often** = 3
  - **Very Often** = 4
- **Frequency of suicidal urges or impulses** (Item 2)
  - **Never** = 0
  - **Rarely** = 1
  - **Sometimes** = 2
  - **Often** = 3
  - **Very Often** = 4
- **Control over suicidal thoughts** (Item 3)
  - **Full Control** = 0
  - **Some Control** = 1
  - **Limited Control** = 2
  - **No Control** = 3
  - **No Attempt to Control** = 4
- **Suicide plan and intent** (Item 4) **[CRITICAL ITEM for risk assessment]**
  - **None** = 0
  - **Minimal** = 1
  - **Limited** = 2 **(Suicide risk assessment recommended)**
  - **Plan but no Intent** = 3 **(Suicide risk assessment recommended)**
  - **Definite Plan and Intent** = 4 **(Suicide risk assessment recommended)**

The fifth item (*Protective factors and attitudes*) is not quantitatively scored. However, the total number of boxes checked can be used as a measure of the respondent’s desire to remain alive (more boxes checked indicate more reason to live). **Although this item is not needed to score the questionnaire, we recommend it always be administered to increase associations between suicidal thoughts and reasons to live.**