nature portfolio

Corresponding author(s): René Freichel
Last updated by author(s): Dec 25, 2024

Reporting Summary

Nature Portfolio wishes to improve the reproducibility of the work that we publish. This form provides structure for consistency and transparency in reporting. For further information on Nature Portfolio policies, see our Editorial Policies and the Editorial Policy Checklist.

Statistics

For all statistical analyses, confirm that the following items are present in the figure legend, table legend, main text, or Methods section.

n/a	Confirmed
☐	☒ The exact sample size (*n*) for each experimental group/condition, given as a discrete number and unit of measurement
☐	☒ A statement on whether measurements were taken from distinct samples or whether the same sample was measured repeatedly
☐	☒ The statistical test(s) used AND whether they are one- or two-sided *Only common tests should be described solely by name; describe more complex techniques in the Methods section.*
☐	☒ A description of all covariates tested
☐	☒ A description of any assumptions or corrections, such as tests of normality and adjustment for multiple comparisons
☐	☒ A full description of the statistical parameters including central tendency (e.g. means) or other basic estimates (e.g. regression coefficient) AND variation (e.g. standard deviation) or associated estimates of uncertainty (e.g. confidence intervals)
☐	☒ For null hypothesis testing, the test statistic (e.g. *F*, *t*, *r*) with confidence intervals, effect sizes, degrees of freedom and *P* value noted *Give P values as exact values whenever suitable.*
☒	☐ For Bayesian analysis, information on the choice of priors and Markov chain Monte Carlo settings
☒	☐ For hierarchical and complex designs, identification of the appropriate level for tests and full reporting of outcomes
☒	☐ Estimates of effect sizes (e.g. Cohen's *d*, Pearson's *r*), indicating how they were calculated

Our web collection on statistics for biologists contains articles on many of the points above.

Software and code

Policy information about availability of computer code

Data collection	The death-IAT was implemented using JavaScript and run through the Project Implicit servers based at Harvard University.
Data analysis	All preprocessing and analyses were performed using RStudio (R version 4.4.0). Network estimation was conducted using the bootnet (version 1.6) and mgm (version 1.2-14) R packages. Network visualizations were created using qgraph (version 1.9.8). Supplemental analyses utilized the stats package (version 4.4.0). Relevant code for this method is already widely available online and no custom scripts have been used.

For manuscripts utilizing custom algorithms or software that are central to the research but not yet described in published literature, software must be made available to editors and reviewers. We strongly encourage code deposition in a community repository (e.g. GitHub). See the Nature Portfolio guidelines for submitting code & software for further information.

Data

Policy information about availability of data

All manuscripts must include a data availability statement. This statement should provide the following information, where applicable:

- Accession codes, unique identifiers, or web links for publicly available datasets
- A description of any restrictions on data availability
- For clinical datasets or third party data, please ensure that the statement adheres to our policy

Data available upon reasonable request due to the sensitive nature of the data. Data was collected from patients presenting due to severe psychiatric distress to the Massachusetts General Hospital Emergency Department (ED) (between February 2015 and March 2017).

Research involving human participants, their data, or biological material

Policy information about studies with human participants or human data. See also policy information about sex, gender (identity/presentation), and sexual orientation and race, ethnicity and racism.

Reporting on sex and gender	The sample at baseline (n =1412) was predominantly male (54.32%; female: 43.96%, transgender: 1.72%). See results section.
Reporting on race, ethnicity, or other socially relevant groupings	The sample was relatively diverse with respect to ethnicity and race (non-Hispanic white: 68.0%, non-Hispanic African American: 7.22%, Hispanic Other: 7.15%, non-Hispanic other: 6.22%, Hispanic White: 5.79%, non-Hispanic Asian: 3.86%, and other race or ethnicity: 1.76%).
Population characteristics	See Table 1 and results section for detailed population characteristics. The study sample consisted of participants presenting to the emergency room. Study inclusion criteria include adult status (≥18 years-old) and presentation at the ER.
Recruitment	Patients presenting due to severe psychiatric distress to the Massachusetts General Hospital Emergency Department (ED) (between February 2015 and March 2017) were approached by study research assistants.
Ethics oversight	The study received ethical approval from Harvard University and Massachusetts General Hospital.

Note that full information on the approval of the study protocol must also be provided in the manuscript.

Field-specific reporting

Please select the one below that is the best fit for your research. If you are not sure, read the appropriate sections before making your selection.

☐ Life sciences ☒ Behavioural & social sciences ☐ Ecological, evolutionary & environmental sciences

For a reference copy of the document with all sections, see nature.com/documents/nr-reporting-summary-flat.pdf

Behavioural & social sciences study design

All studies must disclose on these points even when the disclosure is negative.

Study description	Patients presenting due to severe psychiatric distress to the Massachusetts General Hospital Emergency Department (ED) (between February 2015 and March 2017) were approached by study research assistants. There were two follow-up surveys conducted over the telephone or email, one month and six months after the baseline visit. The data collected was quantitative - see methods section.
Research sample	Patients presenting to the ER. The sample was predominantly male (54.32%; female: 43.96%, transgender: 1.72%), young (M = 34.95, SD = 13.57), and relatively diverse with respect to ethnicity and race (non-Hispanic white: 68.0%, non-Hispanic African American: 7.22%, Hispanic Other: 7.15%, non-Hispanic other: 6.22%, Hispanic White: 5.79%, non-Hispanic Asian: 3.86%, and other race or ethnicity: 1.76%).
Sampling strategy	Convenience sampling. Patients presenting due to severe psychiatric distress to the Massachusetts General Hospital Emergency Department (ED) (between February 2015 and March 2017) were approached by study research assistants. A target sample size of 2,000 participants was determined based on a power analysis for sufficient statistical power (.80) with alpha set at .05.
Data collection	Data was collected in-person at the emergency room. There was also additional data collection through email or telephone 1 and 6 months after the baseline visit. Study research assistants were present during data collection. Blinding not applicable. Behavioral tasks were administered through iPads or laptops.
Timing	Baseline visit between February 2015 and March 2017
Data exclusions	Exclusion criteria encompassed 1) the inability to speak or read English, 2) severe cognitive impairments due to conditions, such as florid psychosis, intellectual disability, dementia, acute intoxication, or 3) the presence of extremely agitated or violent behavior. The main reasons for failure to obtain consent were psychiatric impairment (n = 193), lack of contact information for follow-up (n = 137), participant refusal (n = 132), language or physical barriers (n = 29), discharge prior to completing the consent process (n = 16), refusal by family or friends (n = 11), and various other factors (n = 14). See http://doi.org/10.1001/jamanetworkopen.2021.44373 for all details.
Non-participation	See results section. At the 1-month follow-up survey, there were complete data for reports of suicidal ideation for 900 participants (63.74%). By the 6-month follow-up, 938 participants (66.43%) completed reports on measures of suicidal ideation. A supplemental analysis (see Table S3) showed that older age, female gender, lower income, and a lifetime history of a suicide attempt were significantly associated with slight increases in the likelihood of dropout.
Randomization	Not applicable as there were no conditions to be randomized to.

Reporting for specific materials, systems and methods

We require information from authors about some types of materials, experimental systems and methods used in many studies. Here, indicate whether each material, system or method listed is relevant to your study. If you are not sure if a list item applies to your research, read the appropriate section before selecting a response.

Materials & experimental systems

n/a	Involved in the study
☒	☐ Antibodies
☒	☐ Eukaryotic cell lines
☒	☐ Palaeontology and archaeology
☒	☐ Animals and other organisms
☒	☐ Clinical data
☒	☐ Dual use research of concern
☒	☐ Plants

Methods

n/a	Involved in the study
☒	☐ ChIP-seq
☒	☐ Flow cytometry
☒	☐ MRI-based neuroimaging

Plants

Seed stocks

Report on the source of all seed stocks or other plant material used. If applicable, state the seed stock centre and catalogue number. If plant specimens were collected from the field, describe the collection location, date and sampling procedures.

Novel plant genotypes

Describe the methods by which all novel plant genotypes were produced. This includes those generated by transgenic approaches, gene editing, chemical/radiation-based mutagenesis and hybridization. For transgenic lines, describe the transformation method, the number of independent lines analyzed and the generation upon which experiments were performed. For gene-edited lines, describe the editor used, the endogenous sequence targeted for editing, the targeting guide RNA sequence (if applicable) and how the editor was applied.

Authentication

Describe any authentication procedures for each seed stock used or novel genotype generated. Describe any experiments used to assess the effect of a mutation and, where applicable, how potential secondary effects (e.g. second site T-DNA insertions, mosiacism, off-target gene editing) were examined.