

## Myth or Fact?

**1. Talking about suicide is a bad idea and can be interpreted as encouragement.**

**MYTH**

*You cannot put the idea of suicide in someone's head simply by talking about it. Given the widespread stigma around suicide, many people who are contemplating suicide do not know who to speak to. Rather than encouraging suicide behaviours, talking openly about it opens the door to change, to the possibility of hope. It can give an individual other options, the time to rethink their decision, and makes it easier for them to ask for help.*

**2. People considering suicide really want to die.**

**MYTH**

*It is not a given that a person considering suicide wants to die. At the time, suicide may seem like a solution to escape their pain and/or suffering. They may see no other way out. In fact, most persons thinking about suicide are ambivalent: part of them is focused on suicide as a solution to end their pain, but another part of them is still connected to life. Taking the time to listen to a person openly talk about their feelings of suicide can help bring out the part of them that is still connected to life.*

**3. There are several warning signs indicating that a suicidal crisis is present.**

**FACT**

*Most people give signs of suicidal intent. These signs are messages signaling that a person is in distress and are a way of asking for help. They can be verbal or non-verbal, and unfortunately they are not always obvious to detect.*

**4. Once a person has thoughts of suicide, they will never change their mind.**

**MYTH**

*Heightened suicide risk is often short-term and situation-specific. While suicidal thoughts may return, they are not permanent and an individual with previously suicidal thoughts and attempts can go on to live a long life. Change of any type, however small, is still possible. As long as there is life, there is still hope.*

**5. Most people who attempt or complete suicide suffer from depression.**

**FACT**

*The number one cause of suicide is untreated depression. A person who attempts or completes suicide may show various symptoms of depression, though they may not have been diagnosed by a mental health professional. Although a person considering suicide is most often depressed, **not all of them necessarily show signs of depression**. On the contrary, some people seem hard and insensitive while others are in a good mood and very active. Caution should be exercised as these behaviours can be used to hide great sadness and suicidal thoughts.*

The information in this document was retrieved from the *Association Québécoise de prévention du suicide*, the *World Health Organization*, *LivingWorks*, and the *Mental Fitness and Suicide Awareness* workshop developed by *Strengthening the Forces*.

**6. Suicide is an act of courage.**

**MYTH**

*Suicide is an act of desperation, it's the only way to escape and it is not a question of courage or cowardice. It is important to act rather than judge because attitudes about mental health and suicide can get in the way of helping. When we think of courage and cowardice, we think in terms of choice and project our own perception of suicide on the other. However, a person does not attempt or complete suicide by choice, but by lack of choice. The person contemplating suicide sees no courage or cowardice in this: their life is unbearable, they have reached their limit of tolerance for their suffering and they no longer see any other way to stop suffering.*

**7. Suicide is an act of cowardice.**

**MYTH**

*Suicide is an act of desperation, it's the only way to escape and it is not a question of courage or cowardice. It is important to act rather than judge because attitudes about mental health and suicide can get in the way of helping. When we think of courage and cowardice, we think in terms of choice and project our own perception of suicide on the other. However, a person does not attempt or complete suicide by choice, but by lack of choice. The person contemplating suicide sees no courage or cowardice in this: their life is unbearable, they have reached their limit of tolerance for their suffering and they no longer see any other way to stop suffering.*

**8. Someone suggesting they want to end their life are doing it to get attention.**

**MYTH**

*Threats of suicide should always be taken seriously. They are always calls for help. Attention must also be paid to repeated threats and those that extend over a long period of time. These behaviours are serious invitations to others to help them live. Obviously they need the attention for some reason or another, help them find the right form of help. This speaks to resources and awareness of available resources in the community. If help is not available, they may feel it will never come. Ignoring suicidal thoughts or actions can be dangerous. Why takes chances? If they have attempted suicide, this might be a final call for help that they just haven't been able to get.*

**9. Improvement following a suicide attempt or intervention signifies that the risk has passed.**

**MYTH**

*Most suicides occur within three months following the beginning of improvements. Once a person has tried to progress and believes they may be failing, they might act like they are feeling better so that others will back off in order to give them another chance to try again. A period of calm may follow a decision to kill oneself. If they are unable to get the support or help they need to ease the pain, they might try again in order to stop it themselves.*

**10. We can help a person who thinks about suicide without being a health professional.**

**FACT**

*On a daily basis, in their relations with their family and friends, each person can help a loved one confronted with suffering with the means at their disposal while respecting their personal limits.*

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*Knowing how to recognize warning signs, opening dialogue, and connecting them with the right resource are all ways to support a loved one. Whether or not you are a professional, the same rule applies: you should never be alone with the problem. A variety of resources are available to provide support to individuals in distress, family members, and people who are worried about their family and friends.*

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