

SUICIDE PREVENTION: 10 MYTHS ABOUT SUICIDE & YOUNG PEOPLE



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ACCORDING TO THE NEVADA OFFICE OF SUICIDE PREVENTION:

MYTH: People who threaten suicide are just seeking attention.

FACT: All suicide attempts must be treated as though the person has the intent to die. Do not dismiss a suicide attempt as simply being an attention-gaining device. It is likely that the young person has tried to gain attention and, therefore, this attention is needed. The attention that they get may well save their lives.

MYTH: The only effective intervention for suicide comes from professional psychotherapists with extensive experience in the area.

FACT: All people who interact with suicidal adolescents can help them by way of emotional support and encouragement. Psychotherapeutic interventions also rely heavily on family, and friends providing a network of support.

MYTH: Most suicidal young people never seek or ask for help with their problems.

FACT: Evidence shows that they often tell their school peers of their thoughts and plans. Adolescents are more likely to 'ask' for help through non-verbal gestures than to express their situation verbally to others.

MYTH: Suicidal young people are always angry when someone intervenes and they will resent that person afterwards.

FACT: While it is common for young people to be defensive and resist help at first, these behaviors are often barriers imposed to test how much people care and are prepared to help. For most adolescents considering suicide, it is a relief to have someone genuinely care about them and to be able to share the emotional burden of their plight with another person. When questioned some time later, the vast majority express gratitude for the intervention.

ACCORDING TO THE AMERICAN ASSOCIATION OF SUICIDOLOGY:

MYTH: Suicides happen without warning.

FACT: Most teens who attempt or die by suicide have communicated their distress or plans to at least one other person. These communications are not always direct, so it is important to know some of the key warning signs of suicide.

MYTH: Suicidal teens overreact to life events.

FACT: Problems that may not seem like a big deal to one person, particularly adults, may be causing a great deal of distress for the suicidal teen. We have to remember that perceived crises are just as concerning and predictive of suicidal behavior as actual crises.

MYTH: Talking to teens about suicide makes them likely to kill themselves.

FACT: Talking about suicide with teens gives them an opportunity to express thoughts and feelings about something they may have been keeping secret. Research clearly demonstrates there are iatrogenic effects of asking teens about suicide (Gould et al. 2005). In fact, discussion brings it into the open and allows an opportunity for intervention.

ACCORDING TO THE WORLD HEALTH ORGANIZATION:

MYTH: People who talk about suicide do not mean to do it.

FACT: People who talk about suicide may be reaching out for help or support. A significant number of people contemplating suicide are experiencing anxiety, depression, and hopelessness and may feel that there is no other option.

MYTH: Someone who is suicidal is determined to die.

FACT: On the contrary, suicidal people are often ambivalent about living or dying. Someone may act impulsively . . . Access to emotional support at the right time can prevent suicide.

MYTH: Talking about suicide is a bad idea and can be interpreted as encouragement.

FACT: Given the widespread stigma around suicide, most people who are contemplating suicide do not know who to speak to. Rather than encouraging suicidal behavior, talking openly can give an individual other options or the time to rethink his/her decision, thereby preventing suicide.