

Stigma and suicide myths

Myths and stigma around suicide continue to exist. They can frame people's beliefs and attitudes and make it harder for people to seek help when they need it. Below are some common myths and facts to keep in mind when supporting someone in the workplace.

Myth: Asking about someone's suicidal thoughts increases the chance they will act on them.

Fact: Asking about suicide in a supportive way will not put the thought in their head. In fact, it may save their life. Talking about suicide with someone increases the likelihood that they will seek treatment.

Myth: People who talk about wanting to die are attention-seeking.

Fact: Talking about suicide can be a plea for help. Take it seriously if someone talks about feeling suicidal — be kind and supportive, find out if they have a plan, and if they do, seek help right away.

Myth: Once a person is having suicidal thoughts, they will act on them.

Fact: Many people have suicidal thoughts and don't act on them. Suicidal crises can be relatively short-lived. Immediate help, such as staying with them, keeping them talking, helping them find reasons to live and offering them hope, can all help avert the crisis. It's also important the person seeks appropriate support.

Myth: Suicide only affects individuals with experience of mental distress or illness.

Fact: While people who have experienced mental distress or illness may have a higher risk, anyone can feel suicidal. Many individuals with experience of mental distress or illness are not affected by suicidal thoughts. People who are thinking of suicide may display signs of depression and/or anxiety, but not always.

Myth: People who take their own lives are selfish.

Fact: People who die by suicide often experience intense emotional or sometimes physical pain. They may want to end their suffering, or feel like a burden to others, and can see no other way to stop the pain. Sometimes they feel people will be better off without them.

Myth: If a person has attempted suicide, they will never attempt suicide again.

Fact: Recovery from a suicide attempt is not a straightforward process or a situation simply resolved following a suicide attempt. A person who attempts suicide, and who is still in pain, may attempt suicide again. Making an earlier suicide attempt is a very high risk factor for a subsequent suicide. It is necessary to make sure the person gets the help they need.

Myth: Only a health professional can support someone who is suicidal.

Fact: This is a myth that can stop whānau, friends and colleagues from taking action. The truth is that whānau, friends and colleagues can play a crucial role in helping those at risk of suicide get the help they need. Staying connected is key.

