COMMON MISCONCEPTIONS ABOUT SUICIDE

The following are common misconceptions about Suicide from the NAMI ADVOCATE:

1. "People who talk about suicide won't really do it."

NOT TRUE

Almost everyone who commits or attempts suicide has given some clue or warning. Do not ignore suicide threats. Statements like "you'll be sorry when I'm dead" and "I can't see any way out," no matter how casually or jokingly said, may indicate serious suicidal feelings.

2. "Anyone who tries to kill him/herself must be crazy."

NOT TRUE

Most suicidal people are not psychotic or insane. They must be upset, griefstricken, depressed or despairing, but extreme distress and emotional pain are not necessarily signs of mental illness.

3. "If a person is determined to kill him/herself, nothing is going to stop him/her."

NOT TRUE

Even the most severely depressed person has mixed feelings about death, wavering until the very last moment between wanting to live and wanting to die. Most suicidal people do not want death; they want the pain to stop. The impulse to end it all, however overpowering, does not last forever.

4. "People who commit suicide are people who were unwilling to seek help."

NOT TRUE

Studies of suicide victims have shown that more then half had sought medical help within six month before their deaths.

5. "Talking about suicide may give someone the idea."

NOT TRUE

You don't give a suicidal person morbid ideas by talking about suicide. The opposite is true -- bringing up the subject of suicide and discussing it openly is one of the most helpful things you can do.