

10 Things **NEVER** to Say to a Suicidal Friend



National Crisis Intervention Training Institute, Inc.

For more information

www.NCITI.com

405-543-9221 (24/hr)

info@NCITI.org

About NCITI Webinars & On-Site Seminars

- Attend from the comfort of your home or office
- **Fully Interactive, Live Online**
- One, Two, Four, Eight-hour and Multi-Day Webinars
- **Highly-credentialed, Professionally-acclaimed Presenters and Instructors**
- Cutting-edge Data, Coupled with the Latest Advanced Presentation Technology via gotowebinar.com. NO special software installation required!
- **Over 50 topics for professionals and lay persons. MANY FREE TOPICS. Some Training Costs only \$25 per training day! Ask About FREE Webinar Attendance**
- No one turned away due to inability to pay! Donations are accepted, but not required.
- **PDF format Handouts Available**

- Easy, Quick Registration
- **On-site workshops and seminars also available**

About NCITI, Inc.

We're a non-profit organization providing training, technical assistance, mutual aid support, and crisis intervention services to specialized professionals engaged in combating the victimization of children, youth, families, and vulnerable adults. The main Divisions of our organization are as follows:

**Training and Technical Assistance
and
Critical Response**

**FOR MORE INFORMATION, OR
TO REGISTER FOR WEBINARS:**

Contact Us!

www.NCITI.org

Email: info@NCITI.org

Phone: 405-543-9221 (Direct Line)



Top 10 Things NEVER to Say to a Suicidal Friend

1. ***“Cheer up! You have your whole life ahead of you!”***

If they are in misery, or living in an abusive environment, this statement conveys that their pain and misery isn't going to end as long as they're breathing.

2. ***“If you really want to slash your wrists, and do it right, you should cut vertically instead of horizontally.”***

Without much elaboration, suffice it to say that the last thing a suicidal person needs is an expert “how-to” lesson.

3. ***“You ought to be able to think of a better way to deal with this than suicide...why haven't you tried _____?”***

One might just as well hang a “You're a dummy” sign around the client's neck. To inappropriately use critical words such as “ought,” “should,” “should,” and “why” during a suicidal assessment or intervention tends to disempower the client.

4. ***“If you wanted to get attention, you certainly are going about it the wrong [or right] way.”***

To assume that a cry for help is merely an “attention-getter” is often a deadly mistake.

Suicidal people are angry and hurting. They Might complete the suicidal act out of anger.

5. ***“If I were you, I'd _____.”***

Rationale for avoidance of this type of statement is closely akin to the rationale for avoiding question # 3. The suffering person might be particularly prone to respond to this statement by saying, “But you're not me.”

6. ***“Don't say that! I'm sure that your parents love you very much!”***

Make sure you have your facts straight before saying this. And then... don't say it. Some parents don't; at least not in a way that is meaningful to the person who is depressed, anyway. And, “Don't say that!” isn't exactly the best way to get a person to talk to you.

7. ***“I hope you're not thinking about hurting yourself. Are you? That would be a stupid thing to do.”*** (This is VERY different than asking “Have you been thinking about suicide?” which IS appropriate to say to a person suspected of being self-destructive).

No one wants to feel stupid. This type of statement makes the person hesitant to share. To stunt their willingness to talk multiplies the odds that they will choose suicide.

8. ***“Is that all that's bothering you? That's nothing! Lots of people have problems worse than yours.”***

This type of statement suggests a high risk of making the crisis seem trivial, or it may convey

that the message is trivial to you. Even though it may not seem like a big deal to you, it may seem enormous to your friend or loved one.

9. ***“You shouldn't feel like that! You'll feel better tomorrow!”***

One of the most precious gifts you can give a suicidal person is “permission to feel.” Another added risk of making this statement is that when tomorrow comes, and when things DON'T feel better or get better tomorrow, the clinician will have lost credibility with the client.

10. ***“You need to just snap out of it! Pick yourself up and go on! If I were you I'd just forget about it and get on with your life!”***

To demonstrate the futility of this type of statement, we have often asked crisis intervention workshop attendees to do the following: “Try this. Stand up. Bend down. Grab your boots or shoes, and pick yourself up 3 feet off the ground. What??? Can't do it? Can't defy gravity?” We then remind the participants, “neither can a clinically-depressed child, whose problems seem to massive to handle; too heavy to bear.” Also, to forget about it may foster secrecy and shame, and perpetuate an abusive situation.

IF YOU KNOW SOMEONE YOU FEAR IS AT RISK OF COMMITTING SUICIDE, GET HELP IMMEDIATELY!

CHECK YOUR LOCAL YELLOW PAGES FOR MENTAL HEALTHCRISIS SERVICES IN YOUR COMMUNITY, OR CALL 9-1-1.