

Separating fact from fiction may help you better understand if your child is at risk of suicide.

Myth: Only “crazy” people think about suicide.

“My child doesn’t seem to have a mental illness. I don’t need to worry about suicide.”

Fact: Suicidal thoughts and behaviours occur in people of all age groups and all walks of life. Many studies have shown that suicidal thoughts, feelings and behaviours are common among young people. Your child might have suicidal thoughts when she is in crisis and cannot see other alternatives. **If you are worried about her, trust your instincts and do not dismiss the possibility of suicide.**

Myth: Talking about suicide may give my child the idea.

“I’m concerned about my child but I don’t want to talk about suicide. I’m scared if he haven’t thought of it before, he will now.”

Fact: Asking about suicide shows your child that you care and are concerned. You will not make him suicidal by talking about suicide. Most likely, he will feel relieved you asked. Suicidal people are in pain and they want their pain to end but do not necessarily want to die. **Talking about suicide provides an accurate picture of how your child feels and is the first step to getting him the help he needs.**

Myth: Most suicides occur with little or no warning.

“No one saw it coming. There was nothing anyone could do.”

Fact: You can learn to see the warning signs. Youth who attempt suicide often have behaviours, personality characteristics or circumstances in their lives that are associated with suicide. The key is to notice these indicators and to respond to them as a call for help.

Myth: Suicidal feelings are permanent.



“Once a person starts thinking about suicide, the thoughts never go away.”

Fact: Thoughts and feelings of suicide are a temporary response to a situation that a person sees as unbearable. A metaphor for this feeling is the “bug in a cup.” Your child, like the bug, may feel trapped and unable to escape from what seems an impossible situation. However, if the cup is turned over, the bug can escape. As their parent, you, a counsellor or another person will be able to help your child see their situation from other perspectives and learn to cope in different ways.

Myth: Suicidal youth only want attention.

“She doesn’t mean it when she says she is thinking of suicide. She’s only trying to get out of doing what she needs to do.”

Fact: Threatening suicide is cause for concern, no matter what the motivation. Although some people are seeking attention or trying to manipulate others, all threats are cause for concern and require professional follow-up. At the very least, threatening suicide is a sign that your child needs to learn more effective coping skills.

Myth: Suicidal youth want to die.

“What can I do if he really wants to kill himself? There’s no hope for him now.”

Fact: Your child is in pain and he wants this pain to end but he does not necessarily want to die. He may see suicide as a way to stop pain, not stop life. More often than not, death is not the goal of suicide. He may not know how to make things better or have the energy to take the steps to get help.

Myth: A suicidal child will seek help.

“If she really is suicidal, she will tell me.”

Fact: Young people are more likely to go to their peers for help, rather than their parents. The concern is that peers may not let an adult know a friend is suicidal. You should keep the lines of communication open with your child and her friends. Youth need to be taught and encouraged to go to adults who can help if they learn of a friend’s suicidal thoughts or plans.