


HOW DO I SUPPORT A LOVED ONE WHO IS STRUGGLING WITH SUICIDAL THOUGHTS?

Adapted from [What to do if a Community Member is Experiencing Suicidal Thoughts - Part 1](#)

If you have concerns about someone's language, behaviors, or emotions, talk to them. ([See "What are the Signs that Someone Might be Experiencing Suicidal Ideation?" in Part 1](#))

Ask them what they are experiencing. These changes can be caused by a new or untreated mental health challenge, a change in medications, or sudden or significant stressors, such as being a victim of bullying or other abuse, the death of a loved one, medical challenges, or financial stress. If you are able, connect the person to a doctor, licensed mental health professional, or crisis services to discuss these challenges. If it is urgent, take them to emergency services.

Questions you can ask if you are concerned* include:



Can you talk about what is making life hard right now?

I am concerned about your safety. I've noticed you've been ____ (sadder than usual, more withdrawn, etc.) recently. Can you tell me what's been going on?

What is making you feel so ____ (overwhelmed, hopeless, scared, upset, etc.)?

What can I do to help ensure you are safe?

What would make you feel supported?

**If they are not comfortable talking with you, that is OK. Help the individual find someone to whom they can talk to ensure they are safe.*

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Responding to Active and Passive Suicidal Ideation and Severe Mental Health Challenges:

- If you are concerned a loved one is experiencing suicidal thoughts, ask them directly.
 - The question should be direct, e.g., “Are you thinking about killing yourself?” or “Are you thinking about suicide?” This might feel uncomfortable or challenging, but practicing out loud can help you feel more confident asking the question in real-time.
 - If their answer is “yes” (active suicidal ideation), ask if they have a plan for how they would kill themselves and if they have decided on when they would do it. These questions can help distinguish between active and passive suicidal ideation and help you decide what the next steps are in supporting your loved one. ([*See “How Do We Talk about Suicide and Suicidal Ideation?” Part 1*](#))
 - If their answer is “no” (passive suicidal ideation), continue to ask questions and gather information about how you can support them.
 - Have a plan if your loved one answers yes and does express suicidal ideation. You may need to help them find support, whether that is calling a crisis line, reaching out to a mental health professional, or taking them to emergency services.
- *Be direct and use the words “suicide” or “killing yourself”* when you talk with someone struggling with suicidal thoughts, even if it feels uncomfortable. Saying these words out loud reduces the stigma, lets them know you care, and may reduce the intensity of their own feelings. While it may seem counterintuitive, you will not plant the idea of suicide in their head by saying these words out loud. If you have gotten to the point where you are concerned, it may be that they have already started to think about ending their life.
- *If the person is actively suicidal* – if they have a plan and are ready to carry it out—it is time to call for help. You can call, text, or chat to the Suicide & Crisis Lifeline (988), and trained counselors will respond. Other options include calling 911, your local mobile crisis unit, your local or health plan’s urgent mental health crisis line, or another suicide hotline. If you think your loved one is in danger, stay with them until help arrives. This is critical. People experiencing active suicidal thoughts should not be left alone.

If you can’t stay, find someone who can.



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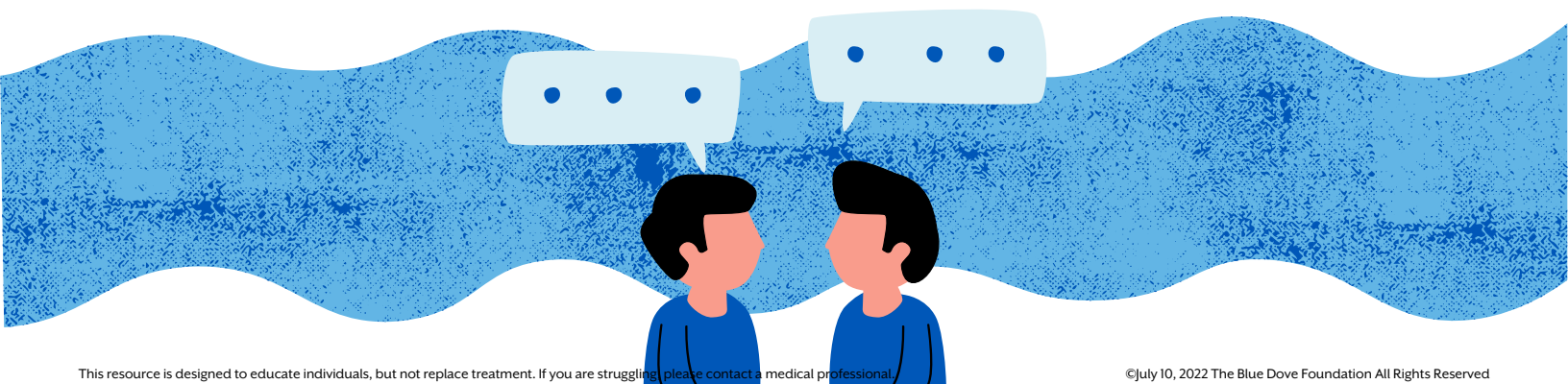
- If your child is struggling, and they are a minor, consider when to take them for an emergency evaluation at a crisis walk-in center or hospital emergency room. If you cannot keep your child safe at home, or your child indicates they have thoughts of suicide and/or a plan to end their life, you need to seek immediate urgent care. In some cases, your child may tell you they are safe out of fear of being a burden or making you worry about them. If you do not think your child is safe, you need to clearly, calmly, and compassionately explain you are going to get them help from a trained mental health professional.
- When someone you love is experiencing suicidal ideation and wants to discuss their thoughts, remember to practice empathetic and active listening. That sends the message that you want to hear what they have to say and understand what they are thinking. Keep the focus on the person you are talking to. The goal is not to “fix” them, change their thinking, or tell stories about others who have been through similar situations. The goal is to be with them as they determine their own next steps.

Some Tips for Engaging in these Difficult Conversations:

- Let them know you care and want to listen and support them. Make sure you have the time and space to give. You may say, for example, “I’m here to listen. You are important to me, and I care about how you are doing.”
- Validate their feelings and convey that you are listening carefully by naming or summing up what they say. For example: “I hear you are feeling [xxxxx]. Can you tell me more about it?”
- Validating feelings is different from validating the harmful behaviors they engage in or are considering. Use nonjudgmental language about those behaviors, e.g., “You’ve been in so much pain that you are harming yourself/drinking more than you want to.”
- Encourage conversation, and ask open-ended questions such as “When have you felt like this before?” followed by “When you have felt this way in the past, what has helped?”
- Let them know it is common to experience suicidal thoughts, they “do not need to be acted on,” and you are there to explore alternatives and resources.
- Remember your loved one is giving you a gift—and being vulnerable— by sharing this part of their world with you. Acknowledge that: “This can be so hard to talk about. I really appreciate knowing what you’re experiencing, and I’m so sorry to hear you’re struggling.”

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- Reassure them by offering hope and pointing to their strengths. “I have seen you get through really hard things before. You have a lot of people here who love you and care about you.”
- Show empathy: “Asking for help is a hard and brave thing to do, but it is so important,” and offer what is realistic for you to help with, whether that is a listening ear, a hug, help with groceries or meals, help making calls or accessing care, etc.
- Depending on their situation, you can encourage them to find ways to help themselves and/or to seek professional help. Offer assistance in doing so. You might ask: “Would you like me to sit with you while we reach out to someone for help?” Together, you can call their therapist, a suicide hotline, or a mobile crisis team. Long-term effective mental health support can take time. Provide reassurance and support for this process if you can.
- Remind them they matter to you and make a difference in your life, and tell them all the ways they do.
- Depression and other mental health challenges can make it hard for someone to solve problems or think clearly. Offer to help them put together a list of ideas or resources for when they are struggling, including trusted friends to call, calming activities they enjoy, breathing or mindfulness exercises, and emergency hotlines. (See our “Ladder of Skills”)
- Do not promise to keep a secret in these situations. You can offer confidentiality, meaning you will only share information with appropriate people or resources if you are concerned the person you’re talking to may hurt themselves or others.
- These conversations with a loved one can be challenging, and you may need your own sources of support. Consider calling a hotline or talking with your own therapist, doctor, or trusted friend to make sure you have the support you need in place.
- It is OK if you are not the best person to have this conversation with someone. If that’s the case, help the individual find someone they can talk to who will ensure they are safe.



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People who are suicidal need to feel loved and accepted by friends, family, and colleagues.

Things to **avoid** include:

- Saying or implying their feelings are wrong or silly or unimportant. That minimizes them.
- Ignoring their comments when they bring up hard topics.
- Analyzing or criticizing their thoughts and emotions.
- Insisting they “cheer up” or “focus on the positive” or instructing them on how to feel.
- Telling them what they should be grateful for or who they should live for.
- Saying it’s all in their head or explaining away their experiences.

Brene Brown teaches a bit about empathetic communication in this short [video](#).



If you have a close friend or family member who is struggling, make sure you have access to your local mental health crisis line or mobile crisis intervention unit in your phone. National crisis lines include:

- Suicide & Crisis Lifeline | 988
 - Call, text, or chat to 988; trained counselors will respond. The previous Lifeline phone number (1-800-273-8255) will always remain available to people in emotional distress or suicidal crisis.
- Crisis Text Line | Text HOME to 741741
- Veterans Crisis Line | 1-800-273-8255, press 1
- Friendship Line (for older adults) | 1-800-971-0016
- TrevorLifeline (for LGBTQIA+ youth) | Call: 1-866-488-7386 | Text: START to 678-678
- Trans Lifeline (for the transgender community) | 1-877-565-8860