



# WHAT YOU CAN SAY

The deafening silence with which depression and other mental illnesses are largely met in most corners of society perpetuates and exacerbates the very isolation and alienation that compounds the problem and keeps those who are suffering—those who are most in need—from seeking and receiving the help that is so critically needed.

Further complicating this epidemic is the fact that few people are equipped with something meaningful to say when concerned about someone's mental health or when concerned that someone may be suicidal.

Having been trained, and having volunteered, at a suicide prevention crisis line, I have become comfortable asking the difficult questions that are necessary but that would widely be considered intrusive impolite and/or uncomfortable. **The following may be the essential beginnings of what can be said to someone in potential need:**

- *"It seems like you have been down lately. How are things with you?"*
- *"How long have you been feeling this way?"*
- *"It sounds like this is overwhelming for you . . ."*
- *"Are you thinking about killing yourself?"*
- *[If the answer is yes] "Have you thought about how and when?"*
- *"Does anyone else know about how you're feeling?"*
- *"Do you have anyone whom you consider close to you? Tell me a little bit about [him/her/them] . . ."*
- *"What do you think [his/her/their] reaction would be if you were to share with [him/her/them] how you're feeling?"*

**By and large, some of the keys to "reaching" someone and offering what may be a crucial lifeline are:**

1. Asking open-ended questions (i.e., questions that are intended to elicit a substantive answer, rather than a yes/no answer);
2. Not asking "leading" questions (i.e., questions that are intended, whether consciously or subconsciously, to get the answer that you want to hear, such as, "I know that it's been busy lately, but you're not really thinking about hurting yourself, are you?");
3. Not shaming (e.g., "committing suicide would be such a selfish thing to do . . ."); and
4. Reflecting feelings (i.e., giving responses that indicate that you are listening to what is being said, such as, "I can't imagine how difficult it must be for you to have carried this around with you for so long . . . how have you been able to deal with these feelings?").

To be clear, none of the quote questions or statements above should in any way be considered a substitute for help by a doctor (whether medical, psychological and/or psychiatric), which can be broached during this conversation; however, to be sure, it may be a desperately needed lifeline that represents the critical first step in the process of saving someone's life.