September Campaign
Suicide Prevention Awareness Month

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14 Pages

September Campaign – Suicide Prevention Awareness Month

Goal: Public education, awareness raising, and suicide prevention

Content Structure: Three key areas:

1. **Educational Content**
2. **Practical Coping Strategies**
3. **Suicide Prevention and Hope**

Content 1: Educational

Understanding Suicide: Recognizing the Signs and Breaking the Myths

- **What suicidal thoughts are**
- **Risk factors**
- **Warning signs**
- **Common myths vs. facts**
- **Why talking about suicide does not increase risk**

1. What Are Suicidal Thoughts?

Suicidal thoughts (also called suicidal ideation) refer to thinking about death, wishing to die, or considering ending one's own life. These thoughts exist on a spectrum. Some people may experience passive suicidal thoughts, such as wishing they would not wake up or believing others would be better off without them. Others may experience active suicidal thoughts, involving thoughts about taking their own life, sometimes with a plan or intent.

Having suicidal thoughts does not necessarily mean that someone wants to die. More often, it reflects a desire to escape overwhelming emotional, psychological, or physical pain. Many people who experience suicidal

thoughts recover with timely support, effective treatment, and meaningful human connection.

Key message: Suicidal thoughts are a sign of deep distress, not personal weakness, and they should always be taken seriously.

2. Risk Factors

There is no single cause of suicide. Suicide usually results from the interaction of multiple risk factors over time.

Some of the most common risk factors include:

- **Depression, bipolar disorder, anxiety disorders, PTSD, or substance use disorders**
- **Previous suicide attempts**
- **A family history of suicide**
- **Trauma, abuse, or significant childhood adversity**
- **Major losses, such as the death of a loved one, relationship breakdown, or job loss**
- **Chronic pain or serious medical illness**
- **Social isolation or loneliness**
- **Financial or legal stress**
- **Easy access to lethal means**
- **Experiences of discrimination, bullying, or marginalization**

Having one or more risk factors does not mean a person will attempt suicide. These factors simply increase vulnerability, especially when protective factors such as social support or access to care are limited.

3. Warning Signs

While not everyone shows obvious warning signs, many people communicate their distress through words, emotions, or behavior before a suicide attempt.

Warning signs may include:

- **Talking about wanting to die or feeling hopeless**
- **Saying they feel like a burden**
- **Withdrawing from friends, family, or activities**
- **Significant changes in mood or personality**
- **Increased alcohol or drug use**
- **Giving away meaningful possessions**
- **Saying goodbye as though they will not be seen again**
- **Sudden calmness after a period of severe depression**
- **Changes in sleep or appetite**
- **Taking unnecessary risks or engaging in self-destructive behaviors**

If these signs appear together, especially after a major life stressor—they should never be ignored.

4. Common Myths vs. Facts

Myth 1:

People who talk about suicide won't actually do it.

Fact:
Many people who die by suicide communicate their emotional pain beforehand, either directly or indirectly.

Myth 2:

Asking about suicide will put the idea into someone's mind.

Fact:
Research consistently shows that asking directly and compassionately about suicide does not increase suicidal thoughts. Instead, it can reduce isolation and encourage people to seek help.

Myth 3:

People who seem better are no longer at risk.

Fact:
A sudden improvement after severe depression can sometimes indicate that a person has decided on suicide. Continued support and assessment remain important.

Myth 4:

Suicide happens without warning.

Fact:
Although not every case has obvious warning signs, many individuals show verbal, emotional, or behavioral changes before a suicide attempt.

5. Why Talking About Suicide Does Not Increase Risk

One of the most harmful myths is the belief that asking someone whether they are thinking about suicide will encourage them to act on those thoughts. Scientific research has repeatedly shown that this is not true.

When someone is struggling with suicidal thoughts, they often feel isolated, ashamed, or afraid that others will not understand. A calm, compassionate, and direct conversation can help reduce that sense of isolation and communicate that they do not have to carry their pain alone.

Asking questions such as, *"Have you been thinking about hurting yourself?"* or *"Have you been thinking about ending your life?"* creates an opportunity for honest conversation, assessment, and connection to support. Rather than planting an idea, these conversations often provide relief and open the door to hope and professional help.

Key message: Talking about suicide does not create suicidal thoughts, but it can create a path to safety, support, and recovery.

Content 2: Practical

How to Help Someone Who May Be Struggling

- How to start a conversation
- What to say and what to avoid
- How to listen without judgment
- When and how to connect someone with professional help
- Crisis resources

1. How to Start a Conversation

Many people worry that they will say the wrong thing. In reality, showing genuine care is far more important than finding the perfect words. Starting a conversation may feel uncomfortable, but it can also be the first step toward hope and support.

Choose a private, quiet place where you can talk without interruptions. Approach the person calmly, with warmth and concern rather than urgency or criticism. Begin by describing what you have noticed rather than making assumptions.

For example:

- "I've noticed you haven't seemed like yourself lately, and I'm concerned about you."
- "You matter to me, and I wanted to check in. How have you been feeling?"
- "You've been carrying a lot lately. I'm here to listen if you'd like to talk."

If you believe the person may be thinking about suicide, it is appropriate to ask directly but compassionately:

"Sometimes when people are under this much pain, they think about ending their life. Have you been having thoughts like that?"

Research shows that asking directly does not increase suicide risk. Instead, it communicates that you are willing to listen and that the person is not alone.

Key Message

Start with compassion, not assumptions. A caring conversation can help someone feel seen, heard, and valued.

2. What to Say and What to Avoid

When someone is in emotional pain, our words can either create safety or unintentionally increase feelings of shame and isolation.

Helpful responses

- **"I'm really glad you told me."**
- **"Thank you for trusting me."**
- **"I'm here with you."**
- **"You don't have to go through this alone."**
- **"Your feelings matter."**
- **"Let's find help together."**

These responses communicate acceptance, empathy, and hope.

Avoid saying

- **"You have so much to live for."**
- **"Other people have it worse."**
- **"Just stay positive."**
- **"You'll get over it."**
- **"You're being selfish."**
- **"Think about your family."**

Although usually well intentioned, these statements may minimize the person's pain or increase guilt.

Key Message

You don't have to fix the problem. Your role is to help the person feel safe enough to keep talking and to encourage them to seek support.

3. How to Listen Without Judgment

Listening is one of the most powerful forms of support.

People experiencing suicidal thoughts often fear being judged, criticized, or misunderstood. When they feel truly heard, their sense of isolation may begin to decrease.

Practice active listening by:

- **Giving the person your full attention.**
- **Maintaining calm, open body language.**
- **Allowing silence without rushing to fill it.**
- **Reflecting what you hear.**
- **Validating emotions without agreeing with hopelessness.**

For example:

- **"That sounds incredibly painful."**
- **"I'm sorry you've been carrying this alone."**
- **"Thank you for sharing something so difficult."**

Avoid interrupting, arguing, lecturing, or immediately trying to solve the problem.

Key Message

Listening does not mean having all the answers. Sometimes the greatest gift we can offer is our calm presence.

4. When and How to Connect Someone with Professional Help

If someone expresses suicidal thoughts, appears overwhelmed, or shows multiple warning signs, encourage them to seek help from a qualified mental health professional.

You can say:

- "You don't have to face this alone."
- "I'd like to help you find someone who can support you."
- "Would you like me to stay with you while we make the call?"

If the person appears to be in immediate danger of acting on suicidal thoughts, do not leave them alone. Stay with them if it is safe to do so and contact emergency services or your local crisis service immediately.

Key Message

Professional support can make a life-saving difference. Helping someone connect with care is an act of compassion.

5. Crisis Resources

If you or someone you know is in immediate danger or experiencing a suicidal crisis:

- **Call your local emergency services immediately if there is an immediate risk of harm.**
- **In the United States and Canada, call or text 988 to reach the Suicide & Crisis Lifeline.**
- **If you live in another country, contact your local crisis hotline, emergency services, or nearest emergency department.**

Remember: seeking help is a sign of strength. No one has to face a suicidal crisis alone.

Content 3: Hope & Prevention

You Are Not Alone

- **Protective factors**
- **The importance of connection and belonging**
- **Stories of hope and recovery (without describing suicide methods)**

- **Encouraging help-seeking**
- **Reinforcing that recovery is possible**

1. Protective Factors

While certain life experiences and mental health conditions can increase suicide risk, there are also protective factorsthat help reduce that risk. Protective factors are the people, relationships, skills, and resources that strengthen our ability to cope during difficult times.

Research shows that even one strong protective factor can make a meaningful difference.

Some of the most important protective factors include:

- **Feeling connected to family, friends, or community**
- **Access to effective mental health care**
- **Healthy coping and problem-solving skills**
- **A sense of purpose and meaning in life**
- **Spiritual or cultural beliefs that promote hope**
- **Feeling valued, respected, and accepted**
- **Knowing how and where to ask for help**

Protective factors do not eliminate life's challenges, but they help people navigate them with greater resilience.

Key Message

Hope grows where connection, support, and meaning exist. Strength is not about facing pain alone; it is about knowing where to turn when life becomes overwhelming.

2. The Importance of Connection and Belonging

One of the strongest protective factors against suicide is feeling connected to others.

Human beings are wired for connection. Feeling accepted, understood, and valued helps regulate stress, reduces loneliness, and reminds us that we matter.

Sometimes, what saves a person is not a perfect solution, but knowing that someone truly cares.

Connection can take many forms:

- **A trusted friend who listens without judgment.**
- **A family member who checks in regularly.**
- **A therapist who provides a safe space.**
- **A teacher, mentor, or colleague who notices when something is wrong.**
- **A community where people feel welcomed and accepted.**

Research consistently shows that belonging is one of the most powerful predictors of emotional well-being.

Key Message

Every meaningful connection reminds someone that they are not alone, and that can make all the difference.

3. Stories of Hope and Recovery

Recovery is possible.

Every year, millions of people experience suicidal thoughts and later go on to build meaningful, fulfilling lives. Many describe one turning point in common: someone listened, someone cared, and someone helped them find support.

Hope does not always begin with dramatic change. Sometimes it begins with:

- **One honest conversation.**
- **One therapy session.**
- **One friend who stayed.**
- **One decision to ask for help.**

Recovery is rarely a straight line. There may be setbacks, but setbacks do not erase progress.

Key Message

Your current pain does not define your future. Healing takes time, but it is possible.

4. Encouraging Help-Seeking

Many people hesitate to seek help because they fear being judged, misunderstood, or becoming a burden.

The truth is that reaching out is one of the strongest and healthiest decisions a person can make.

Mental health professionals are trained to support people through emotional crises. Friends and family can also play an important role by encouraging someone to seek care and by staying connected throughout the recovery process.

Seeking help is not a sign that you have failed.

It is a sign that you are choosing life, healing, and hope.

Key Message

Asking for help is an act of courage, not weakness.

5. Reinforcing That Recovery Is Possible

No matter how overwhelming life feels today, recovery is possible.

People recover from depression.

People recover from trauma.

People recover from suicidal crises.

Healing does not mean life becomes perfect. It means learning new ways to cope, reconnecting with others, finding meaning again, and discovering that painful moments do not last forever.

Every day, people who once believed there was no future are now living meaningful lives.

That possibility exists for everyone.

Final Message for September

Suicide prevention begins with connection. Every Conversation Can Save a Life. A caring conversation, a listening ear, and the courage to ask, 'Are you okay?' can make a life-changing difference. If you or someone you know is struggling, remember: help is available, hope is real, and no one has to face life's darkest moments alone.

Even when hope feels out of reach, it has not disappeared. Sometimes hope begins with borrowing someone else's belief in you until you can believe in yourself again.

Suggested Resources

- **988 Suicide & Crisis Lifeline (U.S.)**
- **American Foundation for Suicide Prevention (AFSP)**
- **World Health Organization – Suicide Prevention**
- **International Association for Suicide Prevention (IASP)**

This framing aligns well with best practices for suicide prevention messaging by focusing on hope, connection, support, and access to help, rather than fear or sensationalism.

Translated fromFarsi to English using AI-assisted translation. This version has not undergone professional language review.