

THE "DOS & DONT'S" OF STIGMA-FREE COMMUNICATION

Do:

 Discuss the support that is available to your peers/family members (i.e. EAP, Suicide Prevention Lifeline, U.S. Crisis Text-line, etc.)



- Separate the person from their illness or addiction (i.e. "My spouse lives with bipolar disorder" vs "My spouse is bipolar")
- Allow the person to open up about what they are struggling with without providing judgment
- If a someone discloses that they are struggling with no suicidal intent, respond with: "Thank you for your bravery in telling me <u>(repeat statement)</u>. You are an important part of this team/family. Let's connect you with EAP (other resource) to get you the support that you need" or "I am so sorry that you are struggling. How can I help?"
- Use the term "died by suicide" instead of "committed suicide"

NOTE: We will address steps to take when someone is in crisis in the videos "Identifying & Supporting a Coworker in Crisis" and "Supporting a Family Member in Crisis." Also, reference the quick guides in those modules.

Do Not:

- Say, "You were just kidding when you said you were going to kill yourself, right?"
- Use terms like "crazy", "nuts", "victim", "druggie", etc.



- Say, "Don't you think you're being selfish?" or "You are just saying that for attention so you can get off work."
- Say "No comment" to coworkers who inquire about a team member after an on-site crisis
- Disclose the manner in which an employee died by/attempted suicide or any medical diagnosis you are made aware of with
- Say "You need to take your medication." or "You need to be medicated."
- Diagnose the person (i.e. "You seem depressed." or "With your mood swings, I think you might be bipolar.")

NOTE: Leave any diagnosis to a medical professional. You can best support your team members by listening, acknowledging their struggle, and offering support resources that best meets their needs.

This support resource is not to give or replace any medical, legal, or psychiatric intervention that is needed.