

When someone dies by suicide, one of the most painful questions survivors carry is whether the person wanted to die. Research in suicidology gives us an important answer: for most people, suicide is not about a desire to die. It is about an unbearable psychological pain that the person could no longer endure. This handout draws on decades of clinical research to help survivors understand what was happening inside the person they lost, and to begin releasing the guilt and blame that so often follow.

What Psychache Means

- Dr. Edwin Shneidman, widely considered the father of suicidology, spent more than forty years studying suicide and distilled his findings into five words: "Suicide is caused by psychache." You can read his original [1993 paper here](#).
- Psychache (pronounced sik-ak) is unbearable psychological pain in the mind: the anguish, shame, guilt, loneliness, and dread that builds until a person cannot find another way through it.
- Suicide occurs when a person reaches their individual threshold for enduring that pain and cannot see another exit. It is about ending suffering, not about wanting death.

How the Crisis State Distorts Thinking

- Suicidal crisis produces cognitive constriction, a narrowing of the mind's field of vision in which available options disappear. The person is not choosing from the same landscape you can see; the crisis has collapsed it inward.
- Helplessness and hopelessness are symptoms of this state, not accurate readings of reality. They exist even when real help is nearby. Most people who survive a serious attempt do not go on to die by suicide; the crisis is a window, not a verdict. See speakingofsuicide.com for more.

The Lies the Brain Tells

- One of the most devastating distortions of suicidal crisis is perceived burdensomeness: a genuine, illness-driven belief that the people around them would be better off without them. This is not a conclusion. It is a symptom.
- Many people in suicidal crisis actively conceal their suffering, performing normalcy over months or even years. If you missed signs, it is worth asking whether there were signs to miss, or whether the person you lost was working hard to hide them.
- The brain in crisis cannot distinguish between 'I am in unbearable pain right now' and 'I will always be in unbearable pain.' It closes off exits that are actually open.

They Wanted to Live

- Research consistently shows that most people in suicidal crisis are deeply ambivalent. They want to live and they want the pain to stop. Both things are true at the same time.
- The part of the person that wanted to stay was real. The love they carried for the people in their life was real. The crisis overwhelmed it, but it did not erase it.
- Ambivalence is evidence that death was not what they wanted. Read more about [conflicted emotions in suicide loss](#).

What This Means for Your Grief

- You did everything you could do. You could not do everything. Both sentences are true at the same time. Explore [moving beyond guilt after suicide loss](#).
- The person you lost died from pain their mind could not tolerate. That pain existed independent of how much you loved them and independent of anything you said or did.
- [AFSP Healing Conversations](#) connects newly bereaved survivors with trained volunteer survivors for one-on-one peer support.

Source

<https://sunflowersaftersuicide.com/suicide-is-not-about-a-desire-to-die-understanding-psychache/>