



RESPONDING TO SUICIDE RISK AMONG STUDENTS

Drawn up based on information from 113suicideprevention and the 113 [Gatekeeper training](#)

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Suicidal thoughts and suicide attempts are relatively common among young people. In the Netherlands, suicide among young people aged between 10-20 is the number 1 cause of death. Also at our University, staff members are occasionally confronted with students who show signs of suicidality. Research shows that around 10% of students worldwide have had thoughts of suicide in the past year and about 1% of all students actually attempt suicide, successfully or unsuccessfully¹. Knowing that a student is having suicidal thoughts or has attempted suicide has an emotional impact on family and friends, but also on fellow students and staff.

Suicide prevention aims to identify early signs of suicidality, thus allowing discussion of the warning signs and the seeking of professional help. For student counsellors such as teachers, tutors and mentors, this document gives a number of brief suggestions on how to act when a student shows signs of suicidality. We make use of the advice and protocols drawn up by 113, the national suicide prevention organisation (see references). We distinguish four tasks: 1) recognise the warning signs, 2) lend a listening ear, 3) create safety and seek help, and 4) take care of yourself.



1) Recognise the signs and talk with your student

When a student is considering suicide, it is not always observable. The thoughts and emotions of others are largely hidden from our sight. Moreover, sharing feelings around suicide is a big step. It is important to be alert to signs that may indicate suicidality.

Verbal signs are, of course, the most concrete and must always be taken seriously, however indifferent, serious, or exaggerated they may seem. Examples include:

"I can't go on anymore"

"I wish I was never born"

"I wish I were dead"

"I won't need this anymore"

"My parents won't have to worry about me anymore"

"Everyone would be better off if I was dead"

"Life sucks. Nobody cares if I live or die"

Behavioural. People who have suicidal thoughts often show a (sudden) change in their normal behaviour. Examples include:

- Gloominess, sadness and apathy caused by feelings of despair
- Social withdrawal and isolation. Doesn't show up for appointments, doesn't respond to contact
- Shows reckless, risk-taking or impulsive behaviour
- Excessive or increased use of substances such as alcohol and drugs
- Irregular sleep patterns and fatigue

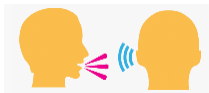


- Neglect of health (e.g. hygiene, nutrition, medication intake), appearance (e.g. clothing, teeth, shaving) and (social) relationships and obligations (not paying bills)
- Saying goodbye, giving things away, spending money, throwing stuff away, writing goodbye letters.

Some groups of students may be at higher risk of suicidal thoughts and attempts.

- Students with mental health problems, including students with autism and ADHD
- Students with gender and sexuality issues
- Students who are bullied or discriminated
- Students who have experienced physical and/or sexual abuse
- Students with a limited (available) social network and family problems

Also, the risk of suicidal thoughts and attempts appears to be higher among female students than male students¹.



2) Lend a listening ear

If a student indicates that he/she is considering suicide, ask about their feelings, thoughts and plans. Although it takes courage to start a conversation like this, it's better to show concern and interest than to look away. Many people with suicidal thoughts have admitted it was a relief to be able to talk to someone who was prepared to listen. Talking about suicide helps the student to think more constructively and often releases some of the emotional and physical tension. Choose the words that work for you, or use the words the student uses. Just make sure you're clear in what you mean.

Questions you can ask include:

"You say your life sucks. That sounds serious. What makes you say that?"

"It sounds like you are desperate. Is that right? How come you feel that way?"

"Are you ever afraid that you're going to hurt yourself?"

"Are you having thoughts about suicide?"

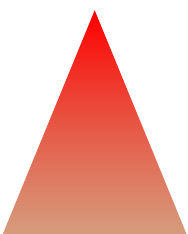
"How often / how long have you had these thoughts about death/ about suicide?"

"Have you thought about how you're going to do that?"

Consider the following tips:

- Listen openly to what the student wants to say
- Ask additional questions to better understand the student's perspective and the urgency of the situation ("What do you mean, 'I can't take it anymore'?")
- Respond empathetically, but also be clear about your own limitations.
- Don't try to solve the student's problems, know your role. You are a teacher/supervisor, not a mental healthcare specialist.
- Don't judge, even if you don't agree with a student
- Don't try to persuade or convince the student
- Don't give advice
- Don't promise what you can't live up to (e.g. about keeping the student's story to yourself)

In order to gain a better understanding of the situation, it is good not to regard suicidality as present or absent, but as a variable with degrees of increasing seriousness and urgency.





1. Specific short term plans, in combination with an unstable situation or context
2. Specific plans to commit suicide, preparation for today or tomorrow
3. Specific plans to commit suicide, without a specific date or time, or long-term plans
4. Thoughts about suicide, no plans or intentions
5. Thoughts about death, without thoughts about suicide



3) Ensure safety and search for help together

In cases of suicidality, it is important to engage both formal and informal support systems. For example, the parents, general practitioner or emergency mental healthcare. The sample phrases below may help.

"I'm very worried about you. I think it's important we call for help."

"These thoughts are too heavy to carry alone, who else knows how you feel? Who could we call right now?"

"I want you to let your GP / psychologist/ psychiatrist know that you have these thoughts. Shall we call them together, or are you going to do this yourself?"

Depending on the urgency of the thoughts and plans, and the instability of the situation, certain steps are appropriate. We'll discuss these below.

1) Plans for short-term suicide in combination with an unstable situation or context

This is the case if the student threatens to commit suicide somewhere soon, and in which the context of the conversation is very unsafe. Examples of an unstable situation include confusion, disorientation, aggression or intoxication of the student, the presence of weapons or narcotics, the absence of an informal support system, or the student mentioning that she/he is in a very dangerous location (on a roof, near railway tracks etc.), in short, every second counts.

- ➔ Tell the student you're going to call for help
- ➔ Take care of your own safety, engage colleagues at once
- ➔ Call 112 (preferably a colleague does this) and alarm the emergency response team (BHV) if the student is in a university building
- ➔ Stay with the student, if he is physically present. Otherwise, stay on the phone until the emergency services arrive.

2) Short-term suicide plans

If the student threatens to commit suicide somewhere soon, but at the same time is calm and cooperative during the conversation, the situation is still very critical. However, there is still some time to activate the support and care system in the short term.

- ➔ Discuss with the student that you are going to seek help together
- ➔ Make sure the student is not alone, have someone else call for help
- ➔ Call the student's GP/psychologist/parents or any other confidant.



- ➔ If the student has no help available (at short notice or distance) the student psychologists can call in the mental health crisis services). The student psychologists can be reached at: 071-5278026
- ➔ Discuss the next steps with colleagues and healthcare professionals.
- ➔ Wait with the student until the parents or the healthcare services have arrived to take over responsibility.

3) Plans for suicide without a deadline, or longer term

Although the student does not intend to implement his plan soon, preparations may have been made and professional help is still needed.

- ➔ Explore the possibilities for help together
 - ➔ Call the GP together and make sure the student has an appointment very soon.
- If the student already has a psychologist or psychiatrist, have the student call them.
- ➔ Involve parents or any other person the student trusts, indicate that you think it is important for the student to inform his/her parents
 - ➔ Contact www.113.nl (phone: 113 / 0800-0113 / 0900-0113)
 - Note: the telephone numbers of 113 can only be reached by a Dutch phone. Students without an NL phone can chat online with an employee worldwide via www.113.nl.
 - Of course, the 113 call centre does not provide all languages. National hotlines can be consulted via: https://www.suicidestop.com/call_a_hotline.html
 - ➔ Consult the SEA Advice Desk in cases of disturbing or alarming behaviour (AZG) during business hours via 071-5278026 or adviespuntzg@sea.leidenuniv.nl
 - ➔ Involve the study advisor for consultation

4) Thoughts of suicide, without concrete plans

The student indicates that suicidal thoughts have crossed his/her mind, but he/she does not have a concrete plan or time.

- ➔ Try to persuade the student to seek/accept help
- ➔ Suggest the student contacts his/her GP
- ➔ Point out the possibilities for medical care outside office hours (emergency doctor services SHR / SMASH)
- ➔ If the student already has a psychologist or psychiatrist, have the student call them.
- ➔ Make an appointment with the study advisor to discuss the situation
- ➔ Contact www.113.nl (phone: 113 / 0800-0113 / 0900-0113)
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- ➔ Stay in touch with the student after this conversation. Check for instance if help is being sought and found, but do not become overinvolved.



5) Thoughts of death, without thoughts of suicide

If the student reports that he/she is thinking about death or dying, without thinking about suicide, this can have all kinds of underlying causes. Thoughts of death combined with a gloomy mood may indicate an underlying depression, but this doesn't have to be the case. Also, thoughts of suicide can develop at a later date.

- ➔ Refer to the student psychologists for an exploratory interview. You can make an appointment via the student website. Phone No. 071-5278026. Mail: psychologen@sea.leidenuniv.nl
- ➔ Let the student make an appointment with a GP to find out what is going on
- ➔ Point out remote support
 - Foundation Korrelatie (www.mindkorrelatie.nl) 0900-1450
 - the Listening Line (www.deluisterlijn.nl) 0900-0767
- ➔ Online guidance for students with mood complaints via Moodpep (www.moodpep.nl)
- ➔ Stay in touch with the student after this conversation. Mention that the student can always talk to you at a later time.



4) Take good care of yourself

When a student reveals that he or she is thinking about suicide, it often also raises emotions or questions within yourself. Therefore, take good care, not only of the student, but also of yourself.

- Make difficult decisions in consultation with a colleague, manager or expert. Seek advice prior to a potentially difficult conversation with a student.
- Record carefully what was discussed in the conversation with the student, and what steps you took, who was involved, and what was decided. Ask for the student's (written) permission if you want to engage or inform others.
- Be open about what a student can and should not expect from you as a supervisor. Don't feel compelled to promise to keep the student's story a secret if his/her health is at risk. Explain why.
- Accept the limitations of your expertise and responsibility. You are responsible for your own choices and actions, not someone else's.
- Share your experiences and seek support yourself. Discuss what you've been through with a colleague or supervisor. Of course, take into account the privacy of the student. You can also contact a confidant or company doctor.
- Seek and use your own methods for relaxation and distraction.
- General tips and tools for taking care of yourself, whether you are an employee or a student, can be found on the [University website](#).



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