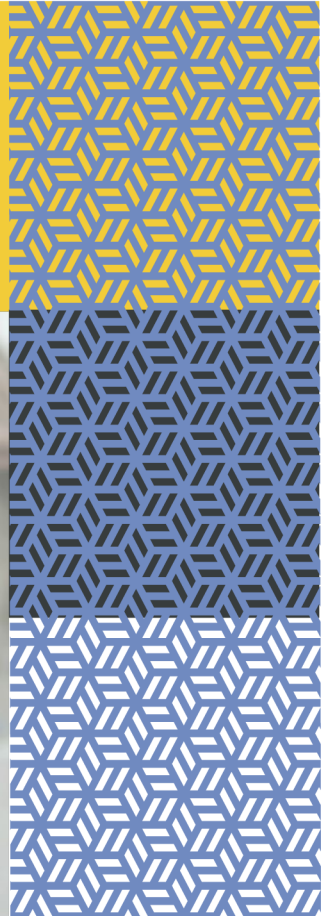
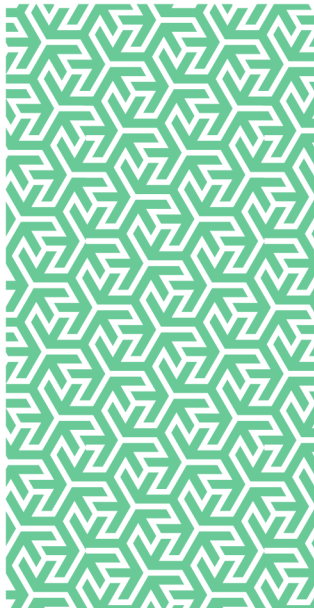
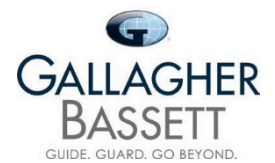


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Risk control
Student Suicide Awareness
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Student Suicide - Awareness and Management

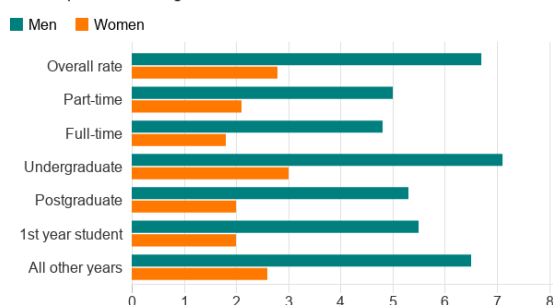
Introduction

This guidance document focusses on the preventative strategies and methods that institutions can use to provide postvention interventions for people connected to student deaths by suicide.

Looking at student deaths by suicide figures, indicates that this issue should be taken seriously. The chart below breaks down the student suicides into different groups within institutions that are affected by suicide.

Student suicide rate in England and Wales

Deaths per 100,000 higher education students, 2013-17



Source: ONS

BBC

Source: BBC report on student suicides¹.

- The suicide rate for higher education students in the academic year ending 2020 in England and Wales was 3.0 deaths per 100,000 students (64 suicide deaths); this is the lowest rate observed over the last four years, although the small numbers per year make it difficult to identify statistically significant differences
- Between the academic year ending 2017 and the academic year ending 2020, the male suicide rate for higher education students was statistically higher (5.6 deaths per 100,000 students; 202 suicide deaths) compared with female students at 2.5 deaths per 100,000 students (117 suicide deaths); this is in line with the trend seen in the general population where suicide rates are higher amongst males
- Between the academic year ending 2017 and the academic year ending 2020, higher education students in England and Wales had a significantly lower suicide rate compared with the general population of similar ages
- When compared with the general population, the suicide rate for higher education students among those aged 20 years and under and those aged 21 to 24 years showed the biggest difference, with the rate in the general population being 2.7 times higher than that in higher education students

- Between the academic year ending 2017 and the academic year ending 2020, first year undergraduate males had a significantly higher suicide rate at 7.8 deaths per 100,000 students compared with those studying in other years (4.3 deaths per 100,000)

Source: Office for National Statistics²

The stark reality is that suicide is the largest reason for premature deaths in student age groups 18-30 in the UK. Students in higher education predominately make up this age group. Leaders of Higher Education Institutions should be considering how suicide prevention strategies, policies and processes are affectively implemented and integrated into all parts of their institute.

Young people are facing many factors that may be contrary to good mental health and wellbeing, these include poor mental health; self-harm; academic pressures or worries; bullying; social isolation; family environment and bereavement; relationship problems; substance misuse; or neglect. Factors are cumulative over the life course, and adverse childhood experiences, deprivation, and poor physical health also contribute to the risk of suicide.

Whilst the full array of negative effects of the COVID-19 pandemic on mental health and wellbeing are yet to be fully understood, it is possible that the long-term impact on our young people may be dormant within the youngest in society only surfacing later. Bearing this in mind, universities and other similar organisations may face increasing cases of poor mental health and wellbeing in future and should already be planning for this potential outcome.

Poor mental health and wellbeing certainly impacts on student's performance and experience of university life. The important support services within institutions not only provides help and support with mental health and wellbeing but may also enable students to succeed in academic achievement and other aspects of university life.

Under the Equalities Act, Higher Education Institutions have responsibilities to ensure reasonable adjustments are made for students. Legal action can be expensive and bring high risks of reputational damage after already tragic events.

Effective Approach

It is clear that Higher Education Institutes must act, but what should they do?

Higher Education Institutions should consider suicide prevention strategies and policies that are clear, holistic and continually improve standards of support provided to their students and communities. Integrate suicide prevention into all relevant aspects of universities business, governance structures and student experiences increases successful implementation and ensures support is provided to those who need it.

It should not be underestimated the importance that any suicide prevention strategy and policies are owned, supported and communicated effectively by the Higher Education Institutes leadership team. The implementation process should be monitored by this team and interventions carried out if needed.

A structured approach should be followed developing suicide prevention strategies. Universities UK (UUK) and Papyrus (the UK's national charity dedicated to the prevention of young suicide) first published Suicide – Safer Universities Guidance in 2018 to help Higher Education Institute leaders prevent student suicides. Support for leadership teams through robust training should be implemented along with the strategies and policies.

The following approach is detailed in the Office for Student advice and guidance:

- Take a holistic approach
- Active and effective leadership – make suicide safety an institutional priority
- Train all student-facing staff in suicide awareness
- Partnerships with the wider community
- Take an evidence-based approach
- Centre the needs of students
- Develop postvention plans and support



This image is taken from UUK Suicide Safer Universities Guidance 2018³.

Take a holistic approach

A holistic approach should be embedded within the institution. It is essential that all parts of the institution understand issues and feel part of the solution. Any Suicide Prevention Strategy must be joined up with other aspects of student welfare, mental ill health provision and support networks to provide students with the best support mechanisms possible, intervening earlier to address issues and prevent them developing.

Active and effective leadership

Developing such an approach will require robust, active and effective leadership. Leadership of Higher Education Institutes must take ownership of the suicide prevention strategy along with effective continual improvements.

Partnerships with the wider community

Institutions should utilise wider community support organisations providing students with clear support that is easily accessible. All organisations should establish suitable methods of sharing knowledge, expertise and insight to ensure students feel that they are supported.

Take an evidence-based approach

Understanding student's needs and potential support requirements need to be driven by appropriate data capture. This will provide institutes with mechanisms to target effectively their student's needs.

Harry's Law

The family of Harry Armstrong-Evans were petitioning government to introduce new laws in relation to student suicide and Higher Education Institutes. These are:

- Coroners to inform universities when the suicide of an enrolled student is registered
- Universities to publish annually the suicide rate of enrolled students
- New powers to place universities into 'special measures' where suicide rates exceed that of the national average.

Unfortunately, the petition received 5,135 signatures therefore did not receive the 10,000 signatures to get a response from the government⁴.

However, could this proposal be seen as an opportunity for High Education Institutes to be at the forefront of standards for good student mental ill health and using the information gathered to inform processes to drive improvements?

Research has consistently shown that most students and staff who experience poor mental health do not access formal support.

Could universities look for triggers and offer support to all students proactively not just those that are crying out for help.

Imagine what benefits this would bring to students, society, and the institution. Would performance of student increase, would all students feel supported and secure in the knowledge that help will be available when it is most needed. Ensuring methods utilized are joined up and monitored by the institute's leadership team.

Centre the needs of students

Taking a proactive approach to the mental wellbeing of students by promoting awareness of positive mental health, signposting support and encouraging conversations will help support students.

Be proactive, can good mental health be woven into all aspects of University Life, are there trigger points that should automatically notify people that would allow support to be given without students reaching out.

Develop postvention plans and support

It is important to consider how your institution will respond in any cases of student death by suicide. Support for people who may be affected need to be put into action, friends, peers and staff. What methods will be used to ensure all relevant information is gathered and that all lessons can be learnt by the institution in a sensitive manner? Where possible families should be involved in any postvention lessons learnt.

Further information

Universities UK's Suicide Safer Universities Guidance is available and assists HEI's to develop their strategies.

<https://www.universitiesuk.ac.uk/what-we-do/policy-and-research/publications/features/suicide-safer-universities>

Office for Students provides valuable information and example of HEI's approaches and development suicide prevention strategies.

<https://www.officeforstudents.org.uk/advice-and-guidance/promoting-equal-opportunities/effective-practice/suicide-prevention/>

Signposting

Signposting to mental health services is simply the directing of a person to the opportunities available to support and assist them under the current situation. The following selection is not exhaustive but can support development of a suicide prevention strategy.

Other Mental Health Support Services

Samaritans	
Website:	https://www.samaritans.org
Email:	jo@samaritans.org
Phone:	116 123 (24 hours a day, free to call)
Who is this service for?	Provides confidential, non-judgmental emotional support for people experiencing feelings of distress or despair, including those that could lead to suicide. You can phone, email, write a letter or in most cases talk to someone face to face.

Mind Infoline	
Website:	www.mind.org.uk/information-support/helplines
Email:	info@mind.org.uk
Phone:	0300 102 1234 (9am-6pm Monday to Friday)
Who is this service for?	Mind provides confidential mental health information services. With support and understanding, Mind enables people to make informed choices. The Infoline gives information on types of mental health problems, where to get help, drug treatments, alternative therapies and advocacy. Mind works in partnership with around 140 local Minds providing local mental health services.

Saneline	
Website:	www.sane.org.uk/what-we-do/support/helpline
Phone:	0300 304 7000 (4:00pm-10:00pm)
Who is this service for?	Saneline is a national mental health helpline providing information and support to people with mental health problems and those who support them.

The Mix	
Crisis Support:	Text 'THEMIX' to 85258.
Website:	www.themix.org.uk/get-support
Email:	Helpline email form
Phone:	0808 808 4994 (3pm to 12am, free to call)
Who is this service for?	The Mix provides judgement-free information and support to young people aged 13-25 on a range of issues including mental health problems. Young people can access The Mix's support via phone, email, webchat, peer to peer and counselling services.

Side by Side	
Website:	https://sidebyside.mind.org.uk/
Who is this service for?	Side by Side is an online community where you can listen, share and be heard. Side by Side is run by Mind.

SHOUT	
Text:	85258
Website:	https://www.giveusashout.org/
Who is this service for?	Shout is the UK's first 24/7 text service, free on all major mobile networks, for anyone in crisis anytime, anywhere. It's a place to go if you're struggling to cope and you need immediate help.

Ripple	
Website:	www.ripplesuicideprevention.com
Who is this service for?	Ripple is an interactive tool designed to present a visual prompt when a person searches for harmful keywords or phrases relating to the topic of self-harm or suicide. This tool can be easily downloaded on to institutions computers and is free for all higher education institutes.

References

- 1 BBC Website: <https://www.bbc.co.uk/news/health-44583922>
- 2 Office for national statistics: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthdeathsandmarriages/deaths/articles/estimating-suicide-among-higher-education-students-in-england-and-wales-experimental-statistics/2017-to-2020>
- 3 Suicide-safer universities (universitiesuk.ac.uk)
- 4 UK Government and Parliament website: <https://petition.parliament.uk/petitions/627329>

Further information

For access to further RMP Resources you may find helpful in reducing your organisation's cost of risk, please access the RMP Resources or RMP Articles pages on our website. To join the debate follow us on our LinkedIn page.

Get in touch

For more information, please contact your broker, RMP risk control consultant or account director.

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