

University for the Common Good

# Suicide Prevention, Intervention and Response Policy

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### Context

Suicide is the biggest cause of death in young adults. Nearly 1 in 4 young people will experience suicidal feelings at least once in their lives. 1 in 20 will try to take their own life. The suicide rate is higher for young adults outside of Universities, however we know that a range of characteristics and experiences which impact on mental health and wellbeing are particularly impactful for students in higher education.

In common with other Universities across the UK, enhancing our tailored mental health and wellbeing support is a priority development area, and enhancing our support for suicide prevention and response is an important aspect of our overall approach to safeguarding the wellbeing of our students.

In 2023 Universities UK and Papyrus published new <u>guidance</u> to support universities in developing their approach on preventing, intervening, and responding to suicide as part of their overall mental health framework. GCU's Suicide Prevention, Intervention and Response Policy aligns with the guidance and has also been informed by The University Mental Health Charter, Thriving Learners' Survey, and the Scottish Government's Suicide Prevention Strategy.

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### 1. Introduction

Glasgow Caledonian University is committed to ensuring that our university community is supported through a whole university approach: with tailored mental health and wellbeing support for suicide prevention and response an important aspect of our overall approach to safeguarding the wellbeing of our students. The university is acutely aware that suicides are not like any other sudden death. We recognise the tragedy of any death by suicide and its profound and lasting impact on family, friends, fellow students, and the wider University community. The approach to creating a suicide-safer university outlined in this policy is part of our wider Strategic Framework for a University-wide approach to Health and Wellbeing.

At Glasgow Caledonian University our suicide prevention and response work is integral to the University's overall Student Mental Health Action Plan (SMHAP) which is updated regularly as part of our ongoing partnership with Student Minds and our continued University Mental Health Charter (UMHC) accreditation. The SMHAP is overseen by the Student Wellbeing Advisory Group, reporting to the University Executive Group, the People Committee, and our Learning Enhancement Sub Committee.

The university recognises the importance of partnership working in suicide prevention and response and is committed to building on our existing relationships with local community mental health providers and services, including the Scottish Association for Mental Health (SAMH), the National Health Service (NHS), local council and social support services in the ongoing development and review of its approach. Our work is also informed by our involvement in the UMHC and the sharing of good practice across the sector.

The suicide prevention and response approaches outlined in this policy are contextualised to GCU students in recognition of the specific experiences, risks, and needs of student populations and is part of GCU's whole university approach to suicide prevention that aligns with our University-wide Health and Wellbeing Framework.

This policy focuses on the areas of **prevention**, **intervention and postvention** which represent the component parts necessary to create a suicide safer university.

# 2. Important definitions

Suicide	Deliberate act of taking of one's life.
Suicide Attempt	A suicide attempt is a deliberate action undertaken with at least some wish to die as a result of the act. The degree of suicidal 'intent' may vary and may not be related to the lethality of the attempt.
Suicidal Feelings	Suicidal ideation and suicidal thoughts can range from being preoccupied by having abstract thoughts or rumination about ending one's own life, or feeling that people would be better off without you, to thinking about methods of suicide, or making clear plans to take one's own life.

Suicidal Behaviours	A range of behaviours related to suicide and self-harm in vulnerable individuals, including suicidal thinking, deliberate recklessness and risk-taking, self-harming not aimed at causing death and suicide attempts. Around 20% of young people have self-harmed (non-suicidal) by the age of 20, far fewer around 2-3%) make suicide attempts.
Self-Harm Non- Suicidal Intent	An action that is deliberate but does not include an intention to die and often does not result in hospital care. It can be used for one or more reasons that relate to reducing distress and tension, inflicting self-punishment and/or signalling personal distress to important others. Non-suicidal self-harm is a signal of underlying mental health difficulties; self-harm is a strong predictor of future suicide risk; people who self-harm may also make suicide attempts and be at risk of suicide.
Cluster	A cluster is three or more deaths that occur unexpectedly closely in terms of time, place, or both. In a university setting, two suicides occurring close to each other may indicate a cluster and should be taken very seriously.
Contagion	Death by suicide may trigger suicidal thoughts and feelings in some other individuals and may increase their risk. This is also known as suicide contagion and may lead to a cluster. Likewise, reporting of suicide methods or locations may promote use of those methods by others.

# 3. Beliefs and understanding suicide

The reasons for suicide are often complex and individual, however there are a number of factors which may predispose individuals to a higher risk of suicide. Research published in the <u>guidance from Universities UK</u> has identified the following experiences may indicate a higher risk of experiencing distress:

- Serious (suicidal) self-harm
- Exposure to suicide and serious self-harm (contagion)
- Relationship or family issues, breakdowns in social support networks
- Transitions between mental health services
- Alcohol and/or drug misuse
- Those who have experienced trauma or abuse
- Asylum seekers and refugees are exposed to several experiences which are linked to an increased suicide risk
- Lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ+) young people exhibit more suicidal behaviour than those who do not identify at LGBTQ+
- Male students are more than twice as likely to take their own lives as female students

It is essential to break down stigma around suicide and encourage individuals to contact support and that community members understand the evidence around suicide and are able to challenge misconceptions.

Below are misconceptions around suicide from the <u>Samaritans Resource</u>: <u>Myths about Suicide</u> and the Universities UK Guidance: <u>Suicide Safer Universities</u>.

### "Talking about suicide can create, or worsen risk"

Suicide is a stigmatised topic and can be taboo. By asking someone directly about suicide, you give them permission to tell you how they feel. People who have felt suicidal will often say what a huge relief it was to be able to talk about what they were experiencing. How we talk about suicide is important, we should make sure not to use words that stigmatise or criminalise suicide, for example "committing suicide," "successful/ unsuccessful suicide" or "they aren't the suicidal type."

More information for language around suicide can be found at:

- Mind your C's and S's: The Language of Self Harm and Suicide and why it matters
- Appendix 3, page 29 of the Universities UK Suicide Safer Universities Framework

Once someone starts talking, they have a better chance of discovering options that are not suicide. Asking someone about suicide does not create or worsen risk.

### "People who talk about suicide aren't serious and won't go through with it"

Research has shown that individuals who die by suicide have often expressed suicidal feelings or ideation to those around them. This may be through phrases which are direct, or those which hold the implication – e.g., having no future, or life not being worth it.

Individuals who express suicidal feelings or thoughts should be treated with empathy and compassion. It is important to always take someone seriously if they talk about feeling suicidal. Helping them get the support they need could save their life.

# "Most suicides happen without warning"

**Most suicides are preceded by warning signs**. These may be verbal or behavioural. It is important that individuals are able to confidently identify indications of suicidal thoughts and behavioural signs.

# "If a person is serious about killing themselves then there's nothing you can do."

Most individuals who are feeling suicidal do not want to die, but rather do not want to live in their current experience of life. The distinction may seem small but is very important. It is why talking through other options at the right time is so vital. Often, feeling actively suicidal is temporary and this is why it is essential individuals are able to access crisis support.

# "You have to be mentally ill to think about suicide"

1 in 5 people have thought about suicide at some time in their life, and this number increases to nearly 1 in 4 young people. Not all people who die by suicide have mental health problems at the time they die.

Most people who complete suicide are not known to mental health services. This highlights the need to dismantle mental health stigma and barriers to care and create a compassionate community.

# 4. Prevention, Intervention and Postvention

At Glasgow Caledonian University our suicide prevention and response work is integral to the University's overall ethos of embedding a whole university approach to mental health and wellbeing of our students and staff. The Student Mental Health Action Plan (SMHAP) contains further detail of our suicide prevention and response work and is updated regularly as part of our ongoing partnership with Student Minds and our continued University Mental Health Charter (UMHC) accreditation. The SMHAP is overseen by the Student Wellbeing Advisory Group, reporting to the University Executive Group, the People Committee, and our Learning Enhancement Sub Committee. Key components of this approach and GCU's activity in these areas are also available at the Suicide Prevention and Response SharePoint.

If you have any questions about our work or would like to contribute to our ongoing areas of work please get in touch with us at UMHC@gcu.ac.uk

# 5. Monitoring and review

This policy will be reviewed annually by the Student Wellbeing Advisory Group, with progress against planned developments reported via the annual Wellbeing and Mental Health reports to the People Committee and the Learning Enhancement Sub Committee. Overall executive responsibility for the policy sits with the Vice Principal People and Student Wellbeing who will provide updates to the University Executive Group.

# 6. Where to get support

Information on the university's internal sources of support can be for students at the Student Wellbeing Team: <a href="https://www.gcu.ac.uk/currentstudents/support/wellbeing">https://www.gcu.ac.uk/currentstudents/support/wellbeing</a> and staff at the Mental Health and Wellbeing Intranet Hub: <a href="https://www.connected.gcu.ac.uk/sites/mentalhealth">https://www.connected.gcu.ac.uk/sites/mentalhealth</a>.

Within this section there is information both on out of hours and emergency support services, and further resources for supporting those who may be at risk of suicide.

### Out of hours and emergency support services

It is not uncommon for people to feel at a crisis point and you are doing the right thing by seeking support and advice. If the feeling is overwhelming or you feel so distressed that you have thoughts of harming yourself or you feel you are at risk of harming others then you need to:

- Phone or visit your GP as soon as possible to tell them how you are feeling. Find your local GP via this link: <a href="https://www.nhsinform.scot/scotlands-service-directory/gp-practices.">https://www.nhsinform.scot/scotlands-service-directory/gp-practices.</a> If your GP surgery is closed, call NHS 24 on 111
- You can contact Samaritans on 116 123
- Call <u>Breathing Space</u> on **0800 83 85 87**

The directories below provide information on suicide prevention crisis lines internationally:

- Therapy Route provide information on helplines, suicide hotlines and crisis lines from across the world.
- Suicide.Org provide information on international prevention, awareness, and support organisations.
- Befrienders Worldwide provides an outline of the contact details of helplines by country.

### **Support for supporting others**

The Glasgow Association for Mental Health have published **Being there for someone at risk of suicide: a guide to taking care of yourself and others** at <a href="https://www.yoursupportglasgow.org/glasgow-homepage/pages/suicide-prevention/resources/">https://www.yoursupportglasgow.org/glasgow-homepage/pages/suicide-prevention/resources/</a>

Samaritans have published **Supporting someone online who might be at risk of self-harm or suicide** at <a href="https://www.samaritans.org/scotland/about-samaritans/research-policy/internet-suicide/online-safety-resources/supporting-someone-online-who-might-be-risk-self-harm-or-suicide/">https://www.samaritans.org/scotland/about-samaritans/research-policy/internet-suicide/online-safety-resources/supporting-someone-online-who-might-be-risk-self-harm-or-suicide/</a>

SAMH have published the following resources at: <a href="https://www.samh.org.uk/about-mental-health/suicide/suicide-prevention">https://www.samh.org.uk/about-mental-health/suicide/suicide-prevention</a>

- Suicide are you worried about someone?
- Suicide: Living with your thoughts and
- Suicide: How to Ask

SAMH have published **After a Suicide** available at: <a href="https://www.samh.org.uk/about-mental-health/suicide/after-a-suicide">https://www.samh.org.uk/about-mental-health/suicide/after-a-suicide</a>

# 7. Resources reviewed to shape our approach

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- 3. Mental Health Foundation Scotland: Maguire, C. and Cameron, J. (2021). "Thriving Learners: Realising student potential and wellbeing in Scotland": <a href="https://www.mentalhealth.org.uk/sites/default/files/2022-06/MHF-Thriving-Learners-Report-Executive-Summary.pdf">https://www.mentalhealth.org.uk/sites/default/files/2022-06/MHF-Thriving-Learners-Report-Executive-Summary.pdf</a>
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- Office for National Statistics (2018): Estimating suicide among higher education students, England, and Wales: Experimental Statistics,"
   <a href="https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/estimatingsuicideamonghighereducationstudentsenglandandwalesexperimentalstatistics/2018-06-25</a>
- 6. Samaritans (2020): "Supporting someone online who might be at risk of self-harm or suicide": <a href="https://www.samaritans.org/scotland/about-samaritans/research-policy/internet-suicide/online-safety-resources/supporting-someone-online-who-might-be-risk-self-harm-or-suicide/">https://www.samaritans.org/scotland/about-samaritans/research-policy/internet-suicide/online-safety-resources/supporting-someone-online-who-might-be-risk-self-harm-or-suicide/</a>
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- 11. Student Minds: Hughes, G. & Spanner, L. (2019). "The University Mental Health Charter" https://www.studentminds.org.uk/uploads/3/7/8/4/3784584/191208 umhc artwork.pdf

- 12. Student Minds (2020): "Planning for a Sustainable Future: the importance of university mental health in uncertain times"

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