Counseling and Psychological Services

Suicide and College Students

The opportunity to pursue a college education, enter adulthood with its added responsibilities and freedoms and participation in student life can be an exciting time. However, college students may experience a significant degree of stress as the result of these same developmental opportunities. Previous research has shown that college students report a higher rate of suicidal ideation than non-college students; therefore, becoming knowledgeable about the topic of suicide is essential when working with college students.

Over the past few decades, suicide has become the second leading cause of death on college campuses. The actual act of suicide is a complex behavior that is generally not a response to a single event but a series of events, feelings and thoughts that place an individual at risk for suicidal behavior. College students who are at risk for suicide appear to share a number of risk factors. Some of the more common risk factors associated with suicide include depression, loneliness, stress and hopelessness. Therefore it is important to provide mental health screenings and educational opportunities for college students as a suicide prevention intervention. The Counseling Center Web site has a service called “ULIFELINE” (www.fit.edu/caps/) that provides free mental health screenings on an anonymous basis.

As the result of the increasing psychological problems that students are exhibiting on campus nationally, the U.S. Senate recently passed a bill to provide grants to colleges and universities to establish or enhance mental health programs and suicide prevention efforts on campus. CAPS and Residence Life will be developing grant proposals for the expansion of mental health and suicide awareness programs on campus during the next year.

Some facts on suicide are as follows …

- Suicide accounts for more deaths among college students than all medical illnesses combined
- From the 1950s through mid 1990’s, suicide rates tripled for males and doubled for females
- Male college students have a higher rate of committing suicide (five times greater) whereas females attempt suicide at greater rates
- Florida has a higher rate of suicide within its college-age population when compared to national levels
- One in 12 U.S. college students make a suicide plan
✓ The first episodes of clinical depression frequently appear in adolescence
✓ College students exhibit a higher rate of suicidal thinking than non-college students
✓ College student suicides occur at a lower rate when compared to the non-student age group possibly due to campus supports as well as the lack of access to firearms on college campuses
✓ Male college students who engage in moderate or vigorous activity have a reduced rate of suicidal ideation/attempts while females with the same activity level exhibit an increase
✓ Only a small percentage of those students who have committed suicide made contact with campus support services
✓ It is a myth that suicide is more likely to occur during the holidays—spring and summer months have the highest rates
✓ Nationally, graduate students have a higher rate of suicide than undergraduates
✓ Nationally, science and business students have a higher rate of suicide than liberal arts students
✓ As the result of the “contagion” phenomenon, other students with emotional difficulties are at a higher risk for suicide following a completed suicide on campus

Who is at risk for suicidal thoughts and attempts on campus?
Predicting who, how and when someone will attempt suicide is an extremely difficult task. We do know that there are certain indicators that may suggest a higher risk of suicide. Some of these risk factors include …
✓ Pre-existing psychological problems such as depression, anxiety, history of abuse
✓ Symptoms of clinical depression such as feelings of despair, hopelessness and loneliness
✓ Students who develop significant adjustment or psychological difficulties
✓ Students experiencing significant guilt or shame
✓ A previous history of suicide attempts—a person with an attempt history is at 50 times greater risk
✓ Significant loss, such as a relationship breakup, academic dismissal, loss of status, or death of family member/friend
✓ Lack of close personal relationships
✓ Alcohol/drug abuse problems
✓ History of Eating Disorder
✓ A high level of anger or anxiety
✓ High levels of perfectionism with excessive self-scrutiny
✓ Unrealistically high standards, especially if reinforced by parents
✓ Students with a history of recent disciplinary or legal problems and/or disappointment or rejection
✓ Homosexuals and individuals with sexual orientation/identity issues may be at higher risk
Asian and Hispanic students consider suicide more seriously than white students
Past national research has indicated that international students exhibit a higher rate of suicide

What are some red flags for suicide risk?

At least 70-80 percent of all students who committed suicide gave some clue as to their intentions before they made an attempt. Becoming aware of these clues and the severity of the student’s problems can help prevent such a tragedy. If a student you know is going through a particularly stressful situation, such as difficulty maintaining a meaningful relationship, having consistent failure in meeting present goals, or even experiencing stress at having failed an important test, watch for other signs of crisis such as ...

- Making a direct statement regarding their intent to die
- Giving possessions away
- Engaging the faculty in extensive personal counseling or discussions as opposed to academic or advisement discussions
- A significant change in a student’s behavior and/or appearance
- Verbalizing a feeling of hopelessness (i.e. “I don’t know if you will see me back next semester,” “Nothing I do seems to help,” “Lately I have been driving my car like I don’t really care what happens”)
- Alcohol/drug issues that are apparent in residence life or classroom functioning
- Withdrawing from others around them
- No longer attending classes
- E-mails or journal entries that have a despondent, hopeless, morbid theme or direct reference to suicide
- Recent suicide of a friend, family member or classmate
- Exhibiting violent behavior
- Lack of future plans or goals
- Significant confusion or inability to make decisions

Factors that appear to reduce suicide risk …

Research has shown that there are certain factors that reduce suicide risk or serve as “protective factors.” These factors are comprised of environmental factors as well as internal factors that can benefit a student who is having difficulty coping with personal or academic difficulties. Staff and faculty can be extremely valuable in helping our students access external program supports through CAPS, Academic Support Services and Residence Life programs.

By fostering support and reducing the stigma attached to help-seeking behaviors and psychological difficulties in your communication to a student, the student will be more
receptive to external supports. With regards to internal supports, some students arrive on campus with these protective factors and some will hopefully develop them through their educational and student life experiences on campus. Faculty and staff can make a difference through mentoring, knowing their students and/or encouraging socially isolated students to join a group or an organization.

**External and internal protective factors for suicide include …**

- An optimistic outlook
- Previous experience with coping with life’s difficulties and challenges
- High self-esteem
- Problem-solving skills
- Sense of belonging to a group or campus organization
- Realistic expectations
- Supportive and close family relationships
- Role models for healthy coping
- Positive social supports
- Easy access to campus support programs
- Positive spiritual/religious association
- Cultural or religious beliefs against suicide
- Opportunities to make a contribution

**How you can help as staff and faculty …**

If a student talks about suicide, a referral is necessary, especially if the conversation includes the details of how, when or where. Regardless of the circumstances or context, any clear reference to suicide, threat of suicide or attempt at suicide is extremely serious.

To assess a student’s suicidal comments as a bid for attention is extremely risky. A judgment about the seriousness and the possible lethality of a suicidal thought or gesture should not be made without consulting with the Counseling Center. In interacting with students, the goal should not be in reaching an accurate assessment or opinion regarding suicide potential. Rather, it should be in recognizing any symptoms that indicate the student is troubled, and directing the student to seek the appropriate professional care. Concerned listening is your greatest tool.

It is important to listen to "cries for help" because they are usually desperate attempts to communicate to others the need to be understood and helped. It is frequently the severe inner pain and desire to end this pain that leads a suicidal student to a suicide attempt. UCLA suicide prevention experts have summarized the information to be conveyed to a person in crisis as follows: "The suicidal crisis is temporary. Unbearable pain can be survived. Help is available. You are not alone."

**In considering how to be helpful to a student who you feel may be suicidal …**

- Honestly express your concerns about the student’s actual behaviors as opposed to
voicing your opinions. An example might be “You look very tired lately and I noticed you have been missing classes. Is everything alright?”

☑ Don’t be afraid to ask the student regarding suicide. It will not increase the likelihood of them acting on it.

☑ Ask directly about suicide such as “It sounds like you have a lot of pressure going on with school and your personal life. Have you felt that life isn’t worth living or have you thought about harming yourself?” If suicidal thoughts are acknowledged or the answer is “yes,” it is important that you express your concern for the student and contact CAPS immediately (or security if this occurs after hours).

☑ Attempt to instill some hope in the student such as “Depression is real and common in college students and is very treatable with professional help. Let’s work together with CAPS or a therapist to help you feel better.”

☑ Minimize the stigma of seeking help with comments such as “I have worked a lot with CAPS and admire your effort to get some help” or “I have worked with many other students that experienced difficulty getting over a relationship who sought assistance.”

☑ Explore options that you and the student may consider by consulting with CAPS, such as: taking an incomplete; reducing credit load; working with Academic Support Services; or taking a medical leave of absence, if necessary.

☑ If risk is imminent, don’t leave the student alone until assistance arrives.

☑ Remember that in these situations it is always better to overreact (in terms of proactive behaviors) rather than discounting or denying the issues.

Try to avoid the following in interacting with the student ...

☑ Avoid being judgmental or discussing the moral issues of suicide

☑ Avoid promising secrecy or confidentiality to a student who is suicidal

☑ Don’t assume the student is “not the suicidal type”

☑ Don’t minimize the student’s concerns, such as “Things will get better—this is not worth killing yourself over.”

☑ Don’t take on the responsibility of being the only one helping a suicidal student

☑ Preferably contact CAPS with the student present to discuss your concerns or walk him/her directly over to CAPS for an emergency evaluation

Always remember to take care of yourself and to create an opportunity to discuss a crisis situation with a colleague or staff member at CAPS. Contact CAPS, Campus Safety or the Dean of Students Office if you have a concern regarding a student and suicide issues. In summary, Be Watchful, Listen; Take it Seriously and Get Help At All Times!

In the next issue, “Learning Disabilities and their Impact on College Life”

Beyond the Classroom is a joint effort of Counseling and Psychological Services (CAPS) and the Office of Student Affairs

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