

GUIDANCE FOR STAFF RESPONDING TO STUDENTS WHO REPORT SUICIDAL FEELINGS

Hearing that someone has suicidal feelings is likely to provoke strong feelings: alarm, helplessness, panic, the desire to act quickly and get help from elsewhere and to prevent the possibility happening.

It can be hard to think in such circumstances. However, a statement of suicidal feelings can carry a multitude of meanings. Though the impulse to act quickly is completely understandable, what the person is most likely to need is calmness, containment and understanding

What is containment? Firstly, not panicking, being able to listen to someone say they are or have been thinking of ending their life, without dismissal or denial. The impulse to pull away is itself completely understandable and talk of suicide is something hard to hear, but a quick pull away risks compounding the person's existing feelings of lack of self worth.

Although ultimately it is likely the person may need some professional help, we can all offer empathy, interest and concern, taking seriously what the other person is saying.

What can I say?

It is useful to let the person know that you want to give them a bit of time to hear more about how they are feeling as it sounds something major.

Some useful questions:

How long have you been feeling this way?

Are you feeling like this all the time or intermittently? Are there particular times these feelings are strongest?

What do you think is contributing most to this state at the moment?

Have you ever tried to end your life before? When? What was happening then? How did you get help then?

Does anyone else know how you are feeling now?

Have you made plans? Have you thought what you would do? When? Where?

What might stop you? Do explore the positive things in the person's life, including the fact they have come to talk to you

What support do you have currently?

What would you like me to do now you have told me? Is there anyone you would like me to tell?

Don't ask why, or dismiss any reasons mentioned. Explore how they are feeling now, take time, don't rush

Explore what it is the student wants to end: eg their depression, anxiety, pain, hopelessness or is it their actual life they want to end. Does death seem to be the only possible source of relief or can they imagine that other kinds of relief might be possible?

Suicidal thoughts don't necessarily mean there is an imminent risk. That doesn't mean that the thoughts should ever be ignored or minimised, just that it is helpful to get a sense of immediacy or urgency

It may be that the student is expressing immediate and short term feelings of despair, frustration or failure, without an actual intention. Don't feel you have to make that assessment, but do take some time to listen and help them clarify what is going

on. Reassure them that help is available both within and without the School, depending on the level of help that seems best.

NB Talking to someone about their suicidal thoughts has been demonstrated to reduce rather than increase risk. If a student is talking to you, they want you to know

What should I do?

If the student says the thoughts are constant, if they have made previous attempts, if they have a plan, if they are feeling immediately unsafe

Do get the student to the nearest Accident and Emergency Department (probably UCH), either by ambulance or with a friend

If the thoughts are less than constant, there is no detailed thought or plan and/or they do not feel immediately unsafe

Do urge the student to contact their doctors' surgery and make an emergency appointment and to contact the counselling service if they have not already done so. You may be able to help them make that appointment

Establish with them who they will contact if they feel unsafe eg friends, family, GP, A&E, SAaW and/or organisations listed in resources below

Check in with the student. Send a follow up email, perhaps with additional resources, if helpful you can speak to SAaW before you do so.

Do not offer confidentiality

What can Student Advice and Wellbeing provide?

Early intervention, exploration of the circumstances, containment and referral if needed

An expression of suicidal feelings will usually lead to a priority appointment

Where possible counsellors will see students at short notice where there is an urgent need, and in particular there are daily drop in times for immediate access

A visiting psychiatrist (monthly) who can assess students at risk

Liaison with local NHS Mental Health Crisis services

BUT

NB if there seems to be an immediate risk, linking with SAaW can come later, after emergency care has been established

What Student Advice and Wellbeing can't offer

Emergency psychiatric or medical care which may be necessary in extreme circumstances

Home visits to students who cause concern

Enforced intervention for students reluctant to seek help

Other resources

The Maytree www.maytree.org offers short-term accommodation with befriending in a confidential, supportive and non-medical environment for those in a suicidal crisis, located near Finsbury Park

Samaritans

www.samaritans.org 24/7 listening support
9am-9pm drop in service every day at 46 Marshall Street W1 (off Carnaby Street)
Student Nightline
www.nightline.org.uk 6pm-8am listening support by trained student volunteers

www.thecalmzone.net/
CALM, the campaign against living miserably, is a charity dedicated to preventing male suicide

www.papyrus-uk.org/help-advice/about-hopelineuk

HopeLine UK

A confidential support and advice service for young people under 35 who may be considering suicide or anyone worried about a young person

0800 068 41 41

Text: 07786209697

Email: pat@papyrus-uk.org

<http://listeningplace.org.uk>

Face-to-face support for those who feel life is no longer worth living. The Listening Place offers a warm and welcoming environment; somewhere that individuals can talk openly about their feelings without being judged or being given advice

GUIDANCE FOR STAFF RESPONDING TO STUDENTS WHO ARE SELF HARMING

There are likely to be a number of students who regularly or occasionally self harm eg cutting, burning, punching themselves

This behaviour is physically harmful and referral for counselling is recommended. **Self harm is not the same as a suicide attempt.** Rather than an expression of wanting to end life, it is often experienced as a comfort or coping mechanism, hard as that may be for others to imagine. However self harming behaviour and suicidal thoughts can co-exist.

As with an expression of suicidal thoughts, if a student tells you they self harm, a response that communicates empathy, interest and taking the information seriously is helpful, followed by a suggestion of talking to the counselling service.

Other resources

www.selfinjurysupport.org.uk/

For women and girls who self harm