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CAMPUS-BASED STRATEGIES TO ADDRESS SUICIDE BEHAVIOURS AMONGST STUDENTS AT INSTITUTIONS OF HIGHER LEARNING IN SOUTH AFRICA

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Abstract

Suicide rates among adolescents and youth are increasing regardless of the interventions to lower the risks. Therefore, preventing suicides at institutions of higher learning is a top concern for public mental health. This paper explores strategies that may be adopted to reduce suicidal thoughts among students in South Africa. The study analysed previously published data on student suicide at institutions of higher learning. Purposive sampling technique was used by the researchers to collect secondary data from various research platforms that were specifically focused on the topic at hand. The following databases were utilized because they offer multi- and interdisciplinary scholarly literature: Google Scholar, Jstor, EbscoHost, Proquest, Scopus, and Sabinet. This review highlight that there are a variety of causes for students' suicidal thoughts, and these causes are individualised. Suicide prevention strategies such as gatekeeper training programs for suicidal behaviours, implementation of suicide prevention awareness programs within campuses, digitalisation of the programs, counselling and psychotherapy are some of the strategies that universities can adopt to reduce the suicidal thoughts among students. Given the complexity of suicide, prevention must be done with extreme prudence and urgency. The more the complexity of the suicide process is understood, the more the need for consistent, significant efforts to empirically support and evaluate the prevention strategies. It is therefore imperative to implement comprehensive and multi-sector preventative programs in order to minimize these risk factors and enhance protective variables to the greatest extent possible.

Keywords: Suicide, Suicidal Thoughts, University Students, Adolescents and Youth

1. INTRODUCTION

According to the World Health Organization (2021), suicide is the 4th most prevalent cause of death among adolescents and youth globally, and it is one of the top five mental health problems affecting university students. The prevalence of suicide among young people has drawn the attention of the public and scholars (Mathieu et al., 2021; Lipson et al., 2022). Numerous studies have been conducted on the subject due to the substantial prevalence of suicide among adolescents and youth, providing the information needed to fully comprehend the situation. For instance, studies have demonstrated that suicide is widespread and affects university students more frequently than the overall population (Bantjes et al., 2019; Mortier et al., 2018; Pillay, Thwala, & Pillay, 2020). Altavini et al. (2023) found that the global suicide rates among adolescents and youth continue to increase regardless of the interventions to lower the risks. According to research conducted in South Africa by Bantjes et al. (2022), out of 1402 undergraduate students, 46.4% had suicidal thoughts which were the highest percentage as compared to suicidal plans (26.5%), and actual suicide (8.6%). Mortier et al. (2018) state that, preventing suicides on higher education institutions is a top concern for public mental health because suicide is among the primary causes of mortality for adolescents and youth, and it contributes to 6% of death among adolescents globally. The behaviour of students in South Africa who seek help is nevertheless a cause for concern given the negative impacts of suicide. The available studies routinely identify a wide range of risk variables at different areas. But there is one area where more focus has to be placed: the university environment. In accordance with analysis of the available literature on suicide among

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students, few studies have been done on practical prevention techniques, with the majority of research concentrating on risks or factors that lead to student suicide. Therefore, this article used interpretative analysis to examine the literature so as to propose strategies that may be applied to reduce the prevalence and negative impacts of suicides committed by students at institutions of higher learning in South Africa.

2. IMPLEMENTATION METHOD

This study employed a qualitative research methodology. According to Jackson, Drummond, and Camara (2007), qualitative research utilizes a variety of approaches, including methods that concentrate on text analysis and evaluation in order to comprehend what people experience in a compassionate, interpretative structure. The above description summarises the method that the researchers employed in the present study. The interpretive approach was used as the design. The purpose of employing this technique was to explore and describe the causes of student suicides at South African universities so as to come up with preventative strategies to address the problem. According to Bakhshi, Weisi, and Yousofi (2019), the most difficult aspect of qualitative research is interpretation. To develop ideas, data must be analysed in light of data that has been gathered. The 'why', 'how', and 'what' questions were the ones that the researchers in this study required to identify the majority of answers in order to understand the available data. Triangulation was used to assess the reliability of the responses to these questions. According to Jentoft and Olsen (2019), triangulation is a strategy where the researcher employs a variety of techniques, hypotheses, or sources of data available. Triangulation gave researchers the chance to comprehend the phenomenon they are studying more thoroughly and broadly.

Data was gathered and analysed using a literature review that involved reading and evaluating newspaper reports and peer reviewed journal articles. The following databases were utilized because they offer multi- and interdisciplinary scholarly literature: Google Scholar, Jstor, EbscoHost, Proquest, Scopus, institutional Electronic Theses and Dissertations (ETD) repositories, and Sabinet. To identify relevant content on this subject, a variety of keywords were used in a nonprobability, purposeful sampling approach. According to Lindgren, Lundman, and Graneheim (2020), interpretation in qualitative studies is a question of carrying out a careful and thorough analysis while possessing the bravery to look for the deeper significance that lies within the verbatim text. When analysing qualitative data, the researcher must transform the raw data by seeking out, evaluating, grouping, organizing, and summarizing themes and sub-themes within the raw data with the goal to comprehend and clarify them. This is the context in which the data in this study were interpreted. By demonstrating that independent metrics concur with or at least do not contradict an outcome, the use of several data collection techniques and sources aids in the support of a conclusion. The researchers in this study analysed the findings and concepts they developed from sources such the accessible literature, media reports, journal articles, and published data of other studies on the subject at hand in order to come with their recommendations. This was done to assure the veracity of the findings.

3. LITERATURE REVIEW

Theoretical perspective

This review adopted the Interpersonal Theory of Suicide (IPTS) by Joiner (2005). The IPTS states that, a suicide cannot be committed only by having suicidal thoughts since a person must also fight the biological and evolutionary pressure to live (Joiner, 2005). The author postulates that in along with suicide thoughts, there must also be the aspect of developed ability for suicide. According to Joiner (2005), people become more accustomed to the agony and fear of trying suicide as they have more painful and provoking events, like non-suicidal self-harm. As a result, the person gains the ability to try suicide. Van Orden et al. (2010) accord that, the potential for suicidal behaviour arises due to recurrent exposure to painful physical conditions and/or fear-inducing situations, which is mediated by different dynamics and adaptation. According to



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O'Connor (2011), suicidal thought arises from a person's perception of suicide as the only option as a result of feeling trapped by thoughts of embarrassment and failure. The suicidal thoughts appear when burdensome sentiments and feelings of alienation are particularly strong (Joiner, 2005). Suicidal thought develops when loneliness (lack of connection) as well as the belief that one is a burden to others (Astraud, Bridge, & Jollant, 2020). So, in order to attempt suicide, a student must possess a learned capacity for doing so, which is characterized by a high pain threshold and a lack of fear of dying. The IPTS proffer a helpful perspective for comprehending the function and significance of social ties and attachment mechanisms (Joiner, 2005). This theory contends that perceived burden and denied belongingness, which are two separate but related interpersonal concepts, are present at the same time as thoughts of suicide. When one's demand for connectedness is unmet, they experience the negative emotion of frustrated belongingness. The theory's central concept is that elevated levels of perceived burden and dissatisfaction in belonging to a particular group of friends lead to suicidal ideation. This implies that social ties and bonding mechanisms play a crucial role in the overall maturation and development of adolescents and youth. This therefore suggests that developing, maintaining, and promoting good connections among students may help to lower their thoughts of suicide and boost their capacity for resilience. Students must overcome their shyness and ask for advice from professionals in order to build this connection.

Causes of suicide at institutions of higher learning

Suicide does not have a single, identifiable cause. According to Dovchin (2020), there are a variety of causes for students' suicidal thoughts, and these causes are always specific to their circumstances and background. Everybody faces different challenges that may influence their decision. Nonetheless, there are regular "risk factors" that may increase a student's likelihood of experiencing suicide thoughts. The following risk factors have been identified:

1. Lack of support system

Numerous researchers have identified risk factors that contribute to suicide ideation. This includes a lack of support system, loneliness, insecure attachment patterns, and weak social bonds (Stradomska, 2019; Rohani & Esmaeili, 2020). During the tertiary education period, students meet different peer groups which along the way they become support structure for one another. Thus, students who lose their sense of belonging to a group or their relationships with key others may experience psychological issues like feelings of isolation which may lead to sadness and ultimately, suicidal thoughts. According to Dachew, Bifftu, Tiruneh, Anlay, and Wassie (2018), suicidal thoughts are reported to increase in response to the loss of any member of their social support network, on which they heavily rely. Consequently, it can be argued that a lack of social support encourages students to think of suicide because, at the time when they have nobody to turn to or confide in, they are likely to consider suicide as a last resort. This is the probable outcome of their intense distress and their lack of awareness of their thoughts, their inability to cope, or their uncertainty about what to do because they would be seen as failures in life.

Daily, university students encounter challenges and academic expectations (Brint, 2020). These pressures occur amid the social networks and other external support structures that students have to help them deal with difficulties in their lives. For instance, when students need help, they can access external support structures such as their family, friends, and other individuals such as lectures, psychologists, healthcare professionals, and so on. Given the assistance they receive through the aforementioned support systems, students will perform and accomplish more effectively if they are within reach through what they perceive to be support in their surroundings. Therefore, when the support structures are not available for assisting students, such students encounter suicidal thoughts. Dachew et al. (2018) postulate that there is a higher chance of increasing suicide ideation when there is less of this type of support. In addition,

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unfavourable relationships among students, such as the absence of friends, inactivity with friends, or rejection by friends, can also cause depression among students.

2. Presence of psychological disorders

Suicidal ideation is a common symptom of psychological disorders, particularly depression, which is the leading cause of suicide among students globally (Kaggwa, Najjuka, Favina, Griffiths, & Mamun, 2023). Psychiatric conditions such depression, substance abuse disorders, issues with adaptability, and competitiveness are directly linked to suicidal behaviour (Urme, Islam, Begum, & Chowdhury, 2022). Depression has been linked to a number of unpleasant life situations, including feeling hopeless, losing a loved one, breaking up, having disagreements with family or friends, failing an exam, experiencing severe emotional pain, and being unemployed (Mofatteh, 2021). However, stressful life events or chronic stress can result in profound emotions of distress and helplessness and raise the possibility of suicidal thoughts for individuals with psychological disorders like depression or anxiety. Circumstances in life that are challenging can set off suicidal thoughts in students who are dealing with mental disease symptoms like depression or anxiety (Lew et al., 2020). Suicidal ideation is also frequently experienced by adolescents and youth who suffer from signs of psychological disorders in general; these adolescents and youth want to end their uncomfortable thoughts and feelings, but they are unsure of how to do it. Instead of seeking assistance, they could battle in silence until they believe they are no longer able to.

Mental disorders can trigger depressive and dismal emotions, which can sap one's will to live. According to Bridge, Goldstein, and Brent (2006), mental illnesses and suicide are closely related. It further indicates that between 47% and 74% of suicide risk is related to mental problems (Bilsen, 2018). Lew et al. (2020) states that, the main risk factors for suicide among adolescents and youth are depression, anxiety, stress and hopelessness. They further highlights that coping strategies and orientations toward happiness, such as substance abuse, self-blame, and self-distraction, are considered to be negligible risk factors. Like other mental health disorders, suicidal thoughts may happen to anyone at any stage of life, sexual orientation, or background. In actuality, unmanaged psychological conditions frequently lead to suicide. Though prevalent, suicidal thoughts are not natural and often point to additional problems.

3. Family issues

The primary source of support for students is their family, which can also serve as a buffer against external challenges. Regretfully, divorce, single parenting, and separation are causing a shift in family arrangements. The different elements that influence family structures, many students do not receive enough assistance from their families when they most need it. According to Zhai et al. (2015), students from dysfunctional homes due to parental divorce or separation, or poor parenting practices, violent parenting, substance abuse in their home, and household mental disorders are more likely to experience suicidal thoughts than other students. According to Adewuya and Oladipo's (2020), witnessing violence at home, not living with the mother, previous and current academic setbacks, lack of close friends at school, and challenges interacting with parents and other individuals are linked to students' suicidal thoughts.

4. Sexual orientations

According to Desalegn, Wondie, Dereje, and Addisu (2020), female students are five times more likely to experience suicidal thoughts than male students. This is due to a number of notions, including hormonal variations, psychosocial stressors, and the behavioural model of learned helplessness, which suggest that women are more susceptible to psychological suffering.

There is evidence from a numerous studies conducted among tertiary students that LGBTQ (lesbian, gay, bisexual, transgender, and/or Queer) individuals are more likely than heterosexual people to experience suicidal thoughts, depression and anxiety disorders, alcoholism and other substance dependence, and intentional self-harm (Peltzer & Pengpid, 2016; Batejan, Jarvi, &



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Swenson, 2015). According to Taylor, Dhingra, Dickson, and McDermott (2020), students who are identified as LGBTQ reported experiencing bullying, mockery, and teasing because of their sexual orientations. Concerns about stigmatization and marginalization on campus were expressed by many students, particularly when they were refused access to restrooms or accommodation that was appropriate for their gender on school (Seelman, 2016). According to Gnan et al. (2019), these students claimed that they were routinely victims of crime and that their gender identity unintentionally caused them to self-harm and have mental health issues which trigger suicidal ideation.

5. Unwillingness to seek professional help/Societal stigma.

In institutions where support structures are available, students still fail to seek help for psychological disorders because of the societal stigma that still exists. There are stigmas associated with mental disorders in higher education institutions, which make students feel helpless and prevent them from seeking therapy. Students who suffer from mental disorders would rather not go to a psychiatrist or counselling centre because they fear that others will view them as mentally sick or as people with mental disorders. According to Bantjes et al (2020), undergraduate students frequently choose to obtain psychological support from relatives, close friends, or self-help rather than obtaining professional therapy from a mental health professional. Due to worries about anonymity, some students occasionally feel uneasy or insecure enough to discuss their issues with mental health specialists. Patterns of poor professional help-seeking are visible, and this makes it difficult to manage suicide among students (Rowe et al., 2014).

6. Adaptation problems coupled with university stressors.

Upon commencing their tertiary education, students face a variety of challenges as they adjust to the new environment. The majority of students live independently after being admitted to tertiary institutions, which exacerbates their sense of isolation. Most students attending public universities relocate from rural or peri-urban areas to metropolitan areas, where they encounter a variety of environmental changes, including new locations, densities of people, and urbanization along with cultural shifts, social connection shifts, and economic difficulties. There are several institutional-related stressors that have been associated with increased risk of suicidal thoughts among students. These include the transition from high school to tertiary institutions, financial support for education, housing, managing schoolwork, the pressure to perform well, and self- and family-health problems, and future planning (Lew et al., 2020). Moreover, heavy coursework problems with their personal lives, a lack of time for leisure, and harassment all contribute to stress among students (Granato, Smith, & Selwyn, 2015). Furthermore, Lipson et al. (2022) states that, students expressed feeling scared while requesting assistance from institution administrators and executives, as well as healthcare professionals. A more thorough examination of several studies reveals that students' depression is exacerbated by academic stress, which makes them more likely to think of suicide (Mofatteh, 2021; Kaggwa et al., 2023). According to earlier research, students from rural areas have higher levels of academic stress; hence, the variety of their socioeconomic backgrounds has an impact on their ability to succeed academically (Mutinta, 2022).

7. Alcohol and substance use

According to Asfaw, Fekadu, Tariku, and Oljira (2021), suicidal thoughts are more common in students with alcohol and substance use disorders. Since parental supervision at the tertiary institution level diminishes the addiction develops due to newfound freedom. They also utilize psychotropic substances to cope with stress related to relationships, social interactions, and academics. Many students became drug addicted because of peer pressure.

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4. RESULTS AND DISCUSSION

The following are suicide prevention strategies that universities can adopt to reduce the suicidal thoughts among students:

Gatekeeper training programs for suicidal behaviours.

Institutions of higher learning can use programs like gatekeeper training to increase staff members' understanding and capacity to assess students' risk levels and direct them for further care. Key gatekeepers in this case can be academic staff members and support staff such as residence administrators, healthcare professionals, student leaders as well as secretaries within the faculties or departments. The Question Persuade Refer (QPR) training can be adopted in this case to enhance gatekeeper abilities in identifying suicidal signs in students who might be at risk and enhancing understanding and capability to direct such students for assistance at the relevant facilities. Improved attitudes, perceived behavioural control, and personal standards over helping a suicidal person have been shown to be positively impacted by QPR training, along with increased awareness of suicidal thoughts and warning signs (Aldrich, Wilde, & Miller, 2018). Since the identified key gatekeepers frequently interact with distressed students, it will be advantageous to train them to identify behavioural patterns and other variables that put students at risk for suicide.

The QPR gatekeepers can be trained to probe about suicidal thoughts from students they suspect may be at danger of taking their own life. With this kind of training, they may then offer assistance and give the students who are at risk hope. Since unwillingness to seek professional help has been identified as one of the causes for suicidal thoughts among students, QPR will improve gatekeeper abilities, including directly inquiring about the existence of suicidal thoughts, persuading others to seek help, and making a recommendation to put the distressed students in touch with support. According to Black et al. (2023), gatekeeper training improves awareness of suicide, one's capacity to recognize individuals who are in distress, and one's confidence and comfort level when intervening and making referrals.

Implementation of suicide prevention awareness programs within campuses.

When creating initiatives to prevent suicide, it is important to consider the various variables that contribute to suicide, including mental health issues, complex families, troubled relationships, a lack of social support, financial difficulties, and academic stress. In order to address the concerning situation, this review recommends that colleges create suicide prevention initiatives including counselling and setting up follow-up care services for suicide survivors. To lessen the current societal stigma associated with suicidal thoughts, parent and student initiatives to raise awareness about mental health problems should be organized. It is highly advised to conduct a nationwide study in order to determine the prevalence of suicide among students at institutions of higher learning. Students can be made more aware of and sensitive to suicide prevention through institution-based awareness programs like orientation or induction. Campaigns for public awareness, informational and educational materials distributed through newsletters, pamphlets, and data visualizations, and emergency response programs housed in universities are examples of universal strategies.

According to Black et al. (2023), programs that included student education, promotional messaging, screening, and counselling were successful in enhancing students' level of participation with factors linked to suicidal thoughts. These programs were also linked to increased awareness and help seeking behaviours among students. Additionally, institutions of higher learning can introduce programs that specifically target students who are at risk. However, a study by Rowe et al., (2014), indicated that programs that focus on students who are at risk, like those that use screening and counselling encounter challenges because of anonymity principles which therefore have an impact on students' willingness to participate in such programs (Rowe et al., 2014). The effect of stigma around mental health on students in higher education may be reflected in their need



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for anonymity, as it has been demonstrated to be a significant factor influencing their willingness to disclose their mental health challenges.

Digitalisation of the programs.

Although awareness campaigns are suggested in this review as one of the strategies to address suicidal thoughts amongst students at institutions of higher learning, attending these programs may present challenges for students who are struggling with suicidal thoughts or psychological conditions. To address this challenge, programs should be accessible through different models of delivery. According to Jameson et al. (2022), digitalization of the awareness programs is one of the methods of distribution that this review suggests. This kind of delivery model may give students and other populations of interest a way to access programs at any time and from any location. Therefore, online programs could be a useful tool for increasing student participation in suicide prevention initiatives, and further research is needed to fully assess their efficacy.

Additionally, digital mental health consultations should be offered by the health centres within the institutions of higher learning. Virtual mental health consultations should be available to assist with behavioural health difficulties, in the same way that telemedicine for traditional physical ailments is expanding. Considering the rapid speed of development in the field of mental healthcare, universities should become knowledgeable about this field in order to provide their students with the greatest mental healthcare possible through the use of digital mental health consultations. According to research by King et al. (2015), providing students with the choice of online therapy based on the concepts of inspirational interviewing, as well as individual feedback, appears to have a beneficial effect on their willingness to explore and participate in treatment for psychological disorders.

Counselling and psychotherapy

Cognitive behavioural therapy may be effective in lowering impulsivity, reducing suicide thoughts, and enhancing negative problem orientation and emotion regulation. This kind of therapy could assist individuals at-risk to adopt better coping mechanisms (e.g. cognitive restructuring) when faced with academic and social challenges and all kind of pressures that lead to suicide thoughts and actions. According to research by Mann, Michel, and Auerbach (2021), cognitive behaviour therapy reduced the risk of suicidal behaviour in adolescents with depressive disorders and also reduced the rate of suicide re-attempts in half for patients who came to the emergency room after attempting suicide.

5. CONCLUSION

Given the complexity of suicide, prevention must be done with extreme prudence and urgency. Many factors, including a lack of psychological support, financial hardships, a history of prior suicide attempts, mental disorders, familial problems, and academic pressure, have been associated with suicidal behaviour among students. This study additionally highlighted that students are reluctant to seek expert assistance, and this may be the reason behind the increasing number of regular and repeated suicide incidents on campuses. We therefore conclude that psychotherapy and counselling are necessary psychological therapies for these risk factors. The more the complexity of the suicide process is understood, the more the need for consistent, significant efforts to empirically support and evaluate current and new prevention strategies. This is primarily a matter of policy targets, and it will improve the likelihood of effective strategies to tackle suicide among students. It is therefore imperative to implement comprehensive and multisector preventative programs in order to minimize causes of suicidal thoughts among students. Preventative strategies can be population-based (e.g., awareness campaigns on mental resilience, social media coverage, mental health promotion and education, specialized school-based initiatives, offering remote assistance and emergency hotlines etc.), as well as focusing on students who are

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identified as suicidal (e.g., following up on suicide attempts, and developing coping mechanisms for academic stress). This review also proposes that universities should implement systematic digital screening for suicidal behaviours among their students so that they can be helped before symptoms worsen. When used in conjunction with appropriate referrals for assessment and treatment, suicide risk screening can help discover otherwise unidentified at-risk individuals and potentially stop suicidal behaviour in students.

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