

## How To Refer

If a student is depressed and/or having vague thoughts of suicide, referring him/her to the campus counseling or health service is recommended. You can “normalize” help seeking by saying things like, “That’s what they are there for . . . they see a lot of depressed/suicidal students.”

If you think a student is at high risk for suicide, then it’s best to walk them to the counseling or health service. In other situations, it may be best to call for help and remain with the student until help arrives.

Always follow up with students directly to make sure they are getting the help that they need. If you would like guidance about how or whether to intervene with a student, feel free to consult with a counselor on campus.

## Treatment Steps

Typically, when students show up at the counseling or health service, an assessment will be conducted. One size never fits all, and treatment is tailored to what a student needs and prefers. Depending upon a student’s risk, needs, and wishes, professional staff will work with them to:

- Take immediate steps to ensure safety
- Eliminate alcohol and other risk factors
- Enhance support and other protective factors
- Engage them in individual or group therapy on campus or in the community
- Provide antidepressants or other medications

## Crisis and Treatment Resources

### WHAT IF A STUDENT REFUSES HELP?

Students experiencing suicidal ideation are sometimes unwilling or unable to accept referrals for help. Without professional support, these students can be at higher risk of suicide. If you encounter such a student, you should contact UO’s Suicide Assessment Team, a group of staff who meet regularly to discuss how to best support at-risk students. You can access the Suicide Assessment team through the University Counseling & Testing Center at 346-3227.

## RESOURCE LIST

University Counseling & Testing Center	541.346.3227
University Health Center	541.346.2770
Office of Student Life	541.346.3216
Emergency (Campus only, 24hr)	541.346.6666
UO Crisis Center (eve./wknd.)	541.346. 4488

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UNIVERSITY OF OREGON

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Oregon University Suicide Prevention  
Project

**suicide....**  
*and the university student*

# A Guide for Faculty and Staff

**Working together  
to create a healthy  
and safe campus  
community**

# Suicide is the second leading cause of death of U.S. university students

## The Challenge

While the university provides a rich landscape for intellectual and personal growth, many students also confront personal challenges, often for the first time. Research suggests that roughly 50% of students will experience depression during their university career. Suicide, though infrequent, is the second leading cause of death for university students. An astonishing ten percent of university students will seriously consider suicide in any given year.

## Understanding Depression

More than simple college blues, depression tends to persist over a couple weeks or longer. At the university, depression may show up as difficulty completing assignments, withdrawing to one's living quarters or sleeping through class. Students who are depressed may exhibit one or more of the following symptoms:

- Depressed mood
- Irritability and anger
- Diminished motivation and concentration
- Feelings of worthlessness or guilt
- Withdrawal from other people and previously enjoyed activities
- Sleep disturbance and daytime fatigue (e.g., yawning in class)

Sometimes depression resolves itself in the course of life as students work through personal struggles and utilize their support networks. However, when the depression is prolonged and/or intense, some kind of treatment may be required.

## Risks and Warning Signs

The risk for suicide appears to be highest in first-year and graduate students. Relationship breakup is a frequent trigger for suicidal thinking and behavior in young people. What may seem like a small bump in the road from your perspective can seem to a university student like a catastrophe.

Alcohol intoxication can mean the difference between thinking about suicide and making an attempt. Alcohol tends to aggravate depression and suicidal thinking. More than half of all suicides on campus involve alcohol or other drugs. Moreover, when inebriated, suicidal students are more likely to engage in high risk behavior such as drinking and driving or boating, engaging in fights, and failing to wear seatbelts.

Young men are at unique risk for actually completing suicide, with 6 men for every woman dying by suicide in the 18-24 year-old age group. Men in American culture are taught to mask their emotional pain and to avoid asking for help, making it difficult for others to recognize their depression and suicidal thinking. In addition, men frequently express depression in less obvious ways, such as via anger and conflict, increased alcohol and drug use, physical complaints and diminished motivation and productivity.

## Know the warning signs.....

People who are suicidal most often give some clues to that effect. To help someone at risk of suicide, first you must be able to recognize the warning signs:

- Hopelessness
- Talking openly or indirectly about ending one's life
- Taking unnecessary or life-threatening risks
- Giving away personal possessions
- Gaining access to lethal means (e.g., firearms, pills)

## How You Can Help

If a student talks or writes about suicide or shows the other warning signs, you should take this very seriously. Share your concerns about what you've observed, and engage the student in a supportive dialogue. Even one person showing genuine concern is a protective factor against suicide.

Some helpful tips for this communication include:

- Create privacy and remove distractions. Give the student your full attention.
- Talk openly, candidly and calmly.
- Do not promise to keep what the student tells you confidential. You may need to get support for the student and for yourself.
- Ask about suicide. Be direct. For example, ask, "Are you feeling so bad that you've thought about killing yourself?" Or "What did you mean when you said I might not see you again?" Simply asking these questions will not put the idea of suicide into a student's head.
- Avoid judgment, anger and/or blame. (For example, don't say, "You wouldn't do something crazy, would you?")
- Let the student know that you care about her/his welfare and that s/he is valued member of the community.
- Draw out what keeps the student connected to life (e.g., pets, passions, loved ones) and try to instill hope that life could be better in the future.
- Talking to a suicidal student or colleague can feel like a huge responsibility. But remember – you are not alone. Others on campus are available to assist you.