



# UMMEED

Understand, Motivate, Manage, Empathize, Empower, Develop

## Prevention of Suicide

### *Guidelines for Schools*

**Department of School Education & Literacy  
Ministry of Education  
Government of India**



*Every Child Matters*

## CONTENT

<b>1. Introduction</b>	<b>1</b>
<b>2. Why Suicide Happens?</b>	<b>1</b>
Myths and Facts about Suicide	2
Factors Influencing Suicide	3
Warning Signs of Students at Risk	4
<b>3. Suicide Prevention: Plan of Action for Schools</b>	<b>5</b>
I. Setting up of School Wellness Team (SWT)	6
II. Promoting Positive School Environment	7
III. Building Capacity for Suicide Prevention	7
IV. Immediate Response for Supporting Students at Risk	9
V. Appraisal of Actions taken by School	12

## INTRODUCTION

Mental health and well-being is an integral part of holistic development. The National Education Policy (NEP), 2020 has envisioned the aim of education to be holistic, including both cognitive and affective aspects. The policy has emphasised not only on learning based on developing cognitive competencies, but also skills, attitudes, and behaviours which will enable building character and creating holistic and skilled individuals, equipped with key 21<sup>st</sup>-century skills. This vision entails the need to promote mental health and well-being among students, which plays a prominent role in all aspects of an individual's life. World Health Organization (WHO, 1948) clearly states that "*Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.*" WHO further states that mental health is a state of mental well-being that enables people to cope with stresses of life, realize their abilities, learn and work well, and contribute to their community.

Skills like understanding, expressing, and regulating emotions, as well as the ability to adapt and cope with challenging situations, are essential for good mental health and well-being. Taking steps to protect and enhance an individual's mental health and well-being is crucial for a fulfilling and happy life. When students are not able to manage their personal-social issues and concerns effectively, it can have severe consequences, like constant feeling of sadness, dissatisfaction and frustration, mood swings, feeling of hopelessness, etc. and in extreme cases may also lead to self-harm, including suicide.

'*Every Child Matters*' is the underlying belief in developing the Guidelines for prevention of suicide. With this vision, efforts need to be directed towards prevention of suicide in schools. The guidelines provide directions to schools for enhancing sensitivity, understanding, and providing support in case of reported self-harm. In addition, the guidelines also emphasise nurturing partnerships between school, parents and community, for fostering societal support as a critical strategy for preventing suicide and reducing the stigma associated with suicidal behaviour.

## WHY SUICIDE HAPPENS?

Suicide is a complex interplay of personal and social factors, which is rarely caused by a single circumstance or event. It has an impact on the family, school and community at large. Students go through many transitions during their school life which can cause extreme stress, for example, transition from home to school, from one school to another, school to college, losing a parent/sibling/friend/near and dear one, etc. Along with this, children also experience changes as they progress through the developmental stages, leading to concerns such as those related to physical changes and appearance, peer pressure, career decisions, academic pressure, and many more. Amidst these challenges, a single insensitive comment has the potential to inflict lasting harm. It is important to discard damaging notions, including comparisons with peers, the perception of failure as permanent, and the sole measurement of success based on academic performance.

Every individual attempts to cope with such stressful situations. When attempts to deal with the stressor by the individual are not successful, and it is felt that no help is available,

the individual feels hopeless and finds it difficult to endure the distress. It is under such situations that suicide becomes a desperate attempt to escape the pain and hopelessness. An individual with suicidal thoughts experiences feelings of helplessness, hopelessness, isolation and self-hatred. They are not able to see alternatives or any way of getting respite from the situation except for ending their suffering through death. It is well-known that before taking the extreme step of ending one's life, an individual communicates their distress through actions, feelings or behaviours. These serve as warning signs indicating the possibility of self-harm, and when these are timely identified, loss of a life can be prevented. However, these signs can be fatal if missed by those around the individual.

The reasons for suicide are complex and differ from individual to individual. It is also important to know that at times, suicide can be an impulsive act that can take place due to immediate stress-causing events. Every suicide is a clear reminder of compromised mental well-being at the individual's level and ineffectiveness of the preventive and well-being promoting mechanisms around the individual.

## Myths and Facts about Suicide

Effective understanding of suicide requires clarity on what is the reality and what are the popular beliefs or myths. Myths develop over the years and predispose even the informed and educated to perceive it in the wrong way. Dispelling these misconceptions and providing correct information will help schools in creating appropriate awareness and also help in the accurate identification of warning signs of suicide.

### *Some Myths and Facts about Suicide*



## Myths

1. Those attempting suicide never give out any warning signs.
2. Talking about ending one's own life is always an attention-seeking behaviour.
3. Discussing suicide with an individual at risk may increase their likelihood of attempting it.
4. One who has decided to attempt suicide cannot be stopped.
5. Anyone who attempts suicide is weak, coward and only thinks about oneself.
6. Seeking help and sharing problems do not help.



## Facts

1. Suicidal intentions are often expressed through words or actions which may go unnoticed.
2. Any sharing of suicidal thoughts or self-harm attempts is to be taken seriously and responded to with sensitivity and care.
3. Discussing suicide encourages open communication, a necessity for prevention of suicide.
4. Timely support and intervention can prevent suicide.
5. Those attempting suicide perceive death as the last available option to overcome extreme distress.
6. Seeking help shows strength, and opening up about one's distress with a trusted person can help in getting support.

## Factors Influencing Suicide

Acknowledging that each life is valuable and providing adequate care and protection to each child is important. The vision of 'Every Child Matters' demands an understanding of the crucial steps towards prevention of suicide. The first step would be to acquire knowledge of these underlying factors that influence an individual. Some of these serve as buffers in protecting the individual, while others increase the risk of mental health concerns. Though these factors may not always be obvious, they play a significant role in shaping an individual's style of coping and in building resilience. These factors can be divided into risk and protective factors functioning at the level of individual, school, family, and community. Also, it should be noted that there are no demarcated boundaries at the level of individual, school, family or community and the factors need to be seen as interrelated. For example, supportive relationships are protective at school, family and community levels. Further, the multiplicity and intensity of these factors have a direct bearing on the individual's status of being at risk.

### *Suicide: Some Risk and Protective Factors*

	<b>RISK FACTORS</b>	<b>PROTECTIVE FACTORS</b>
<b>Individual</b>	<ul style="list-style-type: none"> <li>• History of depression or other mental illnesses, adverse childhood experiences (abuse, violence, etc.)</li> <li>• Previous attempts of self-harm/suicide</li> <li>• Hopelessness</li> <li>• Addiction to social media, gaming, substance use, etc.</li> <li>• Poor self-esteem</li> <li>• Chronic pain, or terminal illness</li> <li>• Impulsive violent behaviour</li> <li>• Internal pressure to perform well in life</li> </ul>	<ul style="list-style-type: none"> <li>• Having a purpose in life</li> <li>• Healthy coping and problem-solving skills</li> <li>• Willingness in seeking help</li> <li>• Ability to identify and manage one's emotions</li> <li>• Positive self-esteem</li> <li>• Regular pursuit of hobbies, sports, or creative activities</li> <li>• Engagement with studies or other school activities</li> <li>• Knowing one's strengths and weaknesses</li> </ul>
<b>School</b>	<ul style="list-style-type: none"> <li>• Negative school environment: Lack of positive relationships with peers/teachers, discrimination, bullying, harassment, humiliation, isolation, etc.</li> <li>• Critical periods: Exams, results or stressful PTMs, transition phases</li> <li>• Absence of school-family connect</li> <li>• Academic pressure from school</li> </ul>	<ul style="list-style-type: none"> <li>• Positive school environment: Enriching activities, supportive peer/ classmates/teacher relationships, etc.</li> <li>• Open connection between school and family</li> <li>• Promotive mental health care practices: Focus on social-emotional learning, accessible mental health services, building key skills such as resilience, communication, etc.</li> <li>• Career support practices</li> </ul>

<p><b>Family</b></p>	<ul style="list-style-type: none"> <li>• Family conflict and instability (divorce, separation, financial hardships, etc.)</li> <li>• Parental neglect/ abuse, lack of acceptance/recognition by family members</li> <li>• Loss of a loved one</li> <li>• Family history of suicide, parental mental health issues</li> <li>• Sibling rivalry</li> <li>• Criticism/ bullying by family members</li> <li>• Unrealistic expectations to perform well in academics</li> <li>• Pressuring students into preparing for competitive examinations</li> </ul>	<ul style="list-style-type: none"> <li>• Strong and healthy bonds with family members</li> <li>• Secure, stable, and safe home environment</li> <li>• Peaceful and effective conflict resolution practices</li> </ul>
<p><b>Community and Society</b></p>	<ul style="list-style-type: none"> <li>• Stigma associated with help-seeking and mental illness</li> <li>• Community practices of discrimination and deprivation</li> <li>• Lack of access to mental health care</li> <li>• Community violence</li> <li>• Sensationalized and insensitive reporting of suicide cases in media</li> <li>• Experiencing a disaster or emergency</li> </ul>	<ul style="list-style-type: none"> <li>• Strong social support networks</li> <li>• Accessible mental health services and resources</li> <li>• Reduced access to lethal means of suicide among people at risk</li> <li>• Cultural values encouraging valuing of life</li> </ul>

Students with an awareness of their strengths and weaknesses, and having a sense of self-worth and responsibility towards own well-being will be better able to explore alternative ways to deal with difficult situations and make effective choices to handle perceived difficulties.

Efforts need to be directed towards reducing the risk factors and strengthening protective factors. As mentioned earlier, these factors may influence independently or have a cumulative effect.

### **Warning Signs of Students at Risk**

The warning signs are indicators that a student is at risk of suicide. Identifying the warning signs is important to provide timely support to students, as it is these signs which would lead to identifying those at risk of harming themselves.

Warning signs with exemplar statements are given on the next page to help teachers and other stakeholders understand the behaviours, feelings, and actions of students at risk.

FEELINGS
<b>Hopelessness:</b> <i>Statements such as, “Things will never get better”, “There is no point in trying anymore”</i>
<b>Helplessness:</b> <i>Statements such as, "No one can help me with my problems, “I cannot see a way out”</i>
<b>Worthlessness:</b> <i>Statements such as, “I’m useless”, “I am not important to anyone”</i>
<b>Guilt, Shame, Self-hatred:</b> <i>Statements such as, “I am a burden on others”, “I am ashamed of myself”</i>
<b>Irritability, Exhaustion:</b> <i>Statements such as, “I feel so tired physically and emotionally”</i>
<b>Persistent Sadness:</b> <i>Statements such as, "I feel sad all the time, and I don't know how to stop this feeling"</i>
BEHAVIOURS
<b>Withdrawal from Social Interactions:</b> <i>Withdrawing from friends, classmates, family</i>
<b>Lack of Concentration:</b> <i>Such as being absent-minded, forgetful, and/or restlessness in class</i>
<b>Sudden Mood Changes:</b> <i>Sudden mood shifts without any known cause, Sudden spurts of anger/ crying</i>
<b>Verbal Cues:</b> <i>Statements such as, "I won't be around for long”, “All my problems will end soon”</i>
<b>Change in Appetite/Sleeping Pattern:</b> <i>Increased or decreased appetite and/or disrupted sleep schedule</i>
<b>Neglecting Personal Care:</b> <i>Such as uncombed hair, ruffled clothes, not taking care of belongings</i>
ACTIONS
<b>Lack of Participation:</b> <i>Losing interest in previously enjoyed school activities</i>
<b>Indulging in Reckless Behaviour:</b> <i>Being careless about safety, Use of substances (smoking, alcohol, etc.)</i>
<b>Talking about Self-Harm or Ending Life/ Destroying Belongings:</b> <i>Talking, writing and/or using social media to share thoughts of self-harm, destroying personal belongings, etc.</i>
<b>Decline in Performance in School Activities:</b> <i>Poor attendance, Decline in overall quality of academic and other school work</i>
<b>Becoming Detached:</b> <i>Returning gifts to friends for no reason, Saying goodbye to classmates, No excitement expressed in meeting friends</i>

## SUICIDE PREVENTION: PLAN OF ACTION FOR SCHOOLS

Prevention of suicide requires a comprehensive approach, wherein the entire school as a team works to address the issue. Actions towards prevention of suicide involve:

- Taking proactive steps to identify students exhibiting warning signs and thereby at risk for self-harm, creating a dedicated team in school, promoting a supportive school environment, and building capacity of the stakeholders.

- Responding immediately to situations where a student is at risk (either displaying warning signs or has been seen taking actions leading to self-harm).

The following section describes in detail

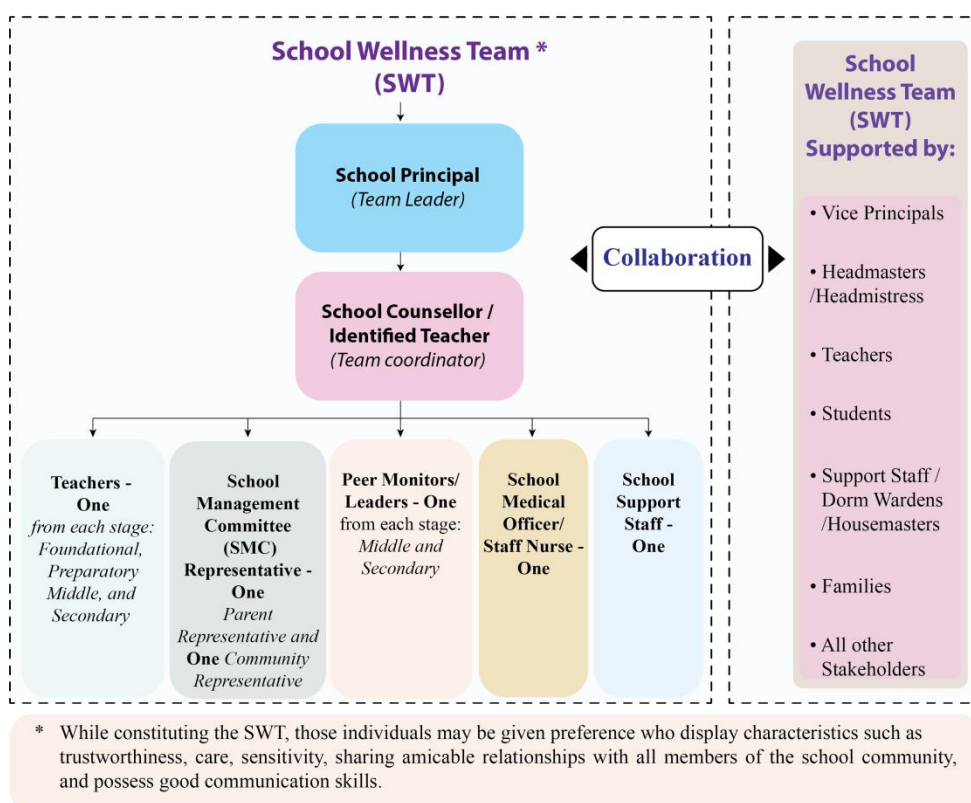
- I. Setting up of School Wellness Team (SWT)
- II. Promoting positive school environment
- III. Building capacity for different stakeholders
- IV. Responding immediately and supporting students at risk, and
- V. Appraisal of actions taken by school

## I. Setting up of School Wellness Team (SWT)

Preventing suicide requires implementation of effective measures, which is a collective responsibility shared by the entire school community. Therefore, schools need to adopt a comprehensive team approach in identifying those students who are at risk and in taking immediate action when a student proceeds to harm oneself. To make effective efforts towards preventing suicide in schools, a dedicated team is most essential. A School Wellness Team (SWT) may be formed under the leadership of the School Principal, where each member of SWT is oriented in handling crisis situations. When a student displaying warning signs has been identified by any stakeholder, they need to be reported to the SWT, which takes immediate action. The SWT will also play an important role in implementation of school activities directed towards creating awareness about mental well-being, leading towards suicide prevention. **However, SWT alone will not suffice in a school's efforts towards prevention of suicide and would require the support of all stakeholders.**

It is suggested that depending on the resources available within school the SWT be reconstituted on a regular basis to give all stakeholders in the school the opportunity to build awareness and capacity. Additionally, it is important for the school to review the effectiveness of SWT and its functioning on an annual basis.

### Composition of School Wellness Team





## II. Promoting Positive School Environment

To be prepared for responding to a crisis situation, it is also important to promote and strengthen the protective factors and reduce the risk factors. A positive school environment can play a pivotal role in supporting student well-being and reducing the risk of suicide. Raising awareness about mental health is an integral part of creating a positive school environment. It promotes open dialogue, which can reduce stigma associated with seeking help and encourage students to reach out for support without fear of judgment or isolation.

Schools by promoting a positive environment, can reduce the risk of isolation, despair, discrimination and the occurrence of suicide and at the same time equip students with the necessary skills and support to cope with various challenges.

*Actions for promoting a positive school environment:*

### **Encouraging Peer Support**

*(Reinforce peer interactions, learning, support, etc. through group activities, clubs, events, etc.)*

### **Organising Activities on a regular basis for Relaxing /Reducing Stress**

*(Yoga, Meditation, Art, Music, Gardening, Dance, etc.)*

### **Providing Channels for Expression**

*(Outlets such as access to a trained counsellor, help boxes or suggestion boxes to express concerns and seek help)*

### **Compiling Resources to Seek Support**

*(Helpline numbers, phone numbers and email ids of Counsellors and SWT members, brochures and pamphlets on causes, risk factors, protective factors, warning signs, etc.)*

### **Integrating Mental Well-being in School Functioning**

*(Including aspects of mental well-being in daily interactions, open discussions, assembly time, different programmes, subject-teaching, etc.)*

### **Creating a Safe Environment in School and Beyond**

*(In school: Locking empty classrooms, lighting up dark corridors, cleaning gardens and areas with excess growth of grass*

*Places beyond school: Vigilance at railway tracks, river banks, bridges, cliffs, medical shops, etc.)*

### **Encouraging School-Community Partnerships**

*(Collaboration among all stakeholders: School administrators, teachers, counsellors, students, medical staff, supporting staff, parents, and community)*

### **Building Awareness about Mental Well-being among all Stakeholders for**

- a) Understanding Protective Factors and limiting Risk Factors for Mental Health and
  - b) De-stigmatising mental health concerns (such as anxiety, depression, suicide, substance abuse) and encouraging talking/sharing about them
- (Through Role plays, Storytelling, Nukkad natak, Rallies, Posters, Exhibitions, Annual Day themes, etc.)*

## III. Building Capacity for Suicide Prevention

In order to effectively prevent suicides and ensure appropriate and timely response in situations of crisis, schools must actively work towards building the capacity of all stakeholders which includes all teachers and school staff, students, families of students and other stakeholders. An important step in this direction is to enhance their knowledge and

skills in recognising warning signs, providing support, and responding promptly to students at risk. The chart below delineates the various areas for capacity building of all stakeholders in the school.

*Capacity Building of All Stakeholders in School*

For Whom	Areas to be Covered	How and When	By Whom
<b>All School Teachers</b> <b>Non-Teaching Staff</b> <b>Students</b> <b>Parents and Community</b>	<p><b>Recognising Risk Factors and Protective Factors and Identifying Warning Signs:</b></p> <p>Understanding and Recognising:</p> <ul style="list-style-type: none"> <li>• Risk Factors and Protective Factors (<i>Refer to pg.3</i>)</li> <li>• Self-harm or suicidal intentions, changes in behaviour or appearance which indicate that a student is at risk (<i>Refer to pg. 4</i>)</li> </ul> <p><b>Immediate Response for Student At-Risk</b></p> <ul style="list-style-type: none"> <li>• The immediate action to be taken on identifying a student at risk (<i>Refer to pg. 9</i>)</li> </ul>	<p><b>Orientation (minimum one) in the academic year,</b> preferably in the beginning of the school academic session. An experiential session for ‘Immediate Response for Supporting Student at Risk’</p> <p><i>Orientation with Parents can be conducted during PTMs, Community collaborations can be sought with Local Community Heads</i></p>	<p>School Counsellor or Psychologist /Counsellor/ Social Worker identified by the school (<i>may consider those who are from immediate school community</i>)</p>
	<p><b>Information about School’s Referral and Support Resources:</b></p> <ul style="list-style-type: none"> <li>• Contact details of local referrals (such as Mental Health Professionals, Counselling helplines, etc.) including name, address and contact number compiled by School</li> <li>• Contact details (Phone Numbers and Email ids) of SWT members</li> <li>• Database to be available at school website, notice board outside office/counselling room</li> </ul>		<p>School Staff in charge of collating the resources</p>
<b>All SWT Members</b>	<p><b>Handling Crisis Situation:</b> The steps for managing the situation and providing adequate support when a student is at risk (<i>Refer to pg. 9</i>)</p>	<p><b>Orientation (minimum one) in the academic year,</b> for all SWT members, preferably immediately once</p>	<p>School Counsellor or Psychologist /Counsellor/ Social Worker identified by the school (<i>may consider those who</i></p>

	<p><b>Supporting Parents/Family of Students at Risk:</b></p> <ul style="list-style-type: none"> <li>• Extending support to parents/family of student at risk in providing a safe and supportive environment at home</li> </ul> <p><b>Using Referral and Support Resources:</b></p> <ul style="list-style-type: none"> <li>• Collating Information by school about resources for referral</li> <li>• How and when to make use of referral</li> <li>• Based on the assessment by the counsellor, the SWT to take a decision on referral which will be communicated by the Principal to the parents</li> </ul>	<p>the team is set up/ beginning of the academic session</p>	<p><i>are from immediate school community)</i></p>
		<p><b>Orientation (minimum one ) in the academic year</b></p>	<p>School Staff in charge of collating the resources</p>
<p><b>Parents, Family and Community</b></p>	<p><b>Supporting Students during Stressful Experiences:</b></p> <ul style="list-style-type: none"> <li>• Know-how of situations which can be stressful for a student (These vary for each student; some commonly reported concerns are due to exams, results, transitions between classes, re-joining school after vacation, discrimination, family problems, community/society related issues, bullying, harassment, humiliation, etc.)</li> <li>• Supporting the child at home and informing in school</li> </ul>	<p><b>Orientation (minimum one) in the academic year</b></p>	<p>School Counsellor or Psychologist /Counsellor/ Social Worker identified by the school (<i>may consider those who are from immediate school community)</i></p>

#### IV. Immediate Response for Supporting Students at Risk

Immediate response to at-risk students at risk can be categorised into two levels. The first pertains to students who are displaying warning signs and due to prevalence of risk factors in their life, makes them more vulnerable/prone to self-harm. The other addresses those students who are actively taking steps to harm themselves. Immediate action is required in both situations of at-risk behaviours, i.e., when the student is:

- A. Displaying warning signs
- B. Attempting self-harm

**Remember if a student displays any warning sign(s) even once, it is important to take immediate action. In such situations following actions may be taken to support the student.**

### **A. Immediate Response to Student Displaying any Warning Sign**

**Action by any Individual in School (Peers/Friends/Classmates/Teachers/Other School Staff, etc.)**

- Approach the student with care. Stay calm\*, do not show any distress.
- Gently talk to the student and try to understand how the student is feeling.
- Listen attentively and provide them a safe space to express their feelings.
- Suggest the student to talk to a teacher/ counsellor/SWT member or anyone the student feels comfortable with.
- Inform a SWT member about the student/situation.

**Action by SWT Member**

**1.** Stay calm\* and do not show any signs of distress. Make the student feel that you are there to help them. Do not give any judgment/comment on the situation/action/expression of feelings exhibited by the student.

**2.** Ensure confidentiality and gently ask the student about the warning signs you noticed. For example, *“I noticed that/I came to know that you are very upset (any other warning sign noticed). Is there something that you would like to share with me?”/“Can I help you in any way?”*

**3.** Encourage the student to talk. Let the student know that any information shared by them will be kept confidential (only be shared with concerned people who can help). This will help the student to calm down and express their feelings. Ask in a considerate manner - *“How are you feeling now? Is something bothering you?”* (If the student is not willing, do not force them to share). Let the student feel supported.

**4.** Listen attentively to the student. Encourage the student to talk to the school counsellor and seek support for their feelings/behaviours/actions in concern.

**5.** Share the information about the student’s warning signs and their responses with the school counsellor. Also, inform the school Principal about the incident and the actions taken so far.

The counsellor will take forward interaction with the student in the counselling sessions. In case a counsellor is not available in school, Principal in discussion with SWT will refer the student to a counsellor outside the school. The Principal will inform the parents, and share details of referral for taking further steps. Also, maintenance of records and follow up with the student will need to be taken up by the counsellor.

\*Staying calm and not showing distress or panic is essential and a prerequisite in providing support to the student

*In instances where warning signs go unnoticed or unreported, the student may prepare for the ultimate steps of taking their life. In such situations, the following actions may be taken to prevent suicide and save the student.*

## Immediate Response to a Student Attempting Self-harm

### *Action by any Individual in School (Peers/Friends/Classmates/Teachers/Other School Staff, etc.)*

- Stay calm\*, do not show any panic. Approach the student with caution.
- Address the student by name. Calmly remove all means of harm, if any, without using force.  
*e.g., "I see there is .... in your hand/ with you. Please give it to me." or "Would you please give me the pills or any other means of self-harm?"*
- Offer the student water/something to eat to stall immediate harm by diverting their attention.
- Simultaneously inform any SWT member about the action being displayed by the student.
- Gently continue talking to the student and try to understand their intent for self-harm.
- Do not leave the student alone until a SWT member arrives.

### *Action by SWT Member*

1. Reach the student's location as soon as possible.
2. Provide the student with a quiet and comfortable place which is well-ventilated and well-lit (like the counsellor's room) to sit and talk freely without the fear of others overhearing.
3. Assure that you are there to listen to their concerns.

*e.g.: "I am here for you. I will try to help you."*

4. If the student seems open to talking, then gently inquire about their concerns,

*e.g.: "You seem sad/anxious/stressed. Would you like to talk about it with me?"*

However, if you feel that the student does not want to share their concern, respect their choice, and explore with whom the student wants to talk, such as another teacher, parent, friend/classmate, etc.

Note: In case of a medical emergency, inform the medical officer and the Principal immediately. Further, the Principal will inform the student's parents/ guardian with due sensitivity and care.

5. If you feel that immediate harm has been stalled provide comfort to the student by listening and gaining an understanding of the problem. During the conversation explore if the student has planned or prepared for other modes of self-harm.

*e.g., "I'm sure you're going through a difficult time... Please continue. I am listening to what you are sharing."*

6. Once self-harm has been prevented, accompany the student to the counsellor. Here, the counsellor may begin the counselling process and if required take steps for referral and follow-up along with the maintenance of records.
7. Principal informs parents with sensitivity and assures support from school for counselling, referral, care in school, etc.

**Maintaining Records:** Ensure keeping a record of at-risk behaviours of a student and corresponding actions taken by school. Records are to be maintained by the school ensuring confidentiality and access by SWT members/ concerned persons only.

**Follow-up:** This is an essential step required in not only ensuring the safety of the student but also to understand the challenges. The SWT members need to connect with parents after the incident to follow up on the student. This understanding would help in extending need-based support to the student and avoid any such situation in the future.

## V. Appraisal of Actions taken by School

Periodic assessment needs to be undertaken by the school for continuous reflections on actions taken towards prevention of suicide. SWT and other stakeholders of school should meet at regular intervals to reflect on their experiences in implementing the guidelines and analyse the feedback received to identify areas that require improvement. This assessment should include a comprehensive review of existing practices related to promoting awareness, fostering a positive school environment, staff orientation, sensitization, recognizing warning signs, reporting protocols, and provision of immediate response.

Furthermore, feedback should be actively sought from various stakeholders including teachers, parents, and the wider community regarding the school's action for suicide prevention. Based on the insights gained from the evaluation and stakeholder feedback, improvements in the school plan can be initiated.

### Role of Principal

As in-charge of school and SWT leader, the Principal is the guardian of all students in the school, a leader of the teachers and responsible for the well-being of all. It is important that the Principal,

- Ensures that all concerned stakeholders in school community are sensitised and oriented to extend support to any student at risk.
- Sensitises concerned stakeholders to maintain confidentiality and support the student as and when required. In a situation of self-harm/attempted suicide or display of warning signs by any student, ensure that either the Principal or a SWT member reach the location/ contact the person as soon as possible and provide support.
- Ensures that medical services are provided in case of a medical emergency.
- Informs parents or guardians immediately with sensitivity, ensuring privacy, and avoiding the presence of others not involved. School Counsellor/SWT member should be directed to support the parents.
- If a parent/guardian is impacted by the incident and requires support, asks the school counsellor to provide support through few sessions or recommend them to visit a mental health professional for further expert intervention.
- Extends support to counsellor/ SWT for following up and supporting a student once referred.
- Informs the class teacher and subject teachers about the incident in a sensitive manner. SWT member and class teacher can work collaboratively to establish a system for providing peer support to the student at school.
- Ensures that SWT should maintain regular contact and connection with the student and their family to ensure on-going support and well-being.
- Schedules weekly meetings of SWT with the parents and class teacher to check on the student's well-being.

# Comprehensive School Plan for Suicide Prevention

