

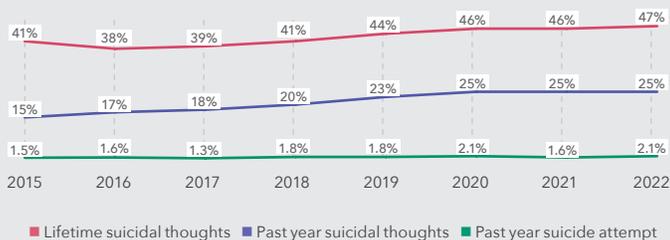
Suicidality and Help-Seeking

Partners in Prevention (PIP) is Missouri's higher education substance misuse consortium dedicated to creating healthy and safe college campuses. The coalition is comprised of 24 public and private colleges and universities in the state. The campuses in the coalition work to prevent high-risk behaviors by implementing evidence-based strategies. To measure progress and obtain data needed for the implementation of programs, PIP created the Missouri Assessment of College Health Behaviors (MACHB) survey. The MACHB is an annual, online survey that has been implemented each spring since 2007. The survey assesses the roles that alcohol, drugs (illegal and prescription), tobacco/nicotine, interpersonal violence, and mental health concerns have on student health and well-being. This brief will focus on suicidality and help-seeking among Missouri college students.

Trends in Suicidal Ideation and Attempts

Reported rates of suicidal ideation (thoughts of suicide) in the lifetime and in the past 12 months have risen among Missouri college students since 2015 as shown in Chart 1. In 2022, almost half (47%) of students reported experiencing suicidal thoughts in their lifetime, and 1 in 4 (25%) reported suicidal thoughts in the past 12 months. Reported rates of a suicide attempt in the past 12 months have remained relatively steady, ranging from 1 to 2% of Missouri college students.

Chart 1: Suicidal Ideation



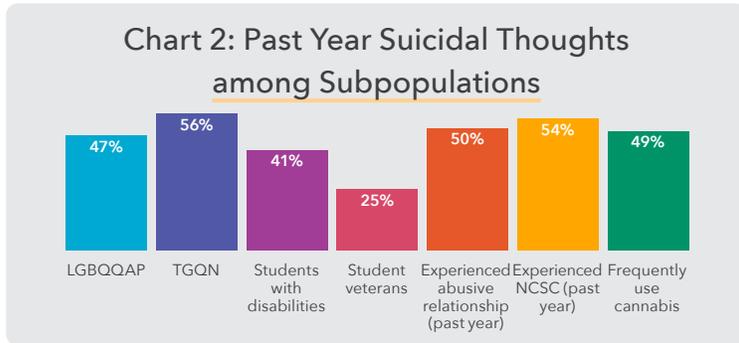
Subpopulations at Higher Risk for Suicide

While suicide can impact anyone, there are certain demographics and related risk factors that may indicate a higher risk for suicide (shown in Chart 2).

In general, data indicates that individuals in sexual orientation (LGBQQAP+: lesbian, gay, bisexual, queer, questioning, asexual, pansexual, etc.) and gender identity (TGQN: transgender, gender queer, gender non-binary, etc.) minority groups are at higher risk for suicide, and MACHB data supports this. Almost half (47%) of LGBQQAP students and over half (56%) of TGQN students reported suicidal thoughts in the past 12 months. Additionally, students with disabilities also reported higher rates of suicidal thoughts in the past 12 months (41% of students with disabilities compared to only 20% of students without disabilities). While data also indicates a higher risk of suicide among military veterans, MACHB data for student veterans/active U.S. military students shows the same rate of past 12-month suicidal thoughts as the statewide average (25%), though this could be in part due to the small percentage of students who identify as veterans/active U.S. military (2.4% of the survey sample).

Additionally, experiences of interpersonal violence in the past 12 months are associated with higher rates of suicidal ideation. Fifty percent (50%) of students who had experienced an abusive relationship and 54% of students who had experienced non-consensual sexual contact (NCSC) in the past 12 months reported

suicidal thoughts in that same time frame. Research has also shown an association between cannabis use and increased risk of suicide; 49% of students who frequently use cannabis (using cannabis 1 or more times per week) reported thoughts of suicide in the past 12 months (compared to only 19% of students who do not use cannabis).



Help-Seeking for Suicidal Thoughts and Attempts

Among those who reported suicidal thoughts or attempts in the past 12 months, 37% sought assistance for their thoughts/attempt(s). The highest percentages of students reported primarily seeking assistance at an off-campus mental health center (31%), from family/friends (26%), or their college/university counseling services (18%).

Students who reported not seeking assistance were asked about barriers that stop them from seeking help* (shown in Table 1). The most common reasons that contribute to students not seeking assistance are related to not thinking they need assistance (39%), the cost or lack of insurance coverage (34%), or stigma - such as experiencing shame (39%) or judgment from others (33%).

Table 1: What are the barriers that stop you from seeking assistance?

| | |
|----------------------------------------------------------|------------|
| I do not think I need any assistance | 39% |
| I feel shame | 39% |
| The cost is too expensive/my insurance does not cover it | 34% |
| I am afraid people will judge me | 33% |
| I have a fear of hospitalization | 32% |
| It is not helpful | 29% |

Bystander Behaviors and Encouraging Help-Seeking

Fifty-nine percent (59%) of Missouri college students have been concerned about a friend having suicidal thoughts or exhibiting suicidal behaviors in the past 12 months. Sixty-three percent (63%) of students say they would likely or very likely bring up the topic of suicide with someone they think is at risk, and 83% would refer someone who says they are thinking of suicide to a local resource. A new question on the 2022 survey asked students to report if they would want a peer to do something if the person thought they were in danger of harming themselves, and 85% of students agreed or strongly agreed.

Resources

Ask. Listen. Refer. (ALR) is a free online suicide prevention training program for colleges and universities. During the 20-minute ALR training program, participants learn about signs and symptoms of suicidal behavior, common myths about suicide, how to ask if someone is considering suicide, and how to make trauma-informed resource referrals. Participants are given a pre and post-test to evaluate knowledge, attitudes, and willingness to intervene. Find the training at asklistenrefer.org.

The National Suicide Prevention Lifeline has transitioned to 988, a 3-digit call and text number. The lifeline is available 24/7 and is also accessible online via chat. People can use 988 if they are having thoughts of suicide, mental health or substance use crises, or any other kind of emotional distress. People can also dial 988 if they are worried about a loved one who may need crisis support. [Learn more about 988 here!](#)

The Crisis Text Line (text MOSAFE to 741741) is also a 24/7 digital resource for anyone experiencing issues such as anxiety, depression, eating disorders, thoughts of suicide, and more. [Learn more about the Crisis Text Line here!](#)

Summary

As suicide is currently the second leading cause of death among college-aged individuals (18-24) it is vital to address the mental health needs and suicidality of Missouri college students. It is also important to promote help-seeking behaviors and work to eliminate barriers that may prevent students from seeking assistance. Encouraging bystander behaviors and equipping students to have conversations about

suicide (including how to refer others to resources) are evidence-based strategies that can also increase help seeking. For more information about a comprehensive approach to suicide prevention, [visit the Suicide Prevention Resource Center](#).

Contact Partners in Prevention at (573) 884-7551.

Report prepared by Margo Leitschuh, Communications Coordinator. Data prepared by Kayleigh Greenwood and Meg Mottola, Research Coordinators. Published September 2022.

*question is select all that apply