



The Hong Kong College of Psychiatrists Ltd.

香港精神科醫學院

(Incorporated in Hong Kong with limited liability)

Position Statement on Student Suicide, The Hong Kong College of Psychiatrists

One of the missions of the Hong Kong College of Psychiatrists is to promote mental health of people across all age groups in Hong Kong and to ensure early detection and interventions of mental disorders. Given an understandable heightened awareness of child and adolescent mental health issues, especially the recent tragic series of student suicide incidents, the Hong Kong College of Psychiatrists would like to make this statement expressing our deep concern and to also provide recommendations.

From the results of previous psychological autopsy done in Hong Kong, there is evidence showing having psychiatric problems is one of the most significant contributing factors to completed suicide (Eric YH Chen et al, 2006). About 80-90% of committed suicide cases suffered from mental illness and most of them had depression. However, only 30-40% of suicide cases were known to mental health service. Adequate resources in current psychiatric services, in tier 2 (out-reach child and adolescent mental health team at school) and also in tiers 3 and 4 (specialist child and adolescent psychiatric out-patient clinic, day hospital and in-patient services) are needed to ensure efficient and effective services for those identified patients who need timely psychiatric intervention. Destigmatization of mental illness is the main theme of the College's Public Awareness Committee public education work as that could minimize obstacle to access of service, enhance medication adherence and facilitate voluntary hospitalization of high risk /severe cases. Such service improvements should be provided in parallel with other improvement measures in improving primary prevention of suicide in the community,

With reference to a recent systematic review on interventions aimed at suicide-related behaviours in young people (Orygen Youth Health Research Centre, University of Melbourne), the College suggests that an evidence-based intervention at the school level should include the following elements:

- A. Universal preventive approaches – Delivering mental health education to whole school population being integrated as part of the school curriculum. This curriculum at primary and secondary school should include both theoretical as well as experiential learning on mental health. These interventions should have components that target enhancing knowledge of the risk factors and warning signs for suicide. The school SEN (Special Educational Needs) team should be under senior management of the school to facilitate the provision of resources and alignment of school policy.



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- B. Gatekeeper education and skills training – Training in suicide prevention conducted by mental health workers to frontline teachers and student leaders is shown to be effective in improving these stakeholders' knowledge and attitudes on suicidal behaviours. Such training will also enhance these stakeholders' confidence in early detection and prompt management of student-related suicidal behaviours.
- C. Screening programmes – Such programmes can successfully identify at-risk students that would otherwise not come forward for help. Such screening should be comprehensive and cover relevant mental health problems appropriate to the age groups. Blank screening for suicidal ideation and risks has a very low rate of detection of at-risk students.

Furthermore, in our past experience with the E.A.S.Y programme (Early Assessment Service for Young People with Early Psychosis), mental health promotion programmes directly implemented at school level is impressed as a more cost-effective means of education to students and teachers than general mass media campaigns targeting the general public.

Besides, the College also expresses specific concerns about the general mental well-being of our students within the current educational context. .

We believe our current school curricula are too achievement-oriented. The over-competitive school atmosphere and the developmentally insensitive teaching style would potentially affect the mental health of our young children in an adverse manner. Finland is well known for bringing up schoolchildren who are most physically fit and having highest academic results among all European nations. Finnish government has been promoting integration of physical education and outdoor activities in school curriculum, which is in contrast to the traditional class-room style teaching adopted in Hong Kong. There is a recent review published in the leading journal 'Science' (A Diamond et al, 2011) supporting the value of physical exercise in enhancing cognitive and affective regulation in school children. We therefore recommend advocating "Happy Kids Charter School" branding that encourages schools together with parents to adopt an all-round health education teaching style.



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Furthermore, building up resilience of children and youngsters is also an important measure in promoting overall better mental health. Resilience is a collection of protective factors (resources and assets) that are employed by an individual during times of disadvantages or adversities so to maintain a positive mental health. Studies about establishing resilience all highlight the importance of positive relationships in early childhood, healthy brain development, good self-regulation skills, community supports for families and learning opportunities. (DM Davydov et al, 2010; M Ungar et al, 2013; AS Masten 2013). We noticed that a group of researchers in University of Newcastle is doing a systematic review of universal resilience interventions targeting child and adolescent mental health in the school setting. We suggest we should take note of such research results and consider integrating more resilience building measures in our current school curriculum.

We hope the above information and recommendation would aid our policy makers to draft a more mental-health friendly education policy, so to tackle the mounting challenges as aroused by recent clusters of child and adolescent and youth suicides as well as the justifiable concerns of student's mental health issues.

Appendix

1. Happy Kids Charter
2. Look at MI program of the PAC of the Hong Kong College of Psychiatrists
3. What causes suicide?