

Republic of the Philippines
Department of Education
REGION IV-A CALABARZON



FTAD-RM-2024-812

11 November 2024


Regional Memorandum
No. 812 s. 2024

**STANDARD OPERATING PROCEDURES IN PREVENTING
SUICIDAL SITUATIONS WITH LEARNERS**

To: **Schools Division Superintendents**
All Others Concerned

1. In reference to DM-OUCI-2021-359¹, this Office through the Field Technical Assistance Division acquaints all Schools Division Offices, and Schools the standard operating procedures for preventing the suicidal situation with learners.
2. This ensures to prevention of suicide incidents in all schools in the region by providing clear, evidence-based guidelines for identifying, assessing and responding to suicide risk and creating a communication protocol for reporting and documenting suicide attempts or ideation among individuals and helps create a comprehensive approach that prioritizes safety, support and effective intervention strategies.
3. Attached to this memorandum are the standard operating procedures for managing suicidal situations with learners.
4. For clarifications, kindly contact Chief Michael Girard R. Alba, Rpm of the Field Technical Assistance Division and Learner Rights and Protection Office through 099138423994 or via email michael.alba@deped.gov.ph.
5. Immediate dissemination of this Memorandum is desired.

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¹ Counseling and Referral System for Learners for School Year 2021-2022



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**Standard Operating Procedures in Managing Suicidal Situations with Learners
(Reference: Counseling and Referral System for Learners for School Year
2021-2022)**

Consider and assess for risk factors for suicide. These include previous suicide attempts, depression, alcohol or drug use problems, other mental health conditions such as psychosis or bipolar disorder, severe emotional distress, chronic pain or illness, experiences of trauma (e.g. sexual and interpersonal violence, war, abuse, discrimination), recent loss (e.g. unemployment, bereavement, relationship break-up) or financial problems.

According to the World Health Organization (WHO), suicide is one of the leading causes of death among 15-19-year-olds, and half of all mental health conditions in adulthood start by 14 years of age.

WHO also identified the following signs to look out for among learners:

- expressing thoughts or feelings about wanting to end their life, or talking about feeling hopeless or having no reason to live;
- talking about feelings of loneliness, withdrawal from others or social isolation, being a burden to others, or being in unbearable pain;
- agitation, violence, distress, or difficulty communicating (observed during a consultation or mentioned as problems);
- change in eating or sleeping habits;
- signs of cutting or self-harm;
- arranging end-of-life personal affairs, such as writing a will; and/or
- absence of supportive family members or other psychosocial support.
- Provide the learner with the details of mental health professionals if possible and maintain regular contact, initially by making another appointment; and
- Activate psychosocial support by reaching out to family or friends and community resources, and provide details of community services including crisis lines.
- If the learner has a concrete plan, including the means and the intention to die, stay with the person, remove the means of suicide, consult other mental health specialists, and assign a family or staff member to stay with the person, so that they are not left alone until further specialist support is in place.

Suggested Procedures in Handling Suicide Situation

- a. Schools shall always take seriously all suicidal behavior and comments of learners.
- b. An interview with the learners will be immediately conducted once reported.
- c. When any peer, teacher, or other school personnel identifies a learner who has directly or indirectly expressed suicidal thoughts (ideation) or demonstrated other warning signs (i.e.: information on social networking websites, writings, art, or other expression of suicidal thinking/activities), suicide risk will be raised.

d. It is critical that any school personnel who have knowledge of someone with suicidal thoughts or behaviors communicate this information immediately and directly to a Registered Guidance Counselor to assess and refer the learner. The school head should also be notified so that the learner receives appropriate attention.

e. In case of critical or emergency situation

1. Call the law enforcement or security personnel if a learner possesses the means (gun, razor, rope, pills, etc.) to commit suicide or if the learner is not at school or has left the school, and a plan to kill oneself is discovered, or if the person is unwilling or unable to make a plan to keep themselves safe.
2. Attending school personnel should stay with the learner. No learner expressing suicidal thoughts should be sent home alone or left alone during the intervention process. The Guidance Counselor or attending school personnel must ensure that the learner will be endorsed to his/her parent or guardian. They shall immediately seek the help of other mental health professionals like a psychiatrist or psychologist.
3. The following questions adapted from Ask Suicide-Screening Questions (ASQ) of the National Institute of Mental Health, USA may be used to check the suicidal tendency of the learners:
 - Hinihiling mo ba ang iyong kamatayan sa mga nakalipas na linggo? (Did you wish you were dead in the past few weeks?)
 - Pakiramdam mo ba na mas bubuti ang iyong kalagayan at pamilya kung nawala ka na sa mga nakalipas na linggo? (Have you felt that you or your family would be better off if you were dead in the past few weeks?)
 - Nakakaisip ka bang magpakamatay sa mga nakalipas na linggo? (Have you been having thoughts about killing yourself in the past week?)
 - Nasubukan mo na bang magpakamatay dati? (Have you ever tried to kill yourself?)
 - Nakakaisip ka bang magpakamatay ngayon? (Are you having thoughts of killing yourself right now?)
 - If the learner answers “No” to all questions, screening is complete (it is not necessary to ask question #5). No intervention is necessary. However, clinical judgment can always override a negative screen.
 - If a learner answers “Yes” to any of the questions, or refuses to answer, they are considered at risk.
 - The learner should be referred for further evaluation.
 - Keep the learner in sight. The room should be clear of any dangerous things.
 - When there appears to be any threat of self-harm, contact the parents/guardian immediately. If the learner identifies safety risks associated with notifying a parent/guardian, contact another trusted adult or adult family member identified by the learner. If a parent is unavailable, call the National Center for Mental Health (NCMH) for help on mental health concerns through its new crisis hotlines: 0917899-USAP (8727) or 989-USAP.
4. The attending Guidance Counselor or school personnel should inform the school head about the suicidal tendency of the learner.
5. If the needed professional help is not yet available, the Guidance Counselor and parent/guardian must ensure the safety of the learner. They shall have an arrangement or plan on how to maintain safety at home, designate the responsibilities of each person, and include a review date to insure follow through and coordinated decision-making.

In consideration of the different scenarios in schools or division offices, number of RGCs, and other concerns, a Recommended Referral Mechanism depending on the situation is formulated. Refer to Annex G.

iii) Ensure partnerships with institutions and hospitals that provide psychiatric or mental health services for learners;

iv) Establish linkages with other government offices, NGOs, and groups relative to the mental health needs of schools;

v) Designate a Guidance Counselor supervisor;

vi) Ensure support and monitoring of the counseling and referral services.