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MENTAL HEALTH AT SCHOOL

Teen suicide crisis in schools sparks call for urgent action



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s://www.dailymaverick.co.za/author/bhekicsimelane/) By Bheki C. Simelane (https://www.dailymaverick.co.za/author/bhekicsimelane/)

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A disturbing number of suicides among school learners and staff underscores the critical need for robust mental health support in schools. Anxiety, depression, bullying and online abuse are fuelling the trend, with experts calling for immediate intervention.



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Warning: This article discusses cases of children who have died by suicide and are at risk of suicide.

nnually, one in 10 teenage deaths in South Africa is the result of suicide.

"This statistic aligns with research indicating that suicide is a leading cause of death among adolescents in South Africa, second only to motor vehicle accidents in the 15-24 year age group," said South African Society of Psychiatrists secretary Dr Alicia Porter.

"Studies have shown that suicide accounts for around 9% of teenage deaths, making it a significant public health concern."

Up to 20% of high school learners have tried to take their own lives.

"This is a concerning figure and points to a broader mental health crisis among the youth, with stressors like bullying, academic pressure, family dynamics, and socioeconomic challenges contributing to the high rates," Porter said.

"Statistics on learner suicides are troubling. While it is difficult to get precise numbers, reports suggest that about 23.5% of South African youth have experienced suicidal ideation."

The latest concerns over learners at risk of suicide stem from several recent deaths, including the death of a 14-year-old from Tsakani Secondary School in Gauteng.

Suicide deaths, incidents

In August 2024, two Grade 8 learners from Tsakane Secondary School, aged 13 and 14, appeared to have meticulously planned their suicides, leaving ample clues on social media.

Initially set for Sunday, their plan was delayed when one of the girls was grounded. On Monday, they consumed rat poison mixed with chips at school. Tragically, the 14-year-old died while her friend was admitted to the intensive care unit.

In August 2023, two pupils and a staff member died by suicide at Tsakane Secondary School. Another four learners survived suicide attempts at the school.

"We could not identify any challenges which could have led to the suicides and the deceased left no suicide notes," said Eddie Maseko, Tsakane's school governing body chairperson.

Read more: <u>Gauteng Education Department launches 'action plan' after increase in learner suicides</u> (<u>https://www.dailymaverick.co.za/article/2023-09-14-gauteng-education-department-launches-action-plan-after-increase-in-learner-suicides/</u>)</u>

According to the Gauteng Department of Education, four learners from Eqinisweni Secondary School in Ivory Park allegedly died by suicide between 26 April and 5 May 2024. The incidents all related to learners consuming poison.

In an incident that drew <u>significant attention (https://www.news24.com/news24/southafrica/news/i-saw-my-son-hanging-gauteng-mom-in-mourning-after-12-year-old-son-kills-himself-20231028</u>), 12-year-old Sibusiso Mbatha, a Grade 6 learner at Khehlekile Primary School in Thokoza, Gauteng, was found hanging in the bathroom at his house after allegedly being told by a teacher to quit "gayism". The deputy principal involved was subsequently suspended.

In another tragic turn, Diepsloot Secondary School faced the heartbreaking loss of two Grade 12 pupils who died by suicide in October 2023. One of the learners was allegedly driven to it by relentless bullying.

In August 2023, a Grade 10 pupil from the Soshanguve Secure Care Centre and a Grade 9 pupil from Kgetsi-Ya-Tsie Secondary School also died by suicide.

These are just some of the reported deaths.

According to Elijah Mhlanga, the spokesperson for the Department of Basic Education (DBE), schools are not mandated to report suicide data to the department.

Porter said suicide numbers might vary regionally, with schools in urban and rural areas facing different challenges.

She suggested that the impact of the pandemic was likely to have worsened mental health outcomes for learners.

Roshni Parbhoo-Seetha, project manager at the South African Depression and Anxiety Group (Sadag), reiterated that suicide statistics in the country were not up to date.

Commenting on some of the learner suicide cases, Parbhoo-Seetha said: "What we find is that it's a significant issue that rat poison is readily available in the market for a low R10," Parbhoo-Seetha said.

"What we need to do is highlight that rat poison is readily available."

Causes

The DBE's Mhlanga said a diagnosis by the department revealed that the causal factors varied.

"The reasons are wide and varied and include bullying, teenage pregnancy, relationship challenges, including with parents, substance abuse, academic failure and lack of family support, among others."

Porter concurred, "Several factors contribute to youth suicide in South Africa":

- Mental health issues: Depression, anxiety, and other psychiatric conditions often go undiagnosed or untreated and this is a significant factor as up to 90% of suicides are related to untreated depression. Although not all youth who are depressed are suicidal, those who are suicidal are more than likely to have depression.
- Bullying: Both in-person and cyberbullying are significant contributors.
- Substance abuse: Alcohol and drug use, prevalent among youth, increases impulsivity and the likelihood of suicidal behaviour.
- Family conflict: Domestic violence, broken homes and lack of support can make adolescents feel isolated.
- Socioeconomic pressures: Poverty, unemployment and financial insecurity affect family dynamics and increase stress for young people.
- Academic pressure: The pressure to perform well academically can overwhelm students.

In a response to a parliamentary question in March 2024, then-DBE minister Angie Motshekga told Parliament the department would provide schools with a Suicide Prevention Toolkit in collaboration with Sadag.

However, this has not yet been implemented in schools.

Possible solutions

Mhlanga said the DBE was actively collaborating with other departments, specifically Health and Social Development, as well as other partners to raise awareness and promote access to care and support for learners at risk.

"The DBE is currently finalising a multifaceted Suicide Prevention Toolkit. This toolkit will assist schools and partners to put in place strategies aimed at preventing learner suicide and promoting mental health," said Mhlanga. "In addition, the department is implementing several interventions to address drivers of suicide in teenagers, these include, bullying prevention, learner pregnancy prevention, GVB prevention, training of educators on mental health and substance use prevention."

Interventions

Porter recommended several urgent interventions:

- Increase access to mental health services: Schools should have regular access to psychologists or counsellors who can provide early interventions.
- Teacher training: Educators need to be trained to identify signs of mental health issues and respond appropriately.
- Peer support programmes: Empowering learners to support one another through structured programmes.
- Reduce stigma: Continued mental health awareness campaigns that reduce stigma around seeking help.
- Family support: Programmes that involve families in mental health education are essential to create a supportive environment for young people at home.

Read more: <u>We should be spreading the word about suicide among teens, experts urge</u> (<u>https://www.dailymaverick.co.za/article/2024-09-11-we-should-be-spreading-the-word-about-suicide-among-teens-experts-urge/</u>)</u>

"While the DBE has introduced various initiatives such as mental health awareness campaigns and access to counsellors for some schools, the overall support system is still lacking," Porter said.

"Many schools, especially in under-resourced areas, do not have sufficient access to mental health professionals, and teachers are often not adequately trained to identify or manage suicidal tendencies among learners." **DM**

Anyone who is experiencing suicidal thoughts should talk to someone they trust, or make contact with one of the 24-hour support lines, such as the South African Depression and Anxiety Group (0800-567-567) or LifeLine (0861-322-322).

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