

Exploring the Attitudes Of Students Towards The Effectiveness Of Suicide Interventions – A Case Study Of A Selected Institution In South Africa

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Abstract

This qualitative study examines the attitudes of university students at a selected South African institution regarding the effectiveness of current suicide interventions. The research uses a qualitative approach, utilising exploratory and descriptive designs and case studies. Data were gathered through twelve in-depth interviews. The study is guided by the person-centred theory, specifically client-centred therapy, developed by Carl Rogers. Results emphasise the necessity for tailored, student-centred strategies that incorporate cultural sensitivity and address known risk factors. Participants stressed the importance of a welcoming campus community and inclusive support resources. The findings suggest that by considering student viewpoints, offering a variety of support services, and fostering a friendly atmosphere, mental health professionals can enhance the effectiveness of interventions. The study recommends that interventions be contextualised, involve on-going student engagement, and undergo continuous assessment to better prioritise student mental health. By shedding light on student mental health issues via a context-sensitive lens, this study contributes reliable strategies for fostering resilience and well-being in higher education. It underscores the value of student involvement in designing and evaluating interventions, thereby advancing scholarship on culturally responsive and effective suicide prevention in academic settings.

Keywords: *Suicide Interventions; Student Attitudes; Mental Health; Higher Education; South Africa.*

Introduction

A student's suicide death is among the worst tragedies in our modern society. Despite the abundance of research on methods of preventing suicide, optimal practices, and counselling, the number of students dying by suicide is rising each year (Lange et al., 2023). This alarming trend raises a widespread concern about whether the current suicide interventions are adequate and effective in addressing the complex needs of students (Sagar-Ouriaghli et al., 2023).

Although research on suicide prevention is growing, there is a notable gap in understanding: student perspectives on these interventions are insufficiently explored, which can impede their effectiveness. According to Sagar-Ouriaghli et al. (2023), negative attitudes towards existing suicide interventions can worsen their outcomes. Reluctance and resistance towards getting support are rooted in individual ideas and perceptions at the university. This increases the risk of suicide because students may neglect necessary care. Individuals' distinct needs and circumstances are often overlooked in favour of a one-size-fits-all strategy in student interventions (Sheikhan et al., 2023). Consequently, this approach has the potential to make mental health interventions less effective.

To address this gap, the present study aims to explore students' attitudes and perceptions towards the effectiveness of existing interventions for addressing suicide in a selected institution in South Africa. The opinions and input of students, as seen through their lenses, are rarely included in evaluations of student suicide treatments (Walsh et al., 2023). Specifically, this study seeks to investigate how personal attitudes, cultural values, and individual experiences influence the overall effectiveness of current interventions. The specific objective is to explore students' attitudes and perceptions towards the effectiveness of existing interventions for addressing suicide.

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Literature Review

Suicide continues to be an important challenge in the public space despite the substantial advances made in understanding its causes and risk factors. This review of the literature strives to provide a thorough overview of the current suicide studies with an emphasis on contemporary interventions.

Perception of the Effectiveness of Interventions

Assessing the effectiveness of the intervention from the client's perspective is a fundamental aspect of evaluating mental health treatments. A number of research studies have shown that clients often approve interventions that empower them, alleviate distress, and enhance overall well-being. For instance, a study by Smith et al. (2018) revealed that clients viewed CBT as a potent tool for alleviating anxiety symptoms and enhancing overall well-being. Similarly, Johnson et al. (2019) revealed that mindfulness-based interventions, such as Mindfulness-Based Stress Reduction (MBSR), were perceived favorably by clients due to their role in reducing stress and increasing self-awareness. Furthermore, using a mixed-methods study, Brown et al. (2017), in a group-based intervention for depression, revealed high satisfaction levels among participants. These findings imply that client satisfaction is an integral determinant of the success of an intervention.

Factors influencing attitudes towards interventions

Considering nuanced aspects, personal beliefs and attitudes towards help-seeking and mental health, as well as the stigma associated with seeking help for suicidal thoughts or behaviours, are key factors that influence attitudes towards interventions (Clément et al., 2022). According to an American Psychological Association (2021) study, it is critical to understand the nuances of suicide risk, including the role of personal beliefs and attitudes. Clément et al. (2022) discovered that stigma has a small- to moderate-sized negative effect on help-seeking, implying that people who are stigmatised are less likely to seek help for mental health problems. Additionally, Keller et al. (2021) found that there was a significant correlation between small changes in stigma scores and meaningful reductions in attitudes towards professional care. Importantly, Hanschmidt et al. (2023) argue that exposure to mental health information and contact with persons who have successfully navigated treatment can reduce unfavourable attitudes. In numerous cultural contexts, societal standards exacerbate this issue, as mental health difficulties are frequently perceived as individual shortcomings. There is a complex and significant interplay between cultural and societal factors and attitudes towards mental health interventions and suicide. Research conducted by Yasgur (2017) and Onger (2022) has highlighted the necessity for culturally appropriate interventions that directly tackle these sociocultural factors.

Theoretical Framework

Person-centered theory

Client-centred therapy, also known as person-centred therapy or client-centred counselling was developed in the 1940s and 1950s by Carl Rogers. During the 1960s, person-centred therapy strongly bonded with the Human Potential Movement. This form of psychotherapy views human beings as individuals in contrast to diagnoses and is based on the fundamental premise that people are intrinsically motivated towards positive psychological growth. It is at this moment when a person can become their best selves. Rogers postulated that negative self-perceptions could hinder the process of healing and self-actualisation (Yao & Kabir, 2023).

Theoretical Application

The theory could be useful to the study of the effectiveness of intervention in committing suicide, as seen by the students (clients). Thus, this technique assumes that congruence, empathy, and unconditional positive regard are satisfied for therapy to be effective. In client-centred therapy, the therapist actively listens to the client's thoughts and feelings to fully understand their inner world. Empathy is a crucial component

of this approach. According to Rogers, reflecting is useful for exhibiting true empathy and supporting clients as they work through their emotions after hearing others express them. Congruency is essential in client-therapist interactions since the efficacy of suicide prevention therapy depends on the relationship between the client and the counsellor. Fortunately, authenticity, mutual trust, and positive emotions are essential to healthy relationships. Unconditional positive regard is another crucial element of client-centeredness, as articulated by Carl Rogers. This implies that the therapist provides constant acceptance and support to the patient rather than pronouncing judgement on them. This approach promotes psychological growth, increases self-awareness, and creates a safe environment for unlimited self-exploration. A friendly and comfortable setting is necessary to produce effective suicide interventions. Person-centred therapy is predicated on the client's innate drive for growth and self-actualisation, ultimately leading to therapeutic transformation. The idea strongly emphasises the advancement of humanity.

Methodology

Study Conceptualization and Research Domain

This descriptive and exploratory study took place in a selected university in South Africa, where mental health concerns and suicidal behaviour among students are becoming increasingly prevalent. The study was conducted in a designated higher education institution in the Western Cape, South Africa. The selected university is in the centre of Cape Town, Western Cape. The chosen university offers a distinct setting with a diversified student body, academic demands, and social dynamics that may contribute to suicide-related variables. The study informs educational techniques for boosting student mental health, well-being, and resilience by delving into this background. The study was motivated by an increase in student suicides and mental health difficulties, as well as a desire to understand better the elements that affect these concerns. The principal investigator was interested in this topic because students face challenges that are frequently untreated, such as relationship issues, financial stress, social isolation, and academic pressures. The study investigated university students' experiences and views of suicide-related issues, providing insights into support networks and interventions.

Research Approach

To investigate nuanced experiences and examine the attitudes of students towards the effectiveness of suicide interventions in a particular institution in SA, a qualitative research approach was taken for this study. This approach was adopted to fully comprehend the justifications, viewpoints, and driving forces behind the students' perspectives. This study's exploratory analysis of students' experiences, attitudes, and opinions was made possible by the qualitative research approach, which also gave researchers a rich and complex understanding of the background of the study.

Research design

This study used an exploratory and descriptive research design to address the present research topic. The utilisation of the exploratory study approach facilitated an extensive exploration of the phenomena of suicide, leading to a comprehensive understanding of the elements that motivate suicide as well as the experiences of those who are impacted. A thorough account of the participants' experiences and viewpoints was also made possible by the descriptive study design.

Methods of Data Collection

Students' attitudes and beliefs regarding suicide interventions were examined in this study using a cross-sectional, qualitative methodology. Twelve in-depth interviews with students were conducted. The researcher asked the subjects many questions to ensure adequate pertinent information to back up the analysis. With the participants' consent, the audio recordings of the interviews were made in a calm and relaxed environment. The students' attitudes and perceptions towards the effectiveness of existing interventions for addressing suicide and identifying factors that affect their attitudes were the main topics of the interviews.

Research instruments

An interview guide was used as a research tool in the current study. This guide consisted of a set of open-ended questions designed to explore the viewpoints, experiences, and ideas of students who were under investigation for contemplating suicide or having suicidal thoughts.

Sampling method and techniques

The qualitative study employed purposive sampling within the non-probability sampling framework to select those with experiences and knowledge to answer the research questions and aims fully. When participants were required to share their experiences and thoughts, nonprobability sampling helped them understand the study topic better. Purposive sampling was used to choose individuals with relevant experiences and knowledge, allowing for an in-depth examination of the research issue.

Study population

The researcher describes the study population in this research as students at a selected university.

Sample selection criteria

This study aimed to ensure data validity and precision by including individuals with suicide ideation within a specific time frame. The feasibility and accessibility of the target population were a determining factor. The study targeted students who sought professional assistance after attempting suicide or harboring suicidal thoughts. The inclusion criteria were explicitly stated during the recruitment process to ensure participants had relevant traits and experiences. The study excluded students who had not engaged in suicide ideation or attempted suicide but had not sought professional assistance from the university.

Unit of analysis

That is the exact number of samples that must be tested. The unit of analysis in this enquiry was 12. The elements noted above demonstrated the quality of the research.

Data analysis

Following Creswell's (2014) paradigm, the researcher employed theme analysis to interpret the enormous volumes of unprocessed data. The audio data was transcribed using this logical methodology and then underwent a thorough cleaning procedure to remove any extraneous or inconsistent content. Subsequently, the revised data underwent a methodical coding process to group related concepts together. Using this method, the principal researcher reduced the volume of data to logical themes that directly addressed the main research objectives (Creswell, 2014). In particular, the study examined the variables influencing suicidal ideas and actions as described by participants in their own words, offering an unvarnished viewpoint on the intricate problems related to suicide. Verbal quotes were expertly included in the research report to provide context and depth. Utilising Creswell's six-phase theme analysis methodology, the investigators made sure the qualitative data was thoroughly and methodically examined, producing meaningful results

Ethical considerations

Before the study commences, the researcher must adhere to essential safety protocols and ethical requirements (Ndebele, 2011). Strict ethical guidelines were followed in this student suicide study to guarantee a considerate and accountable research procedure. First, institutional approval was acquired via the appropriate authorities, the university's research ethics committee (REC), with clearance number REC/49XXIII02024, dated 10/04/2024, ensuring compliance with national and international ethical standards for research involving human participants. The researcher built strong bonds with gatekeepers, including university representatives, through courteous and expert communication.

Together with accompanying documentation such as the research proposal, consent forms, and interviewing guide, a formal request detailing the study's aim, methods, and possible advantages was made. The university helped recruit participants should the researcher need it, by communicating clearly about the study's voluntary nature and the informed consent procedure. Through information sessions, potential volunteers learned about the study and had the opportunity to ask questions and receive answers. Eligible participants gave their informed consent, guaranteeing their rights and welfare protection. Secure data storage and pseudonyms were among the steps to preserve confidentiality and anonymity.

This study protected the rights and dignity of all participants while providing important insights into student suicide by giving ethical considerations a top priority.

Presentation of Findings

The findings about students' perceptions of the efficacy of suicide interventions in a particular institution in SA, are shown in this section. The research participants' demographic information was presented in the first section of the findings, and the emerging themes followed.

Table 1: The demographic profile of the participants

Participant ID (Pseudonym)	Gender	Age	Ethnicity	Academic Year	Field of Study	Personal/history of mental concerns	Socioeconomic Insights
Anelisa	F	24	Black	4 th	BA Psychology	No	Middle class
Zethu	F	22	Black	3 rd	Bachelor of Social Work	Yes	Middle class
Mila	M	25	Black	3 rd	Bachelor of theology	Yes	Lower class
Siyavuya	M	27	Black	4 th	B. Ed	No	Lower Class
Viwe	F	27	Black	1 st	Bachelor of Pharmacy	No	Lower Class
Mlungisi	M	29	Black	2 nd	B. Accounting Science	Yes	Lower Class
Lelo	F	26	Coloured	3 rd	Bachelor of Oral health (BOH)	No	Middle class
Asiphe	F	30	Black	1 st	B Nursing	No	Lower class
Sipho	M	23	Black	2 nd	BA Sport, Recreation and Exercise	No	Lower class
Memo	F	27	Black	3 rd	BSc Chemical Sciences	No	Middle class
Nikita	F	31	Coloured	4 th	BA Psychology	No	Middle class
Cameron	F	23	Coloured	2 nd	Bsc complementary health science	No	High Class

Age

The participants' ages ranged from 22 (the youngest) to 30 (the oldest). The age distribution had no noteworthy extreme values, which is generally stable. Based on the South African demographic profile, this population was classified as youth. Perhaps the need to investigate suicide episodes involving this group is driven by national, regional, and worldwide suicide data that show this group is more vulnerable to suicidal thoughts and other suicide-related concomitant behaviours.

Gender Identity

Perhaps because of gender-specific elements, including stigma and culture, a study with 12 participants (eight females, four males) demonstrates a feminisation of findings on suicide. This emphasises the importance of gender-friendly interventions, awareness-raising efforts tackling gender-related barriers, and sophisticated methods of suicide prevention that consider gender variations.

Ethnicity

A limited range of ethnic backgrounds was represented by participants who were coloured, with black ethnic groups making up most of the research population. Although this reflects the ethnic realities of the nation, suicide interventions need to be diversified and racially inclusive, providing care for all ethnic groups and races.

Academic year and field of study

This interdisciplinary study offered an unbiased view on suicide by involving students from different academic years (first to final year) and fields of study (computer science, psychology, sociology, etc.). This ensured inclusivity, considering a range of responses across age, level, and discipline.

Personal or family history of mental health concerns

Approximately 25% of the individuals mentioned having a family or personal history of mental health issues. This demonstrates the validity and reliability of the participants chosen to investigate suicide-related issues.

Participants' socioeconomic backgrounds

The study's participants came from various socioeconomic backgrounds, with the majority being middle-class and low-income. Certain external socioeconomic variables, such as poverty, financial hardships, and unaffordable necessities, impact their well-being and mental health, even though financial limitations might not directly restrict their access to these resources. To create focused treatments that meet the specific requirements of each student and raise awareness of mental health issues, it is essential to comprehend the connection between financial stability and suicidal ideation.

TABLE 2

Table of Emergent Themes

No.	Themes
1	Intervention appropriateness to students
2	Perceived accessibility of support systems could reduce suicidal episodes
3	Cultural sensitivity in suicide interventions
4	Reducing suicide-related stigma and increasing mental health awareness

Intervention Appropriateness to Students

The study found that students expressed varied attitudes towards the appropriateness of institutional support and student-initiated programmes for suicide interventions. The following sentiments support the finding:

No, I would not be willing to speak to another student because we know each other. I think because I see what she does, I would be judgemental and not use it as an example of what I can learn from." (Anelisa)

"Yeah, I think it would be much better because if they are students, they know exactly what I am talking about. I would relate in a way, like, they know what I am talking about." (Nikita)

Lecturers also need adequate training on issues of suicide and how to assist those with mental health challenges. This will make them useful in engaging students or learners in a way to address their suicide-related challenges. This is because students go through a lot. Awareness to lecturers should be made". (Siyavuya)

"Institutions do not care; they kind of do not understand the backgrounds of other students. Most students are desperate to get an education due to poverty." (Mila)

The sentiments expressed above highlight how critical it is to improve and work on the appropriateness of interventions provided to students. This includes equipping lectures with mental health education so that they can assist students suffering from various types of mental health conditions. The sentiments further show the participants' differing perspectives on whether student-led campaigns would be effective interventions in a university setting. Perhaps setting clear standards and limitations within student-led efforts to ensure confidentiality and trust and highlighting the need to keep privacy can help minimise the concerns highlighted by participants.

Perceived accessibility of support systems could reduce suicidal episodes

The study findings revealed that students recognise the crucial role of supportive environments in reducing episodes of suicide tendencies yet express frustration and concern about the lack of accessible support systems. The following expressions substantiate this conclusion:

"There are times or circumstances where nobody could assist you with something; nobody could have helped me. However, now that I am out of that circumstance, I feel I would have felt better if someone had reassured me that I was not alone, and everything would work out." (Siyavuya)

"I am not blaming my parents now, but I feel like they could have done a better job telling us how to share and support a person or taking us (me and my siblings) to a professionally trained counsellor who assists people going through those things." (Anelisa).

"My mother did not help. It is just that she had to take care of other things, and I believe it was a way of her disciplining me." (Milani)

"Yes. Because if I had received good support, many of the things that happened would not have happened. Even when working in retail, if I had received the right support, at least I would not have harboured suicidal ideations." (Mlungisi)

Indeed, a lack of a supportive environment motivates most of the suicidal tendencies.

Cultural sensitivity in suicide interventions

The study found that students in the investigated institution viewed interventions as culturally insensitive and ineffective, citing the cultural incompetence of mental health practitioners as a major concern. The subsequent sentiments reinforce the discovery.

"A lot of Zulu men do not believe in opening up about their feelings in counselling." (Milani)

"I think as students, we all go through the same challenges no matter where you come from; counsellors with different backgrounds and cultures do not necessarily make a difference." (Mlungisi)

The above sentiments highlight the importance of counsellors possessing a high level of expertise to effectively address a wide range of mental health issues. To provide comprehensive support, counsellors must be culturally aware, knowledgeable, and diverse, enabling them to understand and respond to the unique aspects of mental health.

Reducing suicide-related stigma and increasing mental health awareness

The study revealed that university students' willingness to seek mental health help was hindered by their own negative beliefs (personal stigma) and concerns about others' judgements (perceived public stigma). Societal attitudes towards mental health can shape students' decisions to seek assistance, leading to reluctance and untreated needs. The findings suggest that reducing stigma and increasing awareness are crucial to enhancing suicide prevention efforts and encouraging students to seek help.

The expressed sentiments reinforce the findings.

"No, not even a single person. I am embarrassed. I am only saying it to you because I know it is not going to be known by anyone." (Anelisa)

"We need to talk about it more often, like visiting universities and talking about these mental issues, so that people do not feel like they are alone." (Zethu)

Indeed, the phenomenon of stigma surrounding mental health issues such as suicide continues to be a barrier to the fight against such health deficits as suicide and its concomitant ramifications.

Discussion of the Findings

The demographic breakdown of the sample showed that most participants were female (8 out of 12) and black. This reflected the feminisation of views about suicide. The participation of more females than males may be an indicator of females more than males volunteering to offer suicide-related perspectives. This could perhaps point to the fact that women more than men are likely to commit suicide.

The research included 12 participants aged between 22 and 30, chosen to represent the youth population who participated in the study. This is consistent with the World Health Organisation 2021 acknowledgement of suicide as the second leading cause of death among individuals aged 15 to 29. The participants came from different academic years and fields of study, underscoring the importance of multidisciplinary perspectives when addressing the quagmire of suicide. Remarkably, a quarter of the respondents revealed a personal or family history of mental illness. This implies that many suicide cases follow historical dynamics within the victims' families. The study results also highlight the rising rates of suicide among women, underscoring the significance of tailored interventions that take gender differences into account. Moreover, the study's findings highlight the growing incidence of suicide among women and highlight the significance of gender-sensitive therapies.

Study findings reflected that participants were from various backgrounds, although most were from low-class and class households. Outside variables, including poverty and financial hardships, impacted their general well-being. According to data from the World Health Organisation (2021) and Wisevoters (2023), 77% of the 700,000 suicide fatalities worldwide occur in low- to middle-income nations. Understanding the relationship between ideas and stability is essential to developing focused strategies that meet the specific needs of each student and promote mental health awareness.

Study findings reflected that participants with social support reported much lower stress levels. The participants determined that the most aggravating element fueling suicidal thinking was the absence of a better supportive environment. More focus was specifically put on the experience of emotional isolation and the value of having a confidante and a support system. Research by Johri (2020) demonstrates that social support is a critical element that aggravates university students' emotions of stress and loneliness. According to the interpretation of the current findings, supported by earlier research, a student's emotional state would be improved by getting reassurance from someone. This emphasises the advantages of feeling less alone, realising that others had gone through similar things and the association that reduced stress. This is consistent with Cobb's social support theory, which holds that having little support causes stress and negatively affects psychological health (Hansen et al., 2023). This implies that social alienation, loneliness, and improved communication all contribute to the sensitivity to suicide ideation, as shown by the examples above. Also, according to Albright and Hurd (2021), social support can aid in stress management and the healing process following an illness or accident.

The findings of the study paint a nuanced picture of how students feel about mental health and suicide prevention measures. Because they are afraid of being judged, some students say they are reluctant to ask for help from their classmates, but others value peer support because of their experiences. There is also a strong need for lecturers to be trained in suicide prevention and mental health issues to provide students with adequate support. This research confirms the findings of a previous study by Churchill et al. (2024), which showed that institutional support can effectively reduce the suicide rate among college students. Students also emphasise the importance of institutions in comprehending and being more cognisant of the varied origins and difficulties, such as poverty.

Furthermore, studies have demonstrated the value of peer support in lowering stigma and encouraging help-seeking behaviours (Wright-Berryman et al., 2022). Aligning with recommendations for a more thorough and inclusive approach to student mental health, the findings also highlight the necessity for institutions to address systemic hurdles and offer sufficient support systems (Alabi, 2021).

According to Lee et al. (2022), counsellors must be culturally competent to deal with various clientele. They should also be aware of and be equipped with the necessary information and abilities. This supports the participant's viewpoint, emphasising the value of shared student experiences. However, Participants' remark objects to arguing that cultural background can affect help-seeking behaviours, especially in Zulu men, whom conventional masculinity stereotypes can impact. These results emphasise the need for culturally competent therapies in helping students overcome suicidal thoughts. These results align with the theory of cultural competency, which holds that the necessity for healthcare providers to deliver culturally competent treatment would only grow as population and individual health outcomes improve (Johnson & Lester, 2022). The study findings of Hammoudi et al. (2023) indicate that offering these diverse cultural interventions is anticipated to augment their effectiveness and foster a safe space in which clients experience understanding and acceptance.

Furthermore, the study established episodes of stigma associated with mental health problems, with some participants expressing shame and a fear of being judged, which is consistent with research on the stigma's silencing effects. Alabi (2022) encourages open communication and awareness-raising efforts to address emotions of loneliness and isolation. This is consistent with the study by Park et al. (2023) that highlights the significance of social support networks and community involvement in developing mental health. The results highlight the necessity of addressing stigma and encouraging inclusive discourse to counter mental health disorders, such as suicide, effectively.

Discussion Summary

This study emphasises how critical it is to comprehend how students feel about the suicide interventions that are currently in place in higher education settings. Mental health professionals must use a customised strategy to address recognised risk factors and adjust tactics to student preferences to improve interventions' success. This entails carrying out in-depth needs assessments, incorporating students in creating and applying suicide prevention plans, offering a variety of culturally appropriate support services, cultivating a

supportive campus community, and ongoing assessment and improvement of interventions based on student input. Mental health professionals can boost participation, enhance the efficacy of interventions, and ultimately help create a safer, more encouraging atmosphere in higher education where students' mental health and well-being are given priority by recognising and resolving their issues.

Recommendation

The researchers advise that to optimise the efficacy of suicide interventions inside higher education environments, mental health practitioners ought to devise and execute culturally sensitive awareness and stigma-neutral tactics that cater to students' distinct attitudes, perspectives, and affective reactions. As part of this, focused interventions that recognise the influence of peers, family, and cultural background on students' involvement and adherence are offered. In addition to attending to the needs and concerns of students from various backgrounds, interventions should prioritise early warning indicators, coping strategies, and social support. Mental health professionals may encourage trust, resiliency, and understanding, which will ultimately lower the risk of suicide among adolescents. Involving students in creating and revising interventions will also guarantee that their opinions are heard and their concerns are taken seriously, resulting in more inclusive and successful support services.

Conclusion

This current study explored the attitudes and perceptions of the university students regarding the effectiveness of the suicide interventions within a selected institution in South Africa. It is grounded in person-centered theory, qualitatively exploring and uncovering how students put meaning and engage with institutional responses to suicide, with the emphasis on cultural relevance, accessibility and emotional resonance. The findings of the study exposed that although institutional interventions exist, majority of students do not find them culturally sensitive, accessible and aligned with their lived realities. Themes such as intervention appropriateness, perceived support accessibility, cultural sensitivity and stigma emerged as critical influences on how students perceive and engage with suicide related services. These findings shed light to the pressing need for customised, inclusive, and student-formed interventions.

Suicide intervention in higher education should be embedded in culturally responsive, empathetic, and participatory framework. Institutions must prioritise student voices, reduce stigma and enhance training for staff to ensure both meaningfulness and effectiveness of mental health support. By fostering a compassionate and implementing contextually grounded strategies, universities can better support student's mental wellbeing and reduce suicidal risks.

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