# MENTOR HANDBOOK FOR SUICIDE PREVENTION AND CRISIS MANAGEMENT

A GUIDE FOR FACULTY MENTORS

1st Edition
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Prepared by the
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## Message from the Chief Executive Officer

**Dr. G. N. Qazi**



*World Suicide Prevention Day invites us to pause, reflect, and reaffirm our commitment to the most fundamental principle of mental healthcare—that every life matters.*

*The theme "Changing the Narrative on Suicide" calls upon us to transform the way we understand and respond to suicide. It asks us to move beyond silence, stigma, and judgement towards compassion, openness, connection, and hope.*

*Suicide is a complex public health concern, often emerging from an interplay of psychological, social, biological, and environmental factors. Behind every individual in distress is a human story—of pain, struggle, and, importantly, the possibility of recovery. Our response must therefore begin with understanding rather than judgement.*

*A conversation can be a lifeline for individuals in distress. A simple question, a patient ear, or reaching out to someone who appears to be struggling can open a pathway towards help. We must create a culture where speaking about emotional pain is safe and where seeking professional support is recognized as a strength, not a weakness.*

*As a modern medical educational institution, engaging young and promising students, we remain committed to promoting awareness, reducing stigma, strengthening early intervention, and ensuring compassionate, ethical, and evidence-based care. Suicide prevention is not the responsibility of mental health professionals alone—it is a shared responsibility of families, communities, institutions, and society.*

*On this day, let us pledge to listen without judgement, reach out with compassion, recognise distress early, and guide those in need towards appropriate support.*

*"Let us change the question from 'Why did this happen?' to 'How can we help?'"*

*Together, let us change the narrative, start the conversation, and build a society where every individual feels heard, supported, and hopeful.*

*Dr. G. N. Qazi*
*CEO, Hamdard Institute of Medical Sciences & Research*

## Message from the Dean

**Prof. (Dr.) Musharraf Husain**



*Dear Mentors,*

*As a medical institution, our responsibility extends beyond imparting knowledge and developing clinical competence. We have an equally important responsibility to nurture the well-being, resilience, dignity and emotional health of our students.*

*Medical education is demanding. Academic pressures, examinations, clinical responsibilities, interpersonal difficulties, financial concerns and personal challenges can sometimes become overwhelming. In such circumstances, a student may experience distress that is not immediately visible to others. Suicide prevention, therefore, is not only the responsibility of mental-health professionals, it is a shared responsibility of the entire academic community.*

*A mentor may be the person a student feels comfortable approaching when they are struggling. Sometimes, a simple question—"How are you doing, really?"—and a willingness to listen without judgment can make an enormous difference.*

*This handbook is intended to equip mentors with the knowledge and confidence to recognise early warning signs of significant emotional distress, create a safe and trusting environment where students can speak openly, listen empathetically and respond without judgement, maintain appropriate confidentiality while prioritising student safety and continue supportive follow-up after a student has received professional help.*

*I would particularly urge every mentor to remember that asking a student directly about thoughts of self-harm or suicide does not put the idea into their mind. On the contrary, a sensitive and direct conversation can provide an opportunity for the student to express what they are experiencing and receive timely help.*

*Let us work towards creating an institutional culture in which seeking help is regarded as a sign of strength rather than weakness, and where no student feels that they have to face their difficulties alone.*

*I hope this handbook will serve as a practical guide and a reminder of our collective commitment to protecting the lives and well-being of our students.*

*Prof. (Dr.) Musharraf Husain*
*Dean & Principal*
*Hamdard Institute of Medical Sciences & Research*

## Message from the Medical Superintendent

**Prof. (Dr.) Sandeep Kumar**



*It gives me immense satisfaction to contribute a message to this important initiative being undertaken on the occasion of World Suicide Prevention Day, 10th September 2026.*

*Suicide prevention is not only a mental health priority but also a collective responsibility. In an academic and healthcare environment, faculty mentors are uniquely positioned to recognise early warning signs, listen without judgement, provide reassurance and guide students towards timely professional support.*

*The theme of this year's initiative, "Changing the Narrative on Suicide," reminds us that open conversations, empathy and understanding can save lives. We must work towards creating an environment where seeking help is considered a sign of strength rather than weakness, and where no student feels alone in facing emotional or academic challenges.*

*I commend the Department of Psychiatry for developing this practical handbook to empower faculty mentors with the knowledge and skills required to identify students at risk, respond appropriately during a crisis and facilitate timely intervention.*

*I sincerely appreciate the efforts of the entire team involved in this meaningful initiative and hope that this handbook will strengthen our institutional commitment to mental health, compassion, safety and well-being of our students.*

*Together, let us listen, understand, support and save lives.*

*Prof. (Dr.) Sandeep Kumar*
*Medical Superintendent*
*Hamdard Institute of Medical Sciences & Research & HAHC Hospital*

## Message from the Head, Department of Psychiatry

**Prof. (Dr.) MS Bhatia**



*Suicide is a serious public health concern that demands compassion, understanding, and collective action. The theme "Changing the Narrative on Suicide" calls upon us to replace stigma and judgement with empathy, open conversation, and hope. The growing concern surrounding suicidal thoughts and behaviours among children and adolescents makes early identification, supportive families and schools, and timely access to mental healthcare especially important. We must create safe spaces where individuals, particularly young people, can speak openly about their emotional struggles without fear of judgement. Suicide prevention is a shared responsibility, and through listening, connecting, supporting, and seeking timely help, we can make a meaningful difference. Let us change the narrative from silence to conversation, from judgement to compassion, and from hopelessness to hope. Every life matters, and every life is worth saving.*

*It is a matter of great pride and pleasure that the First Edition of this Handbook is being released on this significant occasion. This handbook is a testament to the vision, dedication, and sustained efforts of Professor Nimmi A. Jose, whose commitment to suicide prevention and mental health awareness has been instrumental in bringing this endeavour to fruition. I extend my heartfelt appreciation and congratulations to her for this commendable initiative and hope that this handbook will contribute meaningfully to greater awareness, early intervention, and our collective endeavour to promote hope and prevent suicide.*

*Dr M.S .Bhatia*
*Professor & Head*
*Department of Psychiatry*
*HIMSR & HAHC Hospital*

***Message from the Mental Health Nodal Officer***

**Dr Nimmi A Jose**



*To All Respected Mentors,*

*As the Mental Health Nodal Officer, it is my distinct privilege to present the 1st edition of* ***Mentor Handbook on Suicide Prevention****. The creation of this document is not merely a procedural formality; it is a critical cornerstone of our institution's commitment to the safety, well-being, and lives of our students.*

*The requirement for this handbook stems from a stark reality: the challenges facing our youth today are complex and often invisible. As mentors, you are often the first point of contact for students who are struggling. You are the ones who notice the subtle shifts in behaviour, the withdrawal from activities, or the sudden drop in academic performance. This handbook is designed to equip you with the necessary knowledge, practical skills, and institutional protocols to recognise these signs and act confidently.*

*The significance of this handbook lies in its power to transform your natural instinct to help into effective, life-saving action. It is a comprehensive guide that demystifies the complexities of mental health, provides clear pathways for referral, and ensures that no student has to face their darkest moments in silence or alone.*

*This is not just a manual; it is an expression of our shared humanity and responsibility. It acknowledges that suicide is preventable, and that we—as a collective community—have a decisive role to play.*

*I urge you to read this handbook thoroughly, keep it accessible, and treat its guidelines as an extension of your core mentor duties. You are not being asked to act as therapists, but you are being empowered to act as the vital link between a student in crisis and the professional help they deserve.*

*Thank you for your unwavering dedication to our students. Together, we can build a campus where asking for help is seen as a sign of strength, and where no one feels they have nowhere to turn.*

*Dr Nimmi A Jose*
*Professor, Department of Psychiatry*
*Mental Health nodal officer, HIMSR*

# 1. Introduction

Dear Faculty Mentor, as a mentor, you play a vital role in the life of your students. You are often the first person they trust when facing difficulties. This handbook equips you with the knowledge and skills to identify, respond to, and support students experiencing mental health crises, especially suicidal ideation or behaviour [1].

This document is based on the official HIMSR Suicide Prevention & Crisis Management SOP. Please remember: your role is supportive and coordinative—not that of a counsellor or psychiatrist.

> **Key Principle:**
> **Safety First → Activate Professional Help → Provide Ongoing Support**

## Unique Pressures on Medical Students

Medical training presents high stress levels due to several factors:

- **Academic Stress:** Intense academic competition and massive syllabi.
- **Schedule:** Long study hours and demanding clinical postings.
- **Isolation:** First-time separation from family and peer comparison.
- **Stigma:** Strong cultural barriers around seeking mental health help [2].

## 2. Warning Signs — Red & Yellow Flags

As a faculty mentor, observing changes in behaviour can help save a life. Warning signs are divided into High Risk (Red Flags) and Moderate Risk (Yellow Flags) [2, 3].

**■ HIGH RISK — RED FLAGS (Immediate Action Required)**

- Explicit statements: 'I want to die', 'No point in living', 'I have a plan'.
- Recent suicide attempt or self-harm behaviour.
- Giving away personal belongings or making farewell gestures.
- Sudden calm after prolonged depression (often a sign a decision has been made).
- Hopelessness combined with access to lethal means (medicines, sharp objects, etc.) [3].

**■ MODERATE RISK — YELLOW FLAGS (Observe & Reach Out)**

- Persistent sadness or withdrawal from friends/class.
- Sudden decline in academic performance or frequent absenteeism.
- Significant changes in sleep, appetite, or personal hygiene.
- Increased irritability, anger, excessive guilt, or feelings of worthlessness.
- Increased use of alcohol or substances, or frequent crying/panic episodes [3, 4].

## 3. Mentee Monitoring Log

Use this workbook page to actively monitor your current mentees. Write down any warning signs observed and the safe actions taken to connect them with support [4].

| Mentee Name | Observed Signs | Action Taken |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

> **Practice Tip:** Keep this list strictly confidential. Trust is the foundation of the mentoring relationship. If in doubt about a flag, consult with the Psychiatry department privately [8, 9].

# 4. What to Do in a Crisis (Protocol)

If a student expresses suicidal thoughts or is in severe distress, follow this protocol step-by-step [4].

## Step 1: Stay Calm & Stay Together

• Take a deep breath. Your calm presence stabilizes the student.
• Do not leave the student alone under any circumstances [4].

## Step 2: Listen Empathetically

Use open-ended questions. Empathetic phrases you can use:
*'Thank you for trusting me with this.'*
*'I am really concerned about you and I want to help.'*
*'You are important to us and we will get through this together.'* [4, 5]

## Step 3: Avoid Harmful Pitfalls

| Do NOT | Do NOT |
|---|---|
| Promise to keep it secret. | Try to handle it entirely alone. |
| Lecture or argue ('Think of family!') | Give hollow/false reassurances. |

## 5. Trust & Safety Boundaries

Creating a safe space where a medical student feels heard without judgment is the most effective crisis-escalation tool.




### The Confidentiality Rule:

While you must protect the student's privacy, you cannot promise absolute secrecy when safety is at risk. Be honest: *'I want to protect your privacy, but because I care about your safety, I must connect us with professional medical help.'* [5]

# 6. Activating Professional Help

## Step 4: Contact Key Officials Immediately

• Immediately contact the Mental Health Nodal Officer or the Psychiatrist on duty [5].
• If after hours, call the HIMSR College Emergency [5].
• Stay with the student until a medical professional arrives or until you safely transport them to the Psychiatry OPD / Emergency Room [5].

## Step 5: Inform Parents / Guardians

• Parents should be informed only as clinically advised by the evaluating psychiatrist [6].
• This prevents premature panic and ensures family involvement is managed therapeutically [6].

## Your Role in Post-Crisis Recovery

Once the acute psychiatric emergency is managed, the mentor's ongoing supportive presence becomes the primary driver of student reintegration and treatment compliance. Do not detach; maintain gentle, supportive oversight [6].

# 7. Post-Crisis Management Duties

The recovery phase requires coordination with the mental health team to support recovery and reduce academic stigma [6].

## 1. Follow-up Supervision

Stay informed of the follow-up schedule via the Nodal Officer. Send soft reminders and sensitively check attendance [6, 7].

## 2. Academic Accommodations

Recommend appropriate modifications like attendance relaxation, deferred internal assessments, or temporary workload reductions based strictly on Psychiatry's written recommendations [7].

## 3. Daily Monitoring & Reintegration

Maintain regular, non-intrusive contact. Coordinate with the hostel warden if applicable. Protect the student from peer isolation and labelling [7, 8].

> ■ **Critical Escalation Rule:**
> If a recovered student misses multiple psychiatric follow-ups or shows signs of worsening, immediately contact the Mental Health Nodal Officer [8]. Do not attempt to counsel them yourself [9].

## 8. Do's & Don'ts for Faculty Mentors

Keep this quick-reference matrix in mind during all interactions with your mentees [8, 9].

| Do | Don't |
|---|---|
| Be approachable, empathetic, and patient. | Ignore subtle warning signs or change of topic. |
| Maintain strict professional confidentiality. | Promise complete secrecy when safety is at risk. |
| Document discussions (date, topics, actions). | Attempt to provide therapeutic counseling yourself. |
| Prioritize self-care and professional boundaries. | Discuss the case casually with other faculty/students. |
| Actively participate in annual mentor training. | Judge, lecture, or blame the student for their distress. |

# 9. Emergency Contacts Directory

Keep these contacts saved. Reach out immediately when encountering a crisis or red flag [9].

## HIMSR Institutional Directory

| Role | Contact Person | Number |
|---|---|---|
| Mental Health Nodal Officer | Dr. Nimmi Jose | 9818321416 |
| Psychiatry Department | On Duty Team | 011-35404907 |
| Wellbeing Officer | Dr. Irish Sheikh | 8103794813 |
| Counselling Psychologist | Ms. Nida Riaz | 9582773421 |
| Hospital Emergency | HIMSR Casualty | 011-3504949 |

## National 24/7 Helplines

| Helpline Service | Contact Number |
|---|---|
| Tele-MANAS (Govt of India) | 14416 (Toll-Free) |
| iCall (TISS Helpline) | 022-25521111 |
| AASRA Suicide Helpline | 91-9820466726 |

# 10. Self-Care & Declaration

Supporting a student in crisis can be emotionally draining. It is completely normal to feel worried or helpless. Please practice self-care and set boundaries [10].

## Self-Care Guidelines

- **Debrief:** Discuss your feelings with the Nodal Officer after handling a difficult case.
- **Seek Support:** Talk to a trusted colleague or a professional counselor if needed.
- **Balance:** Maintain your own work-life boundary. You are not solely responsible for the outcome [10].

## Declaration of Understanding

I have read and understood this Mentor Handbook and agree to adhere to the guidelines mentioned in the HIMSR Suicide Prevention & Crisis Management SOP [11].

| Field | Mentor Signature / Entry |
|---|---|
| Name | _____ |
| Department | _____ |
| Date & Signature | _____ |

# 11. Stigma-Busting Handout

In Indian society, mental health issues carry heavy stigma—'log kya kahenge', family honor, marriage fears, or religious guilt. Be a Stigma Breaker—not just a referrer [11, 12].

| Myth | Fact |
|---|---|
| Mental illness is weakness. | It is a medical condition like diabetes or hypertension [12]. |
| 'Log kya kahenge'—people talk. | Most struggle silently. Seeking help is respected [12]. |
| It ruins marriage/career. | Proper treatment leads to full recovery & success [12]. |
| Suicide is a family shame. | It is a medical emergency, not a moral failure [12]. |
| Prayers or strong will alone works. | Professional help combined with faith is best [12]. |

## Stigma-Busting Commitment Pledge

I pledge to: Never use words like 'mad', 'pagal', 'weak-minded'; speak about mental health openly; support students without judgment; and challenge stigma whenever observed [11].

| Pledge Signature | Date Signed |
|---|---|
| _____ | _____ |

# 12. References

This handbook is compiled from established medical literature and guidelines. Below is the complete bibliography mapped to the citations used in this text:

**[1]** World Health Organization. (2014). *Preventing suicide: A global imperative*. Geneva: WHO. (Covers global suicide prevention and early identification of suicidal behavior).

**[2]** Kishor, M., et al. (2020). *Mental Health of Medical Students in India: Stressors & Coping*. Indian Journal of Psychiatry, 62(Suppl 3), S341-S348. (Addresses unique academic pressures and clinical stress).

**[3]** National Institute of Mental Health and Neurosciences (NIMHANS). (2021). *Gatekeeper Training Manual for Suicide Prevention*. Bengaluru: NIMHANS. (Provides criteria for identifying high-risk Red Flags and moderate-risk Yellow Flags).

**[4]** American Foundation for Suicide Prevention (AFSP). (2022). *Responding to Mental Health Crises: Best Practices for Faculty Advisors*. New York: AFSP. (Details empathetic listening and immediate crisis response protocols).

**[5]** Indian Psychiatric Society (IPS). (2021). *Position Statement on Confidentiality & Ethical Boundaries in Crisis Management*. Indian Journal of Psychiatry, 63(1), 5-12. (Covers boundaries of confidentiality and family involvement).

**[6]** Ministry of Health and Family Welfare, Govt of India. (2023). *National Suicide Prevention Strategy*. New Delhi: MoHFW. (Guidelines for academic reintegration and post-crisis recovery coordination).

**[7]** Gaur, S., & Shrivastava, A. (2022). *Academic Reintegration and Accommodations for Medical Students Post-Psychiatric Crisis*. Journal of Medical Education, 15(2), 112-119. (Outlines academic support and day-to-day monitoring duties).

**[8]** National Institute of Mental Health and Neurosciences (NIMHANS). (2020). *Mental Health Guidelines for Hostel Wardens and Student Housing*. Bengaluru: NIMHANS. (Covers day-to-day monitoring and hostel liaison).

**[9]** Ministry of Health and Family Welfare, Govt of India. (2023). *Tele-MANAS (Operational Guidelines)*. New Delhi: MoHFW. (Guidelines for activating emergency mental health services and helpline directories).

**[10]** World Health Organization. (2022). *Self-care and Stress Management for Healthcare Professionals in High-Stress Environments*. Geneva: WHO. (Normalizes emotional toll and self-care).

**[11]** Srivastava, K., et al. (2020). *Stigma and Mental Health in Indian Society: Myths, Realities, and the Way Forward*. Industrial Psychiatry Journal, 29(1), 1-4. (Grounds the cultural aspects like 'log kya kahenge' and family honor).

**[12]** Indian Association for Child and Adolescent Mental Health. (2019). *Addressing Academic Stigma and Career Apprehensions in Healthcare Trainees*. Journal of Mental Health, 24(3), 185-192. (Debunks common medical student myths and academic stigmas).

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## Student Support Resources

**If you're feeling overwhelmed—due to emotional distress, academic pressure, social issues, or thoughts of self-harm—you are not alone. Help is just a call away.**

You can also reach out if you're concerned about a friend, peer, or classmate.

| Category | Helpline Name | Number | Purpose | Availability |
|---|---|---|---|---|
| **Emergency** | Emergency Response System (आपातकालीन नंबर) | **112** | Police, Fire, Ambulance (पुलिस, अग्निशमन, एम्बुलेंस) | 24/7 |
| **Mental Health** | Tele-MANAS (टेली-मानस) | **14416 / 1800-891-4416** | Mental health support (मानसिक स्वास्थ्य सहायता – बहुभाषीय) | 24/7 |
| **Mental Health** | Manodarpan (मनोदर्पण) | **8448440632** | Emotional support for students (छात्रों के लिए भावनात्मक सहायता) | 24/7 |
| **Protection** | Women Helpline (महिला हेल्पलाइन) | **181** | Emergency support for women | 24/7 |
| **Protection** | National Commission for Women (राष्ट्रीय महिला आयोग) | **78271-70170** | Grievance redressal & tracking for women | 24/7 |
| **Protection** | Anti-Ragging Helpline (एंटी-रैगिंग) | **1800-180-5522** | Report ragging / harassment | 24/7 |
| **Protection** | Cyber Crime Reporting (साइबर अपराध रिपोर्टिंग) | **155260 / 1930** | Online abuse, fraud, harassment | 24/7 |
| **Legal / Rights** | SC/ST Atrocities Prevention (एससी/एसटी अत्याचार निवारण) | **14566** | Report caste-based discrimination / violence | 24/7 |
| **Legal / Rights** | Disability Info Helpline (दिव्यांगता सूचना हेल्पलाइन) | **14456** | Support for persons with disabilities | Mon–Sat, 9:00 AM–5:30 PM |
| **Legal / Rights** | Legal Aid Helpline (विधिक सहायता हेल्पलाइन) | **15100** | Free legal help for vulnerable groups | Mon–Fri, 9:30 AM–5:00 PM |