

## **OUTREACH TO THE COMMUNITY BY SAHAYAM THROUGH THERAPEUTIC COUNSELING AND SUICIDE PREVENTION WORKSHOPS**

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**Abstract:** A proactive suicide prevention drive is what Sahayam-Osmania University Psychological Counseling Centre has been engaging in to address this public health issue which has made South India the suicide capital of the world. Sahayam- established in the year 2010, has from its inception left no page unturned to prevent suicides in Osmania University Campus, affiliated colleges and also among prison officials and inmates. Services such as individual counseling, group counseling, crisis intervention, psychiatrist referrals and many support services are provided free by Sahayam. It has actively been dealing with this preventable form of death by providing counseling services and conducting a number of suicide prevention workshops which helped save many lives and in the bargain gained recognition especially during the time of political unrest for a separate state of Telangana in India. Though till date Sahayam is a fully functioning counselling centre of Osmania University, the objective of the present study is to analyze the role Sahayam in preventing suicides in Osmania University and affiliated colleges during the peak time of agitation for a separate state of Telangana (2013-2014). It was hypothesized that effective suicide prevention should be a two-fold plan of Sahayam wherein individual counselling and therapy be made available to those seeking help and at the same time a series of Suicide Prevention workshops be conducted for students and staff of Osmania University and those in its affiliated colleges. Hence, there are two sets of data which will be discussed: one set of data related to suicide prevention on an individual level through therapeutic counseling and the other set of data related to feedback of Suicide Prevention workshops conducted in the crucial year of 2013-2014 (formation of Telangana State). The training modules prepared by the Sahayam team also had a message on peace integrated in order to emphasize individual peace as a behavior regulatory measure. Observing the World Suicide Prevention day on 10<sup>th</sup> September, 2014, in which workshops were conducted in twenty colleges with 1200 participants. The number of suicides prevented through individual counseling and the feedback after conducting each suicide prevention workshop provided immense encouragement for sustained primary prevention.

**Key words:** counseling, suicide-prevention, Sahayam, outreach, community

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### **I. INTRODUCTION**

*There has been an alarming rate of increase in the number of suicides among youth reported over the past few decades especially in South India (Rane, A., Nadkarni, A 2014). The most preventable form of death -suicide- is the act of intentionally terminating one's life. (Varah, 1978). Understanding suicide, its causes and many-fold consequences and working on preventing it requires psychological tenacity. Thus suicide is generally referred to as "a multi-dimensional malaise." (Shneidman, 1985).*

*In the Indian context, suicides are most often attempted and committed out of despair and dejection which could be due to lack of awareness about mental health and unattended mental health conditions, failure in competitive exams, unrealistic expectation and aspiration for government jobs, financial stress and unemployment (Vijaykumar, L., 2007). Added to this was the unrest in the students of Osmania University, Hyderabad during the prevailing agitation in Andhra Pradesh- the erstwhile State, out of which the Telangana State, the youngest Indian state was formed on 2nd June, 2014.*

### **The need for Suicide Prevention**

Though a huge amount of research related to suicide, its causes and consequences has been carried out in the past few years (Rane, A., Nadkarni, A (2014) ; Vijaykumar, L., (2007), the need for a proactive and war-footing plan to prevent suicides at the primary level is emphatically felt. Caplan (1964) proposed the concept of "primary, secondary and tertiary prevention" and each has a place in preventing suicide. Primary prevention relates to the principle of good mental hygiene in general and is best accomplished through education and awareness programs. Secondary prevention relates to the treatment and care of suicidal ideation or suicidal crisis in which professionally trained individuals play an important role. The most cost-efficient and potentially constructive avenue in public health problems is primary prevention and it demands patient and long-term commitment of resources. (Leenars, 2004). The present research which takes into consideration individual counseling across five years and feedback of suicide prevention workshops encompasses both primary and secondary prevention.

In a similar venture, the World Suicide Prevention day was formally announced on 10<sup>th</sup> September, 2003. Many countries including India, (as per the World Health Organization, 2001), realize the need for suicide prevention strategies through the formulation and most importantly the execution of innovative plans to create awareness about suicide and its warning signs by reaching out to the community. Though most Indian States have their own suicide prevention portals and emergency help-lines, a nation-wide suicide prevention policy and strategy planning and execution is required. However, before this crystallizes, individuals and groups with a heart to reach out to humanity have begun working relentlessly in this pursuit.

### **Therapeutic counseling for the suicidal**

Suicide prevention becomes a matter of interest if the individual has attempted suicide or has some one known to him or her who has committed it. At the same time what is making an individual feel hopeless is can entirely be subjective to the individual seeking help because when emotion plays, clarity in thinking takes a back seat. The reason for suicidal ideation in an individual may at times be found very trivial and insignificant to a person who is not faced with that issue or situation. And at the same time, handling adversities requires psychological tenacity and hardiness and in case of those with clinical diagnosis, counseling should be therapeutic if not entirely dependent on psychiatric intervention. "Counseling and psycho-therapy for the suicidal therefore should be person-centered." (Leenars, 2004) taking into consideration the intra-psycho and interpersonal issue as a whole.

### **Sahayam- Osmania University Psychological Counseling Center**

Sahayam, which simply means "help" in the Telugu language, was established in February 2010 and is the Psychological Counseling Centre of Osmania University. It is located in the heart of the glorious Nizam founded, hundred year old Osmania University, Hyderabad, Telangana State. Over the years, Osmania University has gained world-wide recognition as a center of academic excellence while simultaneously acting as a harbinger of citizen friendly and palpable governance seen in the form of various agitations. Sahayam, with Prof. C. Beena of the Department of Psychology as its Co-ordinator, was inaugurated by the then Honorable Vice Chancellor Prof. T. Tirupati Rao on 6<sup>th</sup> February 2010. This was an initiative put forth by the Vice Chancellor after recommendations were made by the supervisory authorities to set up a centre for psychological counseling for the students and staff of the University and anyone who willingly wanted to avail its services which protect privacy, confidentiality and are free of cost.

The services of Sahayam include psychological counseling for individuals and groups, psychiatrist referrals, crises intervention and outreach which includes conducting of various awareness programs, workshops and training with the objective of promoting mental health and well-being. The goal of Sahayam is to promote psychological well-being of the students of Osmania University and to help prepare them to be productive members of society. The progress of Sahayam toward this goal is periodically reviewed by professionals in the fields of Psychological Counselling, Clinical Psychology, Psychiatry, Administration, Management Sciences and Law who are part of the Advisory Board of Sahayam.

## **II. METHOD**

Though the services of Sahayam- Osmania University Psychological Counseling Centre are being well received by the staff and students of Osmania University and its affiliated colleges from its inception in 2010 till date, the objective of the present study is to analyze the role of Sahayam in preventing suicides at individual and group level in the crucial year of 2013-2014.

It was hypothesized that effective suicide prevention should be a two-fold plan of Sahayam wherein individual counselling and therapy be made available to those seeking help and at the same time a series of Suicide

Prevention workshops be conducted for students and staff of Osmania University and those in its affiliated colleges.

a) In the year 2013-2014, a total number of 355 individuals pursuing Masters and Undergraduate courses at Osmania University sought therapeutic counseling sessions at Sahayam and the number of suicides prevented at an individual level were 39.

For each of these individuals counseling sessions lasting from approximately 45 minutes to one hour were scheduled for individuals who voluntarily came to Sahayam seeking counselling. After the individuals were made relatively comfortable at Sahayam, keeping the ethics of counselling in mind, the details required for counselling were noted. Name, demographic details and consent was obtained and a brief description of the presenting problem was looked into. Mental health history, family health history, substance use and suicidal ideation was noted. A brief mental status examination with observations related to abnormalities in eye-contact, appearance, thought process, mood, gait, speech, sleep, weight and appetite was noted and if required a necessary psychiatric intervention made. A session wise progress note regarding the subjective description of the presenting problem, counselling session objective, necessary intervention (counselling, brief-therapy and/or psychiatric intervention) and follow-up scheduling was documented to direct positive change and also as a ready session-wise reckoner for the Counselors. It was noted that it was mostly situation and circumstance based behavioural changes noted which were by themselves pressing on the need for further counselling sessions.

With regard to individuals who had to be sent for psychiatric intervention, the follow-up sessions scheduled had an intervention of brief therapy and follow-up over phone as well. A suicide prevention helpline number was also given to each of them so they may be heard in case the counsellors at Sahayam were in counselling sessions and probably could not answer distress calls.

For the individuals who had suicidal ideation, an individual appeal was made to stay hopeful of the future while counselling skills such as primary and advanced level accurate empathy, genuineness, respect, concreteness, immediacy and the like were used. This was followed by further sessions of counselling involving constructive action plans made to facilitate positive change in the individual wherein facilitating forces were maximized and those restraining minimized. Simultaneously, steps were taken to restructure cognitions and work on maintaining them with the help of worksheets to identify the antecedents, consequences, cognitive distortions and core beliefs. This was done with an eclectic interventional approach taken with roots in person-centred and cognitive therapeutic counselling.

b) At the group level, 20 Suicide Prevention Workshops were conducted in 20 colleges of Osmania University and its affiliated colleges with 1200 participants who were students and staff of Osmania University and its affiliated colleges which had a recent history of suicides or attempts. Most of the students (both genders) were of the age range of 18-25 years and the staff which comprises only ten percent of participants (120) were mostly middle aged men and women.

Prior to the execution of the Suicide Prevention Workshops, a training the trainer program was conducted by the Co-ordinator of Sahayam in which only ten trainers were selected based on their presentation skills and psychological sensitivity to suicides and presenting information about suicide prevention.

At the group level, it was seen that in each group the participants were limited to 60 students only and care was taken to see that they were seated comfortably as the Suicide Prevention Workshop would last for three and half hours and requires utmost attention.

Initially, a video related to suicide attempt was played and the individual sensitized to preventing it. Incidence of suicide worldwide and in India and the myths and facts related to suicide were carefully clarified after being presented. This was followed by the signs of suicide which could be verbal, behavioural and situational. And the most important part related to direct prevention is what should be done once a suicidal individual is identified.

After a brief session of brainstorming related to what do we feel when we come across an individual with warning signs, the prevention scheme- to ask, appeal and assist was explained and later demonstrated with the help of a role-play. A message on peace by the Prem Rawat Foundation was included in order to emphasize the internal peace one has to maintain even when faced with adversities.

Finally the participants were asked to sit in dyads such that they enact a role play with one as a suicidal individual and the other as the one who prevents it. Feedback was sought from each of the participants and analyzed thereafter.

### III. RESULT AND DISCUSSION

a) At the individual level, a total of 355 students, staff and those referred to Sahayam from Osmania University and affiliated colleges in the year 2013-2104 were made part of this research study since they willingly sought therapeutic counseling services from Sahayam.

**Table I showing no. of individuals who sought therapeutic counseling and**

**no. of individuals who had suicidal ideation in the years 2013 and 2014.**

Year	No. of individuals for therapeutic counseling	No. of individuals with suicidal ideation
2013	201	21
2014	154	18
2013-2014	355	39

In the year 2013, which was just one year before the formation of a separate state of Telangana, it was noted that there was a definite increase in the number of individuals who sought therapeutic counseling and also in the number of individuals with suicidal ideation who came to Sahayam. Despite the sixty year long agitation for Telangana and hundreds of suicides all across the state, the number of suicides were especially high in the years 2013-2014.

From table I, it is noted that in the year 2013, the number of individuals who sought therapeutic counseling was 201 of which 21 individuals reported active suicidal ideation. This shows that at least 10% of the number of individuals who sought therapeutic counseling from Sahayam in that year were harboring thoughts of killing themselves.

In the year 2014, the number of individuals who sought therapeutic counseling was 154 of which 18 individuals reported active suicidal ideation. Around 9% of the number of individuals who sought therapeutic counseling from Sahayam in 2014 were suicidal.

In the years 2013-2014 together, 355 individuals sought therapeutic counseling from Sahayam making the total number of suicides prevented on Osmania University and affiliated colleges in Telangana state campus stand at 39.

The intervention details have been detailed in the section under the heading Method in this paper. However, it should be noted that at least fourteen individuals of the total of 355 individuals who sought individual counselling and therapy are on medication till date as they sought Sahayam services at a delayed stage of the disorder which in turn delayed diagnoses of disorders such as Major depression, Bipolar-disorder and the like and they are on regular follow-up by Sahayam.

In all cases, it was noted that the individuals needed a confidential and trust-based place to ventilate feelings and emotions and function objectively and in a realistic goal-directed pursuit especially when encompassed with unrest from within and/or from the surroundings (political unrest).

The way in which all the individuals who sought counselling and psychiatric/support services to deal with suicidal ideation were carefully worked upon and are today in various institutions of higher education and organizations and the fact that they are leading productive lives today is a testimony of the role of Sahayam in preventing suicides at the individual level. Few of them even volunteered to be part of the suicide prevention workshops which will be discussed later.

b) At the group level, as mentioned earlier twenty Suicide Prevention Workshops were conducted in 20 colleges of Osmania University and its affiliated colleges with 1200 participants who were mostly students and staff. Most of these colleges had a recent history of suicides or attempts.

**Table II showing item wise feedback (in percentage) of Suicide Prevention Workshops conducted by Sahayam in 2013 and 2014**

S. No	Brief description of item	Feedback (in percentage)		
		Yes	No	Undecided
1.	Content being useful and relevant	99.0	0.58	0.42
2.	Understood content	75	24	1
3.	Recommend to Others	97.4	2.6	0



4.	Key learning (as per presentation)	100	0	0
5.	Message on Peace useful	76	14	10
6.	Overall rating (Percentage of responses toward yes/no/undecided)	89.2	5.9	4.9

Feedback from the suicide prevention workshops is classified into six broad categories based on the Suicide Prevention Workshop (as discussed under the heading method).

From table II, it is seen that the relevance and usefulness of the content presented was very well received and 99% of the 1200 participants felt it was apt to discuss about suicide and prevention of suicide. 75% of the sample mentioned that they had understood the content. This accounts to a good level of learning on part of the participants and that a ripple effect in preventing suicides is seen. If not an over statement, it should be noted that there was no suicide on Osmania University campus from the years 2013 to the end of 2017 despite 39 clients with suicidal ideation who sought individual therapeutic counseling. Key learning as per the presentation referring to Asking about suicidal ideation, Appealing to the individual to remain alive and Assisting the individual to stay hopeful by attending follow-up sessions and intervention was at 100%. The message on peace was felt useful by 76% of the group and the overall rating of the Suicide Prevention Workshop was 89.2% which denotes that the participants were “helped” by Sahayam.

After the series of Suicide Prevention Workshops, at least 11 participants sought individual therapeutic counseling sessions from Sahayam and four are on psychiatric intervention while on supportive counseling. 8 staff members of various colleges referred their friends and family members to Sahayam for availing of free counseling services.

Thus, it can be stated that Sahayam-Osmania University Psychological Counseling Centre has actively been dealing with this preventable form of death by providing therapeutic counseling services and conducting a number of suicide prevention workshops which helped save many lives and in the bargain gained recognition especially during the time of political unrest for a separate state of Telangana in India.

#### IV. CONCLUSION

The outreach of Sahayam- Osmania University Psychological Counseling centre has from its inception in 2010 till date effectively addressed this public health issue called suicide. Services such as individual therapeutic counseling and the series of suicide prevention workshops have helped saved many lives in Osmania University, its affiliated colleges and also in the Telangana State at large. As hypothesized, an effective suicide prevention should be a two-fold plan wherein individual counselling and therapy should be made available to those seeking help and at the same time awareness about suicide and Suicide Prevention should be made in the form of workshops to cater to the needs of the students and staff and also those intimidated to seek help in the third-world country setting where suicide is by far a taboo till date. The number of suicides prevented through individual therapeutic counseling and the positive feedback received after conducting each suicide prevention workshop denotes the success of the two-fold outreach of Sahayam to the community.

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