

How many Ontario post-secondary students die by suicide each year? No one knows for sure

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Chase Graham was a first-year student at the University of Waterloo when he took his own life in March 2017. (Facebook/Mark Graham)

Students at the University of Waterloo know Chase Graham took his own life.

They may never have met him. They may not know he was a brilliant student or that he had a sharp sense of humour under a shy, quiet exterior.

But they know he died by suicide at school on March 20.

“We hear about the ones like Chase, who die on campus,” Graham’s mother, Andrea Graham, said.

“But he very well could have waited a month and done it when he was in his apartment in Toronto while on his co-op placement and then people wouldn’t have associated it with a student death.”

The attention Chase Graham’s death received is rare, though his story is not. Countless successful, promising young students struggle to adapt to the major change of starting post-secondary school.

But nobody — not the Chief Coroner, nor the Ontario government nor university officials — can say how many university and college student die by suicide each year.

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The Office of the Chief Coroner should be responsible for tracking student suicides, Andrea Graham said.

“We need to start doing some things to stop these (suicides) happening, and part of it is having an accurate view of what’s actually going on.”

Public health authorities in Canada and around the world have called for comprehensive tracking of suicide deaths, arguing that better, more available statistics make it easier for professionals to prevent suicides.

But Ontario has an inconsistent patchwork of tracking systems which does not come close to being comprehensive.

The Office of the Chief Coroner of Ontario tracks suicides by age group, but does not keep track of whether people who die by suicide are students or what their profession was.

Steps are being taken to make suicide data more accurate and available, Deputy Chief Coroner Dr. Reuven Jhirad said.

The Chief Coroners office will work to standardize the information collected by each regional coroner during investigations, and to create a database where details about a death, such as whether or not someone was a student, can be easily searched, Jhirad added. There is no specific date for when these measures will be in place.

In a survey of Ontario’s 20 universities, the Star found that only about half keep any kind of formal statistics on the number of student suicides. Of those universities, several track only suicides that occur on their campus, meaning that any deaths that occur at a student’s off-campus residence or their family home does not get included in their tally.

“As can be appreciated, we are only aware of the nature of a student death as indicated to us by the family or police,” said Brenda Whiteside, Associate VP of Student Affairs at Guelph, one of the schools that tracks on and off-campus suicides. “The numbers represent the best information we have.”

In February, Whiteside confirmed that four Guelph students had died by suicide in the 2016-17 academic year, after a student petition and social media backlash demanded more attention be paid to mental health.

At the times the deaths occurred, the university did what many schools do — they released a statement saying the student had died, in some cases mentioning the student’s name, but never mentioning the cause of death.

“It is generally agreed upon by experts that suicide data are under-reported due to misclassification issues (including) the stigma associated with suicide, and provincial and territorial differences in the type of information collected by coroners or medical examiners reports,” said Rebecca Purdy, a spokesperson for the Public Health Agency of Canada.

Suicide has long been a taboo topic that, until a couple of decades ago was hardly spoken about at all, even in private, said Robert Whitley, a psychiatry professor at McGill University, who has researched the coverage of suicide in media.

Not even newspapers covered suicides, largely out of fear that the news could inspire copy-cat deaths. But those attitudes are changing.

Recent research has shown that increasing public attention paid to suicide is a positive, if it is handled sensitively. It helps raise awareness and start discussions, Whitley said.

“(Now) suicide is something which we can talk about. It’s the tragedy which everyone’s trying to avoid but ... it’s something people can have empathy and compassion for and respond to,” Whitley added. “That’s much better than

a society where people think it's a crime and a sin that you shouldn't even talk about or think about.”

The start of university or college can be a particularly difficult time for young people's mental health.

Beginning post-secondary school often means moving away from home for the first time, and being far from family and friends. The majority of mental health issues begin to surface during a person's teens or 20s. But age restrictions on youth programs force many young people to abandon the mental health services they have accessed for years around the age of 18 — leaving them on their own to find new sources of help in the adult health care system.

In 2016, researchers from the Public Health Agency of Canada consulted with over 350 community organizations, government officials and indigenous groups, to identify priorities for suicide prevention in Canada.

One of the key findings from the consultation was that Canadian suicide statistics, “including suicide ... data and research results, is fragmented, complex” and often difficult to access.

“Data and research results provide the basis of evidence needed to define the scope of the problem in Canada... track changes in suicide rates, better understand risk and protective factors, inform policies and programs, and evaluate prevention efforts,” the Public Health Agency wrote.

Similarly, in a 2014 report, the World Health Organization, called for improved availability and quality of data on suicides and suicide attempts globally, saying they were “required for effective suicide prevention.”

In the days after Graham's death, the second on-campus suicide at the University of Waterloo since January, the school's President Feridun Hamdullahpur announced the creation of an advisory committee on mental health, citing “the recent suicide of a first-year student” as a catalyst.

It was the first time the university had ever publicly acknowledged a specific student suicide, said Walter Mittelstaedt, the university's director of Campus Wellness.

“What we said this time was in response to a growing concern and misinformation,” Mittelstaedt said.

“(Social media users) were repeatedly saying the University of Waterloo has the worst suicide rate of all campuses, which I mean, we have no way of knowing that.”

The Waterloo president's statement on Chase Graham's suicide “makes me feel hopeful that the university will be taking a different approach in terms of communication and public relations on issues like these,” Waterloo student and mental health advocate Dia Rahman said.

It was disappointing, however, that the statement only came after a student petition and social media discussion called attention to the suicide, she added.

“For the betterment of the community, as well as helping universities... maintain wellbeing, I think student suicides should be better tracked,” Rahman said.

“How else would you figure out whether there's a dire need for something to be changed in the community?”

Asked whether Waterloo will publicly disclose all student suicides in future, Mittelstaedt said it was “something for us to think about” as the school's mental health advisory progresses.

“Each university has to decide how much of a problem mental health and suicide is for them and will have a unique response to it,” he added. “I don't think (the right approach) is necessarily an overall public response.”

Mental health-related data is “severely lacking” across the board, not just for suicide and not just for university students, said Eric Windeler, whose son Jack died by suicide in 2010 during his first year at Queen's University.

“Writ large, the system is not tracking that stuff and you can’t function in a system properly without data, that’s for absolute certain,” said Windeler, who sits on the provincial government’s Mental Health and Addictions Leadership Advisory Council and co-founded with Jack’s mother the youth mental health organization Jack.org.

Focusing on suicide data alone, though, misses the bigger picture of mental health challenges on campus, Windeler added.

“You have to look at the whole mental health piece not just suicide to understand the amount of struggle that’s going on there,” he said.

“Suicide is kind of the tip of the iceberg. A school can go a whole year with zero suicides... but that doesn’t mean that 20 per cent of the population at that school isn’t struggling at a level that is affecting their day-to-day life.”

Andrea Graham wants to see universities’ approach to mental health change. She has called for more convenient and proactive access to mental health services for students who may feel isolated at school. She has expressed great frustration with what she said was Waterloo’s lack of communication with her family. She wants schools to do a better job of responding after a student has died by suicide, to ensure that other students are coping.

But tracking of student suicides is needed if we want to understand the scope of the problem, Andrea Graham said.

“I just hope some things change,” she added. “I just dread the day that I hear of something else happening.”