ECOLE EUROPEENNE DE BRUXELLES III
EUROPEAN SCHOOL BRUSSELS III
EUROPÄISCHE SCHULE BRÜSSEL III

EEB3 | Suicide Prevention Policy

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1. Introduction

This document is in line with the EEB3 Wellbeing Policy, based on the concept of welfare as a state of comfort, health or happiness and resilience enabling individuals to cope positively with challenges. This principle is set out in the official document of the European Schools Central Office, Pupils' Well-Being Policy Framework for Pupils in European Schools **(2022-01-D-6-en-2).**

As a school, we are committed to ensuring the safety and health of all students. Aware that adolescence or during school years is a challenging period marked by ups and downs, we aim to educate and empower students to face difficult issues with confidence, while seeking outside help when needed. Similarly, we strive to cultivate a caring and supportive school environment where students can rely on the trusting cooperation of staff for appropriate help and support in any mental health-related situation.

This document is a tool for prevention, detection and crisis management.

2. Key facts about the suicidal process

In Belgium, on average, five people commit suicide every day. Research highlights the importance of follow-up and support, given the risk of repeated attempts rate of 15% after the first attempt and 35% after the second.

Vulnerability and stress are just two factors out of many (eg mental and physical health issues, social environment, problems within the family, etc) can lead to suicidal thoughts, creating a sense of tunnel vision where alternative solutions are hard to see. This state of despair gives the impression that the pain is permanent. However, there is often ambivalence - the desire for change and relief may outweigh the desire for death. Suicide is rarely caused by a single factor; rather, it often results from a complex interplay of causes accumulated over time.

3. Guidelines

Suicidal crises are often preceded by warning signs, although these are not always visible or recognized. Generally, suicidal people give messages and clues about their intentions to alert those around them. These may be cries for help, vestiges of hope, or expressions of ambivalence. These warning signs can be classified into different categories.

Faced with a person in a suicidal crisis, who is directly or indirectly expressing thoughts of suicide, each person normally acts according to his or her own sensitivity, responsibilities and limits. Staff and students should not manage such situations alone but must seek support from trained professionals. The aim is that, by adopting the right reflexes and attitudes, we can break the isolation in which the person in a suicidal crisis finds himself and also enable the person to feel better understood in his own suffering.

Early warning signs can help identify risks and guide conversations questions, enabling the person to open up about their suicidal thoughts and recognize the suffering they are experiencing.

Once warning signs have been detected, it's important to intervene if you're concerned about a person's well-being. You are encouraged to discuss the person's problems and emotions with them, in order to assess the level of urgency and dangerousness.

In order to provide the necessary help and prevent the person from acting out, we recommend that you adopt the right attitudes and reflexes. A particular point of attention can be directed towards three psychological processes: the feeling of being a burden to others, the feeling of not being connected to others, and the ability to act on suicidal thoughts.

If these three processes are present in a person, the risk of a suicide attempt can be considered high.

3. 1 For students with suicidal ideation

(adults may be guided by further information found in Annexes I, II and III)

1. **Recognize the signs**: behavioral changes such as insufficient sleep, withdrawal from others, difficulty concentrating, excessive rumination, increased alcohol and drug use, neglect of self-care, may indicate suicidal thoughts. Be aware of the time spent scrolling on your phone, when excessive it can be a concerning sign.
2. **Communicate with parents**: if possible or appropriate, discuss your feelings and needs with your parents.
3. **Reach out to someone you trust**: share your feelings with a family member, friend, teacher or school counsellor for support.
4. **Seek professional medical and psychological help**: the school's nurses and psychologists are there to help you. Outside the school, specialized medical and therapeutic care can provide additional support.
5. **Give priority to yourself and your personal care:** have a daily routine, make sure you get enough sleep, take some breaks, eat a healthy diet and engage in activities that bring you joy and satisfaction, for example sport, music, art, etc.

3. 2 For students who are close to a classmate with suicidal thoughts

(for details see Appendices I, II and III)

1. **Recognize the signs** and take them seriously (for details see Annex I and II): comments such as "I'd like to sleep forever" or "It doesn't matter anymore" should not be ignored.
2. **Listening without judging**: approach your peer with empathy and respect for his or her autonomy.
3. **Engage in conversation**: do not hesitate to ask open-ended questions such as 'What kinds of thoughts have been on your mind when things feel overwhelming? Can you help me understand what things feel like for you right now? Have thoughts about not wanting to be here been part of what you're experiencing?
4. **Normalize help-seeking**: dark thoughts should be seen as problems to be solved with the right support, rather than as shameful secrets that are difficult to share (although it's a very positive first step to do so).
5. **Encourage professional support:** suggest talking to an adult such as a school nurse, psychologist, teacher or guidance counsellor, and offer to accompany them.

6. **Share responsibility**: don't try to handle the situation alone as it can be a heavy load for you. Inform a trusted adult to ensure proper follow-up.
7. **Respect privacy**: respect confidentiality, but don't promise secrecy. Professional help is essential for your peer's safety.
8. **Seek support for yourself**: discuss your feelings and concerns with an adult you trust.

3. 3 For employees

1. **Recognizing warning signs: (for more details, see Annexes I, II and III)**
   a. Behavior: sudden increase in absences, drop in performance, neglect of personal care, substance abuse or eating disorders.
   b. Emotional: crying, mood swings, irritability, anxiety or low energy.
   c. Social: isolation, withdrawal from leisure activities or reduced interaction.
   d. Verbal: expressions of despair, such as "It's all pointless" or "I'm fed up".

2. **Approach with care**
   If you think a student is struggling, you need to engage them in a non-judgmental, empathetic conversation. Create a safe space for them to share their feelings. (see Annex II)

3. **Activate support at school level:**
   a. Inform the Educational Advisor (in the Secondary Cycle) or school psychologist to involve the CARE team (made up of the Deputy Director, Assistant Deputy Director, School Psychologists and also a number of persons who could be invited such as the educational advisor and school nurse).
   b. For immediate risks, accompany the student to the infirmary or call for professional help (psychologists or nurses) In case of immediate danger, do not leave the student alone and contact emergency services (112) and parents.
   c. Refer the student to the school psychologist for coordination of outpatient care.

4. **Encourage outside help**:
   Ask for specialized care outside school.

5. **Involve the family:**
   The CARE team will invite parents/caregivers to collaborate on a support plan, with an emphasis on professional intervention.

6. **Demonstrate transparency:**
   Clearly inform the student of the people who will be involved in his or her case.

7. **Keeping in touch:**
   Combating social isolation by fostering constant communication and links.

8. **Respect confidentiality:**
   Respect confidentiality, but don't promise secrecy. Professional help is essential for the pupil's safety.

Share information only with the CARE team and key stakeholders, while balancing privacy and security considerations.

By adhering to these guidelines, EEB3 seeks to create an environment in which students feel supported, understood and equipped to deal effectively with mental health issues. Together, we can foster resilience and safeguard the well-being of our school community.

4. Contacts

4.1. Contact at EEB3 school

Please note that all contacts are available on the school website: https://www.eeb3.eu/fr/contacts-3/

Contact		TEL	EMAIL
SCIBERRAS Micheline	**Directrice**	**701**	IXL-DIRECTOR@eursc.eu
BEDETTI Elisabeth	Assistante de direction	**710**	IXL-EXECUTIVE-ASSISTANT@eursc.eu
RUDALSKA Beata	**Directrice adjointe secondaire f.f.**	**712**	IXL-DEPUTY-DIRECTOR-SECONDARY-CYCLE@eursc.eu
VERDONCKT Vanessa	Assistante Directeur adjoint Sec. f.f.	**747**	IXL-ASSISTANT-DEPUTY-DIRECTOR-SECONDARY-CYCLE@eursc.eu
MONSIEUR Nadine	Co-Assistante Directeur adjoint Sec.	**759**	IXL-CO-ASSISTANT-DEPUTY-DIRECOR-SECONDARY@eursc.eu
EHRENHAUSER Alexandra	**Directrice adjointe Mat & Prim**	**762**	IXL-DEPUTY-DIRECTOR-NURSERY-AND-PRIMARY-CYCLE@eursc.eu
MOURGUES Delphine	Assistante Directeur adjoint M & P	**719**	IXL-ASSISTANT-DEPUTY-DIRECTOR-NURSERY-AND-PRIMARY-CYCLE@eursc.eu
VERWILGHEN Isabelle	**Directrice Adjointe Fin & Adm**	**702**	IXL-DEPUTY-DIRECTOR-FINANCE-AND-ADMINISTRATION@eursc.eu
SECURITE & SURETE	ESPANA FOX Felipe	**775**	IXL-SAFETY-SECURITY-OFFICER@eursc.eu
INFIRMERIE	RYSMAN M. - GARCIA N. - TEIXEIRA S. MARTINEZ CARDO P. - MAGÏ A.	**738**	Ixl-infirmerie@eursc.eu
PSYCHOLOGUES SCOLAIRES	GENICOT Anne Sophie	**768**	anne-sophie.genicot@eursc.eu
	NIMAX Suzanne	**773**	suzanne.nimax@eursc.eu
	GUEDJ Margaux	**782**	margaux.guedj@eursc.eu
	DAMGAJIAN Monique	**754**	monique.damgajian@eursc.eu
	VAN DER MERSCH Marie-Charlotte		marie-charlotte.van-der-mersch@eursc.eu
Spyridoula PAPANDREOU	Conseiller S1	**724**	spyridoula.papandreou@eursc.eu
Theodoros KAISIDIS	Conseiller S2	**732**	theodoros.kaisidis@eursc.eu
Fatma ARACI	Conseiller S3	**725**	fatma.araci@eursc.eu
Celia SANCHEZ	Conseiller S4 - DEA, FRA, FRB, FRC, NLA, ENA	**721**	celia.sanchez@eursc.eu
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Maria FOUSEKA	Conseiller S5- DEA, FRA, FRB, FRC, NLA, ENA	**749**	maria.fouseka@eursc.eu
Riftara MOHAMMAD	Conseiller S5- CSA, ESA, ESB, ELA, ELB, ELC	**746**	riftara.mohammad@eursc.eu
Adriana VLAICU	Conseiller S6- ESA, ESB, FRA, FRB, FRC, FRD, NLA	**748**	adriana.vlaicu@eursc.eu
Gwenaelle NEHLIG	Conseiller S6- CSA, CSB, DEA, ELA, ELB, ELC, ENA	**758**	gwenaelle.nehlig@eursc.eu
Sylvie TANGU	Conseiller S7	**729**	sylvie.tangu@eursc.eu
Joaquin ALBALADEJO	Vie scolaire	**771**	joaquin.albaladejo-del-castillo@eursc.eu

4.2. Contacts outside school in Belgium

Phone number		Email or website
1813	Suicide line (NL)	mail@zelfmoordlijn.be chat via https://www.zelfmoord1813.be/
0800 32 123	Suicide prevention center (FR)	https://www.preventionsuicide.be/ Anonymous online forum: www.preventionsuicide.be/forum
02 648 40 14	CHS Community Help Line (ENG)	https://www.chsbelgium.org/
103	Écoute Enfants (for children), young people and parents) (FR)	https://www.103ecoute.be/
107	Télé-accueil (FR)	https://tele-accueil.be/
112	Emergency number	https://112.be/

Students can also install applications on their phones.

These apps contain various tools that can help you overcome a crisis or prevent the next one.

Plus, if you want to be there for someone else, you can start using these apps.

App NL	Backup https://apps.apple.com/be/app/backup-door-zelfmoord-1813/id999043318 https://play.google.com/store/apps/details?id=be.zelfmoord1813.backup Red Cross - Hold-up application https://apps.apple.com/us/app/houvast/id1533784893 https://play.google.com/store/apps/details?id=be.rodekruis.houvast
App FR	Panic pass https://apps.apple.com/fr/app/panique-pas/id1459513911 https://play.google.com/store/apps/details?id=org.dontpanic&hl=fr

ENG App	StayAlive https://www.stayalive.app/ https://play.google.com/store/apps/details?id=uk.org.suicideprevention.stayalive&hl=en_GB Suicide in complete safety https://apps.apple.com/us/app/suicide-safe-by-samhsa/id968468139 https://play.google.com/store/apps/details?id=gov.hhs.samhsa.app.spa&hl=en_US Virtual Box of Hope https://apps.apple.com/us/app/virtual-hope-box/id825099621 https://play.google.com/store/apps/details?id=mil.dha.vhb&hl=en_US

Find out more

FR	https://www.zelfmoord1813.be/?gad_source=1&gclid=EAIaIQobChMIyIeejqqDhgMV66hoCR06zwCREAAYASAAEgIAjvD_BwE
FR	https://www.preventionsuicide.be/ https://www.preventionsuicide.be/sites/default/files/publication/CPS-GuidePreventionSuicide.pdf https://un-pass.be/
ENG	https://www.chsbelgium.org/

5. Conclusion

This policy reinforces EEB3's commitment to creating a safe, supportive environment where every student is valued and connected.

By promoting early identification, clear response procedures, and strong collaboration with families and community partners, the school aims to reduce risk and ensure that students in distress receive timely, compassionate support.

Ongoing training, open communication, and a culture of care remain essential to protecting pupil well-being and fostering a community where help is always accessible.

Annex I: Warning signs

It is not necessary to have all the signs. Some signs do raise concern but do not necessarily indicate depression. In any case, further investigation would be needed.

Signs of depression

- Experiencing sleep disturbances — insomnia or hypersomnia
- Showing changes in appetite — loss of appetite or excessive eating
- Displaying low energy or fatigue — sometimes restlessness
- Showing an inability to enjoy activities
- Expressing sadness or discouragement — crying, persistent low mood
- Experiencing difficulty making decisions
- Showing irritability or anger — including episodes of rage
- Expressing feelings of worthlessness — low self-esteem
- Showing increased anxiety

Social isolation

- Losing interest in activities
- Withdrawing and seeking solitude
- Cutting off contact with others — family, friends
- Refusing to communicate — mutism or withdrawal
- Showing a lack of emotional expression

Behaviours

- Showing lack of attention or concentration — frequent absences
- Dropping out of school or work
- Displaying hyperactivity or extreme slowness
- Showing general disinterest
- Showing preoccupation with death — including reincarnation
- Neglecting personal appearance — noticeable changes
- Using alcohol, drugs or medication excessively
- Engaging in self-injurious or dangerous behaviour
- Preparing for a final departure — arrangements, farewell letters, giving away valued items
- Creating drawings or artworks about death
- Showing sudden interest in weapons or toxic products
- Spending long hours on screens

Direct messages

- Saying life is not worth living
- Saying they would be better off dead
- Expressing fear of self-harm
- Expressing a desire to die
- Stating an intention to self-harm

Indirect messages

- Expressing feelings of uselessness
- Saying others would be better without them
- Hinting at not being around much longer
- Referring to going on a long trip
- Saying they will soon have peace
- Admiring someone for self-harm

Annex II: Attitudes and behaviour

- Taking every expression of suicidal intent seriously
- Identifying and approaching the person who appears to be in difficulty
- Establishing a bond of trust with the person in distress
- Creating and maintaining a caring, secure relational framework
- Practicing active listening
- Inviting the person to confide at their own pace
- Talking openly about suicidal thoughts when appropriate
- Showing empathy
- Remaining calm and speaking gently while respecting silences
- Avoiding judgment
- Encouraging the expression of emotions
- Accepting that not everything can be fully understood
- Welcoming the person's emotions, suffering, values and opinions
- Maintaining appropriate professional distance
- Being sincere and honest
- Respecting personal limits and ensuring consistency between words and actions
- Informing the person about available support resources
- Encouraging the person to contact a help or emergency service
- Accompanying the person to arrange an appointment with a support service — psychologist, psychotherapist, psychiatrist, doctor, or suicide prevention centre

Annex III: Attitudes and behavior to avoid

- Minimizing the person's suffering or trivializing their experience
- Judging the person in suicidal crisis
- Proposing solutions too quickly
- Preventing the expression of emotions
- Lecturing the person
- Encouraging the person to act out of duty toward others — children, parents, etc.
- Making the person feel guilty
- Moving from one question to the next without pause
- Trying to understand everything at all costs
- Being positive at all costs
- Giving false hope
- Turning the situation into a challenge
- Committing yourself beyond your responsibilities or capabilities
- Ignoring your own limits
- Allowing yourself to be bound by secrecy