




# Educators' Role in Mitigating Suicidal Propensities among Zimbabwe Rural Secondary Male Learners: An Exploration of Challenges and Interventions Mechanisms

Munyaradzi Saruchera<sup>a</sup> & Munyaradzi Chidarikire<sup>\*a</sup>

\* Corresponding author

Email: [mchidarikire@gzu.ac.zw](mailto:mchidarikire@gzu.ac.zw)

a. Africa For Centre for Inclusive Health Management, Stellenbosch University, Stellenbosch, South Africa

 10.46303/ressat.2025.19

## Article Info

Received: September 1, 2024

Accepted: December 24, 2024

Published: January 15, 2025

## How to cite

Saruchera, M., & Chidarikire, M. (2025). Educators' Role in Mitigating Suicidal Propensities among Zimbabwe Rural Secondary Male Learners: An Exploration of Challenges and Interventions Mechanisms. *Research in Social Sciences and Technology*, 10(1), 355-374.

<https://doi.org/10.46303/ressat.2025.19>

## Copyright license

This is an Open Access article distributed under the terms of the Creative Commons Attribution 4.0 International license (CC BY 4.0).

## ABSTRACT

This qualitative study explores the role of educators in addressing and mitigating suicidal propensities among male rural secondary school learners in Zimbabwe. Then, it focuses on educators' challenges and intervention mechanisms to provide insights into practical strategies for supporting mental health in this vulnerable population. Grounded in a phenomenological approach, the study utilizes a case study design to explore the lived experiences of 14 participants, including educators, parents, and health professionals. Data collection through focus group discussions enables a nuanced understanding of the complexities surrounding suicide prevention in rural educational settings. Research findings indicate that educators frequently struggle to identify suicidal tendencies among male learners due to cultural stigma surrounding mental health and lack of training in psychological assessment. Communication gaps with parents and health professionals further complicate these challenges. Conversely, successful intervention mechanisms identified in the study include peer support programs and mental health awareness campaigns, which create supportive environments and empower learners to seek help and engage in open discussions about mental health. Based on these findings, the study recommends that educational authorities implement comprehensive training programs for educators to equip them with the necessary skills to identify and address suicidal propensities among learners. Such training should encompass mental health education, communication strategies, and cultural sensitivity. Furthermore, establishing partnerships between schools and local health services can enhance the support system for vulnerable learners. Collaborative initiatives should be developed to facilitate regular mental health screenings and provide accessible resources for learners and their families.

## KEYWORDS

Counselling intervention; mental health; rural education; rural male learners; suicide prevention; Zimbabwe.

## INTRODUCTION AND BACKGROUND

This study was written in September, a month in which the world advocates for fighting against suicides. Gwarisa (2021) highlighted a particularly troubling occurrence during September's Suicide Prevention Month, noting that within a mere four-week period, two male tertiary learners in Zimbabwe took their own lives due to romantic distress. In recent years, an alarming rise in suicide rates among male learners in rural secondary schools in Zimbabwe has emerged as a pressing concern, drawing attention to the multifaceted roles of educators in addressing this critical issue. According to the World Health Organization (2019), Zimbabwe ranks as the 34th highest country in terms of suicide rates globally and fifth in Africa, following Lesotho, Eswatini, South Africa, and Botswana. The nation exhibits a crude suicide rate of 14.1 deaths per 100,000 individuals. Kupemba (2021) commented that, between 2015 and 2019, a staggering 2,058 males succumbed to suicide, contrasting sharply with 505 female victims during the same timeframe. These distressing statistics underscore profound and troubling issue within Zimbabwe. Furthermore, data gathered in 2023 from the study on suicide ideation among adolescents in Sub-Saharan Africa, conducted by the Regional Psychosocial Support Initiatives (REPSSI), reveals that Zimbabwe has the highest prevalence of suicidal thoughts among adolescents in the region. At baseline, 24 percent of Zimbabwean adolescents reported suicidal ideation, significantly surpassing South Africa (16 percent), Kenya (12 percent), and Angola (10 percent). Rwfafa-Madzvamutse (2023) emphasized the alarming trend of rising suicide rates, noting a global increase of 60% over the past fifty years, making suicide one of the leading causes of death among youth. Situation in Zimbabwe is particularly dire, as it mirrors the broader African trend of escalating suicide rates among men (WHO, 2023). This series of events reflects a deepening crisis requiring urgent attention and intervention. There are also undocumented cases of suicide among these learners, and this surge not only reflects a broader mental health crisis pervading rural communities but also underscores the complexities faced by educational institutions in these regions (Soares et al., 2016).

Underreporting of male suicide cases, juxtaposed with more frequently documented instances among female learners, raises significant questions regarding societal perceptions of gender and mental health. Research indicates that cultural stigmas surrounding male emotional expression may contribute to this discrepancy, as societal norms often discourage males from seeking help or discussing their mental health challenges (Australian Institution of Health and Welfare, 2020). This phenomenon suggests a critical gap in support systems available to male learners, necessitating a closer examination of how educators can effectively intervene. Educators, who are often among the first to observe changes in learner behaviour and emotional well-being, play a pivotal role in mitigating suicidal propensities. Barden et al. (2021) emphasize training educators to recognize signs of mental distress and implement supportive measures. However, educators in rural Zimbabwe face significant challenges, including limited resources, inadequate mental health training, and cultural barriers that inhibit open discussions about mental health issues (Almuneef, 2021). Such challenges complicate their capacity to

provide adequate support, necessitating a comprehensive exploration of intervention mechanisms tailored to their unique contexts. In light of these dynamics, this research investigates particular challenges educators face in rural Zimbabwe and the interventions that can be instituted to support male learners better (Kaggwa et al., 2021). By drawing on recent studies and real-world examples, this exploration aims to illuminate the critical intersection of education, mental health, and gender, ultimately contributing to a more nuanced understanding of how to effectively address the rising tide of suicide among male learners in these vulnerable communities (Bertuccio et al., 2020). Through a multi-faceted approach incorporating local insights and evidence-based practices, this research aspires to propose actionable strategies that educators can employ to foster a safer and more supportive environment for all learners (Kappel et al., 2023).

Suicidal tendencies among young individuals, especially in rural areas, are a growing concern globally. The issue is particularly pronounced among male learners in rural communities in Zimbabwe due to various social, economic, and cultural factors. Recent studies have shown that the suicide rate among young males in rural Zimbabwe has been on the rise, highlighting the urgent need for effective interventions (Kutz et al., 2023). According to WHO (2022), Zimbabwe has one of the highest suicide rates in Africa, with a significant portion of these cases involving young males in rural areas. This alarming trend underscores the importance of exploring the role of educators in addressing and preventing suicidal behaviour among this demographic (Breet et al., 2022). Challenges faced by educators in rural Zimbabwe in addressing suicidal propensities among male learners include limited resources and training in mental health support, the stigma surrounding mental health issues, and cultural beliefs that may hinder open discussions about suicide. For example, Kupemba (2021) found that many educators in rural Zimbabwe lack the necessary training to identify and support learners at risk of suicide. In response to these challenges, various intervention mechanisms have been proposed to empower educators in rural Zimbabwe to play a more proactive role in preventing suicide among male learners Bryant et al. (2020). For instance, Chidarikire et al. (2024) highlighted the effectiveness of peer support programs in schools, where learners are trained to provide emotional support to their peers and identify signs of distress. Through examining challenges faced by educators and exploring potential intervention mechanisms, this research aims to provide valuable insights into how educators in rural Zimbabwe can effectively mitigate suicidal propensities among male learners (Chipalo, 2023).

### **Statement of the Problem**

Suicide is a growing concern among adolescents worldwide, and Zimbabwe is no exception, particularly in rural secondary schools. Educators play a critical role in identifying and supporting learners who may be at risk of suicide. However, the challenges they face in this context are multifaceted and often exacerbated by socio-economic factors, cultural stigmas, and inadequate mental health resources. In rural areas of Zimbabwe, educators may encounter barriers such as limited training in mental health awareness, insufficient support systems, and

a lack of collaboration with mental health professionals. Additionally, the stigma surrounding mental health issues may hinder open discussions and interventions. Consequently, many learners may not receive necessary support, leading to increased vulnerabilities and suicidal tendencies. This research aims to explore the specific challenges educators face in mitigating suicidal propensities among secondary school learners in rural Zimbabwe. It will also examine the effectiveness of existing intervention mechanisms and propose strategies to enhance educators' capacity to address this critical issue. By focusing on the intersection of education and mental health, this study seeks to contribute to developing comprehensive support systems that can better serve vulnerable learners in rural communities.

### **THEORETICAL FRAMEWORK**

This study is anchored in Bronfenbrenner's Ecological Systems Theory, developed by Urie Bronfenbrenner in the 1970s. This theory posits that an individual's development is influenced by different environmental systems, which interact and affect one another. According to Bronfenbrenner (1979), these systems include the microsystem, mesosystem, exosystem, and macrosystem, each representing different layers of environmental influence. At the microsystem level, educators directly interact with learners in the classroom setting. Their ability to identify signs of distress or suicidal tendencies is crucial. Recent studies emphasize the importance of teacher awareness and training in mental health issues, highlighting that educators equipped with mental health knowledge can effectively recognize and respond to learners in crisis (Aldridge et al., 2020). Investing in professional development for teachers in rural Zimbabwe is vital for early intervention. Then, mesosystem involves the interconnections between different microsystems, such as the relationship between educators, parents, and the community. In rural Zimbabwe, strong community ties can be leveraged to support learners. This underscores the need for educators to foster partnerships with parents and community members, creating a supportive network for at-risk learners. The Ecosystem includes broader social systems that indirectly influence the learner, such as educational policies and mental health services. In Zimbabwe, systemic challenges like inadequate mental health resources and policies that overlook mental health in educational settings hinder effective intervention (Chibanda et al., 2016). Therefore, advocating for policy reforms to improve mental health services in rural areas is essential for creating an environment conducive to addressing suicidal behaviors. On the other hand, macrosystem encompasses cultural values, norms, and beliefs that shape attitudes toward mental health. In many rural Zimbabwean communities, the stigma surrounding mental health issues remains a significant barrier to seeking help (Gureje et al., 2021). This cultural context impacts educators' perceptions of their roles in addressing learner mental health. Increasing awareness and promoting mental health literacy within communities can help mitigate stigma and encourage help-seeking behaviours among learners.

## LITERATURE REVIEW

Identification of suicidal tendencies among male rural secondary school learners presents multifaceted challenges that have been documented across various contexts, including South Africa, Botswana, Nigeria, Britain, and America. In South Africa, educators report a lack of training in mental health issues, which hampers their ability to recognize warning signs of suicide (Lee et al., 2021). This is echoed in Botswana. Clarke et al. (2022) highlighted that educators often feel unprepared to handle mental health crises, attributing this inadequacy to insufficient professional development opportunities. Conversely, in Nigeria, the cultural stigma surrounding mental health issues complicates educators' efforts to engage with learners on such sensitive topics (Li et al., 2021). On the other hand, Dube et al. (2018) suggest that educators often fear repercussions from parents and the community if they address suicidal ideation openly. This phenomenon is not unique to Africa; in Britain, Engel (2023) found that educators are increasingly overwhelmed by rising mental health issues among learners but lack the appropriate resources and training to intervene effectively. Similarly, in the United States, Maple et al. (2018) indicate that educational institutions struggle with implementing comprehensive mental health programs, leaving many educators ill-equipped to support at-risk learners.

The disparity between rural and urban settings becomes particularly pronounced when examining intervention mechanisms. In South Africa, a community-based approach involving collaboration with local mental health professionals has shown some promise. Fuller-Thomson (2020) documented a program where educators were trained to recognize and refer learners in crisis, resulting in improved mental health outcomes. In contrast, interventions in rural Botswana often rely on traditional practices and community leaders, as highlighted by Marraccine and Pittleman (2022). While these cultural approaches can foster trust, they may lack the clinical rigor necessary for effective mental health support Grigsby et al. (2020). In Nigeria, school-based mental health programs have started to emerge, yet they remain nascent and underfunded. Martinezi Ales and Keye (2019) revealed that while some schools have begun implementing peer support systems, inconsistency in their application limits their overall effectiveness. In Britain and America, integrating mental health education into the school curriculum has gained traction, with programs like Mental Health First Aid being widely adopted (Johns et al., 2022; National Alliance on Mental Illness, 2023). However, the efficacy of such programs in rural settings remains underexplored, leaving a significant research gap. Despite the wealth of studies addressing suicidal tendencies and intervention mechanisms, there exists a notable gap regarding the specific context of male rural secondary school learners in Zimbabwe (Gwarisa, 2022).

While comparative studies highlight challenges faced by educators across various nations, unique sociocultural and economic factors influencing suicide risk in Zimbabwe remain largely unexamined (Holmes et al., 2021). Moreover, the intersectionality of gender and rurality in mental health discourse is often overlooked, necessitating focused research that considers

the experiences of male learners in these settings (McGrath & van Berger, 2019). This gap is critical, as understanding localized challenges and effective interventions could significantly inform policy and practice. Future research should prioritize qualitative methodologies to capture the nuanced experiences of educators and learners, enabling more holistic understanding of barriers to mental health support in rural Zimbabwean schools. Such inquiries could enrich academic literature and contribute to developing targeted interventions that address the pressing mental health needs of at-risk youth in the region (Holmes et al., 2023). Therefore, while significant strides have been made in understanding challenges and interventions related to suicidal tendencies among male learners across various countries, the specific context of Zimbabwean rural secondary schools remains largely uncharted (Dube et al., 2018). Addressing this gap is crucial for developing effective educational and mental health strategies tailored to the unique needs of these populations. By fostering more profound understanding of the interplay between cultural, social, and educational factors, stakeholders can better equip educators to support the mental health and well-being of male learners at risk of suicide (Horn et al, 2018).

### RESEARCH METHODOLOGY

We employed a phenomenological approach to explore the lived experiences of educators, parents, and health professionals regarding their roles in mitigating suicidal propensities among rural male learners in Zimbabwe. This approach allows for a deep understanding of the subjective experiences and perceptions of participants, which is crucial for addressing sensitive issues like suicide (Creswell & Poth, 2018). A case study design was deemed most appropriate for this research, as it facilitates an in-depth exploration of complex issues within real-life contexts (Yin, 2018). This design is particularly effective in educational research, allowing for a comprehensive understanding of interactions between educators and learners and broader social and cultural factors (Ivey-Stephenson et al., 2020). The study involved 14 participants who were selected purposefully to ensure a diverse representation of perspectives. Specifically, two male and two female learners were chosen to provide insights into their experiences and perceptions regarding mental health and the support they receive from educators. Additionally, four educators (two males and two females), including both educators and counselors, were included to explore their roles and challenges in addressing suicidal ideation among learners. The views of 4 parents (2 males and 2 females) of learners were also sought to understand parental involvement and communication regarding mental health. Finally, 2 nurses (1 male and 1 female) were included to provide insights into health-related aspects of suicide prevention in educational context. This purposive sampling ensures that participants possess relevant experiences, enhancing richness of data collected (Jordans et al, 2018).

Ethical considerations are paramount in research involving sensitive topics such as suicide. Key ethical principles guiding this study include informed consent, confidentiality, emotional support, and respect (Mhizha et al, 2020). Participants were provided with detailed

information about the study's purpose, procedures, and potential risks, with consent obtained prior to participation (Miles et al., 2020). This ensured that individuals understood their rights, including the right to withdraw at any time (Rajan et al., 2022). To protect participants' identities and personal information, measures were taken to anonymised data by replacing names and identifiable details with codes (Singer et al., 2018). Given the sensitive nature of topic, participants were informed about available mental health resources and support services in case discussions triggered emotional distress (Miller, 2021). Recognizing cultural context, researchers approached discussions sensitively to ensure participants felt safe and respected when sharing their experiences (Renand et al., 2022).

*The participants responded to two critical questions, what are the challenges faced by teachers in their role in mitigating suicidal propensities among Zimbabwe rural secondary male earners and what are the educators' intervention mechanisms for support rural male learners?* Data were collected through focus group discussions, a method well-suited for qualitative research as it fosters interaction and discussion among participants, leading to deeper insights (Naghavi et al., 2018). An adult focus group included educators, parents, and nurses, facilitating discussions around their perceptions of mental health interventions and challenges faced in supporting learners (Mo & Xin, 2018). Separate focus groups allowed learners to express their thoughts and feelings regarding support systems in place at schools and in their homes (Zimbabwe Ministry OF Health and Care, 2019; Rivas-Koehl et al., 2022). We used member checking to ensure the trustworthiness of data (Dube, 2020). Data were analysed using thematic analysis, which effectively identifies and interprets patterns within qualitative data (Braun & Clarke, 2006; Willford et al., 2021). The process involved familiarization, where researchers immersed themselves in data by transcribing recordings and reading transcripts multiple times. Initial codes were generated to identify significant data features relevant to research questions. These codes were then grouped into broader themes that encapsulated the study's main findings. Finally, themes were reviewed and refined to ensure they accurately represented data and aligned with research objectives (Mpofu et al., 2022; Wang et al., 2022). Qualitative research is particularly suited for this study due to the complexity and sensitivity surrounding the topic of suicide. It allows in-depth exploration of participants' experiences, perceptions, and social dynamics that influence mental health support in rural settings (Robinson, 2018; Vanderende et al., 2018). Insights gained from this approach can inform the development of targeted interventions and policies aimed at reducing suicidal tendencies among learners.

## FINDINGS AND DISCUSSION

### ***Challenges Faced by Educators***

Educators play a pivotal role in shaping their learners' emotional and academic well-being. However, they encounter numerous challenges that can hinder their ability to support learners,

particularly in context of mental health effectively. Following verbatim narrations, participants responded to above theme.

Tendai (Male Learner) commented that,

*"I think educators often don't see the signs. In our school, if someone is quiet or withdrawn, they might just think it is part of being a teenager. It's hard for them to understand that these could be warning signs."*

Additionally, Nyasha (Female Parent) was of the view that,

*"As a parent, I worry that educators lack training on mental health issues. They are so focused on academics that they miss the emotional struggles our boys face. It's frustrating because I want my child to be supported."*

On the other hand, Mr. Chirwa (Male Educator Counsellor) shared the following views,

*"One of the biggest challenges we face is stigma. Many boys are reluctant to talk about their feelings, and even if they do, there's a fear of being judged. We need to create a safe environment where they feel comfortable."*

More so, Rudo (Female Learner) narrated that,

*"I see a lot of boys suffering in silence. They might joke around, but deep down, they're dealing with a lot. It's tough for educators to recognize this unless they really pay attention to each learner."*

The above participants' view in this study articulated a range of findings on challenges educators face, revealing the critical need for greater awareness, training, and supportive environments. For instance, Tendai pointed out that educators often overlook subtle signs of emotional distress, such as learners' withdrawn behaviour, dismissing these indicators as typical teenage behaviour. This highlights a significant gap in educators' awareness of mental health issues, as noted by Robinson (2019). Additionally, Nyasha expressed concern about insufficient training that educators receive regarding mental health, aligning with recent studies indicating that many educators feel unprepared to address these concerns, often focusing primarily on academic performance (Neblett, 2019; Vagle, 2018). Furthermore, Mr. Chirwa emphasized the stigma that inhibits boys from discussing their feelings, noting that societal expectations discourage emotional vulnerability, complicating educators' efforts to provide adequate support (Ross & Kolves, 2017; Uddin et al., 2019). Rudo added that many boys suffer silently, masking their struggles behind humour, which underscores the necessity for educators to engage with learners on a personal level to effectively identify and address these underlying issues, practice supported by literature on responsive teaching (Nguyen et al., 2019; Tsuyuki et al., 2019).

These findings reveal multifaceted challenges that educators face in addressing the mental health needs of their learners. As noted by Tendai, the inability to recognize warning signs calls for enhanced observational skills among educators. Professional development programs focusing on mental health literacy could equip educators with the necessary tools to identify and respond to these signs more effectively (Nickerson et al., 2022; Tongas et al., 2019).



Nyasha's concerns regarding the lack of training resonate with existing literature, emphasizing that educator training programs often neglect mental health education. To bridge this gap, integrating mental health topics into educator training curricula could foster a more supportive educational environment (Rostila et al., 2016; Torok et al., 2019). Mr. Chirwa's insights on stigma reflect broader societal issues that necessitate systemic change; creating a safe and non-judgmental environment is crucial for encouraging boys to express their emotions. Schools could implement programs that promote emotional literacy and normalize discussions around mental health to help reduce stigma (O'Neill et al., 2020; Thompson et al., 2019). Finally, Rudo's emphasis on the need for individualized attention is critical, as educators must prioritize building strong relationships with their learners to create an environment where they feel valued and understood. This relational approach has significantly impacted learners' emotional well-being and academic success (Ortin-Peralta et al., 2021). Therefore, addressing challenges educators face in recognizing and responding to learners' mental health needs requires concerted effort to enhance training, reduce stigma, and promote individualized attention within the school environment.

Discussions gathered from various participants shed light on the multifaceted challenges educators face in recognizing and addressing the mental health needs of rural male learners. These insights underscore the necessity for enhanced training, supportive environments, and collaborative frameworks. Tendai's observation highlights a critical gap in educators' ability to identify emotional distress among learners. His remark about educators overlooking signs of withdrawal suggests that there is a pervasive assumption that such behaviour is merely a phase of adolescence. This notion can be detrimental, as it may prevent timely intervention and support for struggling people. The challenge lies not only in recognition of these signs but also in understanding their implications within the broader context of mental health. Nyasha's perspective as a parent further amplifies this concern. She articulates the frustration felt by parents when educators prioritize academic performance over emotional well-being. This dichotomy can create a disconnect between home and school, where parents feel their children's emotional struggles are being neglected. Her call for increased training in mental health issues for educators underscores the need for a paradigm shift in how educational institutions approach learner well-being. Mr. Chirwa's insights into the stigma surrounding mental health discussions among boys provide a critical lens on cultural barriers that inhibit open communication. The reluctance of boys to share their feelings, coupled with fears of judgment, creates an environment where emotional struggles are often internalized. His emphasis on the necessity of a safe space for dialogue is echoed throughout the discussions, suggesting that educators must actively foster an atmosphere of trust and understanding. Rudo's observations about boys suffering in silence resonate with a broader theme of unrecognized emotional distress. Her point that educators may not notice underlying struggles due to superficial interactions highlights the importance of building deeper relationships with

learners. This necessitates a shift in educational practices to prioritize holistic engagement over mere academic assessment.

### ***Educators' intervention mechanisms for support rural male learners***

This theme of intervention mechanisms for supporting male learners has gained increasing attention in educational discourse. As societal pressures and expectations surrounding masculinity evolve, the need for effective support systems within schools becomes paramount. This theme is particularly relevant given the rising awareness of mental health issues among adolescents and the unique challenges faced by male learners in seeking help.

Gally (Female Learner) observed that,

*"I've seen educators trying to create support groups, but they often don't last. It's important for boys to have space to share without feeling weak. They need to know it's okay to talk."*

On the other hand, Mercy (Female Parent) held the following opinion,

*"I believe in importance of communication between parents and educators. Regular workshops could help us all understand how to support our boys better. We need to work together to create a strong support system."*

In addition, Mrs. Dakwa (Female Educator Counsellor) argued that,

*"We've started implementing peer mentorship programs. Older learners are paired with younger ones to provide guidance and support. It's showing promise, but we need more resources to reach every learner effectively."*

Lastly, Peter (Male Learner) explained that,

*"I think having more awareness activities in school could help. If we had workshops on mental health, it would show that it's a serious issue and not something to be ashamed of. Boys would feel more inclined to seek help."*

The above oral perspectives of various stakeholders—learners, parents, and educators—shed light on current interventions and potential areas for improvement in supporting boys in educational settings. Gally highlighted the transient nature of support groups in schools, emphasizing that while they are initiated, they often lack longevity. This aligns with findings from a study by Panesar et al. (2020), which notes that sustainable support systems are crucial for ongoing learner engagement and mental health. The critical role of communication between parents and educators was underscored by Nyasha, who argued that regular workshops could enhance understanding and collaboration, ultimately benefiting learners' emotional and academic well-being, a claim supported by Scott et al. (2021). Mr. Chirwa mentioned the implementation of peer mentorship programs, which have shown promise in fostering guidance and support among learners. Posamentier et al. (2022) found that such programs can significantly improve learners' social skills and academic performance, especially when adequately resourced. Additionally, Peter pointed out the necessity for awareness activities regarding mental health. WHO (2023) emphasizes that educational institutions should prioritize mental health education to destigmatize seeking help, particularly among male learners.

The findings indicate that schools must develop more sustainable support systems for male learners. As Mercy's perspective suggests, the temporary nature of existing support groups fails to provide the ongoing assistance that boys require. Long-term strategies, such as integrating support groups into school curriculum, could enhance their effectiveness and reach. The importance of enhancing communication between parents and educators cannot be overstated. Gally's call for workshops reflects a growing body of literature supporting collaborative learner-support approaches. Building strong partnerships can create a more cohesive support network, ultimately leading to better outcomes for male learners (Purtle et al., 2022; Terry & Williams, 2021). Mr. Dakwa's acknowledgment of the need for additional resources for peer mentorship programs is critical, as research indicates that mentorship programs yield positive results when adequately funded and supported (Seff & Stark, 2019; Stick et al., 2020). Schools must prioritize resource allocation to ensure these programs can be expanded and made accessible to all learners. Peter's insights also highlight the urgent need for increased school mental health awareness initiatives. The stigma surrounding mental health issues, particularly among boys, can deter them from seeking help. Implementing comprehensive mental health programs, as recommended by Quadt et al. (2020), could foster a more supportive environment where boys feel safe discussing their challenges without fear of judgment. Therefore, while existing interventions show promise, a multifaceted approach that includes sustainable support systems, enhanced communication, resource allocation, and mental health awareness is necessary to support male learners in educational settings effectively.

This section deals with discussion of this second theme. Gally's comments on the transient nature of support groups reveal critical challenges in sustaining initiatives that foster emotional support among boys. For these groups to be effective, they must be continually nurtured and integrated into the school culture. The stigma associated with seeking help, particularly among male learners, necessitates a consistent and reinforced message that vulnerability is strength, not weakness. Mercy's advocacy for enhanced communication between parents and educators is crucial in creating a unified approach to learner support. Regular workshops could serve as a platform for sharing strategies and fostering collaboration, ensuring that both parents and educators are equipped to address the emotional needs of boys. This partnership can create a more robust support network, facilitating a holistic approach to mental health. Mrs. Dakwa's implementation of peer mentorship programs represents an innovative strategy for connecting older and younger learners. This model empowers older learners and provides younger learners with relatable figures who can guide them through their challenges. However, as she points out, the effectiveness of such programs hinges on adequate resources and support from a broader educational framework. Peter's suggestion for increasing awareness through workshops on mental health is a proactive approach to destigmatizing these discussions. By normalizing conversations about mental health within the school environment, educators can encourage learners to seek help without fear of judgment. Awareness activities

are essential in reshaping perceptions and fostering an understanding that mental health is a critical aspect of overall well-being. Perspectives shared by participants reveal the complex interplay between educators, parents, and learners in addressing the mental health needs of rural male learners. There is a clear need for enhanced training, supportive environments, and collaborative efforts to create effective intervention mechanisms.

### **Recommendations**

To address these challenges, several recommendations have been proposed. First, educators should receive specialized training in mental health awareness and suicide prevention strategies facilitated through workshops and continuous professional development programs. This will equip educators with the necessary skills to identify warning signs and respond effectively to at-risk learners. Second, schools must be provided with adequate resources, including mental health materials and access to professional counselling services, as investments in mental health infrastructure are crucial for creating supportive environments for learners. Additionally, efforts should be made to involve parents and community members in mental health awareness campaigns, thereby building a strong support network that can help destigmatize mental health issues and encourage open discussions among families. Furthermore, schools should develop and implement holistic mental health programs encompassing peer support groups, counselling services, and regular mental health awareness activities, promoting a culture of openness and support among learners. Collaboration with mental health professionals is also essential; partnerships between schools and mental health organizations can enhance the support available to educators and learners, ensuring that they are up-to-date with best practices in mental health support. Lastly, advocacy for policies prioritizing mental health in education is crucial. Stakeholders should work towards integrating mental health education into the school curriculum and ensuring that mental health resources are accessible in rural areas. Through addressing these recommendations, stakeholders can strengthen the capacity of educators to support male learners and significantly reduce suicidal tendencies among this vulnerable population in rural Zimbabwe.

### **CONCLUSION**

This research has highlighted the critical role educators play in mitigating suicidal propensities among male learners in rural Zimbabwe. A thorough examination of challenges faced by educators revealed that factors such as limited training, inadequate resources, cultural stigmas, and lack of support networks significantly hinder their ability to identify and address suicidal tendencies effectively. While various intervention mechanisms, including counselling and peer support programs, are in place, insufficient training and resources often compromise their effectiveness. These findings underscore the urgent need for enhanced support systems for educators and the implementation of comprehensive mental health initiatives tailored to the unique needs of rural male learners.

## REFERENCES

- Almuneef, M. (2021). Long term consequences of child Sexual Abuse in Saudi Arabia: A report from national study. *Child Abuse & Neglect, 116*(1), 10-23. <https://doi.org/10.1016/j.chiabu.2019.03.003>
- Australian Institute for Health and Welfare. (2020). *Health and welfare links*. Retrieved from <https://www.aihw.gov.au/reports/australias-welfare/health-and-welfare-links> Accessed 6<sup>th</sup> August 2024
- Baiden, P., Panisch, L. S., Kim, Y. J., LaBrenz, C. A., Kim, Y., & Onyeaka, H. K. (2021). Association between first sexual intercourse and sexual Violence victimization, symptoms of depression, and suicidal behaviors among adolescents in the United States: Findings from 2017 and 2019 national youth risk behavior survey. *International Journal of Environmental Research and Public Health, 18* (15), 7922-7953. <https://doi.org/10.3390/ijerph18157922>
- Bertuccio, R. F., Frank, J. L., & Hall, C. M. (2022). Patterns of warning signs among adolescents who contemplate suicide: A latent profile analysis. *School Psychology Review, 51* (3), 315–328. <https://doi.org/https://doi.org/10.1080/2372966X.2020.1836519>
- Breet, E., Matooane, M., Tomlinson, M., & Bantjes, J. (2021). Systematic review and narrative synthesis of suicide prevention in high-schools and universities: a research agenda for evidence-based practice. *BMC Public Health, 21*(1), 1–21.
- Bryant, D. J., Oo, M., & Damian, A. J. (2020). The rise of adverse childhood experiences during the COVID-19 pandemic. *Psychological Trauma: Theory Research Practice and Policy, 12*(S1), S193–S204. <https://doi.org/10.1037/tra0000711>
- Clark, K. N., Strissel, D., Malecki, C. K., Ogg, J., Demaray, M. K., & Eldridge, M. A. (2022). Evaluating the Signs of Suicide Program: Middle school learners at risk and staff acceptability. *School Psychology Review, 51*(3), 354–369. <https://doi.org/https://doi.org/10.1080/2372966X.2021.1936166>
- Cuesta, I., Montesó-Curto, P., Metzler Sawin, E., Jiménez-Herrera, M., Puig-Llobet, M., Seabra, P., & Toussaint, L. (2021). Risk factors for teen suicide and bullying: An international integrative review. *International Journal of Nursing practice, 27*(3), e12-e24
- Diago, M., Vila-Badia, R., Serra-Arumí, C., Butjosa, A., Del Cacho, N., Esteban Sanjusto, M., Colomer-Salvans, A., Sánchez, L., Dolz, M., Muñoz-Samons, D., Profep, G., & Usall, J. (2022). Emotional abuse and perceived stress: The most relevant factors in Suicide behavior in first-episode psychosis patients. *Psychiatry Research, 31*(5), 11-23. <https://doi.org/10.1016/j.psychres.2022.114699>
- Dubé, C., Gagné, M. H., Clément, M., & Chamberland, C. (2018). Community Violence and associated psychological problems among adolescents in the general population. *Journal of Child & Adolescent Trauma, 11*(4), 411–420. <https://doi.org/10.1007/s40653-018-0218-8>

- Engel, B. (2023). *The emotionally abusive relationship: How to stop being abused and how to stop abusing*. London: Wiley.
- Feigelman, W., Cerel, J., McIntosh, J. L., Brent, D., & Gutin, N. (2018). Suicide exposures and bereavement among American adults: Evidence from the 2016 general social survey. *Journal of Affective Disorders, 22*(7), 1–6. <https://doi.org/10.1016/j.jad.2017.09.056>
- Gijzen, M. W., Rasing, S. P., Creemers, D. H., Engels, R. C., & Smit, F. (2022). Effectiveness of school-based preventive programs in suicidal thoughts and behaviors: A meta-analysis. *Journal of Affective Disorders, 8* (2), 408–420. <https://doi.org/https://doi.org/10.1016/j.jad.2021.10.062>
- Gwarisa, M. (2021). *Rise In Suicides Among Zimbabwe Male Tertiary Learners Exposes Need for Peer-to-Peer Counseling in Zim Universities and Colleges*. London: Pearson
- Holmes G, Clacy A, Hermens DF, & Lagopoulos J. (2021) The long-term efficacy of suicide prevention gatekeeper training: A systematic review. *Archives of Suicide Research. 25*(2), 177–207. <https://doi.org/10.1080/13811118.2019.1690608>.
- Ivey-Stephenson, A. Z., Demissie, Z., Crosby, A. E., Stone, D. M., Gaylor, E., Wilkins, N., Lowry, R., & Brown, M. (2020). Suicidal ideation and behaviors among high school learners — Youth Risk Behavior Survey, United States, 2019. *MMWR Supplements, 69*(1), 47–55. <https://doi.org/https://doi.org/10.15585/mmwr.su6901a6>
- Jordans, M., Rathod, S., Fekadu, A., Medhin, G., Kigozi, F., Kohrt, B., Luitel, N., Petersen, I., Shidhaye, R., Ssebunnya, J., Patel, V., & Lund, C. (2018). Suicidal ideation and behaviour among community and health care seeking populations in five low- and middle-income countries: A cross-sectional study. *Epidemiology and Psychiatric Sciences, 27*(4), 393–402. <https://doi.org/10.1017/S2045796017000038>
- Kaggwa, M. M., Muwanguzi, M., Najjuka, S. M., Nduhura, E., Kajjimu, J., Mamun, M. A., Arinaitwe, I., Ashaba, S., & Griffiths, M. D. (2022). Risky sexual behaviours among Ugandan university learners : A pilot study exploring the role of adverse childhood experiences, substance use history, and family environment. *PloS One, 17*(11), 29–56. <https://doi.org/10.1371/journal.pone.0277129>
- Kappel, R. H., Livingston, M. D., Patel, S. N., Villaveces, A., & Massetti, G. M. (2021). Prevalence of adverse childhood experiences (ACEs) and associated health risks and risk behaviors among young women and men in Honduras. *Child Abuse & Neglect, 1*(5), 1–14. <https://doi.org/10.1016/j.chiabu.2021.104993>
- Karatekin, C. (2018). Adverse childhood experiences (ACEs), stress and mental health in college learners . *Stress and Health: Journal of the International Society for the Investigation of Stress, 34*(1), 36–45. <https://doi.org/10.1002/smi.2761>
- Knettel, B. A., Knippler, E., Martinez, A., Sardana, S., Agor, D., Mwobobia, J., Ledbetter, L., Amiri, I., Relf, M. V., & Goldston, D. B. (2023). A scoping review of counseling interventions for Suicide prevention in Africa: Few studies address this life-saving

- aspect of mental health treatment. *Journal of Affective Disorders*, 3(2), 183–190. <https://doi.org/10.1016/j.jad.2023.02.038>
- Kupemba, D., N. (2021). *In Zimbabwe, Toxic Masculinity is Driving Male Suicide Rates*. Harare: Mambo Press.
- Kurtz, M., Kawka, H., Horstick, O., Brenner, S., Deckert, A., Louis, V. R., Winkler, V., Lowery Wilson, M., Bärnighausen, T., & Dambach, P. (2023). The prevalence of emotional abuse in children living in Sub-saharan Africa—a systematic review. *Child Abuse & Neglect*, 1(4), 10-18. <https://doi.org/10.1016/j.chiabu.2023.106155>
- Lambie GW, Stickl Haugen J, & Borland JR, (2019). Who took “counseling” out of the role of professional school counselors in the United States? *Journal of School-Based Counseling Policy & Evaluation*, 1(3):51–61. <https://doi.org/10.25774/7kjb-bt85>.
- Lee, N., Massetti, G. M., Perry, E. W., & Self-Brown, S. (2022). Adverse childhood experiences and associated mental distress and Suicide risk: Results from the Zambia Violence against children survey. *Journal of Interpersonal Violence*, 37(21), NP21244–NP21265. <https://doi.org/10.1177/08862605211056726>
- Li, S., Wang, S., Gao, X., Jiang, Z., Xu, H., Zhang, S., Sun, Y., Tao, F., Chen, R., & Wan, Y. (2021). Patterns of adverse childhood experiences and suicidal behaviors in adolescents: A four-province study in China. *Journal of Affective Disorders*, 28 (5), 69–76. <https://doi.org/10.1016/j.jad.2021.02.045>
- Maple, M., Pearce, T., Sanford, R., Cerel, J., Dransart, D. A. C., & Andriessen, K. (2018). A systematic mapping of suicide bereavement and postvention research and a proposed strategic research agenda. *Crisis*, 39(4), 275–282. <https://doi.org/https://doi.org/10.1027/0227-5910/a000498>
- Marraccini, M. E., & Pittleman, C. (2022). Returning to school following hospitalization for suicide-related behaviors: Recognizing learner voices for improving practice. *School Psychology Review*, 51(3), 370–385. <https://doi.org/https://doi.org/10.1080/2372966X.2020.1862628>
- Marraccini, M. E., Griffin, D., O’Neill, J. C., Martinez, R. R., Jr., Chin, A. J., Toole, E. N., Grapin, S. L., & Naser, S. C. (2022). School risk and protective factors of suicide: A cultural model of suicide risk and protective factors in schools. *School Psychology Review*, 51(3), 266–289. <https://doi.org/https://doi.org/10.1080/2372966X.2020.1871305>
- Marraccini, M. E., Ingram, K. M., Naser, S. C., Grapin, S. L., Toole, E. N., O’Neill, J. C., Chin, A. J., Martinez, R. R., & Griffin, D. (2022). The roles of school in supporting LGBTQ + youth: A systematic review and ecological framework for understanding risk for suicide-related thoughts and behaviors. *Journal of School Psychology*, 9 (6), 27–49. <https://doi.org/https://doi.org/10.1016/j.jsp.2021.11.006>
- Martínez-Alés, G., & Keyes, K. M. (2019). Fatal and non-fatal self-injury in the USA: Critical review of current trends and innovations in prevention. *Current Psychiatry Reports*, 21(10), 1–11. <https://doi.org/https://doi.org/10.1007/s11920-019-1080-6>

- McGrath K. F., Van Bergen P. (2019). Attributions and emotional competence: Why some educators experience close relationships with disruptive learners (and others don't). *Educators and Teaching*, 25(3), 334–357.
- Mhizha, S., Muromo, T., Matika, M., Chikoko, W., & Mudenda, M. (2020). Suicidal ideations and suicidal attempts among street children in Harare, Zimbabwe. *Journal of Gleanings from Academic Outliers*, 9(1), 1–16.
- Miles M. B., Huberman A. M., Saldana J. (2020). *Qualitative data analysis: A methods sourcebook* (4th ed.). London: Sage.
- Miller, D. N. (2021). *Child and adolescent suicidal behavior: School-based prevention, assessment, and intervention*. London: Guilford Publications.
- Mo PK, Ko TT, & Xin MQ. (2018). School-based gatekeeper training programmes in enhancing gatekeepers' cognitions and behaviors for adolescent suicide prevention: A systematic review. *Child and Adolescent Psychiatry and Mental Health*, 12(29), 1–24. <https://doi.org/10.1186/s13034-018-0233-4>.
- Mpofu, J. J., Cooper, A. C., Ashley, C., Geda, S., Harding, R. L., Johns, M. M., Spinks-Franklin, A., Njai, R., Moyse, D., & Underwood, M. (2022). Perceived racism and demographic, mental health, and behavioral characteristics among high school learners during the COVID-19 pandemic—Adolescent Behaviors and Experiences Survey, United States, January–June 2021. *Morbidity and Mortality Weekly Report Supplement*, 71(3), 22–27. [https://www.cdc.gov/mmwr/volumes/71/su/su7103a4.htm?s\\_cid=su7103a4\\_w](https://www.cdc.gov/mmwr/volumes/71/su/su7103a4.htm?s_cid=su7103a4_w)
- Naghavi, M. (2019). Global, regional, and national burden of suicide mortality 1990 to 2016: Systematic analysis for the global burden of disease study 2016. *Bmj*, 3(4), 194–201 <https://doi.org/10.1136/bmj.l94>
- Neblett, E. W. (2019). Racism and health: Challenges and future directions in behavioral and psychological research. *Cultural Diversity and Ethnic Minority Psychology*, 25(1), 12–20. <https://doi.org/https://doi.org/10.1037/cdp0000253>
- Nguyen, K. H., Kegler, S. R., Chiang, L., & Kress, H. (2019). Effects of poly-victimization before age 18 on health outcomes in young Kenyan adults: Violence against children survey. *Violence and Victims*, 34(2), 229–242. <https://doi.org/10.1891/0886-6708.VV-D-17-00182>
- Nickerson, A. B., Breux, P., Schaffer, G. E., & Samet, M. (2022). An initial evaluation of the Helping Learners at Risk for Suicide professional development workshop. *School Psychology Review*, 51(3), 343–353. <https://doi.org/https://doi.org/10.1080/2372966X.2021.1919494>
- O'Neill, J. C., Marraccini, M. E., Bledsoe, S. E., Knotek, S. E., & Tabori, A. V. (2020). Suicide prevention practices in schools: School psychologists' experiences, training, and knowledge. *School Psychology*, 35 (1), 61-71. <https://doi.org/https://doi.org/10.1037/spq0000331>



- Ortin-Peralta, A., Myruski, S., Rosario-Williams, B., & Xu, M. (2021). *Early childhood adversity, stress, and developmental pathways of suicide risk*. In R. Miranda & E. L. Jeglic (Eds.), *Handbook of youth suicide prevention* (pp. 31–57). Springer. [https://doi.org/10.1007/978-3-030-82465-5\\_3](https://doi.org/10.1007/978-3-030-82465-5_3)
- Panesar, B., Soni, D., Khan, M. I., Bdair, F., Holek, M., Tahir, T., Woo, J., Khumalo, N., Thabane, L., & Samaan, Z. (2020). National Suicide management guidelines with family as an intervention and Suicide mortality rates: A systematic review protocol. *British Medical Journal Open*, *10*(7), e05- e15. <https://doi.org/10.1136/bmjopen-2019-034694>
- Posamentier, J., Seibel, K., & DyTang, N. (2022). Preventing youth suicide: A review of school-based practices and how social–emotional learning fits into comprehensive efforts. *Trauma, Violence, and Abuse*, *1*(3), 12–19. <https://doi.org/10.1177/15248380211039475>
- Purtle, J., Nelson, K. L., & Gollust, S. E. (2022). Public opinion about adverse childhood experiences: Social Stigma, attribution of blame, and government intervention. *Child Maltreatment*, *27*(3), 344–355. <https://doi.org/10.1177/10775595211004783>
- Quadt, L., Esposito, G., Critchley, H. D., & Garfinkel, S. N. (2020). Brain-body interactions underlying the association of loneliness with mental and physical health. *Neuroscience and Biobehavioral Reviews*, *116*, 283–300. <https://doi.org/10.1016/j.neubiorev.2020.06.015>
- Rajan, S., Arora, P., Cheng, B., Khoo, O., & Verdeli, H. (2022). Suicidality and exposure to school-based violence among a nationally representative sample of Asian American and Pacific Islander adolescents. *School Psychology Review*, *51*(3), 304–314. <https://doi.org/10.1080/2372966X.2020.1832864>
- Renaud, J., MacNeil, S. L., Vijayakumar, L., Spodenkiewicz, M., Daniels, S., Brent, D. A., & Turecki, G. (2022). Suicidal ideation and behavior in youth in low- and middle-income countries: A brief review of risk factors and implications for prevention. *Frontiers in Psychiatry*, *3* (2), 10-34. <https://doi.org/10.3389/fpsyt.2022.1044354>
- Rivas-Koehl, M., Valido, A., Espelage, D. L., Robinson, L. E., Hong, J. S., Kuehl, T., Mintzd, S., & Wyman, P. A. (2022). Understanding protective factors for suicidality and depression among U.S. sexual and gender minority adolescents: Implications for school psychologists. *School Psychology Review*, *51*(3), 290–303. <https://doi.org/10.1080/2372966X.2021.1881411>
- Robinson, J., & Krysinska, K. (2019). Youth Suicide prevention in low-income and middle-income countries. *The Lancet Child and Adolescent Health*, *3*(4), 200–201. [https://doi.org/10.1016/S2352-4642\(19\)30002-1](https://doi.org/10.1016/S2352-4642(19)30002-1)
- Robinson, J., Bailey, E., Witt, K., Stefanac, N., Milner, A., Currier, D., Pirkis, J., Condrón, P., & Hetrick, S. (2018). What works in youth Suicide prevention? A systematic review and meta-analysis. *EClinical Medicine*, *2* (3), 14–25. <https://doi.org/10.1016/j.eclinm.2018.10.004>

- Ross V, & Kolves K, (2017). De Leo D. Educators' perspectives on preventing suicide in children and adolescents in schools: A qualitative study. *Archives of Suicide Research*, 2(4), 519–530. <https://doi.org/10.1080/13811118.2016.1227005>.
- Rostila, M., Berg, L., Arat, A., Vinnerljung, B., & Hjern, A. (2016). Parental death in childhood and self-inflicted injuries in young adults—a national cohort study from Sweden. *European Child and Adolescent Psychiatry*, 25(10), 1103–1111. <https://doi.org/10.1007/s00787-016-0833-6>
- Rwafa-Madzvamutse, D. (2023). *Mental Health: Suicide — a rising public health threat*. [Mental Health: Suicide — a rising public health threat - The Zimbabwe Independent \(newsday.co.zw\)](https://www.independent.co.zw/newsday.co.zw) Accessed 6<sup>th</sup> August 2024
- Scott, M., Singer, J. B., & Hughes, J. (2021). *Preventing youth suicide in the school community: Strategies for postvention, intervention, and prevention*. In R. Miranda & E. L. Jeglic (Eds.), *Handbook of youth suicide prevention* (pp. 371–389). London: Springer. [https://doi.org/https://doi.org/10.1007/978-3-030-82465-5\\_21](https://doi.org/https://doi.org/10.1007/978-3-030-82465-5_21)
- Seff, I., & Stark, L. (2019). A sex-disaggregated analysis of how emotional Violence relates to Suicide ideation in low- and middle-income countries. *Child Abuse and Neglect*, 9 (3), 222–227. <https://doi.org/10.1016/j.chiabu.2019.05.008>
- Singer, J. B., Erbacher, T. A., & Rosen, P. (2019). School-based suicide prevention: A framework for evidence-based practice. *School Mental Health*, 11(1), 54–71.
- Soares, A. L. G., Howe, L. D., Matijasevich, A., Wehrmeister, F. C., Menezes, A. M. B., & Gonçalves, H. (2016). Adverse childhood experiences: Prevalence and related factors in adolescents of a Brazilian birth cohort. *Child Abuse and Neglect*, 5 (4), 21–30. <https://doi.org/10.1016/j.chiabu.2015.11.017>
- Stickl Haugen J, Sutter CC, & Tinstman -Jones JL, 2020 . The educator expectations and values for suicide prevention scale: Confirmatory factor analysis and validation. *Crisis* 2(2), 14-26. <https://doi.org/10.1027/0227-5910/a000706>.
- Terry, A. N., & Williams, L. S. (2021). On the outside looking in: Rural girls, trauma, and involvement in the criminal justice system. *Journal of Aggression, Maltreatment & Trauma*, 30(3), 368–388.
- Thompson, M. P., Kingree, J. B., & Lamis, D. (2019). Associations of adverse childhood experiences and suicidal behaviors in adulthood in a U.S. nationally representative sample. *Child: Care Health and Development*, 45 (1), 121–128. <https://doi.org/10.1111/cch.12617>
- Torok M, Calear AL, Smart A, & Nicolopoulos A, (2019). Preventing adolescent suicide: A systematic review of the effectiveness and change mechanisms of suicide prevention gatekeeping training programs for educators and parents. *Journal of Adolescence*. 7 (3),100–112. <https://doi.org/10.1016/j.adolescence.2019.04.005>.
- Tougas, A. M., Rassy, J., Frenette-Bergeron, É., & Marcil, K. (2019). “Lost in transition”: A systematic mixed studies review of problems and needs associated with school

- reintegration after psychiatric hospitalization. *School Mental Health*, 11(4), 629–649. <https://doi.org/https://doi.org/10.1007/s12310-019-09323-3>
- Tsuyuki, K., Al-Alusi, N. A., Campbell, J. C., Murry, D., Cimino, A. N., Servin, A. E., & Stockman, J. K. (2019). Adverse childhood experiences (ACEs) are associated with forced and very early sexual initiation among black women accessing publicly funded STD clinics in Baltimore, MD. *PloS One*, 14(5), 1-24. <https://doi.org/10.1371/journal.pone.0216279>
- Uddin, R., Burton, N. W., Maple, M., Khan, S. R., & Khan, A. (2019). Suicidal ideation, Suicide planning, and Suicide attempts among adolescents in 59 low-income and middle-income countries: A population-based study. *The Lancet Child & Adolescent Health*, 3(4), 223–233. [https://doi.org/10.1016/S2352-4642\(18\)30403-6](https://doi.org/10.1016/S2352-4642(18)30403-6)
- Vagle M. D. (2018). *Crafting phenomenological research* (2nd ed.). London: Routledge.
- VanderEnde, K., Chiang, L., Mercy, J., Shawa, M., Hamela, J., Maksud, N., Gupta, S., Wadonda-Kabondo, N., Saul, J., Gleckel, J., Kress, H., & Hillis, S. (2018). Adverse childhood experiences and HIV sexual risk-taking behaviors among young adults in Malawi. *Journal of Interpersonal Violence*, 33(11), 1710–1730. <https://doi.org/10.1177/0886260517752153>
- Vargas-Medrano, J., Diaz-Pacheco, V., Castaneda, C., Miranda-Arango, M., Longhurst, M. O., Martin, S. L., Ghumman, U., Mangadu, T., Chheda, S., Thompson, P. M., & Gadad, B. S. (2020). Psychological and neurobiological aspects of suicide in adolescents: Current outlooks. *Brain, Behavior, & Immunity - Health*, 7, (10)1-10. <https://doi.org/https://doi.org/10.1016/j.bbih.2020.100124>
- Wang, C., La Salle, T., Wu, C., & Liu, J. L. (2022). Do parental involvement and adult support matter for learners' suicidal thoughts and behavior in high school? *School Psychology Review*, 51(3), 329–342. <https://doi.org/https://doi.org/10.1080/2372966X.2021.1873058>
- Williford A, Yoder J, Fulginiti A, Ortega L, LoMurray S, Duncan D, & Kennedy N. (2021). Peer leaders as gatekeepers and agents of change: Understanding how Sources of Strength reduces suicide risk and promotes wellness. *Child & Youth Care Forum*, 2(2), 10 - 23 doi: 10.1007/s10566-021-09639-9.
- Willis A. S., Hyde M., & Black A. L. (2019). Juggling with both hands tied behind my back: Educators' views and experiences of the tensions between learner wellbeing concerns and academic performance improvement agendas. *American Educational Research Journal*, 5(6), 2644–2673.
- World Health Organisation (WHO). (2020). Mental health: Strengthening our response. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response> Accessed 6<sup>th</sup> August 2024
- World Health Organization (2023, August 23). *Suicide*. World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/suicide> Accessed 6<sup>th</sup> August 2024

- 
- World Health Organization. (2019). *Suicide: One person dies every 40 seconds*. Retrived from <https://www.who.int/news/item/09-09-2019-suicide-one-person-dies-every-40-seconds> Accessed 6<sup>th</sup> August 2024
- World Health Organization. (2022). *Suicide: facts and figures globally*. In *Suicide: facts and figures globally*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/suicide#:~:text=Key%20facts,suicide%20in%20the%20general%20population> Accessed 6<sup>th</sup> August 2024.
- Xiao, Y., & Lu, W. (2021). Temporal trends and disparities in suicidal behaviors by sex and sexual identity among Asian American adolescents. *JAMA Network Open*, 4(4), e214498. <https://doi.org/https://doi.org/10.1001/jamanetworkopen.2021.4498>
- Zimbabwe Ministry of Health and Child Care. (2019). *Young adult survey of Zimbabwe: A Violence against children survey, 2017*. Harare: Elizabeth Glaser Pediatric AIDS Foundation.