Title: Suicidal Behavior and Its Correlates among University Students in Bangladesh: A Cross-sectional Survey

Introduction: You are invited to participate in a research study that aims to estimate the prevalence of depression, anxiety, stress, insomnia, and suicidal behavior among university students in Bangladesh. This study also aims to identify the factors that are associated with suicidal behavior among university students in Bangladesh. The findings of this research will provide valuable information to university authorities and policymakers in the higher education sector in Bangladesh to take the necessary initiatives for handling these influencing factors.

Purpose of the study: The purpose of this study is to estimate the prevalence of mental health issues such as depression, anxiety, stress, insomnia, and suicidal behavior among university students in Bangladesh. The study will also explore the factors associated with suicidal behavior among university students in Bangladesh.

Procedures: If you choose to participate in this study, you will be asked to complete an anonymous online survey consisting of questions related to mental health issues, including depression, anxiety, stress, insomnia, and suicidal behavior. The survey will take approximately 30 to 40 minutes to complete.

Risks and Benefits: There are no known risks associated with participating in this study. However, some participants may feel discomfort or distress when answering questions about mental health issues. The benefit of participating in this study is that the findings may help university authorities and policymakers in the higher education sector in Bangladesh to take the necessary initiatives for handling these influencing factors.

Confidentiality: Your identity will remain anonymous in this study. All data collected will be kept secure and only the research team will have access to the information. Data collected will be reported in aggregate form, which means that individual responses will not be identifiable.

Voluntary Participation: Participation in this study is entirely voluntary. You may refuse to participate or withdraw from the study at any time without penalty or loss of benefits to which you are otherwise entitled. Your decision to participate or not participate will not affect your relationship with the university or the research team.

Consent:

- Are you willing to participate in this study?
  1. Yes ➔ Thank you for your consideration, please continue
  2. No ➔ End the survey, thank you for your time.

Noted that: By clicking "Yes" and participating in this study, you acknowledge that you have read and understand the information provided in this consent form. You voluntarily agree to participate in this study and you understand that you may withdraw from the study at any time without penalty or loss of benefits. You understand that your participation is anonymous and that your responses cannot be traced back to you.
Instruction: Please write down the information when necessary and when needed put a tick (√) on your desired answer.

1. **Name of the faculty**
   - □ Science
   - □ Engineering
   - □ Medical Science
   - □ Arts
   - □ Social Science
   - □ Business Administration
   - □ Law and Justice
   - □ Fine Arts

2. **University category**
   - □ Public
   - □ Private
   - □ National
   - □ Medical College

3. **Academic year**
   - □ 1st
   - □ 2nd
   - □ 3rd
   - □ 4th
   - □ 5th Year or Masters

4. **Age:** ____________ years

5. **Height:** ____________ inches (1 feet = 12 inches)

6. **Weight:** ____________ kg

7. **Gender**
   - □ Male
   - □ Female

8. **Religion**
   - □ Islam
   - □ Hindu
   - □ Others

9. **Origin/ Permanent residence**
   - □ Rural
   - □ Urban

10. **Current residence**
    - □ Hall
    - □ Rented house or Mess
    - □ Own house

11. **Family type**
    - □ Nuclear
    - □ Joint or Extended

12. **Number of siblings:** ____________

13. **Father’s Education**
    - □ Illiterate
    - □ Primary
    - □ Secondary
    - □ Higher-secondary
    - □ Above

14. **Father’s Occupation**
    - □ Service holder
    - □ Businessman
    - □ Farmer
    - □ Others

15. **Mother’s Education**
    - □ Illiterate
    - □ Primary
    - □ Secondary
    - □ Higher-secondary
    - □ Above

16. **Mother’s Occupation**
    - □ House wife
    - □ Service holder
    - □ Others

17. **Family income (monthly):** ____________ Taka

18. **Do you think your family environment is friendly?**
    - □ Strongly-disagree
    - □ Dis-agree
    - □ Neutral
    - □ Agree
    - □ Strongly-agree

19. **Academic performance (CGPA):** ____________

20. **Daily average study hour**
    - □ 1-3 hours
    - □ 4-6 hours
    - □ 7-9 hours
    - □ ≥ 9 hours

21. **Relationship status**
    - □ Single
    - □ Married
    - □ Engaged

22. **Smoking status**
    - □ Yes
    - □ No

23. **Do you perform religious practice regularly?**
    - □ Yes
    - □ No

24. **Are you satisfied with your academic workload (i.e., presentations, assignments, tutorials)?**
    - □ Yes
    - □ No

25. **Do you do any extracurricular activities?**
    - □ Yes
    - □ No

26. **If yes what are they…………………..**

27. **Do you have a session jam in your department?**
    - □ Yes
    - □ No

28. **Did you get infected by the novel coronavirus?**
    - □ Yes
    - □ No

29. **Did your family member(s) or relatives die of the novel coronavirus?**
    - □ Yes
    - □ No

30. **Did your family member(s) or relatives lose their job due to COVID-19?**
    - □ Yes
    - □ No
31. Did your family experience any economic loss due to COVID-19? □ Yes □ No
32. Do you feel that in the aspect of career building your subject has adequate opportunity in our country?
   □ Strongly-disagree □ Dis-agree □ Neutral □ Agree □ Strongly-agree
33. Do you think your subject-related job gets enough social value in our country?
   □ Strongly-disagree □ Dis-agree □ Neutral □ Agree □ Strongly-agree
34. Do you think you have a good professional environment in our country?
   □ Strongly-disagree □ Dis-agree □ Neutral □ Agree □ Strongly-agree

**Suicidal Behavior Questionnaire-Revised (SBQ-R)**

**INSTRUCTIONS:** Please circle the number beside the statement or phrase that best applies to you. **CIRCLE ONLY ONE ANSWER** for each question.

1. Have you ever thought about or attempted to kill yourself?
   (1) Never
   (2) It was just a brief passing thought
   (3a) I have had a plan at least once to kill myself but did not try to do it
   (3b) I have had a plan at least once to kill myself and really wanted to die
   (4a) I have attempted to kill myself, but did not want to die
   (4b) I have attempted to kill myself, and really hoped to die

2. How often have you thought about killing yourself in the past year?
   (0) Never
   (1) Rarely (1 time)
   (2) Sometimes (2 times)
   (3) Often (3-4 times)
   (4) Very Often (5 or more times)

3. Have you ever told someone that you were going to commit suicide, or that you might do it?
   (1) No
   (2a) Yes, at one time, but did not really want to die
   (2b) Yes, at one time, and really wanted to do it
   (3a) Yes, more than once, but did not want to do it
   (3b) Yes, more than once, and really wanted to do it

4. How likely is it that you will attempt suicide someday?
   (0) Never
   (1) No chance at all
   (2) Rather Unlikely
   (3) Unlikely
   (4) Likely
   (5) Rather Likely
   (6) Very Likely
Insomnia Severity Index (ISI)

Please rate the current (i.e., last week) SEVERITY of your insomnia problem(s).

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Difficulty falling asleep</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Difficulty staying asleep</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Problem waking up too early</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

4. How SATISFIED/dissatisfied are you with your current sleep pattern?

<table>
<thead>
<tr>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Moderately Satisfied</th>
<th>Dissatisfied</th>
<th>Very Dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

5. To what extent do you consider your sleep problem to INTERFERE with your daily functioning (e.g. daytime fatigue, ability to function at work/daily chores, concentration, memory, mood, etc.).

<table>
<thead>
<tr>
<th>Not at all Interfering</th>
<th>A little</th>
<th>Somewhat</th>
<th>Much</th>
<th>Very Much Interfering</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

6. How NOTICEABLE to others do you think your sleeping problem is in terms of impairing the quality of your life?

<table>
<thead>
<tr>
<th>Not at all Noticeable</th>
<th>Barely</th>
<th>Somewhat</th>
<th>Much</th>
<th>Very Much Noticeable</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

7. How WORRIED/distressed are you about your current sleep problem?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Barely</th>
<th>Somewhat</th>
<th>Much</th>
<th>Very Much</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

**Depression, anxiety, and stress**

**Instructions:** Please read each statement and circle a number 0, 1, 2, or 3 which indicates how much the statement applied to you over the past week. There are no right or wrong answers. Do not spend too much time on any statement. The rating scale is as follows:

0 : Did not apply to me at all
1 : Applied to me to some degree, or some of the time
2 : Applied to me to a considerable degree or a good part of time
3 : Applied to me very much or most of the time

<p>| (s) I found it hard to wind down | 0 | 1 | 2 | 3 |
| (a) I was aware of the dryness of my mouth | 0 | 1 | 2 | 3 |
| (d) I couldn’t seem to experience any positive feelings at all | 0 | 1 | 2 | 3 |
| (a) I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion) | 0 | 1 | 2 | 3 |
| (d) I found it difficult to work up the initiative to do things | 0 | 1 | 2 | 3 |
| (s) I tended to over-react to situations | 0 | 1 | 2 | 3 |
| (a) I experienced trembling (e.g. in the hands) | 0 | 1 | 2 | 3 |
| (s) I felt that I was using a lot of nervous energy | 0 | 1 | 2 | 3 |
| (a) I was worried about situations in which I might panic and make a fool of myself | 0 | 1 | 2 | 3 |</p>
<table>
<thead>
<tr>
<th>Statement</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>(d) I felt that I had nothing to look forward to</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(s) I found myself getting agitated</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(s) I found it difficult to relax</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(d) I felt down-hearted and blue</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(s) I was intolerant of anything that kept me from getting on with what I was doing</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(a) I felt I was close to panic</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(d) I was unable to become enthusiastic about anything</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(d) I felt I wasn’t worth much as a person</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(s) I felt that I was rather touchy</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(a) I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat)</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(a) I felt scared without any good reason</td>
<td>0 1 2 3</td>
</tr>
<tr>
<td>(d) I felt that life was meaningless</td>
<td>0 1 2 3</td>
</tr>
</tbody>
</table>

Thank you very much for your cooperation.