Research Overview

National Suicide Research Foundation
Research Strategy

Aim

> To produce a nationally and internationally recognised body of reliable knowledge from a multidisciplinary and interdisciplinary perspective on the risk and protective factors associated with suicidal behaviour, and the effectiveness of self-harm intervention and suicide prevention programmes.

Outcome

> A solid evidence base for policy development and intervention in the prevention of suicide and the management of patients presenting with self-harm.

Priorities are in line with *Connecting or Life* Ireland's National Strategy to Reduce Suicide 2015 - 2020

1.
Research projects addressing the extent of self-harm and suicide, patterns, risk and protective factors.

2.
Efficacy of intervention and prevention programmes for self-harm and suicide, and attitudes towards suicidal behaviour and its prevention.

I. Research projects addressing the extent of self-harm and suicide: Patterns, risk and protective factors (some studies will be ongoing into 2017/2018)

Self-harm

1. National Self-Harm Registry Ireland: Monitoring of all hospital treated self-harm cases since 2002

2. Improving assessment and aftercare of self-harm patients presenting to Hospital Emergency Departments (HSE South)

3. The association between intentional and unintentional injuries

4. Self-Harm Registry Northern Ireland (NSRF is key collaborator)

5. In-depth analyses and dissemination of the data from the studies: Saving and Empowering Young Lives in Europe (SEYLE) and Child and Adolescent Self-harm in Europe (CASE) in collaboration with national and international researchers

6. The interaction between psychological vulnerability and the impact of social contagion associated with self-harm (part of MARATONE)

7. Types of drugs used in intentional drug overdose

8. Risk and protective factors associated with high-risk self-harm (SSIS-ACE and IMPRESS)

9. Risk and protective factors associated with self-harm among people with a history of frequent self-harm repetition (IMPRESS)

10. Early identification and geospatial analysis of emerging clusters of self-harm

11. Cyberbullying, mental health and self-harm

Suicide

12. Implementation of a Suicide Support and Information System: A study in the Cork region
    a. Improved facilitation of support to those bereaved by suicide,
    b. Identification of risk factors associated with suicide,
    c. Identification of emerging suicide clusters - Dissemination

13. Risk and protective factors in relation to suicide among people who resided in industrial schools as children –Dissemination

14. Improved prediction of suicide risk through linking self-harm and suicide mortality data

15. Accuracy of recording systems of suicide and other external causes of death

16. Psychosocial, psychiatric and work related factors associated with suicide: a case-control study (SSIS-ACE)

17. Research into a potential suicide cluster among people who died by suicide and who were in contact with the Donegal Mental Health services at time of death

18. Psychological and physical outcomes in suicide survivors

19. Early identification and geospatial analyses of suicide clusters

20. Development of a Suicide and Self-Harm Observatory to access real-time data on suicide

II. Efficacy of intervention and prevention programmes for self-harm and suicide, and attitudes towards suicidal behaviour and its prevention

Efficacy of intervention programmes for self-harm patients

1. Five level community-based intervention project for depression and suicidal behaviour: (OSPI) - Dissemination

2. Training of emergency department and mental health care staff in increasing awareness of self-harm and suicide

3. Implementation and evaluation of an internet-based guided self-management intervention for young people and adults with mild to moderate depression (PREDI-NU)

4. Effectiveness of psychological and pharmacological treatments for self-harm

5. Effectiveness of suicide prevention programmes

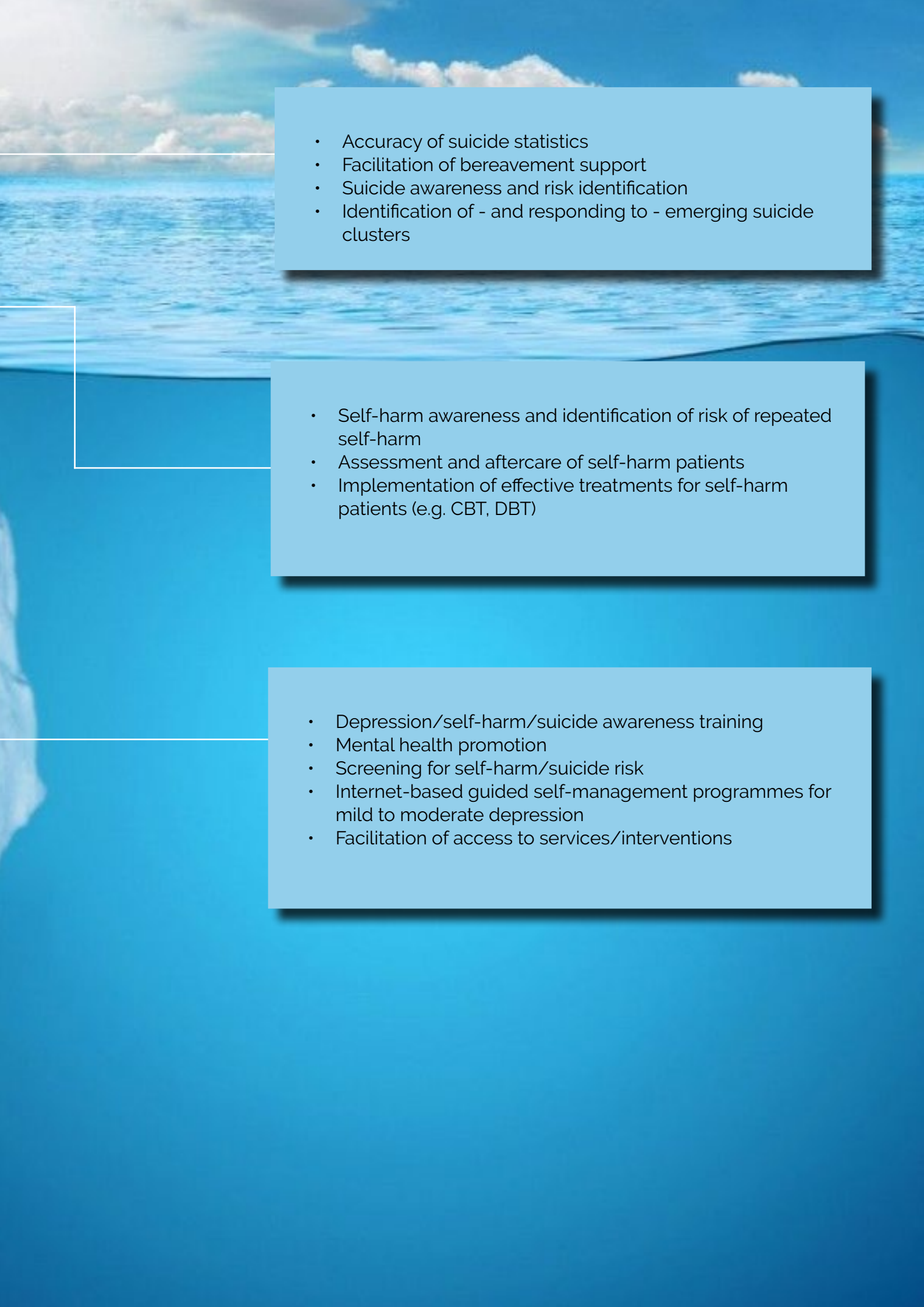### Attitudes towards suicidal behaviour and its prevention

6. Attitudes towards suicide and its prevention among policy, health care and community-based professionals including politicians, coroners, GPs, nurses, pharmacists, Gardai etc.

- Accuracy of suicide statistics
- Facilitation of bereavement support
- Suicide awareness and risk identification
- Identification of - and responding to - emerging suicide clusters

- Self-harm awareness and identification of risk of repeated self-harm
- Assessment and aftercare of self-harm patients
- Implementation of effective treatments for self-harm patients (e.g. CBT, DBT)

- Depression/self-harm/suicide awareness training
- Mental health promotion
- Screening for self-harm/suicide risk
- Internet-based guided self-management programmes for mild to moderate depression
- Facilitation of access to services/interventions