

# Towards evidence-based interventions for suicide prevention: *Changing lives, enhancing positive futures*

HRB 30<sup>th</sup> Anniversary Conference

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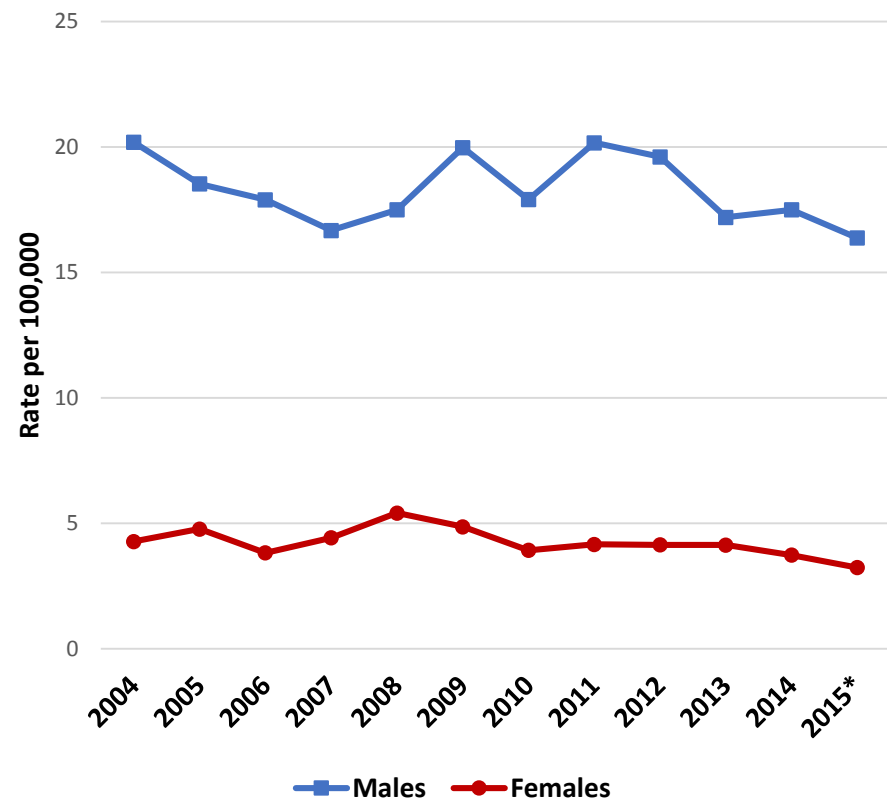


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# Overview

- Suicide and self-harm in Ireland
- Evidence based mental health promotion – *Building resilience and identifying hidden cases of self-harm*
- Evidence based interventions for self-harm in health services – *Closing the gaps and preventing self-harm repetition and suicide*
- Improving aftercare and support after suicide – *Improving support and preventing further suicides*

## Suicide rates in Ireland by gender, 2004-2015



\*2015 figures provisional

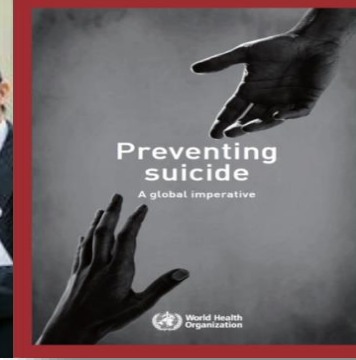
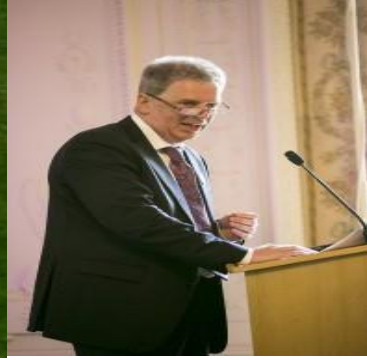
## Trends in self-harm, 2004-2015





Connecting for Life

Ireland's National Strategy  
to Reduce Suicide 2015-2020

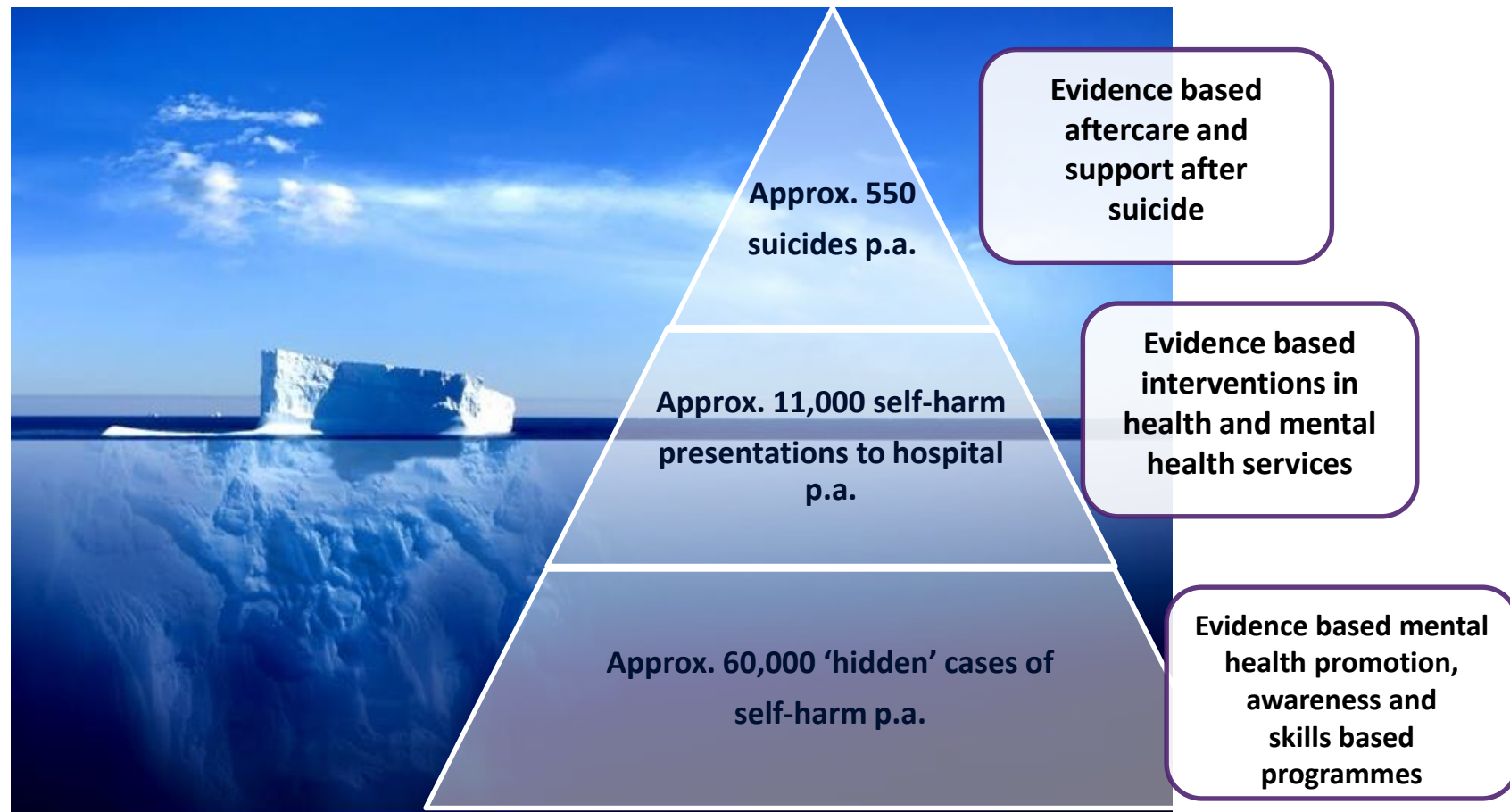


## Connecting for Life Ireland's National Strategy to Reduce Suicide, 2015-2020

### *Innovative aspects:*

- Collaborative, cross-sectoral approach to suicide prevention. Statutory and non-statutory agencies pooling expertise and resources and working together in a spirit of real cooperation and mutual respect
- A focus on formal accountability, adequate response, informed evidence and openness for change in line with emerging evidence-based initiatives
- Increased surveillance systems, evaluation and high-quality research with regard to suicidal behaviour by tracking the progress of the strategy against set indicators over the next five years.

# Suicide and medically treated self-harm: The tip of the iceberg





Approx. 60,000  
'hidden' cases of  
self-harm p.a

Evidence based mental health  
promotion,  
awareness and  
skills based programmes

# Evidence based mental health promotion, awareness and skills based programmes

- Evidence informed general public awareness campaign, in particular the *Little Things campaign*



Little Things @littletingshub - Nov 10  
Taking steps to reduce your drinking can make a big difference to your health and your mood. Check out these tips:



- Effective school based intervention programmes, in particular the *Saving and Empowering Young Lives in Europe* project with proven effects on improving emotional resilience and self-esteem and reducing self-harm and reducing suicidal ideation

- Evidence based depression & suicidal behaviour awareness and skills training among healthcare professionals and community facilitators in terms of improved knowledge, attitudes and confidence, including: GPs, pharmacists, counsellors, carers for older people, social workers, gardai etc.





Approx. 11,000 self-harm presentations to hospital p.a.

Evidence based interventions in health and mental health services

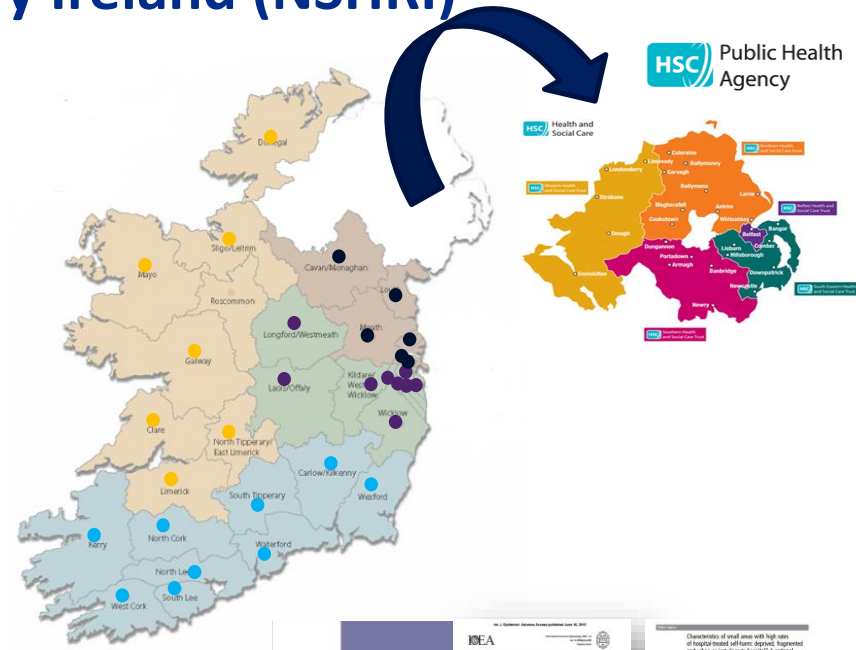
# National Self-Harm Registry Ireland (NSHRI)


## Aims:

- To establish the extent and nature of hospital-treated self-harm;
- To monitor trends over time and also by area;
- To contribute to research and policy development in the area of suicidal behaviour;

## Outcomes 2015 Annual NSHRI Report:

- 11,189 self-harm presentations to Irish hospitals
- 73% of patients received an assessment in the Emergency Department
- 13% left the Emergency Department without being seen



An iceberg floating in the ocean, with the tip above water and a much larger part submerged. The tip is labeled with text.

Approx. 11,000 self-harm presentations to hospital p.a.

Evidence based interventions in health and mental health services

# Impact of the Self-Harm Registry on Health and Mental Health Services

## Clinical management of self-harm and capacity building in health services

- National guidelines for assessment and management of self-harm (2015)
- Allocation of self-harm nurses to all hospital Emergency Departments in Ireland (2014-ongoing)
- National implementation of Dialectical Behaviour Therapy (2013-ongoing)

## Restricting access to means

- National Task Force to address frequently used drugs intentional drug overdose, in particular benzodiazepines and street drugs
- Implementation of interventions to reduce alcohol related self-harm

## High-risk groups

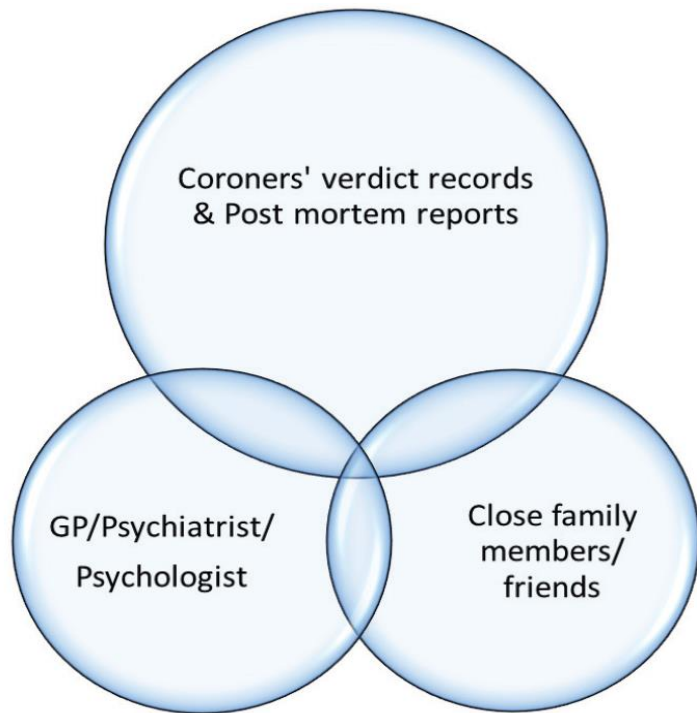
- Identification of specific risk factors associated with frequent self-harm repetition and highly lethal self-harm
- Significant increase of self-harm among homeless people



Approx 550 suicide p.a.

## A systematic approach to obtain real-time and accurate data on suicide: Suicide Support and Information System, Ireland (2008-ongoing)

Response rate: 100%



Response rate: 77%

Response rate: 66%

### *Characteristics of people who die by suicide*

- Overrepresentation of men (80.1%); Men significantly younger than women
- Relatively high proportion were unemployed at time of death (33.1%)
- Nearly two thirds had a history of self-harm (65.2%); 69.1% were diagnosed with depression, and alcohol/and or drug abuse was present among 60.7%

### *Characteristics of people bereaved through suicide (4.9 years after death of family member)*

- 33.3% reported Post-Traumatic Stress symptoms
- 25% reported suicidal thoughts

Approx 550 suicide p.a.

## Enhancing the Suicide Support and Information System - Developing a National Pulse System

The Pulse system will address a major knowledge gaps in clustering of suicide and self-harm using innovative and progressive techniques.

Geospatial mapping of suicide and real-time information on emerging self-harm and suicide clusters will provide the foundations to develop the pulse system.

### The Pulse system will:

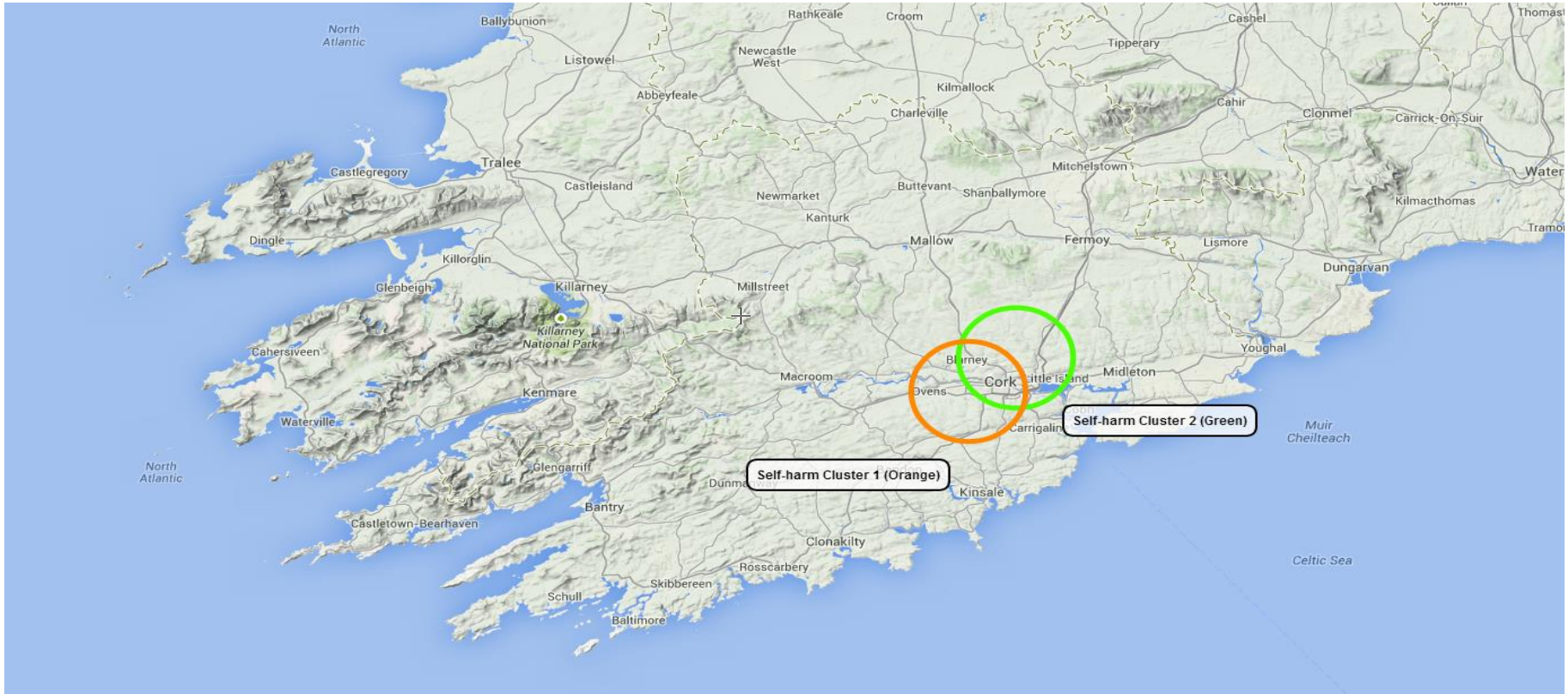
- Identify emerging suicide and self-harm clusters
- Facilitate the activation and implementation of local plans to respond to suicide and self-harm clusters, and local allocation of resources to prevent further suicide and self-harm
- Assist with optimising health service resource allocation and location locally and nationally.

Using specialist expertise from the National Centre for Geocomputation, Maynooth University, the University of Melbourne & Griffith University, Australia



# 2 Male Self-harm Clusters

1. Expected versus observed :  
253.55 versus 373
  - Radius: 6.80 km
2. Expected versus observed :  
171.69 versus 265
  - Radius: 3.96 km

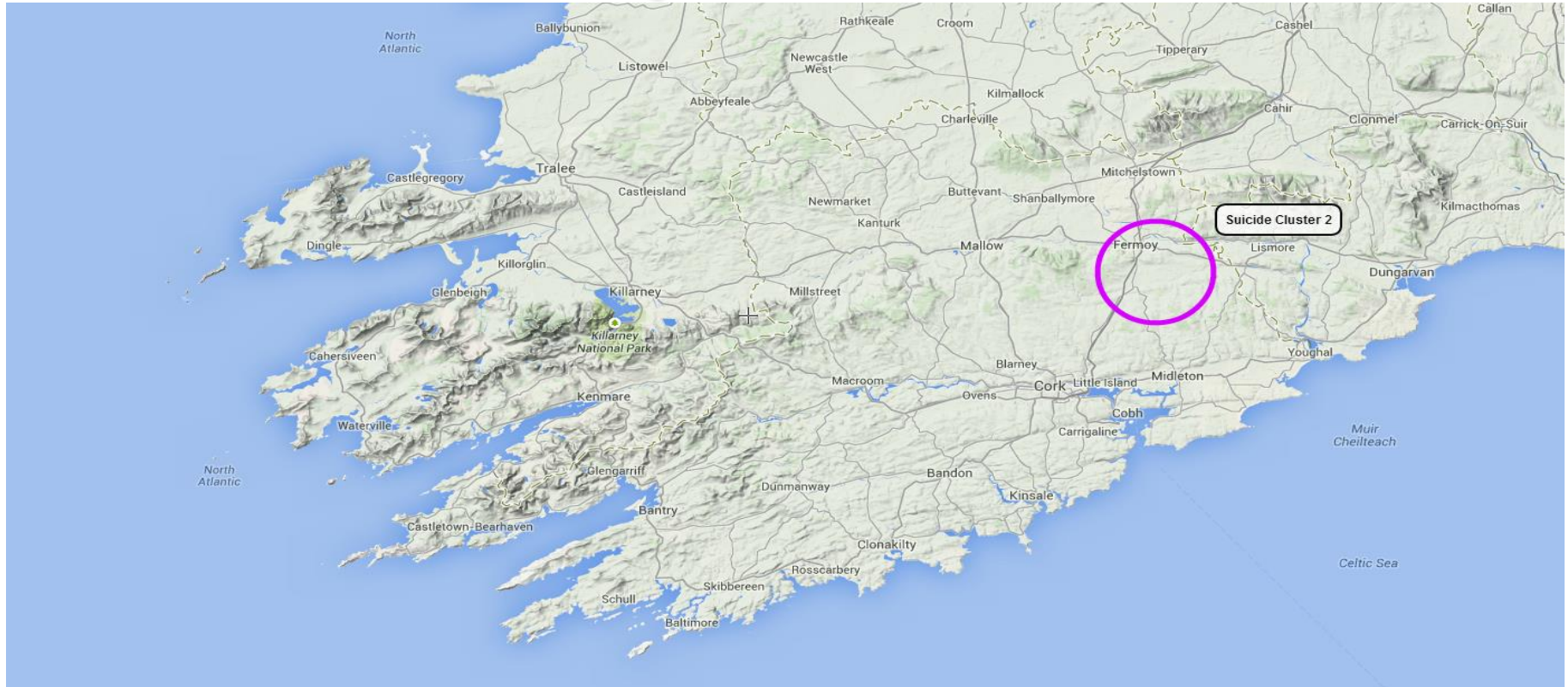






# Male Suicide Cluster

- Expected versus observed : 1.86 versus 13
- Radius: 23.44 km



# Key Recommendations and Actions

- Enhancing suicide prevention and prevention of excess mortality through multidisciplinary collaboration and partnerships involving mental health and wider health services
- Implementing intervention and prevention strategies for self-harm and suicide simultaneously at multiple levels increases synergistic and sustainable effects
- Effective implementation, monitoring and evaluation via the development of networks of regional alliances, possibly incorporated in regional *Connecting for Life* strategies



Connecting for Life

Ireland's National Strategy  
to Reduce Suicide 2015-2020



# People who attempt suicide don't want to die, what they want is a different life

*(Wieg, 2005; Zwagerman, 2015)*







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**Thank you!**  
**Go raibh maith agat!**

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