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# Making Suicide Prevention Everyone's Business

The first annual report of the National Suicide  
Prevention Leadership Group

September 2019



Scottish Government  
Riaghaltas na h-Alba  
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# Foreword



**Rose Fitzpatrick**  
**CBE QPM**  
Chair of the National  
Suicide Prevention  
Leadership Group

**This is the first annual report of the National Suicide Prevention Leadership Group, established in September 2018 to support the delivery of the Scotland's new Suicide Prevention Action Plan *Every Life Matters*, published in August 2018.**

Suicide prevention in Scotland is characterised by strong relationships between national and local organisations, between the public sector and the third sector, between national government and local authorities. These relationships have achieved much, yet everyone we have met over the last year has told us there is still more to be done, particularly in reducing stigma about suicide. And everyone is mindful that, while a single year's data must not be taken in isolation, the number of people who tragically lost their lives to suicide increased between 2017 and 2018 in Scotland, as it did in England and Wales.

In making our first annual report and recommendations to Scottish Government and to COSLA, we are clear that no single sector or organisation can deliver *Every Life Matters* alone. In raising public awareness about suicide we must all work to create a movement in which suicide is no longer stigmatised and suicide prevention is everyone's business. We believe that we must continue to take a public health approach to suicide prevention in Scotland and we look forward to the professional energy and opportunity that the creation of Public Health Scotland will

bring to this work. We commit to working closely with this new body as we do with all those who deliver on the ambition of *Every Life Matters*.

We know that it is an immense honour and responsibility to be part of the National Suicide Prevention Leadership Group. We will continue to work towards a Scotland where suicide is preventable; where help and support is available to anyone contemplating suicide and to those who have lost a loved one to suicide. We will work to remove the stigma which prevents people asking for help, and also to empower people to give that help when it is needed.

Because every life matters.

**Rose Fitzpatrick CBE QPM**  
Chair of the National Suicide  
Prevention Leadership Group



**Joe FitzPatrick MSP**  
Minister for Public Health, Sport and Wellbeing

We believe that no death by suicide should be regarded as acceptable or inevitable and the Scottish Government is clear that we, as a country, have far more to do in terms of raising awareness of suicide prevention and reducing the rate of deaths by suicide. The stigma that surrounds suicide often stops us from seeking help and from feeling that we can help others. It is a powerful message that if we can ask, and tell, about suicide, we can save lives. I very much welcome the first annual report from Scotland's National Suicide Prevention Leadership Group and the way that they have put the voices of people with direct experience at the centre of their work. I also welcome the important recommendations they have made which identify key areas that should be taken forward to work toward the vision of our Suicide Prevention Action Plan, *Every Life Matters*.

I continue to fully support the Group and look forward to the work they, and key partners, will be taking forward over the next year. We all have a part to play in helping to prevent suicide."

**Joe FitzPatrick MSP**  
Minister for Public Health, Sport and Wellbeing



**Councillor Peter Johnston**  
COSLA  
Spokesperson for Health and Social Care

The Suicide Prevention Leadership Group have achieved a great deal in their first year and we now understand a great deal more than we did at the launch of the Suicide Prevention Action Plan last year. The Group explored what activity is taking place locally throughout the country and identified some best practice indicators that will now be the cornerstone of Scottish specific guidance for all organisations and bodies tasked with the delivery of public services in our country. This work is an insight into what can be achieved when partners across all sectors work together and is a timely reminder of the value of the new body Public Health Scotland which will become operational during the next year. Suicide Prevention is of utmost importance to Scotland's Councils as we deliver the preventative and person-centred services that can and do make the difference when people feel isolated or frightened. However, we want to do more, and we look forward to working with the Group as we explore what makes a practical difference to people and communities locally.

In addition to the research and exploratory work in their first year, we have also seen the launch of useful, accessible animations – "Ask, Tell, Save a Life". These animations were welcomed by COSLA Leaders earlier this year and a commitment given that they would be shown to all local authority employees in Scotland – recognising that many of our employees can provide direct and immediate support to a suicidal person - as well as ensuring that we support our 250,000+ workforce in their own mental health and wellbeing.

I wholeheartedly welcome the recommendations of the Group and I look forward to the year ahead as the Group now focus on practical support for people in all our communities who are feeling suicidal or who have been affected by suicide. This work has been and continues to be some of the most important work we have underway at the moment in Scotland.

**Councillor Peter Johnston**  
COSLA Spokesperson for Health and Social Care

# Summary of Recommendations

**Recommendation 1:** We recommend to the Scottish Government and COSLA that the progress and effectiveness of *Every Life Matters* and its 10 actions are evaluated, in line with World Health Organization advice.

**Recommendation 2:** We recommend to the Scottish Government and COSLA that the provision of timely and accessible data about suicides must improve. Suicide prevention planning at a local and national level is dependent on good information and the ability to share it appropriately. The development of ScotSID as an interactive and local resource should be supported with appropriate engagement and barriers to sharing information should be tackled with vigour.

**Recommendation 3:** The Scottish Government should fund local test-sites to develop, deliver and test local suicide prevention activity in line with the guidance being developed under Action 1 of *Every Life Matters*. This will contribute to continuous development of that guidance, identifying good practice and learning across all areas of the Suicide Prevention Action Plan.

**Recommendation 4:** The Scottish Government and COSLA should enhance the learning from locally developed and delivered suicide prevention action plans by introducing a consistent evaluation model, based on academic research and an outcomes based approach, through which learning can be identified and shared.

**Recommendation 5:** COSLA should support the introduction of multiagency reviews of all deaths by suicide which take place in a community setting. We consider that Chief Officers responsible for public protection in each local area would be best placed to ensure that these are undertaken, with the support of guidance developed under Action 10 of *Every Life Matters*.

**Recommendation 6:** The Scottish Government determine how best to put in place multiagency reviews to be undertaken of all deaths by suicide which occur during a defined period after being discharged from prison or police custody.

**Recommendation 7:** The Scottish Government and COSLA should determine how best to put in place reviews of all deaths by suicide of young people which occur during a defined period after leaving the care system. This should include identifying an appropriate national body to work with local authorities to ensure effective scrutiny and dissemination of learning.

**Recommendation 8:** The Scottish Government and COSLA should provide strong support for work to transform and modernise suicide prevention branding and identity in Scotland, so as to support the delivery of the Suicide Prevention Action Plan and to build a social movement in which suicide prevention becomes everyone's business.

**Recommendation 9:** The Scottish Government should make funding available to pilot a new model of care for those bereaved by suicide which is effective in reducing distress, self-harm and suicide. It should include evaluation and appropriate mechanisms to ensure that learning is shared.

**Recommendation 10:** The Scottish Government and COSLA should consider how the crisis support for children and young people and their families to be taken forward by the Children and Young People's Mental Health Implementation Board can be made available to people of all ages across Scotland.

**Recommendation 11:** The Scottish Government should fund additional engagement targeted at groups of people with characteristics and experiences which may indicate elevated risk of suicide.

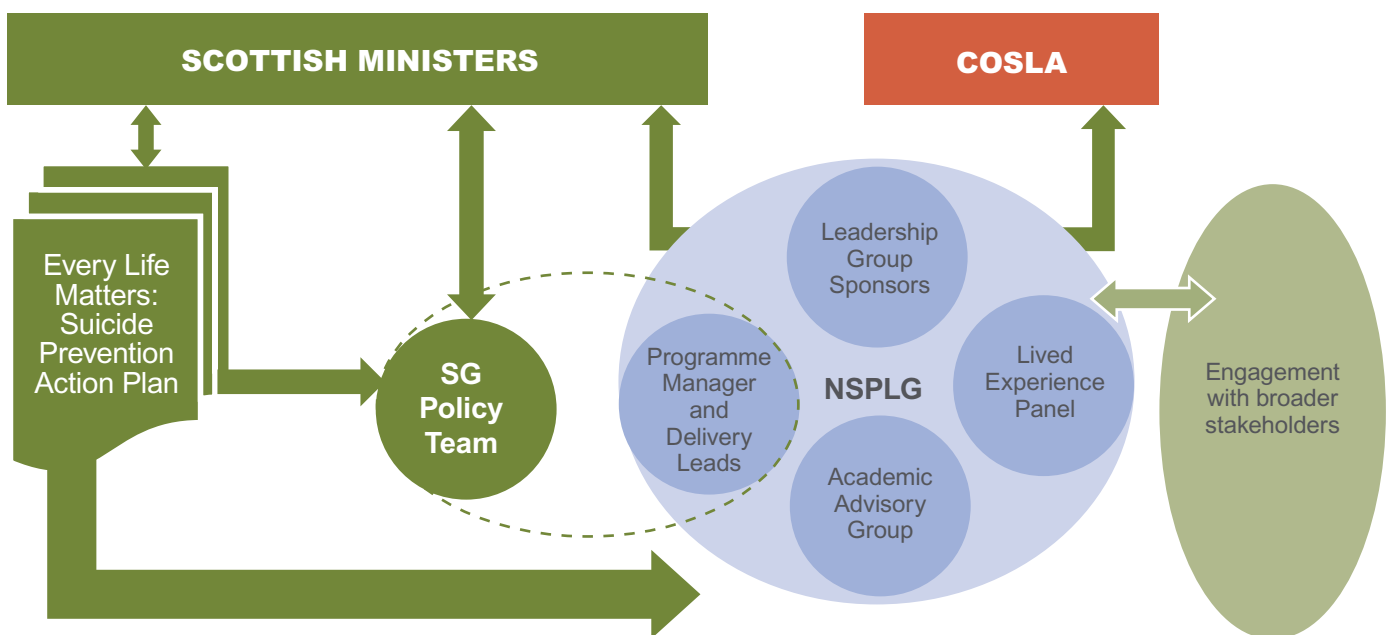
# Introduction

In August 2018, the Scottish Government launched its Suicide Prevention Action Plan; *Every Life Matters*<sup>1</sup>. This built on and succeeded previous Scottish Government strategies, the Choose Life strategy and action plan (2002–2013)<sup>2</sup> and the Suicide Prevention Strategy (2013–2016)<sup>3</sup>. Many individuals, communities and organisations have worked tirelessly to prevent suicide for many years in Scotland and those efforts have been described by other nations as an exemplar. *Every Life Matters* is the product of extensive engagement with people affected by suicide, people in local government, mental health and suicide prevention organisations, academics and members of the public.

## National Suicide Prevention Leadership Group

The National Suicide Prevention Leadership Group (NSPLG) was established in September 2018 by the Scottish Government to support the delivery of *Every Life Matters*. Membership reflects a broad range of delivery partners involved in suicide prevention, and includes those with lived experience of the impacts of suicide. Our remit, minutes and other publications of interest are available online<sup>4</sup>. We report and make recommendations to Scottish Ministers, and to COSLA on matters under the responsibility of local government.

Diagram 1: NSPLG structure



- 1 Accessed at: <https://www.gov.scot/publications/scotlands-suicide-prevention-action-plan-life-matters/>
- 2 Accessed at: <http://www.gov.scot/Publications/2002/12/15873/14466>
- 3 Accessed at: <https://www.gov.scot/publications/scottish-government-suicide-prevention-strategy-2013-2016/>
- 4 Accessed at: <https://www.gov.scot/groups/national-suicide-prevention-leadership-group/>

## Lived Experience Engagement

From the outset, we have sought to ensure that the voices of those affected by suicide are central to our work. Two members of our group have joined us because of their lived experience and with the support of the Health and Social Care Alliance, we have been able to discuss our work directly with people who are living with the impact of suicide. We have now established a Lived Experience Panel and Network to maintain that broad engagement throughout our work. This will include those who have been bereaved by suicide; are caring for someone who has attempted suicide or has suicidal thoughts; and/or have experience of suicidal thoughts or attempted suicide themselves. This Panel and Network will be hosted by a collaboration of third sector Mental Health organisations: SAMH, Samaritans, Support in Mind (Scotland) and Penumbra.

“including those who have been bereaved by suicide; are caring for someone who has attempted suicide or has suicidal thoughts; and/or have experience of suicidal thoughts or attempted suicide themselves”

## Academic Advisory Group

To support our work, we have established an Academic Advisory Group (AAG), drawing on the wealth of academic and research expertise in Scotland. It aims to keep the NSPLG informed of cumulative and recent research findings as well as contributing to the development, implementation and evaluation of *Every Life Matters*. The AAG is co-Chaired by Professor Rory O'Connor of the University of Glasgow and Emeritus Professor Steve Platt of the University of Edinburgh.



Lived Experience Panel launched on World Suicide Prevention Day. The Minister for Public Health, Sport and Wellbeing visiting SAMH's Redhall Walled Garden on World Suicide Prevention Day.

## A public health approach


Making suicide prevention everyone's business means taking a public health approach to suicide prevention in Scotland. The public health approach is widely regarded<sup>5</sup> as the approach that is mostly likely to produce significant and sustained reductions in suicide.

We believe that public health reform in Scotland presents a further opportunity to take a comprehensive whole system approach to suicide prevention. If we place suicide in the context of efforts to improve physical, mental and social wellbeing and resilience, then suicide prevention will be part of all we do.

We welcome the forthcoming launch of Public Health Scotland on 1 April 2020. This will be Scotland's lead national agency for improving and protecting health and wellbeing and its leadership role in suicide prevention for Scotland will therefore be critical.

“public health reform in Scotland presents a further opportunity to take a comprehensive whole system approach to suicide prevention”

**SUICIDE RATE  
HAS REDUCED BY 19%  
OVER THE PAST 10 YEARS**



## Suicide statistics and data

Between 2002-2006 and 2013-2017, the national rate of deaths from suicide has decreased by 20%. However, while it is welcome to see such a clear overall reduction in suicides, the National Records of Scotland (NRS) recently published data on the number of probable suicides in Scotland 2018<sup>6</sup> which showed a 15% rise in probable suicides between 2017 and 2018. We must acknowledge that a single year of data should not be over-interpreted: several years of data would be required in order to establish a clear trend. Nevertheless, an increase such as that seen between 2017 and 2018 is highly unusual and a similar increase has also been observed in England and Wales.

The increase in suicide in the 15-34 age groups, particularly among women, is a notable change in 2018 compared to 2017. However, the highest numbers and rates of suicide continue to be found in the 35-54 age groups for both women and men. We believe it is important to maintain a focus on the latter group whilst also devising strategies and mechanisms of support for young people, particularly young women.

5 Accessed at: [https://apps.who.int/iris/bitstream/handle/10665/131056/9789241564779\\_eng.pdf?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/131056/9789241564779_eng.pdf?sequence=1)

6 Accessed at: <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/suicides>



To help drive progress, *Every Life Matters* sets out an ambitious target to reduce the rate of suicide in Scotland by a further 20% by 2022 (from a 2017 baseline), extending beyond the World Health Organization 2013 target of a global 10% reduction by 2020.

We have found that people affected by suicide and involved in suicide prevention appreciate the power of an ambitious target in focusing effort and resources. Nevertheless, the 2018 NRS data<sup>7</sup> demonstrates how the scale of the challenge has increased. We consider that this context underlines the importance of striving to make suicide prevention everyone's business and of maintaining our shared ambition to save lives.

For our part, we will continue to focus on the vision of *Every Life Matters* where suicide is preventable and no longer stigmatised. And of a Scotland where help and support is available to anyone contemplating suicide and to those who have lost a loved one to suicide. We believe it is important to evaluate the effectiveness and progress of *Every Life Matters* and its 10 actions, and we will identify any additional actions as appropriate, supporting Scottish Government, COSLA and other partners to redouble their suicide prevention efforts over the life of the action plan.

The annual report from the Scottish Suicide Information Database (ScotSID) will be available in coming months<sup>8</sup>. NHS National Services Scotland (NSS) have been exploring how to make ScotSID more interactive and intend to engage with users of the data to that end. We welcome this approach; local data to support local suicide prevention planning is essential and we will be monitoring developments closely.

**Recommendation 1:** We recommend to the Scottish Government and COSLA that the progress and effectiveness of *Every Life Matters* and its 10 actions are evaluated, in line with World Health Organization advice.

**Recommendation 2:** We recommend to the Scottish Government and COSLA that the provision of timely and accessible data about suicides must improve. Suicide prevention planning at a local and national level is dependent on good information and the ability to share it appropriately. The development of ScotSID as an interactive and local resource should be supported with appropriate engagement and barriers to sharing information should be tackled with vigour.

7 Accessed at: <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/vital-events/deaths/suicides>

8 Most recent report accessed at: <https://www.isdscotland.org/Health-Topics/Public-Health/Publications/2018-12-04/2018-12-04-ScotSID-Report.pdf>

# Delivering the vision of the suicide prevention action plan

## NSPLG Delivery Plan

We published our initial Delivery Plan in December 2018<sup>9</sup>. This set out an initial, high-level summary of our work to support the delivery of the 10 Actions in *Every Life Matters*. We published an updated version in July 2019, and intend to publish regular updates, in addition to our annual reports to Ministers and COSLA.

In this, our first annual report, we outline our emerging observations and recommendations for future activity, including where links need to be strengthened with other work.

### Diagram 2: Planning Cycle



## Embedding Suicide Prevention in local planning

We engaged with Community Planning Partnerships (CPPs) and local suicide prevention leads across Scotland to develop our understanding of existing local suicide prevention planning activity, networks and resource capacity. We received a wide range of responses to our enquiries and are grateful to everyone who took the time to engage with us.

9 Accessed at: <https://www.gov.scot/publications/national-suicide-prevention-leadership-group-delivery-plan/>



Local areas are refreshing or developing suicide prevention plans

There is currently no requirement for local areas to produce dedicated suicide prevention action plans and there is a mixed picture across Scotland of local activity which aims to meet local need.

Most CPP areas are in the process of refreshing existing or developing new plans. Some have embedded activity in broader planning mechanisms. We heard that some areas have assessed, or intend to assess, local suicide prevention planning activity against *Every Life Matters*. We heard about a range of monitoring, evaluation and reporting approaches. In terms of resource, we also heard about a range of workforce and funding situations, with much of this embedded in broader roles and budgets. We also heard about a variety of local activities to raise awareness, develop networks and commission local services.

**Recommendation 3:** We recommend that the Scottish Government fund local test-sites to develop, deliver and test local suicide prevention activity in line with the guidance being developed under Action 1 of *Every Life Matters*. This will contribute to continuous development of that guidance, identifying good practice and learning across all areas of the Suicide Prevention Action Plan.

**Recommendation 4:** We recommend that the Scottish Government and COSLA enhance the learning from locally developed and delivered suicide prevention action plans by introducing a consistent evaluation model, based on academic research and an outcomes based approach, through which learning can be identified and shared.

This information has provided us with a helpful insight into the current position and has informed our consideration of key principles to support local suicide prevention planning. These include: putting the voice of lived experience at its heart; taking a public health approach; empowering leadership; making use of available evidence and focussing on quality. We have already started work to develop guidance to support local suicide prevention planning shaped around these principles.

Each death by suicide is a tragedy and no suicide should be considered inevitable. It is important that organisations understand their responsibility to learn from every suicide and to use that learning to prevent suicides in future. *Every Life Matters* sets out a commitment to develop appropriate reviews into all deaths by suicide, and ensure that the lessons from reviews are shared and acted on.

We examined the landscape of review that exists in Scotland for unexpected deaths and the extent to which this currently includes deaths by suicide. We were also aware of a range of other recommendations about how to improve the review of deaths and dissemination of learning from such reviews. These include:

- Review of the arrangements for Investigating the deaths of patients being treated for mental disorder<sup>10</sup>
- Expert Review of Mental Health Services for Young People in Custody<sup>11</sup>
- Children and Young People’s Mental Health Taskforce recommendations<sup>12</sup>
- Scottish Government improvement programme for adult protection<sup>13</sup>
- Independent Care Review<sup>14</sup>
- Child Death Review report<sup>15</sup>.

“ It is important that organisations understand their responsibility to learn from every suicide and to use that learning to prevent suicide in the future”

10 Accessed at: <https://www.gov.scot/publications/review-arrangements-investigating-deaths-patients-being-treated-mental-disorder/>

11 Accessed at: <https://www.prisonsspectoratescotland.gov.uk/publications/report-expert-review-provision-mental-health-services-hmp-yoi-polmont>

12 Accessed at: <https://www.gov.scot/publications/children-young-peoples-mental-health-task-force-recommendations/>

13 Accessed at: [https://www.cosla.gov.uk/sites/default/files/documents/19-03-22\\_item\\_09a\\_adult\\_support\\_and\\_protection\\_logic\\_model\\_v7\\_appendix.pdf](https://www.cosla.gov.uk/sites/default/files/documents/19-03-22_item_09a_adult_support_and_protection_logic_model_v7_appendix.pdf)

14 Accessed at: <https://www.carereview.scot/>

15 Accessed at: <https://www.gov.scot/publications/child-death-review-report-scottish-government-child-death-review-working-group/pages/3/>

We considered the different settings and circumstances in which a person might die by suicide, as a way of identifying gaps in existing review arrangements. We sought the views on where our work could be focussed from those responsible for providing health and social care, and children's services as well as justice organisations including Police Scotland and the Scottish Prison Service.

- Community settings, where the deceased had no contact with mental health or social services
- Health settings
- Leaving justice settings (noting the requirement for Fatal Accident Inquiries in respect of deaths in custody)
- Leaving social services support (for example, discharge from care settings for care experienced young people or vulnerable adults receiving local authority support).

We recognise that there is a requirement to consider undertaking an adverse incident review and a supplementary learning summary when a person dies by suicide and they have been discharged recently from mental health services<sup>16</sup>. We believe it is important that learning from these tragic events is shared promptly and effectively. We therefore strongly support the recommendation from the review of the arrangements for investigating the deaths of patients being treated for mental disorder that there be improved external scrutiny and national dissemination of the learning from reviews.

**Recommendation 5:** We recommend that COSLA support the introduction of multiagency reviews of all deaths by suicide which take place in a community setting. We consider that Chief Officers responsible for public protection in each local area would be best placed to ensure that these are undertaken, with the support of guidance developed under Action 10 of *Every Life Matters*.

**Recommendation 6:** We recommend that Scottish Government determine how best to put in place multiagency reviews to be undertaken of all deaths by suicide which occur during a defined period after being discharged from prison or police custody.

**Recommendation 7:** We recommend that the Scottish Government and COSLA determine how best to put in place reviews of all deaths by suicide of young people which occur during a defined period after leaving the care system. This should include identifying an appropriate national body to work with local authorities to ensure effective scrutiny and dissemination of learning.

<sup>16</sup> Healthcare Improvement Scotland guidance accessed at: <http://www.knowledge.scot.nhs.uk/media/CLT/ResourceUploads/4084791/cbee4970-602f-4744-a470-7331045dbf86.pdf>

## Increasing suicide prevention awareness, knowledge and skills

*Every Life Matters* calls for a renewed focus on suicide prevention training and for a coordinated approach to public awareness campaigns to reduce stigma and maximise impact.

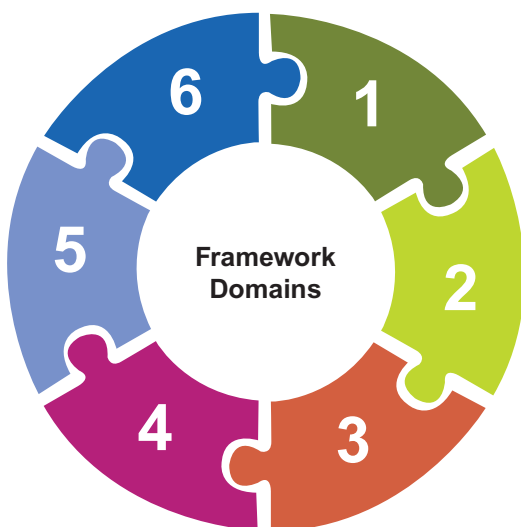
Work is taking place to refresh existing training materials for professionals, alongside the development of new learning resources that respond to the experiences and challenges faced today by people across Scotland. We will continue to work with partners to help them create a set of training resources that are relevant, effective, accessible, impactful and empowering.

NHS Health Scotland has oversight responsibility for the delivery of Scotland's Mental Health First Aid and Suicide Prevention Training programmes. They and NHS Education for Scotland are jointly working to improve training resources, informed by engagement with individuals with lived experience and those working nationally and locally in suicide prevention.

The first phase of this work saw a package of new resources to support workforce development in relation to mental health improvement and suicide prevention launched in May 2019.

We were pleased to support NHS Health Scotland, NHS Education for Scotland, the Minister for Mental Health and the COSLA Spokesperson for Health and Social Care at the launch of these products on 28 May 2019.

**Diagram 3: Knowledge and Skills Framework for Mental Health and Wellbeing**



1. Promote good mental health and wellbeing
2. Tackle mental health inequalities, stigma and discrimination
3. Support people in distress or crisis
4. Promote resilience and recovery
5. Prevent self-harm or suicide
6. Improve the quality and length of life for people living with mental ill health

Suicide prevention forms a key part of revised mental health and wellbeing training in a framework from universal awareness raising to specialist training



Scottish Football, Local Authorities and the NHS are committed to raising awareness of suicide prevention

The new suicide prevention awareness raising resources are available to everyone in the form of short animations accessible online<sup>17</sup>. We welcome the positive response from so many individuals and organisations who have already taken the opportunity to view, use and share them. The resources are aimed at reducing stigma about suicide, encouraging people to ask for help and providing everyone with the tools to give that help when it is needed. By encouraging and enabling their workforces to view and use these resources, organisations are rising to the challenge of making suicide prevention everyone's business.

We also welcome increased interest in the existing training such as Scotland's Mental Health First Aid, Suicide Prevention and Mentally Healthy Workplace training programmes. There was an increase to the existing bank of trainers for these programmes and a significant increase in demand for the training.

The second phase of this work has now started and will run until September 2021<sup>18</sup>. Early action includes extending awareness raising across the wider public sector workforce and developing training resources for specific practitioners. We welcome the learning needs analysis that will be part of this work and the focus on helping the public sector workforce to mentally flourish.



The animations have been used in a range of settings since launched, including in GP waiting rooms in Fife during Suicide Prevention Week

**Recommendation 8:** We recommend that the Scottish Government and COSLA provide strong support for work to transform and modernise suicide prevention branding and identity in Scotland, so as to support the delivery of the Suicide Prevention Action Plan and to build a social movement in which suicide prevention becomes everyone's business.

<sup>17</sup> These may be accessed at:

<https://vimeo.com/338176495> - Ask, Tell - Look After Your Mental Health

<https://vimeo.com/338176444> - Ask, Tell - Have a Healthy Conversation

<https://vimeo.com/338176393> - Ask, Tell - Save A Life: Every Life Matters

<sup>18</sup> Accessed at: <https://learn.nes.nhs.scot/17099/mental-health-improvement-and-prevention-of-self-harm-and-suicide>

We note that this work will support the recommendations of the Children and Young People's Mental Health Taskforce, including developing specific resources to support staff who work with children and young people and the review of existing suicide prevention resources for young people. We particularly welcome that, in keeping with the principles of the Taskforce, this work will be undertaken in partnership with young people.

Having listened carefully to people who welcome the renewed focus on suicide prevention in *Every Life Matters* we have been considering what is needed to give suicide prevention the brand and identity it needs to support Scotland's ambition to make suicide prevention everyone's business. Importantly, this must include the steps to be taken to transition from the current *Choose Life* brand, building on its achievements over the years since its creation.

Raising awareness of suicide prevention in the general population through consistent branding and messaging was key to *Choose Life's* success and it is now time to build on those foundations to transform and modernise suicide prevention identity in Scotland, to support the delivery of the Suicide Prevention Action Plan. We are grateful to everyone who has contributed to *Choose Life*, not only for the lives their work has saved over the years, but also for their openness in helping to develop this new approach and social movement.

### Improving support for those in crisis or bereaved by suicide

*Every Life Matters* is clear about the importance of ensuring the right support is available, at the right time, to people who are affected by suicide. We have engaged with a broad range of organisations involved in the field of support for those bereaved by suicide, who welcome our focus on this area.

The police are often the first agency to engage with the loved ones of the person who has died by suicide and Police Scotland have worked with us to improve their service for families by using lessons from those who have been bereaved by suicide.

To inform our work, the Mental Health Foundation is currently undertaking research to understand the range of services and support available across Scotland to people living with the impact of suicide. The research will also gain insight into the lived experience of people who have needed to access such support. Fieldwork is currently underway, including interviews with people who have been bereaved by suicide and organisations who support families after suicide.

In addition, we have been examining evidence informed models elsewhere that aim to alleviate the distress of those bereaved, prevent further suicides, reduce the economic cost and support a community response to any suicide clusters. The research and findings from this work will come together in the coming months and we will be making recommendations for a pilot programme to begin in early 2020.

*Every Life Matters* emphasises that people in distress, including those who self-harm, need to find a respectful, compassionate response when they present to services for support.

We have examined the provision of crisis support for people nationally, gathered a broad range of information about local provision and noted with interest the Distress Brief Intervention (DBI) pilot programme. Our review has identified wide variation in the availability and nature of crisis support, which may be because of variation in local need or opportunity, or because of local barriers to delivery.

**Recommendation 9:** We recommend that the Scottish Government make funding available to pilot a new model of care for those bereaved by suicide which is effective in reducing distress, self-harm and suicide. It should include evaluation and appropriate mechanisms to ensure that learning is shared.

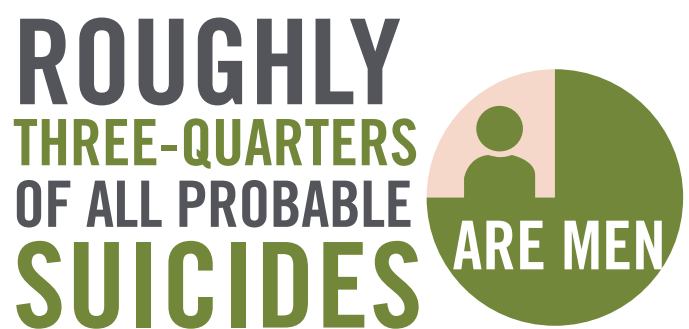
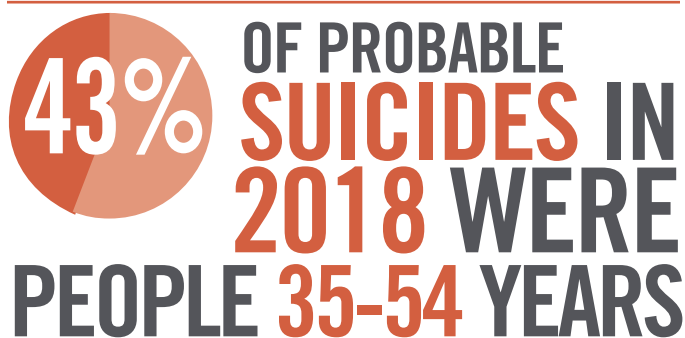
We intend to test with stakeholders a working definition of 'crisis support' in the context of effective suicide prevention, beginning with key evidence from current practice and academic research<sup>19</sup>. We will be asking the recently created Lived Experience Panel to help support and shape our work. We will aim to define effective service provision which meets the needs of users and the intentions of *Every Life Matters*.

We are pleased to note that the Scottish Government intends in its Programme for Government 2019-20 to provide crisis support for children and young people and their families. We believe that in common with the provision of community services for children and young people set out in the Programme for Government 2019-20 there will be learning from the development of these services which could be applied more broadly. It will be important to consider, as the services are developed and brought in by the Children and Young People's Mental Health Implementation Board, how this provision can be made available to people of all ages.



Distress Brief Interventions are in four pilot sites in Scotland to provide compassionate connected support.

**Recommendation 10:** We recommend that the Scottish Government and COSLA consider how the crisis support for children and young people and their families to be taken forward by the Children and Young People's Mental Health Implementation Board can be made available to people of all ages across Scotland.



<sup>19</sup> Such as *Improving outcomes for people in mental health crisis: a rapid synthesis of the evidence for available models of care* accessed at: <https://www.ncbi.nlm.nih.gov/books/NBK338634/>



## Improving understanding of what works, particularly for those at risk

*Every Life Matters* sets out a list of characteristics drawn from analysis of suicide statistics which are known to contribute to a higher risk of suicide. However, it is important to say that someone may possess many of these characteristics and still be unlikely to die by suicide. These characteristics, or risk factors, are not the whole picture.

For example, we know that suicide and economic inequality are strongly linked. People living in Scotland's poorest communities are more likely to die by suicide than those living in the least deprived communities. Yet thankfully - and while every single death by suicide is a tragedy – it is still a small proportion of people in those poorest communities who die by suicide. How can we improve our understanding of suicide risk and of what works to prevent suicide for those at risk?

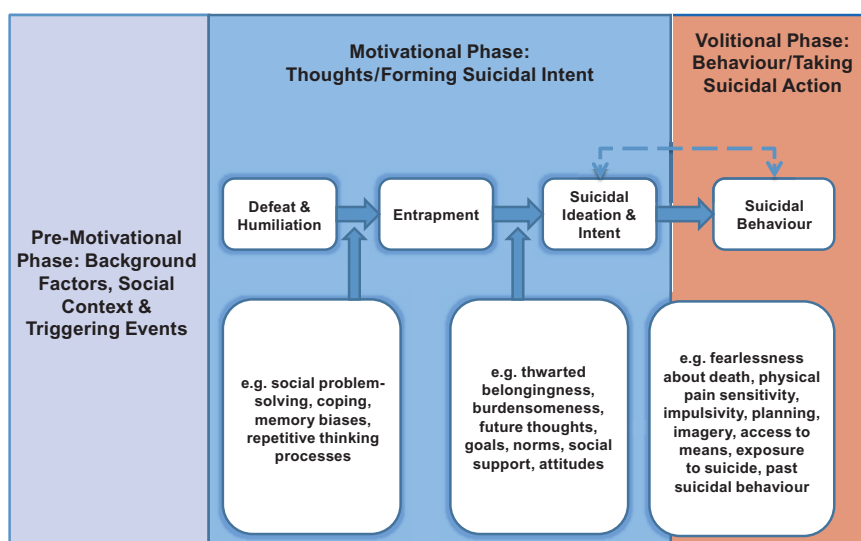
There are many academic and other models of suicide and risk. In this respect we have found a model developed in Scotland - known as the Integrated Motivational Volitional (IMV) model - particularly helpful. It has helped us to think about the particular life circumstances that may motivate a person to consider suicide and to think about what then could move those suicidal thoughts to action.

This has helped us to consider the traditional risk factors for suicide alongside how our activities in taking forward the actions in *Every Life Matters* can help people to feel less trapped, defeated or humiliated at particular points in their lives.

*Every Life Matters* commits to targeting interventions toward specific risk groups which are over-represented in suicide statistics. We will reach out to a range of people - including those who are seldom-heard - who have characteristics and experiences which may indicate increased risk of suicide. This will include those in these risk groups who have lived experience of suicidal thoughts or attempts, and those who have experienced the defeat, humiliation and entrapment which the IMV model identifies as important in understanding why people may feel suicidal. This will complement the work of the Lived Experience Panel and help to target effective interventions for people at elevated risk of suicide.

**Recommendation 11:** We recommend that the Scottish Government fund additional engagement targeted at groups of people with characteristics and experiences which may indicate elevated risk of suicide.

**Diagram 3: Integrated Motivational Volitional model**



Adapted from O'Connor, R.C., Kirtley, O.J. (2018). The Integrated Motivational-Volitional Model of Suicidal Behaviour. *Philosophical Transactions of the Royal Society B*. 373: 20170268

**15%**  **RISE IN THE NUMBER OF SUICIDES IN A SINGLE YEAR 2017-18**

**JUST OVER HALF OF THAT RISE WAS PEOPLE 15-34 YEARS** 

### Meeting the needs of children and young people

*Every Life Matters* rightly recognises that it is vital to ensure the needs of children and young people are embedded in each of its Actions. We are taking steps to ensure that activity to support delivery of each Action in *Every Life Matters* includes consideration of the needs of children and young people.

 **Spotlight: Feels FM**  
The world's first emoji powered jukebox and a powerful conversation with young people about mental health



There has been a strong focus in the past year in Scotland on the mental health of children and young people. The Children and Young People's Mental Health Taskforce was jointly commissioned by the Scottish Government and COSLA in June 2018 with the aim that children, young people, their families and carers should know that they are supported in good mental health and will be able to access services which are local, responsive and delivered by people with the right skills. The Expert Review of Provision of Mental Health Services at HMP YOI Polmont has specific recommendations in relation to suicide prevention for young people in custody.<sup>20</sup>

**“We are taking steps to ensure that activity to support delivery of each Action in *Every Life Matters* includes consideration of the needs of children and young people”**

<sup>20</sup> Accessed at: <https://www.prisoninspectoratescotland.gov.uk/publications/report-expert-review-provision-mental-health-services-hmp-yoi-polmont>

**Spotlight: Emilytest**  
#emilytest have arranged with universities across Scotland to have these stickers in students' bedrooms in halls.

**Psychological, emotional, physical and sexual abuse can take many forms.**  
In an emergency call 999

**Specialist and confidential help is available from:**

**Rape Crisis Scotland**  
Visit: [rapecrisis.scotland.org.uk](http://rapecrisis.scotland.org.uk)  
Support is available whatever your gender, age, sexuality, ethnicity or religion.  
Call: 0800 801 0302 (Daily 18.00 - 22.00)

**Scotland's domestic abuse and forced marriage helpline**  
Visit: [sdafmh.org.uk](http://sdafmh.org.uk)  
Support is available whatever your gender, age, sexuality, ethnicity or religion.  
Call: 0800 027 1234 (24hrs) (various times, weekdays)

**Men's Advice Line**  
Visit: [mensadvice.org.uk](http://mensadvice.org.uk)  
Specialist support and advice for men experiencing sexual violence and abuse.  
Call: 0800 801 0327 (Mon-Fri, 09.00 - 17.00)

**AMINA**  
Visit: [www.aminacentre.org.uk](http://www.aminacentre.org.uk)  
Specialist support for Muslim & BME women aged 16-25.  
Call: 0800 801 0301 (Mon-Fri, 10.00 - 16.00, Wed: 18.00 - 21.00)

**Galop**  
Visit: [galop.org.uk](http://galop.org.uk)  
Specialist support and advice for the LGBT+ community whatever your sexuality or gender identity.  
Call: 0800 999 5428 (various times, weekdays)

**DON'T SUFFER IN SILENCE. GET SUPPORT FOR YOUR MENTAL HEALTH.**  
In an emergency call 999

**Samaritans**  
Visit: [Samaritans.org](http://Samaritans.org)  
Support is available whatever your gender, age, sexuality, ethnicity or religion.  
Call: 116 123 or text: 07725 90 90 90. Free to call. 24 hours.

**Breathing Space**  
An NHS Scotland service for anyone with low mood, anxiety or depression.  
Visit: [breathingspace.scot](http://breathingspace.scot)  
Call: 0800 83 85 87 Free to call. (Mon-Thurs 18.00 - 02.00, Fri-Mon 18.00 - 06.00)

**Young Minds Crisis Messenger**  
Provides free crisis support to young people, by text, and aims to respond within 5 minutes.  
Text: YM to 85258 Free to text from most networks.

**CALM**  
Specialist support for men who are feeling down or need to talk.  
Visit: [thecalzone.net/help](http://thecalzone.net/help)  
Call: 0800 58 58 58. Free to call. (17.00 - 03.00 every day)

**Switchboard**  
Specialist support for the LGBT+ community and anyone considering their sexuality or gender identity.  
Visit: [switchboard.lgbt](http://switchboard.lgbt)  
Call: 0300 330 0630 (10.00 - 22.00 daily)

**Think Positive**  
NUS Scotland's offers students a guide to self-management and links to support services for a wide range of mental health issues.  
Visit: [thinkpositive.scot/support-and-links](http://thinkpositive.scot/support-and-links)

Professional and confidential support for your mental health is available within your university or college. Contact student or learner services or your student association.

*Every Life Matters* highlights that, if used positively, the internet and other technologies can be used to improve suicide prevention both locally and nationally. We all live at least part of our lives online. For young people particularly, the internet may be the place where friendships are played out, where they learn and where they would go to seek help if feeling low. However, many children and young people are unsure of what credible trusted sources of support exist online.<sup>21</sup>

We have been examining what digital support is available currently to people who may be at risk of suicide. This includes how to raise awareness of sources of such support and of online resources facilitating individuals' ability to manage their own mental health, resilience and wellbeing. We have also seen innovative use of social media by the police to promote suicide prevention and help to spread the message that everyone can help.

We know that each suicide is a tragedy which affects not only the loved ones of the person who has died but also many people more widely. 2018 statistics sadly indicate that more young people have lost their lives to suicide and we must therefore acknowledge the wider impact on other young people in their schools, workplaces and communities. We welcome and support the recommendations of the Taskforce and the establishment by the Scottish Government and COSLA of a Children and Young People's Mental Health and Wellbeing Programme Board to deliver those recommendations. We will work with them to reduce suicide amongst young people and its impacts on other young people across our communities.

We also responded to the UK government consultation about online harms in July of this year<sup>22</sup>. We emphasised the need for research in this area and the need for balance in regulation. There is a balance that must be struck in any regulation between removing content which provides information on methods of suicide or promotes suicide and self-harm, and preserving the positive role internet use can play in encouraging users to seek help and access support.

21 Accessed at: <https://www.seemescotland.org/media/9468/feelsfm-executive-summary-report.pdf>

22 Accessed at: <https://www.gov.scot/publications/national-suicide-prevention-leadership-group-response-to-online-harms-white-paper/>

# Conclusion

**As the National Suicide Prevention Leadership Group, we make observations and recommendations to Scottish Government and to COSLA in this, our first annual report which reflect the strength of commitment across Scotland to the vision and aims of the Suicide Prevention Action Plan, *Every Life Matters*.**

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We have made recommendations which are intended to encourage, enhance and amplify the remarkable work being done by dedicated and passionate people involved in suicide prevention in Scotland. We share their ambition to create an inclusive movement for suicide prevention, in which stigma is reduced and effective help and support is provided to everyone who is thinking about or affected by suicide. We thank them for making a difference in their communities and to the people who need their help every day.

It is critical that suicide prevention is prioritised by national and local government, and we welcome the clear leadership commitments given by Scottish Government and COSLA in the Suicide Prevention Action Plan. Leadership is absolutely necessary to saving lives from suicide, and there is a role beyond that for all of us to play. Suicide prevention is everyone's business.

Because every life matters.

# Appendix A

## National Suicide Prevention Leadership Group: Members

Ms Rose Fitzpatrick CBE, QPM (Chair)

Mr George Dodds, Director of Health Equity and Director of Health and Work, NHS Health Scotland

Chief Superintendents John Mackenzie and David Duncan, Police Scotland

Mr James Jopling, Executive Director for Scotland, Samaritans

Mr Toni Giugliano, Policy and Public Affairs Manager, Mental Health Foundation

Dr David Hall, Royal College of Psychiatrists

Mr Nigel Henderson, Chief Executive, Penumbra

Dr Amy Knighton, Royal College of General Practitioners

Ms Lara McDonald, Young Person Representative, nominated via Young Scot

Dr John Mitchell, Principal Medical Officer Psychiatry, Scottish Government

Ms Ruth Moss, Lived Experience, nominated via the Alliance

Ms Jane O'Donnell, Head of Service Policy, COSLA

Ms Nicky Reid, Chief Executive Scottish Professional Football League Trust

Ms Angela Scott, Chief Executive, Aberdeen City Council

Dr Michael Smith, Lead Associate Medical Director, NHS Greater Glasgow and Clyde and Integrated Joint Board representative

Mr Billy Watson, Chief Executive, SAMH

### Advisors:

Professor Rory O'Connor of the University of Glasgow

Emeritus Professor Steve Platt of the University of Edinburgh

# Appendix B

## Scotland's Suicide Prevention Action Plan Every Life Matters

We envisage a Scotland where suicide is preventable; where help and support is available to anyone contemplating suicide and to those who have lost a loved one to suicide. Suicide prevention is everyone's business.

### Summary of Actions

**Action 1.** The Scottish Government will set up and fund a National Suicide Prevention Leadership Group (NSPLG) by September 2018, reporting to Scottish Ministers – and also to COSLA on issues that sit within the competence of local government and integration authorities. This group will make recommendations on supporting the development and delivery of local prevention action plans backed by £3 million funding over the course of the current Parliament.

**Action 2.** The Scottish Government will fund the creation and implementation of refreshed mental health and suicide prevention training by May 2019. The NSPLG will support delivery across public and private sectors and, as a first step, will require that alongside the physical health training NHS staff receive, they will now receive mental health and suicide prevention training.

**Action 3.** The Scottish Government will work with the NSPLG and partners to encourage a coordinated approach to public awareness campaigns, which maximises impact.

**Action 4.** With the NSPLG, the Scottish Government will ensure that timely and effective support for those affected by suicide is available across Scotland by working to develop a Scottish Crisis Care Agreement.

**Action 5.** The NSPLG will use evidence on the effectiveness of differing models of crisis support to make recommendations to service providers and share best practice.

**Action 6.** The NSPLG will work with partners to develop and support the delivery of innovations in digital technology that improve suicide prevention.

**Action 7.** The NSPLG will identify and facilitate preventative actions targeted at risk groups.

**Action 8.** The NSPLG will ensure that all of the actions of the Suicide Prevention Action Plan consider the needs of children and young people.

**Action 9.** The Scottish Government will work closely with partners to ensure that data, evidence and guidance is used to maximise impact. Improvement methodology will support localities to better understand and minimise unwarranted variation in practice and outcomes.

**Action 10.** The Scottish Government will work with the NSPLG and partners to develop appropriate reviews into all deaths by suicide, and ensure that the lessons from reviews are shared with NSPLG and partners and acted on.



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