

# ANNUAL REPORT

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## 2014

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NATIONAL  
OFFICE *for*  
SUCIDE  
PREVENTION

## FOREWORD FROM THE HSE MENTAL HEALTH DIVISION

The National Office for Suicide Prevention (NOSP) is a core part of the HSE National Mental Health Division. The work of the NOSP relies on building strong relationships with the Health and Wellbeing Division, Primary Care and other HSE Divisions, as well as with statutory, non-statutory and community partners.

Through the National Mental Health Division significant additional funding, totalling over €8 million, has been made available to the work of suicide prevention. The NOSP continues to support innovation and the development of safe services in Ireland.

Key initiatives in the HSE Mental Health Division in 2014 include the following:

**Development of Suicide Crisis Assessment Nurses (SCAN).** This service involves a skilled mental health nurse working in Primary Care, particularly with general practitioners, to give advice for a detailed psychosocial assessment for people who are at risk and to assist with the onward referral to appropriate services.

**Development of Dialectical Behaviour Therapy (DBT) services.** A national roll-out of DBT across all mental health services is ongoing, based on rigorous evaluation. This programme has been expanded to include a family support dimension.

**National Clinical Care Programme for the Assessment and Management of Patients Presenting to Emergency Departments following Self-Harm.** This programme provides enhanced clinical support and coordination in service delivery for those who have self-harmed and present at Emergency Departments.

A key feature of these services is that they are based on a collaborative approach across the Health Services: Mental Health, Primary Care and Acute Hospitals. This approach to integrated care is essential for effective, efficient and safe care.

In 2014, the NOSP launched a new mental health and wellbeing campaign called *#littletthings*. The *#littletthings* campaign highlights that we all experience difficult times in our lives, and that when we do, there are some evidence-based things that can make a big difference to how we feel, like: talking about our problems, getting regular exercise, drinking less alcohol and being involved in activities we enjoy. This campaign was developed in collaboration with partner agencies. Early evaluations indicate a strong and positive public response to the campaign. The campaign directs people to *yourmentalhealth.ie*, which contains information on mental health services and supports in Ireland, and it also encourages people to make contact with the Samaritans' 116 123 free-to-call phone number, for a listening ear.

Finally, I would like to acknowledge the crucial role that the NOSP continues to have in leading and co-ordinating initiatives and to thank the NOSP team and their partner agencies for the extensive work carried out in 2014.



A handwritten signature in black ink, appearing to read 'Anne O'Connor'.

**Ms. Anne O'Connor**  
NATIONAL DIRECTOR  
HSE Mental Health Division

*A key feature of these services is that they are based on a collaborative approach across the Health Services: Mental Health, Primary Care and Acute Hospitals. This approach to integrated care is essential for effective, efficient and safe care.*

## FOREWORD FROM THE NOSP

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In communities across Ireland, suicide generates feelings of grief, apprehension and concern. For every Irish person who dies by suicide, many others attempt to end their lives, and many more experience the despair that leads them to consider suicide. Historically, as a nation, we have struggled to talk openly about suicide and how it impacts on us. However, our national conversation is growing and we are becoming better at discussing and addressing issues relating to our mental health.

Suicide rates in Ireland saw significant changes over the past decade, and the most recent confirmed CSO figures indicate there were 541 deaths by suicide in 2012. This represents a 2.35% decrease on 2011 figures. Provisional data for 2013 and 2014 suggest a further decreasing trend in the rate of suicide in Ireland.

Ireland's suicide rate is not high by European comparison. However, suicide rates among young males and females are high. Taking males and females aged 15-19 years together, the rate was 10.5 per 100,000 of the population, the fourth highest rate in this age group across the 31 European countries studied. The methods by which people choose to end their lives in Ireland continue to be challenging to address.

Statistics from the National Self-Harm Registry Ireland show that since 2010, there has been a 12% decrease in the overall rate of self-harm presentations to emergency departments. However, this figure is still 6% higher than rates for 2007, before the economic recession.

*our national conversation is growing and we are becoming better at discussing and addressing issues relating to our mental health*

In the National Office for Suicide Prevention, our main priorities for 2014 were:

Continuing to provide multi-annual investment for service development and community initiatives, so as to support people in seeking help and to ensure the appropriate help is available when required. Key outcomes from this investment include enhanced service capacity, the enhancement of information and advice resources, training and the launch of the mental health campaign, *#littlethings*. Most importantly, we have seen an increase in the uptake of services available to the community.

Laying the foundations for our new national suicide prevention strategy, to succeed *Reach Out*, in partnership with the Department of Health and statutory, non-statutory and community partners. By the end of 2014, there was significant progress in building upon our evidence base, learning from *Reach Out* and establishing key priorities for the new strategy.

The World Health Organization has set a global target of reducing the suicide rate by 10% by 2020. I believe that by continuing to build on our knowledge, experience and commitment, and by working together in partnership, we can achieve this target of reducing the loss of life by suicide in Ireland.

Finally, I would like to acknowledge the efforts of all who have supported the work of the National Office for Suicide Prevention throughout 2014.



A handwritten signature in black ink, appearing to read 'Gerry Raleigh', written in a cursive style.

**Mr. Gerry Raleigh**  
DIRECTOR  
National Office for  
Suicide Prevention

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## SECTION 1

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# NOSP - Overview of our work in 2014

## 1.1 NOSP – OVERVIEW OF OUR WORK IN 2014

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### FUNDING

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#### BUDGET

In 2014, we received an 8% increase on the national budget for suicide prevention. This brought our total budget to €8.8 million. This represented the health services greatest investment to date in suicide prevention in a calendar year.

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#### INVESTMENT IN SERVICES AND COMMUNITY SUPPORTS

We continued to invest in frontline services and organisations working in the areas of suicide prevention and mental health promotion. We provided funding of €4.446 million to 30 non-profit and community organisations and service providers. This investment supported best practice service provision across the country. We also provided further investment of €857,198 directly to community organisations. This supports communities in responding to suicide and promoting good mental health.

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### DEVELOPING A NEW NATIONAL SUICIDE PREVENTION STRATEGY

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The Department of Health and the NOSP led the development of a new national strategy for suicide prevention, *Connecting for Life*. A strategic planning oversight group was formed to take responsibility for the process and the outcomes. Five supporting advisory groups were set up to assist in the development of the strategy. Membership of the advisory groups was drawn from a broad base of expertise including clinicians, researchers, policy makers, government departments, community leaders, non-statutory partners and those affected by suicide. The development process included:

- **Reach Out:** An examination of learning from *Reach Out*, Ireland's previous suicide prevention strategy, 2005 – 2014.
  - **Consultation:** A public consultation, which received 272 written submissions.
  - **Research:** Examination of national and international evidence, research and statistics on suicidal behaviour.
  - **Policy:** A policy paper on suicide prevention – *A review of national and international policy approaches to suicide prevention*, commissioned by the NOSP.
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## SERVICE DEVELOPMENT

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### SUICIDE PREVENTION POSTS

We started the recruitment process for six new Suicide Prevention Resource Officers across the country.

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### DEVELOPMENT OF SUICIDE CRISIS ASSESSMENT NURSE (SCAN) SERVICE

We invested in the national roll out of the SCAN service. The service provides an expert mental health nurse, who offers primary care GPs an available, accessible and speedy response for assessment of people at risk of suicide.

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### SAMARITANS FREE TO CALL

In March 2014, we funded Samaritans to provide a national single point of contact for people in distress and for those concerned about a loved one, through development of the 116 123 free-to-call number.

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### NATIONAL COORDINATION

In 2014 we continued to play a pivotal role in coordinating the suicide prevention work of agencies from the voluntary, statutory and non-statutory sectors.

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## STANDARDS AND BEST PRACTICE

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### STANDARDS

In December 2014, we established a working group of representatives from community, statutory and voluntary organisations to progress development of a set of National Minimum Standards for organisations working in suicide prevention. The aim of the group is to prepare a draft set of minimum standards by the end of 2015.

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### SCHOOL GUIDELINES

We supported the development of national *Guidelines for Mental Health Promotion – Wellbeing in Primary Schools*. The National Educational Psychological Service launched the guidelines in 2014.

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### MEDIA GUIDELINES

The Irish Association of Suicidology and Samaritans launched revised media guidelines on suicide reporting in Ireland.

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### MEDIA MONITORING

Headline, the national media monitoring programme for mental health and suicide, continued to promote responsible and accurate coverage of mental health and suicide related issues within the Irish media.

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## TRAINING & EDUCATION

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### TRAINING REVIEW

We commissioned a major review of suicide prevention training programmes available in Ireland. This review fed into the development of Ireland's new national strategy for suicide prevention and provided the basis for a new National Training Plan.

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### ASIST & safeTALK

Over the lifetime of *Reach Out*, from 2004 - 2014, a total of 30,364 people attended safeTALK and 31,740 attended ASIST training. This means that, to date, one in every 113 adults in Ireland are trained in safeTALK and one in every 109 adults are trained in ASIST.

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### DBT TRAINING

National roll out of Dialectical Behavioural Therapy (DBT) across all mental health services is ongoing, based on rigorous evaluation. This programme has been expanded to include a family support dimension.

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## RESEARCH

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### CONTINUED INVESTMENT IN RESEARCH

The National Suicide Research Foundation (NSRF) continues to produce high-quality research and data to support the development of suicide and self-harm services. In 2014, the NSRF coordinated 22 research and evaluation projects in the areas of suicide, self-harm and related mental health issues.

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## CAMPAIGNS

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### MENTAL HEALTH PROMOTION

We launched a new mental health promotion campaign, called *#littletthings*, and the *yourmentalhealth.ie* website. This campaign was developed in collaboration with partner agencies. Early evaluations indicate a strong and positive public response to the campaign.

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Connecting for Life

## SECTION 2

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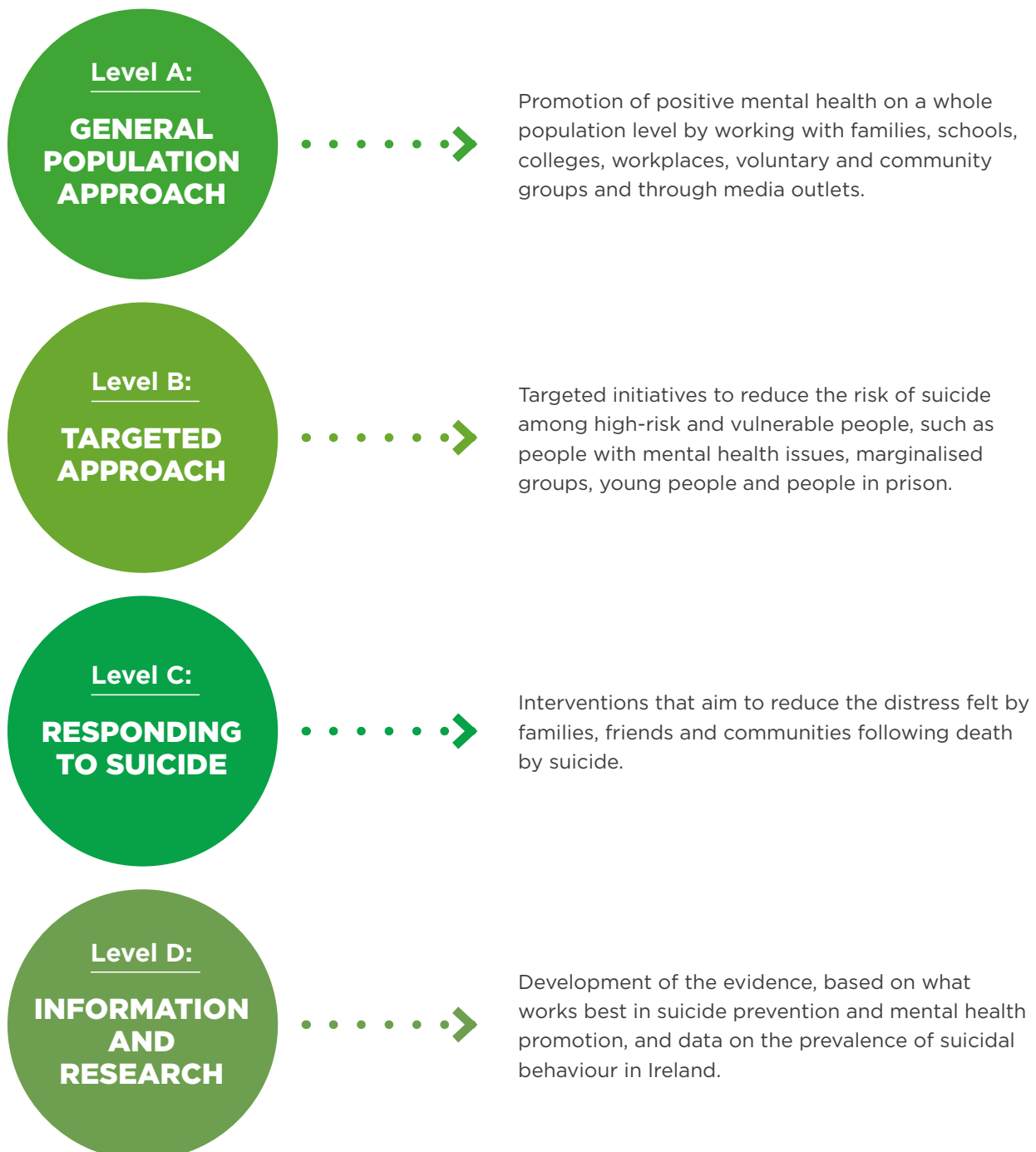
# Suicide prevention in Ireland

## 2.1 APPROACH TO SUICIDE PREVENTION IN IRELAND

### National Strategy 2005 – 2014

*Reach Out*, a 10-year national strategy for action on suicide prevention, was launched in 2005 to guide the work on suicide prevention in Ireland. *Reach Out* concluded in 2014 and work was undertaken to develop a new national strategy for suicide prevention, *Connecting for Life*, building on the comprehensive work delivered under the current strategy.

*Reach Out* addressed suicide prevention on four levels:





## **Coordination and implementation: The National Office for Suicide Prevention**

The National Office for Suicide Prevention (NOSP) provides cross-sectoral support for implementation of Ireland's suicide prevention strategy.

The NOSP's role includes:

- Coordination of national implementation plans
- Information, research and evaluation
- Tracking of data to support evidence-based approaches
- Standards and guidelines
- Coordination of national education and training plan
- Media monitoring
- Communication strategies and campaigns directing to services

The NOSP was set up in 2005 within the HSE to oversee the implementation, monitoring and coordination of *Reach Out*, the first national suicide prevention strategy. The NOSP is a core part of the HSE National Mental Health Division, providing strong alignment with mental health promotion and specialist mental health service delivery as appropriate.

In order to be effective, the NOSP relies on strong working relationships with HSE Health and Wellbeing, HSE Primary Care and other HSE divisions, as well as with statutory, non-statutory and community partners.

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### Our team in the National Office for Suicide Prevention Team

Mr. Gerry Raleigh	<i>Director</i>
Ms. Susan Kenny	<i>National Lead for Strategy, Planning and Implementation</i>
Ms. Paula Forrest	<i>Senior Executive Officer</i>
Ms. Anne Callanan	<i>Assistant Resource &amp; Research Officer</i>
Ms. Paula Skehan	<i>Finance and Freedom of Information Officer</i>
Ms. Fidelma Morrissey	<i>Administration Officer</i>
Ms. Sandra Anderson	<i>Administrator</i>
Ms. Sharon Nolan	<i>PA to Director</i>
Ms. Kahlil Coyle	<i>#littlethings Mental Health Campaign Manager</i>
Ms. Anna Lally	<i>yourmentalhealth.ie Manager</i>
Mr. Hugh Duane	<i>Information Officer</i>
Ms. Bernie Carroll	<i>Resource Officer for Suicide Prevention</i>
Ms. Brid Casey	<i>Resource Officer for Suicide Prevention</i>

## Partnership

Partnership is the foundation to effective suicide prevention work in Ireland. Suicide prevention is best achieved when individuals, families, health and community organisations, workplaces, government departments and communities work collaboratively to build an infrastructure of suicide prevention and support from national through to local level. The NOSP fosters and coordinates collaborative working between a range of agencies and with services that complement each other, avoiding duplication and reducing gaps in service provision.

## Developing *Connecting for Life*: Ireland's new national strategy for suicide prevention 2015 - 2020

In 2015, the Government launched *Connecting for Life*, the new national strategy to reduce suicide 2015 - 2020. *Connecting for Life* is founded on the suicide prevention work that has taken place in Ireland over the past ten years as part of *Reach Out*.

*Connecting for Life* involves preventive and awareness-raising work with the population as a whole, supportive work with local communities and targeted approaches for priority groups. The strategy proposes high-quality standards of practice across service delivery areas, and an underpinning evaluation and research framework. This wide reach presents unique implementation challenges. The whole-of-government, multi-agency, inter-professional, expert-by-experience, local/national focuses will involve multiple stakeholders across and between levels of government and governance.

The development of *Connecting for Life* began in 2014 with the appointment of a strategic planning oversight group and five supporting advisory groups covering the areas of research, policy, practice, engagement and communications / media.

The development of the strategy was led by the Department of Health and the NOSP.

Membership of the advisory groups was drawn from a broad base of expertise including clinicians, researchers, policy makers, government departments, community leaders, non-statutory partners and those affected by suicide. Each advisory group reviewed evidence and in some cases commissioned new material within its area of expertise.

A wide-ranging consultation and engagement process was undertaken to capture the voices and opinions of a range of stakeholders, including service providers, the general public, people affected by suicide, government departments and state bodies. 272 submissions were received from individuals and organisations, and meetings were held with non-statutory partners working in the area of suicide. The Department of Health held bilateral discussions with other government departments and agencies, with a view to building cross sectoral commitment to the strategy.

The planning process for *Connecting for Life* involved the engagement of a broad range of statutory, non-statutory and community stakeholders, identifying agreed strategic priorities, setting clear goals and objectives. *Connecting for Life* is underpinned by strong political leadership and commitment. The focus on engagement in the strategy development process has created a strong community of people and agencies ready and willing to help lead the implementation of *Connecting for Life*.

Go to [www.nosp.ie](http://www.nosp.ie) for further information on *Connecting for Life*.



# Connecting for Life

## Ireland's National Strategy to Reduce Suicide 2015-2020

### VISION

An Ireland where fewer lives are lost through suicide, and where communities and individuals are empowered to improve their mental health and wellbeing.



### GOALS

- 1 Better understanding of suicidal behaviour
- 2 Supporting communities to prevent and respond to suicidal behaviour
- 3 Targeted approaches for those vulnerable to suicide
- 4 Improved access, consistency and integration of services
- 5 Safe and high quality services
- 6 Reduce access to means
- 7 Better data and research



### OUTCOMES

Reduced suicide rate in the whole population and amongst specified priority groups

Reduced rate of presentations of self-harm in the whole population and amongst specified priority groups



### IMPLEMENTATION

#### Action plan to achieve goals and objectives

Cabinet Committee on Social Policy and Public Service Reform

National Cross-Sectoral Steering and Implementation Group

National Office for Suicide Prevention

Local Cross-Sectoral Implementation Structures

Individual Agency and Implementation Systems

Resource and Communication

Outcome and Evaluation Frameworks



## SECTION 3

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# Progressing the implementation of *Reach Out* in 2014

## 3.1 OVERVIEW

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*Reach Out* took a whole population approach to suicide prevention, as recommended by the World Health Organization. This was combined with a targeted approach for those who are known to be at increased risk of suicidal behaviour. *Reach Out* also proposed actions to improve support to individuals and communities bereaved through suicide.

Over the 10-year lifespan of *Reach Out* there have been significant developments in the areas of research, policy and service delivery relating to suicide prevention, including:

- National and international research into suicidal behaviours and an improved understanding of the evidence base for suicide prevention.
- A stronger and far-reaching working relationship with a wide range of non-statutory and community partners, underpinned by a focus on hope, belief, recovery and commitment.
- A range of public policies within and beyond the health services that either deal directly with suicide prevention or have the potential to impact positively in terms of reducing suicidal behaviour and improving the wellbeing of the population.
- Increased public awareness of suicide prevention and mental health.

## 3.2 PROVISION OF SERVICES FOR PEOPLE WHO NEED SUPPORT

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### Introduction

This section highlights some of the NOSP-funded frontline services that respond to individuals in crisis or who have been bereaved by suicide.

### Samaritans

Samaritans answered 478,222 calls for help from October 2013 to September 2014 in the Republic of Ireland. On 25 March 2014, Samaritans launched a new free-to-call number – 116 123. Previously the charity had operated a low cost 1850 number. There has been a significant increase in calls since the barrier of cost has been removed.

In addition to the helpline, services are available by email, letter, SMS texts and through face-to-face support in Samaritans' 12 branches throughout the Republic of Ireland. People contact Samaritans about a wide range of issues, including depression, relationship and family issues, loneliness, physical and mental health issues, alcohol, drugs, self-harm, financial worries, illness, issues around sexuality, as well as suicidal thoughts and feelings.

In September 2014, Samaritans launched a new East Coast service in Arklow to support communities in Wicklow and Wexford. The East Coast Service is managed by the Dublin branch, with support from the Waterford and Kilkenny branches.



Samaritans - Talk to Us Launch (Photo: Marc O'Sullivan)

Samaritans continues to work with organisations to ensure that their callers can access support around the clock. Where appropriate, a direct divert system can be set up so that organisations can forward their helpline to Samaritans when their own helpline is unavailable. The caller will be automatically directed to the Samaritans' helpline. This system is well established with LGBT organisations, AWARE and Shine.

Samaritans has been selected as the GAA's mental health partner, and the two organisations are working together to ensure that members of the GAA know about the support available. Samaritans engaged in outreach activities at the Provincial Championship Games and Samaritans are working with the GAA Health and Wellbeing Committees in each county to provide active listening skills training for clubs.

Prisoners are one of the groups who are the most vulnerable to suicide. Samaritans runs eight Listener schemes and direct support in prisons across the Republic of Ireland. A new Listener scheme was introduced to Cork Prison in 2014.

Visit [www.samaritans.ie](http://www.samaritans.ie) for more information.



## The ISPCC – Childline

The Irish Society for the Prevention of Cruelty to Children (ISPCC) works with young people, throughout all its services, on building positive mental health and developing social networks, thereby reducing self-harm and suicidal thoughts.

Childline is an active listening service for children and young people up to the age of 18. It is a universal service, which is preventative in nature.

In 2014, Childline responded to 480,285 contacts from children across its range of services. One of the key areas of concern in 2014 for ISPCC/Childline was the scale and complexity of mental health issues for children. More than 20,000 contacts in 2014 related to psycho-social/ mental health issues. Worryingly, more than 1,000 contacts to Childline in 2014 related to suicide. A significant number of these contacts were within Childline's most urgent category, with 303 calls from children at high risk of suicide.

In August 2014, with support from the NOSP, Childline extended opening hours for web and text services. These services are now available from 10am until 4am. The impact of these increased hours can be measured by a 33% increase in contacts to Childline in the latter part of 2014.

In December 2014, Childline set up a designated text support service for young people who may be struggling with mental health issues or finding it hard to cope. By texting the word 'help' to 50101 a young person can now talk 'live' to one of Childline's trained facilitators.

Visit [www.childline.ie](http://www.childline.ie) for more information.

## LGBT Helpline

The LGBT Helpline is a non-judgmental and confidential service providing listening, support and information to lesbian, gay, bisexual and transgender (LGBT) people, their family and friends, and to those who are questioning if they might be LGBT. The National LGBT Helpline service is provided by trained volunteers through a network of local LGBT helpline centres.

The LGBT Helpline provides support and information services to LGBT people and their families through two main channels:

- A confidential telephone helpline.
- A dedicated website, [LGBT.ie](http://LGBT.ie), with detailed information on support available around the country.

In 2014, more than 46,000 people accessed support and information through these two channels. In total, 43,208 people visited the website while 3,206 calls were received by the telephone helpline service.

Also in 2014, the LGBT Helpline expanded its existing services through working collaboratively with Samaritans Ireland. Through this partnership, callers to the LGBT Helpline have the option of 24-hour support via a direct dial service to Samaritans outside the LGBT Helpline's opening hours – 1,230 availed of this service in 2014. The LGBT Helpline delivered LGBT awareness training to 120 Samaritans volunteers in 2014.

There was a further expansion of services in the second half of 2014, with the introduction of peer support groups. The peer support groups provide support to married women who identify as lesbian, bisexual, and/or transgender. A second group offers peer support to opposite sex spouses/partners of people who identify as LGBT. The gap in existing services for these particular groups of people was identified through the LGBT Helpline telephone support service and through consultation with other LGBT support groups.

Visit [www.lgbt.ie](http://www.lgbt.ie) for more information.

## Turn2Me

Turn2me is an online support community, providing peer and professional online mental health support services for adults, in times of emotional distress. There were 178,420 visits to Turn2me.org in 2014, with 77.6% new visitors; 22.9% returning visitors; and 878,766 page views. In 2014, Turn2me streamlined their services to provide a new three-tiered approach to supporting mental wellbeing.

### Tier 1 – Self help

- Information centre – Useful articles and podcasts on mental health issues, positive mental health and coping strategies.
- Thought Catcher – Mood measuring diary to help track mood over time and effect positive change in thought processes.

### Tier 2 – Peer support

- Moderated live chat – A safe online space where members can interact and support each other, allowing members to remain anonymous and facilitating more open communication and expression of feelings.

### Tier 3 – Professional support

- One to one online counselling
- Online support groups
- *Mood Skills* CBT programme

Turn2me provided free online counselling to Irish adults across the island of Ireland, ensuring those who needed support but were unable to access services locally received the help that they needed. In 2014, residents from every county received free online counselling sessions as a result of funding provided by the NOSP. Weekly online support groups on mental health issues were also provided.

*Turn2me provided free online counselling to Irish adults across the island of Ireland, ensuring those who needed support but were unable to access services locally received the help that they needed.*

Also in 2014, Turn2me embarked on the development of a new psycho-educational CBT based programme for depression, called *Mood Skills*. The 10-week programme provides interactive eLearning modules along with weekly, facilitated and structured online support groups.

In late 2014, Turn2me launched their mobile site, which is accessible whether on a laptop or mobile device, on wifi or 3G. Following its launch in December – just in time to provide support over Christmas – over 2,500 members visited the mobile site in the first week.

Visit [www.turn2me.org](http://www.turn2me.org) for more information.

*The participation of more than 100,000 people in Pieta's annual Darkness into Light event, where supporters walked out of the dark of night into the breaking light of dawn, symbolic of the work of Pieta House, illustrates how the community has embraced Pieta House.*

## **Pieta House**

Pieta House, a registered charity, is a not-for-profit company providing free crisis intervention and therapeutic services in the field of suicide and self-harm prevention. By the year end, Pieta House operated from five main centres and four outreach centres.

Since its foundation in 2006, approximately 17,500 vulnerable people have benefited from Pieta's effective care. In attempting to meet the demand within the community for this care, provision of the service has grown from 70 clients in 2006 to 5,202 in 2014, an increase approaching 36% on the figure for 2013.

In 2014, the NOSP provided financial assistance to enable the delivery of approximately 3,000 hours of therapy to clients attending Pieta's outreach centres and also to 594 clients accessing Pieta's service from within the general health service. This assistance complements the extraordinary level of generosity and support for the work of Pieta House, which is reflected in the charity's accounts for 2014. All sectors, including the general public, corporate, institutional and Government, played their part in enabling Pieta House to continue to deliver on its promise of being available at the time of crisis. Total income and resources for the year of €5,420,470 represented an increase of almost one million euro on all funding received for 2013. The participation of more than 100,000 people in Pieta's annual *Darkness into Light* event, where supporters walked out of the dark of night into the breaking light of dawn, symbolic of the work of Pieta House, illustrates how the community has embraced Pieta House.

Visit [www.pieta.ie](http://www.pieta.ie) for more information.

*Families can play a vital role in identifying an eating disorder and also in helping the person affected to address both the behaviours and any associated emotional distress.*

## **Bodywhys**

Bodywhys is the national voluntary organisation dedicated to supporting people in Ireland affected by eating disorders. Up to 200,000 people in Ireland may be affected by eating disorders, with 400 new cases emerging each year, representing 80 deaths annually. Bodywhys provides a range of support services for people affected by eating disorders, including specific services for families and friends. Bodywhys' vision is that people affected by eating disorders will have their needs met through appropriate integrated, quality services delivered by a range of statutory, private and voluntary agencies.

In 2014, Bodywhys received a grant from the NOSP to further develop the PiLaR (Peer Led Resilience) programme, and deliver the programme through a partnership between Bodywhys and the HSE mental health services.

Families can play a vital role in identifying an eating disorder and also in helping the person affected to address both the behaviours and any associated emotional distress. The PiLaR programme aims to provide support through peer-led resilience building with the objective of establishing a self-care pathway beginning with identifying individual issues of need and progressing through to improving outcomes in order to incorporate the resources necessary for individualised support services. Participation helps families and carers to understand what an eating disorder is, how it develops and is maintained in an individual, and how they can support the person to move towards recovery while protecting their own well-being.

Delivered weekly in a small group format over four sessions, the course covers a range of topics on the essential skills needed to significantly reduce the concerns of supporting a family member with an eating disorder. Family members frequently cited increased understanding of and learning about eating disorders as key reasons for attending the course. Developing coping skills, meeting others in similar circumstances and learning what to say in certain situations were other key reasons for attending.

## **SCAN: Suicide Crisis Assessment Nurse service**

SCAN provides a fast-track, accessible and responsive specialist mental health nursing service for adults experiencing self-harm/suicide crisis who contact their GP. The GP can usually arrange for an appointment for the SCAN nurse to see a patient. Appointments can be facilitated within the GP surgery or primary care setting.

Based on a comprehensive assessment, decisions relating to the appropriate care pathway for the patient are agreed.

The NOSP invested in national roll-out of this service, and in 2014 nine SCAN sites were established across the country. SCAN has been developed, within the HSE mental health services, in North Dublin, Tallaght, Wexford, Waterford, North Cork, Galway, Sligo, Donegal, Laois and Offaly.

## **Nurture**

Nurture offers timely, affordable, professional counselling and supports surrounding pregnancy and childbirth maternal mental health illnesses to women, their partners and their families. The charity's aim is to get women back to positive emotional wellbeing. Nurture provides one-to-one counselling and an eight-week support programme, as well as training and education. Nurture also offers affordable and accessible services to men to overcome pregnancy-related mental health illnesses by offering them counselling support.

In 2014, funding from the NOSP supported the organisation to:

- Provide subsidised one-to-one counselling with a Nurture counsellor to 91 clients.
- Develop the Nurture website ([www.nurturecharity.org](http://www.nurturecharity.org)) and online forum, as well as installation, configuration and implementation of a client relationship management database.
- Facilitate a Wellness Recovery Action Plan (WRAP) training programme, in collaboration with Suicide or Survive, for Nurture's counsellors and clients.

*The charity's aim is to get women back to positive emotional well being.*

### 3.3 INFORMATION & MEDIA COMMUNICATIONS

#### Introduction

The NOSP continued to fund both whole-population and targeted communications initiatives in 2014. This included launch of a new national mental health campaign - #littlethings, and mental health website, *yourmentalhealth.ie*, for the whole population.

Media and information campaigns, such as the #littlethings campaign, help us to deliver on our strategic aims to engage the whole population in relation to suicide prevention, to promote positive mental health and to target at-risk groups.

The media can help in tackling stigma in relation to suicide and mental health, and the NOSP helps ensure that the media portrays suicide in a responsible and accurate way. The NOSP team and the regional Resource Officers for Suicide Prevention also regularly speak about suicide prevention in the national and regional media.

The following pages highlight some of the NOSP-funded information, media and communications work from 2014.

*The media can help in tackling stigma in relation to suicide and mental health, and the NOSP helps ensure that the media portrays suicide in a responsible and accurate way.*



Offaly Mental Health Awareness TALK Week



## #littlethings campaign and YourMentalHealth.ie

The *#littlethings* mental health and wellness campaign and the *yourmentalhealth.ie* website were launched in October 2014 by the NOSP and a coalition of more than 25 partner organisations. Early evaluations indicate a strong and positive public response to the campaign.

The *#littlethings* campaign highlights that we all experience difficult times in our lives, and that when we do there are some evidence-based little things that can make a big difference to how we feel. These *#littlethings* can help us to cope, but there are also supports and services we can use if we need to. *Littlethings* answers two key questions that we all need the answers to in order to be able to look after our own and others' mental health: 'What can I do?' and 'Where can I go?'

### 1. What can I do?

The campaign, developed in conjunction with mental health experts, highlights the evidence based *#littlethings* that can improve your mental health and wellbeing. The campaign showcases a selection of the *#littlethings* that are proven to protect and help recover good mental health and wellbeing – like keeping active, talking about problems, connecting with others going through difficult times, drinking less alcohol, eating and sleeping well.

### 2. Where can I go?

A new online information resource, *www.yourmentalhealth.ie*, was developed with the support of our partner organisations. This website is now the most comprehensive online directory of support services and information on mental health in Ireland. It is a great place to learn about mental health, and to find out how to support yourself and the people you care about. In addition, there is now one single emotional support freephone number, available at all times from the Samaritans at 116 123.

Visit [www.yourmentalhealth.ie](http://www.yourmentalhealth.ie) for more information.



Launch of the *#littlethings* campaign. Minister of State at the Department of Health, Kathleen Lynch, T.D. and Gerry Raleigh, Director of the NOSP, alongside campaign ambassadors Alan O'Mara and Robert Carley.





Gerry Raleigh, Director of the NOSP and Senator Jillian van Turnhout, with SpunOutters, at the launch of #DitchTheMonkey, MiYO and the Survival Guide.

## SpunOut.ie

SpunOut.ie is Ireland's youth information website, created by young people for young people. The organisation's vision is for an Ireland where young people are empowered with the information they need to live happy, healthy and active lives. In 2014, the website received 821,562 website visits and 1.56 million page views. The organisation rolled out several health projects in 2014, including:

- **Ditch the Monkey:** a series of five animated shorts, released online and in cinemas to an audience of over 700,000 people. The series was produced by SpunOut.ie in collaboration with Irish animator Eoin Duffy and the National Office for Suicide Prevention. The series is loosely based on the 'five ways to wellness', a set of evidence based actions which promote positive mental health. Often, our own negative thoughts hold us back from being happy and healthy. By choosing to get out into the world, to connect, to contribute, to be healthy, to accept ourselves

and be aware we can stay on the path to wellness.

- **MiYO App:** MiYo is a SpunOut.ie wellness app developed by students to help people kickstart a healthy routine. The app has been downloaded over 1,250 times.
- **Survival Guide to Life:** The Survival Guide to Life was developed and published in 2014. The aim of the book is to help young people navigate the difficult challenges in life, whether at home, in school, at college or in work. 4,000 books were distributed, with 6,503 readers of electronic versions of the book.
- **Health Hack:** A campaign to kick start young people into making small changes to their diet and fitness in order to build up day-to-day routines for happier and healthier lives. SpunOut.ie used text message interventions and engaging online content to support young people to make those small changes which can have a big impact on their lives.

Visit [www.spunout.ie](http://www.spunout.ie) for more information.

## Headline – Media monitoring, training and awards

Headline is Ireland’s national media monitoring programme, working to promote responsible and accurate coverage of mental health and suicide related issues within the Irish media. Headline aims to highlight mental health issues and address the stigma attached to emotional distress, suicidal behaviour and mental illness through the promotion of responsible media coverage.

In 2014, Headline continued to monitor all national and regional print media coverage relating to mental health and suicide – a total of 33,033 articles – and took action when the coverage was very positive or negative. In August 2014, Headline also started to monitor online coverage.

Headline runs an annual student award for any type of media coverage relating to suicide or mental health issues. This helps engage with journalism students and their lecturers in a positive way, and gives them experience of covering these issues and exposure to the media guidelines and tools. Other Headline awards include Regional Newspaper of the Year, Voice Media Award – for reporting that gives voice to people with personal experience, National Magazine Award and the Overall Award for Positive Media Coverage of Mental Health and Suicide.

Throughout 2014, Headline delivered free media training to media professionals, print and broadcast journalists and third-level journalism media and communication students across the country. The media training focuses on responsible and accurate coverage of mental health and suicide and introduces participants to the tools available and to Headline’s multimedia resource, [www.headline.ie/multimedia-resource](http://www.headline.ie/multimedia-resource).

Visit [www.headline.ie](http://www.headline.ie) for more information.



Prize giving for the Headline Overall Media Award, 2014, to the Irish Independent. Jane Arigho, *Headline*, Ian Mallon, *Irish Independent*, John Saunders, *Shine*.

*Headline aims to highlight mental health issues and address the stigma attached to emotional distress, suicidal behaviour and mental illness through the promotion of responsible media coverage.*

## ReachOut.com and ReachOutParents

ReachOut.com is a youth mental health service dedicated to taking the mystery out of mental health. The service aims to provide quality assured mental health information to help young people get through tough times. ReachOut.com is operated by ReachOut Ireland (formerly Inspire).

In 2014, an average of nearly 3,000 weekly visitors from Ireland received information about mental health that helped them through tough times, and over 700 comments and questions were received online. The 2014 ReachOut.com user survey found that a significant percentage of respondents (40%) visit ReachOut.com to find information to help them through a tough time, with a further 19% visiting the website for general mental health information.

The ReachOut 101 online training programme was delivered to 54 people in 2014. The programme provides trainees with a broad overview of mental health, mental illness, supports and services while also focusing on safe online communication skills.

A dedicated resource for parents, ReachOutParents ([www.reachout.com/parents](http://www.reachout.com/parents)) was launched at ReachOut's second international Technology for Wellbeing Conference, held in Dublin in 2014. The resource provides parents with information on youth wellbeing, mental health problems, supports and services, and technology and online communications.

Visit [www.reachout.com](http://www.reachout.com) for more information.



ReachOut.com staff and volunteers with Minister of State at the Department of Health, Kathleen Lynch, T.D.

## 3.4 TRAINING AND EDUCATION

### Introduction

Gatekeeper training on suicide prevention has been shown to be effective in reducing suicidal behaviour among communities and at-risk groups. Alongside our partner organisations and Resource Officers for Suicide Prevention, we continued to ensure coordinated delivery of suicide prevention training across the country.

A wide variety of training programmes are available through the HSE and partner agencies, focused on mental health promotion and suicide prevention. Training programmes focus on self-care, awareness, intervention and specialist training.

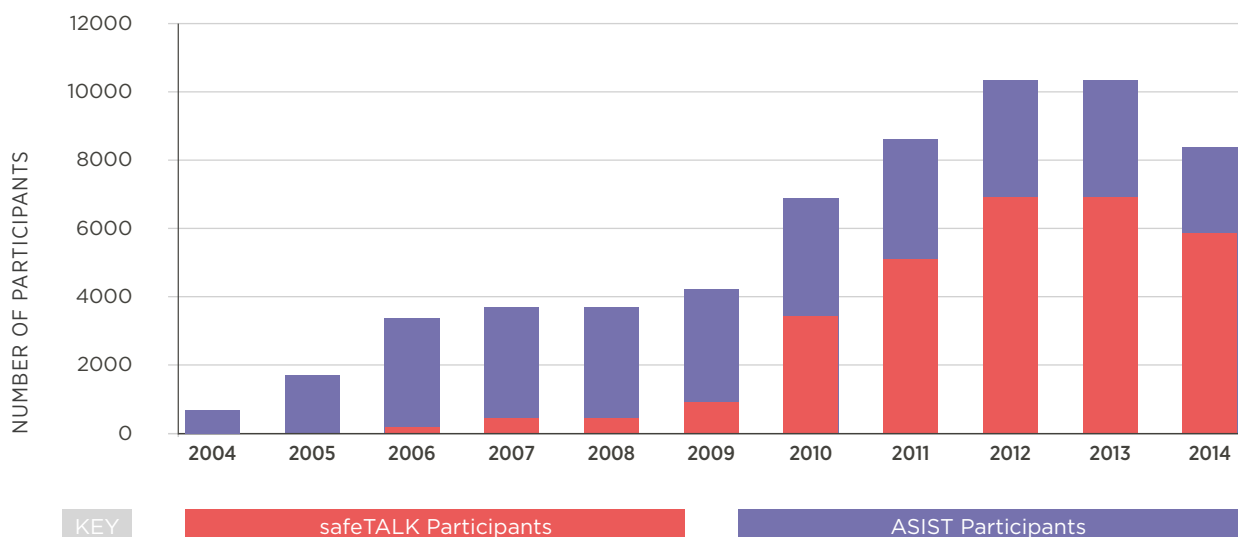
This section highlights some of training and education programmes funded by the NOSP in 2014. Also in 2014, we commissioned a major review of suicide prevention training programmes available in Ireland. The review fed into development of Ireland's new national strategy for suicide prevention and provided a basis for a new National Training Plan. This Training Plan will ensure suicide prevention and mental health training programmes are available to statutory, non-statutory and community organisations, as well as to the general public.

*Training programmes focus on self-care, awareness, intervention and specialist training.*

### ASIST and safeTALK training

ASIST (Applied Suicide Intervention Skills Training) and safeTALK training are core elements of the suicide prevention training delivered across Ireland. Over the lifetime of Reach Out, from 2004 - 2014, a total of 30,364 people attended safeTALK and 31,740 attended ASIST training. This means that, to date, one in every 113 adults (over 18) in Ireland have completed safeTALK training and one in every 109 adults have completed ASIST training.

#### Number of participants who attended safeTALK and ASIST training





*Gatekeeper training on suicide prevention has been shown to be effective in reducing suicidal behaviour among communities and at-risk groups.*

### **Understanding Self-Harm training**

Developed by the NOSP, Understanding Self-Harm training is an awareness programme that aims to reduce the stigma of self-harm, improve awareness and sensitivity to self-harm issues among individuals and care agencies, and promote effective care services for those who engage in self-harming behaviour. It is a one-day awareness programme, coordinated through the Resource Officers for Suicide Prevention.

The training is suitable for people who work with young people such as youth workers, teachers, residential care staff, as well as Gardaí, people in caring professions, parents, concerned members of the public, people who work in alcohol and addiction services, those who work with homeless people and people who work with those recovering from mental illness.

### **Trainer network**

A total of 47 new trainers joined the trainer network in 2014. Fourteen candidates completed the ASIST Training for Trainers (T4T), while 12 completed the SafeTALK T4T and 21 completed the Understanding Self-Harm T4T.

### **STORM training**

STORM training is a programme for frontline mental health professionals. It provides participants with the skills to conduct an in-depth assessment of suicide risk, engage in crisis management, and develop problem-solving skills. STORM training is available for a range of mental health services staff in a number of areas across the country.

HSE Resource Officers for Suicide Prevention provide STORM training (and STORM self-injury training) in the South-East, South West and Mid-West. Sixteen workshops, with a total of 156 participants, were delivered in 2014.

*One in every 113 adults (over 18) in Ireland have completed safeTALK training and one in every 109 adults have completed ASIST training.*

## Dialectical Behaviour Therapy (DBT) training

Dialectical Behaviour Therapy (DBT) was originally developed as a treatment for disorders such as borderline personality disorder, where suicidal ideation and self-harm are common. It is a combination of cognitive-based therapy, mindfulness practice and acceptance-based practice. It is delivered by a team of mental health professionals.

In 2013, the National DBT Project Office was established with funding provided by the NOSP. This project is a multi-year project to fund the training of DBT teams nationwide, to increase the complement of therapists on existing DBT teams and to conduct research into the systemic implementation and an economic evaluation of DBT. This study will consider the quality of training, effectiveness of intervention and how to support sustainability and the adaptability of the staffing resources to flex the model to respond to changing population needs.

Eight new DBT teams were trained as part of the national project in 2013 and a further eight new teams, comprising a total of 69 mental health professionals, were trained in 2014. These teams have established new DBT programmes in their local services in Galway East, Galway West (with a programme also established in the Brothers of Charity Intellectual Disability Services in Galway), South Tipperary, Kildare (Newbridge) and also in three CAMHS Services: Lucena Clinic (Dublin), Galway/Roscommon and South Lee (Cork).

In addition, advanced training was provided by the founder of this therapy, Prof. Marsha Linehan, to over 160 therapists from the UK and Ireland in January and June 2014. This training enhanced the therapists' existing skills to deliver DBT. During 2014, DBT teams also began to expand their offerings to include people with emotion dysregulation, substance abuse problems, the intellectual disability services and family members of those attending DBT programmes.



Endeavour Dialectical Behaviour Therapy project: Family Connections DVD launch

## GP suicide prevention education / training

The Irish College of General Practitioners (ICGP) receives funding from the NOSP to facilitate general practitioners (GPs) and their practice staff to enhance their skills in suicide prevention and postvention. This has been facilitated by offering an accessible e-learning programme and DVD. The programme was developed to support GPs and other members of the Primary Care Team in dealing with the challenge of suicide.

The e-learning programme and DVD are complemented by providing additional supports and information at all the ICGP's major events and by incorporating the training on the CME small groups learning programme, which is conducted across Ireland. The programme explores the core themes of suicide prevention, intervention and postvention. It is delivered through 'blended learning', which comprises both e-learning and peer interaction through clinical case discussion.

The e-learning programme was launched in 2013. By August 2015 there were 6,395 total lesson views by GPs and 1,415 total lesson completions. 500 resource packs had been distributed.

The focus of education offered to GPs reflects the scope of practice where symptoms of mental illness are seen in the context of social life stress and distress rather than viewed through the filter of a tertiary medical model. ICGP have emphasised that GPs and Primary Care Teams are core parts of all local communities and are often turned to for support, guidance and leadership when there is a suicide risk, during an acute event and in the aftermath of suicide.

## Shine - Taking Control workshops & support

Shine is the national organisation dedicated to upholding the rights and addressing the needs of all those affected by mental ill health, through the promotion and provision of high quality services and working to ensure the continual enhancement of the quality of life of the people it supports.

Shine's Taking Control workshop is targeted at people who are experiencing distress as a result of unemployment, isolation and/or marginalisation. In 2014, Shine delivered 45 Taking Control workshops, in 19 locations nationwide, to 390 people. The organisation also delivered Train the Trainer training in Taking Control.

Shine provided ongoing support to people with mental health problems and their family members nationwide, via their Regional Development Officers and staff in Shine's Resource Centres based in Dublin and Cork. Support was also provided via Shine's confidential Information Helpline.

Visit [www.shineonline.ie](http://www.shineonline.ie) for more information about Taking Control.

*The programme explores the core themes of suicide prevention, intervention and post-intervention.*



## National Youth Council of Ireland (NYCI)

The National Youth Council of Ireland (NYCI) is the representative body for national voluntary youth work organisations in Ireland. It represents and supports the interests of around 50 voluntary youth organisations and uses its collective experience to act on issues that impact on young people. It seeks to ensure that all young people are empowered to develop the skills and confidence to fully participate as active citizens in an inclusive society.

The National Youth Health Programme (NYHP) is one of the key programme areas of work within NYCI. The NYHP works to build the capacity and sustainability of health promotion in the youth sector at both a strategic and operational level. NYHP endorses a holistic approach to health and wellbeing through the delivery of a broad based, flexible health promotion programme of work. The programme supports a settings based approach to health promotion and this is complemented through the roll out of the Health Quality Mark, supporting health-promoting youth organisations. In 2013, NYHP developed the *Framework for Promoting Young People's Health in Youth Organisations*. The Framework recognises that young people's health and wellbeing is comprised of five key components: physical; social; sexual; spiritual; and mental & emotional health and wellbeing.

NYHP supports a mental health promotion and preventative agenda, viewing mental health and wellbeing as a spectrum, and doesn't identify health and illness as mutually exclusive. NYHP supports practitioners working across the youth sector to build their capacity and capabilities to explore the area of mental health and wellbeing with the young people with whom they work. NYHP currently delivers MindOut training to youth workers on a national basis. This is a 12-session programme, which takes a positive approach to the promotion of mental and emotional wellbeing. In addition, the programme delivers ASIST, a two-day interactive workshop in suicide first aid.

Visit [www.youthhealth.ie](http://www.youthhealth.ie) for more information.

## Suicide or Survive (SOS)

SOS works to break down the stigma associated with mental health issues and ensure that those affected have access to quality recovery services that are right for the individual.

SOS delivered 33 Wellness Workshops nationwide in 2014, attended by more than 1,000 people, and piloted the Wellness Workshop with young people aged 15 – 18. The organisation also launched an online version of the Wellness Workshop. The target population for the Wellness Workshops is the general public. The workshops are aimed at people who want to learn tools to manage and maintain their own mental wellness. All workshops were run in partnership with local communities and/or organisations.

SOS also continued to deliver workshops to more than 200 prisoners in Wheatfield Place of Detention and ran its first workshop for prison staff. The move to bring the Wellness Workshop into the prison setting has enabled SOS to support a hard-to-reach population and to bring the idea of wellness and taking personal responsibility for your own wellness into a setting where mental health difficulties are common. In evaluation of the workshops, the men reported their wellbeing improved and stayed well over time, with reported wellbeing rising to just over 90% three months after the workshop.

SOS developed and commenced a pathway whereby seven prisoners are training to become mentors to other prisoners in implementing their learning from the Wellness Workshop and WRAP (Wellness Recovery Action Plan) training.



SOS and Longford Mental Health Association

An evaluation report from Trinity College on the impact of the Wellness Workshop and workbook found that 75% of participants from the general population reported that attending the workshop improved or greatly improved their wellbeing. SOS also trained a panel of 12 individuals as WRAP facilitators and delivered WRAP in the community and Wheatfield Place of Detention to prisoners and officers.

Other highlights in 2014 included:

- *The High Tea and Talk* initiative, which encouraged people to talk about mental health, with an outside broadcast by Pat Kenny.
- A fortnightly slot co-presenting on mental health on Newstalk's Global Village radio programme.
- Development of a new base for the Eden Programme, in Darndale, Dublin. The Eden Programme provides a safe space through supportive weekly groups over a six-month period for those in need who have attempted suicide or have had suicidal thoughts. A DCU evaluation of the Eden Programme found that the programme significantly reduces suicide ideation, suicide risk and subjective levels of distress and that it is highly endorsed and valued by participants. The organisation developed strong partnerships in Galway and Mayo to run the Eden Programme under licence to SOS in 2015.

## ***Please Talk Ambassador Programme, University College Dublin***

The aim of the *Please Talk Ambassador Programme* is to give staff and interested students the knowledge and skills to ensure that students in need of support are connected to appropriate help. The programme uses training as a tool to raise awareness that there is a problem with suicide and that we can all be part of the solution. It also highlights the risk factors for suicide among young people in Ireland. Support is then provided through clear pathways, to ensure that students in need of support are connected to appropriate help.

Ambassadors are provided with safeTALK and/or ASIST training by the HSE. In 2014, 62 students and staff were trained in safeTALK, with 48 trained in ASIST.

*The programme uses training as a tool to raise awareness that there is a problem with suicide and that we can all be part of the solution.*

## 3.5 RESPONDING TO SUICIDE

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### Introduction

The time after a death by suicide is extraordinarily difficult for those bereaved by suicide. The provision of appropriate services is necessary to support families and communities. The range of bereavement support services varies greatly from professional, one-to-one psychotherapy services, to organising community support services, to supplying people with printed information. This section highlights some of the work in this area, which was funded by the NOSP in 2014.

*The time after a death by suicide is extraordinarily difficult for those bereaved by suicide.*

### Console – Bereavement counselling

The NOSP provides funding to Console for the provision of bereavement counselling to those affected by suicide in Ireland, primarily through face-to-face services. In 2014, Console continued to provide a variety of suicide prevention and postvention services and supports, including:

- Suicide bereavement counselling, psychotherapy and postvention support from Console Centres in Dublin, Cork, Limerick, Galway, Wexford, Tralee, Kildare, Athlone and Mayo. During 2014, Console successfully opened a new counselling centre in Loughlinstown, Co Dublin, serving the southern county and surrounding areas.
- In 2014, Console was able to provide over 14,637 service contacts to those who presented for support.
- Specifically tailored child psychotherapy services for children or adolescents who have lost a sibling or parent to suicide.
- On-going support groups or therapeutic grief programmes for those bereaved through suicide.
- The Console 247 freephone suicide prevention helpline (1800 247 247) and text message service for anyone in crisis, bereaved by suicide or concerned about another. This service provides intervention and support, and works closely with emergency services and other relevant agencies. In 2014, Console reported over 53,000 contacts to the helpline service on a 24 hour basis over 365 days.
- Practical information for people who have been bereaved by suicide such as guidance, literature and resources.

- The annual Console *World Suicide Prevention Day Conference*, welcoming national and international speakers working in the fields of suicide prevention and postvention strategy, advocacy and research.

Information on all of Console's activities and services is available on [www.console.ie](http://www.console.ie).

*The NOSP provides funding to Console for the provision of bereavement counselling to those affected by suicide in Ireland, primarily through face-to-face services.*



World Suicide Prevention Day.

*In 2014, Console reported over 53,000 contacts to the helpline service on a 24 hour basis over 365 days.*

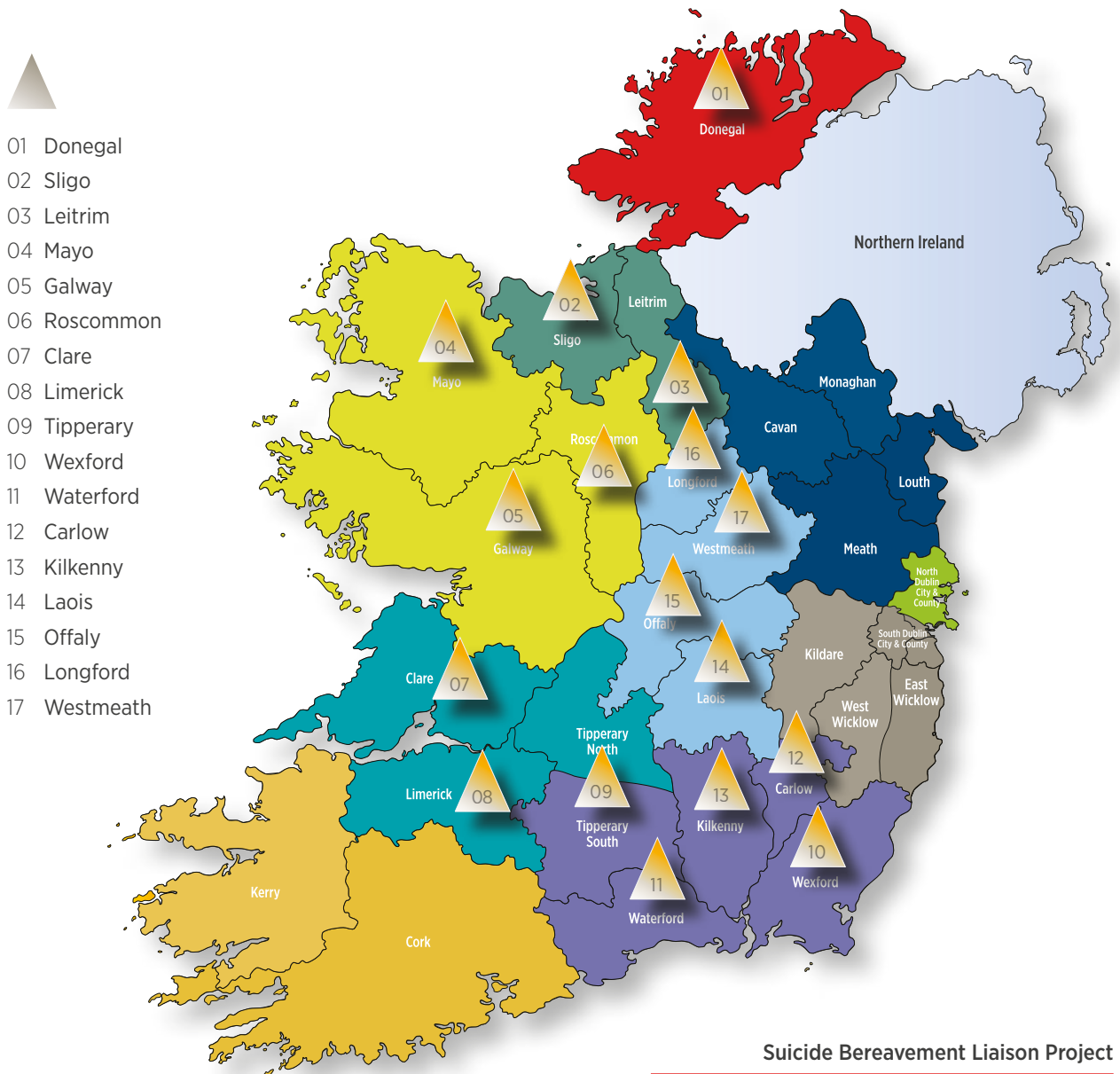


## Suicide Bereavement Liaison Project

The aim of the Suicide Bereavement Liaison Project is that when a suicide occurs, a liaison worker will be available to the family to provide practical and emotional support, and information on helpful services. The service is available in the immediate aftermath of a suicide or for those bereaved many years who are seeking help for the first time. The project provides a co-ordinated response for families following a death by suicide.

Key partners include Resource Officers for Suicide Prevention, Living Links, Curam Clainne Family Resource Centre/Vita House and Roscommon Console. In each of the areas, support also comes from bereaved family groups, first responders, community groups, faith based groups, statutory service providers, psychology and counselling services and many more.

In 2014, the collective regional Suicide Bereavement Liaison Service made over 170 contacts with bereaved individuals or groups and worked with their local agencies and service providers to ensure helpful responses were in place. A map of the current Suicide Bereavement Liaison Projects is included below.



## 3.6 PROMOTING POSITIVE MENTAL HEALTH & WELLBEING

### Introduction

In 2014, the NOSP continued to support stigma reduction and invest in mental health promotion, with a focus on programmes for young and older men, LGBT people, young people, and on social prescribing projects. The following pages highlight some of the mental health promotion activities funded by the NOSP in 2014.

### Young Social Innovators

Young Social Innovators (YSI) encourages, motivates and creates new opportunities for young people to actively participate in the world around them. It seeks to engage young people wherever they are – in schools, communities, youth organisations, in families, in or out of work – and prepare them to fully take part in civic action, whether through volunteerism, community service, service-learning, citizenship education or social entrepreneurship and innovation.

Mental health related projects in the YSI *Health and wellbeing* programme category enable young people to enhance their understanding of mental health issues, and to identify practical solutions to promote the understanding of positive mental health, and increase access to education.

The participants work on projects to promote debate and discussion on mental health.

The YSI Social Innovation Programme began in 2001 as a pilot to increase social awareness and responsibility among 15 to 18 year olds by providing them with opportunities to engage and get involved in action to address real social issues that they feel strongly about in their community. Using their talents, ideas and energy to make a positive contribution empowers young people and provides skills for both life and work. Mental health related projects made up a significant proportion of the projects which young people chose to focus on in 2013-14 and of the 308 health related projects in the Programme, 126 focused on mental health.



YSI Speak Out in Cork, with Minister of State at the Department of Health, Kathleen Lynch, T.D., Sr. Stanislaus Kennedy and Young Social Innovator participants.

Also in 2014, YSI launched a pilot social innovation programme amongst young people who experience socio-economic disadvantage. The aim of the pilot is to develop and use social innovation tools to help develop real life and work skills amongst disadvantaged groups of young people. The pilot programme provides opportunities for participants to realise they have a positive contribution to make to their communities and further enhances their self-confidence, belief and sense of well-being.

Visit [www.youngsocialinnovators.ie](http://www.youngsocialinnovators.ie) for more information.

## Comhairle na nÓg – Let’s Go Mental

Comhairle na nÓg are child and youth councils in the 34 local authorities of the country, which give children and young people the opportunity to be involved in the development of local services and policies. One representative from each Comhairle na nÓg is elected to the Comhairle na nÓg National Executive, which follows up on the recommendations from Dáil na nÓg to make changes for young people in those areas.

Gerry Raleigh, Director of NOSP, is a member of the Steering Committee for the Comhairle na nÓg National Executive and in 2014, youth mental health was one of the key areas of focus for the National Executive. Work in the area of mental health included development of *Let’s Go Mental* – a nationwide campaign to promote positive mental health in young people, launched in 2015.

## Mojo – Men’s Support Programme

Mojo is a programme for men who are affected by unemployment and/or the recession and who are finding it difficult to cope. The programme aims to motivate the participants to make positive changes to their lives. Mojo does this by providing a training programme that focuses on developing their resilience to their current situation and offering them support to access local services that can help them to return to work or education.

In 2014, 14 local organisations continued to be a part of the advisory group supporting five Mojo programmes run in Tallaght. In total, 82 local men completed the Mojo programme, with an 89% retention rate. 57 of those men, who were previously unemployed, progressed on to education, training or employment.

A Mojo toolkit was designed so as to progress this evidence based programme in other areas. The aim of the toolkit is to assist others in establishing a Mojo programme in their region. A Mojo Programme Facebook page was developed and is currently active.

Also in 2014, a Social Return of Investment study of the programme was completed. The analysis found that for every €1 of investment, Mojo returns between €4.26 and €4.96 in social value.

As referrals to the Mojo programme increased, so too did referrals to the Mojo Men’s Shed. A Tús (community work placement) communication support worker was recruited to meet these higher demands for support.



MOJO programme.

The Mojo Men’s Shed now has longer opening hours and is supporting men, on a voluntary basis, four times a week. They are also linking in with other Men’s Sheds.

Visit [www.mojo-programme.org](http://www.mojo-programme.org) for more information.

*Mojo is a programme for men who are affected by unemployment and/or the recession and who are finding it difficult to cope. The programme aims to motivate the participants to make positive changes to their lives.*



## BeLonG To

BeLonG To is the national organisation for lesbian, gay, bisexual and transgender (LGBT) young people aged between 14 and 23. During 2014, BeLonG To worked with 21 LGBT youth groups in 14 counties and engaged with a number of new partners with the aim to set up new LGBT youth groups. These spaces are key in reaching out to marginalised LGBT young people who are in areas which often have no other dedicated services for the LGBT community, young or old. They are a vital place of first contact for many LGBT young people, where they can be themselves, build self-esteem, create support networks and, where necessary, benefit from one-to-one support or referrals.

Many of these youth groups, along with representatives from agencies in the North, came together to attend the first all-Ireland LGBT youth work conference.

The BeLonG To LGBT Youth Mental Health Project saw publication of an updated parents and young people's booklet (about coming out), which was distributed widely; delivery of the *Stand Up Awareness Week against Homophobic and Transphobic Bullying* to post-primary schools and youth services; and the start of a new research study (LGBT Ireland) about LGBT mental health.

The 2014 Stand Up campaign grew, with many new schools and youth services coming on board. This is a cornerstone of BeLonG To's work in ensuring that LGBT young people feel safe, are supported and are given the opportunity to be themselves. It continues to ensure that the level of awareness within school communities and youth services on LGBT issues is growing, aiding the level of outreach to marginal populations of young people who may otherwise feel the need to hide their identity within the formal and informal education systems.

Visit [www.belongto.org](http://www.belongto.org) and [www.lgbtmentalhealth.ie](http://www.lgbtmentalhealth.ie) for more information.

*It continues to ensure that the level of awareness within school communities and youth services on LGBT issues is growing, aiding the level of outreach to marginal populations of young people who may otherwise feel the need to hide their identity within the formal and informal education systems.*

## See Change - reducing stigma in the workplace

See Change is an alliance of more than 90 organisations working together to change minds about mental health problems and reduce the stigma and discrimination associated with mental health problems.

In 2014, See Change delivered 34 *See Change in Your Workplace* workshops and developed the *See Change in your Workplace Pledge Programme*. This is a comprehensive engagement programme to address stigma in Irish workplaces which involves training, workshops, policy support and help with running in-house initiatives.

The half-day (3-hour) *See Change in Your Workplace* workshop provides information on mental health and mental health problems for employers, managers and employees, as well as offering best practice advice on creating workplaces that are free of stigma and discrimination and equipped to support the mental health needs of the organisation.

## Transgender Equality Network Ireland (TENI)

Transgender Equality Network Ireland (TENI) is the national organisation for transgender people. TENI seeks to improve conditions and advance the rights and equality of transgender people and their families. Despite significant progress in the past years, Ireland remains a place where it is difficult for transgender people to lead safe, healthy and integrated lives. TENI is dedicated to ending transphobia, including stigma, discrimination and inequality. The organisation engages in activities that promote the equality and wellbeing of transgender people in Ireland through support, education and advocacy.

In 2014, TENI focused on community development and peer support for transgender people. This included the development of the Trans Group Alliance, a network of peer support groups across Ireland. This alliance provides



**See Change  
in your  
Workplace**

Also in 2014, in collaboration with the Equality Authority/EU funding, See Change published a *Case Law Review on Mental Health in the Workplace* and a *Mental Health in the Workplace Policy Document* to provide information and guidance on how to develop and implement a comprehensive workplace mental health policy.

Visit [www.seechange.ie](http://www.seechange.ie) for more information.

an important space for peer facilitators to develop skills and capacity to provide better peer support in their regions. In 2014, TENI was contacted by 1,000 individuals, with 17% of that contact consisting of individuals in crisis or requiring suicide prevention. In addition to delivering peer support and information/referral services, TENI developed a training programme that focused on developing the resilience of trans people and their families by promoting coping and positive mental health.

Lack of awareness of transgender issues within the healthcare system continues to pose challenges and create barriers for transgender people accessing care. TENI worked closely with healthcare providers, particularly those working in mental health, to provide knowledgeable and sensitive care to transgender people. In 2014, TENI delivered training to over 400 healthcare providers.

Visit [www.teni.ie](http://www.teni.ie) for more information.

## Healthy Options Project Erris (HOPE)

The Healthy Options Project Erris (HOPE) is a social prescribing project, started in 2012. Social prescribing has been found to have a range of positive outcomes, such as enhanced self-esteem and improved mood and social contact. The aim of HOPE is to be a supportive link for adults in Erris and Castlebar, in Mayo. The project enables people to access activities and groups that they might enjoy and benefit from, and thereby enhance their health and wellbeing.

In order to maximise use of resources, HOPE continued one day a week in Erris in 2014, and extended to offer two days a week in Castlebar, under the name 'The Flourish Project'. The Flourish Project was set up in September 2014.

Developments in work with individuals and groups included establishment of a new independent social group in Erris called the 'Monday Club', as a result of participation in the Hope project courses. The project worker developed links throughout the country with other social prescribing projects and developments, and contributed to new developments, such as a social prescribing toolkit and a network for those interested in social prescribing projects.

An evaluation of HOPE by the National Suicide Research Foundation will be published in July 2015.

*Social prescribing has been found to have a range of positive outcomes, such as enhanced self-esteem and improved mood and social contact.*

## National Traveller Suicide Prevention Service

The National Traveller Suicide Prevention Service (NTSPS), formerly known as the National Traveller Suicide Awareness Project, employs a community development approach to address the issue of Traveller suicide, which is over six times higher for Traveller men compared to the general population.

The service acts as a resource to Traveller organisations and suicide related services, raising awareness on the issue of suicide. In 2014, the National Traveller Suicide Prevention Service continued to develop its work in prevention and intervention, especially with Traveller men.

Training and awareness-raising remains the core focus of the service. The service does this by building individual, family and Traveller community resilience. In 2014 the service provided specialist training in the areas of:

- Suicide awareness
- Suicide prevention
- SafeTALK
- Men's development
- Wellness workshops

In addition to this, the service held a series of local, regional and national events highlighting the issue of suicide within the Traveller community.

The NTSPS successfully implemented the Play It and Say It sporting initiative in 2014. This programme engaged upwards of 500 Traveller men throughout Ireland in a conversation about their mental health through participation in sporting activities.

The integration of the National Traveller Suicide Prevention Service into Exchange House Ireland in 2013 has led to continued growth and has provided a greater capacity for the project to deliver a range of services and supports.



NTSPS sporting initiative participants

In 2014 the NTSPS continued to build its reputation on a national scale. The NTSPS is now a member of Mental Health Reform, the Irish Association of Suicidology and the All Ireland Men's Health Network and have formed connections with University College Dublin, University College Cork and the University of Ulster in Northern Ireland. The service also formed working partnerships with the GAA, the FAI, An Garda Síochána, the PSNI, the HSE and St Patrick's Mental Health Services in Dublin.

Visit [www.travellersuicide.ie](http://www.travellersuicide.ie) or [www.exchangehouse.ie](http://www.exchangehouse.ie) for more information.

*Training and awareness-raising remains the core focus of the service.*

*The service does this by building individual, family and Traveller community resilience.*

## Gaelic Athletic Association (GAA)

**Healthy Club Project:** With the support of the NOSP and HSE, the Association continued delivery of the GAA Healthy Club Project, involving 16 clubs across the four provinces. The project is designed to apply a health promotion settings approach, as recommended by the World Health Organization, to the sports club setting, with the intention of developing a best practice model that can be used by GAA clubs in Ireland and all over the world. The interim report issued in June 2014, by an independent evaluation team from Waterford IT, highlighted the potential for the project to support not only the physical and emotional health and wellbeing of members, but to extend that to the wider communities served by the participating clubs.

**GAA Mental Health Charter:** In 2014, the GAA launched its Mental Health Charter for all clubs and counties. The aim of the charter is to support the positive mental health of their members, while also being mindful of the needs of those who may be experiencing challenging times.

**Play in my Boots:** The Association also developed a mental fitness resource for club players and coaches called Play in My Boots. This gives clear advice and pointers about the little things that players across Ireland can do to enhance and maintain their mental fitness.

**Samaritans partnership:** The GAA announced Samaritans as its official mental health charity and partner in 2014.

**National Health & Wellbeing conference:** The GAA's inaugural national Health & Wellbeing conference attracted 140 interested volunteers in March 2014. Emotional wellbeing and positive mental health was a common theme.

**Training for GAA members:** The GAA expanded its delivery of safeTALK training to all interested GAA members, through its ongoing partnership work with the NOSP. The delivery of the GAA's Alcohol and Substance Abuse Prevention programme remains ongoing across all 32 counties.

Visit [www.gaa.ie/community](http://www.gaa.ie/community) for more information.



Members of Samaritans join An Uachtarán CLG, Liam O'Neill, and Minister of State at the Department of Health, Kathleen Lynch, T.D., for the launch of the GAA/Samaritans emotional wellbeing partnership. Included are GAA stars Jonny Cooper (*Dublin*), Colm Begley (*Laois*) and Collette Gill (*Galway*).



## 3.7 BUILDING COMMUNITY CAPACITY TO RESPOND TO SUICIDE AND PROMOTE POSITIVE MENTAL HEALTH

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### Introduction

The regional Resource Officers for Suicide Prevention are key to building community capacity to respond to suicide. The Resource Officers, in consultation with the NOSP and other stakeholders, have developed action plans for suicide prevention and mental health promotion across many communities within their regions. The plans set out priorities based on local needs and on the suicide and self-harm rates in each area. From 2015 onwards, regional work in suicide prevention will be driven by *Connecting for Life* – the new national suicide prevention strategy, whilst also responding to identified local needs and supporting community participation and leadership.

A significant proportion of the Resource Officers' work aims to bring together organisations and stakeholders to:

- Coordinate action on suicide prevention within communities, through providing leadership and advice.
- Develop evidence-based action plans across HSE areas.
- Deliver and coordinate community gate-keeper training, e.g. ASIST and SafeTALK.
- Promote public awareness of how suicidal behaviour can be prevented and of the availability of support services based within communities.
- Highlight resources and supports available to people bereaved by suicide.
- Provide support to people bereaved by suicide and promote healing and recovery.
- Promote the mental health and wellbeing of all community members.

### Community resilience funding

The Community Resilience Fund aims to resource local programmes and services focused on supporting communities responding to suicide. In 2014, funding was provided to projects in the areas of:

- Suicide bereavement support
- Mental health promotion
- Low cost counselling
- Youth supports
- LGBT supports
- Asylum seeker supports
- Regional suicide action plans
- Travellers' supports

*The Resource Officers, in consultation with the NOSP and other stakeholders, have developed action plans for suicide prevention and mental health promotion across many communities within their regions.*



## Regional Resource Officers for Suicide Prevention Highlights from their work in 2014

The following pages provide a brief overview of the work of the HSE Resource Officers for Suicide Prevention. This represents the diversity and scope of suicide prevention work undertaken at a regional level, and showcases regional approaches to implementing national strategy.

### LIMERICK, CLARE, NORTH TIPPERARY

#### Training and awareness-raising

In 2014, 1,564 people participated in training and other events related to suicide prevention in the Limerick, Clare and North Tipperary region. The Mid-West office provided training in mental health and suicide awareness, understanding self-harm, SafeTALK, ASIST and STORM. The office made a particular effort to target services and sectors such as members of the clergy, emergency services, the agricultural sector, local Lions Clubs, older person services and HSE staff.

#### Community resilience

Community resilience funding allowed the Mid-West office to assist in funding initiatives that aim to increase emotional resilience and wellbeing. Some of the funded projects have, as a result of this funding, successfully engaged with marginalised young men, isolated and vulnerable older men and women, and the general community.

#### Support following suicide

A number of family, organisation and community responses were requested and provided by the Mid-West office in 2014. The responses involved an interagency approach to offering support, with voluntary and community organisations alongside key statutory services providing a focused response in the aftermath of a death by suicide.

#### Information and research

The Water Safety Working Group developed a resource poster and crisis wallet card, providing local support service details for anyone in emotional distress. This resource aims to encourage help-seeking behaviour. The poster was displayed in key areas, such as local businesses, Garda stations, GP surgeries and health centres. The accompanying support service wallet card is given to participants at training, with advice for caregivers to pass this card on to anyone in distress. The #littlethings campaign was widely promoted throughout the Mid-West, with campaign materials sent to voluntary and community groups as well as to statutory service providers.

### DONEGAL

#### Local implementation of national strategy

A key 2014 achievement in Donegal was the establishment of an interagency planning group to develop a local suicide prevention action plan, in line with the national suicide prevention strategy that was also in development. The group undertook an extensive public consultation, with over 370 contributions. The Donegal suicide prevention action plan will be launched in 2015.

#### Suicide bereavement support

In 2014, the Console Family Suicide Liaison service was established in Donegal, funded by the Community Resilience fund. This service provides outreach support to families and individuals in the immediate aftermath of a suicide death. Funding was also provided to Donegal Sports Partnership, to further develop and pilot a Mental Health Charter for sports clubs in the county.

#### Social prescribing

The Donegal Social Prescribing Initiative was further established in 2014 and currently operates in six primary care sites. It is a partnership project between HSE Health Promotion and Improvement, the Social Inclusion Office, the library service, GPs and primary care, and the community and voluntary sector, particularly Family Resource Centres.

Social prescribing describes the use of non-medical supports to address the needs of people whose mental health is affected by depression or anxiety or people who feel socially isolated. It is a mechanism for linking people with non-medical sources of support within the community to improve physical, emotional and mental wellbeing. In most cases, social prescribing begins with referral from a health professional. Typically this is a member of a primary care team but individuals may also refer themselves. Social prescribing co-ordinators (six in all), who work ten hours a week, are key to the success of this initiative. Their skills of encouragement and empowerment, as well as their local knowledge of the various options available, mean they provide a service that is individually tailored. The Social Prescribing Initiative has been evaluated and a report will be available in 2015.

## CAVAN, MONAGHAN, MEATH, LOUTH

### Support for schools

The Suicide Resource Office worked with the HSE Health Promotion Schools' Team and the National Educational Psychological Service (NEPS) to develop a collaborative approach to support for schools. The objectives of this group are to:

- Support the implementation of the *Well-being in Post Primary Schools* guidelines.
- Improve structure with regard to requests for training and crisis intervention, to incorporate a more holistic approach.
- Build relationships and improve communication with relevant groups.
- Develop capacity between the HSE & NEPS in responding to critical incidents that have a wider community need.
- Adopt a collaborative approach to the provision of a mental health promotion model in primary & secondary schools.

In 2014, school principals – along with members of schools' pastoral support teams – were invited to a workshop on how they can support school staff in implementing the *Well-being in Post-Primary School* guidelines.

### Mental health promotion

The Resource Officer for Suicide Prevention was involved in development of a mental health promotion training programme targeted at youth leaders. This pilot programme was implemented into the Health Promoting Schools, in the context of the SPHE curriculum, and delivered as part of in-service training for teachers.

### Regional GP Vocational Training scheme

The Resource Officer for Suicide Prevention continues to provide support and training within the Regional GP Vocational Training Scheme. This training introduces participants to the principles and concepts of mental health promotion, and raises awareness of the issues involved in suicide prevention and suicidal behaviour.

### Community resilience

Community resilience funding was provided to:

- Dundalk Outcomers – AIM (As I Am) Youth Service – a social support and advocacy service for LGBT people in the North East.
- SOSAD Ireland – provide support to anyone affected by suicide, as well as to those bereaved by suicide.

Through the Community Resilience Fund, the Resource Officer for Suicide Prevention has also been able to provide funding to agencies that offer training in relation to mental health promotion and suicide awareness and intervention. In 2014, 690 people received training.

## CORK, KERRY

In 2014, the Cork and Kerry Resource Office for Suicide Prevention focused on promoting support for people in emotional distress, people with thoughts of suicide and people affected or bereaved by suicide. The office also provided training and education in the areas of suicide prevention and building community resilience through support for a number of community initiatives.

### Training

In 2014, the office facilitated 63 safeTALK and ASIST workshops to 1,481 people in Cork and Kerry. These programmes were delivered in partnership with the HSE South mental health services, community work and health promotion departments, Tusla and community partners.

### Mental health promotion and support

Mental health promotion and support focused on distribution of information on support services available for those at risk of suicide and for those bereaved by suicide. A free phone helpline was provided, through partnership with Console, for suicide bereavement, suicide prevention and farm and rural stress.

### Community resilience

A wide range of community resilience initiatives were supported by the Office in 2014. These included projects that provide:

- Support for older people, including befriending, a group texting initiative with older people, and creative interventions to help build connectivity and resilience in older people.
- Support for asylum seekers including healthy mind and body workshops, inclusion in community initiatives, increasing asylum seekers' knowledge of mental health services and healthy food workshops.
- Support for the LGBT community including subsidised counselling, a community education programme and family guides and a whole-town anti-homophobia project, alongside programmes for LGBT youth and families.
- Programmes for young people including positive mental health and wellbeing programmes, work with early school leavers and young disadvantaged, community based youth counselling, and a youth mental health and wellbeing conference.
- Community initiatives focused on wellbeing, building resilience and coping mechanisms, mental health workshops, developing suicide prevention models, and mental health promotion events.

## WATERFORD, WEXFORD, KILKENNY, CARLOW, SOUTH TIPPERARY

### Self-Harm Intervention Programme (SHIP)

The SHIP service is a free, confidential service for people aged 16 or over with suicidal ideation or the impulse to self-harm. Following on from the expansion and roll out of the SHIP service to all counties within the South-East in 2013, an external evaluation of the service commenced in 2014, with the findings expected in 2015.

### SCAN (Suicide Crisis Assessment Nurse)

The SCAN service provides an available, accessible and speedy response to GPs' requests for a timely assessment of those in suicide/self-harm crisis. The SCAN service carries out a clinical assessment of the client and – in partnership with the GP – institutes a health/social care package to meet the client's health and social care needs. Approval was sought and given in 2014 for the provision of a SCAN service in Waterford.

### Training

1,480 people attended training, provided by the South-East Office, during 2014. The office provided targeted training, including:

- STORM self-injury training (Skills Training on Risk Management) to frontline staff from Child & Adolescent Mental Health services and staff and Substance Misuse teams.
- safeTALK training to Tusla staff, GAA coaches/members and third-level college students.
- Depression & suicide training to people working with older adults from hospital settings, nursing homes and community groups.

### Bereavement support

Funding was secured through the Community Resilience Fund to assist in development of a Family Suicide Bereavement Liaison Service across the South-East. The service will provide (on request from the bereaved family) support, assistance, guidance or just a listening ear to the family of the deceased.

Community Resilience also provided funding for development of a two-year pilot Child and Adolescent Traumatic Death Bereavement Service within the South-East. This will complement the Bereavement Counselling Service for Traumatic Deaths, which currently offers counselling for persons aged 16 and over. These services will be operational in 2015, with Console.

### Local Action Plans

The existing Waterford City Suicide Prevention Action Plan was reviewed. Work started on a consultation process towards developing a county-wide action plan for suicide. In Wexford, work started on a consultation process towards developing a second action plan for suicide prevention, following on from the initial plan, *Supporting One Another*. Both the Waterford and Wexford action plans will be aligned to the local Economic and Community Development Plan of the relevant Local Authorities, as well as to *Connecting for Life*.

### Community resilience

In 2014, the Community Resilience Fund provided €76,500 to support local and regional services. These included a Carers Liaison and Support service for people living with mental health difficulties, the on-going development of bereavement services in the South-East, local action plan initiatives and Train the Trainer programmes in WRAP training.

## SLIGO, LEITRIM, WEST CAVAN

### Training

Training workshops, programmes and events were delivered across the region in 2014, including 9 ASIST courses attended by 192 people, 8 safeTALK workshops attended by 152 people and 8 Stress Control programmes attended by 247 people. Work was ongoing in 2014 to complete the new national Understanding Self-Harm training resource, in partnership with local Resource Officers for Suicide Prevention and the NOSP. This training course will be available in 2015.

### Mind Your Head

In December, Minister of State at the Department of Health, Kathleen Lynch, T.D. officially launched the Mind Your Head report in Carrick-on-Shannon. At the launch, Minister Lynch talked about the importance of promoting positive mental health and developing accessible supports for young people.

### Suicide bereavement support

A new Families Bereaved by Suicide Liaison Service – providing support for families bereaved by suicide in Sligo and Leitrim – was launched by Console. An advisory group was established to support the development of this initiative. The group includes people who have been bereaved by suicide, the local coroner, a Garda, the Catholic and Church of Ireland hospital chaplains, the local Resource Officer for Suicide Prevention and an HSE Bereavement Counsellor. A large number of families across the area received support from this service over the year.

### Social soccer

A new initiative kicked off in Sligo, called Social Soccer. The project is a partnership between the HSE Mental Health services, Mental Health Ireland, Sligo Sports and Recreation Partnership and the Health Promotion Social Prescribing for Health and Wellbeing Programme.

Originally planned for eight weeks, the project was so successful that it has continued to run with great enthusiasm, promoting health and self-confidence, greater wellbeing and social connectedness for all participants.

## **SOUTH DUBLIN CITY AND COUNTY, KILDARE, WICKLOW**

### **Inter-agency community response, South Kildare**

The HSE led an inter-agency community mental health response in the South Kildare area, in conjunction with County Kildare LEADER Partnership, following a number of deaths by suicide in the locality. In addition to an early response for counselling and guidance, the response has concentrated on engaging and communicating with the local community, particularly young people and their families as well as putting in place services and supports that have been made available to all of the community.

The goal of the community response is to increase inter-agency and inter-disciplinary collaboration, bringing together professionals, agencies and the community to promote mental health and increase access to specific services. Initiatives to date include:

- A successful youth counselling service was established in the local secondary school.
- A new bus service was established under the rural transport scheme, connecting isolated areas to urban centres.
- Bright, spacious new premises were secured and opened for the local youth club.
- SafeTALK and ASIST training was provided, increasing community alertness and capacity to respond to people at risk of suicide.
- A mindfulness programme for parents was very well attended and received.

This is an ongoing initiative which requires a co-ordinated response and the involvement of key stakeholders and agencies. The initiative aims to address the underlying issues in the area, in order to continue to promote a positive mental health approach among those who may be most at risk.

### **Community resilience**

Community resilience funding was provided to:

*Candle Community Trust* – providing a range of educational, developmental and therapeutic services to disadvantaged young people in the Ballyfermot area of Dublin. In 2014, Candle created the Therapeutic Space, an initiative to address youth mental health needs, which is totally integrated into the daily rhythm of the project.

*The Village Counselling Service* – In 2014 the service worked with 1,889 clients for one-to-one counselling, couples' therapy, child & adolescent therapy and CBT based psycho-educational groups.

## **LAOIS, OFFALY, LONGFORD, WESTMEATH**

Key activities in suicide prevention in 2014 included:

- Coordinating action on suicide prevention within communities through providing leadership and advice and working in partnership with initiatives and projects.
- Delivering awareness, community gatekeeper and skills training in mental health and suicidal behaviour.
- Promoting public awareness of how suicidal behaviour can be prevented and of the availability of support services based within communities.
- Highlighting resources and supports available to people bereaved by a suicide death.
- Promoting the mental health and wellbeing of all community members through such initiatives as the #littlthings campaign.

### **#littlthings campaign – Offaly**

Following the launch of #littlthings in October 2014, the campaign messages were used as the theme for the Offaly Mental Health Awareness week.

### **Suicide bereavement support**

During 2014, work started on the establishment of a Suicide Bereavement Liaison Support Service in Laois, Offaly, Longford and Westmeath. The main objective of the service is to provide prompt and proactive approaches to the bereaved after a suicide loss and to offer initial support, information and signposting to other relevant services, if required. A steering committee was established to provide guidance and support to the initiative. Membership of the steering committee included representatives from key agencies such as An Garda Síochána, religious groups, the education sector and relevant HSE departments. It is anticipated that bereaved families and individuals will also participate in all aspects of the service provision and future development.

### **Community resilience**

*Good2TALK Westmeath* provides a professional counselling and psychotherapy service to all members of the community. The centre also seeks to proactively work towards resolving issues that cause a decline in the mental wellbeing of people through the provision of support and education programmes. During 2014, the *Good2TALK* service grew, with increases in client numbers, more callers dropping into the centre, increased web traffic and web enquiries.

*Jigsaw Offaly*: Development of the *Read Your Mind* project, which aimed to promote and enable access to mental health information and guided self-help support books. The books are age appropriate, evidenced-based and available through branches of Offaly County Libraries.

## **NORTH DUBLIN CITY, NORTH DUBLIN COUNTY**

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### **Training**

More than 1,300 health and social care staff, key workers and community responders were up-skilled in safeTALK, MindOut and ASIST training in North Dublin during 2014.

### **Community resilience**

Under the banner of community resilience, the Resource Officer for Suicide Prevention in Dublin North leads on a broad range of mental health promotion programmes that work to address the broader determinants of health.

Building on work with the Fingal Leader Partnership (FLP), in the first six months of 2014, work continued on up-skilling youth workers and parents in the North Fingal area. This area of Dublin has the highest youth population and there is recognition from the HSE, FLP and local and voluntary groups for the need to continue to promote wellbeing at a community level.

Teachers and youth leaders have been up-skilled in MindOut training and also in safeTALK and ASIST training. Parents have been up-skilled in mental health, specifically in resilience-building training and safeTALK. This up-skilling work builds capacity in the community, whereby people have enhanced skills and knowledge to promote positive mental health.

### **Information and signposting to services**

A directory of services in North Fingal, produced with Tusla, the HSE and Children First, was widely distributed to professionals and parents. In addition, a secondary school diary insert on positive mental health proved popular with secondary schools and provided young people with information to hand when needed.

## **GALWAY, MAYO, ROSCOMMON**

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### **Suicide bereavement support**

In 2014, the NOSP provided funding to develop the Suicide Bereavement Liaison Service in Co. Roscommon. Vita House Family Centre Roscommon and the Family Life Centre Boyle are working in partnership with the HSE West to set up and run the service for individuals and families bereaved by suicide. It will offer early support, information and signposting. The service will be available one and a half days per week.

### **Community resilience**

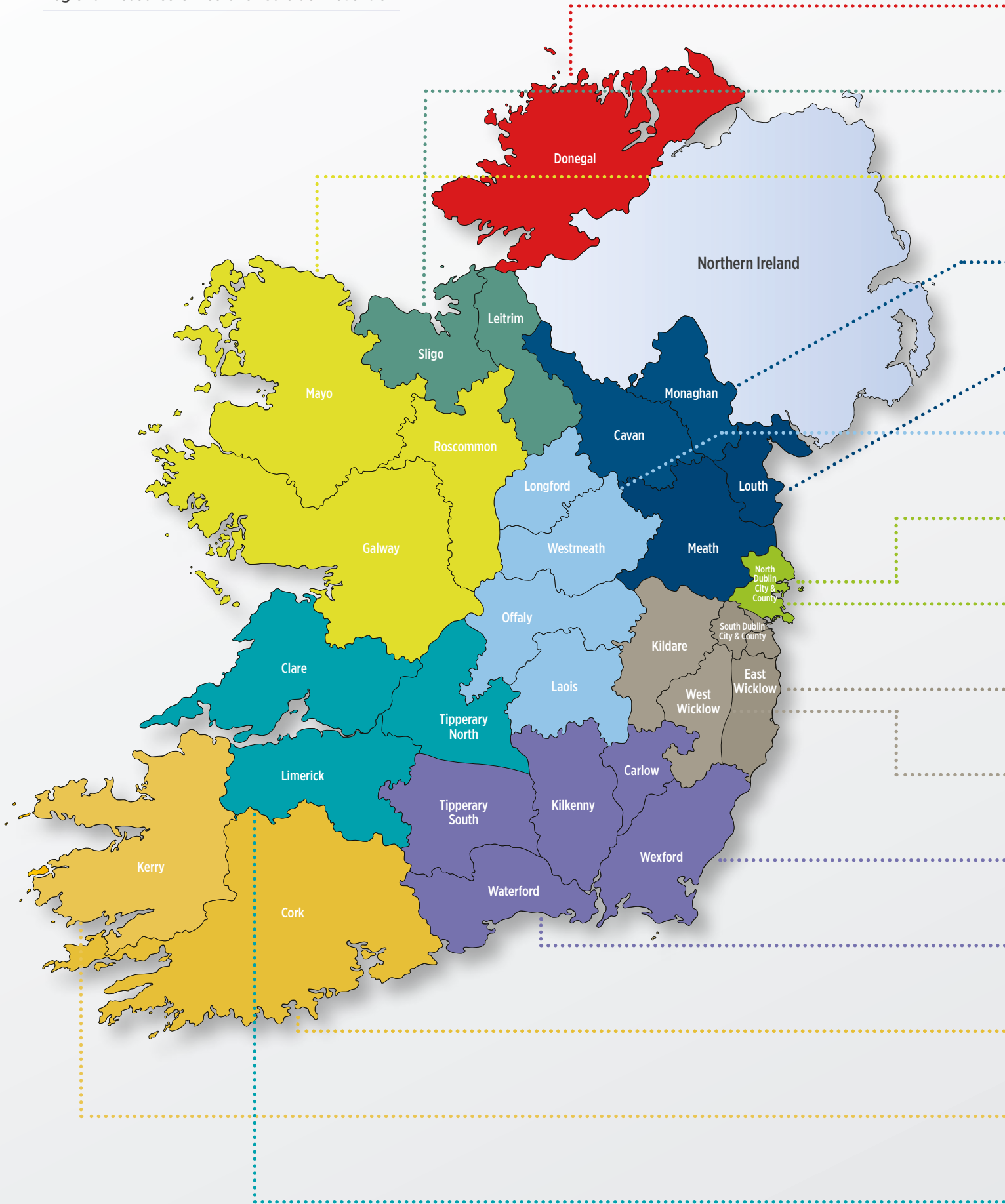
Community resilience funding was invested in:

- *Stress Control workshops, Galway:* Staff in the HSE Clinical Psychology team in Galway/Roscommon completed the Stress Control Training for Trainers programme. They funded and delivered two programmes in May/June 2014 in Galway city. Approximately 70 people took part in each course. Funding was provided by the NOSP, in July 2014, to deliver additional Stress Control programmes free of charge to the public.
- *Mayo Suicide Prevention Alliance:* The Mayo Be Well wellbeing campaign was further rolled out in 2014. This included working with local media to take a positive and proactive role in promoting positive mental health and continual development of the [www.mayobewell.org](http://www.mayobewell.org) website.
- *Roscommon Mental Health Supports Network:* The Network was formed to bring together those offering mental health supports and therapeutic services in Roscommon and to work in a co-ordinated way. Community resilience funding was provided for a detailed needs analysis in County Roscommon, from the perspective of service providers. The tender process was undertaken in 2014, with the needs analysis to be carried out in early 2015.

### **Training and education**

Further training provided in 2014 included:

- *Four Reaching Out: Suicide Prevention Awareness Training* workshops delivered in Galway to youth and community development students, midwifery students, occupational therapy students and public health nurse students. 70 students took part in these workshops.
- One STORM: Understanding Self-Injury workshop and five STORM workshops, with a total of 64 participants.





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## **SLIGO & LEITRIM**

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## 3.8 POLICY, EVIDENCE AND RESEARCH

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### Introduction

Influencing policy-makers and key players regarding mental health promotion and suicide prevention is a key objective of the NOSP. We act as the lead advisory department within the HSE on matters relating to suicide prevention. The NOSP also works on an ongoing basis to monitor and influence policy, and we are committed to supporting research in the areas of suicide research/prevention and mental health promotion.

### Technology and mental health – good practice guidelines

ReachOut Ireland was funded by the NOSP to develop good practice guidelines for the safe delivery of online mental health information and support. The guidelines were developed in 2014, informed by the Technology and Mental Health Network (TMHN), which ReachOut Ireland convenes. The guidelines include Irish case studies and practical advice, and are intended to help new and established organisations ensure the safe delivery of online mental health support.

### Guidelines on promoting positive mental health in primary schools

The national *Guidelines for Mental Health Promotion – Well-being in Primary Schools* launched in 2014. The Guidelines provide a comprehensive framework that supports primary schools in promoting mental health and wellbeing. The guidance supports the school community in creating a safe and supportive environment for children to talk about mental health and how they feel, to explore how to relate with one another, and to build healthy relationships.

The Guidelines were developed through a partnership approach and they emphasise the importance of collaborative working with the school and education community, parents and guardians, and the health services.

The Guidelines are for all members of the school community, boards of management and in-school management teams who play a central leadership role in mental health promotion. They will also be useful for parents' associations, student councils, health and other personnel who are seeking an understanding of how to work in and with schools.

The Guidelines are published by the Department's National Educational Psychological Service (NEPS). Copies of the Guidelines are available to download from [www.education.ie](http://www.education.ie).

*The NOSP also works on an ongoing basis to monitor and influence policy, and we are committed to supporting research in the areas of suicide research/prevention and mental health promotion.*

## Men's Health Forum

The Men's Health Forum in Ireland (MHFI) is a voluntary network of individuals and organisations, men and women, which seeks to promote all aspects of the health and wellbeing of men and boys on the island of Ireland through research, training, networking, practical health initiatives and advocacy.

In January 2013, MHFI launched a report on an action learning project, which sought to identify a range of possible means to promote positive mental health among young men on the island of Ireland and to assess the efficacy of these approaches. This report ([www.mhfi.org/ymspfullreport.pdf](http://www.mhfi.org/ymspfullreport.pdf)) made twelve key recommendations.

Recommendation 10 outlined the need to develop a training package to increase the capacity of service providers and practitioners to effectively engage with young men.

During 2014, MHFI received funding from the National Office for Suicide Prevention to undertake this piece of work. This initiative is titled the Engaging Young Men Project (EYMP).

EYMP has four key objectives:

1. Identify the training needs of a wide variety of organisations, how the training might be delivered, and the content of the package.
2. Create a dedicated Unit on Engaging Young Men within the Engage National Men's Health Training Programme.
3. Develop a self-assessment system to help agencies to ascertain how male-friendly they are.
4. Act as a portal for information on young men and mental health in Ireland.

Throughout 2014, MHFI focused upon completing the first of these objectives, and a report was launched in December.

The information generated will be used to inform the development of a new Unit 6 within the Engage National Men's Health Training Programme. This training package will focus upon the practicalities of engaging young men; i.e. why and how to build relationships with them.

Visit [www.mhfi.org](http://www.mhfi.org) for more information.

*The Men's Health Forum in Ireland (MHFI) is a voluntary network of individuals and organisations, men and women, which seeks to promote all aspects of the health and wellbeing of men and boys on the island of Ireland through research, training, networking, practical health initiatives and advocacy.*

## GLEN

GLEN is a policy and strategy focused NGO, which aims to deliver ambitious and positive change for lesbian, gay and bisexual people (LGB) in Ireland, ensuring full equality, inclusion and protection from all forms of discrimination. The GLEN Mental Health Programme aims to mainstream LGBT issues and develops targeted responses, where appropriate. It takes a partnership approach, working with a wide range of agencies including the HSE and the NOSP, professional and regulatory bodies in the mental health sector, statutory and voluntary mental health services and LGBT community organisations.

In 2014, GLEN and the Psychological Society of Ireland (PSI) developed a new guide, called *Guidelines for Good Practice with Lesbian, Gay and Bisexual Clients*. The guide, to be launched by the PSI in 2015, will be available for all members of the PSI and supports the teaching of new psychologists and the continuing professional development of existing practitioners.

LGBT mental health training was also provided by GLEN to a range of HSE and other agency staff including mental health service staff, health and social care professionals, social care agency staff and community care staff.

Also in 2014, GLEN, in partnership with BeLonG To, commissioned the five-year follow-up study to the *Supporting LGBT Lives* study. Data-gathering was carried out for three months in 2014 and data-analysis has now been completed. The draft final report will be presented to GLEN and BeLonG To and published in 2015.

Visit [www.glen.ie](http://www.glen.ie) for more information.

*In 2014, GLEN and the Psychological Society of Ireland (PSI) developed a new guide, called Guidelines for Good Practice with Lesbian, Gay and Bisexual Clients.*

## National Suicide Research Foundation

In 2014, the NSRF co-ordinated 22 research projects in the area of suicide, self-harm and related mental health issues. In April, the NSRF and the Department of Psychiatry of the University of Leipzig, Germany, led the launch of an internet-based self-management programme for people with mild to moderate depression, the *iFightDepression programme*, in the European Parliament in Brussels. In June, Minister of State at the Department of Health, Kathleen Lynch, T.D. launched the *iFightDepression programme* at the Irish launch seminar, organised by the NSRF at University College Cork.



Workshop in connection with World Suicide Prevention Day, NSRF.

In September, Professor Ella Arensman presented at the launch seminar of the WHO Report: *Preventing Suicide: A Global Imperative*. Minister of State at the Department of Health, Kathleen Lynch, T.D. also made a keynote presentation at the WHO launch seminar.

In connection with World Suicide Prevention Day 2014, the NSRF organised a *Lunch Time Cycle* and seminar in collaboration with the Cork Samaritans. The focus of the launch seminar was: *Responding to Suicidal Crisis: Research, Policy and Practice in Ireland*.

In October, the NSRF published the 2013 *Annual Report of the National Registry of Deliberate Self-Harm*. In 2013, the Registry recorded 11,061 presentations to hospital due

to self-harm nationally. The rate of persons presenting to hospital following self-harm was 199 per 100,000, which was a decrease of 6% from 2012. However, the rate of self-harm in 2013 was still 6% higher than in 2007, before the economic recession.

In connection with World Mental Health Day, 10th October 2014, Eileen Williamson, coordinated the 4th national conference on *Transition and Youth Mental Health*, in collaboration with the Special Interest Group in Youth Mental Health and Inspire Ireland and the Association for Child and Adolescent Mental Health (ACAMH) in Cork. Minister of State at the Department of Health, Kathleen Lynch, T.D. opened the conference.

Visit [www.nsrif.ie](http://www.nsrif.ie) for more information.



## Irish Association of Suicidology (IAS)

The Irish Association of Suicidology (IAS), in partnership with Samaritans, produced and printed revised media guidelines on suicide reporting in Ireland. These guidelines provide a valuable resource for those in the media who have any involvement with the reporting or portrayal of suicide, and represent an important source of information to help ensure that the quality of reporting and portrayal on this important and sensitive topic is of a high standard.

The Guidelines were launched in the Republic of Ireland in early 2014, in conjunction with the NOSP and Samaritans.



Speakers at the IAS annual conference.

The IAS held its annual conference Westport on the 9th & 10th of October 2014, with more than 200 delegates attending. Taoiseach Enda Kenny opened the meeting with an address pledging action and support for suicide prevention. The theme of the conference was 'Living Closer to the Edge - Suicide and Self-Harm at Ireland's Margins' and explored the problems of suicide in marginalised groups living in Ireland.

As in previous years, a section of the conference was devoted to a masterclass in which post-graduate researchers presented their work.

The conference papers and IAS newsletters can be accessed at [www.ias.ie](http://www.ias.ie).

*Taoiseach Enda Kenny opened the meeting with an address pledging action and support for suicide prevention.*

## Family Resource Centres

The Family Resource Programme is delivered through a network of 106 Family Resource Centres (FRCs) that are located across the country. The programme aims to combat disadvantage and improve the functioning of the family unit. FRCs are committed to the prevention of suicide, and mental health promotion. As a result, they have worked closely with the NOSP and the regional Resource Officers for Suicide Prevention to deliver initiatives nationally, regionally and in local communities as part of *Reach Out*.

This NOSP-supported project is now in phase two and involves (i) the roll-out of training to support implementation of the *Suicide Prevention Code of Practice* in all Family Resource Centres and (ii) the development of a national framework for mental health promotion between the FRC Programme, Tusla – the Child & Family Agency, and the HSE.

In 2014, mental health awareness training was piloted across Dublin, Wicklow and Kildare with 34 attendees; 27 people attended a *Suicide Prevention Code of Practice* workshop. The Code of Practice was revised, with a resource pack and training manual developed. Work was also underway on development of the national framework for mental health promotion between the FRC Programme, the Child & Family Agency and the HSE. All work was overseen by a national working group, with broad representation of voluntary and statutory partners. An external evaluation of the project has been tendered and awarded, with the interim report due mid-2015.

*FRCs are committed to the prevention of suicide, and mental health promotion. As a result, they have worked closely with the NOSP and the regional Resource Officers for Suicide Prevention to deliver initiatives nationally, regionally and in local communities as part of Reach Out.*

## 3.9 LEARNING FROM REACH OUT, 2005 – 2014

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In 2014, the NOSP undertook an internal assessment of progress and learning under *Reach Out*, the first Irish suicide prevention strategy. The learning from this assessment informed the development of *Connecting for Life*, the new national strategy for suicide prevention.

The assessment outlined key achievements and learning points from *Reach Out*. The achievements are summarised below and the full assessment is available at [www.nosp.ie](http://www.nosp.ie).

### Summary of achievements from Reach Out

Demonstrable progress has been made in relation to all the aims of *Reach Out*. Substantial progress has been made in many of the actions, many actions have been completed and all actions have seen some activity. Of particular note are:

#### (a) Supporting individuals, families and communities

- Increased support for local and national groups and organisations to respond at all levels: prevention, intervention and postvention. The financial allocation available to HSE NOSP increased nearly threefold between 2012 and 2014.
- Expansion of telephone crisis and support lines and active listening services, including immediate response for callers in distress, enhanced technical capacity of the telephone lines to provide constant monitoring, and enhanced signposting to the most appropriate services.
- A range of counselling services including crisis, bereavement and online counselling and other supports provided by statutory and non-statutory organisations.
- Development of a range of web-based information and support, including *yourmentalhealth.ie* and online platforms for young people.
- Increased targeting of groups potentially at higher risk of suicide, often in collaboration with the communities involved, including LGBT groups, Travellers and those impacted by the economic crisis.
- A wide range of regional initiatives and services established, piloted and developed by the Resource Officers for Suicide Prevention (ROSPs) and regional groups.

*In 2014, the NOSP undertook an internal assessment of progress and learning under Reach Out, the first Irish suicide prevention strategy. The learning from this assessment informed the development of Connecting for Life, the new national strategy for suicide prevention.*

### **(b) Improved service delivery**

- Wide availability and uptake of suicide-prevention training, including more than 31,000 people trained in ASIST and 30,000 trained in SafeTALK in communities across Ireland, co-ordinated by the Resource Officers for Suicide Prevention.
- Innovative practices introduced, including SCAN (Suicide Crisis Assessment Nurse service), a mental health fast track assessment initiative delivered in partnership with GPs, National Dialectical Behavioural Therapy Programme (DBT) and Cognitive Behaviour Therapy programmes (CBT).
- Increased guidance and standardisation of approach for service delivery, through development and dissemination of guidelines and protocols to communities and families, schools, sporting organisations and workplaces, among others.

### **(c) Building evidence and monitoring suicidal behaviour**

- Improved knowledge and evidence base relating to suicide risk and prevention and deliberate self-harm. The learning from the range of research and the data systems in the national research programme impacts on policy and services; for example, research on supports for families and communities bereaved through suicide.
- The National Self-Harm Registry Ireland is a national system of population monitoring for hospital treated self-harm. The system monitors trends and contributes to research, policy and practice through regular reports from the registry.
- Maintained strong links with international research organisations.

### **(d) Improving awareness and understanding**

- Increased awareness-raising through media campaigns and social media, encouraging a new social dialogue about mental health and suicide, contributing to changing attitudes and behaviour, and reducing stigma. Examples include: *Let Someone Know*, *PleaseTALK*, *SeeChange* and the *#littlethings* campaigns.
- Improved reporting of suicide in the media, updating of media guidelines and working with partner organisations to ensure that the media portrays suicide in a responsible and accurate way.

Support for suicide prevention and the work carried out by the NOSP has increased over the years of the strategy, as demonstrated by the significant increase in the financial investment in the NOSP over recent years. This has resulted in an increased staffing level and increase in the rate of delivery of *Reach Out* actions.

*Support for suicide prevention and the work carried out by the NOSP has increased over the years of the strategy*

The advisory role of the NOSP has also developed to support new clinical developments; e.g. SCAN, CBT and the development of *National Guidelines for the Assessment and Management of Patients Presenting to Irish Emergency Departments following Self-harm*. This evolution of the NOSP's role has improved planning and integration of suicide prevention services and supports.





Connecting for Life

## SECTION 4

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# Suicide Mortality and Self-Harm in Ireland



## Suicide and self-harm

Suicidal behaviour refers to a range of behaviours that include planning for suicide, attempting suicide and suicide itself. Self-harm includes the various methods by which people deliberately harm themselves. Varying degrees of suicide intent can be present and sometimes there may not be any suicidal intent, although an increased risk of further suicidal behaviour is associated with all self-harm.

## Suicide and self-harm in Ireland

A note relating to the data presented:

The Central Statistics Office (CSO) provides mortality data in two forms: (i) year of registration data and (ii) year of occurrence data. In this report, we focus on 'year of occurrence' data, as this information is more comprehensive and allows for year-on-year comparison. At the time of writing, 2012 is the most recent 'year of occurrence' data available. Data for 2013 and 2014 is also included, but this is provisional, due to the data-collection process in Ireland.

The CSO publishes national mortality data, including data on deaths by suicide. It is likely that a proportion of the deaths classified as undetermined are also deaths by suicide, but it is not possible to estimate this at present.

Self-harm statistics in Ireland are gathered by the National Self-Harm Registry Ireland. This national system records information on persons who present to hospital emergency departments following an episode of self-harm. The Registry is in operation since 2000 and has had national coverage since 2006. Self-harm statistics are included in this review, as an increased risk of suicidal behaviour is associated with all episodes of self-harm, and so interventions to reduce suicidal behaviour tend to address the issue of self-harm. Overdose of drugs was the most common method of self-harm in Ireland in 2014, accounting for 66% of cases, according to the Registry.

*The CSO publishes national mortality data, including data on deaths by suicide. It is likely that a proportion of the deaths classified as undetermined are also deaths by suicide, but it is not possible to estimate this at present.*

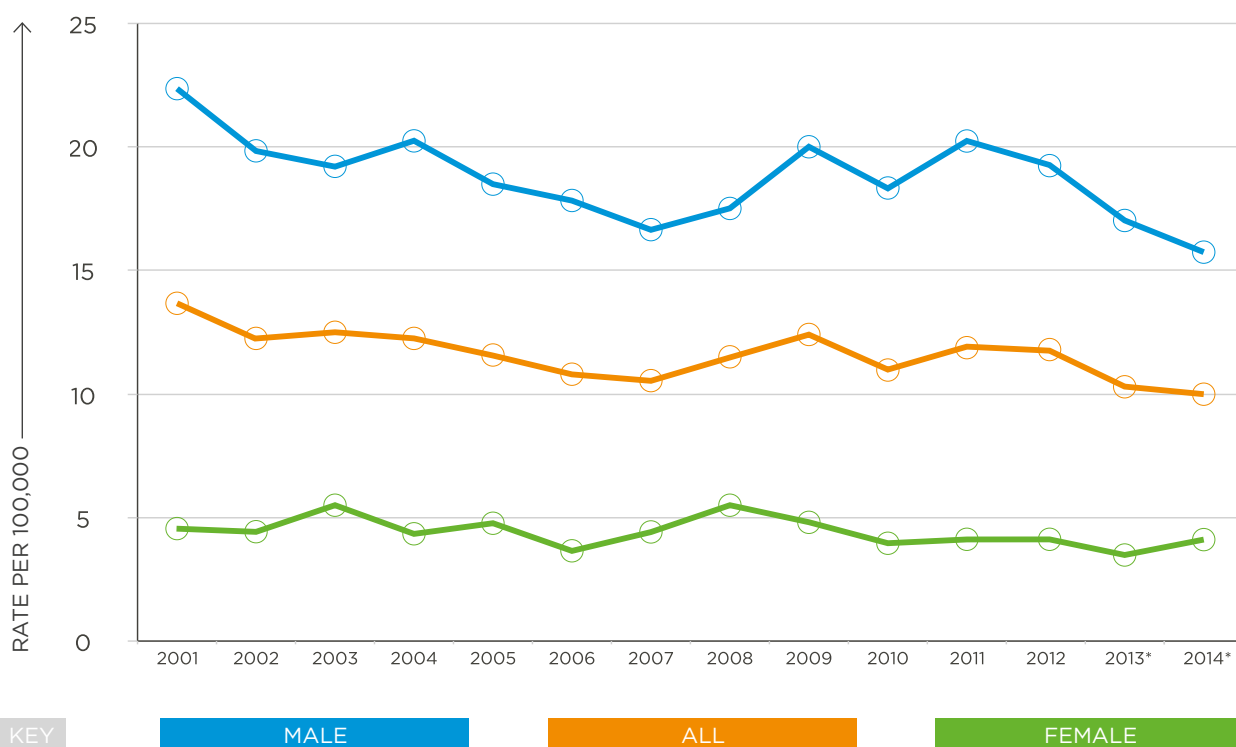
## Incidence of suicide in Ireland, 2004-2014

There were 541 deaths by suicide in Ireland in 2012, representing a rate of 11.8 per 100,000. 445 (82.3%) of these were men. This high male-to-female ratio is a constant feature of deaths by suicide over the years, as can be seen in the figure below.

Since 2007, particularly since the onset of the economic recession in Ireland in 2008, there has been an increase in the suicide rate in Ireland. The increase observed between 2007 and 2012 can be wholly attributed to an increase in the male rate of suicide. More recently, data from 2012, 2013 and 2014 suggest a levelling-off of this rise. However, this pattern should be interpreted with some caution, as data for 2013 and 2014 is still provisional.

*Since 2007, particularly since the onset of the economic recession in Ireland in 2008, there has been an increase in the suicide rate in Ireland. The increase observed between 2007 and 2012 can be wholly attributed to an increase in the male rate of suicide.*

Suicide rate per 100,000 by gender, 2001-2014



\* Figures for 2013 and 2014 are provisional and subject to change.

## Numbers and rates of suicide and other causes of death, 2004-2014

Year	Suicide		Undetermined		Death by external cause		All deaths	
	Number	Rate**	Number	Rate**	Number	Rate**	Number	Rate**
<b>2014*</b>								
Males	368	16.1	46	2.0	1,088	47.7	14,863	652.0
Females	91	3.9	16	0.7	472	20.3	14,232	610.8
<b>Total</b>	<b>459</b>	<b>10.0</b>	<b>62</b>	<b>1.3</b>	<b>1,560</b>	<b>33.8</b>	<b>29,095</b>	<b>631.2</b>
<b>2013*</b>								
Males	396	17.4	43	1.9	1,110	48.8	15,211	669.0
Females	79	3.4	22	0.9	397	17.1	14,809	638.5
<b>Total</b>	<b>475</b>	<b>10.3</b>	<b>65</b>	<b>1.4</b>	<b>1,507</b>	<b>32.8</b>	<b>30,020</b>	<b>653.6</b>
<b>2012</b>								
Males	445	19.6	36	1.6	1,142	50.3	14,945	658.5
Females	96	4.1	18	0.8	435	18.8	14,241	614.9
<b>Total</b>	<b>541</b>	<b>11.8</b>	<b>54</b>	<b>1.2</b>	<b>1,577</b>	<b>34.4</b>	<b>29,186</b>	<b>636.5</b>
<b>2011</b>								
Males	458	20.2	40	1.8	1,211	53.3	14,492	637.7
Females	96	4.2	27	1.2	482	20.8	13,964	603.1
<b>Total</b>	<b>554</b>	<b>12.1</b>	<b>67</b>	<b>1.5</b>	<b>1,693</b>	<b>36.9</b>	<b>28,456</b>	<b>620.2</b>
<b>2010</b>								
Males	405	18.3	54	2.4	1,198	54.1	14,334	646.8
Females	90	4.0	29	1.3	462	20.5	13,627	604.4
<b>Total</b>	<b>495</b>	<b>11.1</b>	<b>83</b>	<b>1.9</b>	<b>1,600</b>	<b>37.1</b>	<b>27,961</b>	<b>625.4</b>
<b>2009</b>								
Males	443	20.0	52	2.3	1,236	55.7	14,727	664.1
Females	109	4.9	22	1.0	490	21.9	13,653	609.1
<b>Total</b>	<b>552</b>	<b>12.2</b>	<b>74</b>	<b>1.7</b>	<b>1,726</b>	<b>38.7</b>	<b>28,380</b>	<b>636.4</b>
<b>2008</b>								
Males	386	17.5	64	2.9	1,215	55.1	14,457	655.3
Females	120	5.4	19	0.9	506	22.8	13,817	623.6
<b>Total</b>	<b>506</b>	<b>11.4</b>	<b>83</b>	<b>1.9</b>	<b>1,721</b>	<b>38.9</b>	<b>28,274</b>	<b>639.8</b>
<b>2007</b>								
Males	362	16.7	87	4.0	1,252	57.7	14,391	662.8
Females	96	4.4	32	1.5	507	23.4	13,726	633.1
<b>Total</b>	<b>458</b>	<b>10.6</b>	<b>119</b>	<b>2.7</b>	<b>1,759</b>	<b>40.5</b>	<b>28,117</b>	<b>648.0</b>
<b>2006</b>								
Males	379	17.9	68	3.2	1,180	55.6	14,065	688.5
Females	81	3.8	16	0.8	484	22.8	13,883	655.3
<b>Total</b>	<b>460</b>	<b>10.8</b>	<b>82</b>	<b>1.9</b>	<b>1,664</b>	<b>39.2</b>	<b>28,488</b>	<b>671.9</b>
<b>2005</b>								
Males	382	18.5	93	4.5	1,239	60.1	14,412	699.0
Females	99	4.8	41	2.0	506	24.4	13,848	668.3
<b>Total</b>	<b>481</b>	<b>11.6</b>	<b>134</b>	<b>3.2</b>	<b>1,745</b>	<b>42.2</b>	<b>28,260</b>	<b>683.6</b>
<b>2004</b>								
Males	406	20.2	60	3.0	1,127	56.0	14,801	735.9
Females	87	4.3	21	1.0	467	23.0	13,864	682.1
<b>Total</b>	<b>493</b>	<b>12.2</b>	<b>81</b>	<b>2.0</b>	<b>1,594</b>	<b>39.4</b>	<b>28,665</b>	<b>708.9</b>

\* Figures for 2013 and 2014 are provisional and subject to change. \*\* All rates are crude, based on 100,000 population.

## Rates of suicide in Ireland by gender and age, 2001-2014

The majority of people who die by suicide in Ireland are male. In 2012, 82.3% of those who died were males. The highest rate was among 45-54 year old males, at 32.3 per 100,000 population. The lowest rate for male suicide in 2012 was in the 65+ age group. Similarly, the lowest rate for female suicide in 2012 was also in the 65+ age group. The highest rate for female suicide in 2012 was 7.1 per 100,000 in the 45-54 year old age group.

### Male suicide rates per 100,000 population

Year	All	15-24	25-34	35-44	45-54	55-64	65+
2001	22.4	27.7	37.2	29.9	28.6	26.5	17.2
2002	19.9	27.6	34.4	22.2	22.8	23.1	16.9
2003	19.5	29.5	22.7	30.6	23.3	24.3	14.0
2004	20.2	27.1	28.0	28.5	29.4	22.9	13.2
2005	18.5	25.6	26.8	24.9	25.8	21.6	10.4
2006	17.9	27.5	23.5	21.4	24.1	21.1	14.2
2007	16.7	23.7	23.5	19.5	20.9	16.6	17.6
2008	17.5	22.2	25.3	22.7	24.6	21.2	13.1
2009	20.0	24.4	26.6	31.5	26.6	26.9	13.7
2010	18.3	27.2	20.3	29.7	28.9	23.3	8.1
2011	20.2	26.8	27.1	28.1	32.3	25.0	13.8
2012	19.2	21.1	25.1	27.7	32.3	28.3	14.7
2013*	17.4	17.2	24.3	21.9	29.0	27.5	13.8
2014*	16.1	16.7	19.5	21.7	30.6	20.1	14.8

\* Figures for 2013 and 2014 are provisional and subject to change.

### Female suicide rates per 100,000 population

Year	All	15-24	25-34	35-44	45-54	55-64	65+
2001	4.7	5.1	4.4	6.8	8.5	10.7	1.6
2002	4.6	4.7	6.8	5.3	8.0	6.3	3.2
2003	5.5	5.0	6.0	7.0	9.5	9.9	5.2
2004	4.3	2.9	5.2	6.5	7.7	7.4	3.5
2005	4.8	6.4	6.8	4.3	7.5	6.2	4.3
2006	3.8	5.1	3.6	4.6	6.2	6.5	2.7
2007	4.4	4.8	5.1	6.4	9.4	5.3	2.2
2008	5.4	8.1	4.6	6.5	9.2	8.4	5.6
2009	4.9	4.1	5.3	7.9	7.2	6.8	5.1
2010	4.0	4.0	4.6	5.4	6.0	8.4	2.5
2011	4.1	5.5	7.0	6.1	5.8	5.2	1.2
2012	4.5	5.8	5.3	6.0	7.1	5.6	1.3
2013*	3.4	3.8	4.9	4.5	7.4	3.4	1.6
2014*	3.9	4.7	6.7	5.5	5.6	3.7	2.9

\* Figures for 2013 and 2014 are provisional and subject to change.

## Rates of suicide in Ireland by geographical area, 2004 – 2013

There was variance in suicide rates by geographical region over the period 2004 – 2013. The table below provides information on the rates by county, from 2004 – 2013. The suicide rates based on the most recent data available were highest in Limerick City, Cork City, Kerry and Wexford.

### Suicide rate by county, 3-year moving average, 2004-2013

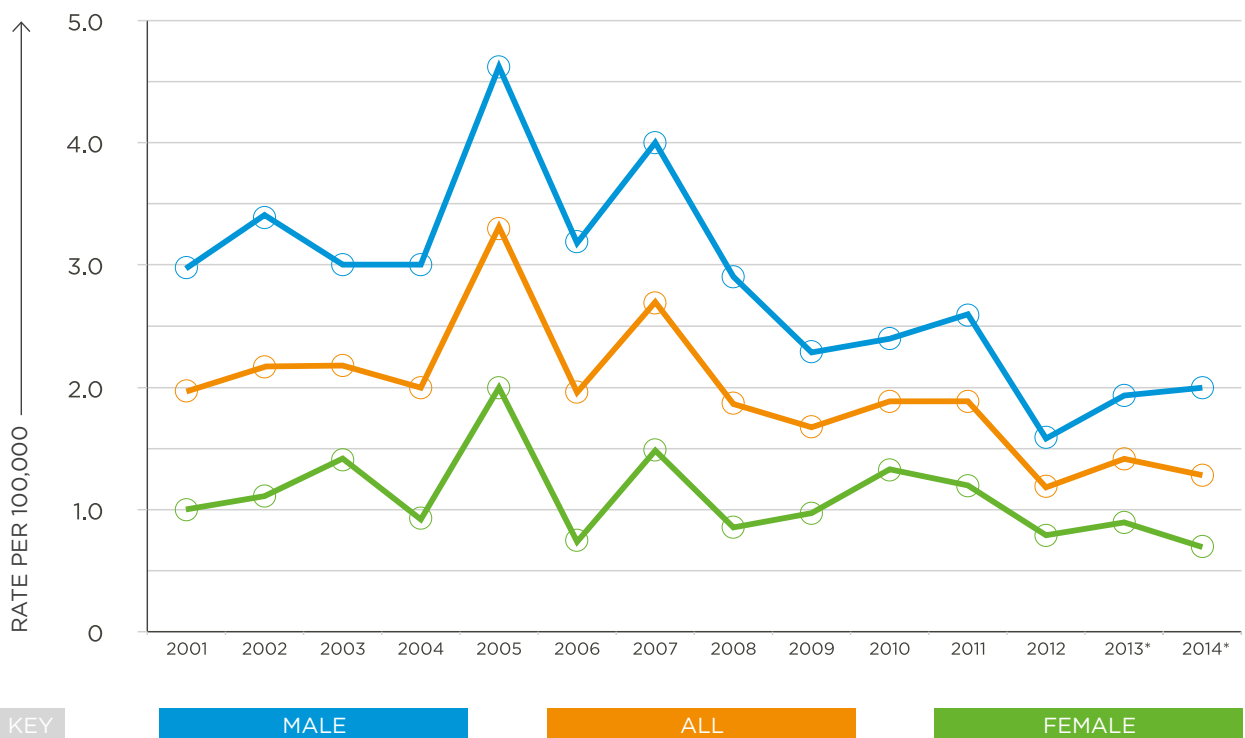
3 year moving average	2004 - 2006	2005 - 2007	2006 - 2008	2007 - 2009	2008 - 2010	2009 - 2011	2010 - 2012	2011 - 2013*
Carlow	17.0	19.9	17.4	14.5	11.7	12.3	11.6	14.0
Cavan	19.3	18.5	16.7	14.9	12.0	10.2	10.1	13.7
Clare	12.6	12.2	12.8	14.3	11.6	11.0	10.2	11.9
Cork City	17.9	18.6	19.3	19.3	19.2	17.6	18.3	16.0
Cork County	12.8	12.5	13.1	13.3	13.5	13.5	11.9	11.7
Donegal	10.4	9.7	10.1	10.9	9.6	8.0	6.4	8.3
Dublin City	11.3	11.0	10.3	10.4	10.4	14.3	15.6	15.4
Dun Laoghaire	5.6	5.9	6.5	7.3	7.9	7.3	7.2	6.3
Fingal	6.1	4.7	5.2	6.3	6.7	6.0	5.6	5.4
Galway City	8.7	5.5	7.5	8.7	8.8	10.7	9.4	9.9
Galway County	11.3	12.1	10.6	10.9	12.5	13.1	13.6	13.6
Kerry	11.3	9.9	9.5	12.6	15.4	18.0	18.9	19.7
Kildare	10.6	9.6	7.2	6.4	7.2	9.9	11.0	11.7
Kilkenny	10.1	11.4	11.5	10.9	9.6	11.2	11.9	13.6
Laois	8.8	10.4	11.6	10.9	13.5	16.5	16.9	13.6
Leitrim	23.4	13.1	8.9	10.9	14.9	16.9	15.7	9.5
Limerick City	16.4	14.1	12.4	10.8	11.9	16.5	21.1	21.1
Limerick County	10.7	10.1	8.6	10.8	11.4	13.2	13.9	12.1
Longford	15.2	12.6	10.5	9.2	7.9	8.7	7.6	8.4
Louth	9.3	8.6	11.1	11.6	12.8	12.9	14.1	14.1
Mayo	11.1	13.8	12.8	12.8	11.5	13.2	15.5	14.9
Meath	11.1	7.5	9.3	10.8	10.9	8.4	7.5	7.7
Monaghan	10.9	10.0	9.8	11.3	12.2	10.5	13.3	13.8
Offaly	19.1	14.7	14.8	14.8	14.7	14.6	9.9	9.9
Roscommon	12.8	11.8	13.7	14.7	17.6	16.1	16.0	12.9
Sligo	12.7	17.6	15.5	11.9	11.1	10.5	11.5	12.5
South Dublin	13.2	8.7	6.9	7.3	10.3	11.3	11.8	9.2
Tipperary North	10.2	8.4	8.6	8.2	8.2	7.2	5.9	5.6
Tipperary South	10.5	11.1	12.0	14.1	14.3	14.7	14.3	13.9
Waterford City	11.5	9.3	9.2	13.1	11.1	14.0	10.7	8.5
Waterford County	16.6	11.9	13.0	13.2	15.1	12.5	11.4	10.9
Westmeath	12.7	13.6	12.1	14.4	14.9	14.0	13.1	12.3
Wexford	13.6	15.7	13.5	13.9	12.5	14.8	17.8	19.4
Wicklow	13.4	11.7	10.3	9.3	10.6	11.5	10.2	7.7
Ireland	11.6	11.0	10.9	11.3	11.4	11.7	11.6	11.4

\* Figures for 2013 are provisional and subject to change.

## Deaths of undetermined intent

There are indications that deaths of undetermined intent may include 'hidden' cases of suicide. However, it is not yet clear which proportion of undetermined deaths involve probable suicide cases. The figure below shows an overview of undetermined deaths per 100,000 by gender and total confirmed rates for Ireland, 2001 - 2014.

**Rates of undetermined deaths per 100,000 by gender and total rates for Ireland, 2001-2014**



\* Figures for 2013 and 2014 are provisional and subject to change.

## Incidence of self-harm in Ireland

Self-harm includes the various methods by which people intentionally harm themselves. The Irish statistics presented here are collated by the National Self-Harm Registry Ireland, based on data collected on persons presenting to hospital emergency departments as a result of self-harm. Since 2006, all general hospital and paediatric hospital emergency departments in Ireland have contributed to the Registry.

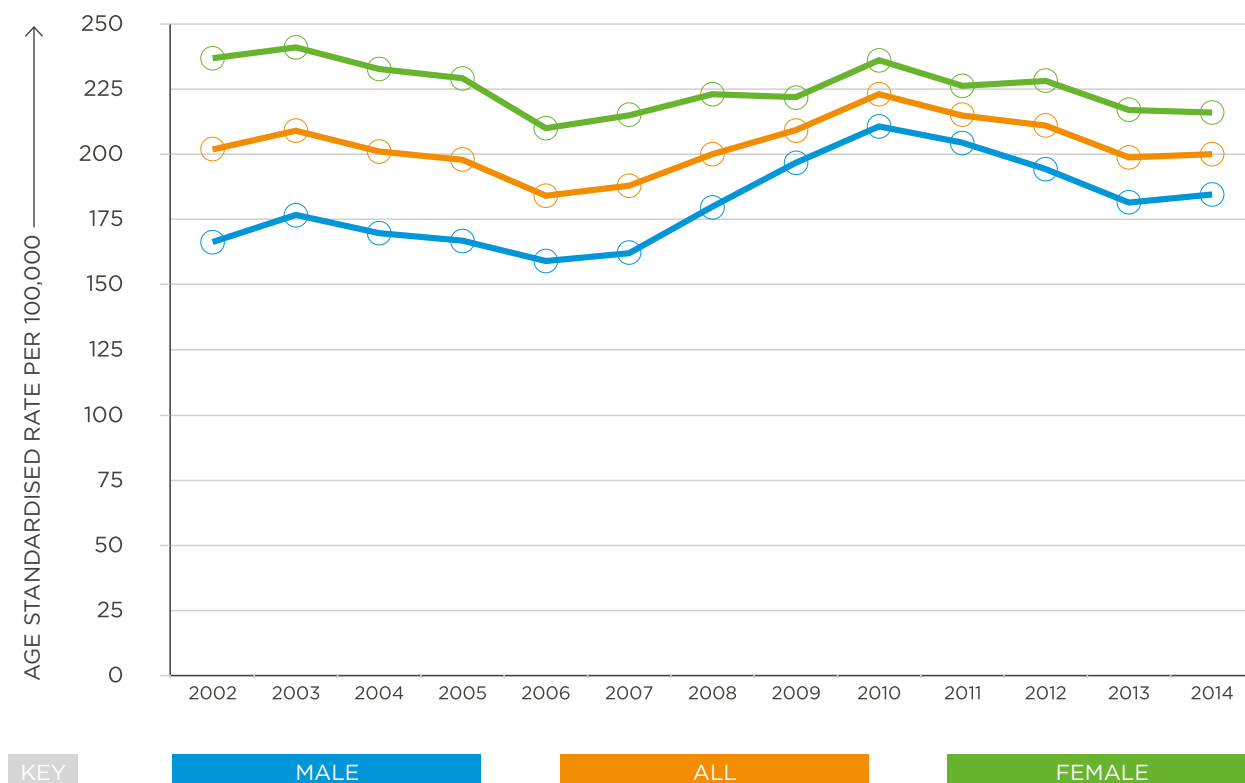


## Trends in self-harm by gender in Ireland, 2002-2014

In 2014, the Registry recorded 11,126 presentations to hospital due to self-harm nationally, involving 8,708 individuals. Taking the population into account, the age-standardised rate of individuals presenting to hospital following self-harm in 2014 was 200 per 100,000. Thus, the self-harm rate was essentially unchanged from 2013. This levelling-off follows three successive decreases in the rate of people presenting to hospital following self-harm in Ireland from 2010 to 2013. However, the rate in 2014 was still significantly higher (+6%) than the pre-recession rate in 2007 (188 per 100,000).

Between 2007 and 2010 there was an increasing trend in the rate of self-harm in Ireland, with a 20% increase overall during this period. The largest increase was seen among men, where the rate went from 162 per 100,000 to 211 per 100,000 (+30%). There was a less pronounced increase in the female rate during this period, with a 10% increase observed. While overall the female rate of self-harm in Ireland is consistently higher than the male rate, this period has also seen the gender gap narrowing, with 2010 recording the smallest difference between these rates (10%).

### Rates of self-harm by gender and overall, 2002-2014



## Rates of self-harm by gender and age

The highest rate of self-harm is in the younger age brackets. In 2014 the highest rate for women was among 15-19 year-olds, at 678 per 100,000. This rate implies that one in every 147 girls in this age group presented to hospital in 2014 as a consequence of self-harm. The highest rate for men was among 20-24 year-olds at 544 per 100,000, or one in every 184 men. The incidence of self-harm gradually decreased with increasing age in men. This was the case to a lesser extent in women as their rate remained stable, across the 30-54 year age range.

A recent study (Corcoran et al, 2015) including data from the National Self-Harm Registry, found that during the period 2008-2012, there was a negative impact of the recession on national rates of both suicide and self-harm in Ireland. It was found that the rate of male suicide was 57% higher than it would have been had the economic recession not occurred. The rate of male and female self-harm was respectively 37% and 26% higher. In absolute numbers, there were an additional 476 male suicides during 2008-2012 than we would have expected to see had the recession not occurred. There was also an excess number of self-harm presentations (males: 5,029 and females: 3,833). The impact of the economic recession on self-harm was most evident in 15-44 and 45-64 year-old men.

## Repetition of self-harm, 2014

Repeated self-harm is a significant risk factor for suicide. Therefore, those who present with repeat acts of self-harm are a significant target group for suicide prevention. Appropriate aftercare is critical in reducing rates of subsequent suicide in this population cohort.

There were 8,708 individuals treated for 11,126 episodes of self-harm in 2014. Of the total number of presentations made to emergency departments in Ireland in 2014 more than one in five (2,418, 22.0%) were due to repeat acts of self-harm. This rate is similar to that reported in the years 2003-2009 (range: 20.5-23.1%) and 2013 (21.0%).

Of the 8,708 individuals treated for self-harm in 2014, 1,264 (14.5%) made at least one repeat presentation to hospital during the calendar year. This proportion is higher than that recorded in 2013 (13.8%), and within the range reported for the years 2003-2012 (13.8-16.4%). At least five self-harm presentations were made by 138 individuals in 2014. They accounted for just 1.6% of all self-harm presentations in the year but their presentations represented 9.6% of all self-harm presentations recorded.

For further information please refer to the report, available at [www.nsrif.ie](http://www.nsrif.ie).





## SECTION 5

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# Financial Information

## 5.1 FINANCIAL OVERVIEW 2014

In 2014, we continued to invest in frontline services and organisations working in the area of suicide prevention and mental health promotion. Overall expenditure in 2014 increased by 8% from 2013 levels. Our overall budget for the year was €8.8 million.

This increase in funding is spread across a broad spectrum of agencies and services supporting:

- Intervention & bereavement support services
- Older people & families
- Marginalised groups
- Men
- Research
- Young people
- Other agencies covering all demographics

Summary of overall expenditure year on year is shown in the table below:

	2013	2014
	€	€
Grants to agencies	4,968,471	4,446,886
Communications projects	859,000	709,093
Non grant expenditure (office expenses, salaries, etc)	356,512	777,335
Training programmes (ASIST, SAFEtalk, DBT)	456,520	973,898
HSE funded programmes / Community Resilience Fund	484,800	857,198
Regional liaison & suicide prevention services	790,000	790,000
<b>Total</b>	<b>€7,915,303</b>	<b>€8,554,410</b>

## 5.2 FUNDED AGENCIES 2014

	2013	2014
	€	€
Alcohol Action	12,500	2,500
BeLongTo	197,000	192,000
BodyWhys	0	23,840
Console	352,000	548,000
Curam Clainne - Mayo Suicide Liaison Project	120,000	72,000
Cycle Against Suicide	1,680	0
Exchange House	0	111,500
Family Resource Centre Clonleigh	0	39,666
Family Resource Centre Westport	90,500	30,000
GAA	100,000	25,000
GLEN	232,950	145,843
GROW	61,000	70,000
HeadsUp (Rehabcare)	7,000	7,000
Inspire Ireland	267,200	205,608
Institute of Technology Carlow	0	15,000
Irish Association of Suicidology	30,040	60,000
Irish College of General Practitioners	227,351	0
Irish Learning Technology Association	12,000	0
Irish Men's Sheds	53,100	0
ISPCC/Childline	190,000	201,000
Men's Development Network	12,000	0
Mojo Project - Dodder Valley	73,500	99,026
MyMind	77,000	20,000
National Suicide Research Foundation	1,086,000	650,289
National Youth Council of Ireland	44,700	18,750
NTSAP Exchange House/Tribli	176,500	0
Nuture	0	50,000
Pieta House	300,000	503,500
Samaritans	513,000	582,998
Shine/Headline/See Change	249,750	303,506
SpunOut.ie /Community Creations	205,500	65,500
Suicide or Survive	187,000	144,000
TENI	0	32,000
Teenline	34,000	20,660
Turn2Me	25,200	83,200
Young Social Innovators	30,000	124,500
<b>Total</b>	<b>€4,968,471</b>	<b>€4,446,886</b>







## SECTION 6

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# Appendices

## 6.1 SUPPORT SERVICES

<i>Organisation</i>	<i>Web</i>	<i>Phone</i>
<p><b>AWARE</b> Aware offers a service for people who experience depression, and for concerned family and friends.</p>	<a href="http://www.aware.ie">www.aware.ie</a>	1890 30 33 02
<p><b>Barnardos</b> Barnardos provides bereavement counselling for children and young people who have lost someone close to them though death.</p>	<a href="http://www.barnardos.ie">www.barnardos.ie</a>	01 473 2110
<p><b>BeLonG To</b> BeLonG To supports lesbian, gay, bisexual and transgender young people in Ireland.</p>	<a href="http://www.belongto.org">www.belongto.org</a>	01 670 6223
<p><b>Bodywhys</b> Provides support to people affected by eating disorders.</p>	<a href="http://www.bodywhys.ie">www.bodywhys.ie</a>	1890 20 04 44
<p><b>Childline</b> Childline is a 24 hour listening service for all children up to the age of 18.</p>	<a href="http://www.childline.ie">www.childline.ie</a>	1800 666 666 Or text Talk to 50101
<p><b>Console</b> Console supports those bereaved through suicide.</p>	<a href="http://www.console.ie">www.console.ie</a>	1800 24 72 47
<p><b>GROW</b> GROW helps people who have suffered, or are suffering, from mental health problems.</p>	<a href="http://www.grow.ie">www.grow.ie</a>	1890 47 44 74
<p><b>Health Service Executive</b> Ireland's national health and social care provider.</p>	<a href="http://www.hse.ie">www.hse.ie</a>	1850 24 18 50
<p><b>HSE National Counselling Service</b> Free counselling and psychotherapy service, provided by the HSE.</p>	<a href="http://www.hse-ncs.ie">www.hse-ncs.ie</a>	1800 477 477
<p><b>Jigsaw</b> Jigsaw supports young people's mental health and wellbeing.</p>	<a href="http://www.jigsaw.ie">www.jigsaw.ie</a>	01 472 7010
<p><b>Living Links</b> Living Links provide assertive outreach support to people bereaved by suicide.</p>	<a href="http://www.livinglinks.ie">www.livinglinks.ie</a>	087 412 2052

<b>Organisation</b>	<b>Web</b>	<b>Phone</b>
<p><b>LGBT Helpline</b> A non-judgmental and confidential service providing listening, support and information to lesbian, gay, bisexual and transgender (LGBT) people, their family and friends.</p>	<a href="http://www.lgbt.ie">www.lgbt.ie</a>	1890 929 539
<p><b>MyMind</b> MyMind offers accessible and affordable mental health care for those in need.</p>	<a href="http://www.mymind.ie">www.mymind.ie</a>	
<p><b>Pieta House</b> Centre for the prevention of self-harm or suicide.</p>	<a href="http://www.pieta.ie">www.pieta.ie</a>	01 601 0000
<p><b>Samaritans</b> Confidential 24 hour emotional support service for people who are experiencing feelings of distress or despair, including those which may lead to suicide.</p>	<a href="http://www.samaritans.org">www.samaritans.org</a>	116 123
<p><b>Senior Helpline</b> Confidential listening service for older people by older people.</p>	<a href="http://www.seniorhelpline.ie">www.seniorhelpline.ie</a>	1850 44 04 44
<p><b>Shine</b> Shine is dedicated to upholding the rights, and addressing the needs of, all those affected by enduring mental illness.</p>	<a href="http://www.shineonline.ie">www.shineonline.ie</a>	1890 62 16 31
<p><b>SOS</b> SOS offer the Eden Programme, a supportive weekly group environment over a 6-month period, and wellness workshops that give people the tools to improve their own mental wellness.</p>	<a href="http://www.suicideorsurvive.ie">www.suicideorsurvive.ie</a>	1890 577 577
<p><b>Turn2Me</b> Turn2Me is an online mental health community providing moderated peer-to-peer forums, online group support and online counselling services.</p>	<a href="http://www.turn2me.org">www.turn2me.org</a>	

## 6.2 RELEVANT LEGISLATION

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The following section presents extracts from Irish legislation (or explanatory notes thereof) that is related to suicide prevention issues in terms of the de-criminalisation of suicide, restriction on the sale of paracetamol and finally, reporting requirements in relation to suicide prevention.

### 1. THE CRIMINAL LAW (SUICIDE) ACT 1993, STATES IN SECTION 2:

- (i) Suicide shall cease to be a crime.
- (ii) A person who aids, abets, counsels or procures the suicide of another, or an attempt by another to commit suicide, shall be guilty of an offense and shall be liable on conviction on indictment to imprisonment for a term not exceeding fourteen years.

### 2. STATUTORY INSTRUMENT NO. 150 OF 2001 - MEDICINAL PRODUCTS (CONTROL OF PARACETAMOL) REGULATIONS, 2001

*Explanatory Note: (This is not part of the instrument and does not purport to be a legal interpretation).*

These Regulations impose further restrictions on the sale of medicinal products containing paracetamol.

In general, these Regulations

- (i) Prescribe maximum pack sizes for products when sold in pharmacies and in non-pharmacies.
- (ii) Prescribe cautionary and warning statements which must appear on all packs.
- (iii) Prohibit the sale of paracetamol products in automatic vending machines.
- (iv) Prohibit the sale of paracetamol products in non-pharmacy outlets when a second analgesic component is concerned.

- (v) Prohibit the sale of multiple packs of paracetamol in the course of a single transaction.
- (vi) Prohibit the sale of paracetamol products unless they are in blister packs or equivalent form of packaging.

### 3. HEALTH (MISCELLANEOUS PROVISIONS) ACT 2001 STATES IN SECTION 4:

The Minister for Health and Children shall, not later than 9 months after the end of each year beginning with the year 2002, make a report to each House of the Oireachtas on the measures taken by health boards during the preceding year to prevent suicides.







## NOTES

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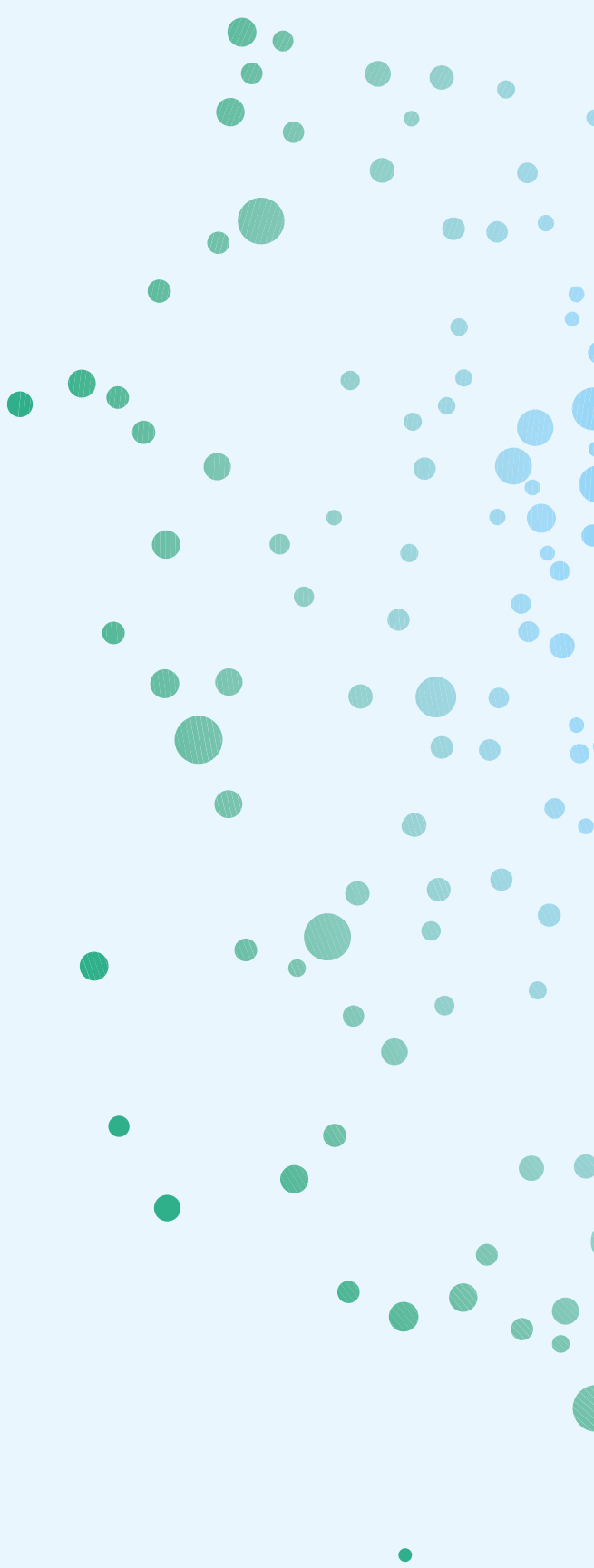




Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



Connecting for Life



**National Office for Suicide Prevention**  
Mental Health Division,  
Health Service Executive,  
Stewart's Hospital, Palmerstown, Dublin 20.  
Phone: +353 (0)1 620 1670.  
[www.nosp.ie](http://www.nosp.ie)