



SAMARITANS

Key Priorities for Preventing Suicide in Northern Ireland

Policy Asks
for Assembly
Elections **2022**

Prevention


Suicide in Northern Ireland

In 2019, 209 people in Northern Ireland took their own lives. Every single one of these deaths was a tragedy that devastated families, friends and communities. Samaritans believe suicide is preventable, not inevitable, and it is our vision that fewer people die by suicide.

Realising this vision is everyone's business, and politicians all have a part to play in saving lives, whether that's by influencing party policy, pushing for change in their constituency, or keeping the issue on the agenda in the Northern Ireland Assembly. Suicide prevention is a cross-party, inter-departmental responsibility. Only by working together on this issue can true progress be achieved.

Suicide is a major public health concern and is therefore a subject that is very much in the public interest. While sensitive reporting can inform and educate the public about suicide and the signs to look out for, there is strong and consistent research evidence that some forms of reporting lead to increases in suicide rates. Coverage from the media and individuals on social media can influence how people behave in a crisis. In contrast some reporting can help save lives. Samaritans' Media Guidelines are best practice and provide advice and training to support informed and safe coverage.

There are many ways to produce sensitive, informed coverage of suicide, to ensure all those who comment on suicide use best practice, **we are calling for:**


 **SUFFICIENT FUNDING TO ALLOW US TO CONTINUE TO ROLL OUT AND TRAIN THOSE IN PUBLIC FACING ROLES ON OUR BEST PRACTICE MEDIA AND MEMORIAL GUIDELINES.**

1. O'Neill, S., Graham, B., & Ennis, E. (2019b). Prescribed pain and mental health medication prior to suicide: A population based case control study. *Journal of Affective Disorders*, 246, 195-200.

Early Intervention

Studies show that 70% of those who die by suicide in Northern Ireland had been prescribed mental health medications.¹ As well as illustrating the link with mental illness it also shows there might have been an opportunity for health care staff to ask about suicidal thoughts. While primary care is the most common service used prior to death by suicide, one study found that 82% of people attended their GP practice in the year prior to suicide. Indeed 39% had at least one GP consultation in the 30 days before death. 39% had been to the Emergency Department; one third had been seen by a psychiatrist, and 28% had been in contact with community mental health services.²

Given the opportunity for medical staff to ask about suicidal thoughts, **we are calling for:**

 **ALL MEDICAL AND CARE STAFF TO BE TRAINED IN SUICIDE PREVENTION TO RECOGNISE SIGNS OF MENTAL ILL HEALTH / POTENTIAL SUICIDAL IDEATION.**

1. Leavey, G., Rosato, M., Galway, K., Hughes, L., Mallon, S., & Rondon, J. (2016). Patterns and predictors of help-seeking contacts with health services and general practitioner detection of suicidality prior to suicide: A cohort analysis of suicides occurring over a two-year period. *BMC Psychiatry*, 16(1), 120.



OF THOSE WHO DIE BY SUICIDE IN NORTHERN IRELAND HAD BEEN PRESCRIBED MENTAL HEALTH MEDICATIONS.¹



Reduction

The internet can be an invaluable space for individuals experiencing self-harm and suicidal feelings, providing opportunities for users to speak openly about difficult feelings, and to access support from peers experiencing similar feelings.³ Whilst suicide and self-harm are complex and rarely caused by one thing, in many cases the internet is involved. Self-harm is common among young people in Northern Ireland. The Northern Ireland Lifestyle and Coping Strategy found that at least 1 in 10 adolescents reported self-harm by the age of 16 years. Females were three times more likely than males to report self-harm. In Northern Ireland bullying, exposure to self-harm, abuse, and sexual orientation concerns were the main factors associated with self-harm.⁴ Samaritans' own research has shown that at least a quarter of patients who had self-harmed with high suicidal intent had used the internet in connection with their self-harm.⁵

Given the rise in prominence of online 'suicide challenges', and the lack of legislation around assisting self-harm **we are calling for:**

A NEW OFFENCE TO BE CREATED AGAINST ENCOURAGING OR ASSISTING SERIOUS SELF-HARM WITH CLEARLY MALICIOUS INTENT.

1. Biddle, L., et al. (2020) 'Online help for people with suicidal thoughts provided by charities and healthcare organisations: a qualitative study of users' perceptions', *Social Psychiatry and Psychiatric Epidemiology*, 55, 1157-1166; Lavis A. and Winter, R (2020). 'Online harms or benefits? An ethnographic analysis of the positives and negatives of peer-support around self-harm on social media', *Journal of Child Psychology and Psychiatry*, 61(8), 842-854.
2. Cummings, E. M., Taylor, L.K., Du, H., Merrilees, C.E., Goeke-Morey, M., & Shirlow, P. (2019) Examining Bidirectional Pathways Between Exposure to Political Violence and Adolescent Adjustment in Northern Ireland. *Journal of Clinical Child and Adolescent Psychology*, 48(2), 296-305
3. Biddle L, Derges J, Gunnell D, Stace S, Morrissey J, (2016) Priorities for suicide prevention: balancing the risks and opportunities of internet use, University of Bristol/Samaritans.

Northern Ireland 2020 Stats



121,444
CALLS
ANSWERED



32,858
HOURS



In 2020, the top five reasons people reached out to Samaritans for emotional support involved concerns relating to;

- Coronavirus
- Isolation and Loneliness
- Family
- Mental health or illness
- Relationship problems



NORTHERN
IRELAND
ANSWERS A CALL
FOR HELP EVERY
3 MINUTES



BUSIEST DAY
OF THE WEEK:
THURSDAY

SAMARITANS

For further information on how you can show your support please contact:

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