## **BRIEFING PAPER**

**SUBJECT:** SUICIDE PREVENTION IN SOUTHAMPTON

**DATE:** 29 JUNE 2017

**RECIPIENT:** HEALTH OVERVIEW AND SCRUTINY PANEL

### THIS IS NOT A DECISION PAPER

#### SUMMARY:

Local Authorities in England have a statutory duty to take appropriate steps to improve the health of the people who live and work in their areas. Public Health functions include the responsibility for co-ordinating and implementing work on suicide prevention.

This paper briefly outlines the work of Public Health in the development and implementation of the Southampton Suicide Prevention Plan.

### **BACKGROUND and BRIEFING DETAILS:**

- 1. In September 2012 the coalition government published a national strategy "Preventing Suicide in England", the overall objectives are:
  - A reduction in the suicide rate in the general population in England
  - Better support for those bereaved or affected by suicide.
- 2. The Southampton Suicide Prevention Plan considers how each action contained in the national strategy will be addressed locally. It also supports Pledge 5 of the Public Mental Health Strategy "Be Well" which is to strive to reduce the number of suicides in the city. This strategy was developed in partnership with service users and the statutory and voluntary sector.
- 3. An engagement event was held at the end of 2015 attended by over forty stakeholders. Feedback from this event, together with national and local evidence have helped shape the local suicide prevention plan. The plan also follows guidance from Public Health England.
- 4. Public health works with the coroner's office to undertake a suicide audit to gather intelligence on who, where and how people are taking their own lives. During the period 2013 - 2015 there were a total of 60 deaths by suicide (not including children):
  - 74% were male, and 72% white British
  - Hanging remains the most frequent method of suicide, with most people taking their own lives at home.
  - Unusually in Southampton around 60% of people were employed, this ranges across professions.
  - Records from the coroner's office show that 40% of people were known to mental health services, with just under one third known to use drugs and/or

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alcohol to some extent.1

5. The Southampton Suicide Prevention Plan was adopted by the Health and Wellbeing Board in 2016. It is monitored quarterly by members of the Southampton Suicide Prevention Steering Group, led by Public Health and Chaired by Cllr Lewzey. Membership includes: Southern Health, Dorset Health (IAPT), Mind, SVS, CCG, Coroner's office, Red Lipstick (Families bereaved by Suicide), Hampshire Police, British Transport Police, Samaritan's and Saints Foundation.

### 6. Priorities for the plan are:

- 1. Reduce the risk of suicide in high risk groups
- 2. Tailor approaches to improve mental health and wellbeing in Southampton
- 3. Reduce access to the means of suicide
- Provide better information and support to those bereaved or affected by suicide
- Support the media in delivering sensitive approaches to suicide and suicidal behaviour
- 6. Support research, data collection and monitoring.

### 7. Successes so far include:

- Saints vs stigma a major three day event held in Guildhall Square using football as a way of engaging men, to raise issues around mental health and suicide.
- Working with British Transport Police and Southern Health to identify suicide hotspots, ensuring Southern Health undertakes ligature audits.
- Suicide prevention training delivered to over 100 people in the City including Street Pastors.
- Major suicide conference held in 2016, with national and international speakers, this had excellent, sensitive media coverage. Finding the resource to deliver this was a significant achievement. Whilst Health Education England (Wessex) funded the majority of spend including hiring St Marys Stadium, a number of national and international speakers only asked for a donation for their time as they were keen to support our work.
- Public Health has also been supporting the set up of a local charity, Red Lipstick, to offer support locally to families bereaved by suicide.

### Challenges:

• Me

 Media coverage of deaths by suicide and inquests remains patchy, but we continue to make slow progress.

 Suicide Prevention training and the creation of a suicide bereavement service have been challenged by limited resources. Resources available for delivering the objectives in the plan remain limited especially with the reduction in the public health grant. Whilst the government has outlined its expectations no new resource was assigned to this area. Delivery of training requires a moderate amount of ongoing resource. Designing and delivering a specific

<sup>&</sup>lt;sup>1</sup> This includes a limited number of people known to drug and alcohol services plus those where alcohol was cited in the toxicology report.

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post-vention / bereavement support service will also require significant resources.

# **Appendices/Supporting Information:**

• Southampton Suicide Prevention Plan 2016 - 2019

• Southampton Suicide Prevention Plan – Action Plan

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