

# Welcome

## Launch of the Cheshire and Merseyside Suicide Prevention Strategy

#HopeThroughAction

Working together to improve health and  
wellbeing in Cheshire and Merseyside

15 November  
2022

# Cheshire & Merseyside Suicide Prevention – Where we have been and where we are heading?

Ruth du Plessis, Director of Public Health for St Helens Council  
and lead Director for Suicide Prevention in Cheshire & Merseyside

Working together to improve health and  
wellbeing in Cheshire and Merseyside

#HopeThroughAction

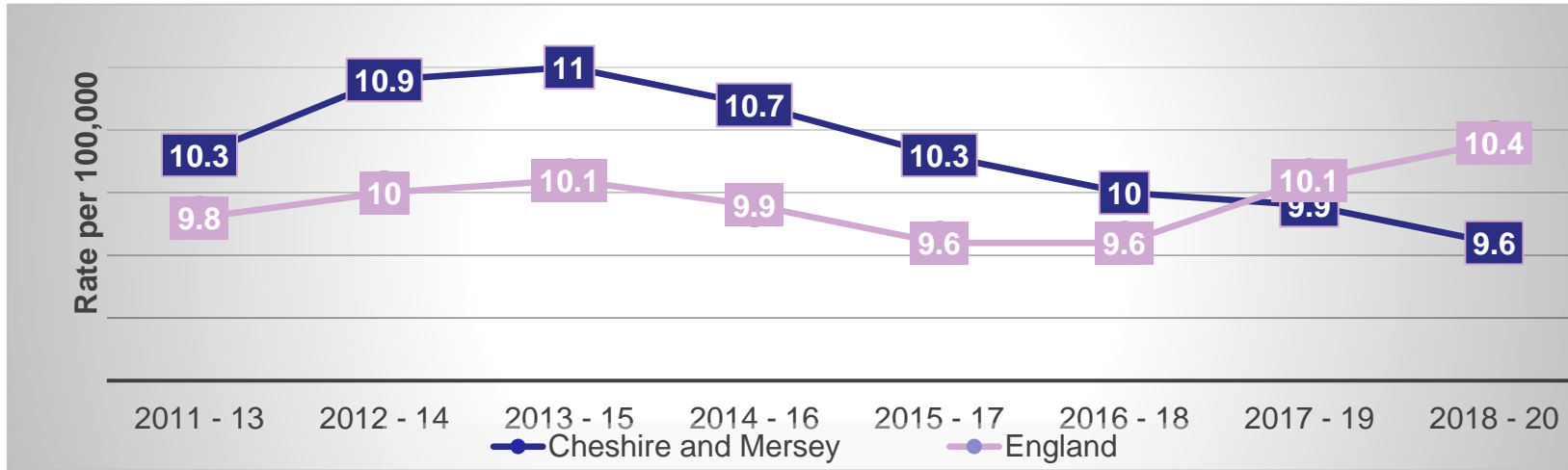
# Presentation focus

- Office of National Statistics data (ONS)
- Real time surveillance (RTS)
- Successes from our last strategy
- Why we need to keep the focus on suicide prevention
- Overview of the new strategy

# Data and Intelligence

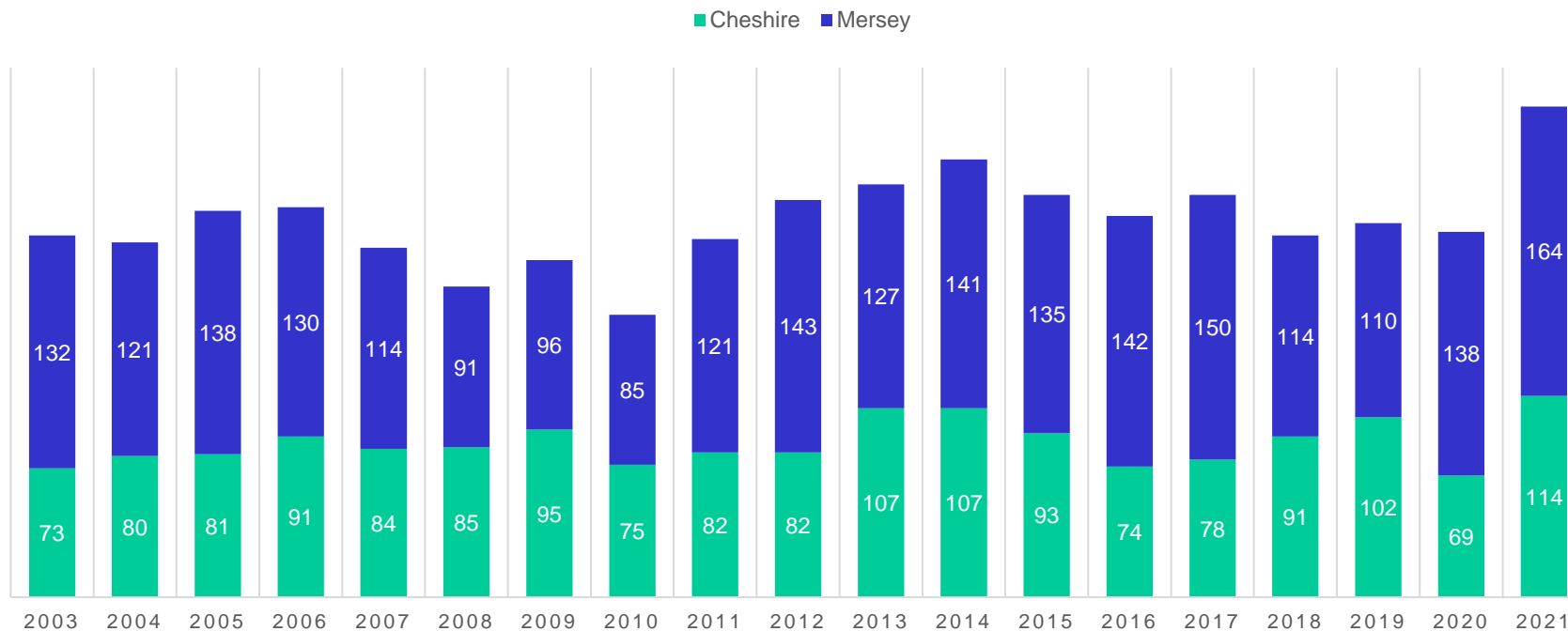
- The next few slides give an up-to-date view of the new released official data from Office of National Statistics, which are based on Coroner conclusions to the end of 2021
- Also, data on suspected suicides which is based on data from both the Cheshire Coroners and Merseyside Police. This data is received in real time
- Data in this presentation for suspected suicides is up until the end of June 2022

# Official Office of National Statistics data - 3 year rates 2011/13 to 2018/20

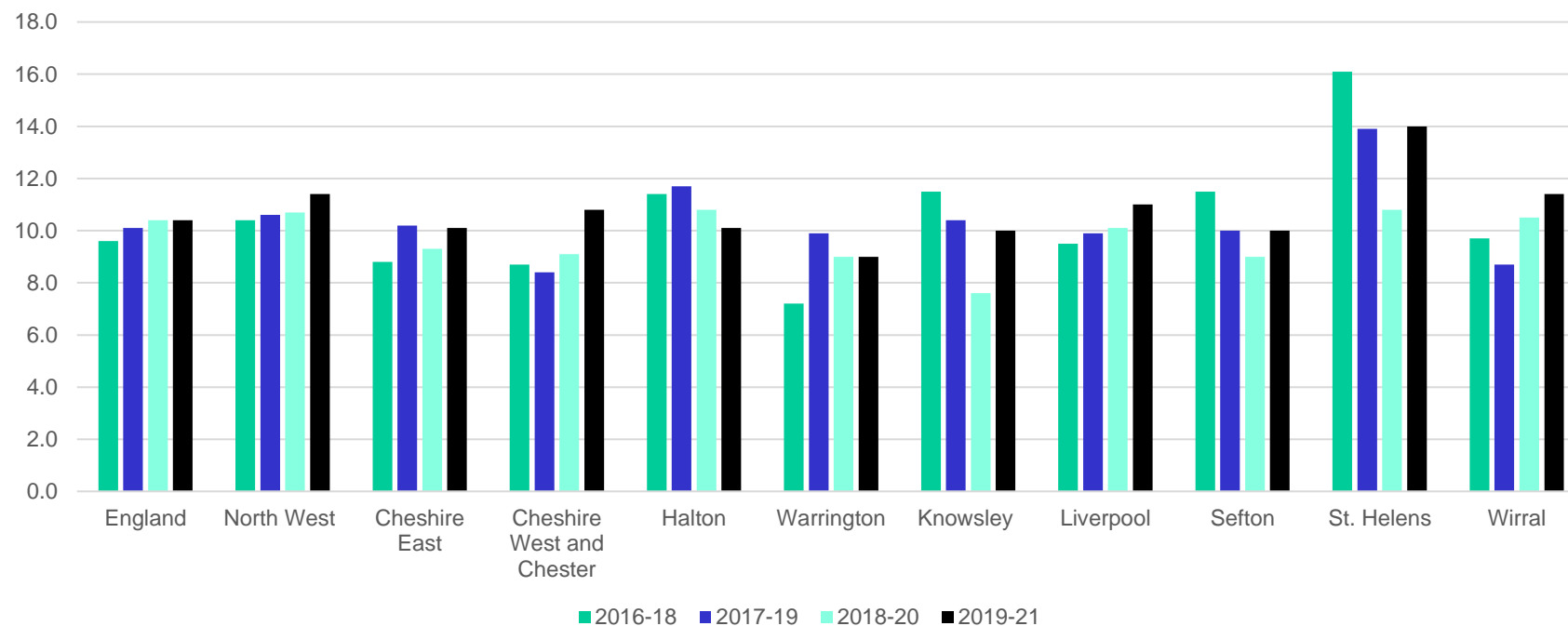


- Official 3 year rate C&M 2018-20 statistically lower than 3 year England rate
- New data for LA's was released this week for 2019-21 as all areas apart from Halton and Warrington saw an increase for 2019-21. Therefore the overall rate for C&M will increase however we expect it to be similar to the overall rate for England which has stayed at 10.4 per 100,000

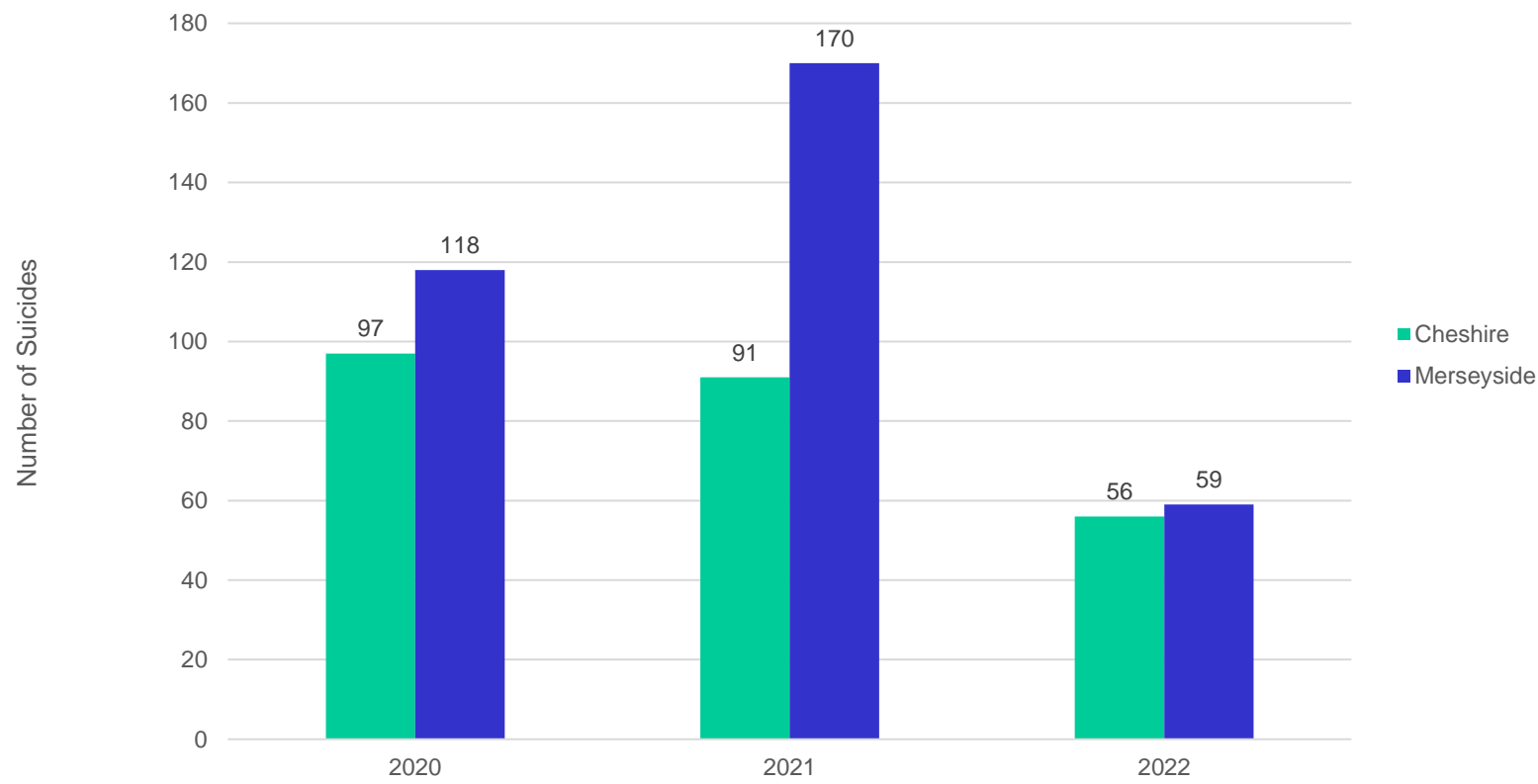
# Number of suicides for Cheshire and Merseyside 2003 – 2021 single years



# Office of National Statistics suicide rates by LA 2016/18 to 2019/21

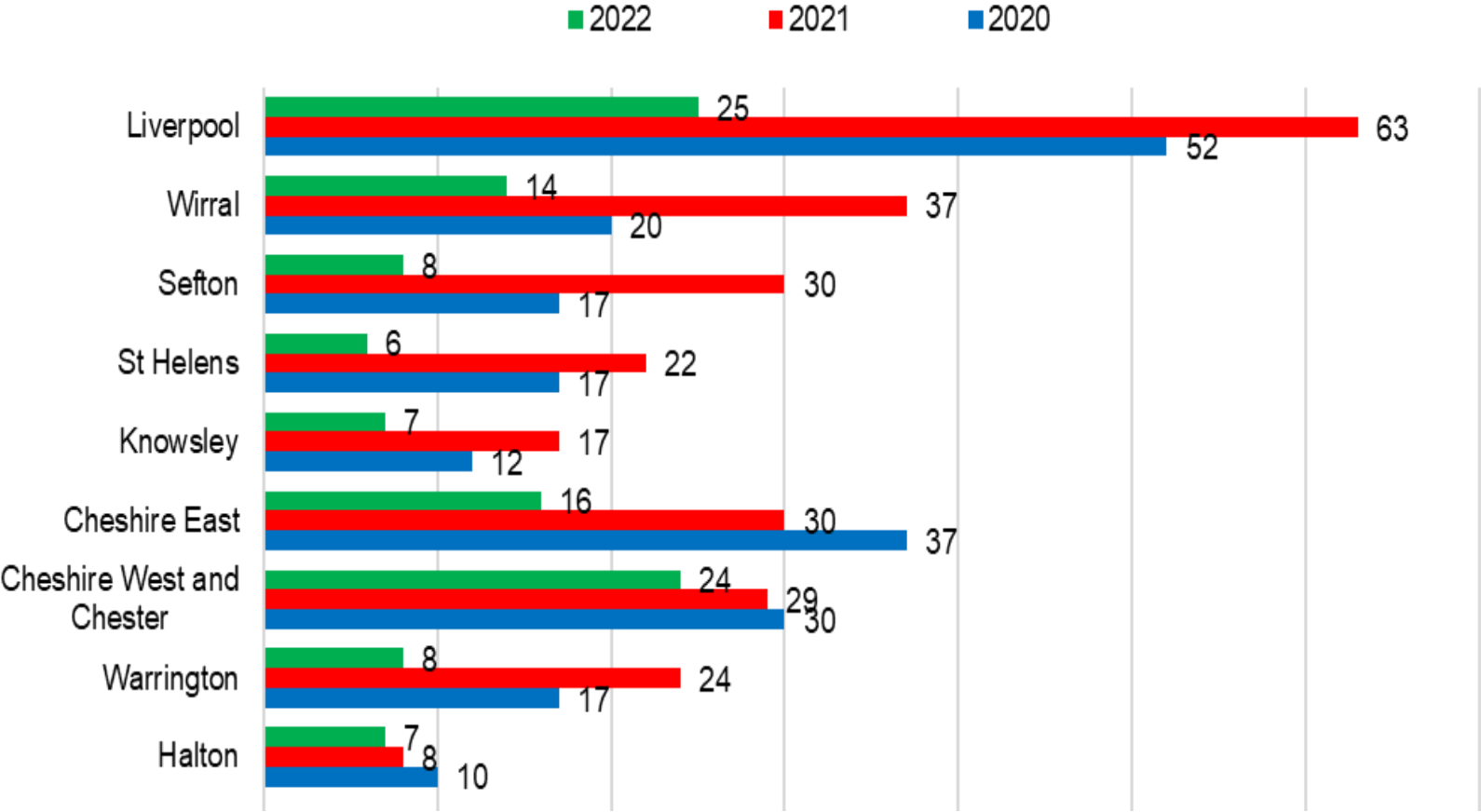


# Cheshire & Merseyside RTS cases by year (2020 – June 2022)

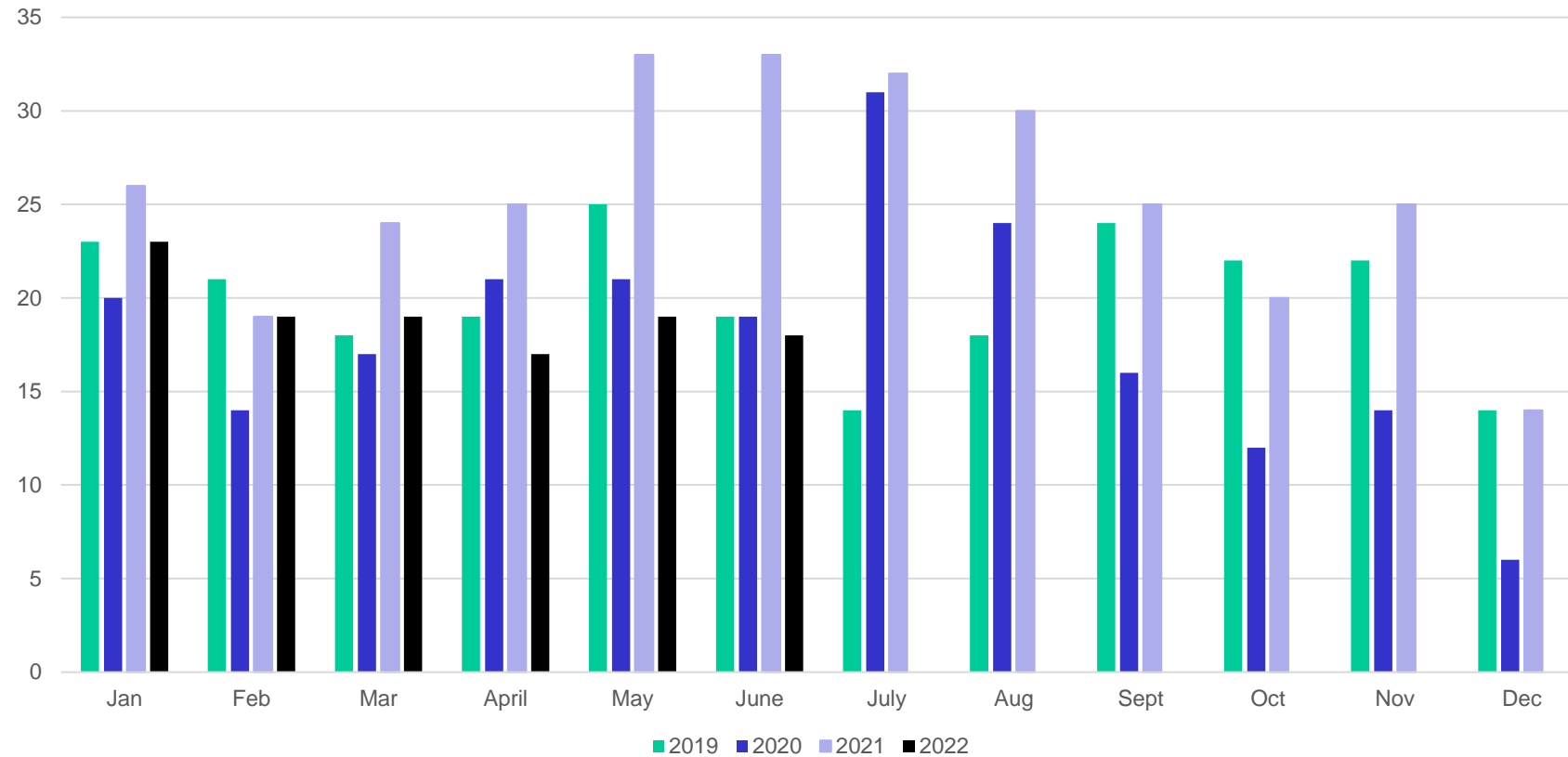




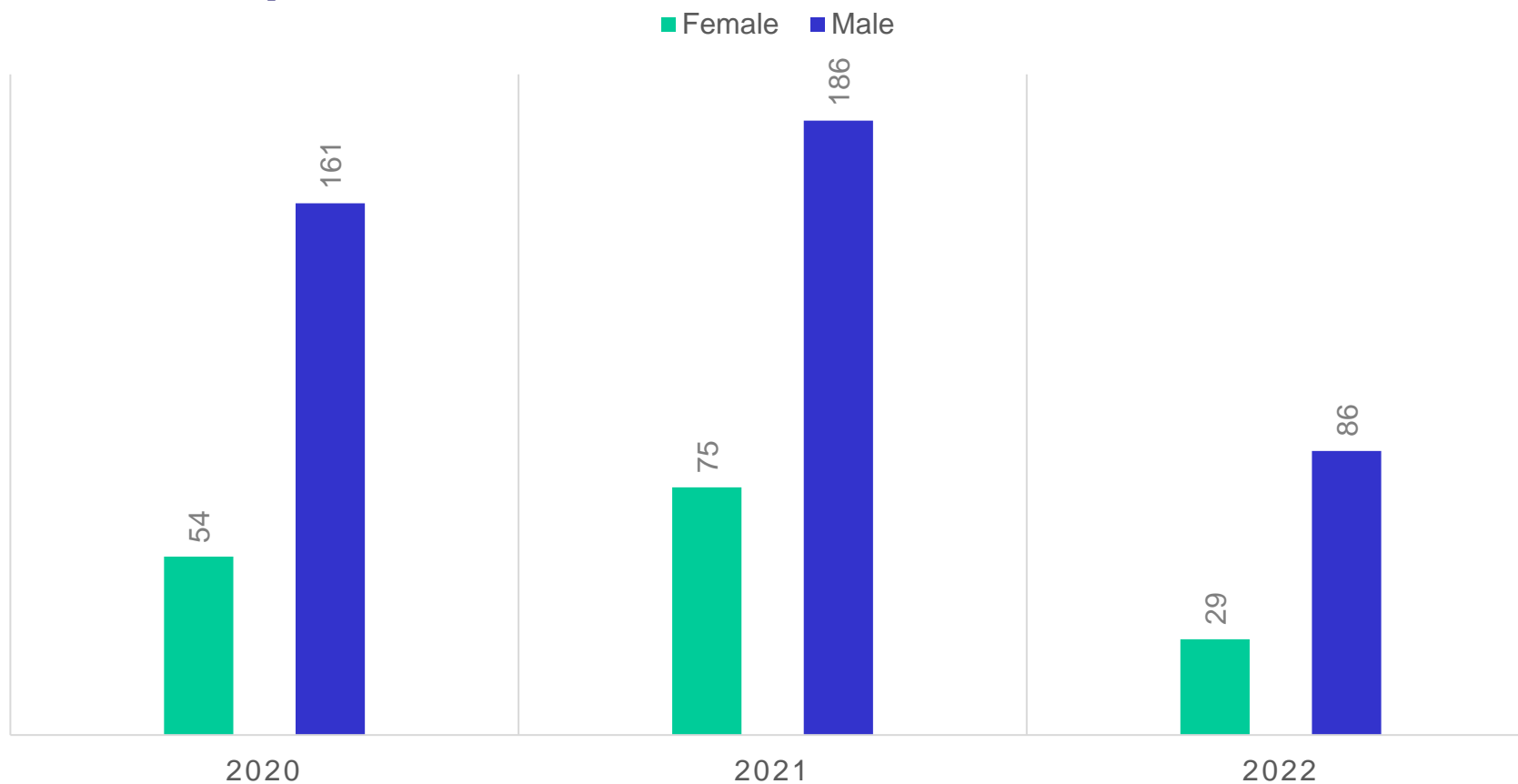
# RTS cases by Local Authority (2020 – June 2022)



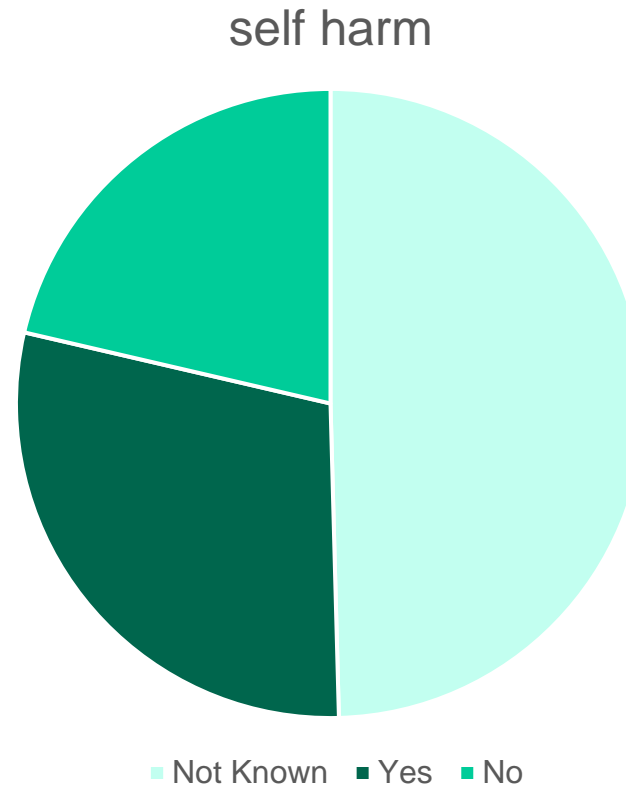
# RTS by month 2019 to June 2022



# RTS gender split 2020 to June 2022



# RTS data where Self Harm is known 2022 – Jan to Jun



58% of those  
we have  
information on  
have  
previously self  
harmed

# Some of the successes of the last strategy 2015-20

- Despite the challenges we are presented with we made strides to reduce suicides during the course of the previous strategy
- The number of suicides reduced from 248 in 2014 to 207 in 2020
- Amparo suicide liaison service have supported over 5000 contacts, supporting those beneficiaries directly impacted by suicide, helping to support this cohort who are at higher risk of suicide
- All areas have a 24/7 crisis telephone line

# Some of the successes of the last strategy 2015-20

- Samaritans Media Advice – ensuring media response is appropriate and not increasing risks through sensational reporting
- Suicide Safer Communities (SSC) Award from Living Works in July 2020 in recognition of the partnership's achievements and ongoing commitment to preventing suicides
- Setting up the Real Time Surveillance in 2017 enabling local areas to take action where there are clusters or themes that can be addressed locally

# Some of the successes of the last strategy 2015-20

- Campaigns and tools such as the development of the 'Stay Alive' App
- Men's health evaluation of what works in relation to men's emotional health and wellbeing services
- Safer care – ensuring the mental health trusts have the best quality services and meet the standards set by NCISH (National Confidential Inquiry into Suicides and mental Health)
- Lived Experience Network – supporting us to get it right and being involved in new developments. Co-production



**SUICIDE**  
**PREVENTION**  
**STRATEGY** | Cheshire &  
Merseyside  
2022-2027

## VISION

Our aspiration is for Cheshire and Merseyside to be a region where all suicides are prevented, where people do not consider suicide as a solution to the difficulties they face and where people have hope for the future.



**Champs**  
Public Health  
Collaborative

Working together to improve health and  
wellbeing in Cheshire and Merseyside





**SUICIDE  
PREVENTION  
STRATEGY** | Cheshire &  
Merseyside  
2022-2027

## MISSION

- To build individual and community resilience to improve lives and prevent people falling into crisis by tackling the risk factors for suicide.
- To support people who experience a time of personal crisis.
- To create an environment where anyone who needs help knows where to get it and feel able to access that help.
- To continue our commitment to build suicide safer communities in Cheshire and Merseyside.
- To tackle the underlying risk factors for suicide



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**SUICIDE**  
**PREVENTION**  
**STRATEGY** | Cheshire &  
Merseyside  
2022-2027

## VALUES

- Address health and social inequalities
- Reduce stigma
- Based on people and place
- Collaborative working with partners
- Data driven
- System leadership



**SUICIDE**  
**PREVENTION**  
**STRATEGY**

Cheshire &  
Merseyside  
2022-2027

## Key priorities within the strategy

- Children and young people
- Men
- Those who self-harm
- Addressing inequalities



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# **SUICIDE PREVENTION STRATEGY** | Cheshire & Merseyside 2022-2027

- The cost of living crisis means we need to focus on risk factors more than ever
- We need to be action oriented and outcomes focused
- The strategy provides a framework for local areas, communities, voluntary and third sector, professionals to understand their role in suicide prevention
- Save a life today #HopeThroughAction

# Thank you for listening



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wellbeing in Cheshire and Merseyside

# Men's emotional wellbeing

Joe Ackland, Crisis Café, Birkenhead

Sean Bailey, Lived Experience Network Member

Working together to improve health and  
wellbeing in Cheshire and Merseyside



SPIDER PROJECT

# COMPANEROS

A SAFE SPACE IN A CRISIS

WORLD SUICIDE PREVENTION DAY  
"CREATING HOPE THROUGH ACTION"





# ABOUT US

Compañeros is a crisis café situated in Birkenhead which is a safe space for people who are struggling with emotional and psychological distress, and who consider themselves to be in a self-defined crisis.

We offer a non-clinical and creative alternative, to the traditional pathway for people who need help and support in crisis. Compañeros provides a safe and calming environment, with access to one-to-one crisis intervention, wellbeing recovery projects, creative arts, and other essential social and emotional support



**Compañeros**  
A safe space in a crisis

# CRISIS CAFE

CREATIVITY - COMMUNITY - RECOVERY

**ARE YOU OVERWHELMED,  
STRESSED, OR ANXIOUS?**

**NEED TO TALK?**

**COMPAÑEROS IS HERE TO  
HELP**

**\*NO APPOINTMENT NECESSARY**



**DROP IN OR CONTACT US ON THE DETAILS BELOW**

Email:  
[enquiries.comp@spiderproject.org.uk](mailto:enquiries.comp@spiderproject.org.uk)

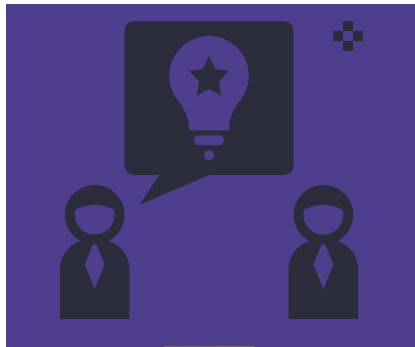
Twitter:  
[@companeros\\_spiderproject](https://twitter.com/companeros_spiderproject)

Instagram:  
[@companeros\\_spiderproject](https://www.instagram.com/companeros_spiderproject)

**2a Price Street, Birkenhead, CH41 6JN**  
**0151 488 8135**



# SERVICES WE OFFER



1:1 Crisis  
Response



Social prescribing



Creative Recovery  
Activities



Accredited  
courses and  
qualifications

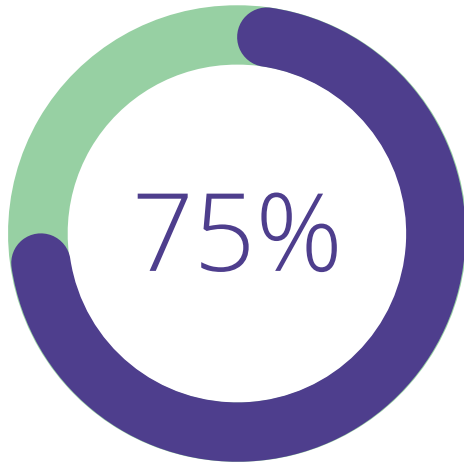


Referrals to  
therapeutic  
Services

# MEN'S MENTAL HEALTH

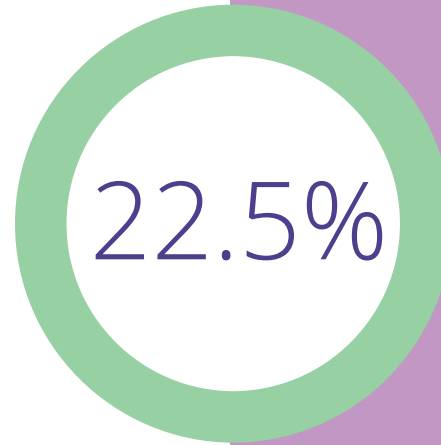


# MEN'S MENTAL HEALTH



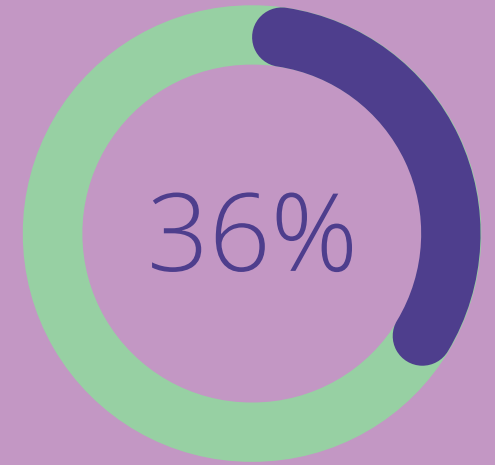
## MEN'S SUICIDE

Of the 4,912 suicides in England in 2020, 3,682 of these were male. This equates to males being 3.1 times more likely to die by suicide in England than females.



## AGE GROUP WITH HIGHEST SUICIDE RATE

828 of male suicides in England in 2020 were 45-54 years of age. This equates to 22.5 % of all male suicides,, making it the most high risk age and gender group..



## ACCESSING SUPPORT

Despite this, research shows Men are less likely to access psychological therapies than women: only 36% of referrals to NHS talking therapies are for men

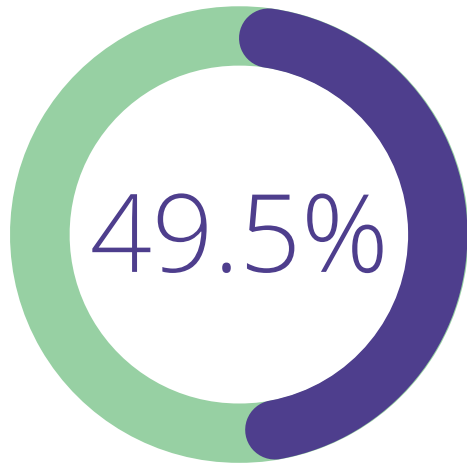
# MENS MENTAL HEALTH

## WHY DON'T MEN TALK ABOUT MENTAL HEALTH?

- SOCIETY'S EXPECTATIONS AND TRADITIONAL GENDER ROLES PLAY A ROLE IN WHY MEN ARE LESS LIKELY TO DISCUSS OR SEEK HELP FOR THEIR MENTAL HEALTH PROBLEMS.
  - MEN ARE OFTEN EXPECTED TO BE THE 'BREADWINNERS' AND TO BE STRONG, DOMINANT AND IN CONTROL.
- RESEARCH SUGGESTS THAT MEN WHO CAN'T SPEAK OPENLY ABOUT THEIR EMOTIONS MAY BE LESS ABLE TO RECOGNISE SYMPTOMS OF MENTAL HEALTH PROBLEMS IN THEMSELVES, AND LESS LIKELY TO REACH OUT FOR SUPPORT.
- MEN MAY ALSO BE MORE LIKELY TO USE POTENTIALLY HARMFUL COPING METHODS SUCH AS DRUGS OR ALCOHOL AND LESS LIKELY TO TALK TO FAMILY OR FRIENDS ABOUT THEIR MENTAL HEALTH.
- HOWEVER, RESEARCH DOES SUGGEST THAT MEN WILL ACCESS HELP THAT MEETS THEIR PREFERENCES AND IS EASY TO ACCESS, MEANINGFUL AND ENGAGING.

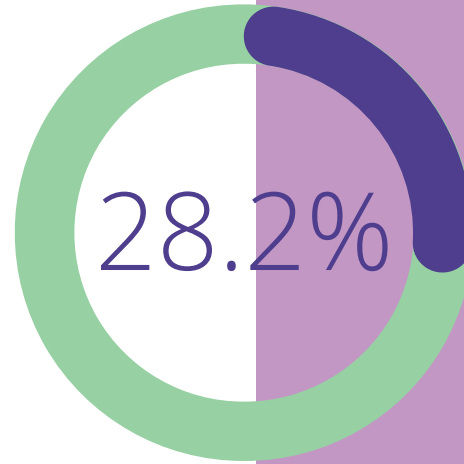
# MENS MENTAL HEALTH

## COMPANEROS SUCCESS IN WORKING WITH MALES IN CRISIS



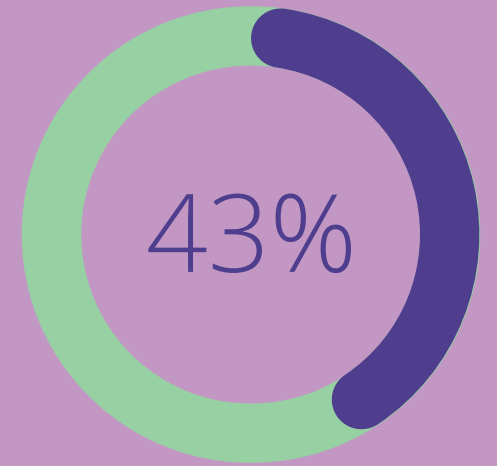
### MALE ENROLMENTS

317 out of 640 full enrolments are male.



### MOST POPULAR AGE RANGE

181 out of 640 members are aged between 45 - 54, making up 28.2% of our total membership. This is our most popular age range



### ACTIVITY ENGAGEMENT

Male members have accessed creative activities 2,651 times since September 2021, equalling 43% of the total activity engagements.

# MEN'S MENTAL HEALTH

CREATING HOPE THROUGH ACTION!

HOW CAN WE CREATE AN INCLUSIVE AND STIGMA BREAKING ENVIRONMENT FOR MEN?

- CREATE A MEMBER-LED ENVIRONMENT
  - UTILISE A MEN'S FORUM
  - CREATIVE RECOVERY
  - BREAK THE STIGMA
- PROMOTE INTER-GENDER GROUPS AND ACTIVITIES
  - TARGETED OUTREACH WORK

MEN'S MENTAL HEALTH

CREATING  
HOPE  
THROUGH  
ACTION

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LIVED  
EXPERIENCE  
NETWORK

# Mental Health & Wellbeing

Sean Bailey Wellness CIC

#HopeThroughAction





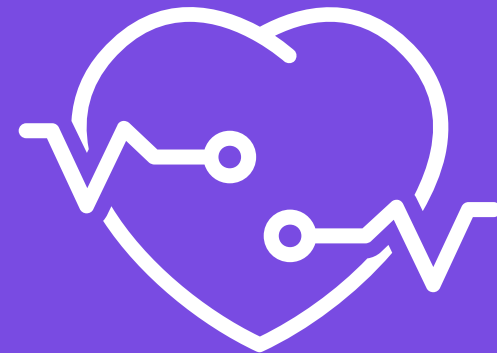


# SEAN BAILEY

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## LIVED EXPERIENCE NETWORK

- Male mental health and wellbeing - TODAY
- Personal Journey and Recovery
- Changing our behaviours and attitudes
- Protective versus reactive



# LAUNCH OF THE NEW SUICIDE PREVENTION STRATEGY FOR CHESHIRE AND MERSEYSIDE

#HopeThroughAction



**PAPYRUS**  
PREVENTION OF YOUNG SUICIDE

# INTRODUCTION

WHO WE ARE

#HopeThroughAction



# SUPPORTING CHILDREN AND YOUNG PEOPLE



**Support**



**Equip**



**Influence**

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# WHAT WE KNOW HOPELINEUK

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# WHAT WE KNOW WORKS



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# WHAT NEXT?

## CREATING HOPE THROUGH ACTION



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# 3 DADS WALKING



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# Suicide as an economic inequality issue

Mubeen Bhutta

Head of Policy, Public Affairs and Campaigns

November 2022

**SAMARITANS**

# About Samaritans

## Who we are

We are the only 24/7 suicide prevention charity working across the UK and Ireland.



We have over 200 Samaritans branches and locations across the UK and Ireland.



We are a team of around 22,000 Samaritans volunteers, around 300 staff and many thousands of supporters.

# About Samaritans

## What we do



Our helpline is open day and night, 365 days a year, for anyone struggling to cope.



We provide letter, email and online chat services for people who prefer not to call.



We work with a range of industries and organisations to increase our reach and impact.



We provide the tools and training to help people look after themselves and those around them.





# About Samaritans

## What we do



We carry out research to understand the issues around self-harm and suicide.



We work with governments to influence positive change.



We provide face-to-face support in communities, prisons, at festivals and events.



We campaign to raise awareness and make suicide prevention a priority.



# NSPA: How we can help you

## ♡ Resources

## ♡ Good practice guidance, case studies

## ♡ Connecting with others incl. online discussions, annual conference

## ♡ Lived experience Network

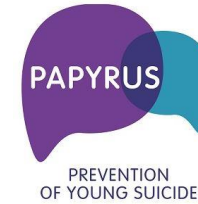
- **Online Lived Experience panel** – over 350 members. Many voices and experiences informing strategic conversations and/or areas of work
- **Lived Experience Influencers** – 34 people. Recruited, trained and supported (both as a group and individually) to influence suicide prevention work through a variety of roles and opportunities
- Ensure that purpose, roles and expectations are clearly thought through. Moving beyond story sharing...

To find out more ....

[www.nspa.org.uk/](http://www.nspa.org.uk/)  
[info@nspa.org.uk](mailto:info@nspa.org.uk)



# Some of NSPA's 1400+ members



# Risk factors

Most people who die by suicide have experienced **mental health problems**<sup>1</sup>.



Prisoners

Occupation

Middle-aged men living in the most **deprived areas** face even **higher risk of suicide**. In the least deprived areas, rates among middle-aged men are similar to other ages<sup>2</sup>.



LGBTQ+

In the UK **two in three** (72%) of people who die by suicide are not in contact with mental health services **in the year before** they die<sup>3</sup>.



Ethnicity

**Unemployed people** are 2.5 times more likely to die by suicide than employed people<sup>6</sup>.



23% of people who attempted suicide in the past year were in **problem debt**<sup>5\*</sup>.



A third (37%) of people who have self-harmed in the past year have also **attempted suicide** in that time<sup>3</sup>.



Veterans

And more.....

Bereaved by suicide





# Risk factor: Deprivation & inequality

People among the **most deprived 10%** of society are more than **twice as likely** to die from suicide than the least deprived 10% of society<sup>1</sup>.



People experiencing **poor quality housing**, inaccessible local services or a lack of jobs have an **increased suicide risk**<sup>2</sup>.



**13%** of deaths among **homeless people** are suicides<sup>3</sup>.



In England, there were an estimated **1,000 excess deaths** by suicide during the 2008–2010 **recession**<sup>4</sup>.



**23%** of people who attempted suicide in the past year were in **problem debt**<sup>5\*</sup>.



**Unemployed people** are **2.5 times** more likely to die by suicide than employed people<sup>6</sup>.



\* Problem debt refers to being seriously behind on payments for bills/credit agreements, or being disconnected by a utility's provider in the past year.

1. ONS (2017) 2. Platt et al. (2017) 3. ONS (2018) 4. Barr et al. (2012)  
5. Bond & Holkar (2018) 6. Milner et al. (2013)

All statistics refer to the UK unless otherwise specified

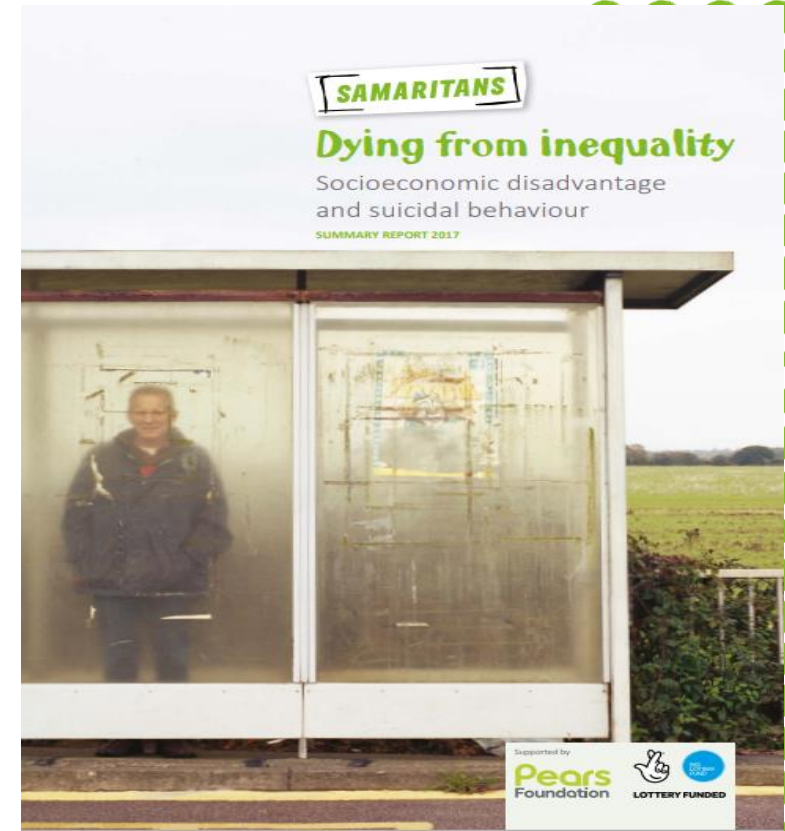
**SAMARITANS**

A registered charity



# Dying from inequality

- What a place is like and who lives there impacts suicide risk
- The most socioeconomically disadvantaged people may be less vulnerable to new economic shocks because they have fewer assets to lose
- Non-traditional work situations, such as part-time, irregular and short-term contracts can increase risk, as can lack of a sufficient safety net



# Covid and middle aged men



- Men were slightly more likely than women to raise concerns about finances or unemployment, but this affected people of all ages and genders during the pandemic.
- Men told us they feared losing their standard of living, their job, or their business.
- Men expressed serious concerns about their finances, and feelings of shame and guilt at not being able to support their families





# Covid and young people

- Young adults who experienced economic disruption in the past year were more likely to report suicidal thoughts
- They also experienced greater feelings of defeat and entrapment, key antecedents for suicidal behaviour
- The impact is not equal: this was linked to access to social support, financial support or other sources of income, pre-existing mental health conditions, and the nature of economic disruption itself.



“ My lowest point, I felt hopeless and couldn't move forward as I was not working, so no income. But I got out of this when I started a new job, and this meant I could then move forward. ”

Susie, 21, Female



# Cost of living

## 'Silent' Boris Johnson must act NOW to stop mental health tragedy, charities warn – letter in full

Today 17 leading charities have written to Boris Johnson warning that economic downturns have triggered a rise in suicides in the past – and said the government must "stop being silent".

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By **Dave Burke**, Senior News Reporter  
15:46, 25 Aug 2022 | UPDATED 16:25, 25 Aug 2022

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COMMENTS



# Our recommendations

- Levelling Up Bill used to address socioeconomic inequalities in suicide
- Join up financial support and mental health support
- Renewed ring-fenced local suicide prevention funding
- All new legislation subject to an assessment of the likely impact on suicide risk at a population, place, or individual level.





# HOPE THERAPY SERVICE: RAPID ACCESS TO BRIEF PSYCHOTHERAPY VIA A&E LIAISON

Emma Mullin: Psychotherapist  
Dr Cecil Kullu: Consultant  
Psychiatrist  
Mersey Care NHS Foundation  
Trust

# AGENDA

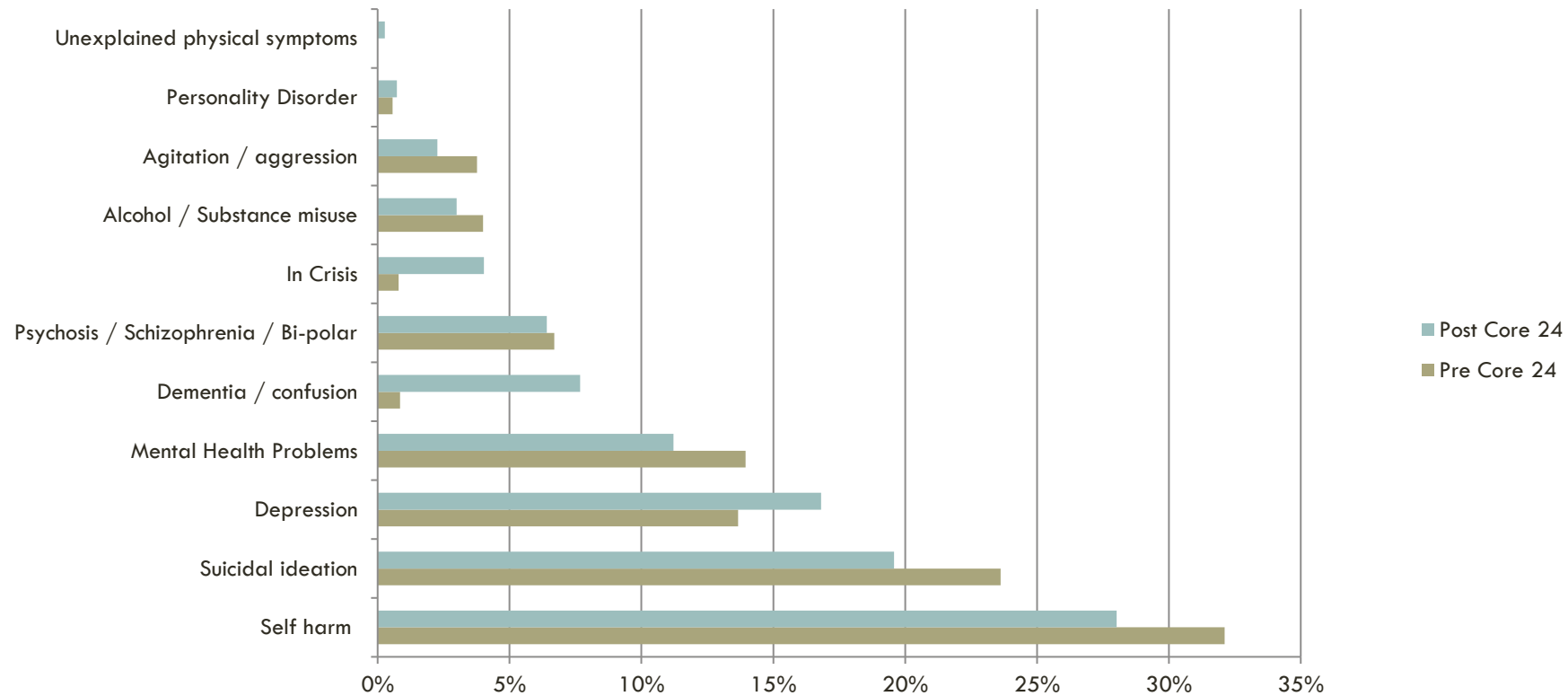
- ❖ Self Harm
- ❖ A&E Liaison Referrals
- ❖ Rationale for Therapeutic Intervention
- ❖ HOPE Therapy Service Referral Pathway
- ❖ HOPE Therapy Service (Therapeutic Models and Outcomes)
- ❖ Case Summary
- ❖ Patient Feedback
- ❖ Self Harm: Myths

# SELF HARM

- ❖ “An intentional act of self-poisoning or self-injury, irrespective of the motivation or apparent purpose of the act and is an expression of emotional distress (NICE 2014)
- ❖ Multiple self harm episodes linked to completed suicide
- ❖ 800,000 people die by suicide every year (WHO)
- ❖ General Hospital costs for self harm (Keith Hawton et al)
  - Self injury: £753
  - Self poisoning: £806
  - Self injury and poisoning: £987

# A&E LIAISON PATIENT REFERRALS

Known Patient Referral Reasons to Liaison Psychiatry Services  
Pre and Post Core 24 Implementation

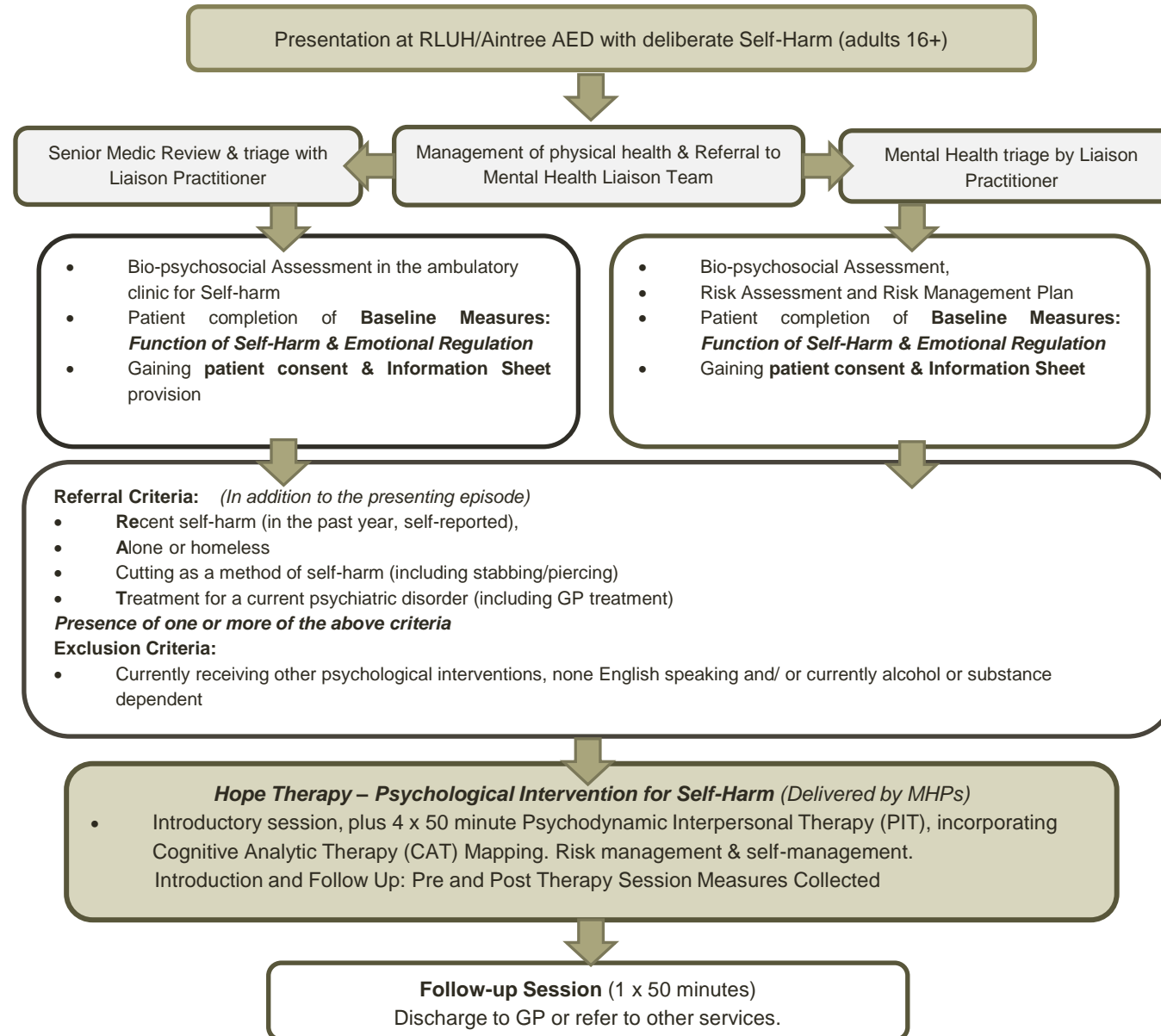


- **Self harm** and **suicidal ideation** remain the **most common reasons for referral**

# RATIONALE FOR HOPE THERAPY SERVICE

- ❖ Studies demonstrate that self harm can predict a suicide attempt over and above other well know correlates; BPD, Impulsivity, Depression (Klonsky, May & Glenn, 2013)
- ❖ Hospitals manage over 200,000 episodes of self harm annually in England alone (National Institute for Health and Clinical Excellence, 2011)
- ❖ The risk of suicide in the first year following the initial self harm presentation is 49 times greater than the general population, especially in the first 6 months (Hawton et al, 2015)

# HOPE THERAPY SERVICE: CARE PATHWAY



# HOPE THERAPY SERVICE

- ❖ Therapeutic Model: Introduction, 4 sessions of PIT+CAT, follow up session
- ❖ Referrals from the Royal Liverpool A&E: Self-Harm and/or overdose
- ❖ Delivered 1<sup>st</sup> therapy session in May 2018
- ❖ Reflections
- ❖ May 2018 – March 2022: 300+ patients fully completed their course of therapy
- ❖ Less than 10% re-attendance to A&E with self-harm
- ❖ Patients were referred back to GP (occasionally RASA)

# CASE SUMMARY

- ❖ 40 year old lady admitted with overdose of paracetamol and started on treatment with parvolex on 25<sup>th</sup> June 2018.
- ❖ Parallel Liaison psychiatry review before parvolex treatment is completed on 25<sup>th</sup> June 2018.
- ❖ Referred to HOPE therapy service and contact made by service on 26<sup>th</sup> June 2018.
- ❖ 1<sup>st</sup> session of therapy on 29<sup>th</sup> June followed by weekly sessions and completed therapy on 30<sup>th</sup> August.
- ❖ Clinically significant improvement in risk scores and depression scores on CORE 10 measures.
- ❖ Returns to work.



## PATIENT FEEDBACK

- ❖ “They told me I would be contacted very soon, and I would be seen within 2 weeks, I didn’t actually believe it though! I couldn’t believe it when Emma called the next day..” (SD 07/11/2018)
- ❖ “I have really enjoyed coming here, I was really skeptical about therapy, after bad experiences in the past, but I have felt valued and listened to” (ZM 26/04/2019)
- ❖ “I spoke about my self harm and suicidal thoughts with another therapy service and was told “we can’t work with you if you have recently self-harmed”. Emma made me feel safe and contained and I was able to talk freely about my self harm which actually helped and reduced my urge to do it” (CC 29/04/2019)
- ❖ “I really value the service you offer. It is aptly named – when I discuss it with patients, it really does engender hope” (A&E Liaison colleague, 30/04/2019)

# SELF HARM: MYTHS

- ❖ Talking about self harm increases risk of self harming
- ❖ Individuals who currently self harm are “too complex” for therapy
- ❖ Self harm is “attention seeking” or “a cry for help”
- ❖ Individuals who self harm are also experiencing suicidal ideation
- ❖ Withholding empathy and compassion in hospital settings will deter patients from re-attending (opposite appears to be more accurate)
- ❖ Many, many more....

Thank you for attending today's event  
Please complete your evaluation form.

#HopeThroughAction

Working together to improve health and  
wellbeing in Cheshire and Merseyside