

Suicide Prevention: The Portsmouth Approach

aim

To reduce the number of suicides in the city by at least 10% over the next three years, and provide support for those bereaved or affected by suicide.

background

Around 24 people take their own lives by suicide each year in Portsmouth. This is higher as a rate than the England and South East averages.

78% of these deaths were male meaning men are almost 4 times more likely to die from suicide than women, which is in line with the national trend (3.5 times more likely).

Suicide affects **children, young people and adults** – whether by taking their own life or as a person bereaved by suicide.

Nationally, suicide is a **leading cause of death** for young people aged

15–24 years

Death by suicide (both nationally and locally) is **highest in middle-aged men**, i.e.

40–44 years

Female deaths by suicide in Portsmouth have an older age profile compared with men.

42% of all female deaths aged 50+ years compared with 32% for males.

59% of those who died by suicide had seen a GP in the three months before their death

approach

self-harm

Our strategy will consider self-harm in relation to suicide risk.

evidence based

This Plan is informed by national and local evidence to identify areas of focus and inform the actions that will be needed. This includes a local suicide audit of coroner records, which is undertaken periodically to identify local need.

life-course

This Plan looks at suicide prevention across the life stages, from children and young people to adults.

partnership working

Suicides are not inevitable. There are many ways in which services, communities, individuals and society as a whole can help to prevent suicides. A key message learned from practice and research is that collaborative working is key to successful suicide prevention.

prevention and early intervention

The Plan supports taking early action across a range of settings to prevent individuals from reaching the point of personal crisis where they feel suicidal. Portsmouth Suicide Prevention Partnership, a multi-agency partnership group, will oversee the delivery of this Plan.

risk and protective factors

Suicide is complex, risk can change with circumstance, what is a risk or protective factor for one person may not be the same for another in similar circumstances.

local risk factors

- **Men**, particularly middle-aged men and young men aged 18-19 years.
- **People with a mental health diagnosis**, especially depression – both those in the care of mental health services and those not in current treatment. For those in treatment high risk periods include the first 3 months (and especially first 2 weeks) post-discharge from acute mental health services (i.e. hospital).
- **People experiencing:**
 - **Chronic pain, disability or other physical health status** (the most commonly occurring “life event” identified by the Portsmouth Suicide Audit)
 - **Relationship difficulties**
 - **Unemployment and/or financial difficulties**
 - **Housing difficulties and/or social isolation** i.e. homelessness/living in a hostel/living alone

- **Bereavement**
- **People with a history of self-harm or of attempting to die by suicide.**
- **People that have been a former prisoner/convicted of crime**
- **People with a history of alcohol and/or substance misuse**
- **People that have experienced violence and/or abuse.**

national risk factors

The same as local with the addition of:

- Children in care / care leavers
- Young people in the justice system
- Veterans

National guidelines recommend a tailored approach to improve the mental health and suicide risk of the following groups:

- People who are lesbian, gay, bisexual (LGB) or gender reassigned.
- Black and Minority Ethnic (BME) groups and asylum seekers.

protective factors

Individual-level protective factors:

- Hopefulness
- Problem-solving skills
- Being in control of behaviour, thoughts, emotions

Societal-level protective factors:

- Reduction of poverty

Psychosocial-level protective factors:

- Social support
- Connectedness
- Supportive school environments

Positive reasons for living:

- Personal relationships
- Children
- Self-empowerment
- Personal success
- Full and active life

Compared to England, Portsmouth has

Higher rates for these risk factors:

- Separated or divorced
- People living alone
- Homelessness
- Children who are looked after / leaving care / in the youth justice system
- Alcohol related hospital admissions
- Estimated prevalence of opiates or crack cocaine

Similar rates for these risk factors:

- Severe mental illness
- Self-reported happiness and anxiety scores
- Older people living alone
- Unemployment

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For more information on mental health in Portsmouth, visit: www.portsmouth.gov.uk/mentalhealth

action areas

By combining the national and local evidence base, we've identified seven key areas for action to help us achieve our aim:



Achieve city wide leadership for suicide prevention



Reduce the risk of suicide in key high-risk groups



Tailor approaches to improve mental health in specific groups



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



Support research and data collection