

CAMDEN JSNA: FOCUS ON

SUICIDE

NOVEMBER 2017

Suicide is not inevitable, it is preventable, but the causes are complex and the impacts are wide reaching. The most obvious direct impact is the loss of an individual life, however suicide has impacts that reach much further: on bereaved family, friends and colleagues and traumatized wider communities. Suicide often represents the end point of a complex history of risk factors, distressing events and adversity. Unlike some causes of death, suicide is not the result of a single disease process or cause. It is sometimes the consequence of a mental health condition, but may also be a response to serious physical illness, pain, loss of independence or quality of life, or a range of socio-economic problems. To prevent suicides requires a combination of approaches across a wide system, developing resilience and addressing risk at different levels through a broad spectrum of interventions. These need to take account of local population characteristics, social, cultural and socioeconomic circumstances, together with intelligence on other local risk factors, such as high risk locations.

Characteristics of an effective local prevention strategy

- Effective suicide awareness and response among key organisations
- A co-ordinated community response to a completed suicide
- Reduced mental health stigma
- Sensitive and safe media reporting and depiction of suicide
- Effective local intervention i.e. whole systems approach
- Promotes protective factors and reduces risk factors for suicide
- Effective clinical practices
- Effective and co-ordinated communication and information systems
- A focus on prevention in children and young people

Local priorities

- Governance & communication to support the strategy
- Improved surveillance and data collection
- Postvention support
- Prevention measures targeting specific groups
- Training in suicide prevention
- Review of local media reporting

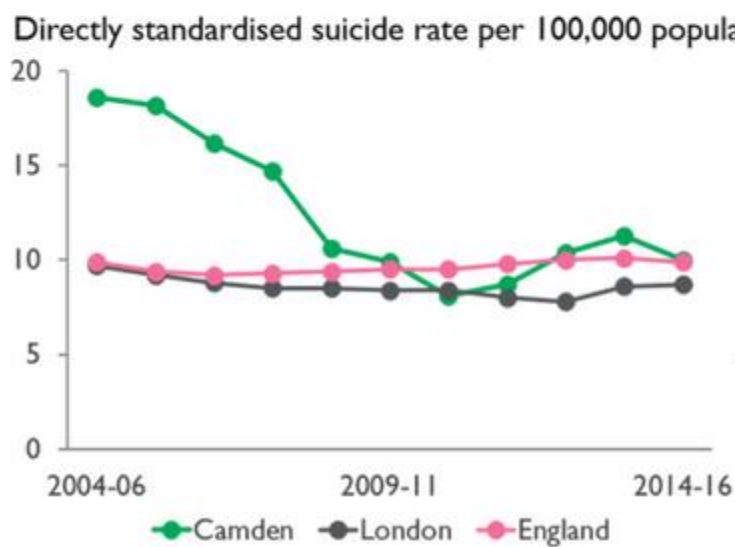
National & local strategies

- No Health without Mental health (2011)
- Preventing suicide in England (2012) (2017)
- Suicide by children and young people in England (2016)
- Review of Suicide Prevention Pathways in Camden & Islington (2015)

SUICIDE

The Camden picture

Key demographics



Suicide is relatively rare:
in the 3 year period
between 2014-16, there
were 19 suicides per
annum in Camden

There has been a
46% decrease
in the suicide rate
equating to 11 fewer
deaths per year from
suicide in Camden
residents, compared with
10 years earlier

Risk factors^{3*}

Substance misuse
Misuse of alcohol and
drugs are more frequent
in patients who die by
suicide



Isolation
Being a victim of bullying
or having few close
relationships increases
risk of suicide



Self-harm
More patients who die by
suicide have recently
self-harmed



Economic adversity
Increasing unemployment,
debt and homelessness



70% of deaths were in **men**
This is 5% lower than in London and
England²



The highest
rate of death
nationally was
in those aged

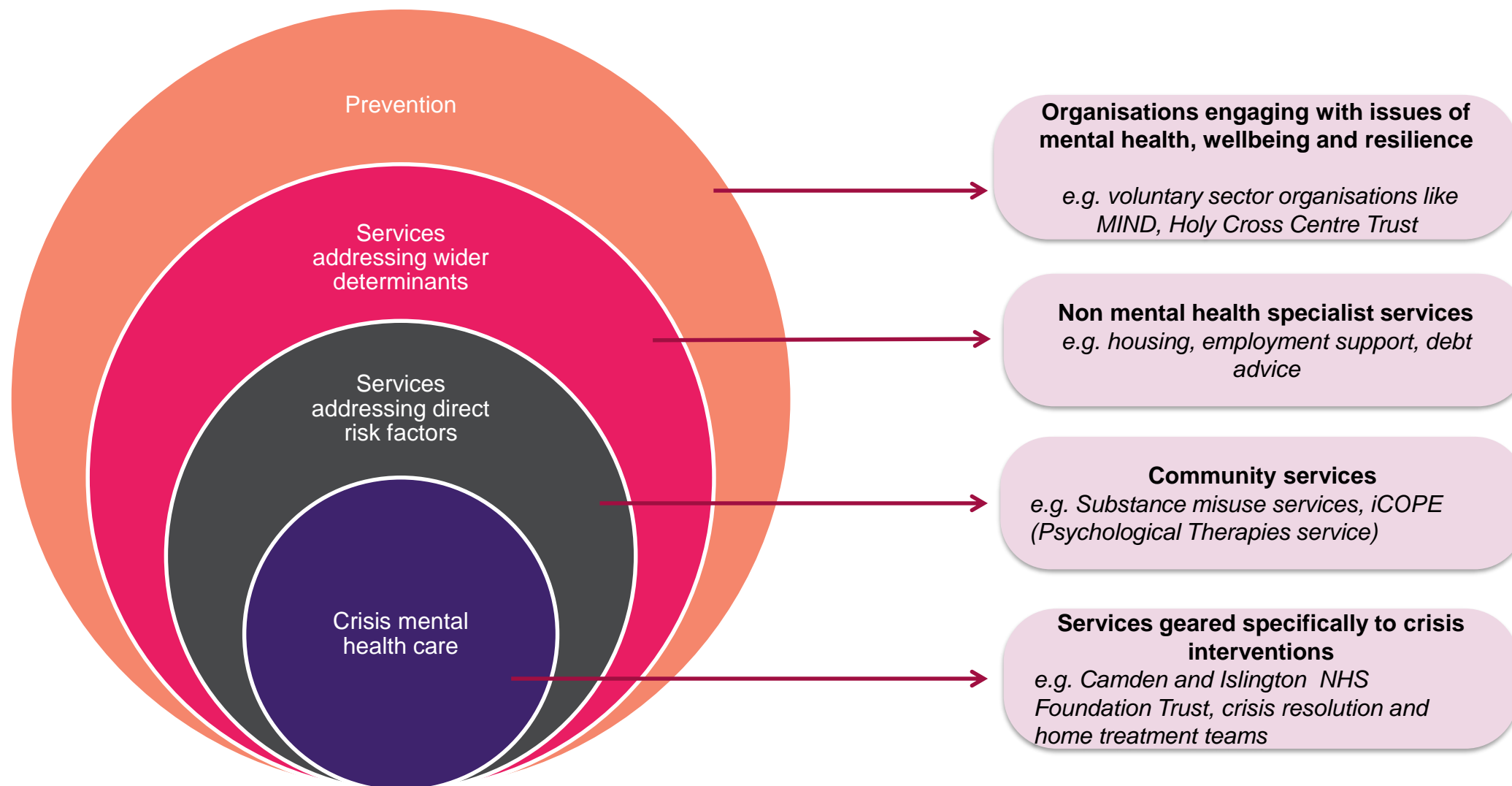
45-59^{1*}



Men and women born in the Republic
of **Ireland** appear to be over-
represented among local deaths²

LOCAL SERVICES

An effective suicide prevention strategy needs to address risk and resilience across a broad range of services and resources



- Further information on this topic, and previous outputs and reports used to inform this fact sheet can be found at the following locations:

REFERENCES

Data source

1. Public Health England (2017) based on Office for National Statistics (ONS) data source
2. ONS local mortality dataset (2015)
3. University of Manchester, *Making Mental Health Care Safer: Key findings from NCISH Annual Report and 20 year Review* (2016) http://research.bmh.manchester.ac.uk/cmhs/research/centreforsuicideprevention/nci/reports/Infographics_2016.pdf

Further reading

- HM Government. *No Health Without Mental Health* (2011) <https://www.gov.uk/government/publications/the-mental-health-strategy-for-england>
- HM Government. *Preventing suicide in England* (2012) https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/430720/Preventing-Suicide-.pdf
- HM Government. *Suicide prevention: third annual report* (2017). <https://www.gov.uk/government/publications/suicide-prevention-third-annual-report>
- University of Manchester, *Suicide by children and young people in England. National Confidential Inquiry into Suicide and Homicide by People with Mental Illness (NCISH)* (2016) http://research.bmh.manchester.ac.uk/cmhs/research/centreforsuicideprevention/nci/reports/cyp_report.pdf
- Samaritans. *Suicide prevention report* (2017) https://www.samaritans.org/sites/default/files/kcfinder/files/Suicide_statistics_report_2017_Final.pdf
- Samaritans <https://www.samaritans.org/>

About Camden's JSNA

CamdenData brings together information held across different organisations into one accessible place. It provides access to evidence, intelligence and data on the current and anticipated needs of Camden's population and is designed to be used by a broad range of audiences including practitioners, researchers, commissioners, policy makers, Councillors, students and the general public.

This factsheet was produced by Ester Romeri, Intelligence and Information Analyst; Sophia Struszczyk, Assistant Public Health Strategist and Tanvi Barreto, Public Health Strategist and approved for publication by Jane Brett Jones, Senior Public Health Strategist.

Contact: JSNA@camden.gov.uk