Symposium proposal: Implementation of suicide prevention actions across European

countries with different levels of development of suicide prevention systems

In this symposium, four presentations explore the implementation of suicide prevention

actions across European countries with different levels of development of suicide prevention

systems while reflecting how the implemented actions are connected to adopted or prepared

public-policy documents (e.g. national/regional strategies, programs, action plans).

**PRESENTATION 1** 

The challenge of implementation of suicide-prevention-actions across European countries

Alexander Grabenhofer-Eggerth, Joy Ladurner, Austrian National Public Health Institute;

Alexandr Kasal, National Institute of Mental Health, Czech Republic; Eva Tušková, Ministry of

Health, Czech Republic.

This presentation aims to provide an overview of the status quo of structured

national/regional suicide-prevention activities in selected European countries while bringing

together research and public health perspectives. It will introduce the topic and set the scene

for further presentations. It draws on the outcomes of JA ImpleMENTAL, a major EU-funded

Joint Action (2021-2024) with suicide prevention as a key focus. The input will include a cross-

country overview, detailing the common and individual challenges of the 17 countries

participating in the project. It aims to show how different policy frameworks (e.g. the

existence of national strategies) can influence the status quo i.e. development of suicide-

prevention systems, specifically the implementation of suicide-prevention actions.

PRESENTATION 2

A Suicide Prevention Strategy for Malta

**Theme:** Suicide Prevention Strategy

Keywords: Suicide, Standardized Suicide Rate, ImpleMENTAL, Mental Health Services

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**Background:** Goal 3 of the Sustainable Development Goals (SDGs), and the Mental Health Strategy for Malta 2020-2030, put an obligation on the Maltese Mental Health Services (MHS) to draft a National Suicide Prevention Strategy thus filling in the existing void. Malta's participation in ImpleMENTAL has provided the ideal milieu for this to become a reality.

**Epidemiological data:** Malta has experienced a rapid rise in its resident population, increasing by 100,000 over the past 10 years. Malta remains the most densely populated country in the EU with 1,649 residents per square kilometre (*Census of Population and Housing 2021: Preliminary Report*, 2022).

The total number of suicides from 1995 to 2018 in the Maltese Islands was 635 (Renaud, 2019). The standardized suicide rate for 2021 in Malta was of 6.51/100,000 peaking in 2014, with a standardized rate of 8.15/100,000. Over a five-year period, from 2017 till 2021, there were 83 suicides reported, with the ratio of male to female being 9:1 (*Directorate of Health Information and Research Malta*).

Situation Analysis: Malta is well placed to embark on this journey since the national mental health service is governed by the Mental Health Act (2012) and the Mental Health Strategy (2019). Services are provided through multi-disciplinary teams, with professionals having a sound knowledge base and receiving continuous professional education. Mental Health Services have a ring-fenced budget amounting to 6.83% of the national health budget (2022). There is universal coverage for psychiatric care and psychotropic drugs for persons who have the statutory rights. Some challenges experienced by the Mental health Services are the lack of a dedicated national mental health information system, absence of suicide or self-harm registry, and no postvention and gatekeeping services.

Malta's rapid socio-cultural changes with an influx of foreign workers, have put an added strain of an already overstretched mental healthcare system. Services being provided need to respond to changing needs of the population.

# Proposed key elements of the National Action Plan for Suicide Prevention

- Increasing recognition of suicide risk
- Improving mental health awareness and literacy
- Eradicating Stigma
- Reducing access to means
- Improved data including risk of suicide and self-harm
- Coordination and collaboration among multiple sectors of society within and outside health

**Conclusion:** ImpleMENTAL has provided the right platform for the sharing of knowledge, best practices and providing the right support for Malta to achieve another milestone - a National Suicide Prevention Strategy.

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#### PRESENTATION 3

## The Spectrum of Suicide Prevention Activities in Slovenia

Matej Vinko, Saška Roškar, National Institute of Public Health, Slovenia

This presentation focuses on suicide prevention activities in Slovenia, specifically using the Universal Suicide Intervention (USI) classification within the context of the National Mental Health Programme 2018-2028 (NMPH). The USI classification provides a structured framework for identifying and addressing suicidal behaviour. The presentation highlights the importance of early intervention and identification of risk factors, as well as the need for collaboration among healthcare providers, mental health professionals, and community organizations. The NMPH aims to reduce the prevalence of mental health problems, including suicide, through increased awareness, education, and access to services. The presentation also discusses the challenges faced in implementing suicide prevention activities and the importance of ongoing evaluation and adaptation of these programs.

### **PRESENTATION 4**

Successes and challenges in implementing suicide prevention strategy across multiple sectors in Ireland.

John Meehan, HSE Assistant National Director Mental Health Planning, and Head of National Office for Suicide Prevention (Ireland)

Connecting for Life is Ireland's National Strategy to Reduce Suicide. It is a complex all-of-government strategy accountable to the Cabinet Committee on Social Policy and Public Services. It contains 69 strategic actions which are assigned to 20 different government departments/agencies. Implementation of the national strategy is supported by 10 local

action plans and thirty non-governmental organisations receive funding as part of the strategy.

The strategy was launched in 2015 as an all-of-government suicide prevention framework with (for the first time) commitments from government departments and agencies outside of the health sector. Following an interim strategy review by an expert group, in 2019 Connecting for Life was extended to 2024.

The National Office for Suicide Prevention (NOSP) — within the HSE Irish Health Services - is tasked with driving the implementation of CfL. It has an annual budget of approximately €13m. The office draws on data from the Central Statistics Office, The Irish Probable Suicide Deaths Study (IPSDS) and the national self-harm registry.

This presentation will look at the Irish experience of implementing the strategy, and explore key collaborative partnerships in the areas of education and training, research and evaluation, data improvement and communications.