

<b>Institution: The University of Edinburgh</b>
<b>Unit of Assessment: 22 Social Work and Social Policy</b>
<b>Title of case study: 3: Contributing research evidence to support the reduction of suicide in Scotland</b>
<p><b>1. Summary of the impact</b></p> <p>Epidemiological and evaluation research conducted at the UoE has enhanced understanding of risk and protective factors for suicide and self-harm, the relative importance of compositional and contextual effects in explaining suicide inequalities, the unequal distribution of suicide risk in the population and the effectiveness of the national suicide prevention strategies in Scotland and elsewhere. Research findings have been effectively disseminated and have informed the development, implementation and sustaining of evidence-informed suicide prevention programmes and activities in Scotland, resulting in a fall of 18% (from 17.5 to 14.8 per 100,000 population 15+ years) in the suicide rate in Scotland during 2000-2012.</p>
<p><b>2. Underpinning research</b></p> <p>Platt (at Edinburgh since 1995) has collaborated with Chandler (2010), and with O'Connor (University of Glasgow), Stark (NHS Highland) and McLean (Mental Health Foundation), on a suite of inter-related research studies which have been intended to enhance understanding of suicide and self-harm and support the development of more effective suicide prevention policy and practice.</p> <p><i>Risk and protective factors for suicide</i></p> <p>A systematic review of the literature on risk and protective factors for suicide and suicidal behaviour (McLean et al 2008), commissioned by the Scottish Executive, identified key risk factors for suicide, including mental illness, attempted suicide and substance misuse, and key protective factors, including coping skills, reasons for living, family connectedness, social support, religious participation and employment. Evidence assembled in the review suggested that those involved in suicide prevention policy should consider identifying multi-strategies to strengthen protective factors, such as increasing problem solving capabilities in individuals whilst promoting the development of supportive family and school environments.</p> <p><i>Socio-economic inequalities in suicide: evidence and implications for suicide prevention policy and practice</i></p> <p>An analysis of suicide in Scotland over the period 1989-2002 found that both low social class (individual-level) and socio-economic deprivation (area-level) were associated with increased suicide risk; but the influence of social class was far stronger than that of socio-economic deprivation in accounting for suicide-related inequality (Platt et al 2007; Platt 2011). The cumulative research evidence (including the findings of this study) suggest that national suicide prevention strategies need to apply an equity lens (focusing on a reduction in socio-economic inequalities in suicide risk) but many policy challenges need to be resolved, including the strategic approach to inequality reduction, whether people and/or places are to be targeted, and the identification of interventions (policies, activities) that are likely to be effective in reducing socio-economic inequalities in suicide risk (Platt, 2011).</p> <p><i>Evaluation of suicide prevention policy intervention</i></p> <p>Choose Life, the National Strategy and Action Plan to Prevent Suicide in Scotland, was launched in December 2002. Platt was commissioned to lead an independent evaluation of Choose Life by the Scottish Executive in 2004. The evaluation report (<a href="http://www.scotland.gov.uk/Publications/2006/09/06094657/22">http://www.scotland.gov.uk/Publications/2006/09/06094657/22</a> or <a href="http://tinyurl.com/o8e7o3k">http://tinyurl.com/o8e7o3k</a>) identified several challenges which have been addressed subsequently at both national and local levels (see below).</p> <p><i>Scottish Suicide Information Database (ScotSID)</i></p> <p>The database is intended to provide a central repository for information from several official</p>

sources on all probable suicide deaths in Scotland in order to support epidemiology, preventive activity and policy making. Platt was a member of the ScotSID Steering Group from its inception (2008) and appointed Chair in 2012. He was editor of its most (2012) recent report (<http://www.isdscotland.org/Health-Topics/Public-Health/Publications/2012-12-18/2012-12-18-ScotSID-2012-Report.pdf> or <http://tinyurl.com/pvq4xzs>) which was referenced in the Scottish Government's suicide prevention Engagement Paper (<http://www.scotland.gov.uk/Topics/Health/Services/Mental-Health/Suicide-Self-Harm/Working-Group/EngagementPaper> or <http://tinyurl.com/o9m479p>). The report shows that those who die by suicide in Scotland have had extensive contact with health care services and that there is an association between serious self-harming and subsequent death by suicide. ScotSID findings have been used to inform the development of Scotland's refreshed suicide prevention strategy.

### 3. References to the research

Platt S (2011) Inequalities and suicidal behaviour. In: R O'Connor, S Platt, J Gordon (eds.) International handbook of suicide prevention: research, policy & practice. Wiley Blackwell: Chichester, 211-234. (Key international handbook widely used by academics, policy makers and practitioners working in suicide prevention). Available via REF2.

Platt S, Pavis S, Sharpe M, O'May F (2005) Contextual effects in suicidal behaviour: evidence, explanation and implications. In: K Hawton (ed) Prevention and treatment of suicidal behaviour. Oxford University Press: Oxford, 53-70, available from HEI.

Platt S, Hawton K (2000) Suicidal behaviour and the labour market. In: K Hawton, K van Heeringen (eds.) International handbook of suicide and attempted suicide. John Wiley and Son: London, 309-384. (Key international handbook widely used by academics, policy makers and practitioners working in suicide prevention.). Available from HEI.

McLean J, Maxwell M, Platt S, Harris F, Jepson R (2008) Risk and protective factors for suicide and suicidal behaviour: a literature review. Scottish Executive Social Research: Edinburgh. <http://www.scotland.gov.uk/Publications/2008/11/28141444/0> or <http://tinyurl.com/p5njbtk>

Platt S, Boyle P, Crombie I, Feng Z, Exeter D (2007) The epidemiology of suicide in Scotland 1989-2004: an examination of temporal trends and risk factors at national and local levels. Scottish Executive Social Research: Edinburgh. <http://www.scotland.gov.uk/Publications/2007/03/01145422/20> or <http://tinyurl.com/qjnestp>

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Platt, S (Co-I), 'Using routinely collected data from suicide clusters to influence social and health care service delivery: an investigation of the Bridgend suicide cluster', funded by the Welsh Assembly Government Research Funding Scheme, 2010-2013, £110k.

Platt, S (PI), 'Why does Scotland have a higher suicide rate than England? An area-level investigation of social, health status & healthcare factors', funded by the Chief Scientist Office, 2009-2011, £169k.

Platt, S (PI), 'Evaluation of the first phase of 'Choose Life' (Scotland's national strategy and action plan to prevent suicide)', funded by the Scottish Executive, 2004-06, £190k.

### 4. Details of the impact

To set the context, prior to 2008, Platt's research contributed to the change in perception in Scottish Government (ministerial level and civil service) about the burden of suicidal behaviour on Scottish society, and the urgent need to develop a comprehensive national suicide prevention strategy and action plan (Choose Life, published December 2002). Platt was involved in two research projects and an evaluation of phase one of Choose Life, all three studies commissioned by the Scottish Government (Platt et al 2007, McLean et al 2008 [see section 2 above]; <http://www.scotland.gov.uk/Publications/2006/09/06094657/22> or <http://tinyurl.com/o8e7o3k>). The

Scottish Government gave an enthusiastic welcome to the findings of the evaluation of Choose Life and accepted most of the conclusions and recommendations:

<http://www.chooselife.net/Publications/publication.aspx?id=40> or <http://tinyurl.com/pkokadk>

Since 2008, and thus within the REF period, strategic planning by the Scottish Government and action by local authorities has reflected the epidemiological evidence and evaluation findings of the research conducted by Platt and colleagues, resulting in particular in:

- The improved integration of clinical services (mental ill-health and substance misuse) into the broader public health approach to suicide prevention;
- The clarification of best practice with regard to the prevention and treatment of 'high risk' self-harm;
- The task of building a more strategic, mainstreamed and sustainable approach to suicide prevention at the local level;
- The improvement of national and local connections with delivery in primary care around recognition of, and effective response to, mental health problems, particularly depression;
- The delivery of a more strategic and targeted approach to training in suicide prevention; and tackling socio-economic inequalities in suicidal behaviour.

(See statements from the Scottish Government [5.1], NHS Health Scotland [5.2] and Samaritans [5.3].)

Platt served on the Scottish Government's National Suicide Prevention Working Group (2009-10) and contributed to the development and writing of the final report. This report proposed a more focused and streamlined set of objectives to inform work for the remaining period of the strategy. ("Refreshing the national strategy and action plan to prevent suicide in Scotland. Report of the National Suicide Prevention Working Group").

<http://www.scotland.gov.uk/Publications/2010/10/26112102/13> or <http://tinyurl.com/nlxjk4d>

Platt also served on the Scottish Government's National Self-harm Working Group (2009-10) and contributed to the writing of the final report, which was issued as a consultation document ("Responding to self-harm in Scotland"). This report set out objectives and principles for the development of appropriate services to reduce self-harm.

<http://www.scotland.gov.uk/Resource/Doc/346117/0115190.pdf> or <http://tinyurl.com/q25op4e>

In January 2011 Platt was invited to join the National Suicide and Self-harm Monitoring and Implementation Group, which was tasked "to oversee the monitoring and implementation of agreed commitments at both the national and local levels with regards to both suicide and self-harm"; and "to develop an agreed monitoring framework for the delivery of the Choose Life strategy as well as progress in reducing suicide." Platt has contributed to both these objectives. In 2012 he submitted a report on the 'Development of a framework to capture and monitor trends in completed suicide and its determinants in Scotland, 1979-2010', which had been commissioned by Scottish Government.

"The research was presented to a range of Scottish Government policy makers, health professionals and others on 25 January 2013. This research has directly influenced discussions during our engagement process [see above]; among other things, it has highlighted the need to identify appropriate policy interventions to reduce female suicides and to fully understand the different drivers for male and female suicides within Scotland" (Geoff Huggins, Deputy Director, Mental Health & Protection of Rights Division, Scottish Government). [5.1]

Subsequently the Scottish Government established a Working Group to oversee the generation of a new strategy for the prevention of suicide and self-harm which is due to come into effect in late 2013 (successor to Choose Life). Platt is one of only two researchers who have been invited to join the Working Group. His research findings on the epidemiology of suicide and self-harm in Scotland, and the monitoring framework he has devised (see above), together with earlier research on the effectiveness of Choose Life, were incorporated into an 'engagement paper' (published February 2013) which was used to consult with practitioners on the scope and contents of the new strategy.

(<http://www.scotland.gov.uk/Topics/Health/Services/Mental-Health/Suicide-Self-Harm/Working-Group/EngagementPaper> or <http://tinyurl.com/o9m479p>)

“We are aware that, in developing its engagement paper for the Scottish suicide and self-harm prevention strategy 2013-2023, Scottish Government consulted and referenced Professor Platt’s research into: effective interventions to prevent suicide and self-harm in Scotland; inequalities and suicidal behaviour; the prevalence of self-harm in Scotland; [and] the impact of the current ‘Choose Life’ strategy and action plan to prevent suicide in Scotland” (Samaritans [5.3]).

The Scottish Government, NHS Health Scotland and Samaritans have acknowledged that the findings of Platt’s research studies have had a major impact on the development, implementation and sustaining of evidence-informed suicide prevention programmes and activities in Scotland, which have contributed to a fall of 18% in the country’s suicide rate over the period 2002-12 [5.1, 5.2, 5.3].

#### **5. Sources to corroborate the impact**

5.1 Statement by Deputy Director, Mental Health & Protection of Rights Division, Scottish Government (dated 28 August 2013)

5.2 Statement by Programme Manager (Choose Life), NHS Health Scotland (dated 2 September 2013)

5.3 Statement by Samaritans Executive Director, Scotland (dated 23 September 2013)