World Mental Health Day:
Suicide prevention

Policy recommendations

Good mental health is crucial for people's wellbeing. We need it to have productive and happy lives, to actively participate in society and the economy, to accomplish our goals and to succeed in all areas of life.

However, at least one in six people (approximately 84 million people) in the EU have mental health problems. In 2015 alone, over 84 thousand people died due to mental health problems and suicide in Europe.[1] Worldwide, suicide is responsible for over 800 thousand deaths every year.[2] For every suicide, 25 other people make a suicide attempt, and countless more have serious thoughts of suicide. While suicide can occur at any moment in life, data concerning young people are particularly alarming, with suicide being the second leading cause of death among 15 -29-year-olds globally.[3] Suicide and suicide attempts impose a considerable cost on society. More importantly, they represent a dramatic loss of lives and take a tremendous toll on relatives, significant others, and attempt survivors.

The economic and societal burden of suicide in Europe

Suicide and suicide attempts are a major personal and family tragedy. They also have an impact on health systems, social security, employment and productivity. The Finnish Presidency of the Council of the EU draws attention to the fact that people's wellbeing is key to growth and socio-economic stability.[4] Across EU countries, lost income and employment due to mortality from mental health problems and suicide is estimated at €22 billion per year. If all those who died prematurely had been employed until the age of 65, the potential savings would amount to 0.15% of GDP across the EU as a whole (circa €27 billion).[5]

The psychosocial model of mental health

While acknowledging the link between economy, productivity, growth and well-being, the human dimension and the EU commitments to human rights should not be overshadowed by economic aspects.[6] Mental Health Europe applies a psychosocial approach to mental health.[7] It means looking at a person's life and social environment as factors that are important in understanding well-being and mental ill-health. We believe that mental health difficulties, including those leading to suicide attempts, are the results of a multitude of factors that go beyond purely biological aspects to encompass psychological, social and cultural drivers of mental health.

1   OECD, Health at a Glance: Europe 2018
2   International Association for Suicide Prevention
3   World Health Organisation

4   Increased wellbeing and economic growth through the economy of wellbeing
5   OECD, Health at a Glance: Europe 2018
6   MHE's reaction to the Draft Council Conclusions on the Economy of Well-being
7   Mental Health Europe

Comprehensive multisectoral approaches work best

The challenges presented by the heterogeneity of determinants of mental (ill) health can only be overcome by a committed governmental approach to suicide prevention that facilitates collaboration amongst a variety of sectors such as health, education, employment, urban development, welfare, and justice. Successful suicide prevention also relies on concerted action and involvement of people and their families, friends, co-workers, and community members. There is also the need for a holistic, human rights-based approach to community health and social support services that responds to the unique needs of each individual.

Policy recommendations to the EU

Suicides are preventable. In the Sustainable Development Goals for 2030, suicide is a proposed indicator for health target 3.4. This implies reducing "by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being".[8] However, only 10 EU countries are known to have a national prevention strategy in place.[9] **We need governments to act, and the EU to take the lead in paving the way to efficient suicide prevention. We call on the European Union to support Member States and to coordinate the following actions:**

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8 Sustainable Development Goals
9 National suicide prevention strategies: progress, examples and indicators

Development and implementation of national prevention plans and strategies

1 Encourage national governments in Member States to establish clear action plans and prevention strategies to tackle suicide and suicide attempts, ensuring wide cooperation of health and non-health actors.

2 Invest in programmes targeted at families and high-risk groups (e.g. unemployed, migrants, LGBT, people with chronic diseases).

3 Protect people with depression or a history of attempted suicide from being made redundant and support their return to work.

Awareness raising, education and fighting stigma

1 Incorporate proven suicide prevention strategies into national health and education programmes.

2 Promote responsible reporting on suicide events, including data quality and registration.

3 Promote collaboration between educational and labour sectors for better public education and mental health education in schools, including promoting a culture of openness and acceptance of diversity.

4 Support the dissemination of evidence-based information to decision makers and the general public.

Exchange of good practices

1 Incorporate suicide prevention practices and screening into general healthcare.

2 Restrict access to the means for suicide.

3 Ease access to community support such as e-tools, helplines and drop-in centres in the time of crisis. Services must be able to deal with the multitude of factors – biological, psychological, social and cultural – that underlie suicidal ideation. They must value the lived experience of people, recognising them as experts in their own lives.

Strengthening communities

1 Promote mental health first aid training in communities for non-health workers.

2 Encourage the organisation of self-help groups in local communities.

3 Invest in integrated services bringing together all key actors, including (ex) users of mental health services, healthcare professionals, peers, police, community members, and others.

These recommendations are built on the conclusions of the Joint Action on Mental Health and Well-being (2015) and Preventing suicide: a global imperative, WHO (2014). To access this file electronically, go to www.mhe-sme.org/WMHD19