

2022 Match Summary

Name of Match: **Match #889 Comprehensive Approaches to Suicide Prevention**

Location of Match: **Virtual**

1. Describe the **purpose** of the match: (Maximum 500 words)

Five match calls took place from October 3rd to October 7th, 2022. The purpose of the match calls was to answer the following questions:

Under the wrong circumstances anyone can find themselves experiencing suicidal thoughts. Every year 703 000 people die by suicide, many more either attempt or struggle with thoughts of suicide, and many, many more are bereaved by suicide. Suicide is a serious public health problem; however, suicides are preventable with timely, evidence-based and often low-cost interventions. Building on previous matches held in Vancouver, Sydney, Stockholm and Washington DC, this group discussed the evidence emerging from a variety of comprehensive, multi-sectoral, community-based suicide prevention initiatives. The match participants discussed implementation and evaluation approaches, including with respect to improving data collection and surveillance and other infrastructure supports. Participants had the opportunity to highlight their suicide prevention efforts, with a focus on recent evidence from community-based initiatives, and including a focus on priority populations, including but not limited to Indigenous peoples, visible minorities, persons with disabilities and members of the 2SLGBTQ+ communities.

The match was organized in four key sub-themes to focus the discussions a bit further.

International response to COVID-19, inflation, and the Mental Health Crisis. The goal of this theme was to understand the global impact of the COVID-19 pandemic on the mental health of individuals, specifically as it relates to suicidal ideation and suicide attempts. Match participants discussed specific impacts on vulnerable populations, the impact on mental health as it is impacted by social determinants of health, and international responses to mitigate the negative impact on mental health.

3-digit suicide crisis lines and community-led helplines. The goal of this theme was to learn from countries who have successfully implemented a 3-digit suicide crisis lines and/or community-led helplines. Match participants discussed what role different stakeholders [communities, public health, private partners, education, health authorities, policy, research, lived experiences, etc.] play in the successful implementation of a 3-digit suicide crisis lines and/or community-led helplines and its impact on suicide.

National Strategies and Action Plans, with a specific emphasis on countries that have shown a reduction in the impact of suicide through evaluation. The goal of this theme was to provide match participants with examples of national suicide prevention strategies/action plans as well as discuss the impact of implementing these suicide prevention strategies/action plans on suicide. Guest speakers provided match participants with information as to the roles different stakeholders play in the successful implementation of the strategies/action plans as they think about implementing suicide prevention initiatives in their context.

Data and Surveillance. The goal of this theme was to understand how other countries are tracking and monitoring suicide related data while keeping privacy, cultural sensitivity, and confidentiality in mind. Match participants discussed the importance of including lived experience perspectives during the tracking and monitoring suicide related data as well as during postvention efforts.

2. Describe the **leaders** who participated in the match (for example, were some of them peers, youth, family/caregivers, practitioners, policy makers, clinicians? Were they from community settings, government, NGOs, clinical settings?): (Maximum 500 words)

Canada

- **Nitika Rewari** - Director, Prevention and Promotion Initiatives, Mental Health Commission of Canada
- **Isabel Giardino** - Manager, Public Health Agency of Canada
- **Niki Legge** - Director, Mental Health and Addictions, Government of Newfoundland
- **Linda Warford** - Youth and Emerging Adults Mental Health Specialist, Government of Newfoundland
- **Susan Green**, MSW, Mental Health and Addictions Consultant, Government of Newfoundland
- **Natasha Tobin** - Consultant, Government of Newfoundland
- **Kathy Langlois** - Director General, Community Programs FNIHB, Health Canada
- **Eric Belair** - Associate Assistant Deputy Minister, Strategic Policy Branch, Health Canada
- **Myriam Lecousy** - Youth Council Member, Doctoral student in clinical and community psychology
- **Haleema Ahmed** - Prime Minister's Youth Council, Lived Experience, Canada
- **Dalya Kablawi** - Network Coordinator, Mental Health Commission of Canada

USA

- **Michelle Cornette** - Subject Matter Expert; Lead Public Health Advisor, SAMHSA
- **Richard McKeon** - Chief, Suicide Prevention Branch, SAMHSA
- **Zalman Abraham** - Director, The Wellness Institute
- **Stephen O'Connor** - Chief, Suicide Prevention Research Program, National Institute of Mental Health
- **Ellyson Stout** - Managing Project Director, Education Development Center
- **Brandy Hemsley** – Director at Office of Recovery and Resilience, Oregon Health Authority
- **Sarah Fay** - College Campus Peer Navigator; Director of Community Outreach and Education for the non-profit Housing MV
- **Eduardo Vega** - Chief Executive Officer, Humannovations
- **Irfan Hassan** - Deputy Vice President for Grants, The New York Community Trust
- **Sandra Carter** - Executive Director, National Alliance on Mental Illness

UK

- **John McEntee** - Assistant Director of Disability Services, Southern Health & Social Care Trust
- **Oscar Donnelly** - DOH Mental Health Strategic Advisory Panel Co-Chair, Department of Health N. Ireland
- **Shirley Windsor** - Public Health Lead, Public Health Scotland
- **Abigail Hand** - Policy Advisor, Suicide and Self-Harm Prevention, Department of Health and Social Care, England
- **Kate Sahota** - Public Mental Health at Department of Health and Social Care, England
- **Nigel Henderson** - National Lead on Suicidal Crisis Intervention, Suicidal Crisis Support - Action Group, Scotland
- **Linda Hunter** - Implementation Lead, Suicidal Crisis Action Support Group, The Scottish Government

Australia

- **Annette Woodhouse** - Manager Safecare Victoria

New Zealand

- **Annette Beautrais PhD** - Suicide Prevention & Postvention Coordinator/Scientist, SCDHB
- **Aaran Culver** - Chief Clinical Advisor Mental Health and Addictions at the Ministry of Health
- **Matthew Tukaki** - Director of the Suicide Prevention Office at the Ministry of Health

Guest Speakers

- **Dana Careless** - Project Director for the Mental Health and Suicide Prevention National Response to COVID-19, an initiative of the National Action Alliance, USA
- **Colleen Carr** - Director of the National Action Alliance for Suicide Prevention and Project Director at the Education Development Center, USA
- **Rusha Grinstead** - MS, MPH, currently oversees the design and implementation of the 988 & Behavioral Health Crisis System in Oregon, USA

- **Mark Humphrey van Ommeren** - Head of the Mental Health Unit within the WHO Department of Mental Health and Substance Use
- **Connor Lafortune** – Person with a lived experience perspective, developed a Life Promotion Toolkit for Indigenous communities across Canada
- **Brian L. Mishara**, PhD - Director of the Centre for Research and Intervention on Suicide, Ethical Issues and End-of-Life Practices (CRISE), and Psychology Professor at the Université du Québec à Montréal, Canada
- **Fiona Shand**, PhD - Senior Research Fellow at the Black Dog Institute, NHMRC Centre for Research Excellence in Suicide Prevention

3. What do you see as the **game changer** for this match topic? (Game changer is defined as: a newly introduced element or factor that changes an existing situation or activity in a significant way.) (Max 500 words)

The match call on the International response to COVID-19, inflation, and the Mental Health Crisis highlighted the impact COVID-19 has had on social determinants of health and, in return, on suicide. A presentation from the World Health Organization provided the match participants with an international mental health framework showcasing examples of good practice from around the world, voicing people's lived experience, as well as highlighting why and where change is most needed and how it can best be achieved.

The 3-digit suicide crisis lines and community-led helplines match call highlighted the importance of having a coordinated and aligned communication about a 3-digit crisis line plays a role in achieving successful implementation. The leaders recognized the need to speak with one voice about a 3-digit crisis line to ensure there is clear understanding about what it is and how it will work. And aligning materials by building off of those that your organization has already created – and tailoring for your specific audiences – will be critical.

The match call on National Suicide Prevention Strategies and Action Plans allowed leaders to reframe the suicide prevention conversation to focus on life and life promotion. The leaders also recognized the importance of sharing what aspects of their implementation journey did not work, as it allows other leaders to learn from those experiences. We heard from two projects that are happening in New Zealand and Canada that are national in scope and speak to community-led initiatives to reduce the impact of suicide.

The Data and Surveillance match call featured an open discussion on the importance of bringing the lived experience perspective to data and surveillance efforts. Involving people with lived experience when developing suicide surveillance approaches can improve our understanding of populations impacted by suicide and suicide loss, particularly for populations not well represented in the data (for example, caregivers or people with experience of homelessness, who may not be included in surveys that collect data on suicide ideation and attempts).

4. How will the match **support inclusion, resilience and growth** for this match topic and for the leaders who attended: (Maximum 500 words)

In order to support inclusion, resilience and growth, the co-hosts have taken the initiative to create an International Knowledge Exchange Hub on Suicide Prevention. Match participants and other experts in the field of suicide prevention will meet on a quarterly basis to further exchange knowledge and best practices. The first meeting with the International Knowledge Exchange Hub on Suicide Prevention will take place in February 2022 with a focus on data and surveillance.