

## FROM THE PRESIDENT

In this issue, the first official IASP news bulletin of 2020, I invite you to read about the tremendous work our Special Interest Groups have been conducting recently, as well as updates from our National Representatives and reflections on the IASP World Congress that took place in Derry-Londonderry, Northern Ireland in 2019. We also learn about a new publication from Prof. Diego DeLeo and Dr. Vita Postuvan, *Reducing the Toll of Suicide*.

As we enter into a new decade, we can reflect on the progress we have made to date in suicide prevention on a global scale. The development and implementation of national suicide prevention strategies have progressed significantly since the initiation of the World Health Organisation (WHO) Global Mental Health Action Plan 2013-2020, with strategies now in place in over 40 countries in which little or no prevention measures previously existed. This Action Plan, developed in consultation with Member States, civil society and international partners has since been extended to 2030 on agreement at the 72nd World Health Assembly in 2019.

A key target of the WHO Global Mental Health Action Plan is stigma reduction. The stigma associated with mental health and particularly suicide means that individuals who need help feel unable to reach out and ask for it, creating a barrier to appropriate care. Thankfully, dialogue surrounding mental health in society has become more open in recent years. Advancements in communication technology in previous decades have instigated the exponential growth of social media. Access to social media connects individuals in remote locations to wider society and offers several potential benefits for suicide prevention, including reach, information provision, as well as the anonymous nature of such platforms. However, there are a number of challenges stemming from irresponsible use of social media, particularly the increased risk of

suicide contagion among vulnerable individuals. In order to make best use of this 21st century digital tool, we should incorporate it into online campaigns and interventions that aim to reduce stigma, raise awareness and promote help seeking. In terms of the reporting of suicide and its portrayal in online content, we must ensure that we always approach the subject safely and refer to valuable resources such as the WHO resources for media professionals, filmmakers and those involved in screen and stage.

Furthermore, the extension of the WHO Global Mental Health Action Plan ensures alignment with the United Nations (UN) 2030 Agenda for Sustainable Development. In this decade, we continue to aim towards the UN Sustainable Development Goal associated target to reduce by one-third premature mortality through non-communicable diseases by 2030, of which the suicide rate is an indicator, by means of prevention and treatment, as well as promotion of mental health and wellbeing. Specifically, we are aiming towards a 10% reduction in suicide rates in countries worldwide. By continuing to push the agenda of suicide prevention forward globally, there is no reason why we cannot make significant headway to ultimately achieving this goal by the end of this decade.

Without doubt, suicide prevention will continue to pose a challenge in the future. Despite the progress made to date, we still have to overcome some major barriers to becoming a stigma-free society in which less people die by suicide. The triennial World Suicide Prevention Day theme, "Working Together to Prevent Suicide" goes beyond our annual day of observance and should be embraced throughout the year. By combining our knowledge and expertise and sharing evidence based research and strategies within our community, we can support each other in our endeavour to prevent suicide. Let's take every opportunity to do just that in the year ahead!

Professor Murad Khan



**World Suicide Prevention Day**  
**Working Together to Prevent Suicide**  
**September 10, 2020**



# Special Interest Group (SIG) for the *Development of effective national suicide prevention strategy and practice*

## REPORT ON ACTIVITIES IN 2019

**During 2019 members of the SIG carried out a range of activities, including (but not limited to):**

- Organisation of, and participation in, symposia, seminars, workshops and oral and poster sessions at the 30th World Congress in Derry, Northern Ireland and several other conferences
- Authorship and editorship of bulletins, newsletters, reports, journal articles, book chapters and books
- Editorship of, and refereeing for, international journals on suicide prevention
- Contributions and advice to initiatives of the World Health Organization relating to national suicide prevention strategies
- Consultancies to NGOs and governments on national suicide prevention strategies in several countries, including Scotland, England, Ireland and Iran
- Provision of evidence-informed advice and support on national suicide prevention strategy development, implementation and guidance to NGOs and governments
- Involvement in international research collaborations.

**Among many highlights we would draw attention to the following contributions by SIG members:**

- Devjyoti Sharma's appeal to the Prime Minister and President of India for the development and implementation of a national suicide prevention strategy in the country was forwarded to the Secretary of Government of India for action. This indicates the high political priority that is now being given to suicide prevention in the country. Dan Reidenberg is also supporting efforts to build on the momentum arising from the recent decriminalisation of suicide in India.
- In her role as CEO of Roses in the Ocean, Bronwen Edwards has contributed significantly to the centrality of lived experience in the development and implementation of the Australian Government's 5th Mental Health and Suicide Prevention Plan.
- Jerry Reed has been involved in discussions about the updating of the US Government's 2nd National Strategy for Suicide Prevention and advancing the "President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENT)."

- Richard McKeon, Ella Arensman, Mohsen Rezaeian and Steve Platt, among others, have participated in meetings in the US (under the auspices of the International Initiative for Mental Health Leadership) and Switzerland (under the auspices of the World Health Organization) on the development, implementation and evaluation of national suicide prevention programmes, with an emphasis on the dissemination of lessons learned.
- In Argentina, Diana Altavilla has been involved in developing effective responses to a sharp increase in suicide (including a major cluster among young people aged 14-21 years), including the National Strategic Plan for Comprehensive Health in Adolescence 2019-2013 and online courses on suicide prevention (under the auspices of the Presidency).
- Jane Pirkis has been leading an evaluation of Australia's National Suicide Prevention Trial.
- In France, Jean Pierre Soubrier has been involved in suicide prevention research and action via the Centre de Ressources en Suicidologie and the Observatoire National du Suicide, and in the development of the country's national suicide prevention programme.
- In Greece, Ioanna Spyropoulou reports that the Klimaka Suicide Prevention Centre has advised the government on national suicide prevention strategies and contributed to the training of primary health care professionals and mental health professionals in the assessment of suicidal behaviour.
- Under the coordination of Raphael Ogbolu, Nigeria's Suicide Research and Prevention Initiative (SURPIN) has expanded its hotline service, engaged in partnership in school and university mental health promotion and suicide prevention, contributed to national mental health awareness raising, partnered with the Nigeria Academy of Pharmacy to draw attention to drug abuse, and organised the first national conference on 'suicide prevention.

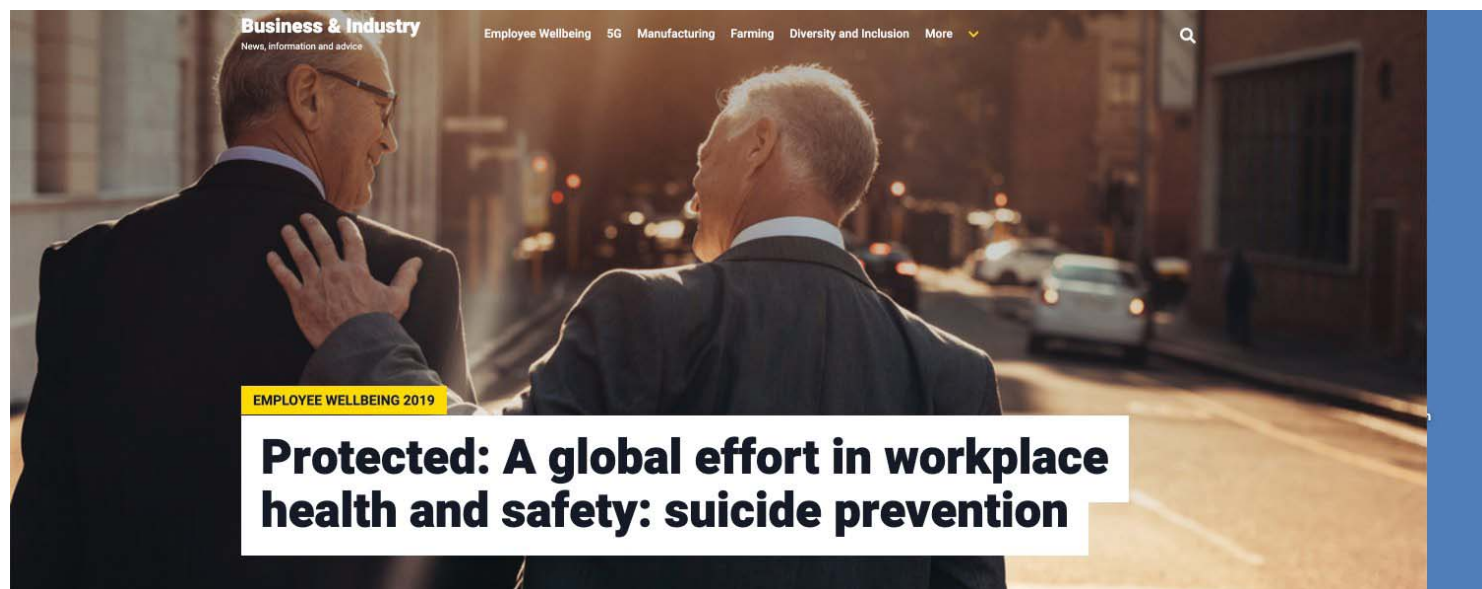
Steve Platt & Mohsen Rezaeian,  
Co-chairs, Special Interest Group (SIG) for the *Development of effective national suicide prevention strategy and practice*

2 December 2019

# “Place of employment sets a social structure, moral values and a sense of identity for an individual”

IASP's Suicide & the Workplace SIG, spearheaded by Sally Spencer Thomas recently worked with Business and Industry on the 2019 Employee Wellbeing campaign. A printed publication was enclosed within every copy of the Guardian newspaper and the content is available

online at [www.businessandindustry.co.uk/employee-wellbeing](http://www.businessandindustry.co.uk/employee-wellbeing). The campaign featured exclusive content from key thought leaders and industry voices about mental health in the workplace, the stigma attached to this and how employers can create the best working atmosphere for their employees.



## SIG Bereavement and Postvention

Following a successful and well attended meeting of the SIG at the recent IASP conference, we have set up a listserv for those interested in suicide bereavement and postvention.

If you are interested, please complete this short survey to have your email added to the list (link to embed is:  
[https://unesurveys.au1.qualtrics.com/jfe/form/SV\\_3z6t9QFkfFajps1](https://unesurveys.au1.qualtrics.com/jfe/form/SV_3z6t9QFkfFajps1)).

We will be using this email list as a way of communicating across time zones to share information, innovations and questions about postvention and bereavement. Another outcome from the meeting was to ensure that we continue to consider the work around how best to share information about postvention support being developed in different countries and the idea that we might be able to establish minimum standards for training in postvention.

Sadly, we said farewell to Sean McCarthy from the leadership of the SIG. Sean will remain involved in suicide postvention work, but after a decade of co-chairing the SIG, Sean has decided to turn his focus to other activities. We thank Sean for all his hard work in progressing the activities of the SIG with such enthusiasm and dedication. The remaining three co-chairs wrote an editorial for Crisis outlining our views on the current state of postvention and where we see the field heading. (editorial can be linked here: <https://econtent.hogrefe.com/doi/pdf/10.1027/0227-5910/a000620>).

Members of the Special Interest Group - **Suicide Among Older Adults** have recently completed a review on older adults' attitude toward euthanasia and assisted-suicide. The manuscript was accepted and will soon be published in *Journal of Aging and Mental Health*.

Castelli Dransart, D. A., Lapierre, S. et al., Erlangsen, A., Canetto, S.S., Heisel, M., Draper, B., Lindner, R. Richard-Devantoy, S., Cheung, G., Scocco, P., Gusmão, R., De Leo, D., Inoue, K., De Techterman, V., Fiske, A., Pyo Hong, J., Landry, M., \*Lepage, A.-A., Marcoux, I., Jongho Na, P., Neufeld E., Ummel, D., Winslov, J.-H., Wong, C., Wu, J., Wyart, M. (2019).

**A systematic review of older adults' request for or attitude toward euthanasia or assisted-suicide.**

*Journal of Aging and Mental Health.*

S. Lapierre

# Two New U.S. Suicide Prevention Initiatives

This segment will highlight two public health- and systems/services-level suicide prevention initiatives currently underway in the United States.

First, a coordinated effort to enhance the effectiveness of crisis systems for suicidal individuals is underway. Two federal agencies - the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Institute of Mental Health (NIMH) - are funding clinical and research programs designed to operationalize the strategies advocated in the *National Action Alliance for Suicide Prevention's Crisis Services Task Force* (<https://theactionalliance.org/healthcare/crisis-services>) report, **Crisis Now: Transforming Services is Within Our Reach** ([https://theactionalliance.org/sites/default/files/inline-files/Crisis Now %5B1%5D.pdf](https://theactionalliance.org/sites/default/files/inline-files/Crisis%20Now%5B1%5D.pdf)). SAMHSA will fund crisis centers to serve as integrated hubs providing real-time 24/7 coordination of crisis care for suicidal individuals, including crisis stabilization, crisis respite, mobile on-site crisis response, and hospital emergency department services. NIMH has offered additional research funding opportunities to generate empirical evidence for strategies that support a coordinated system of crisis care for suicidal individuals.

Second, an unprecedented suicide prevention media campaign occurred from April 7-14, 2019 in the state of Oregon. Over 30 newsrooms

(including newspapers, TV stations and websites) joined together in a project known as "**Breaking the Silence**" (<https://www.breakingthesilenceor.com>) to report stories on suicide, following best practices for suicide reporting as outlined in published recommendations ([www.reportingonsuicide.org](http://www.reportingonsuicide.org)). *Lines for Life* ([www.linesforlife.org](http://www.linesforlife.org)), a crisis center in the National Suicide Prevention Lifeline ([www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)), worked with the news outlets to guide this momentous team effort. The impact of the media campaign will be studied by a collaborative team led by Prof. Madelyn Gould, the Irving Phillips Professor of Epidemiology in Psychiatry at Columbia University Irving Medical Center in New York City (U.S. National Representative to IASP, and Co-chair of the Council of National Representatives) and Professor Thomas Niederkrotenthaler, Associate Professor at the Medical University of Vienna (IASP Treasurer). **Stay tuned for results!**



Madelyn S. Gould

Madelyn S. Gould, PhD, MPH  
U.S. National Representative to IASP,  
and Co-chair of the Council of National Representatives

# Second wave of Suicide Prevention in Germany: Germany's National Suicide Prevention restructured



Reinhard Lidner

On 7th November 2019, the National Suicide Prevention Program of Germany (NaSPro) presented its new structure and new activities. NaSPro is a nationwide cooperative network with the aim of the promotion, development and advancement of suicide prevention, as well as its public dissemination. In an "Alliance for Suicide Prevention," organizations and institutions involved work together with task forces of experts in different fields of suicidology. A steering group controls the executive committee, supported by a scientific advisory board. Barbara Schneider, Cologne and Reinhard Lidner, Kassel were voted for the executive committee. The actual main activity of NaSPro is the development of a systematic review on the actual status of suicide prevention in Germany, the determinations of obstructions and the formulation of distinct recommendations for further activities in suicide prevention, funded by the German Ministry of Health. On 8th - 9th November actors of this project met with an international scientific board to discuss the reports given by experts from eight different strategic fields. The report will be given to the Federal Minister of Health on 10th September 2020.

Prof. Reinhard Lidner, National Representative of Germany.



An update from Austria:

## The Austrian suicide prevention programme **SUPRA** as an international best practice model

**SUPRA** was selected by the Steering group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases of the EU Commission as one of 11 best practice models in the field of mental health and invited to a workshop on 14th/15th of May 2019 at the Joint Research Centre of the EU Commission in Ispra (Italy). SUPRA was presented to the representatives of the European Union member states in several workshops. The aim of this exchange was to support the transfer of best practice models to other member states in the course of the 3rd Health Programme of the European Union. SUPRA was met with great interest at the meeting.

More information about the programme is available via the following link:

[https://ec.europa.eu/health/non\\_communicable\\_diseases/events/ev\\_20190514\\_en](https://ec.europa.eu/health/non_communicable_diseases/events/ev_20190514_en)



# SUPRA – Suicide Prevention Austria

## Fact Sheet

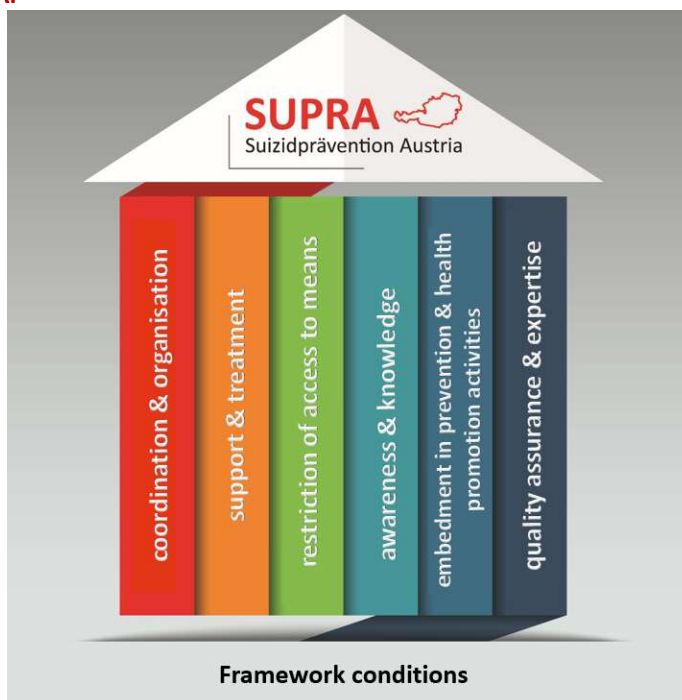
SUPRA is a **multilevel national suicide prevention programme** with the main objectives to ensure support for risk groups, to restrict access to means of suicide, to raise awareness and develop media support for suicide prevention, to integrate suicide prevention programmes into other health promotion activities, and to support research on suicide.

- In 2012, the Austrian suicide prevention program SUPRA was published and the Austrian Ministry of Health established a **coordination centre** at the GÖG (Austrian Public Health institute) to support the process of implementation.
- Goals and measures that were **already ongoing** (i.e. media guidelines) or easy to achieve were conducted immediately (i.e. annual national suicide reports and conferences, webpages, several regional initiatives and projects)
- Meanwhile, a structured concept for implementation, with **6 strategic, 18 operative goals and 70 measures** (including target sizes, indicators and responsibilities), was developed with a panel of leading national experts.
- Finally, a suicide prevention **starting package** was defined with prioritisation of measures on regional and national levels that will be implemented within the next two years.

The multilevel approach and the measures associated with SUPRA are based on scientific evidence. The annual reports on suicide rates will be supplemented by programme updates and monitoring.

**Results/Effects:** Awareness for mental health and suicide prevention have increased among policy makers in the last years. Several federal states have drawn on the SUPRA implementation concept for their own local suicide prevention programmes and a variety of national and regional suicide prevention projects are currently being funded. The major focuses correspond to the starting package.

### 6 columns of SUPRA:



## SUPRA – SUicide PRevention Austria: Starting–Package

column	Regional level	Federal level	Implementa- tion within
1	Organizational embedding of suicide prevention into an existing organisational/coordination structure of the federal states (e. g. psychiatry coordination,...)	Expansion of the SUPRA coordination office at federal level	1 year
2	Building on existing offers: One non-confessional 24/7 crisis telephone number per state	National hotline that automatically redirects to the countries' crisis telephone numbers	1 year
	Financing/Implementation of SUPRA/ÖGS–Gatekeeper–Programme	Financing of SUPRA/ÖGS train-the-trainer programme	2 years
3	Identification and safeguarding of hot spots	Start the discussion process on legal measures/guidelines: Weapons, medicines, construction and transport standards	2 years
4	Information events/seminars for regional media in order to disseminate the media guidelines/ assignment of a person responsible for the media in each federal state	Papageno–Media–Award (incl. distribution of media guidelines)	1 year
5	Implementation of suicide prevention in schools: YAM/Vorarlberg model (integration in programs <i>Ge-meinsam stark werden</i> , <i>Plus</i> , <i>Klartext</i> )	Support by BMBWF and BMSGPK	2 years
6	Contribution to the establishment of expertise/data-base by the federal states (e.g. with regard to hot spots) in cooperation with SUPRA/ÖGS–WG quality assurance.	Implementation of SUPRA/ÖGS–WG–quality assurance	1 year

### Fact box:

**Geographical scope:** national

**Timeframe:** continuous (starting in 2012)

**Goals:** 6 strategic, 18 operative goals, 70 measures (including target sizes, indicators and responsibilities)

**Financing/ implementation:** Federal Ministry of Labour, Social Affairs, Health and Consumer Protection+ Coordination centre + advisory board (+ occasional expert groups)

**Target populations:** universal, selective, indicated prevention

**Evidence:** evidence based (as far as possible)

**Evaluation:** on project/action basis + annual report

**Stakeholders:** broad stakeholder involvement

**Annual budget:** coordination centre: ~ € 60.000

**Outcomes:** annual suicide report, prevention web-portal, gatekeeper train-the-trainer programme, media-award, special programmes for risk groups (older, young, men), safeguarding hot-spots, school programmes, boost for regional programmes.

**Contact:** [alexander.grabenhofer-eggerth@goeg.at](mailto:alexander.grabenhofer-eggerth@goeg.at)

<https://www.sozialministerium.at/Themen/Gesundheit/Nicht-uebertragbare-Krankheiten/Psychische-Gesundheit/Suizid-und-Suizidpr%C3%A4vention-SUPRA.html>

# Citations for the 2019 Awards

## Professor Jane Pirkis - Winner of the 2019 Stengel Research Award

It is our pleasure to award Professor Jane Pirkis for the 2019 Stengel Award. Jane has made a major contribution to knowledge about suicide and suicide prevention over the past 20+ years. Her research is exemplary in terms of its methodological rigour and the influence that it has had on policy and practice.

Jane has published 296 peer-reviewed journal articles, as well as 10 book chapters and numerous reports. She also co-edited the recently published *International Handbook of Suicide Prevention*, which is regarded as the 'go to' text for suicide prevention experts from around the world. Jane's publications are often highly cited, both in the academic literature and in policy reports and practical resources. According to Google Scholar, her work has been cited 10,160 times and she has an h-index of 54.

Jane's research has a specific emphasis on universal interventions that aim to reduce suicide risk factors across the entire population, often by impacting on some aspect of the social environment. Her chief focus has been on interventions that harness the media - in all its forms - in suicide prevention, and interventions designed to reduce suicides at suicide hotspots.

Together, Jane's empirical studies, systematic reviews and meta-analyses in this area have shown that restricting access to means is effective, and that the other three types of intervention show promise. Her findings have been used by councils, policy-makers, planners, industry representatives and advocates from Australia, Canada and the United Kingdom to support arguments for interventions on bridges, overpasses and cliffs, many of which have come to fruition. For example, her work was used in Edmonton, Canada to mount a successful case for the installation of barriers on the High Level Bridge. Kris Andreychuk, Supervisor of Community Safety with the City of Edmonton, said the following: "... on behalf of Edmontonians, thank you" and "[Winning the case for bridge barriers] couldn't have happened without you. We are both humbled and appreciative of this." (emails dated 4/03/2014 and 19/08/2014).

Jane is the Editor-in-Chief of Crisis and sits on the Editorial Board of the *International Journal of Mental Health Systems*.



Prof. Paul Yip with Winner of the 2019 Stengel Research Award prof. Jane Pirkis

Jane has received a number of significant prizes and awards in recognition of her achievements. These include the University of Tasmania's *Distinguished Alumni Award* (2017), Suicide Prevention Australia's *Lifetime Research Award* (2010) and the Australasian Evaluation Society's *Award for Excellence in Evaluation* (2009). Jane was also a finalist for the 2018 *Australian Mental Health Prize*. In addition, 'Man Up' (mentioned above) was shortlisted for a prestigious award, the 2017 Australian Academy of Cinema and Television Arts Award for *Best Documentary Television Program*.

In addition to the above awards, Jane's work has been recognised in other ways. In 2014, for example, she was selected to be profiled in the inaugural issue of *Lancet Psychiatry* (which is now ranked third among psychiatry journals and has an impact factor of 15.233). The article described her as 'one of those rare academics whose research produces a policy impact' and as having made 'major contributions to further understanding about suicidal behaviour'.

Jane holds or has held a number of executive roles on key professional bodies. She is currently the Vice President of IASP and has previously been the organisation's General Secretary, the founding Chair of its Suicide and the Media Task Force and the Australian representative on its Council of National Representatives.

She is a past Board Member of Suicide Prevention Australia and the Health Services Research Association of Australia and New Zealand. She is also a member of the Australian Psychological Association and registered as a psychologist with the Australian Health Practitioner Regulation Agency.

Jane is a Fellow of the International Academy for Suicide Research and a Fellow of the Academy of Social Sciences in Australia.

Further evidence of Jane's independent recognition as a stellar performer lies in the amount of research funding she has attracted throughout her career. In total, she has attracted over \$AUD65 million in research funding for around 70 projects, almost 70% as lead investigator. She has deliberately sought funding from a variety of sources. Around one third has come from Australian and international competitive granting bodies, and the remaining two thirds has come from other public sector research funders. Her strategy of diversifying income sources has been deliberate and has allowed her to develop and grow a successful, well-funded research program that is renowned for both its methodological rigour and its ability to answer questions that are of direct and immediate interest to policy-makers and planners.

Jane has a demonstrated track record in supervising and mentoring PhD students, postdocs and other early- to mid-career researchers. She has supervised 31 research higher degree students (30 PhD, 1 MPhil; 18 to completion, with a further 5 having just submitted or due to submit later in 2019). She has been the primary supervisor for 14; many of the remainder are from other institutions - including international ones (e.g., Sarah-Jane Fenton, University of Birmingham; Annemiek Huisman, Vrije Universiteit) - and she has been asked to co-supervise them because of her specialist expertise. She has mentored 60 postdocs and early- to mid-career researchers. Many have been members of her team, but she has also mentored emerging researchers from elsewhere (e.g., Mark Sinyor, American Foundation for Suicide Prevention Postdoctoral Fellow, now an A/Professor at the University of Toronto). Jane's support for emerging researchers is evident in her publication record. Increasingly, she is the last or senior author on publications and she encourages her staff and students to take the lead as first authors.

Jane is renowned for her intellectual leadership in suicide prevention, and others are keen to collaborate with her. She has published with colleagues from 15 countries and a variety of disciplines outside her own (e.g., communication, sociology, gender studies).

It is our pleasure to present Jane the Stengel Research Award. She is only the third woman to have received the award in the 42 years of its existence.

## Dr. Brian Mishara - Winner of the 2019 Ringel Award

**The Ringel Service Award**, instituted in 1995, honours the late Professor Erwin Ringel, the founding President of this Association. This award is for distinguished service in the field of Suicidology, exemplified by involvement in developing evidence-informed and best practice suicide prevention programs and achieving national or international recognition as a leader in the field of suicide prevention.

The award committee for the Ringel Award for 2019 has received and reviewed a range of nominations on highly deserved candidates.

By unanimous vote of the committee, the recipient of this year's award is a person who has exceeded the criteria for the award in multiple domains.

He is a past president of both IASP and of his home country's suicide prevention association. He is the founder/director of his home city's Centre for Research and Intervention in Suicide.

He is a prolific prevention researcher and disseminator, having published a dozen books and almost 170 book chapters and articles, notably of importance to the development of telephone help lines, suicide prevention/skill building among children, geriatric suicide and euthanasia, ethical dilemmas in suicide prevention, and new technologies for suicide prevention..

He is a globe-trotting teacher/trainer/consultant, having helped disseminate best practice trainings in countries as far-flung as Guyana, Somaliland, Lebanon, Uganda, Brazil, and Morocco.

Nominated by Dr. Steven Stack of the U.S., it is my pleasure on behalf of the Award Committee to announce that Dr. Brian Mishara is the 2019 winner of the Ringel Service Award.



## Bill (William) and Beverley Feigelman - Winners of the 2019 Norman Farberow Award

It is with great pleasure the IASP Farberow Award Committee recognise the nominations of Bill (William) and Beverley Feigelman as joint recipients of the 2019 International Association for Suicide Farberow Award and their work as an academic and a clinician respectively, but more importantly, as dedicated parents of their beloved son whose loss to suicide more than 17 years ago was a turning point in their lives.

Bill and Bev were already highly respected professionals, when, following their tragic loss, they decided to devote their time, energy and personal and professional capacity to suicide bereavement support.

Both have been involved in the development and implementation of evidence-informed and best practice postvention programs for almost two decades. Unable to find sufficient support after their son's death, they started their own support group, which is still active today. They have also managed to embed a research program to investigate how support group participants may benefit from participation and have published prodigiously to further build the evidence base.

Bill and Bev are acknowledged as leaders in the field, as confirmed by opinion leaders in academic, practitioner, voluntary, community and media sectors, in bereavement/ postvention, nationally and internationally. They have been invited to numerous national and international conferences to speak about their research and the loss they have experienced. Their advice is sought by others in this field, and their work has inspired many across the USA and other countries, such as Japan, South Korea, and in Europe. They have been influential members of the IASP Special Interest Group on Suicide Bereavement to which they contribute academic presentations, as well as insights into suicide bereavement, how to provide help to the bereaved, and how to forward the field of postvention.

Their extensive and prodigious commitment to research and further building the evidence base in this field continues to increase understanding and commitment to suicide prevention and especially postvention and the needs of those individuals, families, friends, groups, workplaces, cultural communities and so many others who experience the unique grief of suicide loss yet are able

to find care and understanding through their personal experience and the world wide efforts of the postvention community to which have both contributed so much.

Together Bill and Bev represent a unique blend of high professional standards, dedication, wisdom and compassion underpinned by evidence and genuine care. It is assuring to know that they will continue to be involved in this field as active members of the International Association for Suicide Prevention. Their willingness to honour and share the devastating loss of their beloved son and dedicate so much to our understanding of suicide postvention and its impacts for families, friends and all touched by this most challenging of human experiences optimises the aspirations of all members of IASP and the Postvention Special Interest Group to maintain our invaluable work.

As noted by Bill: *"For the foreseeable future we see ourselves continuing to maintain our support group, continuing to share our knowledge of the suicide bereavement and suicidology fields to educate community groups, the bereaved and to advance caregiver training. We also expect to continue making additional academic contributions with new studies and research expanding the knowledge base of suicide and suicide bereavement."*



## Dr. Duleeka Knipe - Winner of the 2019 De Leo Fund Award

**D**r Duleeka Knipe is the winner of this edition of the De Leo Fund Award. Born in Sri Lanka, Dr Duleeka Knipe is the winner of this edition of the De Leo Fund Award. Despite her young age, Dr Knipe has importantly contributed to the study and prevention of suicide in her native country.

**N**ow based in UK, she has received relevant grants and offered scientific contributions published in journals such as the *Lancet* and the *Journal of Affective Disorders*. Dr Knipe has prevailed over a number of very valuable candidates to the Award this year, obtaining however unanimous consensus among panel members on her choice as the best candidate to winning the Award.

**We** hope that this recognition may further boost Dr Knipe's career, by increasing her motivation to help the cause of suicide prevention globally, and



## KATRINA GISELA WITT - Winner 2019 Marušiĉ Award

AMERICAN FOUNDATION FOR SUICIDE PREVENTION POST-DOCTORAL RESEARCH FELLOW



**K**atrina Gisela Witt, a Doctor of Philosophy in Forensic Epidemiological Psychiatry, University of Oxford, has an undergraduate education in psychology from Australia.

**K**atrina is a motivated research fellow with a passion for establishing and driving innovative research utilizing modern methods of epidemiological and longitudinal data analytic techniques to provide research consumers with evidence-based information on strategies for self-harm and suicide prevention.

**S**he has published more than 50 scientific papers, several policy submissions, as well as co-authored book chapters in internationally published books. She also won several international and Australia-related awards.

**H**er research proposal titled *Transforming Australia's Ability to Prevent Suicide (the TAAPS Project): Using dynamic simulation modelling to understand how treatment services can better meet the needs of young Australians at risk of suicide* was recognized by the award committee as the one that identified a topic which is important for suicidology, demonstrated methodological soundness, feasibility to implement in regards to the researchers skills, experiences, project management and resources for success, as well met appropriate ethical standards. The award committee also saw the project as likely to produce findings which will add to the existing body of knowledge and hopefully lead to changes in suicide prevention.

**T**herefore we are happy to announce Katrina Gisela Witt as the Andrej Marušiĉ Award winner.



## Book review

# Current perspectives on suicide prevention

Review of the book:

De Leo, D., & Postuvan, V. (Eds.) (2019),

### **Reducing the toll of suicide: Resources for communities, groups, and individuals.**

Göttingen/Boston: Hogrefe.

**S**uicidal behaviour is a complex phenomenon determined by biological, psychological, social and cultural factors. Hence, a multidisciplinary approach is needed to enhance our understanding of its occurrence and prevention. The chapters in this volume have been selected from presentations at the annual international conference organized by the Centre for Suicide Research, at the University of Primorska, Slovenia, under the leadership of Prof Diego De Leo and Dr Vita Postuvan. These inspiring 'Triple i' conferences promote 'intuition', 'imagination' and 'innovation' in suicide research and prevention. Consequently, the volume aims to broaden our knowledge both by overview chapters and chapters presenting results from new research. The book addresses risk and protective factors from the individual to the societal level, and is organized in five parts.

**T**he first part focuses on suicide prevention at the individual level. In the opening chapter, Prof De Leo summarizes the literature regarding clinical evaluation and assessment of suicide risk in older adults. This includes discussion of specific risk factors such as physical illness, and practical recommendations for assessment. In the second chapter, Prof Ekeberg elaborates on the principles of psychotherapy with suicidal patients, highlighting the importance of a continuous risk assessment, long-term treatment, and directly addressing suicidal ideation.

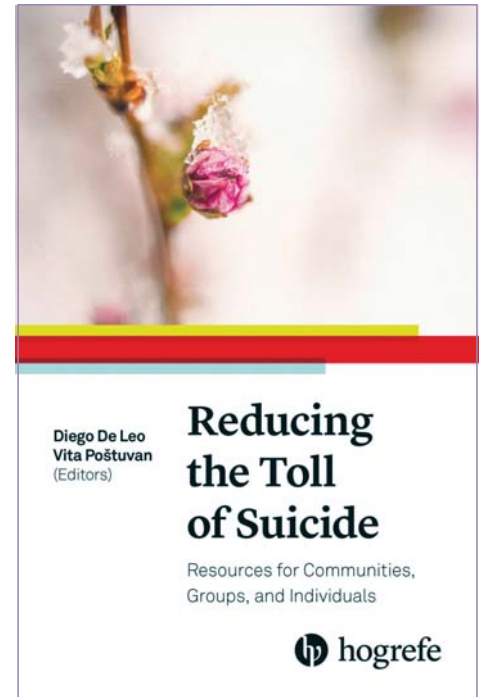
**T**he second part of the book is concerned with groups at risk of suicidal behaviour. Discussing suicidal behaviour in youth, Dr Kerr argues for a contextualized suicide prevention that has the potential to improve the quality of life in this

population. In the next chapter, Dr Marzano et al. provide an overview of suicide prevention in prisons, followed by a chapter reporting the results of a qualitative study by Dr Zdravec Sedivy et al. regarding suicidal behaviour in males. Dr Rihmer et al. conclude this part of the book with a chapter on treatment of suicidal behaviour in the context of mood disorders. They focus specifically on bipolar disorders, which entail a higher suicide risk than unipolar depression, and highlight the importance of family history and life events.

**T**he third part of the book looks at suicide prevention in the community. First, Prof Niederkroenthaler provides an update on ongoing work on how media presentations of suicide may have a protective effect on suicidal behaviour (i.e. Papageno effect). In the next chapter, Dr De Jaegere et al. present ethical guidelines for technology-based suicide prevention, including principles such as transparency and accessibility, as well as privacy and data protection. Dr Scott highlights the importance of training of local networks (such as NGO volunteers) for the promotion of suicide prevention in rural areas and lower- and middle-income countries. In the final chapter in this part, Dr Postuvan discusses how people bereaved by suicide may gain an understanding of the suicide they have experienced, and the role of social support and psycho-education for the bereaved people and their social environment.

**T**he fourth part of the book consists of two chapters focusing on models of suicidal behaviour. Dr Wetherall et al. outline the 'Integrated Motivational-Volitional Model' of suicidal behaviour, with its focus on the transition from suicidal ideation to behaviour. Next, Dr Mars Bitenc et al. present findings from a psychological autopsy study and discuss how suicide can be understood through the lens of the bereaved people.

**I**n the only, and final, chapter in the fifth part of the book, Dr Larkin reflects on the ethical and methodological challenges in suicide research



and prevention. While there is a substantial need for suicide prevention, researchers must deal with ethical concerns, such as the use of waiting-list control groups and inclusion of suicidal people in intervention studies. Given the many challenges, self-care for clinicians and researchers in this field is recommended.

**I**n conclusion, the chapters in this volume present up-to-date and original knowledge about specific at-risk groups, and treatment and prevention strategies. The discussion of ethical and methodological issues certainly adds value to the book. Including a myriad of perspectives authored by world-leading experts, the book offers food for thought on how to better understand and prevent suicide. It will be of interest for researchers, students and clinicians working in the field of suicide prevention.

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# International Association for Suicide Prevention Congress Students' Bursary Reports 2019

**Amelia Shanahan**, November 2019

To the Rosemary Norman Foundation and the Gentlemen of Geelong,

Thank you sincerely for the opportunity to attend the International Association for Suicide Prevention (IASP) World Congress in Derry-Londonderry in September 2019. It was an invaluable chance to learn so much about suicide prevention from world leading researchers, and will no doubt influence my professional psychological practice moving forward, viewing it through the lens of suicide prevention.

## Overview of the congress

The congress ran over 5 days, and provided a full and varied program of activities and speakers to listen to. There were delegates from all over the world and it was enlightening to be able to hear the diversity in their experiences of suicide prevention work from different countries and cultures. I attended a pre-congress workshop on "Ethical dilemmas in suicide across the lifespan."

Each day of the congress began with several keynote speakers who spoke about critical issues and progress in the field of self-harm and suicide. There were then optional breakout sessions for the rest of the day, with up to 10 parallel sessions running concurrently, addressing niche areas of suicide research, which were held at multiple venues in the city centre of Derry.

Over the five-day period, I had the privilege to meet many accomplished academics and skilled clinicians, and to hear the latest in suicide research, too much to fit in one single report. As such, I will speak about a few key themes that were particularly meaningful for me, and how I will take this learning into my practice.

Given the broad scope of the congress, I've combined some of the information I found most relevant under a few key themes:

## Gender and suicide

It is well known that gender plays a large role in suicide and self-harm. The congress illuminated for me how that relationship operates in different contexts, and the implications of this on prevention and treatment. Many presenters considered the role of gender in their research but a few presentations considered this as a primary focus. Global data indicates that males are more likely to die by suicide, and women are more likely to attempt. There is consensus given the gender differential in mortality rates to focus on men and suicide. Suicide is the third leading cause of death young males worldwide, and leading cause in some western countries, such as Ireland. Irish research also found the men were more likely to be given a verdict by coroners of death by suicide versus women when the cause of the death was somewhat unclear. Lithuanian research has found the historical and cultural aspects of masculinity influence suicidal behaviour, and exploration of evolving definitions of masculinity is needed to inform suicide prevention and treatment.

Australian research is also looking at masculinity and suicide – Dr Kylie King, a colleague of Professor Jane Pirkis of IASP, presented findings from the research regarding the 'Man Up' documentary aired in 2016. Research found that conformity to traditional masculine norms was associated with increased risk of suicidal ideation, attempts, substance use, poor mental health, and delayed help seeking. The documentary was shown to reduce conformity to gender norms and alter men's perceptions of mental health and suicide, and increase likelihood for help seeking. Further research from Australia has shown that older men are more likely to adhere to these cultural gender norms, and also have the highest suicide rate across age and gender. Overall, research shows that men don't have an inherent genetic vulnerability to suicide, but rather cultural influences drive the

gender differences in suicidal behaviour. In terms of my clinical practice, this will be vital for me to be cognisant of when working with males, both young and old as these are at risk groups, and to more thoroughly explore their ideas of masculinity and help seeking when consider their risk.

## Young people and suicide

In addition to gender, age is an important factor when considering suicidal behaviour and risk. Given my background working with young people, I have a particular interest working with this group. Suicide is the second highest cause of death for people under 15-29 years, and there was been an increase in rates since 2009 in Western countries. The biggest increase has been in terms of self-harm in girls aged 13-16, self-harm being a known predictor of later suicidal behaviour. It was conceptualised as an iceberg – the tip is suicide, the next small section presents to services, and the largest portion of self-harm in the community is unknown to services. Approximately, there are ten unknown cases for every one known to services, and only 12% will present to clinical services post a self-harm incident. This highlights the huge need for preventative interventions to reach as many young people as possible – with the main focus for digital and parental education programs, and the need for good quality hospital and community mental health services. There are also needs to be considered that speak to the unique factors of adolescence impacting mental health, sleep issues and the use of social media and media content. Repeated self-harm episodes are associated with higher likelihood of issues with abuse, housing and alcohol misuse for males, and same issues plus mental health, relationship issues, and employment for females.

While I was aware of the above risk factors for young people, research presented at the congress highlighted to me the extent of the vulnerability of young people, and how crucial it is to keep in mind when working with every young person, regardless of their reported behaviour as most don't report or seek help.



## Clinical treatments for suicidality

Given my current studies in clinical psychology and work in a mental health service, I paid particular attention to congress content relating to clinical treatments for suicidal behaviour and self-harm in order to inform my own work. The majority of research indicated that there is already a large evidence base for effective strategies, the call was put out for greater research put into large scale effectiveness studies of implementation of various treatments. Unfortunately, there is a well-documented delay between research and wide spread implementation, though work is being done to bridge this gap given the rapid rate of change in the sector. Therapy modalities I was already familiar and learning more through my degree were discussed such as Dialectic Behaviour Therapy (DBT) and Cognitive Behaviour Therapy (CBT), but I was also introduced to models of therapy developed specifically for suicidal behaviour such as the Integrated Motivation-Volitional (IMV) model of suicidal behaviour and Collaborative Assessment and Management of Suicidality (CAMS). There was also emerging research discussing the benefits of prescriptive treatment, taking into account

individual differences in presentations and designing a unique therapy approach to most effectively treat that person.

The role of cortisol in suicide risk was linked to impairments to cognition, decision making and emotion processing. It has been confirmed that a dysregulated hypothalamic-pituitary-adrenal axis activity is associated with increased suicide risk. The role childhood trauma in this reduced cortisol was shown to manifest up to 30 years later. *Brittany Patafio, November 2019.* Another presentation of particular interest to me discussed counter transference reactions (CTR) and the impact on therapeutic alliance with clients with personality disorders and suicidal behaviour. It found that CTR negative influence therapeutic alliance and outcomes, and greater time and exploration of therapists' reactions to clients' suicidal behaviour rather than only focussing on assessing risk from a medico-legal standpoint.

I found clinical discussions one of the most interesting parts of the congress for me, and I have already noticed how this has changed my views and practices in my work at Headspace Geelong and on my clinical placements at Barwon Health. It has been invaluable to have this in-depth

experience and exposure to cutting edge research in the suicide prevention field, as this is one of the most important health issues facing society currently. Again, thank you for the unique and transformative opportunity to attend such an amazing event.

Yours sincerely, Amelia Shanahan



L to R – Brittany, Amelia, Wendy Clift (IASP) at congress in Derry-Londonderry Sept 2019.

## Brittany Patafio, November 2019

To the Rosemary Norman Foundation and the Gentlemen of Geelong,

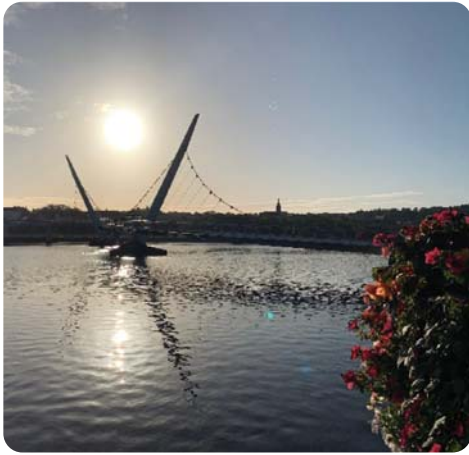
I would once again like to thank you for providing me with the amazing opportunity of attending the International Association for Suicide Prevention Congress in Derry-Londonderry this September.

The topic of mental health has always been an interest of mine. I have volunteered in places such as Lifeline Geelong and Barwon Health, and I am currently completing a PhD on the impact of mental health education on the mental health literacy, attitudes, and behaviours of sporting adolescents. My project investigates the impact of fostering a culture which normalises the discussion of mental health issues and seeking help within local sporting clubs, with the aim of highlighting the importance of mental health education to protecting Australia's youth from poor mental health outcomes such as suicide. Since running this project the impact of suicide on young people in the Geelong region has been apparent. Therefore being given the

opportunity to attend the suicide prevention congress this year has been invaluable to my current PhD studies, and research ideas more generally moving forward.

I started off my conference experience by attending a half-day workshop on the methodological and ethical perspectives of cross-cultural qualitative suicide research. This workshop highlighted the difficulties associated with suicide research in under-resourced areas, particularly referencing a lack of suicide-literacy and freedom to talk about suicide within these communities as major barriers to doing quality suicide research. I found the discussion around one's appearance as a researcher to be particularly interesting, and one in which I have personally reflected on post-conference. Considering things like how you present yourself as a researcher was not new information, however what I hadn't considered is how your appearance might impact the power you hold within the research role, and how this might subsequently impact the

evidence you obtain. For example, some communities/groups might be more likely to trust you as a researcher if you demonstrate that you are from a position of power, while others might respond better to a little bit of naivety on the research topic. Tailoring how I portray myself, and understanding how this may change based on the group of interest, is something I will definitely adopt in my research moving forward. Dissemination, and the complexities involved in deciding what to report, was the other topic that I found impactful. Mental health and suicide is a difficult topic for most people impacted by such to openly discuss, so learning about principles of transparency, reflexivity and positioning and how/when to incorporate these into the research project was fascinating. I think the skills learnt in this section of the workshop will be something I can apply to my current PhD work, where I will be balancing what an organisation wants/what they're interested in and what I found/the relevance of my findings.



The remainder of the conference involved taking in all the experiences, conclusions, and findings of researchers from all around the world in more of a lecture-type format. The large variety of presentations available across the four days was incredible, with the only negative aspect of the congress being that it was so difficult to pick which session I wanted to attend! Below, I have summarised some themes from three areas of suicide research that I really enjoyed hearing about.

## Suicide and technology

It was fascinating to hear about all the advancements researchers are making in suicide prevention using technology, and in particular, mobile phones. From bots that people can text to receive information regarding crisis support, as well as these bots addressing the barriers people have accessing such services (i.e., to increase the likelihood of these services being utilised), to apps that target at-risk people in order to lower suicidal ideation through the delivery of basic psychological therapies, or to digital phenotyping that involves mobile phones collecting data about how we behave to eventually enable us to predict behaviour (and thus lower the cost of care by getting people the care they need quicker) – the future in this space is exciting.

One of the apps that caught my attention is the BeyondNow app. Created by Beyond Blue, the BeyondNow app provides people with education around the warning signs and triggers of suicide, coping strategies, contacts for further support, and reminds users of the reasons to live. The app also allows users to create and save a safety plan that they can access and use in a time of crisis. Having worked for a National crisis service (Lifeline), I think this idea is invaluable as most people cannot think rationally about how they can keep themselves

safe, or simply do not feel comfortable reaching out for help, when experiencing a crisis. Creating a safety plan (by themselves or with a mental health professional - the app's recommendation) which can be accessed whenever someone is thinking about suicide, no matter where they are, can provide support and reason to people that may not have had access to such. Almost everybody has a phone, so I really like that this app has created a platform that makes safety accessible to all. Knowing that apps like BeyondNow exist and that there is research supporting their use has widened my knowledge in prevention efforts, and it is definitely something that I will be looking to promote in my research and crisis support work.

## Suicide and the media

I was not familiar with this topic prior to this conference, however the influence of media is forever expanding, and there is strong evidence supporting the association between suicide in the media and suicide rates in the population. This was shown to occur particularly with young people (i.e., glamorising suicide and portraying it alongside common issues faced by young people) and with men (i.e., media that reinforces traditional masculine norms of stoicism, independence, invulnerability and avoidance of negative emotions). It was interesting to think about how the media can portray a “masculine” approach to dying (i.e., men who chose to die by suicide being framed as a heroic act), and eye-opening to hear about the flow on effect of using such language when discussing male suicide.

A concerning talking point which I am interested to follow up on in the future is the lack of standards that the media must adhere to when reporting on/filming about suicide. While there are recommendations concerning this issue, it was mentioned throughout the conference that these recommendations are perhaps not taken as seriously (yet) as they should, which can lead to serious consequences. I think this is definitely a space worth advocating for and investigating further, as the message portrayed by the media to those who are vulnerable should be carefully considered and more tightly monitored.

## Suicide and vulnerable groups

There were a lot of presentations about research in vulnerable groups, including migrants, the homeless, and prisoners. I was particularly interested the presentations surrounding suicide

in prison and probation populations, as some of the findings within this research context are definitely applicable to the general population. For example, the presentations I attended, concerning prison populations, highlighted the interplay between men's feelings of defeat, rumination and internal entrapment in suicidal ideation, which I believe can be applied to men in many settings outside of prison/probation. Further, successful reintegration of ex-prisoners is a research area of particular interest to me, and I can definitely see myself using these indicators to guide future mental health research in this field.

Overall, this conference was a very informative and enlightening experience for me. Having the opportunity to hear about what people internationally are working on to improve mental health outcomes such as suicide was so valuable to my perspective of researching in this space. I think the insights that I have gained have shaped how I will approach working and researching suicide (and mental health more generally) in the future, and I don't believe this would have been gained from simply reading about this research alone. Again, thank you for this unique learning experience; it is one that I will definitely cherish throughout my studies and future research career.

Yours sincerely, Brittany Patafio



# UPCOMING EVENTS

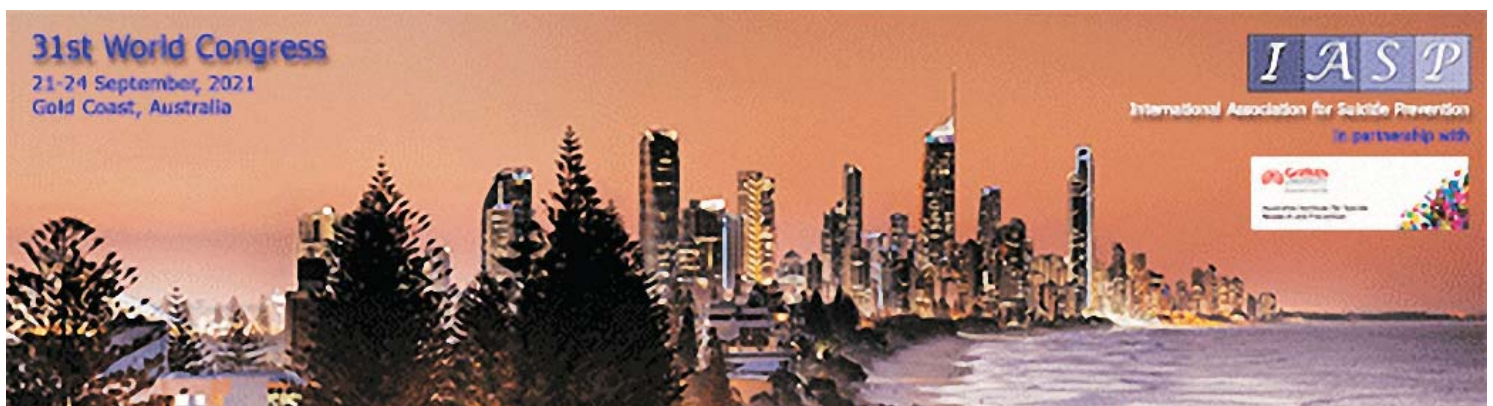
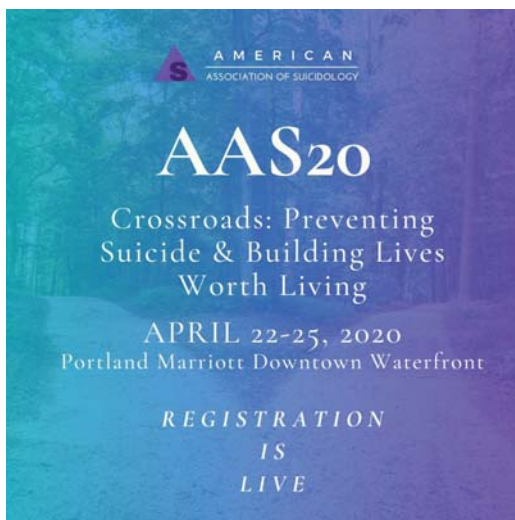


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<https://www.iasp.info/taipei2020/abstract-submission/>

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## TRIPLE i in suicidology

intuition  
imagination  
innovation

28 – 29 May 2020

TRIPLE i in Suicidology is an annual international conference on suicidology with an unique structure, held in the urban centre of Piran (Slovenia, EU) – the jewel of North Adriatic coastal towns.

[zivziv.si/triple-i](http://zivziv.si/triple-i)



*I follow my intuition...  
having long talks with experts and colleagues...*

In recent years, the conference has developed into a platform for fruitful discussions among distinguished experts in suicide research and prevention, interacting with young and perspective suicidologists and other mental health professionals.



*I imagine more than ever...  
we discuss old and new ideas in suicidology...*

The programme includes topics of suicide research and clinical work with suicidal patients, bereaved people and intervention effectiveness. Speakers have more time than in usual conferences to present their experiences and participants are invited to share their views.



*I love to innovate... and get feedback on how  
my innovations might change the world for  
better...*

You are invited to present your creative ideas and get input from our distinguished guests. The conference is intentionally kept small, to create a friendly environment where participants can truly interact with the experts and learn from them.

Let the TRIPLE i Conference be an opportunity for you to express and practice your intuition, imagination and innovative ideas. Our aim is to increase awareness and knowledge about suicide and thus contribute to the development of suicide prevention and postvention activities.



Slovene  
Centre for  
Suicide  
Research





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**SAVE  
THE DATE**

1 - 4 September 2020  
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**18<sup>th</sup>**  
**EUROPEAN SYMPOSIUM**  
**ON SUICIDE AND**  
**SUICIDAL BEHAVIOUR**

Connecting Innovation and Tradition:  
Reducing Suicide in 2020 and Beyond