

Equalities, Human Rights and Civil Justice Committee

Suicide Prevention in Scotland inquiry

Notes from engagement session - Tuesday 7 May 2024

Attendees

Andy's Man Club – 2 representatives

Families Outside – 2 representatives and staff member

Karen Adam, Paul O'Kane, Katrina Venters (Clerk)

What can we do to reduce suicide rates?

Raising awareness is key and talking to people and families who have experience of suicide.

There needs to be a recognition that prisons have been overlooked and there are a disproportionate number of people in prison who take their own lives. We need a targeted approach and prisons would be a good group to target.

75% of suicides are male. There is a culture in Scotland that men don't cry and that they need to "man up" if they are struggling. They are meant to be the strong ones in families. This is bred into men from an early age. Men often feel that having emotions is a weakness and a burden on their family. They often feel guilty about feeling weak. For those in prison they may have pre-existing problems and it is important services don't drop off when they go into prison.

We have a punitive approach in prison. One example given of a children's visit being taken away from an inmate as a punishment. That man then took his own life. We need to recognise that a suicide prevention strategy and a punitive approach are incompatible. Substance misuse is used to cope and there needs to be a recognition of these environments. Additionally in prison, there is an environment of fear and feeling that they have to wear a mask. You can't show weakness in prison to others – guards or others so the prisoner feels out of control. Taking away a visit can lead to behaviour spiralling downwards.

A "breathing space" policy to allow people in prison to call and access this service for support was implemented in prison recently but then taken away without explanation. There is a gap for that. Clarification of whether the ability for people in prisons to call Breathing Space should be key. It is important to ensure people in prison can get safe and anonymous access to help should they feel suicidal.

Everyone can go through mental health problems and we are learning more about mental health but one man every 2 hours is dying from suicide. People still think it is shameful and there is a lot of stigma. We don't say "committed suicide" anymore as this is like it was a negative act like something is wrong with you. Families often feel ashamed and angry. For those whose loved one takes their own life in prison they have to deal with the stigma of prison and the stigma of suicide too. This can lead to mental health issues within the extended family.

What more can we do?

We need to learn how to respond to the question "how are you". We often say we are fine but are not fine.

In prisons the staff need more training. Lived experience is really important. Organisations and individuals don't know how to respond if someone says they are struggling or if someone says they are suicidal. They don't create space or opportunities to help. Some organisations pay more to their first aiders but not to their mental health first aiders. It's a lot for the person who is supporting the person with mental health issues. They need the backing of the business to be able to signpost them to the right organisations who can help.

We also need to better train our GPs. It has to be more than leaflets or a referral. People who are suicidal need intervention immediately not 2 weeks down the line and the level of support from GPs is minimal. Referrals for mental health take so long – 42 weeks is the average to see a psychiatrist. There is not enough knowledge about mental health and not enough information on anxiety. It's not talked about enough.

People also have different mental health needs and require different help. GPs will give people medication but what is needed for some people is someone to talk to for support – talking and listening. Everything is too generalised.

Good practice in Fife where they are looking at having designated mental health workers. In the Angus area teams are working together and it's working well.

In prisons you can't just call the doctor. You can make a request and people have asked for help but then not been referred. We know of a family bereaved by a death in custody who were told he was referred to NHS for mental health support and they cannot get access to the young man's medical records to confirm when that was. This creates mistrust. If on remand you also don't have access to the same services as prisoners. Suicides in prisons are going up but nothing is ever done. Prisons will only let you see what they want you to see. Families feel like they are not getting anywhere. They are trying to change things but there are barriers and the prison service doesn't want the information out there. There is a lack of accountability and data sharing from organisations like NHS and prisons. The SPS suicide prevention

strategy ("Talk to me) is long overdue a review and always seems to be kicked into the long grass.

Scottish Government Creating Hope Together Strategy

Often approaches only target those in deprived areas and those on lower incomes but mental health issues affect everyone.

Rory O'Connor told us that 30% of people who take their own lives have never accessed support.

There was no mention of prison in the policy yet those in prison are not coping. The flowcharts in the policy are very confusing and inaccessible and it could be less corporate and more comprehensively written.

Prisons

Prisons feel overlooked. The policy talks about connections and choice but those things are incompatible with people's experience of being in prison. The Scottish Prison Service has introduced a concern helpline to support suicide prevention but staff have not been trained as to how to respond to those calls. Families were told there would be someone there to respond but that is not always happening effectively.

Those putting in the strategy have never been in the prison service. It is incompatible with the prison environment and therefore the strategy's principles cannot be applied within that environment. Prisons are also under resourced and overcrowded. The NHS is also under resourced.

Andy's Man Club – service provision

There used to be 800 individuals looking for support now it is more like 3500. There is a pandemic of mental health because the resource, training and compassion are not there.

There are a variety of problems that need support like childhood trauma and substance abuse. Some of those looking for support have accessed support in the past for a range of problems. For many medication has not been the best route or they have been put on a referral waiting list. The group provides a space where men can be open, vulnerable and there is no judgement. It comes down to lived experience like a shared response to going through divorce and being able to relate to the experience of others. Many men do not feel comfortable being vulnerable so it provides a place for them to talk.

There are 41 clubs in Scotland run by 3 people and they are desperate to have more staff but don't have the budget. They would like to open up north in Aberdeen as

there is a lots of rural expanse and rural suicide rate is high as people are more isolated and lonely. Face to face clubs are better but online support is also very helpful. It is not just about money – addressing the stigma and taking a compassionate approach are very important too.

Early interventions

There is also a lot of financial pressure on people and lots of children taking their own lives. There is no one for them to speak to. Families Outside creates a safe space for families to talk and it lifts a burden if individuals are given that space.

Early intervention is important. At some nurseries they use a well being chart with smiley/sad faces for how the child is feeling. It creates a space where they don't feel ashamed or embarrassed and where someone will listen if they feeling anxious etc.

There is a lot of good practice in schools but these are often the first resources to be cut.

Statement from Families Outside

A statement from the family of a 21-year-old who took his own life while on remand in an adult prison detailed that he had been on remand for 10 months and attempted suicide 5 times before he was successful. It said that troubled people are retraumatized when they are put into an adult system. If he had had help from older prisoners that might have helped but there was no support and there is an issue with the guards and how those in custody are treated. There is pre-judgement.