

Equalities, Human Rights and Civil Justice Committee
Tuesday 30 April 2024
11th Meeting, 2024 (Session 6)

Suicide Prevention in Scotland

Introduction

1. At its work programme discussion on [19 December](#), the Committee agreed to undertake a short inquiry into suicide prevention.
2. The focus for the inquiry will be that the Committee will:
 - Scrutinise the Scottish Government and COSLA's Suicide Prevention Strategy and Action Plan, its anticipated outcomes and progress to date.
 - Assess to what degree budget allocation to the Strategy and Action Plan are sufficient, and to what degree budget allocations in other areas of Government will assist or hinder its delivery
 - Establish to what degree the unequal distribution of deaths from suicide across different population groups are being accounted for in the Strategy and its implementation
 - Determine to what degree the voices of those with lived experience are being meaningfully heard within the Strategy and how it is implemented
3. At its meeting [on 27 February](#), the Committee considered a high-level approach and approved a [Call for Views](#) (which was issued on 1 March and closed on 29 March). Responses to the Call for Views have been published and are available [here](#).
4. The Committee agreed to take evidence from stakeholders on 23 and 30 April, and to undertake engagement work with participants who have lived experience of suicide. On conclusion of the inquiry the Committee will hear from the Scottish Government.

Background

5. [Suicide is often defined as death resulting from an intentional, self-inflicted act](#). Suicidal feelings can vary. They can include thoughts about ending your life, feeling that people would be better off without you, thinking about methods of suicides, or making plans to take your own life. Suicidal feelings may also be referred to as suicidal thoughts, suicidal ideation, or suicidal ideas.
6. The most recent [National Records of Scotland report](#) shows that the age standard mortality rate for Scotland for 2018-2022 had increased to 14.4 suicides per 100,000 population compared to a rate of 13.3 in 2013- 2017.
7. There are also significant inequalities in the suicide statistics. The [NRS Report shows](#):

- The rate of suicide mortality in the most deprived areas in Scotland was 2.6 times as high as in the least deprived areas in Scotland. This is higher than the deprivation gap of 1.8 times for all causes of death.
 - The mortality rate for suicides in 2022 was 2.9 times as high for males as it was for females.
8. In November 2023, the [Equality and Human Rights Monitor 2023: Is Scotland Fairer](#) identified a number of factors that were related to suicide risk. A higher suicide rate/ or reported suicide risk was identified among:
- People living in areas of socio-economic deprivation
 - People in prison
 - Men
 - People aged between 45 and 54 years (NRS figures use the 45 to 64 age range)
 - Trans and non-binary people
 - Lesbian, gay and bisexual groups
9. It also referred to Scottish Government research in which participants reported the effect of racism on exacerbating mental health illnesses and increasing their propensity towards suicide.

Scottish Government and COSLA policy

10. In 2022, The Scottish Government and the Convention of Scottish Local Authorities (COSLA) published [Scotland's Suicide Prevention Strategy 2022-2032: Creating Hope Together in 2022](#). The Strategy's vision is to reduce the number of suicide deaths in Scotland, whilst tackling the inequalities which contribute to suicide. Published alongside this strategy was an [Action Plan covering the period 2022 to 2025. A Year 1 Delivery Plan \(2023-24\)](#) was published in December 2023.
11. The Strategy also notes that the Scottish Government's [2021-22 Programme for Government](#) committed to double the specific funding available for suicide prevention over the course of the current Parliamentary term, from £1.4 million to £2.8 million.
12. The Minister for Social Care, Mental Wellbeing and Sport wrote to the Health, Social Care and Sport Committee with an [update on the Suicide Prevention Strategy in June 2023](#). This letter informed the Health Committee that an update from this strategy is expected in July 2024.

Evidence sessions

13. At its meeting on 23 April, the Committee held a roundtable session with the following stakeholders:
- **Rob Gowans**, Policy and Public Affairs Manager, Health and Social Care Alliance Scotland (the ALLIANCE)
 - **Neil Mathers**, Executive Director, Samaritans Scotland

- **John Gibson**, Chief Executive Officer, The Canmore Trust
- **Dan Farthing**, Head of Suicide Prevention, Scottish Action for Mental Health (SAMH)
- **Jason Schroeder**, Chief Executive Officer, Scottish Men's Sheds Association
- **Rebecca Hoffman**, National Policy Lead, LGBT Health and Wellbeing
- **Aidan Mitchell**, Policy and Public Affairs Officer, Change Mental Health
- **Dr Richmond Davies**, Head of Public Health Analytics and Intelligence, Public Health Scotland

14. At its meeting on 30 April, the Committee will hold two evidence sessions:

Panel 1: Witnesses with specialist knowledge of suicide prevention

- **Rose Fitzpatrick CBE, QPM**, Chair of the [National Suicide Prevention Advisory Group](#) and former Deputy Chief Constable of Police Scotland.
- **Professor Rory O'Connor**, a researcher at the University of Glasgow and leader of the University's [Suicidal Behaviour Research Laboratory](#), which aims to understand and prevent suicide and self-harm. Professor O'Connor is also the President of the [International Association for Suicide Prevention](#), and developed the [Integrated Motivational–Volitional Model](#) (IMV) of suicidal behaviour referenced in the Creating Hope Together strategy.
- **Dr Hazel Marzetti**, a researcher at the University of Edinburgh. Dr Marzetti is part of the [Suicide in/as Politics research project](#), which aims to develop a greater understanding of the social and political factors affecting suicide. The University of Edinburgh also hosts the [Suicide Cultures research project](#), which explores what suicide means to diverse communities across Scotland.

Panel 2: Representatives of healthcare stakeholders involved in the implementation of the strategy

- **Dr Amy Knighton**, East Scotland Chair, Royal College of General Practitioners
- **Dr Murray Smith**, Vice Chair, Royal College of Psychiatrists in Scotland
- **Sam Campbell**, Health Improvement Principal, Argyll and Bute Health and Social Care Partnership
- **Dr Jane Bray**, Consultant in Public Health, NHS Tayside

Topics

15. Today's sessions will provide an opportunity for the Committee to explore with witnesses:

- The issues affecting the incidence of suicide in Scotland, what risk factors there are and how it can be prevented
- The impact of previous suicide prevention initiatives in Scotland, and the Creating Hope Together Strategy and Action Plan

- How the needs of people at higher risk of suicide have been taken into account in the Strategy and if there are any of these groups who have not been properly accounted for.
- How people with lived experience have been engaged in the development and implementation of the Strategy and Action Plan
- The degree to which adequate funding has been allocated to the Strategy and Action Plan and the impact that funding decisions in different areas of Government will impact on the Strategy's outcomes
- How the Strategy and Action Plan are being implemented and monitored

Next steps

16. The Committee will discuss the evidence it has heard at today's session in private and agree on next steps.

Clerks to the Committee
April 2024