

## **7.7 Mental health and suicide**

Around 18 people each year commit suicide in Walsall, though suicide rates are lower than the England average. However 75% of people who commit suicide have not had any contact with mental health services, making it potentially difficult to identify people at risk of suicide.

Data for Walsall's Suicide Prevention Strategy was refreshed in March 2013 and more recently the adult mental health needs assessment had a comprehensive review of suicides in Walsall. Some of the key findings are:

- Deaths from suicide and injury undetermined in Walsall have averaged 18 males and 3 females per year in the last ten years (2006-15). There is, however, a wide fluctuation from year to year. 2014 saw the highest number of deaths (25) in the last 10 years (2006-2015).
- A downward trend in the Walsall suicide rate per 100,000 population is evident over the last 12 years. In the past, the Walsall rate was substantially below the England and West Midlands average rates but this favourable inequality gap has been progressively reduced, as national and regional rates progressively declined whilst Walsall rates increased particularly in last three years (2012-2014). Nevertheless, the average Walsall rate remained 4% below the England rate and 6% below the West Midlands rate.
- There is a huge variation in suicide rates across Walsall but there is no simple correlation with relative deprivation levels across the borough.
- Almost 5 times as many men commit suicide in Walsall than women. Among males, rates are highest among 35-64 year olds, with Walsall being higher than the national and regional rates.
- Among females aged 35-64 and 65-74, the Walsall suicide rate is higher than both regional and national averages (2012-2014) but the Walsall rate amongst the younger age group and older women is substantially lower than national and regional averages
- Among Walsall's 11 ONS nominated "Peer Group" PCT areas in Lancashire, Yorkshire and East and West Midlands, which have similar demographic profiles, Walsall ranks 2<sup>nd</sup> lowest for suicide rates. However, Male suicide rates has increased significantly in last three years (2012-14) to reduce the gap between the LA with highest rate (Rochdale =18.6) and Walsall (13.9).
- The most commonly adopted methods of suicide/causes of unexplained death reported nationally for both men and women is hanging and suffocation.
- There is a mixture of occupational backgrounds represented in deaths from suicide. People in manual jobs (e.g. builder, driver, handyman) and skilled occupation are almost equally likely to commit suicide or die from injury undetermined.
- Over half of suicides occur in the home with significant other numbers occurring in hospital.

Indicators:

A number of indicators in the NHS Outcomes Framework and the Public Health Outcomes Framework will be followed to monitor the progress of this strategy, including:

- *Self-reported population wellbeing*
- *Suicide rate*
- *Excess under 75 mortality in adults with serious mental illness*
- *Employment of people with mental illness*
- *Patient experience of community mental health services*
- *Hospital admissions as a result of self-harm*

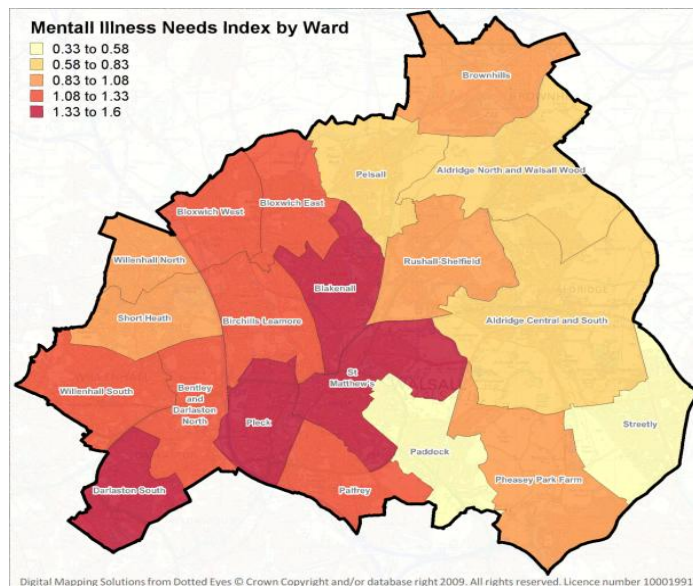


Figure 1 Mental illness needs index by ward (Source: National Psychiatric Morbidity Survey)

#### Priorities for action:

Current health service interventions that improve mental health and wellbeing include suicide prevention training with front-line personnel who come into contact with people at risk of mental health problems. These front-line personnel include officers in the employment and housing sectors. These actions should be continued and embedded for all staff. In addition, mental health first aid training for healthcare workers would be of benefit.

Other local priorities should include brief interventions in primary care and Improving Access to Psychological Therapies; continuing work with pregnant women who smoke (one-to-one sessions to address sources of stress) to help them to quit smoking; and expansion of the workforce development programme to help support people with long-term illness and absenteeism.

***Click the link below to access the full needs assessment.***

[Link to Adult Mental Health Needs Assessment](#)