

# **chooselife**

A national strategy and action plan  
to prevent suicide in Scotland

## **Background to Local Action Plan**

### **Aberdeenshire**

**April 2005**

## Area Profile

Aberdeenshire extends to 6,313 sq km (2,437 square miles), representing 8% of Scotland's overall territory. The landscape varies from mountainous Cairngorms, through rich agricultural lowlands to rugged coastline.

The area is divided into 6 administrative areas, as follows. More detailed information available on the Aberdeenshire Council website [www.aberdeenshire.gov.uk](http://www.aberdeenshire.gov.uk).

### **Banff and Buchan**

Land area 617 sq km (238 square miles) representing 10% of the area covered by Aberdeenshire Council. Population density 58 persons per sq km (compared with Aberdeenshire density of 36 per sq km). Banff and Buchan's most striking physical feature is its dramatic 77 km coastline. The population is declining slightly. Fraserburgh (12,800), the main centre of population, has experienced some social and economic problems.

### **Buchan**

Land area 587 sq km (227 square miles). Population density is 67 persons per sq km. The Area is characterised by an open agricultural landscape with occasional woodland, interspersed by farms and small settlements. The main town of Peterhead (17,800) has experienced a downturn in the local economy, which relies on the fishing industry and oil service industries.

### **Formartine**

Land area 827 sq km (319 square miles) representing 13% of the land area covered by Aberdeenshire Council. Population density 44 persons per sq km (compared with Aberdeenshire density of 36 per sq km). To the east, the area is defined by the 24 km coastline. The town of Ellon (9,100) has experienced rapid population growth in the last 10 years.

### **Garioch**

Land area 583 sq km (225 square miles) representing 9% of the Area covered by Aberdeenshire Council. Population density 74 persons per sq km (compared with Aberdeenshire density of 36 per sq km). Garioch's landscape is one of undulating farmland. The main centre of population is Inverurie (10,900), which continues to expand, in terms of population and in the service industries.

### **Kincardine and Mearns**

Land area 756 sq km (292 square miles), representing 12% of the area covered by Aberdeenshire Council. Population density 51 persons per sq km (compared with Aberdeenshire density of 36 per sq km). Kincardine and Mearns is defined by 59 km of coastline to the east, and the foothills of the Grampian mountains to the west. Stonehaven (10,300) is a thriving commuter town, with excellent transport links with Aberdeen, while further south agriculture remains an important part of the local economy and way of life.

**Marr**

Land area 2,942 sq km (1,136 square miles) representing 47% of the land area covered by Aberdeenshire Council. With nearly half of Aberdeenshire's landmass but only 15% of its people, Marr is the most sparsely populated Area (density of 12 persons per sq km). The towns around the Aberdeen City commuter corridor tend to be most affluent, experiencing rapid population growth.

## Issues of particular importance in Aberdeenshire

### Communication

Aberdeenshire's action plan and the specific actions that are described within it are not as well known as we would wish. Improving communication in its own right could do much to increase the effectiveness of suicide and self harm prevention strategies, by raising the public awareness to the extent that people are willing to speak about it without a sense of shame or denial. There are three main audiences; service providers, people who may wish to use services, and the general public including the media. Each has very different information needs, and our styles of communication need to be similarly diverse. Communication is, of course, a two-way process, so we must create channels for people to tell the Choose Life Steering Group about relevant services that they may be developing, emerging needs that they are aware of and whether they think our funded projects are effective. Our colleagues in the Samaritans have already had some success with using text messaging; we need to think about communication in a similarly innovative way. We recognise that no single method will be adequate; the development of a communication strategy that addresses the needs of frontline staff from all sectors, service users and residents is therefore required.

### Information Needs

Our action plan is based on information from

- General Registrar's Office
- Health Data
- Community Health Profiles
- National and local research
- Informed local opinion

Relevant local information could help to target scarce resources more effectively. In particular, it would be helpful to know in more detail about people who express suicidal thoughts, or are self-harming with suicidal intent, and who are known to

- Primary care teams
- Community mental health teams
- Community substance misuse teams
- Social work support services eg day care, home care
- Children and families teams
- Accident and Emergency departments

However, it is recognised that this data is difficult to collect and report in a way that does not compromise confidentiality.

### **Dealing with Stigma**

Because of the stigma attached to suicide and self harm, some people prefer to seek help outwith their home area. Some of those who live within an easy travelling distance of Aberdeen may choose to use City services where there is a greater degree of anonymity. Many people who live in the commuter belt will already be familiar with City services and perhaps be likely to use them. However, Choose Life partners want to support people locally, and therefore there has been considerable investment in improving the knowledge and skills of our community staff. Grampian has an active anti-stigma group that is contributing to the current young person's campaign. This group should be aware of this action plan.

### **Support for People Experiencing Particular Life Crises**

#### **Employment**

Although the loss of employment is a risk factor, given that we have a higher level of employment than the Scottish average (unemployment is highest in Banff Buchan: unemployed claimants 1.9% of population), this may not be a priority.

#### **Understanding of cultural differences**

There is a notable influx of workers from Eastern Europe and the accession countries to take up jobs in the fish processing industry around the north east coast. They may face difficulties not only in connection with their employment but also in coping with a new lifestyle. They may also have personal issues that can make them vulnerable to mental distress and in need of support.

#### **Domestic Abuse**

There are now two women's refuges in Aberdeenshire and demand for places is increasing. Domestic abuse is a particularly distressing kind of life crisis. If these women are the sole carers for children, they are likely to be under added pressure.

#### **Criminal Justice**

People who are accused or convicted of a criminal offence are at increased risk of suicide or self harm. It is therefore important that Police, Criminal Justice staff and the Scottish Prison service are expert in identifying risk and responding immediately and helpfully to these people.

#### **Substance Misuse**

Aberdeenshire is a large and diverse geographical area. Although there are affluent parts, there are also areas of deprivation, particularly in the north. In this more deprived area there is a considerable need for action and services to address substance misuse, which is associated with suicide and self harm. While there are identified areas in the north where the incidence of substance misuse is above the Scottish average, it is accepted that there are now few areas of Aberdeenshire where the misuse of drugs is not an increasing problem. Given that people with severe alcohol dependency are at high risk, and people with drug misuse problems are also more likely to consider suicide, we should ensure that staff from all agencies working with this client group are well informed and well trained.

### **People with Mental Health Problems**

The association of some mental illnesses with an increased risk of suicide is well known. Given that there is a higher incidence of mental illness in the north of Aberdeenshire, which also contains the wards with the highest level of deprivation, it is clearly necessary to ensure that staff in all agencies, working with all age groups, are equipped with the knowledge and skills to respond in a helpful way. The focus in the new Mental Health (Care and Treatment) (Scotland) Act 2003, on offering care and treatment in the community where possible, will increase this requirement.

The above are only some of the crises that may make people vulnerable to suicidal thoughts. We know that where people experience several of these along with other factors such as homelessness, or school problems, they are at increased risk. Service providers should, through effective joint working, be able to identify these people and coordinate a response.

## **Current Work**

Aberdeenshire's local action plan contains initiatives funded directly through Choose Life funds, and also recognises the very valuable contribution of work that is ongoing and is supported through the budgets of each of the partners. Complementary work under each of the objectives includes, for example,

### **Objective 1 Early Intervention and prevention**

Surestart  
Dialogue Youth Work  
Outreach Youth Work

### **Objective 2 Responding to Immediate Crises**

Review of the Out of Hours Community Psychiatry Nursing service, linking with the requirement to provide crisis services under the 2003 Mental Health Act  
Samaritans  
Child and Adolescent Primary Health Workers

### **Objective 3 Longer term work to provide hope and support recovery**

An Aberdeenshire action plan for the 2004-2010 Mental Health strategy, which is strongly focused on recovery  
Enhanced work with people with substance misuse problems to help them find employment, and a similar service for people with mental health problems  
An innovative range of activities to improve mental and physical health

### **Objective 4 Coping with suicidal behaviour and completed suicide**

A dedicated carers support service within mental health services  
Cruse

### **Objective 5 Promoting greater public awareness and encouraging people to seek help early**

This action plan including a summary of directly funded projects will be made available to schools, mental health services, the Police and relevant other staff.

### **Objective 6 Supporting the media**

### **Objective 7 Knowing what works**

All the specific projects funded through Choose Life are being evaluated. In addition, Doing Well by People with depression initiatives are being evaluated; some of the people that are being supported will be at risk of suicide or serious self harm. Information about outcomes should be shared.  
Aberdeenshire's Choose Life funded Initiatives

## **Aberdeenshire's Choose Life Funded Initiatives**

### **1. "Z" Cards**

These are information sheets designed for all front-line staff in public and voluntary sector agencies. 17,000 of these were distributed in 2003. Grampian Police are arranging to evaluate the cards.

### **2. Foyer Project**

Between August 2004 and end of April 2005, staff working with young people in the north of Aberdeenshire have attended training sessions. The LEAP for health model of planning and evaluation is being used. If this work proves to be effective, ways of incorporating the training into the training plan for staff should be identified. The mentoring role may be able to be assumed by experienced staff, or continue to be purchased

### **3. Aberdeenshire Signposting Service**

The Council for Voluntary service in Aberdeenshire has trained volunteers who are based in Health Centres in Turriff, Stonehaven and Inverurie. Volunteers are supported by a coordinator who manages the service.

### **4. Emotional Wellbeing of Young People**

The Robert Gordon University is carrying out a piece of action research to inform the development of an intervention in Portlethen that will be available to all children as a means of enabling them to increase their self esteem and emotional literacy, to impact positively on self harm, to help key staff to develop effective joint working, and to provide an insight into the relationship between self esteem, emotional literacy, and self harm in a way that can be applied elsewhere in Aberdeenshire, and elsewhere. This is a 3 year project that will report in 2006.

### **5. Supporting Vulnerable Older People**

This project aims to identify older people who have mild mental health problems and/or are at risk of suicide and self harm, including self neglect, to offer individually tailored support and help to reduce loneliness and isolation. Ways of encouraging the development of a more inclusive, supportive community are being considered alongside this work, which will contribute to mainstreaming.

### **5. ASIST**

Applied Suicide Interventions Skills Training is a training course designed to provide participants with the knowledge and skills needed to respond in a helpful way if someone they are in contact with through work expresses suicidal or potentially

suicidal thoughts. We have 3 trainers in Aberdeenshire who will deliver three 2 day courses in 2005, for about 80 staff.

## Action Plan Team Profile

**Full Name:** Aberdeenshire Choose Life Group

**Remit:** To design and implement a Choose Life Action Plan for Aberdeenshire

**Chair** from August 2005

**Name:** Keith Nunn

**Designation:** Strategic Development Officer

**Organisation:** Aberdeenshire Social Work

Number and dates of Meetings held 2003-2005:	2003 – Meetings held June, July, August, September, November, December 2004 – meetings held January, March, April, May, August, November 2005 – meetings held Feb, May, August
--	--

### Members of Steering Group

Name	Designation	Organisation
Janice Mackinnon	Joint Commissioning Manager	Aberdeenshire Social Work
Dawn Tuckwood	Health Improvement Officer	Aberdeenshire Education & Recreation Service
Gill Kitching	Strategic Development Officer	Aberdeenshire Council
Peter Willox	Inspector	Grampian Police
Jane Cumming	Area Manager	Penumbra
Mary Bellizzi	Rural Health Advisor	Aberdeenshire Council
Mike Gray	Mental Health Nurse	Scottish Prison Service
Linda Pritchard	Chair	Aberdeen Samaritans
Derek McLeod-Petrie	Health Promotions Advisor	NHS Grampian
Jamie Paterson	Community Health Manager	Aberdeen Foyer
David Robb	Service User	Service User Network
Jennie Williams	Public Health Coordinator	NHS Grampian
Sally Hill	Liaison Psychiatry Nurse	NHS Grampian
John Donaghey	Community Psychiatric Nurse	NHS Grampian
Rev Dr Bruce Gardener	Minister	Church of Scotland

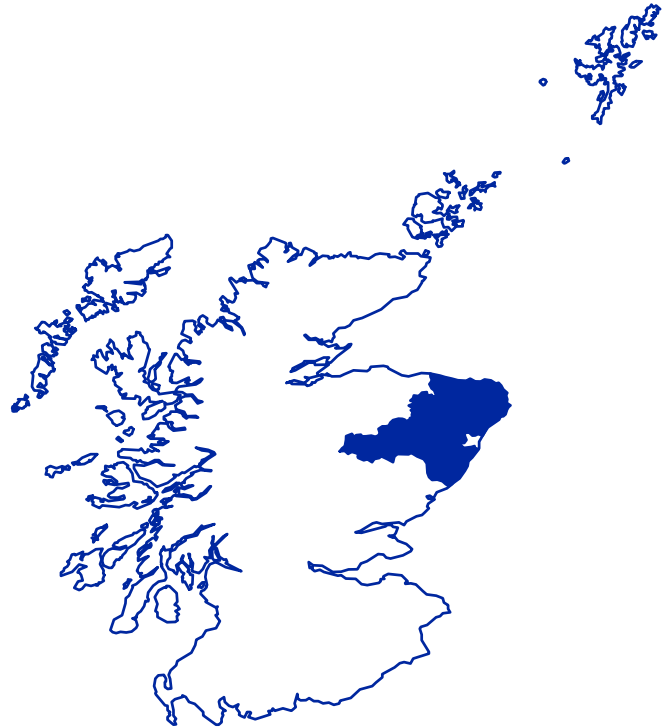
# Appendix 1

## Local Information



Based on Ordnance Survey mapping. © Crown copyright reserved. Aberdeenshire Council 0100020767 2004.

<b>Administrative Areas 2001:</b>	
Banff and Buchan	35,742
Buchan	39,160
Formartine	36,478
Garioch	42,947
Marr	34,038
Kincardine and Mearns	38,506
<b>Aberdeenshire</b>	<b>226,871</b>



**Aberdeenshire within Scotland**

## Appendix 2

### Local suicide statistics and relevant trends

#### Aberdeenshire

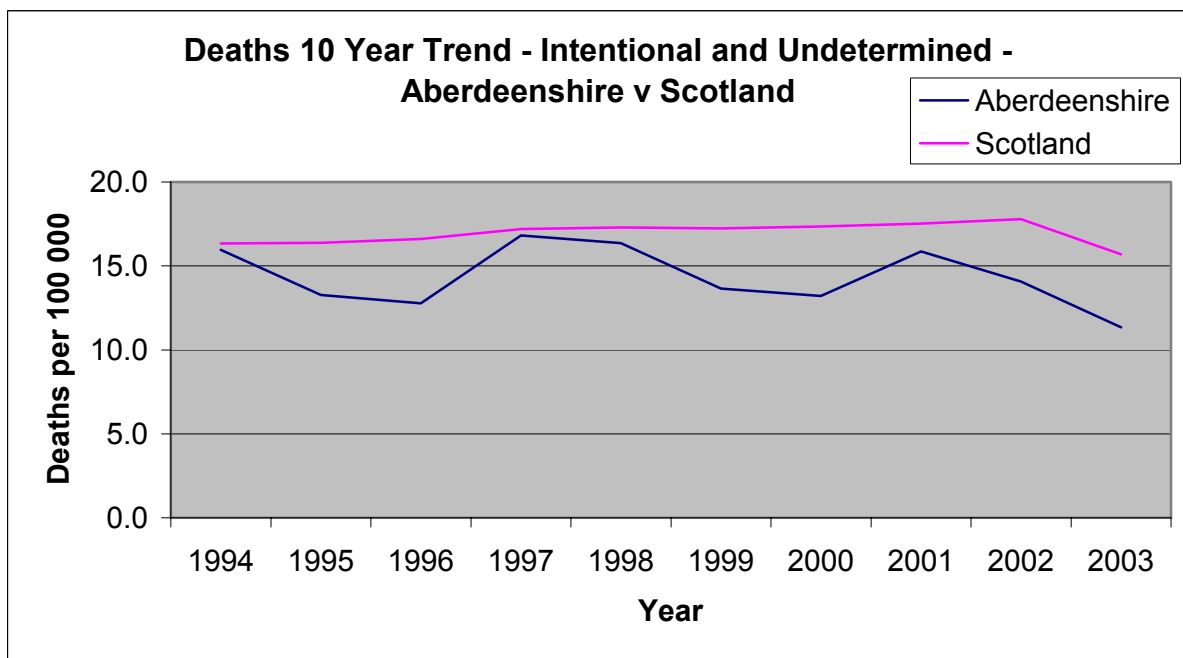
GRO Death Data: Deaths from Suicide / Self Inflicted Injury 1994 -2003

ICD9 = E950-E959

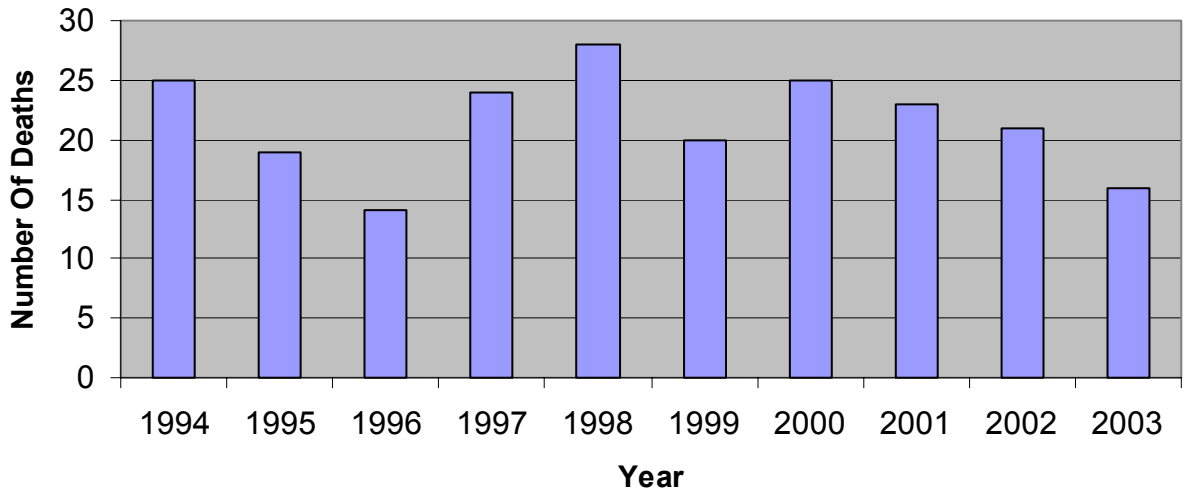
ICD10 = X60-X84 & Y87.0

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Male	19	16	11	16	24	14	21	21	14	12
Female	6	3	3	8	4	6	4	2	7	4
Total	25	19	14	24	28	20	25	23	21	16

Source: GRO Death Data



### Aberdeenshire Deaths From Suicide / Undetermined Intent - All Ages



### Aberdeenshire Deaths From Suicide / Undetermined Intent - All Ages Male / Female

