

# HOPE

**A CONFERENCE ADDRESSING SUICIDE & SELF HARM AND PROMOTING  
POSITIVE MENTAL HEALTH IN YOUNG PEOPLE IN NORTHERN IRELAND**

EVALUATION REPORT

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## LAST WORDS

### Verse 1

I GOT A PEN IN MY HAND AND I'M WRITING YOU A LETTER  
THEY WILL BE MY LAST WORDS THAT I TELL YA  
ALL THE THINGS I SAID AND DONE  
ALL THE TIMES THAT I WAS WRONG  
I WANNA MAKE UP FOR THE PAIN I CAUSED YOU.

### Chorus

THOUGH I'M GOING AWAY NOW I'LL SEE YOU AGAIN  
Sometime, someday IN A PLACE THAT'S NOT FAR AWAY, NOT FAR AWAY FROM  
HERE  
WON'T HOLD YOU BACK NO MORE, OR TAKE UP YOUR TIME  
WHEN I FLY IT WILL BE ALL FINE, you'll see goodbye.

### Verse 2

I GOT A PEN IN MY HAND AND I'M WRITING YOU A SONG  
NOT TO BLAME YOURSELF FOR THINGS you've DONE WHEN I'M GONE  
ALL THE TIMES YOU'RE THERE FOR ME,  
I BIT THE HAND THAT FED FOR ME  
I WANNA MAKE UP FOR MISERY I CAUSED.

### Chorus

### Verse 3

I got a lump in my throat and I'm struggling for air  
Drop the pen from hand and lookout with a stir  
All the time has ended now  
All my fears have passed me by  
All the tears, you don't have to cry over me

### Chorus

**All lyrics written Composed by: William McConville**

Vocals: Eddie Burns & William McConville

Guitars: Eddie Crow & David Crozier.

**With support from: Clive Mills, Making Music Workshop.**

Supported through south city youth programme, south city open learning (resource and development) centre.



## INTRODUCTION

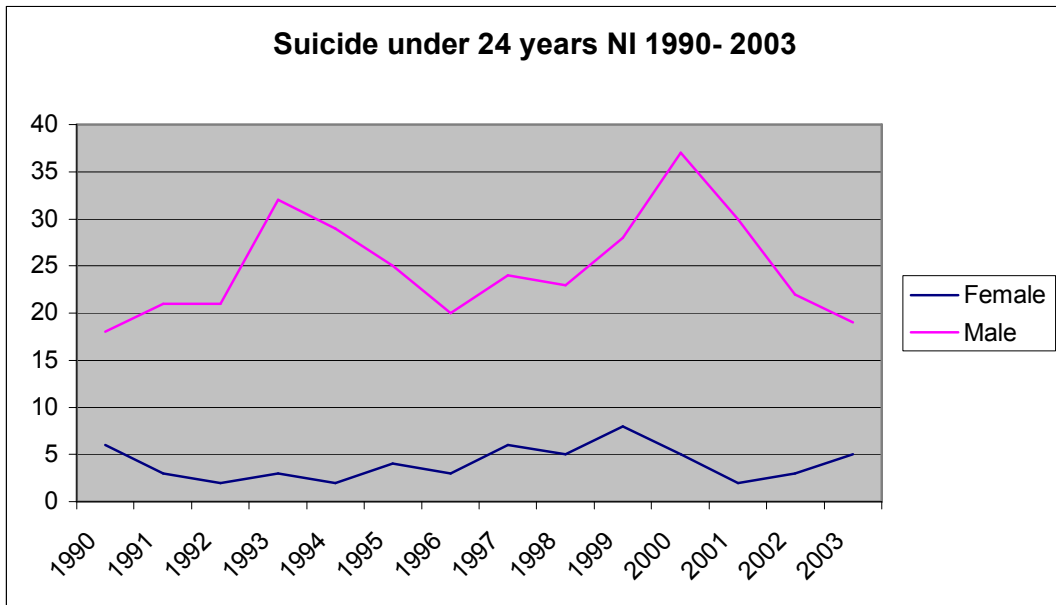
Suicide is a major public health problem worldwide. It has been described as the leading cause of premature, preventable death (Maris, Berman & Silverman, 2001).

Suicide rates among children and young people have increased significantly worldwide over the last three decades (Guo, 2002). In 2002 suicide was the 3rd most common cause of death of young people in the USA accounting for 12.1% of all deaths in the under 24 years age group (American Association of Suicidology, 2004).

In Northern Ireland suicide is now the leading cause of death for young people. The General Registrars Office reports that 132 people died by suicide in 2003, 22 (17%) of which were under the age of 24 years. In the 36- year period 1966- 2001 a total of 569 people under the age of 24 years took their own life and amongst young males a statistically significant correlation between suicide rates and terrorist related homicide is noted (McGowan et al, 2005). While the numbers of suicide among young women is stable, suicide among young men is increasing (Figure 1)<sup>1</sup>, although a slight drop in young male suicide in the years 2002 & 2003 can be seen.

Attempted suicide (para-suicide) is more common than suicide, and is more frequent among young women. Regionally collated statistics on the incidence of self-harm are not available, however there is some anecdotal that point to an increasing trend. Self-harm among young people in the Derry area is a growing problem. The number of self-harming young people presenting at the local A&E has doubled from 300 to 600 in the last two years (Mc Gale, 2005). An unpublished report (McGowan, 2001) suggested a doubling of presentations at Accident & Emergency departments in North & West Belfast in the 12 months April 2000- March 2001.





1. The General Registrars Office, which collates figures on suicide, changed the way in which they record deaths in 2001



## THE 'HOPE' CONFERENCE

*"It was a cold February night last year. Accompanied by the local youth worker Stephen, I drove around a small part of North and West Belfast. As we went up a street in a matter of fact way he said "The young man in that house took his own life a few weeks ago; the girl in that house has been self harming and tried to drug overdose; the boy in that house died last week a few weeks after his friend had taken his own life..." and so it went on. We came to the end of the street and there against a wall were pictures of those who had taken their own lives, with candles, flowers and cards close by.*

*I found it hard to keep back the tears. It seemed such a waste – so heartbreaking that young people should feel so desperate that there was no other way out. Even with the best efforts of friends, family, youth workers and all kinds of professionals these young people slipped through the net.*

*I decided that night that we had to think again about how we approached young people's mental health needs."*

Nigel Williams, 22 February 2005

**"HOPE"** - a conference addressing **Self- Harm & Suicide among Young People** took place in the Park Avenue Hotel Belfast on the 22 February 2005. An invited audience of 250 people with equal representation of young people and policy makers attended the conference.

Two young presenters- Lorraine Ashwood & William Malseed opened the conference. Both aged 14 years old and from Belfast, Lorraine & William chaired the conference during the morning session.



The Northern Ireland Commissioner for Children & Young People, Mr Nigel Williams used his keynote address for an impassioned plea for a political focus on the mental health needs of the young in Northern Ireland. “It is unacceptable we cannot find beds in hospitals for young people at risk,” said the Commissioner.

“It is unacceptable that a number of mental health beds have been closed because of staffing problems; it is unacceptable that there are not enough resources for teenage girls with eating disorders; and, it is unacceptable that proposed Government cuts will close projects working to help prevent suicide and self-harm.”

The full text of his speech is available at:

<http://www.niccy.org/news/speech220205.aspx>

Young Peoples Views on Self- harm & Suicide, a research project carried out by Opportunity Youth, were presented by Danielle Watt & Anne- Marie McClure. They reported the findings of a questionnaire and focus groups involving 596 young people across Northern Ireland. They report that the most common reasons that young people harm themselves or attempt to take their own life were mental health problems, and in particular depression and stress (16%), paramilitary intimidation and bullying (13%) and sexual issues, including rape and abuse (12%). Other reasons include Family problems (9%), drug/ alcohol use (9%), recent bereavement (4%) and having “no future” (2%). (Watt & McClure, 2005).

This report had been presented to the organisers of the conference during the planning stage and had helped shape the topics and structure of the conference. The full report was distributed to delegates at the conference and is available from Opportunity Youth, or from NICCY.

Professor Ed Cairns (University of Ulster) presented a paper entitled “Sweet 16 and never been stressed” (Cairns & Lloyd, 2005). Prof. Cairns reported that 24% of all participants in their study felt some level of psychological stress. The main causes of the stress being School/work issues, family problems and friendship/ relationship problems. More information on this presentation is available at [www.ark.ac.uk](http://www.ark.ac.uk).



This was followed by a presentation by Dr Peter Gallagher (Homefirst & Causeway Hospital & Community Trusts). The focus of his presentation was on the clinical presentation of suicide & self-harm, along with the risk factors and known precipitant of a suicide attempt. Dr Gallagher also made reference to existing Child & Adolescent Mental Health Service provision in Northern Ireland.

The morning session concluded with delegates attending two from a number of workshops/ discussion groups. (See table 2)

<b>UNDER PRESSURE</b>	<b>GENDER EQUALITY UNIT</b>
<b>LGBT PROJECT</b>	<b>ZEST:</b>
<b>YOUTH COUNSELING SERVICES</b>	<b>TURN IT AROUND</b>
<b>GATE-KEEPING</b>	<b>MINDOUT</b>
<b>TRAINING FOR LIFE</b>	<b>ASIST – Applied Suicide Intervention Skills:</b>
<b>STRESS MANAGEMENT</b>	<b>HELPING HANDS:</b>

**Table 2.** HOPE Conference Morning Workshops



A number of organisations (See box 2) provided exhibits for delegates to peruse during the lunch break. In addition the organisers provided a video diary room in which delegates could record their thoughts & feelings on the event. Other lunchtime activities included “Hip Hop” dancing”, aromatherapy and “Chill Out” facilities, for attendees to relax.

**Action Mental Health**  
**Aware Defeat Depression**  
**Belfast Education and Library Board**  
**Contact Youth**  
**Health Promotion Agency**  
**National Union of Students/Union of Students in Ireland**  
**North Eastern Education and Library Board**  
**North & West Belfast Health and Social Services Trust**  
**Opportunity Youth,**  
**Pennyburn Youth Club**  
**Rainey Endowed Grammar School**  
**Samaritans**  
**Western Health and Social Services Board**  
**Youth Action N I**  
**Youth Council for N I**  
**Zest N I**

Box 2. Organisations exhibiting @ the HOPE conference

Kylie Benson & Kirsty Armstrong, both aged 15 years and from Lisburn & Belfast respectively, chaired the afternoon session of the conference.

Dr Philip Crowley (Institute of Public health in Ireland) presented the results of a recent study that he had been involved in, examining the effectiveness of Youth Suicide Prevention programmes (Crowley, Kilroe et al, 2005). This group looked at 444 research papers and evaluated them for quality finding only seven that met their criteria for further examination.





Of these seven they conclude that the results of the studies suggest that there is not evidence to fully support any prevention programme. He did stress that this didn't mean that they didn't work, just that there was not enough evidence to say that they did.

Following the presentation by Dr Crowley the delegates, again, moved back into smaller discussion groups. The focus of these groups was threefold; to review what had been learned in the morning session, to highlight areas for development and to suggest 'next steps' in the development of a suicide prevention strategy.

Prior to the conference closing the participants met as a large group for feedback from the discussion groups and the conference closed with a review of some of the comments from participants made using the video diary facility. The conference organisers also recognised the sensitivity of the topic of suicide and provided all delegates with a list of contact numbers for support services as well as providing professional mental health support on the day of the conference, through identified counsellors.



## **EVALUATION DESIGN**

The evaluation team was commissioned to evaluate the conference in October 2004. The evaluation commenced following the conference in February 2005, providing the evaluators with the opportunity to employ a retrospective design, eliciting the views of participants and organisers after the conference. The evaluation approach employed in this paper allowed for focus both on the process and outcomes of the “HOPE” conference.

The evaluation aimed to provide an independent evaluation of the “HOPE” conference. A number of approaches to data collection were used to identify the organisers and participants’ views.

### **Participants’ Views and Experiences**

Views and experiences of the participants were gained from the completion of a questionnaire<sup>1</sup> issued at the conference to all attendees (See Appendix 1). Self-completion of the questionnaires prior to leaving the conference was encouraged. No identifying data was required and the questionnaire took about ten minutes to complete.

The questionnaire, developed after discussion between the conference organisers and the evaluators contained six sections. Each of the six sections focussed on one aspect of the desired outcomes of the conference and allowed the respondents to provide a narrative account of their views and experiences.

The first section asked participants to comment on the effectiveness of the conference in meeting the objectives of ‘HOPE’.

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<sup>1</sup> Copy attached as appendix 1



The second section listed the four desired outcomes from the conference and provided delegates with an opportunity to comment on how well these objectives had been achieved.

The third section asked participants to outline areas in which the conference programme and structure could have been improved. The fourth section asked for comments on the best way for the Northern Ireland Commissioner for Children & Young People to pursue the issue of youth suicide, and the fifth for any other comments. The final section asked, via a tick box, for participants to identify themselves as male/female and over/under 18.

Verbatim comments from each of the workshops in the afternoon were also collated to further enhance participant views and experiences.

### **Views of Organisers**

Following the conference all members of staff of the Commissioners office were invited to submit their thoughts and experiences in relation to the conference. No specific guidance in relation to the types of information were given, allowing respondents a 'free rein' to make their views on all aspects of the conference known.

### **Method of Data Analysis**

Following the conference, NICCY staff collected the completed questionnaires. These were collated and forwarded to the evaluators three days following the conference. Ten completed questionnaires were received by post at the NICCY office eight days after the conference. These were forward to the evaluators the following day. 68 completed questionnaires in total were returned and included in the analysis.

Two responses from the conference organisers were received. One of these was from an individual and the second, a collated response from a group of staff within the NICCY office.



Narrative was transferred from the completed questionnaire onto a word processing package. The responses under of each of the subheading outlined above were collated and synthesised.

The flip chart records of the afternoon workshops were also analysed in the same manner to enhance the views and experiences of the participants.



## EVALUATION FINDINGS

### Profile of Survey Respondents

A total of 68 participants completed the evaluation questionnaire, representing 34% of the total number that attended the conference. Table 3 below provides a breakdown of number of respondents by gender and age.

	Male	Female
Under 18	4	4
Over 18	14	42

Table 3: Profile of Respondents

### Experiences of the HOPE Conference

There was a general consensus amongst all participants regardless of gender and age that the conference was a success and that the majority of aims and objectives of the HOPE conference had been met.

Comments such as those below were common in the general comments section of the evaluation.

***“Very well organised day- great”***

Female. Over 18. Participant 1

***“Yes, I congratulate everyone for talking and on obtaining their goals with each other in the conference”***

Male. Under 18. Participant 35.



***“Great day, well done!”***

Female. Over 18. Participant 21

***“Well done, very enjoyable. Make sure you do more of it!”***

Female. Over 18. Participant 53

### **Meeting the aims of the conference**

The HOPE conference had two specific aims; To engage young people and professionals together in sharing best practice and; To explore policy and practice in the prevention of suicide & self harm.

#### **To engage young people and professionals together in sharing best practice.**

The evaluations demonstrate that this was the most successful part of the conference. There were differences however in the perceptions of the participating young people and of the professionals.

The comments from the professionals highlighted the approach of the conference of joint facilitation between youth and policy makers.

***“Excellent. Encouraging to see involvement across younger people and other people beyond just consultation”***

Female. Over 18. Participant 22.

***“A refreshing change to have young people involved in discussions about issues that affect them”***

Female. Over 18. Participant. 34

***“Excellent presentation & involvement of young people and professionals”***

Female. Over 18. Participant 44



***“This was well achieved. It was important for adults to HEAR & LISTEN to young people. It was great that young people led the conference.”***

Female. Over 18. Participant 45

***“Young people did share their views, which is useful for professionals to hear...”***

Female. Over 18. Participant 51

Young people’s views focused on being able to talk openly and feel comfortable in sharing their thoughts and also feeling that their needs were being valued.

***“I think this part of the day was very successful. I have met loads of new people and we have talked openly and comfortably with each other.... This has been achieved. It’s really good for the young people to outweigh the suits! Really good”***

Female. Under 18. Participant 64

***“I think that the matter of people speaking one at a time were very informative about the main subject: suicide & self-harm”.***

Female. Under 18. Participant 3.

***”It has been very good for everyone taking this seriously and wanting to help”.***

Male. Under 18. Participant 35.

***“I think that’s good so then you can try and find the problem and try to fix it”.***

Female. Under 18. Participant 46.

***”Excellent. This worked brilliantly! Especially as the professionals were casually dressed and we didn’t know they were professionals. I think this was achieved as we all worked together”.***

Female. Under 18. Participant 68



**To explore policy and practice in the prevention of suicide & self harm.**

The exploration of best practice in the prevention of suicide and self-harm was addressed in a number of ways. A recent research paper was included in the conference pack. This was enhanced by a keynote contribution from Dr Philip Crowley and the morning workshops also allowed further discussion of suicide and self-harm prevention strategies.

Those respondents aged under 18 made little comment on the evaluation forms on the achievement of this aim. In total four comments addressing best practice were made.

***“Very well done. I am more aware of suicide and self-harm & I now feel that lots of things can be done to prevent it”***

Female. Under 18. Participant 68

***“In all the workshops they made sure they got across the facts of why young people committed suicide”***

Female. Under 18. Participant 3.

***“This aim, I feel, has been achieved successfully”***

Female. Under 18. Participant 64.

***“Brilliantly”.***

Male. Under 18. Participant 47.

Comments from the professionals attending the conference were mixed.

***“Very good, everyone could bounce ideas & facts off each other, speakers good and information stands. Very good that there will be an update on the 22 May to see how this has helped bring things to light & help change things”.***

Female. Over 18. Participant 1





***“Disappointed good practice from ELB’s & HSSB’s not on display”***

Female Over 18. Participant 2.

***“I felt that the speakers and workshops helped to highlight the issue and encouraged discussion”.***

Female. Over 18. Participant 11

***“Good plenary sessions about needs. Good workshops and handouts”.***

Male. Over 18. Participant 13

***“... Practice in prevention of self harm has helped me open doors in trying to help prevent suicide from occurring”***

Female. Over 18. Participant 16

***“I think it was covered effectively considering the subject- policy & practice- which can be a difficult to approach”.***

Female. Over 18. Participant 33.

The policy aspects of the day appear not to have been fully addressed given the comments made specifically in relation to this subject.

***“Practice was explored...policies still need to be explored”.***

Female. Over 18. Participant 41

***“More could have been done to demonstrate the practical steps that both young people and professionals can take to influence policy makers”.***

Female. Over 18. Participant 42



No young people commented specifically on the policy aspects of the day. The afternoon workshops provided an opportunity for conference participants to explore policy developments in more detail. These, in conjunction with some comments in the evaluation sheets, highlighted a number of areas in which there is a perceived lacking in policy provision for the prevention of suicide and self-harm.

Specifically these can be listed as;

Inadequate medical provision:- lack of GP services, lack of psychiatric in-patient services, lack of emergency services, inadequate Child and Adolescent mental Health Service provision. One participant commented

***“....remembering with a 30% population in the North under 18, 2% of the total MH budget is for this age group”***

Male. Over 18. Participant 10.

Inadequate Mental Health Promotion activities:- alcohol a problem for young people, anything can cause stress, not just suicide but also general mental health, specific schools based mental health promotion, increase and support, anti-bullying programmes.

Involvement of young people:- greater understanding of young peoples needs in schools, gap in services for 13- 17 year olds, too many rules around young people, school/ community councils of young people, need for young people to be involved in the decision making process, a young peoples suicide prevention conference/road show, give young people a voice.

***“Yes, it has been an achievement for young people and their voices being heard”***

Male. Under 18. Participant 35



Co-ordination of services:- consolidate available resources, clear strategy required, Northern Ireland regional suicide prevention strategy, increased investment in young people in general recognising that suicide and self harm are not just mental health issues but can also be related to sexuality, poverty, bullying and literacy, investment in prevention rather than cure, pull together relevant agencies- police, community, families, GP's etc.

Increased community facilities for young people:- need for recreational meeting places, need for places for young people to be sociable and off the streets, invest in a call line, public education, long term funding, too many drugs on the street.

### **Next steps**

There is a long- term commitment from the office of the NICCY to lobby and pressurise for changes at all levels that will reduce the prevalence and incidence of suicide & self-harm amongst Northern Irelands young people.

Participants at the conference were asked to outline their views on the best way for the Commissioner to achieve this aim. Primarily, the desire for continuing involvement of the Commissioners office was overwhelming;

#### ***“Don't let it stop here!”***

Female. Over 18. Participant 34

#### ***“We need action”***

Female. Over 18. Participant 19

Comments made during the workshops and on the evaluation forms highlighted four areas for development: public education, political lobbying, follow-up conference/ road shows, and involvement of people across Northern Ireland.



## **Public education**

Educating the public about suicide was a strong factor, particularly from the responses of young people and the workshops.

***“Get more young people to be aware of the help and facilities available”.***

Female. Under 18. Participant 68

***“Training and support for co-working.... Peer education”***

Workshop. Oxford 2.

***“Awareness of support networks (friends & family)”.***

Workshop. Oxford 3.

## **Political Lobbying**

The need for the Commissioner, as well as young people, to engage with politicians locally, regionally and nationally.

***“We need mainstream funding”***

Female. Over 18. Participant 28.

***“Lobby representatives- young people should lead this protest”.***

Female. Over 18. Participant 29.

***“Government involvement”.***

Female. Over 18. Participant 30

***“Collate the results of the day and use this to inform the government in order to ensure something is done to save lives”.***

Male. Over 18. Participant 4



***“Cross border partnerships to raise more national awareness”.***

Workshop. Oxford 3.

***“Links across the UK- Partnerships, where are they going?”***

Workshop Ashwood 1.

***“Young people become policy makers, young people accepted as politicians”***

Workshop. Cambridge

Follow- up conference/road show & involving people through NI. Strong feeling of the conference was that another event was required.

***“Follow- up conference- plus conferences on other issues such as anti-bullying”***

Female. Over 18. Participant 2

***”One big school conference with reps from all over NI”.***

Workshop. Oxford 3.

***“Repeat the exercise across NI”.***

Female. Over 18. Participant 20

***“Bring conference to schools”.***

Male. Over 18. Participant 18

***“Conference specifically for young people”.***

Female. Over 18. Participant 33



## Areas for development

Although the majority of participants welcomed both the design and delivery of the conference the respondents highlighted some areas in which they felt would have improved the conference.

A number of people suggested that some workshop leaders assumed a certain level of literacy amongst their audience, a number of respondents noted, for example;

***“It would have helped if some group leaders had realized that some of their group had difficulty with reading & writing”.***

Male Over 18 Participant 6

One respondent (Female, Over18) suggested that young people should have been involved earlier in the planning process as the conference was “more professional orientated”. Of a similar vein, another (Female, over 18) felt that there was “too many big words for a young person’s conference”. Interestingly, the young respondents didn’t identify these as issues.

The majority of criticism was about the structure of the conference and in particular the number of speakers and workshops. Participants felt that the workshops were beneficial in deepening their understanding of the issues and that whilst the speakers outlined aspects of the problem they could be sacrificed in favour of workshops, although one respondent (Female, over 18) did suggest that “Peter Gallagher rocks!”.

***“The workshops were all of potential benefit and a third session would have been helpful”.***

Male. Over 18. Participant 13

***“Opportunity for more workshops- they were all really interesting. This could perhaps replace the speakers....”***

Female. Over 18. Participant 45



***“More time for workshops - and better organisation for going to workshops so time isn’t wasted”.***

Female. Over 18. Participant 21

Other topics raised were the content of the conference material, involvement of families, and the physical environment of the conference.

***“More personal experiences, less statistics. People can relate more to personal experiences”.***

Female. Under 18. Participant 68

***“More focus on families as a preventative tool”.***

Female. Over 18. Participant 66.

***“Other people invited, like families, church leaders, funding bodies”.***

Female. Under 18. Participant 31.

***“Room was a bit warm”.***

Female. Over 18. Participant 43

One other area raised by the respondents was the lack of political support for the conference.

***“More policy makers needed”.***

Female, Over 18. Participant 52

***“More political representation & commitment from governmental level and policy level”.***

Female. Over 18. Participant 29.



## **Views from the conference organisers**

The collated comments from the group of staff acknowledge that the conference generated a feel good factor, but warn that this momentum has to be maintained and that commitments made by the NICCY need to be delivered in the timescale outlined by the Commissioner.

The feedback from both the individual and the group highlighted many of the same issues that the participants highlighted. In particular, the involvement of young people in the planning of the conference could have been more and earlier than had happened. In addition it was felt, by the individual, that an opportunity to promote the model of partnership was missed. The collated response also suggests that the process be publicised as an example of good practice in involving young people in service planning.

Other comments in respect of the planning outlined concern that there were too many planning groups.

A number of suggestions were made that may improve the running of workshops in future conferences including;

People could have selected workshops in advance

Should have had a meeting to brief both sets of workshop facilitators

Both sets of comments suggested that the young people presenting might have benefited from a short presentation skills workshop.

The only other comment made was a suggestion that there were too many keynote speakers and that their contribution was too academic and risked losing the audience at times.





### **Role of the Media**

A media invitation was issued, followed by a media release on-the-day of the event. This resulted in both the BBC and UTV attending. In addition 17 media/press enquiries were received; mainly from broadcast outlets arranging when they could attend, although some were also seeking information on the Commissioners' speech.

The following table outlines the coverage and estimated viewing/listening /circulation of the media outlets.

<b>Media outlet</b>	<b>Opportunities to see/read/hear (approx)</b>
BBC Good Morning Ulster	250,000
BBC Newsline 6.30	200,000
BBC NI Digital News	25,000
UTV Live	250,000
Downtown Radio	280,000
Cool FM	300,000
Q102.9 FM	86,000
CityBeat	120,000
Belfast Telegraph	94,000
Belfast Telegraph (Digital)	13,000
Independent	228,000 UK circulation not NI
News Letter	28,000
Daily Ireland	No figures available
<b>TOTAL</b>	<b>1,904,000</b>



While NICCY received considerable coverage, there were also additional impacts from the media release. These included:

- Daily Ireland running the story on its front page and carrying out independent questioning of why the Ministerial Group on Public Health had met so infrequently – in addition to carrying the media release
- BBC Good Morning Ulster interviewed member of review team about lack of services two days after the conference
- SDLP issued a press release supporting the conference

While there was undoubtedly considerable pick-up the quality of the coverage was variable. The response from the group suggested this could have been improved by:

- Earlier involvement to agree lines, strength of comment, key messages;
- More and earlier involvement of young people in media planning, media release and availability for interview (with support/training).

## **Public Affairs**

Comment was expressed on the relative absence of politicians and political parties at the conference. It was noted that only one elected member of the Northern Ireland Assembly was in attendance, although the Young Person's spokesperson for another of the political parties also attended. It was suggested that earlier consultation with the Media and Public Affairs Officer on protocol and ways to engage politicians may have encouraged a greater turn-out.



## CONCLUSION

“HOPE: A Conference on Preventing Self-harm & Suicide and Promoting Positive Mental Health in young people” took place in Belfast on the 22 February 2005, the aim of which was to encourage young people and policy makers to explore and discuss issues in relation prevention of self- harm & suicide. 68 participants completed evaluation forms following the conference.

The conference was well received by the vast majority of respondents and there was a great desire for the Northern Ireland Commissioner for Children & Young People to continue to take the lead in highlighting a major public health issue.

Particular themes that participants wanted followed up included the development of mental health services - both hospital and community based - for the young people of Northern Ireland. The respondents also highlighted a strong desire to ensure that the conference was not a ‘one-off’ and that further events be organised. There was also a clear feeling that any future events could be held outside Belfast and should include young people in the planning & delivery of the conference.

Such events could include public education about youth suicide, political lobbying and follow up conference(s).

In all, this was a well- received event that from the comments made by the respondents tapped into and possibly galvanised a desire from both young people and professionals to address the problems of self- harm and suicide amongst Northern Ireland’s young people. Possibly with the exception of the aim of discussing policies the conference met its set aims and objectives and should provide the platform for future work in reducing the incidence & prevalence of self-harm and suicide.



**APPENDIX 1**

**HOPE: A conference on preventing self-harm & suicide  
& promoting positive mental health**

**Feedback Sheet**

**1. The Aims of today's conference were:**

- a) To engage young people and professionals together in sharing best practice; and
- b) To explore policy and practice in the prevention of self harm and suicide.

**Taking each one in turn, can you comment on how well these objectives have been met.**

a) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Now please comment on whether you think each of the four outcomes listed below have been achieved.**

**Outcome 1 - '250 heads are better than 1'**

Bringing together 125 young people (aged 14-18) and 125 adults who work with them to explore the prevention of self-harm and suicide and the promotion of positive mental health among children and young people.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Outcome 2 - 'Go with the flow'**

Reliving the experience of existing support services providing positive influences for children and young people and explore how the lessons/outcomes from these can be shared.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Outcome 3 - 'It's good to talk'**

Discussing common themes and issues that will identify gaps, raise awareness, reduce stigma and enhance co-ordination and co-operation of services to children and young people in this field of work.

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**Outcome 4 - 'Actions speak louder than words'**

Identifying changes needed to policy and working practices that will improve the situation for children and young people in Northern Ireland.

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**3. Please share any ideas in relation to improvements which could have been made to enhance today's conference.**

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**4. Next steps?**

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**5. Any other comments.**

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**Please tick the boxes below that apply to you.**

**Gender:**            **Male**             **Female**

**Age Group:**            **Under 18**     **Over 18**

**Thank you for taking time to complete this form.**

**Teresa Devlin**

