

# #ItsOKNotToFeelOK Conversations:



Cycle Against Suicide

## Introduction

Creating awareness of mental health issues and encouraging public discussion on suicide prevention is the shared responsibility of all. That includes individuals, families, teachers, communities, healthcare providers, law enforcement, the media, and yes, all levels of government and politicians across political divides.

In Ireland, broad-based engagement strategies on mental health must be seen as the social, economic and political imperative that it is. Research after research shows that an uncomfortably high proportion of Ireland's citizens suffer from some form of mental health issue such as schizophrenia, depression, anxiety, or drug or alcohol abuse. The Health Service Executive reports<sup>1</sup> that Ireland has a serious self-harm and suicide problem, with around 11,000 episodes of deliberate self-harm presenting at hospital A&E departments each year and up to 500 suicide deaths reported. Looked at from an economic perspective, mental health problems cost Ireland over €8.2 billion per annum, according to the OECD.<sup>2</sup>

Despite the obvious gravity of the issue, research shows that attitudes to mental health problems remain a significant roadblock to progress. That is because the topic of mental health is clouded by negativity and wide-spread stigma. In a survey of 500 adults, St Patrick's Mental Health Services found that 64% believed that being treated for a mental health difficulty is seen as a sign of personal failure.<sup>3</sup>

In other words, there is strongly held belief that "not being okay" is some kind of moral failure on their part. It is hardly surprising therefore that a significant proportion of people with mental health struggles do not seek help.

It is these kinds of attitudes and wrongly held beliefs that Cycle Against Suicide works to overturn. We believe that such attitudes not only harm people facing mental health difficulties, it harms us a nation because we are losing some of our brightest and best to a silent epidemic. Cycle Against Suicide exists to promote positive attitudes towards mental health issues, through various programmes.

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<sup>1</sup> Health Service Executive: Mental Health in Ireland: Awareness and Attitudes

<sup>2</sup> The Irish Times: Ireland has one of the highest rates of mental health illness in Europe, report finds. <https://www.irishtimes.com/news/health/ireland-has-one-of-the-highest-rates-of-mental-health-illness-in-europe-report-finds-1.3707073>

<sup>3</sup> St Patrick's Mental Health Services <https://www.stpatricks.ie/media-centre/news/2017/october/mental-health-survey-reveals-extent-and-effects-of-stigma>

These programmes have been developed in the context of anti-stigma campaigns, health promotion strategies and mental health awareness campaigns.

This toolkit is one example. Predicated on a similar initiative run in Canada by the Mental Health Commission of Canada, it is designed to help Members of the House of the Oireachtas and locally elected County Councillors who wish to join in the fight against the stigmatisation of mental illness.

Cycle Against Suicide works with all sectors of society, and this toolkit is just one component of a community-wide awareness-raising campaign to mobilise all sectors of society to work together to change negative attitudes to mental health issues into positive ones. In doing so, we hope to enable those who struggle with mental illnesses or other mental health issues to seek help. This is a necessary step if we are to reduce the burden of mental illness in our nation. Using this guide, we hope that TDs, Senators and County Councillors will go on to engage their constituents on this topic, and a community-driven model of de-stigmatisation, suicide prevention, and promotion of mental health will be birthed.

## Erasing the stigma

One of the biggest problems that people living with mental health issues face is stigma. As most people learn what they know about mental illness from the media, their understanding of mental illness is shaped by what is often portrayed – that people suffering from mental illness are violent, dangerous, incompetent or have criminal tendencies.

These ideas have far reaching consequences – they are often used to justify bullying and discrimination, such that people suffering from mental illness are denied access to amenities enjoyed by others, including things like adequate housing or jobs. The most insidious consequence is perhaps the fact that stigma keeps those who need help from seeking it. People choose to shroud their mental health problems in secrecy for fear of what others may think, and therefore do not seek help. This only serves to perpetuate the problem.

At Cycle Against Suicide, our key strategy to addressing mental illness is de-stigmatisation. One of the most critical elements of this is through education because we realise that the more people know about something, the less likely they are to hold negative attitudes. Which is why our mantra: **'It's OK not to feel OK; and It's absolutely OK to ask for help'** is integral to changing mindsets.

## How can you help?

As elected representatives of the people, politicians and County Councillors play a big role in shaping the discourse around various issues. The positions they take can shift mindsets, and certainly affect policy and decision-making. Which is why it is crucial that our elected representatives get actively involved in helping the country address mental health issues. The first step to that of engagement. Engagement at local, county and national levels. The rest of this toolkit provides a framework for elected representatives to engage with citizens.

It is crucial that the focus of such engagement is eradication of stigma. As they hold these conversations, it is important that Members of the House of Oireachtas and County Councillors help their communities to realise that it is indeed **okay not to feel okay** and they can seek help. By driving home this message, it is possible to create an integral change to how mental health is viewed.

### ***Start a conversation***

What is **#ItsOKNotToFeelOK**?

**#ItsOKNotToFeelOK** is a campaign, led by Cycle Against Suicide, inviting all Members of The House of the Oireachtas, County Councillors and other community leaders along with the general population to help destigmatise mental illness and generate community-led solutions to its challenges. This is done by holding conversations in their communities on the subject.

The programme is designed to bring all elected representative, working together and their constituents under one roof in public settings – libraries, schools, community halls, etc. – to hold conversations about what’s working, what’s not, what gaps exists and what steps to take to fill those gaps when it comes to mental health in their communities.

TDs and County Councillors, regardless of political affiliations. are encouraged to collaborate with one another. While all elected representative can certainly host their own individual conversations, there may be circumstances in which it makes sense geographically for two or more TDs/County Councillors to jointly host conversations.

***Who should be part of the conversation?***

Everyone. Gathering valuable insight and workable ideas requires the input of anyone who is interested and wants to get involved. It also requires the expertise of those who work in the field of mental health. The conversations should therefore involve community members, teachers, social workers, mental health professionals, law enforcement, faith-based community groups and local leaders, local media, etc.

It is very important to ensure diverse representation, and also to ensure balance in the public knowledge/expert knowledge components of the conversation. The mistake is often made to pay more attention to getting expert feedback, to the detriment of feedback back from people who may not be experts but do have local knowledge and personal experience.

Public Knowledge	Expert Knowledge
Based on conversations with everyday people and obtaining their personal opinions, perceptions and experiences about the issue in question.	Based on professional analysis and reporting of statistics, data, trends, market and audience studies.
Uses plain language that everyone can understand.	Often uses language that’s inaccessible to most non-professionals.

## *What is the goal of these conversations?*

The overall goal of the conversations is to create a community-based approach to destigmatising mental illness and creating awareness at the grassroots level. At a local level, these conversations should encourage open discussion as well as generate community-led initiatives to address mental health issues. They should also provide citizens with information on the actions and initiatives taking place in their own community. At a national level, the conversations should provide critical information to help shape decision-making and strategy on mental health in Ireland.

Cycle Against Suicide is available to work with all elected representative willing to be involved in the [#ItsOKNotToFeelOK](#) conversations. Once TDs and county councillors have obtained input from their constituents, they are invited to provide feedback on these conversations to Cycle Against Suicide. Such feedback will help us create greater awareness of mental health, reduce the burden of stigma and help create a guide for communities to engage in suicide prevention activities.

## *Step 1: Understand the issue*

It is important to be prepared before starting to engage the community as a whole. Every community is different, and so how you prepare will be shaped by the peculiarities of your community - its attitudes towards mental illness (a community that's more open to discussing mental illness will likely be more eager to engage than one that considers the topic a taboo). Other factors like religious beliefs and socio-cultural contexts should also be taken into consideration as you prepare. Before setting up your first meeting/ community-wide conversation therefore, it may be helpful to hold smaller discussions with different groups in schools or workplaces to gauge perceptions and understanding.

Before you get into those conversations however, you may want to do some background reading on the topic. Below is a brief overview of some of key issues to know:

### *a. What is mental health?*

Mental health refers to the psychological and emotional well-being of a person. When there is a disturbance in these areas, the person is said to have a mental illness.

Mental illness negatively affects a person's ability to cope with everyday life. Simple things become difficult to achieve. People from all different cultures and backgrounds can suffer from mental illnesses. However, some people may be more prone because of a family history of similar illness.

**b. What are the causes of mental illness?**

There are many different causes, including complex interactions between a person's genes and their environment. Mental illness includes:

- Mood disorders, which are persistent changes in mood caused by biochemical imbalances in the brain. Examples of mood disorders are depressive disorder and bipolar disorder.
- Anxiety and panic disorders, which are associated with feelings of anxiousness, combined with physiological symptoms that interfere with everyday activities. Obsessive-compulsive disorder, phobias and post-traumatic stress disorder are types of anxiety disorders.
- Psychotic Illnesses, which involve a disruption to a person's thoughts and perceptions that make it difficult for them to distinguish what is real and what isn't. schizophrenia and Substance-induced psychotic disorder are examples of psychotic illnesses.
- Eating disorders, which are characterized by abnormal or disturbed eating habit. Examples include bulimia and anorexia nervosa.

**c. What is the effect on people living with mental health issues?**

The negative perception of mental illness leads to discrimination against those living with it. Such stigmatisation causes barriers for people living with mental health issues, making it difficult for them to find jobs, rent homes, establish relationships, and integrate into their communities. It also prevents them from seeking help or confiding in others for fear of discrimination.

**d. How to combat mental health stigma**

The main cause of stigma is poor information. Providing accurate information can help correct fears, myths and misconceptions many people have about mental illness. Studies show that the most effective way to combat stigma is through education, combined with real life interaction with someone living with a mental illness.

When you begin to familiarize yourself with the issues in your community, ensure that your information gathering considers the status quo for your community, rather than general information for your county or the nation. Questions you may want to ask include:

- What are the most commonly reported type of mental illness in your community?
- What mental health services are available?
- How accessible are these?
- Are there existing or previous mental health services or campaigns in the community, in schools, or other specialised groups?
- Is there a municipal framework or policy on mental illness?
- What are the channels of communication within the community?
- Are there prominent media organisations that could be involved to help raise awareness?
- Suicide in the community:
  - Numbers of suicides and suicide attempts;
  - What are the methods of suicide in the community, or the sites where they most frequently occur?
  - What is the gender and age breakdown of the occurrence of suicide?

There are several sources from where you can obtain the above information, including:

- Garda statistics;
- coroners' reports;
- health departments
- databases from crisis lines;
- records of community health services or facilities; etc.

## ***Step 2: How to organise your conversation***

With a clear understanding of what the issues are and some background information of the burden of incidence/prevalence in your constituency, your next step is to determine the format your community conversation will take. The engagement technique for your conversation should be chosen according to the exact circumstances identified in your initial preparation and adapted to the culture and interests of the community.

Your conversations can take several formats or techniques including:



1. Discussion Forum – Community leaders who have expertise in the area of mental illness speak to the community on the subject, and at the end of their presentations, the audience gets to ask questions. There would usually be a moderator (who could be an elected representative or a member of the Cycle Against Suicide team) to guide the process. This format is suitable for both small and large groups but can be less interactive.
2. Round Table discussion – This is more interactive and allows the community to discuss with each other. Open ended questions that spark discussion among attendees is important, and these should be prepared in advance for the moderator. This is more suitable for smaller groups.
3. World Café style – This style is effective for hosting large group dialogue. The environment is modelled after a café, with small round tables, seating a few participants. Discussions from within the smaller groups are fed back into the larger group.

Local organisations involved in addressing mental health can be invited to host booths and display materials at these events. Such materials can help to educate participants or even spark questions and conversations.

Once a format has been decided, you should send invitations and begin to work on raising awareness of the event. Invitation to the conversations should set clear, realistic expectations, and the location chosen should be appropriate to ensure success. For location, choose a place that:

- Community members are familiar with and use frequently.
- Have enough space for people to divide into groups for further discussion, if required.
- Is easily accessible to everyone, e.g. It's near public transportation, has lots of parking, is safe and centrally located
- Is accessible to those with disabilities.
- Is comfortable and not too noisy or full of distractions.
- Is available in the evenings and/or on weekends.

#### *Sample invitation*

*(TD's/County Councillor's Name) invites all community members to engage in a community conversation about mental illness and suicide prevention. Join us at (location) as we work together to develop a community model on mental health awareness.*

### *Step 3: During the Conversation*

1. Establish ground rules for a safe and constructive discussion.
2. Ensure someone certified to provide first aid is present to provide mental health support to anyone who may need it. Discussions about mental illness and particularly about suicide can trigger difficult emotions especially for those who have had that experience.
3. Have an option for people to provide written feedback. Some people are not comfortable speaking in public, especially about a sensitive issue like mental health.
4. Safety: Ensure that conversations are conducted in a supportive way.
5. Flexibility: Allow community members to adjust the format according to the circumstances.
6. Resources: Offer suggestions for identifying local suicide prevention resources and supports to strengthen activities.
7. Champions: Identify champions within a community who can host or facilitate the first meeting or make presentations based on their expertise.
8. Confidentiality: Ensure that participants feel confident that their privacy is being respected. Confidentiality

#### Sample Questions for Facilitator\*

1. *How do we best overcome the stigma surrounding suicide and mental distress, as individuals and as a community?*
  - a. *What are some ideas to break down stigma related to suicide?*
  - b. *What is your greatest hope?*
2. *How do we ensure people in our region are comfortable discussing suicide prevention and mental distress and can do so in a safe fashion?*
  - a. *What are your biggest fears when talking about suicide? (in your home, in your place of business, in your recreational activities).*
  - b. *What do you need to be more comfortable?*
3. *Suicide prevention may be a mental health issue, but it's also a public health challenge. Are we doing enough in suicide prevention from a public health perspective?*
  - a. *What is the greatest barrier for you to do more?*
  - b. *In a mental health crisis, what would be important for your family/you/a colleague/ a friend?*
4. *There are an immense range of resource available to promote mental health and prevent suicide. How do we get these tools into the hands of the people who need them?*
  - a. *What is one thing you could do tomorrow?*

\*Mental Health Commission of Canada 2015

also applies to the people at risk of suicide with whom the members of the steering committee will engage, such as in an emerging suicide cluster.<sup>4</sup>

Prior to the start of the meeting, choose an experienced facilitator or moderator to help keep the conversation on track and give everyone the opportunity to speak. Open-ended questions work best in generating conversation and sharing of ideas. The facilitator should prepare a set of questions before hand.

You should also have a note taker to keep accurate notes of what transpired. You may want to send your notes to Cycle Against Suicide as it compiles feedback that will help create greater awareness of mental health, reduce the burden of stigma and help create a framework for communities to engage in suicide prevention activities.

The media can be allowed to attend the meeting but recording the meeting and input of community members is cautioned against, for privacy reasons. Members of Parliament invited guests or other members of the public may give interviews before or after the meeting.

#### *Sample Meeting Agenda*

Event		
<b>(Time)</b>		Stakeholders arrive at (location)
<b>(Time)</b>		Doors open and registration begin
<b>(time- 90 min)</b>	5 min	Welcome Introduction of panelists if applicable Explain meeting format Go over ground rules
	10 min	Background to the Conversation Introduces topics of discussion
	15 min	Draft discussion topic1
	15 min	Draft discussion topic 2
	15 min	Draft discussion topic 3
	15 min	Draft discussion topic 4
	25 min	Audience feedback and suggestions (what works well, where are the gaps)
	5 min	Closing remarks
<b>(time – 15 min.)</b>		Refreshments
Event Conclusion		

<sup>4</sup> (Mental Health Commission of Canada, 2015)

### *Step 4: After the meeting*

Upon completion of the meeting in your community, you may want to follow up with the experts and community members who attended and presented. As an elected representative you may choose to include a “Thank you” note in your constituency newsletter or through whichever means you communicate with your constituents. Social media is also a good option, and it offers the opportunity to carry on the conversation, using the hashtag [#ItsOKNotToFeelOK](#)

Invited guests and presenters, would appreciate a personal thank you note. An example is included below:

*Name*

*Address*

*Dear (Name)*

*On behalf of [name of your constituency], we wish to thank you for your participation on (date) in our community conversation about mental health awareness, destigmatisation and suicide prevention.*

*Our community meeting was part of the [#ItsOKNotToFeelOK](#) Conversations, a nationwide together, gathering valuable insight and ideas surrounding mental health in Ireland. Your contribution to this discussion was very much appreciated.*

*The results from our community meeting will be gathered with information from other Conversations and across the country to develop a framework to engage communities in suicide prevention initiatives.*

*Once again, the people of [community] are appreciative of your participation and we look forward to carrying on the conversation in future.*

*Sincerely,*

*(Name)*

## Beyond #ItsOKNotToFeelOK Conversations

In addition to the #ItsOKNotToFeelOK conversations, there are other ways that elected representatives can support mental health and help reduce stigma. These include:

- Work with other all stakeholders, regardless of political affiliation by help your colleagues understand and appreciate the critical needs of people living with mental illness.
- Supporting educational anti-stigma interventions that present factual information about mental illness. The goal would be to correct misinformation or contradicting negative attitudes and beliefs.
- Lending your support to suicide-prevention programmes and initiatives, including simple, easy-to-organise events, suicide awareness day (September 10<sup>th</sup> each year), writing opinion editorials in your local newspapers or taking part in radio or television programming and social media campaigns.
- By showing public support for persons who have lost a loved one to suicide or who publicly talk about their struggles with mental health.
- Creating a community directory that links all local services, programmes, resources and service pathways for mental health and then helping to promote these services and programmes within the community so that there is awareness and they are easy to access.
- Supporting policy, legislative and other government measures on mental health. For example, it is important to support efforts to reduce people's access to the means often used in suicide.
- Provide support across the board so that no segment of society falls through the cracks. For example, since most prevention programmes focus on young people, it becomes easy for other demographics like older persons to be forgotten. It is important when determining what initiatives to support, that elected representatives consider all segments of their constituencies.
- Be a champion for mental health funding and services and an advocate for those underserved or disenfranchised because of mental illness.

## Conclusion

As elected representatives of the people, one of the primary duties of all TDs and County Councillors is to review the issues that are presently affecting the public they represent. In Ireland, mental illness and the associated stigma are two of the most important issues. At Cycle Against Suicide we have been championing the cause of those labouring under the burden of mental health struggles and we hope that you will come alongside us. By holding these conversations, you show support for the mental health of your constituents, demonstrate the values you place on your communities and show you are good stewards of the trust public has placed in you. Together let's change perceptions and let everyone know that: **'It's OK not to feel OK; and It's absolutely OK to ask for help'**

## #It'sOKNotToFeelOK Conversations Checklist

Date	✓	Activity
<b>3 Weeks Prior</b>		
		Choose a date
		Book a location
		Choose a meeting format (Panel, town hall or roundtable etc)
		Confirm AV materials needed
		Invite stakeholders, high profile community advocates, panellists
		Secure Mental Health First Aider
		Create content for social media
		Post meeting posters in high traffic areas
<b>2 Weeks Prior</b>		
		Distribute materials to community papers and media
		Place public notice in community paper and calendar of events
		Issue news release
<b>1 Week Prior</b>		
		Promote event through social media
		Pitch media for interviews
		Draft and deliver agenda for the meeting
		Print feedback forms for all participants
<b>A Final Checklist of Meeting Materials</b>		
		Coffee, Tea, Water
		Location Signs and tape
		Boxes of Kleenex
		Table for local informational material
		Identify meeting note taker
		Signup sheet for participants
		Power Point slides
		Review discussion guide
		Photo/media release waivers for participants
		Printed feedback form with pens and pencils
		AV
<b>1 Week Post</b>		
		Draft thank you letters to invited guests (See template)
		Submit feedback to Cycle Against Suicide

## About Cycle Against Suicide

Cycle Against Suicide is an awareness charity (CHY 20687) that makes a valuable contribution to the public education of mental health by changing the narrative surrounding suicide. When an individual is vulnerable enough to consider taking their own life, silence is read as indifference. With hundreds of people dying by suicide in Ireland each year and research indicating that thousands more contemplate it, we all have a role to play to collectively address the challenges that suicide presents. In a bid to save more lives, Cycle Against Suicide through its programmes/events, sets out to change culture and create a society that openly talks about suicide to allow people to speak up and seek help.

**IT'S OK NOT TO FEEL OK; AND IT IS ABSOLUTELY OK TO ASK FOR HELP'**

This simple yet powerful message could save the lives of those in our communities who are feeling vulnerable and alone.



## *Resources*

- Cycle Against Suicide: Ask for Help <http://www.cycleagainstsucide.com/ask-for-help/>
- Samaritans Ireland <https://www.samaritans.org/your-community/samaritans-ireland-scotland-and-wales/samaritans-ireland>
- Health Service Executive: Mental Health in Ireland: Awareness and Attitudes
- The Irish Times: Ireland has one of the highest rates of mental health illness in Europe, report finds. <https://www.irishtimes.com/news/health/ireland-has-one-of-the-highest-rates-of-mental-health-illness-in-europe-report-finds-1.3707073>
- St Patrick's Mental Health Services <https://www.stpatricks.ie/media-centre/news/2017/october/mental-health-survey-reveals-extent-and-effects-of-stigma>
- Pitman, Alexandra L., David P.J.Osborn, Khadija Rantell and Michael B.King (2016) The stigma perceived by people bereaved by suicide and other sudden deaths: A cross-sectional UK study of 3432 bereaved adults in: Journal of Psychosomatic Research Volume 87, Pages 22-29.
- World health Organization: Preventing suicide A community engagement toolkit <https://apps.who.int/iris/bitstream/handle/10665/272860/9789241513791-eng.pdf>
- Mental Health Commission of Canada #308conversations
- <https://www.mentalhealthcommission.ca/English/initiatives/11884/308conversations>