

Children, Adults, Health and Wellbeing Scrutiny Panel. 11/11/2024

Suicide Prevention Review report.

Quite a few years ago now I attended a wake at St Nicholas Church, Radstock for Jamie Hogg, a 20 year old NEET, who had taken his own life out of loneliness and depression. A grant had been found through our then in house youth services for some art therapy for the bereaved young people, but a long term solution was needed. I asked around the group, 'What can BANES do?' The answer was unanimous. The youth clubs are doing great work for children, but we feel we are being abandoned when we turn 18. Some were alienated from their parents, some had poor skills, and all claimed that if they indulged in a little ketamine (which was not the problem it is now) it was out of boredom. Of course, for good or for evil, social media hardly functioned.

So we found some money for a survey of youth homelessness in the Somer Valley (2012) and established that with mediation most teenagers could be re-integrated in their family within a month, and Sam Plummer, now of Youth Connect SW, rang a programme on the health costs of ketamine consumption. The senior Radstock GP told me he thought about 70% of Radstock young people had clinical depression. So this was really only a drop in the ocean, real change is needed. It is also much more important to achieve early intervention, even at school.

Reading the Report, which is a good systematic approach to the problem (but suicide is not like knife crime or growing food. It has a myriad network effect, scarring families and communities), I am not really sure that there is a grasp of recent changes, and the challenge of social media abuse and bullying. Not to mention the ease with which young people can gain information about methods. The new Minister for Education, Ms Philipson, is changing the emphasis in education to children's well being rather than narrowing focussed academic excellence defined by rigid criteria. Societal pressures probably weigh even more. It is good to see both multi-agency co-operation and apparently much training. But I have never seen a planning application where the suicide dangers are considered, contrary to claims here, and surely there are more suicides from people jumping under trains than from other forms of transport? There is no mention of the side effects of some drugs, such as a well-known anti high blood pressure prescription medication producing suicidal thoughts.

One fact re our young people: whether at home or school – or the youth clubs, they need stability and continuity. They need to know where and how they can get professional help if they need it. Labelling won't help. This council making sure that such expertise, and local knowledge is available is crucial. Fifteen years ago the churches together, the police and Norton Radstock Town Council pulled together to help young people . Today you cannot outsource your responsibilities Charities do not have the funding to substitute, and residents are so busy making ends meet at a time of spiralling costs, they cannot contribute much, nor volunteer.

In 1975 a brilliant close university friend moved on to a postgraduate course in oxford and took her own life. She had a working class background, and her family had not understood the problems she faced. The Bishop of Burnley took her funeral, brief, perfunctory and without mentioning her name. I and my friends organised a thanksgiving at Birmingham University afterwards. I have never forgotten how distraught her family was. Suicides are more than statistics, and whatever their age or background, there needs to be effective prevention now

Eleanor M Jackson.