

Rt Hon Jeremy Hunt MP
Chair, Health and Social Care Select Committee
House of Commons
London, SW1A 0AA

15 June 2021

Dear Jeremy

Many thanks for the opportunity to give oral evidence to the Committee's inquiry into children and young people's mental health on the important issues of suicide and self-harm. I am writing to offer some follow up reflections, including on the issue of online harms, as discussed during the session.

We warmly welcome the recent publication of the Draft Online Safety Bill which offers a vital opportunity to provide additional safeguards around suicide and self-harm content online. However, this is a complex picture. Young people who self-harm have told us that peer support is a really useful source of support, and that family and friends are often their first port of call for help. However stigma and misunderstandings around self-harm can make conversations difficult or less helpful, and can also leave some young people feeling unable to discuss self-harm with people they are close to. This can mean safely moderated online spaces can provide another important source of support for people who self-harm, where young people are able to discuss their experiences and situation openly. In our research with people who self-harm, a third of those we spoke to said online forums and advice was helpful to them¹.

However, the new regulatory regime needs to balance these helpful peer support spaces with the fact that there is clearly harmful content available around suicide and self-harm that should be removed from the online environment. It should also be noted that much of the content around suicide and self-harm does not easily fall into one category of either harmful or helpful. Instead much depends on the individual and factors such as their state of distress, and the amount of content being viewed.

¹ Samaritans *Pushed from Pillar to Post*: improving the availability and quality of support after self-harm in England October 2020

We are concerned that, as currently drafted, the Draft Online Safety Bill only requires the largest platforms to take action on legal but harmful content that reaches adults, including young adults aged 18-25. We have developed industry guidelines with ten principles for technology companies to safely manage 'legal but harmful' content.² The legislation needs to build on this and provide for a performance framework that enables the regulator to assess the actions that all platforms are taking on 'legal but harmful' self-harm and suicide content, including:

- removing detailed instructional information on methods and
- turning off algorithms that push harmful content related to self-harm and suicide

Wider issues

During the session we briefly discussed the broad system-wide changes which are needed to reduce suicide rates in England.

Samaritans welcomes the national focus provided by the Suicide Prevention Strategy in England. However more needs to be done to bring together departments outside of the Department of Health to ensure that suicide prevention and support for self-harm is the business of all of government. The complex nature of suicide and its risk factors necessitate a public health approach to prevention which can only be realised when all government departments are actively involved. Samaritans wants to see greater co-operation between departments, with increased funding focused on the wider social drivers of suicide and self-harm.

At a local level, we also believe that a key driver for positive change are local suicide prevention plans, an essential mechanism for co-ordinating and implementing suicide prevention, which have been adopted in 99% of local authority areas. Despite the recent progress in the widespread formulation and adoption of plans, Samaritans research from 2019 found that while 'preventing and responding to self-harm' was included in 92% of plans, actions were being delivered in only 55% of them. The report found that many of the actions were concerned with raising awareness, developing and disseminating educational resources and provision of training³. Local areas being empowered, through funding, to better support people within their communities will be an essential part of ensuring that young people who self-harm get the effective, timely support we discussed in the session.

² Samaritans, *Managing self-harm and suicide content online Guidelines for sites and platforms hosting user-generated content* September 2020

³ Samaritans and University of Exeter, *Local Suicide Prevention Planning in England*, (2019), available here: https://media.samaritans.org/documents/Local_suicide_prevention_planning_in_England_full_report.pdf

The Government announced an additional £38million investment in IAPT services in the recent mental health recovery plan but we understand that there are no plans to use this money to better support young people experiencing self-harm. While young people who self-harm could also be supported through planned expanded Community Mental Health Teams, we do not believe that they are sufficiently well-resourced to meet current unmet needs. This is hard to understand given that – as you heard from Professor Appleby - rates of suicide and self-harm among young people were on the rise even before the pandemic.

We also remain concerned about the pace of rolling out a real-time surveillance system for suspected suicides in England. This is vital to help understand the real impact of the pandemic on suicide rates and, crucially, to improve the level of information collected about demographics such as age, sex and ethnicity to help understand levels of suicide risk across population groups.

While young people struggling to access the mental health support that they need predates the pandemic, I also wanted to take the opportunity to share some newly-released findings from what we have heard from young people through our helpline during the first year of the pandemic⁴:

- In the year since restrictions began in the UK on Monday 23rd March 2020, we provided emotional support over 2.3 million times to people struggling to cope, via phone and email. One in five of these contacts were from people who were specifically concerned about coronavirus.
- Samaritans volunteers suggested there has been an increase in contacts with young people about self-harm as a coping mechanism during this period. And for some people who had self-harmed in the past, volunteers spoke of a rise in callers who had returned to self-harm as a way of trying to cope, or who were struggling to resist self-harm in the absence of other support.
- In the past year, a third (35%) of our callers aged under 18 discussed self-harm compared to 7% of adults.
- Our volunteers told us that access to mental health support was the most common concern among young people and reduced access to community support services or networks, such as support provided in schools, social activities, or physical activity groups, was a common cause of distress.

⁴ Samaritans, *One year on: how the coronavirus pandemic has affected wellbeing and suicidality* June 2021

- Uncertainty and negativity about the future, including employment prospects and academic achievements, meant some young callers expressed “fear of being a lost generation”. There is an established link between unemployment and financial stressors such as debt, and suicide risk.
- Samaritans has seen a 2% increase in the number of contacts about self-harm compared to the 12 months before the pandemic, totalling 184,157 over the year since restrictions began.

I hope that this additional information is useful, and please do get in touch if Samaritans can be of further assistance to the inquiry.

Yours sincerely

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Patron: HRH The Prince of Wales. Founded in 1953 by the late Prebendary Dr Chad Varah CH CBE. Samaritans is a charity registered in England & Wales (219432) and in Scotland (SC040604) and a company limited by guarantee registered in England & Wales (757372). Samaritans registered office is located at The Upper Mill, Kingston Road, Ewell, Surrey KT17 2AF.



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