

[18th September 2025]

[Oxfordshire Suicide Prevention Strategy 2025-2030]

Purpose / Recommendation

The purpose of this paper is to present the current partnership groups and strategies for Mental Health and Wellbeing led by Public Health with a focus on the refreshed [Suicide and Self-Harm Prevention Strategy for Oxfordshire 2025-2023](#).

The Health Improvement Board are asked to:

- Continue to support the Mental Health Prevention Concordat and Suicide Multi-Agency partnership groups.
- Support the Oxfordshire Suicide and Self-Harm Prevention Strategy and action areas for 2025-2030.

Background

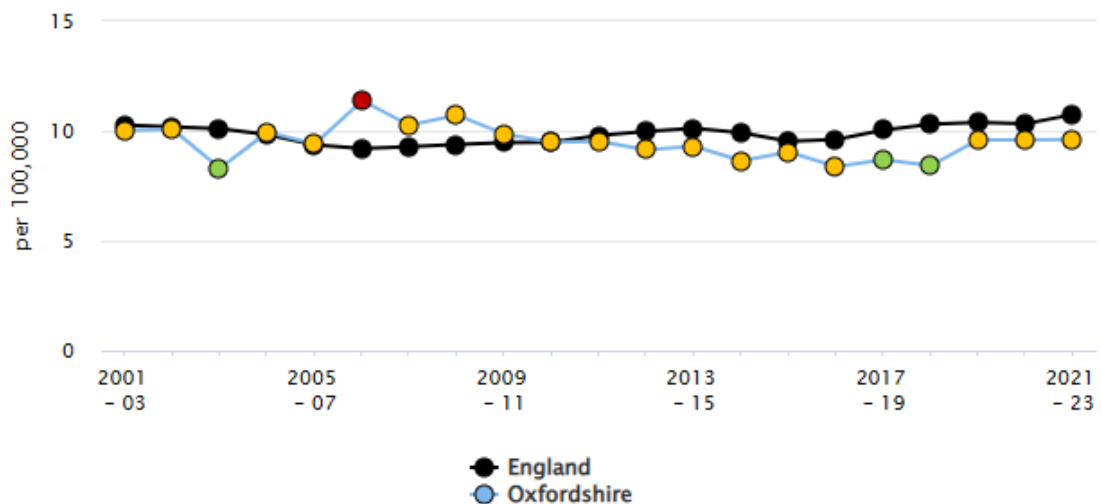
Mental Health and Wellbeing

Mental health and wider sense of wellbeing is a local and national public health priority and is now widely recognised as an asset to invest in throughout our lives. We know that mental health is complex and multi-faceted, and prevention efforts should take a multi-agency approach, utilising the skills and knowledge from local partners, stakeholders, and those with lived experience.

Partners across Oxfordshire signed up to the Prevention Concordat for Better Mental Health in 2019 and developed the first Oxfordshire Mental Health Prevention Framework 2020-2023 to ensure the promotion of good mental health remained a local priority in Oxfordshire. [The updated Mental Health Prevention Framework 2024-2027](#) has been developed to continue the work the partnership group has committed to do, and to identify opportunities for further collaboration and innovation to support people at risk of and experiencing poor mental health. The Concordat's vision is that everyone in Oxfordshire has the opportunity to achieve good mental health and wellbeing.

Suicide Prevention

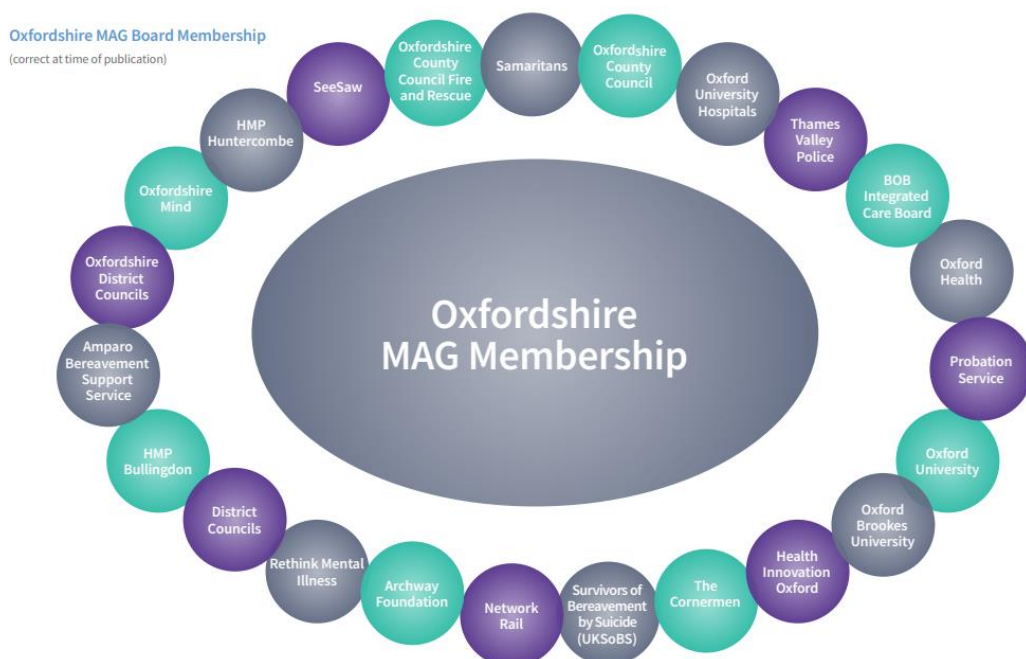
Every life lost to suicide is a tragedy and impacts broadly, not only on immediate family and close friends, but also on the colleagues and wider community left behind. In Oxfordshire there are approximately 60 deaths per year by suicide. Oxfordshire's suicide rate is similar to the national average and has been stable since a slight rise from 2018-20 to 2019-2021 (see graph below).



Males make up around 75% of the deaths by suicide in Oxfordshire, which is again similar to the national picture. The majority of deaths take place at home. Commonly identified contributing factors as recorded by Thames Valley Police are: Depression/Anxiety, Previous suicide attempt/talked about taking their life, Relationship breakdown, Alcohol/drugs, Serious/chronic pain/terminal illness and other non-diagnosed mental health concerns.

In September 2023, the Department of Health and Social Care published: [Suicide prevention in England: 5 year cross-sector strategy](#) with an aim to reduce the number of lives lost to suicide, improve support for people who have self-harmed and improve support for people bereaved by suicide.

In Oxfordshire, the Suicide Prevention Multi-Agency Group (MAG) have been working together since 2014 to try and prevent suicide locally. The below diagram shows the partners currently involved in the MAG group, but membership is ever evolving and welcoming of new partners.



The group meet quarterly to review the latest real-time suicide surveillance data, discuss any national/local updates and emerging themes and share learning, intelligence and any latest research. Meetings will usually be focussed around a specific theme and a relevant speaker invited to present. For example, at recent meetings we have had speakers presenting around autism and suicide and a presentation of findings from a national review of student deaths. The MAG reports into the Health Improvement Board and works towards delivery of a suicide and self-harm prevention strategy. This strategy has been refreshed for 2025-2030 and this paper outlines some of the key content and action areas within it.

The strategy presents a number of key areas of progress during the previous 2020-2024 strategy:

1. **Leadership** – the MAG has been running locally for 10 years and is linked to a number of other key partnership groups including the Mental Health Prevention Concordat and the Men's Health Partnership.
2. **Evidence, Data & Intelligence** – Oxfordshire Public Health have been working with Thames Valley Police and the Coroner since 2016 to deliver a real-time suicide surveillance system. This data informs the direction of work of the MAG group and enables rapid response task and finish groups to investigate themes of concern. As our database grows, we can continue to monitor trends from year to year.
3. **Postvention** – Amparo have provided support for those bereaved by suicide in the Thames Valley since 2022. We also have two Survivors of Bereavement by Suicide (SoBS) Groups running in the county in Witney and Henley-on-Thames.
4. **Training to talk about mental health and suicide prevention** – In October 2023, Oxfordshire County Council commissioned Oxfordshire Mind to deliver mental health and suicide prevention training to professionals and volunteers working with all ages across the County. This training has been made available to those supporting or in consistent contact with groups of the community that have an elevated risk of poor mental health.
5. **Prevention and awareness** – The Oxfordshire Men's Health Partnership launched it's annual 30 Chats in 30 Days campaign in 2022 which runs each November. The month-long campaign encourages everyone to have 30 chats with 30 men and promotes meaningful conversation.
6. **Mental health and wellbeing promotion** – in 2023 Oxfordshire County Council adopted the R;pple Tool on all staff laptops which, when installed on a network or device, discreetly monitors use searches for harmful content. If triggered, it provides a pop up on screen offering hope, breathing exercises and signposting to support services.

The refresh of Oxfordshire's Suicide and Self-Harm Prevention Strategy has been informed by a number of key pieces of work:

1. Analysis of Oxfordshire suicide deaths 2017-2023
2. Mapping the National Suicide Prevention Strategy to local provision
3. Suicide Strategy Workshop with Multi-Agency Partners (July 2024)
4. Self-Harm Needs Assessment for Oxfordshire (2024)
5. Voice of Lived Experience – via MAG partners and using insight of National Suicide Prevention Alliance Lived Experience Network.

Key Updates

Mental Health and Wellbeing

In 2024 and 2025, while action in other areas is ongoing, the Mental Health Prevention Concordat have focused their efforts on creating Resilient Communities, one of the specific focus areas in the Mental Health Prevention Framework. A key area of this work has been in delivering the Better Mental Health Fund through Oxfordshire Community Foundation (OCF). The Better Mental Health fund awarded £210,000 (funded jointly by Oxfordshire Public Health and West Oxfordshire District Council) of grants in August 2024 to 8 grassroots organisations across Oxfordshire. The grants have the following objectives:

- Support the prevention of poor mental health and cultivate good mental wellbeing for the people of Oxfordshire in their communities.
- Narrow inequalities in mental health and wellbeing; and support community-based activities including peer support and community support groups.

Local mental health data has informed the target recipients who are:

- Pregnant women and new mothers, including their families.
- Autistic children and young people and their families.
- LGBTQ+ young adults.
- 30–59-year-old men, especially those experiencing relationship issues.

In September/October 2025 we expect to see some feedback from the first year of the grants and the impact that they have had on the wellbeing of our local communities. Initial feedback from OCF suggests that grant delivery is going well and recipient organisations are engaging well with the target groups identified.

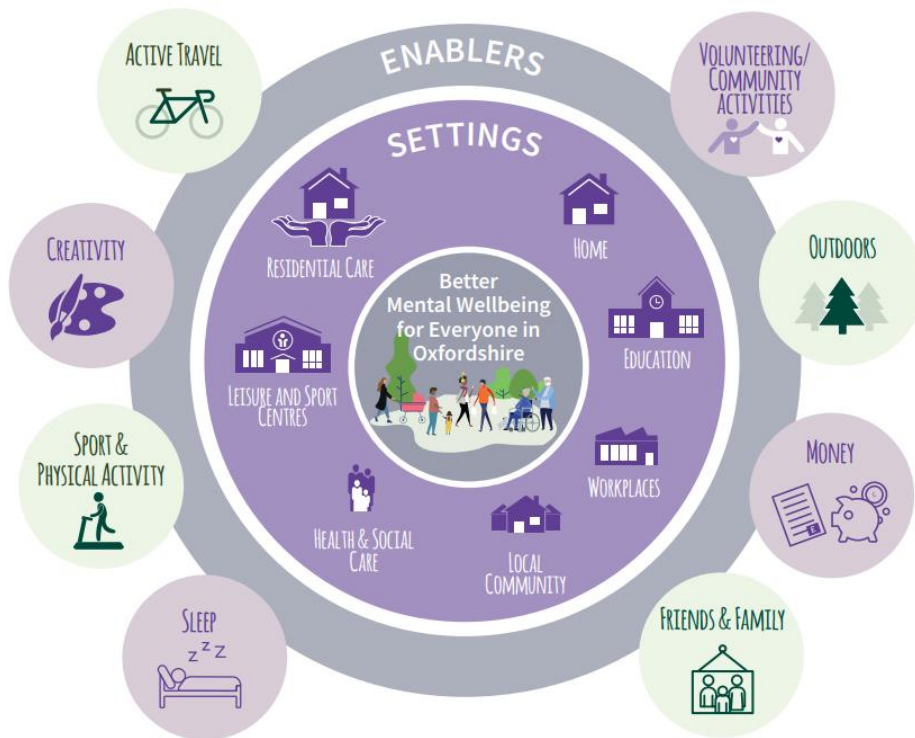
Suicide Prevention

[Oxfordshire's Suicide and Self-Harm Prevention Strategy](#) has been refreshed for 2025-2030. Our vision for Oxfordshire in the refreshed strategy is guided by 5 focus areas:

1. Making suicide prevention everyone's business

Every person, organisation and service has a role to play in suicide prevention. The strategy draws on the iceberg analogy which underpins the public health approach to suicide prevention. The number of people above the surface of the iceberg with thoughts of suicide is relatively small compared to the proportion of below the surface who might be at risk due to life's adversities. The strategy recognises that the prevention of suicide is much wider than clinical treatment and that we need to also consider the circumstances and communities that people live in, and how these contribute to supporting good mental health and wellbeing.

This crosses over with the approach of our Mental Health Prevention Framework recognising that the social, environmental, physical and economic enablers of good mental wellbeing interact with settings where we are born, grow, live, work and age (see below diagram).



An action from the strategy that supports this is to work with local employers to ensure that employee health and wellbeing, particularly good mental wellbeing is a priority. Working closely with our Public Health colleagues focussed on workplace wellbeing and our MAG and Concordat partners, we will engage more employers with our suicide prevention work and make workplaces a safe and supportive environment for employees.

2. Data and evidence

Timely and high-quality Real-Time Suicide Surveillance data is essential to both understand what is working locally in preventing suicide, and where to direct future efforts. Monitoring of this data ensures that we can identify emerging trends, new methods, high risk locations and high risk groups. Oxfordshire Public Health, Thames Valley Police and the Coroner will continue to work together to collect Real-Time Surveillance Data. Our MAG group and Real-Time Suicide Surveillance Sub-Group will continue to provide oversight of the data, sharing with partners where appropriate and escalating concerns.

For example, a recent review of data with Thames Valley Police has identified a bridge of concern in the County. This data has been shared and discussed with Highways England to put in place measures to make this bridge safer and prevent future incidents.

3. Priority groups and risk factors

Addressing risk factors linked to suicide provides an opportunity for effective early intervention, as well as providing appropriate tailored support for those experiencing suicidal thoughts or feelings.

The priority groups and risk factors highlighted in the strategy are as follows:

Priority Groups	Risk Factors
Pregnant women and new mothers	Loneliness and social isolation – including living in rural areas
Neurodivergence	Relationship breakdown
Middle-aged men	Domestic abuse
Children and young people	Substance use
Ethnic minority groups including people who are Gypsy, Roma or Travellers	Gambling
Refugees and asylum seekers	Financial difficulty and economic adversity
People who are Lesbian, Gay, Bisexual and Transgender	Physical illness
People who have self-harmed	Menopause
People in contact with mental health services	
People in contact with the justice system	

Our multi-agency group commit to focussing their meetings around these priority groups and risk factors in order to gain a stronger understanding into how we can better support our residents in Oxfordshire. For example, having identified men experiencing relationship breakdown as a key risk group through our RTSS data, this group was a target recipient of the Better Mental Health Grant awarded in 2024. Two organisations, The Cornermen and Thame Football Club are specifically working to target men experiencing relationship breakdown and help to improve their mental wellbeing. As feedback from these projects is shared, we will apply learning elsewhere in the County to continue to target and better support men experiencing relationship breakdown.

We held a conference to launch the strategy on 10th September 2025 on World Suicide Prevention Day. This conference aimed to bring partners together, encourage networking and inspire action from the updated strategy's focus areas. Speakers at the conference covered neurodivergence, children and young people and gambling and the links to suicide. Attendees on the day also represented the other priority groups and risk factors identified in the strategy. The conference provided an opportunity to expand current membership of the MAG and for partners to take away actions to work together to specifically support these groups.

4. Stigma and language

The language we use when talking about suicide is crucial in terms of creating a supportive and kind society where individuals feel they can access the support they need. A key part of ensuring consistent use of sensitive language is ensuring that our professionals and volunteers working in the

county are equipped with the appropriate skills to respond sensitively to individuals who are expressing emotional distress and suicidal or self-harm intentions. The strategy contains some examples of appropriate phrases to use and a link to free training.

One of the action areas in the strategy is to address stigma and use appropriate language through training of staff and volunteers supporting Oxfordshire residents. Oxfordshire Mind have been commissioned locally to deliver mental health and suicide prevention training which works towards this ensuring that our local workforce is upskilled to use consistent and appropriate language. The training seeks to support a wide range of workforces and community groups who may have contact with those at risk of poor mental health. To date they have delivered training to staff and volunteers working at Bullingdon prison, with care leavers, care staff, taxi drivers and bar staff. Through this contract we will ensure as many staff and volunteers in Oxfordshire as possible are confident to talk about suicide and mental health using sensitive language and avoiding stigma.

5. Postvention support

Evidence suggests family, friends and acquaintances who are bereaved by suicide may be 3 times more at risk of dying by suicide than the general population. Real-time surveillance plays a crucial role in ensuring that bereaved family and friends receive almost immediate supportive signposting and support. It is also important to consider the communities, workplaces, schools, universities and other settings that may be impacted by suicide and the wraparound support that may be required. The MAG partnership are an important part of providing this wraparound support and partners will be brought in as appropriate.

An action area in the strategy is to ensure continuity of postvention support for Oxfordshire residents. BOB ICB currently commission Amparo to provide suicide bereavement support across the Thames Valley. We will work in partnership with this service to ensure that professionals and anyone supporting those bereaved by suicide are aware of the referral pathway and can ensure specialist and sensitive support is provided.

Underneath each of the focus areas, the strategy outlines various areas for action (see annex 1) which our Oxfordshire Suicide Multi-Agency Group have committed to implementing and monitoring progress on. The partnership group will agree which areas to prioritise their attention on over each year of the strategy.

Budgetary implications

The partnership has been operating without a dedicated budget; however, the Suicide MAG partners and Mental Health Prevention Concordat partners have provided staff time and resources.

Oxfordshire Public Health currently provide funding for the following which support mental health and wellbeing and suicide prevention:

- Mental Health and Suicide Prevention Training

- Better Mental Health Grants
- Tellmi – Peer Support App for 11-18 year olds
- R;pple Suicide Prevention Tool
- QES Suicide Surveillance Database for RTSS
- Ad hoc geo-targeted social media campaigns as required

Equalities implications *[considering the impact of the policy/decision/approach on our customers]*

The strategy identified various groups and risk factors that may put people at higher risk of self-harm and suicide. This has been informed by the National Strategy and also our local Real-Time Surveillance data and local intelligence. This will inform the partnership's work going forwards on delivering the action areas within the strategy to ensure these priority groups' needs are being met.

The Suicide MAG group will prioritise which groups and risk factors to focus on in year one and year two of the strategy. At present there is a specific interest in younger men (aged 25-40) as the profile of suicide deaths in the County appears to be getting younger. This is an example of where the group are likely to put some focussed attention and action in the first year of the strategy.

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August 2025
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Annex 1 – Suicide Prevention Strategy 2025-2030 Action Areas

Action Areas

Long Term Outcome:

Reduce suicide & self-harm behaviours in Oxfordshire

This table outlines a number of key areas for action under each of the focus areas outlined in this strategy.

OXFORDSHIRE SUICIDE PREVENTION STRATEGY 2025-2030– FOCUS AREAS AND ASSOCIATED ACTION				
MAKING SUICIDE PREVENTION EVERYONE'S BUSINESS	DATA AND EVIDENCE	PRIORITY GROUPS AND RISK FACTORS	STIGMA AND LANGUAGE	POSTVENTION SUPPORT
Co-ordinate mental wellbeing campaigns for partners adopting national branding where possible	Continue to collect and triangulate high-quality data on local suicide deaths	Utilise real-time suicide surveillance to identify high-risk groups	Promote online sites that enhance the development of protective behaviours & educate about online risk	Ensure continuity of postvention support for Oxfordshire residents
Work with employers to promote employee health and wellbeing	Monitor trends including novel & emerging methods, clusters, contagion & high-risk groups	Work with established community groups engaged in suicide prevention to magnify their reach	Support responsible media reporting of suicides to minimise impact on communities	Draw on and give voice to those bereaved by suicide to shape postvention support, training & local policy
Upskill professionals, volunteers and workplaces with suicide prevention training	Learn from regional and national safeguarding reviews, confidential enquiries & serious event analyses	Ensure suicide prevention training is reaching staff and volunteers working with priority groups and those most at risk	Campaigns and communications should use language that supports people while reducing shame and stigma	Provide postvention support for GP practices to incorporate early identification of risk factors of suicide in their patients
Draw on experience of community groups, upscaling successful projects where possible	Take steps to prevent public places being used for suicide	Promote shared responsibility of mental health needs of high-risk groups across public, private and 3rd sector	Mental health and suicide prevention training should address stigma and use appropriate language to encourage a universal approach to language across Oxfordshire's staff and volunteers	Support parents, carers and professionals who care for children & young people who self-harm
No wrong door – when people reach out for support, this is timely and effective no matter what service the individually initially accesses	Explore opportunities to develop intelligence on self-harming behaviour in the community and near-miss data	Use our Oxfordshire Multi-Agency Group to learn more about priority groups and risk factors and agree local action		