During the past three months, IASP has been involved in many activities worldwide. We can look back at a successful Asia Pacific Conference in Tokyo, 18-21st May 2016: Building Bridges for a New Start Beyond Borders. On behalf of IASP, I would like to congratulate Reverend Yukio Saito, Professor Chiaki Kawanishi, Professor Yoshinoro Cho and the organising committee for their great commitment and for being excellent hosts of this major conference which was attended by more than 300 delegates from Asia Pacific countries and many other parts of the world. Professor Jane Pirkis, General Secretary of IASP has provided a detailed review of the conference in this Newsletter.

IASP and the WHO presented a collaborative Train-The-Trainer (TTT) programme on increasing awareness of suicide and self-harm for emergency healthcare staff in Seoul, Republic of Korea. The TTT participants represented all geographic regions in the Republic of Korea, and the roll out of the training will be coordinated by the Metropolitan and Community Mental Health Centre, Seoul and the Korea Suicide Prevention Centre (Further information in this Newsletter).

Another IASP-WHO collaborative activity in June represented a webinar on progress and challenges in developing and evaluating national suicide prevention programmes whereby a number of country examples were provided where government supported national suicide prevention programmes are being implemented. An interesting presentation was provided by Dr Yeshi Wangdi from Bhutan where last year, the Royal Government supported the nation’s first comprehensive National Suicide Prevention Action Plan (2015-2018) (See also: http://www.mhinnovation.net/series-ask-policy-experts-national-suicide-prevention-strategies). Nearly two years after the publication of the WHO Report: Suicide Prevention: A Global Imperative (WHO, 2014), pro-active steps have been taken towards developing a national suicide prevention strategy in countries that face major political and socio-economic challenges, including Afghanistan.

In terms of major events ahead, we are only a few weeks away from the 16th European Symposium on Suicide and Suicidal Behaviour in Oviedo, Spain where IASP has planned a number of specific sessions, including a working group meeting on Restricting Access to Means, a symposium on Mental Health Conditions and Suicidal Behaviour among Refugees from Low and Middle Income Countries in Europe, and Lunch with Experts (http://esssb16.org/).

World Suicide Prevention Day 2016 is just around the corner, and will this year coincide with the last day of the ESSSB16 Conference. A special WSPD plenary session will be held with input from IASP and WHO speakers. IASP is again organising the Cycle around the Globe, and this year we are hoping to exceed last year’s record of 51,559 miles together with IASP members, partners and stakeholders across the world!

Ella Arensman,
IASP President
IASP’s 7th Asia Pacific Regional Conference was held in Tokyo from 18–21 May, in conjunction with the 40th Annual Meeting of the Japanese Association for Suicide Prevention. The conference was a great success, and Professor Chiaki Kawanishi, Professor Yoshinori Cho, Reverend Yukio Saito and their local organising committee should be congratulated on putting on such a fantastic event. Old colleagues got together, and new friendships were made. Excluding day delegates, approximately 312 delegates from 29 countries spent the conference discussing the pressing issue of suicide prevention in the context of the conference theme: “Building bridges for a new start beyond borders”.

There were many highlights in the scientific program. The first plenary session gave delegates insights into the past, present and future of suicide prevention, internationally and in Japan and several other Asian countries. This set the scene for many excellent plenary and parallel sessions that provided a picture of the current state of play with respect to suicide prevention around the world. Some sessions focused on macro-level approaches, providing audiences with information about national suicide prevention strategies, plans and over-arching approaches. Other sessions focused more on on-the-ground interventions, such as providing helplines, restricting access to means and encouraging responsible reporting of suicide. Consideration was given to particularly vulnerable groups, including people with mental illness, children and adolescents, older people, people who identify as lesbian, gay, bisexual or transgender, people from particular cultural groups, people who have experienced trauma, people working in high-risk industries. There was an emphasis on the full gamut of suicide prevention settings, including communities, schools, workplaces and primary, secondary and tertiary care settings. The full gamut of universal, selective and indicated interventions featured, as did postvention.

The conference environment couldn’t have been better. The venue was accessible and was ideally set up for large plenary sessions and smaller break-out sessions. The room housing the posters gave them the prominence they deserved, and many new collaborations were seeded during the poster sessions. The venue staff and conference volunteers were always willing to help. And the conference dinner was a resounding success; it was held in the restaurant that was rumoured to be the one featured in Pulp Fiction!

All in all, the conference was a resounding success. The 8th Asia Pacific Conference, to be held in Melbourne in 2018, has a lot to live up to – but we’re up for the challenge!

Professor Jane Pirkis
General Secretary, IASP

Jane Pirkis
Special Interest Group - Prevention of Intentional Pesticide Poisoning

This special interest group has been developed to directly address the issues of prevention of intentional poisoning with pesticides. This group aims to collate information for dissemination, provide updates on on-going projects, facilitate linkages between current projects, and to act as a focal point for information on the prevention of intentional pesticide poisoning.

Over the past 12 months we have achieved two main objectives:

- Held a workshop Special Interest Group Prevention of Intentional Pesticide Poisoning at 28th World Congress in Montreal

Bibliography

There are 444 references in the bibliography and they can be downloaded as endnote files or word documents. The bibliography is categorised into 3 groups; regions, themes and study type. These groups have been created to assist searching and identification of relevant references. The bibliography is a starting point and has been created from digital searching of pubmed databases.

Any additional references on intentional pesticide poisoning that members are aware of can be forwarded to melissa@sactrc.org.

Future Plans

In 2016 we are looking to send out our first newsletter. We also hope to see some of you at the meeting in Japan.

Keith Hawton, Michael Phillips and Melissa Pearson, SIG Co-Chairs

Media and Suicide SIG - Update

The Media SIG continues efforts to develop new materials for the international media industry. Since our last update, we have:

- Formed an international Task Force to develop Social Media and Blogger Guidelines. Led by Dr. Reidenberg, the TF has conducted a literature review, created and disseminated a survey to international bloggers and various social media sites, analyzed the results and started the process of writing the new Guidelines.
- Created a work plan for updating and revising the WHO Media Reporting Guidelines. Let by Dr. Niederkrotenthaler and with the support of the IASP board and co-chair Dr. Reidenberg, this project will review the 2008 Guidelines, conduct a literature review, set up an international TF, and update the WHO Guidelines for both traditional and new media guidelines.
- Started conversations with experts on development of a new Universal Response to Reporting on Major Media Stories.
- In addition to English, Spanish and German, we added another language (French) to the website hosting multiple countries versions of Media Guidelines for Reporting on Suicide ([www.reportingonsuicide.org](http://www.reportingonsuicide.org)).

If you are interested in having your countries Media Recommendations included on the site, please contact dreidenberg@save.org.

Dan Reidenberg, PsyD, Co-Chair
Thomas Niederkrotenthaler, MD, Co-Chair
Suicide and Suicide Prevention in Portugal

This past year, we had a handful of intervention projects in the field of suicide prevention. The "+ Contigo" Project, from the Coimbra Nursing School, with the aid of the National Program on Mental Health, reached national implementation. This project aims to promote mental health and to develop suicide prevention strategies within the school community. It has reached 40 middle and high schools, and around 3500 students in 2015.

Through the EEA Grants, two projects of suicide prevention were directly funded.

The first project, was develop by Eutimia, and consists of two different interventions.

1) Primedep - The general goal was to enhance the capacity in primary care to diagnose and treat depression and to assess and manage suicide risk through the implementation of large-scale transfer of knowledge within the context of mental health care delivery in primary care.

2) Whyschool - This project aims to develop mental health pathways-to-care for youth according to a stepped care approach starting at school until hospital care, through empowering professionals in public schools.

The second project was promoted by ISMAI. Stop Depression - Has been implemented in Health Centres from the West side of Oporto. It aims to improve the efficiency of depression detection and the management of suicide risk. Through the matched stepped care approach has as central purposes the early detection of cases of depression and of suicide high risk; the improvement of the quality of treatments according to the severity of symptoms; and also to support the intervention resorting to new technologies.

The Portuguese Society of Suicidology (SPS) celebrated WSPD 2015 in Alentejo, to raise awareness of suicide prevention in the region with the highest rates of suicide in Portugal. In 2015 SPS also promoted alongside with CRIAP, the first Post-Graduation Course on Suicidal Behaviour in Portugal. Due to its demand by health care professionals, new editions of the PG are planned to start in 2016.

SPS has promoted the XV National Symposium on Suicide that also took place in April 2016.

The General Health Administration implemented in 2014 a centralized death certificate through an informatics platform (SICO), which reduced the sub notification of violent deaths. The first results from 2014 show an increase in the number of deaths due to suicide, reaching a rate of 11.7 per 100,00.

Alexandre Teixeira
IASP National Representative of Portugal

Suicide Prevention in the UK

World Suicide Prevention Day 2015 was a great success. The number and variety of public engagement events hosted to help raise awareness of suicide across the community increases year on year, and with this we are seeing public awareness growing. The UK IASP members are instrumental in organizing many of these events including conferences, such as that held by the Suicide Prevention and Intervention Network (SPIN) for Thames Valley, now in it's 4th year; community campaigns, such as If u care SHARE foundation’s ‘Inside Out’; and a great number of Twitter conversations.

Members involved in research have made valuable contributions to our understanding of suicide prevention and postvention in the last year. The Multicentre Study of Self-harm in England, is a joint collaboration between Oxford, Manchester and Derby research centres, and supported by the Department of Health. Data collected on self-harm presentations to hospital will increase our understanding of trends in self-harm, death and admissions to hospital. More information on the study can be found at http://cebmh.warne.ox.ac.uk

The Multicentre study has also produced a number of toolkits and guidelines, on behalf of the NHS and Public Health England. The latest publications are:

- A freely available guide for clinicians on the assessment of suicide risk in people with depression that can be accessed via http://cebmh.warne.ox.ac.uk.

Researchers from the Multicentre study are also contributing to the National Institute for Health Research Programme Grant for Applied Studies investigating suicide and self-harm. In the process of this work, a new information digital resource, Healthtalk for parents and carers of young people has been developed http://www.healthtalk.org/files/upload/Self%20harm%20parents%20guide.pdf, with additional guides for parents and schools soon to be included.

Dr. Gill Green
IASP National Representative of the United Kingdom
**Suicide Prevention in Argentina**

*In 2015 as a representative of IASP in Argentina, we participated in the passing of the National Suicide Prevention Act, No. 27,130. This Act is in force since August, 2015. This and other law in relation to suicide prevention in Argentina focuses on suicide prevention, care for persons at risk of suicide and training.*

Alongside this, the Flores University, School of Psychology and Social Sciences, in alliance with the Programme Prevention, Care and Postvention Suicide IASP and Representation in Argentina, presented the first diploma in Suicidology. The proposed objective of this diploma is to provide theoretical, methodological and ethical frameworks for the prevention of suicide in different settings and contexts. It is run by the Ernesto Paez and Martin Alvarez. Registration for this diploma is currently open for the second cohort 2016-2017.

*On WSPD September 10th 2015 professionals, civil servants, teachers, members of NGOs and volunteers from across Argentina marked this special and unique day.*

Ernesto Ruben Paez  
IASP National Representative of Argentina

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**Suicide Prevention in Lithuania**

The suicide prevention memorandum was signed in Vilnius, the capital of Lithuania, on 21st December, 2015. It was signed by 30 organisations: the municipality, hospitals, mental health centres, NGO’s and Vilnius University. The goal of the memorandum is to decrease the suicide rate in Vilnius by training gatekeepers, providing more possibilities of psychological support in crisis situations, by facilitating on-going and consistent treatment for suicide attempters and more help for bereaved by suicide.

**The Vilnius Suicide Prevention Memorandum**

*On the 1st of February 2016 the Ministry of Health’s Scientific Committee for the Prevention of Suicide attracted a consultant to assist the committee and the Ministry in developing a National Plan for the prevention of and intervention in suicide.*

To ensure stakeholder inclusion, a large stakeholder workshop was held on April 8th with representatives of different ministries, NGO’s, health care providers and other stakeholders. To stress the importance of the suicide problem in Suriname to all present at the meeting, both the Minister of Health and the permanent secretary of the Ministry of Health actively participated in the workshop. In this workshop the participants were presented a draft situation- and stakeholder analysis on suicide in Suriname. They were requested to complete these drafts based on their knowledge and experience and to provide input for the development of a two-year action plan.

One month after the workshop one of the members of the Scientific Committee had the opportunity to participate in a “Regional Workshop on Suicide Prevention”, organized by PAHO/WHO and the Costa Rican Ministry of Health. The general objective of this workshop was to “Strengthen the capacity of countries in the implementation of preventive measures for suicidal behaviors in the region of the Americas, through development of national prevention plans that address the problem of suicide and improvement of surveillance systems that contextualize the problem and enable a better, more focused approach to prevention”.

*The Suriname National Suicide Prevention and Intervention Plan, as of June 2016, is almost finalised and with the large stakeholder input and the insight gained at the above mentioned workshop Suriname is assured to have an all-inclusive, multi-sector plan for the prevention of and intervention in suicide.*

Toby Graafsma, IASP National Representative of Suriname and Zamora Pengel

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**Suicide Prevention in Suriname**

On WSPD September 10th 2015 professionals, civil servants, teachers, members of NGOs and volunteers from across Argentina marked this special and unique day.

Ernesto Ruben Paez  
IASP National Representative of Argentina

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Signing the memorandum: Remigijus Simašius, Mayor of Vilnius, Jovita Galeckaité, president of association for bereaved by suicide “Artimiems” (For the Ones Close to Us).
Connecting for Life: Ireland's National Strategy to Reduce Suicide (2015–2020)

In June 2015, the Irish Government launched Connecting for Life, the country’s new national strategy to reduce suicide 2015-2020. Connecting for Life is founded on the suicide prevention work that has taken place in Ireland over the past ten years as part of the Government’s previous strategy to reduce suicide, Reach Out. Since then, there have been significant developments in the areas of research, policy and service delivery relating to suicide prevention.

The planning process for Connecting for Life involved the engagement of a broad range of statutory, non-statutory and community stakeholders, identifying agreed strategic priorities, setting clear goals and objectives; it is underpinned by strong political leadership and commitment. The focus on engagement in the strategy development process has created a strong community of people and agencies ready to lead the implementation of Connecting for Life.

Connecting for Life involves preventive and awareness-raisin work with the population as a whole, supportive work with local communities and targeted approaches for priority groups. The strategy proposes high-quality standards of practice across service delivery areas, and an underpinning evaluation and research framework. This wide reach presents unique implementation challenges. The whole-of-government, multi-agency, inter-professional, expert-by-experience, local/national focuses will involve multiple stakeholders across and between levels of government and governance.

Solid building blocks are already in place; however, gaps in services remain. Significant issues around timely access to services and early identification of risk are to be resolved and resourced. Connecting for Life places strong emphasis on the necessary collaborative partnerships and the rich learning that has and will continue to take place.

Implementing Connecting for Life will challenge all individuals and agencies and collectively allow everyone’s strengths to evolve. Connecting for Life will aim to connect these and use these evolving strengths to form a major force for change in suicide prevention in Ireland. The Connecting for Life strategy document is available at: http://health.gov.ie/wp-content/uploads/2015/06/Connecting-for-Life_LR.pdf.

Gerry Raleigh, Director of National Office for Suicide Prevention

Preventing suicide among young Australians

Recent suicide data for Australia shows that suicide rates among young people are at their highest in over a decade and now account for around 1/3 of all deaths in those aged 15–24 years. This increasing trend is particularly evident among young women, including those under the age of 14. In fact, the number of suicides by young women in this age group now exceeds that of young men. Rates of suicide among our indigenous young people are significantly higher than among non-indigenous youth, and these too are increasing.

The reasons for this increase are complex and not well understood. We know that mental ill-health – in particular depression is linked to suicide among young people and this too has increased, doubling in adolescent females over the past decade. We also know that presentations to hospital for suicide attempt and self-harm are increasing in young people.

Given these increases, youth suicide prevention needs a re-invigorated approach. The Australian Government is in process of developing a new strategic approach to mental health and suicide prevention and there are several important elements proposed that have the potential to impact on young people. These include educational reform that comprises programs located in primary and not just secondary schools; a digital gateway designed to capitalise on some of the benefits afforded by newer forms of technology; regionally-based systemic approaches to suicide prevention; and an integrated youth mental health system.

However, young people themselves need to be front and center of policy reform. We recently conducted a consultation with a group of young people from across Australia that identified a number of areas of importance. These included youth representation at a national level, genuine engagement with those most at risk; programs focusing on tertiary education settings - not just schools; and improved responses following presentation for treatment, and these suggestions will form part of a piece of advice designed to help the sector implement these reforms. There is an opportunity to develop new and innovative approaches to address rising youth suicide rates, and this is also an opportunity to empower young people to be part of the solution.

Dr. Jo Robinson, The National Centre of Excellence in Youth Mental Health Orygen, Australia
Suicide among emergency medical services personnel

Working in emergency medical services (EMS) for over 23 years, I have responded to countless patients with suicidal ideation, suicide attempts, suicide, and a wide variety of psychiatric emergencies. As such, I have long been interested by the phenomenon of suicide. My interest transformed into passion when, in 2003, my wife died by suicide. Following this, my fervour for understanding grew when, in 2008, my brother died by suicide. The deaths of ten EMS colleagues in the intervening years gave me anecdotal belief that EMS workers are at high suicide risk.

The vast amount of research conducted on the suicides of public safety personnel has been on law enforcement officers (LEOs) and fire-fighters. At the 2015 American Association of Suicidology (AAS) conference, I attended a presentation where fire-fighter suicides were discussed. I asked myself “what about EMTs and paramedic suicides?” One may not realize that not all EMS personnel are fire-fighters, although many fire-fighters are EMS trained. Researchers have been looking at suicides of emergency personnel backwards. Rather than focusing on the LEO or fire-fighter, we should be concentrating on the tie that binds—EMS certification.

My research involves analysing 21 years of death records in the State of Minnesota and comparing over 12,160 suicides to EMS certification records. This will yield descriptive statistics of EMS suicides by profession (LEO, fire-fighter, or EMS only) and certification level (emergency medical responder, EMT, or paramedic). Logistical regressions will be performed to determine the demographics of EMS personnel who suicide. Follow-up will consist of psychological autopsies.

This research has been partially funded by the Minnesota Ambulance Association and is being supported by the Strub Caulkins Center for Suicide Research.

Chris Caulkins
Emergency Medical Services Program Director / Faculty, Century College
Executive Director, Strub Caulkins Center for Suicide Research, Woodbury, Minnesota

Suicide Prevention Awareness Ribbon Announcement

Looking ahead to this year’s upcoming World Suicide Prevention Day (WSPD), 10th September 2016, we are delighted to present to you, along with our partners, a universal suicide prevention awareness ribbon.

The colour combination of yellow and orange are chosen to signify suicide prevention awareness around the world. This two-toned ribbon is also indicative of a candle flame which ties in with the “Light a Candle” WSPD activity. It also compliments with the “Out of the Darkness into the Light” walks and other similar activities held each WSPD.

Our wish is for the suicide prevention awareness ribbon to become internationally recognisable, and associated with suicide prevention globally. In uniting in this shared universal ribbon, we hope to increase awareness of suicide prevention every day.

We would be delighted if you would join with us and support this ribbon initiative. Please feel free to use the ribbon avatar on social media for WSPD. Please also feel free to join our workshop and to make and distribute some of you own yellow and orange ribbons to promote WSPD 2016!

For more information on the new WSPD ribbon please visit: https://www.iasp.info/wspd/2016_wspd_ribbon.php.
WHAT YOU CAN DO TO SUPPORT WORLD SUICIDE PREVENTION DAY

WORLD SUICIDE PREVENTION DAY, September 10th, is an opportunity for all sectors of the community - the public, charitable organizations, communities, researchers, clinicians, practitioners, politicians and policy makers, volunteers, those bereaved by suicide, other interested groups and individuals - to join with the International Association for Suicide Prevention (IASP) to focus public attention on the unacceptable burden and costs of suicidal behaviours with diverse activities to promote understanding about suicide and highlight effective prevention activities.

Those activities may call attention to the global burden of suicidal behaviour, and discuss local, regional and national strategies for suicide prevention, highlighting cultural initiatives and emphasizing how specific prevention initiatives are shaped to address local cultural conditions.

Initiatives which actively educate and involve people are likely to be most effective in helping people learn new information about suicide and suicide prevention. Examples of activities which can support World Suicide Prevention Day include:

- Launching new initiatives, policies and strategies on World Suicide Prevention Day, September 10th.
- Learning about **connecting, communicating, caring and** suicide prevention and mental health from materials found in IASP’s Web resource directory [http://goo.gl/ok8R6m](http://goo.gl/ok8R6m)
- Using the WSFP Press Preparation Package that offers media guides in the planning of an event or activity. [https://goo.gl/aUqQfq](https://goo.gl/aUqQfq)
- Downloading the World Suicide Prevention Day Toolkit that contains links to World Suicide Prevention Day resources and related Web pages [https://goo.gl/dDqlrR](https://goo.gl/dDqlrR)
- Holding conferences, open days, educational seminars or public lectures and panels
- Writing articles for national, regional and community newspapers, blogs and magazines
- Holding press conferences
- Placing information on your website and using the IASP World Suicide Prevention Day Web banner, promoting suicide prevention in one’s native tongue. [https://goo.gl/OJquho](https://goo.gl/OJquho)
- Securing interviews and speaking spots on radio and television
- Organizing memorial services, events, candlelight ceremonies or walks to remember those who have died by suicide
- Asking national politicians with responsibility for health, public health, mental health or suicide prevention to make relevant announcements, release policies or make supportive statements or press releases on WSPD
- Holding depression awareness events in public places and offering screening for depression
- Organizing cultural or spiritual events, fairs or exhibitions
- Organizing walks to political or public places to highlight suicide prevention
- Holding book launches, or launches for new booklets, guides or pamphlets
- Distributing leaflets, posters and other written information
- Organizing concerts, BBQs, breakfasts, luncheons, contests, fairs in public places
- Writing editorials for scientific, medical, education, nursing, law and other relevant journals
- Disseminating research findings
- Producing press releases for new research papers
- Holding training courses in suicide and depression awareness
- Joining us on the official World Suicide Prevention Day Facebook Event Page [https://goo.gl/1x8lVK](https://goo.gl/1x8lVK)
- Supporting suicide prevention 365 days a year by becoming a Facebook Fan of the IASP [https://goo.gl/S7zalS](https://goo.gl/S7zalS)
- Following the IASP on Twitter ([www.twitter.com/IASPinfo](http://www.twitter.com/IASPinfo)), tweeting #WSPD or #suicide or #suicideprevention
- Creating a video about suicide prevention. See the IASP WSPD Playlist at: [https://goo.gl/f6Jrmg](https://goo.gl/f6Jrmg)
- Lighting a candle a candle, near a window at 8 PM in support of: World Suicide Prevention Day, suicide prevention and awareness, survivors of suicide and for the memory of loved lost ones. Find “Light a Candle Near a Window at 8 PM” postcards in various languages at: [https://goo.gl/9ic1en](https://goo.gl/9ic1en)
- Participating in the World Suicide Prevention Day - Cycle Around the Globe [https://goo.gl/csdyyvG](https://goo.gl/csdyyvG)
Join Us and Cycle around the Globe this WSPD!

Here at the IASP we are excitingly gearing up for this year's Cycle Around the Globe event. This is the 4th year of this inspiring event, taking place on World Suicide Prevention Day (WSPD) September 10th 2016. This theme for this World Suicide Prevention Day is 'Connect, communicate, care.' We want to connect with all you keen novice and experienced cyclists out there!

Through this global event we aspire to raise awareness of the importance of suicide prevention on this most powerful day. The aim of this event is to empower people from all across the world, all sectors of society and all cultures, to collectively cycle the circumference of the entire globe, 40,075 km or 24,900 miles!

This year we are hoping to exceed all past distances and to achieve a new record. You can help and join us in this endeavour! It does not matter how far you can cycle; every kilometre or mile helps. There are no limits; you can cycle at home, in the gym or outdoors.

Engage your community

This is also a wonderful opportunity to spread the message of suicide prevention in your community. We have WSPD banners and 'Light a Candle' postcards in many different languages available on our website https://www.iasp.info/wspd/, which can be printed and handed out at your cycle event. Also available is an Official printable participant label and a well-deserved printable Certificate of Participation, are also available to you and your cycling group.

If you wish you can also collect sponsorship for your local or national suicide prevention charity or similar organization. A printable sponsorship form is available on our website to help you collect donations, once you sign up. If you wish to donate to IASP, all donations would be gratefully received.

For more information about being a part of the Cycle around the Globe 2015 check out: https://www.iasp.info/wspd/cycle_around_the_globe.php.

For the answers to all your Cycle Around the Globe questions please visit: https://www.iasp.info/wspd/pdf/2016/2016_wspd_cycle_faq.pdf.

This WSPD please share your experiences and follow us on our social media sites to mark this wonderful event in style! To join the IASP on twitter (www.twitter.com/IASPinfo), tweet #WSPD or #suicide or #suicideprevention or o become a Facebook Fan of the IASP visit: https://www.facebook.com/events/1054474904622617/

Join us and Cycle for WSPD to show that we are all connected in our aim of preventing suicide
On May 23rd and 24th Professor Ella Arensman and Dr. Alexandra Fleischmann delivered a Train-the-Trainer programme to healthcare professionals in Seoul, the Republic of Korea. Fifty seven healthcare professionals were trained on this occasion, each of whom will share their knowledge and skills obtained in working with self-harm or suicidal patients.

The programme ‘Increasing awareness of suicide and self-harm among emergency healthcare staff’ is based on a training model developed and tested by the European Alliance Against Depression (EAAD), and further optimised within: Optimising Suicide Prevention Programmes and their Implementation in Europe (OSPI-Europe). On this occasion, the programme was culturally adapted and delivered to reflect the needs of healthcare professionals working in Seoul. The programme uses the sustainable Train-the-Trainer (TTT) model to enable healthcare professionals to deliver a 3-hour training to fellow emergency healthcare staff. The TTT participants represented all geographic regions in the Republic of Korea, and the roll out of the training will be coordinated by the Metropolitan and Community Mental Health Centre, Seoul and the Korea Suicide Prevention Centre. The TTT programme itself is an evidence-based self-harm and suicide awareness-skills training, which incorporates role plays and the dissemination of a comprehensive, take-home training manual for all participants. This subsequent 3-hour programme targets emergency healthcare staff including ED doctors, nurses, midwives, clerical and security staff, paramedics, porters and healthcare assistants and will be delivered onsite by 2 trained facilitators.

The World Federation for Mental Health has promoted mental health worldwide since 1948 and it continues to have impact through its international conferences and congresses. This Conference will continue its work of promoting the concept of dignity and respect for people suffering from mental illness in today's world.

This Conference is about bringing together the key players within the mental health sector, those within the community and anyone affected by mental illness. An impressive and stimulating program is currently being developed that aims to challenge and stimulate discussion surrounding the Conference theme “Moving Toward a Mentally Healthy Community.” It include presentation of papers, posters, workshops, plenaries, debates and symposia, all focusing on a range of physical and mental health priorities.

It is also hoped that delegates will take from this Conference an increase in knowledge and the capacity and skills for their community to respond early and effectively to mental health issues.

For more information please visit: http://www.wfmh2016.com/.
SELAMAT DATANG! WELCOME!

We are pleased to invite you to participate in the XXIX World Congress of the IASP which will be held from 18 - 22 July 2017 in Kuching, the capital of the Malaysian State of Sarawak on the island of Borneo. We plan to provide participants with an exciting conference program and a social program showcasing exotic Sarawak. Sarawak is the land of the hornbill, and was once known as the land of headhunters.

Jointly organized by the IASP and the Malaysian Psychiatric Association in partnership with Universiti Malaysia Sarawak (UNIMAS), SEGi University, the Sarawak Association of the Nursing Profession, the Sarawak State Health Department, Befrienders Malaysia, and the Sarawak Convention Bureau.

This is the time to experience the unique culture of the Island of Borneo. The Congress is scheduled to be held a day after the renowned World Rainforest Music Festival 2017 in Kuching. Music enthusiasts may come to Kuching a little earlier to enjoy performances by world musicians, and indigenous/ethno-music fare.

Don't miss this opportunity to participate in this IASP Congress with presenters of international renown as well as taste the culture of exotic Borneo.

For any enquiry please contact any of the following:
1. Prof Maniam (Chair, Organising Committee) (tmaniam@yahoo.com)
2. Prof Mohd. Fadzillah Abdul Razak (Local Organising Committee Chair) mofadzdr@hotmail.com

http://www.psychiatry-malaysia.org/
On September 8th-10th 2016 the 16th European Symposium on Suicide and Suicidal behaviour will be held in Oviedo, Spain.

The ESSSB16 will be a tailored symposium with an integrative and holistic focus on suicide and suicidal behaviours. This symposium will combine a high-level scientific program with in-depth discussion on in vogue topics of suicidology.

For more information on the conference and further details please refer to the webpage: http://esssb16.org/ or download the final programme from http://www.esssb16.org/programme/index.php.