



# ANNUAL REPORT 2021

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Creating *Hope*  
Through *Action*



International Association  
for Suicide Prevention



[www.iasp.info](http://www.iasp.info)



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“Currently, **38 countries** are known to have a national suicide prevention strategy” Dr Tedros Adhanom Ghebreyesus Director-General World Health Organization, 2021.

**79%** of global suicides occur in low and middle income countries.

## FACTS & FIGURES

“The world is not on track to reach the 2030 suicide reduction targets. WHO advocates for countries to **take action to prevent suicide**, ideally through a comprehensive national suicide prevention strategy” WHO, 2021.

For every suicide there are many more who attempt suicide or have serious suicidal ideation. Suicidal behaviour profoundly impacts families and communities and remains a universal challenge with millions impacted. The reduction of suicide mortality is of global importance and a vital public health consideration.

“**We cannot – and must not – ignore suicide.** Although some countries have placed suicide prevention high on their agendas, too many countries remain uncommitted. The targets of the United Nations Sustainable Development Goals and the World Health Organization’s Mental Health Action Plan for reducing the global suicide mortality rate will not be achieved unless we transform our efforts to implement effective actions to prevent suicide” Dr Tedros Adhanom Ghebreyesus Director-General World Health Organization, 2021.

More than **700,000** people die due to suicide every year.



*Professor Rory O'Connor*

## VOICE OF THE PRESIDENT

At the beginning of this year, I was honoured to take on the role of IASP President. During that time, I witnessed first-hand the strengths and reach of the organisation. Despite the extensive challenges as a result of the COVID-19 pandemic, IASP has continued to make considerable progress and it remains the leader in global suicide prevention, fostering an exchange of knowledge and expertise at all levels —and globally — to prevent suicide.

The newly established Regional Suicide Prevention Network Programme (RSPNP) demonstrates the central role of IASP in facilitating regional collaboration and the development of strategic and evidence-informed approaches to suicide prevention.

This year we have also accomplished some key milestones in our organisation's rebranding; a new logo, a new look for the IASP website and campaigning under our new WSPD theme 'Creating Hope through Action'. This theme shows us that our actions, no matter how big or small, may provide hope to those who are struggling.

The International COVID-19 Suicide Prevention Research Collaboration demonstrated the ways in which our community can come together, galvanise the international suicide prevention research community and share expertise and best practice. I was delighted to be part of this global effort and to see the willingness of the research community to share real-time data on suicide immediately to ensure that we were best placed to respond to this global challenge. Indeed, the efforts of this international collaboration, among other impactful outputs, resulted in two high impact publications in *Lancet Psychiatry*.

The 31st IASP World Congress was held on the Gold Coast, in partnership with the Australian Institute for Suicide Research and Prevention, Griffith University, Movember and Australia's National Mental Health Commission. While we were unable to attend in person, we reaped the benefits of being able to connect virtually via a virtual conference, witnessing the largest number of attendees to date at any World Congress. This year, once again, we collaborated with the Slovene Centre for Suicide Research and the De Leo Fund Onlus to co-host the Triple iii Virtual Conference. It has been incredibly rewarding to see the IASP Congresses and conferences growing from strength to strength as they are a fundamental part of our knowledge exchange, of what we do, and they allow us to touch on topics at the forefront of the global agenda. To this end, I am excited to host Reach In, Reach Out, the new IASP podcast (launching in 2022) which aims to reach a wide audience and tackle hot topics in the field of suicide prevention.

Overall, IASP continues to meet its key objectives, growing and thriving as the leading suicide prevention organisation internationally.

“ IASP has continued to make considerable progress and it remains the leader in global suicide prevention.”





## GLOBAL POLICY

IASP plays a strategic central role that is both proactive and reactive in empowering an effective forum on which evidence-based suicide prevention activities are promoted, implemented, and evaluated. Guiding policy and increasing the visibility of the issue of suicide at a global level continues to be a priority.

## REGIONAL SUICIDE PREVENTION NETWORKS

IASP and the [World Health Organization \(WHO\)](#) recognise the need to encourage and support countries to develop, implement and evaluate national suicide prevention strategies. The IASP Special Interest Group (SIG) for the [Development of Effective Suicide Prevention Strategy & Practice](#) was established to promote this important goal.

In support of the objectives of our SIG and mindful of the challenging international context (in particular, the COVID-19 pandemic and its aftermath), IASP launched a new initiative in 2021: the establishment of regionally designated suicide prevention networks.

### The aims of this initiative are:

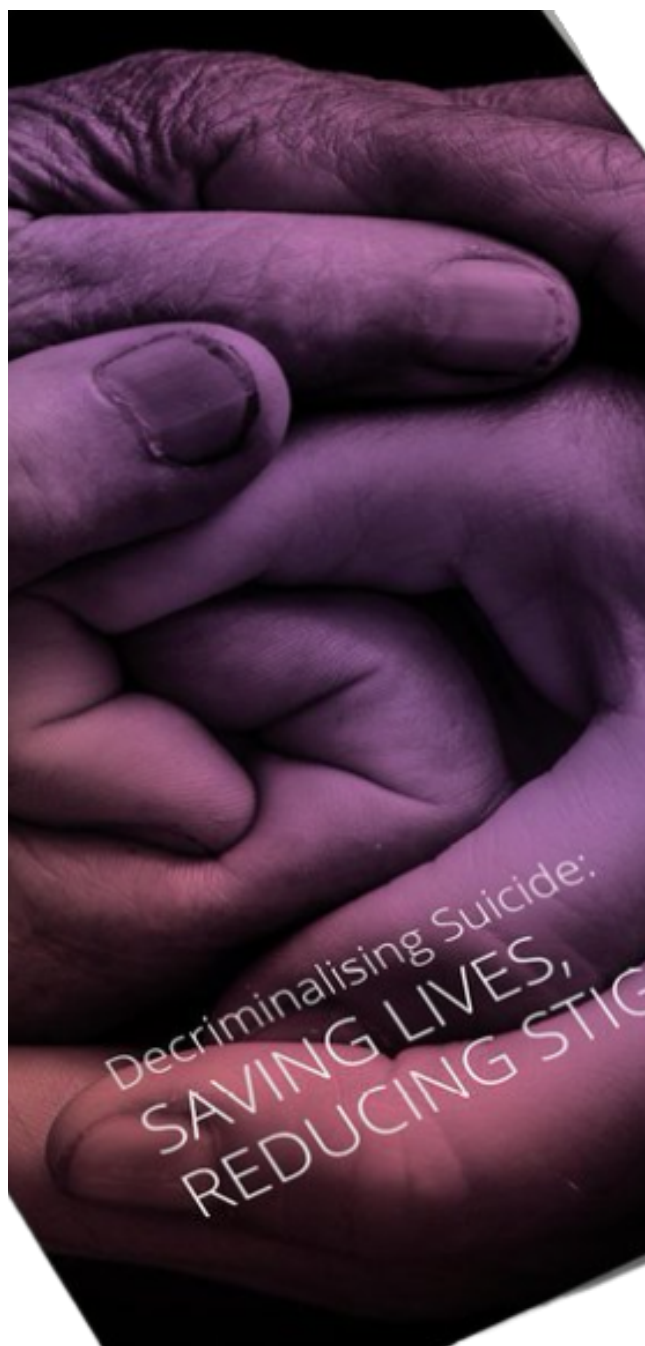
- to share experience in, and/or knowledge and learning about, suicide prevention strategies between countries within each region.
- to support the development of a strategic, cross-sectoral and evidence-informed approach to suicide prevention in countries within each region.
- to support collaboration, coordination and mutual support with respect to the development, implementation and evaluation of suicide prevention strategies between countries within each region and between regions.
- to promote learning and provide mentorship between countries with established suicide prevention strategies and countries which are at an earlier stage of suicide prevention strategy development.
- to raise global awareness about the importance and potential positive impact of a comprehensive, national strategic approach to suicide prevention.
- A steering group has been established to take responsibility for the successful implementation of the initiative, guide and oversee the delivery of the work programme in each region, and provide mutual support to meet ongoing challenges and barriers to progress. This initiative will play a central role in IASP's work in the coming years.

## DECRIMINALISATION OF ATTEMPTED SUICIDE AND SUICIDAL BEHAVIOUR

The decriminalisation of suicide and suicide prevention in countries where suicide is still considered a criminal act, is one such area that is a fundamental stepping stone in ensuring individuals have access to appropriate mental health services. Suicide remains illegal in at least 20 countries worldwide and attempted suicide is punishable under Sharia Law in a further 20 countries. The criminalisation of attempted suicide undermines national and international suicide prevention efforts and impedes access among vulnerable individuals and groups to suicide prevention and mental health services.

The IASP Special Working Group (SWG) for the Decriminalisation of Suicide and Suicidal Behaviour continued to share knowledge and expertise to guide organisational advocacy activities and messaging. This group also has the potential to further advise external individual and organisational advocacy and guide and support on approaches to relevant authorities (Governments, professional associations etc) for the decriminalisation of attempted suicide.

The IASP SWG provided input and advice towards the United for Global Mental Health report, [Decriminalising Suicide: Saving Lives, Reducing Stigma](#), launched over World Suicide Prevention Day 2021. The report examines the civil laws which criminalise suicide and the implications they have around the world. The report aims to help those campaigning for decriminalisation of suicide make progress and ensure that everyone, everywhere, who needs support for their mental health before, during and after a suicidal crisis can access it, free of stigma and discrimination. IASP supports these advocacy efforts through [United's Global Mental Health Action Network's Working Group on Decriminalisation of Suicide](#).



**We should all strive for a world where people are not judged by their mental health. The decriminalisation of attempted suicide is the first step in ensuring the rights of vulnerable individuals are upheld.**

**IASP President, Professor Rory O'Connor**



## COVID-19 IMPACT ON SUICIDE PREVENTION WORK

The COVID-19 pandemic has impacted all aspects of people's lives, relationships, health and well-being, the world over, and continued to do so throughout 2021.

### Presidents Special Task Force

In April 2020 the Executive Committee (EC) established a Presidential Special Task Force on COVID-19 (PSTFC) with the overarching aim of the PSTFC to develop IASP's strategic response to the potential global impact of the COVID-19 pandemic on suicidal behaviour. The resulting protocol (delivered to the EC at the end of 2020) was published in 2021 and disseminated to the IASP network: members, supporters and partner and collaborative organisations around the globe.

[The IASP Protocol for Responding to Global and Cross-National Public Health Emergencies and Natural Disasters](#) was informed and developed on what we learnt through 2020 from COVID-19 and will be continued to be informed by the challenges encountered in the impact of this pandemic.

In April 2021, the Executive Committee extended the remit of the PSTFC to include global emergencies, and the task force became the Presidential Special Task Force on Global Emergencies (PSTFGE). Throughout the rest of 2021 the PSTFGE:

- Continued to offer advice to the Executive Committee on the ongoing challenges of COVID-19
- Prepared an Operational Definition of Scope, setting out its understanding of key terms ("public health emergency", "natural disaster", "global" and "suicidal behaviour")
- Produced a two-year operational plan, outlining key targets and strategies during the period of the current Executive Committee (2021-2023).
- Developed a proposal to undertake an evaluation of the implementation (process) and outcomes of IASP's response to COVID-19 during the first two years of the pandemic.
- Strengthened collaboration with the International COVID-19 Suicide Prevention Research Collaboration (ICSPRC).

### IASP Resource Centre

IASP continued through 2021 to host the Covid-19 Resource Centre, providing information and links to resources and publications related to the pandemic and suicide and a register of suicide and Covid-19 related studies.

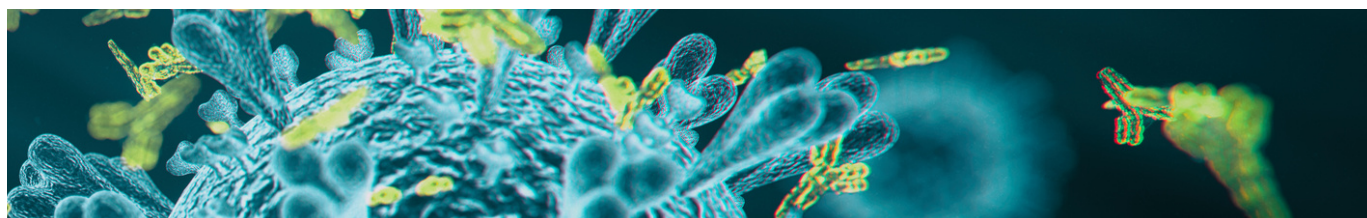
## ICSPRC

IASP continued in 2021 to support the International COVID-19 Suicide Prevention Research Collaboration (ICSPRC) in their aim of enhancing good quality collaborative research on the prevention and management of suicide and suicidal behaviours in relation to the COVID-19 pandemic.

The collaboration grew to over 120 researchers from 41 countries: Australia; Austria; Bangladesh; Belgium; Brazil; Canada; China; Czech Republic; Denmark; Ecuador; England; France; Ghana; Germany; Hong Kong; India; Iran; Ireland; Israel; Japan; Kenya; Malaysia; Mexico; Netherlands; New Zealand; Nigeria; Northern Ireland; Norway; Pakistan; Peru; Russia; Scotland; Slovenia; South Africa; Spain; Sri Lanka; Sweden; Taiwan; Wales; Uganda; USA.

### The ICSPRC and their members have:

- Collaborated on a study identifying data on the early impact of COVID-19 resulting in the Lancet article: [Suicide trends in the early months of the COVID-19 pandemic: an interrupted time-series analysis of preliminary data from 21 countries](#).
- Hosted regular closed webinars on suicide and COVID-19 inviting experts across the globe to present and discuss their findings.
- Provided guidance on responsible reporting of suicide by researchers [Researchers must contribute to responsible reporting of suicide](#) (See [YouTube Video](#) also)
- Presented the Keynote Session on COVID-19 at the IASP World Congress.
- Presented the ICSPRC Symposium on self-harm trend during Covid-19 at the IASP World Congress.
- Hosted a panel at the IASP World Congress: The Impact of COVID-19 on suicide rates around the world: surveillance and prevention priorities in the coming months.



## THE WORLD HEALTH ASSEMBLY

The World Health Assembly each year provides the opportunity to input into proceedings via an official statements as a non-state-actor working in official relations with the World Health Organisation. As the main governing body of the WHO comprising of 194 Member States, every year, delegates from all Member States come together to agree on the Organization's priorities and policies.

The theme for this WHA74 was "Ending this pandemic, preventing the next: building together a healthier, safer and fairer world" to account for the significant challenges that we have faced globally and to rebuild and learn from the COVID-19 Pandemic.

The agenda included the opportunity to discuss 'Mental Health preparedness for and response to the COVID-19 pandemic'; giving IASP the opportunity to urge member states to remain vigilant and reactive to changes in suicide trends. In addition, the World Health Organisation approved an updated Mental Health Action Plan for 2021-2030 with additional indicators and objectives related to suicide.

IASP's [statement](#) to the WHA 74 aimed to ensure suicide prevention remained a key component of efforts to reform and improve mental health policies worldwide and called upon member states to action strategic plans to meet these targets within the Mental Health Action Plan by 2030.



## COMMUNITY ACTION

The 5-year multi-level programme in Kikuyu and Mutuini Kenya, in collaboration with Befrienders Kenya, continues, despite having experienced some delays due to COVID-19. The suicide prevention programme encompasses awareness raising, gatekeeper training, community support, and primary health care training.

Mentorship and support also continued in 2021 with a number of initiatives and new connections. In collaboration, IASP hosted a [webinar](#) in partnership with [Intervention, the Journal of Mental Health and Psychosocial Support In Conflict Affected Settings](#), focusing on the Journal's latest special edition looking at suicide prevention and response and highlighting different aspects of suicide prevention and response among refugee and other conflict-affected populations in a variety of settings.

IASP also hosted a special closed webinar session on suicide prevention in the West Bank and Gaza with the aim of exploring current research and programmes, the development of a strategic suicide prevention plan by Médecins du Monde Switzerland, the Ministry of Health (West Bank) and other stakeholders. Chaired by Professor Murad Khan, the panel included a specialist in MHPSS, representatives from the Palestinian Ministry of Health, a field-based researchers specialising in suicide prevention and the COVID-19 response in the region and, a clinical psychologist working within the Gaza Strip.



## SPECIAL INTEREST GROUPS

IASP Special Interest Groups offer the opportunity for our community of members, researchers, professionals, lay people and volunteers to focus deeply on a specific aspect of suicide and suicide prevention. The Early Career Group (ECG) provides a forum where group members can network with peers and experts alike, engaging in international research and interventions in the area of suicide prevention.

Despite the limitations of many having to present virtually, many Special Interest Groups presented through symposiums and panels at the IASP 31st World Congress including but not limited to Postvention, Workplace and Boys and Men Special Interest Groups.

Furthermore, the new LGBTQIA+ Special Interest Group was launched with a symposium at the IASP 31st World Congress.



## COMMUNICATIONS; GLOBAL, COMMUNITY, TRAINING & EDUCATION

The diverse nature of the IASP membership and supporters makes it necessary to deliver a cohesive message in a carefully considered direction. Raising awareness of suicide and its prevention is vital in reducing stigma and encouraging our message of 'creating hope through action'. IASP's role requires the transference of evidence-based research and practice into systematic knowledge, skills, and experience at a global level. IASP provides training and education through its conference programme and specific training opportunities.

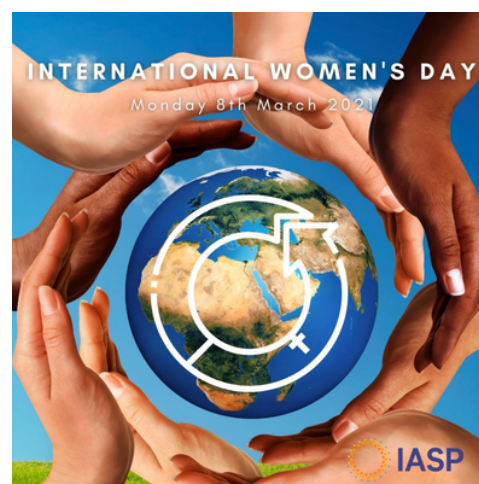
IASP undertook an organisation rebranding in 2021 with a new IASP logo and website. Communications has continued to grow to include broader dissemination across social platforms, news items within the IASP website and the introduction of IASP podcast episodes entitled 'Congress Conversations'.

Raising awareness and promoting suicide prevention over wider global awareness days is also an opportunity to ensure the issue of suicide is raised and discussed. IASP dispersed related messaging online over a number of awareness days, including but not limited to; World Day of Social Justice, International Women's Day and International Survivors of Suicide Loss Day.

### MENTUPP

IASP is one of the 17 partners of MENTUPP – Mental Health Promotion and Intervention in Occupational Settings, a 4-year EU-funded project, and supports the European Alliance Against Depression in the communication and dissemination tasks of the project. The primary aim of MENTUPP is to improve mental health in the workplace by developing, implementing, and evaluating a multilevel intervention called the MENTUPP Hub, targeting mental health difficulties in Small and Medium Enterprises (SMEs) in the construction, health and ICT sectors. Its secondary aim is to reduce depression and suicidal behaviour.

To ensure that the intervention is fit-for-purpose and feasible, a Pilot Study was conducted in eight SMEs from May 2021 to November 2021, including a Delphi study to collect qualitative data into barriers and facilitators of mental health interventions in workplace settings. The Pilot Study was followed by a 6-month Evaluation and Optimisation Phase, where the MENTUPP Hub was optimised based on feedback received and outcomes of the Pilot.



## CONFERENCES

### 31st World Congress

The 31st World Congress, encompassed a truly international, full and diverse line-up with over 350 presentations from all over the globe. The IASP World Congress is the primary global collaborative opportunity for expert thinking related to suicide and suicide prevention. With over 1,000 attendees, the virtual congress offered an entirely inclusive event allowing participants to benefit from all congress content over time, with presentations for 12 months post-congress to all registered delegates.

Keynote sessions were topic led and included: Suicide in Boys & Men, Lived Experience, Female Suicide and Self-Harm, Workplace, Loneliness and Disconnectedness, COVID-19, Children and Adolescents, Community and Implementation.

In addition to the line-up of incredible Plenary and Keynote Speakers were also delighted to have a very special guest speakers Prime Minister Scott Morrison and the Hon. Julia Gillard AC, who joined us for the Welcome Guest Session. Approximately 190 bursaries were offered and accepted with participation from diverse community groups such as CALD, Indigenous, LGBTQI+, Regional/Remote, Youth, Lived Experience and Carers.

Over 200 individuals were able to attend from lower and middle income countries through bursaries provided by IASP.

Early career researchers provided a daily blog throughout the event and IASP launched the Congress Conversations podcast episodes to encourage wider discussions around content within the event.

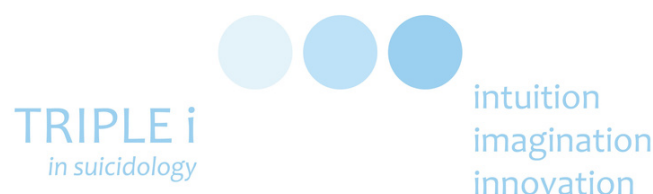


### Triple i

Due to the epidemiological situation regarding the spread of the COVID-19 virus the 2021 TRIPLE i conference was held virtually from 25 to 27 May 2021. TRIPLE i is an international annual conference organised by the Slovene Centre for Suicide Research (Andrej Marušič Institute, University of Primorska, Slovenia) in memory of the late Prof. Andrej Marušič (around the time of his birthday) with the aim of promoting intuition, imagination and innovation in research and prevention of suicide and suicidal behaviour. The 12th Triple i Virtual Conference, was a collaborative event by Slovene Centre for Suicide Research, De Leo Fund Onlus and the International Association for Suicide Prevention.

After the success of the 2020 Virtual TRIPLE i conference the Partners pulled together a truly international group of speakers with a full selection of distinguished suicidologists and early career researchers.

The programme included topics of suicide research and clinical work with suicidal patients. Thus, theory, research, prevention, and interventions in suicidology was addressed. Each lecture was followed by a discussion in which the participants were invited to share their views. Existing difficulties in both research and clinical work were specifically addressed.



## WORLD SUICIDE PREVENTION DAY

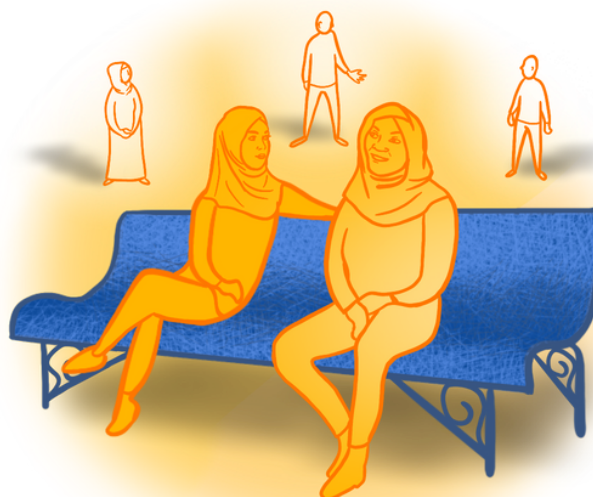
This has been an important year for awareness around suicide prevention as we have seen increasing visibility, events, action and understanding as September becomes a well-known time of year on the global mental health agenda. 2021 saw the start of the new theme of 'Creating Hope Through Action'; a well considered and timely call to urge people towards action; that we should all feel equipped, supported, and inspired to act as we try to prevent more suicides around the world.

Our ambitious aim within this new three-year theme is to 'create a social movement of preventative action'. World Suicide Prevention Day 2021 saw an online reach of 180 million along with over 125 registered events taking place globally. Over 33K users visited the WSPD pages online to access messaging and resources and furthermore, a key indicator for included a Proclamation from the White House by US President Joe Biden with IASP messaging reflected in the wording.

## WORLD MENTAL HEALTH DAY

World Mental Health Day provides us with the opportunity to raise awareness about global mental health concerns and to urge for renewed action. The theme, "Mental Health in an Unequal World" highlighted the global differences and challenges faced in ensuring mental health care for all.

IASP continued to urge for action over World Mental Health Day and to highlight where more work can be done. Promoting the decriminalisation of suicide campaign, the renewed action within the WHO's Comprehensive Mental Health Action Plan and through the collaborative webinar hosted with Intervention, IASP urged for a renewed commitment for the promotion, provision and protection of mental health care to ensure that every individual in need of help can access adequate support.





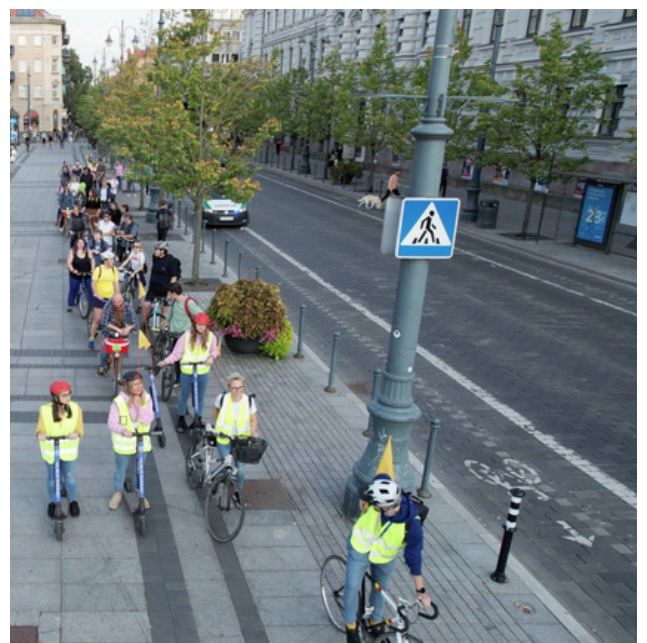
## CYCLE AROUND THE GLOBE

Between World Suicide Prevention Day (10 September) and World Mental Health Day (10 October), over 2,000 people worldwide cycled an incredible 180,000km to break the stigma surrounding suicide — That's equivalent to 4.5 times around the globe!

Despite global pandemic restrictions, over 110 teams took on the challenge this year, including the CCC Foundation, Vilnius Sveikiau, Samaritans Mumbai, GoPro Employees for a Cause, CAF Montréal-St-Jean and LIKAS — TUPV. The team from Teléfono de la Esperanza came in at the top of the leaderboard having cycled an amazing 66,112.8km, followed closely by Team Verizon. Verizon returned to support the campaign this year by engaging over 500 of their employees from across the world to participate as part of their suicide awareness month activities.

As part of their World Suicide Prevention Day activities, Kutch Suicide Prevention Forum joined together with the Om Foundation and White Eagle Cycle Group. Each day, 50 cyclists travelled to different villages across India, putting up suicide prevention posters in public places including temples, detailing suicide intervention, and including a mental health helpline.

Each year, IASP invites the global community to come together to cycle for suicide prevention for free, to ensure anyone worldwide can get involved. This year over \$18,000 was raised by participants towards global suicide prevention efforts.





## MEMBERSHIP AND SIGS

Membership is the foundation of IASP, and it remains the focus for all IASP deliverables. 2021 saw our membership rise to a total of 612 members, 94 of whom were new. Thanks to the energy and enthusiasm of our members, the Special Interest Groups continue to flourish. These multi-disciplinary networks are a vital part of IASP, as members pursue a shared interest in a specific suicide prevention topic with a view to making a substantive contribution to improved understanding, practice or policy relating to that topic.

## EARLY CAREER GROUP

The Early Career Group (ECG) provides a forum for members to network with peers and experts alike, engaging in international research and interventions in the area of suicide prevention.

Our ECG Co-Chairs have worked throughout the year to provide a variety of platforms for global connection for our young researchers.

## THE CENTRAL ADMINISTRATIVE OFFICE

The Central Administrative Office continues to evolve and grow to meet the increasing demand of the organisation. The Central Administrative Office (CAO) worked relentlessly in providing a quality service to the membership and continued to work in a structured home-based environment. The success of the organisation during this year has been in large due to the enthusiastic team of dedicated staff. There are currently 9 members of staff working the equivalent of 4.3 full time.

Member Type	Zone 1	Zone 2	Zone 3	Zone 4
Individual	335	39	27	3
Organisation	89	10	5	2
Advanced Organisation	10	-	1	-
Student	37	2	2	1
Volunteer	3	-	-	-
Retiree	11	1	-	-
Associate	6	7	5	5
Associate Organisation	3	1	3	2
Honorary	1	-	-	-
AE	1	-	-	-
612	496	60	43	13



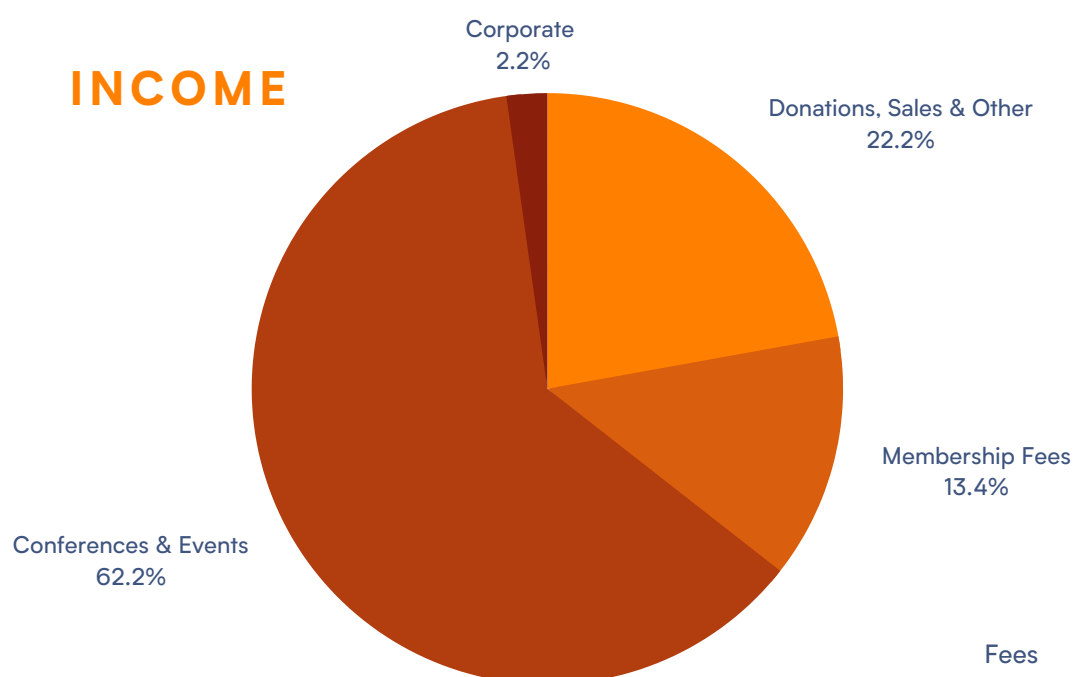
## RESOURCES

<b>2021 INCOME</b>	<b>\$545,771</b>
<b>2021 EXPENDITURE</b>	<b>\$342,156</b>
<b>2021 ASSETS</b>	<b>\$683,933</b>

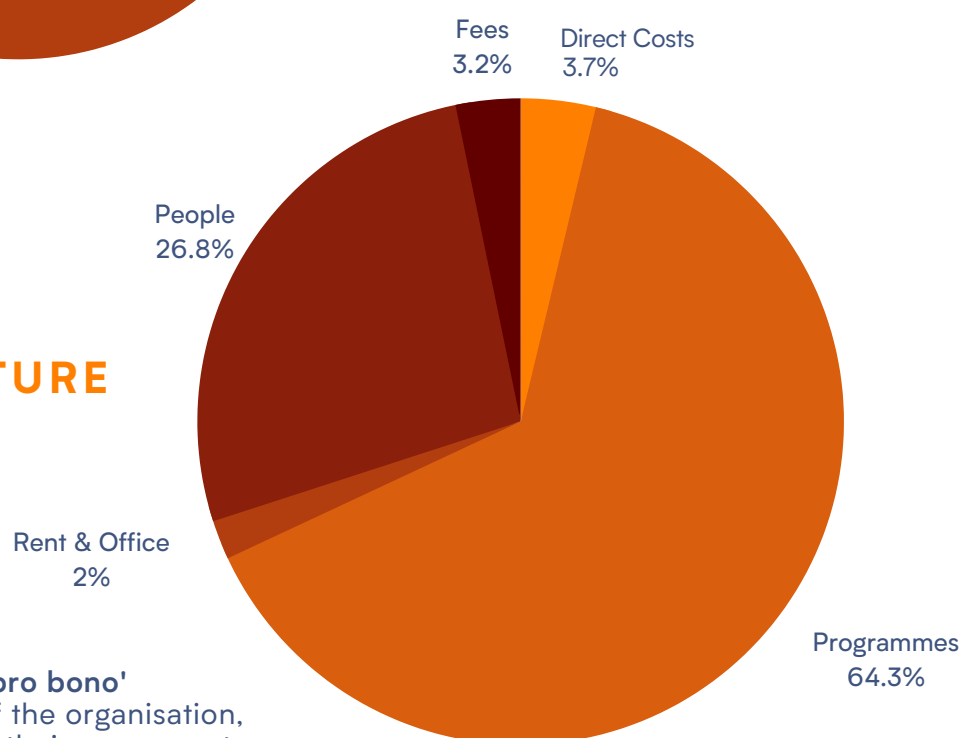
The Association was led by a global Board of experts (non-fee earning) located in 8 countries and democratically representative of the working membership located in over 65 nations.

IASP is managed by a dedicated team (CAO) located in 5 countries that incurs minimal office expenditure as they are located home based or attached to a local institute.

## INCOME



## EXPENDITURE



### Figures exclude 'in kind' and 'pro bono'

In kind donations – members of the organisation, especially the Board, cover their own costs thereby donating their expenses. Pro bono – a team of experts (communications, strategists, academics) provide services without fees.

## ACKNOWLEDGEMENTS

Our Funders: Lundbeck, the Facebook community, Cycle Around the Globe participants and other donations.

IASP World Congress Sponsors: We are very grateful to Congress partners; Australian Institute for Suicide Research and Prevention, the National Mental Health Commission and Movember alongside major sponsors LivingWorks, Tourism and Events Queensland, The Trevor Project, Movember, Orygen, BeyondBlue and The Gold Coast Convention Centre in providing this funding.

Our Pro-Bono Consultants, our trainers, organisational consultants, mentors and past presidents who continue to give their professional time and knowledge.

The IASP Trustees, who give their time and leadership in kind.

The Central Administrative Office Team, who work in tandem from across four geographical regions.

# CONTACT

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