

# Equality & Poverty Impact Assessment 00418 (Version 1)

## SECTION ONE: ESSENTIAL INFORMATION

<b>Service &amp; Division:</b>	Social Work Adult Services None	<b>Lead Officer Name:</b>	James Alan Paterson
		<b>Team:</b>	Falkirk HSCP
		<b>Tel:</b>	07305960805
		<b>Email:</b>	jamesa.paterson@falkirk.gov.uk
<b>Proposal:</b>	<p><b>The Falkirk Suicide Prevention Fund</b></p> <p>The Falkirk Suicide Prevention Fund aims to provide support for projects that target suicide prevention in Falkirk. The funding has been commissioned by representatives from health and social care and third sector who are part of a Mental Health &amp; Wellbeing Planning Group.</p> <p>Since 2014, published data highlights that suicide rates have been rising. Based on this data, Falkirk has the fifth highest suicide rate in Scotland. There is also concern about the impact that the Covid pandemic and the cost of living crisis has on mental health and wellbeing. At this point, the information that we have to support this is anecdotal. Figures for 2022 are yet to be published and will be reviewed when available. The fund will align with the Scottish Government's suicide prevention strategy 'Creating Hope Together' which was published in September 2022.</p> <p>The aim of the fund is to develop and increase the capacity of services that support suicide prevention in Falkirk, and support the implementation of priorities addressed in the new national suicide prevention strategy Creating Hope Together. The outcomes of the fund are:</p>	<b>Reference No:</b>	

- Reduce the rate of suicide in Falkirk
- Reduce the rate of self-harm in Falkirk
- Increase access to services
- Strengthening Falkirk's awareness of and responsiveness to suicide prevention
- Promote and provide effective, timely and compassionate support that promotes well-being and recovery
- Support for individuals and families that have been impacted by suicide
- Services are informed by lived experience

To achieve these outcomes, four programme priorities are:

- Suicide Prevention
- Self-harm Prevention
- Suicide Awareness: To encourage others to understand and talk about suicide
- Postvention Support: Support for people that have been impacted by suicide

Applicants must support at least one of the priorities or all four. Projects should provide support for all ages but we would particularly welcome projects that focus on areas of high deprivation/people with lower socio-economic backgrounds. New projects can also apply but added value will be given to existing projects that have increased capacity due to demand. As funds are limited, applications will be accepted for up to £25,000 single year/one-off costs. This criterion will be reviewed regularly in relation to demand on

programme. Applications for the fund will be on-going with no deadline set, however applications will close when the recurring budget has been exhausted. It is proposed that the fund will be launched with immediate effect following SLT approval.

As a condition of receiving an award, applicants are required to monitor and report on how the funding has been spent and the impact that it has had. Monitoring will include what difference the funding has made to the community and the progress made in achieving the outcomes set in their application proposal. Funding proposals will be assessed by the Suicide Prevention sub-group who report to the Mental health and Wellbeing Planning group. Proposals assessments is apart of the case workload for the sub-group and is in line with Partnership Funding reviewing process. The panel will make funding recommendations and Falkirk HSCP Senior Leadership Team will make final award decisions.

<b>What is the Proposal?</b>	<b>Budget &amp; Other Financial Decision</b>	<b>Policy (New or Change)</b>	<b>HR Policy &amp; Practice</b>	<b>Change to Service Delivery / Service Design</b>
	Yes	Yes	No	No
<b>Who does the Proposal affect?</b>	<b>Service Users</b>	<b>Members of the Public</b>	<b>Employees</b>	<b>Job Applicants</b>
	Yes	Yes	No	No
<b>Other, please specify:</b>				

<b>Identify the main aims and projected outcome of this proposal (please add date of each update):</b>	
01/03/2023	The Suicide Prevention Fund Aims to develop community based services and projects that will increase the capacity of services available that support Suicide Prevention in Falkirk
01/03/2023	<ul style="list-style-type: none"> <li>• Reduce the rate of suicide in Falkirk</li> <li>• Reduce the rate of self-harm in Falkirk</li> <li>• Increase access to services</li> </ul>
01/03/2023	<ul style="list-style-type: none"> <li>• Increase access to services that support suicide prevention</li> </ul>

<b>Identify the main aims and projected outcome of this proposal (please add date of each update):</b>	
01/03/2023	<ul style="list-style-type: none"> <li>•Strengthening Falkirk's awareness of and responsiveness to suicide prevention</li> <li>•Promote and provide effective, timely and compassionate support that promotes well-being and recovery</li> </ul>
01/03/2023	<ul style="list-style-type: none"> <li>• Support for individuals and families that have been impacted by suicide</li> <li>• Services are informed by lived experience</li> </ul>

## SECTION TWO: FINANCIAL INFORMATION

For budget changes ONLY please include information below:			Benchmark, e.g. Scottish Average
Current spend on this service (£'0000s)	Total:	£23,800 (recurring) £92,890 (non-recurring)	<p>The benchmark set for projects to apply for funding is to ensure they support one of the four priorities identified through the commissioning group:</p> <ul style="list-style-type: none"> <li>- Suicide Prevention</li> <li>- Self-harm Prevention</li> <li>- Suicide Awareness: To encourage others to understand and talk about suicide</li> <li>- Postvention Support: Support for people that have been impacted by suicide</li> </ul> <p>They must also provide support for at least one of the four risk factors identified by Health Improvement Scotland.</p>
Reduction to this service budget (£'0000s)	Per Annum:		
Increase to this service budget (£'0000s)	Per Annum:		
If this is a change to a charge or concession please complete.	Current Annual Income Total:		
	Expected Annual Income Total:		
If this is a budget decision, when will the saving be achieved?	Start Date:		
	End Date (if any):		

**SECTION THREE: EVIDENCE**

Please include any evidence or relevant information that has influenced the decisions contained in this EPIA. (This could include demographic profiles; audits; research; health needs assessments; national guidance or legislative requirements and how this relates to the protected characteristic groups.)

**A - Quantitative Evidence**

This is evidence which is numerical and should include the number people who use the service and the number of people from the protected characteristic groups who might be affected by changes to the service.

FDAMH are experiencing a 48% increase in the number of people being referred to their service. Through initial assessments they have found that one in four of their clients experience "overwhelming suicidal thoughts," previously one in five (taken from document provided by FDAMH).

From a [national perspective](#), under three quarters of all suicides in Scotland are male and almost 46% of all suicides were aged between 35-54. The National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH) Annual Report published in 2022 found that 31% of people who died by suicide in Scotland had contacted mental health services prior to their death. In Falkirk, the Strategic Needs Assessment 2023 published that 77.7% had been in contact with one or more health services in the period before their death. 88% of people were of working age and two thirds were in employment.

The [National Strategy for Suicide Prevention](#) stated that from 2011 to 2020 probable suicides were the leading cause of death among 5-24 year olds and accounted for a quarter of all deaths in this age range. It also said that children and young people were found to be less likely to have had contact with healthcare services in the period before their death. Local statistics corroborates with this because the Strategic Needs Assessment stated that in Falkirk 21.1% of people had no previous contact with health services in the period before their death. The Strategic Needs Assessment also stated that In Falkirk between 2011 to 2019 the suicide rate for men was nearly 20% higher than female.

Although limited up to date data could be found for Scotland around ethnicity and disability, inequalities in suicides within those protected characteristic's have been analysed for England and Wales from 2011 to 2021 by the [Office of National Statistics](#). They found that death by suicide is much higher among disabled people than those who do not have disabilities, with the highest rate in disabled men from ages 40 to 50. Suicide rates were also high for mixed/multiple ethnic groups for both men and women. People that had reported belonging to religious groups generally had lower rates of suicide compared to those who reported as having no religion. Rates though were higher in buddhists and "other" religious groups.

In 2017 the [UK Government](#) reported for England and Wales on self-harm and suicidal thoughts and attempts. 13.1% of Participants from Asian ethnicity reported having suicidal thoughts, 5.3% had suicide attempts and 5.5% had self-harmed. From black ethnicity, 20.7% had suicidal thoughts, 6.1% had suicide attempts and 4.8% had self-harmed.

[LGBT Young People Report 2022](#) published statistics on mental health conditions and related behaviours from its 1279 participants aged between 13 and 25. 77% of them said they had experienced anxiety and 54% said they had experienced depression. 50% said they experienced suicidal thoughts or actions and 43% had self-harmed. Stonewall UK report from [2018](#) states one in seven LGBT people have avoided treatment for fear of discrimination because they are LGBT. In 2018, 402 LGBT and transgender people aged between 11-19 took part in [Is Scotland Fairer Survey](#) and said that bullying had resulted in self-harm and attempted suicide. 96% said they had harmed themselves and 43% said they had attempted to take their own life.

**B - Qualitative Evidence** This is data which describes the effect or impact of a change on a group of people, e.g. some information provided as part of performance reporting.

**Social - case studies; personal / group feedback / other**

Since 2014, published data highlights that suicide rates have been rising. Based on this data, [Falkirk has the fifth highest suicide rate in Scotland](#). There is also concern about the impact that the Covid pandemic and the cost-of-living crisis has had on mental health and wellbeing. At this point, the information that we have to support this is anecdotal. Figures for 2022 are yet to be published and will be reviewed when available. The Scottish Government published their suicide prevention strategy 'Creating Hope Together' in September 2022 and this fund will aim to align projects with the priorities that it has set out.

Taking the data and national strategy into consideration, four priorities have been set out within the fund and projects must support at least one of them. These are 1) Suicide Prevention; 2) Self-harm prevention; 3) Suicide Awareness: to encourage others to understand and talk about suicide 4) Postvention Support: Support for people that have been impacted by suicide.

Projects must also support at least one of the four suicide risk factors identified by Health Improvement Scotland. These are: 1) Pressures within communities including stigma, poor social cohesion, deprivation and lack of safety; 2) Pressures within Scottish society including inappropriate reporting and representation of suicidal behaviour by the media; 3) The quality of response from services including insufficient focus on the prevention, Identification and assessment of needs; 4) Pressure on individuals including family breakdown, low educational qualifications, insecurity of employment and alcohol and substance use.

Feedback received from stakeholders that were interested in accruing funding highlighted areas of concern they had for certain protected characteristics and where support could be targeted by projects, in particular for ethnicity and suicide being a taboo subject within certain religions, sex and age. Further research will take place against these specific characteristics based on the feedback received.

**Best Judgement:**

<b>Has best judgement been used in place of data/research/evidence?</b>	Yes
<b>Who provided the best judgement and what was this based on?</b>	Data research and evidence has been used for best judgment, however best judgement was also sought from experts within the field of suicide prevention. Their thoughts for the fund in terms of what outcomes it should explore and evidence they could provide from the front line in suicide prevention was acknowledged and implemented.
<b>What gaps in data / information were identified?</b>	Gaps in data and information from a Scotland perspective were identified for ethnicity and disability, therefore evidence from the rest of the UK has been used. Up to date statistics for suicide in Falkirk and Scotland have yet to be published as well, meaning there is a gap in understanding the current trend of suicide rates to determine the current situation for suicide.

<b>Is further research necessary?</b>	No
<b>If NO, please state why.</b>	From data that is available all evidence that could be found has been explored.



**SECTION FOUR: ENGAGEMENT**

Engagement with individuals or organisations affected by the policy or proposal must take place

<b>Has the proposal / policy / project been subject to engagement or consultation with service users taking into account their protected characteristics and socio-economic status?</b>	Yes	
<b>If YES, please state who was engagement with.</b>	Engagement occurred with representatives from health and social care services and third sector who shared their thoughts based on the views from services and service users.	
<b>If NO engagement has been conducted, please state why.</b>		
<b>How was the engagement carried out?</b>	<b>What were the results from the engagement? Please list...</b>	
Focus Group	No	
Survey	No	
Display / Exhibitions	No	
User Panels	No	
Public Event	No	
<b>Other: please specify</b>	Engagement took place with the Mental Health & Wellbeing Planning Group who are representatives from health and social care and third sector. Engagement with this group resulted in feedback below: <ul style="list-style-type: none"> <li>- An increase in people using services that display suicidal thoughts, especially people at crisis point.</li> <li>- Increase in young people displaying suicidal thoughts.</li> <li>- An increase in demand on services.</li> <li>- Long waiting lists for assessment meaning condition of individual worsens before support is available.</li> <li>- Lack of effective mental health and suicide training for staff and members of the public.</li> <li>- Third Sector organisations having an increase in referrals and struggling to provide the extra support required.</li> <li>- Third sector organisations unsure where to refer people with suicidal thoughts to.</li> </ul>	
<b>Has the proposal / policy/ project been reviewed / changed as a result of the engagement?</b>	No	
<b>Have the results of the engagement been fed back to the consultees?</b>	Yes	

**Is further engagement recommended?**

No

## SECTION FIVE: ASSESSING THE IMPACT

**Equality Protected Characteristics:** What will the impact of implementing this proposal be on people who share characteristics protected by the Equality Act 2010 or are likely to be affected by the proposal / policy / project? This section allows you to consider other impacts, e.g. poverty, health inequalities, community justice, carers etc.

Protected Characteristic	Neutral Impact	Positive Impact	Negative Impact	Please provide evidence of the impact on this protected characteristic.
<b>Age</b>		✓		Criteria for the fund is that projects should provide support for people of all ages. However, from research highlighted in section 3 probable suicide was the highest rate of death between 5 and 24 year olds. On this basis it is anticipated this will have a positive impact for people of a young age. However this will be kept under regular review.
<b>Disability</b>		✓		Information found has highlighted a recent rise in England and Wales for suicide in people with disabilities, particularly men between 40 and 50. Therefore it is anticipated that this project can support those with disability meaning that a positive impact should be the outcome for this protected characteristic. This will be kept under review.
<b>Sex</b>		✓		It is anticipated that this could have a positive impact for men as they experience a higher rate of suicide than women in both Scotland and Falkirk. It is anticipated that the fund will provide projects that men will feel comfortable accessing for all ages. Quarterly reports by projects will identify if they are accessing and receiving the support, as a consequence this impact will be kept under regular review.
<b>Ethnicity</b>		✓		Based on feedback from stakeholders and statistics from England and Wales around higher rates in suicide for mixed/ethnic groups and certain religious groups there appears to be a need for suicide prevention in these particular areas. It is expected as a result of this there will be a positive impact for this characteristic which will be reviewed regularly.

**Public Sector Equality Duty: Scottish Public Authorities must have 'due regard' to the need to eliminate unlawful discrimination, advance quality of opportunity and foster good relations. Scottish specific duties include:**

				experience high rates. From having discussions with stakeholders it could be determined that the low rates are based on suicides being a taboo subject for certain religions. Also, even though reports are low people within these area do still have experience of suicide. Therefore it is anticipated that this fund could have a positive impact on this protected characteristic by providing support and advice around the subject. To determine if it has had a positive impact or any impact at all, it will be regularly monitored and reviewed.
<b>Sexual Orientation</b>		✓		It is anticipated that this fund will provide projects within the community that people will feel comfortable to use and not be discriminated against based on their sexual orientation, meaning they will use the service and result in a positive impact which will be reviewed through quarterly reports.
<b>Transgender</b>		✓		It is anticipated that this will have a positive impact on transgender people as people at a young age report self-harming and suicide attempts. This project prioritises both of these factors which will mean a positive impact should come for them by finding a service that will target either or both of these factors.
<b>Pregnancy / Maternity</b>	✓			Due to a lack of information being found regarding this protected characteristic it is uncertain if there will be a positive or negative impact, therefore the impact of this assessment is neutral. Projects will submit quarterly reports about their project and if information regarding the characteristic is provided then this could be changed to having a positive impact.
<b>Marriage / Civil Partnership</b>	✓			Due to a lack of information being found regarding this protected characteristic it is uncertain if there will be a positive or negative impact, therefore the impact of this assessment is neutral. Projects will submit quarterly reports about their project and if information regarding the characteristic is provided then this could be changed to having a positive impact.
<b>Poverty</b>		✓		Projects that focus on areas of high deprivation/ people with lower socio-economic backgrounds would be particularly welcomed to apply for funding. This would ensure support for suicide prevention is available within these areas as poverty is a risk factor for suicide and people from lower socio-economic backgrounds are more likely to suffer from suicidal thoughts.
<b>Care Experienced</b>				

Other, health, community justice, carers etc.		✓		This fund could have a positive impact on on prison liberations with further support being provided for them depending on the type of project that requests funding.
Risk (Identify other risks associated with this change)				
		<b>Evidence of Due Regard</b>		
Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):				
Advance Equality of Opportunity:				
Foster Good Relations (promoting understanding and reducing prejudice):				

## SECTION SIX: PARTNERS / OTHER STAKEHOLDERS

Which sectors are likely to have an interest in or be affected by the proposal / policy / project?		Describe the interest / affect.
<b>Business</b>	No	
<b>Councils</b>	Yes	Funding proposals can be accepted from statutory organisations to add value to an existing service. This will affect them as it will support increased capacity within their organisation which would mean a higher workload and greater increase on the demand for the service.
<b>Education Sector</b>	Yes	The education sector will have interest and be affected by the proposal because there is a possibility that projects supported by the fund could be involved in schools and with students. The education sector could then feed back data on young people to demonstrate the impact projects funded by the proposal are having on students.
<b>Fire</b>	Yes	The fire service would have interest and be impacted by the proposal since outcomes for the fund are to reduce rates of suicide and self-harm prevention. Projects in the fund will support people and prevent them from reaching a point of crisis which means the resource of emergency services responding to someone at crisis point could be reduced.
<b>NHS</b>	Yes	Funding proposals can be accepted from statutory organisations to add value to an existing service. The NHS would also have interest and be affected by the proposal because since outcomes for the fund are to reduce rates of suicide and self-harm prevention. This would reduce their resources required in responding to calls for people who are displaying suicidal thoughts and ideation.
<b>Integration Joint Board</b>	Yes	The Clinical Care Governance Committee, a sub-group of the IJB, require regular high level reports on suicide figures within the Falkirk area. They will have interest in the proposal as they should be kept up to date on its progress and the projects supported by the fund. Reports from projects can also provide evidence that could be involved within their reports.
<b>Police</b>	Yes	Police would have interest and be affected by the proposal since outcomes for the fund are to reduce rates of suicide and self-harm prevention. This would reduce their resources, time and involvement that is required for responding to someone at crisis point displaying suicidal thoughts and ideation.
<b>Third Sector</b>	Yes	Funding proposals can be accepted from community and third sector groups. This will affect them as it will support increased capacity within charities which would mean a higher workload and greater increase on the demand for the service they provide. It means they may require time to implement the project and service to ensure they will be able to provide the service they want to.

**Other(s): please list and describe the nature of the relationship / impact.**

## SECTION SEVEN: ACTION PLANNING

**Mitigating Actions:** If you have identified impacts on protected characteristic groups in Section 5 please summarise these in the table below detailing the actions you are taking to mitigate or support this impact. If you are not taking any action to support or mitigate the impact you should complete the No Mitigating Actions section below instead.

Identified Impact	To Who	Action(s)	Lead Officer	Evaluation and Review Date	Strategic Reference to Corporate Plan / Service Plan / Quality Outcomes

### No Mitigating Actions

**Please explain why you do not need to take any action to mitigate or support the impact of your proposals.**

It is anticipated that there will be no negative impacts on protected characteristic therefore no mitigating actions have been reported. It is expected that organisations supported by this fund will mitigate or support potential impacts on protected characteristics within their project delivery. As part of the governance process, organisations must submit monitoring and evaluation returns to evidence how they are having an impact on their target audience.

**Are actions being reported to Members?**

No

**If yes when and how ?**



**SECTION EIGHT: ASSESSMENT OUTCOME**

Only one of following statements best matches your assessment of this proposal / policy / project. Please select one and provide your reasons.

No major change required	Yes	This is a new proposal and we anticipate it having a positive or neutral impact, therefore there are no changes required.
The proposal has to be adjusted to reduce impact on protected characteristic groups	No	
Continue with the proposal but it is not possible to remove all the risk to protected characteristic groups	No	
Stop the proposal as it is potentially in breach of equality legislation	No	

**SECTION NINE: LEAD OFFICER SIGN OFF**

Lead Officer:

Signature:	<i>James Alan Paterson</i>	Date:	14/11/2023
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**SECTION TEN: EPIA TASK GROUP ONLY**

<b>OVERALL ASSESSMENT OF EPIA:</b> Has the EPIA demonstrated the use of data, appropriate engagement, identified mitigating actions as well as ownership and appropriate review of actions to confidently demonstrate compliance with the general and public sector equality duties?	Yes / No
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<b>ASSESSMENT FINDINGS</b>		
If YES, use this box to highlight evidence in support of the assessment of the EPIA		
If NO, use this box to highlight actions needed to improve the EPIA		

<b>Where adverse impact on diverse communities has been identified and it is intended to continue with the proposal / policy / project, has justification for continuing <u>without making changes been made</u>?</b>	Yes / No	If YES, please describe:
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**LEVEL OF IMPACT: The EPIA Task Group has agreed the following level of impact on the protected characteristic groups highlighted within the EPIA**

LEVEL	Yes / No	COMMENTS
HIGH	Yes / No	
MEDIUM	Yes / No	
LOW	Yes / No	

**SECTION ELEVEN: CHIEF OFFICER SIGN OFF**

<b>Director / Head of Service:</b>			
<b>Signature:</b>	<i>Suzanne Thomson</i>	<b>Date:</b>	14/11/2023