

This is a repository copy of Small wins: A demonstrable pathway to population-based suicide prevention. The example from Ghana.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/129920/

Version: Accepted Version

Article:

Quarshie, EN orcid.org/0000-0002-8720-2355 and Andoh-Arthur, J (2018) Small wins: A demonstrable pathway to population-based suicide prevention. The example from Ghana. The British Journal of Psychiatry. ISSN 0007-1250

Reuse

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



Version: Accepted manuscript

Date published: February 16, 2018.

Citation:

Quarshie, E. N. B., & Andoh-Arthur, J. (2018). Small wins: A demonstrable pathway to population-based suicide prevention. The example from Ghana (e-letter). *BJPsych*, URL: combridge.org/core/product/4085D18A3A42352F6A5B4B041B3D7F0C#fndtn-comments

Small wins: A demonstrable pathway to population-based suicide prevention. The example from Ghana.

We read with keen interest K. S. Jacob's editorial argument (1) for the importance of examining suicide from a public health perspective and the need for population-based social and economic interventions towards suicide prevention in low- and middle-income countries (LMICs). We agree with the author and wish to point that scaling up suicide research and interventions to population levels, will remain but a long haul across LMICs. In a similar editorial some 17 years ago, De Leo (2) emphasised the need for multidisciplinary, multilevel, holistic approaches to suicide prevention. However, to date, there has not been any concrete shift in response to this call, particularly within LMICs. Harsh public attitudes towards suicide and lack of funding for research within LMICs are particularly of note, in this regard.

We argue, drawing on our experience (with a small team of suicide researchers in Ghana; a sub-Saharan African country with about 28 million people), that perhaps a potentially demonstrable pathway to populationbased suicide prevention in LMICs is to coordinate the various concrete "small wins" (3) of local communitylevel suicide prevention efforts to push for much more broader population-based prevention programmes. In Ghana, as persisting in virtually all LMICs, suicide prevention has not received the needed priority and policies, and allocation of resources for addressing the challenge is non-existent. Paradoxically, suicide remains an almosteveryday-reality in the country (4), and few professionals are available to help deal with the challenge. The small team of local suicidologists in the country (at the Centre for Suicide and Violence Research in the University of Ghana) have for the past years, self-funded their research and implementation programmes at various local community levels. Adopting the "small wins" principle, (3), the team has gradually but incrementally made its impact more visible over the past eight years. For instance, recently, the Judicial Service of Ghana in collaboration with the Ghana Mental Health Authority arranged for the team to train judges and magistrates across the country on the importance of decriminalising attempted suicide in the country and the need for the diversion of offenders of the antisuicide law from the criminal justice system into the mental healthcare system. Presently, the team is beginning to attract small-to-moderate funding from University-based research funders to scale up suicide research and prevention efforts to the national level.

Small wins achieved at the local community levels in suicide research and prevention have the potential to attract resources (funding) and favourable alliances. This will help set in motion larger wins at the broader population level.

References

- 1. Jacob KS. Suicide prevention in low-and middle-income countries: part perceptions, partial solutions (Editorial). BJPsych. 2017;211:264-5.
- 2. De Leo D. Why are we not getting any closer to preventing suicide? (Editorial). Br J Psychiatry. 2002;181(372e4).
- 3. Weick KE. Small wins: Redefining the scale of social problems. American Psychologist. 1984;39(1):40-9.
- 4. Knizek BL, Akotia CS, Hjelmeland H. A qualitative study of attitudes toward suicide and suicide prevention among psychology students in Ghana. OMEGA-Journal of Death and Dying. 2011;62(2):169-86.