

that we are undergoing with the information and technological revolution we are living through.

### 18 FROM VISION ZERO TO PRACTICAL REALITY – KNOWLEDGE TO SHARE

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Sweden has a long tradition of systematic road safety work and to consider road traffic injuries as a public problem that must be addressed by the national government. This attitude culminated in the Swedish parliament in October 1997 formally adopting Vision Zero as a new long-term goal and direction in road traffic safety work. Vision Zero aims to not only influence directly the concrete work on road safety, but also – more indirectly – the institutional preconditions and approaches, which in turn also have an impact on the actions of various players so that they take action to increase the safety of the road transport system. Vision Zero differs from a more traditional road safety policy with regard to problem formulation, its view on responsibility, its requirements for the safety of road users, and the ultimate objective of road safety work. In this presentation Vision Zero, its implementation and diffusion to other sectors of the society will be presented and discussed.

## State of the Art Sessions Tuesday 20.9.2016 13:30–14:30

### Suicide and Self-harm

### 19 SUICIDE PREVENTION: NEED FOR AN INTEGRATED APPROACH

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Suicide, hitherto a neglected public health problem, has been receiving greater attention in recent years due to growing increase and the accumulating evidence of its preventable nature. Nearly 800000 persons died due to a suicidal act in 2012 as per WHO. Low and Middle Income countries contributed to three fourths of global suicide with significant differences between countries. Age, gender and urban – rural differences are observed between and within countries in suicides.

The spectrum of suicides varies and includes those with suicides, suicidal attempts and suicidal ideations. For every suicide, nearly 10–20 attempt suicide and those with behaviours can only be a guesstimate. Suicide is mainly due to a combination of presence of risk factors and absence of protective factors. These can be at an individual, family, societal and system related areas and encompass several biological, social, economic, cultural and environmental factors. The causative factors are often cumulative, repetitive, interactive and prolonged operating on a maladaptive platform.

Global experience has shown that suicides are predictable and preventable in nature. A strong national policy on suicide

prevention and/or integrated into other sector's policies and programmes is the need of the hour. Implementation of restricting access to means like control of easy availability of pesticides and drugs, alcohol control policies, positive media reporting, strengthening information systems are urgently required in many countries. Scaling up mental health services for availability and accessibility, destigmatization and decriminalisation will greatly support for reduction of suicides. Many new approaches and strategies are being implemented in several countries that need systematic evaluation.

However, many countries with high rates of suicide have very weak and fragmented policies/programmes along with a lack of good quality and robust data. Intersectoral approaches and skilled human and financial resources are often found lacking. The world Health assembly has set a global target of reducing suicides by 10% by 2020 and suicide prevention is included under Sustainable Development goals to be achieved by 2030. Achieving these goals and targets needs a strong commitment and enhanced suicide prevention efforts are much needed.

### 20 A SUICIDE-PROTECTIVE PAPAGENO EFFECT OF MEDIA PORTRAYALS OF COPING WITH SUICIDALITY

Thomas Niederkrotenthaler. *Associate Professor, Medical University of Vienna, Centre for Public Health, Institute of Social Medicine, Suicide Research Unit*

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In addition to an ever-increasing evidence bases of harmful effects of sensationalist reporting on suicide, there is increasing evidence for the positive roles media can play in suicide prevention. For a long time, related research has primarily focused on the question if changing sensationalist media conversation may contribute to the prevention of suicide contagion, so-called Werther effects. Experiences from Austria, the first country worldwide to implement media recommendations back in 1987 as well as from other countries nowadays support that active collaboration with the media can help prevent contagion and improve the quality of reporting.

Changing the media conversation to reporting of suicide prevention is still a different task from actively preventing suicide by media reporting, the so-called *Papageno effect*. The seminal study on the Papageno effect from 2010 identified an associations between the publication of media reports on mastery of crisis and subsequent decreases in suicide rates in regions where media exposure was strong. Studies using individual data now indirectly support the Papageno effect for different media types. A recent randomised controlled trial indicated that a film featuring an individual who was suicidal but got better mainly because he fell in love (Elizabethtown, USA, 2005) reduced suicide risk factors in the audience. This effect was most pronounced in an audience with increased vulnerability to suicide, suggesting that more suicidal individuals may benefit most from such positive messages. Another randomised controlled trial tested the effects of a newspaper report about an individual who managed to cope with his suicidality by seeking professional help, and showed that the story resulted in a reduction in suicidal cognitions in a subset of participants, but not in a control group (Arendt, Till, & Niederkrotenthaler, in press).

Most recent findings suggest that also professional online resources may have a protective effect. In a recent randomised controlled trial (Till, Tran, & Niederkrotenthaler, 2015) suicide prevention websites featuring professional resources and stories