

# **Warning Signs – reaching out to middle aged men**

How to design & implement a successful campaign

**28<sup>th</sup> January 2021**

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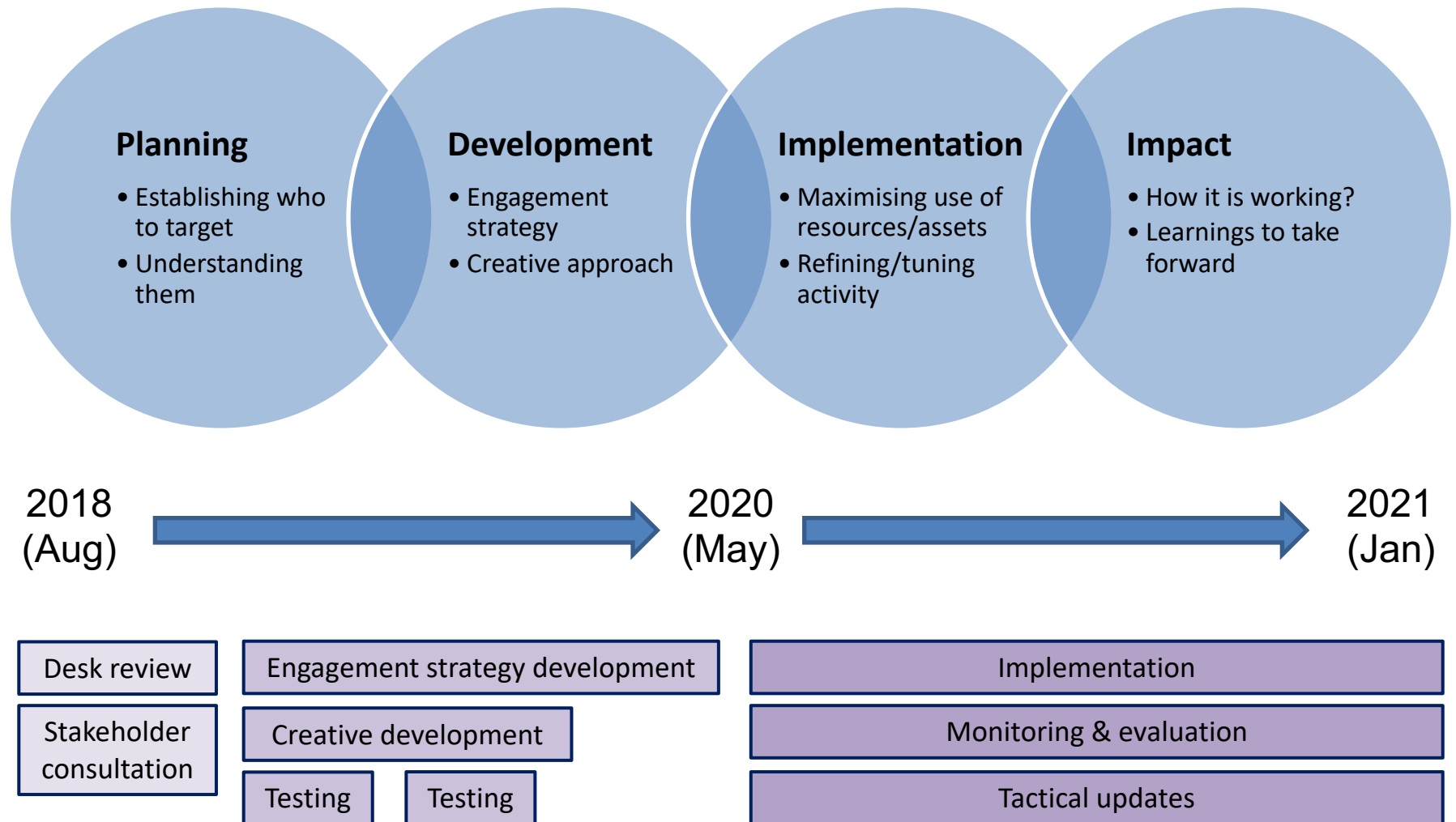


# **SUICIDE**

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**If you are  
thinking about it,  
seek help.**

# The journey



# Desk review



## ➤ National and local context

### ➤ Key factors that influence suicidal behaviour

- Factors that can contribute to/motivate suicidal behaviour
- Factors that prevent/are barriers to suicidal behaviour
- Men's experiences with suicidal behaviour & depression project

### ➤ Behavioural theories/models

- The Integrated Motivational-Volitional (IMV) Model of Suicidal Behaviour
- The Interpersonal Theory of Suicide
- The Theory of Planned Behaviour (TPB)
- The Health Belief Model
- Stages of change model
- Social Norms Theory

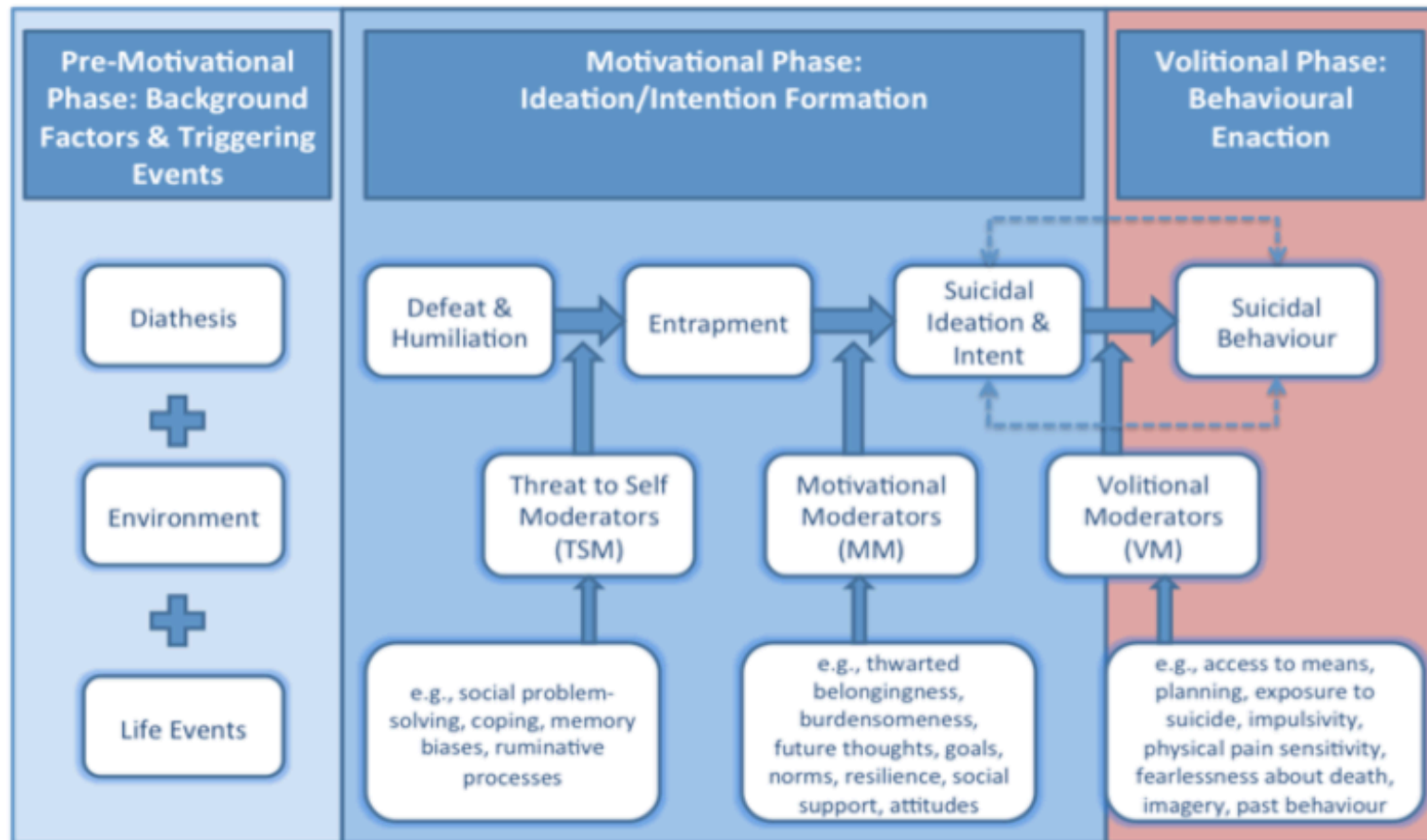
### ➤ Previous campaigns/interventions

- Campaigns
- Training Initiatives



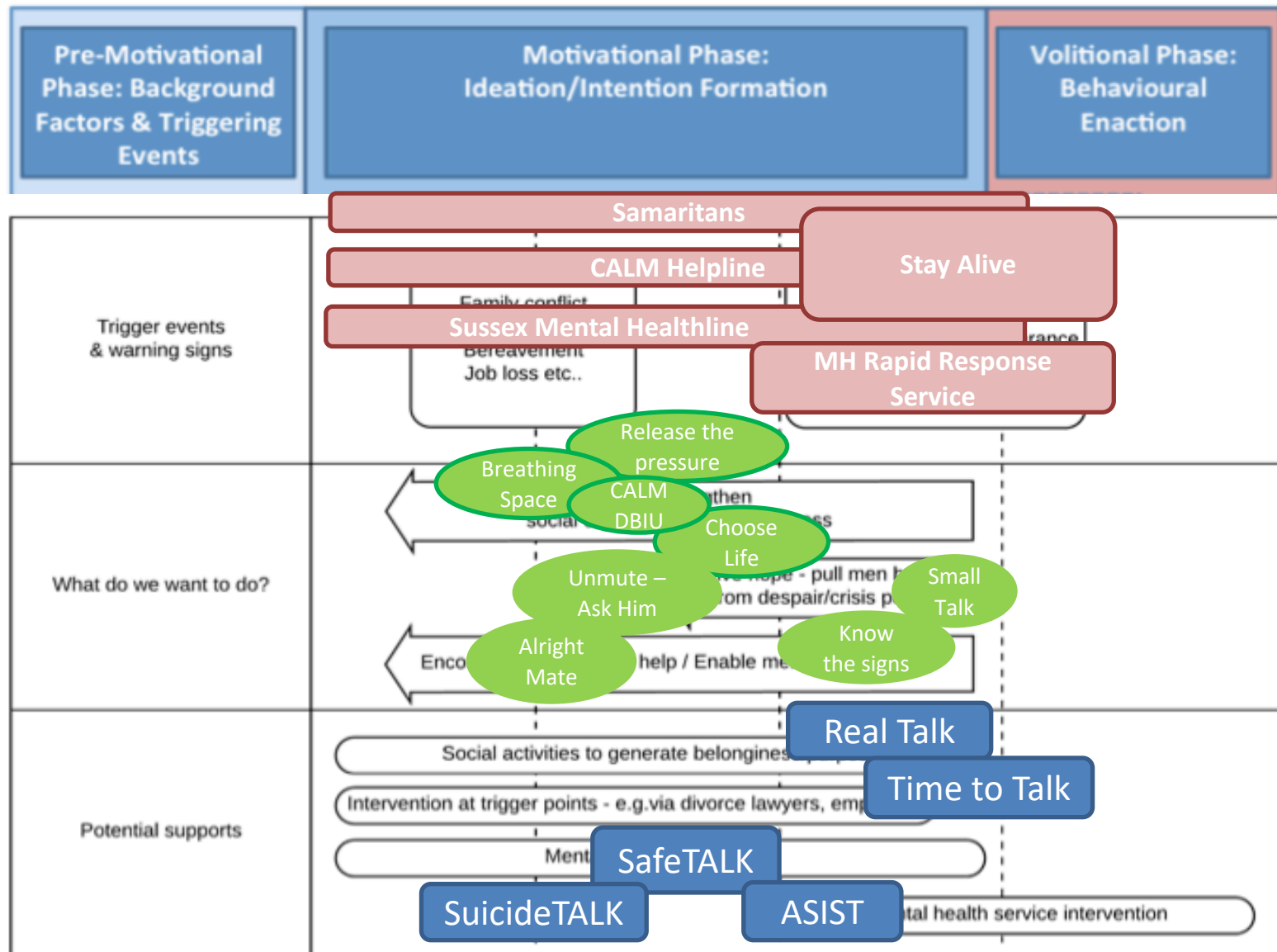
# Behavioural theory & thinking

## Integrated Motivational Volitional (IMV) model of suicidal behaviour



O'Connor, R. & Kirtley, O.J. (2018) 'The Integrated Motivational-Volitional Model of Suicidal Behaviour, in Philosophical Transactions of the Royal Society B. (373)

# The IMV Model of Suicidal Behaviour

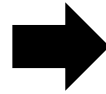


# Target & Objectives

## Primary

### MEN AT RISK OF SUICIDE

- Local adult males near or at crisis point
- With an emphasis on middle-aged routine & manual workers

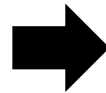


- Recognise that there is hope, and that suicide is not their only option.
- Know that support is available
- Understand that there should be no shame or stigma attached to needing or seeking help
- **Seek help** – access the website and/or call the helpline

## Secondary

### THOSE AROUND MEN AT RISK

- Close relatives, friends and colleagues
- Local public services, leisure & recreation organisations etc.



- Be alert to the mental wellbeing of others
- Be aware of the potential warning signs that someone may be struggling/at risk
- There are places you can direct men you are worried about to for them to get the help they need
- You can also get help yourself on how to support men who are at risk

# Stakeholder consultation

## Who we spoke to:

- Local third sector organisations (Grassroots & Samaritans)
- Sussex Police mental health leads
- Beachy Head Chaplaincy Team
- SPFT mental health staff
- Local authority mental health staff
- Academics specialising in public mental health



## Online survey (18 responses) with open questions to:

- Establish the most at-risk population groups
- Gain insight into what support was being offered and its limitations
- Identify any local factors which contribute to the prevalence of male suicide locally
- Find out what stakeholders would expect from a campaign

## Interviews (16) to:

- Expand our understanding of the local situation, any learnings from prior campaigns, and how stakeholders felt a campaign would best fit into the support landscape.

# Stakeholder consultation

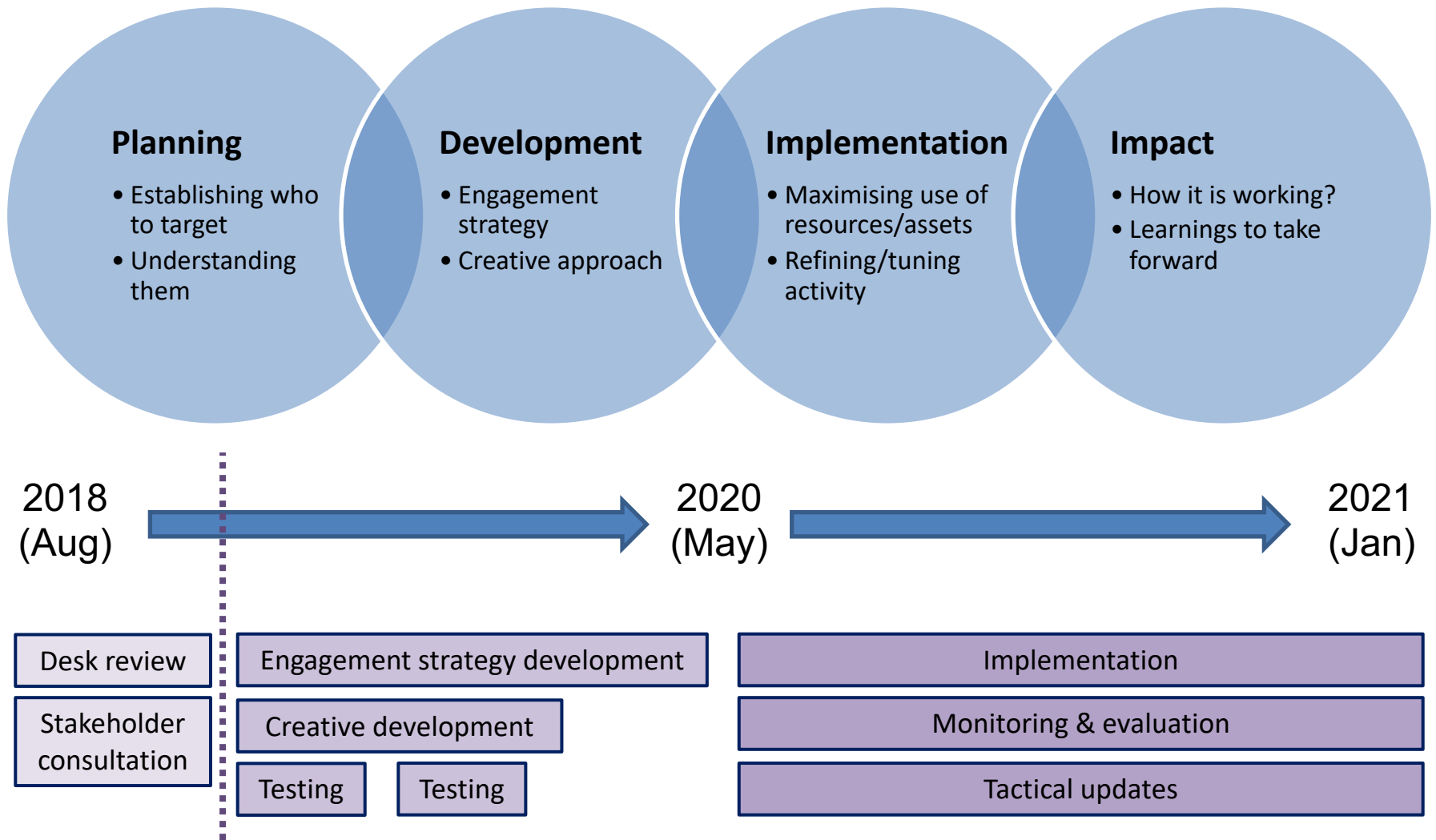
## Key findings

- **Life events are often risk factors**, especially relationship breakdown, financial/ employment issues, social isolation, substance abuse
- There is potential for a wider audience of “influencers” to be engaged with as a channel to interact with at-risk men
- Barriers to men seeking help include undiagnosed issues, life stage, unhealthy coping mechanisms, social isolation
- Locally, there was a danger that suicidal behaviour may be more normalised by prevalence (especially around Beachy Head)
- **A campaign should avoid:**
  - Suggesting, or assuming, that everyone has a strong support network
  - Implying that there are always visible signs
  - Triggering images
  - Signposting to services which might not offer the right kind of support (e.g. A&E)

## Local issues

- Budgets for services such as mental health or addiction have been cut, which has created a negative perception of these services for some locally
- In primary care, GPs are very time pressured, making it easier to take people at face value when they say they’re “ok”
- The “grumpy receptionist” issue can present a barrier if this is the first point of contact for help seeking
- Counselling services have strict rules on acceptance, meaning only those at immediate risk of harm are likely to receive support quickly.
- There is a need overall for a more joined-up approach

# The journey





# Creative development



## CREATIVE BRIEF

<b>Client:</b>	East Sussex County Council
<b>Job:</b>	Suicide
<b>Job no:</b>	3056
<b>Author:</b>	Matt Howick
<b>Date of issue:</b>	08.02.18
<b>Internal review:</b>	Sarah Muir, Carter Anderson
<b>Date to client:</b>	

### Who's the client? What's the job?

To undertake research and develop an insight-led social marketing campaign to support the reduction of male suicides in East Sussex. Part of the job is to establish who to target and where to intervene on the 'pathway' to suicide. As such, we need to develop a number of creative options to test against different target groups and points on the suicide pathway.

### Why?

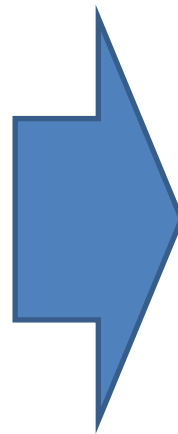
Suicide is a significant social inequality and public health issue. It is estimated that 800,000 people die worldwide by suicide every year, and that attempted suicides worldwide are about 10-20 times greater than this number.

The imbalance of gender and suicide is particularly well known, with male suicide rates being, on average, 3.5 times higher than females worldwide.

East Sussex has a higher than average suicide rate than elsewhere in England. One key factor in this is the presence of Beachy Head, a public place in East Sussex widely used for suicide attempts (That said, the Beachy Head factor is to be excluded from this project). Reported suicides in East Sussex between 2008 and 2013 averaged at 77 a year, a number including both East Sussex and non-East Sussex residents (who travelled to the area to take their own life). A third of suicides at Beachy Head are estimated to be non-resident deaths, accounting for 72% of all non-resident deaths in East Sussex.

Recent analysis of suicide data in East Sussex shows that suicide in men is highest in the 30-44 and 45-59 year age groups, although notably deaths in young men (15-29 years) and older men (60+ years) account for almost 45% of all male suicides.

By borough, suicide rates have been highest in Hastings and Eastbourne, followed by Lewes. Recent data shows, however, that the suicide rates in rural areas Rother and



If someone you know is finding life hard

**TELL HIM...**

...HE MATTERS.

...THINGS WILL CHANGE.

...YOU'RE THERE FOR HIM.

**ASK HIM...**

...IF HE'S EVER THOUGHT ABOUT SUICIDE.

Asking directly about suicide won't 'put the idea in their head' or make things worse. In fact, it can come as a huge relief. Men who chose not to take their lives said talking openly with friends and family made a difference. If you feel someone you know is struggling, tell them you care and ask. If they're okay. And if they want to talk, you just need to be able to listen.

For advice on how to support someone who's finding life hard, go to [www.sussexsuicideline.org](http://www.sussexsuicideline.org)

**TELL HIM...**

**ASK HIM...**

He kept saying he was a burden, so I asked him

**"Are you thinking about suicide?"**

...if someone you know is finding life hard

**TELL HIM...**

...HE MATTERS.

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**TELL HIM...**

**ASK HIM...**

I remember deciding

**"No. I won't kill myself."**

...if someone you know is finding life hard

**TELL HIM...**

...HE MATTERS.

...THINGS WILL CHANGE.

...YOU'RE THERE FOR HIM.

**ASK HIM...**

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**TELL HIM...**

**ASK HIM...**

**SUICIDE**

If you've thought about it, seek help.

Any thoughts of taking your life are a sign that it's time for you to look for support. Particularly if you're on your own or feel you have no-one to talk to.

Other signs you're at risk include:

- Feeling hopeless - Angry
- No sense of purpose
- Reckless - Withdrawn

Don't ignore the warning signs.

Call the support line: XXXX XXX XXXX

Or find other support at [www.sussexsuicideline.org](http://www.sussexsuicideline.org)

# Primary research (1<sup>st</sup> phase) – creative testing

## **Focus groups**

At-risk audience:

- 10 respondents in two groups with service users at the East Sussex Recovery Alliance (ESRA) and Southdown Mental Health Recovery Services

General male population:

- 16 participants over two groups from the local Men vs Fat football league

## **Additional depth interviews**

People bereaved by suicide:

- 3 depth interviews (all female) with people bereaved by suicide

## **We were looking to establish**

What our audience felt were the most important elements of an effective campaign?

What barriers they felt existed to men seeking help?

Which creative route was best placed to overcome these?

# Primary research (1<sup>st</sup> phase) – creative testing

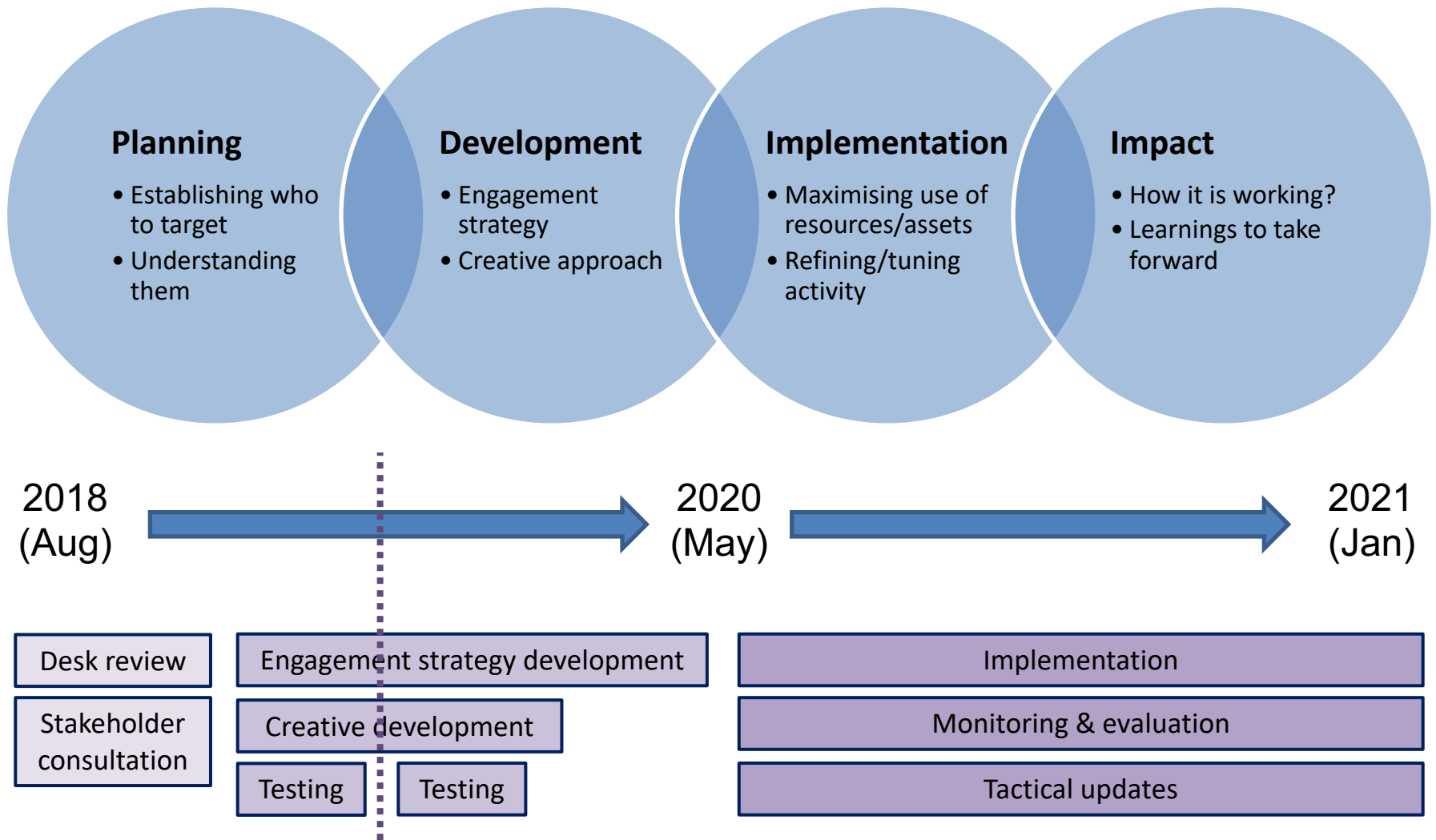
## Key findings

- Participants felt strongly that a campaign on suicide prevention was needed locally
- Men locally can find it very difficult to initiate a conversation about mental health or suicide
- It is very important for the campaign to stand out visually, and tackle the issue head-on to encourage people to start a conversation
- A patronising tone should be avoided
- Any promises made by the campaign MUST be borne out by the underlying support available
- Ideally, the campaign should be applicable to both those in crisis and those in need of an earlier intervention
- The campaign should target men at risk, but should not exclude others

## Creative feedback

- The “Warning Signs” creative consistently stood out visually as the most impactful and memorable
- The direct mention of “suicide” was seen, as an effective way to break through the existing social taboo around mentioning this
- The audience felt that this concept would pair well with a “list” of signs to look out for in peers
- Visually, other routes tended to be seen, as less eye-catching, potentially too text-heavy, or unlikely to stand out among other health-related campaigns
- The content of the “Ask Him/Tell Him” route was seen as a strong point, and this call to action was recommended by participants for inclusion in the final campaign
- Respondents favoured an independent, campaign-focused brand to existing brands such as NHS/Local authorities, due to existing cynicism about current services

# The journey



# Supplementary Consultation - mental health support and suicide prevention

**Online consultation** (52 respondents) which tested key aspects of the proposed service such as 24hr provision, chat service, and signposting options

**Follow-up depth interviews** (11) with people who have engaged with mental health services to gather insight into the experiences behind some of the positive and negative views expressed.

## Key findings

- Initial contact with mental health services often shapes perceptions – even if this was a long time ago
- Limitations on access to the existing helpline are a major barrier – the new service should be accessible 24/7
- If possible, there should be no time limit on calls, as some people find the added pressure this brings to be a barrier
- It's important for service users to know that helpline staff are trained mental health professionals
- Clear, tailored signposting to a range of relative support services would be beneficial (e.g. debt support, bereavement, physical activity etc.)
- If possible, some would welcome text-based support in addition to the option of a phone conversation

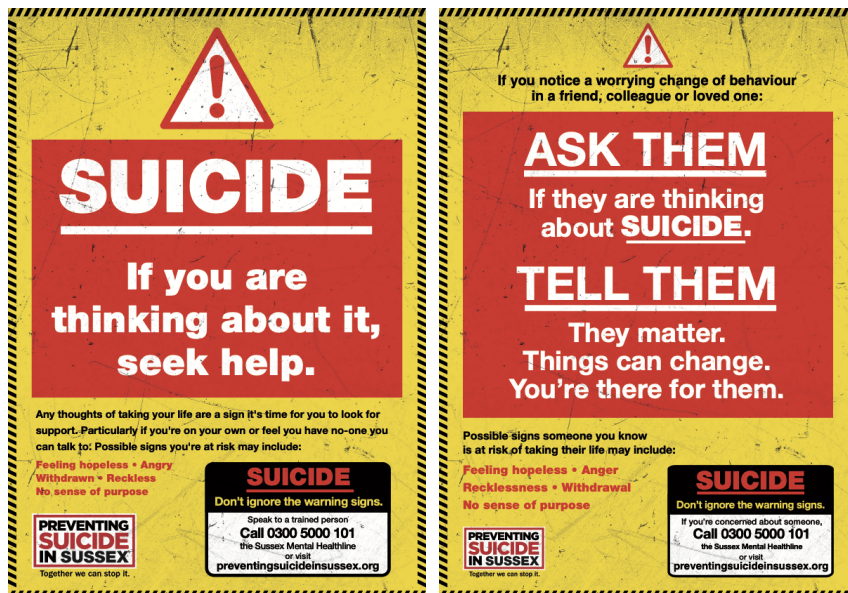
# Primary research (2<sup>nd</sup> phase) – creative testing

**Stakeholder interviews** were held with representatives from SPFT, Men In Sheds, and Time to Talk Befriending

**Community day & MSM focus (17)**  
members of the public, primarily recruited from two mens' sheds groups and Brighton Gay Men's Chorus

## Key findings

- The execution targeting influencers was felt to be less impactful than the “at-risk” execution, with a suggestion that the word “suicide” should be included prominently on both
- The “Warning Signs” route felt appropriate to the local Brighton & Hove context
- The directness of the wording and tone was appreciated by at-risk males as it felt like a “straight talking” approach
- The call to action should be more prominent to ensure the audience are aware of support
- Change the copy for the influencer ad from “him” to “them” – this doesn't lessen the impact but is more inclusive.

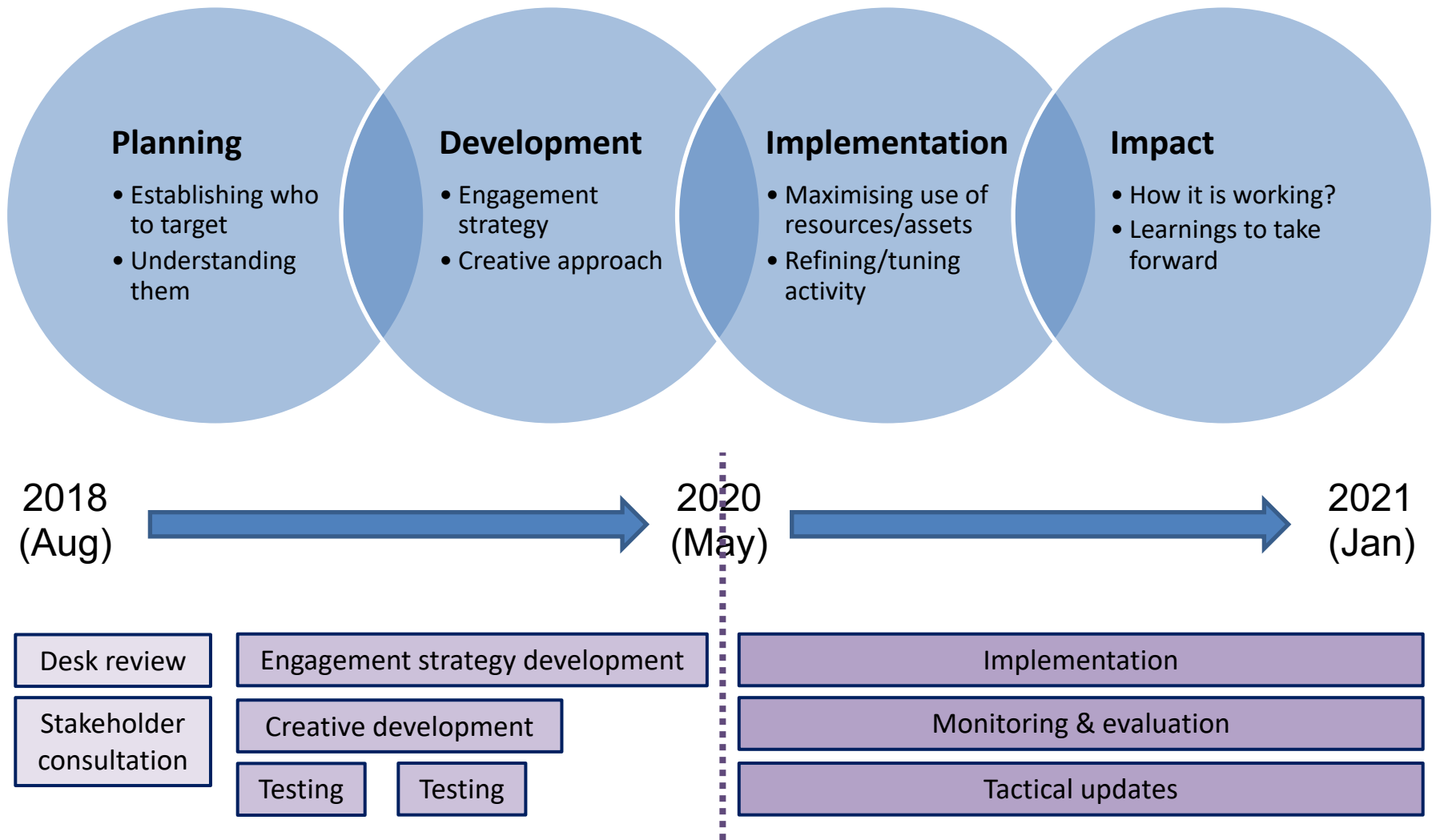




# Campaign strategy & plan

<b>Overall Purpose and Goals of the Warning Signs campaign</b> <ul style="list-style-type: none"> <li>To increase awareness amongst men (and their influencers) of where they might access help if they are finding it difficult to cope with their stress/depression.</li> <li>To improve recognition of suicide risk and of how to help, among the influencers in men's lives.</li> <li>Consequently, to help contribute towards reducing the stigma associated with help-seeking in men.</li> </ul>			
<b>Strategic approach</b> - Adopt a 'whole systems' approach to tackling the issues: <div> <ol style="list-style-type: none"> <li>1. Encourage direct action and open discussion about feeling suicidal and the support/help on offer.</li> <li>2. Mobilise and empower local services and communities to help deliver the campaign.</li> <li>3. Signpost and connect people to the local support on offer.</li> </ol> </div>			
<b>Key messages</b> <ul style="list-style-type: none"> <li>If you have suicidal thoughts, seek help</li> <li>Sharing your thoughts is important and can help</li> <li>Other men who have had suicidal thoughts have found and accepted help which has made a difference</li> <li>Those around men at risk/influencers:               <ul style="list-style-type: none"> <li>Be alert to the mental wellbeing of others – friends, relatives and colleagues</li> <li>Be aware of the potential warning signs that someone may be struggling/at risk of suicide</li> </ul> </li> </ul>	<b>Grassroots</b> <ul style="list-style-type: none"> <li>Public services support</li> <li>Charity led/driven support</li> </ul> <b>Targeted advertising</b> <ul style="list-style-type: none"> <li>Online – Social media and Google search advertising</li> <li>Outdoor advertising</li> </ul>	<b>Internal local authority comms and working together to engage with press and media – i.e. to field mainstream media interest.</b> <p>The local support offer (public and community)</p>	<ul style="list-style-type: none"> <li>Evidence that calls received have been as a result of campaign activity – shown through reporting data if possible?</li> </ul> <b>Evidence that it is having a positive impact:</b> <ul style="list-style-type: none"> <li>Endorsement of the key messages – testimony, Facebook page likes</li> </ul>

# The journey



# Implementation – tactics & opportunities

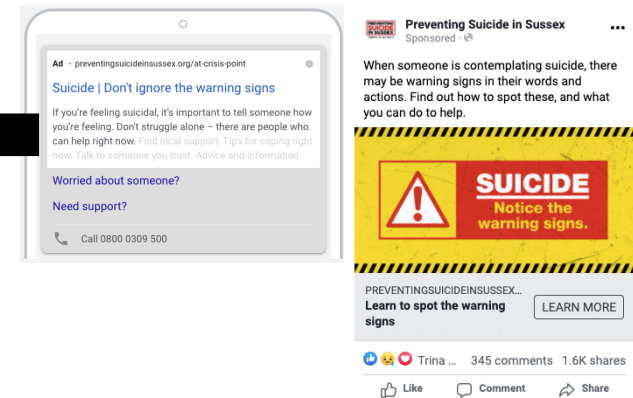
## Outdoor media



## Information Hub



## Digital media



## Opportunities

- World Suicide Prevention Day, World Mental Health Day allowed us to capitalise on spikes in searches for suicide risk factors and general mental health advice
- Covid restrictions keeping people at home therefore online
- High volume of organic shares on Facebook

# Implementation – challenges & learnings

- Outdoor media plan was scaled back due to Covid restrictions limiting footfall
- Linking data between the online ads and Healthline call data proved to be difficult
- Moderation of comments on social media, using a referral protocol for any which indicated risk
- Social media campaign management – issues with Facebook’s “Issue & Political Ads” algorithm
- Social media page administration – important to run through dedicated page

# Digital ads – how we reached people

- **On both channels, we targeted the local authority geographic areas**
- **Google Search Ads**
  - 4 Ad groups, targeting search keywords relating to: mental health, being concerned for someone else, relationship issues, financial/employment issues
  - No gender/age based targeting due to lack of verification

Top 5 Search Keywords	Clicks	Clickthrough rate (CTR)%
"Depression"	5005	7.6%
"Mental health"	2105	4.3%
"Signs of depression"	900	4.9%
"Suicidal"	865	9.1%
"Crisis help"	816	12.4%

Sample Search Terms
"How to help my 53 year old son with mental illness"
"male suicide help"
"what to do when someone says they are going to end their life"
"I want to die don't have a GP"
"where to jump off Beachy Head"

- **Facebook Ads**
  - One ad group targeting men aged 30-59
  - One ad group targeting a much wider "Influencer" audience (All genders, age 18+)

# Results so far – May-20 to Jan-21

## Information hub/campaign site

**Visited 113,000** times, by **98,000 unique users**

Average time on core content pages = 3 to 3.5 minutes

**8,807 clickthroughs to signposted resources**  
(4,616 from the At Risk page)

## Digital Ads

In total, the ads have been **seen over 5,370,000 times**,  
generating **96,800 clickthroughs** to the website

Facebook has been the biggest overall driver of traffic,  
but Google Ads proved more effective at reaching those in crisis

**The Helpline has been dialled 886 times through Google Ads extension**



# Results so far – Facebook comments/messages

To date we have received around 630 comments

this so frustrating. It is NOT the paramedics job to deal with acute suicidality. a decade of cuts have meant emergency services are the new frontline.

The government needs to invest in dedicated crisis teams permitting members of the public to self refer.



Like · Reply · Message · 28w

Yes I dont like admitting it when I feel really bad theres not many iv got to really turn to and listen



Like · Reply · Message · 29w



so sorry I know yfst feeling. If you want to friend me I will listen

Like · Reply · Message · 18w

I'm struggling tbh , im glad people are there to help, thankyou x

It's the ones that don't say anything that are the ones to worry about 🙄

Like · Reply · Message · 5w

This is really good advice. Look out for each other

Like · Reply · Message · 5w

COVID 19(common seasonal flue) : propagating fear, unemployment, enforced closure of local businesses, wrongfully misdirected medical treatment and guidance,enforcing the wear of the face mask to healthy people, psychological negative effect by isolating the people, from their families and friends. And the list goes on.... If you worry more than us about human life, STOP THIS MADNESS!

Like · Reply · Message · 7w · Edited

# Critical success factors

- **A systematic planning process**
- **Ensure all parties focussed on the target audience(s)**
- **Communication**
  - Stakeholders - consult widely and keep in the loop
  - Make the ask of delivery partners clear and consistent
- **Monitor, review and adapt**

# The burning question?

## Costs

- **Total 2018 to Dec 2020 = c£140,000**
- Research & planning including consultation = £35,000
- Campaign development
  - creative approach and strategy = £25,000
  - website development = £10,000
- Campaign media and management May-20 to Dec-20 = £70,000
  - outdoor £30k vs digital £40k
- Current *overall cost per engagement per website* visitor c£1.50 but will reduce over time

# Any questions?

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# End slide

## **Ruth Finlay**

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The Social Marketing Gateway (SMG)  
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