
The case for a structured up-to-date suicide national prevention strategy based on the 4-level approach: lessons from EAAD and OSPI-Europe in Portugal

R. Gusmão¹, S. Quintão¹, S. Costa¹, U. Hegerl²

¹Universidade Nova de Lisboa, CEDOC Mental Health Department, Lisboa, Portugal ; ²University of Leipzig, Department of Psychiatry, Leipzig, Germany

In OECD countries with a national suicide prevention strategy there is a correlation with the reduction of suicides.

Most national strategies refer to common elements such as focus on depression and other mental health and addictive disorders diagnosis and treatment, attention on medical chronic patients, improvement of suicide risk assessment, suicide postvention, education of health professionals and the population, increased care accessibility, action on reducing access to lethal means, school programs, media intervention, etc.

These elements, for most European national suicide prevention strategies, fit the EAAD 4-level interventions, which tend to be evidence-based.

Portugal is considered to be a country with low suicide rates compared to other European countries though it also presents one of the worst ratios of suicide to undetermined violent deaths and evidence points towards a huge number of masked suicides amongst undetermined violent deaths making suicide much commoner than officially pointed out.

In April 2013, a 'National suicide prevention plan' was presented in Portugal listing most of the suitable actions that could be implemented. There might be strategic advantages to integrate these actions within a sustainable intervention comprehensive model and referring to clear measurable outcomes, in a given period of time.

There is a ten-year track record on the successful use of the EAAD 4-level model in three municipalities in Portugal and other possible examples on 'how to' disseminate at the national level are presented.