

**Mapping training in mental health
and suicide awareness across
Northern Ireland: February 2008**

**Is your organisation/department
involved in training related to any
aspect of mental health promotion,
mental illness or suicide awareness?**

If yes, we would like to hear from you.



**Please pass this questionnaire to the person responsible
for training in your organisation/department.**

The Health Promotion Agency for Northern Ireland is compiling a picture of all training in Northern Ireland that relates to *Protect Life – a shared vision: the Northern Ireland suicide prevention strategy and action plan 2006–2011* and the *Promoting mental health: strategy and action plan 2003–2008*.

This work will help to identify gaps in training provision and areas for future development.

We have tried to keep this as brief as possible, and would appreciate you taking the time to complete it.

Notes about terminology

For this exercise, we are interested in all training that addresses issues related to mental health promotion, mental illness or suicide awareness. We would like to hear about training aimed at the general population as well as training aimed at specific target groups.

The following notes are only provided for guidance and should not be considered as definitive. To gather as much information as possible, we would encourage you to include any details about training that you think might be helpful for this exercise.

Training

This includes short courses and programmes that can be delivered as single sessions or as a series of sessions over a period of time, where the overall aim(s) includes raising awareness, providing information or skills development.

We are not asking you to include details of professional training programmes leading to professional qualifications as we can access information about these elsewhere. However, you might want to include details about specific modules that are delivered, for example, as part of Continuing Professional Development.

Mental health promotion

According to the *Promoting mental health: strategy and action plan 2003–2008*, mental health is “the emotional and spiritual resilience which enables us to enjoy life and to survive pain, disappointment and sadness. It is a positive sense of wellbeing and an underlying belief in our own and others’ dignity and worth”.

Mental health promotion aims to improve the mental health of the general population, and the following are examples of some broad categories that training might address:

- emotional health and wellbeing;
- mental health and wellbeing;

- risk factors and protective factors that influence mental health;
- managing stress;
- understanding issues related to mental health problems or illness;
- dealing with loss and change;
- bereavement.

Mental illness and/or self-harm

We would like to hear about training that specifically addresses issues arising from mental health problems and disorders, and issues that relate to self-harm. Examples might include information about diagnoses, contributory factors, warning signs, symptoms and treatments.

Suicide awareness

Suicide awareness training includes courses or programmes that help to raise awareness of the key issues related to the risk of suicide and suicidal behaviour(s). The overall aim(s) of such courses might be to address any or all of the following areas:

- suicide prevention – aimed at recognising and responding to early warning signs and indicators of risk;
- suicide intervention – aimed at developing skills that are used when working with individuals or groups where there is an identified risk of suicide and/or suicidal behaviour(s);
- suicide postvention – aimed at supporting those bereaved by or directly affected by suicide, whether as individuals, families, communities, groups or organisations.

Section A: Contact details

A1. Please complete the following details about your organisation:

Name of organisation: _____

Address: _____

Telephone: _____

Email/website: _____

A2. Please provide contact details for a person within your organisation/department who has responsibility for training:

Contact name: _____

Job title: _____

Tel: _____

Email: _____

A3. What sector does your organisation belong to? (Please tick the appropriate box.)

Voluntary **Please go to Section B** Private **Please go to Section B**

Community **Please go to Section B** Statutory **Please go to Section C**

Other, please specify _____ **Please go to Section B**

Section B: Community/voluntary/private sector – about your organisation

B1. Please tell us briefly what the overall aims and objectives are for your organisation?

B2. Describe briefly the services provided by your organisation.

B3. Approximately how many people are involved in your organisation? (Please write in the number.)

Employees

Service users

Volunteers

Carers

Others, please specify their role _____

Please go to Section D

Section C: Statutory sector – about your organisation

C1. Which statutory organisation do you belong to? (Please tick the appropriate box.)

- Health and Personal Social Services **Please go to C2**
- Criminal Justice System of Northern Ireland **Please go to C3**
- Other, please specify _____ **Please go to C4**

C2. If Health and Personal Social Services, which board/trust area do you work in? (Please tick the appropriate box.)

Health and Social
Services Board:

- EHSSB
- NHSSB
- SHSSB
- WHSSB

Health and Social
Care Trust (HSCT):

- Belfast HSCT
- Northern HSCT
- South Eastern HSCT
- Southern HSCT
- Western HSCT

All of Northern
Ireland:

Please go to C4

C3. If Criminal Justice System of Northern Ireland, which agency do you represent? (Please tick the appropriate box.)

- Northern Ireland Prison Service
- Police Service of Northern Ireland
- Probation Board for Northern Ireland
- Youth Justice Agency of Northern Ireland
- Other, please specify _____

C4. Which department(s) within your organisation do you represent?

C5. Please provide details of the particular area(s) of work represented by your department:

Professional grouping/disciplines: _____

Specific programme(s) of care: _____

Any particular specialisation(s): _____

C6. Please provide any additional details about the work of your department, which you feel might be relevant:

Please go to Section D

Section D: About training you may offer

D1. Does your organisation/department deliver training related to mental health promotion, mental illness or suicide awareness?

See explanations on page 3 for guidance.

Yes No **If no, please go to Section F, page 13.**

If yes, we would like some information about the training you offer.

D2. Which of the following best describes the broad focus of the training you offer? (Please tick all that apply.)

Mental health promotion

Mental illness

Suicide awareness

D3. Are any of your courses offered to those who work with any of the following groups? (Please tick all that apply.)

| | Yes | No |
|-------------------------------------|--------------------------|--------------------------|
| Pre-school children | <input type="checkbox"/> | <input type="checkbox"/> |
| Primary school children | <input type="checkbox"/> | <input type="checkbox"/> |
| Post-primary school children | <input type="checkbox"/> | <input type="checkbox"/> |
| School leavers aged 16–17 years | <input type="checkbox"/> | <input type="checkbox"/> |
| Young adults aged 18–25 years | <input type="checkbox"/> | <input type="checkbox"/> |
| All adults | <input type="checkbox"/> | <input type="checkbox"/> |
| Older adults aged 50 years and over | <input type="checkbox"/> | <input type="checkbox"/> |

Other specific age groups, please provide details _____

D4. Are any of your courses offered to members of the following groups?
(Please tick all that apply.)

| | Yes | No |
|-------------------------------------|--------------------------|--------------------------|
| Pre-school children | <input type="checkbox"/> | <input type="checkbox"/> |
| Primary school children | <input type="checkbox"/> | <input type="checkbox"/> |
| Post-primary school children | <input type="checkbox"/> | <input type="checkbox"/> |
| School leavers aged 16–17 years | <input type="checkbox"/> | <input type="checkbox"/> |
| Young adults aged 18–25 years | <input type="checkbox"/> | <input type="checkbox"/> |
| All adults | <input type="checkbox"/> | <input type="checkbox"/> |
| Older adults aged 50 years and over | <input type="checkbox"/> | <input type="checkbox"/> |

Other specific age groups, please provide details _____

D5. Do any of your courses specifically relate to any of the following at risk groups?

(These groups are identified in Protect life – a shared vision: the Northern Ireland suicide prevention strategy and action plan 2006–2011.) (Please tick all that apply.)

| | Yes | No |
|--|--------------------------|--------------------------|
| Those who self-harm | <input type="checkbox"/> | <input type="checkbox"/> |
| Those with a mental illness | <input type="checkbox"/> | <input type="checkbox"/> |
| Those who misuse drugs and/or alcohol | <input type="checkbox"/> | <input type="checkbox"/> |
| Young males | <input type="checkbox"/> | <input type="checkbox"/> |
| Those bereaved by suicide | <input type="checkbox"/> | <input type="checkbox"/> |
| Survivors of sexual, physical or emotional abuse | <input type="checkbox"/> | <input type="checkbox"/> |
| Those from marginalised/disadvantaged groups | <input type="checkbox"/> | <input type="checkbox"/> |
| Those working in high-risk occupations | <input type="checkbox"/> | <input type="checkbox"/> |
| Prisoners | <input type="checkbox"/> | <input type="checkbox"/> |

D6. Are any of your courses gender specific? (Please tick the appropriate box.)

- Yes, some or all are aimed at males only
- Yes, some or all are aimed at females only
- No

D7. Where are your courses offered? (Please tick all that apply.)

- Local area only (please specify area) _____
- Anywhere in Northern Ireland
- Outside Northern Ireland (please specify area) _____

Section E will ask you for more details about specific training courses that your organisation/department offers.

You may offer a core course with tailor-made adaptations for different groups; if so, you only need to tell us about this course once.

If you wish to enclose a copy of any printed training course information please do so.

Section E: Formal training courses you have offered

Using the following table, please provide us with information about each of the relevant training courses that your organisation/department has offered in the last two years (from January 2006 approximately). If necessary, please photocopy these pages and continue.

| Title of course | Course 1: | Course 2: |
|--|--|--|
| Overall aim(s) of course | | |
| Was this course aimed at a particular group of people? | Duration of course: Open to anyone <input type="checkbox"/> Aimed at particular group <input type="checkbox"/> If aimed at a particular group, please tell us who they were: | Duration of course: Open to anyone <input type="checkbox"/> Aimed at particular group <input type="checkbox"/> If aimed at a particular group, please tell us who they were: |
| Nature of course | Raising awareness <input type="checkbox"/> Developing skills <input type="checkbox"/> Other <input type="checkbox"/> Please explain: | Raising awareness <input type="checkbox"/> Developing skills <input type="checkbox"/> Other <input type="checkbox"/> Please explain: |
| Was this course accredited? | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please tell us the name of the awarding body or organisation/department: | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please tell us the name of the awarding body or organisation/department: |

| Title of course | Course 3: | Course 4: |
|--|---|---|
| Overall aim(s) of course | | |
| Was this course aimed at a particular group of people? | <p>Duration of course:</p> <p>Open to anyone <input type="checkbox"/> Aimed at particular group <input type="checkbox"/></p> <p>If aimed at a particular group, please tell us who they were:</p> | <p>Duration of course:</p> <p>Open to anyone <input type="checkbox"/> Aimed at particular group <input type="checkbox"/></p> <p>If aimed at a particular group, please tell us who they were:</p> |
| Nature of course | <p>Raising awareness <input type="checkbox"/> Developing skills <input type="checkbox"/></p> <p>Other <input type="checkbox"/> Please explain:</p> | <p>Raising awareness <input type="checkbox"/> Developing skills <input type="checkbox"/></p> <p>Other <input type="checkbox"/> Please explain:</p> |
| Was this course accredited? | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please tell us the name of the awarding body or organisation/department:</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please tell us the name of the awarding body or organisation/department:</p> |

Section F will ask about training that people in your organisation/department have **attended** in relation to mental health promotion, mental illness or suicide awareness in the last two years (from January 2006 approximately).

Please provide as much detail as you can about these courses. You may include courses outside Northern Ireland.

Section F: Training you or your colleagues may have attended

If necessary, please photocopy this page and continue.

| Course title, if known | Course 1: | Course 2: | Course 3: | Course 4: |
|---|-----------|-----------|-----------|-----------|
| Aim/theme of course | | | | |
| Who provided/ delivered course? (Include contact details if known.) | | | | |
| Who was the target group? | | | | |
| Where did the course take place? | | | | |
| Length of course | | | | |

Section G: Other sources of training

Are you aware of any other organisations/departments delivering courses related to mental health promotion, mental illness or suicide awareness training in your area? If so, please tell us who they are so that we can include them in this mapping exercise.

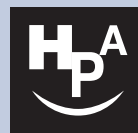
| Name of organisation/department (and contact details if known) | Title/overall purpose of training programme(s) |
|---|--|
| | |
| | |
| | |

If you have any general comments to make about training related to mental health or suicide awareness in Northern Ireland, please use the space below. (Continue on an extra sheet if necessary.)

Thank you for taking the time to complete this questionnaire. Information will be treated in confidence and you will be kept informed of how it is used. We may be in contact again to ask for some more information about the courses you have specified.

Please return to the:

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18 Ormeau Avenue, Belfast BT2 8HS



Health
Promotion
Agency



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18 Ormeau Avenue, Belfast BT2 8HS.

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