Autistica Written Evidence

Scottish Health and Sport Committee Inquiry: Suicide Prevention in Scotland

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Submission Date
16th May 2018

Autistica is the UK’s autism research charity and the largest independent funder of autism research in Europe. All of our funding priorities are determined by autistic people and their families, which we feed into other large funders. We operate Discover, the UK’s national network for autism research, connecting autistic people and their families with autism researchers, local charities, support groups and the NHSs.

In 2016 our Personal Tragedies, Public Crisis report revealed the unacceptable rates of early death in the autistic community. Since then we’ve been investing strategically in tackling the leading causes of death, including suicide.

Key points

1. Ongoing research suggests that autistic people may account for up to 11% of all deaths by suicide, even though only 1% of the population is on the autistic spectrum.1,2

2. Autistic people are one of the groups at highest risk of suicide. Autistic adults without a learning disability are nine times more likely to die by suicide than the rest of the population.3,4

3. Mental health services and suicide prevention strategies have not been designed to meet autistic people’s needs.5 The outcomes strongly suggest that they are not working for autistic people.

4. Through the introduction of this new Suicide Prevention Action Plan, Scotland has an opportunity to react to the emerging evidence about suicide and autism and become a world leader in supporting its autistic citizens. The Scottish Government should ensure that developing suicide prevention strategies for autistic people is a core focus of its proposed Knowledge Into Action group.

Question 4 – Should there be a focus on specific at-risk groups?

5. Yes, the Suicide Prevention Action Plan should focus on translating the emerging evidence about suicide and autism into effective support for autistic people.

Autistic people are at exceptionally high risk of suicide

6. Suicide is a leading cause of death in the autistic community.3,4,6,7,8,9,10,11,12 Amongst the two-thirds of autistic adults without a learning disability, it is the second leading cause of death behind heart disease.3,4

7. Between a third and two-thirds of autistic adults without a learning disability have considered or attempted ending their own life.6,7,8,9 One study found that this is also true for 14% of children and young people on the autism spectrum, compared to just 0.5% of their non-autistic peers. Autistic people are also disproportionately affected by mental health problems. 7 in 10 autistic children and almost 8 in 10 autistic adults experience at least one mental health problem.13,14

Autistic people account for a disproportionate number of deaths by suicide

8. It is becoming increasingly clear that autistic people are one of the groups at highest risk of suicide.3,4,6,7,8,9,10,11,12 Ongoing research suggests that autistic people may account for up to 11% of deaths by suicide in the UK, even though only 1% of the population are on the autistic spectrum.1,2 This matches international findings that autistic people without a learning disability are nine times more likely to die by suicide compared to the general population. Autistic people with a learning disability are still twice as likely to take their own life.3,4

Current mental health and suicide prevention strategies might not be effective for autistic people

9. It is well known that mental health interventions do not always work for autistic people in the same way that they do for neurotypical people. For example, the importance of adapting CBT protocols for autistic people with anxiety is now well-documented.15,16,17,18

10. It also appears that suicide prevention strategies used in the general population might not be appropriate for supporting autistic people.5 Initial evidence suggests that the trends relating to suicidality in the autistic population may differ from the general population, for example, autistic women appear to be more likely to take their own lives than autistic men.3,4
11. It is essential that mental health and suicide prevention services are accessible to autistic people in crisis – when communication may be most difficult. The Suicide Prevention Action Plan should consider the specific needs of autistic people to ensure that this high-risk group can access effective support when they need it most.

12. Autistica’s ongoing Psychological Autopsies study is looking into the risk factors for suicide amongst autistic people.1 This information could help improve the effectiveness of suicide prevention measures, so it is vital that organisations responsible for local suicide prevention strategies keep up-to-date with emerging evidence on this.

13. The Suicide Prevention Strategy Report19 – prepared by the Health and Social Care Academy, Health and Social Care Alliance, Samaritans Scotland, NHS Health Scotland and the Scottish Government – identify autistic people as a “key group” at “disproportionate” risk of suicide. The Scottish Government should ensure that developing suicide prevention strategies for autistic people is a core focus of its proposed Knowledge Into Action group.

14. Suicide prevention should also become a priority for the new Scottish Autism Research Consortium that the Scottish Government is considering establishing as a 2018-2021 priority for the Scottish Autism Strategy.20

Suggested questions

- On average, autistic people are seven times more likely to die by suicide than the general population and may struggle to engage verbally with others in times of crisis, particularly over the telephone. Are you confident that the services you offer are accessible to autistic people?

- There is growing evidence that autistic people account for a harrowing proportion of all deaths by suicide. Do you agree that autistic people should be a key focus of the Knowledge Into Action group proposed in the Draft Suicide Prevention Action Plan?

- Are you aware of any suicide prevention services/strategies that have been tested or developed with autistic people?

References