

Report to: **Audit, Best Value and Community Services Scrutiny Committee**  
Date: **17 March 2015**  
By: **Acting Director of Public Health**  
Title of report: **Suicide Prevention: Beachy Head Infrastructure Report Findings**  
Purpose of report: **To update the Scrutiny Committee on the findings of the Beachy Head infrastructure report and how the findings will be taken forward.**

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**RECOMMENDATION: The Committee is recommended to consider and note this report.**

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## **1. Background**

1.1 As a consequence of the complexity of changes in responsibility across health services and local authorities there was some funds in the 2013/14 Public Health grant which were unallocated. East Sussex Public Health Group agreed that this resource be allocated, through a business case process, to one-off interventions which would create or support a step-change in addressing public health outcomes, i.e., where East Sussex is performing significantly worse against the Public Health Outcomes Framework indicators than other areas.

1.2 The following four projects subsequently received funding: Addressing Obesity, Tobacco Free East Sussex, Safer Streets, and Suicide Prevention.

1.3 Members received an overview of each project on 9 January 2014 and the summary is copied as Appendix A. On 16 December 2014, members received an update on progress in relation to each of the four projects.

1.4 This report presents the findings of the infrastructure report commissioned for Beachy Head. It outlines the report recommendations, the challenges and proposals on how this needs to be taken forward.

## **2. Introduction**

2.1 The suicide rate in East Sussex is significantly worse than the rate for England and has been for many years. Of the East Sussex residents who took their own lives between 2004-2013, 13% did so by jumping from Beachy Head. Nationally, jumping from a height is one of the least common methods of suicide, accounting for only around 3% of suicides. This suggests that East Sussex residents are several times more likely than people elsewhere in England to choose jumping from a height as a method of suicide, and that they are influenced in their choice of method by the availability of Beachy Head and its reputation as a suicide site. 2.2 In the 10 years 2004-2013, there were 221 recorded suicides at Beachy Head, an average of 22 per year or 1-2 per month. Data recorded by both HM Coastguard and Beachy Head Chaplaincy Team indicate that the figure rose to 34 in 2014. Nearly three-quarters (72%) of the individuals who took their lives at Beachy Head during this period were not resident in East Sussex. This represents an exceptionally high level of 'suicide tourism', a phenomenon which is particularly associated with suicide by jumping from a height. It places a very heavy burden on East Sussex, which already has a suicide rate among its resident population that is well above the national average.

2.3 The suicide prevention project is composed of five elements as detailed in Appendix A. One of the elements is focused on commissioning an infrastructure assessment of the Beachy Head area to inform potential developments in the area as restricting access to the means of suicide is an established method of suicide prevention. It buys time, thwarting impulsive acts and giving individuals a chance to reconsider, as well as increasing the chances of some form of help reaching

them. This is an action that is recommended by national experts on suicide hotspots. 2.4 The purpose of the assessment was to produce a report setting out what is the existing accessibility to the cliff edge and any infrastructure or other changes that could be made. The report was extended to include bringing together existing knowledge about Beachy Head, focusing on both the 'hard' infrastructure (e.g., access routes, parking, signage) and the 'soft' infrastructure (e.g., human resources, land management arrangements), making recommendations and proposing a way forward. 2.5 The report has implications for a number of agencies and agreeing a common way forward will be key to developing a strategy that is agreed and owned by all.

### **3. Findings of the Infrastructure Assessment Report**

#### **3.1 Access**

One of the main factors contributing to Beachy Head's frequent use as a suicide site is its accessibility. There are a number of ways in which suicidal individuals can reach the site. Little is known about their actual transport patterns, since no agency routinely captures data on the method of travel used by deceased individuals.

The area between Beachy Head Road and the sea is designated open access land, over which the public has a right to roam freely without having to use paths. The cliff edge is for the most part unfenced. The practice of loitering at the edge, together with the fragile nature of the chalk, has given rise to a number of well-worn and sunken areas, where those contemplating suicide can crouch or sit hidden from view before jumping. These are colloquially known among the emergency services as 'launch pads'.

Data supplied by HM Coastguard service suggests that suicidal jumps are concentrated around the red and white lighthouse. According to these data, nearly half of all jumps (45%) occur directly either side of the lighthouse, and 75-80% between the lighthouse and the area in front of the Beachy Head Inn.

#### **3.2 Opportunities for human intervention and for help-seeking**

Suicide prevention at Beachy Head currently relies very heavily on the services of a team of Christian volunteers, whose continued presence is dependent on charitable giving. Sussex Police, working in tandem with Sussex Partnership NHS Foundation Trust through the Street Triage pilot scheme, HM Coastguard Service and the other emergency services respond to incidents at the site, but do not maintain a constant presence at the cliffs.

There is currently no electronic surveillance in any part of the site, apart from a commercial system in the Beachy Head Inn's own car park. There is one large Samaritans signboard by the main car park and various Samaritans stickers. There is one public phone box beside the main car park; mobile phone signals are not consistently available in the car parks and laybys.

#### **3.3 Images of the site as a suicide hotspot**

Private memorials and floral tributes to those who have lost their lives are numerous and are distributed right across the site, with a concentration of commemorative crosses in one particular spot.

There is very strong evidence that reporting of suicidal acts, particularly when photographs are included and details given about the method and location, has the potential to trigger further acts at the same site and using the same method.

### **4. Summary of Report Recommendations**

4.1 A summary of the report recommendations are set out in the table below in terms of what should be done immediately and what should be done in the longer term.

Access to and lethality of the site	
Issues	Recommendations
<ul style="list-style-type: none"> <li>• Vehicular access to the site appears to increase likelihood of its being used for suicide</li> <li>• Proximity of road and unobserved laybys to cliff edge</li> <li>• No current agreements with taxi drivers to identify and report vulnerable individuals</li> <li>• Redundant fencing and lack of clear signage at cliff edge is an issue</li> </ul>	<p><u>Immediate-term:</u></p> <p>---</p> <ul style="list-style-type: none"> <li>• Conduct a one- to two-year trial of closure of selected car parking areas, supported by surveillance (see below), and gather evidence to inform further planning.</li> <li>• As well as reviewing/renewing specific protocols, strenuous efforts should be made to engage taxi companies in a broader 'suicide-safer community' agenda.</li> <li>• Taxi drivers should be offered ASIST or safeTALK training as part of the above and encouraged to take a pledge to help prevent suicides.</li> <li>• Consideration should be given to the feasibility of implementing a policy locally of 'No taxis to Beachy Head after dark'.</li> <li>• Bus drivers should be involved in a broader 'suicide-safer community' initiative and offered ASIST or safeTALK training.</li> <li>• Inter-agency discussions regarding the acceptability of a continuous boundary or minimally invasive fence, together with clearly worded signs, should be begun as a matter of priority.</li> <li>• Innovative and environmentally-sensitive design solutions should be sought .</li> </ul> <p><u>Longer-term:</u></p> <ul style="list-style-type: none"> <li>• As part of a long-term vision, serious consideration should be given to the possibility of restricting vehicular access to the site as a whole.</li> </ul>

## Opportunities for human intervention at the site

Issues	Recommendations
<ul style="list-style-type: none"> <li>• Concerns expressed about the potential for BHCT to attract vulnerable individuals to the site</li> <li>• No secular on-site provision</li> <li>• Lack of surveillance system</li> </ul>	<p><u>Immediate-term:</u></p> <ul style="list-style-type: none"> <li>• Notwithstanding its need to fundraise, BHCT should give urgent and serious consideration to lowering its online profile, as a precaution against attracting vulnerable individuals to the site.</li> <li>• The proposed secondment of a mental health worker to work with BHCT should be vigorously pursued.</li> <li>• Whilst the cliff edge remains unsecured, serious consideration should be given to a low-key community policing initiative.</li> <li>• Serious consideration should be given to the installation of a bespoke electronic surveillance system using minimally-invasive technology.</li> <li>• A visit from the international security expert who designed the surveillance system for Gap Park should be arranged, to advise on what might be possible at Beachy Head, taking into account the topography and environmental constraints.</li> </ul> <p><u>Longer-term:</u></p> <ul style="list-style-type: none"> <li>• As part of a long-term vision, consideration should be given to reinstating the mounted Downs Patrol.</li> </ul>

## Opportunities for help seeking at the site

Issues	Recommendations
<ul style="list-style-type: none"> <li>• Samaritans signs unclear as to call charges</li> <li>• Insensitive placing of signs</li> <li>• Very limited phone provision and inconsistent mobile coverage</li> </ul>	<p><u>Immediate-term:</u></p> <ul style="list-style-type: none"> <li>• A clear indication of Samaritans' call charging arrangements should be provided.</li> <li>• Urgent consideration should be given to the provision of a free phone number.</li> <li>• The placing of Samaritans signs on refuse bins should be reconsidered from a psychological point of view, as it may give a subliminal message to those who are in despair that the refuse bin is where they themselves belong.</li> <li>• Immediate consideration should be given to the installation of free emergency telephones or intercoms that are linked directly to Samaritans and the police.</li> </ul>

The image of the site as a 'suicide hotspot'	
Issues	Recommendations
<ul style="list-style-type: none"> <li>Private memorials perpetuate the "Cliffs of Despair" image and may encourage people to jump</li> </ul>	<p><u>Immediate-term:</u></p> <ul style="list-style-type: none"> <li>Discussions with coroners' offices and bereavement services should begin, with a view to strongly discouraging the practice of installing private memorials.</li> <li>Serious consideration should be given to whether existing memorials could be safely and sensitively removed.</li> <li>Discussions should be initiated with Grassroots in Brighton regarding a 'suicide-safer community' initiative, including the idea of remarketing Beachy Head locally as the "Cliffs of Hope".</li> </ul>

## 5. Taking the Findings Forward

### 5.1 Barriers to Progress

There are two major barriers to progress in terms of reducing the number of lives that are lost at this site. The first relates to the site itself and the second to the science of suicide prevention.

*The site:* Beachy Head poses challenges for suicide prevention unlike any other known site, in terms of its vastness, the wide-open nature of its downland, its international importance as a natural landscape and a wildlife habitat and its value to the local community as a recreational space and source of tourist revenue.

*The science:* Suicide prevention is a young science, where results are preliminary and definitive evidence is lacking. Recommendations therefore represent an approach based on our understanding of suicidal behaviour and the experience of those involved in similar projects elsewhere, which have not yet been evaluated.

### 5.2 Developing a Suicide Prevention Strategy for Beachy Head

The report puts forward the following components to inform a draft suicide prevention strategy for Beachy Head:

#### *Physical measures:*

- One main eastern and one main western car park, with no parking anywhere else on Beachy Head Road
- A smart surveillance and early-alert system in each of the car parks, possibly extending to adjacent paths and trails and areas of downland
- A clear cliff-edge boundary, reinforced by a virtual fence
- Free emergency telephones connected directly to Samaritans and police
- Elsewhere, Samaritans signs displaying free phone number
- No memorials anywhere on the site

#### *Human measures:*

- Community police patrol at site, and a mental health worker to support BHCT

- Alert and skilled transport providers and other on-site workers
- A whole-community commitment to suicide prevention, with interventions skills training available to all.

### 5.3 Collective Resolve

A number of agencies and public bodies have an important stake in Beachy Head. They are divided, however, between those whose primary purpose is to conserve the natural landscape and promote public enjoyment of it, and those who bear responsibility for preventing the use of the site for acts of suicide. Any plans for the site that are driven by the latter will not succeed without due regard for the purposes of the former, nor without their wholehearted support.

5.4 The process for considering the findings and recommendations of the report, deciding on next steps and the actions to take forward will be agreed with partners.

5.5 Members will receive an update in six months.

## 6. **Recommendations**

6.1 The Committee is recommended to note and consider this report.

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