



HSE National Office for Suicide Prevention  
**Grant Scheme for Collaborative Research Projects**

# Lived Lives Revisited:

An enduring Art - Science Suicide intervention project in priority community groups, including young people, frontline community mental health workers, primary care workers and 1st Responders (An Garda Síochána).

**AUTHORS:**

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Connecting for Life

## PROJECT TITLE

Lived Lives Revisited: An enduring Art - Science Suicide intervention project in priority community groups, including young people, frontline community mental health workers, primary care workers and 1st Responders (An Garda Síochána). While the coroner plays an essential role in the processes surrounding suicide death, they are not routinely included in research studies. (Fig. 1).

## KEY MESSAGES

- There was intense personal and interpersonal engagement by priority groups with positive endorsement of the Lived Lives
- *“Touch the artworks, touch the story”* is a powerful metaphor for addressing stigma around suicide, challenging the “do not touch” of the art gallery alongside the stories of suicide as described by President Mary McAleese when she visited the Lost Portrait Gallery in 2010 (Fig. 2)
- Young people responded with an active and dynamic creative response with ease within the project, and which they brought home with them. The young people’s engagement fostered insight, support and resilience, this was demonstrated in their construction of a creative response which included inscriptions related to their positive self-esteem (Fig. 3)
- Participants from An Garda Síochána shared observations and emotions around their experience of suicide within the safety of the Lived Lives project and support team. Many of the Gardaí in attendance were unaware of the 4-fold elevated risk of suicide amongst Gardaí, with stigma and macho culture being common themes, as well as questioning *“who cares for the carers”*. Some Gardaí were less inclined to engage with current suicide prevention tools (such as Safetalk and ASIST), more gatekeeper training and less about their own feelings. A bespoke model of training around suicide and its aftermath will include a webinar designed with modern educational resources.



Figure 1: *Lived Lives: 21g* (Dr Seamus McGuinness, Letterkenny 2013)



Figure 2: *21g: Creative Response* (Dáinne Nic Aoidh)



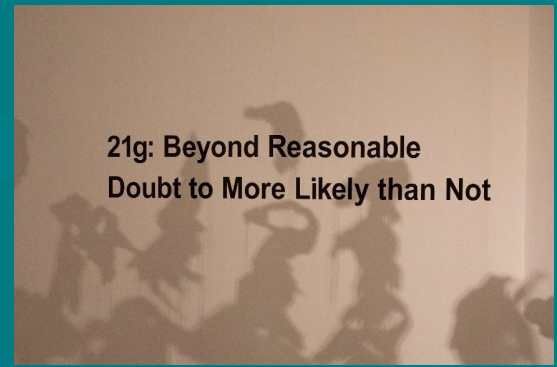
Figure 3: *Lived Lives Archive Rooms: A Moment of Solace and Sadness*



Figure 4: *Lived Lives Revisited: Pandemic* (Letterkenny, March 2022)

*This research project has been funded by the HSE National Office for Suicide Prevention through the Grant Scheme for Collaborative Research Projects. This briefing represents the independent research carried out by the authors and the content and views expressed herein are of the authors of the research only.*

- A senior member of An Garda Síochána provided brief and compelling feedback as follows: *“I was talking to some of the Gardaí who attended the exhibition and as expected they were blown away by it – they found it really useful and powerful. I know one of my staff spoke freely about her own experience with mental health which was fantastic for her and the rest of the lads there” ... I think it should be rolled out to the rest of the country – I have no doubt members of An Garda Síochána across the country would definitely benefit from it as persons who deal with suicide on a daily basis”.*



**Figure 5:** 21g: The Irish Probable Suicide Study (November 2022): Beyond Reasonable Doubt vs More Likely than Not

- The role of the Coroner around death by suicide is complex legally and emotionally, being an important point of reference for suicide-bereaved families. An updated threshold verdict of death by suicide being *“More likely than not”* vs *“Beyond reasonable doubt”* may assist Coroners in their deliberations (Fig. 4).
- Community mental health professionals encounter suicide and its aftermath on a daily basis. Supervision and support is advocated. (Fig 5). A webinar was piloted with Primary care trainees as part of the UCD Masters in Mental Health. Positive feedback was received:
  - “It’s good to see the impact... Acknowledging the primary care team that may be impacted is nice to see and feels inclusive in the process”*
  - “I think it handled very nicely a situation and conversations we are not normally comfortable in facing”*
  - “It helped remove some of the surrounding stigma and shame that goes with suicide”*

## AUTHORS

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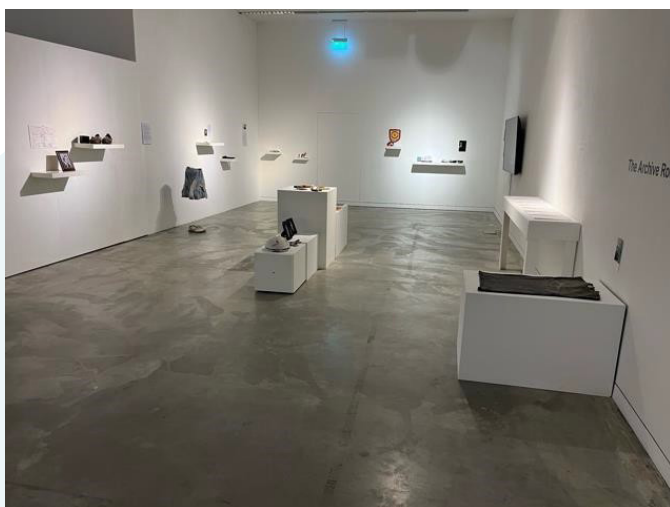
Dr Suzy Fitzgerald, Consultant Microbiologist, St Vincent’s University Hospital



## CONTEXT AND BACKGROUND

Suicide is a significant public health concern, which impacts on health outcomes. Despite this, there is still a knowledge vacuum in relation to this loss of life. *Lived Lives* is a unique interdisciplinary art-science research and intervention project around stigma and suicide. 104 Suicide-bereaved families throughout Ireland donated stories, and 63 of these also donated images and objects associated with the lived life of a loved one lost to suicide to the Science – Art research team, with the research engagement mostly taking place around kitchen tables as opposed to more institutional type settings. This action and the creation of artworks from these donations, restored identity to the deceased, foregrounding the lived life as opposed to the manner of their death.

The *Lived Lives project* commenced in 2006, and came to fruition in 2010, and manifested in Letterkenny Cultural Centre Donegal in 2013 with significant community engagement ([www.Livedlivesproject.com](http://www.Livedlivesproject.com), Suicide in Ireland Survey). The project subsequently returned to Letterkenny in March 2022 despite several significant Covid-related obstacles, with a particular focus on priority groups (Fig. 6 & 7).



**Figure 6:** *Lived Lives Revisited: Archive Room*  
(Dr Seamus McGuinness, March 2022)

## AIM/OBJECTIVE(S)

- Develop psycho-education learning resources from *Lived Lives Revisited* that will be piloted in a learning setting for priority groups, including Primary Care workers (Masters in Mental Health – UCD School of Medicine) and An Garda Síochána.
- Impacts will include: Enhancing cultural enrichment; influencing policy; scientific advances across and within disciplines; changing public opinion; informing debate.



**Figure 7:** *Lost Portrait Gallery: "Touch the Artworks, Touch the Story"*

## METHODOLOGY

*Lived Lives Revisited* was installed in Letterkenny Cultural Centre for 4 days on March 22nd-25th (2022). A purposive expert voluntary sample of specific priority groups were invited to participate. A member of the team visited secondary schools in the Donegal region to educate pupils and teachers on the Lived Lives project. Similarly Senior Gardai were introduced to the project in advance and with the opportunity for fellow Gardai to participate in March. Community mental health professionals were invited via similar methods through voluntary agencies (e.g. Rape Crisis Centre and Pieta) as well as the local coroner.

In each group, verbal informed consent was obtained prior to the Arts - Science mediated walk and talk “*tour*” of the artworks, which was audio recorded. This was followed by a conversation and feedback around the topic of the impact of suicide and loss in the community. The impact of the Covid pandemic had a particular focus. (Fig. 7).

- Following informed consent, the proceedings were audio- recorded for the duration of the engagement, and were subsequently transcribed for quantitative and qualitative analysis taking account of positionality (Fig. 8 & 9).
- The Garda Síochána, county coroner and mental health professionals all completed an anonymous, semi structured questionnaire related to Lived Lives Revisited.

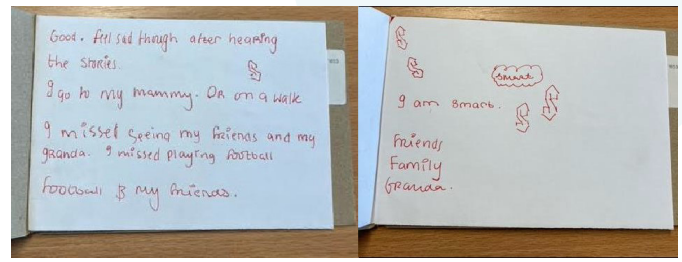


Figure 8: “Journaling”

### **21g:** “Beyond reasonable doubt versus more likely than not”:

Shirt collars, each weighing precisely 21grams the mythical weight of the soul were suspended by invisible thread, at varying heights to reflect the lives lost to suicide. An additional 20 percent of collars were included on this occasion applying the “more likely than not” variable versus the traditional ‘beyond reasonable doubt’. Participants were invited to place their finger prints on the shirt collars, as a metaphor to acknowledge the mark of stigma in suicide. As with previous installations, sixty-six shirt collars had a wagon wheel embroidered to represent the particular increased suicide risk borne by the travelling community.

### **The Archive Rooms:** “Looking In”:

In this iteration of the Lived Lives Project, belongings donated by 34 families of the deceased who died by suicide were installed around the gallery, ensuring that each story is represented equally. Participants were invited to engage with the artworks.

### **Lost Portrait Gallery:** “Touch the tapestry, touch the story”:

The Lost Portrait Gallery consists of 39 jacquard (tapestry) portraits of young suicide deceased from the Lived Lives families. These jacquards are woven, worked from donations of snapshots and memorial cards given by the families and friends to the Lived Lives Archive. They are a photographic representation in cloth of the deceased. Each jacquard measures 36cm x 22cm

and is installed at exactly the height of the deceased individual, with the first name and age of the deceased woven below the portrait. The portraits are installed in a round room chronologically according to age, with a few interruptions- see Figure 2.

Following the visit to the Lost Portrait Gallery, participants were invited to revisit the Archive Rooms before proceeding to a collective conversation beneath 21g, which were audio taped and later transcribed. A semi structured questionnaire was completed by An Garda Síochána, the county coroner, community mental health workers and the researchers and later analysed.

#### **Transition Year Students: Creative Response:**

Following a conversation under 21g, the Transition year students participated in a creative response to Lived Lives Revisited. This involved building mobile wooden structures that contained inscriptions of their positive feelings. Students were given a series of reflective prompts which they could include in a booklet provided and were given the option to bring these home as well as their artworks once the exhibition was completed (Figure 9).

A **Rapid Review** of suicide prevention programmes for 1st responders (An Garda Síochána) was conducted in parallel. Using the PRISMA technique a search of the peer review publications was performed. Search engines included Google scholar and PUBMED, as well as grey literature and unpublished literature. Search words included “suicide first responder” “suicide police” “suicide gardai” “suicide prevention first responder” “suicide prevention police” “suicide prevention gardai” “suicide and mental health police” “mental health and suicide gardai”. Duplicates were removed and then relevant titles were extracted with abstracts being read by two reviewers.

95 papers were identified for content with a final 16 papers included in the rapid review.

**Analysis:** Quantitative analysis: Data collected by paper questionnaire was analysed using quantitative analysis. Key demographics: age, gender and occupation were included.

**Qualitative Analysis:** Data collected was analysed using a mixed method, grounded theory approach. Themes were identified and extracted using a coding sequence by two researchers. Key findings, phrases and quotations were highlighted and formed the narrative piece.

**Positionality:** Positionality of the researcher was informed by daily journal entries, with reflections on personal thoughts and feelings around Lived Lives Revisited. The researchers participated in the conversation beneath 21g and also completed a semi-questionnaire.



**Figure 9:** *Lived Lives Revisited: Positionality I*  
(Dr Sally McKey, Letterkenny March 2022)

## RESULTS / FINDINGS

In a search of the peer review publications, including Google Scholar and PubMed, using the PRISMA model of suicide prevention strategies in 1st Responders, 2123 studies were identified. Allowing for relevant titles (n=263) and removal of duplicates (n=95) 16 studies were included in the synthesis.

All studies identified in the rapid review (n=16) elevated rates of mental illness and risk of suicide. A systematic and meta-analysis reviewed prevalence and risk factors for mental health issues in 272,463 police officers across 24 countries. Depression was estimated at 14.6%, suicidal ideation 8.5% with generalised anxiety disorder at 9.65% and PTSD at 14.2% (Syed, Ashwick, Schlosser, et al 2020). The strongest risk factor for depression and suicidal ideation was higher occupational stress, whilst for PTSD it was occupational stress and avoidant coping strategies.

Themes identified included tough resilient vs. weak help-seeking; 'suck it up' culture vs 'canteen culture'. Little trust in 'confidentiality' where disclosure can be considered as career destroying. Derogatory terms such as 'land of broken toys' and 'land of broken biscuits' occur throughout with macho, mental toughness a common thread.

The key components of the prevention programmes included counselling, wellness (mindfulness), physical activity and peer support groups/ mentorship programmes. Some programmes were mandatory whilst others were voluntary. The majority discussed engagement and barriers to participation with stigma featuring as a negative indicator.

Over 4 days, 120 visitors attended and participated in Lived Lives Revisited, sharing their feelings, emotions and feedback. 80 transition year students (TY), 25 members of An Garda Síochána, 14 community mental health professionals, and the County Coroner

(Dr. Denis McCauley). There were no adverse reactions reported.

**Transition Year Students:** Following a conversation under 21g, transition year student groups also participated in a Creative Response to engage with Lived Lives, under the guidance of Art Therapist - Dáinne Nic Aoidh). Their artworks contained their thoughts and feelings around Lived Lives as well as personal reflections of qualities and traits about themselves e.g. "loyal" "kind" "resilient" "smart" "curious". When asked about what they missed during covid one student replied " I missed seeing my friends and my granda. I missed playing football" "Live music". When asked who they speak to when feeling sad, responses included " I go to my mammy... Or on a walk" "The sound of music and nature". Most students chose to take their booklets home, with some leaving them behind.



**Figure 10:** *Lived Lives Revisited Creative Response: Positionality II* (Dáinne Nic Aoidh & Dr Seamus McGuinness, Letterkenny March 2022)



**An Garda Síochána:** During the Lived Lives Exhibition participants from An Garda Síochána shared observations and emotions around their experience of suicide within the safety of the Lived Lives project and support team. Many of the Gardaí in attendance were unaware of the 4-fold elevated risk of suicide amongst Gardaí, with stigma and macho culture being common themes, as well as questioning “who cares for the carers”. Some Gardaí were less inclined to engage with current suicide prevention tools (such as Safetalk and ASIST).

Themes included: “duty”, “stigma” “fragility” “resilience” “family” “my feelings”.

A senior member of An Garda Síochána provided brief and compelling feedback as follows: *“I was talking to some of the Gardaí who attended the exhibition and as expected they were blown away by it – they found it really useful and powerful. I know one of my staff spoke freely about her own experience with mental health which was fantastic for her and the rest of the lads there” ... I think it should be rolled out to the rest of the country*

*I have no doubt members of An Garda Síochána across the country would definitely benefit from it as persons who deal with suicide on a daily basis”.*

Using both the review of literature and qualitative analysis, Five points of suicide-related family engagements between the Gardaí and the bereaved were identified:

- Attending the scene
- Delivering bad news
- Identifying the body in the mortuary
- Providing evidence in the Coroners court
- Completion of the Form 104

**Community Mental Health Professionals:** 12 Community Mental Health professionals participated in the Lived Lives Revisited project. The majority were female (n=8) with two male participants (n=3), with n=1 unspecified. All completed a semi-structured questionnaire. Age ranged from 31-70years old with participants occupations ranging from therapist, counsellor and administrative roles, mostly in the voluntary sector. Most participants had experienced some mental health difficulties at different stages in their profession. Grounded theory analysis yielded a variety of emotional responses to suicide and its aftermath. Themes included “supervision” “burnout” “risk assessment” “hope” “despair” “vicarious trauma” “deliberate self-harm”. One participant stated: “Today I expressed my own journey and acceptance of my own journey with suicidal thoughts and profoundly grateful that I am here living my life” another expressed “I was very conscious of what I didn’t want to feel” “I couldn’t look away”. Many expressed frustrations with the current system, particularly in relation to emergency department assessments “come back when you’re really bad, you’re not bad enough” another stating “this is sad”.

The coroner engaged with the Lived Lives Project within their role as the county coroner, primary care practitioner and member of the public and completed a semi-structured questionnaire as well as the mediated walk and talk tour of the artworks, with ongoing analysis and results to follow.



## RECOMMENDATIONS

- Young people responded with an active and dynamic creative response with ease within the project, and which they brought home with them. The young people's engagement fostered insight, support and resilience, this was demonstrated in their construction of a creative response which included inscriptions related to their positive self-esteem
- 'Who cares for the carer' or 'help for the helper'. This year marked An Garda Síochána centenary '100 years of keeping people safe' which begs the question 100 years on who keeps them safe? This theme also featured in responses amongst gardai throughout their Lived Lives Revisited engagement.
- Community mental health professionals encounter suicide and its aftermath on a daily basis. Supervision and support is advocated.
- In terms of Gardai programmes, specific employee assistance services are in place to support Gardaí at risk (peer support, dedicated help line, 8 paid counselling sessions to name some). However more research is needed to understand the specific themes and defence mechanisms which create barriers and impediments for intervention and care in this at risk group.
- Novel personal, interpersonal, community and society programmes such as Lived Lives that can moderate stigma are needed to best engage with this priority group. Targeted interventions such as CBT may work, where 'some' is substantially better than 'none'.
- The five points of engagements with bereaved families are moments of stress and trauma for Gardaí which when recognised may provide opportunities for intervention and support (For example using the analogy of putting on ones' own mask before helping others).



Figure 11: *Curiosity and Companionship*

- Tailor made educational tools for priority groups about suicide through the experience of Lived Lives Revisited can lead to increased knowledge, understanding and ownership of feelings in response to death by suicide (Fig. 11).
- Rapid reviews can be used as a learning tool to enhance the knowledge around death by suicide in priority groups (e.g. the four-fold risk of death by suicide in An Garda Síochána).
- Community engaged learning encourages partnerships that can connect members of priority groups and forge collaborations between Art - Science - Education - Policy maker. More community, art-science projects such as Lived Lives can challenge stigma in a bespoke safe space.
- Listening to the voices of lived experience is an invaluable means of engaging priority groups to hear/ learn about death by suicide.
- Ongoing support from senior policy makers is needed to retain suicide intervention and prevention prominently on the national health agenda, and sustain research efforts towards new knowledge and understanding around Suicide in Ireland.

**Next Steps:** To develop a bespoke webinar (“An Garda Síochána 100 years on, who cares for the carer?”) in collaboration with the School of Education, University College Dublin. This will draw on the presentation delivered to 1st Responders, Letterkenny 2022 that can be further piloted and evaluated with members of An Garda Síochána, and analysed using a grounded theory approach (Fig. 12).



Figure 12: *Looking In*

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## LINKS / SUPPLEMENTARY MATERIALS

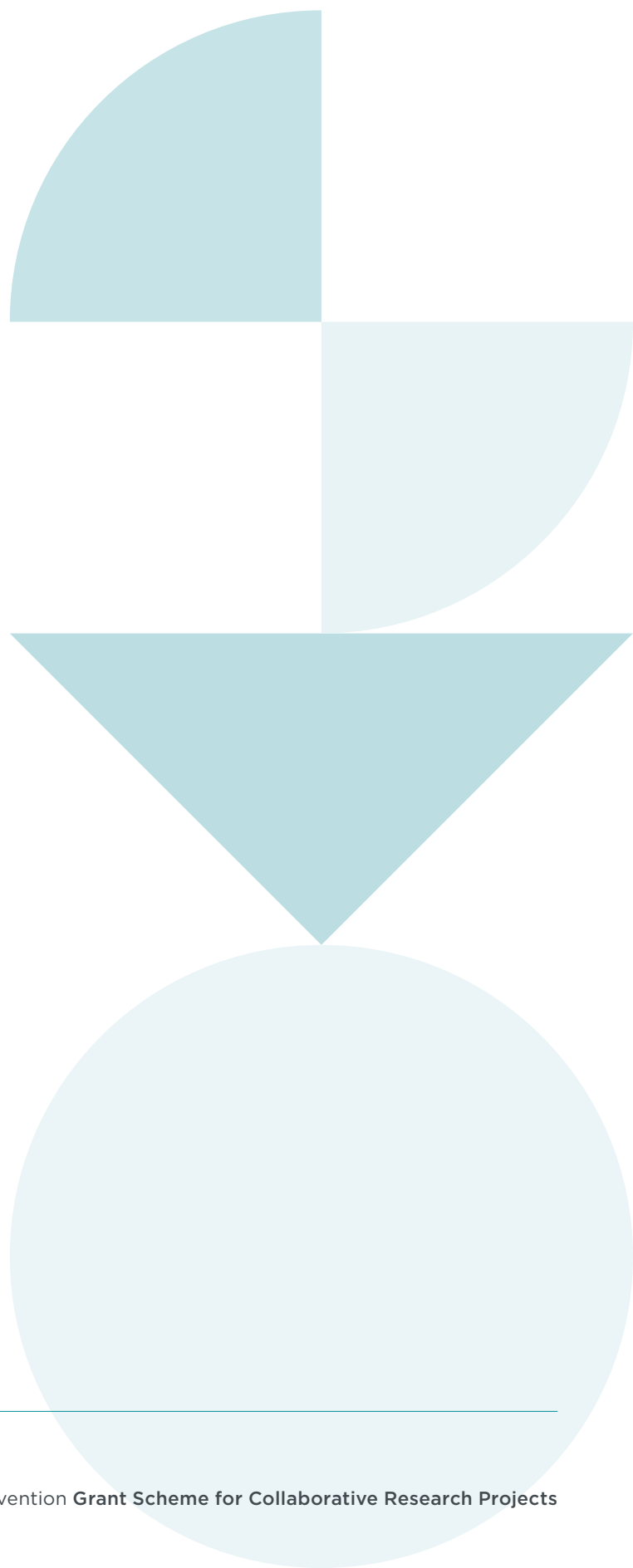
[https://www.3ts.ie/docs/default-source/research/suicide-in-ireland-survey-2003-2008-report.pdf?sfvrsn=7888e392\\_9](https://www.3ts.ie/docs/default-source/research/suicide-in-ireland-survey-2003-2008-report.pdf?sfvrsn=7888e392_9)

<https://www.livedlivesproject.com/>

Photographs by Leonie Ferry and other team members

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