



**Union of Students in Ireland**  
*Aontas na Mac Léinn in Éirinn*

# **Mental Health Resource Pack for Welfare Officers**

2023 - 2024

# Introduction

Student mental health is a key area for Welfare Officers. Many students fall into a priority group identified by Connecting for Life, the National Strategy to Reduce Suicide (2015 - 2024) by virtue of their age, which means that they are considered vulnerable to mental health problems and suicide.

Mental health can be a broad and complex area, but this resource pack is aimed at making this area of your remit as Welfare Officer a bit easier, by providing a one-stop-shop of many of the things you might need to know over the coming year.

USI, the Vice-President for Welfare and the Mental Health Programme Manager are all here to support you in your role. Please reach out if you need support during the year, and please try to engage with the meetings, consultations and national campaigns in order to help students feel supported and heard in their mental health needs.

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Vice President for Welfare

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Mental Health Programme Manager



## **Boundaries and Self-Care as a Welfare Officer.**

Being an SU officer is really important. Your role cannot be overstated or overestimated. As a Welfare Officer, you are likely to have a lot of casework, and some of that casework will be heavy and difficult. But this role, or any other role, is not worth you being swallowed up in, or compromising your health and wellbeing.

It's important to remember that in order to be the best version of yourself, you need to take care of yourself first to ensure that you can function to the best of your abilities.

Some key things that will help you in this include (but are not limited to the following):

- Ask for help, from your team, from USI, or from somewhere else if you need it. It's not a sign of weakness to need help. You aren't on your own, your part of a team. Lean into that.
- Take breaks, including your annual leave.
- Set boundaries – there are two types of boundaries, solid ones and flexible ones. Figure out what ones you are never prepared to compromise, and figure out which ones you are prepared to compromise on sometimes, and decide in advance what circumstances will determine whether you compromise or not. Be prepared for how you might feel if someone pushes against your boundaries, and practice standing firm on those you feel you need to for your own health. Some examples of boundaries could include not answering your phone after a certain time in the evening (or even turning it off), or generally not working on weekends, unless its an emergency or there's an event on.

## Boundaries and Self-Care as a Welfare Officer.

- Accept that you can't fix everyone and everything, even if you really want to. It's not your job to fix everything, and while feeling guilty and like you need to try harder are often natural ways to feel when we don't succeed, it doesn't mean that you are bad at your job.
- Engage in self-care. We have some tips around this on the USI mental health website.
- Get help for your mental health if and when you need it. Sometimes things you encounter in work may affect your mental health. Sometimes things will be stressful and it might be hard to cope. If you don't feel comfortable using the student counselling services that's ok. If your SU doesn't provide mental health help, make use of the organisations that you signpost students to, they are there for you, too. We have a list of these organisations on the USI mental health website.



**Relevant resources  
mentioned:**

**USI website**

## USI Mental Health Mandates

Mandates passed at National Council related to mental health can also be found within the strategy, at the end of the section. These mandates are updated as required at <https://usi.ie/welfare-policy/>



**Relevant resources  
mentioned:**

**USI website**

## Other Important Documents: An Overview

The work of USI in mental health is related to some other strategies and documents, often at national level.

### **Connecting for Life, Ireland's National Strategy to Reduce Suicide:**

This is a national strategy with specified actions aimed at reducing suicide in Ireland.

Section 3 of this strategy aims: "To target approaches to reduce suicidal behaviour and improve mental health among priority groups", and particularly objective 3.3: "Enhance the supports for young people with mental health problems or vulnerable to suicide."

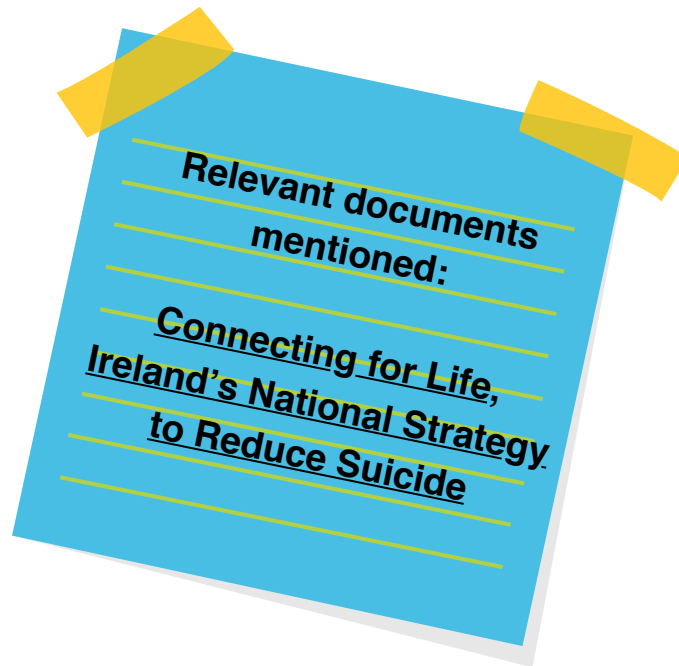
Action 3.3.3 states that HEA and NOSP should: "Work with the HSE to develop national guidance for higher education institutions in relation to suicide risk and critical incident response, thereby helping to address any gaps which may exist in the prevention of suicide in higher education." This had led to the creation of the Connecting for Life Working Group for higher education. USI VP for Welfare and the Mental Health Programme Manager both for part of this group and together the members of this group have put together a National Framework for Mental Health and Suicide Prevention in Third Level, which is due for publication in late 2020.

Section 7 of this strategy aims: "To improve surveillance, evaluation and high quality research relating to suicidal behaviour", and particularly objective 7.4: "Develop a national research and evaluation plan that supports innovation and is aimed at early identification of suicide risk, assessment, intervention and prevention"

## Other Important Documents: An Overview

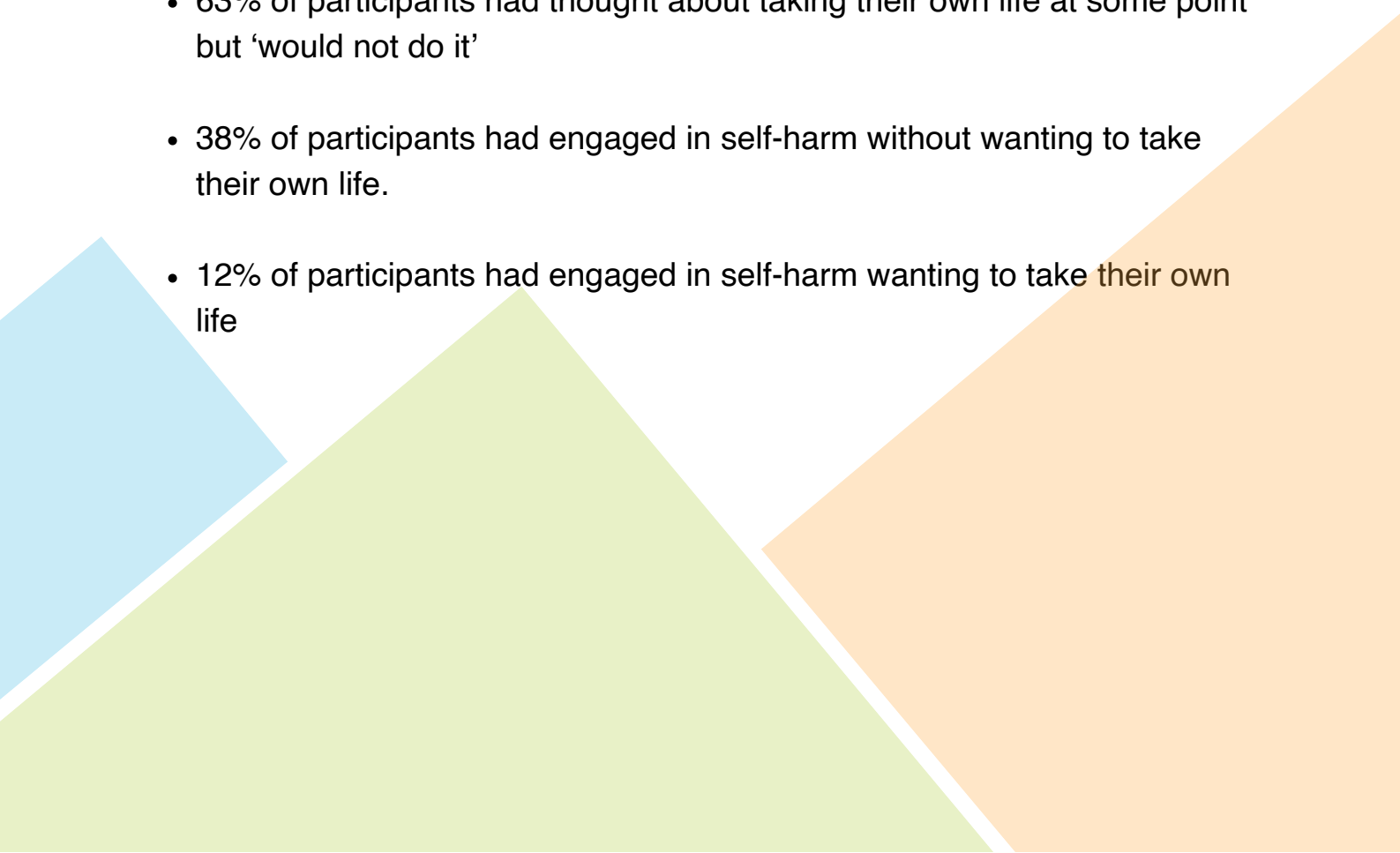
Action 7.4.2 states that HEA and NOSP should: “Support the co-ordination and streamlining of research completed by third-level institutions.” This will be the second goal of the Connecting for Life Working Group following publication of the National Framework for Mental Health and Suicide Prevention in Third Level.

Related to this action, in the HEA commitment list within the strategy, the HEA is to “Encourage the coordination of suicide-prevention initiatives and research across the higher education sector.”



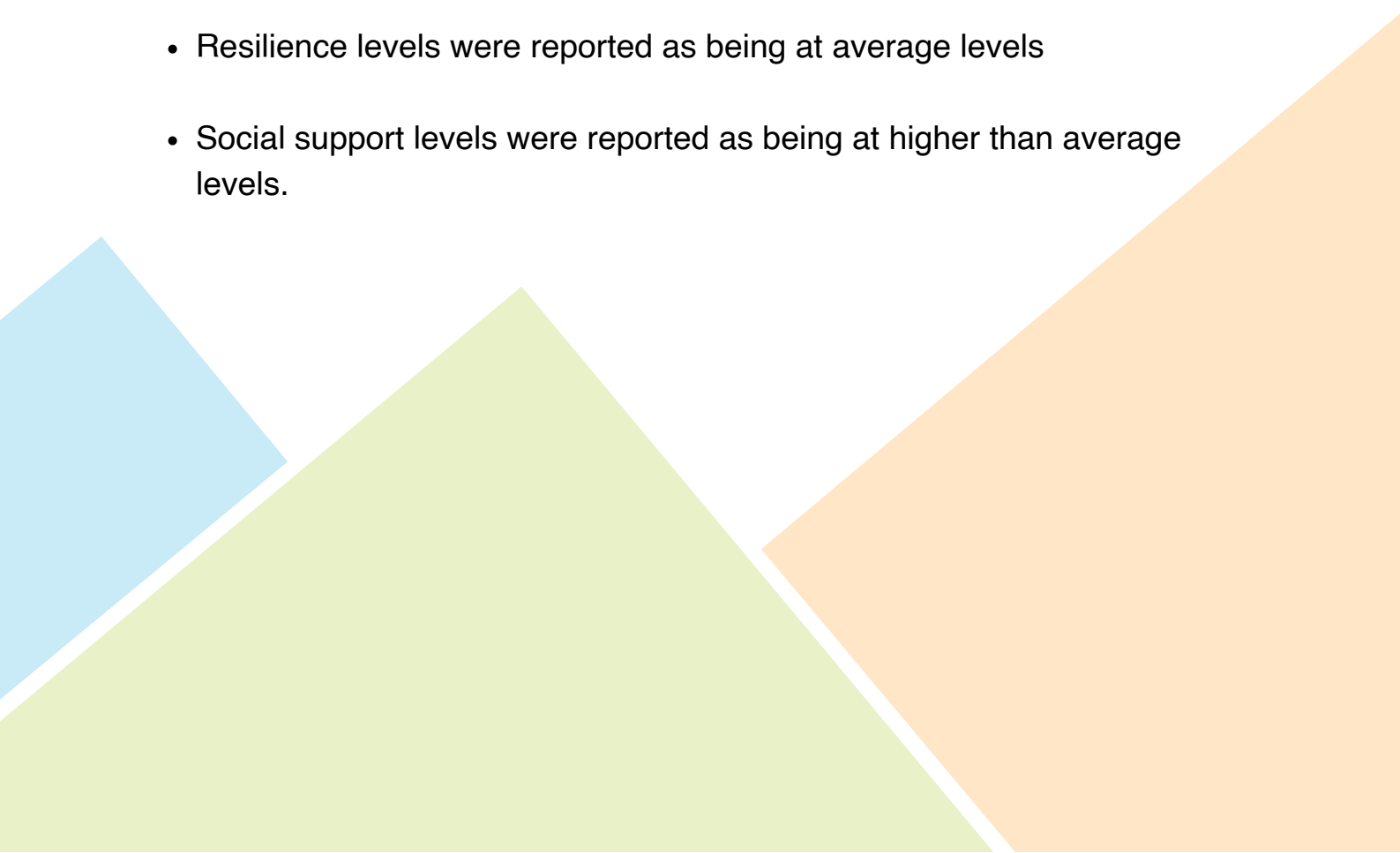
# My World Study 2

This was the second iteration of the My World Study carried out by Jigsaw and UCD. The first iteration was published in 2012, and the second was published in 2019. This study's participants included young adults who were not in third level education, but 96% of respondents were students. Key findings include:

- 58% of participants reported that they had been bullied
  - 68% reported college as their top stressor
  - 37% reported that they were often stressed by their current financial situation, and another 12% that they were highly stressed by it.
  - 11% of participants reported not coping well with problems. 56% of participants indicated friends were their main method of coping.
  - 23% of participants were severely or very severely depressed
  - 28% of participants were severely or very severely anxious
  - 63% of participants had thought about taking their own life at some point but 'would not do it'
  - 38% of participants had engaged in self-harm without wanting to take their own life.
  - 12% of participants had engaged in self-harm wanting to take their own life
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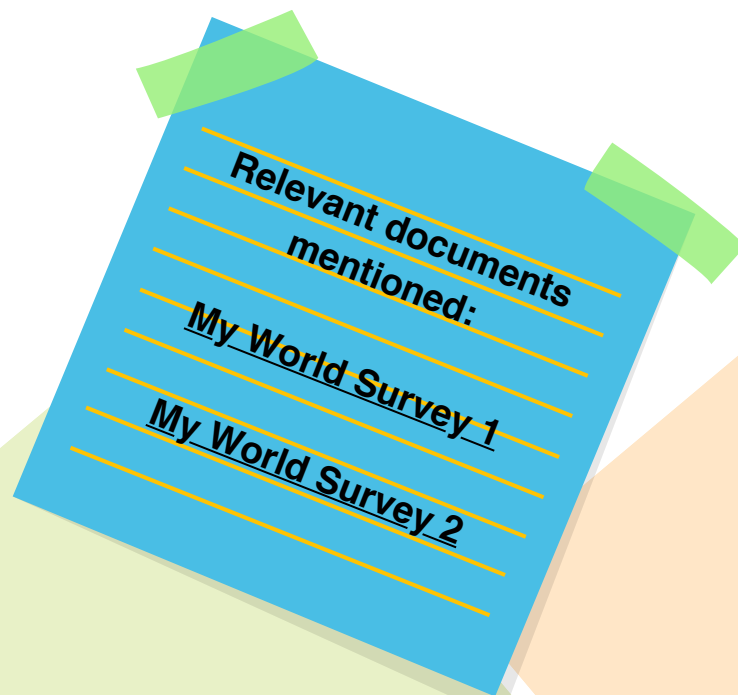


## My World Study 2

- 10% of participants reported having attempted to take their own life. 54% of these reported accessing help or support subsequent to attempting to take their own life, but 48% of those found it difficult or very difficult to access that help/support. 72% reported that once they did access it, the help/support was at least somewhat helpful
  - 71% reported having experienced at least one stressful life event, most commonly that someone close to them had died, conflict between parents, or moving house within Ireland
  - Self-esteem was reported as being at average levels
  - Optimism was reported as being slightly lower than average.
  - Life satisfaction was reported as being marginally higher than average
  - The coping strategies of problem-solving coping, support-focused coping and avoidance based coping were all reported to be used at below average levels.
  - Resilience levels were reported as being at average levels
  - Social support levels were reported as being at higher than average levels.
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## My World Study 2

- 76% of participants reporting having 'one good adult' in their lives in times of need, most commonly a friend, partner or parent. However 13% person said that this person was only available sometimes or irregularly.
- Sources of support were most commonly informal and most commonly consisted of friends, parents or online.
- If they had previously sought information, participants reported that this was most commonly from friends, parents, or a mental health professional
- 40% of participants reported not talking about their problems. Of those that would, they would most commonly talk to their friends or family
- 25% of participants indicated not seeking help even though they felt like they needed it, 27% indicated having problems but not feeling the need to seek help, and 26% of participants reported having problems and seeking help for them.



# USI Student Mental Health Report

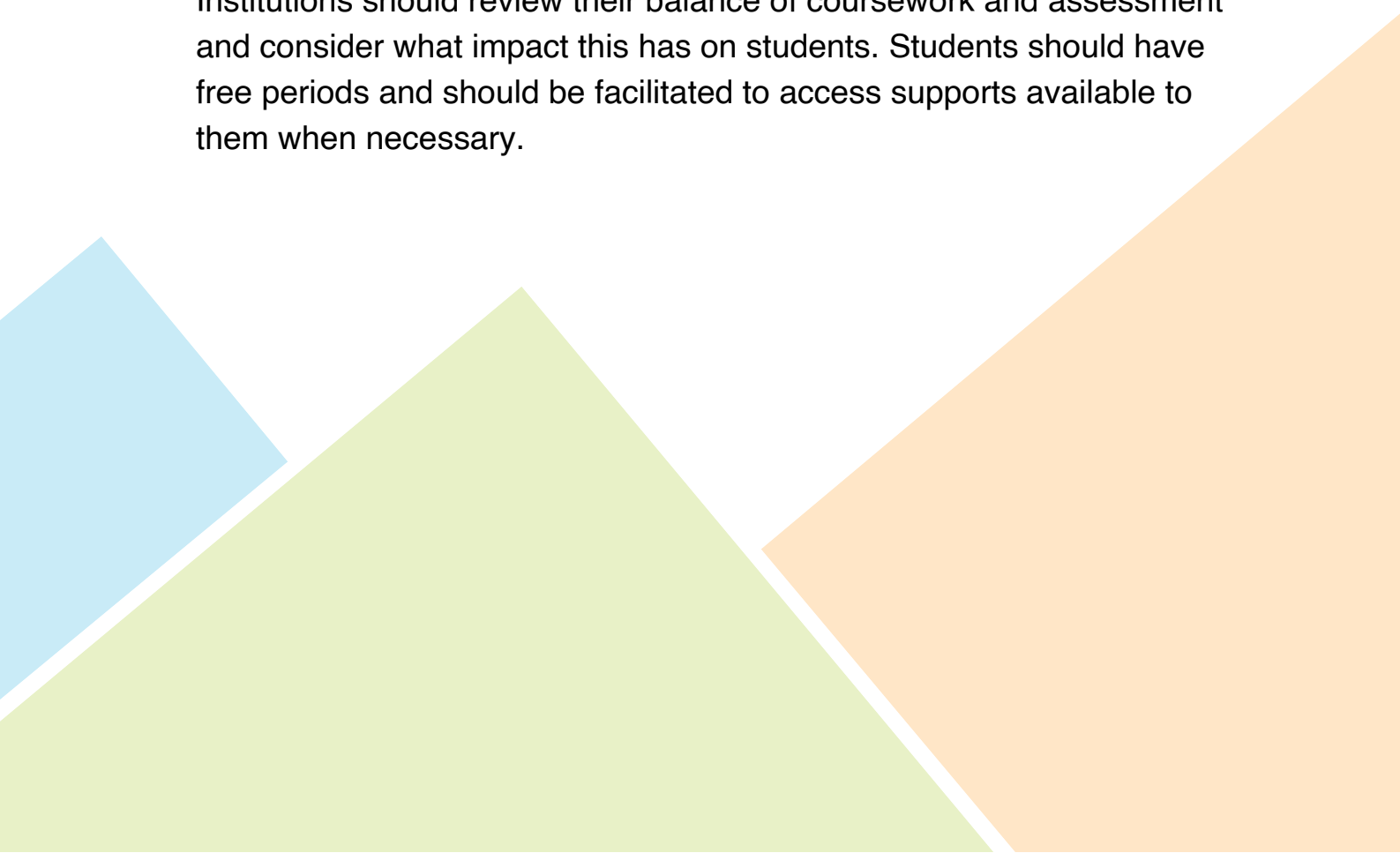
This was a report on a study undertaken by USI in 2018-2019 to explore mental health in third level students and related elements. Further analysis into this data is ongoing but the initial report was launched in August 2019.

Key findings include:

- 29.9% of respondents were extremely severely depressed
- 38.4% of respondents were extremely severely anxious
- 17.3% of respondents were extremely severely stressed
- 20.9% of respondents reported not having anyone to talk to about their mental health
- 30.3% of respondents reported that they had become aware of support services through their students' union

The recommendations from the report were:

Institutions should review their balance of coursework and assessment and consider what impact this has on students. Students should have free periods and should be facilitated to access supports available to them when necessary.



# USI Student Mental Health Report

Being involved in activities outside of coursework had a positive impact on students' mental health. The impact of exercise and being involved in sport was particularly evident and thus it is a recommendation that all students should have access to a free gym pass.

Students' unions should be seen as a key partner in student mental health. The Government should invest in students' unions' involvement in leading and coproduction on all aspects of student mental health.

Students' unions are the main provider of information on support services to students. It is important to ensure that students' unions have the correct and up-to-date information on signposting available to them.

The idea of creating a youth mental health service should be explored. There has been moves internationally and nationally (by Jigsaw, ages 12-25) to develop a 0-15 year health care model. This has the potential to be expanded into more acute health services and would mean that students would not move from child to adolescent services at a key time of transition for them, particularly around starting college and graduating.

The health services should allow for student fluidity in that they may be under one service during term-time and another over holiday periods. An e-health passport could be created to ensure continuity of care between services.



**Relevant documents  
mentioned:**

**USI Mental Health Report**  
**2019**

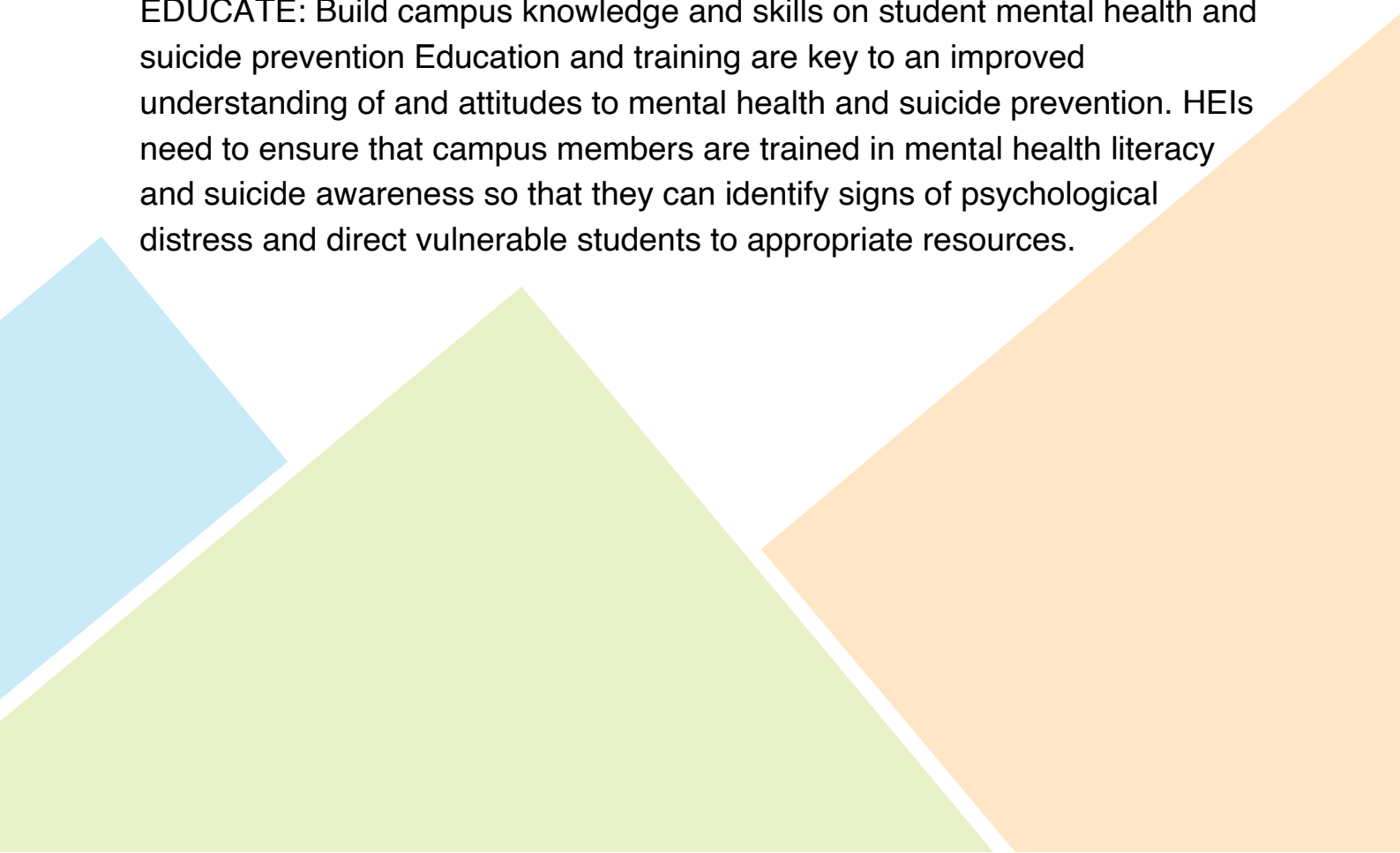
# National Student Mental Health and Suicide Prevention Framework

This framework is the first of its kind in Ireland and was published in October 2020. Its creation was guided by the members of the Connecting for Life working group and as a result it is a broad framework that centres students throughout. In summary, the framework is divided into nine themes:

**LEAD:** Build and support national and institutional strategies for student mental health. Improvements in student mental health and suicide prevention will only be effective if prioritised at a national, sectoral, and institutional levels – through policy and strategy, this is student-centred and championed by strong leadership.

**COLLABORATE:** Develop partnerships on campus and in the community with health services to support student mental health. HEIs need a co-creative, inclusive approach where students and staff are involved at every stage of the journey to improve mental health outcomes. Strong partnerships are embedded throughout the institution with health services, local and national authorities, and with NGOs and the wider community.

**EDUCATE:** Build campus knowledge and skills on student mental health and suicide prevention. Education and training are key to an improved understanding of and attitudes to mental health and suicide prevention. HEIs need to ensure that campus members are trained in mental health literacy and suicide awareness so that they can identify signs of psychological distress and direct vulnerable students to appropriate resources.



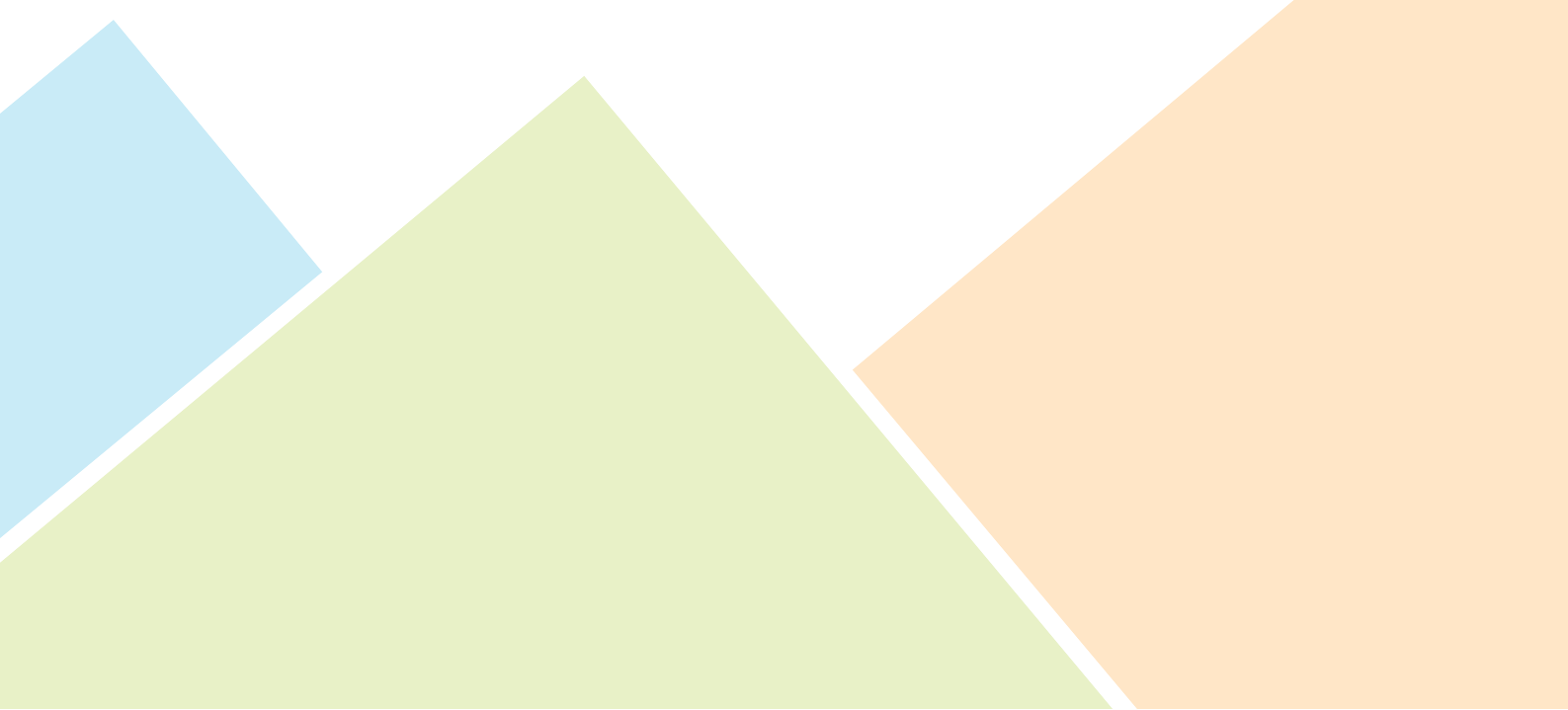
# National Student Mental Health and Suicide Prevention Framework

**Engage:** Create campus communities that are connected, safe, nurturing, inclusive and compassionate HEIs need to foster the development of student wellbeing through community connectedness, purpose, engagement and belonging. Institutional culture needs to reflect diversity, inclusivity and compassion.

**IDENTIFY:** Prioritise awareness training for all staff and students to enhance recognition and referral HEIs need to take action to identify students who are at risk of mental health problems as well as promoting mental health awareness for all students and all front facing staff.

**SUPPORT:** Provide students with safe, accessible and well-resourced mental health support HEIs must ensure that support services are adequately resourced, safe, inclusive, culturally appropriate, and accessible to all students, delivered by professionals using high quality, evidence-based interventions and therapies that are subject to regular evaluation.

**RESPOND:** Ensure that institutions have the critical incident protocols required for varying levels of student mental health crisis In addition to the provision of treatment, HEIs need to have a crisis response or critical incident plan that is accessible to the institution as a whole. The plan should include clear responding protocols for varying levels of crisis and effectively communicated to the whole institution.



# National Student Mental Health and Suicide Prevention Framework

**TRANSITION:** Establish student supports throughout the higher education journey. Higher education represents a major milestone and time of transition for students, therefore it is vital that institutions pre-entry, induction, reorientation and outduction. Supports and interventions need to be in place for students who are more vulnerable to mental health problems during transitions.

**IMPROVE:** Collect and analyse data to inform measures to improve student mental health. A whole system response requires starting with a baseline needs assessment and evaluation of current practices. The frequent collection, evaluation and strategic auditing of data is vital to ensure policies and interventions remain effective and allow prompt action be taken to improve student mental health outcomes.



Relevant documents  
mentioned:

National Student Mental  
Health and Suicide  
Prevention Framework

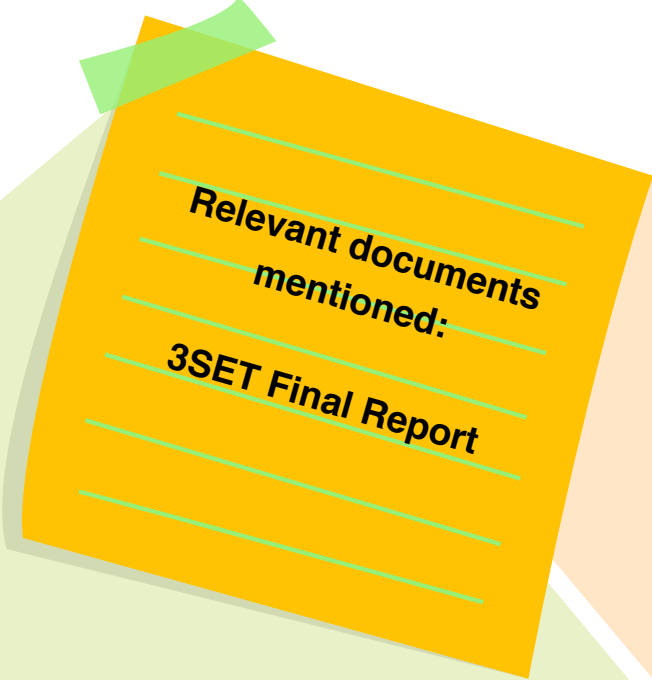
# **3SET Report: How Counselling and Peer-led Services Can Optimise Student Success**

This report details a long-running, HEA-funded project which had three sub-projects under it. USI was heavily involved in this project from the beginning, particularly in the second and third strands of the project.

Work Package One created a set of measures that all institutes should use to collect data on students who go through student counselling services, which will enable counselling service to track what student needs are, and meet them accordingly. They also created a network which combined researchers and practitioners so that they can better collaborate using this dataset.

Work Package Two were the lead authors on the first National Student Mental Health and Suicide Prevention Framework which was launched in October 2020 as well as forming part of the Connecting for Life Working Group which is a cross-sectoral group focusing on student mental health.

Work Package Three created resources and a replicable model for peer-led mentoring aiming at supporting the social, academic and emotional needs of incoming students. They also created a national consortium of those working in the area to ensure that work and knowledge sharing can continue beyond the lifespan of the funded project.



**Relevant documents  
mentioned:**

**3SET Final Report**



# Mental Health Training:

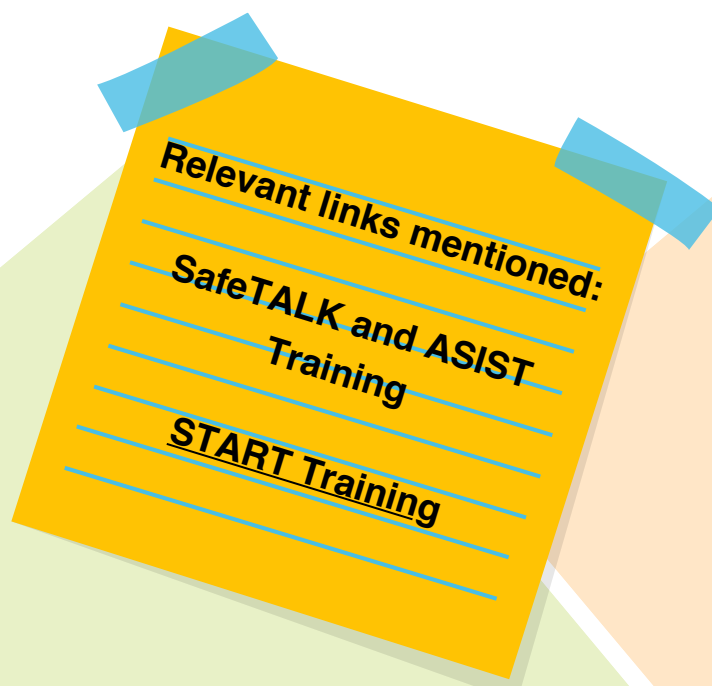
There are many mental health trainings available, and we at USI will endeavour to make many of these available to you across the year.

Some of the recommended trainings include:

The LivingWorks/HSE training suite:

- Level 1: Start is a 30 minute, free, online training around suicide prevention.
- Level 2: SAFETalk, and level 3: ASIST are in person trainings, taking 3.5 hours and 2 days respectively. If you would like to undertake these trainings as an SU team, please contact the Mental Health Programme Manager and she can put you in contact with your local Suicide Prevention Officer. If you would like to undertake these trainings as an individual, I will be sending monthly availability via email to your welfare email address and you can book yourself in.

Please keep an eye on your emails throughout the year for further mental health training opportunities.



## Resources:

### Mapping wellbeing/mental health: The adapted Tudor Model

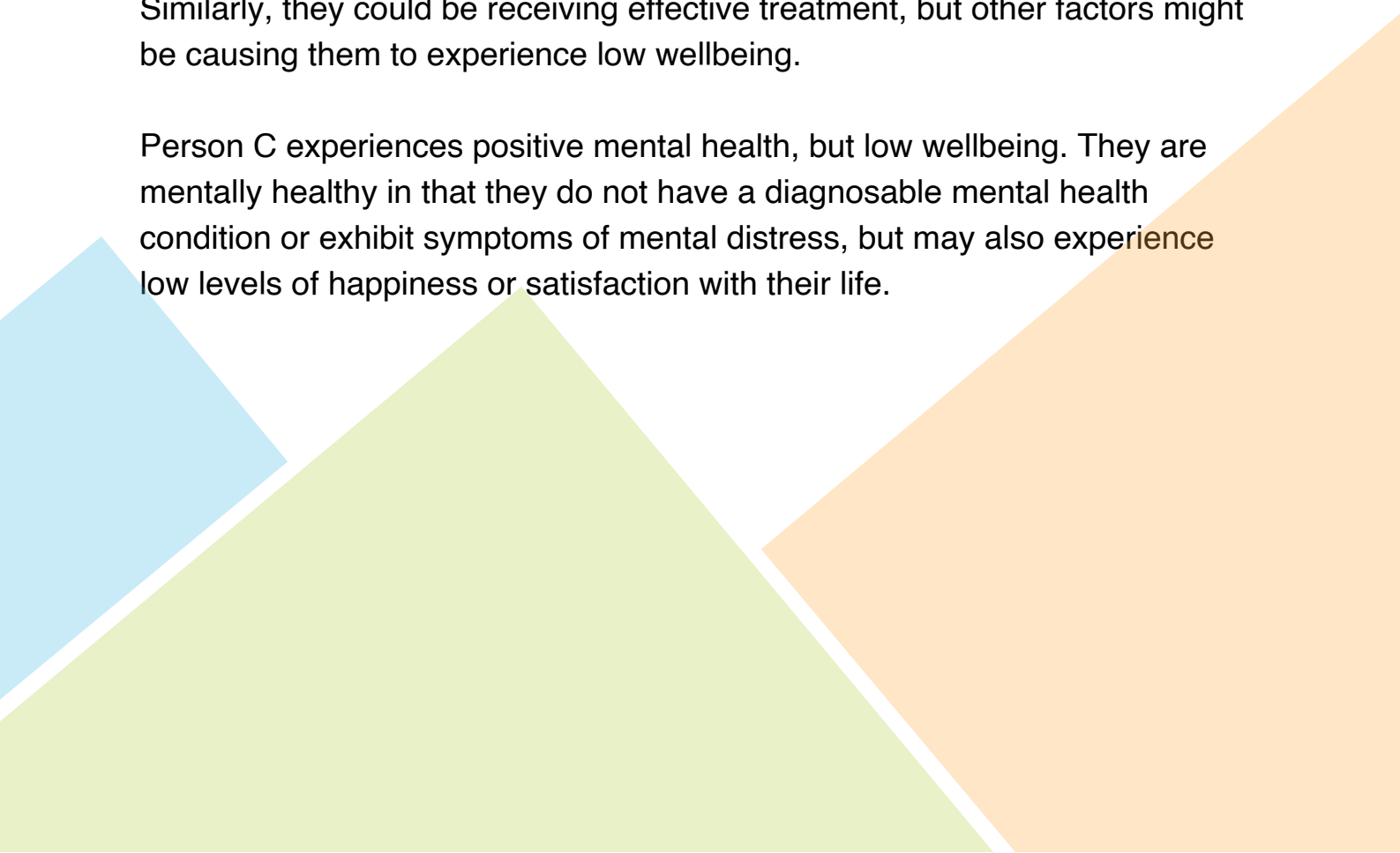
Wellbeing and mental health are two concepts that are related, and overlap, but are different in multiple, complex ways. Essentially, mental health is a part of wellbeing, but wellbeing encompasses other factors such as life satisfaction. This figure can help to map out a person's mental distress.

We are using the figure on the next page for explanation purposes, but there is a blank one in the appendices section of this pack for you to use, either to check in on your own mental health and wellbeing, or another student's.

Person A experiences a severe and enduring mental illness, but also high levels of wellbeing. They may be managing their mental health condition effectively and receiving the appropriate treatment, and otherwise leading a happy and fulfilling life.

Person B experiences a common mental health condition but is also experiencing low wellbeing. They may be failing to receive effective treatment, affecting their happiness and causing them added stress. Similarly, they could be receiving effective treatment, but other factors might be causing them to experience low wellbeing.

Person C experiences positive mental health, but low wellbeing. They are mentally healthy in that they do not have a diagnosable mental health condition or exhibit symptoms of mental distress, but may also experience low levels of happiness or satisfaction with their life.

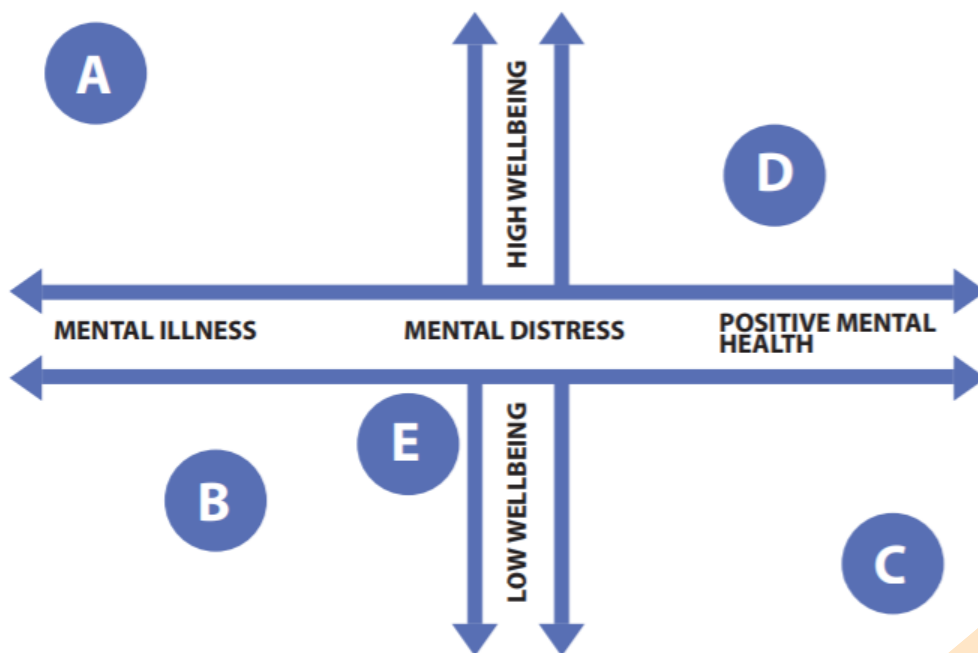


## Resources:

### Mapping wellbeing/mental health: The adapted Tudor Model

Person D experiences positive mental health and high levels of wellbeing. They do not have a mental health condition, are not exhibiting symptoms of mental distress, and are generally happy and satisfied with their life.

Person E is exhibiting some symptoms of mental distress. It is not clear that this meets the threshold for a clinical diagnosis of a mental health condition, but they are reporting that they do not consider their mental health to be positive. This is coinciding with low wellbeing, indicating they are also experiencing low levels of happiness and satisfaction.



## Resources: Useful Contact Cards

This section introduces the various support cards that are either already available or are in development by USI. Each of these cards are available digitally or can be provided in hard copy for students to keep in their purse/wallet for reference. For more information or to enquire about ordering any of these cards, please contact [mentalhealth@usi.ie](mailto:mentalhealth@usi.ie).

### General Contact Cards:

This card contains contact information for various national support services available to students



[mentalhealth.usi.ie](http://mentalhealth.usi.ie)

#### HSE

[yourmentalhealth.ie](http://yourmentalhealth.ie)

#### Bodywhys

01 201 7906 | [bodywhys.ie](http://bodywhys.ie)

#### Samaritans

116 123

[jo@samaritans.ie](mailto:jo@samaritans.ie)

#### LGBT Ireland Helpline

1890 929 539 | Online chat at [lgbt.ie](http://lgbt.ie)

[info@lgbt.ie](mailto:info@lgbt.ie)

#### Rape Crisis Helpline

180 77 8888 | [counselling@rcc.ie](mailto:counselling@rcc.ie)

## Resources: Useful Contact Cards

### Crisis Care Plan Cards:

This is the inside of the card - it will look like this once flattened out:

Name | Ainm

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Who I can contact (support)  
Is féidir liom labhairt le (tacaíocht)

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Who I can contact (professional help)  
Is féidir liom labhairt le (cuidiú ghairmiúil)

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Where I can go to feel safe  
Is féidir liom dul anseo le bheith sábháilte

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What I can do right now to help myself  
Na bealaí gur féidir liom cuidiú liom féin

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My emergency plan  
Mo phlean éigeandála

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## Resources: Useful Contact Cards

### Self-Care Cards (in development):

This card will provide space for each individual to fill in reminders/information about their own self-care plan to remind them of actions they can take to take care of themselves and their mental health. These are intended to be used in conjunction with the self-care plans.

### Self-Care Plans (in development):

This will provide prompts in different domains and provide spaces for each individual to fill in ideas about how they can engage in self care. On the back, the concept of self-care is explained, along with suggestions of different self-care actions. These are intended to be used in conjunction with the self-care cards.



To find the resources in  
development, keep an eye  
on [mentalhealth.usi.ie](http://mentalhealth.usi.ie)  
if you would like hard  
copies of any of these  
resources, contact  
[mentalhealth@usi.ie](mailto:mentalhealth@usi.ie)

## **Resources:**

### **USI Mental Health Online**

#### **USI Mental health website**

This site contains a digital copy of this resource pack. It also provides resources and information for students, that you might find helpful to use in signposting towards help within your own role. There is also a blog where you can keep up to date with the work USI are doing around student mental health as well as larger partnerships we are involved in. these two sections are regularly updated so keep an eye on them throughout the year.

We also have a monthly mental health newsletter, we would encourage you to do two things:

1. Sign up to keep abreast of all that's going on
2. Send us any news or information about the work you are doing around student mental health such as campaigns etc, and we will shout about them on a national platform

**[www.mentalhealth.usi.ie](http://www.mentalhealth.usi.ie)**



## **Resources:**

### **USI Mental Health Online**

#### **USI Mental Health Social Media**

USI has social media feeds specific to student mental health:



[@MentalHealthUSI](https://twitter.com/MentalHealthUSI)

Content relevant to mental health is also frequently shared through the main USI feeds and the VP for Welfare feeds:



[@USI\\_Welfare](https://twitter.com/USI_Welfare)



## Resources: USI Mental Health Online

### USI Mental Health Social Media



[@TheUSI](#)



[@usi.ie](#)



[facebook.com/USI.ie/](#)

We encourage you to engage with these social media feeds, as these will often be the source of information about events and campaigns, and often provide ways for Welfare Officers to get involved in these.

# **USI Mental Health Plans 2022-2023**

## **Open Up Campaign**

Our Open Up campaign which was launched in March 2022 will continue to roll out across the academic year. If you would like a campus visit we would be delighted to facilitate this, please email the Mental Health Programme Manager to organise a date at [mentalhealth@usi.ie](mailto:mentalhealth@usi.ie).

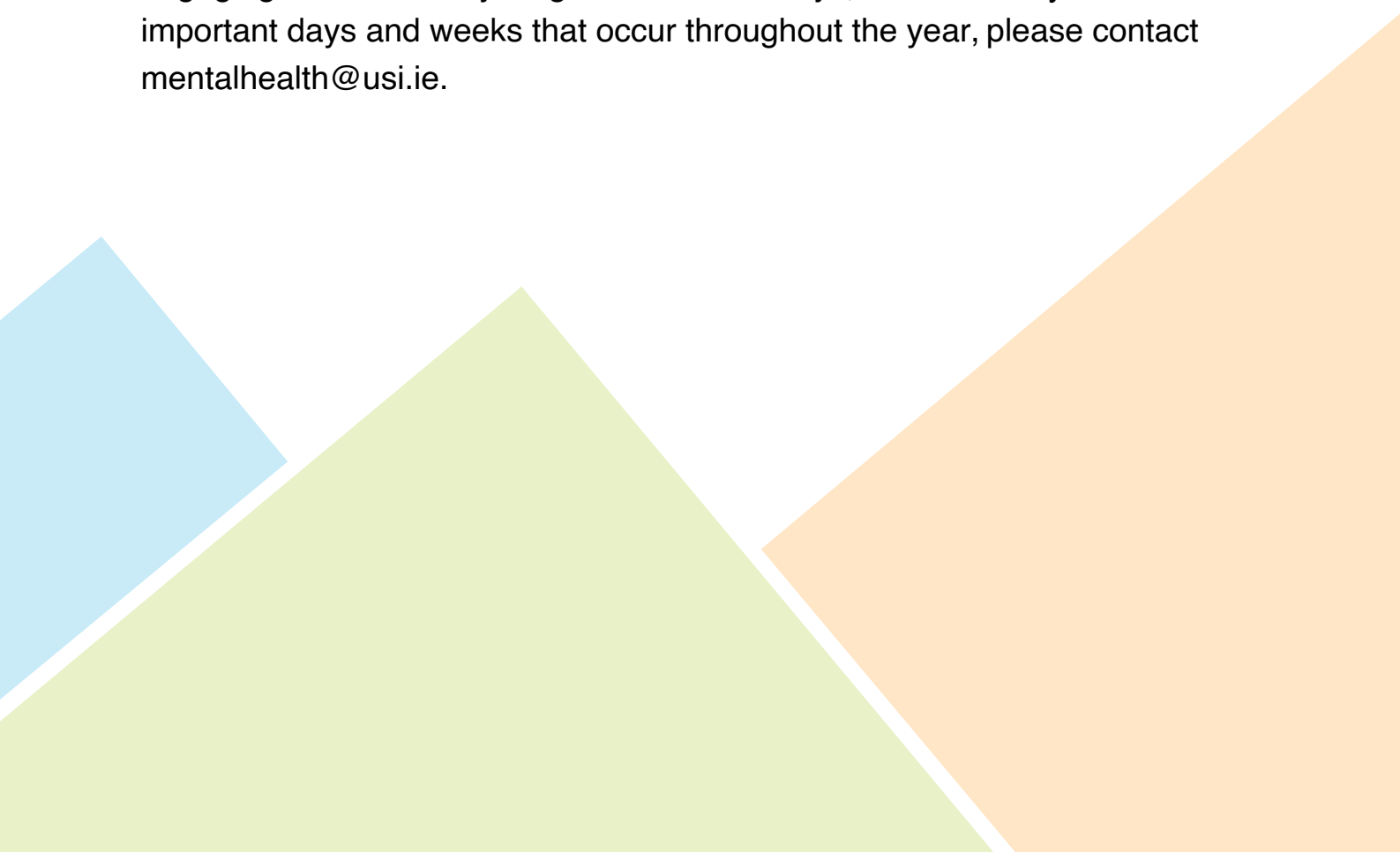
Please note that campuses that did not have a campus visit in March-May 2022 will be prioritised, however, campuses that did have a visit are more than welcome to have a second visit this year, and would be encouraged to join in again this year.

## **REFLECT**

Our REFLECT event will run at the beginning of the second semester, and we would like to see as many attendees as possible again this year.

## **Important Days**

Suicide Prevention Day falls on Sunday 10th September, and Mental Health Day falls on Tuesday the 10th of October this year. If you are interested in engaging with us on anything around these days, or indeed any of the other important days and weeks that occur throughout the year, please contact [mentalhealth@usi.ie](mailto:mentalhealth@usi.ie).



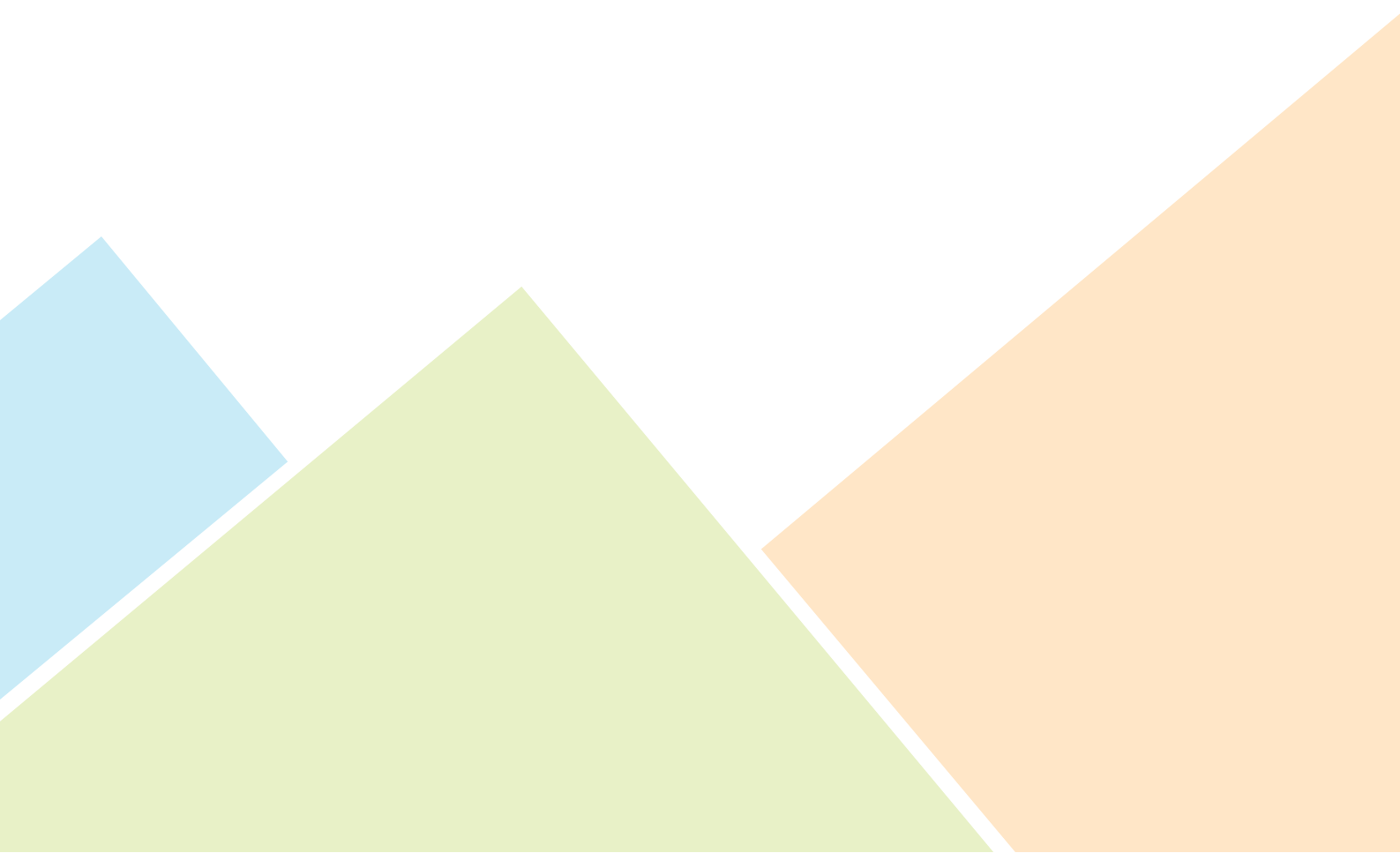
# USI Mental Health Plans 2023-2024

## **Mental Health Research:**

We are still analysing the large amount of data we gathered as part of the Mental Health Report 2019, but we are also planning our next piece of research. Once we have this study ready for people to take part, we would very much appreciate your help in encouraging students to engage with it. Research is vital as it helps us to understand student needs better in order for us (and you!) to best support them.

## **General Ongoing Mental Health Work:**

USI VP for Welfare and the Mental Health Programme Manager engage in lots of other work behind the scenes, such as building partnerships with other organisations, sitting on committees and working groups to represent the student voice, providing input into projects relevant to student mental health undertaken by other organisations, lobbying for the needs of students at government level, and supporting individual Welfare Officers at local level.



# Student Deaths

There may be times when SU Officers have contact from students who are in distress, in need of crisis support, or times when a death (or deaths) by suspected suicide has occurred. It can be difficult to know what is helpful for, or available to you and others, when presented with a crisis. The following information can help SU Officers navigate such times, with an emphasis on minding their own wellbeing during such challenging times.

The welfare and wellbeing of SU Officers themselves is always paramount. SU Officers should be mindful of their personal capacity to support others in challenging or traumatic situations. As a 'helper', it is important to tend to your own mental health needs in the first instance. For example, if an SU Officer is personally impacted by the occurrence of a suicide or suicide attempt on campus, they should seek support and guidance for themselves as a priority, focus on their own self-care, and step away from things if they need to.

## Getting support from others

SU Officers should work collaboratively with campus supports as much as possible to support the student body when serious incidents occur. They should familiarise themselves with all the difference support options and offerings available across their particular campus and locally.

Campuses should have an emergency response plan or guidance in place for incidents such as the death of a student (or students) by suicide. The students' union should be connected with such plans. SU Officers should make themselves familiar with such plans and key personnel involved in responding to serious incidents.

## Student Deaths

We recommend familiarising yourself with the emergency response plan on your campus as early in the year as you can, so that should an incident occur, you know what to do. If you have any difficulty in accessing this plan, if you are told there is not a plan, or if the SU is not part of the plan in any way, we would ask that you let either the VP for Welfare or the Mental Health Programme Manager know as soon as possible.

Should a student death (particularly a suicide) occur in relation to your institute, we would ask that the following USI protocol is followed:

- The SU should contact one of the VP for Welfare/ Regional Officer/ Mental Health Programme Manager in incidents of suspected suicide/ suicide attempts and should notify the representative of the existence of the case as soon as possible. If the SU Officer would like advice/ assistance in dealing with the case they may provide information as required to brief the USI representative, but if not, it is sufficient to just report the case as a suicide/ suicide attempt etc. This is advisable for two reasons – to allow USI to provide practice and emotional support and guidance to officers, and to allow USI to collate information on incidences, which can help to inform our ongoing work.
- USI representatives will be available to meet with members of the SU in whatever format most suits the SU. In the event of a suicide attempt, suicide, or death of a student, USI will seek such a meeting with the SU. This is to support the wellbeing of the SU team and explore what might be required in the coming days and weeks.

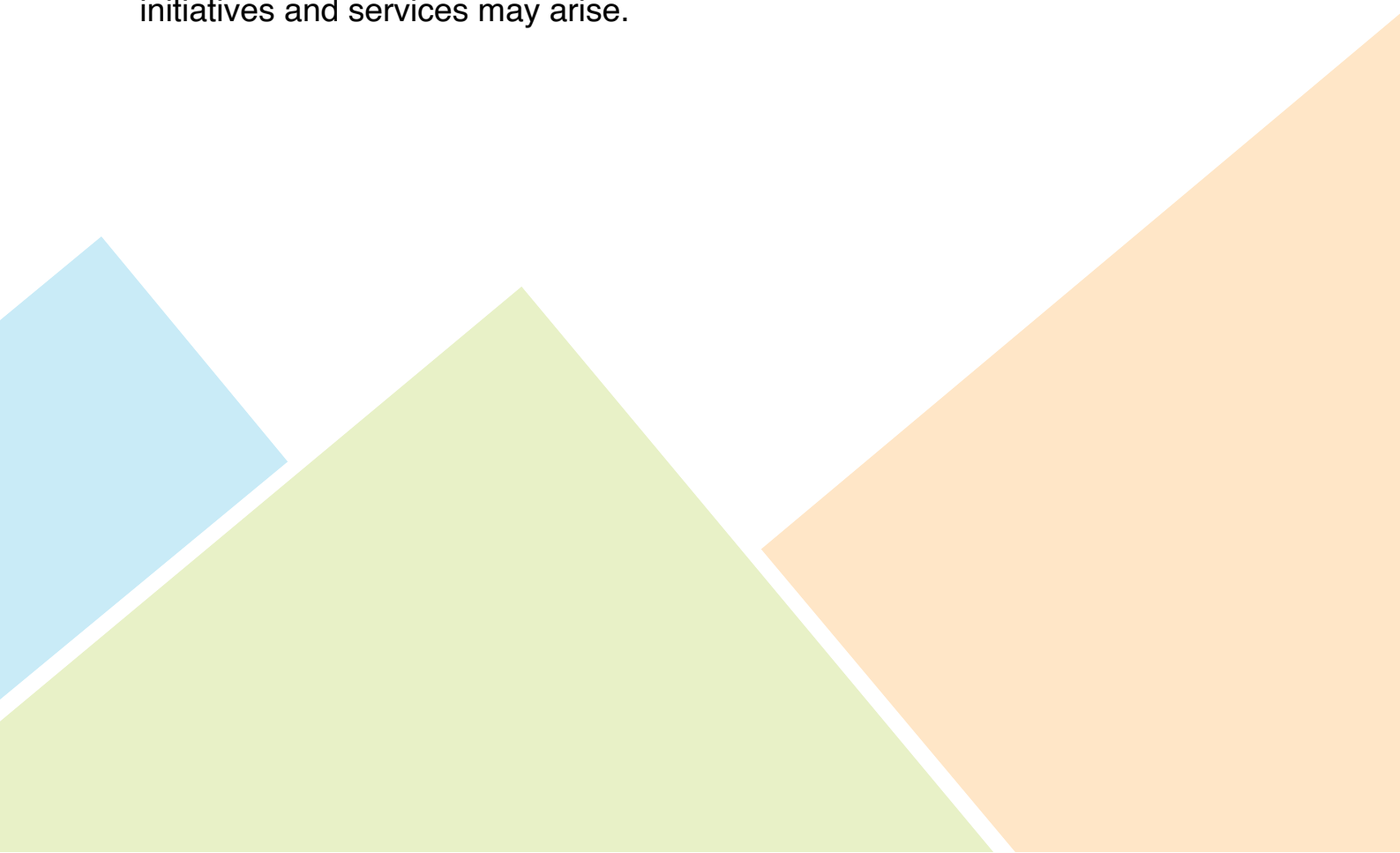
## Student Deaths

- Where the students' union are in favour, USI representatives can also reach out to mental health support services on campus, to offer any support they can.

In the days and weeks that follow an incident such as a suspected suicide(s), USI representatives will maintain continued communication with the SU Welfare Officer or President – weekly, or more frequently if required.

USI representatives will take the lead from the SU regarding sharing of sources of support. USI will reshare local sources of support as shared by the SU social media feeds first, and after a short time will share national sources of support as well as signposting to relevant information on the USI mental health website.

The USI Mental Health Programme Manager is connected to many other organisations who work in mental health promotion and suicide prevention at national levels. They are also connected with the HSE National Office for Suicide Prevention. By engaging with USI representatives, other opportunities to engage with local or national mental health services, initiatives and services may arise.



# Students in Distress

It's important to remember that while it can be really difficult, your role when a student is distressed is to signpost and hold space for them, not necessarily to fix their problems. In fact, sometimes, much as you might want to, you will be unable to fix their problem. It's important to remember that that's ok. Just as in cases of student deaths, USI can support you if you are in contact with a highly distressed student. We would ask that you follow the following USI protocol for distressed students:

- If you are struggling in any way to assist the student, please rely on other members of your SU team to help if they can. Please also reach out to of the VP for Welfare/ Regional Officer/ Mental Health Programme Manager if you need extra assistance, or even if you don't need assistance in dealing with the student themselves, but in debriefing afterwards. We in USI will follow similar steps to those outlined in the student death protocol.
- We would also ask that even if you feel ok in dealing with cases of students in distress that you inform the USI Mental Health Programme Manager of cases of high distress. We recommend assessing the distress level on a scale of one to four, where one is that the student was asking a basic question such as how to defer an exam, and four is there is a risk of self-harm or suicide, or those have been mentioned. If a case is at a level three or four, we would ask that you let us know. Again, we don't need to know the details of the cases, just briefly how many you are encountering, as this can inform our work, and our lobbying, as well as enable us to argue for better supports for SU officers. The Mental Health Programme Manager will reach out approximately monthly to engage with you on this, but feel free to get in touch at any point if you are dealing with a high number, or a particularly difficult case.

# Important Contact Information:

## VP for Welfare, USI:

Colette Murphy



welfare@usi.ie



00353 86 065 1226



@USI\_Welfare

## Mental Health Programme Manager, USI:

Sarah Hughes



mentalhealth@usi.ie



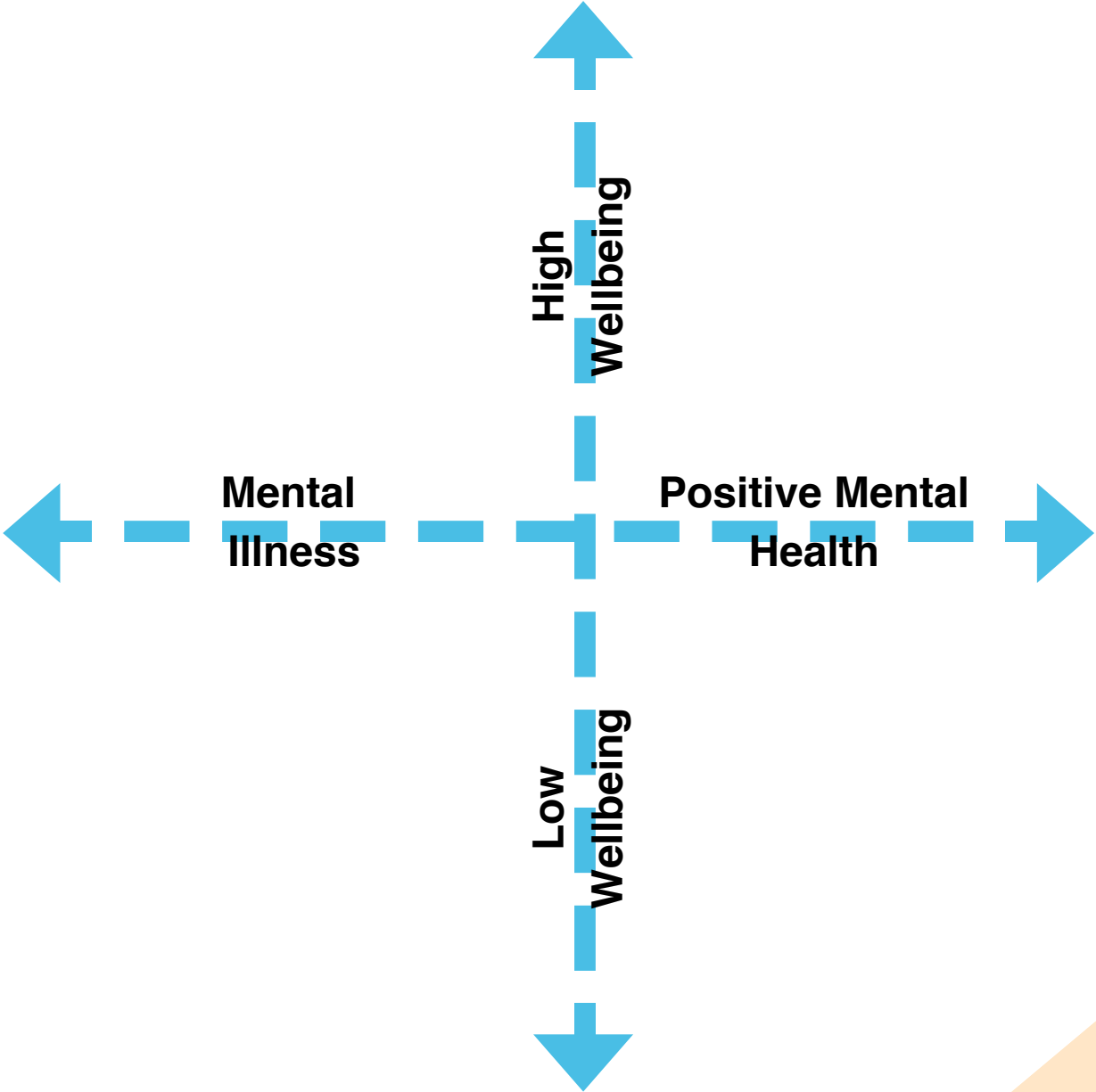
00353 86 415 0924



@MentalHealthUSI



**Wellbeing/ Mental Health Map**



# Mental Health Dates 2023

These dates cover the period up to the end of 2023. The dates for 2024 will be released in the near future

## September

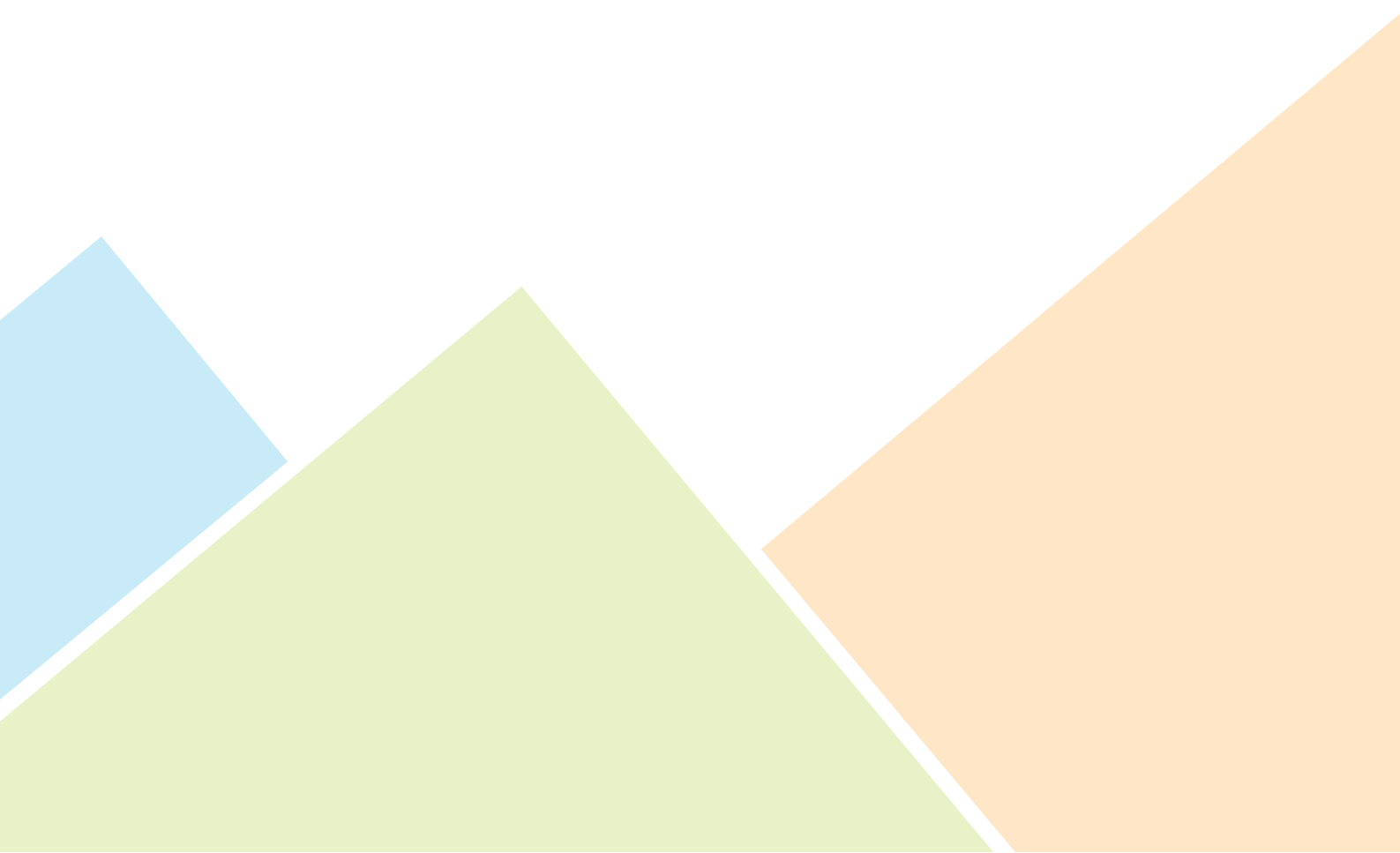
- Sep 10 World Suicide Prevention Day <http://www.iasp.info/wspd/>

## October

- Oct 10 World Mental Health Day HSE [www.yourmentalhealth.ie](http://www.yourmentalhealth.ie) WHO [www.who.int](http://www.who.int)

## November

- Nov 19 International Men's Health Day [www.internationalmensday.com](http://www.internationalmensday.com)  
Men's Health Forum [www.mhfi.org](http://www.mhfi.org)
- Nov 18 International Survivors of Suicide Loss Day  
<https://afsp.org/international-survivors-of-suicide-loss-day>



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