

The role and contribution of the voluntary sector to the prevention of suicide among young people

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
07/04/2025	No longer recruiting	<input type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
11/08/2025	Ongoing	<input type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
20/01/2026	Mental and Behavioural Disorders	<input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Suicide is a leading cause of death among young people in the UK, with half having a history of self-harm. Young people from marginalised groups (e.g., LGBTQ+, those in care or care leavers, ethnic minorities) and those living in rural or deprived areas are at higher risk and often reluctant to seek help from health and social care services. Research shows that the voluntary, community, and social enterprises (VCSE) sector (hereafter “voluntary organisations”) plays a significant role in supporting these young people. However, we know very little about how, why, and when young people choose to seek help from voluntary organisations, or how these organisations respond to their needs and interface with the health and social care sector.

Shaped by the insights of young people with lived experience and in collaboration with voluntary organisations and statutory services, this study seeks to:

1. Understand young people’s experiences of seeking, accessing, and receiving support from the voluntary sector in diverse regional contexts when experiencing self-harm or suicidal thoughts and behaviours.
2. Establish how the voluntary sector interfaces with the statutory sector in diverse regional contexts to serve young people by exploring their engagement, collaboration, and the barriers and facilitators to effective collaborative care.
3. Co-produce best practice recommendations for effective collaborative care between voluntary and statutory sectors in youth suicide prevention, considering the impact of diverse contexts.

The research will take place in the West Midlands (counties of West Midlands, Staffordshire, Warwickshire, Worcestershire, Shropshire & Herefordshire) and South West Peninsula (counties of Cornwall, Devon, Somerset & Dorset), two regions of significant geographic, ethnic, and socioeconomic diversity in England. A youth advisory group from the Institute for Mental Health will help shape the research programme, interpret findings, and communicate key messages.

Who can participate?

1. Young people aged 16-25 years with lived or living experience of self-harm and/or suicidal thoughts or behaviour, currently seeking help from voluntary organisations in the West Midlands and South West Peninsula (England).

2. Voluntary and statutory organisation professionals supporting suicidal or self-harming young people in the West Midlands and South West Peninsula (England). Examples include helpline staff, youth workers, peer support workers, counsellors/therapists, crisis café volunteers, GPs, CAMHS workers, psychologists, children's services, and social workers.

What does the study involve?

The study involves a comparative case study of VCSE provision in the West Midlands and South West Peninsula regions to allow an in-depth investigation into the range and type of VCSE service provision, as well as young people's help-seeking patterns and their experiences of that service provision. Specifically, we will purposefully sample 5-7 case studies of VCSE organisations across each region (a total of 10-14) according to size, geography and service type, and will qualitatively explore through semi-structured interviews, the experiences of:

1. 40 young people aged 16-25 years with lived or living experiences of self-harm and suicidal behaviour who have sought or are seeking help from the VCSE case studies (20 per region, i.e., West Midlands and South West Peninsula)
2. 20-28 VCSE professionals in total across the two regions (2 per case study organisation) and 20 statutory sector professionals (10 from each region) working with suicidal or self-harming young people in the West Midlands and South West Peninsula, to identify how they work together to support young people, what the barriers and facilitators are to effective collaborative care.

Interviews will be conducted online or face-to-face, audio-recorded and transcribed.

A co-production workshop with 10-15 young people, voluntary and statutory sector professionals from both regions, and drawn from those who have taken part in interviews, will develop best practice recommendations for effective collaborative care. The workshop will be online and facilitated with young experts by experience from the Institute for Mental Health's Youth Advisory Group.

What are the possible benefits and risks of participating?

We do not anticipate any harm from taking part in interviews or workshops. However, given the sensitive topic, we have identified possible risks and precautions to ensure the safety of participants.

For Young People:

1. We will not ask questions about a participant's history of suicidal thoughts or self-harm. However, interviews will discuss suicide and self-harm, which may be upsetting or triggering for some. Therefore, we encourage participants to ensure they are feeling okay before taking part in the interview. They can postpone the interview if they've had a bad day or are feeling upset.
2. A short telephone briefing session with the researcher will be offered before the interview to develop a safety plan, including contact details of the participant's GP or support person, so we can contact them on their behalf if needed.
3. Participants will be asked to share any concerns or triggers and strategies they use when feeling upset.
4. During the interview, participants can take a break or stop the interview at any time. If the researcher is worried about a participant during the interview, they will offer to help use the participant's safety plan strategy or contact their GP or support person.
5. Confidentiality will only be broken if the participant is at immediate risk.
6. A debrief meeting and a debrief sheet with 24/7 suicide prevention helplines will be provided after the interview.

For Professionals:

1. We will not ask professionals to share any personal experiences of providing services or supporting young people with self-harm or suicidal behaviour.

2. Participants can take breaks or stop the interview if they feel uncomfortable.
3. Professionals are encouraged to contact their Employee Assistance Programme if they need to talk to someone after the interview.

All participants have the option to withdraw their data up to 2 weeks after their participation in the study.

The benefits of participation include an opportunity to:

1. Share experiences and contribute to research that aims to improve support services.
2. Contribute to best practice recommendations for collaborative care.

Where is the study run from?

The Institute for Mental Health, University of Birmingham (UK)

When is the study starting and how long is it expected to run for?

January 2025 to March 2026

Who is funding the study?

National Institute for Health and Care Research (NIHR) within its Three NIHR Research Schools' Mental Health Programme (UK)

Who is the main contact?

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Contact information

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

PAC-1497

Study information

Scientific Title

ATTUNE: the role and the contribution of the voluntary sector to the prevention of suicide among young people

Acronym

ATTUNE

Study objectives

1. To understand young people's experiences of seeking, accessing and receiving support by the voluntary, community and social enterprise (VCSE) sector in diverse regional contexts (West Midland and South West Peninsula, England) when experiencing self-harm or suicidal thoughts and behaviours.
2. To establish how the VCSE interfaces with the statutory sector in diverse regional contexts to serve young people by exploring how they engage with each other; how they work together; barriers and facilitators to effective collaborative care.
3. To co-produce best practice recommendations for effective collaborative care between voluntary and statutory sectors on youth suicide prevention, with an understanding of the impact of diverse contexts.

Ethics approval required

Ethics approval required

Ethics approval(s)

Approved 07/03/2025, University of Birmingham's Science, Technology, Engineering and Mathematics Research Ethics Committee (Edgbaston, Birmingham, B15 2TT, United Kingdom; +44 (0)1214143344; ethics-queries@contacts.bham.ac.uk), ref: ERN_3461

Study design

Comparative case study

Primary study design

Observational

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Prevention of self-harm and suicidal thoughts or behaviours among young people.

Interventions

The study involves a comparative case study of VCSE provision in the West Midlands and South West Peninsula regions to allow an in-depth investigation into the range and type of VCSE service provision, as well as young people's help-seeking patterns and their experiences of that service provision. Specifically, we will purposefully sample 5-7 case studies of VCSE organisations across each region (a total of 10-14) according to size, geography and service type, and will qualitatively explore through semi-structured interviews, the experiences of:

1. 40 young people aged 16-25 years with lived or living experiences of self-harm and suicidal behaviour who have sought or are seeking help from the VCSE case studies (20 per region, i.e., West Midlands and South West Peninsula)
2. 20-28 VCSE professionals in total across the two regions (2 per case study organisation) and 20 statutory sector professionals (10 from each region) working with suicidal or self-harming young people in the West Midlands and South West Peninsula, to identify how they work together to support young people, what the barriers and facilitators are to effective collaborative care.

Interviews will be conducted online or face-to-face, audio-recorded and transcribed.

A co-production workshop with 10-15 young people, voluntary and statutory sector professionals from both regions, and drawn from those who have taken part in interviews, will develop best practice recommendations for effective collaborative care. The workshop will be online and facilitated with young experts by experience from the Institute for Mental Health's Youth Advisory Group.

Intervention Type

Other

Primary outcome(s)

1. Help-seeking behaviours and experiences of young people (aged 16-25 years) with lived, or living, experience of self-harm or suicidal behaviour, who are seeking help from voluntary organisations, measured using semi-structured interviews at baseline.
2. Collaborative practices, barriers and facilitators in supporting young people (aged 16-25) at risk of self-harm or suicidal behaviour measured using semi-structured interviews with VCSE and statutory sector professionals at baseline.
3. Best practice recommendations for effective collaborative care developed through a co-production workshop with young people, VCSE and statutory professionals at the end of the study, following the analysis of interview data.

Data analysis:

All interview data will be analysed using framework analysis (Gale et al., 2013).

Workshop data will be analysed using thematic analysis (Braun & Clarke, 2016).

Key secondary outcome(s)

There are no secondary outcome measures

Completion date

31/03/2026

Eligibility

Key inclusion criteria

Young people:

1. Aged 16-25 years
2. With lived experience of self-harm or suicidal behaviour
3. Living in the region of the West Midlands or the South West Peninsula
4. Have sought or are currently seeking help from the VCSE sector (West Midlands or South West Peninsula) for self-harm or suicidal behaviour

VCSE sector professionals:

1. VCSE professionals from the case studies in the region of the West Midlands or the South West Peninsula
2. Any role within the organisation (e.g., case workers, youth workers, counsellors)

Statutory sector professionals:

1. Any health or social care professional providing support/care/services, including service managers and commissioners, to young people with lived or living experience of self-harm or suicidal behaviour across primary care (e.g., General Practitioners), secondary care (e.g., psychologists); public health (e.g., public health practitioners), social care (e.g., social workers).
2. Practising in the region of the West Midlands or the South West Peninsula

Participant type(s)

Employee, Health professional, Patient, Other

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

16 years

Upper age limit

99 years

Sex

All

Total final enrolment

0

Key exclusion criteria

Does not meet the inclusion criteria

Date of first enrolment

27/03/2025

Date of final enrolment

31/01/2026

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

West Midlands

-

England

-

Study participating centre

Staffordshire

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England

-

Study participating centre

Warwickshire

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England

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Study participating centre

Shropshire

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England

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Study participating centre
Worcestershire

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England

Study participating centre
Herefordshire

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England

Study participating centre
Cornwall

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England

Study participating centre
Devon

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England

Study participating centre
Somerset

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England

Study participating centre
Dorset

-
-

England

Sponsor information

Organisation

University of Birmingham

ROR

<https://ror.org/03angcq70>

Funder(s)

Funder type

Government

Funder Name

Three NIHR Research Schools' Mental Health Programme

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes
Study website	Study website	11/11/2025	11/11/2025	No	Yes