



Faculty of
Philosophy

ESSSB21

21st European Symposium on
Suicide and Suicidal Behaviour - ESSSB21

Rethinking Suicide Research & Prevention

August 26 - 29, 2026

Vilnius, Lithuania

ABSTRACT BOOK



<https://doi.org/10.15388/ESSSB21.2026>

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- **Chair:** Paulius Skruibis
- Austėja Agnietė Čepulienė
- Said Dadašev
- Danutė Gailienė
- Dovilė Grigienė
- Jokūbas Gužas
- Miglė Marcinkevičiūtė
- Eglė Mažulytė-Rašytinė
- Jurgita Rimkevičienė

All members of the Organizing Committee are from the Suicide Research Centre at Vilnius University. More details: <https://www.fsf.vu.lt/en/institute-of-psychology/centre-for-suicidology>

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K11. The Role of Psychiatry and Mental Health Services in Management of Suicidal Behaviour

Dainius Pūras

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Dainius Pūras is professor of child and adolescent psychiatry and public mental health at Vilnius University, Lithuania. He is also a consultant child and adolescent psychiatrist at the Child Development Center of Vilnius university Hospital. Among positions he was holding, Dainius Pūras was President of Lithuanian Psychiatric Association, Dean of the Faculty of Medicine, Vilnius University, Director of the Human rights monitoring institute. During the years 2007-2011 Dainius Pūras was a member of the UN Committee on the rights of the child.

During the years 2014 – 2020 he was serving as a UN Special Rapporteur on the right to physical and mental health. More information about his reports to the UN and other activities in the role of the UN Special rapporteur: www.handover-dialogues.org/legacy.

Abstract:

Based on the experience of a UN mandate holder - Special rapporteur on the right to health (2014-2020), the global situation in the field of mental healthcare is presented, with special focus on suicide prevention.

Analysis of diverse views that address mental health policies and services revealed a high level of polarisation among stakeholders and experts. On one side of the spectrum are the supporters of the „status quo“. They advise increasing funding of the existing infrastructure of mental health services and reducing the treatment gap so that more individuals with mental health conditions can receive treatment, according to established algorithms within clinical psychiatry.

On the other side are the experts who state that the status quo, reliant on a predominantly biomedical model of psychiatry, has failed. They urge the shift of paradigm towards developing and replicating non-coercive and rights-based services.

The reports of the UN Special rapporteur supported the aforementioned movement, with emphasis on the need for changes in legislation, policies and practices, so that the legacy of discrimination, coercion, over-medicalisation, and power imbalances could be abandoned.

The global mental health discourse includes different views on the management of suicidal behaviour and related conditions. There is increasing evidence that the tendency to manage suicidal behaviour as a sign of clinical depression, thus prioritising a high-risk approach over a population-based approach, can cause more harm than good. The reliance of suicide prevention on medicating and hospitalising persons may lead to detrimental effects, through reinforcing helplessness and disempowerment, and thus undermining the basic principle of medicine, „first do no harm“.

The case of Lithuania and neighbouring countries, with analysis of ways to address unprecedented epidemics of suicide and public mental health crisis 30 years ago, should be presented as a classical lesson about how public health crises should not be managed.