Suicide prevention:
A community-driven regional approach

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Suicide in Australia

- More than 8 people dying by suicide per day
- 9% increase 2016-2017
- 75% of suicides are men
- But sig increase for young women too


ABS (2018)
Deaths are not the whole story

For every 1 suicide...

...there are 37 attempts

...212 people seriously considering suicide

...135 people seriously affected by that death
In the Illawarra Shoalhaven...

...40-50 suicides per year

...1,850 attempts per year

...10,600 people seriously considering suicide

...6,750 people seriously affected by suicide deaths.
MORE THAN 2x AS MANY AUSTRALIANS DIE BY SUICIDE THAN DIE IN CAR ACCIDENTS

ROAD DEATHS* 1,300
SUICIDE DEATHS* 3,027

SUICIDE AFFECTS EVERY AGE GROUP

- Suicide affects people from all social, ethnic, and cultural backgrounds.
- Suicide affects everyone, regardless of their employment status.
- More than a third of people who suicide did not have a mental health condition.

**Notes:**

- *Data: 2015*
- *Employment Status of People Who Suicided*:
  - Employed: 35%
  - Unemployed: 23%
  - Retired: 28%
  - Students: 6%
  - Unknown: 5%
  - Other: 2%
‘Ground up’ response

- Suicide Prevention Collaborative established September 2015

- Committed to reduce the impact of suicide by:
  - Improving supports available
  - Encouraging system change through collaboration
  - Ensuring suicide prevention efforts are effective
LifeSpan initiative

Building a community safety net that helps prevent suicide

Estimated reduction in suicide attempts for certain strategies
*Priority strategies for reducing suicide attempts

- 0.5% Means restriction
- 8.0% Psychosocial & pharmacotherapy treatments
- 2.9% School programs
- 19.8% Aftercare & crisis care

Estimated reduction in suicide deaths for certain strategies
*Priority strategies for reducing suicide attempts

- 0.3% Community campaigns
- 1.2% Media guidelines
- 4.9%* Gatekeeper training
- 6.3%* GP capacity building & support
- 4.1%* Means restriction
- 5.8% Psychosocial & pharmacotherapy treatments
- 1.1% Aftercare & crisis care
Health strategies

1. Crisis care & aftercare
   - Benchmarking current practice against *Guidelines for Integrated Care in EDs and other Acute Settings*
   - Next Steps aftercare service
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2. Psychosocial treatments
   - SafeSide training for health professionals
   - Collaborative Assessment & Management of Suicide (CAMS) for those providing ongoing therapy
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   - *SafeSide training* for health professionals
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3. Identify & support people in primary care
   - *StepCare*: universal screening within general practice
   - *Advanced Training in Suicide Prevention* (6 hrs)
   - *Talking About Suicide in General Practice* (3 hrs)
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4. Frontline staff training
   - Focused context-specific training
   - Resources to support transfer of care
School strategy

5. Promoting wellbeing & resilience in young people
   - Youth Aware of Mental Health (YAM) for Year 9 students
   - Youth in Distress for school counsellors
   - Question Persuade Refer (QPR) for school staff & parents
Community strategies

6. Community suicide prevention training
   - Question Persuade Refer (QPR) – 1 hour (online) or 3 hours (f2f)
   - Applied Suicide Intervention Skills Training (ASIST) – 2 days

If those close to you were suicidal, would you know what to do?

Question. Persuade. Refer. (QPR)
6. Community suicide prevention training
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   • *Applied Suicide Intervention Skills Training* (ASIST) – 2 days

7. Community awareness campaigns
   • Partnering with *Illawarra Mercury and other media*
   • *R U OK? Day events*
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8. Media promoting hope & help-seeking
   - *Mindframe Plus* training for local media & spokespeople
   - *Roses in the Ocean* ‘Our Voice’ training for people with lived experience of suicide & recovery
9. Improving safety at public suicide locations

- Working with a number of local groups and Councils to improve safety at 3 sites
What can you do to help?

• Do suicide prevention training
• Roll out training in your workplace, sporting club, church, etc.
• Promote hope & help-seeking
• Become a YAM helper
• Get involved in the Collaborative discussions
• Have open discussions about suicide
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