



# Beyond Blue submission to draft advice on the National Suicide Prevention Strategy Advice

1 November 2024

## Introduction

- Beyond Blue commends the National Suicide Prevention Office (NSPO) for producing the draft Strategy, which provides a comprehensive and transformative vision for suicide prevention in Australia.
- The Strategy is testament to the thorough consultation conducted by the NSPO and reflects the expertise of the suicide prevention and mental health sectors, researchers and community members with lived and living experience of suicidal distress and their supporters.
- Importantly, the Strategy's focus on prevention of suicidal distress by promoting mental wellbeing and addressing the social and economic determinants of suicidality is a ground-breaking step toward improving health equity, which if implemented effectively, will save and improve lives. Given the overlap between the determinants of suicide and the determinants of mental and physical health, the implementation of this Strategy would likely contribute to population wellbeing, including improvements to many indicators in the [Measuring What Matters Framework](#).
- The critical enablers outlined in the Strategy reflect Beyond Blue's experience of delivering suicide prevention and postvention programs such as the Way Back Support Service, including a specific and sustainable workforce and system reform to improve access to services, data, monitoring and evaluation.
- The Strategy is ambitious and will need significant, long-term commitment from all levels of government. It is critical that the Strategy is accompanied by funding and an implementation plan, with regular review of effectiveness and impact, to drive meaningful and sustainable change.

## Recommendations

Beyond Blue recommends that the Commonwealth Government:

1. Adopts and publishes the draft advice as Australia's National Suicide Prevention Strategy
2. Publishes an implementation plan outlining clear roles, responsibilities, priorities and measures of success
3. Works with states and territories to establish effective mechanisms for whole-of-government and cross-jurisdictional cooperation and coordinated investment to realise the Strategy's large-scale vision
4. Ensures implementation progress and impact is independently monitored and publicly reported on by an appropriately resourced entity, noting interim arrangements are in place for the NSPO while consultations on its future are underway
5. Adopts and publishes the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy (NATSISPS) and works closely with First Nations stakeholders to ensure it is meaningfully implemented

## Response to survey questions

### How well does the Advice on the Strategy articulate what is required for long-term change in suicide prevention?

- The Strategy is a comprehensive and multi-faceted approach to the complex problem of preventing suicide.
- The Strategy reflects that action is needed to improve the suicide prevention support system in a way that delivers the culture of compassion envisaged in the [Final Advice of the Suicide Prevention Adviser](#) and draws on the Black Dog Institute's [Lifespan model](#) of support for those in suicidal crisis.
- It takes a whole-of-person and whole-of-government approach to preventing suicidal distress, building on existing work underway across government portfolios under various plans and strategies. This primary prevention approach is likely to drive significant long-term change in both suicide prevention and mental health outcomes by addressing factors such as:
  - domestic and family violence, sexual abuse and childhood adversity
  - workplace psychosocial hazards
  - natural disasters
  - income and housing instability
  - barriers to education and employment
  - safety challenges faced by people with disabilities
  - racism and discrimination
  - loneliness and social isolation
  - life transition challenges, such as relationship breakdowns and legal problems.
- It articulates the importance of intergovernmental and cross-government cooperation, governance and accountability.
- However, some of the actions are broad and lack detail. For example, ko2.2a calls for government to continue to expand and enhance services for people experiencing mental ill-health, particularly severe and enduring mental illness. This action would lead to more impactful change if it called for investment in a redesigned mental health system that:
  - offers accessible and evidence-based services at all stages of life, episode, illness and situational distress, including in early intervention;
  - matches people's needs to the right type and intensity of care at the right time; and
  - improves affordability of mental health services given that the *Better Access Evaluation*<sup>i</sup> showed cost to be the biggest barrier to accessing support.
- Other actions would also benefit from a greater focus on the link between determinants and suicidality. For example ko3.1c calls for the development of population-wide financial literacy skills, without addressing the content of those programs. Financial literacy programs would benefit from including content about the bi-directional nature of financial stress and psychological distress, as demonstrated by [Beyond Blue and ASIC's Money and Mental Health Research](#). Ensuring the actions have sufficient detail will increase the likelihood that they are implemented in a meaningful way that achieves their intent.

### Is there anything critical to preventing suicide in Australia, that the Advice on the Strategy does not address?

- There is evidence that climate change is a determinant of suicidal (and psychological) distress<sup>ii</sup>. This is largely missing from the Strategy, where it is conflated with natural disasters and left without an action. While there is overlap between these topics given climate change is increasing the prevalence of natural disasters, climate change itself (including climate anxiety, rising global temperatures, impacts on farming, disruption of sites and ecosystems that are important to the social and emotional wellbeing of First Nations communities) should continue to be addressed by all levels of government to prevent both suicidal and psychological distress.
- For example, recent research of the impacts of drought in the Murray-Darling Basin, conducted by the University of Adelaide, indicated a link between rising temperatures and suicide. One additional month of extreme drought in the previous 12 months was strongly associated with the total suicide rate

increasing by 32%, and suicide rates disproportionately affected certain communities, including First Nations peoples, farmers and young men<sup>iii</sup>.

- There is also evidence linking suicide and contact with the criminal justice system<sup>iv</sup>, which does not appear to be addressed by the Strategy. Many of the determinants that drive suicidal distress overlap with the determinants of justice and contact with the criminal justice system, such that “discrimination based on race, class, disability, geography and intergenerational inequality contributes to the hyper-criminalisation of ... groups of people<sup>v</sup>”. There are strong intersections between experiences of being disproportionately impacted by suicide and overrepresented in the justice system, making this a pressing social justice and health equity issue.

### **Are there any recommended actions in the Advice on the Strategy that you do not understand, or need more information about?**

- The Strategy should recognise the need for national leadership for actions where there is an absence of a national strategy (e.g. loneliness and racism). The implementation plan should also reflect the need for ongoing collaboration across governments, the suicide prevention sector, the mental health sector and the broader community and commercial sectors, to implement these actions.
- It would be useful to understand the measures of success for each action, noting that the NSPO is currently developing the [National Suicide Prevention Outcomes Framework](#).
- It would also be helpful if the Strategy included a summary of all the actions in one place.

### **Which actions do you think are the highest priority? (Please list up to 5 actions and include action numbers)**

- The focus on primary prevention of suicidal distress is ground-breaking. While complex and far-reaching, this should be a fundamental priority for government investment, as it stands to make a significant and intergenerational difference to the lives and wellbeing of people in Australia.
- Within the prevention pillar of the Strategy, the areas that lack national strategies or frameworks, such as racism, discrimination, loneliness and social isolation, should be high priorities (ko1.2d, ko4.2a & b).
- Improving the suicide support system remains a critical priority, particularly when people are most at risk, such as after they have made an attempt or if they are suicidal (actions ko7.1a- ko7.2c).
- Developing suicide prevention capability in communities (actions ko6.3a & b) is an important priority that recognises that people often turn to family members, friends or people in their community for help before they seek formal support and meets them where they are at. The scaling of safe and effective community-based supports, like suicide safe spaces, should also be a priority.
- Implementing regular monitoring of, and public reporting on, the implementation of the Strategy is of critical importance to its success (action ce3.3c).

### **Is there anything else you would like to tell us in response to the draft Advice on the Strategy?**

- Suicide rates and distress among First Nations Peoples remain too high, despite determined efforts from the Aboriginal Community Controlled Sector and First Nations experts, researchers and communities to reduce them. The Commonwealth Government should ensure that the Strategy is released, funded and implemented alongside the NATSISPS and the Gayaa Dhuwi (Proud Spirit) Declaration Implementation Plan.

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<sup>i</sup> Pirkis, J., Currier, D., Harris, M., Mihalopoulos, C. (2022). *Evaluation of the Better Access initiative*. Australian Government, Department of Health and Aged Care.

<sup>ii</sup> Suicide Prevention Australia (2023). *Socio-economic and Environmental Determinants of Suicide Background Paper*, p.g. 23. Accessed 15 October 2024 at <https://www.suicidepreventionaustralia.org/wp-content/uploads/2023/08/SPA-SEDS-Background-Paper-August-2023-Designed.pdf>

<sup>iii</sup> Ying Xu, Sarah Ann, and Alec Zuo (2024). *Drought and hotter temperature impacts on suicide: evidence from the Murray–Darling Basin, Australia*. *Climate Change Economics*,15:01

<sup>iv</sup> Willis M et al. (2016). *Self-inflicted deaths in Australian prisons. Trends & Issues in Crime and Criminal Justice*. 513. Canberra: Australian Institute of Criminology. <https://www.aic.gov.au/publications/tandi/tandi513>

<sup>v</sup> McCausland, Ruth and Baldry, Eileen (2023). Who does Australia Lock Up? The Social Determinants of Justice. *International Journal for Crime, Justice and Social Democracy*, Vol 12 (3) pp. 37-53. doi: 10.5204/ijcjsd.2504.