



# Suicide prevention in Queensland – Discussion paper

## ***beyondblue* Submission**

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# Suicide Prevention in Queensland – Discussion paper

## Summary

*beyondblue* is pleased to make this submission to the Queensland Mental Health Commission, in response to the *Suicide Prevention in Queensland: Continuing the Conversation – Discussion Paper*.

*beyondblue* is committed to preventing suicide and improving the lives of individuals, families and communities affected by suicide. On average, more than seven men and women die by suicide each day in Australia. **We believe that suicide is largely preventable, and everyone has a role to play in suicide prevention.** *beyondblue* adopts a broad public health approach to suicide prevention, which includes reducing the risk of suicide by supporting people to protect their mental health and improving people's opportunities to get the right help at the right time when they are unwell.

The development of the Queensland Suicide Prevention Action Plan is an opportunity to prevent suicide and suicidal behaviour, and reduce its impact. *beyondblue* believes that the Action Plan should:

- be coordinated with **federal suicide prevention initiatives**, and the ambitious goal to reduce suicide and suicide attempts by 50 per cent within the next decade
- complement and support broader **mental health promotion, prevention and early intervention strategies**
- adopt a **systemic, multi-level and multi-sectoral suicide prevention model**
- support **community engagement approaches**, which enable communities to set local suicide prevention priorities
- **invest in long-term strategies**
- **evaluate the impact** of activities and monitor changes in suicide and suicidal behaviour

*beyondblue* is implementing a suite of suicide prevention initiatives, across the proposed priority areas of the Queensland Action Plan. Significant *beyondblue* strategies that have the potential to make a difference in Queensland are:

- **The *beyondblue* Way Back Support Service** – this new, innovative suicide prevention service has been developed to save the lives of one of the population groups most at-risk of suicide – those people who have attempted suicide. This Service is currently being trialled in the Northern Territory, with a second trial site commencing in New South Wales later in 2015. ***beyondblue* is keen to partner with the Queensland Mental Health Commission to implement a Queensland trial site, as part of the Action Plan.**
- **The BeyondNow safety planning app** – this intervention will enable people to create a digital safety plan, and provide people with concrete strategies to use to decrease their risk of acting on their thoughts and harming themselves. **This app will be ready for public use and promotion, including in Queensland communities, in 2016.**
- **Davo's Man Therapy campaign** – this campaign encourages blue-collar males in regional areas of Australia to take action against depression and anxiety. At [www.mantherapy.org.au](http://www.mantherapy.org.au) men can assess their wellbeing, get answers to frequently asked questions about mental health and receive action-oriented advice on dealing with depression and anxiety. **This campaign is currently being rolled out in Queensland.**
- **The STRIDE project** – *beyondblue*, with funding from The Movember Foundation, has commissioned six research partnerships to demonstrate the impact of digital interventions to reduce the stigma of anxiety, depression, and/or suicide in Australian men aged 30 to 64 years. Two of the STRIDE projects, **'The Ripple Effect' and 'Y-Fronts', will be implemented in Queensland, with resources being piloted from late 2015.**
- **Have the Conversation resources** – videos and written resources have been developed to help people have a conversation with someone they are concerned about, including people who are worried that

someone may be thinking about suicide. **These resources are currently available in Queensland.** More information is available at: [www.beyondblue.org.au/resources/have-the-conversation](http://www.beyondblue.org.au/resources/have-the-conversation)

- **Family guide to youth suicide prevention** - this guide supports parents of young people who may be at-risk of suicide. It includes information and videos on the warning signs and risk factors of suicide; how to support a young person, including getting help from a health professional; and supporting young people to be resilient. **The guide is available in Queensland** at: [www.beyondblue.org.au/resources/family-and-friends/parents-and-guardians/family-guide-to-youth-suicide-prevention](http://www.beyondblue.org.au/resources/family-and-friends/parents-and-guardians/family-guide-to-youth-suicide-prevention)

Additional information on the suite of *beyondblue's* initiatives that are helping to prevent suicide, and reduce its impact, are included throughout this submission.

*beyondblue* is a national, independent, not-for-profit organisation working to promote good mental health. Our vision is that all people in Australia achieve their best possible mental health. We create change to protect everyone's mental health and improve the lives of individuals, families and communities affected by depression, anxiety and suicide.

This submission has been informed by *beyondblue's* extensive experience in delivering depression, anxiety and suicide prevention initiatives targeting individuals, families, schools, workplaces and communities. These initiatives are supported by funding from the Queensland Government.

***beyondblue* is keen to work with the Queensland Government on ways to prevent suicide and reduce its impact.**

## 1. Does the Action Plan's proposed goal support a renewed approach to suicide prevention in Queensland?

The Action Plan's proposed goal, to reduce suicide and its impact on Queenslanders, demonstrates a commitment to suicide prevention in Queensland. To ensure that this goal drives change:

- **A measurable target on suicide prevention needs to be set.** The National Mental Health Commission and the National Coalition of Suicide Prevention have both proposed a stretch goal to reduce national suicide rates and suicide attempts by 50 per cent within the next decade.
- **The 'impact' of suicide needs to be clearly defined.** Suicide has a significant and negative impact on individuals, families, communities, workplaces, schools and health services. To achieve change, the impact that will be addressed through the Action Plan needs to be defined and measured.
- **A long-term approach is needed.** While it is beneficial to regularly monitor progress and adjust actions to respond to community and social changes, a short-term focus on uncoordinated activities can undermine efforts to secure long-term and effective community participation and change. It is important that the Action Plan is one component of a long-term strategy, that includes a phased approach to implement suicide prevention strategies in a sustainable manner.

### Recommendations:

1. Set a measurable target for suicide prevention, that aligns with the national goal to reduce national suicide rates and suicide attempts by 50 per cent within the next decade.
2. Define the 'impact' of suicide that the Action Plan will address and set measurable targets and indicators of success.
3. Adopt a long-term approach to suicide prevention. The Action Plan should be one component of this longer-term strategy.

## 2. Are the proposed Priority Actions for the Action Plan likely to make a difference?

The proposed priority areas are in line with evidence on ‘what works’ to effectively prevent suicide – it is important that the resilience and capacity of communities is strengthened, while also improving access to services, adopting a targeted approach for vulnerable groups, and building the evidence base which underpins policies and programs. **It is, however, difficult to assess whether the proposed priority actions are likely to make a difference in preventing suicide.** The discussion paper does not include information on *how* the priority actions will be implemented and measured, and this is critical to determining whether the Action Plan is likely to prevent suicide and reduce its impact.

The National Mental Health Commission’s (2014) review of mental health programmes and services proposes a number of actions to prevent suicide.<sup>1</sup> These include:

- Improving the quality of service responses to people who seek help for suicidal ideas or behaviours, and to those who are concerned about them
- Adopting a systemic, community-based approach, which includes:
  - Establishing agreed national minimum data sets for suicide prevention, to include outcome measurement and collection of baseline data
  - Initiating systemic, multi-level and multi-sectoral prevention models in particular Australian communities in collaboration with key stakeholders in those communities
- Closing the gap in rates of suicide between Aboriginal and Torres Strait Islander peoples and other Australians, by improving services; strengthening culture and social and emotional wellbeing in Aboriginal and Torres Strait Islander communities; and implementing the *National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2013*.

While most of these issues are considered in the Queensland Discussion Paper, the role of communities in participating in, and/or leading suicide prevention strategies, has not been considered. Community engagement provides a way to improve the effectiveness, efficiency, sustainability and uptake of suicide prevention initiatives<sup>2</sup> - it is an essential component of effective suicide prevention. Accordingly, **the Queensland Mental Health Commission should consider how community engagement will be incorporated into the Action Plan** (for more information on effective community engagement strategies, see response to Question 3, ‘What actions do you believe should be taken to reduce suicide and its impact on Queenslanders?’). The ‘*Communities Matter*’ toolkit, developed by Suicide Prevention Australia and the New South Wales Mental Health Commission, provides information and resources to help local communities implement suicide prevention activities. This resource could also inform the community engagement approaches adopted in Queensland. Further information is available at: [www.suicidepreventionaustralia.org/project/communities-matter-toolkit](http://www.suicidepreventionaustralia.org/project/communities-matter-toolkit)

**The Action Plan should also work towards implementing systemic, multi-level and multi-sectoral suicide prevention models, that are led by communities.** Research demonstrates that these suicide prevention models are effective and will lead to change. However, this approach to suicide prevention is a long-term strategy – the Action Plan would therefore need to set out the first phase of implementing this approach, which is built on through subsequent Action Plans.

Another framework that could inform the Queensland Action Plan is Mental Health Australia’s ‘*7 Point Plan for Action on Mental Health*’.<sup>3</sup> This Plan provides an overview of the high-level activities that are needed to reform and improve the mental health system. It includes the following actions:

- **Agree on what we want to achieve** – stipulate clear and measurable goals
- **Be clear on who is responsible for what** – define roles and responsibilities across governments, non-government organisations, clinicians and communities
- **Increase consumer and carer participation and choice** – involve people who have been affected by suicide in decisions about them
- **Match services to need** – provide effective, timely and evidence-based services across the spectrum of need, and include self-help, community care, psychosocial support and clinical services

- **Get the incentives right to drive better outcomes** – link improved outcomes with service delivery and resource allocations
- **Invest at the right time to achieve the greatest benefit** – focus on mental health promotion, prevention and early intervention, empower people to use self-help tools, and allow clinicians to help those with the highest needs
- **Keep governments and services accountable** – report on what investments are being made and what outcomes are being achieved.

The Queensland Mental Health Commission should ensure that each of these actions are incorporated into the Queensland Action Plan.

#### Recommendations:

4. Provide additional information on the Action Plan's suicide prevention strategies. It is not possible to comment on whether the proposed action areas are likely to make a difference, without having an understanding of what strategies will be implemented and measured, and how this will be undertaken.
5. Develop an evidence-based community engagement model to underpin the Action Plan.
6. Adopt a systemic, multi-level and multi-sectoral suicide prevention model in the Action Plan. As this approach requires a long-term investment, the Action Plan should set out the first phase of implementing this systemic approach.
7. Include information in the Action Plan on roles and responsibilities; consumer and carer participation; service delivery; funding and incentives; and governance and accountability.

### 3. What actions do you believe should be taken to reduce suicide and its impact on Queenslanders?

#### Suicide prevention strategies

The Action Plan should include suicide prevention strategies at a universal level, which reach the whole population (e.g. media reporting guidelines); a selective level, which target vulnerable groups within a population (e.g. Aboriginal and Torres Strait Islander communities); and an indicated level, which target specific vulnerable individuals (e.g. those who have attempted suicide).

**Public health interventions which have been demonstrated to effectively prevent suicide, and should therefore be incorporated into the Action Plan, include:** <sup>4,5,6,7,8,9</sup>

- restricting access to lethal means
- responsible media reporting
- educating health professionals on how to recognise and treat depression and suicidal behaviour
- supporting family and friends of high risk individuals
- e-therapies, targeting depression as a suicide risk factor
- systemic multi-level, multifaceted programs

There is also a suite of interventions which have been demonstrated to be promising, but need further evidence. These interventions should also be considered for inclusion in the Action Plan. They include:<sup>10,11,12</sup>

- delivering public awareness and education campaigns, such as community and school-based programs
- educating gatekeepers on suicide prevention
- emergency department initiated brief interventions
- telephone-based crisis care and suicide prevention services

In addition to these suicide prevention strategies, it is also important that there is a **strong focus on reducing the stigma and discrimination experienced by people who have attempted suicide** when accessing health and support services. The National Mental Health Commission's review of mental health programmes and services reported that *"when people do seek help, they too often are fobbed off or fall through cracks in the system of supports..."* and *"there was a strong feeling of being dismissed by health professionals, particularly those working in emergency departments, when seeking help for suicidal thinking"*

*or self-injury, and being sent home with no follow-up despite explicit plans for suicide. Many respondents reported feeling that they were not being taken seriously.*"<sup>13</sup> The Queensland Action Plan needs to implement a comprehensive approach to reduce this stigma and discrimination, and ensure that the service system does not dismiss people's needs and discourage them from accessing help.

While the Action Plan only pertains to Queensland, there may be opportunities to improve its impact through **considering opportunities for national coordination and support services**. This could enable:

- the sharing of lessons learned from existing community initiatives
- efficiencies in capacity building and evaluation strategies
- the implementation of system approaches and reforms - changing cultural norms, societal values, legislation, and high-level resource allocation, needs to be achieved through both state and national, whole-of-population approaches
- efficiencies in service delivery – for example, telephone and online suicide prevention and support services can be more efficiently and effectively delivered nationally

### Community engagement

Community engagement approaches improve the impact and uptake of suicide prevention strategies. There is good evidence on the essential components that are needed to successfully undertake community engagement and achieve change. **The Queensland Action Plan should reflect these evidence-based approaches to effective community engagement**. They include:

- Implementing suicide prevention community engagement approaches in communities that are ready to change, and have already identified suicide prevention as a priority issue.
- Matching the level of community engagement to the needs, readiness and capabilities of communities, with the goal of using empowering and collaborative community engagement strategies. The level of community engagement and the nature of activities undertaken should be determined on a responsive, case-by-case basis.
- Implementing capacity building approaches that work across a number of levels (individuals, communities, organisations and systems), and use a combination of strategies, from the action areas of organisational development, workforce development, resource allocation, leadership and partnerships.
- Building mutual trust and respect between the individuals and organisations involved.
- Including a diverse range of individuals and organisations in suicide prevention partnerships.
- Embedding collaborative partnerships into the core work of organisations and individuals.
- Developing communities of practice, to share experiences and knowledge of suicide prevention initiatives.
- Developing clear governance arrangements, which are monitored and updated to reflect changing levels of engagement.
- Developing and implementing evaluation frameworks, which draw on person-centred evaluation principles.
- Supporting local community engagement strategies with national coordination and support services.
- Investing in long-term initiatives.

### Governance

The Queensland Action Plan will need to be underpinned by clear governance arrangements. This should include:

- clear responsibilities for all individuals and organisations involved, with mechanisms in place to track accountability
- decision-making processes, particularly focusing on allocating, controlling and using resources and defining project objectives, outcomes and priorities
- conflict management processes
- structures, resources and processes which ensure that all individuals and organisations can be represented and 'have a say'. This should focus on traditionally under-represented and/or at-risk population groups, and ensure that potential barriers to participation are overcome (for example,

ensure strategies are culturally appropriate, meetings are held in accessible venues and at convenient times, information presented does not include technical or professional jargon).

## Evaluation

The Queensland Action Plan should include an evaluation framework which monitors changes in suicide and suicidal behaviour, and the impact of suicide prevention interventions. This evaluation strategy should:

- Be based on a program logic approach, which identifies inputs, activities, outputs and short, medium and long-term impacts (for example, firstly increasing awareness, then improving mental health literacy, leading to reduced suicidal intentions, and resulting in less suicidal ideation, attempts and completed suicides). It is also important that the assumptions underpinning this model are documented and informed by evidence.
- Collect data at different levels – for example, track changes within key organisations, communities, and across the whole state.
- Track patient journeys following a suicide attempt and subsequent interventions.
- Incorporate a strong focus on organisation and population measures, and consider broader data assessing the impact of prevention and early intervention initiatives. The relatively small number of suicides may impact on the quality of available data, and make it difficult to monitor progress. Assessing the impact of prevention and early intervention interventions may enable a better assessment of short and medium-term changes (for example, *beyondblue's* The Way Back Support Service collects data on improvements in wellbeing, improved quality of life, and decreased rates of suicidal behaviour).
- Integrate the evaluation measures with other important clinical outcome measures.
- Align with any mental health targets and indicators developed at a national level, including the possible development of a Closing the Gap target for the suicide rate for Aboriginal and Torres Strait Islander people (as recommended in the National Review of Mental Health Programmes and Services).

It is also important that the state-based evaluation framework and tools support communities to develop and implement local evaluation frameworks - both a 'top down' and 'bottom up' approach is needed, to ensure that every element of the Action Plan is evaluated.

### Recommendations:

8. Enable communities to set local suicide prevention priorities, and draw on a suite of evidence-based strategies to implement. These strategies should be part of a long-term, systemic, multi-level and multi-sectoral suicide prevention approach.
9. Implement initiatives which reduce the stigma and discrimination experienced by people who have attempted suicide.
10. Identify and incorporate opportunities for national coordination and support services into the Action Plan.
11. Develop a governance framework and processes to underpin the Queensland Action Plan.
12. Develop and implement an evaluation framework to underpin the Queensland Action Plan. This should align with national initiatives and enable communities to develop and implement local evaluation frameworks.

## 4. What is currently being done that works or could be improved? What *beyondblue* work is being undertaken or planned for Queensland, that should be reflected in the Action Plan?

*beyondblue* is implementing a suite of initiatives to prevent suicide and reduce its impact. These align with the proposed priority areas of the Queensland Action Plan.



## Priority area 1: Stronger community resilience and capacity

### Raising community awareness and reducing stigma

Raising awareness of depression and anxiety and reducing people's experiences of stigma and discrimination, is one of *beyondblue's* goals for 2015 - 2020. *beyondblue* is implementing a range of strategies to achieve this goal, which includes the following initiatives:

- **National advertising campaigns and supporting resources** – Campaigns have been developed to cover a range of conditions (such as depression, anxiety, perinatal depression); life stages (for example, youth, older people); population groups (for example, lesbian, gay, bisexual, trans and intersex people, Aboriginal and Torres Strait Islander people); and settings (for example, rural communities). *beyondblue's* campaigns are based on extensive quantitative and qualitative research with people with depression and anxiety and their family and friends, and provide insights into personal experiences. Campaign messages are disseminated and promoted via print, television, radio, cinema advertising, outdoor billboards, community events and forums and social media. *beyondblue* has also developed a comprehensive suite of **free information and resources**, including translated materials, which are disseminated to individuals, community groups, health centres, libraries, schools, universities, workplaces and many other settings.

A current *beyondblue* campaign is 'Man Therapy', which encourages men to take action against depression and anxiety. At [www.mantherapy.org.au](http://www.mantherapy.org.au) men can assess their wellbeing, get answers to frequently asked questions about mental health and receive action-oriented advice on dealing with depression and anxiety. The campaign and website feature the fictional Dr Brian Ironwood, a straight talking 'man's man' who combines humour with serious messages about mental health. To help increase the appeal of the Man Therapy campaign to other segments within the 25 - 54 age range, *beyondblue* has also developed the new '**Davo's Man Therapy**' campaign, which targets blue-collar males in regional areas of Australia. The campaign launched on Monday 22 June 2015 and will run for a six month period. In 2014-15, nationally there were 206,151 website visits to the Man Therapy website, and 39,967 people completed a 'Mind Quiz' (K-10 checklist).

- **Media coverage** – *beyondblue* has achieved widespread media coverage of depression, anxiety and *beyondblue* programs. Within a two-month period, there are approximately 4,600 news items published or broadcast that mention *beyondblue*, with a cumulative audience/circulation of around 89.5 million people. The increased media coverage of depression and anxiety, and the promotion of personal experiences, leads to greater awareness of mental health, and may contribute to decreasing levels of stigma and discrimination.
- **Social media** – *beyondblue* utilises its strong social media presence to reduce the stigma of depression and anxiety. Social media is used to:
  - extend campaign reach – for example, in the 2013 I Am Anxiety campaign community members used the Twitter hashtag #IamAnxiety to say they had experienced anxiety and there was no reason to hide their experience
  - promote stories of hope and recovery - #SmashTheStigma is used when stories of hope and recovery are posted on Twitter, particularly from high profile individuals. Sharing and retweeting posts through Facebook and Twitter also provides a way for people to promote understanding and share experiences of depression and anxiety
  - increase knowledge of depression and anxiety – *beyondblue's* Facebook, Twitter and Instagram communities are encouraged to share *beyondblue* image and video content which increases knowledge about depression and anxiety (for example, infographics on the prevalence of depression and anxiety)
  - enable conversations about depression and anxiety – through *beyondblue's* online forums, Twitter and Facebook communities, there is a public place for people to share their stories of depression and anxiety and receive advice and support from others.



- **beyondblue speakers bureau** – *beyondblue* has a pool of speakers who have a personal experience of depression and/or anxiety. The speakers share their stories of recovery and encourage others to take action and get the support they need, at public events, community forums and to the media.
- **blueVoices** – blueVoices is *beyondblue's* reference group of people with personal experiences of depression and/or anxiety and their family and friends. blueVoices members share their personal experiences and perspectives to inform *beyondblue's* work – for example, in campaigns, information resources, project reference and advisory groups, and research projects.
- **Have the Conversation** – *beyondblue* has developed a suite of resources to help people have a conversation with someone they are concerned about – **this includes information for people who are worried that someone may be thinking about suicide**. A recent independent evaluation of these resources has demonstrated that they are increasing knowledge about depression and anxiety, intentions to 'have a conversation' and resulting in more positive conversations occurring. More information is available at: [www.beyondblue.org.au/resources/have-the-conversation](http://www.beyondblue.org.au/resources/have-the-conversation)
- **The STRIDE project** – *beyondblue*, with funding from The Movember Foundation, has commissioned six research partnerships to demonstrate the impact of digital interventions to reduce the stigma of anxiety, depression, and/or suicide in Australian men aged 30 to 64 years. Two of the STRIDE projects will be implemented in Queensland:
  - The Ripple Effect - this project is designed to reduce stigma associated with a lived experience of suicide, by providing a peer-supported environment where farmers aged 30 - 64 can share their experiences, learn from each other and build knowledge and skills to assist them through their challenges. The intervention is flexible, so men can participate when, where and how it suits them; whether they have access to the latest smart phone or iPad, or have an ageing home computer or even a fax machine. The Ripple Effect is designed by people who know farmers, with the help of farmers for farmers. The resources will be trialled in Queensland in late 2015.
  - Y-Fronts – this project will connect men in remote areas who work Fly-in Fly-out / Drive-in Drive-out with other men in similar circumstances, enhancing their conversations about mental wellbeing and experiences with stigma in a male driven, interactive and non-confronting manner. The mobile applications and supporting social media platforms will be trialled in Central Queensland and Western Australia. The resources will be piloted in Queensland from late 2015.
- **beyondblue's workplace initiative – Heads Up** – for information on this initiative see response to 'Improving access to an integrated service system that meets local needs and circumstances' below.

**These initiatives are leading to community-wide improvements in responses to depression and anxiety.**

Recent national data suggests that the number of people getting help for depression and anxiety is increasing at a rapid rate. *beyondblue's* Depression and Anxiety Monitor data also shows that the Australian community is now better educated about depression, more likely to talk to family and friends when experiencing difficulties, and more accepting of others experiencing depression and anxiety.

**Recognising and helping a person at risk of suicide**

*beyondblue* has developed comprehensive **information on how to recognise and help a person at risk of suicide**. This includes information on:

- how to tell if someone is at risk of suicide
- common warning signs
- responding to warning signs
- supporting someone you are concerned about

This essential information, and links to other resources and support organisations, is available on the *beyondblue* website - [www.beyondblue.org.au/the-facts/suicide-prevention](http://www.beyondblue.org.au/the-facts/suicide-prevention) A guide specifically to support

parents of young people who may be at-risk of suicide, which includes video resources, has also been developed, and is available at - [www.beyondblue.org.au/resources/family-and-friends/parents-and-guardians/family-guide-to-youth-suicide-prevention](http://www.beyondblue.org.au/resources/family-and-friends/parents-and-guardians/family-guide-to-youth-suicide-prevention)

*beyondblue*, with support from The Movember Foundation, is also developing a **safety planning app – BeyondNow - which will allow clinicians and people at-risk of suicide to create a digital safety plan**. The App is an intervention designed to prevent suicide by providing people with a specific set of concrete strategies to use, in order to decrease the risk of them acting on their thoughts and harming themselves. It provides an escalation process that encourages people to identify their warning signs and take action early, implementing strategies themselves that help them cope. If these strategies are not helping, people can then reach out to support people and professional services.

BeyondNow is being developed for use as a research pilot by Monash University, and it will then be upgraded to incorporate the research findings and made available to the general public. It is expected to be ready for public use in early 2016. This innovative intervention provides a cost-effective way to help prevent suicide in Queensland.

### **Providing support to communities, families and people impacted by suicide**

*beyondblue* has also developed and disseminated information for people who have attempted suicide and their family/friends, including resources supporting Aboriginal and Torres Strait Islander communities. These include:

- *Finding your way back* – a resource for people who have attempted suicide – over 6,800 copies have been provided to Queenslanders
- *Guiding their way back* – a resource for people who are supporting someone after a suicide attempt – over 6,800 copies have been provided to Queenslanders
- *Finding our way back* – a resource for Aboriginal and Torres Strait Islander peoples after a suicide attempt – over 5,800 copies have been provided to Queenslanders

These resources are available free of charge, and can be downloaded or ordered through the *beyondblue* website.

### **Improving access to an integrated service system that meets local needs and circumstances**

*beyondblue* develops and implements both ‘upstream’ prevention approaches, which increase protective factors, and ‘downstream’ interventions, which improve the capacity of services and systems to respond to people at-risk of suicide. The ‘downstream’ interventions are included in response to ‘Priority area 2 – improved service system responses and capacity’. The ‘upstream’ approaches include:

- **school-based programs** – *beyondblue*’s KidsMatter ([www.kidsmatter.edu.au](http://www.kidsmatter.edu.au)) and MindMatters ([www.mindmatters.edu.au](http://www.mindmatters.edu.au)) programs adopt ‘whole of school’ approaches to support student mental health and wellbeing, and strengthen school capacity to support students experiencing mental health difficulties. Both programs are delivered across Queensland - 40 Queensland day care and preschool services and 456 Queensland primary schools are now participating in KidsMatter, and 91 Queensland secondary schools are participating in MindMatters.
- **Workplace-based programs** - Heads Up ([www.headsup.org.au](http://www.headsup.org.au)) is an Australian-first initiative of *beyondblue* and the Mentally Healthy Workplace Alliance launched in May 2014. It supports Australian businesses and workers to create more mentally healthy workplaces. Heads Up includes information and resources on suicide prevention in workplaces. This includes identifying and supporting someone at-risk of suicide, supporting someone who has attempted suicide, and implementing broader suicide prevention strategies such as developing organisational policies and procedures and staff training.
- **Social connectedness initiatives** – In 2014 *beyondblue*, with support from the Movember Foundation, conducted a **research project on the links between depression, anxiety, suicide and social connectedness**, in particular focusing on older adults and men aged 30 – 65 years. Following this research project, *beyondblue* developed a **‘Connections Matter’ booklet**, which provides older people with practical and evidence-based suggestions on how to help strengthen and maintain social networks. The booklet has been disseminated to approximately 3,000 Queenslanders, since being released earlier in 2015. *beyondblue* is also participating in the international **‘Mateship Innovation**

**Challenge'**, which is being run by the Movember Foundation and conducted in Australia, Canada and the United Kingdom. This Challenge will support innovative concepts that demonstrate how men in their middle years can build strong relationships with their peers.

*beyondblue* also provides opportunities to reduce social isolation and facilitate peer-to-peer support through our **online forums** (see: [www.beyondblue.org.au/connect-with-others/online-forums](http://www.beyondblue.org.au/connect-with-others/online-forums)). There are over 30,000 members of *beyondblue's* forums, and an average of 40,000 visitors per month. Research on the use and impact of the forums, conducted in early 2015, demonstrated that:

- 51 per cent of users reported feeling less depressed or anxious after accessing the forums
- 41 per cent claimed they have contacted a health professional as a direct result of using the forums
- 57 per cent indicated they have made a positive lifestyle change such as diet, meditation or exercise as a direct result of using the forums

*"The online forum is ideal for someone like myself as I often feel isolated. I know that I can get online and read other people's stories and feel more connected. It's reassuring knowing that I can use the forum during times when the support of my psychiatrist, counsellor & MH case manager are not available."* Online forum user

## Priority area 2: Improved service system responses and capacity

### Accessing and providing continuous care, support and treatment

*beyondblue* is improving access to mental health treatment through:

- increasing the community's **awareness and understanding** of these conditions – for example, through campaigns and information resources
- improving the community's capacity to **recognise and effectively respond** to depression and anxiety – for example, through skill-based training programs in schools and workplaces
- delivering **accessible and alternative models of care**, which ensure that people get appropriate and timely help.

*beyondblue's* accessible and alternative models of care include:

- **The *beyondblue* Support Service** (1300 22 4636 - [www.beyondblue.org.au/getsupport](http://www.beyondblue.org.au/getsupport)) – this Service provides immediate, short-term, solutions-focused support and referral services via a 24/7 telephone service, web chat service from 3pm to midnight, and an email response service. The Support Service is not a suicide or crisis line, however suicide-related issues are discussed and users are supported to access services to best meet their needs, including those people who are assessed as being at high-risk of suicide. In 2014/15 over 14,500 people from Queensland contacted *beyondblue's* Support Service.
- **Online programs:**
  - *beyondblue's* websites enable people to assess their mental health through completing a K-10 anxiety and depression checklist, and linking people into appropriate services if they are at-risk of anxiety or depression. In 2014/15 over 82,000 people from Queensland completed the checklist. In this same time period, over 6,000 Queenslanders completed a 'Man Quiz' on *beyondblue's* ManTherapy site ([www.mantherapy.org](http://www.mantherapy.org)) and approximately 4,500 Queenslanders completed a 'Brain Quiz' on the Youth*beyondblue* site ([www.youthbeyondblue.com](http://www.youthbeyondblue.com)).
  - The *beyondblue* website includes a 'Directory of medical and allied health practitioners in mental health', to link people to service providers in their local region (see: [www.beyondblue.org.au/get-support/find-a-professional](http://www.beyondblue.org.au/get-support/find-a-professional)). This page was accessed directly by over 1,600 people from Queensland in 2014/15. This resource is supported through information which encourages people with depression or anxiety to take an active role in their treatment and care when seeing a health professional.
  - *beyondblue's* BRAVE program is an interactive online program for the prevention and treatment of anxiety. The program provides ways for young people to better cope with their

- worries. There are also programs for parents. In 2014/15 over 1,300 people from Queensland accessed the program. It is available at - <https://brave4you.psy.uq.edu.au/>
- *beyondblue's* online forums provide an opportunity to receive peer support – more information is available in response to 'Improving access to an integrated service system that meets local needs and circumstances'
  - **The NewAccess program** – this is a demonstration project that provides a support service to help people tackle day-to-day pressures. This early intervention program provides easily accessible, free and quality services for people with symptoms of mild to moderate depression and/or anxiety who are currently not accessing mental health services. Trained and clinically supervised coaches operate like personal trainers, providing individual tailor-made support programs incorporating relevant areas such as problem solving, goal setting and dealing with worries. The program is currently being piloted and evaluated in three regions across Australia – Canberra, metropolitan Adelaide, and north coast New South Wales. Interim evaluation findings for the New Access pilot have been promising - the non-medical model is encouraging men to seek help in higher numbers (39 per cent of all clients are men) and we are achieving an average recovery rate of 68 per cent - well in excess of the benchmark of 50 – 55 per cent.
  - **The Way Back Support Service** – this is an innovative approach to **supporting people who have been discharged from hospital following a suicide attempt**. Support coordinators link people into existing health, community and social support services, ensuring they receive the care they require. This non-clinical service is currently being trialled in the Northern Territory, with a second trial site being established in New South Wales later in 2015. Additional information on The Way Back Support Service is included in [Attachment A](#).

### Supporting first responders and other service providers

*beyondblue* is implementing a number of projects targeting front line staff, including police, ambulance and other first responders. These include:

- **The *beyondblue* First Responders project** – this aims to improve the mental health of first responders and reduce their risk of suicide. A national audit of existing mental health programs for first responders was completed in December 2014 (which included an audit of several Queensland services). Relationships have been established with ambulance, fire and rescue, and SES agencies in Queensland. *beyondblue* is now developing a good practice model, based on the findings of the audit and stakeholder consultations.
- **The *beyondblue* National Ambulance project** – this three year project (2015 – 2018) is consolidating, cleaning and analysing data on suicide attempts and self-harm events across Australian Ambulance and ER services, to identify trends and opportunities for interventions.
- ***beyondblue's* Professional Education to Aged Care (PEAC) program** – this program aims to raise awareness about depression and anxiety in older people and heighten the skills of staff working in the aged care sector in regards to these conditions. The program is delivered both face-to-face and online, and includes information and skills on identifying and responding to suicide.

### Priority area 3: Focused support for vulnerable groups

*beyondblue* considers the needs of vulnerable groups throughout all of our work. This ensures that our information, resources and services are accessible and respond to the particular needs of different population groups. We also implement specific projects addressing suicide prevention, depression and anxiety in Aboriginal and Torres Strait Islander people and lesbian, gay, bisexual, trans and intersex people.

The *beyondblue* Stop. Think. Respect. campaign recognises that people who experience discrimination are more likely to develop anxiety or depression, and that subtle forms are just as damaging to mental health as more overt discrimination. The campaign challenges everyone in Australia to check their behaviour, think about their actions and challenge discrimination when they see it happening. It includes two phases – one focusing on discrimination against LGBTI people, and another focusing on discrimination against Indigenous Australians – the 'Invisible Discriminator'. The Invisible Discriminator campaign was launched in Sydney and Melbourne in 2014. In 2015/16 this campaign will be extended to Brisbane. It will focus on

increasing awareness and understanding of the impact discrimination can have on Aboriginal and Torres Strait Islander people, and encouraging non-Indigenous people to change their behaviour and treat Aboriginal and Torres Strait Islander people as equals.

*beyondblue* also influences Aboriginal and Torres Strait Islander suicide prevention responses through partnerships with other organisations and groups, such as our membership of the Close the Gap Campaign for Indigenous Health Equality Steering Committee. We also participate in external projects such as the National Advisory Committee for the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP). ATSISPEP includes spatial mapping to identify where every suicide has occurred across the country and what services and programs are in place in those areas. Community consultation with those who have experienced the harm of suicide is a key part of the project, including a series of roundtables in various locations around the country. The project will also explore the potential of a Crisis Response Team model to respond quickly and competently to communities in need following a suicide. This project is due to report to the Australian Government in August 2015. **As a national data collection and community consultation project led by Aboriginal and Torres Strait Islander researchers, we recommend that the ATSISPEP findings be considered in the development of the Queensland Suicide Prevention Action Plan.**

In April 2015 *beyondblue* convened a **roundtable discussion with a group of Aboriginal and Torres Strait Islander leaders and Elders to discuss the issue of Aboriginal and Torres Strait Islander youth suicide**. The roundtable is the beginning of an engagement process that will inform future *beyondblue* activity in the area of Aboriginal and Torres Strait Islander youth suicide prevention. The findings of ATSISPEP will inform this work, and a second roundtable discussion is planned following the completion of the project.

#### Priority area 4: Strengthening the evidence base

*beyondblue* is also working to **improve the evidence base** on suicide through supporting research projects that address critical knowledge gaps. Details of *beyondblue*-funded research projects, including information on the researchers, a description of the project, and outcomes, is available on the *beyondblue* website - [www.beyondblue.org.au/resources/research/research-projects](http://www.beyondblue.org.au/resources/research/research-projects)

*beyondblue* suicide prevention research projects have included:

- Identification and analysis of health service and pathways to health services contact amongst persons who suicided in Victoria, 2009 – 2010 (2015)
- Doing what comes naturally: Investigation of positive self-help strategies used by men to prevent depression and suicide (2014)
- Fatal suicidal behaviours in LGBTI populations (2014) – **this project is being conducted by the Australian Institute for Suicide Research and Prevention at Griffith University**
- Investigating health and survival outcomes and opportunities for prevention after medically serious suicide attempts in the Northern Territory: A follow-up study of Indigenous suicide attempts and care in the Northern Territory (2014)
- Men's experiences with suicidal behaviour and depression (2014)
- Re-frame IT: A randomised controlled trial investigating the impact of an internet-based CBT intervention among school students experiencing suicidal ideation (2014)
- Ensuring guideline-concordant monitoring of suicidal thinking and behaviour after initiation of antidepressant treatment in 12-to 25-year-olds with depression (2013)
- Depression management and prevention of suicide amongst the elderly in general practice (2007)
- Exploring Melbourne's hidden epidemic: Medication overdose, depression and their management by first responders (2006)
- Reducing Suicide in Men through general practice – The SIM Study (2006)

## 5. Any other views

It is important that **suicide prevention is incorporated into broader strategies that include mental health promotion, prevention and early intervention initiatives**. Adopting a holistic approach, which mitigates the risks and underlying determinants of suicide, and boosts protective factors, will lead to broader improvements in mental health and wellbeing. Implementing standalone frameworks may inadvertently create new 'silos' within the sector – it is essential that an integrated approach is adopted.

It is also important that **long-term and ongoing suicide prevention strategies are implemented**. Suicide prevention and community engagement activities are generally best undertaken in a gradual and incremental process, which ensures that individuals, organisations and communities can build trust and respect and develop a shared vision. The Action Plan, and funding and evaluation of its activities, should therefore support the investment in long-term initiatives, which are sustainable.

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- <sup>3</sup> Mental Health Australia (2014). *7 Point plan for action on mental health*. Accessed online 13 July 2015: [https://mhaustralia.org/sites/default/files/docs/mental\\_health\\_australia\\_7\\_point\\_plan\\_for\\_action\\_on\\_mental\\_health\\_october\\_2014.pdf](https://mhaustralia.org/sites/default/files/docs/mental_health_australia_7_point_plan_for_action_on_mental_health_october_2014.pdf)
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- <sup>8</sup> World Health Organization (2014), *Preventing suicide: A global imperative*. Accessed online 21 October 2014: [http://apps.who.int/iris/bitstream/10665/131056/1/9789241564779\\_eng.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/10665/131056/1/9789241564779_eng.pdf?ua=1&ua=1)
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- <sup>13</sup> National Mental Health Commission (2014). *Report of the National Review of Mental Health Programmes and Services: Volume 2*. NHMC: Sydney