

(Extract from: *LIFE* Framework – Building Partnerships).

Building partnerships

The complex tragedy of suicide intersects with problems and concerns across our society. Suicide risk may be influenced by factors in many domains, and the factors that protect against suicide are equally diverse. A comprehensive national approach to promote life and prevent suicide therefore requires the support, cooperation and collaboration of a wide range of groups, communities, agencies and individuals across Australia. Local community support and action will be crucial. Non-government and private organisation participants include those in health, drug treatment and prevention, education, child care, welfare, disability support, housing and homelessness, prisoner support, business, transport and the media. Commonwealth, State, Territory and local government involvement must encompass the portfolios of health, youth affairs, education, community services, communications, criminal justice and emergency services.

One of the most important functions of the *LIFE* Framework will be to foster collaboration and exchange between these groups. It aims to promote good practice and a consistent approach through complementary planning and joint projects between programs with related social justice, community development and health promotion goals. Given the high rates of suicide among young people and young adults, and the fact that many risk and protective factors have their roots in childhood, linkages will be especially important with programs seeking positive outcomes for young people. Involvement of non-government agencies and individuals will ensure that those with personal experience of suicide have an active voice in policy development. The pre-eminence of mental health problems among the risk factors for suicide dictates that mental health agencies and action under the *Second National Mental Health Plan* will play a major role in suicide prevention.

This document provides information about activities across the country that are relevant to suicide prevention. It represents a 'best attempt' to be accurate and comprehensive but it cannot hope to identify all those who might be included. It is intended, however, to be a living document and will be updated regularly. Feedback for inclusion in future editions is welcomed on activities already documented in this volume and on others that have been missed. A form is provided at the back of this book to help you provide feedback.

Community and local government

Much of the hands-on work in support of individuals at high risk of suicide is provided by community, consumer and local organisations, local health care practitioners, and the larger non-government and professional organisations. Local government also plays an important role in providing for the health and well-being of the population. This includes the provision of public health utilities, surveillance and regulatory activities as part of legislative requirements and involvement in a diversity of health and community support and development programs.

The non-government sector also contributes substantially to activities that support suicide prevention. Strong partnerships and linkages across sectors and between governments and non-government agencies can help to ensure that life promotion and suicide prevention are incorporated in a wide range of programs and activities.

Private providers in sectors other than health are also important partners in suicide prevention efforts. These include the media industry, private prisons, hotels and liquor providers, the funeral industry, private employment and training agencies, unions, and relevant professional associations and peak industry bodies. There is scope for many other groups and businesses to contribute, including providers of private accommodation (boarding houses, hostels, residential care), particularly for older people, people who have disabilities, mental disorders or problems with drugs and alcohol.

Specific groups whose expertise is particularly valued in developing programs and interventions include Aboriginal and Torres Strait Islander peoples, young people, residents of rural and remote areas, people affected by harmful drug use, individuals and families involved with the juvenile or criminal justice systems.

A considerable contribution to prevention of suicide is achieved by people helping and supporting each other at an informal level, particularly families and friends. This is especially true for those affected by suicide and self-harming behaviours. Many private individuals have shown an active interest in suicide prevention through, for example, making donations, attending workshops or volunteering as telephone counsellors.

People with personal experience of the effects of suicide or suicidal behaviour can be important contributors to suicide prevention and life promotion activities and to the development and review of relevant programs by providing their personal expertise, advising on community needs and the design of programs and services, and providing feedback on initiatives. These people can also have a role in suicide prevention and mental health promotion by pursuing good health themselves, and through building an aware, responsive, inclusive and equitable society.

Non-government organisations

Many non-government organisations are involved in activities that include a suicide prevention component or focus. Service clubs such as Rotary, Lions and Apex are not only involved at the community level, but also may support activities with national application, such as research. Specific research foundations and institutes, which have the ability to contribute to developing the evidence base for suicide prevention, are supported by business and community organisations, private health service delivery agencies and organisations, and churches and church organisations.

Universities and the vocational education and training sector have substantial capacity for contributing to best practice in suicide prevention through their functions of research, education and training, and curriculum development and dissemination. These are complemented by the sharing of information through conferences, seminars, workshops and presentations and sponsoring international exchanges.

Charitable and religious organisations such as St Vincent De Paul, Wesley Mission, the Salvation Army and the Smith Family operate in numerous capacities across the community. Some already conduct specific suicide prevention programs; others may be well positioned to integrate suicide prevention into existing activities.

Organisations serving specific ethnic or cultural groups provide culturally sensitive and relevant services in a range of areas for their members. These may provide the most

appropriate point of entry to programs for preventing suicide among people from culturally and linguistically diverse backgrounds.

Some groups provide direct one-to-one assistance and/or group support and counselling for individuals and families bereaved by suicide, for example Compassionate Friends. Other groups such as GROW provide more general social and emotional support.

Suicide Prevention Australia

Suicide Prevention Australia (SPA) was established in the 1980s and brings together community-based organisations and academic and medical experts with an interest in suicide prevention. It has a national board with representation from a range of organisations and each State and Territory.

SPA provides training, annual national conferences, a small clearing-house service and a national coordination structure to organisations involved in suicide prevention. It has the capacity to bring together a range of community, academic and service provider experts (individuals and organisations) across a range of sectors, and provide support to government and non government groups by providing expert and technical advice.

Mental Health Council of Australia

The Mental Health Council of Australia is the peak national non-government organisation established to represent and promote the interests of the Australian mental health sector. It provides advice to Government on mental health policy; promulgates information on mental health; promotes the participation of community and clinical service providers in national mental health policy, planning and decision-making; and fosters and coordinates links between groups and individuals with an interest in mental health.

Alcohol and Other Drugs Council

The Alcohol and Other Drugs Council of Australia (ADCA) is the peak national organisation involved in a range of activities which includes: advocacy to government, media and the general community; monitoring of parliament and media; research; provision of information; and special projects. Membership is widespread and includes alcohol and drug agencies, community health centres, hospitals, doctors, government officials and criminologists.

Consumer and carer groups

Consumer and carer groups make a valuable contribution in the mental health sector. Action and advocacy are important in improving service delivery systems and good practice so that they better reflect the needs of consumers and carers while many also support health professionals. The interests of groups affected by suicide, including people with mental health problems, young people, rural communities and Aboriginal and Torres Strait Islander communities, are represented by consumer-based organisations and peak bodies such as the Australian Council of Social Services, the Mental Health Council of Australia, the Federation of Australian Ethnic Communities Council, the Council on the Ageing, the National Aboriginal Community Controlled Health Organisations, the Alcohol and Other Drugs Council of Australia and the National Rural Health Alliance.

The Australian Mental Health Consumer Network is a national, representative mental health consumer voice, valuing consumer expertise for enabling full participation in Australian society. Other organisations representing consumers and carers include mental health foundations and associations based in the States and Territories, SANE Australia, the

Schizophrenia Fellowship and the Association for Relatives and Friends of the Emotionally and Mentally ill, a group with a long tradition of providing practical help and support for people with a mental illness.

Local government

Local government is in a unique position to identify gaps in community services and respond to community concerns. It has core functions in areas governed by public health legislation, and most local governments support recreational and cultural activities. Increasingly, local councils have assumed broader responsibility for local needs by providing a range of community programs and services for supporting the health and well-being of their constituents. Activities range across health service delivery, community development and health promotion, and may target the general population or special groups such as older people and those with disabilities, youth, children and families, Aboriginal and Torres Strait Islander peoples, and people from culturally and linguistically diverse backgrounds.

Within the diverse context in which it operates, there is a growing coherence in the position taken by the local government sector on health and community services. This offers potential for the sector as a whole, and for individual local governments, to be key partners in initiatives under the *LIFE* Framework.

Integration of suicide prevention and mental health promotion within existing local government programs would provide an opportunity to work with local communities to try new initiatives, build and coordinate local networks and resources, or implement existing training materials and programs. The Australian Local Government Association and State and Territory or other affiliated local government associations are key players in enhancing the role of local government in suicide prevention.

Medical practitioners and allied health professionals

Doctors, and general practitioners in particular, play a key role in suicide prevention and response in their local communities. They have contact with a large proportion of the population, although general practitioners have many demands on their time and suicide prevention is only a small part of their role.

Some people choose to use health care professionals other than, or in addition to, general practitioners. Community pharmacists, psychologists and nurses often play a critical role in delivering and coordinating primary health care, and they regularly work in partnership with general practitioners and medical specialists.

Other workers whose activity may extend within and beyond the health sector, including social workers, drug and alcohol workers, youth workers, occupational therapists, rehabilitation counsellors and other community workers, may also be the first point of contact for suicide prevention either as individuals or within various community organisations.

As well as those working in primary care settings, medical specialists have a role to play in suicide prevention in the community and in hospitals and other acute care settings. For example, psychiatrists (in private practice or public mental health services) play a critical role in caring for people with a mental disorder who may be at increased risk of suicide.

It is important that doctors working in other specialist areas including emergency medicine, obstetrics, geriatrics, paediatrics and oncology be aware of suicide issues, and integrate suicide prevention into aspects of their everyday practice.

Professional organisations

In the health sector

Professional organisations have the potential to work as valuable partners in suicide prevention and mental health promotion by providing the infrastructure for education and training and other professional support activities and networks. Such organisations include the Australian Medical Association, the Doctors' Reform Society, the Public Health Association, the Australian Nursing Federation, nursing colleges including the Australian and New Zealand College of Mental Health Nurses, the Pharmacy Guild, the Pharmaceutical Society of Australia and the Australian Psychological Society.

These and other professional organisations are invaluable partners in suicide prevention measures.

Outside the health sector

Some professional associations and regulatory bodies beyond the health sector are already supporting, progressing and sustaining suicide prevention initiatives, and there is huge potential for expanding the scope of such activity. For example, ongoing work with the media will hinge on strengthening relationships with media industry bodies such as the Australian Press Council, the Federation of Australian Radio Broadcasters and the Federation of Australian Commercial Television Stations. The Australian Automobile Association provides another example as an industry body with the potential to support ways of reducing the use of car exhaust gases as a means of suicide.

National tele-counselling, information and referral support services

Tele-counselling support services exist at national and State and Territory levels. Most are outsourced to the not-for-profit business sector, managed by organisations affiliated with religious or charitable institutions.

Tele-counselling services are used by a wide range of people experiencing social and emotional problems, some of whom require crisis assistance, including people at risk of suicide and self-harm. Lifeline, which responds to more than 22,000 calls a year where suicide is an issue, includes centres, some based in rural locations, which offer counselling as well as other forms of support. Kids Help Line is a free service and offers 24-hour accessibility to young people in rural and remote Australia, where conventional services are often unavailable. Though less than one per cent of the callers to Kids Help Line are at serious risk of attempting suicide, the service answers about 15,000 calls a week on wide-ranging issues which cover the social, schooling, lifestyle, health and mental health spectrum. Kids Help Line has recently begun to operate an internet counselling service which is available on www.kidshelp.com.au, available from Monday to Friday, 3pm - 9pm, (Queensland time).

Other crisis support centres and 'hotlines' also exist in some local areas, State government jurisdictions, or for specific populations (for example, for people of specific linguistic or cultural backgrounds, and gay and lesbian people). Parenting help lines are available under

several administrative arrangements in each State and Territory, providing services that include access to trained counsellors, referral, and general advice and information. Lifeline and Kids Help Line also provide access to other support and referral networks. Reachout!, an Internet information service located at www.reachout.asn.au, has a map-based referral search function.