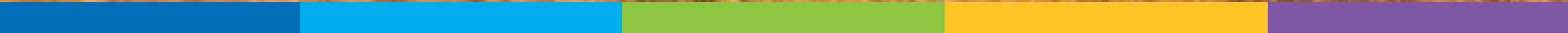


# Elevated distress levels require greater investment in suicide prevention

Suicide Prevention Australia  
2024-25 Pre-Budget submission



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## About us

Suicide Prevention Australia is the national peak body for the suicide prevention sector. We exist to provide a clear, collective voice for suicide prevention, so that together we can save lives. We believe that through collaboration and shared purpose, we can work towards our ambition of a world without suicide.

With more than 400 members representing more than 140,000 workers, staff and volunteers across Australia, we provide a collective voice for service providers, practitioners, researchers, local collaboratives and people with lived experience. We represent the sector from small community-based organisations to national household name agencies.

Suicide Prevention Australia releases the quarterly Community Tracker to analyse trends in levels of distress in the community, and the annual State of the Nation in Suicide Prevention report to provide a unique perspective on suicide risks and issues facing the sector.

We are proud of our role in the adoption of Australia's first Suicide Prevention Act in South Australia, and New South Wales' commitment to develop an Act. Our influence has also resulted in milestones including the creation of the National Suicide Prevention Office, and the creation and retention of Suicide Prevention as a portfolio in Federal and State Ministries.

# Executive Summary

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## The horse has bolted and there is no time to waste

Suicide is a complicated human behaviour and is more than an expression of mental ill health. Less than half of those who tragically lose their life to suicide each year are accessing mental health services at the time.

Risk factors are as diverse as housing insecurity, relationship breakdown, financial distress, social isolation and the impacts of alcohol or other drugs. Current issues such as cost-of-living and housing affordability are exacerbating social distress.

Suicide Prevention Australia exists to support and strengthen the services of our 400 members, provide an information channel that connects the sector with government and lead on policy services, training and research for the suicide prevention sector.

As an organisation closely attuned to lived experience, the incidence of suicide, and escalating rates of distress among many individuals and communities, we are calling on the Albanese Government to elevate funding for suicide prevention.

Suicide Prevention Australia has been closely tracking the impact of cost-of-living pressures and has consistently called on the Commonwealth government, and consecutive Reserve Bank Governors, to consider these findings as part of their decision making processes.

Our pre-Budget submission is provided in the context of a broader need for a national Suicide Prevention Act, which would establish essential machinery to drive a cross-portfolio approach to suicide prevention, drive down the suicide rate in Australia and make suicide prevention everyone's business.

**Suicide death rates rose 7 per cent last year across NSW and Victoria, at the same rate as inflation, and should be treated with the same whole-of-government priority.**

Every data source available to us demonstrates that the need to address the risk of suicide is urgent. Our December 2023 quarter community tracker shows that:

- Suicidal behaviours were six-times higher amongst 'middle-age, middle-wage' workers (27 per cent) than their middle-income retiree (5 per cent) counterparts;

- More than half (54 per cent) of Australia's 'middle-age, middle-wage' workers reported elevated distress due to cost-of-living and personal debt - up by a staggering 12 percentage points when compared to the same time last year;
- Over nine in ten (92 per cent) Australians believe that social and economic circumstances will still pose a significant risk to suicide rates in Australia in 12 months time;
- Over a quarter (27 per cent) of Australians know someone in their personal life or networks, who has died by or attempted suicide either directly (17 per cent) or indirectly (13 per cent); and
- Nationally, elevated 'cost-of-living and personal debt' distress for all Australians increased from 41 per cent to 46 per cent (up 5 percentage points) in the past 12 months.

Suicide prevention was almost completely overlooked in the 2023-24 Federal Budget and its subsequent Wellbeing Framework:

- Suicide Prevention Australia's June 2023 tracker revealed the Federal Budget will not make a "big difference" to the vast majority (80 per cent) of Australians experiencing elevated distress due to cost-of-living and personal debt; and

- The absence of suicide as a key indicator for measuring wellbeing is a glaring omission in the Wellbeing Budget Framework given that over 3,000 lives are lost to suicide in Australia each year, with suicide and self-inflicted injuries costing the economy an estimated \$28.8 billion per year.

**Elevated distress levels must be met with elevated funding for suicide prevention. Now is the time to right the wrongs of the 2023-24 Federal Budget.**

Suicide Prevention Australia notes with interest that the Prime Minister has tasked Treasury and Finance to identify measures that help support cost of living pressures in the 2024-25 Federal Budget<sup>1</sup>. These measures must also consider ways to manage the consequences of existing pressures.

These pressures are evident all across our society, from the home, to the workplace, supermarket and hairdresser.

**Suicide Prevention Australia has developed the following five budget recommendations to help bolster a collective, community-based effort toward suicide prevention:**

1. Funding for "first aid" suicide prevention training to make it more accessible to key members of the community who commonly encounter people at risk. This funding would

<sup>1</sup> Prime Minister, [Press Conference](#), Sydney, 3 January 2024.

enable a trained community response to the pressures causing distress; and

2. Funding for support providers to undertake the Suicide Prevention Accreditation Program, with a special focus on programs for priority groups and regional areas. This funding would serve to expand the reach and accessibility of programs across the country, whilst improving standards and quality of training delivered.

The 2024-25 Federal Budget presents a timely opportunity to address the significant impacts of Australia's cost-of-living crisis on the risk of suicide through targeted federal investment.

Additional Federal funding is also required to:

3. Implement the forthcoming National Suicide Prevention Strategy, following public consultation, by funding all priority actions and fund the National Suicide Prevention Office to monitor its implementation;
4. Provide fee-free training in Certificate IV Mental Health Peer Work

(Consumer Peer Work) to grow our Lived Experience Workforce; and

5. Fund the ABS to conduct the Mental Health and Wellbeing Survey every four years so that it can deliver timely evidence for more effective suicide prevention policy.

Our [National Policy Platform](#) sets out a clear agenda for Government to pursue. We are advocating for systemic change through four pillars: whole of government and whole of community approach, lived experience leadership, workforce strategy, and reliable and timely data and evidence.

This Budget submission is consistent with our National Policy Platform, as well as with the extensive sector consultation that led to the Final Advice delivered by the National Suicide Prevention Adviser and Taskforce in 2021.

Suicide prevention requires a whole of government approach that effectively coordinates funding and policy attention to address the social, economic, health, occupational, cultural, and environmental factors that can lead to suicide<sup>2</sup>.

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2 Australian Institute of Health and Welfare (2023a) Suicide and Self Harm Monitoring. <http://www.aihw.gov.au/suicide-self-harm-monitoring>



# SUICIDE PREVENTION: WE ALL HAVE A ROLE TO PLAY



Suicide is the leading cause of **premature death** in Australia



The economic cost of suicide is **up to \$30 billion** each year



Cost-of-living and debt are the highest **causes of distress** among Australians



Over **3,000** people die by suicide in Australia each year



People from **LGBTIQ+ communities** experience higher rates of mental ill-health and suicide



**One in six** Australians aged 16–85 years have experienced suicidal thoughts



More than half (54%) of Australia's **'middle-age, middle-wage'** workers reported elevated distress due to cost-of-living and personal debt in the December 2023 quarter of the Suicide Prevention Australia Community Tracker, compared to 42% (+12pp) this time last year.



**644,000 reported suicidal thoughts** in the last 12 months (ABS)



Suicide is the leading cause of death among **young Australians** aged 15-24 years



**55,000** suicide attempts per year in Australia



The rate of suicide among **First Nations** people is double the general population



**8.6** suicide deaths occur in Australia each day



Males account for **over 75%** of deaths by suicide in Australia



Suicide among **Veterans** is up to 18% higher than the general population



Suicide is the 15th **most common cause** of death in Australia

People in **regional, rural and remote** communities die by suicide at higher rates than those living in major cities in Australia



**Highest suicide rates** are among men aged 85 years or older



**45.6** is the median age at death among people who die by suicide



Survivors of suicide attempts are at higher risk of **future suicide death**



**12 deaths** by suicide in every 100,000

We can never underestimate the impact that every life lost to suicide has on family, friends, workplaces and the broader community. Every life lost to suicide is heartbreaking. It's important to remember that every statistic represents a life lost and has a cascading impact across the community.



# Introduction: Elevated distress levels require greater investment in suicide prevention

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As an organisation closely attuned to lived experience, the incidence of suicide, and rising levels of community distress, Suicide Prevention Australia is calling on the Albanese Government to elevate funding for suicide prevention in the 2024-25 Federal Budget.

Every data source available to us demonstrates that the need is urgent.

Suicide deaths rose 7 per cent last year across NSW and Victoria, at the same levels as inflation, and they should be treated with the same whole-of-government priority, in line with the forthcoming National Suicide Prevention Strategy.

Sadly, there is no sign of these pressures abating. Our Community Tracker found that nationally, elevated ‘cost-of-living and personal debt’ distress for all Australians increased from 41 per cent to 46 per cent (up 5 percentage points) in the past 12 months. And the known linkages between financial distress and risk of suicide mean that there is an urgent, stark and obvious need for increased investment in suicide prevention.

The most recent Federal Budget failed to deliver any substantive investment for suicide prevention and the Wellbeing Budget Framework which followed also failed to acknowledge the most critical indicators - suicidal distress, attempts and deaths.

Escalating levels of distress have not been met with elevated levels of funding for suicide prevention.

*There has been no significant investment in suicide prevention since the 2021 Budget allocation of \$2.3 billion for mental health, wellbeing and suicide prevention.*

Crucially, suicide prevention should not be conflated as a subset of mental health expenditure because not all suicides are a result of mental illness, and less than half of those who tragically lose their life to suicide each year have accessed mental health services<sup>3</sup>. So increased mental health funding, while beneficial, cannot address the whole problem.

The 2024-25 Federal Budget presents an opportunity to inject urgently needed funds into actions that are strategically designed

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3 J Svetcic, A Milner, & D De Leo, (2012). Contacts with mental health services before suicide: a comparison of Indigenous with non-Indigenous Australians. *General hospital psychiatry*, 34(2), 185-191

to decrease the number of Australians taking their own lives. Relief is needed now, in measures which can have a direct impact within the 2024-25 Budget year.

This Budget submission is broken into two parts. Part 1 provides two recommendations to equip our workforces and communities with the essential knowledge and skills to deal with distress and suicide risk, and to enable the sector to provide evidence-based help. These

initiatives will allow Suicide Prevention Australia to respond more effectively by scaling our current programs to reach a broader section of the community and the sector.

| Budget measure   | Description  | Total expenditure over forward estimates |
|--|--|--|
| <p><b>1.</b> Equipping the community to help prevent suicides</p>                              | <p>Make evidence-based “first aid” suicide prevention training more easily accessible to key members of the community who commonly encounter people at risk. \$1.2 million, each year over four years, would ensure Suicide Prevention Australia’s LearnLinc Platform can be readily accessed via an online learning hub that connects participants with multiple different training providers plus free online resources.</p> | <p>\$4.8 million</p>                     |
| <p><b>2.</b> Expand the reach and accountability of support programs through accreditation</p> | <p>Fund smaller organisations to undertake the Suicide Prevention Accreditation Program, with a special focus on programs for priority groups and regional areas. This funding would serve to expand the reach and accountability of programs across the country.</p>  | <p>\$6.86 million</p>                    |

Part 2 incorporates a further three recommendations to back-in existing Government commitments, capture the value of lived experience and ensure our efforts are based on evidence and data.

Suicide Prevention Australia calls on the government to:

- 3. Implement the forthcoming National Suicide Prevention Strategy,** following public consultation, by funding all priority actions and fund the National Suicide Prevention Office to monitor its implementation;
- 4. Provide fee-free training in Certificate IV Mental Health Peer Work (Consumer Peer Work)** to grow our Lived Experience Workforce; and
- 5. Fund the ABS to conduct the Mental Health and Wellbeing Survey** every four years so that it can deliver timely evidence for more effective suicide prevention policy.

These five measures would be best underpinned by a National Suicide Prevention Act to enable and facilitate the Strategy and hold all Ministers accountable for suicide prevention efforts. This submission aligns with Suicide Prevention Australia's National Policy Platform, and fully supports and adopts the Final Advice from the National Suicide Prevention Adviser and Taskforce (2021). The sector has contributed significantly to these discussions in recent years, and each of these proposals will help to build a whole-of-Government, whole-of-community response to suicide.

## Part 1

# Equipping the community and the sector to respond to elevated distress levels

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Distress factors in the community are at significant levels, and continue to increase. Cost of living and personal debt remain the highest causes of distress, with housing access and affordability, and social isolation adding to the burden.

Suicide Prevention Australia's most recent Community Tracker has identified elevated levels of distress across all sections of the community. The December 2023 quarter community tracker shows that:

- Suicidal behaviors were six-times higher amongst 'middle-age, middle-wage' workers (27 per cent) than their middle-income retiree (5 per cent) counterparts;
- More than half (54 per cent) of Australia's 'middle-age, middle-wage' workers reported elevated distress due to cost-of-living and personal debt - up by a staggering 12 percentage points when compared to the same time last year;
- Over nine in ten Australians (92 per cent) believe that social and economic circumstances will still pose a significant risk to suicide rates in Australia in 12 months time;
- Over a quarter (27 per cent) of Australians know someone in their personal life or networks, who has died by or attempted suicide either directly (17 per cent) or indirectly (13 per cent); and
- Nationally, elevated 'cost-of-living and personal debt' distress for all Australians increased from 41 per cent to 46 per cent (+5pp) in the past 12 months.

Suicide Prevention Australia can break this information down to all different segments but has highlighted the concerning findings in Western Australia, and amongst young people below.

## CASE STUDY 1

### Distress levels in Western Australia

West Australian residents have seen an increase (up 3 per cent) in the proportion who say they have experienced any form of suicidal behaviour in the past 12 months (since November 2022). West Australians have also indicated a 3 per cent increase in those who say they have had serious thoughts of suicide.

1. Western Australia has seen the highest increase in those who said alcohol and other drugs (+6%) has led to elevated distress in the past twelve months from November 2022 compared to all other mainland States.
2. Since November 2022, there has been an increase among WA residents in those who say cost of living and personal debt (+4%), housing access and affordability (+1%), and family relationships and breakdowns (+1%) have caused elevated distress in the past twelve months.
3. Concerningly, Western Australia is the only mainland State to have seen an increase (+3%) since November 2022 in the proportion who say they have experienced any form of suicidal behaviour in the past 12 months.
4. And similarly, there has been a 3% increase since November 2022 in Western Australians who say they have had serious thoughts of suicide – the only one of the 5 mainland States to have seen an increase.

(Source: Suicide Prevention Australia Community Tracker data)

## CASE STUDY 2

### Distress levels amongst young people (18 to 25 year olds)

Unemployment and job security (up 9 per cent), cost of living and personal debt (up 6 per cent), and housing access and affordability (up 2 per cent) are identified as key economic causes of elevated distress when compared to November 2022.

1. Unemployment and job security (+9%), cost of living and personal debt (+6%), and housing access and affordability (+2%) have all risen compared to November 2022, as key economic causes of elevated distress among the Australian young people.
2. Social isolation and loneliness (+3%) has also risen, compared to November 2022, as a key cause of elevated distress among Australians aged 18-25.
3. The December quarter has seen a decline among Australian young people who say family and relationship breakdowns (-10%) and alcohol and other drugs (-2%) have caused elevated distress.
4. The proportion of Australian young people who have visited, sought help or searched for advice from a suicide prevention service either directly or indirectly in the past 12 months has close to halved compared to November 2022 (20% Nov-23, compared to 37% Nov-22).
5. Despite declining (-6%) since November 2022, seeking advice via phone or text line is now the top way Australians aged 18-25 said they sought help or searched for advice from a suicide prevention service either directly or indirectly in the past 12 months.

(Source: Suicide Prevention Australia Community Tracker data)

This data demonstrates the urgency of suicide prevention. Australia cannot afford a repeat of last year’s Federal Budget which almost completely overlooked suicide prevention. Our June 2023 Community Tracker found that the Federal Budget would fail to address cost-of-

living and personal debt pressures. The subsequent Wellbeing Budget Framework also did not properly track distress and failed to incorporate suicide as a key indicator for measuring wellbeing. It is time to right the wrongs of the 2023-24 Federal Budget.

## Recommendation 1

### Equipping the community to help reduce suicide risk

| Policy Pillar                           | Recommendation  |
|---|---|
| <b>Quality, Workforce and Community</b> | <p>Make evidence-based “first aid” suicide prevention training more accessible to key members of the community who commonly encounter people at risk of suicide.</p> <p>Funding of \$1.2 million each year over four years would ensure Suicide Prevention Australia’s LearnLinc Platform can be readily accessed via an online learning hub that connects participants with suitable training providers and free online resources.</p> |

Research highlights the need for targeted suicide prevention learning and development for workforces that intersect with the social determinants of suicide – alcohol and other drugs; housing; justice; child protection and out-of-home care services. For example, suicide was 4.9 times more likely among people who interact with the child protection system, compared to people without a history of child protection or neglect.<sup>4</sup>

Evidence also highlights the need for tailored suicide prevention learning and development for workforces in these systems. Research commissioned for the National Suicide Prevention Taskforce through the National Suicide Prevention Research Fund highlighted that in pilots of tailored learning and development, there was an increase in participants’ knowledge, preparedness, and self-efficacy and an increase in referrals to support services.

4 S Trew, D.H Russell, & D Higgins, “Effective interventions to reduce suicidal thoughts and behaviours among children in contact with child protection and out-of-home care systems – a rapid evidence review,” Institute of Child Protection Studies, Australian Catholic University, 2020



People experiencing suicidal distress interact with diverse sectors of the community. It is a critical moment when a person discloses their distress or suicidal thoughts for the first time, so it is vital to build suicide prevention skills and knowledge throughout the community.

For suicide prevention to be effective, key people in the community should be actively engaged. This can include everyone from clinicians to frontline service workers and teachers, along with members of the broader community who often provide informal support, such as pharmacists or barbers.

With appropriate evidence-based suicide prevention training, these connectors within communities are capable of having a conversation with a patient, customer, student or neighbour and provide vital assistance to help reduce their risk of suicide.

**Suicide Prevention Australia has designed and piloted an online suicide prevention learning platform to help upskill and equip the community.** The learning platform, called LearnLinc, is an ongoing and supported learning-based program for individuals to identify learning needs, fulfil learning goals, and apply that learning to suicide prevention. The platform enables users to access resources and training, from a range of providers, that meet their needs. Over the past 15 months, we have added 147 learning resources, including training courses, research papers, reports, and factsheets. Many of these resources are developed and run with government funding, thus building on and extending impact of governments investment further.

The directory of resources continues to grow, and is under regular review to ensure currency.

The program was created in collaboration with experts in suicide prevention and suicide prevention training to provide a space for individuals and organisations to identify and access a variety of learning resources.

From 1 July 2024, we will be actively promoting the platform for those outside the sector as subscribers, to help develop suicide awareness, gatekeeper skills, and suicide prevention strategies to a broader audience. Suicide Prevention Australia will also actively reach out to larger organisations to encourage them to access LearnLinc as part of their wellbeing and WHS strategies.

Suicide Prevention Australia is calling on the Government to fund training in-community, to ensure the support is there for people in distress when they need it. \$1.2 million per annum would enable an expansion of the LearnLinc resource to key sectors, providing access to an additional 2,000 training participants in areas of the community and workforce that are likely to interact with people at increased risk of suicidal behaviour.



Learnlinc

## LearnLinc

### **With appropriate training, every Australian can help reduce suicide risk.**

“First aid training” in suicide prevention equips recipients with the capacity to detect the signs someone may be experiencing a mental health or wellbeing issue, the confidence to refer them to external support, and the capacity to secure crisis support for someone who may be at risk of suicide. There are a range of high-quality training programs across Australia that can give anyone the ability to respond if they encounter someone at risk of suicide in their everyday lives.

Suicide Prevention Australia has piloted an online suicide prevention learning platform - LearnLinc which is an ongoing and supported learning-based program for individuals to identify learning needs, fulfil learning goals, and apply that learning to suicide prevention.

After a 15-month pilot involving 100 participants, we have developed 147 learning resources, including training courses, research papers, reports, and factsheets. The directory of resources continues to grow, and is under regular review to ensure currency.

Rather than relying on people to engage in help-seeking behaviour, “first aid” training in suicide prevention equips those who are regular touchpoints with people at risk to proactively notice the signs and secure them the support they need.

“It is fantastic that Learnlinc is designed to support those currently working in the Suicide Prevention sector, as well as those with no previous experience. As an organisation working alongside the sector, Learnlinc provides us with a clear and easy to use pathway to make sure that all our staff have the fundamental skills needed for our suicide prevention projects.” Ergonomie

## Recommendation 2

### Expanding quality and access to suicide prevention programs through accreditation

| Policy Pillar                    | Recommendation  |
|----------------------------------|---|
| Quality, Workforce and Community | Funding for smaller community-based organisations to undertake the Suicide Prevention Accreditation Program, with a special focus on programs for priority groups and regional areas. |

The Suicide Prevention Accreditation Program supports and promotes the delivery of safe, high-quality, and effective suicide prevention and postvention programs across Australia. It embeds a continuous improvement approach to ensure that suicide prevention programs utilise the latest knowledge and best practice.

Suicide Prevention Australia is seeking a Budget allocation to fund smaller community-based organisations to undertake the [Suicide Prevention Accreditation Program](#), with the aim of ensuring each primary health network (PHN) region has at least one accredited provider. This funding would help fulfill one of the Government’s key initiatives outlined in the Wellbeing Framework - “Strengthening the mental health and suicide prevention system, growing the

workforce and laying the groundwork for future reform.”<sup>5</sup>

Accreditation requires training providers to demonstrate a commitment to quality improvement, by allowing the team to take active steps to implement best-practice programs and services.

Currently, 76 programs have received accreditation. Suicide Prevention Australia would like to see this expand to 500 in the 2024-25 financial year, 1,500 in the 2025-26 year, and 3,000 by the end of 2026-27.

Additional funding for accreditation would enable a focus on priority populations, specifically programs to support Aboriginal and Torres Strait Islander peoples (who experience double the rate of suicide); men (who account for 75 per cent of suicides); regional and rural communities (which have a higher rate of deaths by suicide than

5 Australian Government, [Measuring what Matters - Australia’s First Wellbeing Framework](#), July 2023, p25 accessed 6 January 2024

metropolitan areas); and Veterans (18 per cent higher than the general population). Additional resourcing would also allow us to expand the program to culturally and linguistically diverse populations.

Once a program is undertaken or has achieved accreditation, it is then listed in our [Best Practice Directory](#). PHNs and Coordinators have been encouraged to consider whether programs are accredited or working towards accreditation under the national standards when undertaking commissioning processes. This also provides the Government with a strong level of assurance as to which programs and organisations offer quality and fit-for-purpose training worthy of funding.

Assessment against the accreditation standards assists organisations to continually improve and provide assurance to consumers and funding providers that the suicide prevention programs delivered are safe, high-quality and effective. The standards include Alignment; Lived & Living Experience of Suicide; Collaboration; Program Framework; Program Management; and Program Outcomes & Knowledge Sharing.

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*“The accreditation provides six of our core programs with further credibility, diligence, and governance; ensuring OzHelp’s valued customers and clients have the confidence that we are providing only the very best support and care to those who need it.”*

*- OzHelp*

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*“The Suicide Prevention Accreditation Program is an important step even further to ensure the veracity of suicide prevention programs that are often Government funded and are made available to those vulnerable to suicide. We strongly welcome the independent accreditation process and thank the SPA team for their smooth onboard and continued support.”*

*- LivingWorks Australia*

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*“We are so grateful for Suicide Prevention Australia to have set these standards and give clear communication on how to deliver the very best in standards that we can. It has been a most beneficial process to undertake as an organisation and we are reaping the benefits already in the streamlining of our policies and processes.”*

*- Iris Foundation*

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Together, budget recommendations 1 and 2 serve to boost and maintain knowledge, skills and support systems within the community. Recognising that pressures are evident all around us, Suicide Prevention Australia has created tools and training to uplift those best placed to make that early valuable response for people experiencing suicide distress.

We call on the Government to fund LearnLinc and the Suicide Prevention Accreditation Program so that we can scale our reach and impact in a way that responds to the elevated distress levels, and increased suicide rates.

## Recommendations 1 and 2 costings

| Budget measure             | 2024-25<br>(\$'000) | 2025-26<br>(\$'000) | 2026-27<br>(\$'000) | 2027-28<br>(\$'000) | Total<br>expenditure<br>(\$'000) |
|----------------------------|---------------------|---------------------|---------------------|---------------------|----------------------------------|
| 1. Training the community  | 1,200               | 1,200               | 1,200               | 1,200               | 4,800/4 yrs                      |
| 2. Expanding accreditation | 660                 | 1,550               | 2,325               | 2,325               | 6,860/4 yrs                      |

## Part 2

# Accelerated implementation of existing Government commitments, capturing the value of lived experience and ensuring evidence-based policy.

## Recommendation 3

### Funding the National Suicide Prevention Strategy

| Policy Pillar                       | Recommendation  |
|-------------------------------------|---|
| <b>Whole of Government Approach</b> | Following a robust and genuine public consultation process, implement the forthcoming National Suicide Prevention Strategy by committing full funding for all priority actions. Fund the National Suicide Prevention Office to monitor and provide annual progress reports on implementation of the Strategy. |

The forthcoming National Suicide Prevention Strategy is key to coordinating and guiding whole of government action to reduce deaths by suicide in Australia. Early consultation drafts show that the National Suicide Prevention Office has consulted broadly and that the strategy is aligned with the evidence on what needs to be done.

However, the strategy has not yet undergone a final public consultation process. It is expected that the public consultation process will be undertaken prior to the budget being finalised. We urge the government to take into account the recommendations in the National Suicide

Prevention Strategy and fund the priority actions of the strategy following public consultation.

In addition, the National Suicide Prevention Office should be tasked with developing implementation plans, and adequately resourced to coordinate, monitor and evaluate the rollout of reforms and programs.

The National Strategy must now be urgently released for public comment and finalised in order to properly respond to the elevated need we have highlighted in this submission.

The Strategy will not be able to make the impact necessary unless it is properly implemented, monitored and funded for action across relevant government portfolios.

We call on the Government to fund the National Suicide Prevention Office to develop implementation plans and coordinate and monitor implementation of the Strategy.

## Recommendation 4

### Grow the lived experience workforce

| Policy Pillar    | Recommendation   |
|------------------|--|
| Lived experience | Provide fee-free training in Certificate IV Mental Health Peer Work (Consumer Peer Work) to grow our Lived Experience Workforce. |

The importance of lived experience in suicide prevention is evident in many ways. People with lived experience have knowledge and insights that make them uniquely placed to inform suicide prevention policy and practice.

The voice and knowledge of individuals with lived experience is diverse, and this diversity brings with it the ability to communicate with a community that spans all demographics. Individual experiences of suicide are varied - whether through experiencing suicidal ideation, suicide attempts, caring for someone at risk, or losing a loved one. Listening to these diverse voices and views are essential to ensuring policies and practice meet the needs of those at-risk or impacted by suicide. Equally, these voices and views are important in a peer workforce, helping to ensure the services offered are the services that will connect to people in distress.

The Final Advice from the National Suicide Prevention Adviser acknowledges that “positioning knowledge from lived experience at the forefront of research, policy and practice has the potential to richly communicate the complexities of suicidal behaviour and highlight key considerations for preventing suicide and better supporting people”.

The [National Agreement on Mental Health and Suicide Prevention](#) has a core element that implementation “be informed by the lived experience of consumers and carer” .

In line with this, Suicide Prevention Australia recommends fee-free delivery of the Certificate IV in Mental Health Peer Work (Consumer Peer Work) to grow our Lived Experience Workforce.

Under the Australian Skills Plan, the Government committed to provide fee-free TAFE for Australians studying in an industry with a skills shortage. There is an evident need to increase the lived experience



peer workforces in suicide prevention. Consultations within the sector have highlighted the importance of recognising the value of the peer workforce, retaining and increasing it, and ensuring it is recognised as an essential element of suicide prevention.

The inclusion of a suicide prevention peer workforce under this policy will work towards the sustainability of the sector and encourage the retention and professional development of a peer workforce. This will harness the experience and knowledge of lived experience to meet the needs of the diversity of people in the community experiencing distress.

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*“Lived experience expertise is separate, equal and additional to ANY expertise provided by sources such as academia, service provision or conventional research and evaluation.*

*The knowledge gained through relevant, reflected upon and integrated lived experience cannot be replaced by any other knowledge. A program that is informed by this hard-won experience will be able to provide more effective support and better outcomes for the community.*

*We all share the aim of providing the best we can for the people who access our services and valuing people with lived experience as equal partners in all aspects of service provision is the most certain way to provide the best possible service.”*

*- Grenville Rose, Lived Experience Panel Member*

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## Recommendation 5

### Collect meaningful data regularly

| Policy Pillar   | Recommendation  |
|-----------------|---|
| Data & evidence | Funding for the ABS to conduct the Mental Health and Wellbeing Survey every four years to deliver timely evidence for more effective suicide prevention policy. |

The latest Australian Bureau of Statistics (ABS) National Mental Health and Wellbeing Survey includes important information into suicidal behaviours, ideation, and attempts. The survey was released in 2023, following a 17-year hiatus.

The extreme gap between data sets reduces the capacity to identify trends, which then significantly reduces the utility of its data.

Suicide Prevention Australia is calling on the Government to fund the Australian Bureau of Statistics National Mental Health and Wellbeing Survey (ABS Survey) so that it can be undertaken more regularly, at intervals of no more than four years. The ABS survey should also be expanded to collect data on the linkages between risk factors of suicidality and suicidal behaviours and suicide attempt data. This expanded data set would enable policy makers and service providers to target protective factors, as well as measure the efficacy of strategies, policies and services.

The absence of consistent and timely data led to a fundamental flaw in Australia's first Wellbeing Budget Framework, released in July last year. We cannot have a true representation of Australia's wellbeing without tracking the incidence of suicide.

In addition, the Framework included reference to the most recent ABS National Health Survey data, but dismissed its findings of "high or very high levels of psychological distress in 2020-21" because the data was collected during the COVID-19 Pandemic, and "might not reflect a long-term trend."<sup>6</sup> The Framework also cautioned on comparing this most recent data with earlier trends due to differences in methodology.

The most recent ABS data could also indicate a departure from previous long-term trends and present a strong and urgent need for a substantial policy response. At the very least, the ABS Survey Data indicates a need for ongoing data, based on a consistent methodology.

6 Australian Bureau of Statistics (2022) National Study of Mental Health and Wellbeing, ABS Website, as cited in, Australian Government, July 2023, p24 accessed 6 January 2024

The Wellbeing Framework described distress levels in Australia as “stable”<sup>7</sup> by applying outdated data on mental health during the period from 2004–05 to 2017–18. This is flawed, because it disregards more recent data and other indicators which also show higher distress levels and suicide rates. For example, State suicide registers reveal suicide deaths rose by about 7 per cent in 2022 across the nation’s two largest States, Victoria (9.5 per cent) and New South Wales (6 per cent) and numbers of deaths by suicide remain at a high level in the available 2023 data.

As well, the absence of suicide as a key indicator for measuring wellbeing is a glaring omission in the Wellbeing Budget Framework when we consider that over 3,000 lives are lost to suicide in Australia

each year, and when we know that suicide and self-inflicted injuries cost the economy an estimated \$28.8 billion per year.

Regular ABS Survey releases would enable identification of trends, impact evaluation, and linkage opportunities to existing datasets, such as the Australian Bureau of Statistics’ annual Causes of Deaths releases.

Accurate and reliable data is vital to plan and provide suicide prevention services, and to ensure programs and interventions are evidence-based and safe for communities. This data would make a valuable contribution to the Government’s Wellbeing Budgets into the future.

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7      *Ibid.*, p22

# Conclusion

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The recommendations contained in this pre-Budget submission recognise the impact that cost of living is having on distress levels and suicide rates.

Elevated distress levels must be met with elevated funding for suicide prevention.

With cost-of-living continuing to impact people's wellbeing and security, suicide prevention cannot be overlooked in another Federal Budget.

Our five recommendations provide a whole-of-Government response that equips Australians with the knowledge and tools to help prevent suicide. These measures would also equip the sector by ensuring that evidence-based, effective programs can be recognised and accredited, while equipping relevant members of the community to respond to suicidal distress with skill, compassion and knowledge.

The recommendations back-in extensive Government work on suicide prevention. A great deal of work has been done, and reforms have been identified. Now is the time to put them into action with a whole-

of-government approach, backed by adequate funding.

Suicide Prevention Australia stands ready to upscale its approach to a compassionate, community-based effort based on "first aid" suicide prevention training through LearnLinc and through the Suicide Prevention Accreditation Program.

Following extensive sector consultation over several years, the forthcoming National Suicide Prevention Strategy lays out a whole-of-Government collaboration with the community, relying on essential factors such as lived experience and sector expertise.

If we want to imagine an Australia without suicide, then we need to urgently adopt these measures in full in the 2024-25 Budget.

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## **Elevated distress levels require a greater investment in suicide prevention**

Suicide Prevention Australia  
2024-25 Pre-Budget submission

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