



November 2024

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# Consultation – Reforms to Strengthen the National Suicide Prevention Office

Suicide Prevention Australia Submission

## Executive Summary

The National Suicide Prevention Office is a vital and consultative agency which is valued by the sector. The work it undertakes is essential to meaningfully reducing the impact of suicide across the country. Changes to its structure should be used to enhance its ability to drive suicide prevention initiatives across the whole of government, with its authority based on consultation and collaboration, and with the independence and assurance that will enhance its credibility and transparency.

We have undertaken extensive consultation with our members and therefore make the following recommendations:

1. The Federal Government should not consider implementing any option that diminishes the independence and impact of the National Suicide Prevention Office (NSPO).
2. That if an option that diminishes the independence and impact of the NSPO be implemented, it must only be an interim step.
3. The Federal Government should maintain the current roles and functions of the NSPO to enable it to continue its highly effective activities and retain the confidence of the sector, and consider expanding the role of the NSPO to include oversight and monitoring of the National Strategy, including coordination of suicide prevention units across federal government departments
4. The Head of the NSPO should maintain the level of seniority as was held prior to the reform, and report directly to the relevant portfolio Minister as head of an independent, statutory authority.
5. The Federal Government should maintain the current arrangement of the NSPO's non-statutory advisory bodies, the Advisory Board and the Lived Experience Partnership Group, in order to avoid adding unnecessary additional administrative burden.
6. The Federal Government should move to establish the NSPO and NMHC as separate Statutory Offices, and consider expanding the role of the NSPO to take on the suicide prevention related functions of the NMHC.
7. The Federal Government should ensure that any changes to the role or functions of the NSPO that are related to lived experience, are informed by a rigorous process of consultation and engagement with a broad range of lived experience perspectives.
8. In the consultation process, a number of vital and relevant topics have been raised that relate to but were not included in the discussion paper, and the Federal Government should give careful consideration to these.

## Introduction

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 350 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 strongly supported the establishment of a National Suicide Prevention Office (NSPO). The creation of the NSPO was a milestone moment for suicide prevention in Australia which recognised the importance of a whole-of-government approach to suicide prevention. While acknowledging the importance of mental health as a driver of suicide risk, and thus the important role of the National Mental Health Commission (NMHC), this submission will largely focus on the NSPO.

It is particularly essential at the current time that the NSPO remains resourced and able to fulfil its functions, including oversight of the recently released draft Advice on the National Suicide Prevention Strategy (National Strategy).

We are supportive of the reform process and have developed this submission on behalf of our members to help ensure that the NSPO is positioned for success. Accordingly, this submission will focus on strengthening the NSPO and is structured to align with the prompt questions provided in the discussion paper for the consultation. This submission is structured around the Discussion Paper<sup>1</sup> that was developed to facilitate input on the reform of the NMHC and NSPO, but also addresses topics not covered by that paper.

## The role and functions of the NSPO

The current roles and functions of the NSPO were outlined in the Final Advice of the National Suicide Prevention Advisor which was released in 2021 as a result of broad and extensive engagement with the sector,<sup>2</sup> followed by a Discussion Paper on the NSPO's proposed structure, role and function.<sup>3</sup> The NSPO's current roles and functions have been subject to rigorous review and consultation with the sector to ensure they are fit for purpose. In particular, the NSPO has been tasked with ensuring a whole-of government approach to suicide prevention that captures cross-portfolio, cross-jurisdictional and regional issues.

**Recommendation 1: The Federal Government should not consider implementing any option that diminishes the independence and impact of the National Suicide Prevention Office (NSPO).**

**Recommendation 2: That if an option that diminishes the independence and impact of the NSPO be implemented, it must only be an interim step.**

The activities of the NSPO in pursuing its roles and functions have been welcomed by the suicide prevention sector. The preparation of the draft Advice on the National Suicide Prevention Strategy, based on extensive consultation with the sector, is a reflection of the important role the NSPO holds both in systemic change and in sector confidence.

The National Strategy, if adopted, can provide a roadmap which allows all levels of government to immediately start allocating resources and agencies towards initiatives which are focused on reducing the rate of suicide in Australia. The NSPO, as a specialist coordinating body, is well placed to provide oversight and impetus and should have the ability to drive implementation without facing the barriers of inter-departmental processes and inherent delays. It should also be the first point of contact for information related to the roll out of the National Strategy for Local, State and Territory Governments. The NSPO can play an important role in pulling together the expertise needed to translate the National Strategy into action.

Given the rigorous review and consultation, and subsequent success, of the current roles and functions we strongly urge that these be maintained, and even enhanced. Any reduction in the NSPO's roles and functions will lead to a less active role in the sector and will disable and minimise the importance of the National Strategy before it is even adopted.

**Recommendation 3: The Federal Government should maintain the current roles and functions of the NSPO to enable it to continue its highly effective activities and retain the confidence of the sector, and consider expanding the role of the NSPO to include oversight and monitoring of the National Strategy, including coordination of suicide prevention units across federal government departments.**

## Governance and Advisory Structures

A critical aspect of the NSPO's governance is the reporting and seniority of the Head of the NSPO. To ensure that the NSPO is adequately empowered to create long-lasting and meaningful change, the Head of the NSPO must continue to be appointed and should report directly to the Minister of the portfolio that the NSPO is within. The Head of the NSPO requires this freedom to ensure accountability and transparency, and the ability to deal with suicide prevention meaningfully and holistically. It is important that the seniority of the Head of the NSPO is reinstated, to demonstrate the importance of the Office and to enable interdepartmental consultations to occur at the correct seniority.

**Recommendation 4: The Head of the NSPO should maintain at least the same level of seniority as was held prior to the reform, and should report directly to the Minister of the portfolio that the NSPO is within.**

We also urge that the NSPO's Advisory Bodies, the Advisory Board and the Lived Experience Partnership Group are retained and remain as non-statutory Advisory Bodies. The NSPO will benefit from the flexibility of this arrangement as it will ensure

access to a wide range of stakeholders with skills and experiences from across and outside the suicide prevention sector. The inclusion of Statutory Bodies would add to the administrative burden without enhancing a diversity of views and representation. The operation of the Advisory Board to date is testament to the current membership mix and breadth of experience.

People with lived and living experience of suicide should be involved in all aspects of suicide prevention. It is critical that there is lived experience representation on the Advisory Board and that there is a separate Lived Experience Partnership Group. This will ensure that lived experience leadership, expertise and insights shape suicide prevention activities at a national level.

It is also critical that Suicide Prevention Australia retains its position as an Advisory Body to the NSPO to ensure there is adequate sector representation influencing suicide prevention policy at a national level. This will ensure that there is a two-way communication channel between the suicide prevention sector and the NSPO, and that the sector can continue to influence policy reform and the direction of suicide prevention going forward. It is important that the sector has a 'seat at the table' and can share valuable on-the-ground insights as this will improve suicide prevention outcomes. The importance of collaboration with the sector is central to the success of these outcomes.

**Recommendation 5: The Federal Government should maintain the current arrangement of the NSPO's non-statutory advisory bodies, the Advisory Board and the Lived Experience Partnership Group, in order to avoid adding unnecessary additional administrative burden.**

### **The need for the NSPO to be an Independent, Statutory body**

While none of the survey options in the consultation are adequate for the placement and scope of the NSPO, Suicide Prevention Australia believes the NSPO should be a distinct, separate, independent statutory body.

Mental illness is one of many factors that can contribute to a person's decision to take their own life but is rarely the only reason.<sup>4</sup> Consequently, for suicide prevention to be effective, the various risks factors and socio-economic and environmental determinants should be addressed, and this requires action outside the mental health system. Departments across government are aware of this and suicide prevention units exist in a number of portfolios, for example the Suicide Prevention Section in the Department of Veteran Affairs. The NSPO could play a key coordinating role for suicide prevention units across government leading all such units to be more effective. This would complement its existing role of working with jurisdictions to set priorities for suicide prevention research and knowledge sharing.

The NSPO should be wholly responsible for suicide prevention at a national level. We believe that with increased and ongoing funding, the NSPO's role should be increased so that the NMHC's suicide prevention coverage is moved to the NSPO.

This will help ensure that there is a well-resourced body outside the mental health system which is responsible for suicide prevention at a national level. While it is critical that there is ongoing coordination and collaboration between the NSPO and NMHC, it is vital that the NSPO is adequately funded and empowered to lead and monitor suicide prevention at a national level, set strategic directions and build capabilities.

The scope of the National Strategy, its whole-of-government approach, and the provisions that reach into other sectors, including local government and the community, reinforce the need for a strong and independent National Suicide Prevention Office.

As per Recommendation 2, any other restructures should be viewed as temporary and transitional.

We note that section four of the discussion paper, which focuses on the institutional setting of the NSPO, outlines four options for reform. In particular, the discussion paper suggests that the NSPO can be either: (1) integrated into the Department of Health and Aged Care as a non-statutory office; (2) the NSPO and NMHC established as a single Statutory Office; (3) the NSPO and NMHC established as separate Statutory Offices; or (4) the NSPO and NMHC integrated within the Department of Health and Aged Care as Non-statutory Offices.

Of the above limited options, we support option three as a transitional arrangement, and believe that the NSPO and NMHC should be established as separate Statutory Offices, underpinned by primary legislation. This approach would ensure that the NSPO is an independent entity and recognises the distinction between mental health and suicide prevention and acknowledges the need for separate approaches.

We have undertaken extensive consultation with our members and have identified significant support to establish the NSPO as a Statutory Agency within the portfolio of Prime Minister and Cabinet. This will reinforce its independence, facilitate a whole-of-government approach to suicide prevention and allow greater access to all portfolio areas.

**Recommendation 6: The Federal Government should move to establish the NSPO and NMHC as separate Statutory Offices, and consider expanding the role of the NSPO to take on the suicide prevention related functions of the NMHC.**

### Additional considerations

Lived experience is central to suicide prevention and one of the current key roles of the NSPO is to build capacity and collaboration to co-design lived experience engagement across portfolios, jurisdictions and service provision. Any further changes to the roles and responsibilities of the NSPO should be co-designed with people with lived and living experience of suicide to ensure they are fit for purpose.

**Recommendation 7: The Federal Government should ensure that any changes to the role or functions of the NSPO that are related to lived experience, are informed by a rigorous process of consultation and engagement with a broad range of lived experience perspectives.**

### The public consultation process

As outlined in the discussion paper, 'stakeholder input will be critical in shaping the most effective long-term reforms.' Despite this acknowledgement, there has been minimal promotion of the consultation opportunity which will limit ability to obtain feedback from a wide variety of stakeholders.

The consultation opportunity has been confined to the Department of Health and Aged Care and has not been promoted widely, ignoring the importance of the role of the NSPO to the sector, the community and whole of government.

We are also deeply concerned by the lack of consultation which took place before the production of the discussion paper which set out a constrained list of reform options, none of which are optimal. The process appears rushed, and it is vital that sector and community views are taken into consideration so that the NSPO is positioned for success.

The survey response style consultation with limited outcomes will corral responses into the next best outcome, not a view which is reflective of either the sector's needs or the best outcome.

**Recommendation 8: In the consultation process, a number of vital and relevant topics have been raised that relate to but were not included in the discussion paper, and the Federal Government should give careful consideration to these.**

### Conclusion

The suicide prevention sector is eager to ensure that the NSPO is a centrally located, well-resourced independent statutory body which can drive and monitor the implementation of the National Suicide Prevention Strategy without facing the barriers of inter-Departmental processes. We urge the Department of Health and Aged Care to position the NSPO as an independent statutory agency within the Portfolio of Prime Minister and Cabinet as this will help facilitate cross-jurisdiction and cross-portfolio action and a nationally consistent and integrated approach to suicide prevention.

## Acknowledgements Statement

Suicide Prevention Australia acknowledges the unique and important understanding provided by people with lived and living experience. This knowledge and insight is critical in all aspects of suicide prevention policy, practice and research. Advice from individuals with lived experience helped guide the analysis and recommendations outlined in this submission.

As the national peak body for suicide prevention, our members are central to all that we do. Advice from our members, including the largest and many of the smallest organisations working in suicide prevention, as well as practitioners, researchers and community leaders is key to the development of our policy positions. Suicide Prevention Australia thanks all involved in the development of this submission.

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<sup>1</sup> Department of Health and Aged Care. (2024). Discussion Paper – Strengthening the National Mental Health Commission and the National Suicide Prevention Office. [discussion-paper---strengthening-the-nmhc-and-nspo-7.pdf](#)

<sup>2</sup> Department of Health and Aged Care. (2021). National Suicide Prevention Advisor – final advice. Connected & Compassionate. Implementing a national whole of government approach to suicide prevention. [National Suicide Prevention Adviser - Connected and Compassionate](#)

<sup>3</sup> Department of Health and Aged Care. (2024). Discussion Paper – Strengthening the National Mental Health Commission and the National Suicide Prevention Office. [discussion-paper---strengthening-the-nmhc-and-nspo-7.pdf](#)

<sup>4</sup> Suicide Prevention Australia and Mental Health Australia. (2022). *Joint Statement: Suicide and Mental Health*. [JOINT STATEMENT: Mental Health Australia and Suicide Prevention Australia - Suicide Prevention Australia](#)