

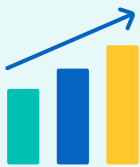


The Suicide Prevention Australia Community Tracker is a biannual survey that sheds light on the prevalence of suicidal behaviours, what social and economic issues are driving distress and the impact of suicide in our community. It is designed to provide real-time, community-wide insights to policy makers, practitioners and the community and to support suicide prevention activities across Australia. Data was collected quarterly prior to September 2025 and semi-annually thereafter.



This report focuses on survey participants who resided in New South Wales (NSW) at the time of the survey.

High-level overview for NSW



4 in 5 NSW residents reporting **distress beyond normal levels** in Q1 2026, 10 percentage points higher than the same time last year.



Around **1 in 10** NSW residents said that they have had **serious thoughts of suicide in the past 12 months**.

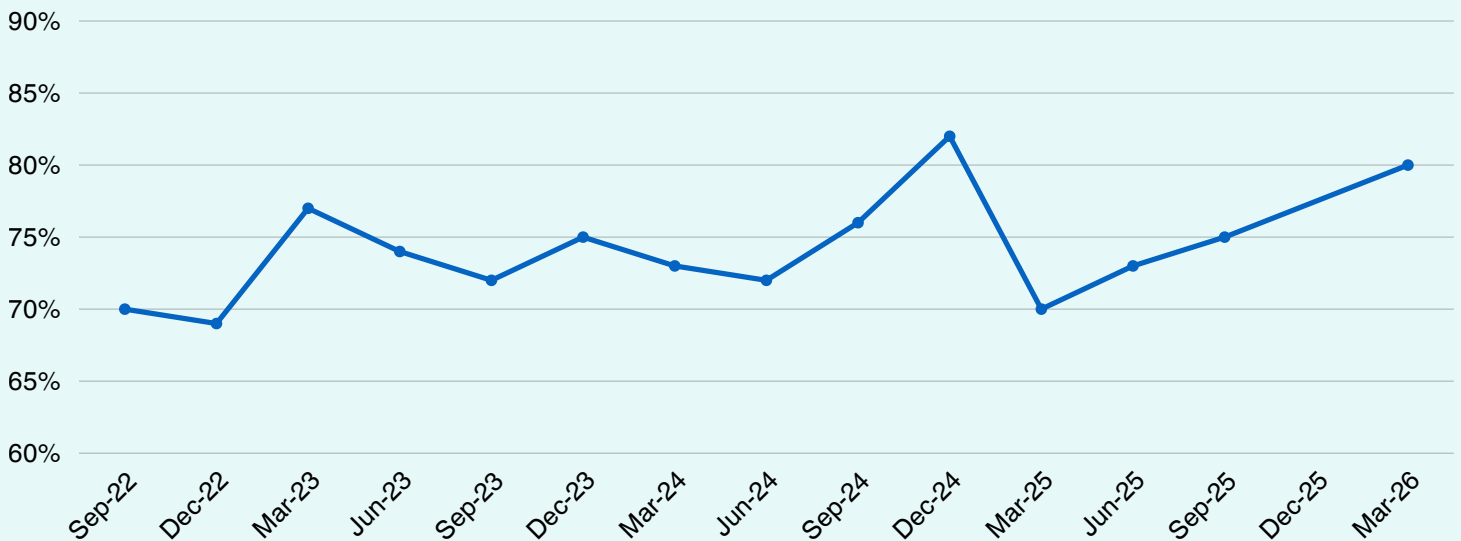


Cost-of-living and personal debt distress remained the **top stressor** – which was ahead of the **number 2 stressor** – **family and relationship breakdown** – by 17 percentage points.



There has been an **increase in clinical** (9 percentage points), **digital** (4%), and **community service** (6%) usage in NSW since the same time last year.

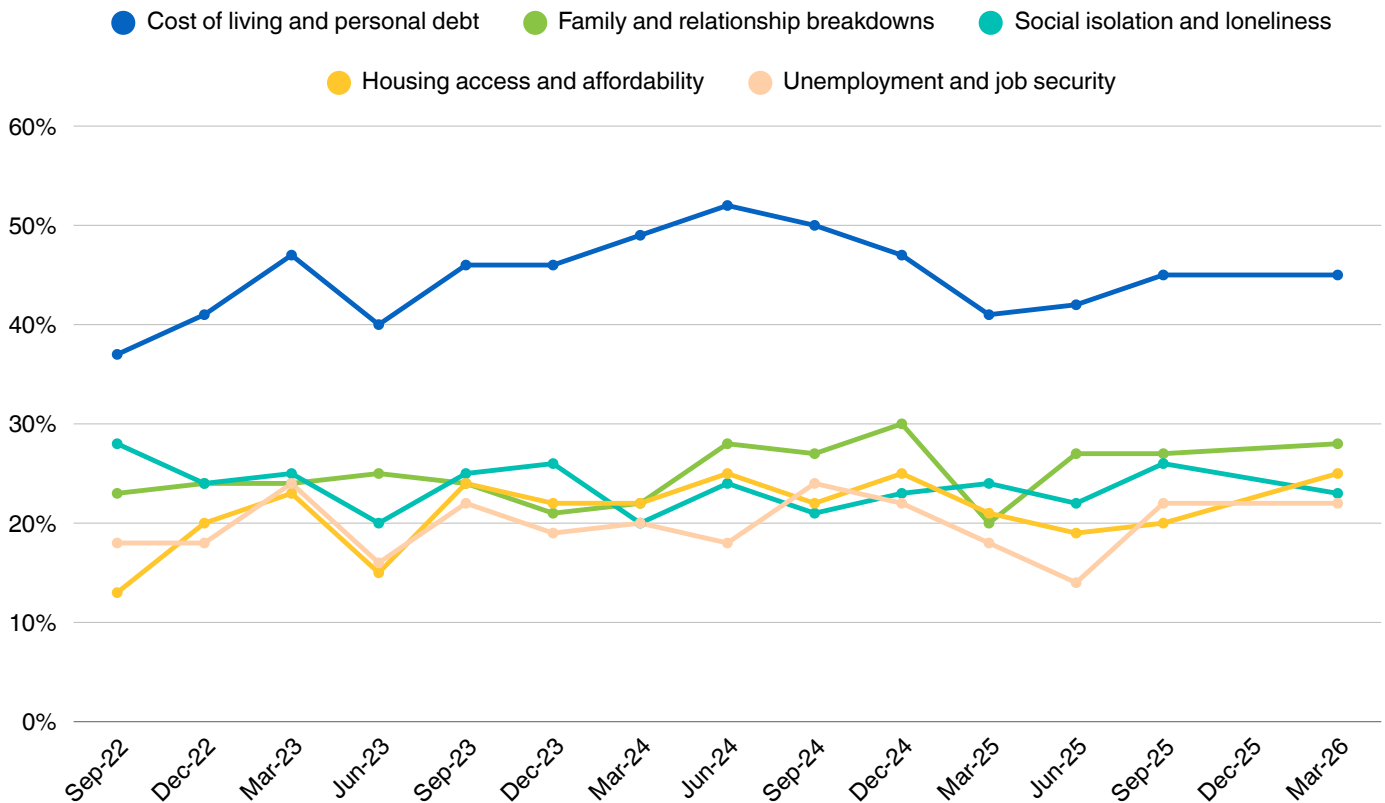
Elevated distress compared to the past 12 months for any reason



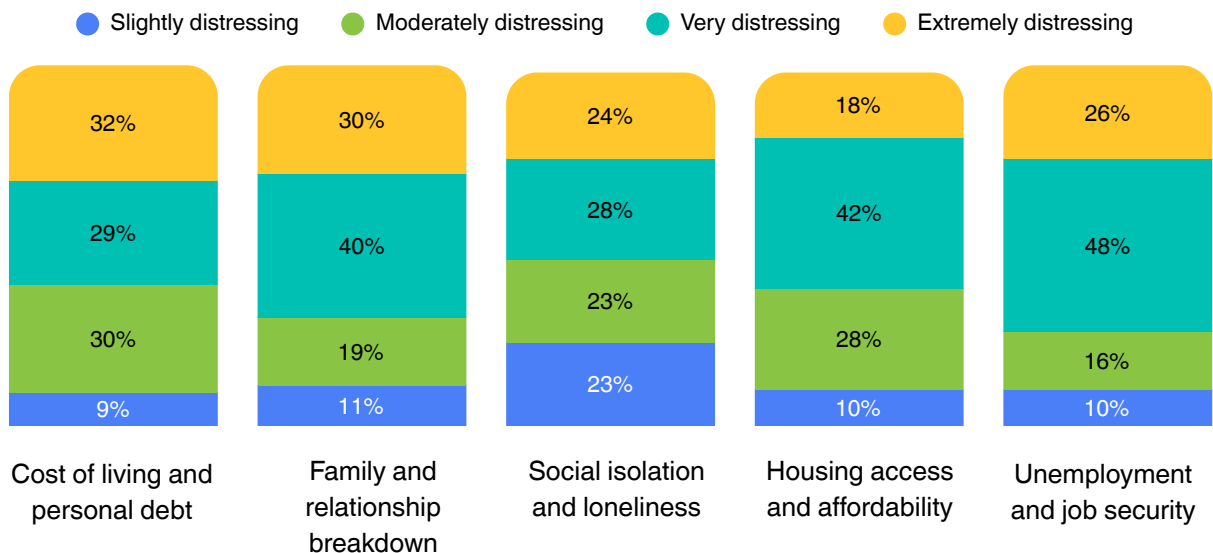
Causes of distress in NSW

- Social isolation has fallen from the 2nd highest ranked stressor in March 2025 to the 4 March 2026, overtaken by both family and relationship breakdown distress, and housing access and affordability distress.
- Among the top 5 stressors, 3 in 4 residents in NSW who cited unemployment and job security distress found it very or extremely distressing. 7 in 10 who cited family and relationship breakdown distress found it very or extremely distressing.

Top stressors



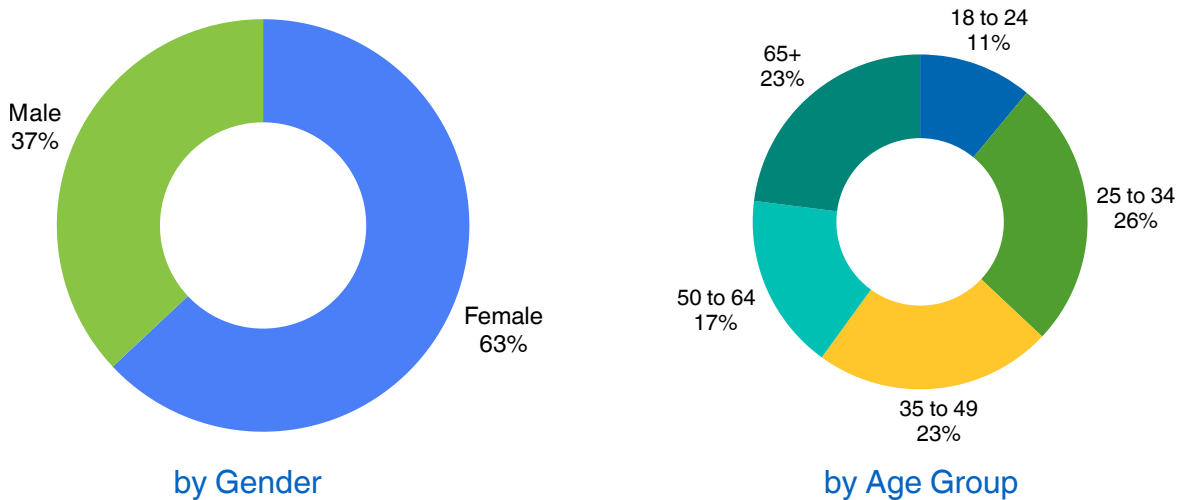
Extent of distress caused by each stressor



Family and relationship breakdown distress in NSW

- Among NSW residents who experienced distress from family and relationship breakdown, there were nearly twice as many women as men.
- Around 1 in 4 NSW residents aged 25 to 34 and aged 35 to 49 also found family and relationship breakdown very or extremely distressing.

Family and relationship breakdown distress - very/extremely distressing

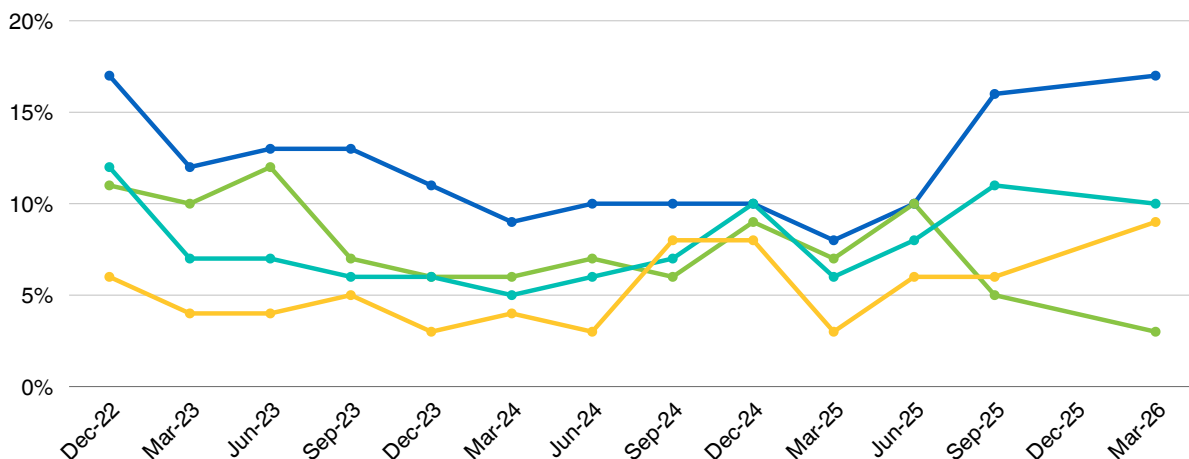


Help-seeking in NSW

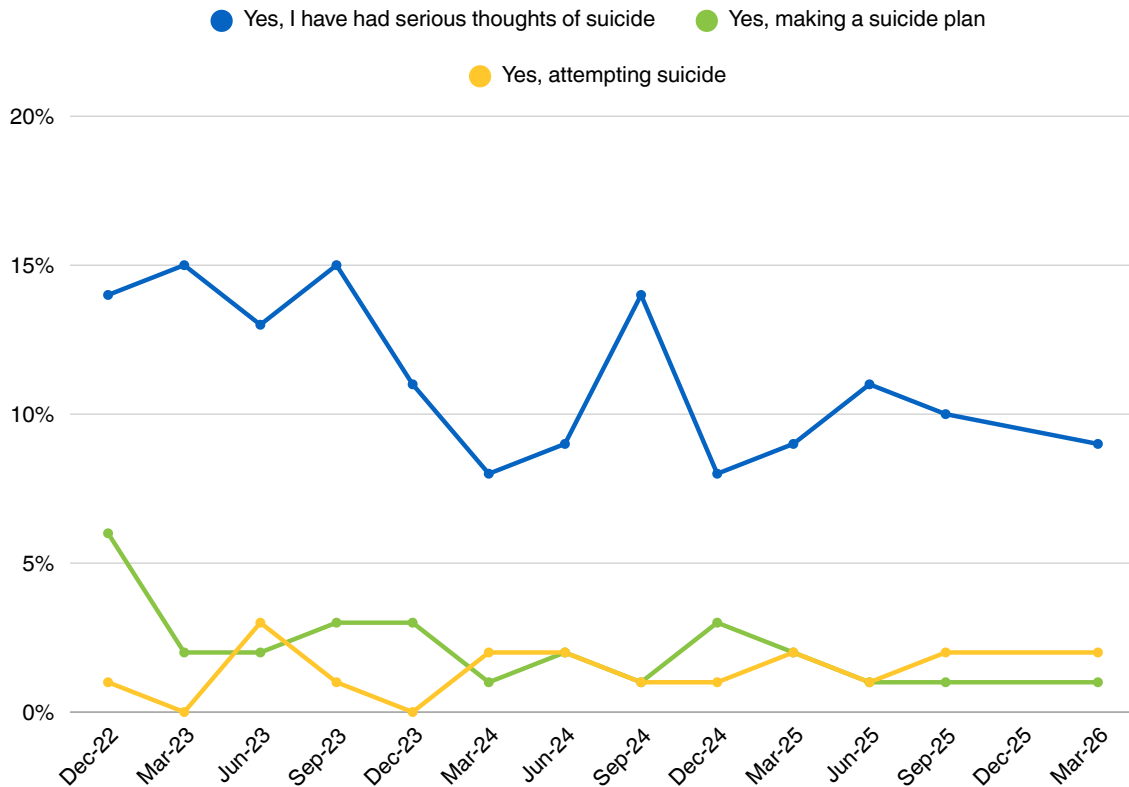
- Over the past year, there has been an increase in clinical (9 percentage points), digital (4%), and community service (6%) usage in NSW since the same time last year.
- Around 1 in 10 NSW residents said that they have had serious thoughts of suicide in the past 12 months, consistent with figures from the previous year.
- 2 in 5 NSW residents said they were either not at all prepared or only slightly prepared to support someone showing suicidal thoughts or behaviours.

Help-seeking behaviour in the last 12 months

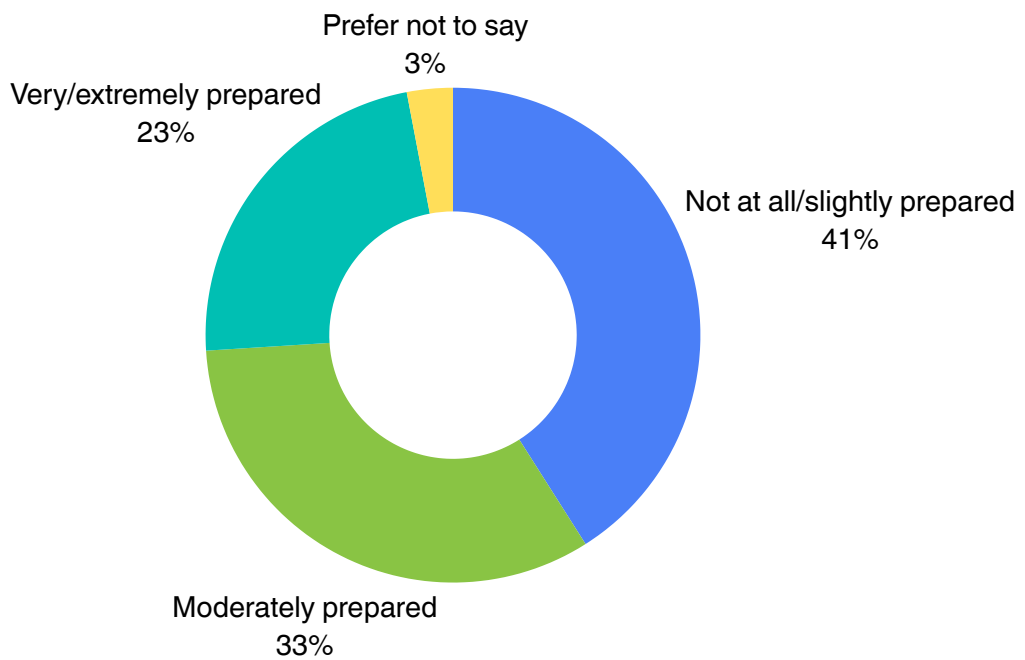
- Yes, via clinical services (e.g. GP, psychiatrist, psychologist, medical professional, support after an attempt)
- Yes, via phone or text line (e.g. Lifeline, Beyond Blue)
- Yes, via digital services (i.e. online forums, visiting a website, searching/googling for details online)
- Yes, via community services (e.g. support groups, peer networks, counselling, training, safe spaces, etc.)



Suicidal behaviour in the past 12 months



Preparedness to support someone showing signs of suicidal thoughts or behaviours



Implications for suicide prevention in NSW

The 2026 NSW Community Tracker data shows persistently high levels of distress across the state, with conditions worsening compared to the same time last year. In the first quarter of 2026 (January–March), 4 in 5 NSW residents reported distress beyond normal levels – a 10 percentage point increase year-on-year – highlighting the sustained and growing pressure on community wellbeing.

Distress attributed to cost of living and personal debt remains the dominant driver of distress, leading by a significant margin over other financial and social stressors. However, there have been notable shifts in the profile of distress. Family and relationship breakdown has emerged as the second most reported stressor, and is also among the most intensely felt, with seven in ten affected residents reporting it as very or extremely distressing. Women are disproportionately impacted, with nearly twice as many women as men reporting high levels of distress related to family and relationship breakdown. Housing access and affordability has also risen in prominence, while social isolation has declined in relative ranking, suggesting a shift from previous pandemic-related drivers to more structural and economic pressures.

Help-seeking behaviour has increased across clinical, digital, and community services since last year; while this aligns with heightened levels of distress, it is a promising indicator that when in need, NSW residents are engaging with support services. The narrowing gap between clinical and non-clinical supports indicates that people are continuing to diversify how they seek help, reflecting both growing awareness of alternative support and the complex, non-clinical drivers of distress such as financial strain, employment insecurity, and relationship challenges. This reinforces the importance of a broad, accessible support system that extends beyond traditional mental health and suicide prevention services.

Despite these shifts, the prevalence of suicidal behaviour remains unchanged, with around 1 in 10 NSW residents reporting serious thoughts of suicide in the past 12 months. This persistence underscores that increased service use alone is not currently translating into a reduction in suicidal distress at a population level, driving the importance for increased availability of more NSW-tailored support services.

There are also ongoing gaps in community response capability and confidence. With 2 in 5 NSW residents reporting they feel unprepared or only slightly prepared to support someone experiencing suicidal thoughts or behaviours, there is a clear need to strengthen suicide prevention literacy and equip communities with the skills to respond early and effectively.

Taken together, these findings reinforce the need for a comprehensive, whole-of-government and whole-of-community approach to suicide prevention in NSW. While increased help-seeking is, in some regards, a positive sign, it also places additional pressure on the service system. This underscores the need for sustained investment to ensure clinical, digital, and community-based services are adequately resourced to meet growing demand, reduce barriers to access, and provide timely, tailored support.

At the same time, increased service use must be matched with sustained investment in upstream and preventative measures that address the underlying drivers of distress – particularly financial hardship, housing insecurity, employment instability, and relationship breakdown.

The introduction of the New South Wales Suicide Prevention Act marks an important step in embedding this coordinated approach. The focus must now shift to effective implementation, ensuring the Act delivers meaningful, system-wide reform. This includes strengthening cross-sector collaboration, improving access to both clinical and non-clinical supports, and building community capacity to recognise and respond to distress early.

Ultimately, reducing suicidal distress in NSW requires sustained action beyond the health system – addressing the social and economic determinants that underpin distress and suicide risk factors, while ensuring that every person can access targeted support, at the right time, in the way that works best for them.

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The Suicide Prevention Australia Community Tracker is undertaken in partnership with YouGov Australia. Total sample size was around a thousand adults for each nationwide survey with 275 respondents from NSW in the latest survey. The survey was undertaken online. The figures have been weighted and are representative of all Australian adults (aged 18+).