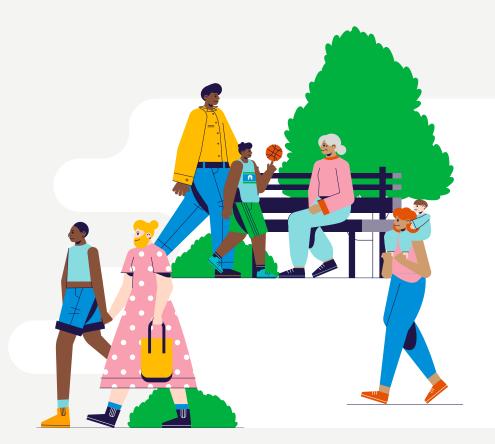


Summary

Victorian suicide prevention and response strategy 2024-2034







To receive this document in another format, email the <u>Suicide Prevention and Response Office</u> <suicide.prevention@health.vic.gov.au>.

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Except where otherwise indicated, the images in this document show models and illustrative settings only, and do not necessarily depict actual services, facilities or recipients of services.

In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

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Why does Victoria need a strategy for suicide prevention and response?

Suicide has a devastating and enduring impact on the Victorian community. It can affect people of all ages and backgrounds and has a ripple effect across families, friendship groups, workplaces, schools and communities.

In 2021, the Royal Commission into Victoria's Mental Health System found that Victoria

has been unable to reduce its suicide rate due to inadequate coordination of effort, insufficient resources and a primarily health-focused approach. The Royal Commission recommended that the Victorian Government work with people with lived and living experience of suicide to develop a new strategy to deliver a system-based, whole-

of-government and communitywide approach to suicide prevention and response.



In Victoria, between 2016 and 2023

75%

of those who died by suicide were **men**.

70%

of primary carers – including those caring for people experiencing suicidal thoughts or distress – are **women**.

In 2019

48%

of suicide deaths and self-inflicted injuries (self-harm) in Australia

were due to 4 contributing factors

- child abuse and neglect during childhood;
- illicit drug use among people aged 15 or older;
- alcohol use among people aged 15 or older;
- intimate partner violence among females aged 15 or older.

Suicide is the leading cause of death among young Australians aged 15 to 24.



In 2023,

16%

of all suicide deaths in Victoria were among **men and women aged 65 or older**.

In Victoria between 2019 and 2023, approximately

56%

of all suicide deaths occurred in those **aged between 25 and 54 years old**.

Between 2018 and 2023 in Victoria, **Aboriginal people died by suicide at a rate nearly**

3x higher

than non-Aboriginal people.



How we developed the strategy

In developing the strategy, we sought broad community input to ensure we understood a diverse range of perspectives, experiences and emerging evidence.

Figure 1: Scope of stakeholder engagement in developing the strategy



What does the strategy do?

The Victorian Suicide Prevention and Response Strategy 2024-2034 is a call to action for governments, workplaces, schools, the media, sectors, industries and the Victorian community to come together to reduce the incidence and impact of suicide and suicide-related stigma in Victoria.

The strategy also aims to address and reduce factors that contribute to suicide, such as childhood trauma, harmful drug and alcohol use and family violence, and increase protective factors such as social inclusion and connection to culture. It identifies key intervention points to build a systems-based, whole-of-government and community-

wide approach to suicide prevention and response.

The strategy outlines our 10-year vision and the principles, priority areas and objectives that will guide our work and enable us to achieve our outcomes. Over this period, we will continue to build the knowledge base around suicide prevention and response, ensuring that the strategy evolves, adapts and responds to change and evidence of what works.

The strategy recognises the importance of moving beyond a health-only approach to suicide prevention and response. It includes all Victorian Government departments and

agencies and communities in suicide prevention, driving action across a range of settings (schools, workplaces, transport networks) and supporting services and programs to respond to intersectionality.

Importantly, the strategy puts the knowledge and expertise of people with lived and living experience of suicide, clinicians and other experts in the field at the centre of our efforts.

Guided by our **principles**, we will work across government, with service providers and the community to deliver the **objectives** under our 6 **priority areas** and achieve our **vision**.

Advancing Aboriginal self-determination

We are committed to working in partnership with Aboriginal and Torres Strait Islander people to advance self-determination and to embedding cultural responses that acknowledge Aboriginal and Torres Strait Islander ways of knowing, being and doing. The strategy, implementation plans and accountability framework will be subject to review and amendment based on the suicide prevention and response co-design work that is being led by Aboriginal

communities through the Balit Durn Durn Centre, as well as Victoria's Treaty negotiations and the findings and recommendations made by the Yoorrook Justice Commission.

Our strategy

All Victorians working together to reduce suicide.

Our work will be guided by the following principles:



Value lived and living experience



Advance Aboriginal self-determination



Apply an intersectional lens



Be compassionate and trauma-informed



Be person-centred and human rights – driven



Be proactive and prevention-focused



Be evidenceinformed and accountable



Be place-based and communityfocused



We have identified six priority areas for action:

1 Build and support connected systems

To improve access, navigation and continuity of care

2 Build on and strengthen existing supports across the suicide prevention and response continuum

To provide more options, at all stages

3 Build and support a compassionate, trauma-informed workforce, strengthened by lived and living experience

To give our workforces the required skills and supports

Reduce suicide-related stigma and enable community-wide action

To support and educate communities

5 Drive whole-of-government collaboration and innovation

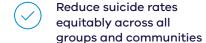
To drive accountability and coordination

6 Build on and use data and our evidence base in delivery and evaluation

To support improvement and continuous learning



And together we will:



Reduce suicide attempts



Reduce access to means for suicide

Respond earlier to people in distress

Increase help-seeking activities

Improve education and awareness of suicide

Deliver more compassionate and connected services and supports

Increase the peer workforce and visibility of lived and living experience roles



Elevate suicide prevention and response across all government decision making and policies and programs



How will the strategy be delivered?

We all have a role to play in delivering the suicide prevention and response strategy and in preventing and responding to suicide in a broad range of settings.

Achieving the vision of the strategy will require a range of complex and, at times, interconnected activity across departments, agencies, sectors and communities. To support successful delivery and implementation of the strategy, the strategy's objectives will be sequenced across the 3 horizons detailed in Figure 2. The strategy is also accompanied by rolling implementation plans and an accountability framework.

Implementation plans

Implementation plans will outline the specific initiatives (programs, services and policies) that we will deliver over the implementation period. Each initiative will align with the strategy's priority areas and objectives and will have a lead government department, agency or community partner.



Accountability framework

The accountability framework recognises that we all have a role to play in suicide prevention and response and aims to support, monitor, promote and assess the progress of the strategy. It supports the strategy's whole-of-government and community-wide approach. It sets out the responsibilities of government and the community, as well as the ways we will ensure the Victorian Government and our partners deliver on our joint commitment.



Figure 2: The 3 horizons of the suicide prevention and response strategy

Set strong foundations for a whole-ofgovernment and community-wide approach and deliver

immediate priorities

Horizon 1:

- Deliver a more personcentred mental health and wellbeing system by implementing Royal Commission recommendations
- Develop strong whole-ofgovernment partnerships and capabilities
- Establish a coordinated approach
- Better understand the current and changing state of service delivery

Horizon 2:

Gather pace for system-based change

- Leverage whole-ofgovernment relationships and capabilities
- Continue responses to Royal Commission recommendations
- Expand on innovation
- Continue to build the capacity of systems, services and workforces

Horizon 3:

Mature the approach and set the stage for future work

- Embed new ways of working across the system
- Solidify connectivity and person-centred care
- Respond to lessons learnt

