Victorian suicide prevention and response strategy 2024–2034

Summary (accessible)

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

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In this document, ‘Aboriginal’ refers to both Aboriginal and Torres Strait Islander people.

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Available at the [Suicide prevention in Victoria webpage](https://www.health.vic.gov.au/prevention-and-promotion/suicide-prevention-in-victoria) <https://www.health.vic.gov.au/prevention-and-promotion/suicide-prevention-in-victoria>.

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 community-wide approach to suicide prevention and response.

In Victoria, between 2016 and 2023, 75% of those who died by suicide in Victoria were **men**.

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; alcohol use among people aged 15 or older; illicit drug use among people aged 15 or older; and intimate partner violence among females aged 15 or older.

70% **of** **primary carers** – including those caring for people experiencing suicidal thoughts or distress – are women.

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.**

Between 2018 and 2023 in Victoria, **Aboriginal people** **died by suicide at a rate nearly** 3 times higher than non-Aboriginal people.

In Victoria between 2019 and 2023, approximately 56% of all suicide deaths occurred in those **aged between 25 and 54 years**.

# 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.

* 244 submissions and survey results
* 30+ Individual expert conversation
* 14 roundtables
* 10 Lived and living experience co-design workshops

# 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.

# All Victorians working together to reduce suicide.

## Our strategy

**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 evidence-informed and accountable
* Be place-based and community-focused

**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

**4.** **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 rates equitably across all groups and communities
* reduce suicide attempts
* reduce stigma around suicide
* 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 below. 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.

The 3 horizons of the suicide prevention and response strategy

| **Horizon 1: Set strong foundations for a whole-of-government and community-wide approach and deliver immediate priorities** | **Horizon 2: Gather pace for system-based change**  | **Horizon 3: Mature the approach and set the stage for future work** |
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| * Deliver a more person-centred mental health and wellbeing system by implementing Royal Commission recommendations
* Develop strong whole-of-government partnerships and capabilities
* Establish a coordinated approach
* Better understand the current and changing state of service delivery
 | * Leverage whole-of-government relationships and capabilities
* Continue responses to Royal Commission recommendations
* Expand on innovation
* Continue to build the capacity of systems, services and workforces
 | * Embed new ways of working across the system
* Solidify connectivity and person-centred care
* Respond to lessons learnt
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