POSITIVE POLICY

Halving the Toll: A National Approach to Suicide Prevention

"Every single life lost to suicide is one too many."[vii]
Dr Margaret Chan
Director-General, World Health Organisation

Labor is committed reducing suicide by 50 percent over the next 10 years. Recommended by the National Mental Health Commission, this target will focus the work of all governments on a holistic approach to suicide prevention.

In 2014, 2,884 Australians lost their lives to suicide[iv]. Many thousand more Australians were directly affected by suicide, with families, friends and colleagues left behind to deal with traumatic losses. Each year it is estimated that approximately 65,000 Australians attempt to take their own life.

Australia's current approach to suicide prevention is well intentioned, yet it remains piecemeal, fragmented and is not always based on evidence.

Governments, community groups, medical experts and the community have been working hard to reduce suicide across the country. But despite this significant effort, the suicide rate has continued to rise.

Suicide deaths are preventable deaths. Labor believes that more can and should be done to reduce the thousands of lives lost to suicide each year. Clearly just keeping on doing the same things is not going to work.

A strong national level commitment to reducing the suicide toll is needed to coordinate, plan and support a serious effort to reduce the rate of suicide across Australia.

This does not mean a one-size fits all approach — but it will require all suicide reduction programs to be evidenced based, targeted to local communities' needs and to be evaluated for outcomes and effectiveness.

Lives that could be saved

In 2014 Australia had the highest rate of suicide deaths recorded in the last 10 years - 12 deaths per 100,000 people[ii]. Suicide is the 13th leading cause of death in Australia. There are approximately seven deaths from suicide in Australia every day[iv]. For every person that dies from suicide 30 people attempt[iv].

Tragically, suicide is the leading cause of death for children aged between 5-17 year[iv]. Suicide is the fifth leading cause of death for Indigenous Australians[iv]. Aboriginal and Torres Strait Islander suicide rates are more than twice the rate for non-Indigenous Australians. In some communities, such as in the Kimberley, the rate is considerably higher.

Labor's plan to reduce suicides by half over the next ten years

Improved suicide data/national suicide register

The National Mental Health Commission has identified the need for improvements in suicide data systems as an area that warranted national priority[v].

A Shorten Labor Government will commission Australia's first national data-set of suicide deaths and map where they occur across the country.

This will build on the work being undertaken by The Black Dog Institute in NSW and allow experts to better understand the prevalence and location of suicide deaths across the country and help identify vulnerable population groups with consistent and timely access to quality data. Labor's proposed National Information Policy will also support the better data collection and stronger analytics capacity to drive more early intervention and prevention.

Labor will also work with the States and Territories to standardise and harmonise suicide reporting to provide consistent and timely data at a national level and establish a national suicide register to record all suicide deaths.

Suicide prevention pilot projects

A Shorten Labor Government will provide $72 million over three years for 12 regional suicide prevention pilot projects. Each project will implement a systems based approach to suicide reduction.

The 12 sites will be selected in consultation with experts in the field and in partnership with the States and Territories. The pilots will target locations with higher than average numbers of suicide deaths (greater than 12 deaths per 100,000) and where there is local capacity and commitment to reduce levels of suicide and self-harm.

The Black Dog Institute has pioneered the systems based approach to suicide prevention (a whole of community response to suicide prevention) where all services and programs work together to reduce suicide deaths and in doing so maximize available resources in the most efficient and effective way.

At least three of the pilots will be in Aboriginal and Torres Strait Islander communities, recognising the significant and escalating problem that suicide deaths are having within these communities. One of these pilots will be funded immediately in the Kimberley region where current data and local knowledge inform us that the rate of suicide is at epidemic levels.

Reducing suicide in Aboriginal and Torres Strait Islander communities

Labor recognises that the factors influencing suicide deaths in Indigenous communities are complex and multifactorial. Disadvantage and other risk factors including social, economic and historic dislocation present significant challenges to promoting social and emotional health and wellbeing in indigenous communities.

A Shorten Labor Government will work with Aboriginal and Torres Strait Islander communities to implement the recommendations of the University of Western Sydney's Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP) which is due to report in mid-2016.[ix]

The final report will make recommendations to government on the best way forward including alternative evidenced-based service and program delivery models.

Labor recognises that a plan to reduce suicide rates in Aboriginal and Torres Strait Islander communities must give due consideration to Aboriginal culture and history, have strong community connections, empower local communities and engage broadly and respect local knowledge.

National Suicide Prevention Fund

A Shorten Labor Government will provide funding of $9 million over three years towards a National Suicide Prevention Fund, as recommended by Suicide Prevention Australia, with private sector support sought for additional funding.

The National Suicide Prevention Fund will support research into reducing suicide deaths and population based programs which reduce the stigma associated with suicide and seeking help for people who are contemplating suicide.

A National Suicide Prevention Strategy

A Shorten Labor Government will develop a national suicide prevention strategy to guide, plan and track progress towards achieving the target.

Labor will work with the States and Territories, making suicide prevention a COAG priority, to ensure national consistency and agreement on suicide prevention priorities.

The National Suicide Prevention Strategy will have a specific focus on addressing suicide deaths in children and young people and will complement a specific strategy to reduce suicide deaths amongst Aboriginal and Torres Strait Islander people.

Labor's National Suicide Prevention Strategy will also recognise that reducing suicide deaths requires a whole of community and whole of government approach. It should be recognized that loss of life from suicide is not only a mental health issue.

LABOR'S RECORD

Labor's investment in mental health reform in government was highly regarded and welcomed by the broader health sector, after years of neglect by previous Liberal governments.

Under Labor, Australian Government funding for mental health specific programs (including Indigenous programs) in the four-year period 2011-12 to 2014-15 increased to around $2.4 billion; compared to $516.3 million provided in the four years 2004-05 to 2007-08.

Labor's mental health reform agenda also saw the establishment of several cross-portfolio and cross-jurisdictional processes and a ten-year Roadmap on Mental Health Reform, developed as an initiative of COAG. The Roadmap provided a framework and guide for future investment.

Labor announced our interim response to the National Mental Health Commission's review in October last year, stating our support for the majority of recommendations.

A Shorten Labor Government will outline its priorities for implementation within its first 100 days in office, but Labor has committed to:
- Lead the negotiation on the development of the Fifth National Mental Health and Suicide Prevention Plan, which will be based on the principles of national leadership and regional integration as recommended by the National Mental Health Commission.
- Use existing Primary Health Networks to deliver regionally tailored mental health programs.
- Ensure that people living with mental illness who are not eligible for the National Disability Insurance Scheme still receive the support and care they need.
- Actively support and promote the Mentally Healthy Workplace Alliance to better support mental health and wellbeing at work, and remove the stigma and discrimination surrounding mental ill health.

A Shorten Labor Government would restore funding cut by the Liberal Government to six early psychosis centres around Australia to ensure that the young people with serious mental health problems get the support they need to live healthy and productive lives.

Labor strongly supports the headspace model and a Shorten Labor Government will provide the funding certainty needed to ensure headspace centres remain open in the more than 95 locations across the country where they have been established.

**ABBOTT-TURNBULL GOVERNMENT’S RECORD**

The Liberal Government is in the process of implementing reforms to the mental health sector that will devolve responsibility and funding to Primary Health Networks to provide local responses to suicide prevention over the next three years. No new funding has been provided as part of these reforms.

The Liberals have not supported a suicide reduction target.

Funding of $17.8 million which was allocated by the previous Labor Government to address Aboriginal and Torres Strait Islander suicide prevention programs remains unallocated.

Six months after the Turnbull Government outlined its mental health reforms the sector is in complete chaos and the government is refusing to take control and deal with the uncertainty and upheaval that these reforms have created.

There is a lack of transparency over funding allocations and the Government has refused to say how much money is going to each individual PHN to commission services, leaving the services and the people who use them in the dark over how those funds are determined.

Youth mental health services remain under attack with funding cuts and closures to early psychosis centres; and headspace centres are only being guaranteed funding until 2018 before they have to compete to remain open.

**FINANCIAL IMPLICATIONS**

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[i] Dr Margaret Chan, Director-General WHO, 2014, “Preventing Suicide: A global imperative”
[ix] Contributing Lives, Thriving Communities - Report of the National Review of Mental Health Programmes and Services, 2014
[x] [http://www.abrispep.sis.uwa.edu.au/](http://www.abrispep.sis.uwa.edu.au/)

**LABOR. WE’LL PUT PEOPLE FIRST.**

These policies (including where relevant their costings from the independent Parliamentary Budget Office) were accurate at the time they were announced. Labor will publish the updated final cost of all policies and their combined impact on the Budget prior to election day.

Authorised by G. Wright, Australian Labor, 5/9 Sydney Avenue, Barton ACT 2600

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