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THE LEGISLATIVE ASSEMBLY FOR THE

AUSTRALIAN CAPITAL TERRITORY

ELEVENTH ASSEMBLY

Standing Committee on Social Policy – Report No. 5 – Inquiry into men's suicide rates – Government Response

Presented by
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On 30 April 2025, the ACT Standing Committee on Social Policy announced a new Inquiry into Men's Suicide Rates in the ACT (the Inquiry).

The Committee published its final report on the Inquiry on 4 June 2026 (the Report). The Report made one finding and 26 recommendations.

In conducting the Inquiry, the Committee adopted an inclusive approach to the term "boys and men" to refer to cisgender men, transgender men and other non-binary, gender-diverse individuals who would consider themselves aligned with the parameters of the Inquiry. The ACT Government Response likewise adopts the same inclusive approach.

The final ACT Government Response to the finding and recommendations contained in the Report is provided below and includes commentary against each recommendation. The response demonstrates the ACT Government's ongoing commitment to reducing suicide and self-harm through a coordinated, evidence-based and person-centred approach that spans government, community and lived experience stakeholders. It highlights both existing and planned reforms across the ACT service system and reflects the Government's commitment to ensuring that the needs of boys and men are considered within a broader strategy to improve mental health, wellbeing and suicide prevention outcomes for all Canberrans.

Recommendation or finding	**ACT Government Response**	
Recommendation 1: The Committee recommends that the ACT Government develop a men's and boys' wellbeing strategy and give consideration within the administrative arrangements to make it clear which minister has responsibility for this strategy.	Noted.	The ACT Government recognises the importance of supporting and promoting the wellbeing of boys and men. Consideration of a dedicated strategy would take account of work already underway through existing strategies and be considered alongside future strategic planning priorities. The Health and Community Services Directorate (HCSD) is currently scoping the development of an ACT Suicide Prevention Implementation Plan against the National Suicide Prevention Strategy 2025-2035 which will map the existing initiatives and inform priorities for the coming years. This will include consideration of the needs of priority population groups, which would include boys and men, to ensure an evidence-informed approach to supporting need.
Recommendation 2: The Committee recommends that the ACT Government establish better referral pathways and connections between Canberra Health Services, community service providers, General Practitioners and psychologists.	Existing Government Policy.	The ACT Government recognises the importance of effective and efficient referral pathways and connections between services that play a role in suicide prevention and the promotion of wellbeing amongst men and boys. Canberra Health Services (CHS) has existing policies in place to support communication between health providers including General Practitioners, this includes the *Health Facility Access and Sharing of Clinical Information Procedure.* The Capital Health Network (CHN) and COORDINARE (the Southern NSW Primary Health Network) continue the development, maintenance, review, and promotion of clinical and referral pathways and options for specified medical conditions through the ACT and SNSW HealthPathways online portal.

		The HealthPathways platform plays an important role in building connections among healthcare professionals enabling integrated care by developing a process to address a problem, then publishing the solution in the form of a pathway. The pathway development process brings general practitioners and non-GP specialists, allied health, and other services together, where solutions to challenges can be designed and shared for everyone to follow. The Mental Health Youth Alliance, Perinatal Mental Health Alliance, Mental Health & Alcohol & Other Drug Alliance and ACT and Region Suicide Prevention Community Collaborative support community engagement and bring together government and NGO service providers, lived experience expertise and community members, to work together to establish better referral pathways and connections to enable integrated care.
Recommendation 3: The Committee recommends that the ACT Government create bi-directional links between informal support services — like men's sheds, community service providers, running groups, and community sport organisations — and formal clinical support services to bridge gaps in care, including by offering mental health first aid training to community organisations which may be the first port of call in a potential crisis.	Existing Government Policy.	The ACT Government supports a proactive, whole-of-community approach to developing and maintaining links between informal, community and clinical support services, and provides a range of initiatives that support this approach: • The Mental Health Youth Alliance, Perinatal Mental Health Alliance, Mental Health & Alcohol & Other Drug Alliance and ACT and Region Suicide Prevention Community Collaborative support community engagement and bring together government and NGO service providers, lived experience expertise and community members, to work together to promote linkages between formal and informal services to enable integrated care. • Men's Table: The ACT Government is currently funding the Men's Table to provide a targeted project aimed at community-building and men's mental health and suicide prevention for male tertiary education students in the ACT. • Wesley LifeForce: a training program aimed at increasing the capacity of members of the Aboriginal and Torres Strait Islander community and the wider ACT community to deliver culturally appropriate suicide prevention support • Minds Together: a training program for families, friends and carers who are supporting someone experiencing suicidal distress or following a suicide attempt • Connecting with People: a train-the-trainer model aimed at suicide prevention and risk mitigation by improving understanding of suicidal distress; suitable for both clinical staff and the general community.
Recommendation 4: The Committee recommends that the ACT Government improve community sector funding arrangements to	Existing Government Policy.	The ACT Government is committed to a strong, inclusive and resilient community sector, and the critical role that community sector plays in suicide prevention and the promotion of mental wellbeing amongst men and boys. This is demonstrated through: • The 2025-26 ACT Budget provided a $10m funding boost over two years to eligible community sector organisations.

ensure they are resourced adequately to meet demand, including through longer-term contracts and sustainable funding that matches the level of risk of work.		• The 2026-27 ACT Budget committed to a community sector funding uplift The ACT Government is also committed to funding the true cost of service delivery and providing longer-term funding certainty for the community sector. Under the Mental Health Commissioning Strategic Investment Plan , the ACT Government will move to longer-term funding agreements with the NGO sector, recognising that these arrangements support workforce retention, improve service and data quality, strengthen sector stability, and enhance the experience of care for people accessing services. To support these outcomes, HCSD will seek to offer contracts with a minimum term of five years, with the option of extensions of up to two years, across the Child, Youth and Families, Adults and Older People, Aboriginal and Torres Strait Islander Social and Emotional Wellbeing, and Individual Advocacy funding streams. Additionally, the ACT Government funds several justice support programs for Aboriginal and Torres Strait Islander people in the ACT, delivered by local Aboriginal and Torres Strait Islander Community-Controlled Organisations (ACCO) and providers. The ACT Government recognises that sustainable funding and a strong ACCO sector are critical to improving justice and wellbeing outcomes for Aboriginal and Torres Strait Islander people. Consistent with the National Agreement on Closing the Gap, a commissioning process (2024–2026) was undertaken in partnership with the ACT Aboriginal and Torres Strait Islander community to strengthen community-led justice responses, identify service gaps, and support long-term sector sustainability. Through this process, the Justice and Community Services Directorate (JACS) worked with community and service providers to co-design program outcomes, streamline reporting requirements, and identify opportunities to strengthen ACCO capability and capacity. The commissioning process also highlighted the importance of funding arrangements that provide greater certainty and better reflect the complexity of community needs and service demand. The outcomes of the commissioning process will inform future budget proposals, including consideration of longer-term contract arrangements of up to 7–10 years and investment in initiatives that strengthen ACCO-led service delivery and community wellbeing.
Finding 1: The Committee finds that the ACT Government failed to prioritise, make meaningful progress on delivering, and uphold its reporting obligations under the *ACT Mental Health and Suicide Prevention*	Noted.	The ACT Government initiated significant work in mental health and suicide prevention during the 2019-2024 period. The ACT Regional Mental Health and Suicide Prevention Plan 2019–2024 Reflective Review has been completed. CHN led the review and published the final Reflective Review document on its website following completion. The ACT Government notes the dissenting report from Ms Laura Nuttall in the Inquiry, which states that "[*w]hile there is convincing evidence that the Steering Committee for the ACT Mental Health and Suicide Prevention Regional Plan 2019–2024 (the Regional Plan) intended to deliver three progress reports and instead opted for a short progress*

Regional Plan 2019–2024.		*summary, the implication that the ACT Government failed to make meaningful progress on delivering this plan should be contested*".
Recommendation 5: The Committee recommends that the ACT Government provide regular updates to the Assembly regarding its progress under the *ACT Mental Health and Suicide Prevention Plan Regional 2025–2030.*	Agree in principle.	The ACT Government is committed to transparency and accountability in the delivery of suicide prevention and wellbeing services under the ACT Regional Mental Health and Suicide Prevention Plan 2025–2030. A key mechanism for delivering this commitment is the development of the ACT Mental Health Services Plan, which will translate the priorities of the ACT Regional Mental Health and Suicide Prevention Plan 2025–2030 into specific actions for the ACT service system. Development of the ACT Mental Health Services Plan is also being informed by the ACT Regional Mental Health and Suicide Prevention Plan 2019–2024 Reflective Review. Led by the CHN with input from partner organisations, the Review examines the influence of the previous Regional Plan on the local sector, highlighting key achievements, lessons learned and implementation challenges. The Review was published on the CHN's website earlier this year. The CHN has engaged a consultant to develop an Action Implementation and Monitoring Plan for the ACT Regional Mental Health and Suicide Prevention Plan 2025–2030. HCSD is contributing to this work and to the concurrent development of the ACT Mental Health Services Plan. Together, these plans will provide a coordinated framework for implementing and monitoring the priorities identified in the Regional Plan. The ACT Government will consider appropriate mechanisms for reporting progress to the Legislative Assembly as implementation arrangements are finalised.
Recommendation 6: The Committee recommends that the ACT Government provide funding for a trial of the Distress Brief Intervention Model.	Noted.	The ACT Government is committed to investing in suicide prevention and wellbeing responses that are evidence-based and appropriate for the ACT context. While no funding is currently allocated for a Distress Brief Intervention (DBI) trial in the ACT, the ACT Government funds services that align with the principles of the DBI model, including Step Up Step Down and the Housing and Accommodation Support Initiative (HASI). In addition, evaluations of ACT services, including Safe Haven and Step Up Step Down, are underway and will help inform future service planning and investment decisions. The ACT Government will continue to work with the Commonwealth Government through negotiations on the next National Mental Health and Suicide Prevention Agreement and associated bilateral arrangements. As part of this process, the ACT will consider the outcomes and lessons from Distress Brief Intervention trials implemented in other jurisdictions, including Commonwealth Government-supported sites in New South Wales and Victoria, to determine the most appropriate approach for the ACT.

		Any future consideration of a DBI model in the ACT will be informed by the evidence from these trials, local service evaluations, and the needs of the ACT community.
Recommendation 7: The Committee recommends that the ACT Government establish an ACT Local Drug Action Team where ACT Policing is a community partner.	Noted.	The ACT Government takes a health-based approach to alcohol and other drug (AOD) in line with the ACT Drug Strategy Action Plan 2022-2026 and has a range of measures in place to divert people from the criminal justice system and provide referral pathways into health services. Local Drug Action Teams (LDATs) are community partnerships that use place-based prevention models to address AOD issues in their local community. LDATs may include health, police and local government partners if appropriate. The LDAT program is funded by the Commonwealth Government. Given LDATs are community-led, it would not be appropriate for an LDAT to be established or led by the ACT Government, however government employees could participate if invited to do so. ACT Policing are regularly engaged in referring people to ACT alcohol and illicit drug diversion programs run by CHS, which also refer people to other health services if required. This diversion process was further formalised in the 2023 drug law reforms referred to in the Report. People are also diverted to health services through the Court Alcohol and Drug Assessment Service (CADAS) and the Drug and Alcohol Sentencing List (DASL). ACT Policing has existing and ongoing initiatives that support the intent of the recommendation, including: • SupportLink referrals: enable ACT Policing to refer victims, witnesses, offenders and vulnerable community members to appropriate counselling, support and community services. • Mental Health, Emergency, Ambulance and Police Collaboration: involves ACT Policing, ACT Ambulance Service, CHS, ACT Mental Health, Justice Health and Alcohol and Drug Services (MHJHADS), to improve outcomes for people experiencing mental illness or crisis. • Police, Ambulance and Clinician Early Response (PACER): provides an integrated police, ambulance and mental health clinician response for people experiencing acute mental health crisis in the community. • Sobering Up Shelter referral arrangements: ACT Policing maintains referral pathways to the Marymead CatholicCare Sobering Up Shelter, which provides a safe, community-based alternative to watch house detention for eligible intoxicated adults requiring care and protection. The service supports harm minimisation and diversion by enabling ACT Policing to connect vulnerable individuals with supervised care and support services rather than relying solely on custodial responses. • Community partnerships and funded programs: include support for MensLink, EveryMan and Canberra PCYC, which assist vulnerable people and young men through mentoring,

		counselling, education, diversion and community-based support. • Multi-agency recidivism and diversion work: include ROMART and other collaborative arrangements that support information sharing and coordinated responses for high-risk or vulnerable individuals.
Recommendation 8: The Committee recommends that the ACT Government create stronger connections and support for people who have attempted suicide to ensure they have continual and supported access to aftercare services, including ongoing involvement of their caregivers and family members.	Existing Government Policy.	The ACT Government is committed to an evidence based, person centred approach to support people who have attempted suicide. As part of the joint Commonwealth and ACT Government Mental Health and Suicide Prevention Bilateral Agreement, work is underway to identify, develop and implement services that contribute to a universal aftercare model. The ACT Government and CHN are working to improve the supports available to people during a suicidal crisis and after an attempt, including expansion of the ACT's existing Aftercare Service, The Way Back Support Service Several other initiatives have been implemented to address previously identified support gaps (identified through considerable consultation) in the ACT: • Minds Together – training for families, friends and others supporting a person after an attempt or in suicidal distress • Peer Companion in the Community Program – delivered by Roses in the Ocean • Thirrili ACT - provides prevention, intervention and aftercare for Aboriginal and Torres Strait Islander people Further, the Youth Coalition of the ACT is leading a co-design project to develop aftercare for young people aged 12-25. The project includes dedicated streams for Aboriginal and Torres Strait Islander, culturally and linguistically diverse, and LGBTIQA+ young people, and a broad youth co-design stream. Each stream is led by organisations and communities with relevant expertise and lived experience to ensure the service reflects the needs and experiences of those it is intended to support. The co-design process also includes carers' and family members' input.
Recommendation 9: The Committee recommends that the ACT Government ensure people's support networks are involved in both the development and enactment of their discharge plans and related supports	Existing Government Policy.	The ACT Government recognises the important role that families, carers and other identified support persons can play in supporting a person's recovery and reducing the risk of future mental health crises following discharge from acute mental health services. In 2025, CHS endorsed the *Initial Management, Assessment and Intervention for a Person Vulnerable to Suicide* Procedure. This procedure includes a section for support for carers, which outlines that the inclusion of carers in care planning and discharge meetings is encouraged. The Office of the Chief Psychiatrist supports person-centred, recovery-oriented discharge planning that involves a person's identified support network where appropriate, with the consumer's consent, or otherwise

following an acute mental health crisis.		as authorised by law. This approach is consistent with the principles of the *Mental Health Act 2015*, including promoting supported decision-making, recovery and the least restrictive approach to care. The involvement of families, carers and other support persons can contribute to continuity of care following discharge; however, this must be balanced with the consumer's rights to privacy, autonomy and safety, recognising there may be circumstances where involvement is not appropriate.
Recommendation 10: The Committee recommends that the ACT Government invest in addressing the 'missing middle' of mental health support for people whose needs are considered too complex for primary care but not acute enough for specialised clinical services.	Existing Government Policy.	The ACT Government remains committed to providing an effective and accessible service system. Central to this commitment is the ongoing identification and appropriate response to service and system gaps, ensuring services continue to meet the evolving needs of the community. The ACT Government currently delivers the following services addressing or accessible to the 'missing middle': • TIDES Youth Trauma Service designed from the "Missing Middle" report, to fill identified gaps in the ACT service system for youth with or at risk of moderate mental ill health and co-occurring trauma and complex needs. • This Youth at Risk project is delivering activities that enhance and improve integration of the existing child and youth mental health service sector. • The ACT Government partnership with the Youth Coalition of the ACT and Consumer Health Network to deliver the ACT Child and Youth Mental Health Sector Alliance, which provides a structure, formal mechanism for government, community stakeholders, the private sector, and people with lived experience to connect and collaborate to improve service system responses for children and young people. • MindMap: an online triage navigation portal specifically focused on young people, parents and carers in the ACT who are seeking mental health-related support, services and information. • Orygen's Moderated Online Social Therapy (MOST) facilitates access to 24/7 evidence-based online therapeutic tools tailored for each individual for free for youth aged 12-25 to complement their broader mental health clinical treatment. Through the existing mental health commissioning work, the missing middle has been highlighted as a key area for support. It is an investment priority in the current grant tranches of mental health commissioning. The ACT Government has committed $13.8 million per annum, (indexed in 2025-26 terms), through this mental health commissioning program.
Recommendation 11: The Committee recommends that the ACT Government investigate the	Agree.	Work to investigate the potential benefits of updating the Digital Health Record (DHR) to track suicide attempts and suicidal ideation will bring together Digital Canberra, CHS, and HCSD, to explore opportunities to strengthen the existing capability. This will be done within existing

potential benefits of updating the Digital Health Record so it can track suicide attempts and suicidal ideation.		resources. Any future actions will be dependent on future budget processes. The DHR already captures elements of suicide risk, including suicidal ideation and prior attempts, through multiple existing clinical workflows and tools. These include the Suicide Vulnerability Assessment Tool, which is used across settings, as well as capture of suicidal ideation and attempts as a Principal Problem within MHJHADS and as part of presenting complaints recorded during Emergency Department triage. While these capabilities demonstrate that the DHR can already record suicide-related information, they are not currently implemented as a single, standardised or consistently structured data set across all care settings. Capture is dependent on clinical context, workflow, and system configuration (e.g. flowsheets, plans of care, or presenting complaint fields), which may limit system-wide visibility, reporting, and longitudinal tracking of suicide attempts and ideation.
Recommendation 12: The Committee recommends that the ACT Government increase resources for the Coroner's Court to speed up coronial inquests.	Agree in principle.	The ACT Government recognises the importance of coronial inquests and investigations being conducted as efficiently as possible for families, stakeholders and the broader community. In the 2025–26 Budget, the ACT Government provided additional support to the Coroners Court through: • additional temporary resourcing of $308,000 for the 2025–26 financial year to fund two Legal Officer Grade 1 positions; and • continued investment in the design work to replace the Coroner's Local Case Management System, which supports the Court's coronial case management processes. The ACT Government will continue to work collaboratively with the ACT Courts to monitor demand and identify opportunities to improve the efficiency and effectiveness of coronial services. If the provision of additional resources to coronial services is identified as a government priority, then this will be considered through future budget processes The Coroner's Court is currently developing a new Coroners Case Management System that will create efficiencies. Implementation is expected in 2027.
Recommendation 13: The Committee recommends that the ACT Government explore legislative options for minimising the impact of gambling on men's mental health, including through a full gambling advertising ban.	Agree in Principle.	The ACT Government is currently engaging with the Commonwealth and interjurisdictional counterparts on the proposed national approach to introduce a range of restrictions on gambling advertising. These restrictions are part of a bill being considered by Federal Parliament and would commence from 1 January 2027. ACT Government is considering whether ACT-specific reform is required to supplement planned national reforms to ensure the expectations of the ACT community are met. In 2024, the ACT Government consulted with community on restricting gambling advertising in the ACT, with a focus on limiting child and youth exposure to gambling advertising. This consultation showed wide community support for stronger gambling advertising restrictions.

		However, there are challenges for the ACT to regulate gambling advertising broadcasting as Commonwealth Government law regulates broadcasting. Therefore, a national approach is appropriate to deliver a consistent approach to gambling advertising regulation.
Recommendation 14: The Committee recommends that the ACT Government increase public housing and further fund programs that get men into public housing and provide wraparound support when they have complex needs.	Existing Government Policy	The ACT Government recognises that access to safe, secure and appropriate housing is an important protective factor for mental health and wellbeing and is committed to supporting people who are homeless or at risk of homelessness through a range of social housing options providing tenancy management, tenancy support and wrap around services for people with complex needs. The ACT Government is committed to increasing the Housing ACT-owned portfolio to 13,200 homes by the end of 2030. This is in addition to the commitment to deliver 5,000 more public, community and affordable rental dwellings by the end of 2030. The 2026-27 Budget included funding for the new Public Housing Pipeline program, which will deliver 450 homes towards this target. The ACT Government is implementing the Housing and Accommodation Support Initiative (HASI) pilot, a community-based accommodation and psychosocial support program designed to support people with mental illness to maintain housing, build functional capacity and reduce reliance on acute and crisis services.
Recommendation 15: The Committee recommends that the ACT Government undertake a formal evaluation of community-led, peer support groups within the ACT's formal and informal landscape for men, to better understand and recognise the value provided by men's peer support services.	Noted.	The ACT Government recognises the important contribution that lived experience, peer support and community-led initiatives make to mental health and suicide prevention outcomes. Community connection and social belonging are important protective factors that can support wellbeing and reduce suicide risk. The ACT Government is committed to strengthening evidence-based mental health and suicide prevention supports across the service system and will continue to consider the role and effectiveness of peer-led and community-based approaches through the development of the ACT Mental Health Services Plan and broader mental health commissioning activities. Future priorities will be informed by evidence, service evaluations and identified community need.
Recommendation 16: The Committee recommends that the ACT Government fund the establishment of an assertive mental health outreach worker who can engage with men with high and complex needs to provide them	Noted.	The ACT Government recognises the importance of timely, accessible and coordinated community-based support for people with high and complex mental health needs, including those at risk of suicide. The CHN has commissioned a Mental Health Multidisciplinary Services Program scheduled to commence in October 2026. The Program will support general practitioners, Aboriginal Community Controlled Health Organisations (ACCHOs), allied health and the primary care system to support people with complex mental health needs within the community.

with support and connect them with supports they might not otherwise be in a position to access.		The service delivery model involves Multidisciplinary Practitioners that will understand the unique needs, circumstances and goals of program participants and will support access to services that address unmet needs. It is anticipated the program will commence in October 2026 until 30 June 2028.
Recommendation 17: The Committee recommends that the ACT Government fund the establishment of an ACT equivalent to Suicide Prevention Australia's Doing It Tough program in New South Wales.	Noted.	The ACT Government recognises the value of community-based initiatives that support connection, help-seeking and wellbeing for people at risk of suicide. The ACT Government is committed to reducing suicide and self-harm through a coordinated, evidence-based approach that strengthens both community and clinical supports. Future service development and investment decisions will be informed by evidence, service evaluations and identified community needs, including the needs of boys and men as a priority population within broader suicide prevention planning.
Recommendation 18: The Committee recommends that the ACT Government invest in providing and promoting additional mental health support for early parenting fathers.	Agree in principle.	The ACT Government recognises the importance of supporting the mental health and wellbeing of fathers during early parenting and the positive impact this can have on children and families. The ACT is implementing a range of initiatives to support parents, carers and families. As a part of the *National Mental Health and Suicide Prevention Agreement – ACT Bilateral Schedule*, the Medicare Mental Health Kids Hub ("Kids Hub") will deliver a new, no cost, multidisciplinary walk-in mental health service for ACT children aged 0-12 years with mild to moderate and emerging mental health concerns. The service will also provide mental health support to the children's parents, carers and kin. The ACT Government is also trialling innovative interventions to change the behaviour and attitudes of fathers who use violence. This includes the following Commonwealth supported pilots: - Adaption and delivery of the Caring Dads program for Aboriginal and Torres Strait Islander fathers, delivered by ACT ACCO Yeddung Mura; and - A pilot embedding the Caring Dads program within an alcohol and other drugs service, providing interventions for fathers with problematic use of AOD, delivered by Directions Health Services. These initiatives strengthen support for parents and families. One of the core funding streams in the mental health commissioning process is Children, Youth and Families. Support for families, including during the perinatal and early parenting period, is a priority through this open grant process and may receive funding based on the outcomes of this competitive commissioning process.
Recommendation 19: The Committee recommends that the ACT Government	Agree in principle.	The ACT Government recognises the critical role that the Aboriginal Community Controlled organisations (ACCOs) play in delivering culturally safe and responsive, community led services of Aboriginal and Torres Strait Islander Peoples.

provide sustainable long-term funding to Aboriginal Community Controlled Organisations to provide specialised culturally responsive services to First Nations men.		Consistent with its commitments under the National Agreement on Closing the Gap, the ACT Government continues to invest in Aboriginal-led programs and services that support healing, strengthen cultural identity and connection, improve wellbeing, and reduce contact with the justice system. There are several ACT Government-funded initiatives that progress the ACT's obligations under the Agreement and the associated Priority Reforms. The HCSD Aboriginal Service Development Team facilitates the ACCO Establishment and Expansion Fund which aims to support new and existing ACT ACCOs to build organisational capacity and capability to improve outcomes for Aboriginal and Torres Strait Islander people across Canberra. The ACT Government is currently exploring the development of an ACCO Transition and Support Strategy with oversight from the Select Policy Subcommittee of Cabinet - Closing the Gap. This strategy is likely to provide guidance on funding approaches for ACCOs. In addition, under the *ACT Aboriginal and Torres Strait Islander Agreement 2019-2028* (ACT Agreement), the ACT Government is committed to the implementation of proportional funding for the ACT Aboriginal community-controlled sector. One of the core funding streams in the mental health commissioning process is the Aboriginal and Torres Strait Islander Social and Emotional Wellbeing stream. This funding stream will be worth $1.1 million annually from 1 July 2027 for 5 years, with an option for a 2-year extension. This commissioning will only be open to applications from ACCOs or ACCHOs. By specifically committing long funding for ACCO's/ACCHO's, this stream of commissioning will help to meet the ACT Government's commitments under the National Agreement on Closing the Gap, Priority Reform 2: Building the community-controlled sector. This commitment includes increasing the proportion of services delivered by Aboriginal and Torres Strait Islander organisations. The focus of this service will be determined in conversation with the Aboriginal and Torres Strait Islander community and the successful ACCO/ACCHO providers however it will be required to support adults, including men. Other established initiatives that strengthen culturally safe, community-led approaches to First Nations Health and Social and Emotional Wellbeing, and contribute to the broader protective factors associated with reducing suicide risk among First Nations men, include: • Gugan Gulwan Aboriginal Youth Corporation • Winnunga Nimmityjah Aboriginal Health and Community Services • Wesley LifeForce – First Nations Suicide Prevention Training

		• Thirrili: provides prevention, intervention and aftercare for Aboriginal and Torres Strait Islander people • Ngunnawal Bush Healing Farm – Transition to Community Control. The ACT Government currently provides funding for a range of Aboriginal-led legal and support services, including ongoing funding for community legal services under the 2026–27 Budget. This includes: • Aboriginal Legal Service NSW/ACT Criminal Law Practice – Culturally appropriate legal advice, legal representation services, information and referrals, and disability liaison support for Aboriginal and Torres Strait Islander people charged with criminal offences. • Aboriginal Legal Service NSW/ACT Care and Protection Legal Advocacy Service – Legal assistance services to assist Aboriginal and Torres Strait Islander families engaging with the child protection system through culturally appropriate legal advice and representation. • Canberra Community Law Dhurrawang Aboriginal Human Rights program – Targeted and culturally appropriate legal advice and representation services to First Nations people in areas of critical need, including social housing, social security, race discrimination and human rights. The ACT Government also funds Aboriginal-led programs specifically designed to address the social, cultural and wellbeing needs of First Nations men, including the Young Bruthas Healing Men's Group and the Men's Empowerment Yarning Circles program. These initiatives provide culturally safe spaces for healing, mentoring, connection and behavioural change, enabling participants to strengthen resilience, maintain community connections and achieve positive life outcomes. Since its establishment, the Young Bruthas Healing Men's Group has supported participants to improve engagement with employment and education, obtain driver licences, strengthen connections to culture, and significantly reduce reoffending while engaged in the program. The positive outcomes being achieved through these initiatives reinforce the importance of sustained investment in Aboriginal-led, culturally responsive services.
Recommendation 20: The Committee recommends that the ACT Government embed cultural safety in all men's support services acknowledging the unique experiences of boys and men.	Existing government policy.	The ACT Government supports the delivery of culturally safe and responsive services across the human services system, including services that support boys and men. Consideration of cultural safety and responsiveness is embedded within existing policy and service design frameworks and informs the delivery of government-funded services.

Recommendation 21: The Committee recommends that the ACT Government provides mandatory cultural capability training for allied health workers in ACT public schools.	Agree in principle.	The Education Directorate has embedded cultural awareness and responsive practice within allied health professional learning through targeted training and ongoing collaboration with the Australian Catholic University and Aboriginal and Torres Strait Islander Education Branch. This work is strengthening cultural perspectives in service delivery and informing continuous improvement of practice, processes and resources. The Education Directorate is further strengthening culturally responsive supports through the recruitment of two Aboriginal and Torres Strait Islander identified senior allied health positions in Semester 2 2026. The training undertaken by Education Directorate this year has been specifically focused on Aboriginal and Torres Strait Islander people, although the framework used in training also provides support for engagement with people from culturally and linguistically diverse backgrounds. Opportunities for further professional learning and capability development will continue to be considered in line with operational priorities, available resources and procurement requirements.
Recommendation 22: The Committee recommends that the ACT Government strengthen the ACT Safe and Inclusive Schools Initiative.	Agree in principle.	The ACT Government recognises that safe and inclusive learning environments are fundamental to improving mental wellbeing and suicide prevention outcomes of young people. Within the ACT context, the Writing Themselves In 4 (ACT) Report and 2024 School Climate and Satisfaction Survey data similarly indicates that many LGBTIQA+ students experience schools as unsafe or unwelcoming due to their gender identity or sexuality, reflecting a persistent and localised pattern of harm. The Education Directorate has committed to actions under the Second Action Plan (2026-28) of the Capital of Equality Strategy (2024-29) and is currently reviewing the Safe and Supportive Schools Policy. The ACT Safe and Inclusive Schools Initiative, currently contracted to Sexual Health and Family Planning ACT, provides centrally delivered and in-school training, and the planning and implementation of a Wear It Purple event in August each year to support LGBTIQA+ inclusion, connection and wellbeing. The Education Directorate is currently reviewing the service model to consider how best to meet the increasing need of LGBTIQA+ students. Further changes are subject to future budget decisions.
Recommendation 23: The Committee recommends that the ACT Government establish or fund a	Noted.	The ACT Government recognises that LGBTIQA+ people are at increased risk of suicide and should have access to safe, inclusive and effective support services.

dedicated crisis service for LGBTIQA+ people in the ACT.		The ACT Government is considering priority populations, including LGBTIQA+, as part of its approach to mental health and suicide prevention going forward.
Recommendation 24: The Committee recommends that the ACT Government establish or fund a dedicated aftercare service for LGBTIQA+ people in the ACT.	Agree in principle.	The ACT Government recognises that LGBTIQA+ people are at increased risk of suicide and should have access to safe, inclusive and effective support services. The ACT Government is considering priority populations, including LGBTIQA+, as part of its approach to mental health and suicide prevention going forward. The Youth Aftercare Service is being co-designed through four dedicated streams, including LGBTIQA+ young people. This stream is led by an LGBTIQA+ organisation, who is undertaking consultation and co-design to ensure the service reflects the needs and experiences of LGBTIQA+ young people. Funding for implementation of services will be dependent on future budget processes.
Recommendation 25: The Committee recommends that the ACT Government increase investment in LGBTIQA+ community groups in order to provide peer support without diverting from operational capacity.	Existing Government Policy.	The ACT Government recognises the important role peer workers, peer support and inclusive community organisations can play in supporting connection and wellbeing for LGBTIQA+ communities in the ACT. The recommendation aligns with focus area 4.1 of the Capital of Equality Strategy: *Resourcing for LGBTIQA+ peer-led organisations.* The core funding programs administered by the Office of LGBTIQA+ Affairs are designed to support and strengthen LGBTIQA+ communities and peer-led community organisations in the ACT. Through the 2026-27 Budget, the ACT Government is providing $894,000 in continued and expanded funding to support services and advocacy for LGBTIQA+ Canberrans. This includes: • $688,000 of funding to A Gender Agenda to continue to operate the Gender Pathways Peer Navigation Service. The Peer Navigation Service is one of a kind in the ACT and provides drop-in and outreach support, individual assistance and case management, as well as referrals and collaboration with services to support social, legal and medical gender affirmation; and • $118,000 to expand the Supporting and Strengthening LGBTIQA+ communities' program to provide dedicated services for LGBTIQA+ parents and their children. There is $100,000 available annually through the Capital of Equality Grants Program. The funding supports small community projects to deliver activities which increase a sense of community and belonging for LGBTIQA+ communities in the ACT. The HCSD funds the following programs: • The LGBTIQA+ Community Health Services Program, provided by Meridian Inc (Feb 2024 – Jun 2027, whole of life value $1,600,000 ex-GST), which provides: peer-led counselling, psychosocial and mental health support services, including mental health support groups; and training and information on

		LGBTIQA+ Safe and Inclusive care to health service providers, with the aim to increase the provision of safe and inclusive health services. The Trans, Gender Diverse and Intersex (TGI) Health Program, provided by A Gender Agenda (Jan 2026 – Jun 2027, whole of life value $267,579 ex-GST), which provides: peer-based activities to support physical, social and emotional wellbeing of TGI individuals, the community and allies; systemic advocacy regarding the rights of TGI people, including regarding access to health services; education of organisations and professionals regarding the health needs of TGI people; training resources to improve capacity of health services to deliver safe and inclusive services to trans and gender diverse people including proposed standards of care, and guidance documents for health services; and guidelines for clinicians to support the provision of safe care to people with a variation in sex characteristics. On 27 May 2026, the ACT Government released the ACT Domestic, Family and Sexual Violence Strategy 2026-2036alongside the First Action Plan 2026-2028 (First Action Plan). $1.0 million in funding is currently allocated over 4 years to establish a new LGBTIQA+ Family, Domestic and Sexual Violence (DFSV) program. This contributes to Action 1.4 of the First Action Plan to establish a new LGBTIQA+ DFSV program to provide specialist support to LGBTIQA+ people and address a significant gap in services in the ACT. The ACT Government will work with community organisations to design and deliver the program.
Recommendation 26: The Committee recommends that the ACT Government ensure that the carers recognition card includes mental health carers.	Agree in principle.	The Government recognises the important role mental health carers play in supporting people experiencing mental illness. The *Carers Recognition Act 2021* provides an inclusive definition of a carer, which includes individuals who provide care to people with a disability, chronic condition, including mental illness or mental disorder. This ensures mental health carers are formally recognised within the ACT legislative framework. The Government has committed to explore the feasibility of a carers recognition card so carers can more easily access services and supports without having to verify every time they are a carer. As part of this work, the Government will ensure any proposed carers recognition card appropriately reflects the inclusive definition of carers under the Act, including mental health carers.