



# LEGISLATIVE ASSEMBLY

## FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, EMPLOYMENT AND YOUTH AFFAIRS

MICHAEL PETERSSON MLA (CHAIR), ELIZABETH KICKERT MLA (DEPUTY CHAIR), ELIZABETH LEE MLA

### Inquiry into Youth Mental Health in the ACT ANSWER TO QUESTION ON NOTICE

Asked by Ms Lee:

In relation to: Youth suicide

1. What support services are available to the families and friends of children and adolescents who suicide?
2. For how long are those services available to those individuals and groups?
3. What mental health programs are available to those individuals and groups and for how long are they available?
4. What data are collected on the on-going social and mental health impacts of youth suicide?
5. What youth suicide-prevention strategies are being, or have been, developed taking into account those data?
6. What other elements are used to inform youth suicide prevention strategies?
7. What is, or has been, the process used to develop those strategies, including, but not limited to, input from youth-based organisations, families and friends of suicide victims, and youth mental health clinicians and service organisations?
8. How are those strategies implemented in the youth sector?

Minister Rattenbury: The answer to the Member's question is as follows:

1. Comprehensive postvention planning ensures required supports for families and friends are quickly available following the death of a child or an adolescent as a result of suicide. The Education Directorate plays a key role in the provision of this support using the Headspace model. This resource is available to schools through Be You. Be You is a school-based mental health education and support program developed by Beyond Blue in partnership with Early Childhood Australia and headspace. Headspace also provides extra one-on-one supports to schools, as required, in actioning their postvention plan. This includes relay of sensitive information to the school community to mobilise support for other students who might have been impacted by this loss. As a follow up, risk-assessments are undertaken by psychologists in schools to minimise the impact of contagion associated with suicide for students who are identified as vulnerable. Social workers in Network Student Engagement Teams in the Education Directorate are readily available to provide support to families during this time.

Standby Support After Suicide is a community-based service that is available to families. It is a face-to-face and telephone support service for people in the Canberra area bereaved and/or impacted by suicide. Standby also acts as a point of coordination, connecting people to the various supports they may need through referrals to services, groups and organisations within their local area.

The Suicide Call Back Service is a nationwide service that provides professional 24/7 telephone and online counselling to people who are affected by suicide. Professionally trained counsellors with specialist skills in working with suicide-related issues assist individuals to work through their grief and distress following the loss of a loved one.

The ACT Health Directorate provides funding for Relationships Australia (RA) to operate a Coronial counselling service in the ACT. This service is available for people who are affected by deaths that are subject to a coronial process, which includes deaths that are suspected to have been a suicide.

2. Standby offers follow-up contact for up to one year to ensure individuals bereaved by suicide receive any ongoing support required. There is no time limit after a suicide for accessing the Standby Response Service. The counselling services provided by RA may be ongoing while the clients are involved in a coronial process and are available for three months after the coronial process has concluded. This can be extended even further at the discretion of the counsellor and client.

Individual assessments undertaken in a school setting help establish safety for students and address grief and loss issues. There is no time limit attached to these services.

3. ACT Health implements the LifeSpan Suicide Prevention Framework, an evidence-based approach to integrated suicide prevention, combining nine strategies that have strong evidence for suicide prevention into one community-led approach incorporating health, education, frontline services, business and the community. It has a strong focus on youth suicide prevention, developing resilience in young people and providing training and skills for their families.

Through the ACT LifeSpan Suicide Prevention Framework, the Office for Mental Health and Wellbeing (OMHW) is facilitating the roll out of the Youth Aware of Mental Health (YAM) program and other youth suicide prevention strategies across the ACT commencing in 2020. YAM is an evidence-based suicide prevention and mental health awareness program targeted toward young people aged 14-16 years. The program has been implemented in 10 countries across Europe where a large randomised controlled trial found that it reduced suicide and suicidal ideation by 50% and new cases of depression reduced by 30%. In the ACT, YAM is being delivered to Year 9 students in ACT schools in 2020 and 2021. The program aims to build resilience, encourage help-seeking and equip young people with the skills and confidence to look after themselves and each other.

Question, Persuade, Refer (QPR) is an important element of ACT Lifespan. It is an evidence based online suicide prevention training being made available in the ACT through the ACT LifeSpan initiative together with Capital Health Network. The training was developed by the QPR Institute and has been modified for Australian audiences in collaboration with Black Dog Institute. QPR was developed for people with no assumed knowledge of mental health or suicide prevention. It teaches people to recognise and respond effectively to someone exhibiting suicide warning signs and behaviours and connect the person in need of help with the right professional care. The training is free, takes just 60 minutes and the license is active for three years so anyone who has finished the training can continue to access the program to refresh their skills and knowledge.

4. There are general health and mental health self-report surveys conducted nationally and at a State/Territory level that measure levels of distress amongst all age groups. However, these surveys do not ask specific questions about suicide or youth in particular.

The Black Dog Institute and Mission Australia produced a report on a Mission Australia Youth Survey (aged 15-19) over five years of annual survey data collection. The recent report on this survey in 2017 for the period from 2012-2016 includes a section on 'issues of concern' to young people with a probable serious mental illness (1 in 4 of respondents). 32.2% of respondents rated suicide a high concern along with bullying and emotional abuse in general. The survey also attempts to differentiate between people with a probable serious mental illness from those that do not. For respondents not likely to have a serious mental illness the concern about suicide was 7.6%.

Of greater concern (75% to 42%) for respondents to the survey were issues related to coping with stress, school/study problems, depression, body image and family conflict for people with a probable serious mental illness. For respondents with no probable serious mental illness the same concerns were 35% to 17%.

There is no jurisdictional breakdown and the report specifies that the respondents may not be a representative sample of the youth population in general. The annual sample size analysed for this report was between 14,600 and 18,400 young people completed the survey across Australia between 2012 and 2016.

5. In addition to the major rollout of the YAM Program, the ACT Education Directorate (ACTED) is also implementing QPR Training for teachers and school communities, to develop confidence and skills in supporting people identified as at risk of suicide, including young people.

Applied Suicide Intervention Skills Training (ASIST) is being provided to ACT schools targeting student wellbeing teams and support staff. ASIST is an intensive, two-day interactive workshop focussing on suicide first aid and is suitable for all caregivers, including health workers, teachers, community workers, youth workers, volunteers and people responding to family, friends and co-workers in crisis.

6. In addition to the expert guidance provided by Black Dog Institute through ACT Lifespan, in 2019 the OMHW undertook a review of mental health issues for children and young people in the ACT, hearing from young community members and their friends, carers and families in relation to their mental health and wellbeing. Participants were asked to provide recommendations about how to improve the experiences of children and young people in the ACT as a focus of this review, which gave people the opportunity to identify improvements that could be made.

The top three recommendations from the community were:

1. Make access to services easier, affordable and increase capacity of current providers.
2. Increase the awareness and education addressing stigma and fear around mental health.
3. Need for new services targeting moderate to severe mental illness with 24/7 access.

The OMHW is using these recommendations to guide future action in providing programs and strategies for mental health and suicide prevention for young people in the ACT.

7. The Review of Children and Young People in the ACT was codesigned with young people and included over 700 responses to an online survey and 162 attendances at focus groups. The input received from young people, their families, carers and nongovernment and government organisations informed the recommendations from the review.

The extensive research by Black Dog Institute which guides the nine strategies of LifeSpan has led to the development of the key youth component of the LifeSpan framework, with the aim of promoting help-seeking, mental health and resilience amongst young people through school settings. The roll out of YAM to Year 9 students in ACT schools is a significant initiative being undertaken to implement this youth-focussed strategy.

8. The school setting is an optimal environment for the implementation of youth suicide prevention and mental health awareness programs. ACTED and ACT Health have undertaken to ensure a wide coverage of youth suicide prevention and mental health awareness programs across all levels of the youth sector and through various mediums (online or face to face) encompassing students, parents and carers, school staff and the wider school community. This includes the establishment under ACT Lifespan of a Schools Working Group to guide suicide prevention activity targeting young people, including representation from ACTED, Catholic and Independent schools, headspace, Mental Illness Education ACT, Black Dog Institute and other key stakeholders working with young people in the ACT.

Approved for circulation to the Standing Committee on Education, Employment and Youth Affairs

Signature:



Date: 22/6/20

By the Minister for Mental Health, Shane Rattenbury MLA