



Inquiry into men's suicide rates

Answer to question taken on notice

Asked by: Mr Thomas Emerson MLA

Addressed to: Ms Stacy Leavens, CEO

In relation to: Capital Health Network and Gaps in Services

Hearing: 16 October 2025

Uncorrected Proof Transcript pp 9-10

Transcript provided: 22 October 2025

Answer Due: 29 October 2025

Ms Stacy Leavens took on notice the following question(s):

THE CHAIR: I had a question, similar to what we were just discussing with GPs, in terms of gaps and referrals and services. One of the gaps that we have heard about is when someone yet has not made an attempt, but they are really in an acute space, and perhaps beyond the scope of their kind of regular psychological sense there. Is that a gap that you are concerned about as well? And are there barriers to engaging with services based on that criterion of whether or not someone has actually attempted suicide?

Ms Leavens: Yes, I mean, I think there is, in general in this space, I think there is a number of barriers around access. I mean, I think there is eligibility, so that kind of attempt requirement to get into some of these after-care programs. I think there is a number of issues. There is an awareness, just kind of knowing what is out there. It can be quite sporadic, in terms of what programs are available, the eligibility requirements and then sort of the timely access. And I think it is keeping—I think the gap is ensuring that consistent understanding of what is available in the community.

THE CHAIR: And is there something available in that exact kind of gap, or space, that I was just describing?

Ms Leavens: Not that I am aware of. Not that we fund. Although we fund a number of mental health services that do engage with people who probably fall into that cohort. But in terms of a specific program, not that I am aware of.

THE CHAIR: Okay. That seems like a ...(indistinct)... [9.42.46] Is there other jurisdictions where there is something or essentially you are suicidal, but you have not made an attempt yet?

Ms Leavens: I am not sure. Yes, I am not sure.

THE CHAIR: Okay. Would you be willing to take that question on notice, to have a look at what might be available and whether there is consideration been given to providing such a service in the ACT?

Ms Stacy Leavens. The answer to the Member's question is as follows:

Stakeholder consultations undertaken in preparing the CHN Needs Assessment and in developing the next Regional Plan confirm that people experience barriers to accessing many services, including crisis services, in the ACT.

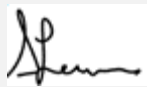
There remains a "missing middle" for people whose needs are considered too severe/complex for primary care but are not considered severe enough for specialised or tertiary supports. However, CHN has not identified any barriers to accessing these services based on a specific criterion of whether someone has made a suicide attempt or not, noting that CHN commissioned services, as well as other services in the ACT, support people in suicide distress or crisis, regardless of whether or not they have attempted suicide. For example, The Way Back Support Service, a suicide aftercare service commissioned by CHN, supports people following a suicide attempt and people identified as experiencing a suicidal crisis.

As identified in CHN's submission, the key barriers for men experiencing acute suicidal distress, and particularly older men, are more likely to be related to low rates of help seeking and limited contact with mainstream mental health services, rather than due to service exclusion criteria, such as a previous suicide attempt. It is likely that these men are often not reaching mental health services at all due to social/structural barriers. Different approaches (including non-clinical and community-based approaches that meet men where they are at) are necessary for meaningful suicide prevention, particularly for this cohort of men.

It is also important to acknowledge that suicide is often distinct from mental health/mental illness, so suicide prevention is not the responsibility of mental health services and systems alone.

Approved for circulation to the Social Policy Committee

Signature:



29/10/2025

OFFICIAL

Date:

By Stacy Leaven, CEO Capital Health Network