Pathways to Prevention

Closing the gap in Indigenous suicide intervention pathways

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INSIST: Background

- Indigenous Australians have 2x the suicide rate of non-Indigenous Australians (ABS, 2015)
- Indigenous men have some of the highest rates in the world (YDI, Aug 2016)
- 4x higher for Indigenous youth (ABS, 2014)
- Queensland has the highest rate of youth suicide in Australia
- Rates increase with remoteness of area
- Few Indigenous specific current suicide prevention models exist
INSIST: Introduction
INSIST: Program Structure

Aim: To design, implement, and evaluate a multifaceted suicide prevention training program.

- Increase knowledge and awareness of suicide risk factors
- Increase sense of connectedness between at risk individuals, health services and support groups
- Increase willingness to intervene with, and refer, at-risk youth to appropriate health services and support groups
- Increase knowledge and awareness of professional and ethical responsibilities related to suicide risk
Methods

- Community based participatory research
- Rural, regional, & metropolitan SE Queensland
- Building rapport, getting to know the communities
- Semi-structured conversations
- Key Items:
  - Review existing intervention pathways
  - Identification of culturally inappropriate aspects of the pathways
  - Key components required for a culturally appropriate pathway
- Social Network Analysis
Community consultation & its importance

- INSIST: Working *with* community, *for* community

- INSIST Consultations
  - Individual community consultations
  - Stakeholders
  - Service Providers
  - Trainers
  - Collaborations/Partnerships
Identifying gaps in the current pathway

- “service providers not knowing which interventions should be prioritised”
- “fragmented, with gaps in services in some areas, or individual programs working in parallel”
- “sometimes it’s just a person having a bad day and the services need to know how to tell what kind of help the person needs”
- “extreme intervention often deters families and friends from contacting the Police if subsequent suicide attempts occur”
- A lack of time and resources for front-line service providers that provide services related to suicide prevention services was also identified in the majority of consultations
Access to Care

- “fear of being charged or incarcerated”, lack of trust in services, and being judged “as soon as they walk in the door”

- “where do we go if it’s the middle of the night or on a weekend to get good help?”

- “person does not get the care or help they need in time”

- Lack of education and knowledge in regional communities of the types of resources and services available for them, despite the resources and services being minimal

- lack of integration and collaboration between and within services
Lack of information flow & communication

- Communities often reported suicide rates that were not indicative of nationally reported rates

- Lack of information flow between services leading to individuals “falling through the cracks”

- Service providers in these regions acknowledged a more connected, step-wise pathway approach would be more beneficial where “they let each other know what’s happening about a person and the person is taken care of wherever they go”

- Language: e.g. “not being well” or “not looking too good” instead of ‘having a mental illness”

- Community ownership of local prevention activities and initiatives, instead of “telling them what to do”
Post suicide-attempt care

- lack of support, services and resources, especially for Indigenous youth, after a suicide attempt

- “something else to look forward to or do”
- “just having sports to play or going on a trip”
- “learning something new”

- families and friends “need to take care of the person and keep them busy and think of other things”
INSIST – Role of the **Responder**
Outcomes

- Indigenous communities are more than willing to facilitate research
- Indigenous-led training program is a necessity
- Community-led approach is required: Need for responders
- Social Networks: barriers exist, but for reasons
- Indigenous communities need time and space to heal and overcome past trauma
Thank you

Indigenous Network Suicide Intervention Skills Training

Australian Government
National Health and Medical Research Council