Towards systematic data collection and referral pathways for Indigenous youth suicide attempts

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Suicide is now a significant contributor towards Indigenous premature mortality in Australia. There have also been an increasing number of anecdotal reports of child and youth suicides and suicide attempts across Central Australia. However, no systematic protocol or database exists to collect information on attempted suicides in the region. As a result, suicide attempt data are collected in an ad hoc manner and methods and classifications vary between organisations. Suicide and other suicidal behaviour among Aboriginal peoples is often the outcome of complex and multilayered factors, and suicide responses have often focused on crisis response or postvention activities. It is essential that evidence-based approaches to Aboriginal youth suicide are developed. Capturing accurate data on suicide and suicide attempts will provide a better understanding of the issue and enable the development of targeted interventions.

The aims of this project were to develop a systematic data collection system for Indigenous youth suicide and suicide attempts, and suggest appropriate referral pathways between agencies in Central Australia when a young person is assessed at risk of suicide. The latter aim was to achieve a more systematic approach to the provision of preventative interventions to individuals and their families. This project has been undertaken with the support of an Aboriginal Advisory Group, and ethics approval from two ethics committees. Twenty-two in-depth interviews were conducted with a range of practitioners from related areas (such as primary health, community support, youth services). Data were analysed using cross-case and thematic methods involving four researchers.

In this paper we report on the issues raised by individuals in achieving the stated aims, including:

- diversity of client data systems across agencies and within government departments; and inconsistent definitions of ‘Indigenous’, ‘youth’ and ‘suicide’
- confidentiality; and fear of labelling clients
- difficulties in identifying young people at risk; and a perception of an inability to provide support for those individuals
- problematic criteria for access to services
- lack of confidence of staff to respond and recognise at risk clients
- cultural issues confronted by practitioners.
Possible ways of managing these issues are also proposed. In similar settings overseas, such as Canada, data collection systems have been developed, which has required working through many similar issues. In reporting the themes raised by practitioners in Central Australia, we provide a basis for progressing the aims of the project locally and potentially further afield.