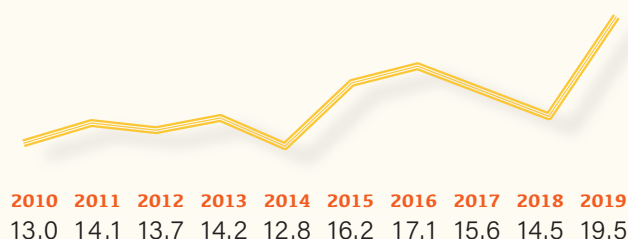


# Evaluation of the National Suicide Prevention Trial in Tasmania

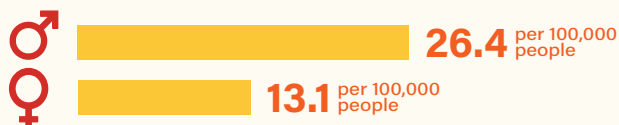
## Suicide in Tasmania

**2<sup>nd</sup> highest rate in Australia**

19.5 deaths per 100,000 people compared to the national rate of 12.9<sup>1</sup>



**Tasmanian rates** per 100,000 people<sup>1</sup>



**Higher rates for males**

In 2019, the rate of suicide for males in Tasmania was two times higher than for females<sup>1</sup>

Centre for Rural Health



### 2016

The trial was initiated by the Australian Government, with 12 communities across Australia.



### Aim

The primary goal of the national trial was to test the implementation of a systems-based approach to suicide prevention in local communities.



### Tasmanian target groups

- ☉ Men aged 40 to 64 years.
- ☉ People aged 65 years and over.



### Funding

Primary Health Networks provided Australian Government funding over four years to undertake activities.



### Each site had:

- ⚙️ A Primary Health Tasmania representative;
- ⚙️ A working group;
- ⚙️ A coordinator;
- ⚙️ A host organisation manager;
- ⚙️ A chairperson;
- ⚙️ Black Dog Institute support.



### Sites

The local government areas of Launceston, Break O'Day and Burnie, Ulverstone and Devonport (as the North west) were chosen as the Tasmanian sites.



### Evaluation

In 2017, Primary Health Tasmania funded a tender which was awarded to the Centre for Rural Health, University of Tasmania. In July 2018, the local-level evaluation commenced.

# The Tasmanian communities involved

## North-West Tasmania

- **Population**  
Approximately 65,000 people<sup>2</sup>
- **Host organisation**  
Relationships Australia (Tasmania)
- **Working Group highlights**  
Collaboration across the three LGAs/local councils, engagement and action of 'Community Connectors.'
- **Initial "hope" from the trial**  
'To build stronger links across the NWs clinical and community sectors.'
- **One key learning**  
'Local community members with a passion for the subject and a motivation to take action, need to be engaged with early on, to help initiate, organise, plan, and oversee activities – these people need to be linked to organisations, such as a Rotary, who can support this local action to be achieved.'
- **Challenge reflection**  
'Managing service provider expectations regarding the use and allocation of trial site funding. I can't say that we 'overcame' this in the North West.'

## Launceston

- **Population**  
Approximately 67,000 people<sup>2</sup>
- **Host organisation**  
City of Launceston
- **Working Group highlights**  
Engagement of service providers and organisations, large representation of people with lived experience
- **Initial "hope" from the trial**  
'To integrate programs with the City of Launceston and existing initiatives in the area.'
- **One key learning**  
'Inclusion of lived experience within the working group and ensuring we offer diverse ways for the community to become involved in suicide prevention activities.'
- **Challenge reflection**  
'Supporting and sustaining the working group to remain motivated and engaged throughout the duration of the trial is an ongoing challenge which requires clear, consistent, and honest communication.'

## Break O'Day

- **Population**  
Approximately 6,000 people<sup>2</sup>
- **Host organisation**  
St Helens Neighbourhood House Inc.
- **Working Group highlights**  
Built on existing mental health action group, strong community support
- **Initial "hope" from the trial**  
'To provide a safety net for the spread out population.'
- **One key learning**  
'The importance of including a diverse representation on working group ensured that there was community commitment and buy-in.'
- **Challenge reflection**  
'The LifeSpan model is not plain speak and community friendly. Breaking it down into plain English for working group members and community to understand made all the difference when developing strategies.'

<sup>2</sup>Australian Bureau of Statistics (ABS). (2019). Data by region. Retrieved from <https://itt.abs.gov.au/itt/r.jsp?databyregion#/>

# What was achieved through the trial as at 30 June 2020?

**164 unique activities**

were conducted that mapped (below) to the nine LifeSpan strategies, a systems approach to suicide prevention<sup>3</sup>

**48** of the various types of activities conducted had **lived experience consultation/inclusion** as a key part of the activity design or implementation



“It does point out that mental ill health, depends so much on [addressing] so many different social factors...the LifeSpan model is an excellent way of doing that...”

Working group feedback

\*the original strategy in the LifeSpan model is 'promoting help seeking, mental health and resilience in schools'. This was adapted by working groups in the Tasmanian trial to reflect how they conceptualised and utilised the model in practice, i.e. this strategy was not focused on schools, as this was not relevant to the target groups

## 316 total activities

including those recurring or repeated e.g. multiple training sessions, resource updates, repeated outreach initiatives

- 8 Action Learning Circles
- 44 working group meetings
- 54 educational workshops and forums
- 74 community support initiatives
- 50 workforce-related activities
- 222 community-wide activities
- 71 activities involving at-risk populations
  - 28 activities involving men aged 40-64
  - 15 activities for people 65 years and over

## ~160,000 people reached

by trial and activity promotion and media-related activities (e.g. radio broadcasts) for the National Suicide Prevention Trial Tasmania

## 11,103 participants

engaged in non-promotional National Suicide Prevention Trial Tasmania activities

## 1,198 participants

undertook some form of suicide prevention training

“...we could really learn from engaging with ready and eager local government organisations...we can learn hopefully a lot from that. In terms of their role and their capacity building, their confidence in their partnerships...”

Primary Health Tasmania feedback

“We have been able to provide those community organisations in the trial site with small grants and funding that is always topped up as soon as they use it.”

Primary Health Tasmania feedback

From a service provider's perspective, I suppose when you see an increase in intakes or referrals, that's I suppose one measure that you can use. And I happen to see a big spike in referrals or intake.

Working group feedback

“We've been able to educate men in different workplaces, and maybe that is an element that then is changing the work culture in those workplaces.”

Working group feedback

It [LifeSpan] requires bringing so many partners together, getting everyone working together...it's great to have something concrete for community and Primary Health Networks to kind of hang their hats on.

External stakeholder feedback



# Community training in suicide prevention

**54** suicide prevention and related training activities were provided to the community through the trial. Some examples of the training, educational workshops, and forums delivered through the National Suicide Prevention Trial Tasmania include:

- Mental Health First Aid
- safeTALK
- Community Response to Eliminating Suicide (CORES™)
- Question. Persuade. Refer. (QPR)
- Advanced Suicide Prevention Training (ASPT)
- Stop Male Suicide Workshop – Glen Poole
- Male suicide prevention gatekeeper training
- 'What do I do, What do I Say' workshop
- Certificate IV in Mental Health
- Certificate IV Mental Health Peer Support
- Community Champions Training
- Lived experience training by Roses in the Ocean
- Mental health carers Tasmania suicide prevention training
- Mindframe training
- Migrant Resource Centre Expert Insight Forum: Exploring Attitudes and Stigma. Multicultural perspectives on mental health and suicide
- Older persons mental health first aid
- SALT: see, ask, listen, take suicide awareness training
- Understanding Mental Illness Workshop
- Older Tasmanians Suicide Risk and Prevention Workshop
- Heartache2Hope

*...it's challenged some of the misunderstandings about you know, depression, and mental health as a normal part of aging. It is absolutely not, nor is suicide ideation.*

External stakeholder feedback

*...90-100 people have been trained for community champions...and the crisis response group has also had training in the event of a crisis... bit like spellcheck on the computer, it's buzzing around in the background, it's there as capacity in the community.*

Working group feedback

*I know of one person who is training in community champions who had a conversation with a young man and asked him straight out if he was thinking of taking his own life, and the response was yes, so he talked through that issue with him...So, I think that from one little spark, we can say it's all been worthwhile.*

Working group feedback

*...the narrow demographic made it difficult to specifically target activities. A lot of their activities really flow right across the community...*

Working group feedback

*I think it has been restrictive given our age demographic, it was difficult to get that into a systems approach.*

Working group feedback

# Collaborations

In conducting activities, the National Suicide Prevention Trial Tasmania brought together individuals and organisations to collaborate and take action, including:

- Peak bodies and departments
- Training providers
- Community organisations and service providers
- Target group specific collaborations

“...bringing together all of the different stakeholders in a way that hasn't happened before...So in terms of increasing community capacity and [Primary Health Network] capacity to be able to address suicide prevention in the future, I think it's been hugely successful...it's bringing together people that hadn't sat down before...”

External stakeholder feedback

“[The facilitator with lived experience] was somebody who they trusted despite the roughness of the delivery...to talk to them on their own level...me going out, or the vast majority of us going out, and speaking is not going to reach those people that we talk about as being unreachable.”

Working group feedback

“...having the lived experience, they had the more you know, can-do approach that really changed the energy in the room...They came up with ideas...it really changed the way people thought about things...”

Working group feedback

“...every relationship that's built, every effort that's made to engage with a service is progress. So, I think use the word “progress” rather than “success”...every failure really equals success because this is a trial, and it's teaching us something that we can apply the next time.”

Primary Health Tasmania feedback

To discuss the evaluation findings please contact:

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If you need help or support please contact one of these services:

**Emergency Services** phone 000

**Lifeline Tasmania** phone 1800 98 44 34

**Lifeline Australia** phone 13 11 14

[www.lifeline.org.au/get-help/online-services/crisis-chat](http://www.lifeline.org.au/get-help/online-services/crisis-chat)

**Beyondblue**

phone 1300 224 636

[www.beyondblue.org.au/getsupport](http://www.beyondblue.org.au/getsupport)



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