Media Release



15 March 2019

Community conversations shape suicide prevention action plans

Four more Kimberley communities have had their say on the suicide prevention activities that will work best for them, with community action plans now underway in Kununurra, Balgo, Wyndham and Halls Creek, as part of the Kimberley Aboriginal Suicide Prevention Trial.

These plans are the result of extensive consultation with elders and community members, led by community liaison officers, drawn from within the nine communities involved in the Trial, who are employed to lead local suicide prevention activities.

This takes the total number of community action plans being implemented to seven, with each community being awarded a grant of up to \$130,000.

While each of the four plans has a different focus, a common theme is the importance of people coming together at a series of on Country camps, targeting high risk groups, including men, women and young people.

The camps will provide the participants with a range of cultural and therapeutic supports to explore language and concepts surrounding suicide, healing concepts, the transmission of cultural knowledge, as well as the opportunity to engage with Elders and reconnect with their culture.

Deputy CEO Kimberley Aboriginal Medical Services and co-chair of the Trial's working group, Rob McPhee said it was great to see the momentum building as the seven communities roll out their various action plans.

"Each community has embraced their plan, signaling a commitment to addressing their issues, their way, making them better placed to determine the support they need from service providers and other agencies."

Halls Creek Community Liaison Officer, Rowena Cox, said she was excited that things were moving ahead, as it will be a time for her community to come together and support each other in these activities.

"We will be passing on cultural knowledge and skills to the younger generation, teaching them more about traditional ways of healing, and working together as a community to find positive, community-driven solutions to suicide prevention that really work for us."

A strong cultural framework underpins all the Trial's activities and all the projects identified by the communities must fit within the systems-based approach, guided by the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP).







The outcomes will be evaluated by the Australian Government, as part of a national evaluation to find the most effective approaches to suicide prevention for at-risk populations and share this knowledge across Australia.

Helplines

If you find yourself in an emergency, or at immediate risk of harm to yourself or others, please contact emergency services on 000. Other 24-hour services include: Lifeline on 13 11 14 and Suicide Call Back Service on 1300 659 467.

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About the Kimberley Aboriginal Suicide Prevention Trial

The Kimberley Aboriginal Suicide Prevention Trial Site is one of 12 sites nationally identified by the Australian Government as priority areas for suicide prevention due to their high-risk populations. The Trial aims to identify the best approaches to doing this, which will inform a wider national approach.

The Trial is guided by the recommendations of the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP) and is focused on the following nine areas: Broome, Bidyadanga, Dampier Peninsula, Derby, Fitzroy Crossing, Halls Creek, Kununurra, Wyndham and Balgo.

The four-year Trial comprises a planning and implementation phase and its findings and outcomes will be evaluated by the Australian Government, as part of a national evaluation.

The Kimberley Trial is led by the WA Primary Health Alliance, Country WA PHN. It has partnered with the Kimberley Aboriginal Medical Services (KAMS) who is responsible for the Trial's operationalisation. A Working Group, co-chaired by the Minister for Indigenous Health, Ken Wyatt AM MP and the KAMS Deputy CEO, has strategic oversight of the Trial and a Steering Committee has operational oversight.