

# COMMUNITY FACT SHEET



**KIMBERLEY**  
Aboriginal Suicide Prevention Trial

## Why a Suicide Prevention Trial in the Kimberley?

The Kimberley Aboriginal Suicide Prevention Trial is helping to develop a model of suicide prevention that meets the unique and culturally sensitive needs of the region's Aboriginal communities.

The Australian Government chose the Kimberley as one of 12 national Suicide Prevention Trial Sites. This is due to the tragic over-representation of suicide in Aboriginal communities such as the Kimberley, where the age-adjusted rate of suicide is more than six times the national average.

## Who is the Trial focusing on?

The Aboriginal community, with a specific focus on young people.

## Which communities are involved?

The trial covers the entire Kimberley region with nine sites chosen to develop local community-led responses.

Broome, Bidjandanga, Dampier Peninsula, Derby, Fitzroy Crossing, Halls Creek, Kununurra, Wyndham and Balgo.

## Who else is involved?

Community groups, federal, state and local governments, GPs, health professionals and community health workers, all of whom are essential to tackling suicide in the region.

## How is the Trial being run and by whom?

The Trial is guided by the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP).

A strong cultural framework underpins all its activities. Community decision making on suicide prevention strategies in local communities is a priority.

The Trial is community driven through representation on the Working Group which is co-chaired by the Minister for Indigenous Australians Ken Wyatt and Kimberley Aboriginal Medical Services (KAMS) Deputy CEO, Rob McPhee.

It is led by WA Primary Health Alliance, Country WA PHN, in partnership with KAMS, who are coordinating on-the-ground activities.

## How much is being spent and how?

The Australian Government has allocated \$4 million to the Trial, most of which will be used for community activities identified in community action plans. Other activities include community consultations, cultural mapping, training for health professionals, awareness campaigns, data collection, workforce and an evaluation.

## How long is the Trial and how will it be evaluated?

It began in mid-2017 and ends in June 2020. Planning was completed in December 2017 and implementation began in January 2018. The University of Melbourne is evaluating the Trial as part of a national evaluation. A local evaluation to better understand outcomes for the Kimberley will also be conducted.



### What has happened or is underway?

- Consulted and collaborated with community, government, health, social services and education sectors.
- Appointed the KAMS project trial coordinator to oversee community consultations and action plans.
- Signed a memorandum of understanding between WA Primary Health Alliance and WA Country Health Service to ensure collaboration, coordination and optimisation of results in suicide prevention and postvention.
- Appointed Prof. Pat Dudgeon, UWA Centre for Best Practice in Aboriginal Suicide Prevention, as the Trial's data group chair.
- Finalised an operational plan.
- Appointed the Kimberley Aboriginal Law and Cultural Centre, and completed cultural mapping across the region to inform the Trial's multiagency approach to providing tools and systems to address mental health and suicide prevention.
- Completed a campaign during the end of year holiday period to help people who might be struggling to access support.
- Training for GPs and other health providers in suicide prevention and postvention.
- Recruiting community champions to support communities to develop and implement suicide prevention action plans.
- Developed and are implementing community action plans.
- Commenced a regional process to implement a No Wrong Door approach to mental health and social and emotional wellbeing services.
- Employed community liaison officers in seven communities to support community goals.



- Ran the Yawartja Liyan, an equine therapy project for at-risk young people to build self-esteem and personal confidence.
- Implementing a cultural security framework.
- Implementing a self harm protocol.
- Created the Empowered Young Leaders Project with two Empowered Young Leaders forums held so far.





## What is planned?

- Complete a television, radio and social media campaign for young people, to decrease the stigma around depression and to encourage conversation.
- Investigate ways to improve suicide support and response through safe spaces for young people.
- Implement the Wirnan Art Project as a result of cultural mapping.
- Develop a traditional healers model to work with mental health services in Bidyadanga.
- Hold training to build GP capacity and confidence in suicide prevention.
- Final evaluation.

## More information

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