

Targeted regional initiatives for suicide prevention

Transition of National Suicide Prevention Trial Sites

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New suicide prevention funding will allow WA Primary Health Alliance to commission targeted initiatives across Western Australia, following tried and tested systems-based approaches.

Recent Australian Government guidance gives Primary Health Networks (PHNs) flexibility to consider modified or new priority activities based on learnings from the National Suicide Prevention Trial (the Trial), which ended in December 2022. In Western Australia (WA), this included three sites: the Kimberley, the Midwest, and Peel, Rockingham and Kwinana.

The new funding will be used for targeted suicide prevention initiatives in communities across the state identified as high need and will no longer be limited to the former Trial sites.

While PHNs will receive a reduced amount of funding, compared to previous individual Trial site funding, broader parameters will provide the opportunity to benefit new regions.

To ensure a smooth transition from the Trial, WA Primary Health Alliance will continue to work with stakeholders in each of the previous sites, as planning is progressed for the new *Targeted Regional Initiatives for Suicide Prevention* activities.

WA Primary Health Alliance remains committed to using the European Alliance Against Depression (EAAD) and Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP) frameworks, to inform the commissioning of activities.

Included in the new funding is an allocation for each PHN to recruit a suicide prevention lead. These positions will be responsible for engagement, coordination and integration of early intervention and suicide prevention activities with regional stakeholders and service providers.

Taking into consideration the size and diversity of regional and remote WA, two suicide prevention leads are being recruited for country (south and north) and one role for the metropolitan region.

Additionally, the suicide prevention leads will sit on the joint WA Primary Health Alliance – WA Mental Health Commission Suicide Prevention Working Group to ensure integration of suicide prevention activity and services.

The Australian Government has provided PHNs access to [The National Suicide Prevention Leadership and Support Program](#) that includes information on forty projects, undertaken by thirty-one organisations over three years (2022-2025). [National mental health medical research body, Black Dog](#) Institute will take a leadership role in this project, sharing evidence-based resources and connecting PHNs through a Suicide Prevention Network.

One of the projects Black Dog Institute will deliver engages collaboration groups/networks in locations of identified need, working with key stakeholders and communities to develop

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capacity and build links for service provision to improve suicide prevention outcomes. For WA Primary Health Alliance, Black Dog Institute has begun this work with the Peel and Rockingham Kwinana Community Response Group, having held the first workshop in December 2022.

Funding for the Targeted Regional Initiatives for Suicide Prevention ends in June 2024.

Western Australian Aftercare Services Program

A complimentary project tasked with developing a Western Australian Aftercare Services Program Model of Service is also underway. The introduction of an aftercare services program is a state and federal joint initiative, as agreed in the [Bilateral Schedule of Mental Health and Suicide Prevention: Western Australia](#); comprised of a two-part approach to support individuals following a suicide attempt and / or suicidal crisis.

It is overseen by a working group established by the WA Mental Health Commission and includes representation from WA Mental Health Commission, WA Primary Health Alliance, the Western Australian Association for Mental Health, Aboriginal Health Council of Western Australia and the Australian Government Department of Health and Aged Care.

For more information, contact WA Primary Health Alliance Suicide Prevention Lead, Jacqueline Sharp on jacqueline.jennings@wapha.org.au

About the National Suicide Prevention Trial

In 2016, 12 Primary Health Networks (PHNs) were selected to participate in the National Suicide Prevention Trial (the Trial). For WA Primary Health Alliance, this included two sites in Country WA PHN (Midwest and Kimberley regions) and one site in Perth South PHN (Peel, Rockingham and Kwinana region). Following guidance from the Australian Government, each site was to implement a systems-based approach to suicide prevention. WA Primary Health Alliance chose the evidence-based European Alliance Against Depression (EAAD) 4-level system framework, to inform the commissioning of suicide prevention activities in both the PaRK and Midwest regions, while the Kimberley region was informed by the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP).

The EAAD is an integrated approach that aims to improve the identification and treatment of depression and prevent suicidal behaviour. The *ATSISPEP – Solutions that work: What the Evidence and Our People Tell Us* provides a framework that supports the development of Indigenous community-led suicide prevention and is aligned with the WA Primary Health Alliance Cultural Competency Framework and Innovate Reconciliation Action Plan.

Over the five years of the Trial, a wide variety of activities were commissioned to build suicide prevention capacity within the regions and improve integration of the primary mental health system and a diverse range of sectors.

Extract from the [National Suicide Prevention Trial – Final evaluation report](#).

“The National Suicide Prevention Trial was a key Australian Government policy initiative to trial a regional approach to suicide prevention drawing the best available evidence and adopting a multicomponent systems approach. To achieve this significant undertaking, the 11 PHNs involved in the 26 Trial sites successfully engaged a diverse range of stakeholders in their regions and planned and commissioned suicide prevention services and activities that targeted at-risk populations in their regions.

“The Trial has generated a wealth of new knowledge on effective strategies for planning

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regional suicide prevention activity, developing a coordinated systems approach to suicide prevention, issues facing at-risk populations in the community and how they might be addressed, the impacts of delivering a range of suicide prevention services and activities, and the challenges and barriers to be resolved. This knowledge represents a significant advance toward the ultimate outcome of reducing the toll of suicide in Australia.”

This activity has been made possible through funding provided by the Australian Government under the PHN Program.

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About Us: WA Primary Health Alliance shapes, strengthens and sustains primary health care through partnerships and strategies that improve people’s access and health outcomes. As the operator of WA’s three Primary Health Networks – part of the Australian Government national PHN program – we help communities and people most at risk of poor health to get better access to care closer to home. We achieve this by supporting general practice to deliver the highest quality patient care, funding local primary health care services based on community needs and connecting local services to simplify the health care system. Along with our strong partnerships, our statewide structure allows us to deliver better health, together for the benefit of the WA community. For more information, visit www.wapha.org.au