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Mental Health Australia calls for a national suicide reduction target of 25 per cent reduction in suicide by 2025.

In an effort to focus shared action towards zero suicide deaths, the Chair of Mental Health Australia (MHA), the nation's peak body for the mental health sector, is calling for a 25 per cent suicide reduction target by 2025.

Every 2.5 hours an Australian dies by suicide - a staggering nine people per day. Another 1,250 people attempt to take their own life each week, with suicide the leading cause of death for Australians between the ages of 15 and 44¹.

Mental Health Australia Chair and suicide-attempt survivor Matt Berriman said it's time for Australia to stand up and fix its mental health crisis.

"Mental ill health is Australia's shadow pandemic and with experts predicting a worsening of our nation's suicide rates as a society we cannot remain idle," Mr Berriman said.

"It's clear that previous efforts and investments are not working well – despite the efforts of so many for so long. To support people early we need to build some genuine accountability into the broken system and eliminate the social and economic impacts that can contribute to distress.

"Mental Health Australia believes that galvanising the community, health sector, government, business and industry and community around a suicide reduction target is the right way forward. There are some outstanding people doing extraordinary things in the mental health and suicide prevention sectors, but their work is missing a unified purpose and rallying cry."

Mental Health Australia CEO Dr Leanne Beagley reinforced a need for change as the community strives together for zero suicide.

"Suicide is complicated human behaviour with many diverse risk factors. Preventing suicide is a very complex issue with no one single solution. But one Australian's death to suicide is one too many. We need to work together as a community to bring about real change," Dr Beagley said.

The Federal Government recently released the National Mental Health and Suicide Prevention Agreement but Dr Beagley believes it only shows how far we still have to go as a nation, and believes it won't result in the mental health reform that Mental Health Australia has been advocating on behalf of the sector for over the past three years.

"The agreement is disappointing. The missed opportunity to embed lived experience expertise reflects a lack of government commitment to consumer and carer leadership in the mental health sector. The lack of detail on deliverables during the course of the Agreement, the absence of any implementation framework and no external oversight will translate into continued tick-the-box service enhancements rather than much needed reform," Dr Beagley said.

¹<https://www.blackdoginstitute.org.au/resources-support/suicide-self-harm/facts-about-suicide-in-australia/>



Media Release

When it comes to suicide prevention and mental health reform, Mental Health Australia is calling upon government to:

1. include lived-experience leadership into the development and delivery of mental health services across all levels;
2. provide government leadership and accountability with structures across jurisdictions to deliver an integrated end-to-end system and addressing the social determinants of mental health;
3. implement a co-designed community-focussed mental health system with a national community mental health dataset and growing psychosocial supports to match need; and
4. address urgent mental health workforce gaps.

It complements the important work of Suicide Prevention Australia, whose National Platform outlines a whole-of-government approach on the social determinants of health, embedding lived experience leadership expertise and insights as well as reliable, timely and meaningful data to drive policy and outcomes, underpinned by a sustainable workforce, quality practice and community-wide capability.

Mr Berriman added:

“We need to acknowledge that a different and better way has to be found when it comes to suicide prevention and improved mental health outcomes, and a target creates a hyper-focus that will hold the elected Government to account and help galvanise the country around preventing people dying. We can’t be afraid of not reaching the target – that’s the wrong mindset. If as a community we fall short of a 25 per cent reduction by 2025, we’ve still saved many lives but we’ll need to continue to try harder. This is about saving lives.”

If you or someone you know needs help, talk to a GP or health professional, or contact any of the below services available 24/7:

Lifeline: 13 11 14 or lifeline.org.au

SANE Australia Helpline: 1800 18 SANE (7236) or sane.org

Beyond Blue: 1300 22 46 36 or beyondblue.org.au/forums

Black Dog Institute: blackdoginstitute.com.au

Headspace: 1800 650 850 or headspace.org.au

ReachOut: reachout.com

Suicide Call Back Service: 1300659467

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Suicide in Australia

- Nine Australians die every day by suicide - more than double the road toll.
- 75% of those who take their own life are male.
- Over 65,000 Australians make a suicide attempt each year.
- Suicide is the leading cause of death for Australians between the ages of 15 and 44.
- The suicide rate in Aboriginal and Torres Strait Islander peoples is twice that of their non-Indigenous counterparts.
- People in rural populations are 2 times more likely to die by suicide.
- LGBTI+ community members experience significantly higher rates of suicide than the rest of the population.
- For each life lost to suicide, the impacts are felt by up to 135 people, including family members, work colleagues, friends, first responders at the time of death.
- Males aged 85 and older experience the highest age-specific rate of suicide.

<https://www.blackdoginstitute.org.au/resources-support/suicide-self-harm/facts-about-suicide-in-australia/>

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Mindframe is available for real-time guidance by email, phone or video conference to all media outlets, nationwide

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Sane Australia: 03 9682 5933 or info@sane.org