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Royal Commission into Defence and Veteran Suicide

Proposed new entity to promote the
wellbeing of Defence members and
veterans

Consultation Paper Response

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Acknowledgements Statement

Suicide Prevention Australia, Mental Health Australia and Relationships Australia acknowledge the unique and important understanding provided by people with lived and living experience, and their families, carers and supporters. This knowledge and insight is critical in all aspects of suicide prevention policy, practice and research. Advice from individuals with lived experience helped guide the analysis and recommendations outlined in this submission to the Royal Commission into Defence and Veteran Suicide.

We particularly thank Suicide Prevention Australia's Lived Experience Panel for contributing their lived experience expertise to the development of issues and recommendations addressed in this submission. We specifically thank Dr Nikki Jamieson who reviewed the consultation questions and provided significant input to help form the recommendations outlined in this submission. Throughout her involvement in the Royal Commission into Defence and Veteran Suicide, Dr Jamieson has heavily advocated for an independent body. We thank her for her contribution to this submission.

As the national leadership bodies for suicide prevention, mental health and relationship services, our members are central to all that we do. Advice from our members, including the largest and many of the smallest organisations working in suicide prevention, as well as practitioners, researchers and community leaders is key to the development of our policy positions. We thank all members involved in the development of this policy position.

About Us



Suicide Prevention Australia is the national peak body for the suicide prevention sector. We exist to provide a clear, collective voice for suicide prevention, so that together we can save lives. We believe that through collaboration and a shared purpose, we can work towards our ambition of a world without suicide. We are a member-based organisation that is guided by people with living and lived experience of suicide. We have over 450 members, including the largest and many of the smallest organisations working in suicide prevention, practitioners, researchers, and community leaders.



Mental Health Australia is the peak, national non-government organisation representing and promoting the interests of the Australian mental health sector and committed to achieving better mental health for all Australians. We were established in 1997 as the first independent peak body in Australia to represent the full spectrum of mental health stakeholders and issues. Mental Health Australia members include national organisations representing consumers, carers, special needs groups, clinical service providers, public and private mental health service providers, researchers and state/territory community mental health peak bodies.



Relationships Australia is a federation of community-based, not-for-profit organisations with no religious affiliations. Its services are for all members of the community regardless of religious belief, age, gender, sexual orientation, lifestyle choice, cultural background or economic circumstances. Relationships Australia provides a range of services, including counselling, dispute resolution, children's services, services for victims and perpetrators of family violence, services for older people, and relationship and professional education. We aim to support all people in Australia to live with positive and respectful relationships and believe that people have the capacity to change how they relate to others. Relationships Australia has provided family relationships services for 75 years.

Background

This submission represents the view of Suicide Prevention Australia, Mental Health Australia, and Relationships Australia on a new oversight entity proposed by the Royal Commission into Defence and Veteran Suicide (Royal Commission). Our views are informed by our member organisations and by people with a lived experience of suicide and mental health challenges, and their families, carers and supporters. We strongly support the establishment of an independent, unbiased entity to continue the Royal Commission's work to ensure government action towards reducing the unacceptably high rate of suicide in our Defence and veteran community.

Earlier this year, Suicide Prevention Australia, Mental Health Australia and Relationships Australia developed a joint paper calling for a blueprint for reform and the establishment of an independent entity to ensure ongoing accountability following the Royal Commission.[1] The key recommendation of this paper is that the Royal Commission should call for the Australian Government to resource a project to create and deliver a blueprint for reform in mainstream suicide prevention, mental health and social services to enhance accessibility, engagement and efficacy for Defence members, veterans and their families. The proposed entity should be adequately resourced to create and lead the development of this blueprint.

Introduction

Data recently released by the Australian Institute of Health and Welfare (AIHW) shows that between 1997 and 2021 there were at least 1,677 suicide deaths among serving, ex-serving and reservist Australian Defence Force (ADF) personnel.[2] This compares to 47 combat deaths over a similar period.[3] It is deeply worrying that current and ex-serving Defence members are significantly more likely to die by suicide than in active duty, and that ex-serving Defence members are far more likely to die by suicide than the general population.

To date, there have been significant resources invested to reduce this trend and to improve the health and wellbeing of the Defence and veteran community. Over the course of two decades there have been 57 relevant inquiries which have led to 770 recommendations.[4] Sadly despite these efforts, there has been a lack of meaningful and long-lasting change. Given the overall poor state of progress and history of inaction, we want to ensure the Royal Commission into Defence and Veteran Suicide (Royal Commission) is effective and drives the significant changes that are needed.

It is critical that there is systemic change, and this requires the establishment of an ongoing accountability mechanism beyond the life of the Royal Commission to ensure that recommendations are fully implemented and have the desired impact. In addition to this, there must be a clear vision and understanding of what 'success' looks like to ensure transformative action.

While the proposed entity should have the authority to report publicly to clearly shine a light on inadequate implementation or lack of implementation of the Royal Commission recommendations, it must also have the power to go beyond monitoring responses to the recommendations. The proposed entity should collect and report on data in relation to suicide and suicidality among Defence members and veterans, and develop new recommendations for action based on the latest available evidence which should be considered by the Commonwealth Government on a routine basis.

We suggest that the proposed entity could be modelled on the Australian Domestic and Family Violence Death Review Network.[5] This network consists of death review teams which operate in all of Australia's states and territories to identify limitations and potential areas for improvement in systemic responses to domestic and family violence.[6] The NSW-based Domestic Violence Death Review Team undertakes analysis and collects data and reports to Parliament biennially and sets out recommendations to improve responses to domestic and family violence.[7]

The proposed entity should operate in a similar manner to ensure there is an ongoing mechanism which outlives the Royal Commission and can identify and recommend policy, legislative, administrative, or structural reforms to reduce the suicide rate and improve the health and wellbeing of Defence members, veterans, and their families. As the success of the proposed entity will depend on its ability to publicly report on key Commonwealth departments, the ADF, the Department of Veterans' Affairs (DVA) as well as others, and hold the Commonwealth Government to account, it is vital that the entity can directly report to Government. At a minimum, the entity should report annually to Parliament. The proposed entity could potentially report to a standing committee similar to the Joint Standing Committee on Implementation of the National Redress Scheme.[8]

The proposed entity must be established as an external monitoring body and sit independently from the Government and its agencies including the ADF and DVA to ensure oversight and accountability.

The Royal Commission has proposed that the new entity could focus on improving the wellbeing of Defence members and veterans, and preventing suicide and suicidality. This should be expanded to include a focus on health and support the families and carers of Defence members and veterans. It is critical that the entity supports the families of Defence members and veterans as we know that families are a key part of providing support, and face challenges themselves.

Including people with lived experience, and their family, carers and supporters, is integral to the success of the proposed entity and it is critical that people with lived experience are involved in co-design of the entity and are embedded at all levels of the governance structure. The entity and its activities must operate in a trauma-informed and culturally safe way, to meet the intersectional diverse needs of populations at risk of suicide including current and ex-serving Aboriginal and Torres Strait Islander Defence members, their family and kinship networks.

The establishment of a new entity presents a critical juncture and unique opportunity for real change. We applaud the Royal Commission's efforts to date, and it is pleasing that the Commonwealth Government has supported several of the Royal Commission's recommendations in the Interim Report. But we need to go further and ensure that the final report does not sit on the shelf. Change is long overdue, and it is imperative that there is an ongoing accountability mechanism beyond the life of the Royal Commission.

We implore the Royal Commission to be bold and recommend the most powerful entity structure possible, so that we can turn the tide and prevent further suicide deaths. We view the proposed entity as fundamental to improving the health and wellbeing of Defence personnel and veterans now and into the future.

Response to consultation questions

Suicide Prevention Australia, Mental Health Australia and Relationships Australia are pleased to provide the following response to the Royal Commission's specific consultation questions on the proposed new entity.

1. Reasons for establishing a new entity

1.1 Do you agree with the reasons outlined for establishing a new entity? If not, why not?

We agree with the six reasons outlined in the Consultation Paper for establishing a new entity. These reasons include to ensure change happens; address a grave and systemic problem; maintain relevance; provide a more holistic approach; and to ensure independent oversight and accountability.

The entity should promote both health and wellbeing to ensure a holistic approach to supporting Defence members, veterans, and their families. It should be emphasised that support needs to be provided on an ongoing and long-term basis, from the time of recruitment into the ADF, through to the transition from military to civilian life.

Family structure, and health and wellbeing can be construed and valued differently among cultural groups and between individuals. For example, Aboriginal and Torres Strait Islander concepts of family and kinship networks, and social and emotional wellbeing must be incorporated.[9] The proposed entity must evoke change for current and ex-serving Aboriginal and Torres Strait Islander Defence members and meet the needs of different population groups.

It is proposed that the external entity can assist the Government in holding Defence's leadership to account and assist the public to hold the Government to account through mechanisms such as conducting inquiries and public reporting. However, it has been consistently raised throughout the Royal Commission that major reforms are needed within the ADF to overcome maladministration. The ADF should be held accountable by the proposed entity.

1.2 Are there any additional reasons for establishing a new entity?

The establishment of an independent entity which is responsible for monitoring and reporting on reform would help restore trust and confidence in the system by providing public accountability for the ADF, DVA and other government agencies to fully implement the Royal Commission's recommendations. Re-building trust and confidence among current and ex-serving Defence members, their families, and the broader community is an additional key reason to establish an ongoing entity.

The development of an independent oversight body would also ensure transparency, and that delays and obstacles which have hindered the implementation of previous recommendations are recognised and overcome early. This is an additional key reason to establish the new entity as it is important that there is a safety net to ensure that the Royal Commission's recommendations are implemented as intended and that key risks are identified in a timely manner and mitigated. Ongoing and continuous monitoring provides opportunity to pivot as required to ensure the recommendations of today are suitable for suicide prevention tomorrow.

Establishment of an entity would also provide an opportunity for ongoing evaluation and data collection. The new entity could provide advice to the ADF, DVA and other authorities in the Defence Portfolio on the changing needs of the serving and ex-serving Defence community and the appropriateness of private and public services. This would support the ADF, DVA and other authorities in the Defence Portfolio to recognise when services are not meeting expectations, and act accordingly to make improvements. Part of the new entity's reporting requirements should include providing advice to Government on where additional funding is needed to ensure the Royal Commission's recommendations are implemented successfully, or to address gaps in the system to promote the health and wellbeing of Defence members, veterans, and their families.

History has shown that unfortunately many Royal Commissions and inquiries do not lead to meaningful and enduring change. A new entity could carve out a new path and lead by example with a model that creates lasting change and helps reduce suicide. Future inquiries and Royal Commissions may be encouraged to implement a similar mechanism to ensure the full and meaningful implementation of recommendations that serve to enhance the wellbeing of Australian communities.

1.3 Taking account of all factors, should a new entity be recommended by the Royal Commission and established?

Yes, we strongly support the establishment of an independent entity to help prevent suicide and promote the health and wellbeing of Defence members, veterans, and their families.

2. Principles of design

2.1 Do you agree with the suggested principles? If not, why not?

It is important that the entity is designed with care. We support the five suggested principles of design which include that the entity's design and governance is informed by Defence members, veterans, family members and people with lived experience; is strong and independent; the framework is designed before the end of the Royal Commission; that arrangements will not absolve the ADF and other relevant authorities of their responsibility and accountability; and that the entity should act in a trauma-informed way.

2.2 Should any other principles be added to the list?

In addition to the outlined principles of design, it is important that the proposed entity is evidence informed. Implementation science and the factors that may inhibit or facilitate quality implementation must be considered up-front to improve likelihood that the entity will achieve its desired outcomes. Implementation science principles must be embedded in the framework to ensure that the entity is impactful.

We support the adoption of a trauma-informed approach to the operation of the entity and recommend that operations should also be culturally informed and safe for diverse populations, including LGBTQIA+ communities. The entity must also be designed in a way that prioritises active collaboration and partnership with Aboriginal and Torres Strait Islander Peoples and ways of being, knowing and doing.

Beyond the design and governance of the new entity being "informed" by people with lived experience, the entity should be co-designed with people with lived experience and the suicide prevention sector, with an ongoing role in governance of the entity. An ongoing commitment should be enshrined in the framework to directly engage with people with lived experience and have lived experience leadership positions and mechanisms embedded at all decision-making levels of the entity. We believe that the trustworthiness of the entity and its success will depend on these mechanisms for embedding lived experience expertise to ensure that the entity reflects the needs of the community it is designed to serve.

In addition, robust engagement with the sector should also be undertaken to ensure the entity is designed in a way that it can function adequately and in collaboration with existing organisations and peak bodies to ensure coordination and cross-collaboration with the sector to achieve best outcomes.

3. Purpose and functions of a new entity

3.1 Is the proposed purpose of the entity appropriate?

We believe the proposed purpose of the entity is important. However, the proposed purpose should be expanded to acknowledge that families and carers are an important stakeholder, and that family structures should be supported by the entity.

The purpose of the entity should address health and wellbeing. Wellbeing and health are two distinct concepts which overlap but require different actions due to their divergent connotations. Health in general is increasingly understood as the ability of an individual to adapt and to self-manage, even in the face of adversity such as living with a chronic disease. [10] In contrast, wellbeing is broader and has been operationalised as the combination of feeling good and functioning well, and the experience of positive emotions and relationships.[11]

3.2 Do the functions listed represent what a new entity should do?

We support the five functions listed for what a new entity should do, including to monitor and report on the extent of adoption, implementation, and success of the Royal Commission's recommendations; analyse and recommend improvements to Defence, DVA and other relevant agencies; examine and report on the cultures of Defence, DVA and other relevant agencies; monitor and report on suicide and wellbeing data and trends; and engage with relevant stakeholders.

In addition to the functions outlined, the entity could also be funded to evaluate programs and monitor the efficacy of services in meeting the needs of Defence members, veterans, and their families. We suggest that the entity have the capacity to collect data on the level of investment in services and programs for Defence members, veterans, and their families. This would provide a needs analysis and would identify whether equity, accessibility and effectiveness of systems and services improve in the long-term.

Within this, the new entity should consider more granular areas of policy and process such as promotions within Defence and the DVA. It could also consider Defence's obligations and policies around members transitioning, as non-voluntary discharge is linked to an elevated risk of suicide. The entity should collect data on the transition period including immediately before and after leaving active service to identify whether services are being accessed during this period. This would improve knowledge of whether transition support is being accessed between the ADF and DVA and if there are any unmet health and wellbeing needs.

While the entity is not a complaint mechanism, it is critical that there is consideration around receiving complaints and allegations. There should be no requirement for Defence members or veterans to exhaust internal redress and grievance procedures before filing a complaint. The entity must also be able to review arbitration processes and act on them. An oversight body can consider due diligence, fair process, identify risks and mitigation, review or develop policy, and or ensure compliance with policy/law to enable continuous improvement.

Redress of grievance and administrative processes can be damaging to mental health and wellbeing, increase the risk of moral injury, and increase suicide-related behaviour. It is crucial that there is an opportunity for members and veterans to receive independent support while providing evidence to the oversight body. The current system must evolve to safeguard our members and veterans and an oversight body such as the one proposed will provide a mechanism to support this.

The entity should hold agencies to account, and there needs to be accountability mechanisms in place if the Royal Commission's recommendations are not implemented on time or adequately. Further to this, there must be a feedback loop and cooperation between agencies so that the entity can identify why a recommendation has been implemented inadequately or has not been fully implemented. It should also be acknowledged that there are investigative powers already vested in existing institutions, and the entity needs to have the authority to engage and collaborate with these agencies to ensure there is cooperation around core issues.

The entity should also be involved in the translation of evidence, or at minimum the sharing of knowledge. It is important that knowledge sharing across the sector increases, and the entity will hold a wealth of knowledge and valuable data and insights which should be shared at sector conferences and key events to encourage continual improvement.

It is proposed that the entity can monitor and report on the recommendations made by other inquiries (past, present, and future). However, there is a need for guidelines and transparency around which select recommendations from other inquiries the entity can inquire and report on. The entity should be able to identify when recommendations have been implemented adequately and this requires a clear understanding of what success looks like.

3.3 Should the entity's inquiry and reporting functions be widely or narrowly conceived?

The entity's inquiring and reporting functions should be narrowly conceived in the first instance and focus on the ADF, DVA and other government agencies which affect the health and wellbeing of Defence members, veterans, and their families. This should be the starting point to ensure fundamental change to help prevent further suicide deaths and improve health outcomes.

However, it is important that the entity's inquiry and reporting functions are dictated by the recommendations of the Royal Commission. To ensure that the entity is impactful, the entity must also have the power and capacity to inquire into all the areas in which the Royal Commission has recommendations. Given this, the entity should have the ability to inquire and report broadly if necessary, including across Government.

4. Governance and powers of the new entity

4.1 Are the proposed governance arrangements and powers appropriate for the new entity?

We agree with the proposed governance and powers of the new entity which include that it is headed by its own official; free of direction by Ministers; has an Advisory Council; has powers to hold hearings and issue notices, receive regular information updates from Defence, DVA and others and enter into joint investigations or inquiries; has its own budget allocation; reports annually to Parliament; can report publicly or confidentially; and not be subject to public interest immunity or privileges.

Utilising key performance indicators (KPI's) can help ensure good governance and measure progress. KPI's should be relevant, realistic, achievable and allow for ongoing evaluation. We suggest that once established, the entity is evaluated following two-years of operations. After the initial two years, evaluation could be extended to a three to five year cycle depending on the recommendations of the first review. While it is important that the entity has its own budgetary allocation, it must be supported and resourced by the Commonwealth Government on a long-term basis.

4.2 If any Advisory Council is supported, what kinds of people should serve on it?

We support the establishment of an Advisory Council to support senior management and leadership which has capacity to influence and impact activities and decision-making. This will help ensure good governance and could improve likelihood that the entity achieves its objectives in preventing deaths by suicide. It is vital that the Advisory Council does not simply give people a voice, it needs to provide a productive space where people are heard.

The Advisory Council should have broad representation including from Defence and veteran communities, including families, supporters and carers; Aboriginal and Torres Strait Islander communities, and the health and suicide prevention sectors. To ensure integrity, leadership and Advisory Council appointments must be transparent and merit based.

Lived experience representation must be embedded across governance structures of the entity, including representation on the Advisory Council and senior leadership team. It is well recognised that the views and needs of people with lived experience and those who support them can significantly differ. Broad representation of diverse lived experience representation will add depth, offer a variety of perspectives, and ensure that the entity delivers culturally safe and trauma-informed outcomes.

Within the Advisory Council there could potentially be smaller subgroups consisting of members who can provide input on context specific topics such as military sexual trauma, serving ADF member suicide compared to ex-serving ADF suicide, or on a specific ADF or DVA related service. It should also be recognised that families often have different needs, and a subgroup for families may also be required.

4.3 What else should be said, in legislation or otherwise about the design and operation of a new entity?

The Royal Commission should ask that the Commonwealth Government establish the entity in legislation. This will ensure that the purpose, functions, and activities of the entity are defined in law and will provide a clear understanding of the entity's powers and responsibilities. Establishing the entity through legislation will also encourage integrity and will help ensure that the entity operates independently from Government. It will also signal to the Defence and veteran community that the entity performs an important public function, and that suicide prevention is a key priority of Government.

4.4 Are there other considerations for how a new entity might operate?

We strongly suggest that the entity should be about more than the promotion of wellbeing. It is imperative that there is stronger messaging up-front, and that it is an independent body established to ensure that the Royal Commission's recommendations are adequately implemented and to provide ongoing direction to help prevent suicide among current and ex-serving Defence members. The entity could be called The National Defence and Veteran Suicide Prevention Agency. It is important that suicide is in the title to highlight the entity's long-term focus.

We also suggest that a strategy is developed which outlines how long the entity can operate. For example, the strategy could dictate that the entity will operate until 2050, and this will help avoid confusion and ensure that the entity operates on an ongoing basis.

The entity requires public relations and communications capabilities. It is essential that the entity communicates on a routine basis to the public and shares its findings with defence personnel, veterans, their families, and the broader community. This will help ensure that there is public transparency in implementation.

Final comments

The rate of suicide among our current and ex-serving Defence members is unacceptably high and change is long overdue.[12] Meaningful reform is necessary if we are to reduce the number of deaths by suicide among our current and ex-serving Defence community. History has shown us that many past inquiries and Royal Commissions fail to generate significant policy change.

We need to do things differently. We support the establishment of an independent entity which outlives the Royal Commission and has the power and authority to hold the Government, the ADF and DVA to account. The recommendations of the Royal Commission must be implemented in full. We welcome the 13 recommendations handed down in the Royal Commission Interim Report that have been adopted by the Government.[13] This should encourage the Royal Commission to embrace this unique opportunity and ask for the best possible entity which is impactful and will lead to real and lasting change.

We hope that the entity will continue the Royal Commission's important work to-date and will help prevent suicide, and improve the health and wellbeing of Defence members, veterans, and their families. Suicide Prevention Australia, Mental Health Australia and Relationships Australia thank the Royal Commission for their consideration and important work to-date.

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If you or someone you know require 24/7 crisis support, please contact:

Lifeline: 13 11 14

www.lifeline.org.au

Suicide Call Back Service: 1300 659 467

www.suicidecallbackservice.org.au

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