

The Sydney Statement of the National Forum on Men & Suicide

Sydney, 2-3 May 2006

Meeting the Challenge

Preamble:

We, the delegates attending the Men and Suicide Forum in Sydney in May 2006, represent a diversity of groups and interests who have a commitment to preventing male suicide. We include employers, researchers, representatives of industry, sports organisations, policy makers, service providers, national peak bodies, concerned citizens and most importantly, those with lived experience of suicide and self-harm.

We affirm that male suicide is one of the great tragedies of Australia today. Every day, five men end their life through suicide in this country. Of the 2,100 suicides annually, 80% are male. Almost 50% of suicides annually are males aged 25-44 years. Despite the National Suicide Prevention Strategy, male suicide rates continue to rise in remote areas. In many rural and remote indigenous communities rates are extremely high. This situation is utterly unacceptable and preventable.

The forum is concerned to initiate fundamental change in the way Australian society deals with men and suicide. It has set a clear long term-goal that by 2030 all Australians will know what actions to take individually and collectively to prevent suicide. The bold plan developed by the forum aims that in one generation suicide will no longer exist as a health risk for men.

We must now recognise the need to address this epidemic with an assertive, well-resourced, long-term and evaluated strategy. This strategy envisages all sectors of community (non-government organisations, business, media, public sector services, and Australian governments at all levels) working collaboratively.

We are committed to the blueprint for change. We acknowledge that fundamental change will take time and that the need for urgent and assertive action by government and the broader Australian community cannot be ignored.

We note that Australia has a strong record in addressing complex social and health issues – for example, HIV/AIDS prevention, drinking, driving behaviour, and heart disease. These successes have come through sustained, well-funded and research-based strategies. The same approach is required to address the preventable and tragic loss of men through suicide.

We believe that men become suicidal, not through weakness of character, but through complex social and individual processes that isolate men and erode their hope. We affirm the need for a cultural change so that all men and women are equally valued in society.

We believe that it is crucial that the voices of men who are suicidal, and those who are affected by the deaths of those men who have died by suicide, should be heard.

The following recommendations, while charging governments with the formal responsibility of driving suicide prevention programs and activities for men, and acknowledging the pivotal role of the media, should not be construed as overlooking the vital contributions of businesses, non-government organisations and essential services to the health and well-being of men. As noted, this strategy envisages all sectors of community working collaboratively.

ACTION FOR GOVERNMENT

We call on The Council of Australian Governments (COAG) to commit to men's suicide prevention through the following strategies:

1. Ensure that funding for programs provided under the National Suicide Prevention Strategy and other State and Territory initiatives is recurrent, in order that national and local programs may be adequately coordinated and evaluated and their results be widely disseminated. Successful programs are to be replicated nationally.
2. Review existing suicide prevention and programs and research initiatives at all levels of government, to ensure adequate coverage and delivery across the lifespan in settings appropriate to men, and to identify the gaps that need to be filled. Performance indicators for health and well being are to be included in the National Education Performance Framework.
3. Endorse and fund the development of a National Men's Health, Well-Being and Suicide Prevention strategy that recognises the importance of parity in gender funding, and which facilitates, promotes, researches, integrates, develops models for and advocates for men's health nationally. Recognition of the diversity of cultural experiences for Australian men is to inform the strategy. It is also to ensure that practitioners are skilled in and accountable for delivering culturally appropriate care. Moreover, in acknowledging that suicide prevention is broader than mental health alone, the Strategy is expected to bridge government departments and includes such elements as research and evaluation and comprehensive models of service provision.
4. Review and restructure current tertiary psychology, social work and welfare courses to ensure that men's issues are addressed and appropriate models of working with men are promoted.
5. Develop and/or enhance accredited and fully evaluated training programs for front line staff in a range of settings to better enable staff to identify and support those who are vulnerable or at risk. Examples include workplaces, Centrelink, the Family Court, Child Support Agency Australia, child sexual assault services, sports facilities, prisons and other custodial settings, and services caring for learning-disabled or mentally ill older men.
6. Establish an outreach and referral model for government-funded health and welfare services that is responsive to men at risk who use these services. Those who deliver these services are well placed to provide early identification and intervention.
7. Given the well-recognised relationship between regular physical activity and mental health, revive universal participation in physical fitness in schools through such avenues such as the Department of Education Sport and Training and the Australian Sports Commission.
8. Encourage men's social engagement through participation in existing networks, such as service clubs, sporting and social clubs (also see Community Sector below)
9. Protect the health of the male workforce by amending occupational health and safety legislation to include mental health and wellbeing benchmarks, and to have life skills training mandated and supported in the workforce.
10. Support men's access to services by expanding the current number of men-specific services and programs, encouraging flexible service delivery (that is go to where men are at) and ensuring that all generic government funded services are men-friendly.

11. Provide continued funding to existing non-suicide-specific men's programs that address those issues, which place men at risk.
12. Ensure that men have access to evidence based treatment at the earliest possible time (preferably in the home or community or acute care). The Forum recommends that new systems for primary care be created to include outreach and community based service provision. This is of particular concern for men being discharged from psychiatric hospitals, men leaving emergency departments after self-harm, men with complex co-morbid problems (such as mental health problems and substance misuse), and for the groups of men listed in group 5.
13. Support existing and new community capacity building initiatives and strategies that reflect input from Federal, State and Local Governments. The Forum acknowledges the significant role of non-suicide-specific services in supporting men, particularly through prevention and early intervention. It recommends the establishment of an accredited training package specifically targeting community (sport, cultural etc) organisations, which is designed to help them to understand what and how they can contribute.
14. Provide funding for development of a national men's wellbeing media strategy which can be adapted / adopted at local level and work nationally.
15. Provide a central clearinghouse for the collection and dissemination of information about current and new initiatives, program evaluations and research projects relevant to suicide prevention.
16. Improve the national coronial database by inviting interdisciplinary and inter-sectoral collaboration (including those with lived experience), with a view to incorporating a broad range of mental health and socio-cultural factors, which are currently not investigated. (e.g. separation from family and children and its linkage to male suicide cases)
17. Provide dedicated suicide prevention services that target the specific needs of men from CALD and rural and remote communities. These men are particularly vulnerable because their geographic and social isolation. The Forum calls on governments to support the development of strategies to increase connectedness and support partnerships with established bodies and networks. Specifically in relation to male asylum-seekers and their families, the Forum notes the Commonwealth Government's commitments, made twelve months ago, to cease its policy of mandatory indefinite immigration detention, which has been associated with significant adverse mental health consequences and high rates of suicidal behaviour. It calls on the Commonwealth Government not to re-commence this policy by introducing mandatory offshore processing of asylum claims.
18. Commit to reducing the soaring levels of suicide among Indigenous Men by endorsing and supporting existing programs that are currently addressing suicide and the high levels of trauma experienced by Aboriginal men. In particular:
 - a. Aboriginal controlled health services and government operated health services need to observe the views of Aboriginal and Torres Strait Islander men in relation to providing access and culturally appropriate methods of dealing with gender issues.
 - b. Psychologists and counsellors in their interventions should pay particular attention to the factors that are weighing down the Aboriginal and Torres Strait Islander males.
 - c. All ways and means of assisting Aboriginal and Torres Strait Islander males to reconnect with family, country and culture should be investigated.
 - d. Cross government funding resources should be made available to enable specific programs to address the needs of Aboriginal and Torres Strait Islander males and establish strategies suitable to their communities to combat self harm, violence and suicidal tendencies.

- e. There is a need to build an effective workforce across all sectors that recognises, values and enhances the capacity of Aboriginal communities, organisations, and government agencies to respond to the mental health and suicide prevention issues. Health workforce training programs require development, based on established standards.
- f. There is a need to promote success stories and publicise these broadly.
- g. The implementation of the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples Mental Health and Social and Emotional Well Being 2004-2009 should be adequately resourced.
- h. Aboriginal and Torres Strait Islander communities should be involved in partnership across all aspects of mental health and suicide prevention initiative to ensure learning exchange ultimately benefits the recipients.

ACTION FOR THE MEDIA

- 19. We recognise the role of the Australian media in creating wide-ranging awareness of this crucial issue. The Sydney Forum welcomes and seeks opportunities to work with the media in all its diverse forms, in particular to:
 - a. Encourage diverse positive models of masculinity. While valuing positive aspects of masculinity, suicide prevention programs need to examine all aspects of masculinity including those that are not helpful or that are associated with suicidal behaviour (e.g. inappropriate risk taking behaviour, etc.).
 - b. Find ways to develop national sympathetic consciousness about the issues and pathways associated with suicide, and in disseminating the message to men that ‘It’s smart to seek help’.
 - c. Track cultural change around how men see themselves and how the culture sees men, and communicating ‘good news’ stories about men and positive images of men, by identifying suitable ‘champions’ who exemplify these qualities.
 - d. Track how the issue is being addressed over time, including by all levels of government.

ACTION FOR CORPORATE SECTOR

- 20. We recognise that the workplace can play a crucial role in promoting health and well being among men, as well as responding to men who may be at risk. We call on all employers to recognise that occupational health and safety, duty of care and social obligations making it incumbent upon them to adopt positive steps to ensure an informed and healthy workplace.
- 21. There are a number of models currently in place to work with employers and employees to better understand how to recognise the signs of risk, to provide valuable support and guidance in health and help seeking actions. We encourage employers to adopt a more proactive approach to developing a more engaged and informed workplace for men.
- 22. We recognise that the corporate sector has become increasingly involved in making a contribution to a stronger and healthier community through a range of contributions. We encourage all corporate citizens to recognise the need to adopt a positive role model, which recognises and values the contribution of men in the workplace and in the community.

ACTION FOR THE COMMUNITY SECTOR

23. We encourage all those working in the community sector to adopt a more positive and constructive approach towards men, promoting positive images and valuing the contribution of men to the community.
24. We recognise that no one service is able to meet all needs of an individual. We encourage all those working in the community to establish more effective referral systems, which assist men to obtain the full range of information and support, which they may require.
25. We acknowledge that organisations such as sporting clubs, service clubs, social and recreational associations play a vital role in the community. We encourage those managing, working and participating in such organisations to recognise the role that they are able to play in supporting men and positive role models and in responding to men at risk.
26. We encourage those working in suicide prevention and early intervention to adopt a collaborative approach in working with other community organisations to promote greater awareness and understanding of the role they are able to play in reducing the risk of suicide among men.