



Connecting Pathways: Big Picture, Big Country:

Suicide Prevention Australia Conference

Adelaide 2-4 November 2006

Laurencia Grant reports

THE UNFORTUNATE reality of Australia's suicide rates is that while rates have declined steadily since 1997, especially among young males, rates have increased among men aged 25 to 44 years and over 75 years. Rates among indigenous males, males in remote areas, and disadvantaged males have continued to rise. Self-harm and attempted suicide, especially among young women, remains a continuing problem.

The Australian Government has committed funding to 46 new community based projects (31 large projects and 15 small projects). The focus of these projects is on men, indigenous communities, people with mental illness, rural and remote regions and people bereaved through suicide.

Dr Lloyd Potter of the Suicide Prevention Resource Centre in the USA emphasised the importance of communities having a "collective competence in confronting situations that threaten the integrity of the community". Most communities have many great programs but very rarely collaborate well. He suggested that if we are able to build on a community's capacity to address the issue of suicide then, ultimately, we will also address a wide range of issues such as family violence, drug and alcohol issues and so on.

Dr John McDonald of the University of Western Sydney spoke of our tendency to medicalise social issues. Suicide is not always about mental illness and the statistics that tell us that 90 per cent of all suicides had a mental illness are highly suspect. He advocates for environments that can "walk with those who might be on pathways that could lead to suicide".

Prof. Brian Mishara is Director of the Center for Research and Intervention on Suicide and Euthanasia at the University of Quebec at Montreal. Dr Mishara recalled World Suicide Prevention Day in New York when a group of journalists attempted to leave in response to news of a suicide bombing attack in the Middle East. He reminded them that "more people a year die from suicide than from all wars and homicides together."

Anti-Depressants & Suicide

Dr Robert Goldney, Uni of Adelaide, spoke on the topic of suicide and anti-depressants. He argued strongly that there is no defining evidence to indicate that anti depressants contribute to suicide, but there is some evidence to indicate that they can reduce suicide rates. All treatments involve risks, however.

Dr Jon Jureidini, the Chair of Healthy Scepticism Inc. offered a powerful counter argument and claims that the billion dollar industry of prescribing SSRI's (anti-depressants) does more harm than good. His work indicates that GP's would be grateful for alternatives to prescribing anti-depressants in cases of mild depression and suggests that "watchful waiting" can be more effective.

Aboriginal Suicide Prevention

SPA provided opportunities for initial planning for an Indigenous Suicide Prevention Conference for 2007. Leonore Hanssens, representing

SPA and the previous Life Promotion Officer in the Top End, is currently conducting research into suicide clusters in indigenous communities in the Territory.

Suicide Bereavement

Sue Scheinpflug of United Synergies and Peter Bycroft of Corporate Diagnostics conducted the National Activities on Suicide Bereavement Project. This project was a national scoping study of existing bereavement and postvention literature, support, resources, activities and models. Responding to those bereaved by suicide requires specialist knowledge and timely and respectful interventions that are directed by the bereaved.

A healing ceremony was conducted on the water front at Glenelg to remember those who have died through suicide and all those left to grieve the loss. The speeches of politicians, workers, local Kurna people and bereaved family members were followed by a colourful and moving ceremony of flowers.

For more information on the learnings from the SPA conference keep checking the website www.suicidepreventionaust.org.au or call Laurencia (08) 8952 4608



SPA Jill Fisher, Sue Scheinpflug, Peter Bycroft of the National Activities on Suicide Bereavement Project