



Commissioner for Children and Young People
Western Australia

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Committee Secretary
Senate Community Affairs reference Committee
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Dear Sir or Madam

Inquiry into Suicide in Australia

Thank you for the opportunity to submit comment to this important inquiry. Suicide is a tragedy that affects the lives of many, in particular the death of a young person can have a devastating impact on the lives of families left to cope with the loss of a loved one. I commend Australia for being one of the first countries to develop a national strategic approach to suicide prevention. This inquiry will further offer an opportunity to improve early intervention and prevention services to individuals, families and communities and an important opportunity to prioritise the mental health and wellbeing of children and young people now as well as in the future.

Role of the WA Commissioner for Children and Young People

I was appointed as Western Australia's inaugural Commissioner for Children and Young People in December 2007 pursuant to the *Commissioner for Children and Young People Act 2006* (the Act). The role of the Western Australian Commissioner for Children and Young People is one of broad advocacy; I have responsibility for advocating for the half a million Western Australian citizens under the age of 18 and for promoting and monitoring their wellbeing. I must always observe and promote the right of children and young people to live in a caring and nurturing environment and to be protected from harm and exploitation.

In performing all functions under the Act, the best interest of children and young people must be my paramount consideration. I must also give priority to, and have special regard for, the interests and needs of Aboriginal and Torres Strait Islander children and young people, and to children and young people who are vulnerable or disadvantaged for any reasons.

It is with these responsibilities in mind that I submit comment to the inquiry.

Caring for the future growing up today

Early intervention and prevention in the early years

Significant emphasis must be on building the resilience of children and young people early in life. I and my fellow Commissioners around Australia have been active advocates for increased investment in prevention and early intervention. Investment in the early years is the best way to ensure resilience. Factors that build resilience are:

- reducing poverty;
- providing stable and suitable accommodation;
- access to better health services, in particular in rural and remote regions;
- greater investment in education; and
- a commitment to reducing cost of living pressures on working families.

It is therefore important the inquiry consider all social factors impacting on individuals and families, to reduce the high incidence of suicide and ideation of suicide among young people.

Consulting young people and including their views

I would like to draw your attention to a number of consultations with young people which have provided important feedback on their concerns regarding their health and access to health care services. The United Nations Youth Association of Australia (UNYA) *YouthSpeak* consultation project¹ reports that young Australians place a high value on physical and mental health and provides relevant comments on the barriers young people experience in accessing health care services. This includes geographical barriers, lack of transport (particularly in rural and remote regions) and finances, issues of parental consent, and appropriate staffing of services.

The Office for Youth's report on the State of Australia's Young People national survey² identifies other barriers to help-seeking, including social barriers (for example, fear, embarrassment, stigma, confidentiality and self-perception). The report finds that help-seeking behaviours are limited, with only one-fifth of teenagers with mental health problems seeking professional support. The survey also found that young people who accessed help, did so most frequently through school counselling services and in rural areas would seek support mainly from friends, but also families.

The Fremantle **headspace**, Youth 4 Youth (Y4Y) Forum held in Western Australia in March this year (2009)³ was attended by forty seven young people who participated in an open discussion on issues that were important to them, and to have these issues heard by the decision-making process that effect them. Among the thirteen discussion

¹ United Nations Youth Association of Australia (2008) *YouthSpeak: A conversation for the future. Report on the implementation and findings of the YouthSpeak consultation project*. Australian Government, Canberra.

² Office for Youth (2009) *State of Australia's Young People*, Australian Government.

³ Youth Council of Western Australia, National Youth Week 2009, 'Youth 4 Youth Free Form Talk for Young People'. **headspace**, Fremantle, 2009

areas raised were; depression, mental health and parenting issues and support/education for families affected by mental health issues.

From the issues raised by young people in these reports and from my meeting with them, I would strongly advocate that the inquiry consider the following:

- better access to Medicare cards for young people;
- increased professional supports to schools and families, with more awareness raising in schools of the support services available for people with mental health issues;
- a continued educational campaign not only around mental health problems, but also positive images of young people that supports their emotional health and wellbeing;
- listening to and actively involving children and young people in the development and implementation of services and supports to meet their needs rather than that of service providers;
- age-appropriate support groups and services, so that young people do not have to mix with adults because at times this could be intimidating and off-putting for young people;
- the need for GPs to spend more time with young clients and not just prescribe anti-depressants straight away, there is a worry of becoming too reliant on drugs;
- when developing and evaluating programs, the participation of young people is considered, because if children and young people participate in decision-making (and democratic) processes, to reflect their views and needs satisfactorily, will benefit programs and services that were intended to assist them; and
- children and young people are a priority in State and Territories mental health strategies, with the COAG National Action Plan on Mental Health 2006-2011⁴ also an opportunity for the participation of children and young people, as their contribution will benefit these initiative in a unique way.

The **headspace** Y4Y forum (2009) also identified the best way to educate young people about mental health are through the following:

- *interactive, cartoons, puppets, video clips, short movies, play's;*
- *run by teens and/or people who have experienced mental health issues who can be inspirational for young people (peer education), not by teachers/older people;*
- *small group, not assembly;*
- *should be mandated through the curriculum – study texts that focus on mental health and watch TV/films that show mental health in a realistic way; and*
- *real stories in magazine that young people actually read.*⁵

⁴ Department of Health and Ageing, COAG National Action Plan on Mental Health 2006-2011, May 2009, Australian Government.

⁵ Fremantle headspace, Y4Y: Youth 4 Youth, 2009

Including children's and young people's views from consultation and forums conducted, in Strategic Plans and associated policies, programs and services mean these are more relevant to them and effectively meet their needs.

Importance of regional and remote communities

I draw particular attention to the needs of Aboriginal young people, young people affected by either theirs, or someone else's mental health or alcohol and other drug use problems. On my visits to communities throughout regional and remote Western Australia, such as Kununurra, Warmun, Halls Creek and Fitzroy Crossing, I have heard from service providers and community members concerns about high suicide rates and high levels of post traumatic stress arising from circumstances including sexual abuse, violence and grief. High risk-taking behaviour, depression and alcohol and drug use were prominent in regional centres such as Port Hedland, Roebourne and Karratha.

Whenever the mental health needs of children and young people are discussed with me, whether in metropolitan, regional or remote communities of Western Australia, the lack of appropriate, coordinated and culturally relevant services to meet needs are raised as issues of concern.

It is my view that these pressing concerns must be addressed through the following:

- a continued focus on health and wellbeing, rather than illness or mental health problems, with an increase in health workers, particularly Aboriginal health workers;
- greater access to sports and recreation activities, (as young people across the State have raised with me the need for youth activities in the community); and
- importantly services should be appropriately supported to respond to the needs of these groups with relevant skills training, realistic staff/client ratios and attention to the safety and security issues of staff and clients.

Addressing disadvantage in the Aboriginal communities - children and young people are a priority

The Western Australian Aboriginal Child Health Survey (2005)⁶ raised significant concerns about the emotional and behavioural health of Aboriginal children and young people, highlighting the large gap between Aboriginal (24%) and non-Aboriginal (15%) children identified as at risk of emotional and behavioural problems. The COAG initiatives and the Overcoming Indigenous Disadvantage Report⁷ underline the importance of prioritising programs and services to 'close the gap' for Aboriginal children and young people.

⁶ Zubrick S et al. (2005) *The Western Australian Aboriginal Child Health Survey: The Social and Emotional Wellbeing of Aboriginal Children and Young People*, Curtin University of Technology and Telethon Institute for Child Health Research.

⁷ Steering Committee for the Review of Government Service Provision (2009) *Overcoming Indigenous Disadvantage: Key Indicators 2009*. Productivity Commission.

It is important that the inquiry reflect the significant learning from the Aboriginal Child Health Survey research, to improve programs and services delivered for better health and wellbeing outcomes for Aboriginal children and young people.

All social determinants indicate the disadvantages that young Aboriginal people face, both in the early and later years. It is important that the inquiry has a strong focus on the needs of this particular group, with the rate of suicide in some communities as much as 40% higher than that for the whole Australian population⁸,

Involving Aboriginal peoples

As has been clearly identified in the national strategy, suicide among the Aboriginal people is significantly higher than the general population and the particular difficulties facing the Kimberley region of Western Australia have been well documented, through inquiries such as the twenty two deaths in the Kimberley region conducted by the Coroner Alistair Hope (2008).⁹ In recent times there has been an increase in possible suicide in Perth and cluster suicide in the South West and surrounding communities, noticeably near the town of Narrogin.¹⁰

To be effective, prevention strategies must be informed by local Aboriginal people, such as:

- recognising cultural factors that are relevant to the particular needs of specific communities with a holistic and whole-of-community approach; and
- development of community initiatives initiated by the community and supported by all levels of governments. For example, the town of Narrogin in the South Western Australia and the Billard community near Beagle Bay in the north of Western Australia, invited relevant government agencies to sit down with them to find ways to stop young people committing suicide.
- strengthening partnerships initiatives similar to those identified in *beyondblue* Indigenous programs¹¹ in working together to build social and emotional wellbeing in Aboriginal communities.

Reforming the way services are funded and delivered

In my role as Commissioner, one of my primary goals is to encourage collaboration between various sectors on particular issues relevant to children and young people. I welcome the Commonwealth government doubling funding to enable the expansion of suicide prevention programs, particularly those target groups at high risk. However, I am concerned at the lack of coordination and delivery of services to meet their needs.

Addressing suicide prevention is a shared responsibility across a range of government service providers. Traditional government structures have consistently struggled to meet individual, family and community needs. Ministers and departments are

⁸ *LIFE Framework*, Professional Development - Indigenous, 2007. Australian Government

⁹ Hope, A. (2008) *Kimberley Finding*, Coroner's Court of WA, Perth.

¹⁰ Department of Health, *Western Australian Suicide Prevention Strategy 2009-2013*. Government of Western Australia

¹¹ *beyondblue: the national depression initiatives*, Indigenous programs for Aboriginal and Torres Strait Islander communities, 2009. www.beyondblue.org.au

established with definable boundaries, specific budgets for specific issues and judgements on their performance are made by assessing improvements in their particular areas of responsibility. It is not reasonable nor realistic for individuals, families and communities to compartmentalise their issues to fit government structures, therefore the only functional approach is for effective collaboration across government agencies to overcome departmental boundaries and allow for services to be delivered in a coordinated way.¹²

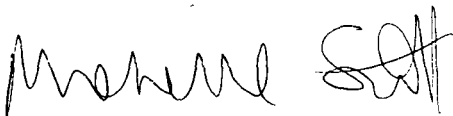
Furthermore, links between government and the community sector need to be strengthened. One means to achieve this may be through innovative joint funding arrangements to enhance collaboration. Boundaries that exist between traditional government functions also need to be removed to enable the delivery of services to be effectively coordinated. Children and young people and other socially excluded groups should be invited and encouraged to become involved in the decision-making processes that affect their lives.

Information and research

I support the need for ongoing research and the evaluation of projects, activities and programs aimed at prevention, as a guide to future planning. I also note that the ABS is currently in the process of making improvements to the classification and reporting of suicide across Australia¹³, which will give greater consistency to reporting by all governments.

I welcome the opportunity to comment on these issues and would be happy to further expand on these issues as required.

Yours sincerely



MICHELLE SCOTT

Commissioner for Children and Young People WA

20 November 2009

¹² The Commissioner's submission into Western Australian Inquiry into Collaborative Approaches in Government, 2008.

¹³ Australian Bureau of Statistic, 2005, Information Paper: External Causes of Death, Data Quality.

<http://www.abs.gov.au/ausstats/abs@.nsf/mf/3317.0.55.001>