

20 November 2009

Committee Secretary
Senate Community Affairs References Committee
PO Box 6100
Parliament House
CANBERRA ACT 2600

2009
Youth Focus
Winner Dr Mark Rooney Award
for Improved Outcomes in Child
& Adolescent Mental Health
Mental Health Good Outcomes
Awards 2009

Dear Sir/Madam

SUBMISSION RE INQUIRY INTO SUICIDE IN AUSTRALIA

2009
Youth Focus CEO
Business Person of the Year
Local Chambers BarterCard
Commerce & Industry Awards

Youth Focus is a not for profit West Australian community organisation which provides early intervention and prevention services to young people aged 12-18 years who present with issues of depression, self-harm and suicidal ideation. The interventions offered include free one-to-one counselling to the young people and their families both on outreach and at the Burswood offices. The professional staff manage levels of risk as they arise and negotiate with other appropriate services to provide the best possible outcome for the young person.

2009
Youth Focus Mental Health
Delivery Service Models
Winner Silver Award
Australian & NZ Mental Health
Services Achievement Award

We offer the following comments on the impact of suicide from our experience of providing services and support to young people and their families with particular reference to

2009
Ride for Youth
National Winner
Special Events
FIA National Awards

a. personal, social & financial costs of suicide:

We personally know of parents who are dealing with the loss of a son of 14 years of age; a son of 18 years old and another son of 26 years of age. The pain is crippling to these families and although years pass, the pain does not nor does the seeking of reasons why this catastrophe has occurred.

2008
Ride For Youth
Winner Special Events
WA Chapter
FIA National Awards

The personal impact on families and communities of a completed suicide flows onto all professionals and organisations involved in the case. There is an inter-generational impact on families at large and a traumatisation for professionals and friends.

2008
Youth Focus CEO
Ernst & Young
Social Entrepreneur
of the Year (WA)

b. accuracy of suicide reporting and statistics:

We suggest the mental health issues and suicide need to be discussed more openly within the community to remove the social stigma and to raise awareness that help is available. Statistics on suicide would be more accurately reported if information from various departments such as the Coroner's Department is also captured. Such information can also assist counsellors and health professionals working directly with at risk people to anticipate copy-cat activities or other such trends.

2008
Youth Focus CEO
Finalist
Australian
Fundraiser of the Year

The community buries its head in the sand with this issue with the result that the stigma associated with such an event remains buried. The implication of this for the family and the immediate community is not only grief but shame and guilt. It also limits the capacity for people to access supportive services prior and after the event.

- c. role and effectiveness of agencies, such as police, emergency departments, law enforcement and general health services in assisting people at risk:

Youth Focus is highly effective in reducing risks presented by young people of suicide and works diligently with them to minimise self-harm and depression. The utilisation of Beck's Depression Inventory and Beck's Anxiety Inventory supports assessment and intervention and further provides outcome measures to update the progress of the young person. Youth Focus also receives feedback directly from clients through questionnaire forms. Youth Focus boasts many successes of assisting young people to deal with the difficult issues they face.

Often young people, who have been through our service, are willing to speak to the community and share their success and the support they received from Youth Focus

An example of one of our success cases is as follow:

A 17year old female client diagnosed with Borderline Personality Disorder, was admitted into hospital 3 times before being referred to Youth Focus for suicidal ideation and self-harming. At this time, she has been attending counselling for 6 months. The general approach utilised Dialectic Behaviour Training as modified for use with suicidal adolescents. She had another hospitalisation shortly after she began with Youth Focus. However, she has not been hospitalised since. She attends all her session or cancels if she cannot make it. She completed all her homework assignment as well. The client is no longer self-harming and her suicidal ideation has reduced dramatically. Her symptoms of depression and anxiety have also reduced.

Youth Focus communicates regularly with emergency departments and general health services. Generally these services are supportive and provide their service in a reasonable time frame. However general health services appeared to be under-resourced and have long waitlists which further impacts on young people's capacity to remain engaged in supportive services.

We have received feedback from our young people that hospital staff demonstrate a punitive attitude toward self-harming or suicidal young people. This is of concern as it may reduce the likelihood of young people seeking help for self-harm and suicidal ideation.

Youth Focus works in close collaboration and maintains a professional relationship with these agencies in order to remain engaged with these organisations.

It has been the experience of Youth Focus that the police department responds to emergencies but not always with the delicacy that the situation may demand. Young people report alienation and a lack of respect by police officers.

- d. the effectiveness to date of public awareness programs and their relative success in providing information, encouraging help-seeking and enhancing public discussion of suicide.

As previously stated Youth Focus regularly and consistently networks with other relevant community departments and agencies for the best outcome of its clients. This focus is to enable direct and reasonable service for the young person and their families at risk. Schools are also regularly presented with information on mental health. One such program is the 'Attention to Prevention' program offered to students. This program was presented to the YouthCare Chaplains conference in July to encourage chaplains to utilise the strategies with young people in their care. Youth Focus regularly offers mental health training to undergraduate teachers at Murdoch University.

- e. efficacy of suicide prevention training and support for health and community workers providing services to people at risk

Advanced Gatekeeper training is a requirement of all staff who provide services at Youth Focus. The experience of Youth Focus staff is that this training is essential in offering evidence based risk assessment and encourages the use of effective strategies for all providers in the area of suicide prevention. There is a query regarding the emphasis on risk assessment being a legal emphasis rather than a client-focussed one.

- f. role of targeted programs and services that address the particular circumstances of high risk groups

Apart from the individual counselling, Youth Focus also offers Peer Support Program which is specifically designed for young isolated people at risk who suffer from low self-esteem with limited social skills to attend therapeutic camps and be involved in the mentoring program. Both of these extra services offer young people greater opportunity to engage positively with other young people by being part of community activities. The Youth Focus Peer Support Program has undergone an action research through the University of Western Australia and is currently affiliated with the My Peer assessment project at Curtin University. It is touted as being the most effective therapeutic structured camp for young people in the State. There is however the perennial funding issue for the continued capacity to provide these services.

- g. adequacy of the current program of research into suicide and suicide prevention and the manner in which findings are disseminated to practitioners and incorporated into government policy;

Research into youth suicide is minimal at best with little if any dissemination of information to appropriate agencies who deal with youth at risk.

- h. the effectiveness of the National Suicide Prevention Suicide in achieving its aim and objectives and any barriers to its progress


I was on the recent committee for Suicide Prevention Australia Forum held in Perth and am presently nominated for a Board role.

Youth Focus staff attended the launch of National Suicide Prevention Strategy (NSPS) and are part of the Suicide Prevention strategy North Metro consultation. We have the following concerns:

1. How forward thinking is NSPS regarding prevention of depression and where is it implemented?
2. How are the community being engaged?
3. What emphasis is being placed on the World Health Organisation prediction of depression becoming the second leading cause of death?

A Memorandum of Understanding with Inspire Foundation and Lifeline WA provides a collaborative approach to address the prevention of youth suicide and depression. Youth Focus continues to work with various consortiums on State Suicide Prevention Strategy.

Yours faithfully



Jenny Allen
Chief Executive Officer