

Mr. Andrew S. Humphreys

B.Soc.Sci. B.S.W. Dip.Ed.

Counsellor

A.A.S.W.

Committee Secretary
Senate Community Affairs References Committee
Parliament House
Canberra ACT 2600

A Submission to the Senate Community Affairs References Committee
Inquiry into Suicide in Australia

I thank the Senate for the opportunity to provide a submission concerning the effectiveness of suicide prevention services in Australia. In Australia death by suicide and years of life lost because of suicide are predominantly male.

I attach an extract from the Commonwealth Hansard, 2 October 1997 containing a speech by the late Greg Wilton MHR which accurately summarises my major concerns about the issues which I feel the Committee should consider. This speech was made prior to the completion of the National Action Plan for Suicide Prevention to which I submitted a paper. I also attended the community consultative meeting in Melbourne on 25 February 1999.

The issues Greg Wilton raised in his speech have largely not been addressed. Men need access to timely public health counselling and support services. Training for health workers must have some component about engaging and supporting men.

I should be pleased to provide the Committee with examples of the engagement techniques and counselling strategies I have used over many years with men and boys at risk of suicide.

Yours faithfully

Andrew S Humphreys

Attach

COMMONWEALTH OF AUSTRALIA
PARLIAMENTARY DEBATES

HOUSE OF REPRESENTATIVES

Official Hansard

THURSDAY, 2 OCTOBER 1997

THIRTY-EIGHTH PARLIAMENT
FIRST SESSION—FIFTH PERIOD
BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES
CANBERRA

Mr WILTON (Isaacs) (12.05 p.m.)—I rise to paint a similar picture to that that the member for Mallee (Mr Forrest) so lucidly and compassionately portrayed to the House. He shares the view I have that basically, whilst many solutions may be put forward to address the issue of suicide per se—both youth suicide and suicide by older persons—people have a strong desire to feel needed, to feel that they are loved, and to feel that they have some worth and role in life. If that can be addressed by greater one-to-one counselling, of the kind that occurs in sections of my electorate of Isaacs, primarily through the work of people like Andrew Humphreys, then I am sure that we will, as the member for Franklin (Mr Quick) has said, in adopting a national approach be able to gradually address this most tragic issue that blights our modern society. In fact, not only does it blight our society but in many ways it is perhaps one of the most difficult to tackle.

The member for Mallee submitted to the chamber an analysis of statistics that deals with the topic that is both alarming and confronting. From a local perspective, the figures are indeed quite shocking. They are particularly concerning in the south-eastern coastal regions of Melbourne. Let me relate to the Committee figures for the Mornington Peninsula. The rate of suicide is more than twice the state yearly average amongst men. There are some 24.9 per 100,000 male suicides in this region each year, while the average for the rest of Victoria is some 11.2 deaths per 100,000. The picture in the Frankston area is equally as bleak. The number of men taking their own lives annually is 16.6 per 100,000—again, a figure that is well above the state average for the rest of Victoria.

In Cranbourne, where my electoral office is located, as at the end of July this year, nine young people under the age of 25 had committed suicide. This figure is triple the number of

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deaths that occurred in Cranbourne in the previous three years. The city of Kingston is a municipality that covers much of the federal electorates of Hotham and Isaacs. Suicide claimed the lives of 67 young people in the city of Kingston in 1995, which is up from 45 in the previous year, 1994.

While the picture on a local perspective is quite bleak, the story is similar at an international level. When recently reading the Victorian task force report on suicide prevention, I was most unsettled to learn that it is estimated that in recent years nearly one million people on this planet take their own lives each year. Suicide has consistently remained one of the top 10 causes of death in developed countries in recent history.

While I applaud every aspect of the findings of this most worthy report, I disagree to some extent with the focus on the issue of youth suicide. The biggest group of people committing

suicide in society is men aged 25 to 60. Without in any way demeaning the problem of youth suicide, it is clear that, from any objective analysis of the data, the risk to young men does not really commence until they reach the age of 19. I have referred to Mr Andrew Humphreys. Andrew is a youth crisis counsellor at the Chelsea Community and Information Support Centre and has been at the forefront locally of tackling the prickly issue of the high male suicide rate. Andrew points out that, while seven per cent of suicides are teenagers—and this is not an insignificant component—the biggest proportion of deaths does, however, fall in the category of men aged 25 to 60.

An interesting point that Mr Humphreys makes is that the suicide rate for boys when they leave school accelerates, because that is the last time that they enjoy any form of day-to-day social interaction and day-to-day social support from friends or peer groups on a regular basis. From the extensive research that has taken place over the last five years, as this problem has been brought out into the open, it becomes apparent that, again as succinctly submitted by the member for Mallee, men kill themselves due to an inability to cope with life events such as relationship break-ups of the kind that both he and myself have suffered, and unemployment.

On the topic of marriage or relationship break-ups, Mr Pierre Baume, head of the Australian Institute for Suicide Research and Prevention, is on the public record as saying that in a study of some 4,000 male suicides over 70 per cent were caused by relationship break-ups and men's subsequent inability to come to terms with the situation. Again as submitted by the member for Mallee, that is a time when men most feel alone, most feel unloved, and most feel that they have got no place in this world.

Clearly, another major cause of suicide is unemployment. An Australian Institute of Criminology research paper into the causes of suicide has shown that a correlation exists between suicide rates and periods of economic turmoil. For instance, during the Great Depression Australia had extremely high male suicide rates. Another example of the effect of economic insecurity affecting the incidence of suicide was the 1987 stock market crash. In the six months after this event, suicide rates were up by 15 per cent.

Other factors include separation from children, childhood trauma and learning disabilities. But as a rule, it is men who cannot talk about their problems, and there are too few services available to them—especially, as the members for Franklin and Mallee have outlined, in Australia's rural and regional areas. Men are often turned away by the all too few support agencies that are there to help, because those services are burdened with other cases.

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The discrepancy between male and female suicide rates has increased during the last 30 years and, as those two members have previously indicated, this difference is greatest in rural areas. The overall ratio between males and female suicides is four to one, and the youth ratio is five to one. Men in particular have nowhere to go. Access to counselling services which have a specific focus on combating the propensity for male suicide is sadly lacking, and this needs to be addressed.

The way social supports have been dramatically improved over the last 20 years for battered women provides a good blueprint for what needs to be done. We must tailor our community support services to tackle specific problems, rather than trying a sweeping, broad brush, generalised approach, which will inevitably mean that many seeking help will feel alienated. Some quite urgent changes do need to be made if we are to cut the number of self-induced deaths in our society, especially amongst the most vulnerable in our society, those being males. We must extend counselling services within our community to target groups that are not being serviced, and I suggest that that is primarily men in the 25 to 60 age bracket. As an extension of this, it is important that we up-skill social workers in appropriate assessment and counselling techniques, which have been so sadly lacking in the past.

There must be greater education for both doctors and health service providers within the

community about the risk factors which can lead to suicide amongst older men. As the member for Mallee has said, this does not mean that we embark on huge psychoanalytical research papers as to why these things happen. That is not needed. Doctors need to be trained in skilling themselves as to why these events occur, based on people's lack of self-worth at the times at which they are most likely to take their own lives.

Among the lesser known statistics about suicide in Australia are the high levels committed amongst older men between the ages of 65 and 69. In 1995, there were 15.2 deaths per 100,000 people for men and 3.27 deaths per 100,000 people for women. It is important that, as an institution, parliament should take a closer look at the hidden categories of suicide in Australia. The fact is that until we, as a society, are open and informed about suicide in the most vulnerable of categories—again amongst older males—the pattern of death will no doubt continue unabated.

A positive aspect to the debate about youth suicide is that we are probably much more capable of tackling this tragedy on a national basis, as the member for Franklin has quite rightly submitted, now that the problem is out in the open and that people are rightfully aware of it. It is to be hoped that in this country such an enlightened approach can now be extended to other forms of suicide which are perhaps less readily acknowledged.

While it is perhaps a little too early for extensive statistical evidence to be processed, the anecdotal evidence that I have received from people in my electorate is that the increasing focus on gambling in Melbourne has led to financial problems in many families. Sometimes the tragic consequences of these strains has resulted in suicide. Figures released by the coroner's office reveal that the number of gambling related suicides has steadily increased since 1992. It is of concern to me that, while over \$1 billion is flowing into the state government coffers in Victoria from gambling revenue each year, only about \$40 million has been spent on problems with gambling services over the last five years. If we are to tackle the incidence of suicide in society, the issue of problem gambling must be addressed.

I applaud and welcome with open arms the fine efforts of the House of Representatives Standing Committee on Family and Community Affairs and its summary report on aspects

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of youth suicide. I am hopeful that the positive work done by the committee in formalising this report will act as a catalyst for more research into the various other aspects of suicide which, to date, have not been given the amount of attention that I would suggest they so rightfully deserve.

While some factors which lead to suicide are quite hard to quantify, there is certainly a need for our community to work towards an environment in which people feel a sense of belonging and meaning, as the member for Mallee has hit upon so accurately. If we can achieve such a state, then the incidence of all suicides—young or old, male or female—will no doubt be reduced. Unfortunately, it is very hard to create a sense of belonging for people that transcends individual needs and material things in a society which is increasingly obsessed with individual self-advancement and the attainment of material goods.

I just conclude by stating that, if we can tackle some of the fundamental problems in society, such as the quality of education, unemployment and job security, then there will no doubt be a flow-on to reduced family breakdowns and, by extrapolation, fewer suicides. Unless we as a society can tackle the fundamental problems and causes of angst in a way that the member for Mallee has suggested, then all the programs in this world and all the heartfelt words of compassion from politicians like the member for Franklin and the member for Mallee will indeed not change a thing.