NATIONAL SUICIDE PREVENTION STRATEGY PROJECT 2006-2009

Building bridges to implement successful life promotion and suicide prevention expertise across Aboriginal communities

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How did we get started?

- Auspiced by Centre for Rural & Remote Mental Health Queensland (CRRMHQ)
- Funded by NSPS $1.5 Million over 3 yrs Joint Application
  - Gurriny Yealamucka (Yarrabah) Health Service
  - Apunipima Cape York Health Council
  - Goondir Health Services
Other participants

- Wuchopperen Health Service
- Royal Flying Doctors Service
- University of Queensland
- James Cook University
- Aust Institute for Suicide Research & Prevention (AISRAP) Griffith University
- Centre for Rural & Remote Area Health – USQ
- Queensland Health
Purpose

• To establish sustainable community-based approaches to building resilience
• Reduce the risk exposure
• Reduce self-harming behaviours in Indigenous communities
Aim

• Gain better understanding of Yarrabah’s response to a suicide crisis
• Provide opportunity for Yarrabah to tell their story to other communities & groups
Objectives

1. Support leadership & collaboration
2. Develop life promotion skills
3. Better understand suicide & self-harm
4. Foster participation & communication
5. Empower communities
Objective 1: Support leadership & collaboration

Knowledge Sharing Teams – Yarrabah (Yaba Bimbie), Hopevale and Kowanyama men’s groups visited communities

• Planning processes across communities
• Communities working closely with service providers
Objective 2: Develop life promotion skills

Family Wellbeing Program

• Men’s Groups
Objective 3: Better understand suicide & self-harm

- Engage and consult with communities
- Establish focus groups and recruit community people
- Visit four communities approx every 2 months for a week
- Community Feedback Workshops presenting results from focus groups
Objective 4: Foster participation & communication

Implement touch screen kiosks

- Produce "suicide prevention" module
- Develop new media capacity building initiatives in intervention sites
Objective 5: Empower communities

• Engage and consult with the communities
• Implement ‘Stats & Stories’ process to communicate changes over time
• Ongoing feedback to community
Evaluation

- Aust Institute for Suicide Research & Prevention
- Develop baseline data with project teams
- Document external evaluation methodology
SUICIDOLOGIST
- Visits to all communities conducting focus groups with Indigenous people locally

AISRAP
- External evaluator

CRRMHQ

DEPARTMENT OF HEALTH & AGEING

UNIVERSITY OF SOUTHERN QUEENSLAND

UNIVERSITY OF QUEENSLAND

Hit-net

JAMES COOK UNIVERSITY

GRIFFITH UNIVERSITY

DALBY COMMUNITY

YARRABAH COMMUNITY

HOPEVALE COMMUNITY

KOWANYAMA COMMUNITY

PROJECT COORDINATOR

PROJECT COORDINATOR

PROJECT OFFICER

PROJECT OFFICER

PROJECT OFFICER

FAMILY WELLBEING PROGRAM (FWB)
- Delivered across 4 communities

Touch Screens Installed in communities

Hit-net

• Visits to all communities conducting focus groups with Indigenous people locally
Activities & Programs

- Family Wellbeing (FWB) Program
- Knowledge Sharing Teams – Yaba Bimbie Men’s Group
- Health Interactive Touch screen – Hit-net
Family Wellbeing Program

1. Facilitator training
   - capacity building
   - sustainability

2. Delivery of Program to the 4 communities
DISTRIBUTION OF THE FAMILY WELLBEING PROGRAM
“To restore men’s rightful role in the community”

Leadership, parenting, employment, education, training, tradition, culture and men’s shelter

- Establish focus groups
- Document and record
- Community Feedback Workshops
Health Interactive Technology
Hit-net

• Touch screens in all four communities
• Suicide Prevention Module
• Other modules: diabetes, sexual health, drugs and alcohol
Family Well Being Empowerment Program

Family Wellbeing Facilitators

National Suicide Prevention Strategy Project 2006-2009

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Knowledge Sharing 2008

Yaba Bimbie Men’s Group

Family Wellbeing Facilitators in training