PREVENTION OF YOUTH SUICIDE IN NEW SOUTH WALES

Organisation: Weave Youth and Community Services
Name: Mrs Kylie Fitzmaurice
Position: Team Leader Speak Out Dual Diagnosis Program
Date Received: 31 August 2017
31st August, 2017

To Whom It May Concern,
Parliament of NSW,
Committee on Children and Young People

RE: INQUIRY INTO THE PREVENTION OF YOUTH SUICIDE

My name is Kylie Fitzmaurice and I work for Weave Youth and Community Services as Team Leader on the Speak Out Dual Diagnosis Program. The Speak Out Dual Diagnosis Program works with young people aged between 12 and 28 years who are experiencing co-existing mental health and drug and alcohol issues.

Weave Youth and Community Services is a community based organisation offering a broad range of support including individual counselling, casework, group work and a range of educational, arts and information and referral programs to assist children, young people, women and families in the Sydney region. 70% of our service users overall are Aboriginal.

I would like to make a submission into the Parliament of NSW’s Inquiry into the Prevention of Youth Suicide.

Over the past 6 months, two core teams from Weave worked on developing a Social Issues Strategy in response to the suicide and ice challenges our communities are facing. We engaged an external facilitator – Carly Westwood from Fresh Thinking - who worked with these key staff on the project briefs utilising a technique called Human Centred Design. Human Centred Design is a human-centred approach to innovation (or creative problem solving) that draws from the designers’ toolkit to integrate the needs of people, the possibilities of technology, and the requirements for business success (Tim Brown, CEO and President of IDEO).

Human Centred Design puts the person or community at the heart of the work.

The process over the 6 months involved us looking to the community, our clients, stakeholders, experts in the ice and suicide fields, research, data etc. for clues on existing gaps and challenges within the suicide and ice spaces. From these hundreds of insights, we identified the opportunity areas existing for the work and we brainstormed, developed and tested and learned with the target groups our prototypes for the new work. We then presented our final recommendations to our CEO and Operations Manager. We are currently developing and implementing the recommendations we have made.

It is of paramount importance for you to understand that this work was conducted in full consultation with our clients (young people) and community. This body of work reflects the needs of our community as identified by the communities within which we work. Therefore this work is collaborative, well researched and evidence based.

The question we asked ourselves regarding our work on suicide was:
“How do we support and nurture children, young people and others in the community so that suicide is not seen as an option?”

“Love me while I’m here, don’t celebrate me when I am gone.”

Please find enclosed a brief version of the work we have done. I have included two examples of the opportunity areas and subsequent recommendations that were made for your perusal:

**Example 1:**
Opportunity area: Teach me/Show me
Recommendation: PRIDE

**Example 2:**
Opportunity area: What do I do now?
Recommendation: Weave Healing Plan

We hope you find this submission valuable and we hope this helps to guide you in the work needed in the youth suicide space moving forward. Please do not hesitate to contact me if you would like to learn more about this project or if you would like to help us to fund or support the implementation of our recommendations. We are extremely proud of this work and we look forward to supporting our community to reduce rates of youth suicide.

Kind regards,

Kylie Fitzmaurice
Team Leader
Speak Out Dual Diagnosis Program
2017 Social Issues Strategy
– Suicide

Prepared by Mardi Diles, Kylie Fitzmaurice, Freya Conomos, Soraya Touma (June 2017)
Agenda/ Contents

1. Our focus/ task 3
2. Our approach 4
3. What we learnt 6
4. Our recommendations 11
5. Some final reflections 36
6. Appendix: 37
   – Opportunity areas
   – Further detail on some concepts
Our task

How do we support & nurture children, young people & others in the community so that suicide is not seen as an option?

“Love me while I’m here, don’t celebrate me when I’m gone”

• We identified that we needed to consider a range of solutions/options including:
  – Timeframes: Short/medium/long term focus
  – Audiences: Children/young people, families, friends, community, WEAVE staff & reach out to those we don’t currently touch
  – Needs: Prevention, early intervention, harm minimisation, postvention
  – Capability: What was within WEAVE’s capability/expertise vs other services
Our human centred design approach

Human Centered Design (or Design Thinking) is a human-centered approach to innovation (or creative problem solving) that draws from the designer's toolkit to integrate the needs of people, the possibilities of technology, and the requirements for business success.”
— Tim Brown, president and CEO of IDEO.
**June > 6. Implementation**
*Recommendations for endorsement & implementation*

**May > 5. Testing**
*Iteratively testing, learning and refining ideas with customers to make them desirable*
*Total 10 ideas tested and built with 35 people (staff, parents, respected persons/elders, young people across sites)*

**May > 4. Prototyping**
*Physically bringing your ideas to life for testing, learning and further refinement/ideation*
*Total 11 ideas developed & proto-typed ready for testing (across ICE & Suicide)*

**May > 3. Ideation**
*Develop a wide and diverse range of ideas/solutions by drawing on customer insights and provocative stimulus*
*Total 80 ideas generated (Short term, medium term, long term/big ideas, and ideas to be referred to other services)*

**March - April > 2. Immersion & Insights**
*Intimately understand and empathise with the people you are designing for*
*Generated 188 clues (data points), 150+ hypotheses (insights) 11 Opportunity areas identified*

**2016 - Feb 17 > 1. Definition/ Scoping**
*Make sure you are solving the right problem and make it compelling to solve*
*Leadership team initially developed Then core project team of 4 set up*
WHAT WE LEARNT...
The Facts on suicide

Australian context
- Suicide is the leading cause of death in Australians aged between 15 - 44
- Death by suicide has reached a 10 year peak
- The most recent ABS data (2012) reported death by suicide as 2535 in 2012 - with 75% (1901) of these being men and 25% (634) being women
- This equates to almost 7 deaths by suicide in Australia each day
- Men account for 3 out of every 5 deaths
- The 2012 ABS data shows that almost twice as many people died from suicide in Australia than in road related transport deaths
- For every successful suicide, there are 30 unsuccessful attempts, with 1 new attempt every minute in Australia

WEAVE Context
70% of WEAVE clients are Aboriginal and:
- Aboriginal men commit suicide at 2.5 x rate of other Australian men
- Aboriginal women commit suicide at 3.4 x the rate of other Australian women

In the past 12 months:
- We have had 5 suicides from people directly connected to our service
- 4 were men, 1 female all early 20s, at least 2 were Aboriginal
  (2 of these were since the beginning of this year including 1 during this project)
- In addition - We’ve had staff members directly impacted by 4 suicides in their personal lives in the past year
- They’re getting younger - we have had an 11 yr old attempt and a 13yr old complete suicide

Our community has experienced significant intergenerational trauma making it more vulnerable/ at risk than other communities in Sydney

Our community is very tight, connected and resilient - this is a benefit at times, but when a trauma occurs such as a suicide - the ripple effect in our community is devastating because of the high interconnectedness
What we heard

“They’re fleeting but frequent thoughts that attack you even when you feel completely fine. Sorta like an annoying fly buzzing around you constantly” - “What it’s like to have suicidal thoughts article”

“Everyone needs to recognise how difficult it is for young people to make a call to ask for help to crisis lines. This is often the last resort and difficult getting through to a person for these services like Lifeline can escalate a young person’s distress” – Weave youth advocates

“I have intrusive thoughts about suicide, even when my moods are relatively stable. I sometimes have images and thoughts popping up. These thoughts feel obsessive some days. I am grateful I don’t actually feel like doing any such things that would end my life” - “What it’s like to have suicidal thoughts article”

“My best friend suicided after her baby was removed from her care” - Weave client, 25yrs female

“This world isn’t for me” – Zach, died by suicide March 2017

“I took whatever pills I had in my room. I just couldn’t do it anymore” - 23yo Female client after suicide attempt

“I need to raise my son so he doesn’t think this is how/what the men in our family do when things get hard and they can’t cope” - Aboriginal woman early 20s whose brother & cousin suicided

“I tried to kill myself this week and I’ve been hospitalised here in the card ward for 4 days because there are no beds in the psych ward. I’ve been under surveillance the whole time and they’re going to let me go home this afternoon. The psychiatrist didn’t even come to see me until today” - Weave client, 23yo female who had attempted suicide

“You’re only noticed if you’re pretty or dead” - Social media post

FRESH THINKING

WEAVE YOUTH & COMMUNITY SERVICES
What we heard

“It’s less about killing myself and more about ceasing to exist. I want the people around me to not be bothered by my incompetence, insecurities and the trouble I cause them. Sometimes it’s just a call for momentary relief”

“Some of my worst points was the ‘other me’ in my head shouting at me, feeling like it was attacking my brain physically… Another version of this would be like is trying to slyly coax me into doing this things, like the snake in the jungle book”

“It’s like being behind a one way mirror. You can see the world around you going about their daily lives, but you aren’t present in it. You’re merely a spectator. An no one even notices you because all they see in their reflection. All they see (care about) is themselves and the world around them. They never see you, and you feel they don’t care about you. And then your mind begins to wonder. Is my existence significant? I’m already living like I don’t exist, so why should I continue living? Its one of the most frustrating feelings because you want to be on the other side of the mirror. You want people to notice and to care. Its this dull aching in your heart that never goes away and you just want it to stop” - What it’s like to have suicidal thoughts article”

“One of my favourite quotes about this: ‘Depression is inability to construct a future’. That’s completely true. Even if you aren’t actively looking to end your life, you can’t imagine going on. Every day you feel like it’s too much and that you don’t belong, hoping that some outside force might just end it for you” - “What its like to have suicidal thoughts article”

“They’re fleeting but frequent thoughts that attack you even when you’re completely fine. Sorta like an annoying fly buzzing around you constantly” - What its like to have suicidal thoughts article”

FRESH THINKING

WEAVE YOUTH & COMMUNITY SERVICES
11 Opportunity areas identified

1. **Teach me show me** - How can WEAVE educate young people and equip them with the skills, tools and techniques to better cope with all lifes challenges in a way that is relevant to them and their learning styles?

2. **Back to my roots** - How could WEAVE facilitate young people connecting to their culture as a way of healing trauma and/or building identity and belonging/connection?

3. **This is me** - How could WEAVE support people to connect with themselves, to gain a sense of identity, belief and purpose and re-define their own version of themselves (not live up to someone else’s expectations)?

4. **Reasons to live** - How could WEAVE help people find/see alternative ways to solve problems and heal trauma and feel good about life again?

5. **Courage is king** - How can we help people see that admitting you need help and/or asking for help are signs of courage, bravery and strength – it’s only a failure not to ask?

6. **Love me while I’m here** - How can we help people feel loved and cared for – so they know they are not alone, they matter and they are not a burden while they are still alive?

7. **The parts of me** - How can WEAVE work with ‘all parts’ of a clients life and be better able to spot when someone is ‘managing’ the various parts of their life and may need help?

8. **Be the parent** - How can we help parents in our community to better cope with their own issues, inspire them be a positive role model for their kids and talk to and support their kids through tough times?

9. **Let’s start a conversation** - How can we create a movement in our community that counteracts the issue? How can we help people to see the benefits of and be willing to at least start a conversation about how they’re feeling?

10. **Staying connected beyond the grave** - How can help people to maintain positive connections with people they have lost without needing to follow their path?

11. **What do I do now?** - How can WEAVE work with families and friends to process and deal with their own reactions and emotions to the suicide and know how to face the reality of what has occurred so it can be a lesson for others?
OUR RECOMMENDATIONS

Steffan Jurd shared It's okay, not to be okay.'s photo.

Hold on

It's okay, not to be okay. May 2 at 5:45pm

This image has really got me this morning 😞❤️
A man wanting to jump off a bridge in London, talked round by absolute strangers who proceeded to hold him for an hour until help arrived to get him down safely. Look at that grip. Look at the care, compassion, selflessness & determination shown by complete strangers to a fellow human being.
Many young people in our community have not grown up with positive role models or learnt key life skills at home or at school. Many lack the coping skills and resilience to get through tough times (or to know that tough times are a normal part of life that affect everyone), and many lack an understanding of the importance of good mental/ emotional wellness, the mind body connection and importance of good physical health to support good mental health.

How can WEAVE educate young people and equip them with the skills, tools and techniques to better cope with all life's challenges in a way that is relevant to them and their learning styles?

Opportunity questions:

- How could we reach out to young people via schools, football teams, public and private opportunities to better educate young people about strategies for good mental and physical wellness/ the importance of forming healthy habits?
- How can we reach out to people who aren’t our current clients?
- How can we educate/ work in a way that suits their preferred learning styles?
- How could we share lived experience/ stories/ information to educate young people and try to prevent people from seeing suicide as an option?
- How could we educate young people to know when and how to ask for help?
- How could we educate young people to know when and how to support people around them who might be struggling (and what to look out for)?
- How can we equip young people with a language to talk about issues?
PRIDE

- Pride is a 9-10 week (1 term) social emotional development program run by WEAVE staff/youth advocates in schools. Pride is designed to educate and equip young people with the tools to navigate life circumstances, help people make good life choices and build pride in self, others and community.

- The name ‘pride’ is also based on the concept of a “pride” of lions - Lions are the only cats that live in groups, that are called prides. Prides are family units and we want to create a ‘group connection/sense of belonging’ within each pride class group.

- Kids will participate in 1 x Pride class per week (approx 1hr) – with a new topic being covered each week.

- Students will be separated by year group (Yr 6, 7+8, 9+10, 11+12) so content, exercises and discussions remain relevant and age appropriate at all times.

- Each class will start off by connecting the topic to what’s currently happening in students lives/school community to make relevant for people. Classes will use a variety of techniques to make as engaging and interactive as possible including:
  - storytelling/lived experience/guest speakers
  - thought provoking discussions and activities for everyone to apply what they’ve heard/learnt back to their life
  - Visuals, demos, role plays
  - A hard copy pride workbook full of their own self reflections plus practical tips everyone can take away and use beyond the workshop.

Based on ‘pride class’ at Urban Charter Prep, Chicago:
https://www.youtube.com/watch?v=6BACoWFfRzE
Possible PRIDE topics

- Topics could include:
  - Intro. to PRIDE; what’s it all about?
  - Acting with PRIDE (Participant code of conduct, incl. social media, physical spaces)
  - How to survive a wipeout – resilience and coping skills, stress management
  - Mad PRIDE (what makes me angry and how can I acknowledge and manage those feelings in a safe way – anger, aggression, violence)
  - Dare to dream – setting and working towards goals, staying on track
  - Cultural PRIDE and how to deal with racism
  - Fit mind, fit body
  - Dealing with loss and heartbreak
  - Sexual health
  - Taking PRIDE in myself (emotional regulation and self care)
  - Being proud of myself (self-esteem, identity, positive self-image, identifying and playing to my strengths)
  - PRIDE in others (helping my friends and family through the hard times – empathy vs sympathy, compassion etc)
  - Alcohol and other drugs
  - Staying strong (rejection, loneliness and failure)
  - Peer pressure and bullying
  - Trauma (incl. various types of trauma DV etc)
  - Decision making - evaluating options and consequences
Feedback on PRIDE from testing:

- “These are practical skills we are trying to teach young people now – it would be amazing for them to learn it when younger” – Weave counsellor

- “What I’ve learnt about mental health has all been from myself” – Young person, Woolloomooloo

- “I would’ve been better off if I had this at school” – Young person, Woolloomooloo

- “I wish my Aboriginal friends at school had this” – Young person, Woolloomooloo

- “Many young people in this area don’t have good adults in their life to show them how to be. This is so good to show them how to be different and to get them in groups to seed things differently” – Respected Aboriginal person, Waterloo
11. WHAT DO I DO NOW?

Families and friends are devastated following the suicide of a loved one – whether they saw it coming or not, they are not prepared for it and don’t know how to deal with the emotions they are confronted with (anger, embarrassment, shame, hurt, grief, sadness, guilt, failure etc).

There is a desire to remember the person in a positive way and therefore a tendency to want to ignore the choice of suicide or anything negative now that they have passed.

Others feel a strong desire to ensure that this does not happen to others.

**How can WEAVE work with families and friends to process and deal with their own reactions and emotions to the suicide and know how to face the reality of what has occurred so it can be a lesson for others?**

**Opportunity questions:**

- How can we help people to process what has happened, move forward and heal? (In the period immediately following the death and beyond?)

- How can we help people deal with survivors guilt?

- How can we help people speak honestly about what has happened but in a way that still respects the person/their life?

- How can we work with families to use someone’s suicide experience to break the cycle, send a message and stop others from following this path?

- How can we work with families and friends who have lost to heal others in the community?
WEAVE Healing Plan

WEAVE Invites you to an evening to share your grief around the loss of a beloved.

Speaking about feelings or sitting with others who have experienced what you have can be a pathway to healing.

Silence can kill connection if you feel it’s time to break your silence please come to our circle.

ALL WELCOME
rsvp to: name@weave.org.au
WEAVE Healing Plan

• The WEAVE HEALING PLAN is a post suicide action plan that Weave will prepare and put in place for family and friends post a suicide in our community. The plan may include:

<table>
<thead>
<tr>
<th>Immediate (first 2 weeks post)</th>
<th>Up to 3-6 months post</th>
<th>Up to 6 – 12 months post</th>
</tr>
</thead>
<tbody>
<tr>
<td>• <strong>Personal response support</strong> for affected young people and family (either 1:1 or a get together event to support grieving) and may include a yarning circle if appropriate</td>
<td>• <strong>1:1 Healing and counseling</strong> sessions with qualified grief counselors for family, siblings, close friends</td>
<td>• <strong>Come together/healing camps</strong> – to promote connection and ongoing support and grieving</td>
</tr>
<tr>
<td>• <strong>A staff response/support for WEAVE</strong> staff grieving</td>
<td>• <strong>Yarning circle of fire for family and friends</strong> – creating a space and ritual for family, friends and the wider community to talk and heal facilitated by experts such as Joe Williams. Weave staff/grief counsellor to be present in case of triggers.</td>
<td>• <strong>Art exhibitions</strong> Exhibit the art created from the expressions workshops to engage and bring awareness to the broader community around suicide or mental health.</td>
</tr>
<tr>
<td>• <strong>Compilation of a contact wall or list.</strong> Weave alumni to ensure we touch all affected people and they feel included in relevant activities</td>
<td>• <strong>Traditional healers</strong> to bring ceremony to grieving families and communities</td>
<td></td>
</tr>
<tr>
<td>• <strong>Setting up safe spaces</strong> at WEAVE/in community for people to come together, talk and grieve (eg contact wall), with or without workers, depending on communities need in case of triggers.</td>
<td>• <strong>Creative expression workshops</strong> – combining art and conversation as a way of externalizing grief/expressing it beyond words. Connecting people who have been through similar things and supporting their grieving process. Include audio/visual presentations</td>
<td></td>
</tr>
<tr>
<td>• <strong>Resources &amp; self care kits</strong> to be provided by WEAVE to family, friends and young people.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

"Headspace is very structured & clinical & only have limited number of sessions and doesn’t focus on grieving enough and is restricted by age so parents can’t access help/grieving support" - Young person, Woolloomooloo
Final thoughts

- We recognise there are 4 phases (seasons) we need to work across in order to best support this issue.

- Our recommendations cover all 4 phases and were well received by all audiences we tested with largely because of the additional focus on early intervention/prevention not just working once the crisis is here.

- As a project team (as well as staff we have engaged along the way) - we are very motivated to do this work and pilot these programs and NASCA and schools are supportive of our intentions (they want to be part of this and back us to deliver).

- A key success factor we have identified in any work we do to better support suicide is the need to address the impacts of Suicide and client suicidality on Weave staff. We believe our success in this space will be determined by our ability to:
  - Engender a greater understanding of the work that staff are doing on the ground
  - Elevate capacity and spirit for the WEAVE team > this will enable us to do the same with clients
  - Give staff permission to have time out for recovery/processing/support
  - Increase our external supervision & leadership support (by freeing up capacity in our leaders)
  - Consider additional resourcing