New national centre to help strengthen suicide prevention



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By Professor Pat Dudgeon and Professor Helen Milroy

Starting in July 2025, a new centre will bring together the University of Western Australia (UWA)'s Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention (CBPATSISP) and the Transforming Indigenous Mental Health and Wellbeing (TIMHWB) research program, co-led by Professors Pat Dudgeon and Helen Milroy. That means our staff can work more effectively across programs and we will also be able to add new projects to address more urgent issues for Indigenous people.

The new Centre will be run as a consortium with UWA community partners National Aboriginal Community Controlled Health Organisation (NACCHO) and Gayaa Dhuwi (Proud Spirit) Australia (GDPSA) and we will focus on Outcome and Target 14 under the National Agreement on Closing the Gap:

OUTCOME: Aboriginal and Torres
Strait Islander people enjoy high levels of social and emotional wellbeing.

 TARGET: Significant and sustained reduction in suicide of Aboriginal and Torres Strait Islander people towards zero.

This target was among four (from a total 19) Closing the Gap targets for which outcomes were assessed as "worsening, not on track" in the latest Productivity Commission report card, as Aboriginal and Torres Strait Islander people remain twice as likely to die by suicide compared with other Australians

For Indigenous children and young people the difference is even more stark with suicide rates three to four times

higher than mainstream Australia. The new centre will have a child and youth stream that will seek to understand and address the issues that are affecting our young generations with such devastating consequences.

We know that Aboriginal and Torres Strait Islander people's high rates of distress and suicide are fundamentally linked to our present and historical experiences of colonisation, dispossession, discrimination, disadvantage and entrenched racism. To be successful, social and emotional wellbeing and suicide prevention programs and services need to acknowledge the centrality of these experiences and address them by empowering Aboriginal and Torres Strait Islander communities.

Positive changes are gaining momentum at a national level. The government last year released the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy (NATSISPS), which was developed by Gayaa Dhuwi (Proud Spirit) Australia (GDPSA). The NATSISPS has the potential to bring about major improvements for Indigenous communities. NACCHO's Culture Care Connect program of regional suicide prevention activities delivered through the Aboriginal Community Controlled Health Organisation (ACCHO) sector is showing promising results and its funding has been extended.

So our new centre has urgent work to do in collaboration with our partners to plan, pilot and document these new approaches that genuinely respect our



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people and cultures and help us restore our resilience. By doing this, we can strengthen the case for social and emotional wellbeing services to be designed and delivered within our communities under the leadership and governance of Aboriginal and Torres Strait Islander people.

A parallel activity stream aims to improve the cultural safety provided to Aboriginal and Torres Strait Islander people by mainstream services and clinicians. We will develop professional curriculum and continuing education resources so everyone working in mental health learns how to support our people appropriately and respectfully.

We are grateful to the Minister for Health and Aged Care, the Hon. Mark Butler MP, for his support of our work and for the grant, which will allow the centre to operate for three years initially. We are looking forward to working with the Department of Health and Aged Care to finalise the details of our future work program and how we will measure its success.

We are privileged to have learned from our Aboriginal and Torres Strait Islander peoples and communities all over Australia. Without their deep knowledge and understanding, our work would never have been possible and we recognise their aspirations as the foundation of everything we do. While some projects will focus on mental health professionals and service providers, the true strength of the centre will come directly from the strength of our relationships in community and we are looking forward to extending our

community partnerships in this new

Some of these are geographic communities – in our current centres we have piloted successful new projects with Danila Dilba Health Service in Darwin and the Kimberley Aboriginal Medical Service (KAMS) among many others. Some are communities of shared experience, like the work we have been doing with people who identify as having lived experience to ensure their voices and needs are properly reflected in services and programs. Our website will continue to include information and resources for use in community but we will organise these differently and make them easier to find.

You may have noticed we keep referring to "the new national centre". That is because it doesn't have a name yet. In the weeks ahead we will be working with community and university Aboriginal colleagues to co-design an Aboriginal name, that will be strength-based and express our aspirations for the work ahead. We will announce it through our social media and look forward to sharing further news soon as we can.

This article is part a series of Koori Mail columns about Aboriginal and Torres Strait Islander mental health, social and emotional wellbeing and suicide prevention contributed by authors from Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention (CBPATSISP) and the Transforming Indigenous Mental Health and Wellbeing program at the University of Western Australia.