Submission for the Mental Health and Suicide Prevention Agreement Review,

Australian Government Productivity Commission

My why

As a proud Aboriginal man, this submission for the *Mental Health Suicide Prevention Agreement Review*, is motivated by my personal journey and lived experience around mental health and suicide. It is also driven by the desire to give Aboriginal and Torres Strait people a wider platform, to present their lived experiences and identified needs to decision makers of our country, of our state and territories and local governments.

My response endorses the following key points identified in the interim review specifically related to Aboriginal and Torres Strait Islander peoples' experiences of not feeling culturally safe and needing culturally appropriate services:

- Limited progress made under the agreement
- Urgent need to embed consumer's perspectives in policy and service delivery
- Gaps and shortages
- Inadequate crisis support
- Experience of discrimination when accessing services
- Carer's experiences of exclusion and not being able to access info and support
- Need for change in the way services are provided (i.e. culturally appropriate and culturally safe)
- Finding the right services at the right time

I speak for myself, and as a First Peoples leader of my community. I am aware that although many of our communities are different, the issue of mental health and suicide impacts Aboriginal and Torres Strait Islander peoples in far greater proportions and in unjust and unacceptable ways. Our communities seek resources to address the identified gaps and challenges around mental health and suicide for Aboriginal and Torres Strait Islander people and all communities whether in rural, remote, and urban areas.

The Data

The latest statistics on suicide rates for Aboriginal and Torres Strait Islander peoples, based on data from the Australian Bureau of Statistics (ABS) and the Australian Institute of Health and Welfare (AIHW), reveal the following key points ¹ (see Figure 1 below)

¹ Australian Bureau of Statistics (ABS) and Australian Institute of Health and Welfare (AIHW), Retrieved from:

https://www.aihw.gov.au/suicide-self-harm-monitoring/population-groups/first-nations-people#suicide

Suicide Rates (2023 Data)

- Suicide accounted for 5.2% of all deaths among Aboriginal and Torres Strait Islander peoples.
- Gender breakdown:
 - 7.1% of all male deaths were due to suicide.
 - 3.0% of all female deaths were due to suicide.
- Age-standardised suicide rates:
 - First Nations males: 48.5 deaths per 100,000.
 - First Nations females: 13.8 deaths per 100,000.
- These rates are significantly higher than those for non-Indigenous Australians:

Males: 2.9 times higher.Females: 2.6 times higher

Figure 1: Suicide Rates (Based on 2023 Australian Bureau of Statistics (ABS) and the Australian Institute of Health and Welfare (AIHW),).

Unseen challenges

From day to day because of the competing priorities we experience, we have unseen challenges in our own backyard. I speak about our houses like they are fenced off areas where competing priorities and challenges build up. The everyday situations we face — from getting our children ready for school when they feel reluctant, fearful or disconnected; living in a domestic violence situation; not having stable employment; waiting for an assessment to be diagnosed for disability; facing a situation of early dementia and chronic disease for self and/or kin, which are at alarming levels in our communities.

Facing all of these challenges creates high levels of stress, that are often unseen and misunderstood by government policy writers and decision makers, and those employed by government to implement programs based on these policies and decisions that are made from afar.

Many of us have times of feeling overwhelmed within the four fences of our own backyard. We then find it very difficult to look outside to seek help — we find it very difficult to talk to others about those unseen challenges. We feel shame. We are ashamed to talk about our challenges with other people – and this stigma is a barrier to accessing the mental health support and general services we need.

Colonial load

Although we do not forget there are times when our families and young people do step outside. We see that they find courage and strength that enables them to step outside of those backyard fences. However, it is critical to appreciate that the shared colonial history of this country continues to be experienced daily by Aboriginal and Torres Strait Islander people in extremely challenging ways through the systems that are set up to

support and assist us. The levels of unconscious bias within systems must be acknowledged and dismantled.²

When our people feel overwhelmed, we can see a lot of bullying, a lot of lateral violence. The colonial rule of divide and conquer still impacts our communities. There are many cultural protocols that we've got to consider. However, without support to get basic needs met and our human rights acknowledged, the respect goes out the door, the cultural values are not prominent in our decision making, and so we become a society and a community of challenges. Our community needs further support and enhanced skills to address some of the early mental health issues as they emerge, before the alarming rates of suicide become further entrenched and intractable.

The tyranny of low expectations, deficit stereotypes and bias

We can also see that the 'welfare mentality' – entrenched over many years of failed policy responses with intergenerational impact – and the negative mindsets within those four fences around our homes, are frequently reinforced. Low expectations of self and others within our communities, can be reinforced daily through self-blame and shame, and deficit stereotypes and bias (both conscious and unconscious). Deficit stereotypes continue to shape the mindsets and expectations of many non-Indigenous Australians we interact with in our schools, TAFES, universities, shops, local businesses, hospitals, health and wellbeing services and other public services.

The attitudes underlying microaggressions and behaviours that come out of limiting and toxic mindsets, reinforce racism and enable it to persist and pervade all aspects of our lives. These are the layers of unseen challenges faced by First Peoples, especially those living with mental ill-health, or for someone at high risk of suicide³. Additionally, there is a huge vacuum of ignorance among non-Indigenous service providers around the way we do things within our communities. In those unseen spaces described, we are looked at as though we're dumb or we don't know how to resource our community and work through our challenges.

Our challenges also stem from intergenerational trauma⁴, and from the historical injustices and inhumane treatment that our families have suffered. Too many of our families continue to suffer harm through child-protection systems, for example, child removal and lack of understanding of Indigenous kinship relationships and responsibilities; over-policing; extreme rates of incarceration; discriminatory laws and punitive policies that violate our human rights as Indigenous people. Despite Australia being a signatory to the United Nations Declaration on the Rights of Indigenous Peoples

² Carpenter, Jowatt and Tait (2022). *Indigenous suicide rates and the colonial logic of legal decision making*. Retrieved from: https://eprints.qut.edu.au/227715/

³ Truong M and Moore E, 2023. Racism and Indigenous wellbeing, mental health and suicide. Catalogue number IMH 17, Australian Institute of Health and Welfare, Australian Government.

⁴ Darwin L, Vervoort S, Vollert E and Blustein S, 2023. Intergenerational trauma and mental health. Catalogue number IMH 18, Australian Institute of Health and Welfare, Australian Government.

(UNDRIP)⁵, a number of current State and Territory Governments are adopting policy regimes in Youth Justice (such as *Adult Crime – Adult Time*), that are not evidence-based, nor informed by recommendations of countless Government Reports and Royal Commissions over many decades. Levels of trust between our people and governments at many levels are at an all time low. All of this occurs on top of chronic disease, reduced life expectancy, and increasing rates of mental ill-health and suicide risk.

We are not going away

Our cultural stories that were passed down to us, have been diluted and at times deliberately erased, because of Western colonial constructs of superiority/supremacy and power-over. Historic accounts (often based on historic records of colonists, settlers and government officials, as well as policy and legal documents), include frontier wars, massacres, removal of Aboriginal and Torres Strait Islander people from traditional Country/s, assimilation policies, stolen generations, ongoing deaths in custody, along with systemic violence and neglect. These acts were intended to erase Aboriginal and Torres Strait Islander Peoples and cultures from their traditional lands so that the colonisers and settlers could take over the land for their own use and material gain⁶. Many of these examples are now seen to meet the UN criteria for acts of genocide⁷. Colonising ways of doing things have demanded and continue to impose assimilation and erasure in our present day, through paternalistic and punitive solutions that continue to be detrimental for First Peoples.

Self-determination

We need to bring our culture back into those four fences of our backyards. We need to bring our safety back into those four fences. We also need to bring more understanding of why we are afraid, and what are the challenges of stepping outside of those fences when we seek to be a part of a broader social community?

The lack of consultation with First Peoples around withdrawing support from Truth-Telling and Treaty initiatives impact on the capacity of Aboriginal and Torres Strait Islander people to heal and establish a different quality of relationship with non-Indigenous Australians. We need to be supported and resourced in Truth-Telling initiatives that bring healing, respect and a sense of being seen and heard.

⁵ United Nations Declaration on the Rights of Indigenous Peoples. The Australian Government formally endorsed UNDRIP on 3 April 2009. Retrieved from:

https://www.aph.gov.au/Parliamentary_Business/Committees/Joint/Aboriginal_and_Torres_Strait_Islander_Affairs/UNDRIP/Report/Foreword

⁶ Marr, D, 2023. Killing for Country: A Family Story. Melbourne: Black Inc

⁷ Sentance, Nathan (2022), *Genocide in Australia*. Australian Museum, Sydney. Retrieved from: https://australian.museum/learn/first-nations/genocide-in-australia/

Collaboration for a shared future

Moving forward it's also about how we collaboratively work together, how we address together that vacuum of ignorance about our shared history and the experiences of Aboriginal and Torres Strait Islander Peoples, to bring about systemic change for improved mental health and suicide prevention programs for the First Peoples and for all Australians. The strength that I'm speaking to, does lie within those four fences of our backyards. We must ask and explore, how do we get that strength to to be a part of the wider community outside of those fences? How can the barriers to being a part of the wider community, and to be included in youth programs that are essential for our young people.

We are not the problem. It is also about the broader community taking responsibility for stopping and changing the deficit models. We must determine how to move forward together, so we can transition and transfer our strength and resilience to all communities – Indigenous and non-Indigenous.

The Next Generation: Strength, Vision & Legacy (NAIDOC Theme 2025)

We've got a lot of young babies in our community and many Aboriginal and Torres Strait Islander communities have an increasing youth population. We must invest in early intervention and humane living conditions, to meet basic human needs for thriving communities to be the norm. It's about nurturing that strength and it's about guiding that strength.

The NAIDOC theme 2025 talks about the next generation, the strength, vision and legacy for our young people. That is why I would like to submit this paper, and why I speak of those unseen challenges. Our young people have a lot of strength and a lot of knowledge and hold a lot of cultural values. But there are a lot of systems that prevent them thriving, and a lot of that ignorance that I speak of, we need to break down. We must break through those walls of resistance and those walls of ignorance. This requires shared investment and resourcing.

Resources and Support

We need more resources in that unseen space.

We need more support in that unseen space.

And we do know what we need to make those unseen spaces visible.

We need to build the capabilities within that unseen space so that we can reduce suicide and address mental ill-health challenges. Our ways of knowing, doing and being, are the ways we can bring our cultural values into those pathways. They are the

ways we can bring our storylines to help our people who are struggling with mental health issues and suicide in our communities.

I believe that with the high rates of mental health issues and suicide in our communities, we need to build foundational capabilities to be resourced in our homes, firstly, and within our families and for individuals to improve mental health. Whilst we do engage in *Mental Health First Aid* training, we still need more resources as we have a lot of systemic challenges. We get limited resources, but these do not translate into sufficient and quality service delivery, that is culturally safe and culturally appropriate.

More resources for our youth, our mental health and early dementia are urgently needed. Furthermore, some of the longer-term solutions, require a bottom-up approach. In our community we have a lot of consultation and collaborative work now happening, but we need to continue to get the voices of our families, that have lived and living experience with mental health and suicide, come and talk to our groups. We need to grow our own health professionals who will be able to be advocates in this area and promote solutions and support for improving mental health and reducing suicides in our community.

Intentional relationships for future initiatives

I always speak about intentional relationships. We need to advocate within State and Federal governments to invest intentionally into our communities, not just the same blanket approach, having a one size fits all solution. How can our community be resourced in long term ways? Imagine if we were to have our own rehabilitation centre around mental health, and create a proactive youth space — a youth hub where young people can talk about some of their challenges with school, their friends, their peers, and their families. Where their sense of belonging, connection and innovation can be more fully experienced. We seek to be solutions-focussed. We are choosing not to live in the deficit model.

We want to grow our strengths within our community — especially with our young people so they can become the leaders in the next generation of leaders for our community. This requires significant investment into culturally appropriate and culturally safe education opportunities that are located regionally, and that do not require our young people to have to leave home.

Our international rights to have our cultural ways of doing things as a solution must be a stronger focus. The Australian government is a signatory to the United Nations International Rights of Indigenous Peoples (UNDRIP). There must be accountabilities and responsibilities to address past wrongs and create new futures for our people. This has to start with intentional relationships that then lead to intentional investment and resourcing for self-determination.

For our community, that is what we want and need. That is what we require.

That is what we demand.

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