

Front-Line Worker Perspectives on Indigenous Youth Suicide in Central Australia: Contributors and Prevention Strategies

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ABSTRACT: *This paper presents the perspectives of Central Australian workers in relation to Aboriginal youth suicide. Interviews were conducted as part of a project to develop a data collection system and referral pathway for Indigenous youth suicide and suicide attempts. Twenty-two in-depth interviews were conducted with a range of practitioners who have front-line contact in suicide related issues (such as police, primary health, community*

such demographics, geography and socio-economic features have considerable implications for service delivery across health, welfare and justice sectors.

As suicides and other suicidal behaviour among Aboriginal peoples are often the outcome of complex and multilayered factors (Kuipers, Appleton, & Pridmore, 2012; Tatz, 2005), various and combined methods of intervention are required. A considerable proportion of deaths by suicide are associated with previous suicide attempts or self-harming behaviour (Measey, Li, Parker, & Wang, 2006; Parker, 2010; Parker & Ben-Tovim, 2002) and exposure to violence and suicidal behaviour (Robinson et al., 2011). While interventions have generally focused on crisis response or postvention activities (Hunter & Milroy, 2006), there has been a steady shift to prevention and early intervention in recent years with a greater emphasis on the importance of holistic models and the social determinants of health (including environmental, socio-cultural, historical and economic factors) (Australian Government Department of Health and Ageing, 2013; Haswell, Blignault, Fitzpatrick, & Jackson Pulver, 2013; People Culture Environment, 2014) and community-based responses (People Culture Environment, 2014). The literature highlights the need to plan and coordinate prevention activities on a local/regional basis and that effective coordination and integration of community service responses and capacity building requires the development of explicit strategies (Menzies School of Health Research, 2012).

A project commenced in 2012 in Central Australia which aimed to develop a systematic data collection system for Indigenous youth suicide and suicide attempts. The project also sought to propose appropriate referral pathways between agencies in Central Australia when a young person is assessed as at risk of suicide. This project was initiated in response to findings of a 2011 Parliamentary inquiry into youth suicides in the NT, which identified the absence of any

standard framework to collect information on suicide attempts or inform coordination between agencies (Legislative Assembly of the Northern Territory, 2012). A final report (Taylor, Dingwall, Lopes et al., 2013) and published paper (Lindeman et al., 2013) presented the outcomes of this stage of the project. Workers were interviewed to gain an understanding of data collection and the current system of support and referral for Aboriginal youth in Central Australia. However, the subsequent analysis of the data reveals much broader insights and querying of the nature of this work and this issue.

The current paper thus explores key themes that emerged from the experiences and thoughts of frontline workers in Central Australia relevant to Aboriginal youth suicide. To date much suicide research has been based on statistical data (Pridmore & Fujiyama, 2009), coroner's reports (MacKian, 2003), interviews with significant others (Cavanagh, Carson, Sharpe, & Lawrie, 2003) and interviews with people with suicidal ideation or who have attempted suicide (Miranda et al., 2008). It has rarely explored the perspectives and understanding of these (many non-medical) workers. As others have noted, little guidance is available to help practitioners constructively respond to individuals who may occupy a different social location or cultural background from their own (Wexler, White, & Trainor, 2014). Our aim in the secondary analysis was to give voice to frontline workers who deal with Aboriginal young people in a variety of settings with a view to contributing to developments of more effective ways of responding to this behaviour. We specifically sought to explore (a) the contributing factors that they highlighted and (b) the preventive strategies they emphasised. Their observations and recommendations for formal services will form the basis for a

where your parents and your grandparents' generation have felt disenfranchised, disempowered." (P9)

They also noted more contemporary expressions of loss of culture.

"... when I first arrived... everyone was sitting around campfires telling stories, there wasn't a television in the community,... and you go there now you'd be lucky to see two or three fires, and everyone's sitting inside watching television." (P17)

Beyond these larger cultural issues, some specific circumstances in the home life of some Aboriginal youth were considered as contributors to suicide risk.

"There's one young girl has made a lot of threats of self-harm... she's... 12, 13... gets upset because of... her domestic situation. You know, just the constant... noise, traffic through her home. Fractious relationships with parents, siblings, etcetera." (P18)

Similarly, interviewees said that the proximity of suicidal behaviour in the family, such as "a family history of suicide, witnessed suicide..." was an important factor in their experience (P2).

Individual Consequences

A number of individual dimensions of these contextual _ as

And they have been successful and that young fella now is out on a community, he's working there, he's got a job ... Family members

Commonwealth of Australia. (2010). The hidden toll: suicide in