

In Confidence

Office of the Minister of Health

Cabinet Social Wellbeing Committee

Second annual update on suicide prevention progress

Proposal

- 1 This paper provides the second annual update on progress to prevent suicide as part of implementing *Every Life Matters – He Tapu te Oranga o ia tangata: Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand (He Tapu te Oranga)*.

Relation to government priorities

- 2 Preventing suicide and implementing *He Tapu te Oranga* contributes to the Government's priorities to support wellbeing and lay the foundations for a future where there is no suicide.

Executive Summary

- 3 High suicide rates are a long-standing issue in New Zealand and addressing them will require sustained and collaborative efforts over a long period. We are at the beginning of implementing the 10-year strategy outlined in *He Tapu te Oranga*. With leadership from the Suicide Prevention Office, good progress has been made to prevent suicide in New Zealand. Key highlights over the past year across each of the eight action areas in *He Tapu te Oranga* include:
 - 3.1 empowering community leadership through completion of the second round of Māori and Pacific Suicide Prevention Community Funds in 2021, bringing the total number of community initiatives funded to 168
 - 3.2 upskilling communities and workforces from across government agencies to respond to distress, with LifeKeepers suicide prevention training provided to over 4,000 people between February 2021 and March 2022 and over 3,000 Ministry of Social Development staff having received suicide awareness training
 - 3.3 continuing the national rollout of *Aoake te Rā*, the new suicide bereaved response service formally launched in September 2021, which has delivered over 1,900 sessions to people since the phased rollout began in August 2020
 - 3.4 launching a new interactive web tool to centralise provisional and confirmed suicide data.

- 4 Our suicide prevention efforts are enhanced by work across government to address the social, cultural, environmental and economic determinants of mental wellbeing and increase access to community supports, as well as the Government's response to COVID-19, all of which include a focus on mitigating the socio-economic risk factors of suicide. This work has seen initiatives across government to promote wellbeing, with targeted supports for Māori, Pacific peoples, children and young people, and rural communities, as well as investment in whole-of-population digital supports.
- 5 While good gains have been made, there is more work to be done. The strengthened commitment to a cross-agency approach through *Kia Manawanui Aotearoa – Long-term pathway to mental wellbeing (Kia Manawanui)*, the Government's 10-year strategy and action plan for transforming our approach to mental wellbeing, will contribute to suicide prevention efforts. There will also be opportunities for greater community and cross-sector collaboration to prevent suicide and promote mental wellbeing through the wider health system reforms.

Background

- 6 The Government committed to a whole-of-government, collective approach to mental wellbeing through its response to *He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction (He Ara Oranga)*, which is taken forward over the longer-term through *Kia Manawanui*. Within the Government's wider mental wellbeing agenda, we prioritised the establishment of the Suicide Prevention Office and the urgent development of a new suicide prevention strategy and action plan in our response to *He Ara Oranga*.
- 7 *He Tapu te Oranga* was released in September 2019 and recognises that suicide prevention is a collective responsibility across all government agencies, community organisations, sectors, businesses, iwi, whānau and individuals. The Suicide Prevention Office was established in November 2019 to provide leadership for preventing suicide in New Zealand.
- 8 The action areas in *He Tapu te Oranga* range from building a strong suicide prevention system to delivering regional and local suicide prevention initiatives.

Recent suicide data

- 9 The latest confirmed suicide data is from 2018, which showed there were 623 suicide deaths (a rate of 12.1 per 100,000 population) in New Zealand that year. Confirmed suicide data is available two-three years after suspected intentionally self-inflicted deaths are reported and confirmed suicide data is generally lower as some deaths will later be found by coroners not to be suicides.

I N C O N F I D E N C E

- 10 The recent suspected intentionally self-inflicted death data shows there were 671 in 2019 (a rate of 13.0 per 100,000 population), 598 in 2020 (a rate of 11.4 per 100,000 population) and 599 in 2021 (a rate of 11.3 per 100,000 population). The most up to date provisional suspected intentionally self-inflicted death data for the 2021/22 financial year shows there were 538 in 2021/22 (a rate of 10.2 per 100,000 population).
- 11 There is a reduction in the suspected intentionally self-inflicted death rate over the last few years and this is consistent with international data, where in most countries, there has been no change or a decrease in the rate of suicides, including across males and females and across age groups. Evidence shows that there needs to be a consistent increase or decrease over at least a five-year period before a meaningful trend in the suicide rates can be established.
- 12 Research from New Zealand and internationally shows that suicide rates have seen no significant increase or decline (other than a small decline between 2020 and 2021 in New Zealand), and it appears that this continued during the COVID-19 pandemic. Researchers around the world, including in New Zealand, are investigating this long-term trend, and although it is pleasing that rates appear to be starting to decline, there is not a clear reason for the decline.
- 13 Initial international research has shown that the predicted increases in suicide were not generally observed in 33 countries during the early months of the COVID-19 pandemic. However, researchers caution that the situation may change and patterns might vary across demographic groups. Ongoing monitoring is critical, as is the continued focus on wide-ranging suicide prevention activities.
- 14 In October 2022, the Chief Coroner's office will released this data along with further information around the statistics.
- 15 Ongoing effort is required to build on the momentum of our enhanced suicide prevention focus and to ensure significant, meaningful, and sustained reduction in the suicide rate.
- 16 Some groups are disproportionately affected by suicide. In 2018:
- 16.1 there were 446 male deaths and 177 female deaths with a suicide rate of 17.4 per 100,000 males, and 6.9 per 100,000 females
 - 16.2 the suicide rate was higher for Māori than other ethnic groups, with a rate of 18.2 per 100,000 Māori population compared with 10.6 per 100,000 for non-Māori. A notable difference in the rate of suicide between Māori and non-Māori was the 15–24 years age group, at 2.1 times that for non-Māori in the same age group.
- 17 Specific investment has and will continue to be set aside for suicide prevention initiatives by and for Māori and other populations disproportionately affected by suicide.

Previous update on progress implementing He Tapu te Oranga

- 18 Last year I provided Cabinet with the first annual suicide prevention progress update [SWC-21-SUB-0033 refers]. This first update showed that substantial progress was made across the eight *He Tapu te Oranga* action areas in its first year, providing a solid foundation to continue to strengthen suicide prevention.
- 19 This paper provides the second annual update on progress to implement *He Tapu te Oranga* and fulfils the ongoing commitment to provide annual updates to Cabinet [SWC-21-MIN-0033 refers]. It covers progress from February 2021 to March 2022.

Update on implementation of He Tapu te Oranga

- 20 While it will take time to see our suicide rates change, good progress is being made to implement *He Tapu te Oranga* with a range of suicide prevention activities underway supported by government agencies and community organisations. This includes targeted Māori and Pacific community initiatives, as well as initiatives across different settings such as workplaces, schools and tertiary institutions, local health and social services, and through online and social media.
- 21 **Appendix One** provides a high-level summary of cross-government activities over the past year across all eight action areas in *He Tapu te Oranga*.
- 22 The first four action areas cover activities to support the coordination of work across government, improve the availability of data, upskill workforces, and monitor and evaluate progress. Progress made in these areas includes:
- 22.1 the Suicide Prevention Office providing leadership and support for agencies to incorporate a suicide prevention focus in relevant activities
 - 22.2 the launch of the Ara Poutama Aotearoa – Department of Corrections Suicide Prevention and Postvention Action Plan. The Action Plan outlines activities to prevent suicide across Corrections' services
 - 22.3 the Ministries of Health and Justice, the Suicide Prevention Office and the Office of the Chief Coroner developed a web tool which centralises and streamlines annual reporting of provisional and confirmed suicide data that is available to the public
 - 22.4 funding to upskill workforces from government agencies, mental health and addiction services, first responders, and community organisations to respond to distress. For example, LifeKeepers suicide prevention training was provided to 4,069 people between February 2021 and March 2022, as well as Mates in Construction, which provides awareness training and supports champions within the construction industry to have competency in suicide prevention

- 22.5 the Ministry of Social Development continuing its 24-month rollout of suicide awareness training for its frontline staff. To date, over 3,000 staff members have completed this training.
- 23 The other four action areas cover activities that promote wellbeing, respond to distress, deliver targeted suicide prevention interventions, and postvention support. Progress made in these areas include:
- 23.1 publishing the revised Media Guidelines for Reporting on Suicide in October 2021 that were developed in collaboration with a range of media organisations and will help to reduce risk of suicide contagion within communities
 - 23.2 completing the second round of the Māori and Pacific Suicide Prevention Community Funds which help build the capacity of Māori and Pacific to prevent suicide within communities and respond effectively if a suicide occurs. In 2021 there were 15 successful Pasifika organisations and 61 successful Māori organisations, bringing the total number of community initiatives funded to date to 168
 - 23.3 launching the new community-led suicide prevention website *He Kāpehu Whetū* to inspire community leaders and communities across New Zealand who want to address the needs they see in their own regions
 - 23.4 expanding *Aoake te Rā*, the national suicide bereaved response service, which now has online or face-to-face providers available to provide support to people across New Zealand. Since service delivery began in August 2020 over 1,455 sessions have been delivered. The number of sessions provided is expected to increase as further providers come on board
 - 23.5 improving the Coronial Suicide Data Sharing Service so that the right people (eg, former district health board suicide prevention coordinators) have access to timely information about suspected suicide deaths. This will foster collaborative suicide prevention efforts and will enable quick support to be provided to the loved ones of the person who died.

Collective work across government to promote mental wellbeing is supporting suicide prevention

- 24 Mental wellbeing and suicide risk share many of the same social determinants, and initiatives that promote wellbeing are aligned and complementary to preventing suicide. Our response to COVID-19 has also accelerated efforts and demonstrated the benefits of a collective approach to supporting mental wellbeing, with agencies working together more closely and more flexibly across sectors to support community wellbeing.

- 25 *Kia Manawanui*, which I released in September 2021, sets out the framework to transform New Zealand's approach to mental wellbeing. It includes cross-government actions to promote mental wellbeing, tackle social determinants, and respond to mental health and addiction issues in New Zealand.
- 26 Suicide prevention efforts have been supported by cross-government work and through the implementation of *Kia Manawanui*. Cross-government activities underway to support mental wellbeing and reduce risk factors for suicide include:
- 26.1 strengthening the focus on mental wellbeing promotion and increasing access to support earlier, to help people look after their own and others' wellbeing and stay well, for example:
 - 26.1.1 investment in mental wellbeing campaigns as part of the psychosocial response to COVID-19
 - 26.1.2 the launch of new digital mental wellbeing tools
 - 26.1.3 national rollout of the Budget 2019 programme to expand access and choice of primary mental health and addiction services which has already delivered around 380,000 sessions.
 - 26.2 providing mental wellbeing supports earlier in the life course, with targeted initiatives for young people, acknowledging the higher rates of suicide among young people, for example:
 - 26.2.1 the Ministry of Education is providing greater access to counselling in schools to support learners' mental health and wellbeing in addition to funding local community organisations to support primary and secondary students in areas most impacted by COVID-19
 - 26.2.2 Te Puni Kōkiri continues to lead Rangatahi Manawaroa which funds initiatives that reduce risk factors for suicide
 - 26.2.3 delivery of funds to help address COVID-19 impacts for young people including the Youth Mental Wellbeing Fund led by the Suicide Prevention Office and the Ākonga Youth Development Fund (led by the Ministry of Youth Development in partnership with the Ministry of Education).
 - 26.3 enabling services to be more responsive to the needs of people with diverse backgrounds and experiences, including targeted initiatives for population groups at high risk of suicide, for example:
 - 26.3.1 Ara Poutama Aotearoa – Department of Corrections has delivered mental health literacy training to frontline staff with a focus on improving support for vulnerable populations within New Zealand's prisons

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- 26.3.2 the Ministry for Primary Industries continues to support the 14 Rural Support Trusts providing services to rural communities
- 26.3.3 Oranga Tamariki is leading a Social Media and Innovation Fund which aims to meet the mental health and wellbeing needs of Māori and Pacific communities
- 26.3.4 the Ministry of Health is funding new mental wellbeing services for Rainbow young people and Rainbow competency training for the mental health and addiction workforce.

Further work and next steps to prevent suicide in New Zealand

- 27 Implementation of *He Tapu te Oranga* is ongoing, and activities will evolve as we learn from the successes of suicide prevention initiatives. As suicide prevention initiatives continue to be implemented, they will be monitored and evaluated and will be refined as needed (eg, to respond to emerging needs of New Zealanders and to opportunities through system changes such as in the health system). This will continue to be supported by leadership from the Suicide Prevention Office as well as cross-sector initiatives to prevent suicide and promote mental wellbeing for New Zealanders.
- 28 The health and disability system reforms present opportunities to further strengthen collaboration between government agencies, communities, and whānau. The shift to a localities-based model will empower local communities to work together to better respond to local needs and prevent suicide. At a national level, the Suicide Prevention Office will work closely with the new entities, Health New Zealand and the Māori Health Authority, to strengthen health sector suicide prevention efforts.
- 29 Further suicide prevention work expected to be undertaken in the coming year includes:
 - 29.1 ensuring suicide prevention and postvention is reflected in workforce strategies and plans
 - 29.2 completing a suicide prevention evidence and gaps analysis. This will provide best practice guidance for suicide prevention and will contribute to development of a suicide prevention research plan
 - 29.3 finalising the monitoring and evaluation framework for *He Tapu te Oranga* to measure the effect actions are having on addressing inequity, the factors associated with suicide risk, and suicide rates. Work to date on the framework has indicated greater Kaupapa Māori input is needed, and this is being pursued
 - 29.4 exploring the potential for sharing of real time suspected suicide surveillance data to key organisations, to help ensure appropriate suicide prevention and postvention measures can be made available in a timely manner

29.5 the Department of Internal Affairs with the support of the Ministry for Culture and Heritage is conducting a comprehensive review of media content regulation in New Zealand. The work on the Review is ongoing and it aims to mitigate the harmful impacts of all content, regardless of the channel it is delivered on. This is expected to have a positive impact on mental health outcomes

29.6 the Ministry of Education is updating a suicide prevention toolkit for schools to include responses and resources co-created from understanding Māori Medium and Kura Kaupapa settings needs, in response to self-harm and suicidal behaviours and will be made available on a new website.

30 I intend to provide you with a further annual update on progress made to prevent suicide by the end of the financial year in June 2023.

Financial Implications

31 This paper does not have any immediate financial implications.

Legislative Implications

32 This paper does not have any legislative implications.

Impact Analysis

33 The impact analysis requirements do not apply to this paper.

Population Implications

34 Data shows that suicide disproportionately affects some groups in New Zealand's population, including Māori, young people aged 15–24 years (particularly young Māori and Pacific peoples), and males. There is also evidence that indicates suicide disproportionately affects other population groups, including disabled people, Rainbow communities, rural communities, Asian communities and older people.

35 Achieving equity underpins *He Tapu te Oranga* and the work of the Suicide Prevention Office, including through recognising that different people with different levels of advantage require different suicide prevention approaches and resources to achieve equitable outcomes.

36 Over time, it is anticipated that approaches developed with and tailored to population groups will reduce disparities in suicide rates and improve mental wellbeing for all people in New Zealand.

Human Rights

37 The proposals in this paper are consistent with the New Zealand Bill of Rights Act 1990 and the Human Rights Act 1993.

Consultation

38 The Ministry of Health prepared this paper in consultation with the Ministries of Education, Housing and Urban Development, Justice, Social Development, Youth Development and Business, Innovation and Employment; the Ministries for Pacific Peoples, Primary Industries, and Women; Ara Poutama Aotearoa – Department of Corrections, the New Zealand Police, Oranga Tamariki – Ministry for Children, Te Puni Kōkiri, the Department of the Prime Minister and Cabinet (Policy Advisory Group and the Child Wellbeing Unit), Manatū Taonga – Ministry for Culture and Heritage, the Office for Seniors, the Department of Internal Affairs, the Office for Disability Issues, and the Treasury.

Communications

39 No specific announcements related to this paper are planned.

Proactive Release

40 This paper, including Appendix One, will be proactively released as soon as possible following Cabinet's decisions, subject to redactions as appropriate under the Official Information Act 1982.

Recommendations

The Minister of Health recommends that the Committee:

- 1 **note** that in September 2019, Cabinet invited the Minister of Health to provide annual updates to the Cabinet Social Wellbeing Committee on progress against the actions in *He Tapu te Oranga* [CBC-19-MIN-0034 refers];
- 2 **note** that in April 2021, I provided Cabinet with the first annual suicide prevention progress update [SWC-21-SUB-0033 refers];
- 3 **note** that this paper represents the second annual update to Cabinet Social Wellbeing Committee on progress against the eight action areas in *He Tapu te Oranga*;
- 4 **note** that while it will take time to see a change in our suicide rates and we have more work to do, good progress is being made to strengthen suicide prevention, which is enhanced by wider work across government to promote mental wellbeing including through implementing *Kia Manawanui* and the Government's response to COVID-19;

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- 5 **invite** the Minister of Health to provide the next annual report-back on suicide prevention progress to the Cabinet Social Wellbeing Committee by the end of June 2023.

Authorised for lodgement

Hon Andrew Little

Minister of Health

PROACTIVELY RELEASED

Appendix One: Summary of suicide prevention progress

Progress against the action areas in *He Tapu te Oranga*

Progress made preventing suicide against the eight action areas covering the first two years, with a focus on February 2021 to March 2022 of implementing *Every Life Matters - He Tapu te Oranga o ia Tangata: Suicide Prevention Strategy 2019–2029 and the Suicide Prevention Action Plan 2019–2024 for Aotearoa (He Tapu te Oranga)*, is outlined below.

Action area 1: Strengthening national leadership

An ongoing focus of the implementation of *He Tapu te Oranga* has been on the leadership role of the Suicide Prevention Office. Reducing New Zealand's suicide rate requires collective action. The Suicide Prevention Office's role is to provide a central place for oversight and leadership of suicide prevention and postvention work across New Zealand.

The Office was established as a team within the Ministry of Health and opened in November 2019. Over the last year, the Suicide Prevention Office has continued to strengthen national leadership including by:

- providing oversight and support to the suicide prevention sector to facilitate greater alignment with *He Tapu te Oranga* as well as opportunities for more collaboration. Efforts include bimonthly hui with Suicide Prevention and Postvention Coordinators in district health boards, national hui to bring together the Māori suicide prevention workforce called *Kia Piki Te Ora*, and regular meetings with other providers in the postvention space such as the Community Postvention Response Service and *Aoake Te Rā: the Bereaved Response Service*. This has helped to ensure nationally consistent, regionally specific, and sustainable suicide prevention and postvention across the motu
- ongoing stakeholder engagement across other government agencies to facilitate greater alignment with *He Tapu te Oranga* as well as opportunities for collaboration to see the vision of suicide prevention being a collective responsibility realised. Activities include providing expertise as part of the Suicide Prevention Advisory Group of Ara Poutama Aotearoa – Department of Corrections, and regular meetings with agencies such as the Ministry of Education, the Ministry of Justice, and the Office of the Chief Coroner
- supporting the COVID-19 psychosocial recovery response, including continuing to work closely with the Office of the Chief Coroner to understand and address concerns about the impact of COVID-19 lockdowns on suicide and self-harm
- launching *He Kāpehu Whetū* (a Māori star compass), an online website which highlights suicide prevention initiatives across the motu and was designed to inspire community leaders and communities across New Zealand
- hosting an event focused on suicide prevention for young people to mark World Suicide Prevention Day
- supporting connections between New Zealand stakeholders and researchers, and international suicide prevention networks.

Action area 2: Use evidence and collective knowledge to make a difference

To build a strong system for suicide prevention we need to use evidence and collective knowledge to make a difference. Key developments against this action area include:

- launch of the Suicide Web Tool. This data reporting and visualisation tool provides streamlined annual reporting on provisional suspected suicides and Ministry of Health confirmed suicide data. It was developed through collaboration by the Ministry of Justice, Office of the Chief Coroner, the Ministry of Health and the Suicide Prevention Office. The tool is available at: www.health.govt.nz/publication/suicide-web-tool, and will be updated regularly
- preparatory work is underway for the sharing of real time suspected suicide surveillance data to key organisations to ensure accurate information is available to make suicide prevention and postvention measures available to people in a timely manner
- preparatory work by the Suicide Prevention Office to develop a national suicide prevention research plan
- Ara Poutama Aotearoa – Department of Corrections have employed data and analytics experts within their health service to help with monitoring and reporting suicide-related data. Work is underway to review the way that relevant data is being collected and reported
- Oranga Tamariki have used findings from the [Youth19 Rangatahi Smart Survey](#) to inform practice improvements. The survey involved 7,721 year 9–13 students and includes information on the 9 percent of young people had ever been involved with Oranga Tamariki of whom 6 percent had attempted suicide and 21 percent had serious thoughts of suicide.

Action area 3: Develop workforce capacity and capability

Workforce development is key to ensuring we have enough people in the suicide prevention workforce with the right skills to meet current and future needs. *He Tapu Te Oranga* highlights the many people who work in roles that contribute to suicide prevention as well as the invaluable role and experience of peers, whānau, families and communities.

The suicide prevention workforce encompasses a diverse range of people, including whānau, community leaders, people in frontline roles who might be engaging with those who are suicidal, first responders, and mental health and addiction clinicians. Much of the suicide prevention workforce is currently also focused on supporting the response to and recovery from COVID-19.

There is a range of activity being undertaken in terms of workforce development. Highlights include:

- 4,069 people across Aotearoa received government-funded LifeKeepers suicide prevention training between February 2021 and March 2022 and gained valuable suicide prevention skills. Additionally, a range of other organisations, such as other government agencies, universities and private businesses, have paid to have LifeKeepers delivered to their staff
- New Zealand Police provide suicide prevention training via their initial Instructors and preparatory work is underway to update this training. They also support their frontline staff with an app that allows them to immediately locate suicide prevention specific support services that they can recommend to those they are interacting with

- Ministry of Social Development have delivered Suicide Awareness (a virtual suicide prevention programme) to 3,214 staff. The programme includes modules that are based on LifeKeepers content and design. In addition, 4,270 client facing staff have also completed general mental health training
- Ara Poutama Aotearoa – Department of Corrections have delivered Mental Health 101 training to frontline staff. Further training focusing on suicide prevention and personality disorders has also been provided to staff who support vulnerable populations within New Zealand's prisons. Work is underway to review and expand the training support offered to all custodial staff in relation to mental health, addiction, and suicide
- Oranga Tamariki contract Clinical Advisory Services Aotearoa to deliver training on responding to suicide risk to Oranga Tamariki staff, as well as induction training on suicide prevention and support for staff on a case-by-case basis, to develop suicide risk management plans, and review case data.

Action area 4: Evaluate and monitor He Tapu te Oranga

One of the outcomes *He Tapu te Oranga* is seeking to achieve is to reduce New Zealand's suicide rate. To ensure positive progress, it is important to evaluate and monitor progress against the outcomes set out in *He Tapu te Oranga* regularly.

One of the first actions that the Suicide Prevention Office undertook was to establish the Māori Expert Advisory Panel, which has also helped maintain oversight and monitor progress with suicide prevention efforts, with a particular focus on equity for Māori.

Developing a monitoring and evaluation framework is key to this action area. For the framework to be appropriate for the New Zealand context, it is crucial to ensure that the Framework is underpinned by kaupapa Māori theory and methodology. Building on the Suicide Prevention Office's work to develop the framework in 2021, further work is underway to ensure appropriate kaupapa Māori input into this important Framework. This work will also seek to align with and complement the new outcomes and monitoring frameworks currently under development as part of the health system reforms and by the Mental Health and Wellbeing Commission.

The Mental Health and Wellbeing Commission has published *Tarāwaho putanga toiora o He Ara Oranga (He Ara Oranga wellbeing outcomes framework)*. This framework aims to help the Commission measure how people's wellbeing is changing over time.

Government agencies, including the Suicide Prevention Office, undertake regular monitoring of contracted suicide prevention services and programmes. In some cases, there is also independent evaluation of particular services or programmes commissioned (eg, an evaluation of Aoake te Rā, the Bereaved Response Service, is currently underway).

Action area 5: Promotion – Promoting wellbeing

Good mental wellbeing plays an important role in preventing suicide. Therefore, it is a key focus within *He Tapu te Oranga*, especially for young New Zealanders who are often experiencing multiple life transitions and stressors. Mental wellbeing and suicide prevention is also referenced in cross-agency strategies and action plans, for example, *the Child and Youth Wellbeing Strategy* highlights the importance of implementing *He Tapu te Oranga*.

The ongoing presence of COVID-19 has continued to draw further attention to the importance of wellbeing and ensuring New Zealanders have access to tools and resources to support their mental wellbeing.

In line with the need for a collective approach to suicide prevention, updates on initiatives to promote wellbeing have been provided from across government.

<p>Ara Poutama Aotearoa – Department of Corrections</p>	<ul style="list-style-type: none"> • Provided wellbeing resources to those in prison affected by COVID-19 to support the maintenance of their wellbeing while in quarantine. • Delivering the Māori Pathways programme which uses kaupapa Māori and whānau-centred approaches to work differently with Māori men and women. • Delivering the Corrections Mental Health and Reintegration Service – Supported Living which was used by 25 people in 2020/2021 and supports the wellbeing of people coming out of prison by providing wrap-around reintegration support, and aftercare support post transitional accommodation stay.
<p>Department of Internal Affairs</p>	<ul style="list-style-type: none"> • Launched the Inter-Yeti in June 2021, an interactive digital storybook which has been created as a safe, positive and fun space for children to learn about staying safe online. • Providing targeted support through the National Library for building reading engagement aimed at children and young people in education and community settings. Reading for pleasure is a known protective factor in regard to mental health and wellbeing. • The commercial video on-demand labelling regime has been in force since 1 August 2021. It requires all content that is made available by commercial video on-demand providers such as Netflix and Disney+, to display consumer information in line with New Zealand standards which includes warnings when content may contain themes about suicide. • Conducting a comprehensive review of the content regulation in New Zealand, with the support from the Ministry for Culture and Heritage. The review aims to create a new modern, flexible, and coherent regulatory framework to mitigate the harmful impacts of all content regardless of the channel it is delivered on.
<p>Ministry for Culture and Heritage</p>	<ul style="list-style-type: none"> • Delivering creative arts and cultural wellbeing programmes in prisons in partnership with Ara Poutama Aotearoa – Department of Corrections through the Creative Arts Recovery and Employment Fund Culture and Wellbeing workstream which supports efforts to reduce reoffending and improve wellbeing for Māori prisoners and their whānau.
<p>Ministry of Education</p>	<ul style="list-style-type: none"> • Supporting students' re-engagement in learning due the COVID-19 restrictions in Auckland and long periods of distance learning, which includes targeted support for Māori and Pacific students, students in Auckland, and students with disabilities and learning support needs. • Prioritising mental health and wellbeing of children and young people including through roll out counselling to selected schools, developing two curriculum guidance documents to support teaching and learning programmes for mental health, piloting three self-regulation approaches in 350 early learning settings, and promoting safe and inclusive environments to prevent bullying.
<p>Ministry of Health</p>	<ul style="list-style-type: none"> • Published <i>Kia Manawanu Aotearoa: Long-term pathway to mental wellbeing</i> which sets out a whole-of-government response to address the determinants of mental wellbeing and actions that agencies have identified

	<p>as being needed to improve mental wellbeing outcomes for New Zealanders.</p> <ul style="list-style-type: none"> • Further investment to support the psychosocial response to COVID-19. This had an initial focus on Auckland, but also includes national mental wellbeing promotion programmes, such as the 'All Sorts' multimedia campaign. • Launching a number of digital wellbeing tools, including Small Steps – a series of micro-tools to help maintain and regain wellbeing, Groov – an app to maintain and manage mental wellbeing by setting daily goals and tracking progress, and Headstrong – a Chatbot platform to support young people to maintain and regain mental wellbeing. • Expanding Mana Ake Stronger for Tomorrow, which began as a mental health initiative for primary school aged children in Christchurch and Kaikōura and is now rolling out to five additional areas.
Ministry for Pacific Peoples	<ul style="list-style-type: none"> • Delivering the Toloa cultural and wellbeing programme which provides services including health and wellbeing support, mental wellbeing and Pacific pastoral care.
Ministry for Primary Industries	<ul style="list-style-type: none"> • Funding for the 14 Rural Support Trusts that helps rural communities recover from adverse medium and large-scale events that affect rural communities, for example floods and droughts. • Provided support during COVID-19 to the Regional on-farm COVID-19 Coordination groups which work alongside Rural Support Trusts, Kaupapa Māori providers, district health boards, government agencies, and COVID-19 Care in the Community Coordination Hubs to provide support. • Funding a new service 'FirstMate' which supports the health and wellbeing of people across the commercial seafood sector.
Ministry of Social Development	<ul style="list-style-type: none"> • Funding for the Provider Capability and Resilience initiative to support community organisations to provide relevant and high-quality services to their communities and respond to the impacts of COVID-19 with a focus on Māori, Pacific and culturally diverse communities. • Announced an additional 359 Community Connector positions that sit within the community and throughout the country to flexibly respond and support the welfare needs of individuals and whānau to keep them safe while isolating at home.
Ministry of Youth Development	<ul style="list-style-type: none"> • Led the Ākonga Youth Development Community Fund in partnership with the Ministry of Education. The Fund, established in late 2020 and ending in December 2022, works to support Iwi and community-based youth development providers to deliver programmes outside of traditional education settings to support up to 5,500 young people (aged 12 to 21 years) who have been adversely affected by the COVID-19 pandemic to stay engaged in their education journey.
Oranga Tamariki	<ul style="list-style-type: none"> • Providing funding for a Social Media and Innovation Fund (SMIF). SMIF is a targeted fund, which aims to meet the mental health and wellbeing needs of Māori and Pacific communities. A kaupapa Māori approach is integral to SMIF, which is based on values of whanaungatanga and manaakitanga between Oranga Tamariki and communities. SMIF enables communities to develop and lead their own approaches to mental health and wellbeing.

Suicide Prevention Office	<ul style="list-style-type: none"> • Worked with representatives from a range of media organisations to update guidelines for media on the safe reporting of suicide. These have been released and are available at: www.health.govt.nz/publication/media-guidelines-reporting-suicide • Delivered guidelines for how to talk safely about suicide on social media via two social media campaigns that targeted young people. These campaigns reached over 400,000 young people. • Funded 25 community grants aimed at supporting the mental health and wellbeing of young people in their local area. The majority of these grants went to organisations in Auckland and Northland, which were particularly impacted by COVID-19 in the second half of 2021.
Te Puni Kōkiri	<ul style="list-style-type: none"> • Continuing to support Rangatahi Manawaroa (formerly the Rangatahi Suicide Prevention Fund) which funds projects and initiatives that improve rangatahi capacity to reduce risk factors for suicide and enhance the protective factors in their lives. Rangatahi Manawaroa has supported more than 140 projects through the programme since 2017.

Action area 6: Prevention – Responding to suicidal distress

Being able to recognise early signs of distress or that someone is thinking about suicide or self-harm and having the confidence to talk to that person about their thoughts, can open a door to early intervention and support before the person becomes more distressed.

Initiatives that have helped educate New Zealanders about suicide and support people who may be at risk of suicide over the past year include:

- the Suicide Prevention Office commissioned the Family and Whānau Suicide Prevention Information service to produce two new resources: Manawa for adults, and Ko Wai Au for young people, to help people create a support plan for when they are feeling suicidal. The Manawa intervention has been developed into an app that is being used in various services
- the Suicide Prevention Office also established a second round of the Māori and Pacific Suicide Prevention Community Funds, which opened for applications in 2021. During this second round there were 15 successful Pasifika organisations and community groups and 66 successful recipients for the Māori Suicide Prevention Community Fund. Funded initiatives include ones focused on developing and implementing suicide prevention and postvention resources tailored to Māori and Pacific communities. These resources will help support these communities to recognise suicidal distress and support people before they become more distressed, as well as supporting mental wellbeing
- a third round of the Māori and Pacific Suicide Prevention Community Fund have both been launched in April 2022
- the Ministry of Health is working with Rainbow communities to develop guidance on inclusive suicide prevention practices and has commissioned the provision of Rainbow competency training for the mental health and addictions workforce, which began delivering in June 2021
- the Ministry of Education is enhancing The Preventing and Responding to Suicide: Resource kit for schools to better support schools' responses to suicidal behaviours
- the Ministry of Education is partnering with Te Rau Ora to understand learner needs in relation to self-harm and suicidal behaviours in Māori medium settings. Responses and resources will be co-created for Māori medium settings following engagement

- Ara Poutama Aotearoa – Department of Corrections have established a Suicide Prevention and Postvention Advisory Group and have developed a Suicide Prevention and Postvention Action Plan. The Plan outlines specific steps that will be taken over the next three years to reduce suicide.

Action area 7: Intervention – Responding to suicidal behaviour

Having timely access to appropriate, culturally-responsive, evidence-informed care is critical when someone's safety is at risk. Several initiatives are underway to improve responses to suicidal behaviour and help ensure people can access the support they need, when and where they need it.

- Ara Poutama Aotearoa – Department of Corrections has expanded delivery of specialist mental health services to four additional prison sites, resulting in seven specialist teams operating nationally. These new multi-disciplinary teams provide clinical and cultural support for individuals experiencing moderate-severe mental distress and/or suicidal ideation. In addition, new mental health-focused clinical nurse specialist roles are available nationally, as well as enhanced support for addiction-related issues.
- The Ministry of Health has begun work to co-design with rangatahi crisis interventions for rangatahi experiencing suicidal behaviour.
- Oranga Tamariki contracts Clinical Advisory Services Aotearoa to provide the Towards Wellbeing (TWB) Programme around suicide prevention of young people known to Oranga Tamariki and at risk of suicide. Oranga Tamariki has approximately 600 tamariki and rangatahi involved with TWB at any one time, all of whom have an increased suicide risk.

Alongside support for people experiencing suicidal behaviour, it is also important to provide support earlier before needs escalate. The Ministry of Health is progressing work to expand access to and choice of primary mental health and addiction services, increase school-based health services and supports in tertiary institutions, enhance alcohol and other drug services, and strengthen specialist services and crisis responses. Highlights include:

- more than 320,000 sessions have been delivered by new and expanded primary mental health and addiction services across integrated general practices, kaupapa Māori, pacific, rainbow, and youth-specific services. On average 20,000 sessions are provided each month, and this number is growing as the rollout continues
- agreements have been signed with four universities and Te Pūkenga for new and expanded primary mental health and addiction supports for tertiary students. Agreements are being progressed for the remaining universities and the three wānanga
- work by the Ministry of Health, New Zealand Police, and district health boards to enhance support for people experiencing a mental health crisis. This includes the mental health co-response team in Wellington and Te Tāwharau Crisis Hub established in Hawke's Bay, which has delivered 480 peer contacts during quarter 2 of 2021/22
- the Ministry of Health is currently developing the Mental Health and Addiction System and Services Framework, with significant input from the Suicide Prevention Office to ensure there is a strong focus on suicide prevention. The Framework sets the expectations for what mental health and addiction services will be available to individuals, whānau and families and the how services should be organised locally, regionally and nationally with a 10-year view.

Action area 8: Postvention – Supporting individuals, whānau and families, and communities after a suicide

The primary purpose of providing support after a suicide (postvention) is to support those impacted and prevent further suicidal behaviour. People who have lost someone are at increased risk of self-harm and suicide and therefore it is important to provide robust postvention support.

Progress made in this area includes:

- formal launch of the free national suicide bereaved response service, Aoake te Rā, was in September 2021. There is now at least one provider in every region across the motu and this network of providers continues to grow. In quarter 2 of 2021/22, 147 referrals were connected to bereavement support and 395 bereavement support sessions were delivered
- beginning the review of the processes for investigating deaths by suicide. This collaborative process includes input from the Suicide Prevention Office, the Ministry of Justice, New Zealand Police, Office of the Chief Coroner, Health Quality and Safety Commission, and representatives of bereaved families and whānau, as well as Te Ao Māori and tikanga oversight. The review is expected to be completed by the end of 2022 and will help inform what changes may be needed to the process for investigating deaths by suicide
- the Suicide Prevention Office commissioned two resources related to funerals after a suicide death:
 - 'Funerals in Aotearoa after a death by suicide: Guidance for whānau, kaumātua, funeral directors, celebrants and faith leaders'. This is available at: <https://mentalhealth.org.nz/resources/resource/funerals-in-aotearoa-after-a-death-by-suicide-for-service-providers>
 - 'Funerals in Aotearoa after a death by suicide: guidance for bereaved whānau and those supporting them'. This is available at: <https://mentalhealth.org.nz/resources/resource/funerals-in-aotearoa-after-a-death-by-suicide-for-bereaved-whanau>
- continuing to improve the Coronial Suicide Data Sharing Service as a result of the review of this service conducted during 2020. This includes improved data capture and collaboration with agencies who can use these data to inform suicide prevention efforts. This service helps ensure the right people (eg, district health board suicide prevention coordinators) have timely information about suspected suicide deaths so that support can be provided to the loved ones of the person who died.