

**November 2024**



**Suicide Prevention  
Australia**

# **2024 NSW Drug Summit Consultation**

**Submission**

**For general enquiries:**

02 9262 1130 | [policy@suicidepreventionaust.org](mailto:policy@suicidepreventionaust.org) | [www.suicidepreventionaust.org](http://www.suicidepreventionaust.org)

Imagine a world without suicide

## Introduction

Suicide Prevention Australia welcomes the opportunity to provide feedback and inform discussions at the 2024 NSW Drug Summit (Drug Summit).

Suicide Prevention Australia is the national peak body for the suicide prevention sector. We have over 360 members representing more than 140,000 employees, workers, and volunteers across Australia. We provide a collective voice for service providers, practitioners, researchers, local collaboratives, and people with lived experience.

Sadly, there is a significant body of research which demonstrates a strong link between drug-related harms and suicide.<sup>1,2,3</sup> The research shows that people who engage in harmful drug use are significantly more likely to die by suicide compared to the general population.<sup>4</sup> In particular, people who use opioids are approximately fourteen times more likely to die by suicide compared to their peers.<sup>5,6,7</sup> Up to 40% of people who are living with substance dependence and seek treatment, report a previous suicide attempt(s).<sup>8</sup>

Drugs can be used as a means to die by suicide, or to decrease fears and inhibitions prior to attempting suicide.<sup>9,10</sup> The severity of drug use can also play a role in increased risk of suicide.<sup>11</sup> Chronic and/or acute drug use is common among people who have attempted suicide or who have died by suicide.<sup>12</sup>

In addition, substance use can severely impact families and can have ongoing negative intergenerational effects.<sup>13</sup> Children of parent(s) who engage in drug use are vulnerable to poor emotional and behavioural outcomes and are more likely to report adverse childhood experiences such as neglect or child maltreatment.<sup>14,15</sup> Children of parents who engage in harmful drug use are more likely to repeat the cycle and develop problematic drug use themselves compared to the general community.<sup>16</sup> Worryingly, these consequences can significantly heighten the risk of suicide.<sup>17,18</sup>

As well as international research, there is also Australian data which shows that people who use drugs are at increased risk of suicide. In 2019, it was identified that half of all suicides in Australia were related to four modifiable risk factors including illicit drug use.<sup>19</sup> It has also been found among Australians who misuse drugs aged 16-85 that nearly 60% have a 12-month mental disorder.<sup>20</sup> This is concerning given that all mental disorders have been linked to an increased risk of suicide.<sup>21,22,</sup>

There is also an overlap between drug-related harms and the risk of suicide, considering that many of the socio-economic and environmental determinants of suicide such as experiencing loneliness, financial distress and adverse childhood experiences can exacerbate and increase the risk of engaging in harmful drug use.<sup>23,24,25</sup>

Further, there is a clear relationship between over-the-counter drug use and suicide, with analgesics and antihistamine overdoses frequently linked to suicide attempts and suicide.<sup>26</sup> Within Australia, prescribed opioid use is a recognised risk factor for suicide and worryingly, use has increased significantly in the past three decades.<sup>27,28,29</sup>

Given that drug-related harms can increase the risk of suicide we are pleased that the NSW Government is holding the Drug Summit to improve outcomes for individuals, families and the community. It is critical that suicide prevention is considered and prioritised in discussions to reduce distress in the community and to help prevent further suicide deaths.

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Accordingly, this submission will address the following issues:

- A diverse range of people with lived and living experience of suicide should be invited to attend;
- The development of a governance framework so that suicide prevention is prioritised in all NSW drug-related policies, strategies and services should be a focus of discussions;
- Evidence-based recommendations for government action to address drug-related harms and suicide should be considered; and
- The issue of drug-induced suicides and underreporting should be discussed.

## Summary of Recommendations

1. The NSW Ministry of Health should ensure that a diverse range of people with lived and living experience of suicide are invited to attend the 2024 NSW Drug Summit to share knowledge and provide insight to develop practical solutions to prevent drug-related harms and suicide so that that all drug-related policies, strategies and services in NSW are fit for purpose.
2. The NSW Ministry of Health include in discussions at the 2024 NSW Drug Summit the development of an appropriate governance structure which supports that the public and private sector work together to ensure that suicide prevention is prioritised in drug-related policies, strategies and services.
3. The NSW Ministry of Health should ensure that the below items are discussed at the 2024 NSW Drug Summit:
  - 3.1 How to integrate screening, assessment, and treatment for drug use into existing suicide prevention services (including but not limited to psychosocial interventions, aftercare and postvention);
  - 3.2 The need for suicide prevention education and training for frontline staff in the drug-related sector to identify people at risk of suicide;
  - 3.3 The utility of targeted suicide prevention training for members of the community who may encounter people with high levels of drug use;
  - 3.4 How to ensure that drug use interventions and education is targeted at young people on the relationship of drug-related harms and suicidality; and
  - 3.5 The need to commission further research on the efficacy of drug-related interventions in preventing suicidal thoughts, attempts, and deaths, with focus given to priority populations who may benefit from targeted approaches.
4. The NSW Ministry of Health should ensure that the below items are discussed at the 2024 NSW Drug Summit:
  - 4.1 The prevention of drug overdose death by suicide among people aged 60 and over who are born in Australia; and
  - 4.2 The development of a framework and coding system to improve the identification of drug-induced suicides.

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## People with lived and living experience of suicide should be invited to attend the Drug Summit

Firstly, we note that attendance at the Drug Summit is by invitation only, and that participants will represent a broad range of interests and perspectives. Given the well-established link between drug-related harms and suicide, it is vital that a diverse range of people with lived and living experience of suicide are invited to attend the Drug Summit and are provided with a platform to safely and meaningfully contribute to discussions.

This will help ensure that lived experience knowledge and insights inform the development of all drug-related policies, strategies and services in NSW. Without adequate representation at the Drug Summit, suicide prevention may be left out of the conversation and not adequately prioritised. Suicide Prevention Australia has a number of member organisations that are lived experience led, we would be happy to facilitate contact with those organisations if it would be helpful in ensuring diverse lived experience representation.

### Recommendation

1. The NSW Ministry of Health should ensure that a diverse range of people with lived and living experience of suicide are invited to attend the 2024 NSW Drug Summit to share knowledge and provide insight to develop practical solutions to prevent drug-related harms and suicide so that that all drug-related policies, strategies and services in NSW are fit for purpose.

## Include in discussions the establishment of a governance framework to improve collaboration and interlinkages between the drug-related and suicide prevention sector

We refer the NSW Ministry of Health to an important policy document which addresses the link between drug-related harms and suicide. A brief overview and the key points of the policy document is provided below. The document is attached to the submission and can be downloaded here:

- [Background Paper on the Socio-economic and Environmental Determinants of Suicide](#)

Extensive research has established that there are a wide range of factors, outside of mental illness, such as the harms of drugs which can play a role in suicide. The background paper on the socio-economic and environmental determinants of suicide contains an overview of the international and Australian research linking these factors with suicide. A summary of the evidence which shows an association between the harms of drugs and suicide can be found on page 19.

To develop the background paper and to better understand the link between drug use and suicide, we undertook extensive consultations with our members, people with lived experience and related organisations. During consultations it was emphasised that to improve outcomes for individuals and their families, suicide prevention should be prioritised and incorporated into all NSW drug-related policies, strategies and services.

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We recommend that Drug Summit discussions focus on the development of a governance structure which supports collaboration and uniformity between jurisdictions, government portfolios, the National Suicide Prevention Office, relevant strategies and private service sector so that suicide prevention is considered and addressed in all drug-related policies. Further, it is critical that this governance structure works to improve interlinkages between drug-related services and suicide prevention services to ensure that people at risk of suicide are identified and referred to the appropriate services.

### Recommendation

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2. The NSW Ministry of Health include in discussions at the 2024 NSW Drug Summit the development of an appropriate governance structure which supports that the public and private sector work together to ensure that suicide prevention is prioritised in drug-related policies, strategies and services.
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## Discuss the evidence-based recommendations for government action identified in the Closing the Loop Edition on Alcohol and Other Drugs in Suicidality at the Drug Summit

We refer the NSW Ministry of Health to a second policy document which addresses the link between drug-related harms and suicide. The document is attached to the submission and can be downloaded here:

- [Closing the Loop Edition on Alcohol and Other Drugs in Suicidality](#)

The Closing the Loop Edition on Alcohol and Other Drugs in Suicidality summarises a rapid review of evidence on the role of AOD as a risk factor for suicidality and review of effective interventions in reducing suicide attempts and deaths. The rapid review was undertaken by Australian researchers to synthesise the evidence base and provide recommendations to inform the National Suicide Prevention Adviser's advice to the Prime Minister in 2020.

The policy document is designed to 'close the loop' between research and policy by translating research evidence into policy directions. It contains several evidence-based recommendations for government action which should be considered at the Drug Summit to address drug-related harms and to prevent suicide. These recommendations were developed to address AOD use but have been tailored accordingly, so that they can inform Drug Summit discussions and are outlined below.

### Recommendations

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3. NSW Ministry of Health should ensure that the below items are discussed at the 2024 NSW Drug Summit:
    - 3.1 How to integrate screening, assessment, and treatment for drug use into existing suicide prevention services (including but not limited to
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- psychosocial interventions, aftercare services<sup>1</sup> and postvention services)<sup>2</sup>;
- 3.2 The need for suicide prevention education and training for frontline staff in the drug-related sector to identify people at risk of suicide;
  - 3.3 The utility of targeted suicide prevention training for members of the community who may encounter people with high levels of drug use;
  - 3.4 How to ensure that drug use interventions and education is targeted at young people on the relationship of drug-related harms and suicidality; and
  - 3.5 The need to commission further research on the efficacy of drug-related interventions in preventing suicidal thoughts, attempts, and deaths, with focus given to priority populations who may benefit from targeted approaches.
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## Address the issue of drug-induced suicides and underreporting in Drug Summit discussions

In addition, the data shows that the number of drug-induced suicides in Australia has increased by nearly 50% from 2002 to 2022.<sup>30</sup> In particular, the available data shows that there are distinct demographic patterns, and that people aged 60 and above account for nearly 40% of all drug-induced suicides in 2022 and that risk is higher among people born in Australia.<sup>31</sup> It is critical that Drug Summit discussions also focus on how to prevent further drug-induced suicides among this at-risk cohort.

However, due to the complexity of determining whether a drug overdose death was due to suicide, it is likely that drug-induced suicides may be underreported.<sup>32</sup> There is opportunity to discuss at the Drug Summit how to improve coding of suicide deaths to better identify people who have died by suicide due to intentional drug overdose. Access to timely and accurate data is important to suicide prevention so it is vital that better data is captured to address the underreporting of drug overdose deaths due to suicide.

### Recommendations

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4. The NSW Ministry of Health should ensure that the below items are discussed at the 2024 NSW Drug Summit:
    - 4.1 The prevention of drug overdose death by suicide among people aged 60 and over who are born in Australia; and
    - 4.2 The development of a framework and coding system to improve the identification of drug-induced suicides.
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<sup>1</sup> Aftercare services are designed to increase access to and engagement with supports to prevent future suicidal behaviour during the critical period immediately following a suicide attempt. These services have traditionally been designed to be implemented directly after a presentation to hospital following a suicide attempt.

<sup>2</sup> Postvention services help and support people bereaved or impacted by suicide. Postvention is designed to destigmatise the tragedy of suicide, assist with the grief-recovering process, and serve as a secondary prevention effort to minimise the risk of subsequent suicides due to complicated grief, contagion, or unresolved trauma.

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## Conclusion

We applaud the NSW Government's decision to hold the Drug Summit to improve outcomes for individuals, families and communities impacted by drugs. And we urge the NSW Ministry of Health, as part of this important work, to recognise the well-established link between the harms of drugs and suicide and to ensure that discussions prioritise suicide prevention. We also ask that the NSW Ministry of Health ensure that a diverse range of people with lived and living experience of suicide are invited to attend the Drug Summit so the views of people with lived and living experience of suicide are heard and adequately represented.

### For more information please contact:

Anne Leslie  
Director of Policy  
Suicide Prevention Australia  
[annel@suicidepreventionaust.org](mailto:annel@suicidepreventionaust.org)

## Acknowledgements Statement

Suicide Prevention Australia acknowledges the unique and important understanding provided by people with lived and living experience. This knowledge and insight is critical in all aspects of suicide prevention policy, practice and research. We drew from previous work which was developed with our members and people with lived experience to prepare this submission.

As the national peak body for suicide prevention, our members are central to all that we do. Advice from our members, including the largest and many of the smallest organisations working in suicide prevention, as well as practitioners, researchers and community leaders is key to the development of our policy positions. Suicide Prevention Australia thanks all involved in the development of this submission.

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**There are crisis services available 24/7 if you or someone you know is in distress**

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**Lifeline: 13 11 14**      **Standby Support After Suicide: 1300 727 247**  
[www.lifeline.org.au](http://www.lifeline.org.au)      [www.standbysupport.com.au](http://www.standbysupport.com.au)

**Suicide Call Back Service:** \_\_\_\_\_  
**1300 659 467**      [www.suicidecallbackservice.org.au](http://www.suicidecallbackservice.org.au)

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