

The Little Red Threat Book



A community response to suicide as a threat

Little Red Threat Book
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Suicidal acts are frantic attempts at improving one's life, not ending it.

D.J. Mayo, Psychologist

Suicide may represent the solution to a problem, or a way of achieving a particular outcome.

Diego De Leo, Lecturer and Psychologist

People choose suicidal acts when they see them as the best way of ending an unbearable situation or getting the changes they desire.

World Health Organisation

Our words can be the bridge that help someone walk back to safety.

Central Australian Suicide Prevention Forum participant
2019



Image: Nicole Pietsch

Acknowledgements

We acknowledge that this book has been produced, and the community workshops that informed this book were held, on Arrernte country. We acknowledge the sustained connection of First Nations peoples to the lands on which we live, work and meet together.

We acknowledge the country, the ancestors, the custodians and caretakers past, present and emerging, and the networks of people who continue to maintain culture, country, language and kinship.

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Trigger Warning and Remembering Care

We want to let you know that this booklet is about providing care and support in situations where there's a risk of suicide.

In this booklet, we're sharing insights and understandings about situations of risk that flare up when someone says they will kill themselves unless they get what they want or need from others.

Sometimes, the demands people make in these situations can put others in a difficult position, where they're torn between supporting someone else's safety or looking after their own wellbeing.

This resource is about ways to offer care and support. But even though it's about care, this topic can be triggering and upsetting. It can remind us of other sad stories and losses

You might feel dizzy, nauseous or short of breath. You might feel angry, hurt or teary. Or you might feel other kinds of emotional or physical discomfort. If this happens know you'll be ok. You just need time and space to heal some more.

If this booklet brings up any distress for you, reach out. Let someone know what you're going through. Your experience, your feelings and your wellbeing matter, and you don't have to face it alone.

Go to a space that feels safe ... connect with the people you feel safe with, the things you do that soothe you, the places that are healing to be in and the ideas and beliefs that you trust. ... tell people if you want to talk or just sit down quietly together. ... Support is one of the most important things along the way.

(Little Red Threat Booklet, 2007 workshop)

In the case of an emergency or if a life is in danger call 000

Support phone lines and websites:

Lifeline:

Call 13 11 14

Text (between 7:00pm – midnight AEST): 0477 13 11 14

<https://www.lifeline.org.au/>

Suicide Call Back Service

Call 1300 659 467

<https://www.suicidecallbackservice.org.au/>

Beyond Blue

Call 1300 224 636

<https://www.beyondblue.org.au/>

National Indigenous Critical Support Response Service (NICRS)

Supports individuals, families, and communities affected by
suicide or other significant trauma

Call 1800 805 801

<https://thirrili.com.au/nicrs>

Where Did This Book Come From?

In 2007 and again in 2019, people from communities and service organisations around Central Australia came together to share experiences and knowledge about the issue of suicide being used as a threat.

We wanted to:

- respond to community concerns of the increase in people threatening suicide as a tactic to get what they want
- tackle a problem that has felt difficult, confusing and dangerous for many people
- find a clear process to guide us by talking about our understandings and ways people are already supporting health, healing and strength in families and communities
- develop a resource for service providers and community members who experience these situations

The first community workshop was held in November 2007, coordinated by The Life Promotion Program, as part of the Mental Health Association of Central Australia.

From this meeting, the first draft of the Little Red Threat Book was written. The book has been a valuable resource over the last decade in supporting community members with this challenging issue.

The Central Australian Life Promotion Network (LPN) was established in 2017 with assistance from Wesley Lifeforce.

In 2019 the LPN received funding from Northern Territory Government to organise, host and facilitate a Suicide Prevention Forum in Central Australia that would inform a revised version of the Little Red Threat Book. Additional funding was also received from the National Indigenous Australians Agency.

The Forum was held in August 2019 at the Olive Pink Botanic Garden in Alice Springs. A range of organisations and community members came together and heard about the great work of some programs in suicide prevention, discussed the issue of suicide as a threat and how people involved in this situation can be supported.

The learnings from these discussions, along with the learnings from the first workshop in 2007, have informed this booklet.

Suicide as a threat is a complex issue and this booklet does not have all the answers, but we offer this resource in the hope that it will help people be more confident to provide the appropriate support in these difficult situations.

We're all sitting down together to listen to each other's stories and look for insight into this. It's good to hear that we're not the only ones struggling with this problem, and it's great to be in a room full of people who are all taking this seriously.

[A group at the 2007 workshop]



Image: Suicide Prevention Forum Participants, Alice Springs 2019

Situations Of Risk

When a person says they will take their own life unless someone else does something, we have a complex situation of suicidal risk.

This situation involves at least two people (the person saying they'll take their own life and the one being asked to do something), but the situation can often involve several people or whole communities.

As well as suicidal risk in the situation, there might be a range of risks to others if the person is using their life to bargain for something compromising, violent or otherwise unsafe.

The challenge is to find ways to maintain trusting relationships but also keep clear boundaries, offer meaningful support whilst also ensuring everyone's safety.

The dilemma people experience is that it's rarely possible to do all these things at once: often at least one element feels compromised.

The person stating they will take their own life is sometimes labelled as attention-seeking, manipulative, violent, abusive or controlling.

But we can also understand some of these behaviours as symptoms of trauma and challenging life circumstances, symptoms of a much larger situation where life has become excessively painful, confusing, disempowering, difficult or unjust.

When people describe experiences of this kind of suicidal risk they often talk about 'flare-ups' and 'explosions', 'impulsivity' and 'shock'.

They also talk about frequency. These behaviours seem to happen a lot, so much that people are worried kids are learning it's a 'normal' way to try and get things in life.

We hear about young people throwing the words that they'll kill themselves defiantly in people's faces or slapping them down like a dare, to see what happens next, or even using it casually, as if threatening to take your own life is a normal thing.

Many people are worried that the pattern is spreading and generations are losing touch with healthier ways to cope with life, express needs, deal with trauma and reach out for connection.

The strain of living in this unstable world can wear people out, tear at relationships and damage the safety of those trying to care. People get run down. They get tired. Their health suffers. Everyone needs support.

For seemingly small demands, lives are put in the balance and people who care are backed into corners of compromising situations. People do not know if the person threatening suicide will act on the threat. It is a very stressful situation.

Over time, and often as a way of dealing with the stress, it can become harder and harder to take the threats seriously or find the will to offer support.

In the workshops participants expressed an understanding that people making suicidal threats are often coming from a place of panic, intergenerational ache and rage, confusion and deep unmet needs.

People who threaten suicide can be impacted by:

- trauma (including complex – or relational – trauma, intergenerational trauma, vicarious trauma and incidents

of traumatic experiences)

- poverty
- the stress and toll of significant health challenges to themselves or significant family members
- constant sorry business
- a sense of disrupted belonging from removal or separation from family, culture, language or country
- lack of opportunities for meaningful and culturally appropriate work
- overrepresentation of Aboriginal people in prisons
- unsafe or overcrowded homes
- unfair or harmful treatment by police, institutions or everyday services
- witnessing or experiencing direct violence
- systemic disempowerment (including the effects of colonialism and institutionalised racism)
- attempts to cope with neural processing challenges (such as caused by injury, substance abuse, layers of complex trauma or fetal alcohol syndrome disorder)
- oppressive Government legislation
- education that denies or fails to integrate first languages or cohesive cultural meaning
- lack of opportunities to learn how to safely express needs and have them met

There's compassion for these issues and experiences, an understanding of people's complex needs and the desire to see these needs met. There's also a desire to support pathways to different behaviours, safe ones: behaviours that move towards healing rather than harm.

Quite often these situations cause distress to people in relationships of care and responsibility like partners, parents, grandparents, aunts, uncles, youth workers, teachers or caregivers.

Of course, these people want to provide help, but what if the person saying they will kill themselves is asking for something that puts others at risk too? Or what if they

are asking for something others can't actually give? Or for something that compromises people in other ways?

People who threaten suicide can:

- use emotional blackmail
- ask people to compromise themselves in some way
- ask people to do illegal or dangerous things, or do things they believe might cause harm to others or to relationships
- ask people for money, their car or to give beyond their capacity
- ask people to do things that damage their sense of safety, integrity or wholeness

The people seeking to provide care in these situations can also have complex needs and their own life pressures, which can include cultural, financial, physical or legal challenges.

How do they manage these challenges and support the person at the same time?

In these situations of suicidal risk we want to express care, support collective safety and find ways to meet needs without reinforcing unsafe behaviours.

What Do We Worry For?

Recognising warning signs for suicidal risk.

The earlier we notice the signs, the more chance we have of responding in time to keep people safe.

The workshops explored what signs might indicated that someone was not in a good mental space or could be at risk of suicide.

A person showing any combination of these signs can be at risk. Sometimes intuition – a feeling you have – can be your best guide. Go with your gut feeling.

Important: These are signs of risk, pain, stress, distress, being overwhelmed or experiencing trauma. Even if the person hasn't mentioned killing themselves, it is important that people showing these signs gets safe support and follow-up care.

Warning bells

Being on 'red alert' a lot of the time • Being jumpy, edgy and easily startled • Feeling aches and pains: 'I feel weak' • Muscle tension • Getting angry or reactive to little things • Making random loud noises, yelling or laughing or shouting in disruptive ways • Hitting out at things, bumping into people or things, 'lashing out' with their bodies into the space • Changes in social media: like they might seem more desperate, threatening and reactive or making less sense • Guilt, shame or self-blame or making others feel guilty, blaming others or making others feel shame • Too much grog, ganja or other substance abuse • Talking 'silly' (in ways like 'aren't like them' or seem unsafe to themselves or culture or other relationships) • Doing risky things • A lot of 'flat' or 'blank' facial expressions • Talking about being alienated, rejected or alone • Oversensitive

mistrust • Intrusive, dangerous thoughts • Over-suspicious of betrayal • Headaches, stomach problems, chest pain that seem to flare up with stress or emotional triggers (still get these checked with a health provider) • Not remembering things they did or said • Not believing other people • Sudden mood swings • Getting confused about even simple things • Having difficulty concentrating • Having difficulty really hearing or seeing what's going on • Needing to be away from people • Disrupting groups • Getting unsettled in social buzz • Seeming disconnected or numb • Looking 'locked up', like they can't move or speak • Not hearing things properly, not responding • Seeming 'shut down' or clamming right up

High risk signs

Going off alone, especially after reacting to something • Can't calm down • Can't get out of a 'clammed up' state

Emergency signs

Having a way to kill themselves or harm themselves or others • Doing anything that puts themselves or others at risk physically • Physical harm is actually happening

Responding To Risk: Care Guidelines

- Call on a safety network.
- Be a safe person: stay calm and be a caring presence.
- Create safe spaces.
- Support safe choices.
- Keep communicating clearly, simply and calmly.
- Keep your boundaries.
- Don't let them go off alone until they are calm again.
- Make time to follow up in the future.

These Care Guidelines are for any warning signs and each guideline will be explored in further detail in the coming pages.

But if it is high risk situation or an emergency call 000 or seek immediate professional help which may include the local clinic or local police.

High risk or emergency is when someone's life is in direct physical danger.



Image: Suicide Story presentation, Suicide Prevention Forum, 2019

Call On A Safety Network

When there is a situation of risk it is important to find other safe people to provide support until things calm down. It is hard to manage stressful and complex situations alone.

In a situation of risk, we need to:

- Call on others for help.
- Try make sure there is someone to calmly be with each person at risk.
- Guide or direct helpers to be a calm, caring presence for the people you know are at risk and to look out for others who might be.
- If you are one of the people at risk, call on others for help for yourself as well as for the other people you know are at risk.
- If you can't get others to help or if you have to wait for others to arrive:
 - do your best to be with the person most at risk first
 - direct others to safe spaces to wait
 - check in with others at risk as soon as you can
 - connect others at risk to help when it becomes possible

Important: If it is high risk situation or an emergency call 000 or seek immediate professional help which may include the local clinic or local police.

Who do we call on?

People in the workshops gave a description of 'the kind of person who can help'. They described it as being anyone who can:

- stay emotionally grounded
- create a feeling of safety
- acknowledge distress but not give in to blackmail

- stay safe and calm when there is physical risk
- show care while not giving in to demands
- listen for underlying needs and ask safely about those needs
- believe the needs are real
- let go of their own reactions and stay present with the person

Who might these people be?

Examples from the workshops:

Family (e.g Aunties or Uncles) • Work mates • Friends • Emergency services • Community elders • Counsellors or social workers • Night Patrol • Mentors / peer support • Helplines • Traditional healers • People in clubs and interest groups (like football groups, dance groups, music groups, cooking groups) • SEWB / Health clinics • GPs and Nurses • Community Services • Art Centre Staff • Teachers • Youth workers

Question: Who could you call on in your community?

Make a list and ask people if they are happy to be called on when someone is showing warning signs and there is a situation of risk. This exercise is highly suggested if you are working for a service provider in a community/place you are unfamiliar with or new to.

Be A Safe Person: Stay Calm And Be A Caring Presence

People need to know there is someone with them and supporting them in their distress.

The way we approach someone and how we talk to them when they are distressed can make an enormous difference. When someone behaves in erratic, impulsive, and dangerous ways our instinct can be to react back: become loud, forceful in tone, commanding with threats or punishments.

But these responses can heighten distress, lead to struggles for power and increase the conflict and risk to those present.

This is why 'being calm is a radical act' [*Matthew Haig, Reasons to Stay Alive*].

Being calm and present helps healing. It gives space for a person's distress to be received and released instead of pushed against and increased. By modeling a calm and regulated state in ourselves, we can help someone come to a regulated state in themselves.

Being a safe person is the best way to help someone come to a safe mental place.

Being understanding and having compassion

During the forum groups looked at how it might feel being the person at risk:

Scary, lost, ignored (if not picked up or if giving unclear signs) • Shame • Overwhelming • Can't put feelings into words • Can't express. Where to start? Don't know. Too much stress to feel what we really want • Don't believe

we're worth it. Not feeling good enough. Not feeling like people care • Fear of being dismissed, not taken seriously • Fear of not being believed about the pain they are experiencing • Confused themselves about why they might be reacting that way • Pride makes it hard to back down • Feels pointless if resources aren't there or responses have been unhelpful in the past • Can feel like there are not the right conditions: no privacy, no trust, no confidentiality, no safety, other people too stressed as well • Big swells of emotion: anger in yourself or at others makes it hard to get calm • Feeling like you are being a burden, like people are better off without you • Hard when other people are also stressed out or there aren't actually resources to help you • Fear people's response, feeling shocked or more withdrawn if it's a reactive response • Fear of being judged or rejected or panicked that something uncomfortable, shameful or painful is being revealed

What not to do

The groups looked at things that can make it worse:

Misunderstanding • Invalidating • Not feeling heard • Demands, commands, threats, coercion, punishment • Feeling isolated • Feeling ridiculed • Wronged • Being reacted to • Being shamed or blamed • Getting pushed away, not welcomed • The needs or request being minimised or dismissed • Not being taken seriously • Tone of voice (patronising, sarcastic, dismissive, gruff, angry, sharp)

How might the person at risk feel if the helper responds unsafely

Rage • Frustration • Resentful • Shock • Rejected • Shame • Disdain • Wanting revenge • Withdrawing • Lying to try and deflect or hide the situation • Saying 'It wasn't me!' • Losing it! • Becoming manipulative • Using

blackmail • Helplessness • Overwhelmed • Angry • Scared
• Out of control • Broken • Not seen, heard or noticed •
Disappointed • Left out, excluded • Attacked • Powerless •
Suffering

What helps

The groups shared what they thought could help people be a calm, caring presence:

- *One of the old men compared support to being 'the eye of the storm' for someone: the calm and centered place. 'I am with you. I will go into the eye of the storm with you. I will be the calm while these feelings rage. I am with you. I am staying until the storm is over. Stay with me.'*
- *'Let go of your own reactions. Don't get reactive or take things personally.'*
- *'Be real. Be authentic. Give genuine connection.'*
- *'Give them safe, trustworthy attention. Hold them with your attention and presence.'*
- *'You might say things like: I see you. I hear you. I am with you. I believe you. I am here. I know you can survive.'*
- *'Don't be loud or cranky. Use a warm voice. Use a reassuring voice.'*
- *'Discipline is not the right way to treat someone in distress'*
- *'They need someone with them, not to be sent away.'*
- *'Check in, like: 'Is this what you're feeling? Is this what you're saying?' Don't put your own ideas over the top.'*
- *'Help the person feel less ashamed. Help them feel less confused.'*
- *'Reassure people that their experience of being overwhelmed and alarmed is normal when there's stress in life and something triggers us into alarm'*
- *'Remind people that they are worthy – and capable – of maintaining safe relationships, even under stress'*

- *'Validate them. Believe them.'*
- *'Let them know they are not weak or crazy. Help them understand what's happening for them.'*
- *'Listening to find the threads of meaning: the connections to needs and hurts that are being expressed. Let them know they are worth being there for.'*
- *'Slow down. You really have to slow down. Be really aware. Don't let panic take over. Breathe and use your skills with care and confidence.'*
- *'Come alongside people, not confronting. Sit beside them, not opposite them.'*
- *'Be close. Distract or comfort them.'*
- *'If they can feel you with them, sometimes sitting in silence together is powerful.'*
- *'Remember you are connected to country. Country and the ancestors can help you be calm. They can help you know what to say.'*
- *'No-one calms down by being told "Calm Down!" Don't be bossy with the person. Don't judge people for being triggered or having big reactions about things. Even if it doesn't make sense to you, their feelings are real feelings, and behind their behaviour is real needs. If someone is stressed, unsafe or at risk, believe them and just be there for them until they calm down. You can help them make sense of it later.'*
- *'Be brave. Be patient. Be really patient.'*
- *'Don't judge yourself or beat yourself up. You are human too. If you make a mistake, acknowledge it and come back to calm, so the person knows they don't have to look after you or worry about your stress. It shows you are aware of yourself and looking after yourself. The most important thing is just being there.'*
- *'If you are at risk in the situation as well, it is NOT guilty or shameful to step back and ask someone else to help: it can be the safest thing to do. Call for more help.'*

What helps

The groups shared how it might feel to have a positive experience of support during distress:

- Relief: a release of pressure
- Can feel strength: held by others
- Feel cared for
- Start to see the options
- Helps clear the mess of worry, stress and concern
- Filled up
- More understanding into ourselves
- Feeling the courage to come back to ourselves and others
- Connected
- Loved
- At home
- Grounded
- Supported
- Strong



Image: Men's group, Suicide Prevention Forum, 2019

Create Safe Spaces

We cannot come to a calm state until we feel safe. The company of safe people in safe spaces helps a person get through the waves of risk or emotional pain. With safety, trust, connection, patience and attention you support an environment where someone can calm down and recalibrate.

A safe space:

- has safe people in it, by the person's side
- has safe language in it
- is led by safe interactions
- keeps dangerous interactions and dangerous things at bay
- feels safe to the person at risk
- supports the person to make safe choices
- checks in regularly with the person at risk about what they're experiencing and what they need

Examples from the workshops:

- *'When I saw he was in pain, I knew having people around him would make him more crazy, so I kept people away. I stayed calm. I made it safe around him.'* [from someone sharing a lived experience during the workshop]
- *'Help stop the circuit, like break the cycle. Whatever arguments were happening, they are too dangerous right now. People need to go their separate ways. Whatever is important to talk about can wait till everyone is calmer again, like the next day, or in the morning. Everyone's life and safety are more important than things and arguments.'* [workshop talks]
- *Make sure there is space around them, not people crowding or yelling what to do. Only calm people close-by.* [workshop notes]

Make the space safe

- Check for things that might be distressing, like sounds or lights. Check if they want you to change or stop music or go to a quiet place.
- Keep dangerous things away or guide them to put them down.
- Get shelter, safe place to sleep, safe place to shower, clean clothes, food, a cup of tea.

Offer safe options

'We are not responsible for anyone else's actions or choices. We can just choose how we act ourselves and offer safe options.' [workshop notes 2019]

'Our words can be the bridge that help someone walk back to safety' [workshop notes 2019].

We want to make safety more possible and available to people at risk. When people act dangerously, it's often because other options seem pointless, hopeless, out of control or out of sight.

A person at risk might not have learnt another way to cope, can't see another way, don't feel like other options are possible, or are so overwhelmed that they can no longer think straight.

It can be like their minds are full of fire and smoke, and they can't always see safe pathways, even if safer options are right there. Desperate solutions might start intruding into their thoughts and seem like the most 'helpful' thing to do.

Sometimes, it can feel like the mind or body demands they take this dangerous action to relieve the pain, pressure and lack of control they are experiencing.

We can be the calm voice that offers:

- safer things to do
- safer places to be

When we do this, we can make safety more possible and available.

What basic needs can you help them meet?

The groups shared how they thought they could provide safe options:

- Air (breathing) • Food • Water • Shelter • Getting cooler or getting warmer • Sleep • Going to the loo • 'Homeostatis' (being able to return to balance and calm inside) • Privacy • A sense of being protected from threats
- The presence of kinship or other safe relationships • Comfort • Attention • Responsiveness
- Offer safe and soothing distractions for their hands.
- Offer to go for a walk or a drive around the community.
- Offer to sit down, talk story, make something to eat. Talking story can be a way of changing thinking.
- Check in with the person. Everyone feels unsafe from different things and everyone needs different things to feel safe.
- Check in if there are things that are making it worse or could help make it better: Is there anyone who feels unsafe to be there? Or who would be helpful to be there? Any places to get away from? Places it would be healing to go to? Any objects that feel unsafe to be around? Or any objects they want with them? Any songs or practices that might help bring calm? Remain patient and calm. Allow people to not answer or not have to explain their responses.

Keep Communicating Clearly, Simply And Calmly

A person in a distressed state can't process much information. If you intrude on the person's space without warning or if you do something they weren't expecting, it could shock them, destabilize them and increase the risk of them lashing out.

Remember, when a person is in 'fight or flight' mode, their brain is wired to see everything as a threat. We can help reduce the sense of threat by doing our best to give a full and accurate description of what's happening, what's likely to happen next and why.

The groups shared how they thought people could communicate clearly:

- Let people at risk know what you are going to do before you do it.
- Keep words calm, clear and simple. Stay patient.
- You might have to repeat yourself for them to hear and understand you.
- Be direct. Be transparent. Don't do anything unexpected. Build the trust.

A note on when it becomes a high risk or emergency situation

When a person has abandoned their ability to keep themselves or others safe, it becomes high risk or emergency situation and might need direct intervention.

- Call 000 and call urgently on others for more help.
- As best you can, still let the person know what's happening and why.
- Don't act beyond your capacity; keep yourself safe.

Keep Your Boundaries

Clear boundaries are important for relational safety. When you can calmly assert your own boundaries it:

- helps you stay safe yourself
- supports the integrity of your interactions
- helps reinforce trust by not over-promising
- models self-caring patterns
- supports choices for healing rather than harming patterns of behaviour

The groups shared what they thought could help people assert their boundaries:

- *'Acknowledge their distress, but don't give in to blackmail'.*
- *'Show you care but don't give in to demands'.*

You might say something like:

- *'I care about you, so I will do things that help you stay safe. I won't do things that might harm you or others.'*
- *'I care about you. I can but I can't and won't'*
- *'I value you and ... at the same time, so I can't do But I can ...'*
- *'I can't do ..., but I care about you, and it is hard for me to describe to you how much it would hurt if you were no longer here.'*

Don't Let Them Go Off Alone Until They Are Calm

Being alone at times of heightened risk is dangerous. Those experiencing risk need to feel supported until they can return to a calm state.

Coming to a state of calm can take a while. Many of us are more used to staying alarmed than becoming relaxed. Some people have learned how to take themselves from a state of distress to calm however many people have had lives where the pattern of going from distress to calm has been deeply disrupted by experiencing ongoing trauma.

The cycle of distress is alarm, release, rest. The person will have a lot of energy in their body from the state of alarm.

Some suggestions for safe release of that energy included:

- Push ups
- Pushing against a wall or tree
- Imagining the feelings going into the ground, into a fire or up to the stars and then the ground, fire or stars giving calm feelings back
- Laying down on a bed and letting arms and legs beat into the mattress and pillows
- Supporting someone to take deep breaths and let them out in big sighs

Question: What other safe ways do you know to let energy out of your body after a period of distress?

Important: We are providing first aid, not trained care. If, for whatever reason, the person cannot release the distress and return to calm the process is similar to First Aid - you need to seek additional support.

If you become tired or in danger supporting someone in their process of going from a distressed to a calm state find someone else who can step in.

Remember:

- If they run off and it is safe for you to go after them, do so. If it is not safe for you, urgently call on someone who can.
- Cycles of support are important: if you can't stay with someone until they are calm, call on others who can come in.
- Remember communication: let people know what's happening and why, including if you have to leave and who is coming to be with them next.



Image: Suicide Prevention Forum participants, Alice Springs 2019

Make Time To Follow Up In The Future

Usually, the layers of need behind these kinds of behaviours are too complex to address at the time of the crisis.

During the crisis, all the people in the situation of risk are likely to be in a state of alarm. They're unlikely to have the mental clarity or emotional energy to really talk about the deeper issues that brought them to this point.

Healing these deeper things takes courage, connections, resources, patience and time.

Once the situation of risk has calmed down:

- Make time soon in the future to follow up to do things like:
 - support the creation of a safety plan that is culturally informed.
 - provide opportunities to practice being calm
 - learn new ways to get needs met
 - advocate for systemic changes that increase safety and wellbeing
- Aim to connect all those who were involved in the situation of risk to support networks of kinship, culture, activities and services that are meaningful and appropriate for them.
- Work respectfully with everyone's 'cycles of capacity', which means connecting to wider webs (not loading pressure onto one person).
- Support can come from any connections where there is trust and respect or where it can be safely built.

Create A Safety Plan

It is important for people who experienced a situation of risk to make a plan to support everyone's safety if the situation arises again in the future. Acknowledging people's cultural backgrounds is an essential part in creating a safety plan.

Guiding questions for a safety plan might be:

- What signs of distress were already there before the incident started?
- What kind of things would help get that stress down before it turns to trouble?
- What did people do this time that helped?
- What didn't seem to help?
- What did you learn?
- What do you think the underlying needs are? What could help with those?
- What do you think the 'breaks in the circle' are? What could help?
- What 'healing things to do' could be more part of life? Who could support that?
- What else could help next time? (Places to go to, people to call on, calming things to do)

Safety Plans in Aboriginal Communities

In Aboriginal culture trusted Kinship relations can guide this process to be realistic and culturally safe.

As a group wrote in 2007: *'Family is important to provide support. It's a partnership: support worker with family and vice versa.'*

In 2019, another group emphasised: *'Remember Kinship is really important. That is how you build the circle again. Respect and care for each of the Kinship relationships. We*

need kinship to complete the circle. When you have this whole circle around you and people are respecting and caring for each and spending time on country, it helps keep people from going crazy. It helps keep people calm and connected and strong.'

Elders present in the workshops gave strong guidance to include Aboriginal people (especially family and Kinship) in safety planning and healing. It is important for the processes to acknowledge the wisdom, strength, resilience and adaptation that already exists, and help make it more visible and available.

The wisdom and systems that kept people and their communities alive and strong for over 65,000 years have deep value. As David Suzuki has said: *'indigenous knowledge ... has built up over millennia and that will never be duplicated by science'* (David Suzuki, The Vancouver Sun 8 June 2015).

Cultural safety can deeply support healing and wellbeing.

A note for service providers on how to be 'culturally informed':

- Aboriginal people must guide you.
- All things come from culture – respect it.
- Don't replace systems that already exist: support them.
- Don't use your privilege to impose new ideas: use it as a resource to fill gaps people themselves identify, like to glue to help bring the pieces together.
- Rather than putting Aboriginal people into our systems, we need to learn to support the systems of wisdom, resilience, adaptation and survival that already exist.
(from The Working Well Guide: reflections on providing suicide prevention in remote Aboriginal communities in Central Australia -see the Appendices for guidelines)

Provide Opportunities To Practice Being Calm

'We are what we practice being'.

In times of stress, we reach for what's most readily available, most familiar and most deeply learned. If people don't have the tools to release stress then they are constantly in an alarmed state.

Meaningful support creates consistent opportunities to have experiences of being calm and practice coming back to a calm state. It's about retraining our nervous system from the inside out. This takes patience, repetition, healing and time.

As older men in the 2019 group made very clear: *'These skills are learned by watching others. We learn them by coming together, through relationships.'*

Things that support calm and wellbeing and help recovery from stress

The groups shared ideas on what supports people to return to a calm state:

Homeland • Yarning • Spending time on Country • Being with Family, Kinship, Mentors, Role Models • Exercise, Sport and Rec • Painting • Hunting, campfire, old-way stories, songlines • Reconnect with Kinship and Country to remember who you are • Gather together and do cultural things that help with grief and healing, like cultural smoking or sweeping people and places • Keep learning about where you came from, come back to country with Elders • Learn skills, like how to make a fire, without a lighter, and how to sit around that fire together • Learn tool making • Finding ways to laugh, like watching funny movies or YouTube with friends • Talk about history and culture • Visit family at

other communities • Not just talking therapies: making good food, tactile crafts, music, art, dance, gardens, singing, drumming, mindfulness, meditation – arts and community services working together, people with skills in these areas to support it • Mindfulness and Grounding activities • Men's Sheds and Healing Centres • Cultural activities to strengthen families, connection to country and language • Sit down. Cook something to eat. Talk story. Talking story can be a way of changing thinking • Cultural knowledge camps, healing and wellbeing camps • After-initiation program for young men • Practice doing positive things every day: do the dishes. Make some food. Clean something up. Go for a walk. Make something • Learn from Elders and help others learn • Respect Elders so they see you want to learn • Have respite from stressful situations • Support to have a break from stress •



Image: Suicide Prevention Forum facilitators, Kristy Schubert and Valda Shannon, 2019

Learning New Ways To Get Needs Met

Some people may have learned that putting their own life on the line can be a powerful way to get needs met when other attempts seem powerless or ineffective.

One of the participants from the workshop said: *'We need to learn how to ask with open hands, not clenched fists.'*

When we don't ask for help the situation can grow from a problem to a crisis. It is very hard to sound centred and grounded when our sense of need comes from a place of panic. Whilst it is not always easy expressing needs in a safe way is an important life skill, and people must have safe spaces to be able to ask.

We need to:

- Make safe spaces for people to express needs.
- Believe their needs are real.
- Work together to find steps that can move towards meeting those needs.
- Holistic approach (not blaming people at risk, but people working together to alleviate the stresses and support new ways of being).
- Work with communities, families, services to map out different options: other language to express feelings, skills to deal with distress and hard feelings, and build emotional literacy. Community workshops about this.
- Where those needs can't be met in the short term, acknowledge the real pain and frustration of this. Also acknowledge the resilience of survival. People have usually been using a broad range of skills and resources to survive. It helps to make these visible
- Stand together with people when they experience injustice, believing their experience and supporting advocacy for change.
- Acknowledge the journey and the value of small wins

Advocate For Changes That Increase Safety And Wellbeing

The groups shared ideas on what supports increasing resilience, and how stakeholders could support people at risk:

- Support parents/carers.
- Reduce stigma.
- Tackle root causes (can't address trauma without also addressing injustice).
- Healing centres (address the gap between crisis of hospital level).
- Empowering individual communities to feel more confident about their own capacities and solutions.
- Help people feel comfortable having the conversations.
- Truth about history and culture.
- Supporting communities to exercise the strengths THEY want in their lives and communities and having interventions informed by this knowledge.
- Build this understanding into service providers, so that there is more understanding of and support for skills, knowledge and culture of local people.
- Night Patrol/Police talk to the person first, then bring family in, then community meeting after.
- Stay with families: not get sent away.
- Men's Sheds.
- Collaboration and communications between services improved.
- Network reps at meetings.
- Case management.
- Relationships with AOD and Gambling services.
- Culturally appropriate workforce practices.
- Improved support post hospital and post imprisonment.
- More appropriate support: not always about mental illness, often about ongoing trauma, ongoing injustice, ongoing frustrations and unmet basic needs (including cultural needs).

- We are not 'insane', our nervous systems need soothing, rebuilding; our connections with each other need soothing and rebuilding; our sense of our self needs soothing and rebuilding; we need to feel the support to relax; we need safe places for expression; we need to be able to safely receive healing, ideas, understanding about ourselves and the world; we need to feel we are connected to a bigger meaning.

What has happened to support increasing resilience that should happen again?

- Understanding our brains (how trauma affects them, etc)
- Share challenges, collaborate, come together
- Acknowledge beneficial feedback on programs and training
- Suicide Story running regularly in communities
- Family-strengthening focused programs: relieving distress
- Keeping programs going, not stop start all the time, not one-off initiatives
- Take people out bush – camp out, go hunting, go visit family on other communities
- Bereavement support for people impacted by suicide (postvention)
- Social and Emotional Wellbeing eg. Christine Palmer – supported healing quietly, visit grave sites, support for Aboriginal women
- Interagency response to suicide
- 24hrs safety places
- Life Promotion Network: provide support for clothes, finding a house, support for sorry business

If you or your organisation had no limit to funding what would you do?

- Build a Healing Centre
- Holistic nature, not just talking therapies, nutrition,

tactile, music, art, dance, gardens – people with skills in these areas to support it

- More training for services with Arrernte roles: cultural roles
- Get more youth perspectives on the issues
- Long-term investments
- Addressing the social determinants of health
- Building awareness of intergenerational trauma and how to invest in healing these trauma trails
- Extending postvention services across the NT
- NDIS: filling the gaps created by it
- Better coordinated responses to crisis
- Warm referrals
- Mental health literacy, building resilience capacity, responding to local Indigenous advice and knowledge and lived experience and networks
- Recreation and sports
- Cultural activities to strengthen families, connection to country and language
- CASSA
- Tool making
- Activities like WYDAC
- Cultural knowledge camps
- After initiation program for young men
- 24/7 safe place that is not a hospital: before and after suicide risk / destructive risk, safe for young people
- Dance, rhythm, drama, singing

Key Messages For People, Families And Communities Affected By Suicide And Suicide As A Threat

- You're not alone. This isn't just in your community. People are struggling with this everywhere.
- Let's support the helpers as well as those needing help.
- Open your heart to the person.
- Let's learn together how to nurture ourselves as well as each other.
- Look out for each other.
- Everyone has a role in helping.
- Behind every cry for help is an unmet need.
- Keep coming together.
- Feelings are temporary (feelings change). Be patient. Breathe. Stay safe. Don't do something that will last forever.
- Let's help people to remember their place in the world and in others' lives
- Let's care for each other in grief and troubles.
- Let's learn to notice distress. Let's actively do things to reduce stressful situations for people.
- Let's get good at providing basic needs and expressing care: reducing distress and building safety. Let's have cycles and communities of support to do this.
- We can make a new normal. We don't want destruction to be normal. We want processes of healing to be normal.

If you would like to talk more about the information in this booklet, please contact info@mhaca.org.au 89504600

Appendices

The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Well Being 2004–2009 contains nine guiding principles that further emphasise the holistic and whole-of-life view of health held by Aboriginal and Torres Strait Islander people.

The Framework was endorsed by the Commonwealth and State/Territory governments and represented agreement among a wide range of stakeholders on the broad strategies that needed to be pursued.

The nine principles enunciated in the Framework guided the development of Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice.

The nine principles are:

1. Aboriginal and Torres Strait Islander health is viewed in a holistic context that encompasses mental health and physical, cultural and spiritual health. Land is central to wellbeing. Crucially, it must be understood that while the harmony of these interrelations is disrupted, Aboriginal and Torres Strait Islander ill health will persist.
2. Self-determination is central to the provision of Aboriginal and Torres Strait Islander health services.
3. Culturally valid understandings must shape the provision of services and must guide assessment, care and management of Aboriginal and Torres Strait Islander peoples' health problems generally and mental health problems in particular.
4. It must be recognised that the experiences of trauma and loss, present since European invasion, are a direct outcome of the disruption to cultural wellbeing. Trauma and loss of this magnitude continue to have

intergenerational effects.

5. The human rights of Aboriginal and Torres Strait Islander peoples must be recognised and respected. Failure to respect these human rights constitutes continuous disruption to mental health (as against mental ill health). Human rights relevant to mental illness must be specifically addressed.
6. Racism, stigma, environmental adversity and social disadvantage constitute ongoing stressors and have negative impacts on Aboriginal and Torres Strait Islander peoples' mental health and wellbeing.
7. The centrality of Aboriginal and Torres Strait Islander family and kinship must be recognised as well as the broader concepts of family and the bonds of reciprocal affection, responsibility and sharing.
8. There is no single Aboriginal or Torres Strait Islander culture or group, but numerous groupings, languages, kinships and tribes, as well as ways of living. Furthermore, Aboriginal and Torres Strait Islander peoples may currently live in urban, rural or remote settings, in urbanised, traditional or other lifestyles, and frequently move between these ways of living.
9. It must be recognised that Aboriginal and Torres Strait Islander peoples have great strengths, creativity and endurance and a deep understanding of the relationships between human beings and their environment.

(National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Well Being 2004–2009, page 6.

In: Working Together | Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice, Eds.

Dudgeon, P; Milroy, H; and Walker, R. 2014, p. xxiv)



Thankyou to the members of the LPN Board:



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the
power of
humanity





**Let's help people to remember their place
in the world and in each others' lives**

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