



# 2025 South East Queensland First Nations Health Equity Conference

## Operationalising a South East Queensland First Nations Suicide Response Plan

### Workshop summary

As part of the South East Queensland (SEQ) First Nations Health Equity In Action Conference, 2025, two workshops were held, one on each day of the Conference (23-24 October 2025), to discuss operationalisation of a suicide response plan for Aboriginal and Torres Strait Islander people in SEQ.

The workshops were facilitated by Renee Blackman, CEO, ATSICHS Brisbane, Libby Dunstan, CEO, Brisbane North Primary Health Network (PHN) and Rayno Potgieter, General Manager, Mental Health and Wellbeing, IUIH.



### Workshop purpose

The workshops provided an opportunity for us to come together to **strengthen our relationships, build trust, and develop a shared understanding** of what is needed to create a truly 'human system' capable of implementing the suicide response plan.



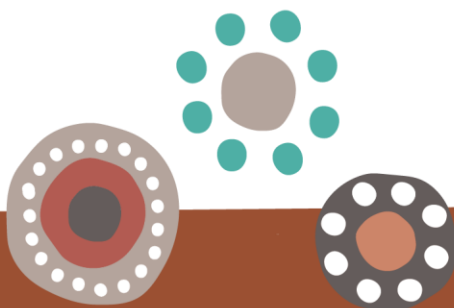
### Workshop attendees

Over the two days, nearly 70 people attended the workshops with representatives our SEQ FNHE Partners, the Coroners' Court, Standby Support After Suicide, Queensland Mental Health Commission, and the Department of Justice.

### What we heard

Through the workshop yarns we heard about what is important to individuals, families and Community impacted by suicide.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Culturally Grounded, Human-Centred Approaches</b> <ul style="list-style-type: none"> <li>• Suicide response must reflect humanity, compassion, and cultural integrity—treating distress as a human event, not just a clinical issue.</li> <li>• Deep listening, humility, empathy, and relational care are essential.</li> <li>• Aboriginal and Torres Strait Islander ways of knowing, connection to Country, and Elders’ guidance must underpin all frameworks.</li> <li>• Non-clinical healing spaces (yarning circles, drop-in hubs) and family-led responses are vital.</li> <li>• Services must respect collective mourning and not rush grief to fit organisational timelines.</li> </ul> | <b>Connection and Relationships</b> <ul style="list-style-type: none"> <li>• Connection between people, families, communities, and services is central to prevention, crisis response, and postvention.</li> <li>• Building belonging through schools, sport, and community events.</li> <li>• Service integration via warm referrals, joint case conferencing, and shared communication channels.</li> <li>• Sustained, ongoing relationships and collective ownership —“no wrong door” and shared care.</li> </ul> |
| <b>Partnership and System Integration</b> <ul style="list-style-type: none"> <li>• True partnership means shared purpose, power, and accountability.</li> <li>• Clear role definitions across agencies, formal agreements (MOUs), and cross-sector inclusion (schools, councils, churches).</li> <li>• Shared data and consent systems guided by cultural and privacy principles.</li> </ul>                                                                                                                                                                                                                                                                                                        | <b>Safe, Accessible, and Community-Designed Spaces</b> <ul style="list-style-type: none"> <li>• Safe spaces are community-led, inclusive, and stigma-free.</li> <li>• Co-designed environments, low-barrier access, and sustainability through ongoing funding.</li> <li>• Family-focused supports, including intergenerational and play-based healing.</li> </ul>                                                                                                                                                   |
| <b>System Response and Coordination Following a Death</b> <ul style="list-style-type: none"> <li>• Compassionate, family-led postvention is crucial.</li> <li>• Clear protocols for activation, coordination, and family contact.</li> <li>• Localised action plans and responder support.</li> <li>• Multi-agency postvention committees and technology integration for up-to-date service directories.</li> </ul>                                                                                                                                                                                                                                                                                 | <b>Workforce Development and Cultural Capability</b> <ul style="list-style-type: none"> <li>• A skilled, compassionate, and culturally competent workforce is key.</li> <li>• Local workforce with cultural authority and lived experience leadership (peer workers, Elders).</li> <li>• Ongoing training (i-ASIST, MHFA, Safeside, Gatekeeper) and workforce wellbeing support.</li> <li>• Equip all community-facing staff to respond compassionately.</li> </ul>                                                  |



| Enablers of Success                                                                                                                                                                                             | Barriers and Challenges                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>Community strength, flexible systems, and compassionate leadership.</li> <li>Flexible funding, cultural healing practices, and strong communication networks.</li> </ul> | <ul style="list-style-type: none"> <li>System rigidity, poor communication, and limited cultural understanding.</li> <li>Data sharing restrictions, workforce shortages, access limitations, and social barriers (stigma, shame).</li> <li>Families often lack clear, timely guidance after a death.</li> </ul> |

## What we'll do next

We'll endorse the final *SEQ First Nations Suicide Response Plan* and across our organisations to align how work with the principles and approach

| Step                                       | Action/Descriptions                                                                                                                                                                                                    | Lead                                      |
|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| Endorse the FNHE SEQ Suicide Response Plan | Present the final <i>SEQ Suicide Response Plan</i> to the <b>SEQ FNHE Mental Health Working Group</b> for endorsement, confirming alignment across partners and commitment to shared principles.                       | SEQ FNHE Mental Health Working Group      |
| Convene a focused action –planning meeting | Hold a <b>dedicated meeting of the SEQ FNHE Suicide Prevention Working Group</b> to review the endorsed plan and workshop outcomes, identify priority areas for focused effort, assign lead roles, and set timeframes. | SEQ FNHE Suicide Prevention Working Group |

## Thank you

In particular, we thank Renee Blackman, Jeff Lawton, Natalie Bagdonas, and Randell Fraser for your generosity in sharing during the workshop.

On behalf of the SEQ First Nations Health Equity Governance Committee, we thank all participants in this workshop. Your contribution has invaluable as we **move forward together, with energy, optimism, and intent** to achieve health equity for Aboriginal and Torres Strait Islander people.

