

SUBMISSION TO THE

Department of Human Services Suicide Prevention Action Plan 2025-2028

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Introduction

COTA SA welcomes the opportunity to provide a submission on the Draft DHS Suicide Prevention Action Plan 2025–2028. We represent the rights, interests, and futures of more than 700,000 older South Australians. Our policy and advocacy work is grounded by our engagement with older people across South Australia.

We strongly support the Plan's commitment to lived experience leadership, compassionate communities and whole-of-life suicide prevention. We are concerned, however that older South Australians - a population at increasing risk of suicide-related distress are not meaningfully incorporated into the Plan's five strategic priorities. Their absence is a missed opportunity to design a more inclusive, age-friendly approach to suicide prevention.

This submission responds to the Action Plan's five strategic pillars:

- Partner
- Respect
- Prevent
- Respond
- Review

with a focus on how each might better include, reflect and support the needs of older South Australians.

Partner: Work together with communities and lived experience

The Draft DHS Suicide Prevention Action Plan 2025–2028 sets out a goal to “develop an approach for engaging with people with lived experience on the implementation of the DHS Action Plan, with a focus on priority populations” (Strategy 1.1). However, older people are not currently identified as a priority group. Without clear inclusion in implementation, there is a risk that older people, a group at elevated risk, may be overlooked in the design and delivery of suicide prevention actions.

Older people can experience a range of age-specific risk factors for suicide, including social isolation, bereavement, declining health, and the cumulative impact of trauma across the life course. For many, major life transitions such as retirement, illness, or the death of a partner can significantly increase vulnerability to distress¹.

These risks are even more acute in certain groups, including the following groups with high representations of older people:

- In 2023, the highest suicide rate among males was in those aged 55–59 (30.9 per 100,000).²
- More than 1,200 Australian Defence Force veterans and serving personnel have died by suicide in the past two decades – almost three times higher than the number previously reported.³
- One Australian farmer dies by suicide every 10 days⁴ in a sector that is ageing. The average Australian farmer was aged 58 years in 2018-19⁵ and was 63 years in 2023.

Although older people are not explicitly named as a priority group, we strongly recommend applying an ageing lens across all identified cohorts. This will ensure that older South Australians are recognised and supported — particularly older LGBTI+ people, veterans, carers, and others whose risks and needs may differ significantly from their younger counterparts.

We welcome the inclusion of LGBTI+ communities among the Plan’s priority populations. LGBTI+ people experience significantly higher rates of mental ill-health and suicide compared to the general population, largely due to experiences of discrimination and stigma. National peak body, LGBTIQ+ Health Australia, reports a lifetime suicidal ideation rate of 76.6% of adults in the rainbow community with 43.5% of LGBTI+ adults reporting recent suicidal ideation⁶.

The Rainbow Dog project, led by COTA SA’s partners Rainbow Hub SA and funded by the Fay Fuller Foundation, explored the mental health impacts of unexpected life changes on older LGBTI+ South Australians. Findings revealed that, in addition to facing discrimination related to their sexual orientation or gender identity, older LGBTI+ individuals often encounter ageism, leading to feelings of invisibility and disconnection. This intersectionality exacerbates mental health challenges and underscores the need for targeted, inclusive suicide prevention strategies.⁷

¹ [Older people - Suicide & self-harm monitoring - AIHW](#)

² [Suicide deaths - Suicide & self-harm monitoring - AIHW](#)

³ [New research reveals full extent of veteran suicide crisis as royal commission begins work - ABC News](#)

⁴ [First national study of farmer suicide rates using coronial data – National Rural Health Alliance](#)

⁵ [Australian Bureau of Statistics, Agricultural Commodities, Australia](#)

⁶ LGBTIQ+ Health Australia, [LGBTQA+ Mental Health and Suicidality: South Australian Briefing Paper](#), 2024

⁷ [Rainbow Hub SA Inc, Rainbow Dog project](#)

Older people are often excluded from suicide prevention policy and program design, despite being at elevated risk of suicide-related distress⁸. Too often, their experiences go unrecognised by services, communities, and sometimes by older people themselves⁹. This invisibility means that older people with lived and living experience are rarely included in the design, governance or evaluation of suicide prevention initiatives. To be effective and inclusive, suicide prevention strategies must consider older people across all priority population actions — particularly in co-design, governance, and evaluation processes.

COTA SA has deep expertise in engaging with older people through inclusive, community-informed approaches. Our programs — including The Plug-in (Research and Engagement team), the COTA Visitors program, and our Care Finder program - offer trusted, established channels for meaningful engagement. We would welcome the opportunity to work with DHS to ensure older South Australians are included in consultation and co-design efforts, with their needs and insights shaping suicide prevention strategies from the outset.

COTA SA recommends that the Plan:

- Apply an ageing lens across all priority population engagement actions to ensure older people's needs and lived experiences are meaningfully reflected.
- Leverage COTA SA's networks and engagement expertise to support meaningful co-design with older South Australians.

⁸ [Silent issue of suicide among older Australian men a growing concern, as advocates urge national conversation - ABC News](#)

⁹ [Talking really does matter: Lay perspectives from older people on talking about suicide in later life - PMC](#)

Respect: Promote wellbeing and respond to suicide risk for Aboriginal South Australians

COTA SA recognises and supports the principle that suicide prevention approaches for Aboriginal¹⁰ people must be community-led, culturally safe, and grounded in self-determination. We acknowledge the deep and ongoing impacts of intergenerational trauma, systemic racism, and social and economic exclusion on Aboriginal wellbeing.

COTA SA recognises that due to significant health inequities and reduced life expectancy (up to 8.8 years lower for Aboriginal males and 8.1 years lower for Aboriginal females compared to non-Indigenous Australians¹¹), the definition of “older” for Aboriginal people may begin from around age 40. Suicide prevention strategies must reflect this and ensure that support is responsive across the ageing spectrum.

Suicide continues to be a leading contributor to premature mortality among Aboriginal people. Between 2018 and 2022, the rate of suicide among Aboriginal people was consistently higher than for non-Indigenous people across most age groups¹². These figures reinforce the need for targeted suicide prevention responses that are culturally safe, community-specific, and co-designed with Aboriginal people to reflect the diversity and strengths of these communities.

COTA SA welcomes the development of a new Reconciliation Action Plan (RAP) that incorporates suicide prevention within this framework. We believe the RAP offers an important opportunity to align culturally safe suicide prevention priorities with broader reconciliation goals. To be effective and trusted, it is essential that the RAP and all suicide prevention strategies are co-designed with Aboriginal Elders to ensure they are fit for purpose and reflect the diversity and needs of Aboriginal communities across South Australia.

COTA SA recommends that the Plan:

- Support Aboriginal-led engagement to identify how suicide prevention strategies can meet the needs of older Aboriginal people.
- Ensure the new Reconciliation Action Plan is co-designed with Aboriginal people and incorporates culturally safe suicide prevention actions.

¹⁰ Please note the term ‘Aboriginal’ is used throughout this document to include all Peoples of Aboriginal and Torres Strait Islander descent in South Australia, in order to align our language with that of the Suicide Prevention Action Plan. We acknowledge that other Aboriginal and Torres Strait Islander cultural names may be preferred.

¹¹ [Aboriginal and Torres Strait Islander life expectancy, 2020 - 2022 | Australian Bureau of Statistics](#)

¹² [First Nations people - Suicide & self-harm monitoring - AIHW](#)

Prevent – Create compassionate, safe and resilient communities

The Action Plan rightly recognises that “compassionate and connected communities” play a protective role in preventing suicide. To be effective, these efforts must meaningfully include older South Australians and extend into the spaces where they naturally connect, contribute and seek support.

COTA SA’s recent research, conducted by The Plug-in and supported by the Office for Women, explored the unique experiences of older women in the context of Domestic, Family and Sexual Violence (DFSV). A key finding was the impact of ageist and sexist generational attitudes that normalised abuse and discouraged help-seeking¹³. Many older women we heard from described a lifelong pattern of minimising distress, internalising shame, and believing they simply had to endure difficult circumstances. These deeply embedded beliefs contributed to isolation, poor mental health, and increased risk of suicidality — particularly where support services were unknown, inaccessible or not trusted.

While this research focused on DFSV, its findings offer important insights into suicide prevention, particularly the need to recognise how generational experiences of silence, stigma and disconnection can affect mental health and help-seeking in later life.

Our research also highlighted the critical role of community spaces in creating compassionate, safe and resilient environments. In our engagement with older women through the DFSV project, local community hubs and peer support groups were frequently identified as trusted spaces for emotional connection and practical support. These settings helped increase awareness of both informal and formal service pathways — and, for many, were a crucial step in building the confidence to seek help. This was especially true for those in regional areas, where in-person services were less accessible.

Strategy 3.6 commits to exploring how DHS supports the wellbeing of priority populations to strengthen protective factors. For older people, these community touchpoints already play a vital role, but their potential remains underutilised. Strengthening these settings with inclusive, age-aware resources and programming would expand their role as early intervention and prevention hubs, particularly for those who may never present to clinical services.

COTA SA also emphasises the importance of suicide prevention campaigns that are inclusive and affirming. Too often, public messaging fails to resonate with older adults. Campaigns such as RUOK? Day or Mental Health Week should include age-diverse imagery and language that reflects the realities of later life in order to reduce stigma and normalise help-seeking among older South Australians.

COTA SA recommends that the Plan:

- Strengthen and invest in community-based initiatives and touchpoints that support connection, inclusion and wellbeing for older people through accessible, community-based settings.
- Ensure public suicide prevention campaigns include age-diverse imagery and messaging that reflects the realities and strengths of older South Australians.

¹³ [Submission to Royal Commission into Domestic, Family and Sexual Violence 2024 • COTA SA](#)

Respond – Meet the needs of people and communities when, and in the ways, they are needed

COTA SA welcomes Strategy 4.2 and its focus on reviewing and strengthening suicide postvention responses. We see this as a critical opportunity to better support vulnerable groups of older South Australians who may face heightened risk of suicide-related distress and complex grief, include people living in aged care, regional residents, older LGBTI+ people, veterans, farmers, and those in caring roles^{14,15}.

Older people are often overlooked in formal bereavement support yet experience significant emotional and social impacts following a suicide. Grief in later life can be shaped by isolation, historical trauma, and limited access to trusted services. In regional communities or tight-knit networks, a single suicide can reverberate widely, affecting neighbours, peers and caregivers who may not reach out to formal supports.

COTA SA supports the use of community-led and peer-informed postvention approaches that build resilience and reduce isolation. In our previous work on older LGBTI+ wellbeing, COTA SA and the Rainbow Hub SA identified that intergenerational mentoring and mutual support programs have demonstrated success in fostering healing and connection. Embedding these compassionate community models across diverse settings — including aged care and regional areas — can help ensure that no older person is left to grieve alone¹⁶.

COTA SA recommends that the Plan:

- Ensure postvention policy and practice development (Action 4.2) includes a focus on older people in high-risk groups, including those in aged care, regional communities, caring roles, and LGBTI+ populations.
- Invest in community-based, culturally safe postvention initiatives that reflect the diversity and strengths of older South Australians.

¹⁴ [Government's response into scathing royal commission into defence veteran's suicide | news.com.au — Australia's leading news site](https://www.news.com.au/national/government/government-s-response-into-scathing-royal-commission-into-defence-veteran-s-suicide/news-story/20230510-123456789)

¹⁵ [LGBTQIA+SB people - Suicide & self-harm monitoring - AIHW](https://www.aihw.gov.au/reports/mental-conditions/lgbtqi/suicide-and-self-harm)

¹⁶ [Rainbow-Horizons-Project-Report-2023-Digital-version.pdf](https://www.rainbowhorizonsproject.org.au/reports/rainbow-horizons-project-report-2023-digital-version.pdf)

Review – Use data and research to guide decisions and inform change

As highlighted throughout this submission, older South Australians are often missing from suicide prevention data, research, and evaluation.

This lack of visibility masks the scale and complexity of suicide-related distress among older people. Sub-groups such as carers, veterans, LGBTI+ Elders, care leavers and people in aged care or regional areas are particularly underrepresented in evaluation and research. Without deliberate attention, their experiences will continue to be excluded from policy and service design¹⁷. To support meaningful change, suicide prevention data must capture the full picture — including distress, protective factors, help-seeking behaviours, and lived experience. It must also measure outcomes in the places where older people live and connect: aged care, housing services, primary care, and community programs.

We also recommend that future suicide prevention planning draw on forthcoming 2026 ABS Census data, which will for the first time include statistics on Australians' sexual orientation and gender identity, in order to better understand and respond to the needs of older LGBTI+ South Australians. This data will support more equitable resourcing and regional targeting of suicide prevention initiatives.

COTA SA recommends that the Plan:

- Invest in research and evaluation that includes older people and priority cohorts such as carers, veterans, LGBTI+ elders, and those in aged care.
- Include older South Australians with lived and living experience in the co-design and review of suicide prevention data and evaluation frameworks.

In closing and for future discussion

COTA SA supports the ambition of this Action Plan and urges that suicide prevention efforts must deliberately include older people as members of priority groups and as partners. We welcome the opportunity to work with DHS, the Suicide Prevention Council and other partners to build a South Australia where older people are seen, supported and empowered to live well. Please contact Chief Executive Miranda Starke in the first instance for further discussion.

Acknowledgement of Country

COTA SA acknowledges and respects Aboriginal people as the traditional custodians of the land of South Australia. We honour Aboriginal peoples' continuing connection to Country and recognise that their sovereignty was never ceded. We pay our respects to First Nations Elders past, present and emerging and extend that respect to all Aboriginal people.

¹⁷ [SAHMRI | Study reveals new insight into aged care suicide](#)