**Media Journal/Portfolio**

**Abstract**

Suicide is an action or behavior which results from the interaction of diverse personal, social, contextual and historical factors but not a single cause. Therefore, suicide might be associated with a variety of social as well as personal problems. There is significance difference between rate of suicide among the aboriginal and non-aboriginals and suicide has many contributing causes in each instance. Suicide occurs in both communities but a much higher among the aboriginals. Suicide is a part of the many issues concerning the health and the wellbeing of a population. This has seen an increasing number of organizations and experts in the community calling for the government to immediately address the issue. One of the ways of reducing these rates of suicide among the indigenous population is through preventive plans such as cultural connections, pride and empowerment of the population especially the youth. Therefore, it is vital to analyze the social and psychological health and wellbeing in the population in a larger context.

**Background**

A report covering almost two decades accentuates the significant difference in suicide between the Aboriginal and the Torres Strait Islander as compared to other suicides (Tatz, 1999). The most observable differences are the difference in methods of committing suicide. Hanging as a method of suicide was found to be the most common type of suicide among the aboriginal location of Queensland in the period between 1994 and 2013. The findings derived from the psychological autopsies and the coronial reports report that hanging amounted to 93 percent of the suicide cases among the Aboriginal and Torres Strait (McHugh et al., 2016; De Leo et al., 2011).

The difference and the rapid increase in the reported suicide rate between the Aboriginal and the Torres Strait and the non-indigenous inhabitants. Thus, among the aboriginals, the rate of suicide is a recent phenomenon with fewer instances before the 1960s (Hunter, 2013). According to the Steering Committee for the Review of Government Service Provision (2016), fifty years afterward the rate among the aboriginal has become twice that of the people who are non-indigenous. Therefore, suicide has proven to be a key concern for the public health of both the aboriginals and the non-indigenous population. For instance, in 2015 suicide was the leading cause of death among the people of 15-44 years of age while the second among the people of 45-54 years (Australian Bureau of Statistics, 2016). The young people of the Aboriginal and Torres Strait Islander population account for 30 percent of all suicide deaths in Australia in past five years despite making 3-4 percent of the whole youth population (National Children’s Commissioner, 2014).

Media Item 1. Government urged to address ‘epidemic’ Indigenou suicide rates in remote Australia- Natasha Robinson. Australian Broadcasting Corporation. 5 May 2016 Link: http://www.abc.net.au/news/ 2016-05-05/calls-for-government-to-address-indigenous-suicide/7380448

The federal government is urged to immediately address the epidemic caused by suicide among the indigenous population in the remote parts of Australia. According to experts, the rate of suicide in the earlier period before five years in Kimberley has doubled. For instance, the most recent case in the region is that of a ten years old girl hanging herself. Leaders in the region are calling the government to prevent these rising cases. Moreover, the delay of the government to spend funds for the prevention of suicide among the indigenous people is improper (Robinson, 2016).

Thus, a conference for brainstorming of solution for the problem was convened in Alice Springs. The health workers and their aboriginal people concerned traveled across Australia to attend the planned conference in the midst of the escalation of the rates of suicide mainly in the last five years. According to one of the people mapping the rate of suicide in Australia the rate of suicide in remote parts of Australia can be described as an epidemic. The doubling of the rate of suicide among the indigenous in Kimberley in the last five years is beyond the official statistics because most of the deaths were not reported to the region’s coroner (Robinson, 2016).

Although the government is preparing to deal with the prevention of the problem, the delay to spending 17.8 million dollars is unacceptable. According to one of the organizers of the conference, the existence of the significant health issue will become eventually political footballs. According to him, the issue of indigenous suicide prevention is often met by a challenge of lack of funding and direction mainly caused by the procrastination of the bureaucrats and ministers concerned. A good and very bipartisan agreement on the issue and appropriate way forward is what is needed plus a consistent funding and policy approach.

Thus, the suicide rate in Kimberly is a national crisis and should be dealt with the federal and international bodies such as common wealth. The government is now urged to immediately act to prevent the suicide rates and not postpone to the end of July as planned. The government needs to spend the money meant for the problem through implementation of the “national indigenous suicide prevention plan” (Robinson, 2016). Furthermore, the indigenous suicides have gained attention in the "wake of a spate of suicides in Canada" (Robinson, 2016). Thus, a national conference concerned with the prevention of indigenous suicide cases will be held in New Zealand sometimes later in this year.

Media Item 2 Reducing Indigenous suicide through empowerment and pride - Diego De Leo. The Conversation. 10 September 2012. Link: https://theconversation.com/reducing-indigenous-suicide- through-empowerment-and-pride-7760

De Leo (2012) suggests that it is acknowledged that the suicide rates in the indigenous population are much higher than the greater Australian population. It is not clear of the cause of this phenomenon thus each loss of life should further push for implementation of preventive plans. The rate of suicide among the indigenous children below 15 years was seven times more than that of non-indigenous children. In addition, the young people between 15-24 years of age in the indigenous community had 3.6 times more rates of suicide than their non-indigenous peers.

Further, the rate of suicide among the indigenous community averaged 27.7 in every 10,000 people between the year 1994 and 2013. This rate is 70% higher than that of the non-indigenous community in Australia. Despite the rates decreasing in the recent years, the suicide rates in the indigenous community remains higher compared to that of non-indigenous people. Nevertheless, the risk factors for suicide identification are mainly based on subjective reports rather than objective evidence (Oquendo et al., 2006).

The lack of objective and rigorous evaluation does not allow for the ascertainment of the effectiveness of the prevention programs that are present. The risk factors for suicide are common for both the aboriginals and nonindigenous communities. The common factors which elevate the risk of suicide in both communities are unemployment and substance abuse. Although the factors are more prevalent in indigenous communities effective efforts needs to be used to deal with avoidable factors causing risk in both societies with an emphasis on the indigenous communities.

However, based on the Queensland suicide register (QSR) (De Leo, 2012), the reason why the rate of suicide among the aboriginal communities is higher than the non-indigenous communities is the relationship conflict and bereavement because of the influence of culture. According to the cases of suicide in QSR, 11.1 percent of the indigenous population who committed suicide have been bereaved by important people in life as compared to 8 percent of the cases featuring non indigenous. 17.4 percent of the reported deaths among the indigenous population occurred after a relationship conflict which is more than the non-indigenous population of 9.4 percent.

Therefore, as many people have reasoned out, the aboriginal suicide is very different from other communities’ suicides. The root of suicide among the aboriginals is viewed as having deep-rooted links to the suffering of inter-generations. Thus, cultural sensitivity needs to be applied in designing an effective strategy for suicide prevention which would tackle the existing social issues of a higher significance and magnitude.

Suicide was almost nonexistence in traditional indigenous society but with the increase in risk factors the rate has increased. Consequently, the culture and the existence of unique aspects of the indigenous society give hope for the reduction of the rate of mortality caused by suicide. The indigenous community promotes extended family ties, social cohesion as well as impetuous support which might lower the rate of suicide in the community. These are protective aspects of the society could emerge and grow through the integration of group identity, sense of repossession, empowerment and community pride. Therefore, despite the process taking a longer time reduction of indigenous suicide is possible (De Leo, 2012).

Media Item 3. Suicide on the rise among indigenous youth- Gerry Georgatos. Sky News. 6 May 2016 Link: http://www.skynews.com.au/news/national/2016/05/06/ suicide-on-the-rise-among-indigenous-youth.html

  “Suicide is the main cause of death for indigenous people aged 15-35” (Georgatos, 2016). The suicide prevention project seeks answers to the problem of suicide in Australia, and the report will be presented to the federal government. Among its findings is that the cultural connections, especially to land, are significant to the prevention of the rate of suicide among the indigenous communities. The indigenous people are feeling alienated in their land, but they have a choice of recovery from the non-aboriginals. Cultural connectedness needs to be reformed to get rid of the trauma of grieving now and then. In the aboriginal community, trauma is normal because many young people lose their lives due to hanging every day (Georgatos, 2016).

According to Sandra from Leonora community her community has been grieving forever because of the socio-political, geographical and economic alienation. To change the picture in the society the funds needs to be decentralized for the communities to use for healing of their land. Although the federal government has disbursed 40 million dollars each year in the support services of social and emotional wellbeing of the indigenous communities, this is not a solution to the people’s problems (Georgatos, 2016).

Moreover, investing 70 million dollars in treatment services for alcohol and other substance abuse does not address the issue fully. The move by the government to fund 85 million dollars to the issue of indigenous population’s mental health is neither the wish of the people nor the solution to the problems which need urgent attention. The community should be involved or allowed to find the suitable way of dealing with the problem of suicide in their region. The suicides in the community are the black sports in the aboriginal community thus the federal government should provide the community with support to address the issue (Georgatos, 2016).

 Media Item 4 Indigenous Youth Suicide- The Australian Together 2016. Link: http://www. australianstogether.org.au/stories/detail/indigenous-youth-suicide

In the past 20 years, suicide was almost not in existence among the indigenous population in northern Australia, but it is now the highest globally. For instance, in the region of Kimberly alone the reported attempted suicide occurs daily resulting in the rate of suicide in the area to be 100 times more than the average of the whole nation (People Culture Environment, 2014).

According to a government report in 2013 “Indigenous children account for half of the child suicides between the ages 10-14 in Queensland. The suicide rate among Indigenous children and teenagers in Queensland is five times that of their non-Indigenous peers” (Australia together, 2016). Moreover, the select committee on the suicide of youth in the northern region (2012), reports 75% of the child suicide being of indigenous children while the teenagers made 95% of all suicides between 2013 and 2009. In addition, between 2001 and 2013 the rate of suicide among the indigenous kids in the northern region became five times more than the suicide rate nationally. On the other hand, there were no reported cases of suicide in the region among the non-indigenous kids in the same age limit (Legislative Assembly of the Northern Territory, Select Committee on Youth Suicides in the NT, 2012). The report of the Select Committee on Youth Suicides in the Northern Territory is that: nationally the suicide rate amongst the indigenous children has increased from 5% in 1991 to a 50% in 2010. This is more drastic among the youth of ages between 10-24 years, resulting in an increase from 10% to 8% in the same period (National Aboriginal Community Controlled Health Organization, 2014). The factors which contributed to the available statistics include the history of colonization and the intergenerational trauma which were left by the policies of the stolen generations. Additionally, the ongoing racism and the unemployment, overcrowding, poverty, increasing access to drugs and alcohol and social marginalization are contributing factors (People Culture Environment, 2014). The leading cause of the suicide incidents among the indigenous youth according to the elder's report is the “loss of the cultural identity and cross-cultural confusion” (Tipiloura, 2014). Consequently, the federal government has strived to reduce the suicide rate among the indigenous youth by initiating preventive programs but little progress is achieved (The Australian Together, 2016).

**Contribution of Media Items to the Unit**

  The media items contribute to the unit through the discussion of the events and causes leading to suicide among the aboriginal population of Australia. Much of the literature in the media items are relevant to the unit covered on health and well-being of indigenous people. Moreover, the media items just like the unit overall focus on the at risk segment of the society such as the young people.

The first media item is focusing on the epidemic and is illustrating the call for the government to address the suicide rates among the indigenous population in remote Australia. The second media item gives the solution to the problem of indigenous suicide in Australia. The item is focused on methods of reducing indigenous suicide through pride and empowerment. The third media item focused on the issue of suicide which is on the rise among the indigenous youth. The last media item is also focusing on the menace of the causes and solutions of the indigenous youth.

The unit focused on the underlying historic, political, cultural, social and economic context which is not separable from the causes and events which contribute to the high rates of suicide among the aboriginal. The issue of colonization and the interactions after that of the community with the political and social institutions is seen as having a negative impact on the life of the aboriginals. In return, the level of suicide among the population can be attributed to colonization. The unit also put into consideration the risk factors arising in affected communities especially at the personal level including alcohol and drug abuse, child neglect as well as abuse and impulsivity (Kirmayer, 2014).

The unit covers the cumulative effect of stressors as well as the evidence of the impact of the particular stressors such as relationship and family breakage, history of crime and unemployment. Moreover, the topic discussed the accessibility of mental health to the aboriginal society in Australia as well as the services for suicide prevention (Kirmayer, 2014).

Thus, the four media items comprise overlapping contextual as well as causal factors which contribute to the high rates of suicide among the aboriginal communities. Suicide as a social issue entangled with the tangible as well as the intangible pressure from ethnicity, gender, connectedness and physical as well as mental well-being. Moreover, colonization, social marginalization, disposition and racism also greatly influence the rate of indigenous suicide.

**Personal Reflection**

For the menace of youth suicide to be solved the government, health professionals, justice system and other stakeholders should recognize and accept the relationship between cultural identity, strength and the vulnerability of the young indigenous people to self-harm and suicide. Therefore, there is a growing need for the people concerned to support the youth in reconnection with their history so as to build self-belief, confidence, and respect. I would recommend adaptation of a community focused approach in dealing with the suicide rate. These would help the youth in the indigenous community to be more resilient, stronger and be positive concerning the future.

**Conclusion**

Consequently with the higher rate of suicide among the aboriginal community in Australia catching the attention of stakeholders the call for intervention measures is increasing and more needs to be done to ease the problem. This comes in the midst of increasing number of personal and social problems in the aboriginal community thus affecting the health and wellbeing of the population. The call for the government to immediately address the issue by formulating preventive plans is on the increase. Such plans include cultural connections, pride and empowerment of the aboriginal population. Consequently, it is essential for the government and all the people concerned to address the social and psychological health and wellbeing in the aboriginal population.

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