Every Life Matters
He Tapu te Oranga o ia tangata

Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand
Acknowledgements

A wide variety of people, whānau and families, groups, organisations and government agencies have contributed to the development of Every Life Matters – He Tapu te Oranga o ia tangata: Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand (Every Life Matters), by generously sharing their stories, thoughts and experiences.

‘He tapu te oranga o ia tangata’ refers to the Māori belief that the wellbeing of all people is sacred.

Feedback from individuals, whānau and families, communities, and the health and disability sector on a range of important issues has also informed Every Life Matters. This includes feedback provided to the Government Inquiry into Mental Health and Addiction, consultation on a draft suicide prevention strategy in 2017, the Waitangi Tribunal kaupapa inquiry: Wai 2575 Health Services and Outcomes, and engagement in the development of the Child and Youth Wellbeing Strategy.

It is not possible for this document to reflect everyone’s views on what is needed to prevent suicide. To respect and preserve the mana of those who have shared their concerns, aspirations and ideas, every attempt has been made to ensure that Every Life Matters reflects these voices.

When we participate in hui like this we give a piece of our soul, and we ask that you take care of it. (Hui participant, Inquiry into Mental Health and Addiction)

Suicide is a global issue. ‘Every Life Matters’ is a global term being used by many to recognise the value and importance of every life. We recognise other work completed in both Aotearoa New Zealand and other countries by representing this sentiment in the title of this strategy and action plan.
Every Life Matters outlines a collective approach to preventing suicide in Aotearoa New Zealand.

Far too many New Zealanders die by suicide every year. Each suicide has a devastating impact on communities and whānau and families. As the Government, we owe it to New Zealanders to play our part in addressing our unacceptable record on suicide.

It’s my intention with Every Life Matters to encourage us all to work together towards a future where there is no suicide.

Using trauma-informed approaches, we must empower those with lived experience and the suicide bereaved to take a larger role in preventing suicide and ensure agencies listen to them. We must make sure services are accessible, compassionate and culturally appropriate.

This strategy recognises the unique challenges faced by every individual and their whānau or family. It aims to ensure services are fair and just and are helping our overrepresented populations, such as Māori and men. It calls for robust measurement and evaluation to demonstrate our progress.

While this strategy enables a whole-of-society approach to suicide prevention, it also reminds government agencies they all have a responsibility to improve the environments where people live, work and play to support their wellbeing.

Good work to prevent suicide is already underway, but greater national leadership, coordination and support for this work is needed.

Every Life Matters outlines a number of focus areas and actions to reduce suicide in New Zealand. But there is one goal at the core.

No suicide.

One death by suicide is one death too many. Every life matters. I am confident that this strategy will make the difference needed to reduce our suicide rate and make a real difference to the lives of New Zealanders, whānau and families, and communities.

Hon Dr David Clark
Minister of Health
Kupu whakataki a te Tumu matua o te Manatu Hauora – Director-General of Health’s Foreword

The Ministry of Health recognises the need to do more to reduce Aotearoa New Zealand’s suicide rate. Every Life Matters outlines the work required to do this.

This strategy is part of the broader transformation of the mental health and addiction system to ensure it is accessible and supports people effectively – whether they are suicidal themselves, whānau or family, or friends with concerns for a loved one who is suicidal. Above all, a transformed system will support and work toward reducing suicide.

The Ministry has led the development of Every Life Matters, and engagement with a diverse targeted group of stakeholders. This includes a focus on Māori, people with lived experience and the suicide bereaved and has been crucial to creating a strategy that reflects the calls for urgent action.

I want to acknowledge everybody who helped create this strategy and action plan. This ranges from the people noted above to the wider public and sector leaders, as well as people who provided feedback on the draft strategy in 2017 and to the Government Inquiry into Mental Health and Addiction. Your voices have been heard.

This strategy and action plan commits to doing better for Māori and supporting Māori to take a leadership role and control of their wellbeing and recovery.

It also recognises that different approaches may be needed to respond to and support the needs of particular population groups.

There will be much to do to ensure Every Life Matters is implemented successfully to reduce suicide rates in Aotearoa New Zealand. The Ministry recognises the significance of this work, and through the leadership provided by a newly established Suicide Prevention Office, will ensure it happens.

Dr Ashley Bloomfield
Director-General of Health
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ngā mihi – Acknowledgements</td>
<td>iii</td>
</tr>
<tr>
<td>Kupu whakataki a te Minita Hauora –</td>
<td>iv</td>
</tr>
<tr>
<td>Minister of Health’s Foreword</td>
<td></td>
</tr>
<tr>
<td>Kupu whakataki a te Tumu matua o te Manatu Hauora –</td>
<td>v</td>
</tr>
<tr>
<td>Director-General of Health’s Foreword</td>
<td></td>
</tr>
<tr>
<td>Te oranga o te katoa – About Every Life Matters</td>
<td>1</td>
</tr>
<tr>
<td>Ngā rerekētanga – What will be different</td>
<td>4</td>
</tr>
<tr>
<td>Te Horopaki – Context</td>
<td>5</td>
</tr>
<tr>
<td>Every Life Matters - Suicide Prevention Strategy</td>
<td>7</td>
</tr>
<tr>
<td>Whakatakinga – Introduction</td>
<td>8</td>
</tr>
<tr>
<td>Te tirohanga whāroa – The vision</td>
<td>8</td>
</tr>
<tr>
<td>Ngā hua oranga – Outcomes</td>
<td>9</td>
</tr>
<tr>
<td>Ngā arotahi – Focus areas</td>
<td>10</td>
</tr>
<tr>
<td>Kohinga tohu rangatira – Collective ownership</td>
<td>11</td>
</tr>
<tr>
<td>Every Life Matters - Suicide Prevention Action Plan</td>
<td>13</td>
</tr>
<tr>
<td>Whakatakinga – Introduction</td>
<td>14</td>
</tr>
<tr>
<td>Ngā mahi whakatinana, whakakaha i te pūnaha hei whakamutu i te whakamomori –</td>
<td>15</td>
</tr>
<tr>
<td>Actions to build a strong suicide prevention system</td>
<td></td>
</tr>
<tr>
<td>Ngā mahi tautoko i ngā hiahia, ngā āhuatanga hauora o nga tāngata –</td>
<td>19</td>
</tr>
<tr>
<td>Actions to support wellbeing and respond to people’s needs</td>
<td></td>
</tr>
<tr>
<td>Āpitihanga – Appendices</td>
<td>23</td>
</tr>
<tr>
<td>Āpitihanga tuatahi: Ngā kohinga tohu rangatira –</td>
<td>24</td>
</tr>
<tr>
<td>Appendix 1: Collective ownership</td>
<td></td>
</tr>
<tr>
<td>Āpitihanga tuarua: Me pēhea au e āwhi i te whakamutunga o te whakamomori? –</td>
<td>26</td>
</tr>
<tr>
<td>Appendix 2: What can I do to help prevent suicide?</td>
<td></td>
</tr>
<tr>
<td>Kuputaka – Glossary</td>
<td>38</td>
</tr>
<tr>
<td>Ngā Tohutoro – References</td>
<td>40</td>
</tr>
</tbody>
</table>
Every Life Matters – He Tapu te Oranga o ia tangata: Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand (Every Life Matters) provides an opportunity to reorganise, and focus efforts to reduce suicide in Aotearoa New Zealand. It outlines a clear vision.

We believe that every life matters and, by working together, we can achieve a future where there is no suicide in Aotearoa New Zealand.

The Every Life Matters framework on the next page summarises the approach to prevent suicide in Aotearoa New Zealand. Every Life Matters has two main parts.

1. **Suicide Prevention Strategy 2019–2029** outlines the framework and strategic direction for how we can work together in a coordinated way to achieve the vision.

2. **Suicide Prevention Action Plan 2019–2024** identifies specific actions that will be undertaken to help achieve the vision, prevent suicide and support people affected by suicide in Aotearoa New Zealand.

Every Life Matters may contain terms you are not familiar with. A glossary, defining key terms used throughout this document, is included at the end of this document.
Every Life Matters framework

**Vision**
We believe that every life matters and, by working together, we can achieve a future where there is no suicide in Aotearoa New Zealand.

**Whakataukī**
Tirohia te pae whānui, tuātui te pō. Tūramarama ki te ora, whakamauā kia tīnā! See the broad horizon (beyond the darkness), hold on to life!

### Outcomes
- Reduced suicide rate
- Wellbeing for all

### Focus areas
Building a strong system...
- National leadership
- Using evidence to make a difference
- Developing the workforce
- Evaluation and monitoring

...that supports wellbeing and responds to people’s needs

### Suicide prevention continuum
- Promotion
  - Promoting wellbeing
- Prevention
  - Responding to suicidal distress
- Intervention
  - Responding to suicidal behaviour
- Postvention
  - Supporting after a suicide

### Collective ownership
The following values and shared ways of working must underpin the implementation of Every Life Matters.

- Mahi tahi – Working together
- Hautūtanga Māori – Māori leadership
- Poipoi wairua – Trauma-informed
- Mauri ora – healthy individuals
- Whānau ora – whānau, family and community-centred
- Wai ora – healthy environments
- Rangatiratanga – people powered
- Whakamana tāngata – treating people with dignity
Honouring Te Tiriti o Waitangi (the Treaty of Waitangi)

While *Every Life Matters* is a strategy for all people in Aotearoa New Zealand, it recognises that honouring the special relationship with Māori under Te Tiriti o Waitangi is key to achieving the vision of the strategy and pae ora (healthy futures) and equity for Māori.

The special relationship between Māori and the Crown under Te Tiriti o Waitangi will underpin the way government agencies, including district health boards (DHBs), work with iwi, hapū, whānau and Māori communities to develop strategies for promoting wellbeing and preventing suicide.

Achieving better outcomes for Māori is everyone’s responsibility. Māori leadership and participation in all areas of suicide prevention must be supported, from service design to implementation and evaluation.

This means that Māori should be involved in decision-making, planning, development and delivery of suicide prevention services and supports. By working together, Māori and the Crown can help ensure Māori experience at least the same level of health and wellbeing as non-Māori and that Māori cultural concepts, values and practices are honoured and protected.

Overview of the *Every Life Matters* framework

The framework for the strategy provides a clear direction for the 10 years from 2019 to 2029. Change will not happen on its own, and if we are to achieve the vision, we must all commit to the strategy to guide our work.

The vision clearly states: ‘We believe that every life matters and, by working together, we can achieve a future where there is no suicide in Aotearoa New Zealand.’ Delivering on this vision will reflect the achievement of two key outcomes – reducing suicide rates and achieving wellbeing for all.

This requires collective ownership of and commitment to *Every Life Matters*. Working together in new and coordinated ways, empowering Māori leadership and taking a trauma-informed approach to supporting people will be crucial for achieving the outcomes sought through *Every Life Matters* and must underpin our collective efforts.

Building a strong system ...

The accompanying action plan outlines the key enabling actions that will help establish a solid platform for suicide prevention efforts. One such enabler is establishing the Suicide Prevention Office to support national leadership and the delivery, evaluation and monitoring of *Every Life Matters*. Other enablers include ensuring that our service responses are compassionate, culturally responsive and trauma informed. These latter enablers must be underpinned with evidence and collective knowledge to make a difference and the workforce’s capacity and capability must be developed further to respond to people’s needs in an ever-changing society.

... that supports wellbeing and responds to people’s needs

The action plan also details actions across the suicide prevention continuum that aim to increase protective factors and reduce risk factors for the population of Aotearoa New Zealand. Action areas include:

- promoting wellbeing
- responding to suicidal distress and behaviour
- supporting individuals, whānau and families, and communities after a suicide.
Across Aotearoa New Zealand, many great steps are being taken to prevent suicide. *Every Life Matters* builds on this existing work and provides a guide for enhancing our approach to suicide prevention to ensure we achieve a better future for all people in Aotearoa New Zealand.

*Every Life Matters* replaces *The New Zealand Suicide Prevention Strategy 2006–2016* (Associate Minister of Health 2006) and the *New Zealand Suicide Prevention Action Plan 2013–2016* (Ministry of Health 2013), with an approach focused on collective ownership. This will enable individuals, whānau and families, communities and the wider health and social systems to work together more effectively, and to work differently, to achieve the shared vision of a future where there is no suicide.

The key changes ahead include:

- establishing a *Suicide Prevention Office* to provide leadership and stewardship (kaitiakitanga) for all suicide prevention and postvention (support provided after a suicide) activities
- working alongside Māori to enable and support effective *Māori leadership* of suicide prevention
- amplifying the *voices of those with lived experience* of suicidal distress and suicide bereavement in collaboration and co-design opportunities
- working together, with *collective ownership* and responsibilities clearly indicated across government, the suicide prevention sector and communities
- embedding approaches that acknowledge the *impact of adverse childhood events and trauma* on the wellbeing on individuals, whānau and families, and communities
- undertaking more comprehensive *research* to make sure we have access to the data, information and research we need to fully understand and respond to suicidal distress and behaviour
- focusing on *specific population groups* and recognising that different people with different levels of advantage require different approaches and resources to achieve equitable health outcomes
- moving from a largely mental-health-service-based response to *enabling communities to nurture and support their whānau and families and community members* when they are experiencing suicidal distress
- acknowledging the impact of suicide on individuals, whānau and families, and communities and better *supporting people bereaved by suicide*. 
Suicide has a long-lasting and far-reaching impact on the lives of many people in New Zealand: individuals, their whānau and families, friends, peers, colleagues, hapū, iwi and wider communities. Every year, hundreds of people die by suicide. In 2016, 553 people died by suicide in Aotearoa New Zealand (a rate of 11.3 per 100,000) (Ministry of Health 2019).

Suicide affects people from all communities and population groups. However, Māori, particularly young Māori, are significantly more likely to die by suicide than non-Māori.

There are other population groups at higher risk of suicidal behaviour, including youth, males and people who use mental health and addiction services.

Suicide is preventable, but preventing suicide is complex: there is no single way to prevent it. A wide range of factors interact to influence a person’s risk of suicide, and these factors influence and change people in varying ways throughout their lives.

A common way of understanding suicide and opportunities to prevent suicide centres on reducing the factors known to increase the likelihood of suicide (risk factors) and strengthening the factors known to reduce the likelihood of suicide (protective factors).

---

**Some risk factors for suicide**

- Bereavement by suicide
- Access to means of suicide
- Sense of isolation
- History of mental illness, addiction or problematic substance abuse
- Previous suicide attempts
- Experience of trauma
- Exposure to bullying

**Some protective factors for suicide**

- Good whānau and family relationships
- Access to secure housing
- Stable employment
- Community support and connectedness
- Secure cultural identity
- Ability to deal with life’s difficulties
- Access to support and help
More needs to be done to reduce suicide in Aotearoa New Zealand

Many current suicide prevention activities, programmes and services are having a positive impact on preventing suicide. However, more can and needs to be done to reduce suicide and support people who think about, attempt or are affected by suicide. No single person, whānau or family, organisation or agency can reduce suicide rates alone, but every person can make a difference. Every Life Matters provides a shared vision and framework for the work needed to prevent suicide.

The complexity of and interactions between risk and protective factors means that suicide prevention responses need to be flexible, and different approaches and levels of resourcing may be needed to address the unique needs of different individuals, whānau and families, and at-risk population groups.

Every Life Matters focuses on improving the wellbeing of people in Aotearoa New Zealand, but it recognises that a broader range of policies, activities and initiatives also contribute to reducing the risk of suicide. The range includes work to: improve child and youth wellbeing; eliminate family violence and sexual violence; overhaul the welfare system; transform the approach to mental wellbeing; improve support for people impacted by alcohol and drug use; and embed Whānau Ora approaches.

Development of Every Life Matters

A range of different sources of information were considered in developing Every Life Matters. This includes feedback from individuals, whānau and families, communities and the health and disability sector on a number of important issues; Mātauranga Māori and a range of literature.

A key document that has informed the development of Every Life Matters, is Tūramarama ki te Ora (‘Bringing Light to the Dark’): National Māori Strategy for Addressing Suicide 2017–2022 (Tūramarama ki te Ora) (Durie et al 2017).

Tūramarama ki te Ora

Tūramarama ki te Ora provides a starting point for dialogue and partnership between government agencies and Māori to address the unacceptably high Māori suicide rate.

Tūramarama ki te Ora was developed by Māori organisations and communities, with leadership and guidance from Emeritus Professor Sir Mason Durie, Michael Naera, and Dr Keri Lawson-Te Aho. It has also been endorsed by the National Iwi Chairs Forum.

It aims to generate discussion and debate on the priorities that will enable iwi, hapū, whānau, hapori Māori and communities to address the impacts of suicide and confront the contributing factors that can lead to suicide as well as those that protect against suicide. The wider aim of Tūramarama ki te Ora is to contribute to Māori wellbeing, Māori resilience and flourishing whānau.

Every Life Matters supports the vision and solutions outlined in Tūramarama ki te Ora through a commitment to:

- promote Māori ownership of Māori wellbeing and suicide prevention
- build on the strengths of Māori whānau, hapū, iwi and communities
- deliver culturally-safe supports and services
- prioritise whānau-centred treatment and management models
- acknowledge intergenerational trauma, grief and loss of mana
- provide suicide bereavement responses that protect the continuation of whakapapa, hapū and iwi structures
- build the evidence base and Mātauranga Māori of what works for Māori.
This Suicide Prevention Strategy describes what Every Life Matters – He Tapu te Oranga o ia tangata: Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand (Every Life Matters) aims to achieve over the next 10 years and what is needed to support such achievements. The framework consists of:

- **a vision**, setting the long-term aspiration for the strategy and suicide prevention in Aotearoa New Zealand
- **outcomes** sought through the strategy to support the vision
- **focus areas**, which describe actions needed to support the vision
- **collective ownership** and shared ways of working that must underpin delivery of the vision.

Specific actions that will be undertaken to deliver on the strategy are outlined in the accompanying action plan.

---

**Te tirohanga whāaroa – The vision**

We believe that every life matters and, by working together, we can achieve a future where there is no suicide in Aotearoa New Zealand.

For individuals experiencing suicide, the spirit of this vision is summarised in the whakatauki (proverb) gifted to this strategy.

*Tirohia te pae whānui, tuātu i te pō.*
*Tūramarama ki te ora, whakamauā kia tinā!* See the broad horizon (beyond the darkness), hold on to life!

**A future without suicide**

Achieving a future where there is no suicide is an ambitious, long-term vision. When this vision is achieved, the suicide rate will have reduced, and every person and their whānau or family is more likely to have increased confidence and feel their life matters through:

- **whakapapa** – having a strong identity, knowing where they come from and where they belong
- **tūmanako** – having self-worth and being optimistic about their future
- **whanaungatanga** – being connected with others: friends, whānau and families, and wider communities
- **atawhaitanga** – receiving support that responds to their distress with compassion, respect and understanding, and supports healing and recovery
- **kia mōhio, kia mārama** – knowing where and how to access support
- **mauri tau** – having easy access to support that recognises and responds to their needs when they are affected by suicide.
Ngā hua oranga – Outcomes

The key outcomes this strategy is aiming to achieve to support the vision are:
- reduced suicide rates
- wellbeing for all.

The achievement of equity underpins this Strategy and these outcomes. Every Life Matters acknowledges that, in Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. It recognises that different people with different levels of advantage require different approaches and resources to achieve equitable health outcomes.

In particular, we need to focus on achieving equity for Māori and for other population groups that experience disproportionately higher rates of suicide.

This includes providing fair, just and honest services that are regularly monitored and evaluated with appropriate methods with a view to achieving equitable outcomes for all, particularly Māori.

Reduced suicide rates

This strategy seeks to reduce the numbers and rates of suicide and other suicidal behaviour in Aotearoa New Zealand, particularly among population groups with higher numbers and rates.

As well as fewer people in Aotearoa New Zealand dying by suicide, this outcome would result in fewer people intentionally harming themselves, fewer people attempting suicide and fewer whānau and families being bereaved by suicide.

Wellbeing for all

Every Life Matters contributes to improved wellbeing for all by supporting all people and population groups to achieve a healthy future. This means all people feeling that their life matters, being able to see a positive future for themselves, and leading fulfilling lives with purpose, balance and meaning for themselves.

While this strategy aims to achieve wellbeing for all, it recognises that wellbeing is complex and may mean different things to different people and that, to achieve wellbeing, people need different types of support at different times.
Ngā arotahi – Focus areas

To achieve the outcomes outlined, this strategy takes a two-pronged approach that focuses on:

- building a strong system for suicide prevention
- supporting wellbeing and responding to people’s needs.

Building a strong system

Building a strong system for suicide prevention includes:

- strengthening national leadership
- using evidence and collective knowledge to make a difference
- developing the suicide prevention workforce to have capacity and capability to respond
- evaluating and monitoring Every Life Matters.

The accompanying action plan outlines specific work that will be undertaken in relation to these four key enabling action areas.

Supporting wellbeing and responding to people’s needs

Suicide prevention efforts must support the wellbeing of all people in Aotearoa New Zealand and effectively respond to people’s needs when and where required. Key to supporting wellbeing is to work across the suicide prevention continuum to increase protective factors and reduce risk factors, including:

- promotion – promoting wellbeing
- prevention – responding to suicidal distress
- intervention – responding to suicidal behaviour
- postvention – supporting individuals, whānau and families, and communities after a suicide.

The accompanying action plan outlines specific work that will be undertaken across the suicide prevention continuum.
Kohinga tohu rangatira – Collective ownership

Collective ownership of and a commitment to Every Life Matters are needed to achieve the vision, reduce suicide and support wellbeing for all.

Everyone has a role in preventing suicide. Collective ownership is underpinned by the understanding that everyone will contribute to the actions and outcomes of Every Life Matters through their programmes and activities. This will bring the wealth of shared knowledge, experience, resource, drive and passion needed to reduce suicide in Aotearoa New Zealand. Appendix 1 describes the role different people, groups, organisations and agencies can play as collective owners of Every Life Matters, and Appendix 2 provides further information about what individuals can do to help prevent suicide.

The following values and shared ways of working must underpin the implementation of Every Life Matters.

Mahi tahi – working together

Suicide prevention needs a whole-of-society and whole-of-government approach. Every Life Matters recognises that everyone has a role in preventing suicide. Government agencies have a responsibility to lead some components of this work but cannot reduce suicide on their own. They need to support services and communities to lead other components.

Working together at all levels is crucial to address the wide-ranging factors influencing suicide risk and to prevent suicide effectively. It is important that people seeking help in times of distress are able to access services and supports that are working together to deliver a seamless response. At every point, people should be able to expect and receive coordinated, quality care.

Sharing information between different services removes the need for people to retell their stories of distress and helps them and their families and whānau feel culturally safe. Working together also ensures that both financial and practical resources can be shared and maximised and unnecessary duplication removed.

Hautūtanga Māori – Māori leadership

While Every Life Matters is a strategy for all people in Aotearoa New Zealand and achieving better outcomes for Māori is the responsibility of all, it recognises that Māori leadership and working with Māori is critical to achieving the strategy’s vision, setting the foundation for pae ora and achieving equitable health outcomes for Māori.

Suicide prevention activities, supports and services designed, delivered and evaluated by Māori are integral to reducing the Māori suicide rate. Kaupapa Māori services and whānau-centred approaches to mental wellbeing are essential for building and supporting whānau, hapū and iwi capacity to prevent suicide and support the wellbeing of Māori.

Every Life Matters aims to support and strengthen the important roles Māori already have in suicide prevention – as tāngata whaiora and whānau involved in their own recovery; as whānau, hapū, iwi and communities supporting each other; as advocates for the aspirations of whānau, hapū, iwi and communities; as members of the health and wider social workforce; as providers of health services; as participants in decision-making (including as part of the special relationship between Māori and the Crown under Te Tiriti o Waitangi (the Treaty of Waitangi)) and in service and policy design.

Supporting Māori leadership will involve government agencies (including ministries, Crown agencies and district health boards) proactively engaging with Māori about how to build meaningful relationships to ensure the effective implementation of Every Life Matters.
Poipoi wairua – Trauma-informed responses

Many factors are linked to heightened risk of suicide. However, experiencing trauma and adverse childhood events are seen as the most impactful, particularly where these occur in conjunction with other risk factors (Atkinson et al 2019). Trauma impacts individuals’ capacity to manage additional stresses, especially where early trauma has impacted on the development of protective factors.

Trauma-informed care is a holistic approach that takes into account the impact of previous experiences and acknowledges the strengths and challenges that have developed as part of a trauma-informed response (Te Pou o Whakaaro Nui 2018; Te Rau Matatini 2018). Trauma-informed responses take a mana-enhancing, strengths-based approach that creates opportunities for people experiencing suicidal distress to have their past experiences acknowledged through services that promote healing and recovery.

Trauma-informed responses focus on what has happened to people or what matters to them rather than on what is wrong with them. This approach validates the uniqueness of every individual, with their own strengths and challenges, developed through their specific life experiences.

Wai ora – healthy environments

The environments in which people live, work, play and learn have a significant impact on people’s health and wellbeing. Safe and supportive environments can help improve wellbeing by reducing risk factors and increasing protective factors. These wider environments are influenced by work across government and across sectors. Work is already underway to ensure everyone in Aotearoa New Zealand has access to resources that support and sustain their wellbeing.

Whānau ora – whānau and families and community-centred

Each whānau and family has their own sense of identity and connection that affirms the confidence, safety and security of every member. A whānau-centred approach to suicide prevention is about empowering the whānau and family as a whole, rather than focusing on separate individual members and their problems.

Mauri ora – healthy individuals

The concept of mauri ora captures the importance of the individual. To achieve good health and wellbeing, people need to be able to access a range of services and supports that are appropriate for them.

Rangatiratanga – people powered

People and communities should be empowered to influence and be involved in the design, delivery and evaluation of suicide prevention services and supports to ensure their needs are met. Such empowerment will help whānau, hapū, iwi and Māori exercise control over their own wellbeing and recovery and provide them with choice about the services they can access.

Whakamana tāngata – treating people with dignity

Suicide prevention services will be respectful of each person’s unique identity, rights and needs. Whakamana tāngata encompasses the shared respect, knowledge and experience of learning, living and working together, treating each other with dignity and truly listening to each other.
Whakatakinga – Introduction

Moemoeātia te moemoeā, engari whakatinanahia.
Dream the dream, but achieve it also.
(Collective submission to the Inquiry into Mental Health and Addiction)

This action plan outlines the actions to be undertaken between 2019 and 2024 to reduce suicide and help deliver Every Life Matters – He Tapu te Oranga o ia tangata: Suicide Prevention Strategy 2019–2029 and Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand (Every Life Matters). These actions are grouped in relation to the strategy focus areas of building a strong system and supporting wellbeing and responding to people’s needs. Collective ownership is needed to implement and support these actions. This work will reflect the values and shared ways of working outlined in the strategy. A national Suicide Prevention Office will lead, champion and promote collaboration on implementing the Every Life Matters action plan.

While the actions captured in this plan are necessary to enhance New Zealand’s suicide prevention efforts, we recognise that even more needs to be done to achieve the vision of Every Life Matters. Thus, this action plan provides a platform from which populations and communities can continue to explore, articulate and deliver the actions needed to support their aspirations.

The five-year focus of the action plan acknowledges the need for sequencing, as not all actions needed to reduce suicide in Aotearoa New Zealand can be undertaken at once. The Suicide Prevention Office will lead development of a second action plan for the remaining period of Every Life Matters.

Moreover, there are a range of existing and ongoing suicide prevention and postvention activities beyond the action plan that will continue to be available (see Appendix 2 for more information on some of these activities). A broader range of cross-government activities aimed at promoting and improving the wellbeing of people in Aotearoa New Zealand also complements the suicide prevention activities outlined in the action plan.
Ngā mahi whakatinana, whakakaha i te pūnaha hei whakamutu i te whakamomori – Actions to build a strong suicide prevention system

Action area 1: Strengthening national leadership

KEY ACTION

Establish a Suicide Prevention Office.

A national Suicide Prevention Office will be established to strengthen national leadership around suicide prevention. This will provide a central place for oversight and leadership of suicide prevention and postvention work across Aotearoa New Zealand.

As noted above, the Suicide Prevention Office will lead, champion and coordinate the implementation of Every Life Matters for Aotearoa New Zealand. The Suicide Prevention Office will also support Māori leadership and work closely with communities; population groups experiencing high numbers or rates of suicide; and suicide prevention groups, organisations and agencies across Aotearoa New Zealand to build on the actions outlined in the action plan and drive the implementation of Every Life Matters.

ACTIONS

• Establish a Suicide Prevention Office.
• Establish a Māori advisory function to advise on the work of the Suicide Prevention Office and implementation of Every Life Matters.
• Establish a lived-experience advisory function to advise on the work of the Suicide Prevention Office and implementation of Every Life Matters.
• Develop guidance, systems and opportunities for local, national and international collaboration and integration of suicide prevention services and supports.
• Enhance suicide prevention information, guidance and resources, including guidance on the evidence base for suicide prevention activities and programmes.
• Explore joint funding options to enable better cross-government coordination and support for community participation in preventing suicide.
• Consider current whānau-centred national programmes to identify opportunities for collaboration.
Action area 2: Use evidence and collective knowledge to make a difference

KEY ACTION

Develop and progress a national research plan.

There is a wealth of collective Mātauranga Māori and lived experience alongside data and research on suicide and suicide prevention in Aotearoa New Zealand. This collective knowledge is held by many, including whānau and families, government agencies, service providers, communities and academics. Enhancing and expanding this knowledge and collecting information in consistent ways will help us develop a greater understanding of what is working well and what is not. Access to this information at the right time will support the delivery of better suicide prevention programmes and more effective supports and services for people, whānau and families, and communities.

Ongoing research and collection of evidence and knowledge is critical to improving Aotearoa New Zealand’s approach to suicide prevention. The research and collection of evidence and knowledge will need to be better connected to suicide prevention practices to ensure suicide prevention initiatives and services are well coordinated and relevant.

The Suicide Prevention Office will lead the development of a national research plan and support the plan’s delivery, serve as a repository of suicide prevention research and information, and share best practices.

ACTIONS

• **Develop and progress a national research plan** that identifies and addresses gaps in suicide prevention and postvention information, data and research and supports ongoing coordination of research.

• **Establish a research advisory function** with membership from Māori, people with lived experience, suicide prevention and postvention experts, and academic institutions to support development and implementation of the national research plan.

• **Support the suicide prevention and postvention aspects of the Crown’s response to the Waitangi Tribunal Wai 2575 – Health Services and Outcomes Inquiry.**

• **Facilitate easier access to current research**, including the ability to share research; identify research gaps; promote research funding streams and disseminate information, evidence-informed guidance and research to individuals, whānau and families and communities.

• **Identify and implement opportunities for data integration** where it will provide useful insight for suicide prevention.
KEY ACTION
Develop a suicide prevention and postvention workforce development plan.

Many people across Aotearoa New Zealand work in roles that contribute to suicide prevention and postvention. However, more use should be made of the invaluable role and experiences of peers, whānau and families, and the community.

The capacity and capability of these groups need to be enhanced to ensure a diverse suicide prevention workforce with the skills and capacity to meet current and future needs. This means developing new skills and building new workforces, while strengthening and enhancing existing workforces. More relevant and consistent suicide prevention training will also be needed. The Suicide Prevention Office will work alongside mental health and addiction workforce centres and others with relevant expertise to develop a suitable suicide workforce development plan.

It is also vital that we recognise the impact of working within the suicide prevention and postvention sector. First responders (such as emergency services); health professionals (such as clinicians, counsellors and therapists) and others who provide ongoing support to people who may be suicidal or who have been supporting someone who goes on to die by suicide need to have access to appropriate supports.

ACTIONS
- Develop a suicide prevention and postvention workforce plan, with a focus on increasing and supporting the peer and Māori suicide prevention workforce.
- Create and promote new and existing training programmes and resources to build the clinical, cultural and trauma-informed competency of the suicide prevention workforce (including community and clinical champions, peer support workers and whānau, hapū and iwi).
- Develop a suicide prevention and postvention workforce competency-based framework with Māori, suicide prevention experts and people with lived experience.
- Support the wellbeing of the suicide prevention workforce by promoting supervision and training options.
- Promote resources that support first responders and health professionals who have been supporting someone who dies by suicide.
Key Action

Develop a monitoring and evaluation framework for Every Life Matters.

The aim of Every Life Matters is to reduce New Zealand’s suicide rate. It is important to evaluate and monitor progress against the aims of Every Life Matters regularly. Such evaluation will require looking at a range of measures that indicate relevant aspects of suicide reduction, including changes in knowledge, attitudes and behaviours relating to suicide; feedback on the care people receive; and the cultural responsiveness of services and supports. A number of discrete measurements, such as self-harm hospitalisations, waiting times and discharge planning, to measure service access and system performance are also needed.

The Suicide Prevention Office will work alongside Māori, people with research expertise, people with lived experience of suicidal behaviour, other agencies and organisations, including district health boards (DHBs) and non-governmental organisations (NGOs) and whānau and families to develop a meaningful and effective monitoring and evaluation framework. The Suicide Prevention Office will collect information and report on progress around implementing Every Life Matters.

The office will also work collaboratively with the Mental Health and Wellbeing Commission once established. The Commission will provide leadership around mental wellbeing, including suicide prevention, and monitor the government’s progress in improving mental health and wellbeing across New Zealand.

Actions

- Develop a monitoring and evaluation framework for Every Life Matters in partnership with Māori and people with lived experience of suicidal behaviour.
- Work alongside key agencies and organisations to gather data, information and evaluative reports that contribute to monitoring and evaluating progress towards the outcomes sought in Every Life Matters.
- Support processes, systems and mechanisms for service providers to share relevant data, information and updates to support the ongoing monitoring of the effectiveness of Every Life Matters.
- Work alongside Māori and people with lived experience to evaluate the effectiveness of suicide prevention and postvention programmes.
- Review the Every Life Matters action plan and develop a second action plan.
Ngā mahi tautoko i ngā hiahia, ngā āhuatanga hauora o nga tāngata – Actions to support wellbeing and respond to people’s needs

Action area 5: Promotion – Promoting wellbeing

**KEY ACTION**
Increase wellbeing support for children and young people in places of learning.

Wellbeing is about more than just good mental health. One model of wellbeing is the concept of ‘Te whare tapa wha’, whereby wellbeing is seen to have four key cornerstones: taha tinana (physical health), taha hinengaro (mental health), taha whānau (whānau and family health) and taha wairua (spiritual health) (Durie 1994). Promoting wellbeing reduces the risk of suicidal distress and behaviour and can help increase people’s resilience and ability to deal with stressful or challenging experiences.

Three distinct factors related to promoting wellbeing have been voiced by the people of Aotearoa New Zealand as being fundamental to reducing suicide risk: strengthening our sense of identity; reinforcing our connection to others, to land and to place; and feeling accepted and included by others.

Having individual, whānau and family, and community strength, resilience and connectedness provides the best possible environment for wellbeing to flourish in. Everyone needs to experience safe, strong personal relationships, a sense of purpose for the future and a whānau or family and community that promotes and supports their wellbeing.

Young people, in particular, often experience multiple life transitions, including moving to different schools, entering the workforce or further education, and moving away from their whānau and family, friends and support networks. They may not always have the tools and skills to cope with these changes. Through working together, we can provide young people with the necessary supports to help them navigate these kinds of life changes, reduce stress and successfully transition to new life stages.

**SUPPORTS AND SERVICES**

- Provide increased wellbeing support for children and young people in places of learning (including through developing culturally-responsive resources that support inclusive education, enhancing and expanding school-based health services and establishing a resource for high school students transitioning into further study or work).
- Work with Māori to identify current whānau, hapū, iwi and community-based wellbeing initiatives that support Māori (particularly tamariki and rangatahi Māori) to connect to their culture and build a strong cultural identity.
- Establish a relationship-based transition response service for young people moving from care and youth justice.
- Support DHBs to develop and update population-based suicide prevention plans.
- Support the delivery of wellbeing programmes by community-based organisations and NGOs with a focus on young people, Māori, men, Pacific peoples and rainbow and rural communities.

**RESOURCES AND TOOLS**

- Develop a framework for DHB suicide prevention coordinators to follow in their work with key stakeholders to identify and promote culturally-appropriate activities that support wellbeing and have a focus on populations at higher risk.
- Support the delivery of wellbeing, mental health and addiction literacy programmes.
- Promote and support online therapy and suicide prevention tools.
- Develop, implement and evaluate new suicide media guidelines, with an additional focus on social media and entertainment media, to encourage responsible reporting.
Action area 6: Prevention – Responding to suicidal distress

**SUPPORTS AND SERVICES**

- Work with Māori to support current investment in Māori DHB, NGO and community suicide prevention services and to develop and implement new kaupapa Māori suicide prevention and postvention resources.
- Work with Pacific peoples to support current investment in Pacific DHB, NGO and community suicide prevention services and to develop and implement new suicide prevention and postvention resources.
- Develop a programme of activities that responds to the needs of young people experiencing suicidal distress within their learning environment (including providing resources that guide best practice in school-based suicide prevention activities and improving information sharing and referral pathways between school-based health services and other community mental health services).
- Develop systems and programmes that ensure young people in care and people in correctional facilities have access to intervention and support when experiencing self-harm or suicidal distress.
- Work with DHBs to develop and implement a range of whānau and family and community-led responses for people experiencing suicidal distress.

**RESOURCES AND TOOLS**

- Support the delivery of suicide prevention education programmes.
- Work with people with lived experience of trauma and suicidal behaviour to develop guidance on trauma-informed suicide prevention approaches for service providers.
- Work with rainbow communities to develop guidance on inclusive suicide prevention practices.
- Develop self-harm prevention resources and guidelines with people with lived experience, for whānau and families, schools and health services.
- Develop guidelines for workplaces to support safe conversations about suicidal distress and appropriate responses to suicidal distress.
Action area 7: Intervention – Responding to suicidal behaviour

KEY ACTION

Work with Māori and people with lived experience of suicidal behaviours to develop national guidelines for managing suicide risk to be used within DHBs and NGOs.

Having timely access to appropriate, culturally-responsive and safe, evidence-informed care is critical when someone’s safety is at risk. This contact presents an opportunity to intervene early and to avoid crises from escalating.

Supporting frontline staff and community members to undertake suicide prevention training and cultural safety training will help ensure the delivery of quality services. This training needs to be accessible and shared across communities and the health, social, education and justice systems – not just within mental health services.

While individual services in each DHB can make progress in suicide prevention, the implementation and sharing of best practices and innovations will ensure that DHB services are responsive to the changing needs of their populations. We need to move to a quality-based framework within mental health and addiction services in both DHB and NGO services if we are to reduce suicide rates.

While inpatient status often suggests a significant level of risk and distress, there is an expectation that those who are most vulnerable are cared for safely and with compassion. We need to continuously consider innovative responses to people at risk of suicide, including through initial contacts by the Police and ambulance services.

Providing better person and whānau-centred responses will include working with Māori and people with lived experience of suicidal behaviour to develop guidance on how to manage safety when someone is at risk of suicide.

The peer support workforce is another essential and growing component of the mental health system. Making greater use of this workforce, for example to provide post-attempt telehealth support, will also help ensure that people at risk of suicide have access to a compassionate, empathic workforce and positive stories of recovery from suicidal distress and behaviour.

SUPPORTS AND SERVICES

- Work with DHBs to develop and enhance early intervention primary and secondary health care guidelines for people experiencing suicidal distress and to support community-led programmes.
- Design and implement a peer-led telehealth support for people who have attempted suicide and have been discharged to community services.
- Review the systems and range of current responses available for people who have been discharged from an emergency department or inpatient services following a suicide attempt.
- Scope additional support for the assessment and response to suicidal behaviour within the rural population.

RESOURCES AND TOOLS

- Work with Māori to develop suicide intervention resources for DHBs, NGOs, iwi, hapū and whānau that recognise and support te ao Māori practices.
- Work with Pacific peoples to develop suicide intervention resources for DHBs, NGOs, whānau and families and communities that recognise and support Pacific practices.
- Work with Māori and people with lived experience of suicidal behaviours to develop national guidelines for managing suicide risk to be used within DHBs and NGOs.
- Consider developing a national quality framework for monitoring and managing suicidal distress and behaviour within primary health care services and NGO and DHB mental health and addiction services, including accountability and reporting frameworks.

SUPPORTS AND SERVICES

- Work with DHBs to develop and enhance early intervention primary and secondary health care guidelines for people experiencing suicidal distress and to support community-led programmes.
- Design and implement a peer-led telehealth support for people who have attempted suicide and have been discharged to community services.
- Review the systems and range of current responses available for people who have been discharged from an emergency department or inpatient services following a suicide attempt.
- Scope additional support for the assessment and response to suicidal behaviour within the rural population.

RESOURCES AND TOOLS

- Work with Māori to develop suicide intervention resources for DHBs, NGOs, iwi, hapū and whānau that recognise and support te ao Māori practices.
- Work with Pacific peoples to develop suicide intervention resources for DHBs, NGOs, whānau and families and communities that recognise and support Pacific practices.
- Work with Māori and people with lived experience of suicidal behaviours to develop national guidelines for managing suicide risk to be used within DHBs and NGOs.
- Consider developing a national quality framework for monitoring and managing suicidal distress and behaviour within primary health care services and NGO and DHB mental health and addiction services, including accountability and reporting frameworks.
Action area 8: Postvention – Supporting individuals, whānau and families, and communities after a suicide

**KEY ACTIONS**

- Implement a free national suicide bereaved counselling service.
- Review the coronial investigative process.

The primary purpose of suicide postvention (support provided after a suicide) is to support the recovery of the suicide bereaved and prevent contagion or imitative suicidal behaviour.

People bereaved by suicide, particularly those with a history of previous trauma, suicidal behaviour or depression, may be at increased risk after learning of another person’s suicide. Postvention support can therefore also be preventive, reducing suicide risk by responding to the mental wellbeing needs of those impacted by a suicide.

A planned response to support whānau and family, friends and communities can reduce psychological, physical and social difficulties experienced by the suicide bereaved and optimise opportunities for healing.

DHBs have a role to support community-led responses in communities impacted by suicide. Supporting community resilience and wellbeing will help reduce the risk of contagion and further suicidal behaviour.

The process for investigating suspected suicide deaths needs to be responsive and supportive. A review of this process will be undertaken in consultation with whānau and families to ensure the most responsive and supportive system is in place. This review will provide opportunities for the voices of whānau and families and communities to have their say on what a system that validates the impact of suicide and supports healing looks like. This project, a recommendation of *He Ara Oranga*, requires further scoping and development, and will take time to complete, but is crucial to get right.

**SUPPORTS AND SERVICES**

- Develop a national suicide bereavement counselling service, including support for first responders and mental health professionals.
- Review the Coronial Suspected Suicide Data Sharing Service.
- Work with DHBs to ensure suicide postvention plans promote utilisation of a DHB interagency postvention group to monitor and support local and community-led postvention activity.
- Use the Suicide Mortality Review Committee to investigate deaths by suicide to inform best-practice.
- Scope and complete a review of the process for investigating deaths by suicide.

**RESOURCES AND TOOLS**

- Develop resources that guide best postvention practices in schools and places of learning, and work with schools to ensure traumatic incident teams maintain positive learning environments following a traumatic incident.
- Develop guidance and resources for specific populations groups (eg, Māori, Pacific peoples and schools) for managing cluster and contagion events and to support culturally-safe postvention responses for different populations groups (eg, Māori, Pacific peoples and refugee, youth, rainbow and rural communities).
- Develop postvention resources for tangihanga and funeral celebrants.
āpitihanga — Appendices
This resource describes the roles that different people, groups, organisations and agencies can play as collective owners of *Every Life Matters*.

**Suicide Prevention Office**

A newly established Suicide Prevention Office will provide strong and sustained leadership to reduce New Zealand’s suicide rates. The office will offer a clear point of responsibility for suicide prevention within central government, with a focus on bringing together all those involved in suicide prevention to deliver a nationally-coordinated response.

The office will complement and support the range of organisations that play important roles in preventing suicide by promoting collaboration and coordination; championing, overseeing and reporting on the implementation of *Every Life Matters*; and sharing best practice, research and guidance on suicide prevention.

**Government agencies and Crown entities**

The government has a responsibility to lead some components of suicide prevention work and to support services and communities to lead other components of suicide prevention. Government agencies and Crown entities, including district health boards (DHBs), will continue to collaborate at the funding, policy and practice levels to drive work and change over the course of the implementation of *Every Life Matters*. They are also committed to working together, in partnership with Māori (including through honouring the special relationship between Māori and the Crown under Te Tiriti o Waitangi) and other key stakeholders to support suicide prevention and postvention, and mental wellbeing. This includes work across health, social, education and justice sectors.

**Individuals, whānau and families, and communities**

Different communities will have different needs, which are best understood and defined by members of these communities. *Every Life Matters* provides for individuals, whānau and families, and communities to have a greater role in suicide prevention. The role of whānau and families and communities will be supported by more flexible models of resourcing and funding. Appendix 2 provides further information on what people can do to help prevent suicide.
Community groups, non-governmental organisations and agencies

A range of suicide prevention activities and responses are needed. Community groups, non-governmental organisations (NGOs) and other agencies such as primary health organisations (PHOs) have a role to play in suicide prevention and can provide the innovative, evidence-informed and impactful services and supports needed now and in the future.

Local government agencies and councils

*Every Life Matters* calls for a move towards greater community-led responses. Local government agencies and councils need to be responsive to their communities by providing resources and support for community-led initiatives that enhance protective factors for suicide, such as community groups or events.

Business and commercial sector (workplaces) and schools

People spend a lot of their time in the business and commercial sector (workplaces) and schools. These sectors have the potential to be both stressful and supportive. Key initiatives that can take place in such environments include supporting and promoting a culture of wellbeing and inclusivity; preventing bullying and providing education and training about mental wellbeing and suicide prevention; and providing plenty of opportunities for support.

Media

Media (including print, online and social media) can enhance access to positive key messaging and services. Stories of recovery, of ‘finding a way through’ and of getting help contribute to preventing suicide.
Everyone can contribute to suicide prevention and to supporting people’s wellbeing and distressed people.

Two ways to better understand how to respond to when people are struggling are:

- taking part in programmes that focus on inclusion and connection
- learning to recognise the signs of someone experiencing suicidal distress.

Knowing where you can access help means that you’re also equipped to help others and provide information that may prevent increased distress. It’s also important to understand the impact a suicide can have on another person and, if you recognise that they need help with their grief and loss, to be able to point them in the direction of further help.

Remember though, that simple, human acts of kindness don’t need training or qualifications to make a difference. Often people who are distressed are feeling overwhelmed with the challenges life has thrown at them, and being able to share that load with someone else can make a difference.

The following are a range of services and programmes that aim to support people’s wellbeing or are focused on preventing suicide. These services and programmes are available for anyone to access, support, join or let others know about. This is by no means an exhaustive list, and it’s worth keeping an eye out in your community to see if other opportunities are available.

You can also contact the Suicide Prevention Office for more information about the opportunities that are available for individuals, whānau and families, and communities to play their role in suicide prevention.
Helping individuals, whānau and families, and communities to recognise suicidal distress and provide support

Getting help for yourself or someone else who is distressed or suicidal and needs to talk

Need to talk? 1737

Need to talk? 1737 is a free four-digit phone and text number designed to meet the needs of anyone who wants to talk to a counsellor. 1737 is not tied to a specific mental health issue or condition. It is free to call or text from any landline or mobile phone, 24 hours a day, seven days a week. Trained mental health professionals are available to respond to calls, texts, webchat and emails. 1737 can also provide connections to other mental health and addiction helplines (depression, gambling and alcohol drug helplines) that support people in need.

Call or text 1737 any time for 24/7 helpline

Lifeline (incl. Suicide Crisis Helpline Tautoko and Kidsline)

Lifeline’s mission is to reduce distress and save lives by providing safe, accessible, effective and non-judgemental services. The service works specifically to increase awareness and understanding of suicide prevention in Aotearoa New Zealand, resourcing people with effective skills to support others.

0800 LIFELINE (0800 54 33 54)
or free text HELP (4357)
0508 TAUTOKO (0508 82 88 65)
KIDSLINE
0800 54 37 54

Samaritans

Samaritans offer confidential, non-religious and non-judgemental support to anyone who may be feeling depressed, lonely or is contemplating suicide, 24 hours a day, seven days a week.

0800 726 6661

Youthline

Youthline works with young people from all walks of life and all cultures trying to cope with issues. The issues can be big or small, and the process can involve working via text, email, phone or face-to-face with a young person, or even with their whole whānau or family.

Free call 0800 376 633
Free text 234
talk@youthline.co.nz
Helping individuals, whānau and families, and communities to recognise suicidal distress and provide support

Getting help for yourself or someone else who is distressed or suicidal and needs to talk

**0800 What’s Up?**
0800 What’s Up? is a free, nationwide counselling line for 5- to 19-year-olds. Children and teens can call or webchat with specially trained counsellors about anything. They can call or webchat repeatedly, including with their preferred counsellor.

12 pm to 11 pm weekdays, 3 pm to 10 pm weekends.

**0800 What’s Up**
Online counsellors are available 3 pm to 10 pm, seven days a week

[www.whatsup.co.nz](http://www.whatsup.co.nz)

**OUTLine**
OUTLine provides confidential support for anyone seeking information around sexuality, gender identity and diverse sex characteristics. They can help source information and connect users to community or peers and medical or mental health services that welcome LGBTIQA+ / rainbow people. Calls are welcomed from LGBTIQA+ / rainbow people, friends, whānau and families, or professionals who care for them.

10 am to 9 pm weekdays, 6 pm to 9 pm weekends

**0800 688 5463**

**Alcohol Drug Helpline**
The Alcohol Drug Helpline provides friendly, non-judgmental, professional help and advice for people concerned about their own drinking or drug taking and for whānau and family members, friends or professionals concerned about someone.

Free call 0800 787 797
Free text 8681
[https://alcoholdrughelp.org.nz](https://alcoholdrughelp.org.nz)

**MĀORI HELPLINE**
Free call 0800 787 798

**PACIFIC HELPLINE**
Free call 0800 787 799

**YOUTH HELPLINE**
Free call 0800 787 984
Helping individuals, whānau and families, and communities to recognise suicidal distress and provide support

**Getting help for yourself or someone else who is distressed or suicidal and needs to talk**

**Living Sober**

Living Sober is a free and private online community for people to connect and support each other on their journey. The website encourages honesty and provides tools and advice from experts and people who have faced drinking issues.

[www.livingsober.org.nz](http://www.livingsober.org.nz)

**DrugHelp**

The DrugHelp website contains information and tools for people who are concerned about the negative effects of their or someone else’s substance use.

[www.drughelp.org.nz](http://www.drughelp.org.nz)

**Safe to talk 4334**

Safe to talk 4334 is a free anonymous and confidential service that provides contact with a trained specialist 24 hours a day, seven days a week. The specialists can help with questions about sexual harm and provide information about medical, emotional and behavioural issues related to harmful experiences and referral options to specialists around the country.

- **Text 4334**
- **Call 0800 044334 any time for 24/7 helpline**
- **Webchat:** [www.safetotalk.nz](http://www.safetotalk.nz)

**TOAH-NNEST**

TOAH-NNEST (Te Ohaakii a Hine – National Network Ending Sexual Violence Together) is a kaupapa Māori service offering confidential, specialist support and free phone counselling for acts of sexual violence from any time – recent or long past. The website also provides a comprehensive list of support services available nationwide.

[www.toah-nnest.org.nz](http://www.toah-nnest.org.nz)
Helping individuals, whānau and families, and communities to recognise suicidal distress and provide support

Education and training to upskill your knowledge of mental health, addiction and suicide prevention

**LifeKeepers**

LifeKeepers is New Zealand’s national suicide prevention training programme, created by Le Va especially for New Zealand communities. It aims to give people the skills to recognise and support those at risk of suicide. LifeKeepers provides evidence-formed training (either online or face-to-face), which is clinically safe and culturally responsive.

[www.lifekeepers.nz](http://www.lifekeepers.nz)

**Mana Akiaki LifeKeepers for Māori (Le Va)**

Mana Akiaki is New Zealand’s national suicide prevention training programme, created by Le Va especially for Māori communities. It aims to give people the skills to recognise and support those at risk of suicide. LifeKeepers provides evidence-formed, face-to-face training, which is clinically safe and culturally responsive.

[www.lifekeepers.nz](http://www.lifekeepers.nz)

**MH101**

MH101 is a one-day workshop for New Zealanders who want to learn how to recognise mental illness and distress; relate to those experiencing mental illness or distress and respond appropriately. Specific rural workshops are also available. The workshop also includes training on how to recognise and respond to someone who is experiencing suicidal thinking.

[www.mh101.co.nz](http://www.mh101.co.nz)

**FLO Talanoa (part of Waka Hourua)**

FLO Talanoa is the national Pacific suicide prevention education programme for Pacific communities lead by Le Va. It has been specifically tailored to meet the needs of Pacific families and communities in Aotearoa New Zealand. FLO aims to empower and equip Pacific communities with culturally relevant knowledge and tools to prevent suicide and respond safely and effectively when suicide occurs.

[www.leva.org.nz](http://www.leva.org.nz)
Helping individuals, whānau and families, and communities to promote wellbeing

Te Waka Hourua for Māori

Te Waka Hourua is the national Māori suicide prevention programme. It offers a range of programmes and initiatives to support mental health and wellbeing. This includes education and training, research, community events and supporting rangatahi to lead local initiatives.

www.terauora.co.nz

Te Waka Hourua for Pacific peoples

Te Waka Hourua is the national Pacific suicide prevention programme. It offers a range of programmes and initiatives to support mental health and wellbeing. This includes education and training, research, community events and supporting young people to lead local initiatives.

www.leva.co.nz/our-work/suicide-prevention

Kia Piki te Ora

Kia Piki te Ora is a group of organisations whose primary focus is suicide prevention services by Māori for Māori. These organisations use indigenous approaches based on cultural best practice and whānau ora and whānau wellbeing.

KAITAIA: TE RUNANGA O TE RARAWA
www.terarawa.iwi.nz

WHANGAREI: NGĀTI HINE HEALTH TRUST
http://nhht.co.nz

MANUKAU: RAUKURA HAUORA O TAINUI
www.raukura.org.nz

OPOTIKI: TE AO HOU TRUST
www.teaohou.org.nz

ROTORUA: TE RŪNANGA O NGĀTI PIKIAO
www.pikiaorunanga.org.nz

NAPIER: TE KUPENGA HAUORA – AHURIRI
www.tkh.org.nz

WHANGANUI: NGĀ TAI O TE AWA
www.ntota.co.nz

CHRISTCHURCH: HE WAKA TAPU
www.hewakatapu.org.nz

INVERCARGILL: NGA KETE MATAURANGA POUNAMU
www.kaitahu.maori.nz
Mental Health Awareness Week

Mental Health Awareness Week is an annual nationwide promotion that provides the people of Aotearoa New Zealand with opportunities to participate in and learn activities that enhance their mental wellbeing.

[www.mhaw.nz](http://www.mhaw.nz)

Pink Shirt Day

Pink Shirt Day is about working together to stop bullying by celebrating diversity and promoting positive social relationships. It’s about creating a community where all people feel safe, valued and respected, regardless of age, sex, gender identity, sexual orientation, ability or cultural background.

[www.pinkshirtday.org.nz](http://www.pinkshirtday.org.nz)

Like Minds, Like Mine

Like Minds, Like Mine is a public awareness programme aimed at increasing social inclusion and ending discrimination towards people with experience of mental distress. It works through public awareness campaigns, community projects and research.

[www.likeminds.org.nz](http://www.likeminds.org.nz)

All Right?

The All Right? campaign supports people to become more aware of their mental health and wellbeing and to take small and regular steps to improve it. Originally launched to support Cantabrians as the region recovered from the earthquakes, it has now extended its support to people in need throughout Aotearoa New Zealand.

[www.allright.org.nz](http://www.allright.org.nz)
Helping individuals, whānau and families, and communities to promote wellbeing

**Farmer and rural wellbeing**

**Farmstrong**
Farmstrong is a nationwide wellbeing programme for the rural community. Farming has a unique set of challenges – many are hard to predict or control. Farmstrong shares farmer-to-farmer tips, supported and informed by wellbeing science.

[www.farmstrong.co.nz](http://www.farmstrong.co.nz)

**GoodYarn Farmer Wellness Workshops**
GoodYarn Farmer Wellness Workshops help participants recognise and respond appropriately to friends, family, farming colleagues or customers suffering from stress or mental illness.


**Rural Support Trusts**
Rural Support Trusts (RSTs) work for rural people and farming families across Aotearoa New Zealand. They provide a confidential service offering support, guidance or referrals as needed. This includes facilitators trained in mental wellness support.

[www.rural-support.org.nz](http://www.rural-support.org.nz)

**Getting more information or help for yourself when you’re struggling**

**National Depression Initiative**
National Depression Initiative provides stories of people’s journeys to wellness and options for viewers to explore the site to find their own way to better wellbeing.

[www.depression.org.nz](http://www.depression.org.nz)

Text 4202

**NATIONAL DEPRESSION INITIATIVE FOR MĀORI**

[https://depression.org.nz/maori/](https://depression.org.nz/maori/)

**NATIONAL DEPRESSION INITIATIVE FOR PACIFIC PEOPLES**

[https://depression.org.nz/pasifika/](https://depression.org.nz/pasifika/)

**Mental Wealth**
The Mental Wealth Project is a mental health literacy education programme for young people. The aim is to equip young people and their families with knowledge, tools and skills to reduce stigma, improve wellbeing, spot warning signs of mental distress and enhance access to the right care and support when needed.

[www.mentalwealth.nz](http://www.mentalwealth.nz)
Helping individuals, whānau and families, and communities to promote wellbeing

### Online support and e-therapy

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
<th>Website/Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Lowdown</td>
<td>The Lowdown is a website to help young New Zealanders recognise and understand depression and anxiety. It offers ideas and advice from people who can help viewers get to a better place.</td>
<td><a href="http://www.thelowdown.co.nz">www.thelowdown.co.nz</a>, 0800 111 757, Text 5626</td>
</tr>
<tr>
<td>Aunty Dee</td>
<td>Aunty Dee is a free online tool for anyone who needs some help working through a problem or problems. It offers a systematic approach to guide users to think about and explore their problems in a structured way.</td>
<td><a href="http://www.auntydee.co.nz">www.auntydee.co.nz</a></td>
</tr>
<tr>
<td>SPARX (Smart, Positive, Active, Realistic, X-factor thoughts)</td>
<td>SPARX is an online e-therapy tool that helps young people with mild to moderate depression. It can also help with anxiety or stress. It was developed with the help of young people and is based on a type of ‘talking therapy’ called Cognitive Behavioural Therapy, or CBT for short.</td>
<td><a href="http://www.sparx.org.nz">www.sparx.org.nz</a></td>
</tr>
<tr>
<td>The Journal</td>
<td>The Journal is a free, personalised online programme that takes users through a series of online lessons to cover everything they need to know about: staying positive; creating lifestyle changes to improve mental health, and problem solving.</td>
<td><a href="http://www.depression.org.nz/get-better/the-journal">www.depression.org.nz/get-better/the-journal</a></td>
</tr>
<tr>
<td>Beating the Blues</td>
<td>Beating the Blues® is a widely used and evidence-based online CBT programme for treating depression. It is a way of helping people to learn to cope with anxiety and depression.</td>
<td><a href="http://www.beatingtheblues.co.nz">www.beatingtheblues.co.nz</a></td>
</tr>
</tbody>
</table>
Helping individuals, whānau and families, and communities to promote wellbeing

Supporting wellbeing in the workplace

Open Minds
Open Minds is a website for employers that equips managers with the confidence and skills to talk about mental health in the workplace. The aim is to help employers in Aotearoa New Zealand develop workplace policies, structures and cultures that are more inclusive and supportive of people with experience of mental illness.

www.mentalhealth.org.nz/home/our-work/category/40/open-minds

Working Well Guide and Resources
Working Well Guide and Resources is a suite of online resources for workplaces to implement best practice approaches to supporting mental and emotional wellbeing in workplaces.

www.mentalhealth.org.nz/home/our-work/category/44/working-well-guide-and-resources

Wellplace
Wellplace is a guide for workplace wellbeing in Aotearoa New Zealand, aimed at helping employers and employees build a healthy workplace.

www.wellplace.nz

Worksafe: Bullying
The Worksafe bullying prevention site offers simple advice for workers about what bullying at work can look like and what they can do if they think they are being bullied or are accused of being a bully. The site also includes resources for small businesses.

Supporting individuals, whānau and families, and communities impacted by suicide

Mental Health Foundation: Suicide bereavement

The Mental Health Foundation provides information and advice to help people support themselves and each other after a suicide death. The service provides direct links to valuable information about the support available.

www.mentalhealth.org.nz/get-help/suicide-bereavement-3?stage=Stage

Skylight Trust

Skylight Trust supports people of all ages throughout Aotearoa New Zealand who are facing any kind of tough life situation, in particular, grief, loss and trauma.

9 am to 5 pm weekdays
0800 299 100
www.skylight.org.nz

Victim Support

Victim Support provide immediate post-suicide response for the suicide bereaved. They are a free, community response, available 24 hours a day, seven days a week to help victims of serious crime and trauma. They provide emotional and practical support, information, referral to other support services.

0800 842 846
0800 VICTIM
www.victimsupport.org.nz

Waves

Waves is an eight-week programme that aims to support adults aged 18 years and older who have been bereaved by suicide. The programme combines learning about suicide and bereavement with group discussion and support.

www.skylight.org.nz/build-resilience/waves

Coronial Services of New Zealand: The Family’s Rights

National Initial Investigation Office Co-ordinators manage a case of death from the time the death is reported to the Duty Coroner until the deceased person is released from the mortuary. They keep families informed about what is happening with the post-mortem and any body tissue samples, and when the person is released from the mortuary. Coronial case managers manage the case once it has been assigned to a regional coroner until the coroner’s finding is sent out to everyone involved.

coronialservices.justice.govt.nz/the-familys-rights
Kuputaka – Glossary

This section provides definitions for key terms used throughout Every Life Matters.

Atawhaitanga. Showing compassion, respect and understanding.

Bereaved by suicide. When someone has lost a loved one to suicide.

Culturally responsive. An awareness of cultural diversity and the ability to function effectively and respectfully when working with and treating people of different cultural backgrounds.

Culturally safe. The effective clinical practices delivered by a person or family from another culture, which are determined by that person or family. The person delivering the service will have undertaken a process of reflection on their own cultural identity and will recognise the impact that their personal culture has on their professional practice.

Culture. Behaviours, beliefs and values of a particular group of people, including, but not restricted to, groups of people based on age or generation; gender; sexual orientation; occupation and socioeconomic status; ethnic origin or migrant experience; religious or spiritual belief; and disability.

Hapū. A clan or family group of the same iwi with blood links to a common ancestor(s).

Iwi. Tribe, kinfolk of same lineage with blood links to a common ancestor(s); a group of the same ethnicity.

Kaupapa Māori services. Health and social services for Māori provided in a Māori cultural context across a broad range of conditions and ailments and within a whānau-centred framework.

Kia mōhio, kia mārama. Understanding, recognising and using ones skills to access the right supports at the right time.

Mahi tahi. Working together.

Mana. Respect, presence or authority.

Mauri tau. Deliberately and without panic accessing support as needed.

Mātauranga Māori. Time-honoured Māori knowledge; the knowledge, comprehension or understanding of everything visible and invisible existing in the universe (based on te ao Māori, nga atua, nga tipuna) through cultural expressions, for example kōrero or pūrākau (stories), te reo (language), whaikōrero (formal oratory), waiata mōteatea (traditional songs), karakia (spiritual dedications) and whakapapa (genealogy).

Mauri ora. Healthy individuals.

Non-governmental organisations (NGOs). Comprising independent community, iwi and Māori organisations operating on a not-for-profit basis.

Pae ora. Healthy futures. Pae ora has three elements: mauri ora (healthy individuals), whānau ora (healthy families) and wai ora (healthy environments).

Peer support. A response provided to someone who needs support by people with their own lived experience of mental illness, addiction or suicide bereavement.

People with lived experience (also known as tāngata whaiora). See 'Tāngata whaiora' below.

Protective factors. A range of biological, psychological, social, spiritual, whānau and family, or community factors that reduce the likelihood of suicide.

Rainbow communities. An umbrella term used to describe people with diverse sexualities, gender identities and sex characteristics. This includes people with sexual orientations other than heterosexual (eg, gay, lesbian, bisexual, takatāpui, queer, pansexual); diverse gender identities (eg, trans, transgender, transsexual, takatāpui, whakawahine, tāngata ira tane, fa’aafafine, fa’afatama, genderqueer, fakaleiti, leiti, akava‘ine, fakafifine, vakasalewa, FtM, MtF, non-binary) and diverse sex characteristics (intersex).

Rangatahi. Youth.

Rangatiratanga. People powered.

Risk factors. A range of biological, psychological, social, spiritual, whānau and family, or community factors that increase the likelihood of suicide.
Suicidal behaviour. Behaviours that may occur as a result of suicidal distress, for example, suspected self-injury (self-harm), suicidal distress, attempted suicide and suicide.

Suicidal distress. When someone is experiencing thoughts of ending their life and that is distressing to them. People may experience either fleeting suicidal ideation or long periods of suicidal ideation. This does not always end in a suicide attempt. In Every Life Matters, ‘suicidal distress’ is also used to encompass more broadly people experiencing distress or at risk of suicide.

Suicide. When someone has intentionally taken their own life.

Suicide attempt. When someone has attempted to intentionally take their own life. A suicide attempt may or may not result in actual injury or death.

Suicide cluster. Multiple deaths occurring more closely together geographically and in time than would be expected for a given community or linked by established familial, psychological or social connections.

Suicide contagion. The spread of suicidal thoughts, behaviours and deaths after exposure to suicide or suicidal behaviour. Contagion can result from exposure to suicide or suicidal behaviours within one’s family, one’s peer group or community, or through media reporting.

Suicide postvention. Activities developed by, with or for those bereaved and affected by suicide to support recovery after suicide and to prevent subsequent suicidal behaviour.

Suicide prevention. Activities undertaken to prevent or reduce risk of suicide. These activities often focus on increasing protective factors and reducing risk factors. In Every Life Matters, suicide prevention is used to encompass both suicide prevention and postvention.

Tamariki. Children.

Tāngata whaiora (also known as people with lived experience). People who have their own experience of mental distress or illness, substance use or addiction.

Te ao Māori. Māori world view.

Trauma-informed care. A holistic approach that takes into account the impact of previous lifetime experiences and acknowledges the strengths and challenges that have developed as part of a trauma-informed response (Te Pou o te Whakaaro Nui 2018; Te Rau Matatini 2018).

Tūmanako. Desires, hopes, dreams, having self-worth and being optimistic about the future.

Wai ora. Healthy environments. The concept of wai ora encapsulates the importance of the environments that we live in and that have a significant impact on the health and wellbeing of individuals, whānau and families, and communities.

Whakamana tāngata. Treating people with dignity.

Whakapapa. Genealogy, lineage, understanding where one comes from and where one belongs.

Whakataukī. Proverb or significant saying.

Whānau and family. Whānau and family are not limited to blood ties but may include partners, friends and others in a person’s wider support network. It is up to each whānau and family and each individual to define for themselves what people make up their whānau and family.

Whānaungatanga. Kinship, sense of family connection.

Whānau ora. Healthy families. The concept of whānau ora is about supporting Māori whānau to achieve their maximum health and wellbeing.

Whānau Ora. A way of working (model of care) that supports whānau to achieve fullness of health and wellbeing within te ao Māori and New Zealand society as a whole. Note: Whānau Ora is also an example of a whanau-centred approach to delivering support and services that help whānau achieve better outcomes for themselves.

Youth or young people. For the purpose of Every Life Matters, youth and young people refer to all people aged 12 to 24 years.
Ngā Tohutoro – References


