
INQUIRY INTO MEN'S SUICIDE RATES

SUBMISSION



Orygen welcomes the opportunity to provide a submission to the Legislative Assembly for the Australian Capital Territory, Standing Committee on Social Policy's Inquiry into men's suicide rates.

ABOUT ORYGEN

Orygen is the world's leading research and knowledge translation organisation focusing on mental ill-health in young people. At Orygen, our leadership and staff work to deliver cutting-edge research, policy development, innovative clinical services, and evidence-based training and education to ensure that there is continuous improvement in the treatments and care provided to young people experiencing mental ill-health.

Orygen conducts clinical research, runs clinical services (five headspace centres), supports the professional development of the youth mental health workforce and provides policy advice relating to young people's mental health. Our current research strengths include: early psychosis, mood disorders, personality disorders, functional recovery, suicide prevention, online interventions, neurobiology and health economics.

SUICIDE AND YOUNG MEN

In 2023, intentional self-harm (suicide) was the leading cause of death for young men (15-24 years) in Australia; by a factor of three followed by land transport accidents (1). The available data does not permit a breakdown for this age cohort in the Australian Capital Territory. During this life stage most lifetime experiences of mental ill-health will have emerged, a known predictor for the first onset of suicidal ideation in Australian men (2-4). There is a pressing need to respond to the high rates of death by suicide among young men, one that recognises the intersection with mental ill-health.

ENGAGEMENT WITH MENTAL HEALTH SERVICES

To improve how young men in the Australian Capital Territory are supported, the barriers they face in accessing mental health services must be addressed. Analysis of longitudinal data from The Australian Longitudinal Study on Male Health (Ten to Men) has found that most men (all ages) with moderate to severe depression (i.e., at clear risk of suicide), will avoid seeking help. This lack of uptake of services also varies by age, as young men (18-24) were less likely than older men to have accessed mental health services.(5) A survey of Australian men with recent suicidal ideation also found that adherence to masculine norms of self-reliance was the most common barrier to help-seeking.(6) More work needs to be done to normalise and encourage men's help-seeking behaviour for mental ill-health and suicidality.

Young men's social environments play a significant role in shaping their help-seeking behaviour, with many young men preferencing informal support (such as talking to friends and family) over formal mental health services.(7, 8) Close relationships with friends and family can be critical in encouraging help-seeking from professional services, as shown in an Australian survey where nearly one in three (28%) young men sought help after a parent or family member encouraged them to do so.(9) However, informal supports may sometimes act as a barrier to accessing professional mental health services, often due to limited health literacy – for example, not knowing which services are available or how to access them.(10)

REVOLUTION IN MIND

Many men may also delay help-seeking until a point of crisis, and as such there often exists a brief but critical window of opportunity to engage men in care.(13, 14). Nearly half of Australian men experiencing suicide ideation have accessed mental health services.(11) Approximately one-third (37%) of males who died by suicide had used mental health services in the year prior to their death compared with 57 per cent of females.(12) For young men who do seek help, they are often reticent to engage and remain in care and up to 70% discontinue mental health services prematurely.(15, 16) Mental health services need to be effectively engaging with young men when they do seek-help.

Many health services, and particularly health practitioners, often lack the confidence and skills to effectively engage men, especially in the context of suicidality. Psychologists report that they would be more likely to refer suicidal men than providing treatment compared to suicidal women. This is in part attributed to the gender of psychologists; female practitioners are possibly more likely to identify or empathise with a woman (17), and often report lower confidence working with men.(18) Services often fall short of meeting men's needs, particularly for young men.(19) In one Australian survey it was found that 44.8 per cent of men had dropped out of therapy before their needs were met, often due to poor connection with their practitioner, with young men being more likely to disengage early.(20) Evaluations of Movember's Men in Mind training showed that gender-responsive training can improve practitioner confidence and competence, especially among women practitioners.(18, 21) Increasing practitioner confidence will support their engagement with young men and in turn increase the likelihood that young men will remain engaged with therapy.

POLICY OPPORTUNITY

Improve engagement through gender-responsive healthcare

Increasing help-seeking and maintaining engagement with mental health services is important in addressing the high rates of death by suicide among young men. Improving the skills and confidence of healthcare workers to engage young men who seek help has the potential to maintain their engagement. There is an opportunity to pilot an evidence-based gender-responsive mental healthcare program in the ACT to improve the capacity of services and health professionals to engage young men.

BEHAVIOURAL FACTORS

Alcohol and substance use are key risk factors in young men's suicidality. One in five (21.7%) young male suicides in Australia involve acute alcohol use and intoxication.(1) Young Australian men are at heightened suicide risk following alcohol or drug problems with intoxication exacerbating impulsivity, disinhibition, and poor judgement.(22, 23) These findings highlight the strong and complex link between substance use and suicide in young men, underscoring the need to better understand and address the role of alcohol and drug use in suicide prevention efforts.

Alcohol use and related harm are disproportionately experienced by young men in Australia.(24) Evidence suggests they are more likely than young women to use alcohol to cope with stress and mental ill-health, with men experiencing depression known to consume alcohol at higher rates than women.(25) This form of coping can lead to a downward spiral in mood and mental health, and increase the risk of suicidality.(26, 27) Exacerbating the problem are commercial influences on health. Specifically, alcohol advertising targets young men, particularly through sport, promoting alcohol as central to social connection and enjoyment of sport.(28, 29) Addressing problematic alcohol use by young men, and suicide risk by extension, requires a broader understanding of both individual and systemic drivers.

Engagement in gambling has also been identified as a behavioural risk for suicide among young men. For example, in the UK young men identified as "problem gamblers" are nine-times more likely to have attempted suicide.(30). Most of the available evidence of the link between gambling and suicide is for men of all ages. The suicidal risk increases with the level of problematic gambling behaviour, with the link between gambling and suicide fuelled by the indebtedness, shame, and family and/or social conflict the gambling instigates.(31-33) This is particularly concerning in the context of weak restrictions on gambling advertising, which is now shown on television at four times the rate during

sport programming compared to non-sport programming, exposing young people to disproportionate levels of gambling promotion.(34) It has also been suggested that data on suicide deaths linked with gambling are likely to be underestimated, with the ability of our public health system to record the role of gambling in suicide remaining underdeveloped.(35) Therefore, there is a need to address problematic gambling behaviour as a public health issue.

POLICY OPPORTUNITY

Restrict harmful advertising to reduce alcohol- and gambling-related suicides

There is a strong and preventable link between both alcohol use, gambling and suicidality in young men. Targeted advertising, particularly through sport and digital platforms normalises this behaviour. There is an opportunity to tighten restrictions on alcohol and gambling advertising in these settings to reduce suicide risk among young men.

SOCIAL AND EMOTIONAL DEVELOPMENT

Young men's social and emotional development can be negatively influenced by cultural norms and expectations. For example, cultural masculine norms encourage young men to suppress their emotions, including in how they relate socially.(36, 37) As a result, young men may struggle with their emotional regulation and coping, which is a risk factor for suicidal behaviour especially in the context of interpersonal stress.(38) In particular, relationship breakdown, social isolation and loneliness are all linked with suicidal ideation and behaviour in men.(39-42) One in four men who suicide in Australia end their lives in the context of intimate partner problems and young, separated men are at over eight-fold greater risk of suicide than their married counterparts.(1, 43) A recent relationship breakdown also increases men's risk of suicidal ideation by 82 per cent.(39) There is evidence that loneliness and emotion dysregulation following a relationship breakdown are linked with the onset of suicidality.(43, 44) This suggests a need for proactive early intervention in young men's social and emotional development, such that they can more adaptively manage significant interpersonal stressors across the life-course.

POLICY OPPORTUNITY

Support young men's social and emotional development

Young men are at a greater risk of suicide after a relationship breakdown, in part due to a lack of peer emotional support. Developing young men's capacity for emotion regulation and diversifying social support could be key protective factors. School incursions (e.g. The Man Cave) are an opportunity to support young men's awareness of their social and emotional needs and behaviour.

This submission was written on the lands of the Wurundjeri people of the Kulin Nation. Orygen acknowledges the Traditional Owners of the lands we are on and pays respect to their Elders past and present. Orygen recognises and respects their cultural heritage, beliefs and relationships to Country, which continue to be important to the First Nations people living today.

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