

# Draft Suicide Prevention Action Plan 2025–2029: Consultation Information Session

# **Purpose of today's information session**

- **Background to the Draft Suicide Prevention Action Plan 2025–2029 and its development**
- **An overview of the Draft Suicide Prevention Action Plan 2025–2029**
- **An overview of the consultation process**
- **Pātai/questions on the consultation**

# Background

Suicide prevention efforts in New Zealand are guided by these two documents:

1. **Every Life Matters – He Tapu te Oranga o ia Tangata: Suicide Prevention Strategy 2019–2029 (He Tapu te Oranga)**
2. **Suicide Prevention Action Plan 2019–2024 for Aotearoa New Zealand.**

The strategy contains the framework for a national approach to suicide prevention and was designed to be supported by two five-year action plans that would contain the practical activities to drive change.

The first Suicide Prevention Action Plan, covering 2019–2024, expires at the end of this year.

# What happened under the 2019–2024 Suicide Prevention Action Plan?

The Suicide Prevention Action Plan 2019–2024 identifies 57 actions with delivery responsibility sitting across agencies and communities. Significant progress has been made across all areas of the plan, including:

- **Establishment of the Suicide Prevention Office**, to provide leadership and stewardship for suicide prevention efforts
- Development of a public facing **web tool which centralises and streamlines suicide data**
- Publication of **revised Media Guidelines** for Reporting on Suicide
- Establishment of the **Māori and Pacific Suicide Prevention Community Funds**
- **Expansion of Kia Piki te Ora suicide prevention programme nationwide**, using indigenous approaches based on cultural best practice and whānau ora and whānau wellbeing
- **Establishment of the Suicide Bereaved Response Service, Aoake te Rā**, providing free counselling for people bereaved by suicide
- **Review of the coronial process for investigating deaths by suicide, with people with lived experience of suicide bereavement**

# Developing the draft action plan

# CURRENT INSIGHTS: RESEARCH AND FEEDBACK FROM COMMUNITIES HIGHLIGHT WHAT IS NEEDED

1

## APPROACH TO SUICIDE PREVENTION

A whole-of-government, whole-of-society approach is needed – suicide is not solely a health issue.

2

## LEADERSHIP OF SUICIDE PREVENTION ACTIVITIES

There is a need for stronger national leadership and coordination across the suicide prevention system.

3

## SUICIDE PREVENTION WORKFORCE DEVELOPMENT

There is a need to grow and develop the suicide prevention and postvention workforce, including families and whānau, community members and people with lived experience of suicide, which includes strengthening cultural competency,

4

## USING DATA AND EVIDENCE

Data and evidence need to be more timely and more widely used to support appropriate responses. And more investment in New Zealand and kaupapa Māori research.

5

## RESTRICTING ACCESS TO MEANS

More needs to be done to restrict access to means. Key areas where more work is needed include restricting access to ligature points and reducing alcohol intoxication and misuse.

6

## TALKING ABOUT SUICIDE

There is a need for more conversations in our communities about how to navigate the experience of thinking about suicide and how to support people through such a time. There also needs appropriate mechanisms to protect people from reporting on and use of suicide and suicide-related content such as in media and online.

7

## ACCESS TO SUPPORTS

There needs to be access to a greater range of mental health, crisis recovery, wellbeing and suicide prevention and postvention services that meet people's needs, especially populations groups with higher needs (for example, Māori).

8

## SUPPORTING PEOPLE AFTER A SUICIDE

People, families, whānau and communities bereaved by suicide need tailored supports and the coronial process for investigating suspected suicide deaths needs to be improved.

# A set of focused actions for 2025–2029

The draft action plan proposes a small set of critical actions, informed by research, evidence and the available data, that will drive progress and focus suicide prevention efforts across government.

The actions reflect the Government's Mental Health portfolio priorities, which in this context are to:

- **improve access** to suicide prevention and postvention support
- **grow a workforce** that is able to support those at risk of or impacted by suicide
- **strengthen our focus on prevention and early intervention** across the range of factors that can influence suicide
- **improve the effectiveness of suicide prevention and postvention** supports by improving **research and data** collection.

This smaller set of focused actions with clear milestones and lead agencies will help ensure we can hold agencies to account for delivering the actions.

# PROPOSED HEALTH-LED ACTIONS

## 1 Improve access to suicide prevention and postvention supports

**Impact:** More people in suicidal distress or impacted by suicide can access the support they need, when they need it

Proposed action	Completion date
• Establish a suicide prevention community fund focused on populations with higher needs (for example, maternal, youth and rural communities) to complement existing Māori and Pacific funds	By 31 Dec 2025
• Roll out enhanced suicide bereavement support	By 30 June 2026
• Establish and evaluate six crisis recovery cafés/ hubs/ services	By 30 June 2028
• Improve the cultural appropriateness of initial support after a suicide death and Aoake te Rā, bereaved by suicide service	By 31 Dec 2028

## 3 Strengthen the focus on prevention and early intervention

**Impact:** There are safer and more supportive environments, particularly for children and young people

Proposed action	Completion date
• Invest in enhanced acute, respite or crisis recovery services for young people in at least 2 regions	By 30 June 2025
• Launch a new wellbeing promotion campaign including targeted resources for youth	By 31 July 2025
• Develop and implement a national alcohol screening and brief intervention programme that includes suicide prevention aspects	By 30 June 2027
• Develop and publish updated media guidelines and supplementary resources for different types of media	By 31 Dec 2028
• Create safer environments in inpatient mental health and addiction facilities through progressing work to remediate and minimise ligature points	By 30 June 2029

## 2 Grow a capable and confident suicide prevention and postvention workforce

**Impact:** The capacity and capability across suicide prevention workforces is increased and communities, families and whānau are better equipped

Proposed action	Completion date
• Increase access to suicide awareness training for communities, families and whānau	By 31 Dec 2025
• Develop induction materials and ongoing best practice support for suicide prevention and postvention coordinators and Kia Piki te Ora workforces	By 30 June 2026
• Publish a national competency-based framework for workforces, communities, and family and whānau members	By 30 June 2026
• Develop and publish enhanced guidance for health professionals on assessing and supporting people who might be suicidal or experiencing suicidal distress	By 30 June 2028

## 4 Improve the effectiveness of suicide prevention and our understanding of suicide

**Impact:** More effective and efficient suicide prevention efforts are in place

Proposed action	Completion date
• Review the effectiveness of Vote Health suicide prevention services investment and implement any changes	By 30 June 2026
• Explore testing of a real-time suicide data tool to provide timelier and improved suicide data	By 31 Dec 2026



# PROPOSED CROSS-GOVERNMENT ACTIONS

## 1 Improve access to suicide prevention and postvention supports

**Impact:** More people in suicidal distress or impacted by suicide can access the support they need, when they need it

Proposed action	Completion date
• Complete development of site-based, local postvention response processes at prison sites (Ara Poutama Aotearoa   Department of Corrections)	By 31 Dec 2025

## 2 Grow a capable and confident suicide prevention and postvention workforce

**Impact:** The capacity and capability across suicide prevention workforces is increased and communities, families and whānau are better equipped

Proposed action	Completion date
Enhance the Elder Abuse Response Services workforce suicide prevention knowledge and practices (Ministry of Social Development)	By 30 June 2028
Update practice guidance and supports for social workers and carers working with children and young people who might be suicidal or experiencing suicidal distress (Oranga Tamariki)	By 30 June 2029

## 3 Strengthen the focus on prevention and early intervention

**Impact:** There are safer and more supportive environments, particularly for children and young people

Proposed action	Completion date
• Promote wellbeing and strengthen supports provided by schools to students experiencing distress or self-harm and after a suicide (Ministry of Education)	By 30 June 2026
• Create safer environments in correctional facilities through work to remediate and minimise ligature points (Ara Poutama Aotearoa   Department of Corrections)	By 30 June 2028

## 4 Improve the effectiveness of suicide prevention and our understanding of suicide

**Impact:** More effective and efficient suicide prevention efforts are in place

Proposed action	Completion date
• Support exploration of testing of a real-time suicide data tool to provide timelier and improved suicide data (Ministry of Justice)	By 31 Dec 2026
• Improve the effectiveness of online coronial recommendations recaps (Ministry of Justice)	By 30 June 2029

# Key consultation questions

1. Under each of the four areas, do you agree with the proposed actions for health and cross-government agencies? How could these actions be improved? Please include the reasons for your answer.
2. What other actions do you think could be included for government agencies to consider? Please include the reasons for your suggestions.
3. What do government agencies need to consider when implementing these actions to ensure what is delivered meets the needs of communities? Please include the reasons for your suggestions.
4. Is there anything else you want government agencies to know about what is needed to prevent suicide?

# Consultation will help inform the final Action Plan

# Ensuring quality engagement and consultation with tāngata whaiora, lived experience leadership



# Draft Suicide Prevention Action Plan 2025-2029 Consultation Process and Timeline

10 Sept

01 Oct

01 Nov

Written submissions open from 10 Sept to 5pm 01 Nov

Consultation Sessions:  
Open to all

Wednesday 25  
September:  
12pm - 1.30pm

Tuesday 8th  
October:  
5pm - 6.30pm

Thursday 31st  
October:  
12pm - 1.30pm

Consultation Sessions:  
Focused engagement

Tāngata whaiora/Lived Experience, Bereaved by Suicide, Māori, Pacific,  
Asian, Ethnic Communities, Rural,  
Rangatahi/Youth, Tāngata Waikaha/Disabled People, Rainbow/Takatāpui

Focused sessions are currently being confirmed  
with community partners to maximise  
opportunities for engagement

Draft SPAP  
launch

Consultation  
process closes

The consultation  
process involves:  
- Written submissions  
- Consultation sessions  
(mix of in-person and  
online)

#HaveYourSay  
#ChangeTheNarrative

# How can I be involved?



Provide a written submission on the consultation hub: <https://www.health.govt.nz/publications/draft-suicide-prevention-action-plan-for-2025-2029-public-consultation-document>

Or email directly to: [mhaspengagement@health.govt.nz](mailto:mhaspengagement@health.govt.nz)



Take part in the active consultation sessions – more dates coming



Share the consultation details widely



Support people with tāngata whaiora/lived experience, whānau and colleagues to take part



Stay up to date with what is happening through the Ministry of Health website



Have your say and help others to be heard

# What happens with the information shared during consultation?

- Your personal information will be kept confidential
- **All feedback will be independently analysed** by the providers
- The providers will produce a written report that will be made publicly available
- The feedback will inform the finalisation of the Draft Suicide Prevention Action Plan 2025–2029

# Any pātai/questions?

You can also send us any questions at:  
[mhaspengagement@health.govt.nz](mailto:mhaspengagement@health.govt.nz)



# Supports available if issues raised

## National helplines

Need to talk? – Free call or text 1737 any time for support from a trained counsellor

Lifeline – 0800 543 354 (0800 LIFELINE) or free text 4357 (HELP)

Suicide Crisis Helpline – 0508 828 865 (0508 TAUTOKO)

Youthline – 0800 376 633, free text 234, email [talk@youthline.co.nz](mailto:talk@youthline.co.nz) or online chat

Asian Helpline – 0800 862 342 – Mon to Fri between 9am–8pm in eight different languages

## Resources

Mental Health Foundation – <https://mentalhealth.org.nz/suicide-prevention>

Aoake te Rā – Bereaved by Suicide Support – <https://www.aoaketera.org.nz/>

**E hara taku toa i te toa takitahi, engari he toa  
takitini**

*My success is not mine alone, it is the success of the  
collective.*

*Together, we can achieve our vision*

**Ngā mihi**

**Thank you**