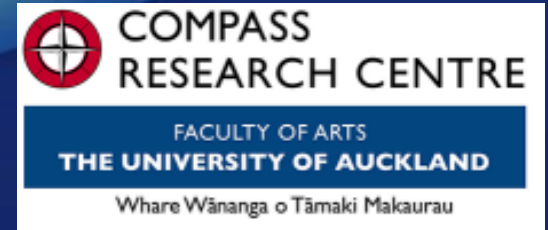


Suicide Postvention: Support for Pacific Communities in Aotearoa New Zealand

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Hibiscus Research
LIMITED



PACIFIC PEOPLES' PROFILE (NZ)



- There are more than 40 diverse Pacific ethnic groups in New Zealand
- Pacific peoples were the fourth-largest major ethnic group in 2013, behind Pakeha, Māori, and Asian ethnic groups (7.4%)
- Median age 22.1 years. There are more children in Pacific peoples group than in any other ethnic category (0-14 years at 35.7%)
- Samoans remain the largest Pacific ethnic group
- Almost two-thirds are NZ-born
- 92.9% live in the North Island. Almost two-thirds live in the Auckland Region
- By 2026, the Pacific population will comprise 10% of the NZ population



GLOBAL SUICIDE

- Every year, 1m people die from suicide. Roughly one death every 40 seconds.
- Suicide is the third leading cause of death in 15-44 age range in some countries.
- Is the second leading cause of death in the 10-24 year age range.
- Figures exclude suicide attempts which is 20x more frequent than suicide.

NZ SUICIDES



- **A total of 549 people died by suicide in New Zealand in 2012. Almost 75% of these suicides were male.**
- **The highest rate of suicide in 2012 was in the youth age group (15–24 years) at 23.4 per 100,000 youths.**
- **From 2003 -2012, Māori youth suicide rates have been at least 1.7 times the non-Māori youth suicide rates.**

Pacific : Suicide Mortality 1996-2013

- There were 380 suicides (4.1%) among Total Pacific out of 9,307 for Total NZ.
- The largest Pacific ethnic group was Samoan at 135 or 35.5% of Total Pacific (380).
- Gender
More prevalent in males than females across all Pacific ethnic groups ranging from 68.8% (Tongan) to 83.7% (Samoan).
- Age group
Across Pacific ethnic groups, more prevalent in the 15-24 age group followed by the 25-39 group, except for Samoan where the order was reversed.

SUICIDE POSTVENTION

WHAT IS IT?



Edwin Shneidman (1918-2009)

POSTVENTION

- Traditionally, much of the evidence around suicide in New Zealand and internationally has focused on suicide prevention.
- Western-dominated focus.
- Those bereaved by suicide have poorer bereavement outcomes than groups who have lost through other forms of death.
- A significant proportion of the population with an increased risk for suicide is between 2-10 times greater in comparison to the general population.

AIMS

- **To engage Pacific communities to examine appropriate and effective foci for Pacific suicide postvention activities and towards the development of Pacific suicide postvention guidelines.**
- **This information would then provide better information and support for Pacific individuals, families and communities bereaved by suicide.**

METHODS

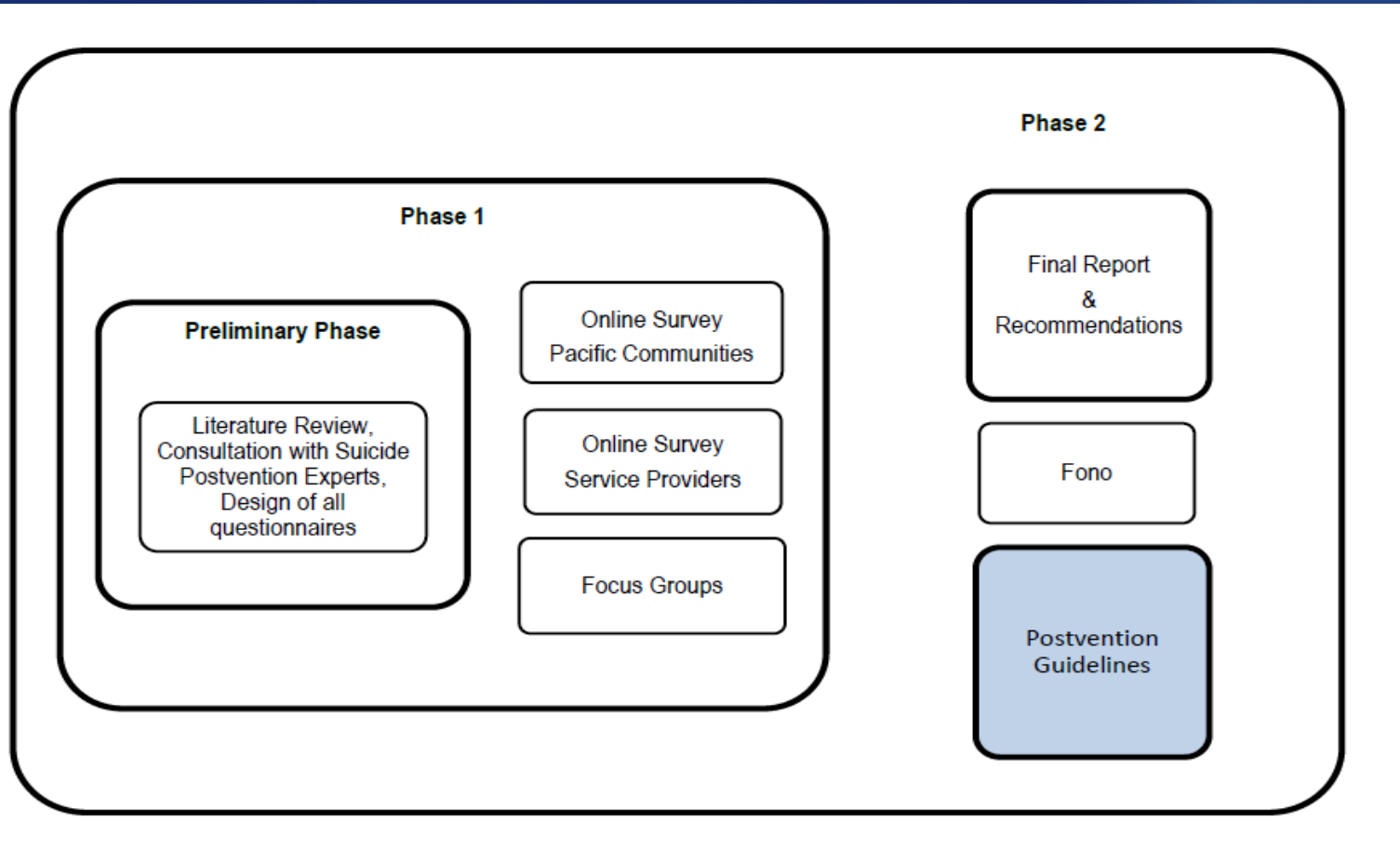


Loosely based on the South Australian Suicide Postvention Project. A mixed methods approach with 2 phases over an 18 month duration (October 2014 to April 2016).

Phase 1: Comprised a survey targeting those bereaved by suicide (i.e. family, friends, peers, work colleagues etc) (n=173 responses) and service providers (i.e. health professionals, social and community workers, nurses, spiritual leaders etc) (n=70 responses).

Further qualitative exploration undertaken in 16 Pacific focus groups (n=74 participants).

Phase 2: *Fono* (meetings, forums) (n=80)



Pacific Communities Survey Results

Pacific Communities: Respondent gender and age group

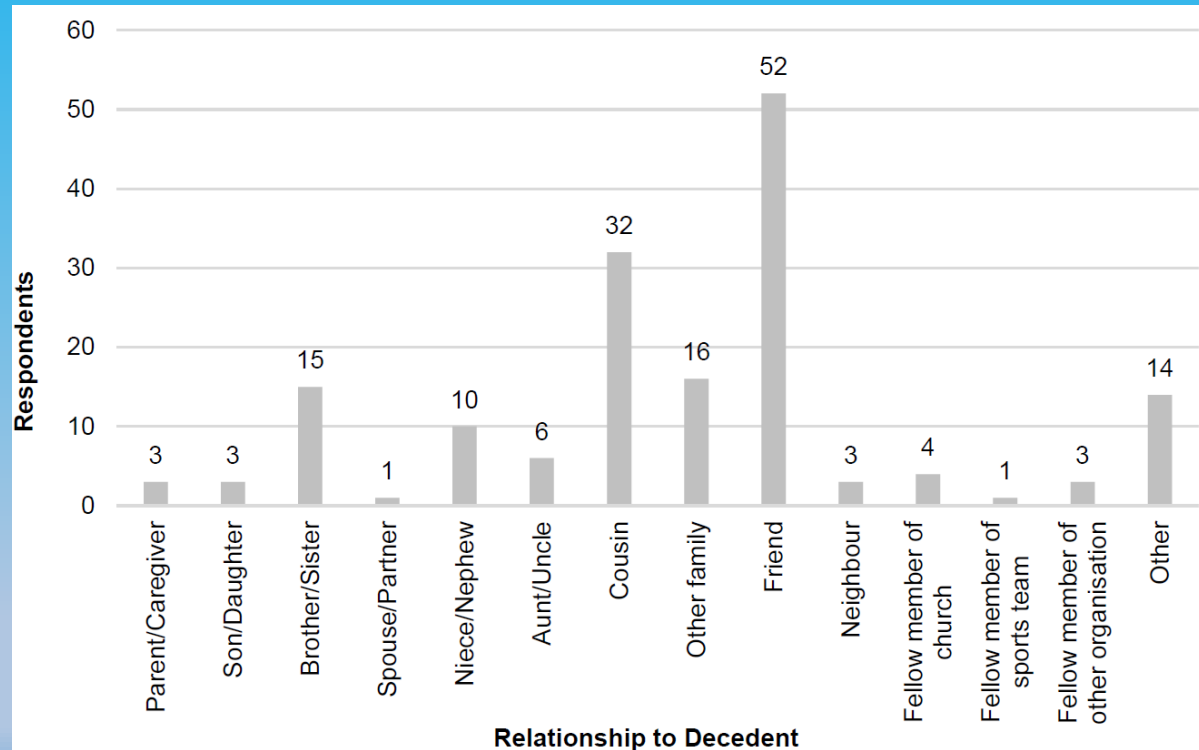
| Gender | n |
|--------|-----|
| Male | 36 |
| Female | 137 |
| Total | 173 |

| Age group | n |
|-----------|-----|
| 15–24 | 57 |
| 25–44 | 67 |
| 45–54 | 29 |
| 55+ | 14 |
| Total | 167 |

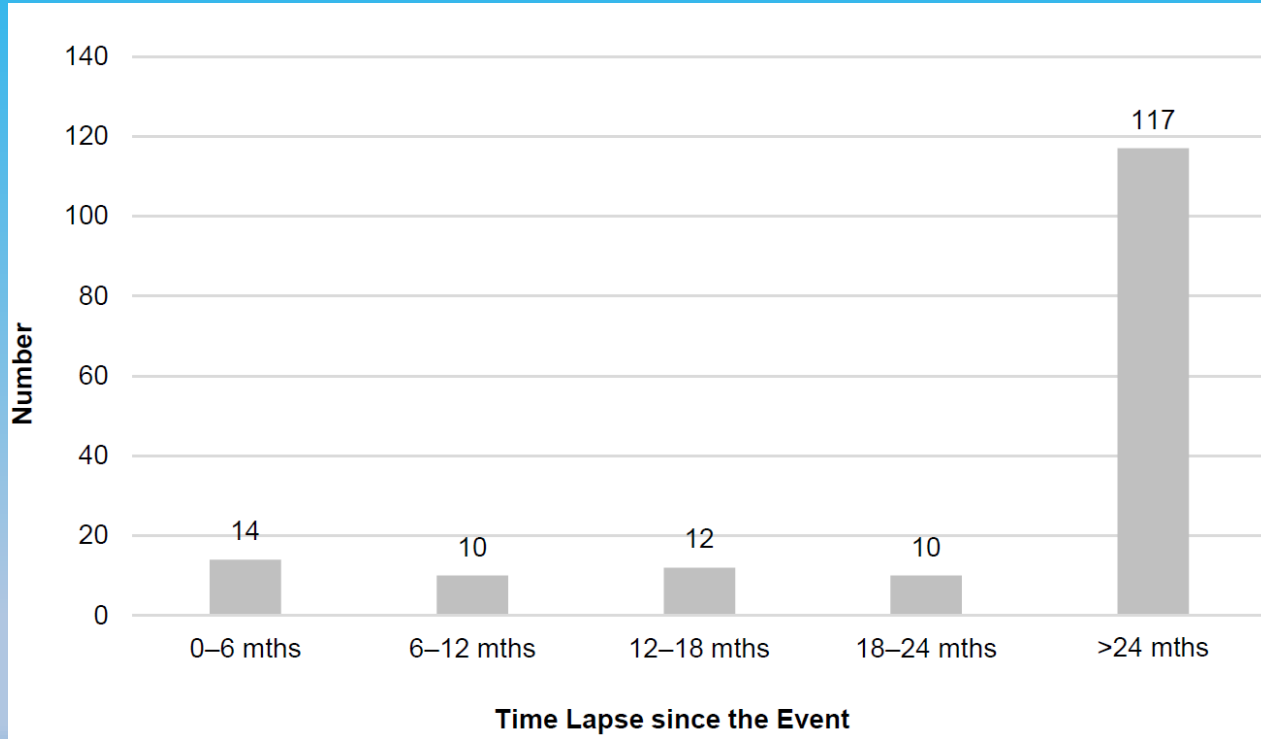
Pacific Communities: Respondent ethnicity and country of birth

| Ethnicity | n | Country | n |
|--------------|-----|--------------|-----|
| Samoan | 99 | New Zealand | 124 |
| Cook Islands | 21 | Samoa | 17 |
| Tongan | 39 | Cook Islands | 7 |
| Niuean | 12 | Tonga | 8 |
| Fijian | 8 | Niue | 2 |
| Tokelauan | 7 | Fiji | 5 |
| Tuvaluan | 3 | Tokelau | 6 |
| Māori | 6 | Tuvalu | 2 |
| European | 11 | Other | 2 |
| Total | 206 | Total | 173 |

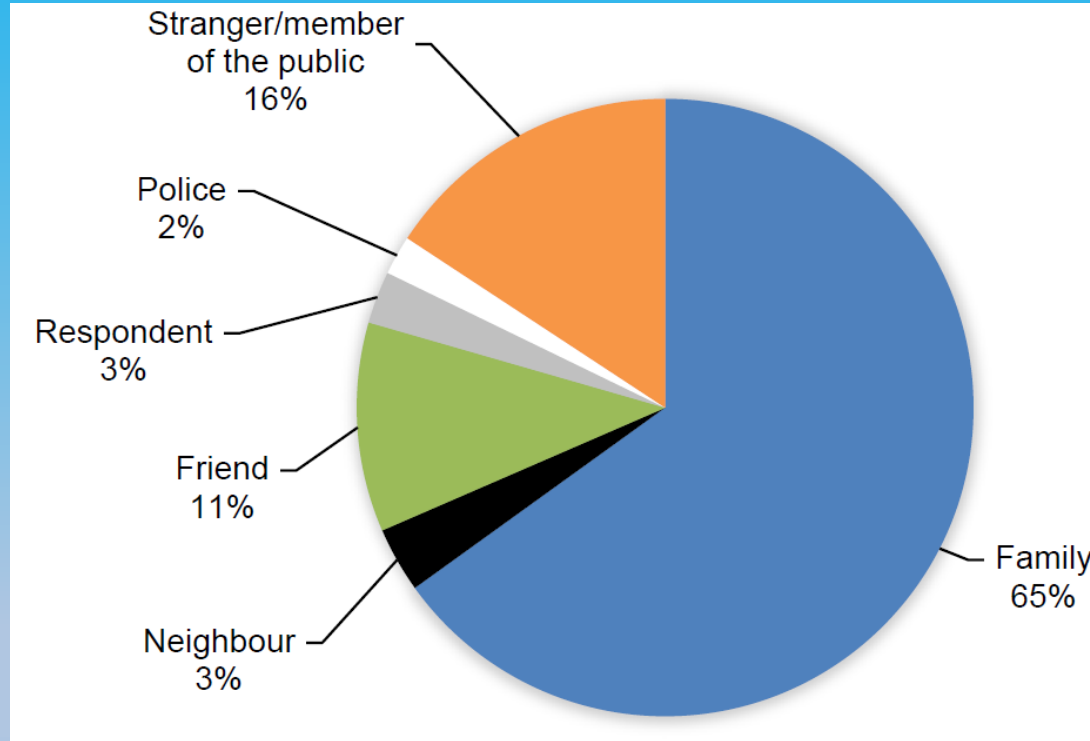
Pacific Communities: Respondent relationship to the decedent



Pacific Communities: Time lapse since the event

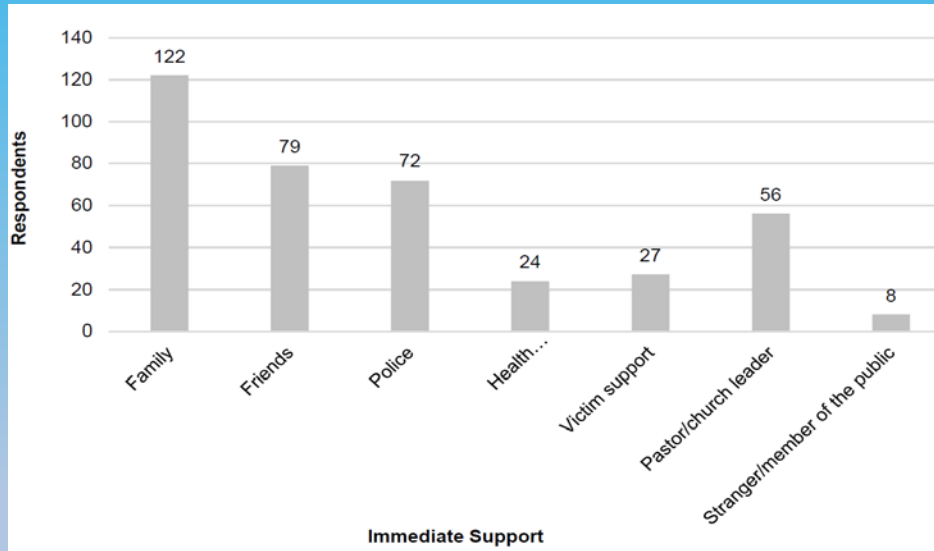


Pacific Communities: First at the scene



Pacific Communities: Immediate support

Received



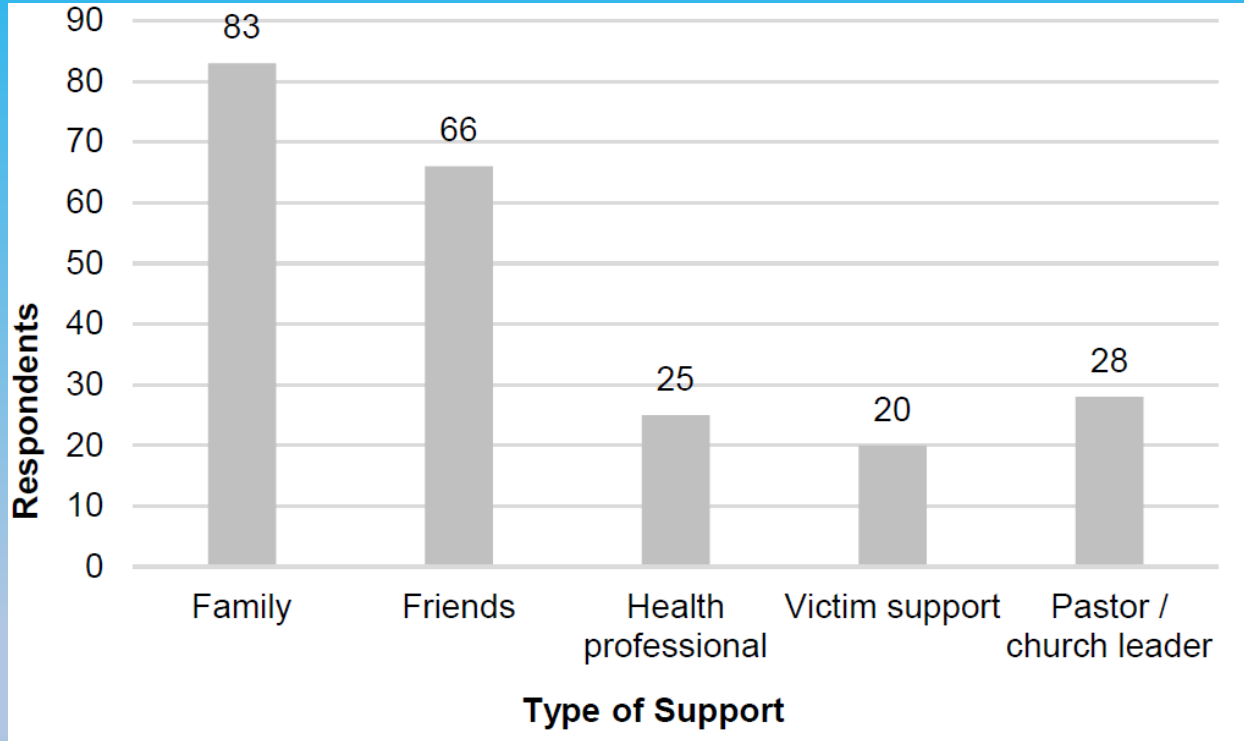
Considered appropriate

| Support | n |
|----------------------|-----|
| Family | 139 |
| Friends | 82 |
| Police | 48 |
| Health professional | 54 |
| Victim support | 70 |
| Pastor/church leader | 62 |

Pacific Communities: Time frame of support received

| Timeframe | n | % |
|------------------------|-----|------|
| Within 6 months | 80 | 51.6 |
| In 6–12 months | 13 | 8.4 |
| In 12–24 months | 2 | 1.3 |
| In more than 24 months | 1 | 0.6 |
| No support at all | 59 | 38.1 |
| Total | 155 | 100% |

Pacific Communities: Effective immediate support



Pacific Communities: Support needs

| Short-term support | n |
|---------------------|-----|
| Family counselling | 121 |
| Health professional | 65 |
| Victim support | 67 |
| Spiritual guidance | 100 |

| Long-term support | n |
|---------------------|-----|
| Family counselling | 115 |
| Health professional | 62 |
| Victim support | 62 |
| Spiritual guidance | 92 |

Pacific Communities: Resource awareness

| Resources | n |
|------------------------------------|----|
| Pamphlets | 51 |
| DVDs | 11 |
| Group Discussions | 52 |
| Websites | 53 |
| 0800 Telephone Support | 45 |
| Suicide Bereavement Support Groups | 58 |

Pacific Communities: Satisfaction with current resources

| Level of satisfaction | n |
|-----------------------|----|
| Very satisfied | 9 |
| Satisfied | 21 |
| Fairly satisfied | 50 |
| Not very satisfied | 22 |
| Not at all satisfied | 8 |

Pacific Communities: Effectiveness of current resources

| Level of Effectiveness | n |
|------------------------|----|
| Very effective | 6 |
| Effective | 18 |
| Fairly effective | 52 |
| Not very effective | 22 |
| Not at all effective | 12 |

Pacific Communities: Barriers to accessing resources

| Barriers | n |
|-------------------------|----|
| Lack of transport | 9 |
| Language | 4 |
| Cultural differences | 29 |
| Shame | 20 |
| Guilt | 19 |
| Lack of Internet access | 9 |
| Lack of finances | 13 |
| Lack of telephone | 2 |

Pacific Communities: Resources – preferred formats

| Resources | n |
|------------------------------------|----|
| Pamphlets | 32 |
| DVDs | 32 |
| Group Discussions | 87 |
| Websites | 44 |
| 0800 Telephone Support | 35 |
| Suicide Bereavement Support Groups | 74 |

Pacific Communities: Potential leaders for the provision of postvention support

| Leaders | n |
|--------------------------|----|
| Churches | 76 |
| Health professionals | 56 |
| Youth workers | 69 |
| Social workers | 77 |
| Community leaders | 74 |
| Police | 22 |
| Educational institutions | 51 |

Service Providers Survey Results

Service Providers: Respondent gender and age group

| Gender | n |
|--------|----|
| Male | 15 |
| Female | 54 |
| Total | 69 |

| Age group | n |
|-----------|----|
| 25–44 | 33 |
| 45–54 | 19 |
| 55+ | 9 |
| Total | 61 |

Service Providers: Respondent ethnicity and country of birth

| Ethnicity | n | Country | n |
|--------------|----|--------------|----|
| Samoan | 31 | New Zealand | 40 |
| European | 15 | Samoa | 12 |
| Tongan | 9 | Tonga | 5 |
| Tokelauan | 7 | Tokelau | 5 |
| Cook Islands | 3 | Cook Islands | 1 |
| Niuean | 3 | Niue | 1 |
| Māori | 3 | Fiji | 1 |
| Fijian | 2 | Other | 5 |
| Tuvaluan | 1 | Total | 70 |

Service Providers: Type of service provided

| Type of agency | n | % |
|--------------------------|----|------|
| Family Services | 4 | 5.7 |
| Child and Youth Services | 5 | 7.1 |
| Mental Health | 15 | 21.4 |
| Healthcare | 12 | 17.1 |
| Church | 2 | 2.9 |
| Social Services | 9 | 12.9 |
| Justice | 2 | 2.9 |
| Education | 8 | 11.4 |
| Pacific Health | 4 | 5.7 |
| Other | 9 | 12.9 |
| Total | 70 | 100% |

Service Providers: Satisfaction with current resources

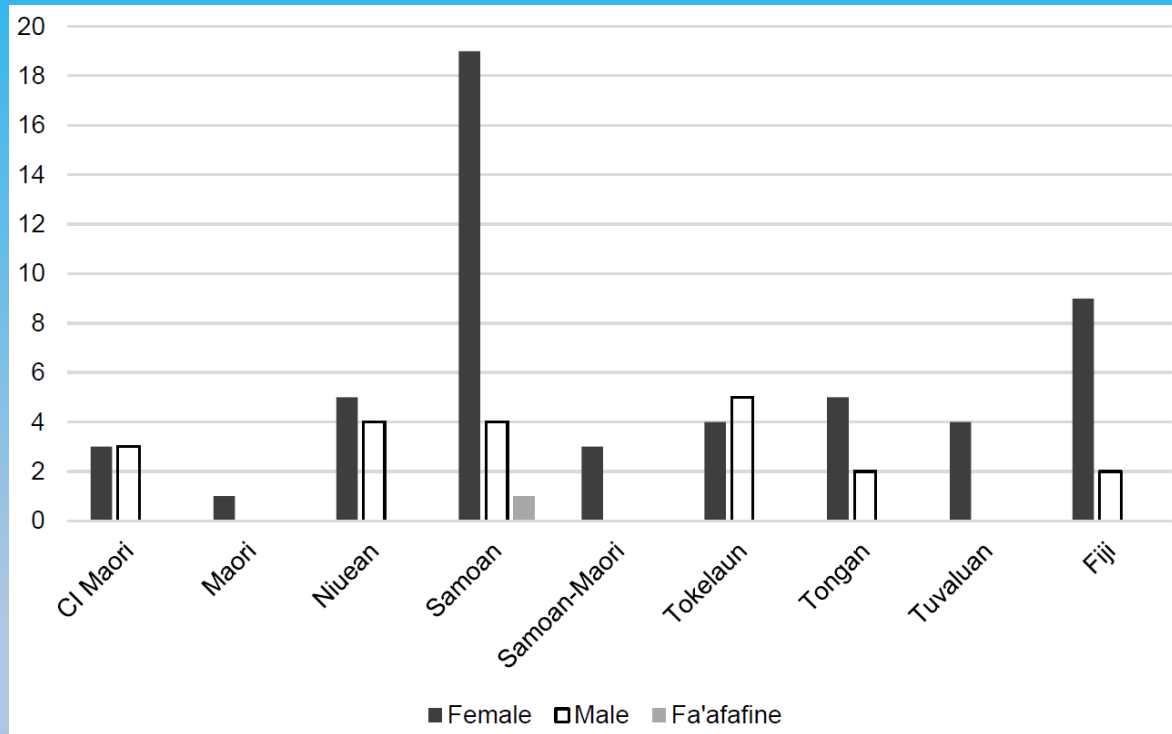
| Level of satisfaction | n | % |
|-----------------------|----|------|
| Very satisfied | 5 | 9.3 |
| Satisfied | 10 | 18.5 |
| Fairly satisfied | 25 | 46.3 |
| Not very satisfied | 12 | 22.2 |
| Not at all satisfied | 2 | 3.7 |
| Total | 54 | 100% |

Service Providers: Potential leaders for the provision of postvention support

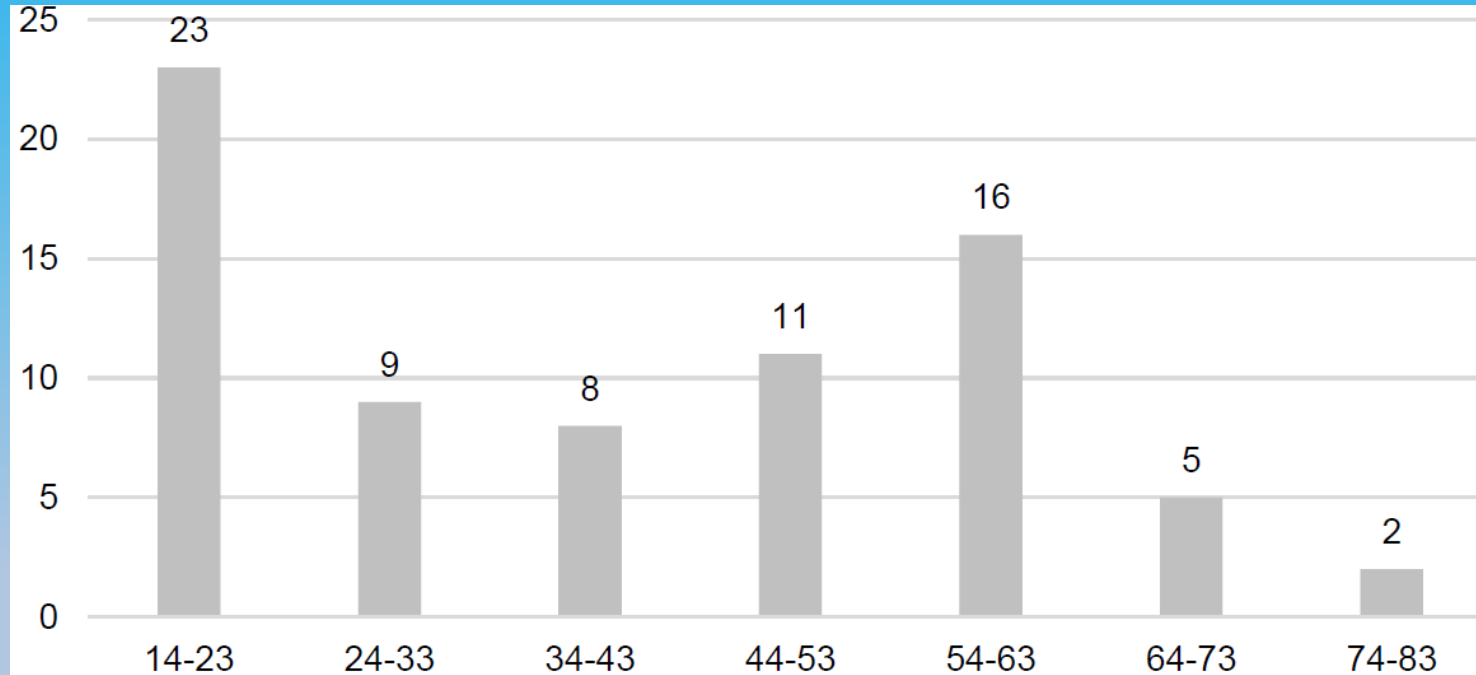
| Leaders | n | % |
|--------------------------|----|------|
| Churches | 29 | 41.4 |
| Health professionals | 31 | 44.3 |
| Youth workers | 12 | 17.1 |
| Social workers | 17 | 24.3 |
| Community leaders | 25 | 35.7 |
| Police | 7 | 10.0 |
| Educational institutions | 11 | 15.7 |

Focus Groups Results

Focus Groups: Participant ethnicity and gender



Focus Groups: Participant age group





HRL

Support groups

Gender

Family counselling

Who should lead it?

Follow up

Cultural competency training

24+ Months

RECOMMENDATIONS

- **The need for more Pacific appropriate information and to grow the Pacific workforce in suicide postvention (paid and voluntary)**
- **Considerations made for Pacific ethnic specific postvention initiatives as well as recognising Pacific diversity (i.e. multi ethnic, gender identities, age and spiritual or non-religious affiliation)**
- **A support group would work within the family rather than in the community amongst strangers**

RECOMMENDATIONS

- **Recognising that there is no such thing as an ideal timeframe to stop grieving or for counselling and support to cease until the individual or family is ready.**
- **Consistent, effective and appropriate short-term and long-term support are key to effective recovery.**
- **The workplace is also an important site outside the home that could play a major part in providing suicide postvention support.**