



National Suicide Prevention Office

Workshop Summary Report

Roses in the Ocean Lived Experience Summit

March 2025

With Gratitude

The team at the National Suicide Prevention Office (NSPO) would like to thank Roses in the Ocean for providing us the opportunity to listen to people with a lived and living experience of suicide at the 2025 Lived Experience Summit.

To Summit participants, we are exceptionally grateful to you for the considered insights you provided to us in your feedback. We are pleased to be sharing a summary of what we heard from you through this report. Your feedback will be incorporated in the development of the outcomes map within the National Suicide Prevention Outcomes Framework to ensure it measures what matters to people with a lived and living experience of suicide.

We also acknowledge with gratitude, your decision to advocate and utilise your personal experience to assist with systems reform and the improvement of experiences and outcomes in suicide prevention.

About the National Suicide Prevention Office

The National Suicide Prevention Office (NSPO) was established in January 2022 as a specialist office located within the National Mental Health Commission. The NSPO is tasked with leading a coordinated, whole-of-governments approach to suicide prevention.

As announced in the 2024-25 Budget, the National Mental Health Commission and the National Suicide Prevention Office transferred into the Department of Health and Aged Care as a non-statutory office on 30 September 2024.

The NSPO provides robust, evidence-based insights and advice to ensure an effective suicide prevention system by:

- Collaborating with lived experience communities, as well as across governments, portfolios and sectors to promote a social determinants approach to suicide prevention;
- Publicly reporting on the state of suicide prevention in Australia, monitoring the impact of government action and identifying priorities for further reform; and
- Advising governments on strategic responses that will improve suicide prevention, including identifying policy settings to meaningfully impact future prevalence of suicidal distress.

The NSPO began by developing the [National Suicide Prevention Strategy](#), which now informs our ongoing work program. The NSPO is currently developing a National Suicide Prevention Outcomes Framework for monitoring and reporting progress in suicide prevention.

The work of the NSPO is informed by people with lived and living experience of suicide and draws on the rich combined knowledge and expertise of individuals, communities,

service providers, advocates, researchers and government agencies across portfolios and jurisdictions.

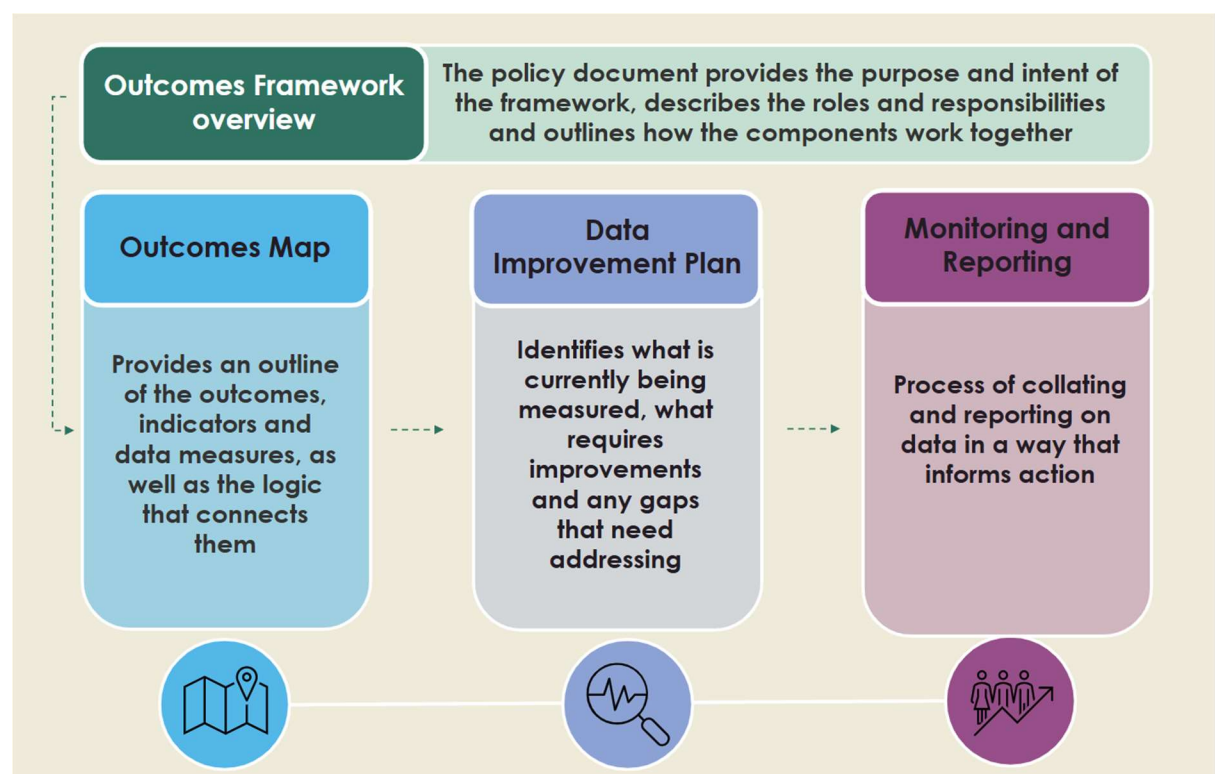
More information is available at <http://www.mentalhealthcommission.gov.au/nspo>.

National Suicide Prevention Outcomes Framework Overview

The National Suicide Prevention Office is developing the National Suicide Prevention Outcomes Framework to define key outcomes relating to suicide prevention and how to measure whether progress against them is being made.

Outcomes are clear statements that define what long-term success looks like for people and communities. It will be used to drive collective effort towards achieving a common goal.

The framework will be comprised of several components: an overview, an outcomes map, a data improvement plan, and a monitoring and reporting plan.



The Outcomes Framework will be critical to providing a collective approach to measuring outcomes that matter to people in suicide prevention.

The measurement of progress in suicide prevention is currently focused on tracking trends in population-wide suicide rates and monitoring the implementation of suicide prevention activities. This leaves a significant gap in our understanding of the impact and effectiveness of the suicide prevention system.

The Outcomes Framework aims to measure success over time. It will introduce measurable outcomes that are person focused, providing greater insight into the pathways to suicide and the impact of prevention efforts. It will improve accountability and transparency in suicide prevention by enabling meaningful reporting of progress.

By listening to the lived experiences of people, the NSPO will be able to embed insights that help improve understanding of what works and what doesn't work in suicide prevention. This will ensure that planning and policy decisions are well informed and are more effective in reducing suicidal distress, suicide attempts and suicide deaths.

The Outcomes Framework will align with the direction of national efforts as set out in the National Suicide Prevention Strategy. The Strategy provides a model with recommended actions for governments, service providers and communities. The Outcomes Framework translates the model into people-centred outcomes, describing the impact we're trying to achieve, and how to measure whether we are succeeding in reducing distress and lives lost to suicide.

The Lived Experience Summit Workshop – 2025

On Thursday 13 March, Roses in the Ocean provided the NSPO with the opportunity to discuss the development of the Outcomes Framework and conduct a workshop with the 2025 Lived Experience Summit participants.

The NSPO took the opportunity to ask participants what is critical to be measured to determine progress in suicide prevention.

It is well established that the voice of lived and living experience is essential to achieving lasting reform. Those who have accessed the system or experienced challenges in accessing the system know best what improvements need to be made and how best to measure progress. The NSPO asked participants what they viewed as the most critical measures of progress and how they would like to see people with lived and living experience involved in contributing to qualitative data collection.

Questions

The following questions were considered by approximately 260 participants seated across 32 tables at the 2025 Lived Experience Summit:

1. From your experience, what is critical to be measured to determine progress in suicide prevention? How would you prioritise these – what is most critical?
2. What do you suggest would be the best way for people to feed into qualitative narrative measuring of that outcome?

Participants were asked to scribe responses to the above questions on behalf of their table group. These responses were collected by the NSPO and grouped into themes. There were 477 written responses in total, a summary of which is below.

Summary of themes arising:

There was a generous desire from participants to actively utilise their lived and living experience to assist the NSPO to understand what is critical to be measured to determine progress in suicide prevention.

Question 1

There were 352 responses provided discussing the critical measurements that should determine progress in suicide prevention. Key themes identified as critical to be measured to determine progress in suicide prevention included:

Theme 1: Improvements in data collection

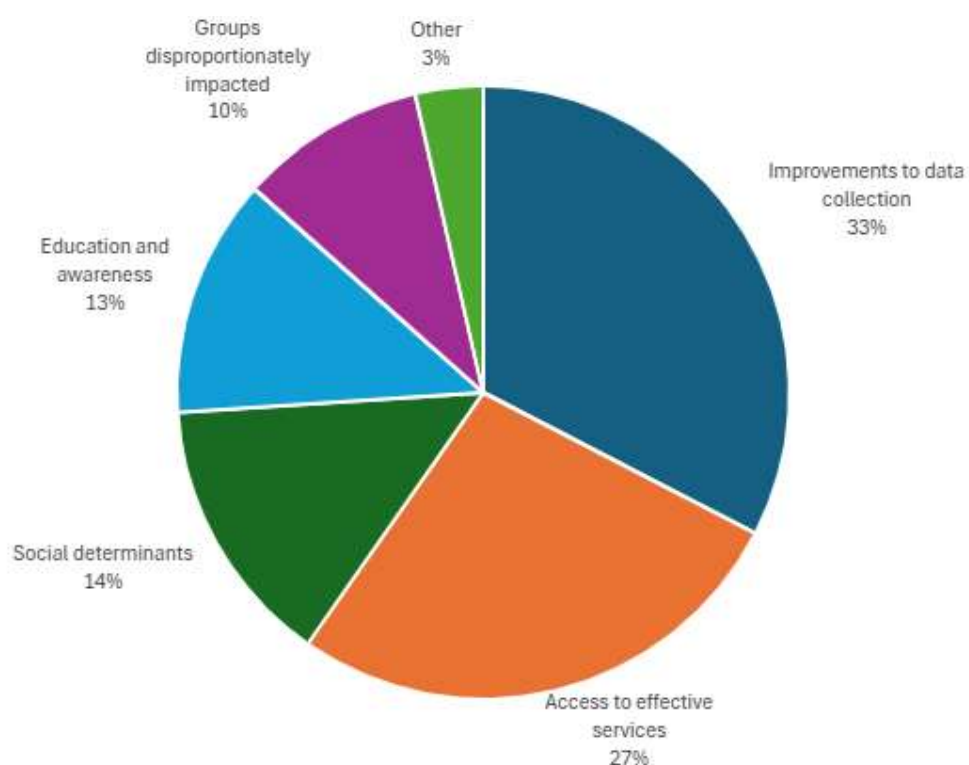
Theme 2: Access to effective services

Theme 3: Social determinants

Theme 4: Education and awareness

Theme 5: Groups disproportionately impacted by suicide

Identified priorities for measurement in suicide prevention



Theme 1: Improvements in data collection

There were 119 responses pointing to the need to improve data collection capability with a key theme reflecting the need to ensure qualitative data from people with a lived and living experience and carers, family and kin. Twenty responses called for the collection of data that measures both levels of distress and wellbeing – that is, participants recommended using qualitative data to understand what is causing the distress and what protective factors are contributing to wellbeing. Some suggested also tracking people's levels of hope. Responses noted the importance of monitoring the rates of lives lost to suicide but highlighted the need to also hear from and collect data on attempt survivors and those living with suicidal ideation to better understand what supports are most helpful. The need to map data and link data sets to better understand impacts of the social determinants was also a key theme. Where funding is linked to data, it was emphasised that it is important to understand the helpfulness of the supports, not just the number of times they were accessed.

Theme 2: Access to effective services

Ninety-nine responses referenced the measurement of access to and engagement with services as a critical outcome to measure, with many highlighting that this needs to reflect the perspectives of those who access services. Participants felt those who engage with services should be asked if the experience was meaningful, helpful, compassionate and affordable. There should be greater understanding of who is and who isn't accessing services and whether there is continuity of care. When people disengage with services, it was suggested that efforts be taken to understand why people are disengaging. It was suggested that mapping of services across sectors within communities would support insights into emerging and fluctuating crisis and identify challenges with service delivery.

Theme 3: Social determinants

Fifty-two responses pointed to the importance of improving our understanding of the impacts of social determinants. It was suggested that the link between social determinants and suicide needs to be better understood using data that reflects the intersectionality of experience, across sectors and across communities. A number of responses suggested it was important to better understand data specific to alcohol and other drug use, domestic violence and housing security and their intersection with suicide. Initiatives to reduce the experience of stigma, monitor the experience of 'isms' and build trauma informed suicide prevention capability within sectors that address the social determinants were identified as important to be measured.

Theme 4: Education and awareness

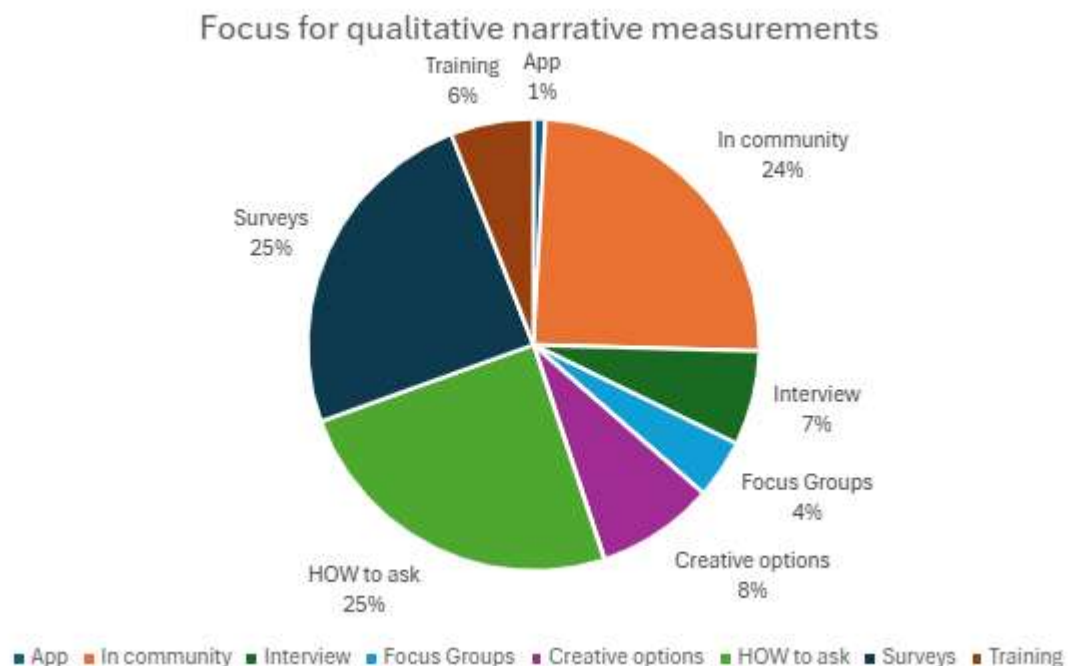
Forty-six responses pointed to the importance of measuring initiatives that would increase education and awareness, both to reduce stigma and increase engagement with supports. The importance of education especially to assist young people to engage with services was highlighted, as was the need to increase opportunities for culturally and linguistically diverse communities to have culturally appropriate services available, and campaigns increasing awareness of their availability. Participants called for the measurement of the number of services available as well as the impact of any campaigns to encourage engagement.

Theme 5: Groups disproportionately impacted by suicide

Thirty-six responses called for a greater understanding of the experience of distress and suicide for groups that are disproportionately impacted by suicide. Several responses suggested the Social and Emotional Wellbeing Framework should inform the design of the Outcomes Framework. It was seen as important that there is an increase in the understanding of the mental health and wellbeing of the most marginalised groups with continuous measurement of progress in suicide prevention within them.

Question 2

Participants were asked to suggest the best way for people with lived experience to contribute to qualitative (narrative) measures. There were 112 responses received.



Contributing lived and living experience to qualitative narrative measuring of outcomes

Most responses referred to the importance of meeting people where they are – at the grassroots. Some suggestions were: in community, in regional areas, in the service they are engaging with, through non-clinical groups, community-based groups, shelters and refuges, aged care facilities, LGBTQI+ organisations, workplaces, schools and universities. The importance of hearing people's stories directly was highlighted, as was the importance of ensuring those collecting information are appropriately trained to do so safely and with independence from those responsible for service delivery and allocation of funding.

Some responses focused on how the questions should be asked, emphasising that it is important that lived experience is centred in the design of questioning. It was suggested that questions should ask about the helpfulness of the support system, what worked and what didn't work? Were the responses compassionate? How easy was the system to navigate? Were there pathways for support? Was there follow-up support? It was suggested that care should be taken to ensure access for people to respond and innovative approaches should be explored to capture the experience of people who do not trust the system.

It was also suggested that measurements should not be taken as a one-off but rather track the journey of the individual (both levels of distress and wellbeing) and that individuals should have the option to request supporters, family, kin and carers be

offered the opportunity to provide feedback. Options for obtaining data from GPs were also suggested. One response suggested the creation of an NSPO app, which would need to be as secure as the Medicare app to allow people to track their own journey and contribute their experience data over the long-term.

Some of the techniques suggested for collecting qualitative data included surveys, interviews and focus groups. Many responses noted the importance of offering creative opportunity and choice for the contribution of feedback including art, voice, music and videos. It was also suggested that approaches should be co-designed in community with data de-identified and remuneration offered.

Next steps

Thank you to all of those who participated in the National Suicide Prevention Outcomes Framework workshop at the Roses in the Ocean Lived Experience Summit 2025. We have found your feedback really helpful and will use it to inform the development of the Outcomes Framework.

If you are interested in future consultation opportunities or would just like to be kept up to date on the development of the Outcomes Framework and the work of the National Suicide Prevention Office, please register your interest by scanning the QR code to register below or emailing with a request to register to our e-newsletter nspo@nspo.gov.au. We would value the opportunity to stay in touch.



With much appreciation,

The team at the National Suicide Prevention Office