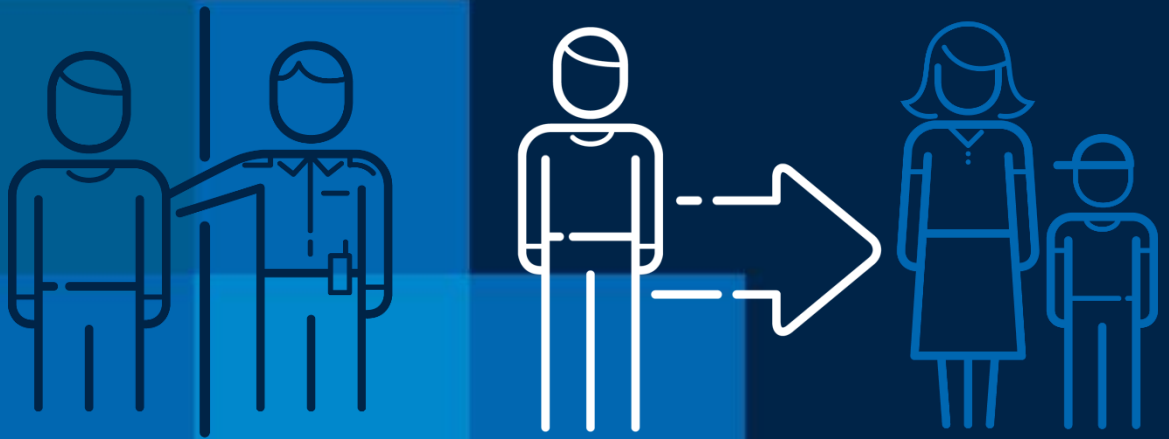




**ACT  
CORRECTIVE  
SERVICES**

One team, one purpose:  
supporting a safer community

# Suicide Prevention Framework



**ACT**  
Government

Justice and Community Safety

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## Executive introduction

The ACT Corrective Services (ACTCS) Suicide Prevention Framework outlines ACTCS' commitment to placing clients who are experiencing feelings of suicide and suicidal behaviours at the centre of service planning and delivery to provide a service that recognises the collective responsibility of all stakeholders to support clients during times of distress.

There are complex challenges in identifying and preventing suicide and self-harm in correctional settings.

Collaboration across government and the community sector is critical for suicide prevention in ACT correctional centres and community supervision environments. An integrated, multi-disciplinary approach provides a safe, secure and caring environment to reduce stigma, support disclosure and minimise harm.

The Framework outlines how a person-centred approach and strengthening protective factors and appropriately addressing risk factors is key to a proactive approach towards suicide prevention.

We would like to thank all those involved in the development of the Suicide Prevention Framework, including clients, people with lived experience, community and advocacy organisations, Aboriginal and Torres Strait Islander people, staff, oversight bodies and other government agencies. This collaboration has been critical in helping us understand how we can better support individuals experiencing suicidal ideation, distress and related challenges underpinned by safety, inclusion and resilience for all.

Leanne Close <sup>APM</sup>  
Commissioner, ACT Corrective Services

## Purpose

The ACT Corrective Services (ACTCS) Suicide Prevention Framework guides how we work with clients, both in custody and in the community, to reduce the risk of suicide and suicidal behaviours.

## Context

ACTCS recognises that individuals serving prison or community sentences are at higher risk of suicidal behaviour than the general community.

ACTCS commits to placing clients who are experiencing feelings of suicide and suicidal behaviours at the centre of service planning and delivery to provide a service that recognises the collective responsibility of all stakeholders to support clients during times of distress.

## Key definitions

<b>Client</b>	A person who is under the care or supervision of ACTCS in a custodial environment or community setting. This includes, but is not limited to, people who are convicted of an offence and subject to detention or a community corrections order, accused people subject to detention or bail, and people on parole.
<b>Suicide</b>	An action intended to deliberately end one's own life.
<b>Suicidal behaviours</b>	The collective term for suicidal ideation, suicide plans and suicide attempts. It includes the spectrum of activities related to suicide and self-harm including suicidal thinking, self-harming behaviours not aimed at causing death, and suicide attempts. The term can also include deliberate recklessness and risk-taking behaviours.
<b>Suicidal ideation</b>	Serious thoughts about attempting or completing suicide.
<b>Suicide prevention</b>	Actions or initiatives to reduce the risk of suicide among populations or specific target groups.
<b>Self-harm</b>	Includes attempts to suicide, as well as where people have intentionally hurt themselves but not necessarily with the intention of suicide (for example, acts of self-mutilation). Sometimes called non-suicidal self-harm, intended self-harm, self-injury or self-inflicted injuries.

## Key relevant documents

<p>The Suicide Prevention Framework compliments several existing ACTCS strategic documents including:</p> <ul style="list-style-type: none"> <li>• <i>Integrated Offender Management Framework</i></li> <li>• <i>Community Operations Offender Management Framework</i></li> <li>• <i>Rehabilitation Framework</i></li> <li>• <i>Walking with Women on the Pathway to Change Framework</i></li> <li>• <i>Be the Change We Seek: Aboriginal and Torres Strait Islander Offender Framework.</i></li> </ul>	<p>The Suicide Prevention Framework is supported by existing ACTCS operational documents:</p> <ul style="list-style-type: none"> <li>• <i>Detainees at Risk of Suicide or Self-harm Policy</i></li> <li>• <i>Detainees at Risk of Suicide or Self-harm Operating Procedure</i></li> <li>• <i>Practice Guideline – Responding to Suicidal Thoughts and Behaviours</i></li> <li>• <i>Incident Reporting, Notifications and Debriefs Policy</i></li> <li>• <i>Risk Alerts Policy</i></li> <li>• <i>Detainee Observations Operating Procedure</i></li> <li>• <i>Court Transport Unit Person at Risk Management Operating Procedure</i></li> <li>• <i>Detainee Muster and Welfare Checks Operating Procedure.</i></li> </ul>
<p>Relevant external documents include:</p> <ul style="list-style-type: none"> <li>• Canberra Health Services, <i>Suicide Prevention and Intervention at the Alexander Maconochie Centre/ACT Court Cells 2024</i></li> <li>• Canberra Health Services, <i>Procedure for the Initial Management, Assessment and Intervention for People Vulnerable to Suicide 2021</i></li> <li>• ACT Government, <i>ACT Mental Health and Suicide Prevention Plan 2019-2024</i></li> <li>• Australian Government, <i>National Mental Health and Suicide Prevention Plan 2021</i></li> <li>• Australian Government, <i>Living is For Everyone: A Framework for the Prevention of Suicide and Self-harm in Australia 2008</i></li> <li>• AIHW, <i>Protective and Risk factors for Suicide Among Indigenous Australians 2022.</i></li> </ul>	

## Consultation

ACTCS consulted with a wide range of stakeholders on the ACTCS Suicide Prevention Framework via workshops, focus groups, surveys and email.

We heard how ACTCS can improve support for detainees and offenders experiencing suicidal thoughts, self-harm, distress and related challenges. What we heard is outlined in the *ACTCS Suicide Prevention Framework Consultation Summary*.

## Research

Comprehensive research of empirical literature and government reports on suicide and suicidal behaviours in correctional settings was conducted to inform the Framework. This is outlined in the *ACTCS Suicide Prevention Framework Research Summary*.

The reviewed literature suggests that research on suicide in correctional settings appears to be limited with very few studies being replicated. The review found material mainly with an international focus with very little research in the Australian context. Suicide risk factors and protective factors identified in literature vary even across different prisons, are not always universally applicable and must be applied with caution. In the research based in correctional settings, the focus is largely on sentenced prison populations rather than on people in the justice system before sentencing (remand) or after completion of a custodial sentence.

## Key statistics

While suicide rates in Australia and worldwide as a whole has varied greatly over the past several decades, suicide rates among the prison population have remained consistently and significantly higher than in the general population. The highest numbers of deaths from suicide in custody have been among men aged 18-39 who are non-indigenous. However, there is an increasing overrepresentation of Aboriginal and Torres Strait Islander people in prison. Considering that Aboriginal and Torres Strait Islander people have a much higher proportion of suicide deaths in the community compared to non-indigenous people, suicide deaths in custody of Aboriginal and Torres Strait Islander people continues to be a significant issue.

Self-harm is not always a suicide attempt, but it is one of the biggest indications of suicide risk. A history of self-harm is highest among women and young adults entering prison, although this statistic is based on self-reporting and could be skewed. More than 1 in 7 Aboriginal and Torres Strait Islander people entering prison reported a history of self-harm, while more than a quarter of non-indigenous prison entrants report the same.

Unsentenced detainees (detainees on remand) have the highest rates of suicides in custody. In the 2017-22 period, more than 22% of deaths in custody among unsentenced detainees were due to suicide, compared to around 7% of deaths among sentenced detainees being due to suicide.

The risk of death is particularly high in the first four weeks after release, and the causes of death are generally preventable, including suicide. The risk of suicide for those recently released from prison is about 14 times as high for females, and about 5 times as high for males, as for females and males in the general population.

However, considering the size of the prison population compared to the whole country, the actual number of suicides in custody per year are low, and have been decreasing. Deaths from suicide in custody in Australia peaked in 1997-98 at 44 deaths, while 9 deaths from suicide in custody occurred in 2021-22. This trend has occurred despite the growing prison population over the same time. The

number of deaths from suicide among men and Aboriginal and Torres Strait Islander people in custody has decreased over time, in line with the overall decrease in deaths from suicide in custody.

## Key risk factors

Several studies in correctional settings and frameworks such as the Victorian Correctional Suicide Prevention Framework have identified prison-based factors and characteristics that can suggest an increased risk of suicidal behaviour, including:

<p><b>Institutional factors</b></p> <ul style="list-style-type: none"> <li>• Single cell incarceration, isolation, or sensory deprivation</li> <li>• Serving long sentences (more than 18 months)</li> <li>• Violent offences, especially against family members/partners</li> <li>• First incarceration</li> <li>• Remand</li> <li>• Prior criminal history with multiple arrests</li> <li>• Uncertainty about sentence length</li> <li>• Boredom and lack of meaningful occupation</li> <li>• Incarceration prior to conviction/remand</li> <li>• Perceived dehumanising aspects of imprisonment</li> <li>• Overcrowding</li> <li>• Bullying and harassment, or violent conflict</li> </ul>	<p><b>Demographic risk factors</b></p> <ul style="list-style-type: none"> <li>• Male (especially young males)</li> <li>• Trans and gender-diverse</li> <li>• Single marital status</li> <li>• Low educational levels</li> <li>• Low socio-economic status</li> <li>• Language barriers</li> </ul>
<p><b>Clinical factors</b></p> <ul style="list-style-type: none"> <li>• Previous psychiatric diagnosis</li> <li>• Previous suicide attempts</li> <li>• History of alcohol and substance abuse</li> <li>• Family history of mental illness or suicide</li> <li>• Dysfunctional family dynamics (such as parental substance abuse, family violence)</li> <li>• Childhood trauma (such as neglect and maltreatment)</li> </ul>	<p><b>Psychosocial factors</b></p> <ul style="list-style-type: none"> <li>• Poor coping methods</li> <li>• Stressful life events</li> <li>• Relationship and/or social support changes</li> <li>• Shame or guilt</li> <li>• Family conflict</li> </ul>

Risk factors specific (or more significant) to recently released detainees include:

- History of self-harm (combined with less supervision and more access to means of suicide)
- Psychiatric diagnosis (with potentially reduced access to mental health care and medication)

- Hopelessness
- Social isolation/lack of support in community
- Unemployment, or barriers to employment
- Homelessness, or risk of losing secure housing
- Poor coping skills

For Aboriginal and Torres Strait Islander people, risk factors can include:

- Experiencing a mental illness
- Experiencing poor physical health or a disability
- Attempted suicide or self-harm in the past
- Have had negative situations happen recently, particularly with relationships or their health
- Have been physically or sexually abused as a child
- Known someone who has recently died by suicide
- Have been socially isolated/ had poor social integration
- Family conflict
- Have been incarcerated
- Homelessness
- Have certain personality characteristics (impulsivity, aggression)
- Transgenerational trauma – i.e., loss of cultural identity, dispossession of land, social exclusion and racism.

## Key protective factors

Protective factors are usually opposite to risk factors and can be viewed as a spectrum that can change with circumstance or be modified. Enhancing protective factors contributes to a more holistic approach to suicide prevention that is proactive and addresses the root causes of suicide risk, providing individuals the ability to develop resilience and an ability to cope with challenging life situations.

Excluding factors that cannot be reasonably modified, such as family history, childhood trauma, etc., protective factors identified from literature include:

- Social connectedness- even tight-knit and supportive communities within the correctional environment can reduce the risk of suicide
- Supportive and caring parents or family

- Safe and secure living environment or housing
- No alcohol or substance abuse problems
- Mental health and wellbeing
- Good physical health
- Good coping strategies and emotional resilience
- Good communication skills
- Higher education levels
- Positive outlook on life, reasons for living
- Motivation for rehabilitation
- Absence of guilt or shame and positive sense of self
- Supportive relationships, community
- Physical and emotional security
- Sense of purpose and meaning in daily life
- Protective factors for Aboriginal and Torres Strait people include connecting to their culture, country and language.

## Key issues

ACTCS acknowledges the complex challenges in identifying and preventing suicide and self-harm in correctional settings, including for individuals under community supervision.

Multiple risk factors do not necessarily mean that a person will attempt suicide. Likewise, some people who do take their own lives could have a few risk factors and many protective factors.

Furthermore, assessment of the risk for an individual is difficult due to factors like client distrust of authority, limited resources and the potential for underestimating risks in those who do not openly express suicidal thoughts.

ACTCS recognises that disruptions to support networks and isolation in detention can impact mental wellbeing. Suicide risk can be high for individuals released from custody, likely due to reduced surveillance and support after release. Also, there can be increased risk in the community from having to confront unfriendly situations and people. For those under community supervision, timely access to support services is vital to address unique challenges and strengthen resilience.

## Principles

Key principles underpin how ACTCS supports its clients in custodial and community environments:

- Preventing suicide is a shared responsibility
- Knowing when clients are at a higher risk of suicide and need help is key to prevention
- A person-centred approach is critical to providing individualised care and maintaining respect and dignity
- Diverse cultures and experiences are respected, valued and supported, with recognition that suicide and suicidal behaviour is conceptualised and approached differently across cultures
- Approaches to suicide prevention are evidence based, trauma informed, and informed by people with lived experience
- An integrated, multi-disciplinary approach provides a safe, secure and caring environment to reduce stigma, support disclosure and minimise harm
- Strengthening protective factors and appropriately addressing risk factors is key to a proactive approach towards suicide prevention.

### Person centred approach

ACTCS recognises the increased vulnerability of people in the justice system, especially pre and post incarceration. Within this context, ACTCS also acknowledges the unique vulnerabilities and challenges experienced by a range of people, including Aboriginal and Torres Strait Islander people, LGBTIQ+ people, Culturally and Linguistically Diverse people, people with disability, and women. The experience of factors such as discrimination, harassment, marginalisation, violence and intergenerational trauma can increase people in these groups' susceptibility to suicide. These types of experiences often combine to result in further disadvantage for individuals that are a member of one or more of these groups.

A person-centred approach focuses on the individual by providing trauma-informed, holistic care which incorporates individual responsivity (what works and doesn't work for the person). A person-centred approach also looks at the individual as a member of the community.

### Cultural responsiveness

ACTCS has a diverse client population across custodial and community settings. It is important that:

- Diverse cultures and experiences are respected, valued and supported
- We are mindful that suicide and suicidal behaviour are conceptualised and approached differently across cultures
- Culturally informed, appropriate, and safe practices are used to support suicide prevention.

A strengths-based approach and consultation with people from diverse cultural backgrounds is critical for culturally appropriate responses to suicide prevention.

## Focus areas

ACTCS' service approach to suicide prevention, including focus areas, objectives and what this might look like in practice, is outlined below.

This approach has been adapted from the Victorian Corrections Suicide Prevention Framework.

### Safe, secure and caring environment

#### Objective:

Fostering a safer environment through increasing awareness and education about suicide prevention and promoting a safer and more supportive environment. Staff demonstrate prosocial behaviours with clients.

#### What this might look like:

- Supporting family contact through visits, phone calls and emails
- Providing access to peer mentors
- Placing clients in shared cells
- Ability of clients in custody to access means of suicide is limited
- Risk assessments and management plans for clients
- Providing information to clients on what help is available and how they can access it safely and without judgement
- Using the least restrictive and intrusive conditions possible, without compromising a client's health and wellbeing
- Strengthening protective factors, including access to purposeful activity, that supports rehabilitation and reintegration.

### Timely identification and support

#### Objective:

To be aware of the warning signs when a client needs help, knowledge of how and when to provide help, and support for clients and staff to access help.

#### What this might look like:

- Mental health assessment screening for clients at admission/induction

- Education for clients and staff about the available services
- Referrals for clients to appropriate services and supports, where required
- Observations and monitoring of at-risk clients
- Peer support.

## Collaboration

### Objective:

For all relevant stakeholders to work together to provide the best possible individualised care, for the client to manage suicidal behaviours and promote wellbeing.

### What this might look like:

- Providing necessary, accurate, secure, and timely information
- Coordinated case management conferencing
- Collaborative practice meetings (for example, High-Risk Assessment Team meetings)
- Appropriate programs and treatment
- Providing culturally responsive and safe support
- Clearly defined roles and responsibilities.

## Continuity of care

### Objective:

For clients in the community to be aware of the community supports and services available to support their health and wellbeing, especially during the transition from custody or supervision.

### What this might look like:

- Referrals for clients to appropriate services and supports, where required
- Information of the supports and services available, for clients and staff
- Strengthening relationships with community organisations
- Establishing a support network for clients on release to assist with transitioning back into the community.

## Incident management

### Objective:

To appropriately manage suicides and attempted suicides and identify areas for continuous improvement.

**What this might look like:**

- Policies, procedures and training provide guidance to staff
- Debriefing is conducted in a timely way and is focused on participants' welfare and continuous improvement
- Improved data collection on clients at risk of suicide so that service design is evidence based and specialised to the corrections environment
- Consulting with people with lived experience for service planning and delivery
- Consistently reflecting on and implementing better practices across ACTCS to support people at risk of suicide
- Ongoing professional development opportunities for all staff
- Non-punitive responses to instances of self-harm.

## Trauma informed

**Objective:**

To support resilience, adaptation and coping skills to clients and staff affected by suicide in the workplace.

**What this might look like:**

- Referrals for clients to appropriate services and supports where required
- Non-criminogenic programs for clients that support wellbeing
- Employee Assistance Program is offered to all staff affected
- Providing culturally responsive and safe support
- Awareness and acknowledgement of vicarious trauma
- Ongoing professional development opportunities for all staff
- Strengthening protective factors to improve health and wellbeing
- Non-punitive responses.

## Supports for prevention

### Informed and supported staff

Building staff capability in how to identify and respond to suicidal behaviour is critical for suicide prevention. This is achieved through:

- Participating in training, including mental health first aid, suicide and self-harm, trauma informed and CPR training
- Education and awareness about the risks, causes and responses to suicide and suicidal behaviour
- Professional supervision
- Appropriately sharing information to best support clients.

Being exposed to suicidal behaviour can be emotional and challenging. It is essential that staff are supported to maintain their own wellbeing and resilience. ACTCS are committed to supporting staff through:

- Effective and inclusive debriefs
- The Employment Assistance Program
- The Peer Support Program
- Professional supervision
- Access to wellbeing initiatives supported by ACT Government.

## Responsive processes

Responsive processes are critical to support suicide prevention. Intake into a correctional centre or into community supervision are critical points in a client's journey with ACTCS that provide an opportunity to identify concerns and ways to better support clients.

Ongoing awareness and vigilance of suicide risk, timely referrals, and providing necessary, accurate, secure, and timely information are all critical components of responsive processes.

## Working together

Preventing suicide is a shared responsibility. An integrated, multi-disciplinary approach to suicide prevention and service delivery more broadly enables positive outcomes for clients. Collaboration and partnerships across government and the community sector are critical in providing the best possible care for clients to support wellbeing. This includes:

- Appropriately sharing information
- Strengthening positive connections
- Key stakeholders working closely together to support clients
- Supporting continuity of care between custody and community supervision and the transition from supervision.

Education and training for staff enables staff to identify risk factors and know when and where to reach out for assistance. This combined approach improves pathways to support affected clients and provide improved coordination of responses and local pathways to care.

## Continuous improvement

ACTCS is committed to continuous improvement in approaches to suicide prevention. Improving the quality of evidence for understanding suicide and suicide prevention is fundamental to the development and implementation of effective policies and practices. This includes debriefs, post incident reviews, lessons learnt and regular reviews of policy.

Ongoing learning to support better practice, including identification of warning signs, tipping points and imminent risk factors is critical.

Change can take time, and learning is a continual process through reflection on service delivery and seeking to understand client experiences and outcomes.

## Implementation and review

This Framework commits ACTCS to the key principles that will underpin all service delivery into the future and provides a guide to what better practice looks like in the correctional environment. This will be realised through the future design of services, including reviews underway in both the community and custodial environments.

Periodic reviews of the Framework will enable ACTCS to reflect on approaches to suicide prevention and consider any advances within the custodial environment and the wider community to prevent suicidal behaviour.

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