

Response to the DHS Draft Suicide Prevention Action Plan 2025 – 2028

About Carers SA

Carers SA is the peak advocacy body for Carers in South Australia. Raising the voice of Carers, recognition of Carers, their rights, wellbeing and needs is at the heart of Carers SA's efforts. We persistently advocate across governments, health and social services and systems, business and communities to prioritise appropriate and meaningful support and services for Carers.

Carers SA aims to ensure that Carers needs, wishes, values and perspectives are elevated and able to inform and influence decision-making by government, service providers, policy makers, legislators and systems and services to improve the lives and wellbeing of Carers in South Australia.

Carers SA is both an advocacy peak body and a service provider for Carers through the Carer Gateway. This provides us with a unique opportunity to understand the needs of Carers and identify and implement ways to improve the services they use. It enables us to engage with many and diverse Carers across South Australia through our broad networks and through services and supports and in so doing, positions Carers SA to raise awareness of issues facing Carers and raise the voice of Carers to inform and influence policy and decision-making about things that impact them.

Our Advocacy aims to enable Carers to:

- have their voices heard on issues that are important to them
- defend and safeguard their rights
- be at the table as partners in decision-making that impacts them and the people they care for, and
- contribute to shared planning and problem solving to improve the lives of Carers.

Carers and their experience with suicide – the evidence

An Australian study in 2021¹ found Carers are frequently the people who provide ongoing care and support for a person following a suicide attempt. Carers provide an important protective factor in reducing the risk of further suicide attempts and help facilitate recovery. However, in providing support to those who have attempted suicide Carers are vulnerable to adverse physical and psychological outcomes such as burnout, fatigue, trauma, and reduced health status (caregiver burden).² A study on factors associated with high psychological distress of carers of people with a disability found 27% of carers had high psychological distress, and when carers had a closer relationship with the person they care for, psychological distress was elevated by 50%.³

Further, since the main emphasis of care tends to be on the person who has attempted suicide and not on the Carer, Carers often feel isolated as their concerns are largely hidden. A close relationship between Carer and person they care for who has attempted suicide can increase pressure on Carers to consistently monitor for suicide risk.

Carers of people who have made a suicide attempt are a highly distressed group and are at heightened risk of suicide themselves.⁴ However, little is known about the additive effects of suicide exposure, caring behaviours, and psychological variables on caregiver burden. Understanding the risk and protective factors would help inform strategies on how to best support Carers of people who have attempted suicide in the development of future interventions and support services for Carers.

An international review found the number of Carers experiencing suicidal ideation ranged up to 71% and further reported evidence of suicide attempts and deaths with 1 in 6 carers likely to attempt and 1 in 10 carers already having attempted suicide.⁵ Carers are more than twice as likely to have low wellbeing and higher rates of psychological distress compared to the average Australian.

The first UK study of suicide risk in parents caring for children with disabilities (and long-term illnesses) has found that while caring for a disabled child; 41% of parents had thought about killing themselves, 8% of parents had made a plan to kill themselves and 2.5% had attempted to kill themselves. Of those who experienced suicidal thoughts and behaviours while caring: Two-thirds had thought about killing themselves in the last 12 months; One-third had made a plan to kill themselves in the last 12 months. More than 50% of parent Carers who had thought about or attempted suicide had never told anyone about these experiences. Fear, judgement, and stigma were the main barriers to disclosure, particularly the fear of having their child removed.⁶

¹ Predictors of Caregiver Burden Among Carers of Suicide Attempt Survivors 2021 [Predictors of Caregiver Burden Among Carers of Suicide Attempt Survivors - PMC](#)

² Hours of care and caring tasks performed by Australian carers of adults with mental illness 2019 [Hours of Care and Caring Tasks Performed by Australian Carers of Adults with Mental Illness: Results from an Online Survey - PubMed](#)

³ Factors associated with high psychological distress in primary carers of people with disability 2019

⁴ Ideation in family carers of people with dementia: A pilot study. 2018 [International Journal of Geriatric Psychiatry | Wiley Online Library](#)

⁵ Carers Australia. The value of informal care in 2020. Deloitte Access Economics

⁶ Suicidal Thoughts and Behaviors in Parents Caring for Children with Disabilities and Long-Term Illnesses 2024 [Full article: Suicidal Thoughts and Behaviors in Parents Caring for Children with Disabilities and Long-Term Illnesses](#)

The 2024 National Carers Wellbeing Survey⁷ reported that 28.2% (of over 9000 survey respondents) were identified as having the highest probability of serious mental illness on the Kessler Psychological Distress Scale. This increased to 37.3% of Carers scored high on the distress scale who care for a person with mental illness. Psychological distress scores also correlated with high degrees of loneliness and low satisfaction with personal relationships and community inclusion. 72.8% of these Carers had not accessed psychological support in the last 12 months despite scoring high on the Kessler scale. However, the evidence on suicide risk in Carers spans care provided across a wide range of conditions including but not limited to terminal illness, physical and/or psychosocial disability and frail aged.

Jointly managed by the University of Queensland and the University of Newcastle, and funded by the Department of Health and Aged Care, the Australian Longitudinal Study on Women's Health⁸ is the largest, longest-running project of its kind ever conducted in Australia. The population-based survey explores the factors contributing to the health and wellbeing of over 57,000 Australian women. Research conducted by Griffith University, using data from the fifth survey, identified a small but significant proportion of female Carers experience death thoughts adding to the growing body of evidence on suicide-related thoughts and behaviours in Carers. This research found that 7.1% of female Carers had felt life was not worth living, also known as having death thoughts, in the previous week, compared with 5.7% of non-carers. The study highlighted that depression was a significant predictor for thinking about suicide. The latest research found that 80% of carers who had experienced death thoughts also met the cut-off for clinically significant depressive symptoms, compared to 22% of carers who had not experienced death thoughts.⁹

Whilst there is limited data on Carers who have died by suicide, some data can be extracted from Carer Payments. In December 2024 the number of people receiving the Carer Payment who died by suicide included 20 (aged 16-25), 65 (aged 26-35), 88 (aged 36-45), 97 (aged 46-55) and 96 (aged 56-65), a total of 366 people.¹⁰ It should be noted however that Carers may receiving other payments or not receiving the Carer Payment are not be captured in this data.

Suicide Prevention Australia, in their Suicide Among Carers Policy Position 2022¹¹ recognise that suicide attempts and suicidal distress have significant impacts not only on the individual experiencing suicidality but also on the Carers, family and friends surrounding them. While aftercare services support survivors of suicide attempts and postvention supports those bereaved by suicide, there is a major gap in the support available to people impacted by a suicide attempt or suicidal distress. These Carers, friends, families and communities are missing out and need support. Carers are the closest support to people who have attempted suicide and who are in immediate risk of suicide, and as such it is critical suicide prevention to ensure Carers are supported in their caring roles to not only continue to support their relatives

⁷ Carers Australia in partnership with the University of Canberra

⁸ Australian Longitudinal Study [ALSWH – Australian Longitudinal Study on Women's Health](#)

⁹ Feeling that life is not worth living (death thoughts) among middle-aged, Australian women providing unpaid care 2014 [Feeling that life is not worth living \(death thoughts\) among middle-aged, Australian women providing unpaid care - PubMed](#)

¹⁰ Economic Inclusion Advisory Committee Report 2025 [Economic Inclusion Advisory Committee 2025 report | Department of Social Services](#)

¹¹ Suicide among Carers Policy Position 2022 [SPA-Suicide-Among-Carers-Policy-Position-Statement-October-2022.pdf](#)

and friends, but to help manage the impact of caring for someone experiencing suicidal behaviours has on their own wellbeing.

Recommendations for inclusion in the Draft Suicide Prevention Action Plan

1. **Addition to Action 1.1:** Recognise Carers as a priority population in the DHS Suicide Prevention Action Plan 2025-2028.
2. **Additional Actions under Strategy 4:**
 - a. Target supports for Carers contemplating or having attempted suicide and improve data collection on deaths by suicide by Carers.
 - b. Develop a South Australian Carer Strategy through a codesign approach with Carers and undertaken by Carers SA which highlights strategies and actions to better identify and prioritise supports for Carers at risk of suicide.
3. **Addition to Action 3.5:** in addition to training for staff, include access to suicide prevention training and information resources for priority populations including Carers
 - a. to equip them with the skills to respond to distress experienced by the person they care for and actively seek supports for the person
 - b. to identify and understand their own suicide risk and actively seek supports for themselves

Carers SA
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