




HOW TO:



Lived Experience of Suicide Engagement,
Partnership and Integration
(LESEPI) Implementation Toolkit



Roses in the Ocean
stemming the tide of suicide

LIVED EXPERIENCE OF SUICIDE ENGAGEMENT, PARTNERSHIP AND INTEGRATION (LESEPI): IMPLEMENTATION TOOLKIT

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LIVED EXPERIENCE OF SUICIDE ENGAGEMENT, PARTNERSHIP AND INTEGRATION (LESEPI): IMPLEMENTATION TOOLKIT

HOW TO: use this toolkit

This toolkit has been developed by Roses in the Ocean to provide organisations, service providers and teams with practical guidance on how to implement the Lived Experience of Suicide Engagement Partnership and Integration (LESEPI) Framework and ensure accountability mechanisms are built into this implementation process. It has been designed to be useful to a wide range of internal and external staff and to be flexibly deployed for a wide range of purposes; from the engagement of small groups of individuals for time-limited consultation and co-design processes to longer term projects.

It has also been developed to be an equally useful resource for individuals with a lived experience of suicide who are considering engaging in an initiative, or taking up a professional role, so they are fully informed about best practice engagement, partnership and integration methods. Providing the information contained within this toolkit to people with a lived experience of suicide is another way for organisations to ensure engagement is meaningful and purposeful and honour their accountability for their engagement, partnership and integration practices.

The toolkit sets out a series of 'how to's' that function as part of the whole document but that can also be used as single practical tip sheets. Topics are grouped into common high level engagement themes, which are then broken down into relevant 'how-to's' which provide a snapshot of key considerations, practical tips, as well as links to other supporting resources.

The principles for safe, effective, and sustainable engagement that underpin the practical advice here are fully defined in the Roses in the Ocean's Lived Experience of Suicide Engagement Principles (LESEP) Guidance document. This toolkit should therefore be used in conjunction with that publication, as well as with the other key Roses in the Ocean's guidance documents which collectively support lived experience informed cultural change:

- Lived Experience of Suicide Engagement, Principles (LESEP) Guidance Document
- Lived Experience of Suicide Engagement, Partnership & Integration (LESEPI) Framework
- Lived Experience of Suicide Engagement, Partnership & Integration (LESEPI): Implementation Toolkit
- Lived Experience of Suicide Engagement, Partnership & Integration (LESEPI) Decision & Evaluation Tools
- Co-designing with people with a lived experience of suicide: Planning Guide
- Lived Experience of Suicide Language and Imagery Guide

For employers seeking to recruit, integrate and support people with lived experience of suicide into designated professional lived experience of suicide roles, please also refer to [Building a Lived Experience Informed and Inclusive Culture: A practical guide for organisations](#).



DECIDING THE LEVEL OF ENGAGEMENT THAT'S REALISTIC & APPROPRIATE

HOW TO: use the LESEPI Decision Tool

1 Roses in the Ocean decision flowchart.

The IAP2 Spectrum of Public Participation – an international ‘gold standard’ tool that articulates the continuum of engagement and partnership of the public in government projects. It was customised for the Victorian Mental Health Lived Experience Framework for the mental health context and has been further adapted by Roses in the Ocean for the specific purpose of lived experience of suicide engagement.

2

HOW TO: determine when to use internal versus external lived experience

The valuing of lived experience expertise is a positive and necessary step forward in creating meaningful organisational culture change. It has also brought into focus concerns about what constitutes legitimate forms of lived experience expertise. Organisations involved in suicide prevention initiatives increasingly pose the question: Why is it necessary to engage independent lived experience consultants, when we have internal staff members who identify as having lived experience and are able to tick the ‘lived experience box’?

Internal staff members who have a lived experience of suicide can offer unique insights when developing and reviewing organisational policies and procedures and provide peer support to colleagues in the workplace and should be engaged as expert partners when designing, developing, implementing and evaluating suicide prevention activities.

There are many benefits to be experienced through supporting internal staff members with lived experience of suicide to share their diverse perspectives (experiencing suicidal thoughts, attempt survivors, carers, bereaved) and draw from them to inform internal policy, processes, and external services etc. eg carers of people in suicidal crisis are well placed to inform how a workplace can better support people in this situation; people bereaved through suicide can assist others re-enter the workplace after experiencing loss through suicide.

While internal staff can play a vital role in reducing stigma, raising awareness, and normalising the experiences of suicide within organisations, there are also a number of critical distinctions between engaging independent external consultation versus utilising existing internal lived experience staff perspectives. In particular:

- External lived experience consultants may provide a richer, broader and more diverse representation and perspective.
- Independent lived experience perspectives are valuable because they are independent of the organisation, therefore they are more objective not being an intrinsic part of the organisation’s culture.
- Lived experience is not a homogenous category, therefore you can request engagement with specific demographics of people with a lived experience of suicide for your specific projects as needed.
- An opportunity to create collective and collaborative approaches between existing staff and external consultants.
- Independent lived experience perspectives and those of internal staff members are unique and diverse, however, external lived experience representatives are often able to identify further opportunities for internal staff to utilise their lived experience.

Therefore, before undertaking suicide prevention initiatives, it is necessary for organisations to first consider the relative merits of engaging an internal staff member versus an external lived experience representative, or to utilise a combination of both. This can often be the difference between a genuinely lived experience informed initiative that has sustainable impact and one that does not go beyond merely ticking the required ‘lived experience box’.

For more information refer to [‘Independent vs Internal Lived Experience Perspectives’](#).



EFFECTIVELY RECRUITING PEOPLE WITH LIVED EXPERIENCE OF SUICIDE TO A PROJECT/INITIATIVE

HOW TO: recruit the right people to an individual initiative

There are a number of factors to consider when selecting people to participate in suicide prevention activities.

Four primary considerations are:

- 1 Recruit for purpose
- 2 Recruit for diversity of perspective
- 3 Recruit for level of expertise
- 4 Readiness to be involved (see HOW TO: ensure people with lived experience of suicide are ready to contribute)

Recruit for level of expertise

It is important to recruit the level of expertise required for the specific task/role. There is a vast difference between being able to safely and appropriately share your lived experience of suicide personal story, and having extensive and varied experience in bringing key insights and learnings from your lived experience, as well as the perspectives of others, in a knowledgeable way. Different tasks require different levels of sophistication and expertise in lived experience. Each is equally as valuable in the appropriate context and for the right purpose. When the level of lived experience expertise is not matched appropriately, it is to the detriment of all involved and desired outcomes may not be met.

Recruit for purpose

Clarity of purpose when recruiting people with lived experience of suicide into a project or initiative is paramount to engaging the right expertise, and in establishing and maintaining mutually beneficial relationships. It is important to be clear throughout the recruitment process as to why you are engaging lived experience expertise, and over what time period - is it a one-off event or activity; a co-design process or an ongoing advisory group?

Ask yourself - whose voices/perspectives must be heard in order to determine and then achieve key outcomes?

Matching the relevant lived experience of suicide to the purpose of the task, project or role is critical. Not all lived experience is the same. For example: when seeking to develop a lived experience informed service for people who have made a suicide attempt, we need to recruit people who have made an attempt on their life. When requiring lived experience involvement in the analysis of evaluation data related to the impact of suicide deaths, people bereaved through suicide need to be recruited.

Recruit for diversity of perspective

Diversity of perspective relates to the various aspects of the lived experience of suicide, as well as diversity within a particular nature of the lived experience. Things to consider:

- Recruit the full spectrum of lived experience of suicide to ensure representation of multiple perspectives - suicidal thoughts, suicide attempt, carer, bereaved.
- Consider cultural protocols with relevant organisations and communities.
- Engage people from various demographics, geographical locations, priority population and vulnerable groups, and various underlying factors contributing to the lived experience of suicide (financial pressures, relationship breakdown, mental illness, etc).
- Invest time and effort to find people who will not engage with the health system as a result of past traumatising experiences within the system.
- When recruiting people who have experienced suicidal thoughts and/or an attempt on their life, look for various perspectives including underlying factors, frequency of thoughts, number of previous attempts, and in some very specific projects even the method chosen may need to be recruited for.
- When engaging people with a lived experience of suicide bereavement perspectives will differ depending on the relationship with the deceased (parent, sibling, child, friend), the circumstances leading up to and surrounding the death, the age of the deceased, and the intergenerational legacy left by suicide.
- When recruiting people with lived experience of caring for a loved one through suicidal crisis and /or attempt, the different perspectives gained from short- or long-term carer roles are important, as are the various relationships of the carer to the person - partner, spouse, child, parent, friend, etc.



EFFECTIVELY RECRUITING PEOPLE WITH LIVED EXPERIENCE OF SUICIDE TO A PROJECT/INITIATIVE

HOW TO: reach and engage people with lived experience of suicide who are not confident accessing health services

This is about trust more than anything. The stakes are also very high, as it is the people who won't generally reach out that we must hear from if we are to co-design and co-produce services and supports these people will actually have the confidence to connect with.

A safe and supportive environment must be created for people with a lived experience of suicide always, and this is especially true for those who have been hurt and harmed by the system. It requires the process to be led by people with a lived experience of suicide who are experienced in managing the very real power

imbalances that exist. In the same way, it relies on creating spaces and opportunities where people can speak their truth away from those who have, or represent a system who has, caused harm. The best intentions of good people go a long way, but fundamentally there are people with lived experience of suicide who simply won't engage because the organisation/ structure/ service/ system that a person is aligned to is not trusted. An independent lived experience of suicide organisation with expertise in engaging and supporting people with lived experience of suicide can support the engagement of these most critical voices.

HOW TO: conduct a recruitment process

A thorough recruitment process consists of several touchpoints designed to progressively build trust and safety for the person with lived experience of suicide, including:

- 'Readiness to be Involved' reading material with built in reflection activities to support the person make an informed decision about getting involved.
- Expression of Interest form (often online but able to be printed) with carefully chosen questions to ensure safety for those who may be completing it while at home alone – do not ask for in depth descriptions of their lived experience at this stage.
- Readiness call – a one-on-one personal conversation (usually takes about 30 minutes) where key questions about readiness to be involved are explored together.

A series of recruitment questions need to be carefully formulated. Some examples:

- Do you feel you are safe to contribute at this time? What gives you this confidence?
- What is your preferred way in which to contribute?
- What can you share with me about your self-care habits and scaffolding of support and support networks?



EFFECTIVELY RECRUITING PEOPLE WITH LIVED EXPERIENCE OF SUICIDE TO A PROJECT/INITIATIVE

HOW TO: ensure people with lived experience of suicide are ready to contribute

Encourage people with lived experience of suicide to:

- Reflect on how sharing their lived experience makes them feel, how it impacts them before, during and after sharing.
- Determine their time availability and if they have the energy to give so much of themselves to others.
- Be clear as to why they wish to engage, understanding that sharing for shock value can be harmful to others, and untethered anger and frustration leads to closed doors. The most impactful contributions are made through sharing safely and with purpose.
- Consider the other 'characters' in their lived experience story, have any necessary conversations about what is theirs to share and the impact their sharing may have on all concerned, and make a decision regarding their involvement based on these additional layers of consideration.
- Determine where they wish to focus their engagement – individual engagement, advocacy and support, service and organisational change, service design and/or delivery, public speaking, lobbying and/or strategic systems and policy levels.
- Review their current level of skills and capacities to engage and contribute, and align these with appropriate engagement opportunities.
- Identify what additional training or information they need for any given engagement initiative.
- Understand what other skills (beyond their lived experience of suicide) they can offer during the engagement.
- ensure their self-care rituals and scaffolding of support are in place.
- Identify other lived experience of suicide networks and supports they can access to support their engagement, and draw on the experiences and knowledge of others for broader perspectives.
- Think about the likelihood of being exposed to different views and experiences of other people with a lived experience of suicide and how they will respectfully work together.

It is important to ensure, as best as possible, that people are ready to contribute from their lived experience perspective. This is done by facilitating a process by which a person can make an informed decision about their personal readiness to be involved, and a mutual decision can be made as to the person's ability to contribute in a safe, effective and impactful way.

Key considerations:

- Consider the nature of questions asked at different stages of the recruitment process which ought to be determined by understanding the environment and situation in which a person will be answering them.
- Provide comprehensive information about the purpose and desired outcomes of engagement so people can make an informed decisions as to whether it is the right type and time for engagement.
- Provide Roses in the Ocean's '[Readiness to be involved](#)' reflective reading.

In the event that a person decides they are not ready to participate, offer them the opportunity to remain in contact with the project and potentially involve them in other ways that are more appropriate for their current situation.

Occasionally, a situation may arise when you may have concerns about a person's readiness, perhaps where the applicant is very recently bereaved by suicide or has recently acted on their thoughts of suicide. It is important to have a conversation with the person to address these concerns and work together to determine if it is the best time for them. Together, additional supports could be arranged to enable them to participate.



SUPPORTING THE ENGAGEMENT OF PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: create a safe and supportive environment

Also refer to Lived Experience of Suicide Engagement, Partnership and Integration (LESEPI) Guidance Document

NEEDS

People with lived experience of suicide are involved in creating environments reflective of what constitutes safety for them.

Invite people with lived experience to articulate what they need to feel comfortable and safe participating, including but not limited to:

- nature of engagement (face to face/ virtual/ 1-on-1 or group etc);
- number of other people with lived experience engaged;
- support they may wish for based on other stakeholders in room;
- pre-reading including project specific language, acronyms, etc.

CULTURE

Ensure cultural experts with lived experience of suicide expertise are engaged to determine engagement strategies as well as providing advice about how to establish and maintain culturally safe working environments.

Please refer to the Resources section of this toolkit for further information on working with culturally diverse communities; this includes Multicultural, Transcultural, Aboriginal and Torres Strait Islander, LGBTIQ+.

CHOICE

Afford choice and control to people with a lived experience of suicide to determine their needs.

- Offer access to a lived experience of suicide mentor before, during and after engagement.
- People with a lived experience of suicide can contribute as much or as little as is appropriate for them.
- Ensure it is understood that disengagement from the project at any time will be supported.
- Provide flexibility in times of engagement where possible to accommodate for other commitments.

HOW TO: to choose a suitable venue for lived experience of suicide engagement

The environment is crucial for engaging and conducting meaningful conversations. Thoughtful planning of the room, its layout and location will enhance the experience of engaging with a person with a lived experience of suicide.

- Choose a suitable venue that is not in a location representative of past traumas, such as hospitals, ex-mental health facilities, churches, or places of power imbalance like child safety or health service offices.
- Ensure the environment is conducive to collaboration.
- Have access to outdoor areas, with outdoor options for smokers.
- Natural lighting and privacy.
- Options for various seating positions.
- Have the room set up in an inviting collaborative way that reflects equality - not having a desk between you or use other layouts that reflect 'us and them'.
- Ensure easy access to public transport.
- Parking facilities (preferably free or reimburse parking costs).
- Wheelchair accessible.
- Access to water, tea, coffee, snacks.
- Check the sound quality enables ease of conversations (eg no roadworks etc).
- Air conditioning in hot or cold climates.
- Send the person a map with clear instructions on how to find the location and where to park, or nearest train station and bus stop, to ease anxiety.



SUPPORTING THE ENGAGEMENT OF PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: develop and maintain relationships with people with lived experience of suicide

In order to build relationships with people with a lived experience of suicide, we firstly need to build trust.

- From the first point of contact ensure all communications are respectful and considered, in word and tone.
- In larger meetings/conversations include an Acknowledgement of Country to show respect for Aboriginal persons and culture, and an Acknowledgement of Lived Experience.
- Use open body language that demonstrates equality – rather than stand over someone who is seated.
- Speak in a respectful way, addressing the person by their correct title or use of preferred names.
- Use inclusive language and respect people by using their preferred pronouns.
- Listen with genuine interest and respect, keep focused on the person as they speak rather than looking at the clock or at your phone.
- Follow through and follow up - always.
- Offer constructive feedback, give praise and acknowledgement for their valuable contribution. It's a brave thing to speak out about traumatic events. Only offer kind words and support.
- Discuss ongoing opportunities for engagement so the person feels connected into your network. Even if it is a long time away, the discussion around future opportunities encourages them to continue to share their experiences for the value of others.
- Establish relationships slowly, people with a lived experience of suicide may have had their trust broken many times and feel wounded. Go slowly, gently and respectfully to develop their trust and be cognisant not to break it.

HOW TO: communicate the meaning and value of lived experience to various stakeholders

It is important to find a way to communicate the meaning and value of people with a lived experience of suicide in the language of various stakeholders.

- Many people will have reasonably low suicide literacy levels and will require basic education first before being able to understand the value of lived experience of suicide and the prevalence of suicide in our communities and workplaces.
- Communication needs to be tailored for specific audiences.
- People connect through authentic story telling far more than statistics and dry facts – draw on the expertise of people with lived experience of suicide who are experienced in facilitating discussions and training about suicide.
- Highlight the ways in which lived experience of suicide can enhance current and future projects.
- Explain the difference between staff who identify as having a lived experience of suicide and the impact that a designated lived experience role with a sole focus could have in the organisation.
- Promote and facilitate meaningful conversations among your staff.
- Demonstrate how co-design of programs of work, services etc could be enhanced by people with lived experience.
- Lead and encourage workplace engagement, have members of the executive team lead discussions around suicide prevention and personally endorse training programs.
- Remind staff:
 - People who have experienced suicidal thoughts and/or been through suicidal crisis, are best placed to inform how we can best support others in crisis.
 - People bereaved through suicide, know what is and isn't useful when it comes to supporting them to understand and adapt to their 'new normal'.
 - People who have cared for a loved one through suicidal crisis are acutely aware of what fear, helplessness and conflicting emotions feel like – and what helped them help their loved ones.



SUPPORTING THE ENGAGEMENT OF PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: provide ongoing capacity building for people with lived experience of suicide

Lived experiences of suicide come in all shapes and sizes. They are all deserving of the gift of time to truly explore and understand their power to inform, influence, enhance and drive better outcomes for individuals and suicide prevention reform more broadly.

Some may simply wish to be able to share their story in a meaningful way. Other might want to develop a level of sophistication and expertise to their lived experience which will enable them to draw on their insights and wisdom in service design, research, policy and system reform. There is always opportunity to build the capacity of the person to share their lived experience safely and with impact and purpose.

Whether you're engaging people with lived experience for a one-off initiative or on a longer-term basis, providing the opportunity to build their capacity as a lived experience representative will not only create enormous sense of empowerment but also bring a greater depth and richness to their contributions.

Capacity building opportunities include but are not limited to:

TRAINING

Participation in lived experience of suicide training designed and delivered by people with a lived experience of suicide focusing on:

- Purposeful storytelling - exploring and understanding my lived experience to safely share with impact.
- General awareness of suicide, safe language and the suicide prevention landscape.
- Suicide intervention skills.
- Collaborating to create systems change.
- Using lived experience of suicide in the media.
- Bringing a critical lens to reviewing and generating communications and content language and imagery.
- Working in a lived experience advisory group/ working group focused on suicide prevention.
- Lived experience of suicide advisory group co-chair skills development.

ONBOARDING

Onboarding to specific work / volunteer environment:

- Role of lived experience of suicide in the specific environment.
- Specific language, common acronyms used, etc.
- Overview of existing Suicide Prevention Strategy.
- Expectations, opportunities, high level project outcomes (if already determined).

PLUS

Other opportunities for development:

- Local, national and international conferences and Lived Experience of Suicide Summits.
- External Lived Experience of Suicide Mentor.
- Ongoing opportunities to extend skills in new areas such as research, evaluation, co-chairing meetings etc.



SUPPORTING THE ENGAGEMENT OF PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: support the integration of lived experience of suicide

As people with lived experience of suicide are integrated into projects, initiatives, teams and organisations it is important to consider what is needed to support the lived experience informed culture change that is being embarked upon.

Key considerations for existing staff:

- There will undoubtedly be existing staff with lived experience of suicide (some of whom may be comfortable disclosing it, while others will not).
- Existing staff may not be comfortable, ready, or equipped for being exposed to the authenticity of lived experience insights.
- Suicide literacy within the organisation is likely to be varied and quite often low.

Suggested supports and training programmes to upskill existing staff include:

- Lived experience of suicide capacity building workshops.
- Lived experience informed suicide literacy training.
- 'Valuing lived experience engagement' workshop and open discussion forum.
- Critical Lens Workshop - 'Exploring the lived experience of suicide Language & Imagery Guidelines'.
- Access to independent external supports with reputable knowledge of lived experience of suicide.

Key considerations for existing staff with an undisclosed lived experience of suicide (who may disclose to HR or a line manager):

- Grant access to independent external support from a respected organisation that works in suicide prevention, and has expertise supporting people with a lived experience of suicide, to guide them through their feelings and concerns.
- Connect them to a suicide bereavement counsellor or Postvention service (if bereaved).
- Connect to their employee assistance programme – requesting a specialist in suicidality.
- Provide SP CARE Connect Warmline number 1800 777 337.
- Provide suitable and reliable local and regional resources.



SUPPORTING THE ENGAGEMENT OF PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: support the integration of lived experience of suicide (continued)

While it shouldn't be assumed that people with lived experience of suicide will require special support, it is important for it to be available before, during and after an engagement activity. Sometimes just knowing that support is available can be enough for people to feel supported.

PRIOR TO ENGAGEMENT

Afford choice and control to people with lived experience of suicide to determine their needs.

Invite people to articulate what they need to feel comfortable and safe participating.

Provide engagement details and resources to help people gauge, articulate and support their ability to effectively and sustainably contribute to an initiative including:

- the nature of engagement (in person/virtual/ 1-on-1 or group);
- the number of other people with lived experience engaged;
- structure of engagement based on other stakeholders;
- pre-reading including history of project, project specific language, acronyms.

Ensure it is understood that disengagement from project at any time will be supported.

DURING ENGAGEMENT

People with lived experience of suicide are involved in creating environments reflective of what constitutes safety for them.

Make it clear people are invited to contribute as much or as little as is appropriate for them.

Explore what a safe and supportive environment looks like whilst participating in the engagement, including promoting the principles of confidentiality, non-judgement, and respect for difference of experiences, identities, and perspectives.

Discuss the use of safe and appropriate language, and why method of suicide attempt or death is not discussed (unless the specific nature of the engagement requires it and has been disclosed prior to engagement).

Discuss the importance of self-care during the engagement and provide support information.

AFTER ENGAGEMENT

Remind people of the importance of self-care and encourage them to engage in a short self-care activity before returning to the day's activities.

Provide a follow up call by trained lived experience mentor who understands the impact of utilising lived experience.

Ensure an open invitation to provide feedback about the session/project.

Ensure remuneration for time and expertise is commensurate with other stakeholders.

Enable people to have access to supports that are appropriate to people with lived experience as determined by them, before, during and after engagement.

Enable people to have access to supports that are appropriate to people with lived experience as determined by them, before, during and after engagement.

Offer access to Lived Experience of suicide Mentor before, during and after engagement.



EFFECTIVELY PARTNERING WITH PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO: adopt an approach of compassionate curiosity

To understand compassionate curiosity, it can help to define the individual words:

Compassion means to connect with a person's feelings and thoughts, what they are going through, on a level that says "I get you", "I've been through similar".

Curiosity involves gently looking for information to help you understand, without judgement, the perspectives of another.

Compassionate curiosity translates to the ability to seek to understand another person's perspective while withholding judgement and stepping into the shoes of the other person in an endeavour to understand how they feel and what they are thinking.

In the context of suicide and suicide prevention, compassionate curiosity is a helpful way of working with other people whose perspective may completely oppose your own. This is especially evident in interactions between people with a lived experience of suicide and other stakeholders from traditional health settings, funders and some service deliverers. It is a key ingredient for true collaboration, co-design and co-production with people with lived experience of suicide.

People with lived experience may find adopting an approach of compassionate curiosity helpful when interacting with those who are reluctant for change or who fear the unknown, for those who know no other way of working and for those whose risk aversion prevents them from embracing innovation. People with lived experience of suicide can do this because many know what it is like to be on the downside of the balance of power and understand their discomfort. They can be leaders of change, be drivers of a new culture and graciously demonstrate meaningful integration.

Other stakeholders may find adopting compassionate curiosity an important bridge to understanding the lived experience perspectives and opening their minds to innovative, lived experience informed solutions. It supports the necessary creation of a space without judgement for people to express themselves including their very strong emotions that are born out of previous hurt and harm.

Compassionate curiosity enables people to generously educate and guide others while also seeking to learn from others.

HOW TO: ensure power is equalised and shared

When power differences aren't named and owned, decision making remains wholly with traditional 'experts' and the existing power structures are maintained. As a result, established institutional practices that have been proven to be ineffective are reinforced and nothing changes. An organisation demonstrates its commitment to collaboration and power sharing by:

- adequately remunerating people with lived experience of suicide for their time, energy, and expertise;
- resourcing any capacity building support required for people with lived experience of suicide to be able to contribute to change processes in an effective and sustainable way.

This can include:

- training to prepare for co-design or service development activities;
- pre-briefing sessions so that people with lived experience have a thorough orientation to the initiative.



EFFECTIVELY PARTNERING WITH PEOPLE WITH LIVED EXPERIENCE OF SUICIDE

HOW TO:

create an equitable and inclusive environment for people from diverse backgrounds

Have a genuine commitment to include a diverse range of lived experiences of suicide into your organisation's structure.

- This includes allocating the resources needed to engage people from a variety of cultural perspectives, such as; LGBTQI+, Aboriginal and Torres Strait Islander, people living with disabilities, people from multicultural backgrounds, ageing, veterans, and youth.
- Ensure different perspectives of suicidality are recruited, include those who are bereaved by suicide, have experiences of suicide attempt, suicidal thoughts, feelings and ideation, and carers of those who live with suicidality.
- Seek out the 'missing voices', those who may not access services due to experiences of past trauma and now lack trust in service providers and government agencies.

1

Ensure people with a lived experience have a 'voice at the table'.

- Develop an awareness around the structures within your organisation and reflect on the opportunities people with a lived experience of suicide have to influence decision making, and make contributions, such as; project design, data analysis, implementation, interviewing, surveying, policy development, procedures and strategic planning.
- Inclusion is a way to ensure people with a lived experience of suicide feel supported, valued and heard. Their unique insights will enhance projects, not hinder them.
- Encourage those with a lived experience of suicide to share their valuable insights, as opposed to making them 'fit in' to the traditional ways of being within an organisation.

3

Address the stigma and discrimination around suicide within your organisation.

- 'Build in' the lived experience of suicide into your organisational strategies and culture, rather than 'bolt on'.
- Create training opportunities for staff to attend to address myth busting incorrect concepts around suicide. This will lead to meaningful conversations, less judgmental attitudes and open-mindedness.
- Design and implement a planned strategy around addressing stigma and discrimination in the workplace.
- Recognise that those with an (undisclosed and disclosed) lived experience of suicide within your organisation are being further traumatised in their workplace by being exposed to their colleagues unintentional but harmful comments around suicidality.
- Create a safe environment in your organisation, where everyone feels emotionally protected.

2

Review your current human resource policies relating to equity, diversity and inclusion to ensure they adequately encompass those with a lived experience of suicide.

- Remember the person's lived experience of suicide may have intersected with other aspects of their identity, including socio-economic and cultural factors (for example, physical abilities, access to education). Be mindful of these factors when recruiting, allocating tasks and supporting them.

4



COMMUNICATING OPENLY AND HONESTLY

HOW TO: communicate the purpose and scope of engagement with people with lived experience

In relation to co-design processes:

- Ideally, the project's purpose and scope will have been determined through co-design with people with lived experience of suicide.
- If it has not been co-designed, then at the earliest opportunity, people with a lived experience of suicide need to be engaged to review what is proposed and provide feedback which is implemented before project commencement.

Refer to: Co-designing with people with lived experience: Planning Guide and Co-designing Safe Spaces: Planning Guide

Open, honest and transparent communications with people with lived experience of suicide is vital to building trust and respect. This includes communicating upfront the purpose and scope of engagement.

- Clearly state the reason for, and desired outcomes of engagement.
- Be transparent about hard boundaries, barriers, parameters of the project - resources, time, policy, etc.
- Outline feedback channels and timeframes.
- Provide information on time commitments and paid participation (remuneration for their time).
- Provide relevant background information before engagement.

HOW TO: ensure equitable access to information and opportunity

- Do not make assumptions that people have access to technology, or the ability to use it. Some people have very limited data usage, or share devices. Be mindful to ensure they can participate.
- Cater for varying levels of functional and digital literacy.
- Provide detailed instructions on how to use technology and provide pre-engagement training on technology.
- Offer flexibility for people to contribute in a range of ways - 1-on-1 phone calls, surveys, small groups, submit written or audio messages.
- Provide clearly written and laid out information sheets.
- Be considerate of the time of day engagement is planned and if the person is working or not working. Consider their hours of work or other commitments.
- Remuneration must be equitable with other stakeholders.
- Location of the engagement needs to be easily accessible by public transport, wheelchair friendly, with easy access to free parking (or provide parking fee reimbursements). Provide the person with clear, concise information about the venue location and a map to allay confusion or anxiety.
- Allocate a contact number they can call or text, in case the person has difficulty finding the venue.

HOW TO: continuously improve your engagement processes based on lived experience feedback

- Welcome and encourage feedback
- Actively seek feedback
- Use simple quick surveys
- Ask participants how to best gather their feedback
- Provide collated outputs of evaluations and invite reflection and feedback
- Share evaluation broadly for others to learn from



LIVED EXPERIENCE OF SUICIDE ENGAGEMENT, PARTNERSHIP AND INTEGRATION (LESEPI): IMPLEMENTATION TOOLKIT

RESOURCES

Zero Suicide Healthcare Framework

<https://lifeinmind.org.au/policies/zero-suicide>

Black Dog Institute - Suicide Prevention Implementation

<https://www.blackdoginstitute.org.au/education-services/suicide-prevention-implementation/>

Facts about Suicide in Australia

<https://www.blackdoginstitute.org.au/resources-support/suicide-self-harm/facts-about-suicide-in-australia/>

Lifespan Lived Experience Framework

https://www.blackdoginstitute.org.au/wp-content/uploads/2020/04/bdi_lived-experience-summit-2018_final.pdf

Suicide Prevention Australia

<https://www.suicidepreventionaust.org/>

ABORIGINAL AND TORRES STRAIT ISLANDER

Aboriginal and Torres Strait Islander Lived Experience Centre

<https://www.blackdoginstitute.org.au/education-services/aboriginal-and-torres-strait-islander-network>

Indigenous Governance for Suicide Prevention in Aboriginal and Torres Strait Islander Communities: A Guide for Primary Health Networks 2018

<https://www.blackdoginstitute.org.au/wp-content/uploads/2020/04/designed-final-cultural-framework-guide-v4.pdf>

'We are Strong. We are Resilient. But We are Tired.' – Voices from the Aboriginal and Torres Strait Islander Lived Experience Centre Yarning Circles Report 2020

<https://www.blackdoginstitute.org.au/wp-content/uploads/2020/12/We-are-Strong.-We-are-Resilient.-But-we-are-Tired-Voices-from-the-Yarning-Circles-Report.pdf>

Black Rainbow

<https://blackrainbow.org.au/>

DISABILITY

Mental Health Services in Australia

<https://www.aihw.gov.au/reports/mental-health-services/mental-health-services-in-australia/report-contents/psychiatric-disability-support-services>

TRANSCULTURAL / MULTICULTURAL

Embrace Mental Health

<https://www.embracementalhealth.org.au/>

Framework for Mental Health in Multicultural Australia: Toward culturally inclusive mental health delivery

<https://www.embracementalhealth.org.au/service-providers/framework>

Victorian Transcultural Mental Health

<https://vtmh.org.au>

Queensland Transcultural Mental Health

<https://metrosouth.health.qld.gov.au/qtmhc>

LGBTQI+SB

Black Rainbow

<https://blackrainbow.org.au/>

LGBTIQ+ Health – Mindout: Mental Health & Suicide Prevention

<https://www.lgbtiqhealth.org.au/mindout>

Employers Guide to Intersex Inclusion

https://www.lgbtiqhealth.org.au/employers_guide_intersex_inclusion

Going Upstream : A Framework for Promoting the Mental Health of LGBTQI People

https://www.lgbtiqhealth.org.au/going_upstream



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Black Dog Institute's LifeSpan Lived Experience Framework

https://www.blackdoginstitute.org.au/wp-content/uploads/2020/04/bdi_lived-experience-summit-2018_final.pdf

National Mental Health Commission's Consumer and Carer Engagement: a practical guide

<https://www.mentalhealthcommission.gov.au/mental-health-reform/consumer-and-carer-engagement/consumer-and-carer-engagement-a-practical-guide>

National Mental Health Commission's Sit beside me, not above me: supporting safe and effective engagement and participation of people with lived experience, 2017

<https://www.mentalhealthcommission.gov.au/getmedia/e1baaf32-27c2-4a14-992c-d7043df9f954/Sit-beside-me,-not-above-me>

The lived experience perspective of suicide: A rapid review

<https://www.suicidepreventionaust.org/wp-content/uploads/2020/11/The-lived-experience-perspective-of-suicide-A-rapid-review.pdf>

Victorian Department of Health and Human Services' Mental Health Lived Experience Engagement Framework

<https://www.dhhs.vic.gov.au/publications/mental-health-lived-experience-engagement-framework>



Lived Experience of Suicide Engagement, Partnership and Integration (LESEPI) Implementation Toolkit v1.2

Written by Roses in the Ocean



Roses in the Ocean
stemming the tide of suicide

- ☎ 1300 411 461
- ✉ enquiries@rosesintheocean.com.au
- 🌐 www.rosesintheocean.com.au



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