Anglicare Suicide Prevention for Seniors Workshop
LE Summit 2023

Anglicare's Suicide Prevention for Seniors team ran a workshop to glean ideas on how to go about designing nuanced gatekeeper training for First Nations people as well as seniors in the LGBTI community as well as other groups including men, and the CALD (culturally and linguistically diverse) community.

Firstly, the presenters, Nancy Gewargis (Program Manager) and Sian Palmieri (Program Coordinator), gave a presentation about the program and its success to date. We then asked each table to focus on one group and brainstorm ideas on the factors to consider when co-designing niche gatekeeper training programs targeting each of these groups.

This is what the audience suggested:

CALD

- Train all staff in cultural awareness
- Train all residents too
- Building communication between carers and family
- Nuances of residents / history is understood
- Understand that cultural barriers can become unintentionally evident towards carers from residents
- Training staff about cultural differences

LGBTQIA+

- Connection to family
- Less probability of having biological children
- Programs to keep connection to chosen queer 'fabulous' community.
- Ageism within queer community and community in general
- Religious bigotry – rejection (religious-led aged care services)
- Creating opportunities for elder queers to connect with community of all ages – opportunities to share histories and stories; honour histories (can volunteer as mentors for community)
- Specific aged care communities for the rainbow community
- Access to apps / technology support to connect to community online when isolated or with mobility concerns
- Programs / training to acknowledge strength and bravery of elder queers (including use of language – is queer preferred / painful?)
- Youth visiting seniors in their homes / aged care settings

ABORGINAL AND TORRES STRAIT ISLANDER

- What is culturally appropriate and safe?
- Using terminology that aligns with the community and language
- Understanding history – genocide, trauma how it's continually lived in the present.

- Acknowledgment and variation between communities around the country – it's not homogenous
- Amend the course so it's the Aboriginal and Torres Strait Islander people informing the content and engaging in the workshop (lived experience)
- Acknowledge the older person as the EXPERT
- Train First Nations gatekeepers specifically and have it delivered by First Nations people
- Break down stereotypes – how an older person presents may not align with the stereotype
- Yarning circles
- Painting your story
- Mentors showing younger people
- Music as a resource

RURAL / REMOTE

- For all cohorts, are older people involved as 'gatekeepers'?
- How do we customise training modules for rural/remote:
    o Pubs
    o Libraries
    o Corner store
    o Mobile options
- Lack of strong internet service could be a barrier – some older people lack tech savvy.
- Transport critical for 'gatekeepers' and seniors
- Offer training to age care facilities
- Piggyback services e.g mobile services
- Independent care / advice (pastoral care)
- 'Squads' of trained volunteers in individual communities
- Can be by phone
- Possibly leverage community visitor service
- Rural and remote directory on all local services – askizzy.org.au
- Content needs to be developed by people from regional / rural communities
- Need to be aware of lack of skills / services in regional / rural communities and have strategies to mitigate it. Community champions with lived experience.
- Recruit community contacts to raise awareness
- Part of module might include activity ie research local services
- Identify / respond / refer model challenged when referral piece so difficult
- Schedule training by region
- Person with lived experience raising awareness involved in implementation
    o Hybrid model
    o Before training is launched connect with local lived experience reps who can act as a local contact for when further support is needed

MEN

- Person-centred – show respect, listen to and give time.
- Person-centred is people to people, it's not a text book driven conversation.

- Groups
    - Men's shed – good for community input, providing support in aged care communities
    - PCYC – volunteering opportunities in the community
    - GRAI – Advocates for 'Ageing' (to facilitate training but also allies)
- Places providing end of life care for the loved ones who remain. Support is needed post event. There needs to be a way of 'checking in' on the person.
- Expectation is for people to receive support for non mental health concerns eg depression, mental health care plan to access psychology when someone is grieving 'not unwell'
- Peer workers to do the training
- Quality upskilling
- Advance Care Planning conversations can be empowering and increase quality of life. Needs to admit an ending of life.
- Carers Gateway – National Service
- Each state has its own carers service
- ARAFMI – Carer support (mental health related) Aust wide