

Suicides of Aboriginal and Torres Strait Islander people

Victoria, 2018—2021

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Prepared by:

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Coroners Court
of Victoria



Warning

Aboriginal and Torres Strait Islander peoples are respectfully warned that the following report includes information associated with deceased persons from events that have occurred on Aboriginal land in Victoria.

No names, voices or direct events are recorded within this report; however, the sensitive nature of the information is associated with the commencement of dreaming for many Aboriginal people and may impact some readers.

Acknowledgement

The Coroners Court of Victoria (CCOV) acknowledges the traditional owners of the land on which it is located, the Wurundjeri and Boon Wurrung Peoples. Furthermore, the CCOV respectfully acknowledges all traditional owners across Victoria and pays respect to all Elders, past, present and emerging.

We acknowledge all families and communities who have been impacted by the loss of a loved one and provide our deepest condolences and respect at this time.



Purpose

This report provides an overview of suicides of Aboriginal and Torres Strait Islander peoples in Victoria between 1 January 2018 and 31 December 2021.

This report was compiled to update organisations about the frequency and circumstances of suicides within Aboriginal and Torres Strait Islander communities across the state. Accurately recording and reporting on suicides of Aboriginal and Torres Strait Islander peoples in Victoria is critical to inform program development and other initiatives which aim to reduce suicide rates across Victorian Aboriginal communities.

This is the third report in a series prepared by the Coroners Koori Engagement Unit in collaboration with the Coroners Prevention Unit.

The first report, released on 30 June 2020, provided an overview of suicides among Aboriginal and Torres Strait Islander peoples in Victoria between January 2009 and April 2020, including basic contextual information on mental ill health, legal system contacts, interpersonal and situational stressors experienced by those who passed. It also included an overview of the data source for the report series, which is the Victorian Suicide Register (VSR).

The second report, released on 3 February 2021, was a supplement to the first report with updated data for the full year 2020.

This third report focuses on suicides among Aboriginal and Torres Strait Islander peoples in Victoria that occurred between January 2018 and December 2021. The reason for this specific time period is that 2018 is the earliest year for which the Coroners Koori Engagement Unit is confident all relevant suicides have been identified.

Historically, the Coroners Court of Victoria experienced a range of challenges in accurately identifying Aboriginal and Torres Strait Islander peoples among those who came into the Court's care. The reason for these challenges was that the Court relied only upon the information gathered during coronial investigations, and variation in the accuracy and detail of this information led to many relevant cases being missed.

To address this issue and improve the Court's capacity to provide culturally appropriate support to Aboriginal and Torres Strait Islander families whose loved ones have passed, the Court introduced a Koori Engagement Unit in 2019. The Unit's staff work proactively with Aboriginal and Torres Strait Islander communities across Victoria to facilitate engagement with the Court; and also work with Court staff to ensure respect for the cultural practices and protocols that apply to Aboriginal and Torres Strait Islander passings. One result of this initiative is that the Court now has far better knowledge of Aboriginal and Torres Strait Islander passings for the period 2018 to present and can produce far more reliable data than was the case in the past.

Suicides in Victoria

The following data pertains to Aboriginal and Torres Strait Islander people who passed by suicide, and whose passing was reported to CCOV between 1 January 2018 and 31 December 2021.

1. Annual frequency by sex and age group

Table 1 shows the annual frequency by deceased sex and age group, of suicides among Aboriginal and Torres Strait Islander peoples in Victoria during the period 2018—2021.

Table 1: Annual suicide frequency by sex and age group among Aboriginal and Torres Strait Islander peoples, Victoria 2018—2021.

Sex and age group	2018	2019	2020	2021	Total
Male					
Under 18 years	1	1	1	-	3
18 to 24 years	2	2	-	7	11
25 to 34 years	1	3	4	9	17
35 to 44 years	4	3	1	5	13
45 to 54 years	3	4	4	4	15
55 to 64 years	-	-	2	-	2
65 years and older	-	-	-	-	-
Total	11	13	12	25	61
Female					
Under 18 years	-	-	-	2	2
18 to 24 years	2	3	4	3	12
25 to 34 years	-	3	3	2	8
35 to 44 years	3	-	-	-	3
45 to 54 years	-	1	1	3	5
55 to 64 years	-	1	-	-	1
65 years and older	-	-	-	-	-
Total	5	8	8	10	31
All people					
Under 18 years	1	1	1	2	5
18 to 24 years	4	5	4	10	23
25 to 34 years	1	6	7	11	25
35 to 44 years	7	3	1	5	16
45 to 54 years	3	5	5	7	20
55 to 64 years	-	1	2	-	3
65 years and older	-	-	-	-	-
Total	16	21	20	35	92

The 75% increase in suicides among Aboriginal and Torres Strait Islander peoples in Victoria during 2021 occurred after three years of annual frequencies between 16 and 21 suicides. Going back further to the period 2009-2017 (and acknowledging the data for this period is unreliable),



there were between six and 17 suicides of Aboriginal and Torres Strait Islander people per year. Given this historical context, the 2021 spike in suicide among Aboriginal and Torres Strait Islander people does not appear to be a result of random effects or fluctuation in the data.

2. Monthly frequency

Tables 2a and 2b show the monthly frequency and monthly aggregate¹ frequency respectively of suicides among Aboriginal and Torres Strait Islander people in Victoria. The elevated frequency observed during 2021 was particularly pronounced in the second half of the year.

Table 2a: Monthly suicide frequency among Aboriginal and Torres Strait Islander people, Victoria, January 2018 to December 2021.

Month	2018	2019	2020	2021
January	-	1	2	2
February	-	1	3	3
March	-	1	3	4
April	3	1	-	-
May	1	4	2	2
June	2	4	1	2
July	2	1	1	4
August	1	-	5	4
September	1	2	-	2
October	1	2	1	3
November	4	3	1	5
December	1	1	1	4

Table 2b: Monthly aggregate suicide frequency among Aboriginal and Torres Strait Islander people, Victoria, January 2018 to December 2021.

Month	2018	2019	2020	2021
January	0	1	2	2
February	0	2	5	5
March	0	3	8	9
April	3	4	8	9
May	4	8	10	11
June	6	12	11	13
July	8	13	12	17
August	9	13	17	21
September	10	15	17	23
October	11	17	18	26
November	15	20	19	31
December	16	21	20	35

¹ The aggregate monthly frequency is the sum of frequencies for all months so far in each year. For example, the aggregate monthly frequency in March of a year is the sum of the monthly frequencies in January, February, and March for that year.



3. Location

Table 3 shows the annual frequency of suicides among Aboriginal and Torres Strait Islander people according to the location where the fatal incident occurred: in Metropolitan Melbourne or regional Victoria.

Table 3: Annual suicide frequency among Aboriginal and Torres Strait Islander people according to the location of fatal incident, Victoria 2018—2021.

Fatal incident location	2018	2019	2020	2021	Total
Metropolitan Melbourne	8	10	8	16	42
Regional Victoria	8	11	12	19	50
Total	16	21	20	35	92

The majority of suicides (50 of 92, 54.3%) occurred in regional Victoria. The regional Victorian local government areas (LGAs) with the highest suicide frequencies (five or more during the period) were Mildura, Latrobe and Greater Shepparton. In Metropolitan Melbourne, the Darebin LGA was the most frequent suicide location.

The Coroners Court of Victoria respectfully acknowledges that the footprint of each passing impacts multiple communities – not just the place where the passing occurred.

The suicides in context

The previous section of this report focused specifically on Aboriginal and Torres Strait Islander people who passed by suicide. In this section, comparison data is presented to highlight some of the ways that suicide among Aboriginal and Torres Strait Islander people is distinct from suicide among non-Indigenous people in Victoria.

1. Average annual suicide rates

Table 4 shows the annual frequency and proportion of suicides among Aboriginal and Torres Strait Islander people compared to others in Victoria. On average, between 2018 and 2021 Aboriginal and Torres Strait Islander people comprised 3.3% of Victoria's suicide deceased.

Table 4: Annual frequency and proportion (%) of suicides among Aboriginal and Torres Strait Islander people and non-Indigenous people, Victoria 2018—2021.

Identity	2018	2019	2020	2021	Total
Frequency					
Aboriginal and Torres Strait Islander	16	21	20	35	92
Non-Indigenous	687	679	692	648	2706
Total	703	700	712	683	2798
Proportion					
Aboriginal and Torres Strait Islander	2.3	3.0	2.8	5.1	3.3
Non-Indigenous	97.7	97.0	97.2	94.9	96.7
Total	100.0	100.0	100.0	100.0	100.0

The above frequencies were used as the basis for calculating crude average annual suicide rates,² so that suicide prevalence among Aboriginal and Torres Strait Islander people could be compared meaningfully to non-Indigenous people.

Rate calculations require a reliable estimate of the underlying population from which cases are drawn. This requirement was problematic here, because the most recent available estimates for Victoria's Aboriginal and Torres Strait Islander population and non-Indigenous population date back to 2016.³ However in the absence of any other suitable population data, these Victorian population estimates were used. The calculations were as follows:

- For Aboriginal and Torres Strait Islander people, the total frequency of suicides during the four-year period (92) was divided by the 2016 Victorian population estimate (57,767), multiplied by

2 The crude rate (dividing total cases by overall population, without accounting for features and factors that may be distributed differently between the cases and the population) was used because when the suicides among Aboriginal and Torres Strait Islander people were disaggregated by sex and age group, the frequencies were too low (in absolute terms) to ensure reliable age-specific and sex-specific rate calculations.

3 Australian Bureau of Statistics, "Estimates of Aboriginal and Torres Strait Islander Australians", <<https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/jun-2016>>, 31 August 2018, accessed 7 January 2022.



100,000 then divided by four years. This yielded a crude average annual rate of **39.8** suicides per 100,000 population of Aboriginal and Torres Strait Islander people between 2018-2021.

- For non-Indigenous people, the total frequency of suicides during the four-year period (2706) was divided by the 2016 Victorian population estimate (6,115,405), multiplied by 100,000 then divided by four years. This yielded a crude average annual rate of **11.1** suicides per 100,000 population of non-Indigenous people between 2018-2021.

The results indicate that between 2018 and 2021 in Victoria, Aboriginal and Torres Strait Islander people died by suicide at a rate nearly three and a half times higher than non-Indigenous people.

NOTE: This must be interpreted with caution as the population estimates used in the rate calculations are out of date and do not account for changes in underlying populations over time. But even so, the results leave little doubt that the suicide rate among Aboriginal and Torres Strait Islander people in Victoria is far higher than among non-Indigenous people.

2. Age distribution

Table 5 shows the overall frequency and proportion of suicides by age group in Victoria during 2018—2021 among Aboriginal and Torres Strait Islander people, compared to non-Indigenous people. The suicides in Aboriginal and Torres Strait Islander people were far more prevalent in younger age groups, with 57.6% of the deceased being aged under 35 years (compared to 32.9% in the non-Indigenous people).

Table 5: Overall suicide frequency and proportion by age group, among Aboriginal and Torres Strait Islander people and non-Indigenous people, Victoria 2018—2021.

Age group	Aboriginal and Torres Strait Islander		Non-Indigenous	
	N	%	N	%
Under 18 years	5	5.4	75	2.8
18 to 24 years	23	25.0	296	10.9
25 to 34 years	25	27.2	520	19.2
35 to 44 years	16	17.4	494	18.3
45 to 54 years	20	21.7	478	17.7
55 to 64 years	3	3.3	417	15.4
65 years and older	0	0.0	426	15.7
Total	92	100.0	2706	100.0

This finding was also reflected in the average ages of the deceased. The average age of the male Aboriginal and Torres Strait Islander people was 34.9 years, compared to 45.5 years in non-Indigenous males. The difference was even more pronounced in females: the average age of the female Aboriginal and Torres Strait Islander people was 30.2 years, compared to 44.9 years in non-Indigenous females.



3. Location

Table 6 shows the overall frequency and proportion of suicides by fatal incident location in Victoria during 2018—2021 among Aboriginal and Torres Strait Islander people, compared to non-Indigenous people. While 45.7% of suicides among Aboriginal and Torres Strait Islander people occurred in Metropolitan Melbourne, the proportion was 65.8% for non-Indigenous people.

Table 6: Overall suicide frequency and proportion by fatal incident location, among Aboriginal and Torres Strait Islander people and non-Indigenous people, Victoria 2018—2021.

Fatal incident location	Aboriginal and Torres Strait Islander		Non-Indigenous	
	N	%	N	%
Metropolitan Melbourne	42	45.7	1781	65.8
Regional Victoria	50	54.3	925	34.2
Total	92	100.0	2706	100.0

The higher proportion of Aboriginal and Torres Strait Islander suicides in regional Victoria potentially reflects, at least in part, the places where communities are situated. Approximately three-quarters of Victoria’s overall population resides in Metropolitan Melbourne, but for Aboriginal and Torres Strait Islander people this figure is much lower, with just over 50% residing in regional Victoria.⁴

4 Victorian Public Sector Commission, “Aboriginal Victoria Today”, 28 June 2019, <<https://vpsc.vic.gov.au/html-resources/aboriginal-cultural-capability-toolkit/aboriginal-victoria-today/>>, accessed 12 January 2022.



Emerging themes in the deaths

Coroners are still investigating many of the 92 passings by suicide of Aboriginal and Torres Strait Islander people which occurred in Victoria between 1 January 2018 and 31 December 2021, but the available material points to some emerging themes.

- **Regional impacts and trends.** Suicides of Aboriginal and Torres Strait Islander people occurred all around Victoria during the period 2018—2021. In several instances, a suicide in a particular area was closely followed by another suicide in the same or a neighbouring community. This intensified the impact of the suicides on the affected communities and created rolling anxieties across Victoria about the possibility of suicide clusters.
- **Substance misuse as a stressor.** There was a strong causal nexus in several cases between substance misuse and the decision to suicide. In regional areas such as Mildura where there is a lack of dedicated drug and alcohol treatment services, the negative impact of substance misuse on the mental health and wellbeing of Aboriginal and Torres Strait Islander people could be particularly serious.
- **Other recurring themes.** The other themes that recurred across both males and females of all ages included inability to access support services; engagement with the police and justice system proximal to passing; relationship breakdowns; and lack of access to stable accommodation
- **The COVID-19 pandemic.** While there was a marked spike in the number of suicides during 2021, it is important not to assume this must have resulted from the ongoing COVID-19 pandemic. Undoubtedly the pandemic has negatively impacted Aboriginal and Torres Strait Islander communities in Victoria, but it is only one among many sources of stress for community members. There is a risk that attributing the suicides simply to 'the pandemic' will inhibit efforts to understand what is actually driving these suicides.

In addition to the general themes discussed above, there were also certain themes that emerged or were expressed strongly in specific groups:

- **Males and females aged 18 to 24 years.** For this group, possible impacts on the decision to suicide included known mental health issues, previous engagement with supports services, contact with the justice system, housing and accommodation barriers, recent relationship breakdowns, and substance misuse. The enhanced datasets will be critical for analysing the steep increase in 2021.
- **Females aged 18 to 24 years.** For this group, possible impacts on the decision to suicide included accommodation issues, and exposure to previous and or current violence within their relationships.
- **Males and females aged 25 to 34 years.** For this group, possible impacts on the decision to suicide included engagement with the justice system, both past and future engagements pending, relationship breakdown (personal and family), and previous contact with services under the mental health act. This group presents well within the community, often engaged and active, but appears to be impacted by underlying stressors that require more significant investigation.
- **Males aged 45 to 54 years.** For this group, issues that may have impacted on the decision to suicide included recent relationship breakdowns (partner/family), residing alone, previous



involvement with domestic violence, and substance misuse. In many of these cases, these are men with a known history of mental health stressors.

The recent development of the Aboriginal Database dedicated to an enhanced dataset of these passing will be critical in establishing a greater understanding of the stressors to support more substantial outcomes.