

# StandBy works

Findings from the latest research



On average there are 8.6 suicides a day in Australia<sup>1</sup>.

For every death by suicide

more than

6

people are significantly affected<sup>3</sup>

Up to

135

people affected by each death<sup>2</sup>

## How we help

### StandBy Support After Suicide

StandBy is Australia's leading suicide postvention program dedicated to assisting people and communities bereaved or impacted by suicide.

#### Free face-to-face or telephone support

StandBy's local caring staff are committed to the wellbeing of the person or group impacted. The program provides a central point of coordination, connecting people to the various support they may need through personalised connections to services, groups and organisations within their local area.

#### We partner with local organisations

StandBy engages local expertise within the community to deliver the most effective and culturally suitable support for each individual circumstance. Locally tailored workshops and education programs are provided to increase awareness of suicide and suicide bereavement to help enable communities to support one another.



**20 years'** experience and continual development.



**Committed** to innovation and evidence-based service provision.



**Values** the wisdom and insight of those with lived experience.



**STANDBY**  
SUPPORT AFTER SUICIDE

[www.standbysupport.com.au](http://www.standbysupport.com.au)

# StandBy Support After Suicide works

StandBy has been extensively evaluated with several previous studies showing that, within 12 months after the loss, people who have received support from StandBy report lower levels of suicidality and loss of social support than people bereaved by suicide who did not access StandBy's support.

## The study

The study measured changes in grief experiences and levels of suicidality for people bereaved by suicide who accessed StandBy's support, compared with people who did not access StandBy.

The groups were asked to complete two surveys, three months apart to measure these changes.

The study also captured people's opinions about the support provided by StandBy<sup>4</sup>.

## The results

Results suggest that support from StandBy may help to continue reducing the risk of suicidality for those bereaved by suicide, while others' risk may continue to rise over time<sup>4</sup>.

**Research finds that StandBy can play an important role in preventing further suicides amongst bereaved people<sup>4</sup>.**

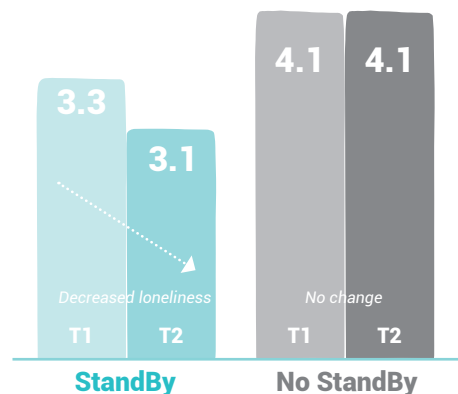
## Specific findings

(Loss within first 12 months)

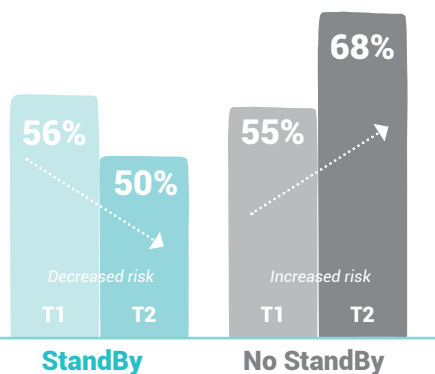
### Change in overall loneliness

DLS scores\*

Loneliness remained stable over time, but the StandBy group still reported significantly lower levels of loneliness than the comparison group.



\*De Jong Gierveld Loneliness Scale (DLS) – The DLS measures social and emotional loneliness and provides a measure of social isolation. Overall scores range from 0-6 (0 = least lonely, 6 = most lonely)



\*The Suicide Behaviours Questionnaire-Revised (SBQ) measures different dimensions and frequency of suicidality (e.g. suicide ideation, suicide attempt). Scores on SBQ range from 3-18, with scores equal to or above 7 indicating being at high risk of suicidality.

### Change in suicide risk

Based on those with SBQ\* scores of 7 or above.

The StandBy group showed a decline in suicidality over time, while the comparison group showed an increase in their average score. The difference between StandBy's decline and the comparison group's increase was statistically significant.

### Reduction in grief reactions

Change to GEQ\* scores at T2.

Grief reaction remained stable, with neither group showing any significant changes. However, StandBy group tend to decline over time, while comparison group tend to remain stable or increase slightly.

Shame (- 0.7)  
Responsibility (- 0.5)  
Rejection (- 0.7)  
Stigma (- 0.9)

\*Grief experience Questionnaire (GEQ) - the GEQ measures grief reactions associated with bereavement in general as well as grief reactions unique to suicide bereavement (stigma, responsibility, shame, rejection). Scores range from 5-25, the higher the score the more likely presence of grief experience.

Everything we do is to support and advocate for the health and wellbeing of individuals, groups and communities bereaved or impacted by suicide.

## Learnings from the study:

### 1 Impact

The **impact of suicide** stretches well beyond the first 12 months after the loss.

### 2 Closeness

The **perceived closeness of the relationship** had a significant effect on grief reactions and levels of loneliness, while the perceived impact of the death significantly influenced suicidality as well.

### 3 Relationship

**StandBy** group were more likely to have lost a **partner/spouse/child**. This presents an opportunity for **StandBy** to more actively engage with **close friends of people who suicide**.

### 4 Stigma

Stigmatisation is an area where people who accessed **StandBy** still scored highly, so further addressing this need may help to **reduce feelings of stigma and judgement**.

"I am forever grateful for their help and advice, they do a wonderful job helping people through this extremely hard, difficult loss. I truly believe they help save the lives of the people left behind."

Judy

## Overall, people were very satisfied with StandBy:



93%

of people said they would recommend **StandBy** to others

88%

were happy with the support provided

76%

said that they could not have received equally good support elsewhere

76%

said that they would not have coped as easily without **StandBy**



**StandBy** would like to thank the people bereaved by suicide who participated in the study for their courage in sharing their experience of suicide bereavement. Information collected from the study is being used to improve and monitor the quality of the service and improve outcomes for those bereaved by suicide.

The study received ethical approval through UnitingCare Queensland Human Research Ethics Committee on the 14th July 2020 (Approval #09042020 Part A).

1. Australian Bureau of Statistics. *Causes of Death, Australia, 2020*. Available online at: <https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/latest-release>;
2. Cerei J, Brown M, Maple M, Singleton M, van de Venne J, Moore M, et al. How many people are exposed to suicide? Not six. *Suicide Life Threat Behav.* (2019) 49:529–34. doi: 10.1111/sltb.12450;
3. Shneidman E. Foreword. In: Cain A, editor. *Survivors of Suicide*. Springfield: Charles C. Thomas (1972), ix–xi;
4. Visser, V. & Tretheway, R. (2021). *StandBy Client Feedback Project – Final Report, The Science of Knowing, Buddina, QLD, Australia*.

View the full report



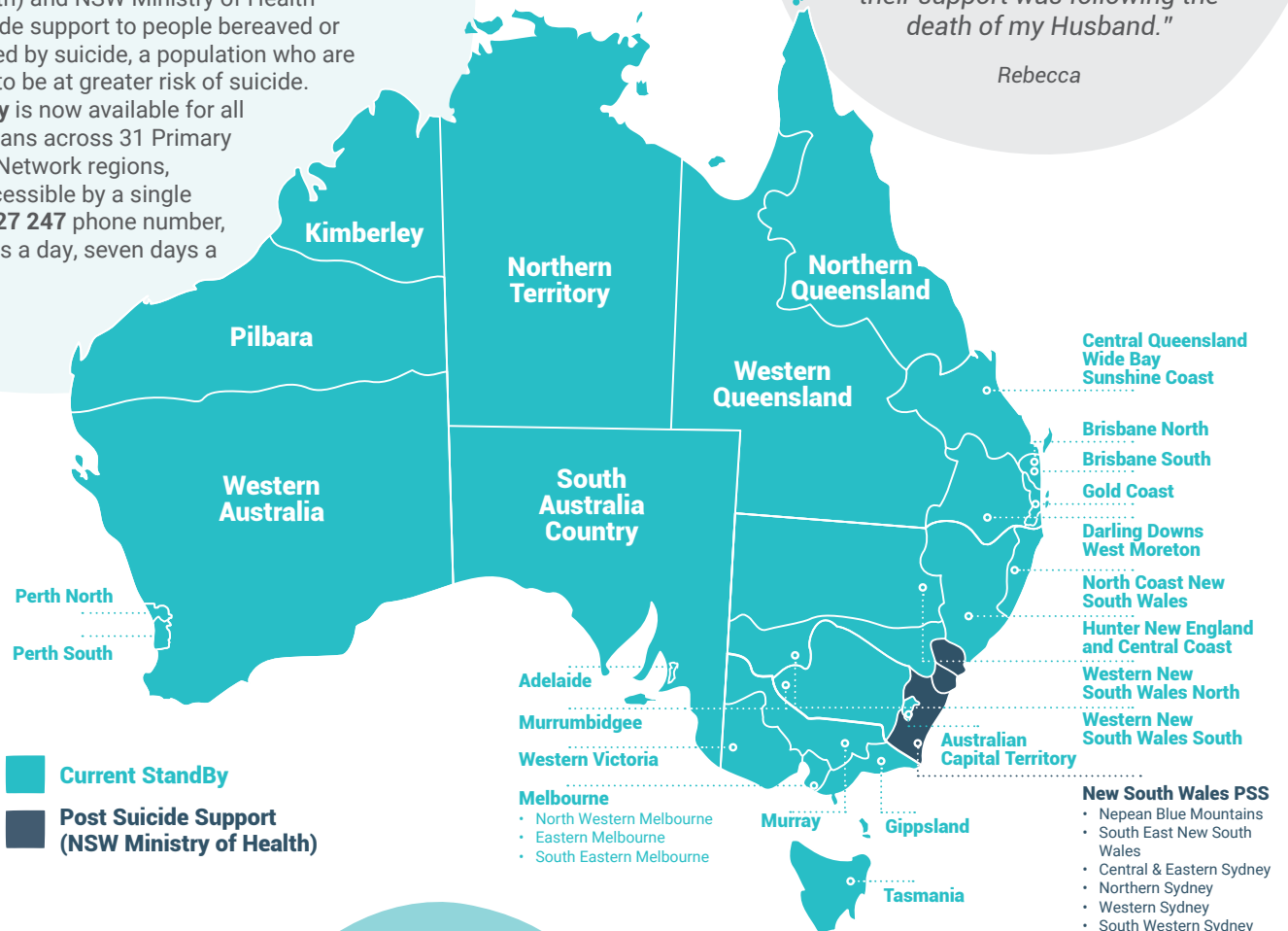
# Our reach

StandBy currently receives annual funding from the Australian Government (Department of Health) and NSW Ministry of Health to provide support to people bereaved or impacted by suicide, a population who are known to be at greater risk of suicide.

StandBy is now available for all Australians across 31 Primary Health Network regions, and accessible by a single **1300 727 247** phone number, 24 hours a day, seven days a week.

*"I am grateful for the support StandBy provided. And my little teddy will always be a special possession. The staff were so beautiful and kind. I cannot stress enough how helpful their support was following the death of my Husband."*

Rebecca



*"They have helped me in the very worst time in my life."*

Bryan

# Our partners



# Connect with us



**24/7 Support**  
**1300 727 247**  
**Administration enquiries**  
**0429 147 491**

[www.standbysupport.com.au](http://www.standbysupport.com.au)



We acknowledge the traditional Custodians of the land on which we operate, and pay our respects to their elders past, present and emerging.  
 Our organisation is a place where human rights are respected and people of diverse genders and sexual orientation are welcomed and supported.

StandBy - an initiative funded by the Australian Government  
 Post Suicide Support - an initiative funded by the NSW Government