

DECEMBER 2017

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Message from the CEO

Hello All,

I am coming up to my second Christmas as CEO with RAW... the time has whizzed past.

In 2017 RAW worked to consolidate its future and to restore its 2015-16 funding levels when we had 12 Outreach Workers... we now have 7.8.

While we have achieved some certainty in relation to our future with Tasmanian Government funding guaranteed to 2020, next year we will re-join the campaign to have our staffing levels restored.

Nevertheless, for a small organisation RAW achieves a lot and has a lot of friends – we really appreciate the support that service users, other providers and members of the public have given us in 2017... some in the form of donations, others in kind and supportive words. As CEO I also appreciate the contribution made by our dedicated staff and Board who go above and beyond the call of duty in their service to the organisation.

I wish you all a very Merry Christmas and a safe and Happy New Year and look forward to catching up again in 2018.

Until next edition,
Liz

Liz Little, CEO RAW Tasmania

TASMANIAN COMMUNITY ACHIEVEMENT AWARDS

The 2017 Tasmanian Community Achievement Awards Presentation Dinner was held on Friday 1st December at the Hotel Grand Chancellor in Hobart.

Rural Alive & Well was a top 3 finalist for the Betta Milk 'Make it Betta' Health Achievement Award along with Epilepsy Tasmania and Tim Smith.

Rural Alive & Well is pleased to congratulate Tim Smith, winner of the Betta Milk "Make it Betta" Health Achievement Award. A very deserving winner who founded and organised the Schools Triathlon Challenge which has now become the premier school based lifestyle event in Tasmania.

Congratulations to all category winners and finalists. Thank you to all of the sponsors for making the awards possible.



Rural Alive & Well accepting their Tasmanian Community Achievement Betta Milk "Make it Betta" Health Achievement Finalist Award.

From left: Peta-Maree Davidson (Business Services Team Leader), Jacki Miller (Executive Officer), Anne Downie (Juior Vice President), Tony Barker (Outreach Team Leader North), Mark Littler (General Manager, Betta Milk), Liz Little (CEO), Darren Thurlow (Outreach Team Leader South), Kylie Lawless (Administration Officer), Ron Christie (Board Member) and Ian McMichael (President).



Enjoying the Gala Dinner are from left: Darren Thurlow, Peta-Maree Davidson, Liz Little, Jacki Miller, Ian McMichal, Tam McMichael, Kylie Lawless, Ron Christie, Anne Downie and Tony Barker.

Meet RAW's Newest Staff Members

Ebony De Jesus - HaRC Facilitator

Ebony has recently joined Rural Alive and Well in the role of Healthy and Resilient communities Facilitator for the North. In this role Ebony is engaging and networking in rural and remote communities, to established community groups with a focus on mental health, well-being and suicide prevention. Ebony has just graduated from the University of Tasmania with a Bachelor of Social Work Degree. This has given her a variety of opportunities to work within different organisations, such as the Deloraine Neighborhood House in which she collaboratively worked with the community on the 'Life Portraits" project which highlighted the diversity and lived experiences in the ageing community. Other organisations Ebony has had the opportunity to work within are the Deloraine Hospital and Deloraine High School, in which she was involved in a variety of collaborative projects and individual supporting roles.

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Ruth Fisher - Outreach Worker

Ruth spent the early part of her life living on the family farm in the Kentish Municipality and has now spent the past 20 years living within the Circular Head municipality. She has lived and worked all of her life on the North West Coast of Tasmania in various locations and workplaces, except for a year spent as a houseparent in the Northern Territory looking after aboriginal students during the school term. Ruth spent 5 years farming at Woolnorth and has a broad skill set within the dairying industry including pasture management, calf rearing and animal health issues. She understands the challenges and difficulties of working the land within the current business climate and the challenges brought by various market and climate issues. While currently enrolled in Social Work at the University of Tasmania, Ruth sees education as part of her lifelong learning and has previously completed training within agriculture, community services and mental health including Certificate III in aged care and also a Diploma in counselling. Ruth began her working life early and has been in paid employment ever since apart from the first 4 years of her son's lives. She is loyal, kind, understanding of difference and loves a good laugh. She believes that by offering a listening ear and being reflective, she can enable people to find the answers from within themselves. She is excited about the opportunity to provide a caring service to the broader rural and remote areas of Tasmania to assist in alleviating isolation and stigma and empower individuals to live a positive and fulfilling life in the way they choose.

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Common Misconceptions About Suicide

Understanding suicide

The World Health Organisation estimates that close to 800 000 people die due to suicide every year. Tasmania is the only state in Australia with an increasing suicide rate (ABS standardised). What drives so many individuals to take their own lives?

To those not in the grips of suicidal despair, it's difficult to understand what drives so many individuals to take their own lives.

Suicide can be a desperate attempt to escape suffering that has become unbearable. Blinded by feelings of self-loathing, hopelessness, and isolation, a suicidal person can't see any way of finding relief except through death.

Understanding what drives individuals to take their own life is not a clear quantitative equation; thus, myths and misconceptions tend to proliferate.

It is important to de-bunk these ideas and squash the stigma. If we all would extend genuine compassionate support, become accurately educated on the potential warning signs, this would assist with prevention and potentially assist in bringing down this terrible statistic.

The people who talk about it don't do it

Fact: Research has shown that 75 — 80 per cent of all people who died by suicide and almost every person who attempted suicide made attempts to communicate to others in the weeks or months leading up to the attempt/suicide that they were in deep despair. Sometimes the only warning was in statements like, "You'll be sorry when I'm gone" or "I can't see any way out" (Smith, M., Segal, J., & Robinson, L., 2012; Ainsworth, 2011). Unfortunately, because most suicidal people are ambivalent about dying, they may make such statements either in a joking manner or in some way which is not congruent with the seriousness of the situation — and they are not taken seriously. The person hearing the statement discounts or otherwise dismisses it.

Anyone that would kill themselves is just insane

Fact: Many depressed people go about their daily business quite adequately. It is important for people to note, however, that the absence of insanity does not mean the absence of suicide risk.

Around 20% of Australians are affected by some form of mental illness every year, yet many do not receive the treatment and support they need. The suicide rate among people with a mental illness is at least seven times higher than the general population. It is one of the main causes of premature death in this group.

Many people who die by suicide have experienced a mental illness. Often people who are considering suicide are dealing with a combination of poor mental health and difficult life events. But with effective treatment, social support and time, many who have tried to end, or considered ending their lives can go on to live full and productive lives.

If someone is going to kill himself, nothing can stop him/her

Fact: Even the most severely depressed person has intensely conflicting feelings about dying by suicide, and most waver in indecision until the very last moment. That ambivalence is shown by the fact that the person is still in the flesh. The fact that he or she is alive right now is proof that at least part of him or her still wants to live. As we have noted, there is another part that wants not death so much as the cessation of pain. The impulse to end it all is overpowering, but it does not last forever.

Assistance and support for an at-risk individual is needed to strengthen the part of the person that wants to live, by helping them to understand that suicide applies a permanent solution to what is potentially a temporary problem; other solutions can be found.

People who commit suicide were unwilling to seek help

Fact: Studies show that over half of the people who died by suicide sought medical help in the six months before their deaths. Statistics available for the elderly show that 80 per cent of seniors who suicide visited their general practitioner (G.P.) within 30 days; 40 per cent were seen within the previous week; and 20 per cent saw their G.P. on the same day as the suicide (The Statewide Office of Suicide Prevention, 2008).

Yes, it's true that many depressed people who contemplate ending their pain through suicide are afraid that, by trying to get help, they will bring more pain on themselves in the form of criticism (such as being told that they are stupid, selfish, sinful, or manipulative), rejection, punishment (such as suspension from school or work), or involuntary commitment. But the slender hope to find a different solution will keep many pressing ahead despite these risks. By talking to you, a suicidal person is taking a huge risk, but it is a compliment to you, too. It is a statement that, somehow, you seem to be more caring, more capable of coping with adversity, or more able to protect the person's confidentiality than others. It is a cry for help, and it is a positive, courageous thing that the person is doing in confiding in you about their suicidal urges.

Talking about suicide may give someone the idea to do it

Fact: A suicidal person doesn't get morbid ideas by talking about suicide; the person already has them.

The opposite is true; by bringing up the question and discussing it openly, you are showing the person that you have regard for them, that you take them seriously, and that you are willing to let them share their pain with you. By asking whether the person is suicidal, you are giving them the opportunity to release pent-up and painful feelings. Any discussion will help you to determine how far along the way to completion their plans are. The table below explains the level of suicide risk.

Level of Suicide Risk
LOW – Some suicidal thoughts. No suicide plan. Says he or she won't attempt suicide.
MODERATE – Suicidal thoughts. Vague plan that isn't very lethal. Says he or she won't attempt suicide.
HIGH – Suicidal thoughts. Specific plan that is highly lethal. Says he or she won't attempt suicide.
SEVERE – Suicidal thoughts. Specific plan that is highly lethal. Says he or she will attempt suicide.

If you feel you are concerned about an individual displaying suicidal warning signs, or if you can relate to these signs please call 1300 HELP MATE.

The problems weren't enough to commit suicide over

Stop! Remember, it is not how bad the problem is; it is how badly it is hurting the person who has it (Ainsworth, 2011). As human beings, we all have our strengths and growing edges. It is those edges — our “Achilles heels” — that function as the weak links in our chain of problem-solving. What is a nuisance factor or not a problem at all to one person might be an overwhelming problem to someone else.

Improvement following a suicide/attempt means that the risk is over

Fact: Most suicides occur within days or weeks of “improvement” when the individual has the energy and motivation to actually follow through with his/her suicidal thoughts (Clayton, n.d.).

If you feel you are concerned about an individual displaying suicidal warning signs, or if you can relate to these signs please call 1300 HELP MATE. It is 100% confidential and 0% judgement, a RAW Outreach worker is available 24/7 7 days a week.

Alternatively call:

Suicide call back service:- 1300659467 - 24/7

SANE Australia:- 1800 18SANE (7263)

- Need Help? [Chat live with a SANE Helpline Advisor \(Available Monday-Friday, 9am-5pm AEST\).](#)

Life line:- 131114 - 24/7

Mental health hot line:- 1800332388 9am - 11pm

Beyond blue support service:- 1300224636 - 24/7

Men's line:- 1300789978 - 24/7

Kids help line:- 1800551800 - 24/7

References:

- Ainsworth, M. (2011). What can I do to help someone who may be suicidal? Metanoia.org. Retrieved on 28 Nov 2017 from:[hyperlink](#).
- Clayton, J. (undated). Suicide Prevention: Saving Lives One Community at a Time. American Foundation for Suicide Prevention. Retrieved 28 Nov. 2017 from: [hyperlink](#).
- Sane. Retrieved 28 Nov 2017 from: [hyperlink](#).
- Smith, M., Segal, J., & Robinson, L. (2012). Suicide prevention: Spotting the signs and helping a suicidal person.
- The Statewide Office of Suicide Prevention. (2008). 2008 Annual Report. Retrieved on 28 Nov 2017 from: [hyperlink](#).
- World Health Organization. Retrieved 28 Nov 2017 from: [hyperlink](#)

MURRAY GOULBURN

The closure of the Murray Goulburn milk factory at Edith Creek has led to the recognition of required mental health and well-being support for workers who are made redundant and subsequent issues for the broader community as identified by the Circular Head Regional Economic Development Working Group.

RAW have been approached and received funding to provide this service for the benefit of directly and indirectly impacted community members within the broader Circular Head region. Redundancy impacts workers directly however, it also impacts the broader community including businesses, schools and wider family networks due to decreased financial capacity and increased uncertainty. It also leads to other job seekers within the community being impacted with increased competition for available work and this in turn increases the disadvantages for the long term unemployed and their families.

Redundancy impacts individuals in many and varied ways and with this in mind, support needs to be tailored to individual need. Working with individuals and their families by hearing and understanding their needs, working through the process of grief and loss as experienced by each family member and strengthening the capacity of each member to cope with uncertainty will in turn strengthen the fabric of the community and lead to increased resilience and assist with individuals achieving their own personal goals with regard to self-determination.

This role requires a collaborative approach with community service organisations and other networks within the Circular Head region to support them with any increase in demand due to the factory closure and ensure that each affected person is assisted or referred to an appropriate service for specific needs. By working together we will be able to more effectively promote positive outcomes for individuals and the broader community. Referrals to RAW can be made by service providers, community members, sporting groups or individuals are welcome to self-refer. You can download the referral form from our [website](#).

RAW provides a confidential service, with a view to increased mental health and well-being within the community.

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Scottsdale Rotary President Glenn Moore and meeting chairman Bob Bush presenting a cheque to RAW Outreach Worker Rhonda Gee-Mackrill on Tuesday the 28th November. Thank you to Scottsdale Rotary Club for their donation.

RAW BOARD

Our Rural Alive & Well Board for 2017/2018 are:

[Ian McMichael - President](#)

[Nick Goddard - Vice President](#)
[Anne Downie - Junior Vice President](#)
[Dianne Fowler - Treasurer](#)
[Robin Thompson - Secretary](#)
[Nicholas d'Antoine - Public Officer](#)
[Ron Christie - Board Member](#)
[Dr Rob Walter - Board Member](#)
[John Tuskin - Board Member](#)
[Leonie Young - Board Member](#)
[Noel Beven - Board Member](#)

CHRISTMAS / NEW YEAR BREAK

Merry Christmas and a
Happy New Year from
Rural Alive & Well

The RAW office will be closing on Friday the 22nd of
December and reopening on Tuesday the 2nd of January



We are here to help

Times have been incredibly tough for farmers across Tasmania these past few years, we were hit with horrific dry conditions, followed by a dairy crisis and now some of the worst floods Tasmania has seen. Our Outreach Workers understand these crises and are ready to help those in need. We are a mate in the tough times, here to talk and provide information to see you through, forward you on to the right support services

and provide you with support through thick and thin. Don't hesitate to call an Outreach worker today, have a look at our [Outreach Workers here](#) and phone the one in your area. To talk to someone now phone our hotline 1300 HELP MATE (1300 4357 6283).

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