SUBMISSION ON BEHALF OF AUSTRALIAN SOCIETY FOR PSYCHIATRIC RESEARCH

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ASPR is the peak research body for mental health research in Australia. This submission specifically addresses the following term of reference.

 the adequacy of the current program of research into suicide and suicide prevention, and the manner in which findings are disseminated to practitioners and incorporated into government policy;

Comment with respect to this term of reference

Research is vital to both to understand the causes of suicide and to develop effective and implementable suicide prevention programs. Mental disorders—particularly depression—are a major cause of suicide. It has been established that although mental health disorders contribute 19% to health-related disability, ahead of cancer and cardiovascular disease, mental health research only receives approximately 3% of national health funding.

We analysed successful NHMRC Project Grant Research awarded for 2010 in order to determine the relative proportion on NHMRC funding provided research focusing on suicide prevention strategies and its major risk factor (depression). The number of grants in these areas was compared to two other areas of medical health research: obesity and diabetes. These conditions were chosen for reference as, like depression, they are common, have an ongoing course and often emerge early in life.

There were no successful applications for research directly concerning suicide. Of the \$22,866,643 allocated to the three areas specified, less than 10% was awarded to projects with depression in the title (see Table).

Table. The number and funding amounts for 2010 NHMRC Project Grants as a function of selected health topics.

Topic	Number of grants	Total research funding
Suicide	0	0
Depression	4	\$1,550,525
Obesity	16	\$8,645530
Diabetes	15	\$12,670588

The NHMRC databases were then searched for over the last 10 years to identify the frequency of grants since 1998. The number of suicide prevention NHMRC projects identified was very small. Seven NHMRC Project Grants were awarded between 1998 and 2004, with the last awarded more than 5 years ago. In 1999 to 2001, seven suicide related grants were offered by the Strategic Research Directions Committee (a separate committee to the Research Committee, which was subsequently folded

into the main research committee). The Strategic Research Directions Committee was charged with identifying important areas in health care where research was underdeveloped. In addition to Project Grants and special SRDC grants, two NHMRC Fellowships with a focus on suicide were offered in 2004 and 2006.

These data suggest that little funding is directed to suicide and its prevention. Indeed, new funding from these sources has not been offered since 2006*. As noted, there was a small flurry of research around suicide when this was directed by a Strategic Directions Committee 1999-2001, but this has not been sustained.

- The ASPR would like to see priority funding set aside for suicide and its
 prevention in subsequent NHMRC rounds. This funding needs to be
 sustained as previous investment did not yield a high volume of applications
 in subsequent years.
- The low level of successful applications also suggests that the mental health research workforce is relatively depleted in these areas, and that it also needs to be strengthened urgently.
- The NHMRC may consider the need to recommission a separate strategic committee with the goal of matching funding allocations to disability burden to ensure best value for money across all areas of health research.

^{*}ASPR acknowledges that funding outside these NHMRC Grant Schemes was not investigated.