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| **A cost-effectiveness framework for a systems-based approach to preventing suicide in NSW, Australia** |
| **Background/Objectives**  The WHO recognises suicide as a public health priority. In Australia, there is substantial variation by gender, and deaths from suicide peak at different ages for men and women. Notwithstanding strategic interventions, over the last decade the overall age-standardised suicide rate is unchanged. Evidence gaps exist for effective interventions for suicide prevention, in particular for cost and cost-effectiveness. Comprehensive multi-sector suicide prevention strategies elsewhere, such as the EAAD (European Alliance Against Depression) Intervention have shown to be effective. More recent interventions (e.g. OPSI-EUROPE initiative) have developed the evidence base. The Australian Black Dog Institute has expanded this design into a systems approach of nine strategies to prevent suicide, with a roll-out across New South Wales.  **Methods**  Implementation commenced using a stepped wedge trial design with follow-up at twelve and twenty-four months. Data is collected through a longitudinal linked dataset of routine data. A prospective cohort study approach incorporating standardised questionnaires to measure clinical, cost and quality related life (QOL) outcomes is supported with formal and informal focus groups of lived experience. Site-specific taxonomy mapping captures changes in the configuration of health and other services (e.g. justice) to identify pathways of care. The primary outcome is identified as reductions in suicidal mortality and morbidity, where morbidity is defined as reductions in hospitalisation; in ED presentations and in ambulance call-outs. This research evaluates the cost-effectiveness of the prevention approach as a complex public health intervention, using mixed-methods approaches.  **Results and Discussion**  We present preliminary findings and discuss the ‘lessons learnt’ in the methodological challenges of developing linked data sources, and in capturing broader health and service reconfiguration impacts. We will discuss the measurement of health gains, non-health benefits, the capture of the effects for individuals not directly targeted by the program, intersectoral impacts, and the application of broader economic evaluation methodology. We facilitate a discussion of the factors that can influence the implementation, feasibility, sustainability and cost-effectiveness of suicide prevention programmes.  **Keywords**  Suicide prevention  Cost-effectiveness  Systems approach |