

Implementation of SUPRA Best Practice in Austria

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BACKGROUND

The Federal Republic of Austria is a parliamentary republic with 9 states (Länder) and 9 090 868 inhabitants.

One of the 10 national health targets addresses mental health (promote psychosocial health in all population groups). The working group addressing the target of mental health developed a mental health strategy. This strategy for **mental health** as well as a **national suicide prevention strategy (SUPRA)**, which was established in 2012, are available in Austria.

2019 SUPRA was elected as best-practice-model for suicide prevention in Europe.

Since the 1980s, a clear decline in suicide rates has been observed. In 2021, 1.099 people died by suicide, the suicide mortality rate being 13 per 100 000 inhabitants.

Level of implementation: national level

Target population: all inhabitants of Austria

General purpose & overarching aim: revising & further developing the SUPRA program & implementing prioritized measures.

Timeline of Implementation Process



Based on the results of SANA, a SWOT analysis was undertaken, and prioritized measures including quick-wins were defined together with the advisory board. The measures and quick wins were grouped along strategic areas (SA).

SA1 Coordination & Organization – the revision of the existing strategy (SUPRA) & the expansion of the regional offices of SUPRA to all federal states. It is also planned to include representatives of mobile crisis intervention teams into SUPRA advisory board.

SA2 Support & Treatment – securing budget for crisis intervention and gatekeeper trainings. The trainings should be delivered to more people (broader outreach). The establishment of a nationwide crisis intervention hotline & the development of a postvention competence centre are pending.

SA3 Awareness & Knowledge – the revision of the media guidelines and the creation of a dedicated SUPRA webpage (expand existing gatekeeper webpage) was carried out.

Lessons learned & existing challenges

Don't take things for granted - despite being best-practice model still a lot of challenges occur.

- *power & competence struggles concerning the implementation of national hotline & postvention competence and coordination centre*
- *health in all policies is still a challenge e.g. collaboration with ministry of education*

GAINS FROM JA ImplementAL NETWORK

- **Learning from each other** - same struggles, other ways & new ideas help to reflect and understand better own situation
- **Good network of experts**

