



**Australian  
Human Rights  
Commission**

## **National Children's Commissioner examines intentional self-harm and suicidal behaviour in children CALL FOR SUBMISSIONS**

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### **ISSUE**

The National Children's Commissioner is examining how children and young people under 18 years can be better protected from intentional self-harm and suicidal behaviour. Article 6 of the *Convention on the Rights of the Child* gives to every child the inherent right to life.<sup>1</sup> United Nations guidelines for periodic reports to the Committee on the Rights of the Child specifically asks for information on measures taken to prevent suicide and other relevant issues affecting the right to life, survival and development of children and young people.<sup>2</sup>

Intentional self-harm and suicidal behaviour in children and young people is a serious issue in Australia and overseas.<sup>3 4</sup> The latest available data from 2012 shows that intentional self-harm was the leading cause of death among Australian children and young people aged 15 to 24.<sup>5</sup>

According to Australian hospital statistics about incidents involving intentional self-harm in the year 2011-12, there were 2,855 incidents involving males aged 15 to 24, and 7,154 incidents involving females in the same age bracket.<sup>6</sup> For children aged 5 to 14, no data was provided for males<sup>7</sup> and there were 690 incidents involving females.<sup>8</sup>

We know that many more children and young people intentionally self-harm than present to hospital. In 2012, the Kids Helpline responded to 15,887 contacts by children and young people aged 5 to 25 who were assessed to have self-injury and self-harming behaviours.<sup>9</sup> In the same year, Kids Helpline also facilitated 9,313 counselling sessions with children and young people aged 5 to 25 who were assessed by the counsellor as having thoughts of suicide.<sup>10</sup>

Each year the lives of too many of our children and young people are lost. The impact of intentional self-harm on children and young people is felt all through the community and leaves a lasting legacy of grief, loss, disability and poor health.

Available data on intentional self-harm and suicide for children and young people under 18 years is poor and it does not provide a comprehensive picture of their experiences across the age groups. For example, while we know that intentional self-harm was the leading cause of death among Australian children and young people aged 15 to 24 in

2012,<sup>11</sup> we do not know specifically how many of those deaths involved children and young people under the age of 18 years, the mechanisms for intentional self-harm leading to death; whether there had been previous self-harm incidents, their geographical location, or their cultural background. United Nations guidelines for periodic reports to the Committee on the Rights of the Child specifically asks for disaggregated data on the death of children and young people under 18 who die due to suicide.<sup>12</sup>

Children, young people, and their advocates, raised the issue of intentional self-harm and suicidal behaviour with the National Children's Commissioner during her listening tour, the Big Banter, in 2013. Intentional self-harm and suicide also featured in many of the video entries submitted by children and young people to the Australian Human Rights Commission's *Back Me Up* competition, which promoted bystander action to combat cyberbullying in 2012 and 2013.

Some groups of children and young people are disproportionately affected. For example, the Australian Human Rights Commission highlighted intentional self-harming among unaccompanied minors in immigration detention facilities in its 2013 Snapshot Report, *Asylum seekers, refugees and human rights*.<sup>13</sup> Between 1 January 2013 and 14 August 2013, there were reports of 50 incidents of actual self-harm and 49 incidents of threatened self-harm at Pontville Alternative Place of Detention involving unaccompanied minors.<sup>14</sup>

A report released by the Young and Well Cooperative in 2013, *Growing Up Queer*, identifies intentional self-harm and suicide as an issue for gender variant and sexuality diverse children and young people.<sup>15</sup> 1,032 children and young people aged 16 to 23 years participated in an online national survey as part of this report. 41% of participants had thought about self-harm and/or suicide, 33% had harmed themselves, and 16% had attempted suicide.<sup>16</sup>

The first National Aboriginal and Torres Strait Islander Prevention Strategy was launched in May 2013 and reflects the seriousness of intentional self-harming and suicide for Aboriginal and Torres Strait Islander children, young people, and their families.<sup>17</sup> According to 2012 Australian Bureau of Statistics data, Aboriginal and Torres Strait islander males<sup>18</sup> and females<sup>19</sup> aged 15 to 24 are 5.2 times more likely to die by suicide than other children and young people in the same age bracket.

A detailed report setting out research and analysis of Australian law, policies and regulations which relate to intentional self-harm and suicidal behaviour in children and young people is being prepared as part of this project.

## SUBMISSIONS

Submissions are sought from interested individuals, government, private, and non-government organisations, on the issue of children and young people under 18 years engaging in intentional self-harm and suicidal behaviour. Of particular interest is:

1. Why children and young people engage in intentional self-harm and suicidal behaviour. *Response: for some it is a mental health issue, it is a compulsion and it can be a way to externalise internal pain, there is a contagion effect, for some its experimental, because it is almost common some teens see it as normal and not a bad thing, social media can promote self harm, some even see it as scarification – like an art*

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*form.*

2. The incidence and factors contributing to contagion and clustering involving children and young people. *Response: technology and social media, online friendships, friends are doing it therefore I will, it's common.*
3. The barriers which prevent children and young people from seeking help. *Response: they're uneducated, don't know anyone to talk to, feel isolated, embarrassed, don't want help, protecting others/family, keeping it personal, fear of consequences/mandatory reporting.*
4. The conditions necessary to collect comprehensive information which can be reported in a regular and timely way and used to inform policy, programs and practice. This may include consideration of the role of Australian Government agencies, such as the Australian Bureau of Statistics and the Australian Institute of Health and Welfare.
5. The impediments to the accurate identification and recording of intentional self-harm and suicide in children and young people, the consequences of this, and suggestions for reform. *Response: privacy/confidentiality, reporting everything whether it's serious or minor self harm or is the young person pretending to self harm, unless you're a health professional how do you know?*
6. The benefit of a national child death and injury database, and a national reporting function. *Response: May be of benefit if it saves duplication and if it catches out young people/families for example every time a family moves to escape detection of the authorities.*
7. The types of programs and practices that effectively target and support children and young people who are engaging in the range of intentional self-harm and suicidal behaviours. Submissions about specific groups are encouraged, including children and young people who are Aboriginal and Torres Strait Islanders, those who are living in regional and remote communities, those who are gender variant and sexuality diverse, those from culturally diverse backgrounds, those living with disabilities, and refugee children and young people seeking asylum. De-identified case studies are welcome. *Response: Hospitals, agencies like headspace, school counsellors, welfare teachers, community programs and workshops for young people and parents such as Mission Australia, The Salvation Army.*
8. The feasibility and effectiveness of conducting public education campaigns aimed at reducing the number of children who engage in intentional self-harm and suicidal behaviour. *Response: Think this would be effective, a social media campaign for young people, tv ads for parents*

9. The role, management and utilisation of digital technologies and media in preventing and responding to intentional self-harm and suicidal behaviour among children and young people.

**Submissions are welcome on any of these issues.** *Response: young people are under a huge amount of stress, parents are working long hours, no time for kids to be kids, lack of fun and recreation.*

Submissions will be made public unless the person making the submission requests that it not be made public or the Australian Human Rights Commission considers it should not be made public.

Findings will be reported in the National Children's Commissioner's 2014 Statutory Report to Parliament.

Submissions should be made by **Monday 2 June 2014**, preferably electronically, to [nccsubmissions@humanrights.gov.au](mailto:nccsubmissions@humanrights.gov.au) with the subject title **SUBMISSION**, otherwise in writing to GPO Box 5218 Sydney NSW 2000.

## **National Help and Counselling Services**

Lifeline – 24 hour crisis support and suicide prevention

- Telephone: 13 11 14
- Website: [www.lifeline.org.au](http://www.lifeline.org.au)

Kids Helpline – counselling service for children and young people aged 5 to 25 years

- Telephone: 1800 55 1800
- Website: [www.kidshelp.com.au](http://www.kidshelp.com.au)

Headspace – counselling and referral service for young people aged 12 to 25 years

- Telephone: 1800 650 890
- Website: [www.headspace.org.au](http://www.headspace.org.au)
- Online chat: [www.eheadspace.org.au](http://www.eheadspace.org.au)

ReachOut.com – online youth mental health service

- Website: <http://au.reachout.com>

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<sup>1</sup> *Convention on the Rights of the Child*, opened for signature 20 November 1989, 1577 UNTS 3 (entered into force 2 September 1990), art 6. At <http://www.ohchr.org/en/professionalinterest/pages/crc.aspx> (viewed 11 April 2014).

<sup>2</sup> Committee on the Rights of the Child, *Treaty-specific guidelines regarding the form and content of periodic reports to be submitted by States parties under article 44, paragraph 1(b), of the Convention on the Rights of the Child* UN Doc CRC/C/58/Rev.2 (2010), para 26. At [http://tbinternet.ohchr.org/\\_layouts/treatybodyexternal/Download.aspx?key=92g0+9Fn15fX/ePqHxWO bMdE63qIOjiuLKDV/BafkP+XV86EGNR9fgW9SFw/mAZV&Lang=en](http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?key=92g0+9Fn15fX/ePqHxWO bMdE63qIOjiuLKDV/BafkP+XV86EGNR9fgW9SFw/mAZV&Lang=en) (viewed 11 April 2014).