

INVESTIGATION INTO WAYS THAT STATE GOVERNMENT DEPARTMENTS AND AUTHORITIES CAN PREVENT OR REDUCE SUICIDE BY YOUNG PEOPLE

The Western Australian Ombudsman has today tabled in Parliament an own motion investigation into ways that State government departments and authorities can prevent or reduce suicide by young people.

1. Background

The Western Australian Ombudsman reviews certain child deaths, identifies patterns and trends arising from these reviews and makes recommendations about ways that State government departments and authorities can prevent or reduce child deaths.

Of child death notifications received by the office of the Ombudsman since commencing the child death review responsibility, nearly a third related to children aged 13 to 17 years old. Of these children, suicide was the most common circumstance of death, accounting for nearly forty per cent of deaths.

Furthermore, and of serious concern, Aboriginal children were very significantly over-represented in the number of young people who died by suicide.

“For these reasons, I decided to undertake a major own motion investigation into ways that State government departments and authorities can prevent or reduce suicide by young people,” said Western Australian Ombudsman Chris Field.

2. Methodology

The investigation included an extensive literature and practice review, significant consultation with government and non-government agencies and experts and a comprehensive collection and analysis of the records and data.

3. Key findings

3.1 Age, gender and location

Of the 36 young people who were the subject of investigation:

- 22 (61 per cent) were male and 14 (39 per cent) were female;
- 4 young people were aged 14 years; 10 were aged 15 years; 11 were aged 16 years and 11 were aged 17 years at the time of their death;
- 21 young people were residing in a major city, 9 in a regional area and 6 in a remote or very remote area; and
- 13 (36 per cent) were Aboriginal and 23 (64 per cent) were non-Aboriginal.

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3.2 Identified risk factors

The investigation examined particular risk factors for suicide. While no single cause of suicide has been identified, the factors associated with suicide have been shown to increase the risk of suicide, particularly when multiple factors are present and interact with each other. It is important to note that these factors are considered to be correlative, not causal.

Mental health problems:

- Diagnosed mental illness
- Self-harming behaviour

Suicidal ideation and behaviour:

- Suicidal ideation
- Communicated suicidal intent
- Previous suicide attempts

Child maltreatment:

- Family and domestic violence
- Physical or sexual abuse
- Neglect

Adverse family experiences:

- A parent with a mental illness
- A parent with problematic alcohol and other drug use
- A parent who had been imprisoned
- Suicide of a person known to the young person

Substance use:

- Problematic alcohol and other drug use

3.3 Four risk groups

The investigation has identified four groupings of young people distinguished from each other by patterns in the factors associated with suicide that each group experienced. The four groups of young people also demonstrated distinct patterns of contact with State government departments and authorities.

Group 1

20 young people who all were recorded as having allegedly experienced one or more forms of child maltreatment, including family and domestic violence, sexual abuse, physical abuse or neglect. Most of the 20 young people in Group 1 were also recorded as having experienced mental health problems and/or suicidal ideation and behaviour.

Records indicate that, as a group, the 20 young people in Group 1 had extensive contact with State government departments and authorities, schools and registered training organisations. All of the young people in Group 1 were known to the Department for Child Protection and Family Support. All had contact with WA Health, with eight young people having contact with the Child and Adolescent Mental Health Service. Eighteen of the young people had contact with a government school and seven had contact with a registered training organisation. The 20 young people in Group 1 had significant contact with the State government departments and authorities associated with the justice system. The majority also had contact with the Department of Housing.

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Group 2

Five young people who were recorded as having been diagnosed with one or more mental illnesses, as having a parent who had been diagnosed with a mental illness and/or demonstrated significant planning of their suicide. None of the five young people were recorded as having allegedly experienced child maltreatment.

Records indicate that four out of the five young people in Group 2 had contact with WA Health and Child and Adolescent Mental Health Service. Three of the five young people had contact with a government school and two had contact with a registered training organisation. Records indicate that none of the young people in Group 2 had contact with the Department for Child Protection and Family Support, Department of Corrective Services, Department of Housing, Department of the Attorney General or Western Australia Police.

Group 3

Six young people who were recorded as having experienced few factors associated with suicide. None of these six young people were recorded as having allegedly experienced any element of child maltreatment, a mental health problem or adverse family experiences. All six young people were recorded as being highly engaged in school and highly involved in sport.

Records indicate that the six young people in Group 3 had minimal contact with State government departments and authorities. Four young people in Group 3 had contact with one State government department, namely WA Health. One young person had contact with a government school and three had contact with registered training organisations. None of the young people in Group 3 had contact with Child and Adolescent Mental Health Service, Department for Child Protection and Family Support, Department of Corrective Services, Department of Housing, Department of the Attorney General or Western Australia Police.

Group 4

Five young people who, like the young people in Group 3, were recorded as having experienced few factors associated with suicide, except for four young people who were recorded as having demonstrated suicidal ideation and behaviour and/or engaged in substance use. Although none of the five young people were recorded as having allegedly experienced any elements of child maltreatment, a mental health problem or adverse family experiences, the Office observed that all five young people were recorded as having demonstrated impulsive or risk taking behaviour.

Records indicate that the five young people in Group 4 all had contact with WA Health, plus government schools. Four young people had contact with the Department for Child Protection and Family Support and registered training organisations. As a group, the five young people in Group 4 had some contact with the State government departments and authorities associated with the justice system. Two young people had contact with the Department of Housing. None of the five young people in Group 4 had contact with Child and Adolescent Mental Health Service.

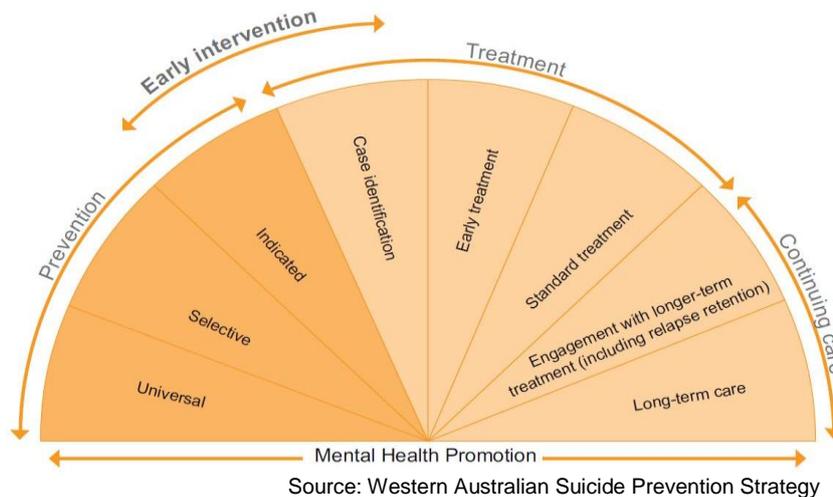
3.4 Opportunities for individual agencies

The investigation found that State government departments and authorities have already undertaken a significant amount of work that aims to prevent and reduce suicide by young people in Western Australia, however, there is still more work to be done.

“I have found that this work includes practical opportunities for individual agencies to enhance their provision of services to young people,” said Mr Field.

Western Australia’s suicide prevention framework (Mental Health Commission)

- There are different suicide prevention activities.



- Different suicide prevention activities may be relevant to each of the four groups of young people.
- The *Western Australian Suicide Prevention Strategy 2009-2013: Everybody’s Business* is focused on the Prevention category of suicide prevention. The office’s analysis indicates that these suicide prevention activities should continue.
- In addition, preventing and reducing suicide by young people may involve symptom identification, treatment and continuing care for young people who have experienced child maltreatment and mental health problems. The office found that the factors associated with suicide experienced by 25 (69 per cent) of the 36 young people may align with the Treatment and Continuing Care categories of suicide prevention.

Department of Health (Child and Adolescent Mental Health Service)

- 12 of the 36 young people were recorded as having been diagnosed with a mental illness and all were referred for assessment by the Child and Adolescent Mental Health Service (CAMHS) at some point in their lives.
- The office examined referrals to CAMHS, acceptance of referrals by CAMHS, risk assessments, treatment and discharge planning for these 12 young people.
- The office found differences between the experiences of young people in Group 1 and Group 2, particularly with respect to acceptance of referrals by CAMHS and risk assessments.

- For example, six of the eight young people in Group 1 had been accepted by CAMHS at some point in their lives. However, during the last year of their lives, six of the eight young people were referred again to CAMHS and three young people were not accepted by CAMHS even though they met the priorities for acceptance set out in the *WA Country Health Service Child and Adolescent Mental Health Services Access Criteria Policy*.

Department for Child Protection and Family Support

- 20 of the 36 young people were recorded as having allegedly experienced one or more forms of child maltreatment, and all of these young people had contact with the Department for Child Protection and Family Support.
- The effect of experiencing multiple forms of child maltreatment is referred to in the research literature as 'cumulative harm'. 17 of the 20 young people were recorded as having allegedly experienced more than one form of child maltreatment, and are therefore likely to have experienced cumulative harm.
- Legislation and policies in some other states and territories explicitly identify that child protection authorities need to undertake holistic assessments so as to recognise cumulative harm.
- Some Department for Child Protection and Family Support policies and procedures for responding to child maltreatment address the need to undertake holistic assessments so as to recognise cumulative harm. However this has not been extended to other relevant elements of the Department for Child Protection and Family Support's policy framework and procedures.

Department of Education

- All of the 20 young people in Group 1 were recorded as having allegedly experienced child maltreatment; 19 (95 per cent) of these 20 young people were enrolled in an educational program at the time of their death.
- During the last year of their lives, 14 of the 19 young people attended school less than 60% of the time.
- Limited actions pursuant to the *School Education Act 1999* and the *Student Attendance* policy were taken to remedy this persistent non-attendance. However, a range of other actions, not required by the legislation or policy, were undertaken by schools.

3.5 Inter-agency collaboration

"Critically, as the reasons for suicide by young people are multi-factorial and cross a range of government agencies, I have also found that the work of government agencies should include the development of a collaborative, inter-agency approach to preventing suicide by young people," said Mr Field.

4. Recommendations

Arising from these findings the report makes 22 recommendations to four government agencies about ways to prevent or reduce suicide by young people including three recommendations to the Mental Health Commission, six recommendations to the Department for Child Protection and Family Support, five recommendations to the Department of Health, seven recommendations to the Department of Education and one recommendation to all of the above agencies.

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“I am very pleased that each agency has agreed to these recommendations and has, more generally, been highly co-operative and positively engaged with our investigation,” said Mr Field.

“Each of these recommendations will be monitored by our office to ensure their implementation and effectiveness in relation to the observations made in the investigation.”

“In addition to my findings and recommendations, the report will be an important resource for planning and work with Western Australian young people by Government agencies.”

5. Concluding observations

“Suicide by young people is a tragedy. Government agencies, through collaborative policy development and service provision, have a vital role to play in preventing youth suicide. Ultimately, my investigation, and this report, is intended to enhance and improve the way that government agencies undertake this vital work.”

“I extend my deepest personal sympathy to the parents, families and communities that have been personally affected by youth suicide in Western Australia,” said Mr Field.

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The report titled *Investigation into ways that State Government departments and authorities can prevent or reduce suicide by young people* is available from the Ombudsman’s website at www.ombudsman.wa.gov.au/suicidebyyoungpeoplereport

It is recommended that when reporting on this investigation, media agencies consider the Mindframe National Media Initiative guidelines for reporting on suicide.