

Incidence and repetition of deliberate self-harm in three remote Indigenous communities in Far North Queensland, Australia

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AIM:

To investigate the incidence and repetition of deliberate self-harm (DSH) using data from a clinical file audit for the period 2006 to 2011 in three remote Indigenous communities in Far North Queensland, Australia.

BACKGROUND:

Deliberate self-harm (DSH) is a global public health concern. It is the single most important risk factor for suicide (Cooper, et al., 2005) with a higher frequency over time associated with a greater acquired ability for suicide (Willoughby, et al., 2015). Therefore, understanding the incidence and repetition of DSH is crucial for services and practitioners concerned with the prevention of suicidal behavior (Perry, et al., 2012).

METHOD:

The study communities are located on the Cape York Peninsula in Far North Queensland, Australia. These communities are very remote, experience a similarly low sociodemographic ranking, and the great majority of the population are Indigenous Australians. A clinical file audit was performed at the primary health clinic in each community for the six year period from 1st January 2006 to 31st December 2011. Presentations involving DSH were extracted and analysed to characterise the incidence and repetition of DSH in these communities.

RESULTS:

There were 227 DSH presentations during the study period, equivalent to a rate of 1,638 per 100,000 population. Rates of DSH were higher in age groups 15-24 and 25-34, were not significantly different between genders, and varied significantly between communities. Sixty percent of DSH repetitions occurred within 6 months of an earlier episode. Of the 227 DSH presentations, 32% involved hanging.

IMPLICATIONS

Overall rates of DSH in this study are exceptionally high when compared to other monitoring studies in general populations. The populations in these communities represent some of the most marginalised, socially excluded, and disadvantaged people in the world. With DSH being the single most important risk factor for suicide, urgent action is required to reduce these exceptionally high rates and reduce repeated self-harm incidents in these vulnerable populations.

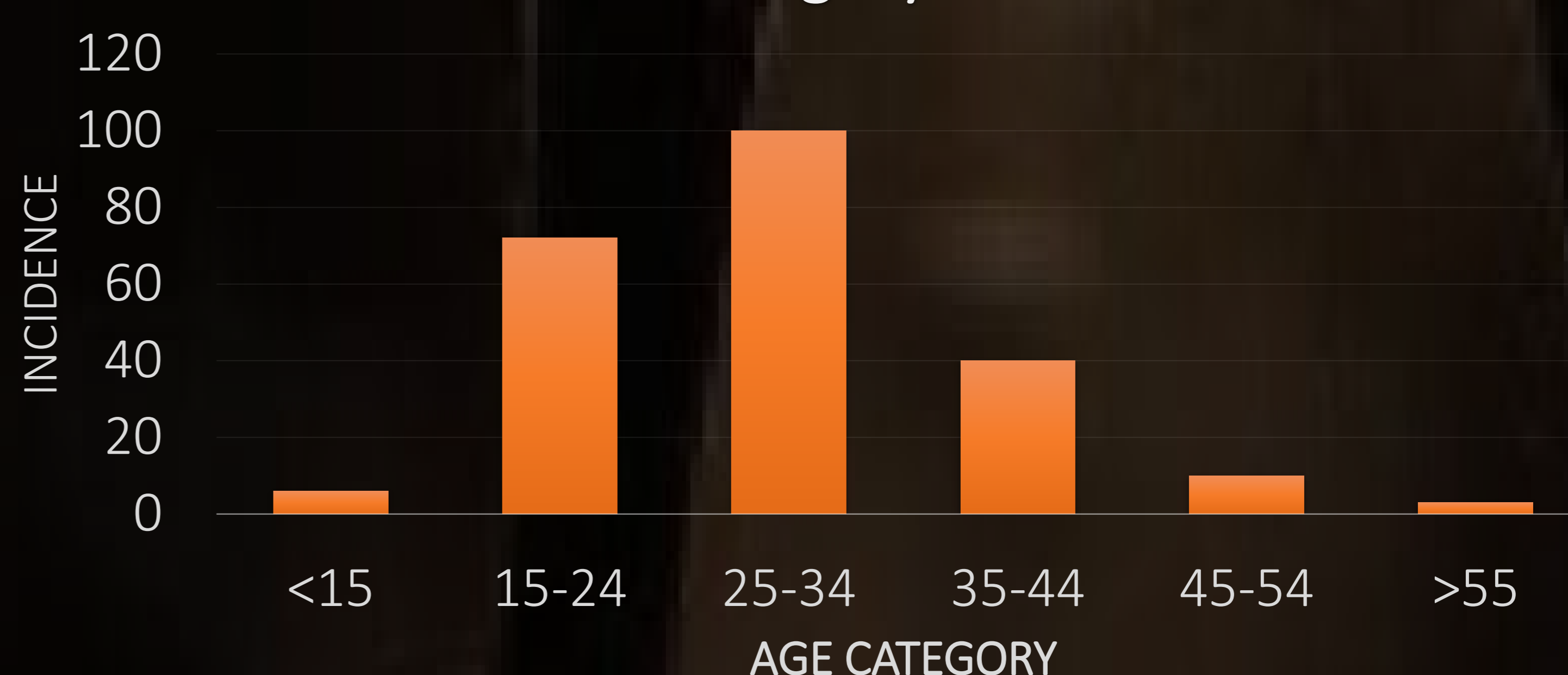
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Incidence of Deliberate Self-Harm by Age Category



Incidence of Deliberate Self-Harm by Community

