

Trends and Issues Paper

Child deaths – suicide intent

Number 1
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Suicidal Intent

Introduction

This paper examines the issue of suicidal intent amongst children and young people in Queensland.

The reasons why children and young people take their own lives are complex. Each death is unique and is influenced by a series of physical, psychological and environmental conditions and associated risk factors.

There is evidence, however, that many young people provide an indication of their intent, prior to their suicide – usually to a significant person in their lives.

The Commission has identified that a significant proportion of children and young people state or imply their intent prior to their suicides either verbally to a family member, friend or health professional; via text message; or using various online platforms.

More specifically, the Commission's review of the circumstances of deaths suggests that a number of children and young people had been communicating their suicidal intent in the weeks, months or years prior to their suicides. Some children were as young as 9 years of age when they first indicated they were suicidal.

Other research has estimated that approximately 80% of young people who complete suicide communicated their suicidal thoughts and feelings and their intent to kill themselves to someone before their death.¹ However it is often difficult to tell what some signs may mean, or indications may be so subtle that they go unrecognised.

The Commission also recognises that many children and young people make threats of suicide as a means of bringing about change in their lives. Sometimes these threats of suicide are viewed as manipulative or attention seeking – this is a dangerous view.

When a child or young person threatens suicide it means they believe there is something seriously wrong in their lives, and it is vital that this is not ignored.

For the purposes of this paper we **recognise** that:

Suicidal intent may be communicated directly or implied to a significant person in a child or young person's life such as a family member/carer, friend, health professional or educator.

Notification of **suicidal intent** may occur in person (verbally) via telephony technology or on line (texting, email, messenger or through social media platforms).

Suicide ideation involves a child or young person experiencing thoughts and/or feelings about considering suicide prior to their death.

Evidence

The data presented in this paper is drawn from the Commission's Child Death Register, for the period 1 January 2004 – 30 June 2011. During this period a total of 131 deaths of young people were classified as suicides (47 females and 84 males). Table 1 shows the number of children and young people who either stated or implied their intent to suicide prior to death.

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Table 1

Stated or implied intent to suicide	Female		Male		Total	
	N	%	n	%	n	%
Yes	24	51.1	41	48.9	65	49.6
No	23	48.9	43	51.2	66	50.4
Total	47	100	84	100	131	100

Just under half of the children and young people either stated or implied their intent to suicide prior to their death (49.6%, 65 deaths). Males and females were almost equally as likely to state or imply their intent to suicide.

Table 2 shows who children and young people stated their intent to suicide to prior to their deaths.

Table 2

Who intent was stated or implied to	Total	
	n	%
Family member/s	23	35.4
Friend/s	22	33.8
Both family and friends	8	12.3
Other (including health professionals)	6	9.2
Unclear/unknown	6	9.2
Total	65	100

Of the 65 children and young people who stated their intent prior to their suicide, an almost equal number communicated intent to a family member/s (35.4%, 23 deaths) compared to a friend/s (33.8%, 22 deaths). Eight young people stated or implied their intent to both a family member and a friend (12.3%).

Table 3 compares the number of children or young people who stated or implied their intent to suicide, or who made no specific mention of taking their own life, with those who previously exhibited suicidal thoughts and behaviours.

Table 3

Stated or implied intent to suicide	Previous suicidal thoughts and behaviours					
	No/Unknown		Yes		Total	
	n	%	n	%	n	%
No	44	77.2	22	29.7	66	50.4
Yes	13	22.8	52	70.3	65	49.6
Total	57	100	74	100	131	100

While the majority of young people who stated or implied their intent to suicide also previously expressed suicidal thoughts or had engaged in suicidal behaviours (70.3%, 52 deaths), almost a third of young people who made no mention of their intent to suicide had previously expressed suicidal ideation or had engaged in suicidal behaviours, such as a suicide attempt or self-harming behaviour (29.7%, 22 deaths).

Table 4 compares the number of young people who stated or implied their intent to suicide or who made no mention of their intent, and those where there was evidence the young person had experienced mental health issues. As illustrated, 44.3% of young people who had not previously stated or implied their intent to suicide had known mental health issues (27 deaths).

Table 4

Stated or implied intent to suicide	Mental health issues					
	No/Unknown		Yes		Total	
	n	%	n	%	n	%
No	39	55.7	27	44.3	66	50.4
Yes	31	44.3	34	55.7	65	49.6
Total	70	100	61	100	131	100

Communicating intent is one risk factor that can be better understood and responded to in the fight to reduce youth suicide in Queensland.

Where to seek help

Help can be sought from Kids Helpline by phoning 1800 551 800 or LifeLine on 13 11 14.

¹ Department for Community Development (2005). *Understanding Youth Suicide Information Kit*. Office for Children and Youth. Perth, WA

Contact details: