Getting out of (self-) harm's way: A study of factors associated with self-harm among asylum seekers in Australian immigration detention

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ABSTRACT

The monitoring of self-harm among asylum seekers in Australian immigration detention has not occurred routinely or transparently. Thus whilst concerns regarding rates of self-harm among asylum seekers have been frequently raised, a paucity of systematic information regarding key factors associated with self-harm among asylum seekers exists. The present study was designed therefore to fill a number of gaps in government monitoring by examining the government's own archived self-harm data. Via a descriptive analysis of self-harm incident reports from all operational Australian immigration detention facilities over a 20-month period to May 2011, obtained under *Freedom of Information*, the present study identified that 959 incidents of self-harm occurred during this period. A gender bias towards men was also found. In addition to this, 10 different methods of self-harm were identified, the four most common being: cutting (47%), attempted hanging (19%), head hitting (12%) and self-poisoning by medication (6%). Seven different precipitating factors for self-harm were also identified, the four most common were: detention conditions (39%), processing arrangements (27%), negative decisions (24%) and family separation (3%). These findings point strongly to the health benefits of considering alternatives to held immigration detention, such as community based processing.

1. Introduction

Australia has had a policy of mandatory, indefinite detention for asylum seekers who arrive by boat since the early 1990's. Concerns regarding self-harm among asylum seekers in Australian immigration detention have been raised throughout this time by academics and clinicians,[1–6] prominent human rights bodies[7,8] and at government[9] and other inquiries.[10] As asylum seekers carry many of the risk factors for self-harm,[11] and detained populations are known to have higher rates of self-harm than community populations,[12] it would seem critical to investigate such concerns further.

The monitoring of self-harm among asylum seekers in immigration detention by the Australian government has not occurred routinely or transparently, however, over the past two decades.[9,13] Systematic information regarding the incidence and nature of self-harm, as well as precipitating factors for self-harm among the detained asylum seeker population is therefore scarce. As self-harm causes distress to individuals and their families, and is also an

established risk factor for suicide in other detained populations,[14] the Australian government's ongoing failure to monitor self-harm across the immigration detention network has significant implications for the health of asylum seekers. Furthermore, without greater understanding of the extent and nature of self-harm among the immigration detention population, planning for prevention strategies may be inadequate.

As the Australian government do not routinely release any of the self-harm data they collect and archive from immigration detention centres (IDCs), the means through which research into self-harm in the IDC population can be conducted are limited. The self-harm dataset used in the present study — described in further detail in the method section below — was extracted from the most comprehensive database published to date of 7632 incidents occurring in the onshore Australian immigration detention network (including Christmas Island). These de-identified data cover a 20-month period to May 2011 and were obtained via *Freedom of Information* (FOI) (Cth),[15] after being found to meet the Public Interest Test[16] and being published on the Immigration Department's disclosure log[17] in 2013, and shortly after by Detentionlogs.[18] As no comparable data has been made available to the public in the interim, it was anticipated that a systematic analysis of

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them might yield valuable information about a range of factors associated with self-harm in the IDC population. Approval for a publically accessible record-based study of this type is not required by an (Australian) institutional ethics committee.

The present study was designed, therefore, to fill a number of gaps in government monitoring of key factors associated with self-harm among asylum seekers in Australian immigration detention, and to consider their implications for broader prevention strategies. Via a descriptive analysis of self-harm incident reports from the Australian immigration detention network, the aim of the current study was to ascertain the incidence of self-harm among the immigration detention population in the 20 months to May 2011, to describe the methods used to self-harm, as well as precipitating factors for self-harm, according to gender.

2. Dataset and method

As per the terms of the contract the (then-called) Department of Immigration and Citizenship (DIAC) has with the private contractors who run the detention centre network (in this instance, Serco), a range of 'reportable' incidents involving asylum seekers (including, for example, self-harm, accident/injury, public health risks and use of force) are required to be logged by detention centre client service officers.[13] The incident reports are then archived in DIAC's centralised data management portal, from where it may extract self-harm (and other) data. Each of the reports contain a short summary of the event. The self-harm reports are also meant to include a description of the method and nature of the injury, as well as the location of the incident.[13] In reality, the scope of the reports vary considerably.

Self-harm includes all forms of self-injury, irrespective of suicidal intent or motivation. Three of the reportable incident categories — 'self-harm actual', 'self-harm attempted' and 'self-harm threatened' - relate to self-harm. As these three categories have not been formally defined by DIAC,[13] and a detailed inspection revealed them to be overlapping, for the purposes of this study they were grouped together. The total number of self-harm incidents identified by Serco staff during the 20-month reporting period was 916. A number of word searches (for example, 'self-harm', 'cutting', 'hitting', 'slashing', 'hanging') conducted on the remaining incident categories yielded an additional 43 self-harm incident reports. The final total of the self-harm dataset utilised in the present study was thus 959.

Each incident report was then categorized according to methods of self-harm and precipitating factors for self-harm, as well as by each gender separately, using content analysis. The coding of gender and methods of self-harm was based on known classifications, whereas precipitants for self-harm was not. These categories (and sub-categories) emerged following immersion with the data. As a reliability check, an independent coder was used to evaluate the way a sub-sample of the incident reports were categorized. Inter-coder reliability was deemed to be more than adequate, as the percentage of agreement between the two coders for this sub sample was 85 percent.

Following the coding process, the frequencies of the categories identified in the analysis were then converted into percentages. Further statistical analyses of these data (for example, Chi-square tests to explore relationships between the categories that were identified) were not conducted as the incident reports capture incidents rather individuals. This means that the categories in the present study may not be discrete, as some individuals might have been reported as self-harming more than once.

3. Results

3.1. Incidence of self-harm

The available data from the Serco incident reports indicate that 959 incidents of self-harm occurred among detained asylum seekers between October 2009 and May 2011. Based on the average estimated immigration detention centre (IDC) population figures from the Department of Immigration (compiled by the Commonwealth Ombudsman)[13] for the 20-month reporting period (4269), the IDC self-harm rate is 22%. Put differently, this is a rate of 224 per 1000 detained asylum seekers for the 20-month period. This rate may be lower if some individuals have been reported as self-harming more than once. This figure is, however, likely to be under-reported, as highlighted in further detail in the discussion section below.

3.2. Gender

Information related to gender was extracted from 326 (33.9%) incident reports. The analysis of the reports found that males were involved in 301 (31.3%) self-harm incidents, while females were involved in 25 (2.6%). Based on the incidents where gender is known, the male to female self-harm ratio was 12:1. By comparison, the estimated average adult immigration detention population over the reporting period was comprised of 75% males, and 11% females (with minors forming the remaining estimated 14%),[19—21] constituting a male to female ratio of 6.8:1.

3.3. Methods of self-harm

Methods of self-harm were extracted from 403 (42.0%) incident reports, following the content analysis process. Methods of self-harm were not able to be identified in 556 (57.9%) self-harm reports. The analysis of reports with identifiable methods found that 10 different methods of self-harm were enacted by detained asylum seekers during the reporting period. Table 1 outlines all descriptive statistics for methods of self-harm.

3.4. Methods of self-harm by gender

Information relating to gender was extracted from 217 (53.8%) of the 403 incident reports with identifiable methods of self-harm. Males were identified in 207 (51.3%) incidents and women in 10 (2.4%). Gender was not specified in 186 (46.1%) incidents with identifiable methods. As the male to female self-harm ratio in incidents where gender was known was 12:1, it could be expected that there would be a greater proportion of males than females in self-harm incidents with identifiable methods. Table 1 shows what is known about method by gender.

3.5. Precipitating factors for self-harm

Precipitating factors for self-harm were identified in 161 (16.7%) incident reports, following the content analysis process. Precipitants were not able to be identified in 798 (83.2%) self-harm reports. The analysis of the reports with identifiable precipitants found that there were seven different categories of precipitants for self-harm among detained asylum seekers over the 20-month reporting period. Table 2 outlines all descriptive statistics relating to precipitants for self-harm.