Self Harm: NZ High School Norms
Youth ‘12

Dr Jemaima Tiatia-Seath, Dr Terry Fleming, & the Adolescent Health Research Group

Youth'12 National Health and Wellbeing Survey
Theresa (Terry) Fleming, on behalf of & The Adolescent Health Research Group
The Adolescent Health Research Group

To provide high quality, accurate and timely research that seeks to improve the health and wellbeing of young people in Aotearoa, New Zealand.
The Youth2000 Survey Series

National Secondary School Student Surveys

2001 - 9,699 adolescents
2007 - 9,107 adolescents
2012 - 8,500 adolescents

www.youthresearch.auckland.ac.nz

*confidential report
## Youth2000 Series

<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2007</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Schools</strong></td>
<td>114 (86% response)</td>
<td>96 (84% response)</td>
<td>91 (73% response)</td>
</tr>
<tr>
<td><strong>Decile</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>low</td>
<td>n 26</td>
<td>n 15</td>
<td>n 26</td>
</tr>
<tr>
<td></td>
<td>% 22.9</td>
<td>% 16.3</td>
<td>% 28.6</td>
</tr>
<tr>
<td>med</td>
<td>49</td>
<td>52</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>% 43.1</td>
<td>% 56.5</td>
<td>% 39.6</td>
</tr>
<tr>
<td>high</td>
<td>39</td>
<td>25</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>% 34.2</td>
<td>% 27.2</td>
<td>% 31.9</td>
</tr>
<tr>
<td><strong>Students</strong></td>
<td>9,567 (73% response)</td>
<td>9,107 (74% response)</td>
<td>8,500 (68% response)</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>n 4,414</td>
<td>n 4,911</td>
<td>n 3,874</td>
</tr>
<tr>
<td></td>
<td>% 46.1</td>
<td>% 54.0</td>
<td>% 45.6</td>
</tr>
<tr>
<td>Female</td>
<td>5,152</td>
<td>4,187</td>
<td>4,623</td>
</tr>
<tr>
<td></td>
<td>% 53.9</td>
<td>% 46.0</td>
<td>% 54.4</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Māori</td>
<td>n 2,325</td>
<td>n 1,702</td>
<td>n 1,701</td>
</tr>
<tr>
<td></td>
<td>% 24.7%</td>
<td>% 18.7%</td>
<td>% 20.0%</td>
</tr>
<tr>
<td>Pacific</td>
<td>768</td>
<td>1,178</td>
<td>1,201</td>
</tr>
<tr>
<td></td>
<td>% 8.2%</td>
<td>% 10.2%</td>
<td>% 14.1%</td>
</tr>
<tr>
<td>Asian</td>
<td>679</td>
<td>1,310</td>
<td>1,051</td>
</tr>
<tr>
<td></td>
<td>% 7.2%</td>
<td>% 12.4%</td>
<td>% 12.4%</td>
</tr>
<tr>
<td>NZ Euro</td>
<td>5,219</td>
<td>6,871</td>
<td>4,024</td>
</tr>
<tr>
<td></td>
<td>% 55.4%</td>
<td>% 52.8%</td>
<td>% 47.7%</td>
</tr>
<tr>
<td>Other</td>
<td>417</td>
<td>817</td>
<td>511</td>
</tr>
<tr>
<td></td>
<td>% 4.4%</td>
<td>% 5.8%</td>
<td>% 6.0%</td>
</tr>
<tr>
<td>&gt;1 ethnic groups</td>
<td>29%</td>
<td>39%</td>
<td>42%</td>
</tr>
</tbody>
</table>
Youth'12 National Health and Wellbeing Survey

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Results ‘12
Happy how family get along
Parent wants to know where you are & who with
Spend enough time with at least one parent/person who acts as a parent
Ethnic Diversity

% Two or more ethnic groups

Prioritised ethnicity 2012

- Maori
- Pacific
- Asian
- NZE
- Other

Ethnic Diversity

2001: 29%
2007: 39.4%
2012: 41.8%
Self-Harm

The prevalence of frequent self-harm, defined as three or more self-harming behaviours in the past 12 months was approximately...

1 in 13 students
• **Self Harm** - During the last 12 months have you deliberately hurt yourself or done anything you knew might have harmed you (but not kill you)?

• **Suicide** - During the last 12 months have you tried to kill yourself (attempt suicide)?

• **Low mood** - During the last 12 months was there ever a time you felt sad, blue or depressed for two weeks or more in a row?

• **Symptoms of depression** - Over the cut off on RADS (symptoms in last 2 weeks)
Distress and self-harm among NZ high school students - Youth12

- Symptoms of depression
- Deliberate self-harm
- Suicide thoughts
- Suicide attempt
- Emotional Help Seeking

Male
Female

Graph showing the comparison between male and female students for various distress and self-harm indicators.
Ethnicity - Youth12

- Ethnicity was also significant with New Zealand European students reporting a significantly lower prevalence of suicide attempts (2.69%) compared with the Pacific (8.2%) and Maori (6.5%) students (p<0.01).

- After controlling for demographic variables Asian students (OR 0.7, 95% CI [0.5, 1.0]) and Pacific students (OR 0.5, 95% CI [0.4, 0.7]) were less likely to report frequent self-harm behaviours compared to European students.
Pacific Youth and Suicidal Behaviours - Youth12

• Pacific students and Maori students reported the highest rates of suicide attempts compared with other ethnic groups.

• 1 in 4 Pacific students reported self-harm in the previous 12 months.

• Pacific students were the least likely to engage in frequent self-harm but were the most likely to have reported a suicide attempt in the preceding 12 months.

• Suicide connection both for family members and within peer groups show clusters and contagion effects are a concern.

Risk and Protective Factors for Suicidal Behaviors Among Pacific Youth in New Zealand (2016)
Teevale T; Lee A; Tiatia-Seath J; Clark TC; Denny, S; Bullen P; Fleming T; Peiris-John, R
Self harm higher for those in higher deprivation communities
(Neighbourhood Deprivation)
Same & especially both sex attracted students have much higher risk of self harm

Most students who self harm have also had low mood & nearly half had attempted suicide.
Most common health support is from family doctor

- Family doctor: 84 in 2007, 74 in 2012
- School Clinic: 21 in 2007, 18 in 2012
- Afterhours A&E: 14 in 2007, 14 in 2012
- Hospital A&E: 16 in 2007, 16 in 2012
Why students didn’t get health care when they need it

- Didn't want to fuss
- Couldn't be bothered
- Too embarrassed
- Too scared
- No transport
- Costs
- Didn't know how
Suicide Attempts and Depressive Symptoms

<table>
<thead>
<tr>
<th>Year</th>
<th>Suicide Attempt in Last 12 Mths</th>
<th>Depressive Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>2007</td>
<td>5</td>
<td>11</td>
</tr>
<tr>
<td>2012</td>
<td>5</td>
<td>13</td>
</tr>
</tbody>
</table>

- Suicide attempt in last 12 months
- Depressive symptoms
Limitations

• Self-harm is slightly lower than what has recently been reported in literature. It is difficult to compare our rates of self-harming behaviours to previous research due to different definitions of self-harm.

• Our definition = self-harming behaviours as 3 or more episodes in the previous 12 months and specifically excluded self-harming behaviours that had suicide intention.

• It is possible that students who are self-harming or making suicide attempts are more likely to recall friend or family suicide behaviours. A longitudinal will make this clearer.

• The survey only included students enrolled in school and at school on the day of the survey.

• Still unclear whether increased risk of self-harming behaviours and suicide attempts are due to contagion or other shared events such as family trauma that would have directly caused the increased risk of suicide attempt or frequent self-harm behaviour.
Conclusions

• Self harm is common.

• Higher in specific groups and communities
  – Girls, Rainbow youth

• Highly correlated with low mood and with suicide attempts

• Many will not have sought help
Thank You

The Youth’12 project was funded by the Ministries of Youth Development, Social Development, Health, Education and Justice, the Department of Labour, the Families Commission and the Health Promotion Agency (HPA)

Thanks to all the schools and students who participated

For more detailed information please see our website
www.youthresearch.auckland.ac.nz