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Title:
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Date:
2019-12-01

Citation:
Hedrick, K., Armstrong, G. & Borschmann, R. (2019). Self-harm among asylum seekers in Australian immigration detention. Lancet Public Health, 4 (12), pp.e604-. https://doi.org/10.1016/S2468-2667(19)30221-X.

Persistent Link:
https://hdl.handle.net/11343/233932

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Self-harm among asylum seekers in Australian immigration detention

Self-harm among asylum seekers in Australian immigration detention has attracted much attention over the past two decades. In 2012, the Australian Government reinstated offshore processing for asylum seekers—a policy previously maintained from 2001 to 2008—meaning that asylum seekers who arrived by boat were transferred to Manus Island in Papua New Guinea, or to the Pacific island nation of Nauru, for processing.[1] National and international attention regarding perceived rates of self-harm among people seeking asylum in Australia has intensified since this time,[2,3] as have calls for self-harm prevention strategies to be implemented.[2]

A large body of evidence, including from a 2018 systematic review,[3] indicates that asylum seekers have a higher prevalence of depression, anxiety, and post-traumatic stress disorder than the general community. Evidence also suggests that asylum seekers have many of the risk factors associated with self-harm,[3] such as previous traumatic experiences, mental health problems (often resulting from premigration and postmigration events, including torture and trauma), and social isolation, with detention known to exacerbate such risk.[4] Additionally, mental health has been shown to deteriorate with length of detention.[3,5] Despite evidence of the increased risk to the mental health of asylum seekers, Australia, as well as many other high-income countries, continues to detain asylum seekers.[1] However, little is known about the rates and characteristics of self-harm among asylum seekers, largely because accessible data are absent.

We investigated self-harm among people seeking asylum in Australia (including those transferred to Nauru and Manus Island) over a 12-month period. Calculated episode rates of self-harm in immigration detention were more than 200 times higher than rates of hospital-treated self-harm in the general Australian population.[6] By contrast, episode rates of self-harm among community-based asylum seekers were four times higher than rates of hospital treated self-harm in the general Australian population.[6]

Our analysis of the Australian Government's own self-harm data[6] provides evidence of the lowered self-harm risk for asylum seekers in community-based arrangements and community detention, compared with people in immigration detention. Our findings point clearly to the deleterious effect of immigration detention on the health of asylum seekers. The high episode rates of self-harm identified in our study[6] constitute a public health crisis and warrant urgent attention.

Responses to this public health issue are poor. Independent and systematic monitoring of self-harm among people seeking asylum in Australia is needed to identify trends and to implement prevention strategies, but is not being done. In light of the episode rates of self-harm, the health of asylum seekers will remain at risk without changes to government policy regarding detention.

An informed government response would include three essential aspects: only using detention as an absolute last resort for the shortest possible time; mental health services specifically tailored to meet the needs of asylum seekers; and the independent monitoring of self-harm in line with WHO self-harm reporting guidelines.[7] Without such a response, a reduction in the high rates of self-harm observed among asylum seekers is unlikely to occur.

KH has received grants from the Australian Government Post-Graduate Research Training Program during this study; personal fees from Victorian Foundation for Survivors of Torture; and personal fees from the Department of Home Affairs, outside the submitted work. The other authors declare no competing interests. The views expressed here are those of the authors.

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