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EXCLUSIVE

Qld's shameful scourge: Suicide rate doubles for kids as young as 10

It's unimaginable that it could be true, but new statistics have exposed a terrifying trend emerging among Queensland children as young as 10.

Andreas Nicola and Toby Crockford

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The family of Onyx Rose Lambert, who did on July 16, organised a rally outside the 13-year-old's old high school where the Year 7 transgender student was allegedly bullied.

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- Too late: Painful reminders of teen death

A child aged between 10 to 14 years is dying from suicide every four-and-a-half weeks in Queensland, double the number recorded last year.

Preliminary data from the Queensland Family and Child Commission shows 11 kids – aged 10 to 14 – died from suicide in the 2022-23 financial year compared to five in 2021-22 and six in both 2020-21 and 2019-20.

The worrying upward trend has the state's most powerful child safety advocate concerned about the high rates of anxiety and depression among kids.

It comes after the Queensland Family and Child Commission 2022-23 annual report preliminary data showed 446 children died in the past year, the highest since 2013-14.

In 2022-23, 20 died by suicide.

Queensland Family and Child Commission chief executive Luke Twyford said the fact suicide was the leading cause of death for those age groups was "incredibly concerning".

Mr Twyford said young people were struggling with their mental health.

Queensland Family and Children Commission chair Luke Twyford

"Queensland adolescents do have high rates of anxiety and depression and within those numbers, there is youth suicide," he said.

"That's one where I am going to go on the public record and say, suicide being the leading cause of death in adolescents in Queensland is a real concern."

Mr Twyford said suicide at any age was concerning, but was particularly worrying in this age group.

"Studies have highlighted a relationship between adverse childhood experiences and suicidal behaviour," he said.

"Adverse childhood experiences include childhood abuse, neglect and household dysfunction, which can include substance abuse, parent mental illness, exposure to domestic violence and parent criminal behaviour.

"This highlights the importance and need for intervention and prevention strategies tailored to the life experiences of children and young people."

Quality Life Psychology Services Dr Beris Ludwig of the Australian Association of Psychologists (AAPi) said she had been seeing more children presenting with anxiety at a younger age.

"I've seen an exponential increase in referrals and self-referrals for children, and there is a shortage of psychologists available to work with children," Dr Ludwig said.

Dr Beris Ludwig from Quality Life Psychology Services in Toowoomba

The Courier-Mail requested current wait times for public child psychologist appointments.

But Queensland Health said they could not specify them because wait times varied based on where patients presented and how they were triaged.

"Clinical decisions about the most appropriate treatment for children experiencing mental health issues are made on a case-by-case basis, considering factors such as the nature of the issue, its acuity, severity and complexity, extent of functional impairment, level of distress and availability of other more appropriate community services," a spokesman said.

Royal Australian College of General Practitioners Queensland Chair Dr Bruce Willett said many doctors had given up referring young patients to the public system due to long waits, despite the costs for private.

"I don't think there's any GP or many GPs around who even try to get their patients psychologist appointments in the public system, we try to do it through the private system," Dr Willett said.

"Essentially the public services are really for hyper acute and crisis situations so they will see patients generally between one and three times, and they will discharge them to see a GP and our job is to see a private psychologist for them. The problem is that not all patients can afford (private psychologists)."

Dr Willett said the government-funded Primary Health Network was an alternative way patients could access free psychologist appointments.

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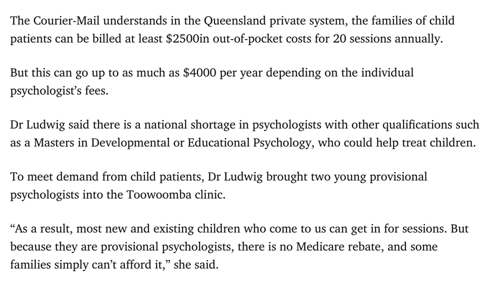


Dr Bruce Willett

The Medicare rebate covers 10 psychologist sessions per year. However, doctors believe severe patients contemplating suicide would likely require 20 or more sessions per year.

The Courier-Mail understands in the Queensland private system, the families of child patients can be billed at least $2500in out-of-pocket costs for 20 sessions annually.

But this can go up to as much as $4000 per year depending on the individual psychologist's fees.

Dr Ludwig said there is a national shortage in psychologists with other qualifications such as a Masters in Developmental or Educational Psychology, who could help treat children.

To meet demand from child patients, Dr Ludwig brought two young provisional psychologists into the Toowoomba clinic.

"As a result, most new and existing children who come to us can get in for sessions. But because they are provisional psychologists, there is no Medicare rebate, and some families simply can't afford it," she said.

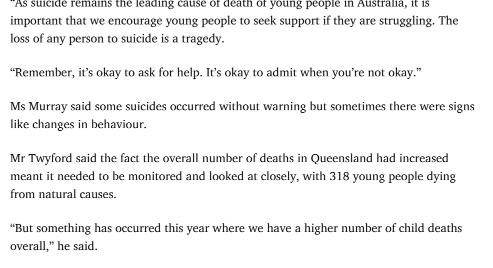
"I'm seeing more children coming to us from broken homes and/or homes with violence, often both.

"I've seen a lot of children whose parents are separated and they have to go visit the other parent because that is what the courts ordered. But that is often very stressful for these kids.

"I've got a few kids in that situation and they actually dread those weekends."

Suicide Prevention Australia chief executive Nieves Murray said Australian governments needed to prioritise investment in youth-specific early intervention strategies.

"Early intervention and prevention supports for young people are needed to capture at-risk young people before they reach crisis point," she said.



Health Minister Shannon Fentiman

"As suicide remains the leading cause of death of young people in Australia, it is important that we encourage young people to seek support if they are struggling. The loss of any person to suicide is a tragedy.

"Remember, it's okay to ask for help. It's okay to admit when you're not okay."

Ms Murray said some suicides occurred without warning but sometimes there were signs like changes in behaviour.

Mr Twyford said the fact the overall number of deaths in Queensland had increased meant it needed to be monitored and looked at closely, with 318 young people dying from natural causes.

"But something has occurred this year where we have a higher number of child deaths overall," he said.

"And I think we actually need to further explore that and monitor that trend."

"If this is a natural up and down that's occurring that's one thing but if it's a trend increase that were to continue for another year – I think we need to apply more research to try and understand what might be occurring.

"Particularly in the health sector, if we're identifying that these are natural cause deaths. It speaks to medical conditions."

Queensland Health said it had invested significantly in suicide prevention, with $1.6 billion in extra funding over five years for mental health, alcohol and drug services.

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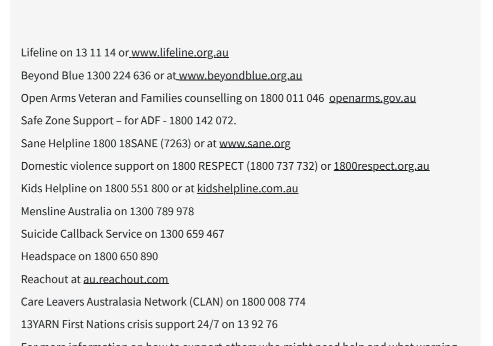

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