

New Zealand's suicide toll highlights social crisis

By Jeremy Lin
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New Zealand's chief coroner's office recently released provisional statistics showing a record number of suicides for the second year in a row. During the 2016 financial year, 579 people took their own lives, up from 564 last year.

By comparison, around 300 people die in road accidents each year. While the age-standardised suicide rate of 12.33 per 100,000 population is around the average for OECD (industrialised) countries, the youth suicide rate consistently has been one of the highest in the OECD. Men aged 25-29 are the worst affected, with a rate of 31.8 suicides per 100,000.

This data points to the devastating effects of decades of deteriorating social conditions, intensified by the National Party government's austerity measures, including the destruction of better-paying jobs, cuts to welfare and a huge increase in the cost of living, especially housing. It is well-established that poverty and unemployment are major causes of suicide, depression and other forms of mental illness.

The highest rate of suicides this year was on the West Coast of the South Island, where 10 people took their lives. The region has been devastated by thousands of job losses, such as the closure of coal mines by state-owned company Solid Energy.

Compounding the crisis, the government has severely underfunded mental health services, along with the health system as a whole. The Council of Trade Unions estimates a funding shortfall in core health expenditure of at least \$1.2 billion compared to 2009–10 levels. Infometrics data puts the figure at \$1.7 billion.

Thousands of overworked doctors and other health care workers have recently taken strike action against understaffing. Ambulance workers also voted in favour of nationwide industrial action, but this was cancelled by four trade unions on November 8.

Numerous reports show the inability of mental health services to cope with demand. Workers in the sector have described a deepening crisis. The Ministry of Health itself expects a doubling of demand for mental health and addiction services by 2020 over 2010 levels, yet in the eight years between 2008 and 2016 the mental health sector's funding increased by less than 30 percent. The ministry's projection reveals the government's acceptance of the rising social misery caused by its attacks on living standards.

Auckland psychotherapist Kyle MacDonald last month told TV3's "The Nation" the mental health system was "falling apart." He continued: "I think things are at a very dangerous point and we're starting to see the effects of that, in terms of people not being able to access care, and lots of concerned people saying people at risk are now being left in the community, with the consequences that that causes."

One gauge of the crisis is the growing number of calls to Youthline, a telephone counselling service for young people, staffed largely by volunteers. The number of calls for extreme depression more than doubled between 2014 and 2015. Youthline chief executive Stephen Bell says based on current data the number of suicidal callers in 2016 will be around 50 percent higher than in 2015. However, he told Radio NZ in September: "Our capacity is so full we can't actually take more calls ... the number of people who can't get our service has increased." Bell pointed out that thousands of young people cannot find work.

Lifeline Aotearoa, a similar service, also reported a 40 percent increase in calls this year. Its government funding is being cut at the end of the year, meaning it may be forced to close.

The Canterbury region has seen a particularly startling rise in mental health problems in the five years

since the 2011 Christchurch earthquake. Demand for child and youth mental health services increased 68 percent between 2011 and 2015. According to a November 7 Fairfax report: “Christchurch Primary Schools Principals Association president Jeanette Shearer said anxiety, suicidal language and evidence of self-harm was growing among children.” Yet about 92 percent of children who see a doctor for mental health issues are forced to wait more than two months for a second appointment.

In March the government announced a \$20 million three-year mental health package for the region, but this year’s budget gave the Canterbury District Health Board (DHB) the lowest funding increase of the country’s five biggest DHBs. The \$20 million over three years barely brings the region’s funding into line with other cities, and the DHB has a \$35 million debt.

Underfunding has meant reduced capacity in acute mental health units nationwide. In the Wellington region, understaffing has led to 60 instances during the past financial year where employees of the Capital & Coast District Health Board have worked more than 60 hours a week, according to Fairfax Media.

Since September, eight beds have been temporarily closed at the He Puna Waiora unit in Auckland where the staffing shortage has become so bad workers fear for their lives. Brendon Lane of the Public Service Association (PSA) union told the *New Zealand Herald* on September 22 that the situation was symptomatic of staff shortages across the region. He called on the government “to properly fund mental health services in Auckland.”

The PSA’s meek appeal to the government, which has starved healthcare of funds for eight years, will achieve nothing. The PSA, the largest union in the country, has suppressed resistance to the elimination of over 5,000 public sector jobs since 2008. It collaborated with the government to prevent a united struggle by workers against the cuts.

The opposition Labour Party has called for more funding to cover up its own record of undermining the public health sector over the past 30 years. During the 1980s, David Lange’s Labour government launched a series of privatisations and other attacks on essential services, which continued under the National Party in the 1990s. This right-wing offensive led to mass unemployment and soaring social inequality, as well as

suicide levels not seen since the Great Depression of the 1930s. The 1999–2008 Labour government did not reverse these attacks; it presided over huge waiting lists for surgery in public hospitals and a vast expansion in private hospitals.

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