

2014 Annual Report of the National Self-Harm Registry Ireland

On Friday 16th October 2015, the thirteenth annual report from the National Self-Harm Registry Ireland will be published in conjunction with the 2014 Annual Report of the National Office for Suicide Prevention.

The Registry is a monitoring system of hospital-treated self-harm, and collects data on persons presenting to hospital emergency departments as a result of self-harm in Ireland.

The Registry provides a unique opportunity to monitor the incidence and repetition of self-harm presentations to hospital emergency departments in Ireland with the aim of identifying high-risk groups and areas, and informing services and practitioners concerned with the prevention of suicidal behaviour. The Registry is funded by the National Office for Suicide Prevention.

Key outcomes	Key recommendations
<ul style="list-style-type: none"> In 2014, the Registry recorded 11,126 presentations to hospital due to self-harm nationally. The rate of individuals presenting to hospital following deliberate self-harm was 200 per 100,000 - essentially unchanged from that in 2013. This follows three successive decreases between 2011 and 2013. However despite this, the rate in 2014 was still 6% higher than in 2007, the year before the economic recession. 	<ul style="list-style-type: none"> Considering that the rate of self-harm in 2013 was still 6% higher than in 2007, before the economic recession, this underlines the need for continued implementation of programmes to increase awareness of mental health issues among the general public and professionals involved in supporting people who are unemployed and those experiencing financial difficulties.
<ul style="list-style-type: none"> There has been a changing pattern in the aftercare of self-harm over the ten-year period, 2004-2014. Since 2004, the proportion of patients admitted to a general ward following a self-harm presentation has declined by 45% (48% for men, 42% for women). There has been no improvement in the proportion of patients leaving the ED without being seen or without a recommendation (range 12-15%). 	<ul style="list-style-type: none"> It is recommended that national guidelines for the assessment and management of self-harm patients in the ED be implemented nationally as a matter of priority.
<ul style="list-style-type: none"> Within the calendar year 2014, at least five self-harm presentations were made by 138 individuals, accounting for just 2% of all self-harm patients in the year but 10% of all self-harm presentations recorded. 	<ul style="list-style-type: none"> There is need for continued efforts to prioritise national implementation of evidence-based treatments shown to reduce risk of repetition, such as cognitive behavioural and dialectical behavioural therapy; Currently, national implementation of dialectical behaviour therapy for people diagnosed borderline personality disorder is funded by the National Office for Suicide Prevention.
<ul style="list-style-type: none"> Alcohol was involved in 35% of all self-harm presentations made in 2014. In line with previous years, misuse or abuse of alcohol is one of the factors associated with the higher rate of self-harm presentations on Sundays, Mondays and public holidays, around the hours of midnight. 	<ul style="list-style-type: none"> National strategies to increase awareness of the risks involved in the use and misuse of alcohol, starting at pre-adolescent age, should be intensified Consultation and collaboration between the mental health services and addiction treatment services should be improved for people who present with dual diagnosis, such as a psychiatric disorder and alcohol/drug abuse

QUOTES TO BE UPDATED

According to Professor Ivan Perry, Director of the National Registry of Deliberate Self-Harm and Head of the Department of Epidemiology and Public Health, UCC, “The National Registry of Deliberate Self Harm has provided important and practically useful information on the occurrence of self-harm in the community for over a decade. Self-harm is an important barometer of the mental wellbeing of a community. The rates of self-harm vary markedly and consistently in different parts of the country and are highly correlated with deprivation and social exclusion. We need to continue to ask what we can do to tackle the root causes of these inequalities, most of which originate in early childhood”.

Professor Ella Arensman, Director of Research, National Suicide Research Foundation, Adjunct Professor, Department of Epidemiology and Public Health, UCC, and President of the International Association for Suicide Prevention, states that: “The Registry has made a significant contribution to service planning. For example, information on geographic variation of self-harm and extent of repeated self-harm has been used to inform the national implementation of Dialectical Behaviour Therapy. The Registry has also contributed to restricting access to highly lethal methods of self-harm and enhanced monitoring of medication prescribing patterns. In recent months, the Registry outcomes have informed priorities for the new National Strategic Framework for Suicide Prevention in Ireland, 2015-2019, which will be completed by the end of the year”.

Dr Eve Griffin, Post-doctoral Researcher and Manager of the Registry states that: “The registry findings continue to highlight patterns and methods of self-harm in Ireland, as well as identifying particular groups at risk of repeated self-harm and future suicide. Therefore, uniform assessment and management, as well as tailored treatment of self-harm patients, in the emergency department should be prioritised – with a view to ensuring that all patients who present with self-harm receive a psychosocial assessment from a trained health professional”.

Note: Journalists reporting on this event are advised to include information on relevant help lines and websites: Samaritans: 116 123; Childline: 1800 66 66 66; www.aware.ie; www.letsomeoneknow.ie; www.ie.reachout.com

For further information, please contact Professor Ivan Perry, Professor Ella Arensman or Dr Eve Griffin

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National Suicide Research Foundation

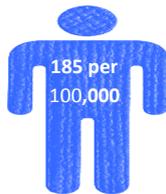
National Self-Harm Registry Ireland

The **Registry** aims to: Establish the extent and nature of hospital-treated self-harm in Ireland; Monitor trends over time and also by area; contribute to policy and development in the area of suicidal behaviour and help the progress of research and prevention. Since 2002 the Registry has been collecting data on self-harm presentation to Irish EDs with complete coverage of all hospitals as of 2006

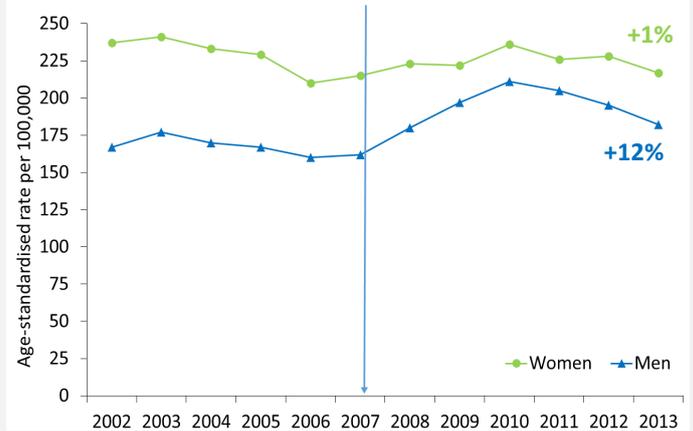


In 2013, **11,126** presentations were made by **8,708** people

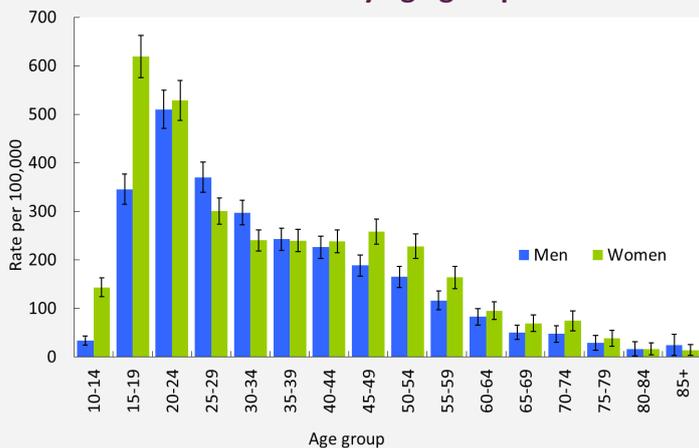
The rate in 2013 was still **6%** higher than in 2007 at **200** per 100,000



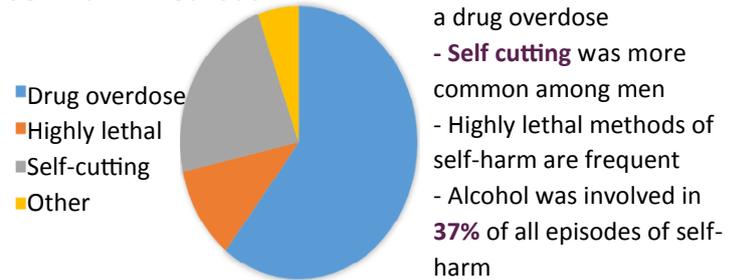
Trends in the rate of self-harm



Self-harm by age group



Self-harm methods



Contributions

Outcomes of the Registry informed strategic goals and priorities for the new National Strategy to Reduce Suicide in Ireland, *Connecting for Life*, 2015-2020, and Registry data will form a key component of the Strategy's Outcomes Framework to monitor progress and to examine the impact of implemented actions.

The findings from the Registry have provided an informed basis for a successful five-year programme, funded by the Health Research Board, Individual and area level determinants of self-harm and suicide in Ireland: Enhancing prediction, risk assessment and management of self-harm by health services.

The Registry has contributed to the placement of self-harm specialist nurses in hospital EDs and to the implementation of Dialectical Behavioural Therapy at a national level (2013-2015)



National guidelines for the assessment and management of patients presenting to Irish EDs should be implemented as a matter of priority

Note: Journalists reporting on the launch/reports are advised to include information on relevant help lines and websites along with any coverage:

Samaritans: 116 123

www.aware.ie; Lo-call helpline: 1890 303 302

Childline: 1800 66 66 66

www.letsomeoneknow.ie

www.ie.reachout.com

