



Australian Self-harm Statistics – Key Findings

*Much of the current Australian information on self-harm levels and patterns pertains to data from the late 1990s. However, new data are now available. In March 2006, the Australian Institute of Health and Welfare (AIHW) released data on **hospitalised self-harm** in Australia for the **2001-02** financial year.¹ Auseinet has produced this summary in order to highlight some of the key findings from this publication, as well as to examine changes over time.²*

What is ‘hospitalised self-harm’?

Self-harm refers to self-inflicted harm where the intention may or may not have been to die. Thus instances of attempted suicide and self-mutilation are both included. Not only is self-harm a significant problem in its own right, research has shown that people who have previously attempted suicide are at higher risk of committing suicide.

The statistics released by the AIHW relate to cases of self-harm that led to hospitalisation in Australia during a particular financial year. These data represent the number of *cases*, not the number of *people*, who were hospitalised due to self-harm, since one person may have been hospitalised more than once during the time period.

Of course, many cases of self-harm are not captured in the hospitalised self-harm statistics as those people who were treated in an Emergency Department or by a general practitioner are not counted; likewise, those who do not receive any medical treatment are not included. Nonetheless, the information on hospitalised self-harm is useful for a number of reasons. First, while it is very difficult to measure the severity of self-harm cases, one would infer that the majority of severe cases (other than those who die before hospitalisation) would be admitted to a hospital. Second, these data allow us to look at patterns (by gender, age, etc.) and trends in self-harm, based on the data provided through hospital records.

Cautions in interpreting hospitalised self-harm statistics

The number of hospitalised self-harm cases recorded in any one year is affected by a range of factors including admission and treatment practices across Australia’s health system and the categories used to classify reasons for hospitalisation. Further, determining whether or not some forms of injury were due to intentional self-harm can be very difficult (e.g., transport accidents or near drownings). Thus care must be taken when making use of these data.

Number of cases:

- In 2001-02, there were 22,530 cases of hospitalised self-harm. This equates to 116.0 cases per 100,000 people in Australia. The number of hospitalised self-harm cases in 2001-02 is fairly similar to the number of 21,019 cases recorded in 1999-2000.
- If we consider all hospital admissions due to injury and poisoning in 2001-02, 6.8% of them were due to self-harm. Slightly fewer – 6.1% – were due to self-harm in 1999-2000.
- There were no significant differences in the rates of hospitalised self-harm across the states and territories in 2001-02, nor were there differences according to the remoteness of the person's usual residence.

Differences by gender:

- Data for the late 1990s consistently showed that more females than males were admitted to hospital due to self-harm. This is again observed for 2001-02 as females accounted for 60% of hospitalised self-harm cases in that year (i.e., 13,618 female and 8,911 male cases).
- The total number of patient days in hospital due to self-harm was 59,414 days in 2001-02. On average, each case of self-harm resulted in 2.6 days in hospital. The average length of stay was somewhat higher for males (2.9 days) than females (2.4 days).

Differences by age:

- As was the case in the late 1990s, the number of hospitalised self-harm cases peaked for females at the age of 15 to 19 years (2,091 cases) in 2001-02. In total, 15 to 19 year old females accounted for 15% of all female hospitalised self-harm cases. Meanwhile, women aged 20 to 45 years made up a further 62% of female hospitalised self-harm cases.
- For males in 2001-02, hospitalised self-harm was most likely to peak later than for the females, with 31% of males who were hospitalised due to self-harm aged 25 to 34 years. Of males hospitalised for self-harm, 8% were aged 15 to 19 years.
- For both males and females in 2001-02, the rate of hospitalised self-harm was lower for those aged 60 years and older than it was for young adults and middle-aged persons.
- The average length of stay in hospital due to self-harm was highest among older age groups. In 2001-02, the average length of stay in hospital due to self-harm rose to 6 days for those aged 65 to 79 years and peaked at 10 days for those 85 years and over.

Method of self-harm:

- Consistently over a five-year period, most cases of hospitalised self-harm involved self-poisoning. In 2001-02, 85% of hospitalised self-harm was due to self-poisoning.
- As shown in Table 1, females were more likely than males to have been hospitalised due to self-poisoning in 2001-02. This same pattern was observed in the late 1990s.

Method	Males (%)	Females (%)	Total (%)
Self-poisoning	77.9	89.8	85.1
Sharp object	14.9	7.8	10.6
Hanging, strangulation, suffocation	3.0	0.8	1.7
Other methods	4.2	1.6	2.6
Total	100	100	100

*Relates to self-harm cases that led to hospitalisation in 2001-02.

- The second most common method of self-harm that led to hospitalisation in 2001-02 was self-harm with a sharp object, with this method having been used in 11% of cases. More males than females used this method, with 15% of male cases and 8% of female cases of hospitalised self-harm involving the use of a sharp object.

¹ A copy of the 2006 AIHW publication by Jesia Berry and James Harrison entitled 'Hospital separations due to injury and poisoning, Australia 2001-02' by can be downloaded free of charge from the AIHW website: <http://www.aihw.gov.au/publications/index.cfm/title/10264>.

² Some information on hospitalised self-harm is also available for 1997-98, 1998-99 and 1999-2000. However, a change in the way that cases were classified means that the number of hospitalised self-harm cases in 2001-02 can only be compared with the 1999-2000 data. The sources of information for the earlier data are: Cripps, R., Steenkamp, M. and Harrison, J. (2002), *Hospital separations due to injury and poisoning, Australia 1998-99*, AIHW, Canberra; Helps, Y., Cripps, R. and Harrison, J. (2002), *Hospital separations due to injury and poisoning, Australia 1999-00*, AIHW, Canberra; and Steenkamp, M. and Harrison, J. (2000), *Suicide and hospitalised self-harm in Australia*, AIHW, Canberra.

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More information about sources of statistical data on suicide and self-harm in Australia can be found on the LIFE: National Suicide Prevention website (developed and maintained by Auseinet) at: www.livingisforeveryone.com.au/statistics.php