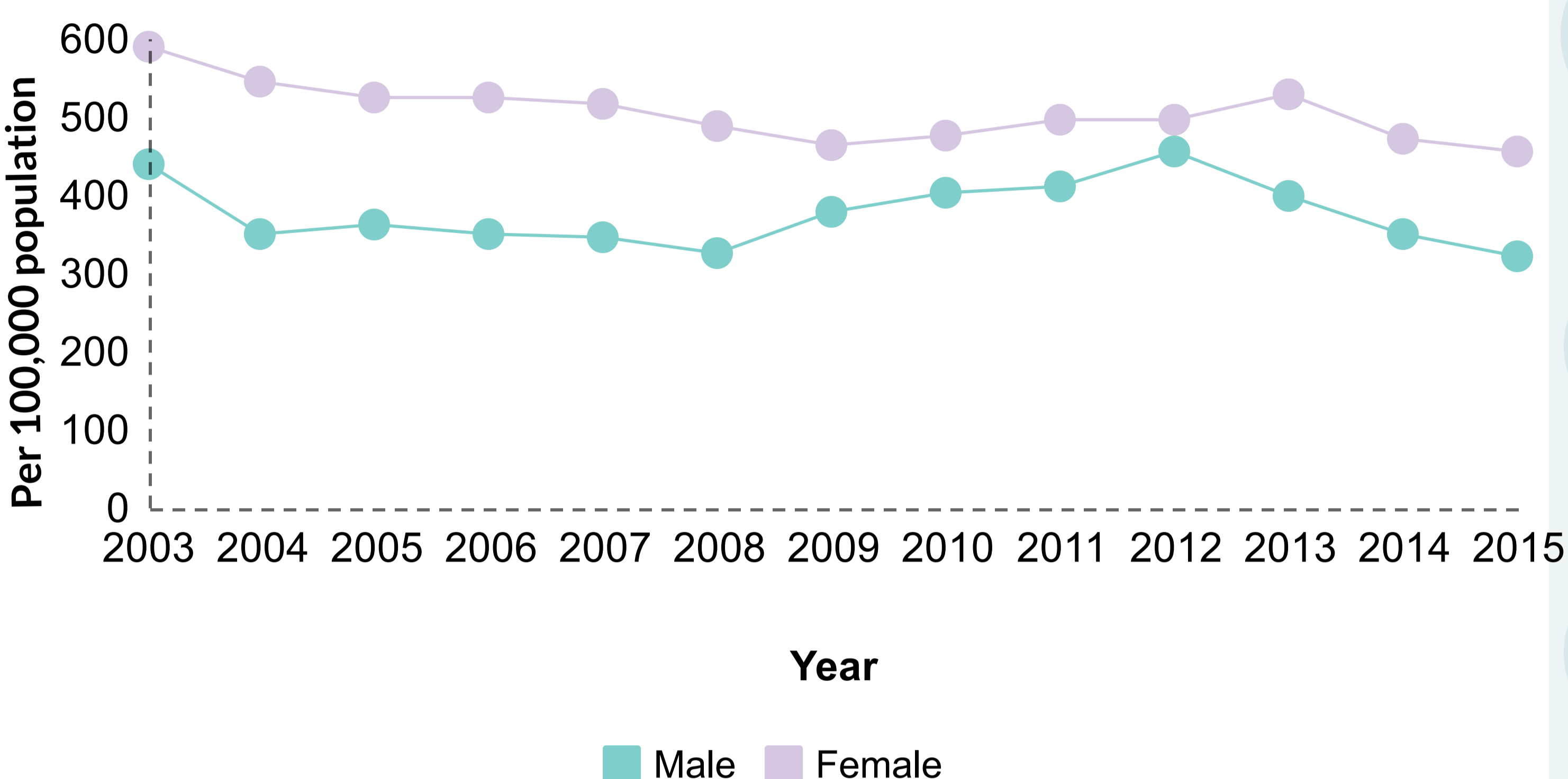


The Manchester Self-Harm Project

Key figures from 2015

Rates of self-harm

Rates of self-harm by gender, 2003 to 2015

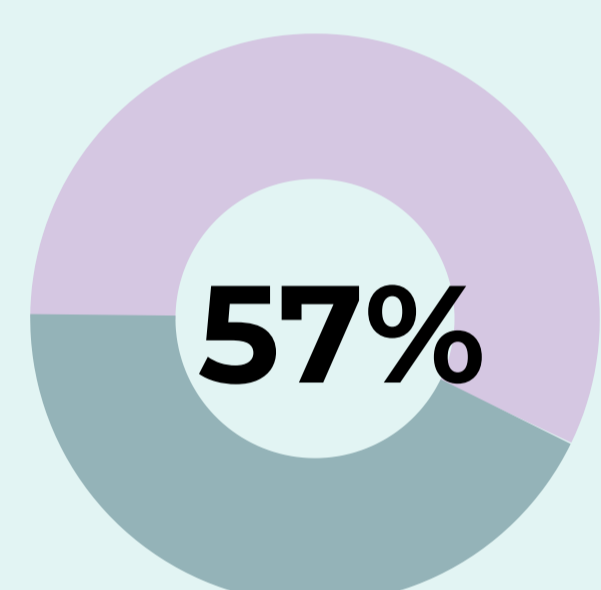


There has been a decrease in overall rates of self-harm

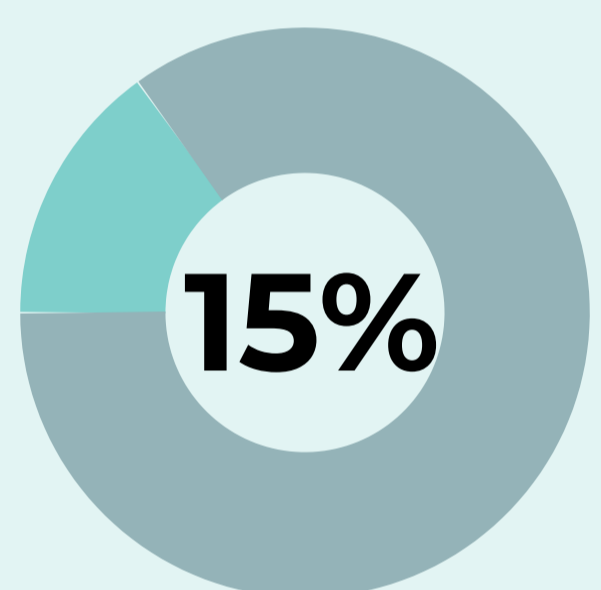
Males aged 35-54 had the highest rates among men in 2015

Females aged 15-24 continue to have the highest rates of self-harm

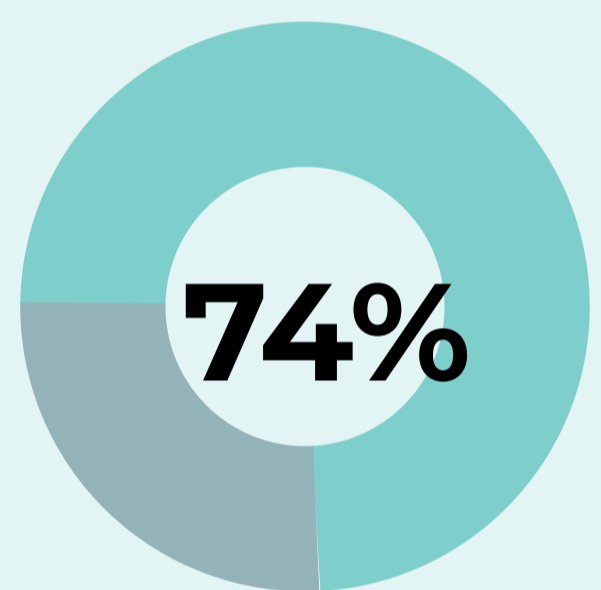
Characteristics of individuals who self-harm



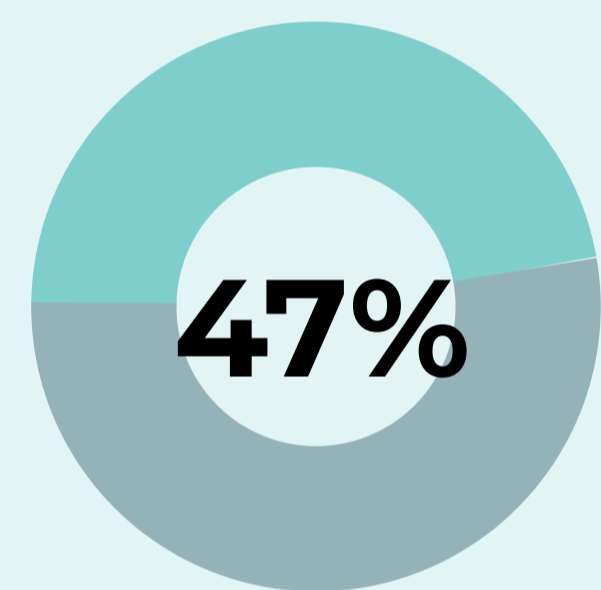
female



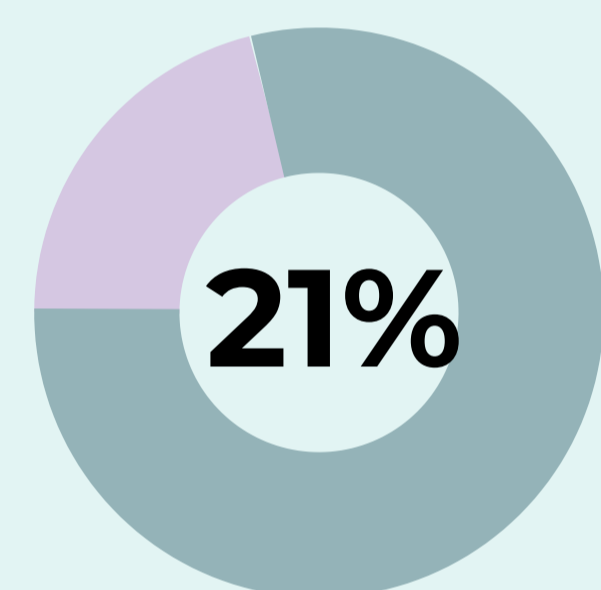
lives alone



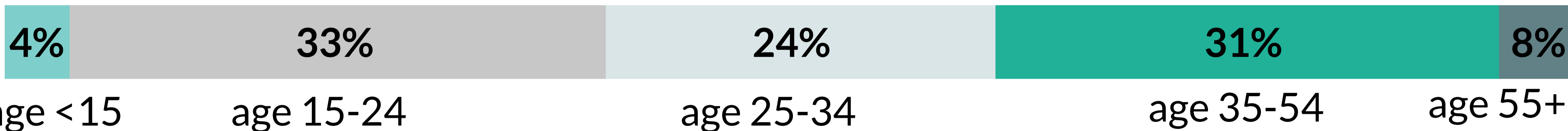
history of self-harm



unemployed



student



Mental health

Most common psychiatric diagnoses:

Depression

27%

Alcohol &/or drug misuse

40%

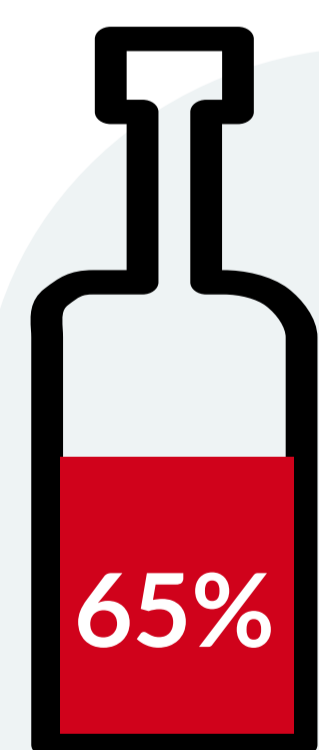
Stress & anxiety

9%

Personality disorder

9%

Drug and alcohol misuse



consumed alcohol at the time of self-harm



secondary diagnosis of drug/alcohol misuse



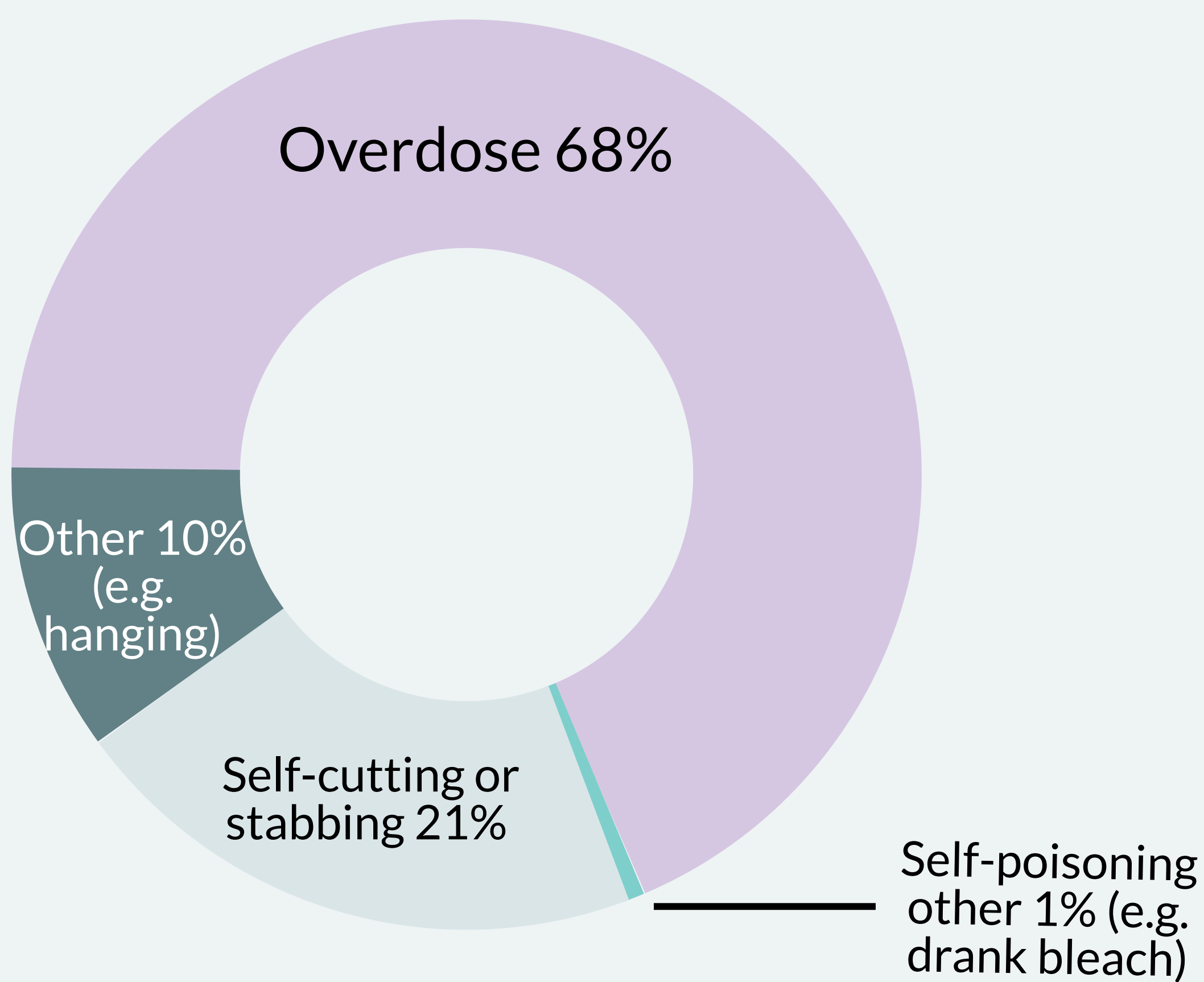
Harmful alcohol use is most common among males aged 35-54 & females aged 55+



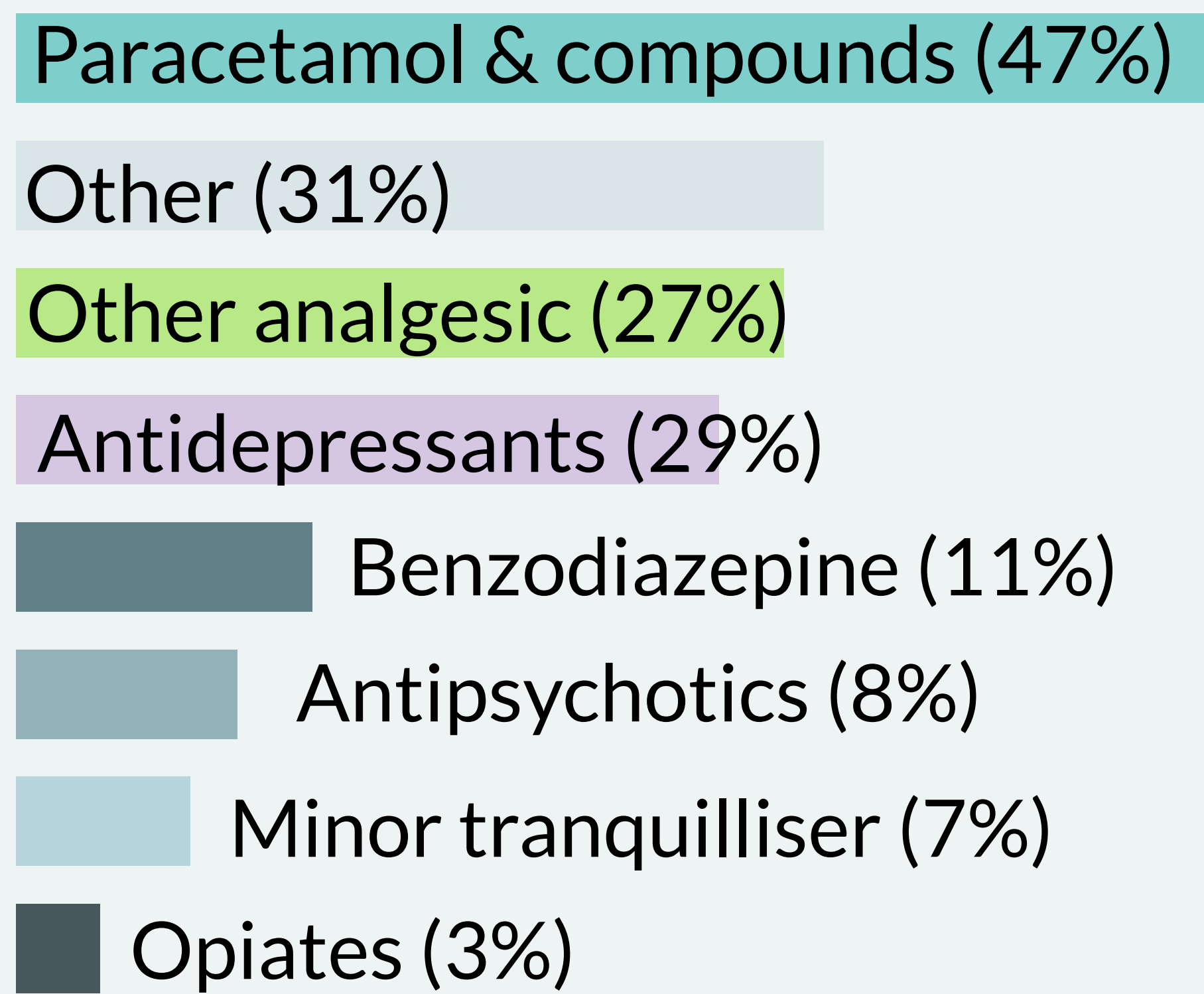
Substance misuse is most common in males aged 15-24

Characteristics of self-harm episodes

Primary methods of self-harm

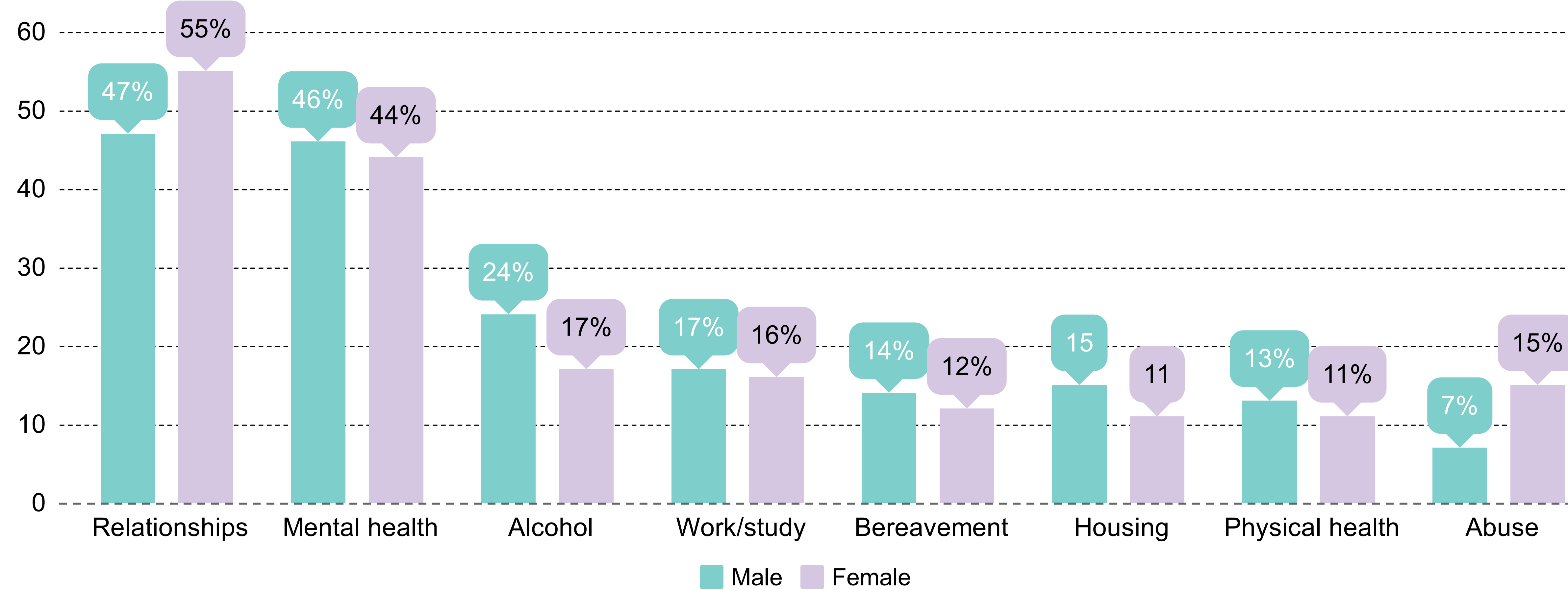


Most common overdose drugs



Most common precipitants of self-harm

Problems reported by individuals



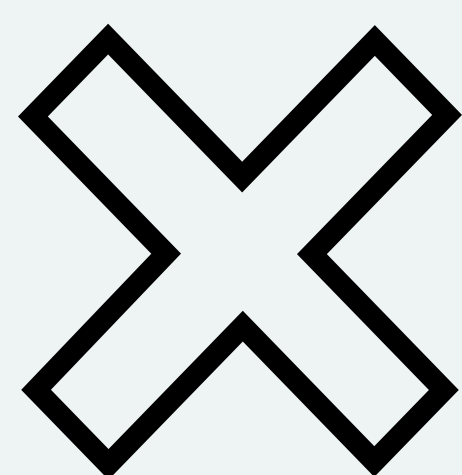
Emergency Department Management

44%



General hospital admission

28%

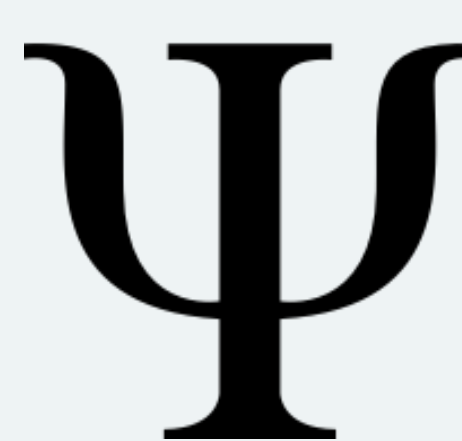


No referral

45%

Of those receiving a specialist psychosocial assessment from mental health staff:

were referred on to psychiatric aftercare



Only 48%

received a psychosocial assessment, despite NICE guidelines recommending all ED self-harm patients should receive one