

Self-harm in Torbay (2024)

Self-harm refers to an intentional act of self-poisoning or self-injury, irrespective of the motivation or apparent purpose of the act, and is an expression of emotional distress. ([NICE](#))

Why is this important?



Rates of self-harm related admissions in Torbay have been consistently higher compared to England.

What is the local context?



Rates of self-harm are highest amongst women aged 10 to 24.

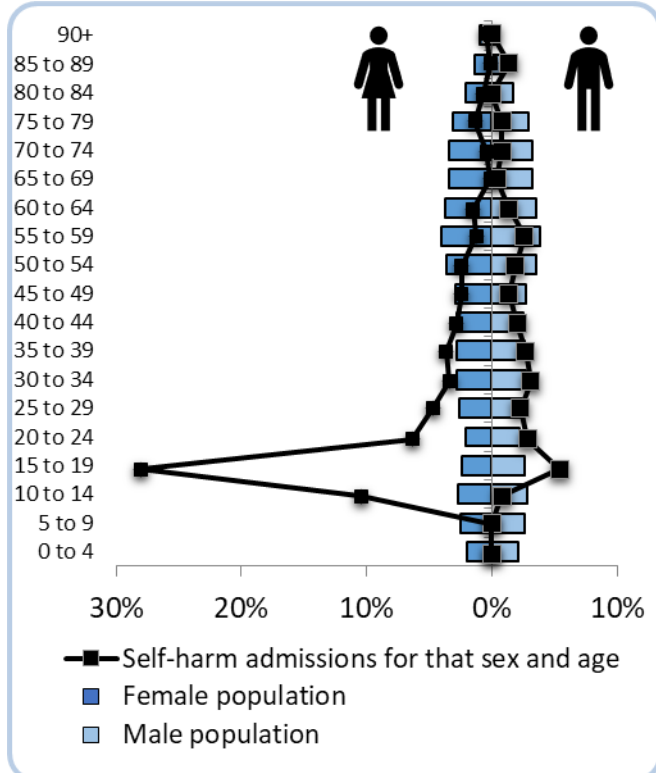
What should we do?



Continue to work to reduce stigma of mental health, increase awareness of support services and reduce social isolation and deprivation.

In Torbay during 2021/22-2023/24, 70% of emergency hospital admissions for self-harm were for females and 30% were for males (Fig 1). The sharp point shows higher percentages of admissions for 15 to 19 years old females (28%) with 10% for 10 to 14 years old females).

Fig 1: Torbay emergency hospital admissions for self-harm showing % of admissions split by sex and age



Figs 2a and 2b show the recent trends in Torbay's women's and men's emergency hospital admissions for self-harm alongside the South West and England.

Torbay women's age standardised rate (DSR) is significantly higher than England's. Torbay men's rate is lower than for women. It is significantly higher than England except in 2022/23.

Fig 2a: Rate of women's emergency hospital admission episodes for self-harm, per 100,000 (Age Standardised)

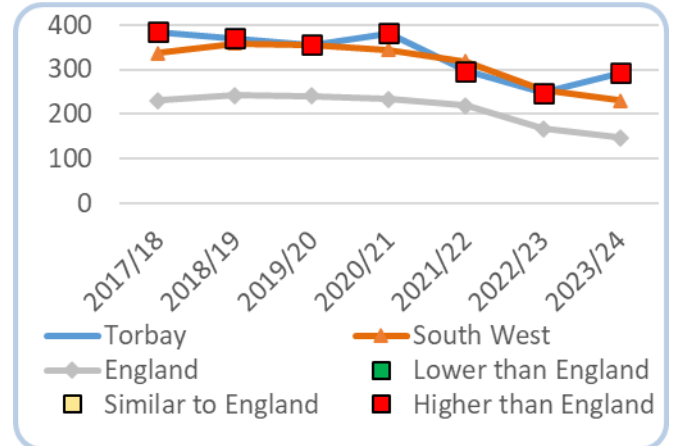
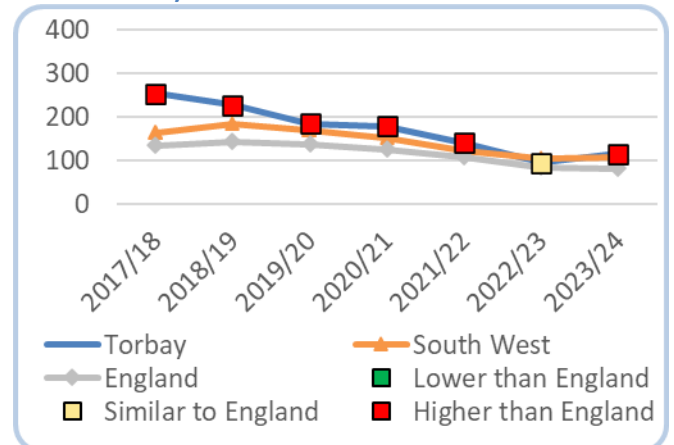


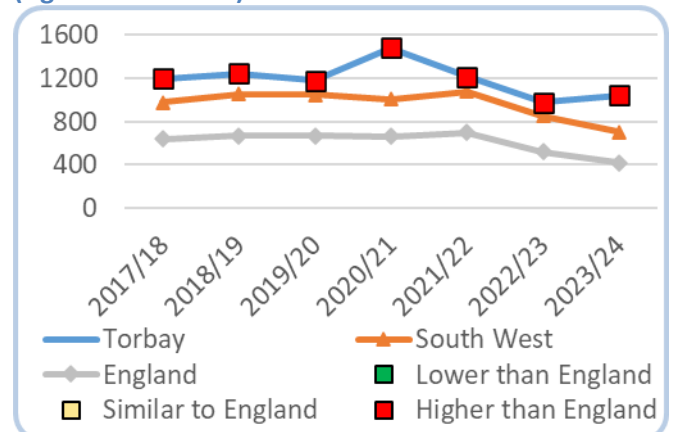
Fig 2b: Rate of men's emergency hospital admission episodes for self-harm, per 100,000 (Age Standardised)



After falling between 2017 and 2021, Torbay's emergency hospital admissions for self-harm episodes during 2022 and 2023 have been about 40 per month, half of those being aged 10-24 years.

Fig 3 shows the recent trend in the age standardised rate for females aged 10 to 24 years.

Fig 3: Rate of emergency hospital admission episodes for self-harm for females aged 10-24 yrs, per 100,000 (Age Standardised)



For males aged 10 to 24 years, Torbay’s rate was similar to England for 3 of the 7 years.

When looking at the primary diagnosis of Torbay residents’ emergency admissions, about 84% are for poisoning excluding alcohol, and about 10% for sharp/blunt objects (very similar to the South West and England, and staying similar for non-overnight stay admissions). When considering all diagnoses, alcohol poisoning increases from 2% up to 22% and sharp/blunt objects up to 18% (2019/20-2021/22).

In Torbay, the proportion of non-overnight stay admissions and longer admissions are very similar (40%), but for 0-16yrs patients, the proportion of non-overnight stay admissions is higher (48%). For Figs 2a to 3, some recent South West and England decrease may be due to [recording non-overnight-stays](#) within emergency care rather than within admitted care.

In the last 3 year period, several Torbay residents each had about 10 emergency admissions for self-harm (8% of the 738 total admissions). Single admissions accounted for 55% of admissions. The average number of admissions per patient was 1.44.

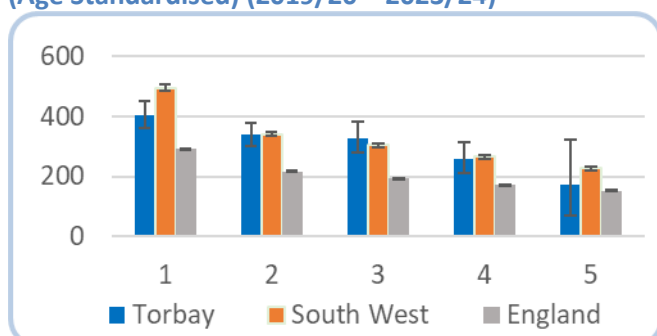
Calculating self-harm admission DSRs for patients rather than admission episodes, the trends are still very similar to Figs 2a, 2b and 3, but without the 2023/24 upturn for females ages 10-24yrs.

Across England, white people tend to have higher rates than black, mixed or Asian ethnicities. This is broadly reflected in Torbay.

A Chief Medical Officer’s report on [Health in Coastal Communities](#) 2021 notes that Torbay has many adverse population health outcomes which may contribute to self-harm prevalence and self-harm admission rates: higher levels of [alcohol misuse](#); higher [suicide rates](#); higher [prevalence of depression](#); higher rates of [children in care](#), and over one-quarter of its neighbourhoods within the 20% most deprived areas in England, with high levels of inequality.

The directly age standardised rates (DSRs) across area deprivation quintiles are shown in Figs 4a and 4b.

Fig 4a: Rate of women’s emergency hospital admission episodes for self-harm by area deprivation quintile (IMD 2019, 1=Most deprived), per 100,000 (Age Standardised) (2019/20 – 2023/24)

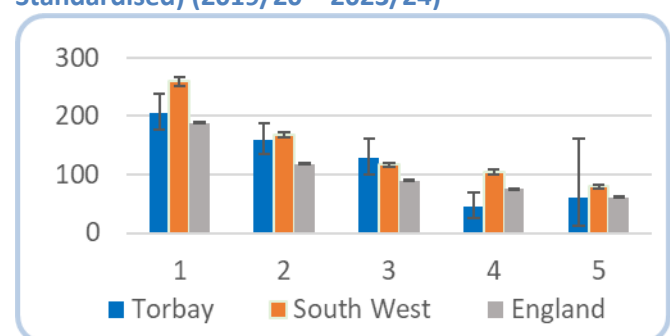


For both men and women, the rates are higher in the more deprived areas. Risk factors include multiple stressful events and can include debt, job insecurity or loss, chronic precarity, poor mental wellbeing, depression, anxiety, physical illness, bereavement (especially by suicide), divorce, isolation, non-heterosexual identity, difficult communication with parent(s), police contact, low life satisfaction, or being subject to abuse. ([NICE](#), [NatCen](#), [PHE](#))

For women (Fig 4a), Torbay’s rates are significantly higher than England’s for all but the least deprived 20%.

For Torbay men (Fig 4b), rates were higher in quintiles 2 and 3 but lower than England in quintile 4.

Fig 4b: Rate of men’s emergency hospital admission episodes for self-harm by area deprivation quintile (IMD 2019, 1=Most deprived), per 100,000 (Age Standardised) (2019/20 – 2023/24)



For men and women, these higher rates are seen in the DSRs for those aged 10-24 as well.

OHID [Fingertips](#) shows the highest rates in central Torquay and Paignton (2016/17-2020/21) .

Across Devon, about 5-6% of admissions feature a diagnosis of autism or Asperger syndrome, 10% for 10-24yrs males. This is higher than the prevalence in the population – 2% in men and 0.3% in women.

A 2023 [report by Make Space Collective CIC](#) explores experiences of support and care for people who self-harm in Torbay. Key findings included: that experiences of self-harm were extremely varied; self-harm meant many things to many people, and service users felt it important that self-harm was understood in the context of their lives. The report mentioned barriers to accessing support such as long waiting lists, policies of exclusion or being discharged to no support.

There are many [Cochrane Reviews on self-harm](#).

Torbay Council has a [Suicide Prevention](#) web page and plan.

Data Sources: Hospital Episode Statistics (HES), NHS Digital - all graphs. Index of Multiple Deprivation ([GOV.UK](#)) - graphs 4a and 4b. Office for National Statistics ([ONS](#)) population estimates – all graphs.