

Teenage girls more likely to self-harm than boys

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There has been a sharp rise in self-harm reported in general practices for

girls aged between 13-16 years from 2011 to 2014, compared with boys of the same age. In socially deprived areas, referrals to mental health specialist services were fewer, although self-harm rates were higher, finds a study published by *The BMJ* today.

Self-harm in [children](#) and adolescents is a major public [health](#) problem in many countries. It is the strongest risk factor for subsequent suicide, with suicide being the second most common cause of death before reaching the age of 25 worldwide.

Lead researcher, Dr Cathy Morgan at The University of Manchester, and the team set out to investigate trends in [self-harm](#) amongst children and teenagers in the UK, referral rates to specialist [mental health services](#), and mortality rates amongst children and teenagers following self-harm. Unlike most previous studies, the researchers examined self-harm recorded in general practice rather than hospital settings.

To estimate rates of self-harm, they analysed data for 16,912 patients aged between 10-19 years from 647 [general practices](#), who harmed themselves during 2001 to 2014. To assess mortality, they compared data from 8,638 of these patients with 170,274 unaffected children (matched by age, gender and general practice).

They found that the rate of self-harm recorded in general practice was higher in girls (37.4 per 10,000) compared with boys (12.3 per 10,000), and rose by 68% in girls aged 13 to 16, from 45.9 per 10,000 in 2011 to 77.0 per 10,000 in 2014.

Referrals to specialist mental health services within 12 months of self-harming were 23% less likely for young patients registered in practices in the most deprived areas even though the rates of self-harm were higher in these areas.

Children and teenagers who self-harmed were nine times more likely to die unnaturally than unaffected children, with an especially marked increased risk of suicide and acute alcohol/drug poisoning death. "This emphasises the opportunity for earlier intervention in primary care to reduce suicide risk" say the authors.

The researchers say that the high self-harm rate may be due to common [mental health problems](#) in females at this age, as well as biological factors such as puberty and onset of sexual activity.

There is some evidence indicating that common [mental health disorders](#) are becoming more common within this age group. "Perhaps a reflection that today's early adolescents are living in more stressful times", say the authors.

"Exposure to digital media and its potential impact on children and adolescents' mental health is the centre of continued media debate. Of course such technologies can be helpful and facilitate access to care but there is also a suggestion that extreme 'connectedness' could have detrimental effects", the authors continue.

However, the researchers outline some limitations in the study. Whilst they have used one of the largest primary healthcare datasets, like any routinely collected data there may be problems in identifying all cases, and a potential lack of detail, for example in recording method of self-harm.

Nevertheless, they conclude that "this marked apparent increase prompts the urgent need to identify the causes of this phenomenon." These risks "emphasise the urgent need for integrated care involving families, schools and healthcare provision to enhance safety among these distressed young people in the short term, and to help secure their future [mental health](#) and wellbeing."

More information: Incidence, clinical management, and mortality risk following self harm among children and adolescents: cohort study in primary care, *BMJ* (2017). www.bmj.com/content/357/bmj.j4351

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