



Research Snapshot

Factors related to non-suicidal self-injury among adolescents seeking mental health services

What is this research about?

Non-suicidal self-injury (NSSI) is a purposeful self-injury that results in tissue damage without suicidal intention. NSSI is a strong predictor of death from suicide and is of major concern in many Western countries. There is a lack of consensus among researchers about the prevalence of NSSI and the related factors among adolescents. Estimates of occurrences of NSSI in adolescents vary significantly, with estimates between 13% and 60%.

The objectives of this study were to examine the prevalence of NSSI among adolescents with mental health needs and identify specific factors associated with NSSI. The following four groups were hypothesized to be more likely to engage in NSSI: adolescents with mood or personality disorders, adolescents with a history of abuse, adolescents who engage in substance use and intentional misuse of prescription and medications, and adolescent girls. These groups are not mutually exclusive.

What did the researchers do?

Data were collected from 2,013 adolescents between 14 and 18 years of age who received mental health services between 2005 and 2010. The majority were 18 years old, just over half of were male (55.5%), and 118 (5.9%) identified as being of Aboriginal origin.



What you need to know:

This study examined the frequency of NSSI among adolescents with mental health needs and identified specific factors related to NSSI. Data on 2,013 adolescents were gathered from the Ontario Mental Health Reporting System using the Resident Assessment Instrument—Mental Health (RAI-MH). The researchers found increased NSSI in adolescents with mood or personality disorders, histories of abuse, substance use and intentional misuse of prescription medication, and higher rates of NSSI in females. The researchers highlighted the importance of novel findings in regards to intentional misuse of prescription medications in this population.

Data were obtained from the Ontario Mental Health Reporting System using the Resident Assessment Instrument—Mental Health (RAI-MH). It involves interviewing the patient, family, and friends, and using information from clinical chart notes and observation. Adolescents who engaged in self-injurious behavior within the last 12 months with no intention to die by suicide were classified as having engaged in NSSI. Age, gender, Aboriginal background, housing instability, number of psychiatric admissions, history of abuse, intentional misuse of

prescription medication, and past year use of substances were also examined in this study.

What did the researchers find?

The study found that one in five adolescents engaged in NSSI within the last year. Similar proportions have been reported in other studies both in Canada and elsewhere. For every one year increase in age, the odds of engaging in NSSI were predicted to decrease by 25%, holding all other variables in the model constant. Females were 2.19 times more likely to engage in NSSI than males. Adolescents with 3 or more psychiatric admissions within the last 2 years were 1.9 times more likely to have engaged in NSSI. Adolescents with 1 to 2 psychiatric admissions within the last 2 years were 1.35 times more likely to have engaged in NSSI compared to adolescents being admitted for the first time.

Adolescents who were sexually abused were 51% more likely to have engaged in NSSI compared to those with no abuse history. Intentional misuse of prescription medication was found to be the strongest factor to be related to NSSI. Odds were 2.36 times higher for adolescents who intentionally misused prescription medication to have engaged in NSSI compared to those who did not.

Adolescents were also more likely to have engaged in NSSI if they had a diagnosis of a mood disorder, adjustment disorder, or personality disorder. Compared to those with no symptoms of depression, those with moderate symptoms of depression were 50% more likely to have engaged in NSSI and those with more severe symptoms of depression were 42% more likely to have engaged in NSSI.

How can you use this research?

Results on the association between multiple psychiatric admissions and NSSI should caution clinicians about the risk of self-injurious behavior among those who have repeatedly accessed mental health services.

Interventions designed to address unresolved trauma while addressing self-defeating coping styles are needed to deal with issues of self-worth and identity that may prevent future self-damaging behaviors. Understanding factors related to NSSI will help health care providers identify adolescents that may need more observation or other protective actions to prevent NSSI and suicide. Clinicians treating adolescents at risk for NSSI and suicidal behaviours will benefit from gathering thorough assessments that include the patient's mental health symptoms, history of substance misuse, and trauma or abuse history. Physicians, clinicians, and care providers need to consider these factors in discharge preparation and future service delivery.

Original Research Article:

For a complete description of the research and findings, please see the full research article:

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About the Authors:

Shannon Stewart, Associate Professor, Faculty of Education, Western University. **Philip Baiden**, Doctoral Candidate, Faculty of Social Work, University of Toronto. **Laura Theall-Honey**, Research Coordinator, Child and Parent Resource Institute.

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About this Summary: This summary was written by Elizabeth Thornley, PhD Candidate at Western University. For further information about Western's Centre for School Mental Health, visit www.edu.uwo.ca/csmh.

