

# Self-Injury Hospitalization

Name	Self-Injury Hospitalization
Short/Other Names	Not applicable
Description	Age-standardized rate of hospitalization in a general hospital due to self-injury, per 100,000 population.  For further details, please see the <a href="#">General Methodology Notes</a> .  Lower rates are desirable.
Interpretation	Using the available data sources, capturing intention is difficult. This indicator cannot distinguish whether or not the self-injury was intended to result in death (self-harming or suicidal behaviour). In addition, this indicator might provide biased estimates of the true number of hospitalizations for self-injury, due to the manner in which intent is captured in the data sources available. For example, poisoning can be coded as "unintentional"—an overdose—or "undetermined"—reflecting an uncertainty between unintentional and intentional motives. Neither unintentional nor undetermined injuries were included in this indicator, even though it is assumed that a small number of these cases were, in fact, intentional.
HSP Framework Dimension	Health System Outcomes: Improve health status of Canadians
Areas of Need	Not applicable
Geographic Coverage	All provinces/territories
Reporting Level/Disaggregation	National, Province/Territory, Region, Neighbourhood Income Quintile
Indicator Results	<a href="#">Accessing Indicator Results on Your Health System: In Depth</a>

## Identifying Information

Name	Self-Injury Hospitalization
Short/Other Names	Not applicable
Indicator Description and Calculation	

Description	Age-standardized rate of hospitalization in a general hospital due to self-injury, per 100,000 population.  For further details, please see the <a href="#">General Methodology Notes</a> .
Calculation: Description	(Total number of discharges for a self-injury for patients age 15 and older ÷ Total mid-year population age 15 and older) × 100,000 (age-adjusted)
Calculation: Geographic Assignment	Place of residence
Calculation: Type of Measurement	Rate - per 100,000
Calculation: Adjustment Applied	Age-adjusted
Calculation: Method of Adjustment	Direct Standardization <b>Standard Population:</b> Canada 2011
Denominator	<b>Description:</b> Total mid-year population age 15 and older <b>Description:</b> Total number of discharges for a self-injury for patients age 15 and older <b>Inclusions:</b> 1. Admission to an acute care institution (Facility Type Code = 1)
Numerator	2. Self-injury is identified by the following external cause of injury codes with a diagnosis type of 9: ICD-10-CA X60–X84  3. Age at admission 15 years and older <b>Exclusions:</b> 1. Cadaveric donor or stillbirth records (Admission Category Code = R or S)

## Background, Interpretation and Benchmarks

Rationale	Self-injury is defined as a deliberate bodily injury that may or may not result in death. This type of injury is the result of either suicidal or self-harming behaviours, or both. Self-injury can be prevented, in many cases, by early recognition, intervention and treatment of mental illnesses. While some risk factors for self-injury are beyond the control of the health system, high rates of self-injury hospitalization can be interpreted as the result of a failure of the system to prevent self-injuries that are severe enough to require hospitalization.
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Lower rates are desirable.

**Interpretation** Using the available data sources, capturing intention is difficult. This indicator cannot distinguish whether or not the self-injury was intended to result in death (self-harming or suicidal behaviour). In addition, this indicator might provide biased estimates of the true number of hospitalizations for self-injury, due to the manner in which intent is captured in the data sources available. For example, poisoning can be coded as "unintentional"—an overdose—or "undetermined"—reflecting an uncertainty between unintentional and intentional motives. Neither unintentional nor undetermined injuries were included in this indicator, even though it is assumed that a small number of these cases were, in fact, intentional.

**HSP Framework Dimension** Health System Outcomes: Improve health status of Canadians

**Areas of Need** Not applicable

**Targets/Benchmarks** Not applicable

**References** Canadian Institute for Health Information. National Trauma Registry Analytic Bulletin: Hospitalizations Due to Suicide Attempts and Self-Inflicted Injury in Canada, 2001-2002. Ottawa, ON: CIHI; 2004.

**Availability of Data Sources and Results**

**Data Sources** DAD, HMDB, NACRS, OMHRS

**Type of Year:**

Fiscal

**Available Data Years** **First Available Year:**

2010

**Last Available Year:**

2017

**Geographic Coverage** All provinces/territories

**Reporting Level/Disaggregation** National, Province/Territory, Region, Neighbourhood Income Quintile

**Result Updates**

**Update Frequency** Every year

**Web Tool:**

**Indicator Results** Your Health System: In Depth

**URL:**

[Accessing Indicator Results on Your Health System: In Depth](#)

**Updates** Not applicable

**Quality Statement**

**Caveats and Limitations** This indicator does not include cases of self-injury involving outpatient treatment in hospital emergency departments or other medical facilities or completed suicide prior to hospital admission. Thus this indicator cannot be used to estimate the prevalence of self-injury in the general population. Also not included are patients who were institutionalized in a psychiatric hospital and were self-injured during their stay but did not require admission to a general hospital. For a broader estimate of self-injury, please refer to the In Focus section of *Health Indicators 2012*.

Weyburn Mental Health Centre in Saskatchewan is not included in all mental health–related indicators as requested by the facility. As a result, rates for Sun Country Health Region (4701) in 2009 are not comparable with those reported in subsequent years.

**Trending Issues**

Brant Community Healthcare System: Brantford General Hospital did not submit its 2009–2010 data to the Ontario Mental Health Reporting System as of the reporting deadline; therefore, it is not included in the indicator calculation. Rates for North East Local Health Integration Network (3513) are not comparable with those reported in subsequent years.

The following cases of self-injury are not included in this indicator:

1. Cases of self-injury involving outpatient treatment in hospital emergency departments or other medical facilities, or completed suicide prior to hospital admission
2. Patients who were institutionalized in a psychiatric hospital and were self-injured during their stay but did not require admission to a general hospital

Indicator results are also available in

–The Health Indicators e-Publication (<http://yourhealthsystem.cihi.ca/epub/?language=en>); data is updated annually starting from 2010–2011.