

Self-Harm

What is it?

In its broadest sense, self-harm describes “a wide range of things that people do to themselves in a deliberate and usually hidden way, which are damaging.”¹ The following definition has been developed to provide a standard definition of self-harm for research in the field²:

An act with a **non-fatal outcome** in which an individual did one or more of the following:

- Initiated behaviour intended to cause self-harm (for example cutting, jumping from a height, bone breaking),
- Taken an overdose (or a higher than normal dose) of a medicine,
- Ingested (eaten) a recreational or illicit drug (including alcohol) in an act regarded by the person as self-harm,
- Ingested a non-ingestible substance or object.

People self-harm for a number of reasons. Often self-harm is a method of coping with the emotional pain of psychological trauma such as abuse. For some people, self-harm provides the means to survive overwhelming emotions – a way to control feelings of helplessness and powerlessness. Feelings are numbed or released in order to survive deeper hopelessness and despair.

It is important to bear in mind though, that everybody’s experience is unique, and there are no universal rules or reasons for self-harm.

Facts

- A 2002 Study showed that 13.2% of 15-16 year olds had self-harmed. That would be over 17,000 15 and 16 year olds in Scotland.³
- Rates of self-harm in the UK have increased over the past decade and are thought to be amongst the highest in Europe.⁴
- More than 24,000 teenagers are admitted to hospital in the UK each year after deliberately harming themselves¹.
- Many studies focus upon the numbers of young people admitted through Accident and Emergency departments as a result of self-harm, and as such, do not monitor the number of people self-harming but not coming to hospital.
- The average age for children starting to self-harm is 13.⁵
- Onset of self-harming behaviour has been linked with the onset of difficult things going on in the young person’s life: unwanted pregnancy, being bullied at school, not getting on with parents, relationship breakdown, abuse, rape, bereavement and entering care³.

Signs and Symptoms

- Self-harm is a deeply personal thing, with individuals likely to have a preferred method and part of the body for self-harm and a way of keeping it well hidden.
- Many people who self-harm are shocked and amazed to find out that other people do it too: it often feels like they are the only people to do this.

¹ MHF/Camelot Foundation National Enquiry into Self-harm in Young People

² The Child and Adolescent Self-harm Europe (CASE) Research Group

³ Hawton et al (2002) statistic of 13.2%, calculated with SCROL Census data for Scotland.

⁴ National Institute for Clinical Excellence, 2002

⁵ NCH & Centre for Social Justice, Coventry University, 2002

- Scars from self-harm are sometimes visible on the body, and people may go to great lengths to avoid showing the area of the body that they harm.

Recovery

- Recovery means different things to different people and no two individual journeys of recovery will be the same. Regardless of symptoms or past experiences, people with mental health problems should be given every opportunity to, and can, lead fulfilling and satisfying lives.
- Self-harm is not a reaction that switches on and off. Most people that self-harm go through periods where they feel more vulnerable or triggered to self-harm, and periods where they are able to cope with things that would normally trigger them.
- Giving-up self-harm can be a long and difficult process. It is not something a person can just stop doing overnight. Often, a doctor will refer a person for psychological therapies. These can help to build coping mechanisms to replace self-harm, and address the feelings that led to the self-harming to begin with. Sometimes medication might be used to treat depression or another mental health problem that may be present.
- There are a number of self-help groups and voluntary sector self-harm projects that can help people work towards developing coping mechanisms. Contact the specialist organisations below for details of self-help strategies.
- Many people gradually move away from self-harm, as they get older. Developing better coping strategies and good distractions can help reduce or remove the need to self-harm over time.

Stigma and Self-Harm

- Visible scars, often on people's arms, may be noticed in public. People often stare, point or make comment. The thought of someone wilfully damaging themselves is alien, and for many, unsettling or even disgusting. The effect of this judgement and public disgust is further reduction of confidence and self-esteem, and a promotion of the cycle that leads to self-harm in the first place.
- Many people hide their scars obsessively to prevent the negative consequences of them being seen. This leads to problems for example in school, or the workplace, where uniform might dictate short sleeves, or situations might lead to peers seeing a person changing, opening them up for further comment.
- Sometimes people are stigmatised in buying goods, for example by being barred from purchasing painkillers, or a safety razor in a pharmacist, because their scars were showing.
- People are sometimes excluded from jobs, or asked to wear different clothes because of scarring from self-harm (e.g customer services or teaching). Other forms of scarring (e.g on the face) would be covered by anti-discrimination legislation, but self-harm scars would not be.
- One of the most commonly reported areas where self-harm results in stigma is when people access medical help, both for self-harm, and for other complaints. This can often lead to people not staying to complete treatment in Accident and Emergency departments, or being deterred from seeking treatment in the future. Some evidence suggests that gaps in staff training or confidence lead to the stigma some people experience.

Myths and Misunderstandings

- Self-harm is not necessarily an attempt at suicide. Self-harm and suicide have an intimate relationship, but are different. Self-harm may be a survival strategy, a way of averting suicide.
- Self-harm is not a phase or a fashion. Listening to certain music, or dressing in certain ways does not lead to self-harm. People of all ages, backgrounds and of both genders self-harm.
- Self-harm is often labelled 'attention seeking'. This label is insulting and simply wrong. It trivialises the reasons for self-harming and is frequently prefaced by the word 'just', as in 'he/she is just attention seeking'. Most people who self-harm do so in private and hide their injuries e.g. by wearing long sleeved tops to avoid other's noticing scarring on their arms. For some, the privacy of the act is part of their feeling of control. Even if the motivation was attention there was a reason for this, and it should not be dismissed. Self-harm is always a signal that something is seriously wrong.
- There is a belief that because something is self-inflicted so its not serious .The seriousness of the injury may not indicate the extreme distress that injury represents.

Contacts

Self-Harm and Young People: A National Enquiry
<http://www.selfharmuk.org/>

Penumbra Young People and Self-Harm Information
http://www.penumbra.org.uk/young_people/yp_harm.html

National Self-Harm Network
<http://www.nshn.co.uk/>

Young Minds Self-Harm Information
<http://www.youngminds.org.uk/selfharm/>

NCB Young People and Self-Harm Resource
<http://www.selfharm.org.uk/>