



For better
mental health

Understanding self-harm

they can be
by painful emotions, such as rage, sadness, emptiness, grief,
self-hatred, fear, or guilt. Injuring yourself may help you cope
in a number of different ways. It may be a way of getting
itself-harm is a sign of

'I belong to a women's self-harm support group. The group was the start of changing my life. The encouragement and support from both has given me the strength and courage to continue my life, and I now value myself. I still self-harm, but nowhere near as much as I used to. By talking about it, I am learning to deal with my feelings.'

'I am a survivor of both sexual abuse and self-injury. I no longer self-injure, but it has been a long struggle to try to acknowledge and work through emotions that once felt overwhelming in their power.'

'Self-harm involves all of us on some level. We may all punish, distract or numb ourselves, as a way of dealing with difficult feelings or situations.'

This booklet is for anyone who self-harms, their friends and family. It should give readers a greater understanding and knowledge of the condition and of what they can do to help overcome it.



What is self-harm?

Self-harm is a way of expressing very deep distress. Often, people don't know why they self-harm. It's a means of communicating what can't be put into words or even into thoughts and has been described as an inner scream. Afterwards, people feel better able to cope with life again, for a while.

Self-harm is a broad term. People may injure or poison themselves by scratching, cutting or burning their skin, by hitting themselves against objects, taking a drug overdose, or swallowing or putting other things inside themselves. It may also take less obvious forms, including taking stupid risks, staying in an abusive relationship, developing an eating problem, such as anorexia or bulimia, being addicted to alcohol or drugs, or simply not looking after their own emotional or physical needs.

These responses may help you to cope with feelings that threaten to overwhelm you; painful emotions, such as rage, sadness, emptiness, grief, self-hatred, fear, loneliness and guilt. These can be released through the body, where they can be seen and dealt with. Self-harm may serve a number of purposes at the same time. It may be a way of getting the pain out, of being distracted from it, of communicating feelings to somebody else, and of finding comfort. It can also be a means of self-punishment or an attempt to gain some control over life. Because they feel ashamed, afraid, or worried about other people's reactions, people who self-harm often conceal what they are doing rather than draw attention to it.

It's worth remembering that most people behave self-destructively at times, even if they don't realise it. Perfectly ordinary behaviour, such as smoking, eating and drinking too much, or working long hours, day after day, can all be helping people to numb or distract themselves and avoid being alone with their thoughts and feelings.

Why do people harm themselves?

A person who self-harms is likely to have gone through very difficult, painful experiences as a child or young adult. At the time, they probably had no one they could confide in, so didn't receive the support and the emotional outlet they needed to deal with it. The experience might have involved physical violence, emotional abuse, or sexual abuse. They might have been neglected, separated from someone they loved, been bullied, harassed, assaulted, isolated, put under intolerable pressure, made homeless, sent into care, into hospital or to other institutions.

Experiences like these erode self-esteem. Emotions that have no outlet may be buried and blocked completely out of awareness. If a trusted adult betrays or abuses them, and there are no other witnesses, children will often blame themselves. They turn their anger inwards. By the time they become adults, self-injury can be a way of expressing their pain, punishing themselves, and keeping memories at bay.



There is often an absence of pain during the act of self-injury, rather like the absence of sensation that often occurs during abuse or trauma. The body produces natural opiates, which numb it and mask the emotions, so that little is felt or realised consciously. A badly traumatised person may end up feeling quite detached from their feelings and their body. Some may injure themselves to maintain that sense of being separate, and to convince themselves that they aren't vulnerable. Others may injure themselves in order to feel something and know that they are real and alive.

Healthcare professionals have been criticised for assuming that people who self-harm require no anaesthetic for stitching wounds. This is just one of the myths exploded in new guidelines on self-harm, developed by NICE (the National Institute for Clinical Excellence). Similarly, professionals sometimes make assumptions about why someone has injured themselves, particularly if they have done it before. But the meaning is different for each person, each time they self-harm. It is not a sign, in itself, that someone has a mental health problem. (See *Useful organisations*, on p. 12.)



Who is most likely to self-harm?

According to recent research, the majority are young women, although the percentage of young men seems to be on the increase. Self-harming behaviour is also significant among minority groups discriminated against by society. Someone who has mental health problems is more likely to self-harm. So are those who are dependent on drugs or alcohol, or who are faced with a number of major life problems, such as being homeless, a single parent, in financial difficulty or otherwise living in stressful circumstances. One important common factor is a feeling of helplessness or powerlessness.

Recent research focusing on young people suggests that 10 per cent of 15 to 16 year olds have self-harmed, usually by cutting themselves, and that girls are far more likely to self-harm than boys. The most common reason is 'to find relief from a terrible situation'. Young people are often under great pressure within their families, from school and among their peers. Many young people report having friends who also self-harm.

The research suggests that young people who self-harm are much more likely to have low self-esteem, to be depressed and anxious. They seem to be facing more problems in life, but may be less good at coping with them. They may retreat into themselves, feeling angry, blaming themselves, tending to drink and smoke too much and to use more recreational drugs. They confide in fewer friends, and tend not to talk to their parents or other adults, or to ask for the help they need.

Physical, emotional or sexual abuse

Women often find themselves in a caring role, putting their own needs last. This can grossly undermine their sense of worth, their opinions and strengths. In due course, a woman may come to feel she is an unimportant, silent witness to the abuses she has to endure. She may lose her sense of identity, power and rights. To survive, she may cut herself off from her real needs. If the focus for this is the size and shape of her body, she may drastically restrict what she eats. (See *Further reading*, on p. 14.)

If men conform to the macho stereotype that expressing emotion is a weakness, it can leave them unable to feel their feelings, and detached from that side of themselves. They may have less difficulty showing anger than women, but if they are in prison, where pent-up feelings can't be released, men are more likely to turn to self-harm, especially if they have been abused.

Is self-harm an attempt to commit suicide?

Self-harm is about trying to stay alive, despite the pain people are in. Although, there is a relationship between self-harm and suicide, many more people self-harm than kill themselves, and most people don't hurt themselves so badly as to risk their lives. Of those who do, suicide may not have been their intention; it's the feelings they want to wipe out.

Whether someone wants to live or die may seem to be a straightforward choice. But some people are suspended in a grey state of survival, where choices and decisions are kept on hold. This is where self-harm happens.



For those who self-harm, surviving is subject to rigid controls; feelings are suppressed for fear of what may lie behind them. If living means having to cope with acutely painful feelings and memories, and there is not enough support available, the choice not to be alive may be more understandable. When someone you care about talks about death, it's natural to fear they may go through with it, but these are the very feelings they need to explore. (See *What help can I get?*, on p. 8.) Remember that human beings have an enormous capacity to survive great pain.

?

Is self-harming behaviour attention-seeking?

Because it can be hard to understand, healthcare professionals, friends and relatives sometimes mistakenly regard people who self-harm with mistrust or fear and see their behaviour as attention seeking and manipulative. If someone you know self-harms, you may feel helpless when faced with their wounds, and your own feelings and fears about the situation may cause you to blame them instead of supporting them (see *How can friends and family help?*, on p. 10.) Bear in mind they may be using the only way they can to communicate their plight and to get the attention, care and comfort they need. However upsetting it may be for you, it doesn't necessarily mean this is their intention.

Whether people have deep wounds or slight injuries, the problem they represent should always be taken very seriously. The size of the wound isn't a measure of the size of the conflict inside.

?

What triggers it?

You may harm yourself once or twice at a particularly difficult time in your life, and never do so again. But self-harming can become an ongoing way of coping with current problems and may occur regularly, on a monthly, weekly, or daily basis, depending on circumstances. The trigger could be a reminder of the past, such as an anniversary, which sets off a hidden memory, or something unexpected could happen to cause a shake-up. But sometimes, ordinary life is just so difficult that self-harm is the only way to cope with it.



What can I do to stop self-harming?

The single most important thing to remember is that you have choices: stopping self-injury can begin now.

- Knowledge is power. Gather as much information as possible about your own behaviour. Keep notes of what is going on when you feel the need to harm yourself, so that you can identify, over a period of time, specific thoughts which come up. It's also useful to keep a daily diary of events and feelings, and to record how you cope with or channel powerful emotions of anger, pain or happiness.
- Try to talk about your feelings with someone supportive. Even though you may feel you are alone, there are others who can understand your pain and help to boost your strength and courage. Many people find that joining a support group of people with similar problems is an important step towards making themselves feel better, and changing their lives. If there are no appropriate support groups in your area, your local Mind associations may be able to help start one. (See *Useful organisations*, on p. 12, for more information.)
- Work on building up your self-esteem. Remember you are not to blame for how you feel; your self-injury is an expression of powerful negative feelings. It's not your fault. Make lists of your feelings, and then write positive statements about yourself, or the world around you. If you can't think of any, ask friends to write things they like about you. Keep these in a place so that they are visible. Make a tape of your own voice saying something affirming or reading your favourite stories or poems. Hearing your own voice can be soothing, or you can ask someone you trust to record their voice reading to you.
- Try to find ways to make your life less stressful, give yourself occasional treats, eat healthily, get plenty of sleep and build physical activity into your life, because this is known to boost self-esteem and lift low moods.

- Have the telephone numbers of friends, or local and national helplines where you can find them easily, if you need to talk to somebody in a crisis. (See *Useful organisations*, on p. 12.)
- Think about your anger and what you do with it. If you weren't busy being angry with yourself, who would you really be angry with? Write a list of people who have caused you to feel like this. Remind yourself you deserve good things in life, not punishment for what others have done to you.
- Line up a set of cushions to represent people who caused you pain. Tell them how they hurt you and that you don't deserve punishment. Kicking or hitting cushions is good. Try to do this with someone else, if possible, so that the experience is shared and you do not hurt yourself.
- Creativity is a powerful tool against despair. This doesn't have to be about making something. Whatever lifts you out of your pain and makes you feel good is creative. If you feel like it, try drawing or painting how you feel. Some people draw on themselves, using bright body colours.
- If you feel the need to self-harm, focus on staying within safe limits. A supportive GP will give you good advice on minimising and caring for your injuries and help you to find further help.



What help can I get?

If experiences were so painful they forced you to deal with your emotions by hurting yourself, you may now seriously doubt whether you can deal with them in any other way. But people do move forward, to grieve over past events or a lost childhood and work through the fear and confusion surrounding them. With plenty of support, they learn that they can cope with the pain, anger and rage, which need to surface.

The important thing is to find ways to start talking to someone you trust. It could be to a friend, a family member, a professional counsellor, a psychologist or a psychotherapist.

A professional should have the training to listen to you and help you reach your feelings and manage them in a different way. Problems in the present and from the past all need to be addressed. If you can, find someone who specialises in treating people who self-harm, who have eating problems or who have been abused. (See *Useful organisations*, on p. 12, and *Further reading*, on p. 14.)

Talking to your GP

NICE recommends that you should be offered a full assessment of your physical, psychological and social needs, by a professional who has been trained in the treatment of people who harm themselves, in an atmosphere of respect and understanding. If your GP is dismissive or unhelpful, you can contact the Patient Advice and Liaison Services (PALS), listed in your phone book under the local NHS Trust. You have a right to change your GP, if necessary. (See *Useful organisations*, on p. 12.)

Your GP may offer you a number of treatment choices, including various forms of counselling or therapy. One option might be cognitive behaviour therapy (CBT), which is a practical treatment that involves looking at what happens just before you self-harm, encouraging you to keep a diary of self-harming episodes and finding other channels for your feelings. CBT does not usually explore, in depth, the underlying causes of self-harming. (See *Further reading*, on p. 14.)

If your self-harming is severe, you may be referred to psychiatric services for further assessment, treatment and support. In an emergency, you may be taken into hospital. People's experience of these services is very variable. When time and resources are limited, it may be easier for staff to make snap judgements, use diagnostic labels and offer medication, than to spend time looking for the underlying causes of distress. If you find that this is the case, you may need an advocate, who can speak for you and ensure you are properly treated. This could be a friend, relative or a professional. The new NICE guidelines are designed to counteract this kind of response and to ensure that people receive the best possible care. (See *Further reading* for details of *The Mind guide to advocacy*.)



How can friends and family help?

If someone you love and care about is self-harming, it can be very difficult to cope with your own feelings of shock, anger, guilt, grief and helplessness. You may be very afraid of what might happen. Try to enlist the help of family, friends and professionals to support you. (See *Useful organisations*, on p. 12.)

Although you may feel helpless, what you do or don't do can make a lot of difference. If you pay due attention to their injuries, you affirm that they and their body are worth caring about. But don't just focus on the injuries. It's important that you appreciate how difficult your friend or relative is finding life. Showing them you want to understand will matter a great deal.

You can begin by gently encouraging them to examine their feelings and to talk to someone about why they self-harm. You may find what they have to say difficult to hear. If it feels too much for you, help them to find someone else to talk to. It's possible to be honest with them about your own feelings and not to panic, blame them, treat them as if they are mad, or make them feel guilty. Being uncritical will help them feel accepted and cared for, instead of even more self-hating. Keep emphasising all the non-harming aspects of the person's life to help develop and support their sense of self-worth.

Don't expect change to happen quickly; and don't hold on to any expectation that your friend or relative can stop self-harming just because you want them to. People who self-harm are trying to resist feeling the full weight of their emotions. This defence mechanism can't be dismantled easily. It takes time for people to learn that their feelings won't destroy them. It's important you resist the temptation to step in, constantly, to try to solve the problem. In the end, each individual has to draw on their own strengths and find their own healing inner resources.

References

Self-harm: short-term treatment and management

(National Institute for Clinical Excellence 2004) (www.nice.org.uk)

Self-harm: understanding the NICE guidelines

(National Collaborating Centre for Mental Health/Mind)

Youth and self-harm: perspectives (Centre for Suicide Research, University of Oxford/Samaritans)

Non-fatal suicidal behaviour among adults aged 16-74 in

Great Britain The Office for National Statistics (The Stationery Office 2002)

Children or adolescents who try to harm or kill themselves

(National Statistics 2001)



Useful organisations

Mind

Mind is the leading mental health organisation in England and Wales, providing a unique range of services through its local associations, to enable people with experience of mental distress to have a better quality of life. For more information about any mental health issues, including details of your nearest local Mind association, contact the Mind website: www.mind.org.uk or *MindinfoLine* on 0845 766 0163

The Basement Project

PO Box 5, Abergavenny, Wales NP7 5XW
tel. 01873 856 524

Publications, groups and workshops for people who self-harm

British Association for Counselling and Psychotherapy (BACP)

BACP House, 35–37 Albert Street, Rugby CV21 2SG
tel. 0870 443 5252, web: www.bacp.co.uk

For details of practitioners in your area

British Red Cross UK Office

44 Moorfields, London EC2Y 9AL
tel. 020 7877 7000

For information about their scar camouflaging service

DABS (Directory and Book Services)

4 New Hill, Conisbrough, Doncaster DN12 3HA
tel. 01709 860 023, web: www.dabsbooks.co.uk

Books and information for anyone affected by child abuse

Hearing Voices Network

91 Oldham Street, Manchester M4 1LW
tel. 0161 834 5768, web: www.hearing-voices.org.uk

Information and support for those who hear voices

NAPAC

42 Curtain Road, London EC2A 3NH
helpline: 0800 085 3330, web: www.napac.org.uk

National information service for people abused in childhood.

National Self-harm Network (NHSN)

PO Box 7264, Nottingham NG1 6WJ

web: www.nshn.co.uk

Survivor-led organisation supporting those who self-harm

Samaritans

The Upper Mill, Kingston Road, Ewell, Surrey KT17 2AF

tel. 09457 90 90 90, web: www.samaritans.org.uk

24-hour emergency helpline

Survivors UK

PO Box 2470, London SW9 6WQ

helpline: 0845 122 1201, web: www.survivorsuk.org.uk

For men who have experienced any form of sexual violence

United Kingdom Council for Psychotherapy (UKCP)

167–169 Great Portland Street, London W1W 5PF

tel. 020 7436 3002, web: www.psychotherapy.org.uk

Regional lists of psychotherapists are available free

YoungMinds

102–108 Clerkenwell Road, London EC1M 5SA

parents information service: 0800 018 2138

web: www.youngminds.org.uk

For anyone concerned about a child's mental health

Useful websites

www.nch.org.uk/selfharm

www.rcpsych.ac.uk

www.readthesigns.org

www.selfharm.org.uk

www.siari.co.uk

Further reading

- A bright red scream: self-mutilation and the language of pain*
M. Strong (Virago 2000) £10.99
- Conquering a sense of inferiority* (Mind 2004) £1
- Cutting: the risk – self-harm, self-care and risk reduction*
(National Self-harm Network 2000) £10
- Cutting: understanding and overcoming self-mutilation*
S. Levenkron (W. W. Norton 1998) £10.99
- Heal the hurt: how to forgive and move on* A. Macaskill
(Sheldon Press 2002) £6.99
- How to accept yourself* Dr. W. Dryden (Sheldon Press 1999) £7.99
- How to assert yourself* (Mind 2003) £1
- How to help someone who is suicidal* (Mind 2004) £1
- How to improve your mental wellbeing* (Mind 2004) £1
- How to increase your self-esteem* (Mind 2003) £1
- How to look after yourself* (Mind 2004) £1
- How to recognise the early signs of mental distress*
(Mind 2004) £1
- Managing anger: dealing positively with hurt and frustration*
G. Lindenfield (Thorsons 2000) £7.99
- The Mind guide to advocacy* (Mind 2004) £1
- The Mind guide to managing stress* (Mind 2005) £1
- Overcoming childhood trauma: a self-help guide using cognitive behavioural techniques* H. Kennerley
(Robinson 2000) £7.99
- Overcoming low self-esteem: a self-help guide using cognitive behavioural techniques* M. Fennell (Robinson 1999) £7.99
- Self-harm: perspectives from personal experience*
ed. L. R. Pembroke (Chipmunka Publishing/Survivors Speak Out 2004) £12
- Understanding anxiety* (Mind 2005) £1
- Understanding borderline personality disorder* (Mind 2004) £1
- Understanding depression* (Mind 2005) £1
- Understanding eating distress* (Mind 2002) £1
- Understanding psychotic experiences* (Mind 2004) £1
- Who's hurting who? Young people, self-harm and suicide*
H. Spander (42nd Street 2001) £12.45

order form

For a catalogue of publications from Mind, send an A4 SAE to the address below.

If you would like to order any of the titles listed here, please photocopy or tear out these pages, and indicate in the appropriate boxes the number of each title that you require.

Please add 10 per cent for postage and packing, and enclose a cheque for the whole amount, payable to Mind. Return your completed order form together with your cheque to:

Mind Publications
15–19 Broadway
London E15 4BQ
tel. 0844 448 4448
fax: 020 8534 6399
email: publications@mind.org.uk
web: www.mind.org.uk
(Allow 28 days for delivery.)

Please send me the titles marked opposite. I enclose a cheque (including 10 per cent for p&p) payable to Mind for £

Name

Address

Postcode

Tel.

Mind works for a better life for everyone with experience of mental distress

Mind does this by:

- advancing the views, needs and ambitions of people with experience of mental distress
- promoting inclusion through challenging discrimination
- influencing policy through campaigning and education
- inspiring the development of quality services which reflect expressed need and diversity
- achieving equal civil and legal rights through campaigning and education.

The values and principles which underpin Mind's work are:

autonomy, equality, knowledge, participation and respect.

For details of your nearest Mind association and of local services contact Mind's helpline, MindinfoLine: **0845 766 0163** Monday to Friday 9.15am to 5.15pm. Speech-impaired or Deaf enquirers can contact us on the same number (if you are using BT Textdirect, add the prefix 18001). For interpretation, MindinfoLine has access to 100 languages via Language Line.

Scottish Association for Mental Health tel. 0141 568 7000

Northern Ireland Association for Mental Health tel. 028 9032 8474

This booklet was written by Diane Harrison and revised by Jenny Sharman

First published by Mind 1995. Revised edition © Mind 2005

ISBN 1-874690-32-4

No reproduction without permission

Mind is a registered charity No. 219830

Mind (National Association for Mental Health)

15-19 Broadway

London E15 4BQ

tel: 020 8519 2122

fax: 020 8522 1725

web: www.mind.org.uk



**For better
mental health**