



Why do young people self-harm?

An After Work Lecture

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I do not cut off who I am
I don't think it matters to
those without scars;
Flawed is easier to say than self h-a---

I don't think it matters how
My skin hangs together;
Flawed is easier to say than self h-a----
I am not fragile;

My skin hangs together.
I cope with mechanisms like -
I am not fragile,
I only trimmed the edges.

I cope with mechanisms like
Those without scars.
I only trimmed the edges,
I did not cut off who I am.

Flawed

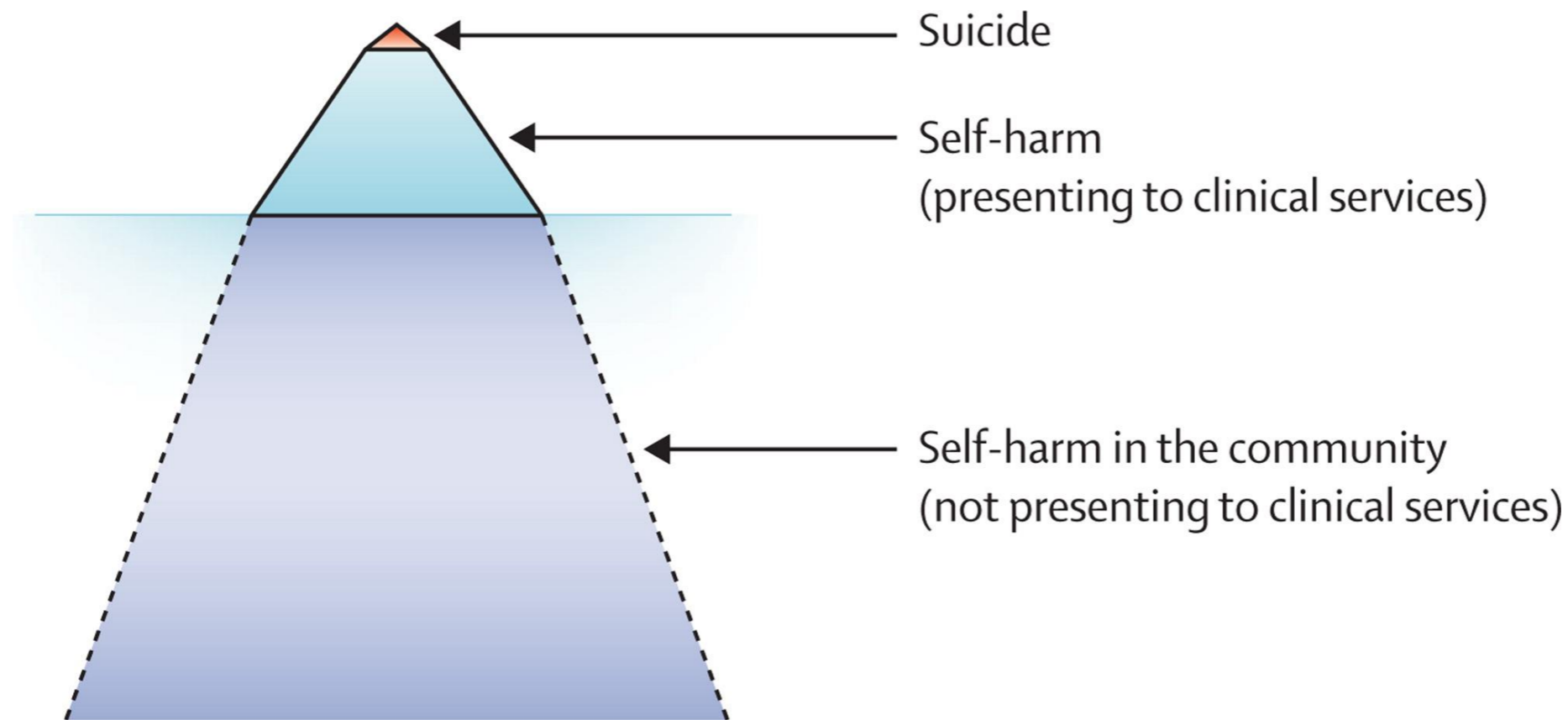
by Hayley Green

Write Minds Project
Nottingham

The problem with statistics

- 1 in 10 young people self-harms at some point in their teenage years (Samaritans and The Centre for Suicide Research, University of Oxford, 2002).
- The Priory Group found that as many as one in five girls between the ages of 15 and 17 had self-harmed and just under one in five adolescents- both boys and girls - has considered self-harm
- Rates are rising but it is almost impossible to collect statistics beyond those who present for treatment, so there is a hidden issue which we know about but cannot quantify accurately

Self-harm and suicide

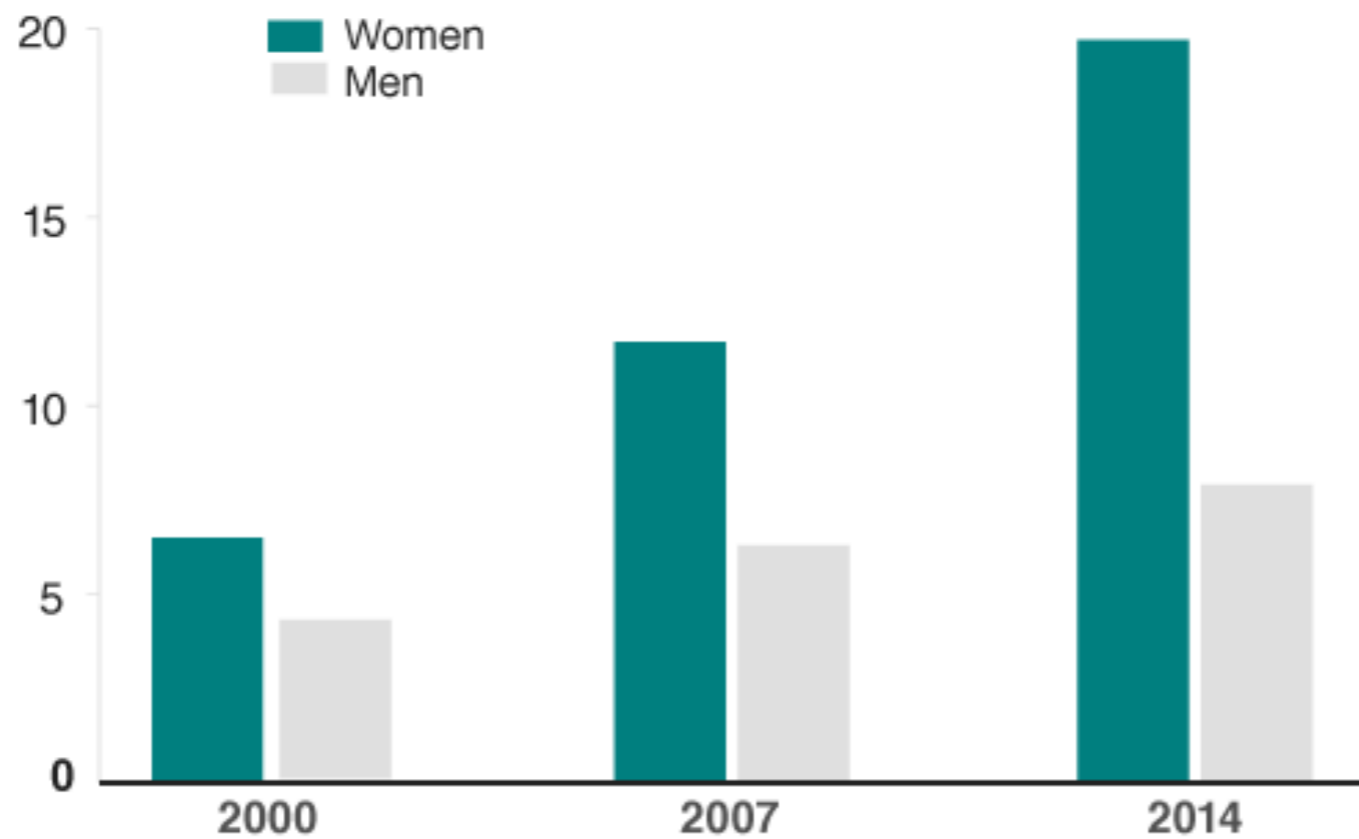


Hawton, K., Saunders, K., and O'Connor, R.C. (2012) Self-harm and suicide in adolescents The Lancet Volume 379, Issue 9834, pp 2373-2382

Rising rates of self harm in the UK

Rise in young people reporting self-harm in England

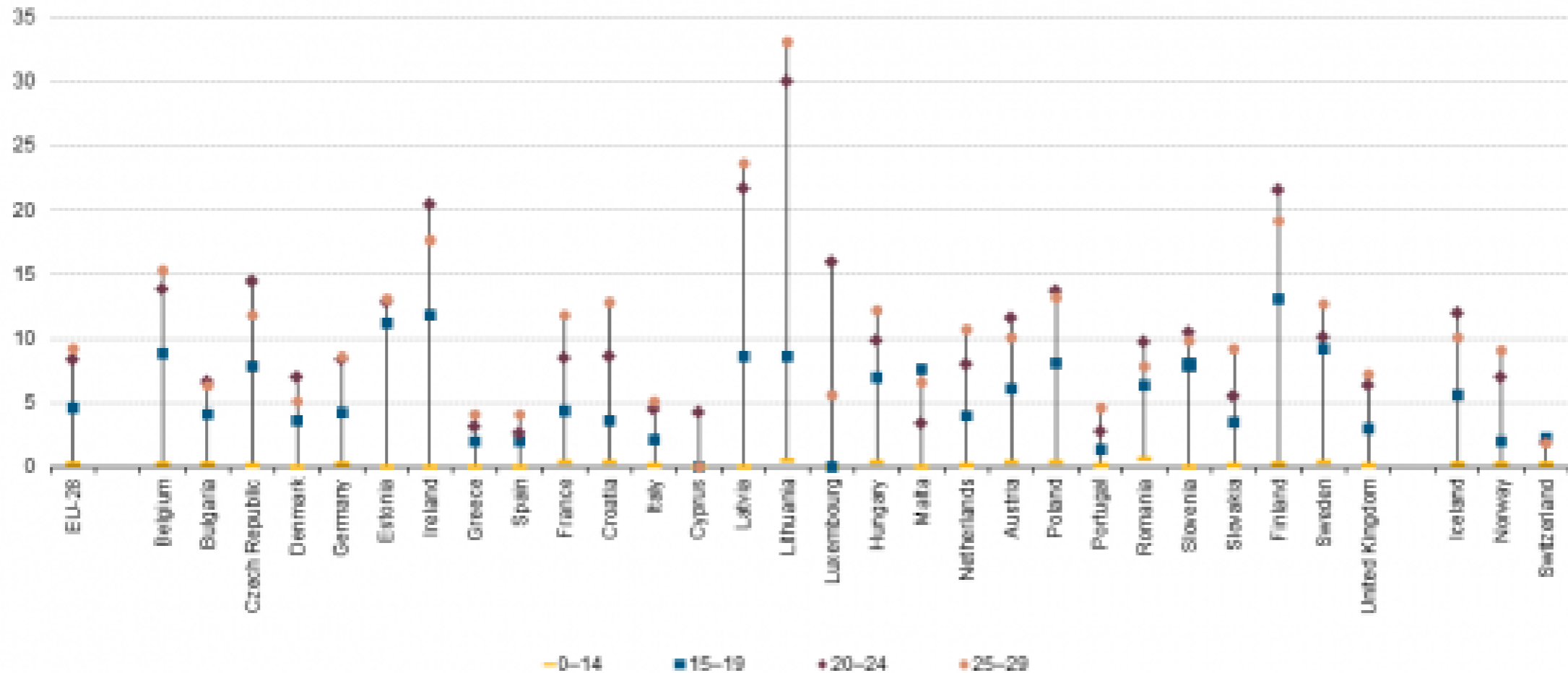
16 to 24-year-olds in 2000, 2007 and 2014 (%)



Source: NHS Digital

BBC

And in Europe generally:



Crude death rates for children and young people from intentional self-harm, by age group, 2011
 (number of deaths per 100 000 inhabitants)
 Source: Eurostat ([hlth_cd_acdr2](http://ec.europa.eu/eurostat/statistics-explained/index.php/Being_young_in_Europe_today_-_health))

A Recent Study

In a recent study involving nearly 4,000 young people in 8 UK schools it was found that:

Self harm in young adolescents is common with one in four reporting self-harming thoughts and one in six engaging in self-harming behaviour over a one year period. Self-harm is already established by 12/13 years of age and for over half of our sample, self-harming thoughts and behaviour persisted over the year. Secure peer and strong school relationships were associated with less self-harm. Poor sleep was associated with self harm.

Few seek help for psychological problems, suggesting a need to increase awareness amongst all professionals who work with young adolescents about self-harm and associated risk factors.

Stallard et al 2013

Why I started to cut myself...

- ▶ https://www.youtube.com/watch?v=ysEdaNb_q9c

The stigma of self harm

“I was very confused about my emotions when I was young. It was considered to be attention seeking to cut yourself and I didn’t want attention. I just couldn’t control my emotions. I needed an outlet. I was ashamed of it. Which really just added to my problems as I already felt ashamed of other things in my life.”

“Truth Hurts”

Healthcare professionals attitudes?

- ▶ “We’ve got several of your patients on the ward, can you let us know when they can go home please?”
- ▶ “There are four of yours on the ward again.”
- ▶ “She’s making a lot of fuss and upsetting the other patients. We’ve got some really poorly kids on at the moment.”

- ▶ Whose patients?
- ▶ Aren’t they all poorly kids?
- ▶ Dualism of separating physical and mental issues remains and is stigmatising.
- ▶ Physical illness still seen as deserving of sympathy, whilst mental and emotional problems much less so?

Anecdotal from CAMH Liaison team duties...

Definitions ...

‘Deliberate injury to oneself, typically as a manifestation of a psychological or psychiatric disorder’

[Oxford English Dictionary](#)

‘Self poisoning or injury, irrespective of the apparent purpose of the act’

[NICE guidelines on self harm](#)

‘Self harm is a way of expressing very deep distress. Often people don’t know why they self harm. It is 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.’

[MIND \(Charity\)](#)

What behaviours are we talking about?

- ▶ cutting
- ▶ burning
- ▶ scalding
- ▶ banging or scratching one's own body
- ▶ breaking bones
- ▶ hair pulling
- ▶ ingesting toxic substances or objects.

'Truth Hurts'

What is generally not included:

- ▶ Overeating
- ▶ Undereating (anorexia)
- ▶ Smoking
- ▶ Binge drinking
- ▶ Substance misuse
- ▶ Unsafe sex
- ▶ Offending / risk-taking behaviour



Reasons behind self harm

It became clear to the Inquiry that **self-harm is a symptom rather than the core problem.** It masks underlying emotional and psychological trauma and a successful strategy for responding to self-harm must be based on this fundamental understanding.

Truth Hurts

Report of the National Inquiry into Self-harm
among Young People

One young person said:

“I was very confused about my emotions when I was young. It was considered to be attention seeking to cut yourself and I didn’t want attention. I just couldn’t control my emotions. I needed an outlet. I was ashamed of it. Which really just added to my problems as I already felt ashamed of other things in my life.”

Risk factors as described by children

- ▶ being bullied at school
- ▶ not getting on with parents
- ▶ stress and worry about academic performance and not getting on with examinations
- ▶ parental divorce
- ▶ bereavement
- ▶ unwanted pregnancy

Other reasons may

include:

- ▶ experience of abuse in earlier childhood (whether sexual, physical, neglect and/or emotional) – severe and prolonged sexual abuse is known to lead to a higher incidence of self-harm.
- ▶ LGTB- lesbian, gay, bisexual and transgender young people are estimated to be two or three times more likely to self-harm than heterosexual young people, and homophobic bullying at school is implicated in higher rates of self-harm.
- ▶ problems to do with race, culture or religion
- ▶ low self-esteem
- ▶ feeling rejected.

Better than the alternative?

“Pain works. Pain heals. If I had never cut myself, I probably wouldn’t still be around today. My parents didn’t help me, religion didn’t help me, school didn’t help me but self-harm did. And I’m doing pretty well for myself these days. Don’t get me wrong, not in a heartbeat do I think that self-harm is a good or positive thing, or anything besides a heart-breaking desperate act that saddens me every time I hear about it. But there is a reason why people do it.”

Truth Hurts

Crying out for attention ?

“Some young people do it for attention, like I did when I first started. That doesn’t mean they should be ignored. There are plenty of ways to go and get attention, why cause yourself pain? And if someone cries for help, bloody well give them it, don’t just stand there and judge the way in which they’re asking for it.”

Mental Health Foundation and Camelot Foundation

Academic Theories

Why do young people harm themselves?:

- ▶ To die
- ▶ To escape from unbearable pain
- ▶ To change the behaviour of others
- ▶ To escape from a situation
- ▶ To show desperation to others
- ▶ To 'get back' at other people or make them feel guilty
- ▶ To gain relief from tension
- ▶ To seek help

Hawton and James 2005

Differences in motivation and choice of harm method?

One study found:

- ▶ There are differences between adolescents' motives for overdoses and for self-cutting, and also gender differences in the reasons for self-cutting. (Young people who overdosed had a higher suicidal intent)
- ▶ The often impulsive nature of these acts (especially self-cutting) means that prevention should focus on encouraging alternative methods of managing distress, problem-solving, and help-seeking before thoughts of self-harm develop.

Rodham, Hawton and Evans (2004)

Ongoing replication of themes:

- ▶ Although self-harm is a relatively common occurrence in adolescents, there is a lack of understanding about the motivations behind it. A poor understanding of self-harm contributes to negative perceptions about those who self-harm and a poor healthcare experience.
- ▶ Mental health services need to be responsive to the needs of young people who self-harm which requires eliciting and understanding the individual and multiple meanings behind self-harm to best inform treatment options.

Doyle, Sheridan and Treacey (2017) 'Motivations for adolescent self harm and the implications for mental health nurses' *Journal of Psychiatric and Mental Health Nursing* (Early View)

Psychological models to understand this phenomenon

- ▶ Affect-regulation: To alleviate acute negative affect or aversive affective arousal
- ▶ Anti-dissociation: To end the experience of depersonalization or dissociation
- ▶ Anti-suicide: To replace, compromise with, or avoid the impulse to commit suicide
- ▶ Interpersonal boundaries: To assert one's autonomy or a distinction between self and other
- ▶ Interpersonal-influence: To seek help from or manipulate others
- ▶ Self-punishment: oneself To derogate or express anger towards oneself
- ▶ Sensation-seeking: To generate exhilaration or excitement

Pressures on young people

- ▶ Online sources of info may not be supportive
- ▶ Active encouragement to escalate and normalise self harm on some sites
- ▶ Social media has pressures to conform to certain stereotypes – image, success, body shape, and popularity
- ▶ Social media also allows 24/7 bullying!
(FOMO means that devices are on all the time...)

Why might young people struggle to ask for help?

- ▶ thought it would be a 'once only' event that they could manage
- ▶ wanted to put it to the back of their minds
- ▶ felt that they had no one to share their feelings with
- ▶ had no idea how to access services
- ▶ were concerned that their coping strategy would be taken away from them by being prevented from self-harming
- ▶ were worried that they would be judged as "attention seeking" or "stupid"
- ▶ felt that their physical injuries were not serious enough to need help
- ▶ were anxious that disclosure of self-harm would limit their future career opportunities
- ▶ were concerned that they would lose control over their situation if their behaviour became public knowledge

(Anecdotal evidence from Derby CAMH Liaison team)

How can we be more available to young people ?

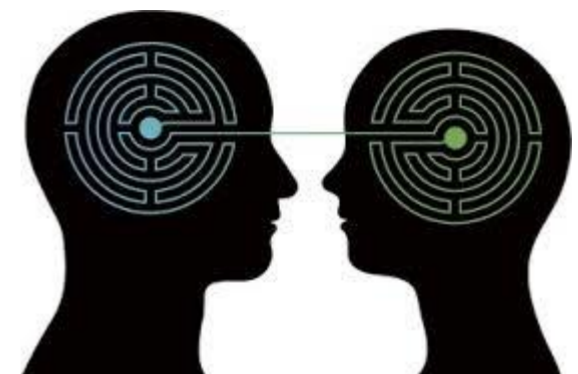
Asking Courageous Questions / 'Opening a can of worms':

- *Have you any plans to harm yourself (again)?*
- *How are you planning on doing it?*
- *When are you planning on doing it?*
- *Is there anything happening in the next few weeks that is going to be difficult for you?*
- *NOT 'would you do this again?' – be careful of HOW you ask!*
- *Evidence suggests that asking about these things does NOT increase the risk* (Borri et al)

Empathy statements

- examples

- ▶ “You must have been in an awful lot of pain to hurt yourself like that”
- ▶ “I expect you must have felt really sad about that?”
- ▶ “I imagine that experience would be very frightening?”



... what children say they want from us...

- ▶ Vigilance - adults should notice
- ▶ Understand them
- ▶ Stability
- ▶ Respect
- ▶ Informed
- ▶ Explanations
- ▶ Support
- ▶ Advocacy



Assessing Seriousness / Intent...

PATHOS Self Harm Assessment

Problems longer than a month

Alone when self harmed

Three hours planning or more

Hopelessness about the future

Sad most of the time

Yes/No Score 0-1

If score 2 or above then consider referral to CAMHS or request consultation

Commonly suggested distraction techniques:

- using a red water-soluble felt tip pen to mark instead of cut
- hitting a punch bag to vent anger and frustration
- rubbing ice instead of cutting
- physical exercise
- making lots of noise, either with a musical instrument or just banging on pots and pans
- writing negative feelings on a piece of paper and then ripping it up
- putting elastic bands on wrists and flicking them instead of cutting

...techniques continued

- ▶ Scribbling on a large piece of paper with a red crayon or pen
- ▶ Writing a diary or journal
- ▶ Talking to a friend (not necessarily about self-harm)
- ▶ Collage or artwork
- ▶ Going online and looking at self-help websites.
- ▶ Eating a raw chilli
- ▶ Drawing a butterfly and naming it a loved one

- ▶ **Harm minimisation should only be used in controlled therapeutic settings alongside installation of better coping techniques**
- ▶ This may include ensuring use of sterile sharps and adequate dressing of wounds, but comes with some risk...



I pick at the skin on my face
like I do the tights on my legs,
what starts off as a miniscule imperfection
quadruples in size until it is the only thing present,
as I fail to hold back my destructive tendencies
I create a mess that could quite easily have been,
perhaps not avoided all together,
but subdued,
the damage lessened
by just a little bit of self control
and will power that I wish I possessed.
No one would have noticed it
but I couldn't leave it be
and now the blood on my face,
like the gaping hole in my tights,
is on display for all the world to see.

Milla Tebbs
Write Minds
Project
Nottingham

Summary and discussion

- ▶ There are many reasons why young people harm themselves
- ▶ We should see this behaviour as a symptom, not an illness
- ▶ Young people need to be seen in a developmental context, they are still learning to cope with distress
- ▶ In the absence of other coping skills they may self harm
- ▶ We, adults, need to be more open to listening to their distress in order to help them
- ▶ Installing new coping skills takes time, so distraction or harm minimisation techniques may be needed alongside skill acquisition (like Dialectical Behavioural Therapies (DBT))

Select Bibliography:

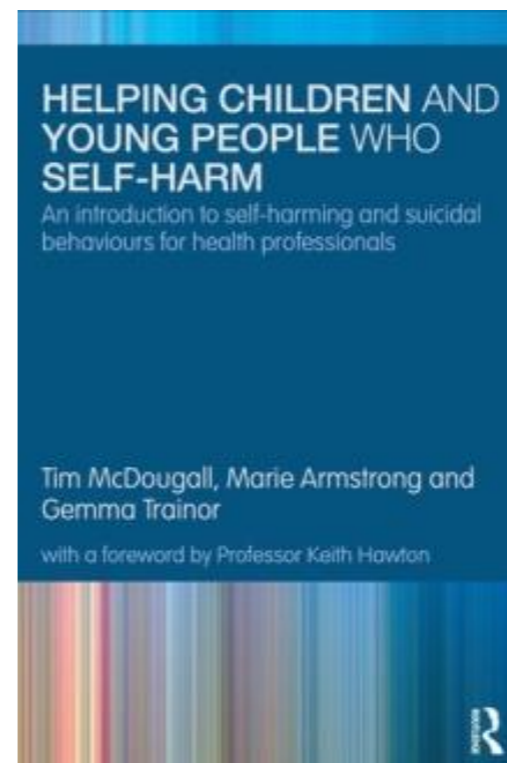
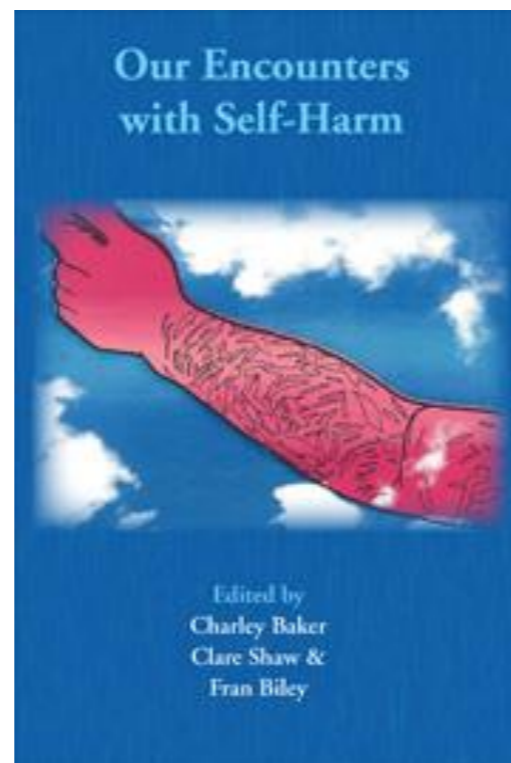
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Baker, C., Shaw, C and Biley, F. (2015) 'Our encounters with self-harm' PCCS Books, Worcester

Mental Health Foundation, Truth Hurts Report:

<https://www.mentalhealth.org.uk/publications/truth-hurts-report1>



Web sources of information:

- ▶ www.harmless.org.uk
- ▶ <https://www.selfharm.co.uk/>
- ▶ <http://www.lifesigns.org.uk/>
- ▶ **Multicentre Study on self-harm:**
<http://cebmh.warne.ox.ac.uk/csr/mcm/>
- ▶ **Papyrus UK (specific focus on suicide prevention)**
<https://www.papyrus-uk.org/#>
- ▶ **Young Minds (all aspects of children and young people's mental health)**
<http://www.youngminds.org.uk/>