

WHY THE PAIN?

Dispelling Myths About Self-Harm

It can be really scary when someone you support is in distress and is harming themselves. There may be moments when you feel helpless, stuck or even angry at them. There are all sorts of reasons to self-harm and often there will be different reasons at different times. This can be really confusing and brings with it lots of anxiety and stress for the people supporting someone in distress.

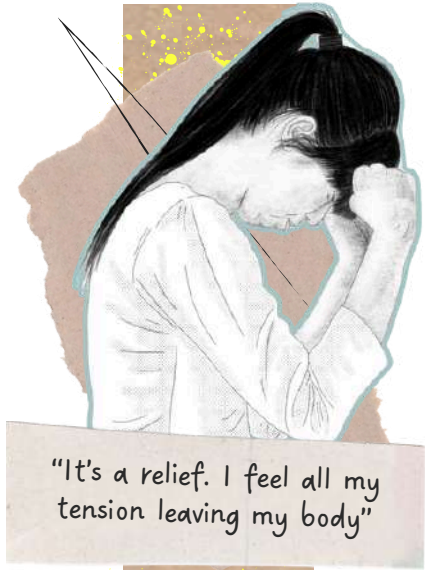
In this resource we take a look at some of the myths around self-harm and explore what might be underneath.

MYTH #1 "Self-harm is a suicide attempt"

Self-injury doesn't simply follow the wish to die or to cause serious injury to oneself. It is a form of communication and paradoxically can be a way for someone trying to stay alive.

Self-harm is an embodied communication where a person physically hurts themselves, when feelings and emotions feel out of control, too overwhelming or perhaps they may feel nothing at all – numb.

Self-harm is an outlet for these emotions. Taking physical action allows a person to release feelings from their body which often brings an experience of calm, self-soothing or relaxation. Alternatively, it might be a way of feeling something when their body is so numb that nothing else seems to bring them back to the present.



MYTH #2 "Self-harm is Attention-Seeking Behaviour"

Self-harm is **NOT** about attention seeking. It may be about attachment seeking, coming back to the here and now or releasing huge emotional overwhelm from the body. There are many reasons why people may self-harm. Just a few examples are:

- It may allow a person to **express feelings of rage and/or gain control** where they have none
- It may be an act of punishment where a person may be **seeking ways to punish themselves because they believe they deserve it**
- It may be a way to **communicate a desire, need or want to receive care**
- It may be a **coping mechanism to feel alive** when a person has dissociated
- It may **stop them from hurting others**
- It may allow someone who has experienced traumatic life events to **manage their overwhelming feelings**



MYTH #3 "Cutting is the only form of self-harm"

Self-harm is the term used when a person deliberately physically hurts themselves when they are managing distressing feelings, emotions and/or are feeling overwhelmed or seeking proximity to someone.

This may be done in a number of different ways:

Direct forms

- Suicide attempts
- Self-injury (without suicidal intention)
such as:
 - Picking at skin, reopening old wounds
 - Breaking bones, punching or kicking
 - Burning, scalding or branding
 - Hair pulling
 - Head banging
 - Overdose with a medicine

Indirect forms

- Substance or alcohol misuse
- Restricting food or binge eating
- Over-exercising
- Sexual risk taking
- Digital self-harm
- Starting fights where physical pain is likely



MYTH #4 "Only adolescents engage in self-harm"



"My emotions are just unbearable. When I self-harm I prefer the physical pain over my emotional pain"

Although self-harm may begin in adolescence, a person can self-harm at any period of their lives. Anyone who experiences a high state of overwhelm, loss of control or sudden social isolation causing significant distress may use self-harm to manage.

Some examples of things that may trigger this are:

- A recent stressor that activates unaddressed early trauma and loss
- An adult who didn't have the opportunity to expand their window of tolerance to deal with stress as a child and is now overwhelmed by present day stressors
- Loss and grief
- Relationship issues
- Struggles with gender identity
- Struggles with sexual orientation
- School or work pressures
- Financial strain

MYTH #5 "It's mostly only white teenage females who self-harm"

Girls are twice as likely to self-harm than boys. However, some other vulnerable groups are:

- Young people who are gay or gender fluid
- Children who have experienced trauma and loss, including neglect and abuse
- People who experience social isolation
- People who have experienced bereavement by suicide

There has also been a recent increase in Black and South Asian young people and those from other non-white ethnic groups who are self-harming*.

*Self-harm in children and adolescents by ethnic group: an observational cohort study from the Multicentre Study of Self-Harm in England



"I can't control much in my life, but I can control when and how I hurt myself and this makes me feel in control again"

MYTH #6 "Superficial self-injury isn't a problem!"



"It's the only way I can show people how I'm really feeling"

It is important that we don't make assumptions about the intent of self-harm.

The 'amount' someone has self-harmed is not reflective of the depth of their emotional distress and all types of self-injury should be cared for medically and treated with compassion and empathic curiosity.

Previous reasons for self-harm may not be the same as the current reason and each episode needs to be explored carefully.

REMEMBER: SELF-HARM IS NOT A MENTAL HEALTH DISORDER OR BEHAVIOURAL DISORDER

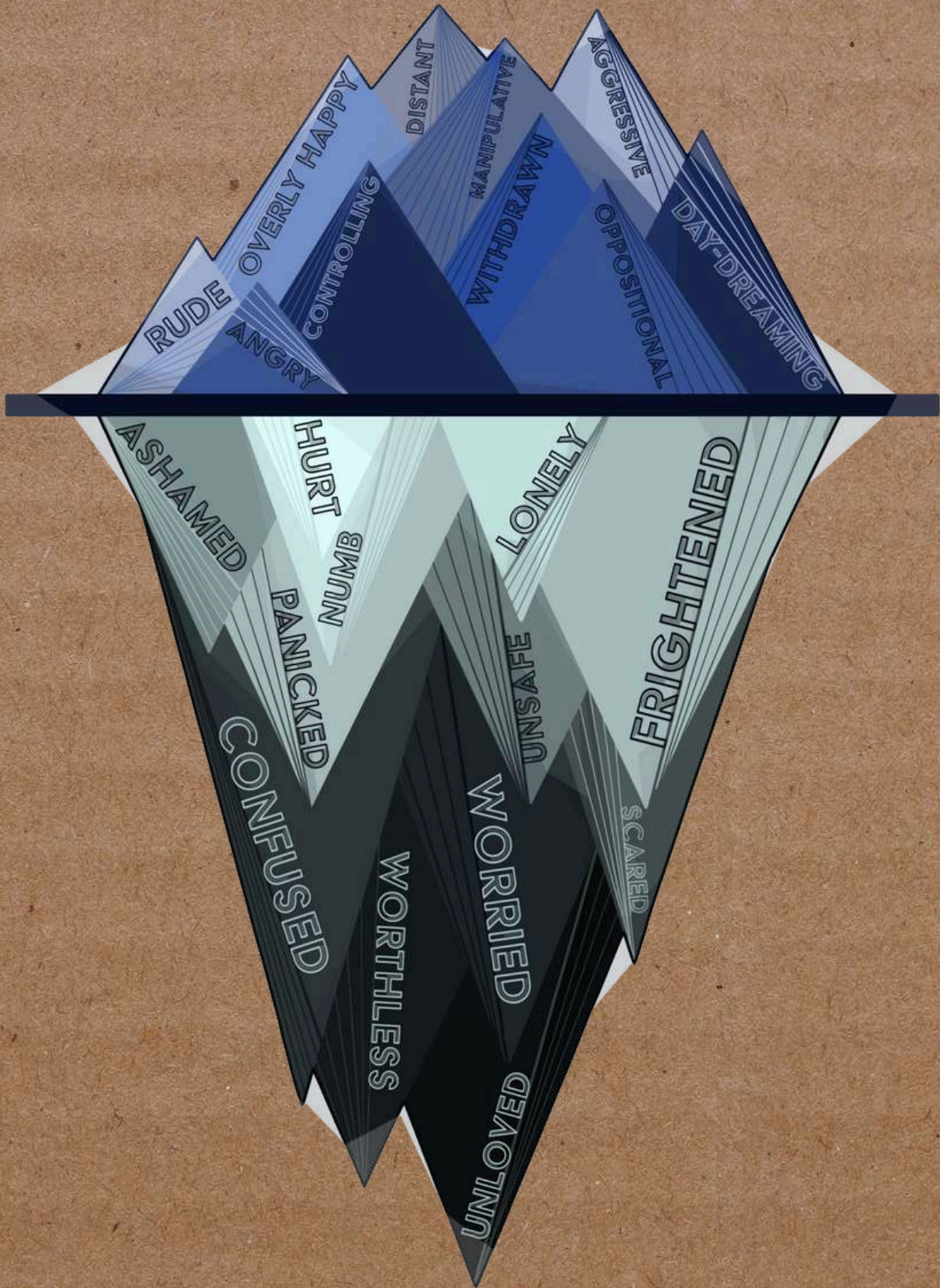
If and when a child or young person attempts to reach out to you about their self-harming, they may be holding hope that you will be on their side and meet their emotional turbulence, judgement-free, with compassion and support. Just you knowing about their self-harm can be a great relief and comfort to a child or young person.

Alternatively, you may be finding it hard to reach out and start a conversation about self-harm with your child or young person. They might be holding feelings of shame, not being good enough and loneliness about it.

It is important to increase your empathy, curiosity and loving understanding during this time. However, it's ok to need support yourself to do this. On the last page of this resource you will find that we have provided a list of organisations that can provide you with information and support.



REMEMBER: SELF-HARM IS THE TIP OF THE ICEBERG



BENEATH THE SURFACE THERE IS A LOT
GOING ON THAT OTHERS CANNOT SEE.



NEW WEBINAR

WHY THE PAIN? SUPPORTING YOUR CHILD WITH SELF-HARMING

Join us for our new webinar to explore and understand why children self-harm, find ways of bringing more calmness, joy and happiness into all your lives and grow your confidence whilst helping your child rediscover theirs.

£30 per person | Monday 25th
November 2024 | 12pm - 2pm

Book online at www.beaconhouse.org.uk/training

USEFUL ORGANISATIONS

SAMARITANS

CALL: 116 123
(OPEN 24 HOURS A DAY)

CALL: 0300 123 3393 OR
TEXT 86463
(9AM-6PM ON
WEEKDAYS) OR VISIT
WWW.MIND.ORG.UK



EMAIL: INFO@HARMLESS.ORG.UK OR
WWW.HARMLESS.ORG.UK

YOUNGMINDS
fighting for young people's mental health

VISIT WWW.YOUNGMINDS.ORG.UK

CALL: 0800 11 11 OR VISIT
WWW.CHILDLINE.ORG.UK

childline

ONLINE, ON THE PHONE, ANYTIME
childline.org.uk | 0800 1111

NSPCC

CALL: 0808 800 5000 OR
VISIT WWW.NSPCC.ORG.UK

CALL: 0300 330 0630
(10AM-10PM EVERY DAY)

VISIT WWW.SWITCHBOARD.LGBT



BLUEICE

BLUEICE IS A PRESCRIBED EVIDENCE-BASED APP TO HELP YOUNG PEOPLE MANAGE THEIR EMOTIONS AND TO REDUCE URGES TO SELF-HARM.

VISIT:
WWW.OXFORDHEALTH.NHS.UK/BLUEICE



CALM HARM

CALM HARM IS AN AWARD-WINNING APP DEVELOPED FOR TEENAGE MENTAL HEALTH CHARITY STEM4 BY CLINICAL PSYCHOLOGIST DR. NIHARA KRAUSE, IN COLLABORATION WITH YOUNG PEOPLE, USING PRINCIPLES FROM THE EVIDENCE-BASED DIALECTICAL BEHAVIOUR THERAPY (DBT).

VISIT: WWW.CALMHARM.CO.UK



DISTRACT

THE AWARD-WINNING DISTRACT APP PROVIDES TRUSTED INFORMATION AND LINKS TO SUPPORT FOR PEOPLE WHO SELF-HARM AND MAY FEEL SUICIDAL.

VISIT: WWW.EXPERTSELF CARE.COM/HEALTH-APPS/DISTRACT