



PATIENTS AS PARTNERS

Brought to you by The South African Depression and Anxiety Group

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Body Crimes – Fighting Pain With Pain

By Janine Shamos

A frightening new 'trend' among teens appears to be the expression of deep emotional pain through the infliction of pain. The South African Depression and Anxiety Group (SADAG), a local mental health NGO has detected an alarming rise in the number of teenagers who self-injure – and the mean age is dropping.

Self-injury is an act of bodily harm done to oneself, by oneself with the intention of easing psychological distress. Paradoxically, physical pain is caused in an attempt to release emotional pain. Self-injury can include cutting, burning or scratching the skin, swallowing chemicals or slamming ones fingers in the door. Some self-injurers may carve things into their chests or stomachs. SADAG has found that 10 – 15% of teens have self-injured although, due to the stigma and shame involved with self-injury, that figure may well be higher. "Many of the teenagers who approach us because they are self-harming have low self-esteem and have no-one that they can talk to about how they are feeling. They have little or no coping skills and confide less in friends and family than kids who don't self-harm", says Roshni Parbhoo-Seetha of SADAG. "We have also become aware that contrary to what many people believe, many boys are

self-injuring too – this is not an exclusively female problem".

A vital point to consider is that self-injury itself is not the problem. Self-injury is a way for the person to express an underlying problem in a "safe" way. "It should be remembered that how a person self-injures is not as important as why", says Janine Shamos of SADAG. As one self-injurer Dineo put it, "We do it because we cannot control our feelings anymore and everything we have bottled up in the past and present has taken its toll". Finding the source of the pain and healing that pain while teaching effective coping skills is the ultimate solution.

Self-injury is a coping mechanism – albeit an unhealthy one. "Many adults deal with stress by drinking too much, working too hard or smoking," says Shamos, "self-injury is not that different". SADAG believes that if we can try and understand self-injury, we could reduce the stigma surrounding it and more people could get help. "Normal' people punch walls or bite their nails, maybe if people could relate more to our cause, we wouldn't feel judged", says Allen, "teach me other ways to survive – show me how to do it – because this is the only way I know". Dr Colinda Linde, a Johannesburg-based clinical psychologist says that she has

Self-Injury – Myths & Common Sense:	
Myths:	Myth Busted:
"It's attention seeking"	If attention was the motivation for self-injury, it is not an effective way to get it. There are far easier, less painful and less degrading ways of attracting it
"They're manipulative"	Self-injury is a private activity. It is secret and shameful. Doctors rarely see the injuries before they've healed – SI is not about its effect on other people
"Self-injurers are hysterical women under 30 who grow out of it"	Recent research shows the difference between male and female self-injurers is closing. There is no evidence to show that people "grow out" of it
"Don't waste your time, we've been dealing with her for years"	A long history of injury often results in being considered a 'hopeless case'. No attempt is made to offer support as it is assumed the person is 'incurable'
"It's purely tension relief"	Each person has their own pressures and triggers that provoke self-injury. It is important to understand each person's life and history



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seen many more cases of self-injury in her practice over the last five years. "For some kids it's an addiction. They do it as a form of emotional compensation and cut for the feeling it gives them", she says.

Self-injurers may have a history of abuse or neglect, experienced a trauma or loss or are being bullied at school. The self harm may be a way of dealing with their emotional pain, a way to give them a sense of control over a situation they feel they can't control like being bullied; or they may be punishing themselves for something they believe is their fault like abuse.

Self-injury is predominantly – although not exclusively – female. One reason for this may be that it is more socially acceptable for males to express anger or pain externally – getting into fights for example. With self-injury, that pain is inflicted on the body, rather than on others.

Many people are likely to know someone who self-injures, and who goes to great lengths to hide it. Self-injury tends to go unnoticed. It is usually a shameful, hidden act and misconceptions about it result in friends and family not knowing how to deal with the problem. Self-injurers will wear long sleeves even in summer to hide their scars and long pants not shorts or skirts if they injure themselves on their legs.

Firstly self-injury is not attention seeking. "It feels shameful and I hide it", says Tracey, "Calling it attention seeking hurts and prevents me looking for help. If I wanted attention, I'd run down the street naked". Neither is self-injury a failed suicide attempt. "I don't want to kill myself", says Allan, "I hurt myself to survive, to stop from killing myself".

Only about 10% of self-injury requires medical treatment, and medical personnel tend to mistakenly assume that the severity of the injury represents the severity of the illness. One alarming comment from nursing staff was that "If it's not an artery, they don't mean it". This type of mistaken belief further hurts the person who is self-injuring and reinforces their belief that they aren't good enough to be taken seriously or worthy of attention.

"I hurt myself so I can cope. I can't express myself verbally so I cut myself to let the pain out. If you want to help me, listen and be gentle," says a 16 year old Busiswe. "If you are hurting yourself – you are not alone, and there is help. All you need to do is ask".

SADAG can be reached on (011) 783-1474 or 0800 567 567 from 8:00am to 8:00pm.

Self-Injury – Strategies That Help & Hurt:	
<i>Things that Help:</i>	<i>Things that Hurt:</i>
Feeling valued and respected Exploring unresolved issues from the past Being assured that feelings are normal Talking openly and honestly Feeling understood Feeling safe to cry Being taken seriously Revealing scars for the first time Speaking to a non-judgemental person Being treated with firmness and gentleness Learning to understand thought processes more Working out alternate coping strategies to cope Keeping a journal or diary Setting small targets and goals Monitoring episodes and identifying triggers No pressure to stop until healthier coping strategies are in place	A dictatorial, judgmental approach Denying the problem exists Lack of continuity Not being heard Deeply ingrained issues not being addressed Preconceived ideas, prejudices and stereotyping Being left alone to cope with the aftermath Ban on self-injury