



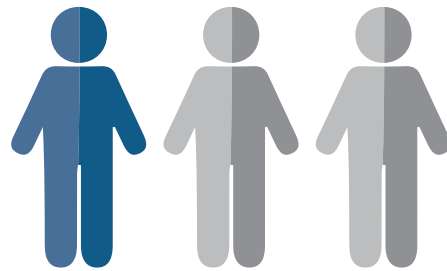
**Self-harm and young
people, a white paper**

THE MIX

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We are failing our young people when it comes to self-harm. As more of them report self-harming and the number of hospital admissions continue to rise, fewer of them know where to turn for help.



Over a **third** of those aged 16-24 have self harmed at some point

1/3

Of those young people, a **third** have done so in the last 12 months



Incidences of self-harm are higher amongst young people who are **LGBTQIA+**; this group is nearly **twice** as likely to injure or self-poison than their heterosexual peers

In 2017, **44,818** people aged between 9 and 27 were admitted to hospital having hurt themselves intentionally. By 2018, the number rose to **57,926**.

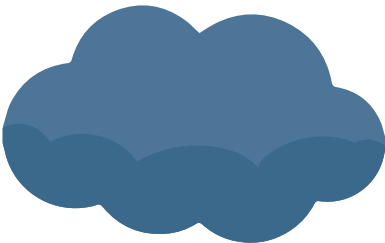
"It should be taught where to get help and what to say. I've tried to go to my GP about mental health, but I didn't mention self-harm because it felt wrong and I didn't know how to bring it up without seeming like I'm attention seeking"

- A respondent to a survey conducted by The Mix

What is self-harm?

Self-harm is often defined as an individual injuring or poisoning themselves. These behaviours are common forms, but we have chosen to define self-harm as inclusive of binge-drinking or drug taking, disordered eating, over-exercising, compulsive sexual behaviour, social withdrawal, staying in toxic relationships or constant mental self-punishment.

Although there are individual incidents of self-harm; the behaviour often becomes repetitive or obsessive. Self-harm is used as a distraction from feelings, with the intention of self-destructing or, if the person in question feels 'numb' or 'blank', in order to feel anything at all. It is not necessarily an indicator of suicidal thoughts; the majority of those who self-harm do so as a coping strategy.



This wider definition of self-harm, and a willingness to understand it as an expression of an emotional state, are important. Some advice can focus solely on stopping the damaging behaviour, but it is also important to help the young person to understand and deal with the underlying emotions. Environments where young people can talk and share, such as the community maintained by The Mix, are essential. A total cessation of harmful behaviour may take some time, so open communication in a safe and supportive environment is a valuable first step.

“Self-harm is a difficult subject and many people do different forms... than just cutting. I struggled to recognise it was self-harm as it didn’t fit the normal stereotypes”

- A respondent to a survey conducted by The Mix

Gathering our data

Where specified, data was obtained through the YouGov survey commissioned by The Mix. This involved 2,000 16-25 year old UK respondents; a nationally representative sample.

Data from The Mix internal survey was also used. This involved an online survey completed by 793 respondents, up to 25 years old. The survey was promoted on The Mix website and through partner organisations.

At The Mix we aim to put young people into centre of everything we do. To inform improvements to support for young people who self-harm, we wanted to better understand the prevalence of self-harm amongst young people. Our research explored which groups tend to be disproportionately affected, their experience with support available and what kind of support they find helpful.

Almost a **quarter** of young people who have self-harmed haven't felt able to speak to anyone, and of those who do, over half are most likely to turn to their friends. Finding and using professional support was confusing and a large proportion of young people surveyed said they didn't know enough about seeking help.

The Mix is a digital charity dedicated to providing information and support for young people. Ahead of Self-Harm Awareness Day on March 1st, The Mix is reaffirming its commitment to supporting young people who intentionally hurt themselves and to providing a safe space for them to share their experiences.

Self-harm is widespread

34%

Of the respondents to the anonymous YouGov survey, 34% said they had self-harmed at some point.

33%

Of that percentage, 33% of 16-24 year-olds said they had intentionally hurt themselves within the last 12 months, with a further 2% choosing not to answer the question.

It's difficult to track how many young people self-harm, especially as the wider range of self-harming behaviours are not always reported as such. The NHS estimate 10% of young people will, but they acknowledge **"this figure is likely to be an underestimate, as not everyone seeks help"**.

"Self-harm is increasingly common in adolescence," said a study published in the British Journal of General Practice (Di Bailey, Nicola Wright and Linda Kemp, 2017). They go on to say that GPs face challenges in understanding young people's self-harming and **"talking to them about it in short, time-limited consultations"**.

"It's become normalised, to the point that it's used to "prove" and define how serious mental illnesses are by tick boxes for GPs, but (self-harm) is rarely actually addressed itself and how to stop engaging. It's treated more as a symptom that will naturally go away."

- A respondent to a survey conducted by The Mix

Who is self-harming?

Young people who identify as lesbian, gay, bisexual, trans, queer, intersex and asexual or aromantic are far more likely to self-harm.



56% of LGBTQIA+ young people said they had self-harmed

- National survey conducted by YouGov



43% said they had self-harmed within the last year

- National survey conducted by YouGov

In the data gathered by The Mix, where all respondents said they had self-harmed in some way, over half said they were LGBTQIA+.

Of the heterosexual You Gov respondents, **30%** had deliberately hurt themselves at some point; **29%** in the last 12 months, a smaller number, but still nearly a third.

Self-harm is often stereotyped as a problem that largely affects young women, and incidences are higher in this group.

79%

Identified as female

- Data gathered by The Mix

44%

Identified as female, compared to **26%** who identified as male

- YouGov group

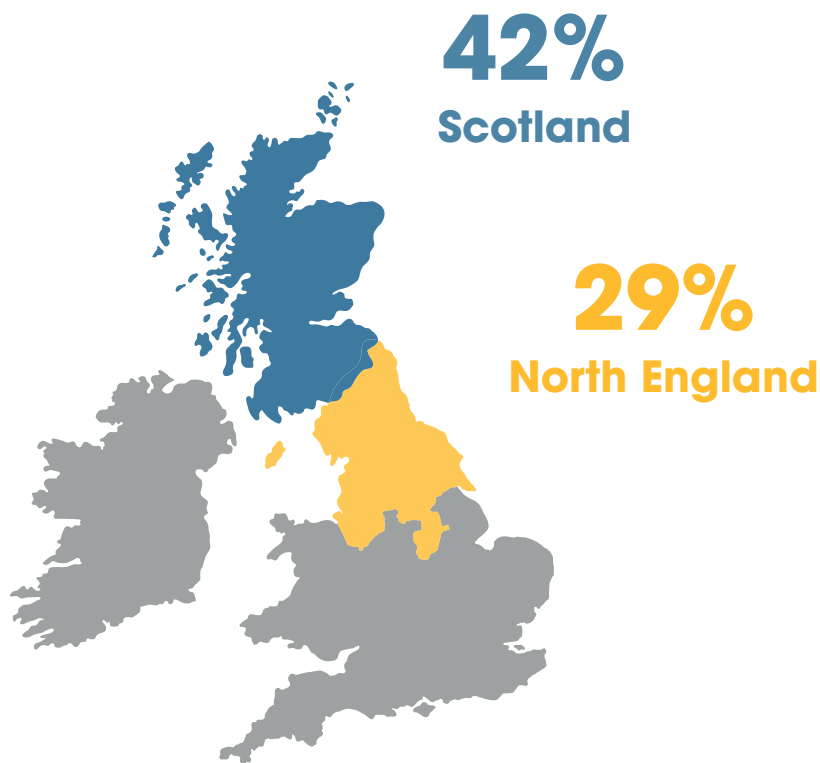


A 2014 study published in medical journal, The Lancet found that **one in five women and girls** between 16 and 24 reported having self-harmed.

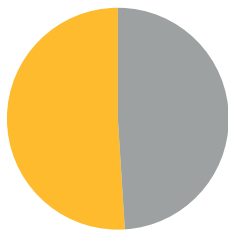
These findings can help identify groups who are more at risk, but care must be taken not to overlook damaging behaviour in other young people. As one respondent to The Mix's survey said: **"I would like to explain to people that not just girls self-harm"**.

All across Britain

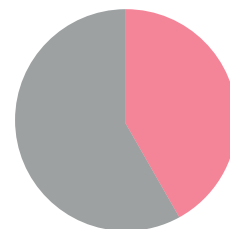
The percentage of YouGov respondents from different regions of the UK who said they self-harmed varied moderately. Although it should be noted that the survey wasn't weighted proportionally by region.



North of England



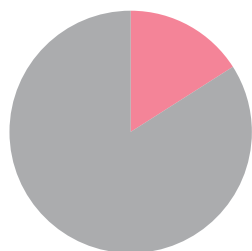
National average



What was notable in the North of England, was that **51%** of those who had self-harmed in the last 12 months hadn't accessed any support, compared to a national average of **42%**.

Nowhere to turn

The lack of knowledge on how to find support and advice is a problem across the whole country and one that needs to be urgently addressed.



Only **16%** of the young people surveyed by YouGov thought support services for self-harm were adequate. When looking at self-harmers from the demographics most likely to injure themselves, the picture is even worse.

82%

Of female respondents who identified as LGBTQIA+, **82%** said there was not enough support available. Current provision is failing those who need it most.

The stigma around self-harm prevents young people from speaking out

21%

Of those who had self-harmed had told **no one** at all
- YouGov survey

15%

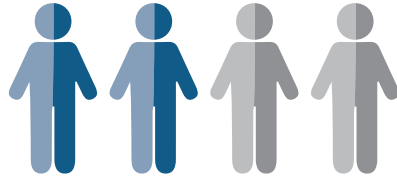
Of young people who were already engaged with an advice-giving charity, had stayed **silent** about their behaviour
- Respondents to The Mix

“I don’t know how to tell people, so where do I start?”

- A respondent to a survey conducted by The Mix

Nowhere to turn

Of those young people who are ready to engage with others, there are barriers to getting professional help.



Only **half** of those who visit hospital after self-harming will be seen by a specialist in that area
- 2016 survey by the Royal College of Psychiatrists

General practitioners are hampered by the need to see many patients in one day.

“A challenge for the primary care clinician is how get to the multifaceted nature of young people’s distress within a short, 10-minute appointment”

- 2017 report in the BJGP

When combined with a young person who is not able or willing to articulate their issues, this squeeze on services means many young people who self-harm do not receive adequate care. There are many distressed young people who are not picked up and cared for by medical services.

“I’ve gone to the places you’re told to go for help, but it’s lacking. People lack empathy or waiting lists are too long or they decide you’re not unwell enough to qualify for help.”

- A respondent to a survey conducted by The Mix

It's always been ignored, pretty much

Those who do visit a hospital, GP or other healthcare professional often find what is on offer to be unhelpful.

30% of self-harming YouGov respondents, 53% of self-harming respondents to The Mix.

Here are some of the comments made to The Mix:

"Most people, including most professionals, don't actually understand self-harm and don't acknowledge the role it plays as a coping mechanism."

"I haven't been able to stop. GPs are very uninformed."

"Self-harm is trivialised as selfish and attention seeking, lots of people don't take it seriously."

"The only professional to help with my self-harm was my school counsellor, my CAMHS [Children and Mental Health Services] worker happily discharged me while I was self-harming and referred me for CBT which was never arranged. My GP offered no support and just told me to stop."

"I didn't receive support at the time I needed it. My self-harm and possible depression was classified as 'normal' stress for someone my age. I had to help myself, on my own."

"When you do go to the doctors they usually say 'it's not a cause for concern' or 'you are just doing it because everyone else is doing it'."

What does work?

Ideally professional services would be well-signposted, readily available and professionals would be well-versed in identifying and dealing with individuals who self-harm. But many of the young people in both surveys expressed that talking to someone, often a peer, was the most helpful.

“I like speaking to people who don't judge me for it, which is usually others who have self-harmed.”

- A respondent to a survey carried out by The Mix

56%

had spoken to a **friend**
- YouGov respondent

11%

had spoken to a **sibling**
- YouGov respondent

67%

had spoken to a **friend**
- The Mix survey

39%

had spoken to a **parent**
- The Mix survey

12%

had spoken to a **sibling**
- The Mix survey

When asked who else they had spoken to in an open question, romantic partners and “strangers online” came up.

What does work?

Online advice was really important to users of The Mix



48% reading up on self-harm
- Users of The Mix



21% taking part in chat discussions
- Users of The Mix

For the YouGov sample, when asked what kind of support they would like to see more of online



55% said live chats



45% said forums

Although peer support was important, many of those surveyed also felt that their friends didn't know how to help or didn't understand, again highlighting the need for **professional tools, resources** and **talking spaces**.

“It was scary to tell my friends and they did nothing”

- A respondent to a survey carried out by
The Mix

“In recent years, my friends and family have been a huge support, but it took them a really long time to learn and accept what constitutes a helpful response.”

- A respondent to a survey carried out by The Mix

Starting and supporting conversation

Young people have told us, as survey respondents and as those who engage with The Mix in other ways, that self-harm is not a problem that exists in isolation:

self-harming is a symptom of a wider set of issues.



It often forms part of a young person's **coping strategy**, meaning that telling them to stop immediately often won't work and can leave the individual feeling as though their problems have been minimised. They may disengage and are likely to continue to hurt themselves.

Spaces where young people can talk openly about the realities of self-harm are essential. Our research consistently shows conversation and a feeling of being understood are the best forms of support.

At The Mix we aim to offer spaces for conversations to take place and information for those who need help or who wish to be informed whilst supporting a friend or family member.

Starting and supporting conversation

Argyrios Terzis, self-harm expert at The Mix, says:

"Self-harm can be many things, but most importantly it is a way of **cop**ing. Through psychological distress, suppression of emotions and low self-esteem and self-worth, individuals develop self-harm behaviours as a coping mechanism. We want to remove the stigma around self-harm to encourage young people know that all you have to do is reach out to a professional and **talk** about what they are going through. The Mix believe that our statistics are vital to developing our **understanding** of self-harm and **improving** our support services to ensure greater safety for young people."

Professor Ann John, Professor of Public Health and Psychiatry, Swansea University, says:

"Self-harm in young people is a very real issue that we all need to take seriously. It is often a way to deal with difficult **distressing emotions**. This survey by The Mix highlights that many young people do not seek help and identifies a lack of knowledge on how to find support and advice. The issues raised about peers' and professionals' knowledge and awareness brings to the fore young peoples' voices about the help and support they need- professional training and tools, as well as, safe talking spaces be they online, live chats and forums. It's important to place the voices of young people who self-harm at the **centre** of service development and it's great to see The Mix doing this."

Professor Ann John, Professor of Public Health and Psychiatry, Swansea University, says:

"Self-harm is always a manifestation of some sort of distress. If **1/3** of young people are self-harming, that means at least **1/3** of them are in emotional distress. As a society, we need to ask ourselves some difficult questions about what's caused this. It's likely to be a range of things, from additional pressure at school, to the impact of austerity to the catalyst impact of social media. **These issues all require attention - and fast.**"

Appendix