

CLOSE TO HOME



DEALING WITH
self-harm



Jana's story

Jana had a lot of emotional pain, yet most of the time she felt numb. She wanted to feel something, anything—even the pain. When she was in her class she used paper clips to cut herself. In her room, she burned herself with her curling iron. Feeling pain made her think, “This is real, and this is not just in my brain.” Jana had to wear long sleeves, even in the heat of summer, so that people would not see the results of her self-injury.

Jana's problems started when she was in high school. She did well academically but she spent a lot of time thinking about death. These thoughts were persistent and intrusive and they affected her ability to enjoy life. Jana began counseling and taking medication. She and her family assumed that her problems were situational and would eventually disappear.

Unfortunately, the problems remained. Jana started college but soon recognized some of the symptoms recurring. She contacted her doctor and again sought counseling and medication. Eventually Jana was hospitalized for a brief time. She returned to college but took a drug overdose, which led to a longer hospitalization.

People at Jana's church watched her go through these hard times. Some people there told her that if she prayed more and gave all of her life to Christ the pain and the difficulties would disappear. Jana did pray—she prayed a lot. But the problems persisted and she thought, “God has abandoned me. God has left me totally. Why is God allowing all this bad stuff to happen to me?” Jana wondered what she needed to do to get back on God's good side.

Jana was referred to a group home where she had a structured routine and had to set

goals for herself. That year, she realized her first goal of moving into her own apartment. Her second goal was to get a job. The group home hired Jana as an employee in client services. This helped her feel responsible and improved her sense of self-worth. The staff was supportive and she was treated as a regular employee. In the meantime Jana's physician changed her medication and started a new therapy. Volunteers from her church supported her by driving her to therapy sessions.

Jana eventually returned to college. Though the transition back to college was stressful for Jana and her family, she remembered the words of her resource manager: “You can't learn anything if you don't try.”

“The most important thing if you have a friend in this situation is to just listen. If I don't want to talk, just be with me.”

Jana now speaks with others about her experiences. “The most important thing if you have a friend in this situation is to just listen,” she says. “If I don't want to talk, just be with me, or talk about something else with me. Talk about the local basketball team, talk about what I'm doing at work, talk about the weather. Unless I bring it up, don't focus on my issues all the time. If you are a bad cook or had another problem, would you want to talk about that all that time? Take your cues from the person who is experiencing these difficulties.”

Why do people self-harm?

Self-harm is a coping mechanism for dealing with chronic and overwhelming emotional pain. By inflicting short-term physical pain, emotional pain is temporarily eased or erased. One reason is that endorphins—natural pain killers—are released in the brain when one is injured. A second reason is that the sense of despair, sadness, and emotional pain is converted into specific sites of physical pain. One person who self-harmed said, “At least when I burn myself I know why I’m hurting.”

People who hurt themselves may do so because of feeling deep sadness, self-hatred, emptiness, guilt, or anger. Or perhaps they have low self-esteem and feel that they are worthless and deserve to be punished. Self-harm is not a way to attract attention; those who self-harm usually try to hide their injuries. In fact, they can feel very guilty and ashamed about hurting themselves. This guilt and shame is isolating and becomes an added burden.

A cycle of self-harm is difficult to stop; it can feel like an addiction. Self-harm is associated with depression, anxiety, and other mood disorders although people who are not mentally ill also self-harm. It can also be associated with trauma and emotional or sexual abuse.

Warning signs that someone you love might be self-injuring:

- They have scars, or unexplained cuts, bruises, or burns.
- They cover up by wearing long sleeves or pants, no matter the temperature.
- They carry or collect sharp objects like broken disposable razors or pieces of glass.
- They seem to have a lot of accidents.

- They use language that expresses low self-worth or the need to be punished.
- There are bloodied wads of tissue or toilet paper, or blood on towels or washcloths in their living area or bathroom.
- They experience dramatic mood swings in a short period.

What people who self-harm may say:

“I need to feel something.”

Those who self-harm can feel empty and numb because emotions have been repressed for so long. Self-injury is something they can actually feel; it seems to help them reconnect to reality, and it helps them feel in control.

“I’m bad and I need to be punished.”

They may feel that people are always pointing out their failures. They have felt a lack of affirmation, acceptance, and love.

“The pressure is more than I can handle.”

Self-injury is like the release of a pressure valve; it can help people feel better temporarily. It may be something they’ve seen others in their peer group do, and they try it to see if it works for them.

“It actually gives me a buzz.”

The body rushes healing agents to the wound and adjusts brain chemistry to make the pain more bearable. This can make cutting physiologically appealing, and it can become addicting.

“It’s just scratches; they’ll heal.”

The body does heal, but a person who self-harms may be underestimating the danger of infections that can go along with types of self-harm.

Self-harm, the Bible, and the Christian story

In Mark 5, Jesus meets a man who lives alone, in the mountains and among the tombs. The story says he is always “bruising himself with stones.” He is isolated; no one will go near him. He acts in antisocial ways by yelling and not wearing any clothes. In attempts to control him, people had tied him up, even binding him with chains, but he had escaped and returned to the wilderness, where he continues to hurt himself. It’s a story of an anguished man isolated from his community. It says a lot of other things about this man; in ancient times, diseases like epilepsy or mental illness were believed to be caused by demons.

But Jesus doesn’t run away from this man, like everyone else. He is not afraid of the man, and he speaks to him. People are amazed when they see the man “clothed and in his right mind” talking to Jesus. Jesus tells the man to go home to his friends. Jesus assumes that community is going to be a good place for him. He also tells him to share the good news with others.

People who self-harm often feel isolated and alone. They can feel that no one understands them. The only way they have found to cope with their pain is to hurt themselves. Many people cope with pain in different unhelpful ways: some drink too much alcohol, some eat too much, some become workaholics, some become bitter and hateful towards others. Jesus loves us and does not want us to hurt ourselves. He wants us to find healthy ways to deal with our pain.

Sometimes people who self-harm may have such low self-esteem that they feel they need to punish themselves. They feel they deserve to be hurt. Jesus doesn’t tell the man

The problem of self-harm

Self-harm is the deliberate attempt to hurt your own body. It’s done with no intention to commit suicide, but simply to harm yourself. This is sometimes called self-injury, self-inflicted violence, self-mutilation, or cutting. There are many methods of self-harm as noted on the websites listed on page 10:

- cutting or severely scratching your skin
- burning or scalding yourself
- hitting yourself or banging your head
- punching things or throwing your body against walls and hard objects
- sticking objects into your skin
- intentionally preventing wounds from healing
- swallowing poisonous substances or inappropriate objects.
- intentionally breaking bones

who lives alone in the mountains, “You are such a failure. Look at what a mess you’ve made of your life.” Instead he offers a new way of living, and the man is freed from the compulsion to hurt himself and from the compulsion to remove himself from his friends and family.

Finding community is important; you may be able to be in community with your family or with friends, but that might not be possible. A church can be like a family because it can be a place where people love and accept you. However, people in the church may not be familiar with the problems of self-harm, so share information with those with whom you feel safe. Awareness about self-harm is increasing, and people can walk with you as you try to choose a different road.

As a church, we are Jesus’ body, and when one member of the body hurts, all hurt. That’s why we all want to work together for health and healing.

Steps toward healing

The first step, if you self-harm, is to tell someone you trust. This can be hard because it may be a secret you've been trying to hide. If you are young, finding an adult you trust is important. It can be a teacher, a minister, or a family friend. Telling one person is not going to solve the problem, but it is a first step.

Healing involves talking to someone who understands self-harming behavior such as a counselor, psychologist, doctor, or psychiatrist. It's okay to ask this professional whether he or she has worked with people who self-harm. The professional will outline how he or she may be able to help you. The road to recovery may involve counseling, medication, cognitive behavior therapy, or in some cases, treatment in a residential setting.

Ways therapists can help:

- They can help you find safe spaces so that you avoid areas where you self-harm.
- They can help you observe your emotions and describe them. Naming emotions is an essential part of coping with them.
- They can help you tell your own story. They will encourage you to think about your life—and speak about your life—in ways that can bring hope rather than despair.

- They can help you find ways to avoid self-harm. They may help you find distractions such as thinking about your pets, thinking about a very good time you've had, or even thinking about what you had for lunch—anything to get your mind going in a different direction.
- If you have a history of trauma, they can help you work through those memories. They can help you discover a sense of self-worth so that you will not want to hurt yourself.

Qualities of caregivers

If you love someone who self-harms, it's important to embrace these qualities:

- humility—recognize your limitations: you can't heal, but you can encourage healing
- acceptance—don't criticize; the person you care for already feels abandoned and alone
- gentleness—people who self-harm may have rough exteriors, but they are fragile and vulnerable
- firmness—not power, but boundaries
- inquiring mind—learn everything you can about self-injury
- hopefulness—people who self-harm can be filled with despair
- calmness—don't overreact to their self-injury; be sure to ask rather than accuse
- empathy—show you care about their emotions, even if you reject the way they are dealing with their emotions
- patience—be a loving presence as they walk the long journey towards healing
- self-care—it's difficult to know a loved one is self-harming; take care of yourself by expressing your feelings and getting the support you need to be a caregiver.

For further awareness:

Books

Clark, Jerusha, with Dr. Earl Henslin. *Inside a Cutter's Mind: Understanding and Helping Those Who Self-Injure*. Colorado Spring, CO: NavPress, 2007.

Hollander, Michael. *Helping Teens Who Cut*. New York, NY: Guilford Press, 2017.

Penner, Marv. *Hope and Healing For Kids Who Cut: Learning to Understand and Help Those Who Self-Injure*. Grand Rapids, MI: Zondervan, 2008.

Van Pelt, Rich, and Jim Hancock. *The Youth Worker's Guide to Helping Teenagers in Crisis*. Grand Rapids, MI: Zondervan, 2005.

Websites

Mental Health America:

www.mentalhealthamerica.net/go/information/get-info/self-injury

Interdisciplinary National Self-Injury in Youth Network Canada:

www.insync-group.ca/

Statistics

- In the United States 4 percent of adults self-harm; 1 percent harm themselves severely.
- Fifteen percent of teens report some form of self-injury.
- Seventeen to 35 percent of college students are involved in self-harm.
- Men and women have an equal prevalence of self-harm.

Patrick L. Kerr, Jennifer J. Muehlenkamp, and James M. Turner. "Nonsuicidal Self-Injury: A Review of Current Research for Family Medicine and Primary Care Physicians," *Journal of the American Board of Family Medicine*, March–April 2010, 23: 240–259.

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CLOSE TO HOME



**Local resources for help with
self-harm:**

**For more information on other Close to Home
titles, go to:**

www.mennomedia.org/closetohome



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