

WOMEN AND SELF INJURY

by

THE BRISTOL CRISIS SERVICE FOR WOMEN



Introduction

We opened 2 phone lines in January 1988, as from our research we felt a phone line which operated when other services were closed would be a good way of reaching women who felt isolated at those times.

Our phone lines are run by women volunteer telephone counsellors who have received some training from us. We have a paid Volunteer Coordinator. Other 'officers' in the group, by which we mean women who take on duties other than telephone counselling e.g. Treasurer, Information Officer, Development Worker, are at the moment voluntary. We work as a collective.

Since we started we have come to realize the extent of the issues around self harm, which can be anything from eating disorders, addictions, to overdosing or self cutting.

Women ring us with various emotional or crisis problems: depression, anxiety, marital problems, sexual abuse, women who have been labelled 'mentally ill', women who self injure and their relatives who want to know how to cope. What comes out in every case is that women feel isolated with their feelings and need someone who will listen and support, who will not judge or condemn.

As volunteers we have all in some way experienced some of these feelings and as a group we listen and share each others life experiences - this is important when dealing with calls that can bring up many feelings from our own lives. As survivors of many different experiences in life, the need to share each others pain and grow stronger from being open and well supported, enriches our lives and brings us together as women.

The Bristol Crisis Service for Women was set up in 1986, in the Avon area, to explore the needs of women going through emotional crises. As many women involved in the group had themselves in some way been through various experiences of self injury and some were survivors of the mental health system, we decided to explore these issues and look at what was needed.

2.

Self expression, the outward showing of ones feelings, especially anger is often repressed in women. While society may feel it's O.K for a man to show some anger, by shouting, even swearing, it is certainly not viewed as being feminine behaviour, fit for a woman to display. Crying to a moderate degree (which often means alone) is allowed for women but is repressed in men. Though we must add that if a woman cries a lot she is labelled 'Hysterical', 'Neurotic' etc.

Women are seen as being the carers in society, always willing to look after others whilst ignoring their own needs. Think about how many women Nurses or Social Workers there are. Women do the listening but who listens to them? - most women find it hard to express their feelings. With society endorsing women's caring role, women unconsciously deny themselves the right to having real human needs. Pushing emotions down leads to energy loss (it's hard work keeping it all down) and on into depression.

Why do women self injure?

In self anger, the feelings are turned in on oneself and to a certain extent may be released by self injury. The women we have spoken to have told us that immediately before they hurt themselves there is a feeling of anger then often a sensation like 'leaving the body', 'watching yourself from somewhere else' while cutting - Having focused the pain into the body, the mind becomes detached, removed from reality. Afterwards there can be a dramatic alleviation of tension.

3.

One startling observation with self injury is the extraordinary absence, or little feeling of pain, even though deep wounds may have been inflicted. Normally if someone accidentally cuts, or injures themselves there follows a certain amount of hurt - nature's way of preventing further damage, whereas with self abuse this reaction does not occur. The minds way of cutting off from the body.

As part of his research into women who self harmed and the body's reaction to stress, Psychiatrist Dr Jeremy Coyd found a high level of natural Opiate in his patients blood. "There could be an alteration in these chemicals and it could explain how women were able to injure themselves so severely without any sense of pain. But you do see similar things occurring; soldiers in battle who receive wounds and continue for some hours in extreme activity before noticing their injuries. There seems to be a similar mechanism which goes on in both these situations; For the soldier it's the height of battle, for these women, overwhelming feelings of extreme misery and depression which push them into this strange detached state."

"It's hard for a psychiatrist to admit this but drugs seem to be of no benefit, they have little effect as a cure."

4.

"My body looks like I feel" was how one woman put it as she talked about her wounds.

Another woman said she wanted to cut out the 'badness and misery' in her. She had started cutting herself while in hospital with Anorexia. As she hadn't been allowed to express her angry feelings, or to 'hit out', she had 'hit in' as she put it. There had been no other ways to express herself and as she said "I was feeling like a pressure cooker, about to explode inside. I had to do something to relieve the tremendous tension I was feeling."

The sad fact is that hospitals, staff and other departments just are not equipped nor have they the training to deal with someone's anger. Hitting inwards through self injury may become the only way out at times.

Clinical Psychologist Dr Dorothy Rowe said in a recent radio interview "Women are used to being at the bottom of a hierarchy. In hospital a woman who is distressed finds herself in a powerless and helpless situation, someone else has control. A psychiatric patient is at the bottom of the heap in hospital where the staff are viewed as 'well' or 'good' and the patients not so good. How I see it is that Hospitals need patients to be obedient and calm and if you're not they have ways of making you calm! But if you are good, you soon discover that nobody takes any notice, but you desperately need someone to pay attention and so you try to show your distress by cutting yourself - the only way you can get someone to notice. Hospitals are getting it all wrong if people need to resort to such measures in trying to get someone to care. Now the woman is left doubly angry - for what's been done to her, as a child and now as an adult".

5.

Is this an attempt at suicide?

It may be important now to point out the differences between self injury and attempted suicide. Some people seem to believe the two are very much of the same identity, in fact it's important to remember the differences.

From what we have said so far you can see self injury is often used as a way of coping, numbing off to overwhelming feelings of despair. As one woman put it "The pain in my body mirrors that of my mind." She went on to say how for her they were short term distractions from her longer term emotional pain. She was very much trying to cope, even though sometimes her injuries were so awful that she came close to death from total despair. But then she was being given little help and support from her Doctors, was told she had a 'Personality Disorder', and was left feeling hopeless, "incurable" as she put it, no wonder she often felt like giving up.

Women who self injure are often likely to be outwardly bright, talented people. Seemingly successful, they keep their secret hidden well from the outside world. Only when life becomes totally overwhelming, out of control, do self injurers actions become more apparent, and/or they seek help.

Interestingly, though disturbingly, we have discovered some correlation between self injury and childhood abuse, often sexual. Or, says Dorothy Rowe "The loss of a parent before the age of 15." Women talking to us have often gone on to describe how they'd been abused as children. Their feelings of self disgust, self hatred, 'badness' and worthlessness have found release in this manner.

O.K so some of us may choose to believe this is making it worse, doubling the pain, but remember, this physical pain is under the woman's control and for her better than the situation which caused the need to self injure.

How then can women be blamed for actions which stem from early abuse, or situations which were not under their control? Are they not just reliving the pain they have't been able or allowed to work through? Their way of controlling it?

Women contact us looking for someone who will listen and support, not condemn. They already feel condemned, why add to their pain?

If we view self injury as a deep expression of inner hurt and not think of it as being 'attention seeking' (for everyone needs attention) then perhaps if we feel disturbed or angry, we should look at our own fears. Maybe it reflects our own inner anger? Maybe we too would like more attention? Who's listening to us? Perhaps we feel in some way responsible for their actions, past, present or future? Perhaps we feel better able to cope than they and this could be partly true. But the eternal child in all of us may be longing for someone to listen and care - how do we deal with that?

In this next section we feel it may be important to talk about how we in the Crisis Service view emotional distress or terms like 'mental illness'. Also the support we give and the need for ourselves to be supported well. We feel this may be a good way of focusing the attention onto how we help and deal with, not only other people's feelings but also our own.

What is emotional distress? Is it an 'illness'?

Emotional distress can affect any of us at any time to some degree. We can all at some time want to shut out the world around us and may not want to share our feelings with others. When the hurt is so great that we can't cope with it we push it aside, deep down in order to survive.

We believe depression is an emotional shutting down, a numbing process which happens when things become too much. A very necessary safeguard for ourselves when we are forced to internalize emotions because of the lack of safe places to give them full expression.

This society places an enormous value upon hiding our emotions and keeping them under control, so we are taught at an early age that it is wrong to express our feelings but we still have to cope with them somehow. Viewed in this way, most illnesses can be seen as a response to the overwhelming stresses in a person's life, a symptom not the cause. Why should what we might choose to call 'mental illness' be any different?

How can I help women who self injure?

We can best help, firstly by recognizing our own fears (which we will deal with in a minute) and then by giving our full attention to what's happening for the woman.

We do not judge the extent of the woman's crisis, instead we concentrate on how she sees her situation, the feelings involved which make her want to self injure.

Although there are limitations to what we can offer by phone, we encourage feelings of safety by letting her know we are with her, will not judge, and that she is in control of the situation.

Although we may encourage the woman to outwardly express her feelings by hitting something or shouting, we never try to stop a woman who is cutting or injuring herself. She is in control, it's her way of coping for the moment. She is expressing the pain she feels within.

We have had many calls from women who are hurting themselves whilst talking to us but our view is, that far better she does it with somebody than alone. She is sharing her pain and that is a start. Many women fear to trust anyone, living in terror of punishment or rejection. We should feel good about ourselves if she chooses to come to us with that fragile trust, and honour her for doing so.

We encourage her to express how she feels by words, sounds or if possible by telling us what's going on in her body and whereabouts she feels this: tenseness, shaking, tightness, is it in any particular place in her body? Focusing on that to encourage her in getting to know and identify her feelings.

It can be good to try getting a woman to name what she is cutting into or cutting out, just what she is trying to get rid of inside. Again here we are aiming for the woman to identify her own feelings and where they came from. Just what is it that has made her so angry that she wants to hurt herself? Then sharing with her what it's like to hit out at something else, tear or screw something up, hit or kick something. Pull, draw, drag out from herself, all that's been hurting, destroying her and giving it to someone or something else.

This most definitely will take some time, more than weeks or months, maybe years, especially for the woman who's never spoken about this before. It takes time for enough trust to build up and we can only share this stage with her, not let our impatience take over. Try and build on the woman's feelings of safety by being there with her and giving lots of reassurance.

There is a lot of ambivalence around the realities of what is actually happening in self injury. By this we mean that although the woman may feel she is cutting out something 'bad', the reality means that she not only shows us how 'bad' she feels but by cutting, reinforces the anger, thus showing herself how really despairing she feels. This may serve to intensify her feelings of worthlessness (what some would call making it worse).

This can set off a pattern or vicious circle which may be repeated frequently.

But let's look at the reality, how else can she express this anger? Society refuses let her and is content to allow women to feel the 'victims'. We have Hospital units which could be an answer - but hopelessly in the end they do not allow that which is necessary from occurring; acceptance of the person as a whole, feeling individual. By not allowing safe expression (may drug if necessary) and by not encouraging patients the right to choose their care, they unconsciously reinforce the 'victim' pattern.

Sadly there is little understanding and other help available and from our findings, little in long term therapy.

How do I Deal with this?

How we are responding when faced with self injury is all important for it is us that the woman sees or hears. How we react will make or break the relationship when trust and safety are uppermost needed. If we can't cope with our own feelings, then how can we expect her to?

Getting good support for ourselves is paramount. Talking about how listening to a woman has made us feel and what it's brought up for us.

In the Crisis Service we hold regular support meetings where we can air and let go of feelings, talk about problems and how we've dealt with them. We need support too, just as much care and attention when dealing with so much distress. If we don't get this support, either we may become so overburdened, we close off (then we may become ill with stress related illnesses) and can't begin to identify just how we really are.

Again, if we are confused, can we fully expect someone else who's in a lot of emotional pain to do better?

But let's not get into blaming, it's not always easy, or possible to get the good support we need. Firstly if we can claim and own our own feelings and not project them onto someone else, it's a good start. Next we have to find someone we trust to share them with and if possible find others to form a supportive group.

If we remember that we've all been hurt in some way, and if a situation has made us react, then chances are someone else feels the same way. We may all feel isolated, get fed up or depressed and that can be our crisis point where we start hurting ourselves - just some way back along the scale from the woman who self injures isn't it?

We are interested to learn of any other groups and organizations who offer similar or different forms of help. Telephone counselling is one way but it is clear to us that so much more is needed as we continue to find so many women who ask for help and support.

If you'd like to contact us, or you require further information, please contact us at this address: The Bristol Crisis Service for Women,
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