

Support for parents who are left ‘bewildered and afraid’ by children’s self-harm

- On September 24th the University of Oxford and [healthtalk.org](https://www.healthtalk.org) launch a new video resource to support parents whose children self-harm
- The resource has detailed video interviews with parents, covering issues such as how to support a young person, treatment options and impact on family.
- Parents also spoke about the challenges of cyberbullying and pro-self-harm websites

Mums and dads who may be overwhelmed by their children’s self-harming can now find support in the experiences of other parents, through a new resource on the website [healthtalk.org](https://www.healthtalk.org).

The information on the site is based on detailed interviews with 39 parents carried out by researchers from the University of Oxford’s Department of Psychiatry. The parents shared their stories from finding out that their child self-harmed to getting help, coping as a family and supporting their child to recovery.

Dr. Anne Stewart, a Consultant Child & Adolescent Psychiatrist at Oxford University and a member of the advisory panel for this new [healthtalk.org](https://www.healthtalk.org) resource, said: “Parents who discover their child is self-harming often feel bewildered, angry and very afraid for the future. They can feel quite guilty or ashamed. This may make it difficult to talk about with friends or with other family members. We’ve created this resource to help parents to realise that they’re not alone in what they’re dealing with and provide in-depth information and advice from other parents who’ve been there too.”

The resource on the charity website [healthtalk.org](https://www.healthtalk.org) is launched on Sep 24. A guide for parents and carers on coping with self-harm is also available.

Self-harm is intentional self-injury, such as self-cutting, or self-poisoning such as taking an overdose. It’s very common in young people, with 10-15% of young people reporting that they self-harm.

“They often do it to deal with bad feelings, feelings of depression, anger, dislike of themselves,” Keith Hawton, Professor of Psychiatry at Oxford University, explains. “It may be done to show other people how bad the person is feeling or to get a sense of control over the person’s life. It may be done for reducing tension. Sadly, sometimes, it’s a suicidal act and the person actually wanted to die.”

Prof. Hawton says “We know that most young people will stop self-harming, perhaps in a few weeks, a few months and sometimes a few years. In a minority it will become part of a longer-term pattern of behaviour, and for some it may indicate longer-term emotional problems, but for the vast majority, self-harm will stop.”

Many parents in the study said that there was very little support available to help them deal with their child’s self-harming. Mary (62) has spent hours trying to talk her son down when he has threatened suicide. She wishes she’d had training in handling distressed people.

Neither is there much support for dealing with the added pressure of parenting a generation who spend so much of their time online. A recent research study overseen by the London School of Economics found that, between 2010 and 2013, the number of young people visiting self-harm websites has increased three-fold and reports of cyberbullying have gone up by 50%. But parents are not supported or prepared to deal with the problem.

Jane (49) said: “If I had problems at school, I would come home from school, and it couldn’t touch me, home was safe, and these days home isn’t safe anymore, because people can get at you, for better or for worse, twenty four hours a day.”

Alexis (50) gets confused when her daughter posts on Facebook that she’s feeling down but won’t want to talk about it. It was after one such Facebook post that Alexis went to her daughter’s house to find that she’d taken an overdose. Over the past few years Alexis’ daughter has turned her life around and Alexis feels strengthened by the experience.

Anna (46) discovered her daughter was connecting online with people who shared pictures of their self-harm wounds so she took away her smart phone and changed the wifi password until her daughter stabilised again.

Vicki (44) spoke of how her daughter started self-harming after being abused by an older boy at school over Skype. The boy was arrested and his computer equipment destroyed but Vicki’s daughter was deeply affected, she said: “I think that’s had a massive effect on her and she’d hidden a lot of it.”

Although parents had many concerns about the role of their internet in their children’s self-harm, there were positive stories too. Some young people had found useful coping strategies or joined supportive forums.

Joanne (44) found twitter a helpful place to share her experiences and says that this helped other people going through the same thing, especially young people who appreciated hearing the parent’s point of view.

The overwhelming advice from mums and dads to other parents is that there is hope and to ‘hang in there’. Mary advises others not to panic, while Vicki says, “keep supporting them and keep giving them that unconditional love because that’s what everyone needs.”

Notes for Editors

This research was conducted by Sue Simkin of the University of Oxford and Nic Hughes of the University of Leeds using research methods devised by the Health Experiences Research Group at the University of Oxford. The [healthtalk.org](http://healthtalkonline.org) resource can be viewed here:

<http://healthtalkonline.org/peoples-experiences/mental-health/self-harm-parents-experiences/topics>

Data released in August by the Health and Social Care Information Centre (HSCIC) showed a dramatic rise in self-harm by 11-19 year olds between 2011 and 2014.

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About healthtalk.org

healthtalk.org is a charity website that provides information on a range of illnesses and other health-related issues through people’s real life experiences shared on video, audio and in text format.

Thousands of people have shared their experiences on film to help others understand what to expect from health issues such as [breast cancer](#), [depression](#), [menopause](#) or [cervical abnormalities](#), including issues such as treatment, changes to daily lives and support.