

I'm not a bot





























Source: Isabella Glick/Flickr/Today, people stand proudly against being fat-shamed or slut-shamed, but his harder to find someone who will stand up and disclose their own cutting or other self-injury. Self-harm is one of the last things people feel ashamed of despite it being far more widespread than you might suspect.A 2012 review of 52 self-injury studies from around the world found that approximately 18 percent of individuals had cut or otherwise deliberately injured themselves in their lifetime. That's almost one in five. Cutting often begins during the teenage years, average, between the ages of 12 and 14. It's surprisingly common during this period in particular. Studies show that between 13 and 23 percent of teenagers have cut, burned, or otherwise deliberately injured themselves. The technical term for cutting is non-suicidal self-injury, and its defined as the deliberate, self-inflicted destruction of body tissue. But keep in mind two important facts: First, cutters aren't trying to kill themselves. By contrast, they often self-harm to feel alive, rather than numb. Second, self-injury must, by definition, be for purposes not socially sanctioned. So, no matter how you feel about your daughters nose or belly button piercing, it doesn't count as self-harm. But cutting, burning, carving words or symbols into one's skin, painful hair-pulling, or literally banging one's head against the wall certainly does. And if you're a parent, you need to know that your child's self-harm is not a sign of mental illness, but a sign of emotional pain. The physical pain of cutting not only diffuses negative emotion, but it can also create a sense of calm and relief. Because it works almost instantly, cutting is highly reinforcing, even as addictive. Individuals who cut describe the sensation as an escape or a release of pressure, similar to how people suffering from bulimia describe purging. Eventually, the brain starts to connect the relief from emotional pain with cutting. This creates a strong association, or even a craving, that can be difficult to resist. And while most people who self-injure do so for two to four years, there are many who continue on well beyond that time frame. The frequency of self-injury also varies; some do it daily, while others can go weeks, months, or even years between episodes. Reason #2: People who cut are their own harshest critics. A 2014 study asked college students who cut themselves, plus a control group of non-cutters, to keep a daily diary of their emotions for two weeks. The biggest difference between those who cut and those who didn't? People who cut reported feeling dissatisfied with themselves much more often than non-cutters. This dissatisfaction manifested as harsh self-criticism. Indeed, anyone who self-injures is really hard on themselves, and they sometimes carry their criticisms into their skin: fat, stupid, failure. Interestingly, a 2012 study showed that harsh self-criticism is most strongly related to self-harm, rather than other, more indirect forms of self-injury, like eating disorders, drinking, or drug abuse. Reason #3: Cutting can be a way to stop feeling numb. In particular, individuals with a history of trauma may self-harm to take control of their own pain or to feel something other than numbness. Reason #4: It's an alternative outlet for emotional pain. Kids raised in a household where sadness, hurt, or disappointment gets invalidated or mocked start to believe that it's not okay to feel bad. They turn to cutting as an acceptable way to feel pain; they're not allowed to feel it emotionally, they'll let it out physically. In short, think of cutting and self-harm as another way to express emotions that aren't being acknowledged or validated. Reason #5: Cutting can be a way to feel something other than numbness. 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People who self-harm may: frequently criticize themselves have troubled relationships question their personal identity or sexuality live with emotional instability have an impulsive nature have feelings of guilt, hopelessness, or worthlessness Upsetting events can trigger the impulse to cut. If someone is cutting, they might: frequently have fresh cuts, particularly on the arms and legs have scars from previous cuts keep sharp objects like razor blades and knives on hand cover up their skin even when the weather is hot make excuses about cuts and scars that just don't ring true A person who cuts may also engage in other self-harm behaviors such as: scratching or picking at wounds burning themselves with cigarettes, candles, matches, or lighters pulling out their hair If you discover that a loved one is cutting, reach out to them. If you find out your friend is cutting, remember that you aren't responsible for their behavior or for fixing it. But you might be able to help. What your friend needs right now is understanding, so let them know you're there for them. It's important that you talk to them without any judgement. Suggest that they talk to their parents about cutting. If they aren't comfortable with that, suggest they speak with a school counselor or other adult they trust. If you're very worried and don't know what to do, tell your own parents or a trusted adult. If your child is cutting, they need compassion and guidance. And they need to know that you love them no matter what. Punishing them or purposely embarrassing them will be counterproductive. Make an appointment to see your pediatrician or family doctor right away. Have your child examined to make sure there are no serious wounds or infections. Ask for a referral to a qualified mental health professional. You can also do some research on your own to learn more about self-injury, strategies for overcoming it, and how to avoid relapse. Once a therapist sets a treatment plan, support your child in following it. Consider joining a support group for parents of people who self-harm. If you have a friend who is self-injuring, urge them to see their doctor or mental health specialist. They have enough on their plate, so try not to pile on with disapproval or ultimatums. Don't imply that they're hurting people who love them because guilt doesn't work and often can make things worse. They won't change until they're ready to do so. Until then, continue spending time with them and ask how they're doing. Let them know that you're ready to listen if they want to talk and you'll support them in their recovery when they do seek help. Cutting isn't usually an attempt at suicide, but an accidental injury can quickly become life-threatening. If someone you know is bleeding heavily or appears to be in immediate danger, call 911. Cutting can exacerbate negative emotions. It can also lead to worsening mental and physical problems such as: increased feelings of guilt and shame becoming addicted to cutting infection of the wounds permanent scarring severe injury requiring medical treatment accidental fatal injury increased risk of suicide Self-harm can turn into a vicious cycle seemingly without end but it doesn't have to be that way. Help is available. Self-harming behaviors can be successfully treated. The first step is to speak to a doctor. A mental health evaluation will determine if there are contributing conditions such as depression, anxiety, or personality disorders. There's no drug treatment specifically for self-harming behaviors. But if there is a coexisting mental health disorder, medication may be appropriate. The treatment plan will take all this into consideration. The main treatment is talk therapy (psychotherapy). The goals are as follows: Identify triggers. Learn methods of managing emotions and tolerating stress. Learn how to replace unhealthy behaviors with positive ones. Work on relationship skills. Develop problem-solving skills. Boost self-image. Deal with traumatic events in your past. Along with individual therapy, the doctor may recommend group or family therapy. For those who have severely injured themselves or have had suicidal thoughts, short-term hospitalization may be helpful. Here are some ways people can support their own treatment: Stick to the treatment plan. Ask for help when you need it. Avoid alcohol. Don't take any drugs that haven't been prescribed by your doctor. Exercise every day to help boost your mood. Eat well and don't skimp on sleep. Keep in touch with friends and family. Make time for social activities and hobbies. If someone you know is cutting, there's help available. Ask your family doctor, therapist, or local hospital for information about support groups in your area. Other resources include:

**How to cut down on prednisone. How quickly can you decrease prednisone. Prednisone cutting back. How to cut prednisone in half. Cutting down prednisolone.**

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