BBC

Self-harm common in teenagers, Australian study shows

One in 12 people self-harm in their teenage years, a long-term study has found.

For most people the problem will resolve before adulthood but for 10% it will continue into their adult lives.

Teenage girls are more likely to self-harm than boys and are at greater risk of continuing as young adults.

The Lancet study findings have important implications for the treatment of mental health issues and prevention of suicide in young adults.

The study looked at almost 2,000 adolescents in Australia, repeatedly surveying them over a period of 15 years.

Researchers found that anxiety, depression, heavy alcohol use, cigarette smoking and cannabis use were all associated with self-harm.

The study suggests that self-cutting and burning were the commonest forms of self-harm during adolescence.

As 90% of teenagers who self-harmed stopped before they reached adulthood, the research should offer some reassurance to families, schools and clinicians, the authors of the study say.

But, Marjorie Wallace, chief executive of the mental health charity SANE, said:

"The figures showing that 90% have stopped by the time they reach their twenties should not seduce us into thinking that self harm is just a phase that young people will grow out of".

Suicide risk?

"Our research shows that counter to common perception, people self-harm and continue to self-harm at times throughout their lives to protect themselves from attempting suicide and their families and friends from experiencing their mental pain."

Because of the association between self-harm and suicide, the researchers suggest treating common teenage mental health problems could be part of an "important and hitherto unrecognised component" of preventing suicide in adults.

"Self-harm is one of the most significant predictors of completed suicide, " a lead author, Dr Paul Moran, of King's College London, said.

Of the people who have died by suicide, around 50-60% have a known history of self-harm, according to Professor Keith Hawton, Director of the Centre for Suicide Research, University of Oxford.

How many people who have self-harmed die due to suicide, is less clear.

'Hidden population'

But Professor Keith Hawton, who was not involved in the study, said the findings could broaden the focus of the Suicide Prevention Strategy for England, which he is working on.

"We now know from studies like this one..... that there is a very large population of youngsters who are self-harming in the community.

And we estimate about one in eight of them go to hospital. So this is the hidden population," he said.

"Though a focus on hospital management is crucial, what we should perhaps be thinking more of is the management of self-harm at a community level, particularly how schools respond and how families can be helped to respond," he said.

The authors say it is important that people living or working with young people are able to spot signs of distress and find the help they deserve.

"Otherwise there may be persistent ramifications in later life," Dr Paul Moran said.

Sue Minto, Head of ChildLine, which last year dealt with 30,000 contacts from children about self-harm, suicide and depression, said:

"In cases of self-harm it is vital to discover what is driving the child to take such drastic action.

Something is obviously making them extremely unhappy or frightened and until this is resolved it is likely they will continue to injure themselves or, in extreme cases, be driven to suicide".

REUTERS

One in 12 teenagers self harm, study finds

One in 12 young people, mostly girls, engage in self-harming such as cutting, burning or taking life-threatening risks and around 10 percent of these continue to deliberately harm themselves into young adulthood, a study found Thursday.

Since self-harming is one of the strongest predictors of who will go on to commit suicide, the psychiatrists who conducted the study said they hoped its findings would help galvanise support for more active and earlier intervention for people at risk.

"The numbers we're talking about here are huge," said Keith Hawton of the Centre for Suicide Research at Britain's Oxford University, who reviewed the findings at a briefing in London.

George Patton, who led the study at the Centre for Adolescent Health at the Murdoch Children's Research Institute in Melbourne, Australia, said the findings revealed a "window of vulnerability" when young people were in their mid-teens and often struggling with emotional control.

"Self-harming represents a way of dealing with those emotions," he told the briefing.

In a report of their work in the Lancet medical journal, Patton's team also said young people who self-harm often have mental health problems that might not resolve without treatment.

"Because of the association between self-harm and suicide...the treatment of common mental disorders during adolescence could constitute an important...component of suicide prevention in young adults," they said.

Self-harm is a global health problem and is especially common among girls and women aged 15 to 24.

Experts say they fear rates of self-abuse in this age group may be rising.

According to the World Health Organisation, almost a million people die from suicide each year, giving a mortality rate of 16 per 100,000, or one death every 40 seconds.

In the last 45 years, suicide rates have increased by 60 percent worldwide.

"MELTING POT"

In this study, Patton and Paul Moran of King's College London's Institute of Psychiatry followed a sample of young people in Victoria, Australia aged from around 15 to around 29 between 1992 and 2008.

A total of 1,802 people responded in the adolescent phase, and 149, or 8 percent, of them reported self-harm.

More girls than boys said they self-harmed -- with rates of 10 percent and 6 percent respectively, translating to a 60 percent increased risk of self-harm in girls compared with boys.

Moran said a combination of hormonal changes during puberty, brain changes in the mid-teens with the final development of the pre-frontal cortex -- the brain area associated with planning, personality expression and moderating behaviour -- and environmental factors such as peer pressure, emotional difficulties and family tensions appeared to be key factors.

"Hormonal changes are highly likely to be important in creating a sort of chemical melting pot which is very ripe for environmental factors to start working on -- particularly difficult family dynamics," he said.

Cutting and burning was the most common form of self-harm for adolescents, with other methods such as poisoning, taking overdoses, and battery also featuring.

By the time the participants reached young adulthood, however, rates of self-harm dropped dramatically so that by age 29, less than 1 percent of participants reported deliberately doing something they knew would hurt or endanger themselves.

The researchers said while it was reassuring that around 90 percent of teenagers who report self-harm are no longer doing it in adulthood, it was also important to recognise the high risks for the 10 percent who continue to do so as they grow up.

Hawton said previous studies had shown that self-harmers who come into hospital during their teenage and young adult years are 100 times more likely than the general population to commit suicide.

(Editing by Paul Casciato)

telegraph.co.uk

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Most self-harming stops by twenties;   
Nine in ten self-harmers grow out of the problem by the end of their teens, according to a study which found the problem is usually an adolescent phase.  
  
**BYLINE:** By Nick Collins Science Correspondent  
  
**LENGTH:** 427 words

At least **one in 12** young people are thought to deliberately harm themselves during their teens, with girls 60 per cent more likely to do so than boys.

But the problem resolves itself spontaneously by the late teens in about 90 per cent of cases despite the fact many victims receive no treatment for their problem, according to the first study ever to follow teenage self-harmers into adulthood.

The research showed that while girls were more likely to deliberately hurt themselves, boys who did so put themselves at more serious risk, for example by running in front of cars or playing "chicken" with trains.

Self-harming is seen as one of the key indicators of **suicide** risk, with 60 per cent of **suicide** victims having a history of self harm, the researchers added.

According to previous studies, **teenagers** who report to hospital for self-harm 100 times more likely to end their own life than the average population.

British and Australian researchers questioned 1,800 Australian 14-year-olds about self-harming at nine stages, ending in their late twenties.

The researchers found that most teenage self-harmers began cutting, burning or otherwise causing themselves serious hurt at the age of 14 or 15, and that by their 20s nine in ten had stopped doing so.

Dr Paul Moran, of King's College London, said: "The study did not measure whether the participants had interventions, but there is no firm evidence that any treatment to prevent self-harm works."

Writing in The Lancet, the authors concluded: "Our findings suggest that most adolescent self-harming behaviour resolves spontaneously."

Prof George Patton, of the University of Melbourne, Australia, said the problem could be caused by changes in the adolescent brain during the transition from childhood to full adulthood.

He said: "There are profound biological changes that happen at the time of puberty and many of these are hormonal.

"It is likely that these changes underpin the rise in difficulties in emotion that many adolescents report, in particular adolescent girls.

But then there is a great gap before the structures that are involved in emotional regulation fully mature.

"The prefrontal cortex, which is crucially involved in emotional regulation, in planning, in problem solving - that is now developing apace and will continue to develop until at least the mid-20s.

"Developmental psychologists have talked about a 'developmental gap' in brain development which occurs during the mid teens where these problems related to emotional control - such as self-harm - become a lot more common."

The Guardian (London) - Final Edition

November 17, 2011 Thursday

Study reveals **one in 12** adolescents engage in self-harm: At-risk group often abuses alcohol and narcotics Incidence rate on rise for women aged 15 to 24  
  
**BYLINE:** Sarah Boseley Health editor  
  
**SECTION:** GUARDIAN HOME PAGES; Pg. 15  
  
**LENGTH:** 746 words

**One in 12** adolescents self-harm but most will stop in early adulthood, according to a study of the scale of the problem and the reasons why young people want to hurt themselves.

The extent of the problem - which is worse among girls, of whom one in 10 self-harm - is exposed in the study published in the Lancet, which followed nearly 2,000 young people from the age of 14 to 29.

It points to the emotional vulnerability of **teenagers**, prey not only to a maelstrom of hormonal changes but also complex developments of their brain.

Many of the same young people who self-harm in secret are also drinking to excess, taking drugs and suffering depression and anxiety.

The study was carried out among young people in the state of Victoria in Australia, but the authors say the picture is no different in the UK.

These **teenagers**, said Professor George Patton, from the centre for adolescent health at the Murdoch Children's Research Institute in Melbourne, who is one of the authors, "could be said to be on a fast track to adulthood.

They are the kids who are at the margins of their family, on the margins at school, who are engaging with early sexual activity, who are using drugs and alcohol from an early age.

This group of kids is at the highest risk of self-harm."

Such young people were identifiable and could be helped.

"We are talking about a window of vulnerability which lasts through the mid-teens, where we believe a social scaffolding for young people is very important," he said.

"By that I mean young people are going to be most protected from self-harm by good connections and good involvement with their families and good engagement and commitment with their school and good engagement with their peer group."

During puberty, said Patton, important changes to the brain take place, but the frontal cortex matures later than the limbic system, causing an imbalance.

Added to that is what Dr Paul Moran, of the Institute of Psychiatry at King's College London, another of the authors, described as the "chemical melting pot" of hormonal changes.

Under those circumstances, a **teenager** exposed to stress and emotional difficulty could respond by self-harming.

Moran talked of the importance of family factors.

A lot was made of childhood maltreatment and abuse, but also important was "how affection is shared out in families - how striving behaviour is encouraged", he said.

**Teenagers** may feel pressure on them to succeed.

"Affection can be conditional on success.

That can be very toxic in a family."

Self-harm is one of the strongest predictors of **suicide**, the authors say.

It is especially common, and seems to be on the rise, among young women between the ages of 15 and 24.

The study recruited nearly 2,000 schoolchildren in 1992 and tracked them through to 2008, collecting data nine times in total on a whole range of behaviours.

Self-cutting and burning were the most common forms of self-harm in adolescence; some of the other methods included poisoning, overdosing and self-battery.

Self-harm in adolescence was associated with depression and anxiety, antisocial behaviour, high-risk alcohol use (which doubled the risk), cannabis use and cigarette smoking.

Sue Minto, head of the NSPCC's ChildLine, which last year dealt with 30,000 contacts from children about self-harm, **suicide** and depression, said it was vital to find out why a child self-harms.

"Something is obviously making them extremely unhappy or frightened and until this is resolved, it is likely they will continue to injure themselves or, in extreme cases, be driven to **suicide**," she said.

"Many of the children who contact ChildLine start to self-harm because they are being abused in some way.

They need help to resolve these problems and they also need to be reassured that whatever is causing them deep anxiety is not their fault."

Lucie Russell, director of campaigns at Young Minds, said self-harming was getting more common.

"What's made it worse are the online communities around this.

It is the same as with the pro-anorexia sites.

It is about supporting each other, but it isn't always about supporting each other - it is about 'this is OK to do'." One of the reasons it appeared to be on the rise, she said, could be "that it is so pressurising, growing up in this society, with all the social networking and bullying as well".

Captions:The NSPCC's ChildLine dealt with 30,000 contacts last year from children about problems such as self-harm, **suicide** and depression Photograph: Linda Nylind

The Independent (London)

November 17, 2011 Thursday   
First Edition

One teen in twelve self-harms;   
HEALTH  
  
**BYLINE:** NINA LAKHANI  
  
**SECTION:** NEWS; Pg. 28  
  
**LENGTH:** 60 words

**One in 12 teenagers** self-harms but most develop alternative coping skills in their twenties, says a study in The Lancet.

Only 10 per cent of self-harmers continue into young adulthood, but this is six times more common among troubled teens. While 90 per cent of self-harmers stop spontaneously, counselling could help prevent more serious mental problems or **suicide.**