

Self-Inflicted Violence: Complex Problem, Simple Solution will explore the meaning and purpose of self-injury, a commonly misunderstood aspect of many people's lives. Etiology, diagnostic implications, and treatment strategies will be explored, as well as the special circumstances that arise from working with those who self-injure.

Workshop Objectives

The participant will...

- Gain an understanding of the multiple perspectives on the etiology of self-injury, including addiction, trauma, and biopsychiatric theories.
- Identify common misperceptions regarding self-injury and will become familiarized with the many meanings and motivations associated with the act of self-inflicted violence.
- Become sensitized to individual variances in the function of self-inflicted violence, and gain insight into cultural and environmental influences.
- Identify treatment practices that are either ineffective or harmful to persons living with self-inflicted violence.
- Become familiar with therapeutic approaches that facilitate healing from self-inflicted violence.
- Identify multiple stressors arising from clinical work with persons who self-injure.

Workshop Presenter

Ruta Mazelis is the editor of *The Cutting Edge: A Newsletter for People Living with Self-Inflicted Violence*, an internationally distributed quarterly on the topic of self-injury, founded in 1990. Ms. Mazelis has provided presentations and publications on this topic, as well as others, to a variety of audiences. She has experience in providing services in mental health and substance abuse programs as well as in service and policy development, and research. She is on the staff of the Sidran Institute, serves on the board of the National Trauma Consortium, is a program manager for the National Center for Trauma-Informed Care, and serves as a consultant to various projects at local and federal levels. Ms. Mazelis can be contacted at 6196 Vo Ash Dr. SW, Carrollton, OH 44615 or by e-mail at rutamaz@eohio.net.

RESOURCES

RESOURCES SPECIFIC TO SIV

The Cutting Edge: A Newsletter for People Living with Self-Inflicted Violence. Quarterly newsletter published by and available from the Sidran Institute, 200 East Joppa Rd., Suite 207, Baltimore. MD 21286-3107; e-mail: cuttingedge@sidran.org; 410-825-8888.

Understanding and Responding to Women Living with Self-Inflicted Violence. A publication of the Women, Co-Occurring Disorders and Violence Study funded by the Substance Abuse and Mental Health Services Administration. Written by Ruta Mazelis. Available for downloading from the web site of the Sidran Institute, sidran.org.

Self-Injury: Psychotherapy with People Who Engage in Self-Inflicted Violence

Written by Robin E. Connors, Ph.D. Copyright 2000 by Jason Aronson Inc. Published by Jason Aronson Inc., 230 Livingston Street, Northvale, NJ 07647-1726; 1-800-782-0015; www.aronson.com

Self-Injury and Self Capacities: Assisting an Individual in Crisis. Written by P. Deiter, S. Nicholls, and L. A. Pearlman. Published in the *Journal of Clinical Psychology*, Vol. 56 (9), 1173-1191 (2000).

between the lines: a documentary about cutting

Film, black and white, 16mm, 21 minutes. Produced by Sophie Constantinou. Fanlight Productions, 47 Halifax St., Boston, MA 02130-4327; 800-937-4113; fanlight@fanlight.com

Understanding Self-Injury: a workbook for adults

Written by Kristy Trautmann and Robin Connors. Copyright 1994 by Pittsburgh Action Against Rape. Available from the Sidran Institute, 200 East Joppa Rd., Suite 207, Baltimore. MD 21286-3107; 410-825-8888; sidran.org.

The Scarred Soul: Understanding and Ending Self-inflicted Violence

Written by Tracy Alderman, Ph.D. Copyright 1997. Published by New Harbinger Publications, Inc., 5674 Shattuck Avenue, Oakland, CA 94609. Available through the Sidran Institute.

The Voice on the Skin: Self-Mutilation and Merleau-Ponty's Theory of Language.

Written by Janice McLane, Ph.D. Published in *Hypatia*, vol. 11, no.4 (Fall 1996). Available for downloading from sidran.org.

Living on the Razor's Edge: Solution-Oriented Brief Family Therapy with Self-Harming Adolescents.

Written by Matthew D. Selekman. Copyright 2002. Published by W. W. Norton & Company, New York, NY.

RESOURCES NOT SPECIFIC TO SIV

Trauma and Recovery: the aftermath of violence -- from domestic abuse to political terror

Written by Judith Herman Lewis, M.D. Copyright 1992. Basic Books, A Division of HarperCollins Publishers.

Risking Connection: A Training Curriculum for Working with Survivors of Childhood Abuse.

Written by Karen Saakvitne, Ph.D., Sarah Gamble, Ph.D., Laurie Anne Pearlman, Ph.D. and Beth Tabor Lev, Ph.D. Copyright 2000 by Sidran Foundation and Press. Sidran Institute, 200 East Joppa Rd., Ste. 207, Baltimore, MD 21286; 410-825-8888; sidran@sidran.org

Using Trauma Theory to Design Service Systems.

Edited by Maxine Harris, Ph.D. and Roger Fallot, Ph.D.. Copyright 2001. New Directions for Mental Health Services Series. Jossey-Bass.

Training curriculum for the reduction of seclusion and restraint.

NASMHPD (National Association of State Mental Health Program Directors) Medical Directors Council and National Executive training Institute. Published in 2003 by NASMHPD and the National Technical Assistance Center.

Helping Traumatized Children Learn: Supportive school environments for children traumatized by family violence.

Written by Susan E. Cole, J.D., M.Ed., Jessica Greenwald O'Brien, Ph.D., M. Geron Gadd, J.D., M.T.S., Joel Ristuccia, Ed.M., D. Luray Wallace, J.D., and Michael Gregory, J.D., M.A.T. Copyright 2005. Massachusetts Advocates for Children: Trauma and Learning Policy Initiative (100 Boylston St., Boston, MA 02116; www.massadvocates.org)

The Truth Will Set You Free: Overcoming Emotional Blindness and Finding Your True Adult Self.

Written by Alice Miller. Copyright 2001. Basic Books, NY, NY.

Toxic Psychiatry: Why Therapy, Empathy, and Love Must Replace the Drugs, Electroshock, and Biochemical Theories of the "New Psychiatry."

Written by Peter R. Breggin, M.D. Copyright 1991. St. Martin's Press, NY, NY.

WEBSITES

healingselfinjury.org

The Sidran Institute: sidran.org

The National Center for Trauma Informed Care: mentalhelath.samhsa.gov/nctic/

Adverse Childhood Experiences Study: acestudy.org

The International Center for the Study of Psychiatry and Psychology: icspp.org

SCENARIO

...A woman is speaking with her physician during a regular visit to update her health status. While discussing the problems and treatment adjustments for her asthma, she mentions that she, although having diligently tried to abstain, has returned to smoking. Her doctor's face turns momentarily rigid, but he says nothing. Her appointment continues, with a few interruptions. When her time is up, but before she can leave the office, she is approached by several policemen. They restrain her and inform her that, as a direct result of her doctor's concerns, she is being taken to an "inpatient facility" so that she will not be able to "harm herself any further." She refuses to go with them voluntarily, but is then taken against her will. Her physician mentions that her refusal to go willingly strengthens his belief that she needs to be managed in whatever way is necessary. After all, she is asthmatic, and smoking has been proven to make her illness worse. It is for her own good that she will be removed to a facility where her behavior can be controlled. Maybe in time she can be trusted to manage herself and not require such intensive intervention as a "treatment." Only time (or her insurance limitations) will tell...

Imagine this scenario occurring in your community, and the probable response to it. If people learned that someone lost her civil rights and was forcibly institutionalized because she had asthma and also smoked cigarettes, there would be a tremendous outcry. The American Civil Liberties Union would be swamped with various communications and demands for action. People in government on all levels would be contacted, and quotes made from the Constitution decrying what happened to this woman. There might possibly be a swarm of demonstrators outside of the hospital protesting her incarceration. Whatever might happen, I am sure that there would be a strong reaction amongst most people. It would surely get the interest of the talk shows and tabloids. People with hypertension would probably hide their salt shakers and those with diabetes would be afraid to enter donut shops where policemen eat. After all, if this could happen to someone with asthma, it could happen to them.

Most people consider this scenario to be impossibility. What goes unnoticed by the vast majority of people in this country, however, is that this sort of unconstitutional and unethical behavior is occurring daily. It happens very often to people who live with self-injury. There is no outcry because the public believes it is acceptable to take away the civil rights of a particular group of people even though they have not committed a crime. This group of people consists of those labeled with a psychiatric diagnosis. People labeled in this way are perceived to be incompetent or dangerous, requiring "intervention." Since many forms of psychiatric intervention are unwanted, it then becomes acceptable to force the various treatments on the labeled people, even if they vehemently refuse them. This is justified by stating that the medical establishment is acting in the patient's best interest. The patient's actual interests are deemed unimportant.

EXCERPTS

The stopped voice becomes a hand lifting knife, razor, broken glass to cut, burn, scrape, pop, gouge. The skin erupts in a mouth, tongueless, toothless. A voice drips out, liquid. A voice bubbles out, fluid and scabby. A voice sears itself for a moment, in flesh. This is a voice emerging on the skin, a mouth appearing on the skin. The body which could not be air on the larynx becomes the stroke of a razor on the breastbone or of a red-hot knife-tip upon the wrist. The bow of the breath, that necessary intermingling of the innards of cells with the outwards of air, becomes the arm-bones like a magic wand ending with the hand erupting in bone-and-flesh magic holding the magic tool which itself vibrates with its molecules and the arm's motions, and slowly or quickly is drawn or placed to make a mouth, a magic bleeding blistering mouth broken out upon the skin, skin which is supposed to be whole, which is supposed to be a perfect and undeniable boundary between the inner and the outer. Everyone agrees that skin is a membrane for telling one thing from another, body from world; it is a definite substance which cannot be disrupted without undoing everyone's agreement about what is and what is not, like the notion that there is only one kind of voice, the sort that emerges from the mouth on the face, and that voice is either uttered or not. And if there is a voice but not coming out of your mouth, or if a normal spoken voice is not the one you say deep inside is actually yours, you have no right (it is said) to make another mouth on your skin; you are damned if you do for no one wants to be reminded of the fact that there are other voices in them speaking all the time, which might in fact take up residence on their skin.

Janice McLane

(Taken from Janice McLane's **The Voice on the Skin: Self-Mutilation and Merleau-Ponty's Theory of Language**, *Hypatia*, 11:4, Fall, 1996, pages 107-118.)

This is yet another secret I must hold to myself because my therapist has given me an ultimatum, either no more hurting myself or we will have to discontinue our therapy. So a little distance comes between us now, a secret that holds great importance which we could both learn from, if we were able to tell her, is kept with all of me's. A sadness that I have to again become dishonest will stay with me until I feel safe enough, until enough time passes that I can tell her about this without running the risk of losing her. I am sad for all therapists and clients who come to this point in their therapy. I wish this would not happen.

JML

To humour myself one day, I went to a palm reader. As I turned my palms upward for the reading, I became painfully aware of the deep red scars from self-inflicted wounds from my wrists up to my shoulders. I had just had 14 stitches removed from my left wrist, 8 from my right. The man looked pale but got to the job. "I can see that you are a very troubled woman, low self-esteem, probably hurt when you were a child or maybe more recently. You will live a long life if you do not cut the lifeline." Yeah, right. As I left the office, I laughed at how bizarre the session was. I mean, really! How many non-troubled women, with high self-esteems, who have never been hurt, slash their arms up? Then I cried. This palm reader was the first to acknowledge that maybe I was in pain, opposed to "doing it for attention." The affirmation of my inner pain was a healing force.

Was it worth the \$50.00? Definitely.

Shelley

Excellent and effective
An excellent worker –
The day flows by
smiling and productive
with co-workers –
the night falls
And with it the facade –
Terror, lost time, flashbacks –
Burning off the filth –
Cutting away the painful memories –
Beating the offending parts –
Whatever it takes
to find a moment of
Relief –
Until Tomorrow comes –
And I begin again –

Amy

You're so stupid!
Can't you do anything right?
You'll never amount to anything.
You make me sick!

The woman slapped her hands
to the sides of her head trying
to shut out the voices. . .

I don't care what they did to you.
Can't you see I'm busy?
Get out of my way!
Go away! Get out!

Slowly at first, then faster
and faster she hits the sides
of her head with her fists
Still the voices tormented. . .

You are so stupid!
You're not trying!
You ungrateful, terrible child.
You'll be the death of me yet!
I wish you'd never been born!

Dizzy, she slid her body down
the wall until she sat on the floor.
Slowly, rhythmically she banged her
head against the wall – faster and
faster. She drowned out the voices.
The woman burst into tears. When
the sobbing ceased, she became
aware of a painful throbbing
on her forehead. Gingerly
she touched the spot. . . and
winced. She felt the bruise
spreading. Tomorrow she'd
wear her hair in bangs.

DoronTheos

May 9, 1997: Why cut?

Who do you cut, he asks,
And how can I help?
Really wanting to know – to help,
Not just a question to shame me.

I cut to feel alive.
 Within an empty soul
 no part of me feels
 Until the razor carves a straight path.

I cut to honor the child.
 She, who absorbed so much,
 received so little joy.
 I am now one with her pain.

I cut out of anger.
 How dare they use me
 As a vessel for their perversions
 As a sex toy to discard!

I cut to remember.
 Never forget the abusers
 Who tore into our body
 Producing trickles of blood.

I cut to emerge from dissociation.
 When I become lost
 Within my many houses
 I need help in coming back to reality.

I cut to attract attention.
 Outweighing my sense of shame
 is the need to cry out and say
 Look! I'm hurting! Please help!

How can you help?
 Be patient with me.
 I've been a cutter
 Almost half a century.
 It won't magically stop tomorrow.

How can you help?
 Honor my pain.
 Honor my grief.
 Honor my anger.
 Honor my memories.

How can you help?
 Talk about it openly
 With true understanding
 With no disgust
 With no anger.

How can you help?

Do not turn from me
When you feel helpless.
Do not discard me
As a hopeless case.

Why do I cut?

To say
What I cannot put in words.
To show
The depth of my anguish.

Paula Hurwitz

depression, pt. 1

*last week,
i fell off my bike
and got scraped up,
and wherever i went
after that,
people looked at me
and said, "you poor thing,
you must be
in so much pain."
and i chuckled some
self-deprecating response
while i struggled
not to scream
because
last week
and last month
and last year
and the year before that
and the years before
i walked around with
lacerated heart
scabbed psyche
and death
in my eyes
and people said,
"why weren't you
in class? why didn't
you turn in your
homework? don't be
so gloomy, think
positive."*

*and they ask
why i cut . . .*

Sabrina

Silent Screams

Inside, deep inside right in the heart's core, I screamed and screamed, the silent screams. They began in my toes and went through my knees and my thighs, growing in power, tingling into my spine and all the way up to my head where they fizzed and boiled with the anguish of trying to get out. Let me out! the screams said. Get me away from this somehow – anyhow. Just get me away. But there was no way out for the screams.

In a matter of seconds I had cut to set them free. Hidden in the sudden spurt of blood the screams flowed away as did the anger and frustration that I was feeling.

I cried with relief.

Judy

It never really seemed like such a big deal, even in the midst of walking around with a carpenter's nail or a razor blade in my back pocket. I was in the middle of what used to be called a nervous breakdown. Now it's referred to as the crisis that comes when a survivor first begins to allow the memories of abuse to come out of the shadows. When I needed a way to move the pain from inside my head to someplace else and a reminder that I could be brave, I would cut my hand... Cutting made me feel real in many of the moments when I called myself a liar.

The reason I write now is to say that I haven't cut myself in years. I don't remember when it was that my cutting ended, but that part of my life is over now. I thought I would always cut, that it was as much a part of me as my laugh or the color of my eyes. Instead, cutting disappeared. It wasn't until recently that I realized that I don't cut any more. I stopped cutting for the only reason that ever made sense to me. I no longer needed to do it.

I remember countless sessions where my therapist pronounced me psychotic or a multiple personality because I cut. He predicted that I would never have success in my life because of my cutting, and that I was going to end up hospitalized and on antipsychotic medication if I continued down this dangerous path. I think about all the other survivors who cut themselves for reasons that are logical to "cutters." The therapeutic community does us a tremendous disservice in their ignorance of our needs.

Had my therapist respected my ability to know what I needed, he would have learned that cutting gave me tangible proof of my abuse. This proof was of great importance to me because I went in and out of remembering the details of my childhood. I wasted years in sessions where nothing had the same impact as the words, "I cut myself." If the cutting had been merely treated as a signal of my pain, I might have discovered my "real" issues a lot sooner. Ironically, my being silenced about the cutting and the memories that accompanied it led to secrecy in the area that had been quieted for all of my abused childhood...

I would no more cut myself today that I would speak to my old therapist. Both served a purpose in my life and are now relics from a long time ago... This is thanks only to me; certainly not to the terrorist who called his treatment therapy and pretended to be a friend.

Carol

...Does it help you to understand that I hurt?
Will that make this easier for you
to cope with?
Will you still understand if I tell you that
I like it.
I do it because I like it, and
I am not ashamed to say so.
It brings me relief from a pain that my stitches do not cure,
- you are right about that,
but a pain that is only stopped, even if just momentarily, by more blood.
I need it and that is a fact of my life...

I won't be calling you any time that I am bleeding.
No – because of you, and because of me.
Because I do not do this to entertain,
or frighten,
or get the attention
of you.
This is not about you.
This is the most “about me” thing in my life and
I will not give it up for you.

MINK

*...Let me tell you. The kind of pain is pain so deep there is no bottom,
pain so great, so intense, there is nothing else.*

*In a state like that, there is so much pain
that the body goes numb,
there is so much pain
that skin
no longer has sensation.*

*In this state, to create more pain would be ridiculous
would be impossible
To cut, in this state, does not cause pain.
To cut, for me, has been relieving.*

*Already in more pain than is humanly possible
why would I make more?
No! I have cut, not out of self-hate, but out of self-love,
not to create pain, but to release pain,
not to kill my self,
but to bring my self back to life from the death of non-existence
not to destroy my self
but to prevent my destruction, spontaneous combustion.*

*Pain kills.
I have cut my self to free the pain.*

TruthSayer