

Young people, self-harm, alcohol and drug use: preliminary findings



The SASH Research Project explored how young people talked about self-harm, drug and alcohol use. This briefing presents preliminary findings regarding young people's accounts of drug and alcohol use, in relation to self-harm. For further details about the study, and data on self-harm, see <http://sashresearchproject.wordpress.com>

Surveys have found that people who report self-harm are more likely to also report using drugs and alcohol (Moran et al., 2012). Qualitative work, examining similarities and differences in how self-harm, drug, and alcohol use is understood among young people is scarce. Data from the SASH Research Project begins to address this gap in knowledge.

Key findings

- Young people who reported self-harm did not report unusually high levels of drug or alcohol use.
- Young people identify both similarities and differences between self-harm, drug and alcohol use.
- Similarities included the harmful nature of all three, their role in managing emotions, and their potentially addictive qualities.
- A major difference identified was the relative social acceptability of alcohol and to some extent drug use, and their association with fun.
- Among some young people alcohol use in particular was identified as enhancing risk and danger associated with their practice of self-harm.

Prevalence of drug and alcohol use in the sample

The 88 young people who took part in the survey reported only slightly higher rates of drug and alcohol use than might be expected in a general population sample (see Black et al., 2011). 60% of the survey sample reported having ever drunk alcohol, with 40% saying they had drunk alcohol in the past month. 35% reported ever having used other drugs, with 22% reporting doing so in the last month.

Good times, and bad times

As well as being asked about whether they had used alcohol, tobacco or other drugs, young people were asked to describe a 'good' and a 'bad' time where they had done so. 54 'good times' stories were provided; and 44 'bad times', most of these concerned alcohol. The preference for writing about 'good times' is perhaps reflective of the positive meanings young people tended to attach to alcohol and some drug use. When asked to talk about why they and other people drank alcohol or used drugs 'fun' was often identified, along with experimentation, socialising and celebration.

Stories young people wrote about 'good times' were characterised by fun and successful socialising or bonding between the young person and their friends.

"being high is great and I was with my best friends"

Cally, 17, cannabis

"Bonding experience with a good friend"

Chloe, 16, alcohol

"I got to be away from the world for a little bit and have fun with my friends, it was an adventure"

Marissa, 16, alcohol

'Bad times' were characterised by negative outcomes in a range of areas including: self-harm, worsening of mental health symptoms, physical problems (especially sickness), and many different negative social outcomes such as difficulties with school, friends or family.

"I broke my clean streak [self-harmed] and never really recovered" Leon, 15, alcohol

"I cut a little deeper than I would have been able to when fully sober" Jay, 16, alcohol

"I felt really sick and thought I was going to die" Evan, 14, 'legal high'

"I got suspended" Laura, 16, cannabis

Emotions, addiction and alcohol use

The language used by young people to talk about self-harm, drug and alcohol use bore a number of similarities, many of which were identified by young people themselves when asked to reflect on this. Using self-harm, drugs and alcohol to 'cope' or deal with emotions, and feeling addicted were the similarities mentioned most often.

Alcohol and drug use were described as being used to deal with emotional distress, low mood, anxiety or 'pain'. 'Coping' with emotional problems was also the most common explanation for self-harm.

"it makes me less anxious" Helen, 16, alcohol

"to not think about my demons. To not feel the pain"

Jane, 15, alcohol

"I have used weed to escape from anxiety/panic attacks in the past" Tam, 14, cannabis

The most commonly identified similarity between self-harm, drug and alcohol use was 'addiction'. Young people talked about addiction frequently in their accounts of self-harm, as in Leon's description of breaking his 'clean streak', above. While many young people did not elaborate further, others discussed 'endorphins' as contributing to the positive feelings and addictive qualities associated with self-harm:

"[self-harm] releases endorphins. It's worse than a drug" AJ, 14

"It release endorphins and you like the buzz" Darcy, 14

Social acceptability

A key way in which alcohol, and to some extent drug use, were said to be different from self-harm was in terms of their social acceptability. Alcohol and for some, drug use, were described as 'normal'; while self-harm was clearly marked as a marginal, socially unacceptable practice. This also extended to the different contexts in which people self-harmed, as compared to using drugs and alcohol. The latter were described as social activities, while self-harm was framed as more usually done alone.

"Self-harm carries a far worse social stigma and can be life-ending if found out" India, 15

"Alcohol and drug usage is more acceptable than self-harming" Gita, 14

"People don't self-harm in a group of other people, it's a private thing" Leanne, 16

This distinction also came up in focus group discussions with young people, who also highlighted the normality of alcohol use in particular, as compared to self-harm.

"You wouldn't think that someone that drinks [...] you wouldn't think twice really about it, but then someone that self-harms you would be like, oh, you'd be a bit more like, oh"

Focus Group 1, 5 Females aged 15

Alcohol and self-harm

Among some of the survey responses and in two interviews, alcohol use and self-harm emerged in these accounts as a dangerous combination.

"If I drink it becomes ten, twenty, a hundred times harder to resist the urge - that's happened a few times" Jay, 16, interview

"I'm not sure that at the time I felt it was a bad experience, but it [an occasion where she drank alcohol and cut herself] opened me up to cutting with razors. Prior to this, I had only scratched with safety pins and the like" Ruth, no age

Drinking alcohol was associated with a lowering of inhibitions, which meant that choosing to cut was easier. Alcohol use was also identified as leading to self-harm being 'deeper' or more risky.

Conclusions

These are preliminary findings regarding how young people talked about and understood the relationship between self-harm, drug and alcohol use. The study found that there are significant similarities in how young people talk about these practices, especially with regard to addiction and coping with emotions. At the same time, there are important differences, with alcohol use especially seen as normal and 'fun'. However, for young people who do self-harm, alcohol use might exacerbate the risk associated with self-harm, and this issue should be discussed openly with young people.

Further findings will be reported on the study website: www.sashresearchproject.wordpress.com

References

- Black, C., Eunson, J., Sewel, K. and Murray, L. (2011), 'Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) National Report: Smoking, drinking and drug use among 13 and 15 year olds in Scotland in 2010', in Scotland, I. (ed.).
- Moran, P., Coffey, C., Romaniuk, H., Olsson, C., Borschmann, R., Carlin, J.B. and Patton, G.C. (2012), 'The natural history of self-harm from adolescence to young adulthood: a population-based cohort study', *The Lancet*, 379, 9812, 236-243.