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Self-injury: Blood flow provides escape for bottled-up feelings



By Nancy Fowler Larson, Special to the Beacon

POSTED 12:03 PM MON., 06.07.10

In fall 2005, Parkway North High School honor student and dance team member Hannah Shayer left for college full of dreams. After graduating fifth in her class of more than 300 students, Shayer was thrilled to be heading to prestigious Amherst College in Massachusetts, one of the nations' top-ranked liberal arts institutions.

"I had gotten into a great school and I was excited about all the opportunities I was going to have," Shayer, 22, remembered.

As a younger adolescent, Shayer had battled sleep problems and some depression. Away at college, without the structure of high school to shape her life, Shayer descended into a deepening gloom. After spring break, instead of returning to campus, she checked into a local psychiatric hospital. By that time, Shayer was sleeping only one or two hours a night, and she'd begun a new, occasional habit: cutting her forearms with razors and knives.

"It was a way to channel that overwhelming pain and depression into something you could see, something you could deal with," Shayer said.



PROVIDED

Hannah Shayer

A CONSEQUENCE OF MODERN LIFE?

Hannah's story is similar to that of other self-injurers, many of whom are teenagers trying to regulate fluctuating emotions. Three of the most recent U.S. and Canadian studies show that 13 to 24 percent of adolescents engage in the practice, often simply called "cutting."

But self-injury is actually a much broader set of behaviors than just harming one's self with sharp objects. It can involve any of the following actions:

- Cutting, scratching or burning
- Scab-picking or other disruption of wound healing
- Hitting oneself or objects
- Infecting oneself
- Embedding objects in the skin
- Bruising oneself or breaking bones
- Hair-pulling

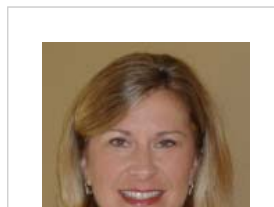
Parents should be on the lookout for unexplained cuts or bruises and a tendency to wear long sleeves and pants even during warm weather.

Self-injury is not a condition, but it is a symptom of emotional distress and often accompanies a diagnosis of major depression or anxiety disorder. Fifty percent of those who harm themselves report childhood physical or sexual abuse. Up to 80 percent also have eating disorders. All participants have bottled-up anger and other feelings, according to therapist Michelle Seliner of S.A.F.E. (Self-Abuse Finally Ends) Alternatives, the only local clinic focused on self-injury, and only one of two in the nation.

"Self-injury is a way that people communicate feelings that seem too painful for words," Seliner said.

At least partially to blame for an increase in harming oneself is our fragmented, plugged-in, impulse-driven society, according to Seliner. Families living away from their hometowns, school-age children going home to empty houses, and even instant, remote communication like texting are all contributors.

"There is a sense of invisibility. Children are no longer being



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INTERSECTIONS



Posted 10:35 a.m. Wed., 06.02.10 - In a Beacon series, illustrator [Sam Washburn](#) takes a look at a St. Louis neighborhood or activity. This month, the focus is on Cherokee Street. This south St. Louis street runs east and west off of Jefferson. Long noted for its antique shops to the east and bargain shopping and Mexican restaurants to the West, the street is now the center of innovative visual arts. (Thanks to Lyndsey Scott and CAMP - Community Arts & Movement Project)

To see a larger, complete image, click [here](#).

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raised in communities where others know their grandparents and their aunts and uncles," Seliner said. "They have the internet and video games; we played outside and rode our bikes."



Michelle Seliner

'YOU NEED TO KNOW WHAT YOU ARE FEELING'

Self-injurious behavior is not considered suicidal, but participants are nine times more likely to commit suicide.

After a summer of therapy and trying several new medications, Shayer returned to Amherst in fall 2006, where "things fell apart rapidly." Using a computer cord, she tried to hang herself from a towel rack. She's still not sure if she managed to make contact with the floor or if her roommate found her.

After being hospitalized in Massachusetts, then again in St. Louis, Shayer was "willing to try pretty much anything." One year ago, her mom Nancy Shayer found Seliner's facility. There, Shayer learned a lot about feelings: how to deal with them, record them and even name them. Shayer explained the process of using tools to sort through a variety of emotions.

"I'm not sad, I'm not angry, I'm not this, I'm not that, but, oh, I'm feeling x," Shayer explained. "As a precursory tool to anything else, you need to know what you are feeling."

Now out of group therapy, Shayer is seeing a private therapist once a week and is on a half-dozen medications for her bipolar disorder and insomnia. She's a senior at Webster University majoring in anthropology and works part-time. It's been more than six months since she's hurt herself, and her mother finally has reason to be optimistic.

"It's been a long and difficult road," said Nancy Shayer. "We're in a place now where she's comfortable with herself and her friends, and she's going out and enjoying herself and dancing and doing the normal things a kid her age should be doing."

PARENTS WONDER WHY

Since the age of 12, Suz-e Beirith's daughter Sarah, 18, has used scissors, razors and other objects to cut her arms and legs several times a week. After her parents hid all the household's sharp items, the perfectionist and star student stole an X-Acto knife to slice her skin. Eventually her daughter used a car cigarette lighter to burn herself because the cutting "wasn't doing it anymore," according to Beirith.

Finally, after years of therapy and bipolar medications, and her recent introduction to S.A.F.E. Alternatives, Sarah Beirith has set a new record of time since cutting herself: 32 days. But the previous six years have taken a huge toll on the Charlack family of six. Beirith struggles to understand the issues in light of their "pretty normal family."

"We hang out together, we play games, we're supportive of each other. She's not being abused, she's not being neglected. That's what I had a hard time coming to terms with," Beirith said. "A mother always feels guilty, like, 'What did I do wrong?' Now I know it's nothing I did wrong."

Parents' reactions run the gamut, according to Seliner.

"Some get angry, some want to sweep it under carpet. It's OK now to talk about anorexia, but it's so taboo to sit around and talk to your girlfriends about (how) 'my daughter is cutting her inner thighs with a razor blade,'" Seliner said.

RECOVERY NOT CHEAP

The recovery process can become a big expense for families. S.A.F.E. Alternatives, which does not take insurance, but is reimbursed by some insurance companies, charges \$125 for an assessment and \$390 for six weeks' worth of one-and-a-half hour group sessions. Many clients attend multiple sessions. Attendance for one year, as in Shayer's case, bears a price tag of more than \$3,500.

Then there is weekly private therapy. That costs \$30 to \$40 in copays for those with insurance. Without coverage, one-on-one therapy costs up to \$120 a session, which adds up to another \$6,000 a year. Figure in psychiatrists' visits and medications and it can really add up.

Long-term care can make the cost skyrocket. At one point, Beirith's daughter lived in a private residential facility that charged \$3,000 a month. A year's stay was recommended. But after her insurance money and state funds ran out, Beirith took her daughter home after seven months.

Still, the bottom line, according to parents, is to do everything you can to help your child and to educate yourself.

"Don't ignore the signs," Beirith said. "Go to the library; get as much information as you can."

Even if money were no object, treatment is still a lifelong project.

"I will never say I'm recovered," Shayer said. "It's an ongoing battle."

Nancy Fowler Larson, a freelance writer in St. Louis, frequently covers health issues. To reach her, contact Beacon health editor [Sally J. Altman](#).

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Karen Conterio

Self-injury: Blood flow provides escape for bottled-up feelings

#641

Jun 09 2010 15:17:04

This thread discusses the Content article: [Self-injury: Blood flow provides escape for bottled-up feelings](#)For additional information please check out: <http://www.selfinjury.com>

Also, S.A.F.E. Alternatives Residential treatment programs will be opening up in mid July 2010 at Edgewood Children's Center, a Great Circle agency, call 800.DONTCUT (366.8288) to set up an admission screening.

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BARROOM CONVERSATIONS

The St. Louis Beacon sponsors every-other-weekly conversations on race, related to the publication's year-long special coverage of issues and situations related to [race in the St. Louis region](#). The lightly-moderated discussions begin with a specific topic, but like all good conversations, veer off in different and rewarding directions. The Barroom Conversations begin at 7:30 p.m. every other Monday in the Half-Pint Room, to the left of the lobby at the [Schlafly Brewery and Taproom](#) at 22nd and Locust. Everyone is welcome. Up next: June 21



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In St. Louis, race affects virtually every important aspect of community life. Yet it's difficult to talk productively about race. *Race, Frankly* invites you to look at race with fresh eyes.

The Missouri History Museum, the Beacon and KETC/Channel 9 have partnered to create a yearlong series of events, in-depth articles and video pieces.

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