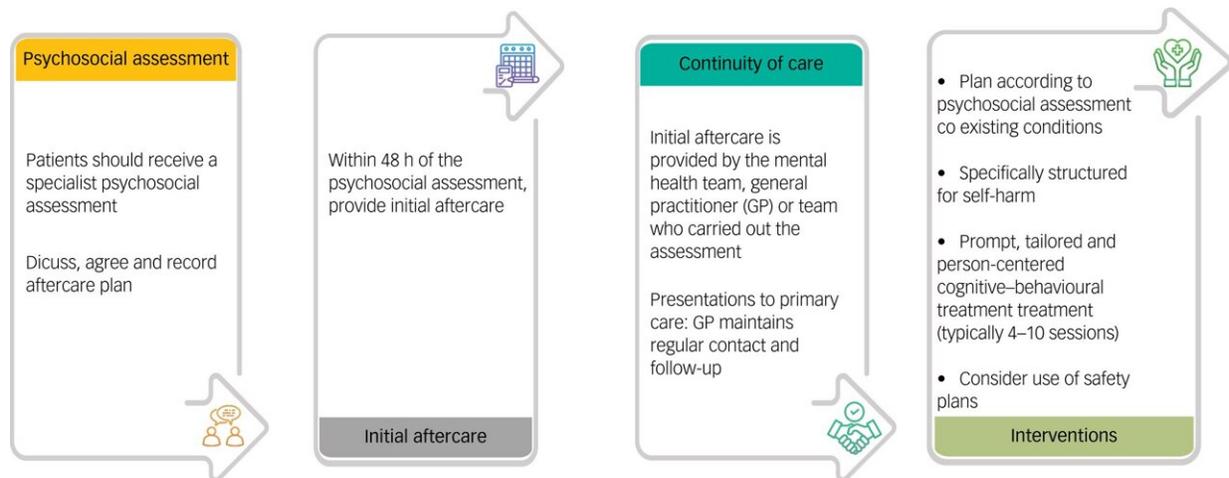


# Study highlights need for better access to help for people who have self-harmed

April 19 2023, by Mike Addelman



National Institute for Health and Care Excellence recommendations for aftercare following self-harm, infographic summary. Credit: *BJPsych Open* (2023). DOI: 10.1192/bjo.2023.27

People who have self-harmed struggle to access appropriate aftercare and psychological therapies, according to a new study carried out by researchers at the University of Manchester.

And the barriers to access that they found, may impact significantly on the risk of them self-harming again or developing other [mental health problems](#).

The study, which was co-designed with people who have experience of self-harm and attending [mental health services](#), highlights long waiting times, poor communication, exclusion, and rejection for some patients, when trying to access much needed [psychological therapies](#) following self-harm.

The article is published in the journal *BJPsych Open*.

The [qualitative study](#) of 128 patients and 23 caregivers revealed that lack of prompt aftercare after seeking help following self-harm and long waiting times contributed to uncertainty, worsening [mental health](#), and further self-harm episodes for some patients.

Dr. Leah Quinlivan, from The University of Manchester, a Research Fellow at the GM PSTRC's Mental Health theme, led the study. She said, "This study has highlighted the urgent need to increase access to appropriate psychological therapies for people who have self-harmed.

"Our study's findings suggest that access to psychological therapies remains low and challenging. Participants experienced failed promises from mental health services after reaching out to seek help following a self-harm episode.

"Many patients told us that lack of prompt intervention, distress and anxiety over long waiting times worsened their hopelessness, self-harming behavior, and suicidal thinking."

Elizabeth Monaghan, a co-author with experience of self harm said, "Research shows that self-harm is linked with higher suicide risk, and that attending A&E should lead to meaningful and timely support. But, sadly, this study showed that this is sometimes not offered or available and, worse, that delays and unhelpful interventions can lead to more distress, harm or suicide.

"Involving people who have experienced of visits to A&E following self-harm ensured that researchers were able to hear first-hand how long waiting times and uncertainties about care and support can worsen symptoms, adding to their suffering. It's vital that researchers learn from people directly affected by services."

Sadika Asmal, a co-author who experienced self harm said, "The research highlights how crucial it is that more provisions and changes to current processes are made in a timely manner to support those in times of crisis, who are often experiencing unbearable emotional suffering. This is so that they can be offered the critical aftercare and psychological therapies they so desperately need. It is not enough to just assess people. The right kind of psychological therapy might help people try find the ultimate cause of their self-harm, which for some people is linked to childhood trauma."

Dr. Leah Quinlivan added, "The risk of further non-fatal or fatal self-harm is greatly raised immediately after someone has self-harmed, so clinical intervention needs to happen quickly to reduce the likelihood of it happening again and risk of death by suicide.

"However, there are few services dedicated to this group, which is why we have an urgent need to develop promptly accessible models of safe and effective care, from well-resourced and supported teams.

"Mental health services are rapidly transforming as part of the NHS Long Term Plan and Community Mental Health Framework, and [self-harm](#) is recognized as a key area for quality improvement and policy initiatives.

"Now, more than ever, we have the opportunity to transform services, particularly if we listen to people with lived experience and the professionals who care for them."

A study by the same team was reported in an article that was also published recently in *BJPsych Open*. That paper reports the views of practitioners who also overwhelmingly felt that barriers to accessing services and long waiting times may heighten risk of further [self-harm](#) for patients, as well making burnout among staff more likely.

**More information:** Leah Quinlivan et al, Accessing psychological therapies following self-harm: qualitative survey of patient experiences and views on improving practice, *BJPsych Open* (2023). [DOI: 10.1192/bjo.2023.27](#)

Leah Quinlivan et al, Liaison psychiatry practitioners' views on accessing aftercare and psychological therapies for patients who present to hospital following self-harm: multi-site interview study, *BJPsych Open* (2023). [DOI: 10.1192/bjo.2023.2](#)

Provided by University of Manchester

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