

Bozo

Lugonja: Hello and welcome to Piece of Mind, a podcast looking at mental health and psychiatric conditions and the science behind them. My name is Bozo Lugonja. I am the research coordinator for National Centre for Mental Health here at Cardiff University and also Swansea University and Bangor University. We are bringing you conversations from patients affected by these conditions alongside researchers working at furthering the understanding of an incredibly complex area of psychology, biology, and psychiatry. This episode, we are talking about self-harm.

So first, I would like to welcome our guests for this episode, Professor Ann John, a researcher from Swansea University, and Si from the charity, Heads Above the Water, who will speak to us about their experiences with self-harm. So I think the best thing to do is to introduce ourselves. So Si, if you could just tell us a little bit about yourself and your background, that will be fantastic.

Si

Martin: First of all, the organisation is called Heads Above The Waves.

Bozo

Lugonja: The Waves. I am so sorry.

Si

Martin: It's funny, people always get some... everywhere we go, there's always variations on it which is really funny. We should have a much shorter name.

My name is Si. I am originally from the lovely Bath, but the part of Bath that says Bath. So I moved to Cardiff in like 2009 for university, and in roughly 2013, I set up an organisation called Heads Above The Waves which is looking to raise awareness about self-harm and promoting positive, creative alternative coping techniques.

Bozo

Lugonja: Excellent. Sounds great. And yourself, Ann?

Ann

John: I grew up in Edgware but I moved to Swansea about 18 years ago now and I first started working as a GP, but one of the things that I saw a lot of, and I do not know if it was because I was young or because I was so interested, was I did a lot of... people would come and see me about their mental health issues, and then as my career progressed, I moved into public health because I wanted to take more population view. I sort of sometimes felt a bit, like in general practice, that I was sort of patching people up and sending them out again whereas I really wanted to get down to the causes of the causes. And then from that, I developed all the skills, what we call epidemiology, which is all about looking at patterns and numbers and that took me into research, which I love. The focus of my research has always been self-harm and the mental health of children and young people.

Bozo

Lugonja: Fantastic. Thank you both. Again, thank you for joining us and taking time out of your schedules to speak to us today.

I think the first thing that I would like to see what you guys think about is how do you define self-harm. It seems to be that majority of people know about it, it is often in the media, but how do we define it. Is it a mental health condition? Is it a crossover with other mental health conditions? What do you both think?

Si

Martin: I will jump in.

Ann

John: Go.

Si

Martin: I think that for us at Heads About The Waves, when we were first thinking about what we wanted kind of organisation to be, it initially kind of came from my personal experience where I was kind of in that kind of “traditional self-harm” whereas the other directors were coming at it from a point of view of self-harm in terms of drug and alcohol abuse. So the kind of interesting thing was that it seemed like there were kind of similar underlying themes, I guess, but just that like manifesting in different ways, so we have kind of from day 1 said that we wanted our definition of what self-harm is, is that anything that is harmful to one’s self. So we include things like drinking, things like drug abuse, things like just engaging in risky behaviours, and like going out and intentionally starting fights for example is one thing that we kind of would have in our definition of what we would call self-harm. Just in terms of things that are harmful to yourself because I think to me it is almost how it comes out is almost secondary to what kind of leads to that, if that makes sense.

Bozo

Lugonja: What, if you do not mind me asking, what were your experiences with self-harm?

Si

Martin: I had a bit of a rubbish time at school to be fair. I was popular, all goody two shoes, really kind of straight A student, did really well. I came from like a really lovely home environment, really loving mum and dad, really great, but I got bullied quite badly. I was a bit of a loner in school. There was a girl and ... I guess one of the kind of overriding things I always had was this feeling of like frustration or like feeling that people did not quite get me, not just in the kind of, I know it is such a cliché thing looking back on it, being like a teenager being like “Oh, you don’t get me” but like, and that is kind of ... I became a bit of a parody of myself almost but like ... to the point where I genuinely liked, you know, I would listen to totally different music and like go in a totally different direction to what everyone else in school was, what my family were, you know what I mean, and

being very kind of ... not really knowing how to kind of express myself and it is something that I still struggle with today which is why I always go stuttering with my words because I worry that I am not making my point in the way that I wanted it to be made, you know what I mean. I would always kind of struggled with this idea of like frustration and particularly anger, like when I was getting bullied and kind of feeling like a bit powerless and a bit helpless. It is kind of messed up as it was like the way I even got kind of into self... the idea that got kind of planted into my head of self-harm was that there was someone I knew who they said, "Oh I feel like that and this is what I do." At the time, I was like "Nah, that's not... that's not how I'm going to deal with these problems" but then there was one day when I was, yes, I was really, really worried, and I cannot even remember what it was about now, but I was really frustrated and I came home and I remember sitting in my room, and it was kind of like, like a pot boiling over, you know. It was kind of... it kind of just got a bit too much and yes, I did not know why and I cannot really say that it helped per se, but it kind of did, if that makes sense. So what kind of was a last resort eventually ended up kind of becoming like my go-to kind of coping mechanism. It went from when I have like a really, really, really bad day to just the most minor thing would kind of set me off and that would be how I would try to deal with it and I suppose just get everything from out of my head because... to this day, I still like ball stuff up quite badly, and you know, I am useless at actually asking for help or accepting it when it is given me, but yes, so that was kind of it and then sorry, I feel like I am talking long. Then there was one day, I have been learning drums since I started secondary school, when I was like 11, maybe when I was like 15, 16 maybe, I would like come home and like ... again I was having like that kind of... I had a bad day at school or something had gone wrong, you know, but rather than taking it out on myself, for some reason, I thrashed my drum kit and I was like I'm going to hit this as loud and as hard and be as noisy as I can, and I pretty much just wore myself out and that kind of had the same kind of effect for me that the self-harm had done in terms of it left me feeling like I had done something to deal with my problems and kind of feeling like it was... like I have done something and that is the important thing and it was not particularly this big, you know, inspirational flash of light where I was kind of like "Aha! This is how I reached self-harm". It was kind of like "Okay, I feel better now" and then that kind of became my... over time, very gradually kind of became my coping mechanism. I would play my drums, and I am sure my neighbours were thrilled, but that became my way of dealing with things and then I kind of developed and I started on guitar, I started writing songs and I started writing things in a notebook and that kind of, yes, it is all kind of little steps that all led towards me kind of replacing that perceived need to hurt myself. So it is kind of, that is kind of gradually, you know, to this day, I still use drums and that is still my –

Bozo
Lugonja:

Go-to.

Si

Martin: Yes. What is really good for my mental health really. I suppose that is kind of what Heads Above The Waves was originally kind of set up about, was the idea that self-harm is serving some sort of purpose but you can get that same kind of purpose from positive things, so originally I was like drums are great, everyone should learn the drums, but then, talking to other people, I kind of find out that it is not the same for everyone and that like, you know, while drums work for me, someone else might go running or someone else might go, you know, writing lists was one that came up...

Ann

John: Sudoku.

Si

Martin: Sudoku, there you go, yes. I still cannot get my head around it.

Ann

John: I do not get that but it does work.

Si

Martin: Yes. See, that is kind of a brief history of my life.

Bozo

Lugonja: That is fantastic. How does that compare to some of the stories of the patients speaking to you, Ann, regarding self-harm? Is that a regular kind of story in terms of Si's or is it quite broad?

Ann

John: So I think Si has described really well when people are finding it difficult to deal with their emotions, particularly in adolescent, late adolescent age and that self-harm, sometimes the purpose of it for the individual is to have some sort of release from that emotion, but there are lots of motivations for self-harm that range from people wanting to punish themselves, to people wanting to die, and those motivations change for each individual over time or even over a day, and one of the things we do in research when we talk about self-harm is we think about it as an intentional self-injury or self-poisoning regardless of motivation and intent, so regardless of suicidal intent, and that is how we look at self-harm and that gives some blurred boundaries with some of the things that Si has talked about, so when we are working in research, we would not include things like eating disorders.

Bozo

Lugonja: Sure.

Ann

John: And the reason... or going out and having fights, and the reason we would not is because the primary purpose is not to self-injure or self-poison oneself. That can be a consequence and I, in lots of ways, agree with Si that there are lots of reasons why people might do those risky

behaviours blurring to self-harming behaviours, but they also blur into other things.

Si

Martin: Yes, yes. That is why it is so difficult as well, is not it, to actually, well, treat, I suppose, but yes, in terms of -

Ann

John: So I think when you are trying to do research that is the way that we have come up with trying to have something that we can look at, but I think there is lots of crossovers with eating disorders, there is lots of crossovers with kids who are doing, you know, traditionally risky things like, you know, having sex early or taking lots of drugs, but also much more dangerous things with cars and sports, and where that crosses over is a thing that we would call ambivalence. That ambivalence is where a young person might be or an older person might be doing quite risky things and it is because they do not care if they live or die about the consequences, and I think that... so those definitions can be quite challenging, can't they, when we talk because people can feel very strongly about things like non-suicidal self-injury, can't they? That that is very different, but I think, in my experience, people's motivations and intents change a lot over time, but I think what was really interesting is that thing about finding alternative ways of dealing with distress and we went through some of them. The other thing which sometimes works is playlist. So people have a specific playlist that they have created that can soothe. Basically, it is about soothing, isn't it, but the problem with that is that it is very difficult for kids in school to get their earphones and sit and listen to a playlist. People almost find it more acceptable to sit there with a Wordset or Sudoku.

Si

Martin: I think it is, because I am, I am from a very like metal kind of background where I like, because I always, I took like great kind of comfort really in like, almost the opposite of soothing, do you know what I mean, like music that was like, really kind of like aggressive and...

Bozo

Lugonja: I completely agree. When was about the teenage years going through, well not going through -

Ann

John: I do not mean soothing music. I mean things that soothe you.

Si

Martin: Things that actually soothe. All right, yes.

Ann

John: Not soothing music. Not whale music.

Si

Martin: Slipknot, yes. That is the thing though. One of the things that I kind of have done in more recent years is to actually start off, you know, with a playlist that is like, start a playlist that is super like, yes like Slipknot or like Every Time I Die which obviously like, "thanks, mum" but actually kind of they start off with that kind of angry intent and actually that kind of, the relation to someone else and one thing I have always just found so powerful through music is this idea that other people have been through the same thing as me and like with Taking Back Sunday, great, great emo band, if anyone is interested. Every single album they have done, there has been something on that I listen to and I go like "Oh, that's me," I mean, particularly like, yes, I love like _____. There is a lot of kind of things that I relate to and knows and so you have a playlist that I have tried to make recently kind of go from like a really kind of heavy band to like something that is maybe still kind of heavy but in a major key, that kind of leads into something that is more positive, that leads into something that is more kind of chill out. It is almost kind of like a step by step kind of thing. As you go through the tracks, you go from being really like "arr" to like "ahh," you know what I mean. So, yes, I think that is a great one.

Bozo

Lugonja: That is interesting. Have you developed these techniques by yourself?

Si

Martin: Yes, kind of accidentally, insofar... yes. So again one of the things that we wanted Heads Above The Waves to be was this, a way of promoting and kind of, almost dispelling the myths around like help lines and these and that. So I remember my sister coming to me with the number for the Samaritans and saying, "I'm worried about you. I think you should ring these people." At the time, I was like "Oh no, my problems aren't important enough for Samaritans." Of course, what I have kind of come to learn now and from sitting alongside Samaritans and also some groups _____ that was the best, that was amazing. There are all sorts of wonderful listening services out there and people who are there for different things they are going through so like there is the Campaign Against Living Miserably, CALM, which like, I have never personally accessed them but like from everything I have seen online, they seem like amazing resource for men and a helpline that blokes can go to. It sounds really like a funny thing to say but...

Bozo

Lugonja: Just one thing I want to actually ask about in terms of the breakdown with self-harm, in terms of male-female, the prevalence in terms of age, the demographics? Is there a specific demographic that is more likely to self-harm? Is there a specific gender that is more likely to self-harm?

Ann

John: Some of these things are really difficult to know about because most of the facts and figures that we have are based on people who seek help from services.

Bozo

Lugonja: So then that would mean that a certain group would be more likely or less likely to seek help.

Ann

John: To seek help and it might be, but we have got certain community surveys, so we do know that self-harm is common among females. The highest rates we see are in sort of 16 to 20-year-olds. When we do community surveys, if we look at like 16 to 24-year-olds, about a quarter of young women have self-harmed at some point in their lives and about 10% of young men. I think people very much underestimate how common self-harm is. For the vast majority, they have done big surveys where they followed kids from school through to their early 30s, and the vast majority of young people will stop self-harming as they get older and that is probably for all the reasons that Si has described in that their lives change. One of the things about, you know, teenagehood and adolescence is the time of huge change. You know, there are all sorts of challenges and separations and exams and things that are part of normal human experience and sometimes, you know, we actually sell it as a time when they are meant to be happy and so some of that, that settles as people get older and they learn ways to deal with that, so much commoner in young women, but for people as they get older who continue to self-harm, the risks become different. So if someone who is much older, say over 65, he starts self-harming or over 75 even then, although the rates are really small compared to young people, it is a much more serious indication of underlying problems.

Bozo

Lugonja: My experiences are very much about what is based upon the media. I have never done any research in self-harm. It is very much about what someone spoon-fed me through the media and through just interactions. So this thought that these people over 65 years old, 75 years old starts self-harming is a really interesting perspective because there is very much –

Ann

John: I think one of the things that people miss, you know, and I would count myself among those is that most of my research is young people, but we have done some work about older people and what you would start realising is the parallels. So in the time, in the way that being young is a huge time of change, so is getting older. You know, you lose work, you have lots of bereavements. There is a change in the way the world is looking at you and suddenly when I was talking with lots of people who work with older people who were doing this work, you suddenly realise that actually these are quite similar age periods in life that are difficult to adjust to.

Bozo

Lugonja: Do you think it is going to become even more, I am not going to say, I am not saying it is going to become even more prevalent, but an interesting

thing to look at in the next 10, 20, 30 years as we begin to live longer, live healthier longer in some respects _____ longer in terms of self-harm?

Ann

John: It is still very rare in older people, so I think, you know, one of the reasons why we do, we look at patterns is that patterns change, and you know, even over my career, I have seen the patterns change, so I think, you know, at the moment, one of the big debates in research world is about is self-harm increasing or not. One of the things that any of us that had been working in the area for a long time would say is that the stigma associated with self-harm because it is a really difficult topic and what that does is it stops people seeking help, but it also stops people talking to people when they self-harm. So that stigma has reduced considerably and we have also got much better at admitting young people, you know, under 16 when they come into contact. So all those things mean that people are seeking help more and we are responding better which can make figures look higher. On the other hand, there could be a real increase. I do not think we know the answer yet.

Si

Martin: When I think, I think an interesting thing, well, actually two things. One is that, you know, in terms of we are talking about like older people self-harming, I think that for one thing, you know, I am very interested to see how like my generation or, you know, generations after me, how if we instil positive coping mechanisms into people's lives, from an early age as well because, you know, we have been asked to primary schools to do workshops with kids about self-harm and that is like mind-blowing, but I think instilling, having positive coping techniques or negative coping techniques instilled from an early age, and especially if they, like Ann says, I think a lot of people kind of work their own way out of things, but at the same time, if they do not or if they do not have, you know, things around to encourage them towards healthy, positive coping techniques, then it can definitely... that can just get ingrained, and you know there is talk about how self-harm can be addictive as well. I think that is, you know, I think that is true. And yes, I just wonder whether that is like long term can have an impact on, you know, our generation.

Ann

John: I really hope so.

Bozo

Lugonja: One thing you mentioned, Ann, was stigma and one of the things we are trying to do with this podcast and with NCMH in general obviously is the education aspect and trying to kind of get rid of any misconceptions, myths or stigmas. One of the big ones that is tied into self-harm is that it is an attention-seeking behaviour. Is that something you guys have ever come across?

Si

Martin: Yes, if I had a nickel, so I keep on thinking about other things to say.

Bozo
Lugonja: Feel free.

Si
Martin: I think re attention seeking, when we have done sessions in like... we do like a teacher training kind of thing where we go and talk to teachers about supporting young people with self-harm, the attention seeking question comes up pretty much every time, but the interesting thing that I would always say is that, well, even if it is attention seeking, is there... you know, what is happening in that person's life that the only way that he can get attention is in a harmful way, you know. What other things could they be doing instead?

Ann
John: I completely agree with Si that I think as well sometimes the fact that people use the attention seeking phrase is about stigma. So I think when you are a teacher or working in emergency department or paramedic, and you are confronted with somebody self-harming, it does not, it is very difficult to deal with, and it can be quite scary. It is not something that people are used to talking about. They are not quite sure what it means. So the easiest way then to deal with someone in distress is to separate yourself a bit from it. Using the phrase attention seeking does that for people and I think one of the ways we combat it is all this awareness rising that we are doing, and I was combating the same thing as Si. As I always say, well, they are attention seeking for a reason and what we need to focus on is...

Si
Martin: Is that reason.

Ann
John: ...is that reason.

Bozo
Lugojna: And it can be a range of reasons. I mean, like I said earlier, the causes, the causes are going to be obviously multitude of different issues. Like you said, it was quite interesting in terms of the life-changing aspects of teenage years and life-changing aspects later on in life and _____.

Si
Martin: Here is one thing that I was going to jump in before as well.

Bozo
Lugojna: Carry on.

Si
Martin: This may be a little bit off topic. Do we think it is harder to be a teenager these days? Or is this just a thing that every generation sets? As in, I am at a tender age of 27, doing workshops in school, I am thinking far. That will be tough, like I would struggle being in school at this age now. Does

every generation say that about kids or is it we have got really intense period at the moment?

Ann

John:

So this is what I think. I think that it is a transition period of life and always has been, but I think there are very different things happening at the moment and that is reflected not just in mental health. You know, we have got reducing teenage pregnancy rates. We have got reducing alcohol, possibly increasing in the use of other substances. So there is definitely a change happening in this generation. How that is impacting on them, I think, is difficult to pick apart because some of those things you could say are good things. A big social change is the online world. That is huge, and so I think things are very different and I guess, I mean one thing, one road I do not want to go down is that usually when I speak about the online world, it is people are very concerned and it is always negative, and I think we have to bear in mind there are huge positive aspects to kids' activity online, both in terms of supporting each other, isolated kids finding other people like themselves. So I think there are huge positive aspects, but I think there are negative aspects, so we have just done a piece of work on cyberbullying. Where cyberbullying is very different to traditional face-to-face bullying is that it does not stop when you go home. You know, it is there all the time and then, you know, young people are particularly sensitive to being excluded. It is an age where you are very sensitive to being excluded and different, and the potential exposure that you have online compared to when people were traditionally bullying is huge, and so I think there are different pressures for the current generation.

Si

Martin:

I think as well, on the being different thing as well. I think that is one of the hardest things of being teenagers, there is that, like, you really want to be your own person and be individual and be unique, but at same time you want to fit in, be part of something, so that is that weird dichotomy that you are trying to deal with on top of everything else and all the weird social pressures and stuff.

Bozo

Lugonja:

It is really interesting that you raised that. Is it harder to be a teenager now? Because I remember way back when before the Internet, before I had the Internet, subjectively looking at it, I do not understand how kids generally like, you know, when you are 12, 13, 14, how they do it.

Si

Martin:

_____ iPhones than me. I am just like what?

Bozo

Lugonja:

It seems almost exhausting to be able to, you know.

Ann

John:

Sleep is a big thing. We also do not know the answers to this yet, but we do know that lots of kids now are on their devices and not sleeping as

much as they did before. So I think there are changes and we are exploring what those changes are.

Bozo

Lugonja: I think definitely it is a really interesting point at which we should be doing research especially mental health with the changing demographics, with the changing access to things like the Internet, and in particular, if we talk about Internet use, Ann, you have been involved in some work recently, a research article looking at systematic review of the relationship between internet use, self-harm and suicidal behaviour in young people. I have just read that out of the paper.

Si

Martin: Oh you missed the best bit though, The good, the bad and the unknown.

Bozo

Lugonja: The good, the bad and the unknown, yeah. Some title here. I mean, looking through it, like you said, it is really interesting that there are positive aspects, there are absolutely negative aspects and, you know, we have to take both in each other. Has anything been particular from the work that you want to highlight that you want to speak about?

Ann

John: I guess from that piece of work, I have spoken already about how the good aspects are for certain marginalised groups like LGBTQ. They can find support online whereas previously they were quite isolated, but I think one of the big things that came out for me from that work was that we will never keep up. So if we think that the way that we can work in this setting is to keep up with all the platforms, it is never going to happen. So I guess the best way that we can work online is by working with young people to learn things like bystander interventions, which is really hard. We all know how hard that is and to be...

Bozo

Lugonja: What do you mean by bystander interventions?

Ann

John: I guess when you see something happening online that you think is bullying or negative or if someone is seeking help, so one of the things we found in that study is that increasingly young people express their distress online, then to equip young people, not to be responsible for that person but to know how to respond enough for them to be going "actually you can't say that." Really, I mean, I sort of do not like the word but it is to be good digital citizens, isn't it, in effect.

Bozo

Lugonja: Yeah, absolutely.

Ann
John:

And we need to teach them that from a young age, I think. And then the only other thing is about delivering therapy online. So one of the things we found was... when young people see things in the news media or YouTube videos, at that age they are particularly susceptible to identifying with things and behaviours being normalised or behaviours being triggered. One of the things you see would say something like, a YouTube video is, unlike before, that video can be shared 300,000 times, and I think we as a community need to be in that space delivering advice and therapy. Now that is not saying that online therapy for young people is going to replace face-to-face work, but sometimes it is a good start.

Bozo
Lugonja:

And that is definitely one of the things we do at NCMH. I mean, we have got a lot of resources on our podcast pages, we will have links to all these papers that we mention throughout the podcast obviously to the charities and to all the work that Ann works with and does, but also at the NCMH website, we have got links to Mind, to _____, lots of mental health charities that are able to help people and are able to point them in the right directions, and I think it is something that we are aware of as a research institute and aware of as an organisation that, you know, the first thing that most people do when they have got an issue is they go on Google or they go on Facebook or they go on Twitter and they start reading there. And it is very much about getting the right information to them as early as possible, so that is why we are actively making these podcasts, so you know, if there is someone who looks up for information on health problems or is interested in mental health problems or the research behind them, they can listen to this, they can access the resources, any resources that we have. So obviously, please, if you are listening to this and you are interested, do check all those resources out, there are lots on there.

One of the things I was hoping to speak a little bit more about was the misconceptions or the myths with self-harm. We mentioned earlier some things that I had not thought of as being self-harm, so going out looking for fights which may not be self-harm as you say but may end up becoming self-harm. I mean, the classical thought of self-harm would be that people cut themselves, however, there are things like extreme exercise, I mean...

Ann
John:

See, that is difficult. So from a research perspective, I probably would not include that in self-harm, but sort of like I said earlier, sometimes those things come from the same places, and I guess that is the difficulty. So the way we talk about it is that it has got to be an intentional self-injury or self-poisoning, but some things that you might not think of, so things like burning and hair pulling and scratching and interfering with wounds, but also sometimes not taking your medication.

Bozo

Lugonja: So it is quite broad. I mean, it is things that you absolutely would not think about...

Si

Martin: I think that is the really tricky thing because, you know, actually — how do I say this without condoning drug use, but as in, you know, someone can recreationally use drugs and it would not be a self-harming behaviour per se, do you know what I mean, whereas it is almost... I suppose I could say the action is almost secondary to the motivation from my own point of view, I suppose, not necessarily from a research point of view, but I think that there is... I think that just in general one thing that is really important is actually promoting like the idea of self-worth and the idea of self-care.

Bozo

Lugonja: Absolutely.

Si

Martin: One thing that I have kind of maybe stumbled upon over the years is the idea that, like, you can do something that is like good for your mental health and you can do things... playing drums for me, for example, like, I just play drums. In the same way that the motivation for your behaviour that causes self-harm, you have got this motivation that can cause self-care. So if I am just practising drums for the sake of my band, Junior, having a new album coming soon, if I am practising drums for that, that is different to me going "I'm in a really bad place right now, I need to go and hit something very loudly." Do you know what I mean? Making the intention that you want to do something to look after yourself. Video games is another really big one. I love video games. When we have been talking to kids in school, this is coming up a lot. And there was a really great TED Talk, and I have been wracking my brains trying to remember what her name was, of a woman sort of talking about the benefits of video games basically, and I am sure one of the things... Essentially what I am hearing is that...

Ann

John: I do picture her.

Si

Martin: Yes, a blonde. So saying that there was research that... I think was something like playing an online game with people suffering from anxiety had a similar effect as people taking medication or something even...

Ann

John: It is almost like a U-shaped curve.

Bozo

Lugonja: Yes, okay.

Ann

John: Where it is sort of like too much and too little. It can be problematic. But in between can help.

Bozo

Lugonja: So rock music and video games are definitely the way to go.

Si

Martin: Basically. If you take anything away from this podcast, it is the heavy metal and play video games all day... not.

Ann

John: Not.

Bozo

Lugonja: It sounds that the media depiction of self-harm with accuracy... obviously it is going to be quite a range going from sensationalist to perhaps underplaying it. On the whole, what do you think when you see these depictions, whether it is in newspapers or some TV shows or...?

Ann

John: So I have worked quite a lot with the Samaritans on various soap opera storylines and newspaper articles. I think there is a whole research evidence about how, particularly with suicide but also with self-harm, when you make the reasons very simplistic, so they self-harmed or they took their own lives because they were bullied, then there are lots of people, particularly young people are susceptible to this, who identify with that, and that makes it what we call cognitively available to them as a way of dealing with their distress. So we call it contagion, people like or dislike that phrase, but these things can affect people, there is no doubt. Also when people talk about the method that it happens, it is an issue. I think there are really good guidelines about reporting and how you should portray it in any sort of media, from the Samaritans, and I think lots of companies that work in this area do work with, you know, people like myself and people like the Samaritans to try and make their storylines less able for people to identify with. So it things like not naming a medication, having just a plain bottle, or not showing what the method is. So I think it is really important. I guess the thing that everyone talks about that you may have been leading into is 13 Reasons Why. And those sorts of things are very complex because they also generate conversation.

Bozo

Lugonja: So anyone who does not know about 13 Reasons Why, it is an Netflix series essentially. I have not seen it but I have heard about it through media where a suicide note was left through tapes and it is accused of promoting suicidal...

Ann

John: And there are some cases that people link to that series. However, it did generate a lot of conversations with young people about certain behaviour, so saying things that you might think are jokes and not realising that people are vulnerable. I have got... at the time when it came out, I have got a son who was about 15 at the time, and I know that... I am sure his friends came and talked to me because they know what I do, not because I am this cool, approachable mother.

Si

Martin: I think you are cool.

Ann

John: Thanks. But those conversations were really useful, I think. So there were certain portrayals in that series that contravened guidelines. But actually, I think soap operas are a really good way of getting young people in particular to talk, and it is one of the few... who knew that we would suddenly... when I grew up, television was going to ruin family life, and now it is about the only time you get your teenagers to sit in a room.

Si

Martin: Yeah, I have had such a love-hate relationship with this show. I got so into it, oh my, gosh. I have watched the first episode, I was like "this is lame." And then by the end, I was like "no, what's going to happen?" But at the same time, I had such conflicting views on it myself watching it because I was... I was watching the actual — spoiler alert, sorry, everybody — the actual death, they actual depict the death in it, which I thought was super gratuitous and unnecessary.

Ann

John: It was very gratuitous and unnecessary.

Si

Martin: I found myself quite like disturbed by it. I was like "ooh, I don't like watching this." My kind of flipside was that I was like, well, from the very beginning it didn't stray away from the fact that it was a series about suicide, do you know what I mean, and like, I kind of knew what I was getting into, but that did not make it any less stressing to see.

Ann

John: I think the difficulty is that viewing of these things has become very difficult. So technically, 14, 15, 16-year-olds should not have been watching it because there were certain episode that had, you know, a Certificate of 18 on them, but that is not the way people consume things now.

Bozo

Lugonja: Media.

Ann

John: A tool through Netflix and Amazon and things.

Bozo

Lugonja: So do you think that content makers have a great responsibility to depict it more accurately when so widely available?

Si

Martin: Yes, put my hand up, please ask me. We did a little session in our shop, we have got a shop in the centre of Cardiff in the Castle Emporium, and we did a little session in there recently where we got some young people together to actually come in and talk about depictions in the media. One of the really interesting things was _____ had not even seen 13 Reasons Why. A lot of people have kind of forgotten about it, in that it is...

Ann

John: Completely.

Si

Martin: Do you know what I mean? It was super intense and I was like... it is onto the next, it is now Logan Paul, and it is now YouTubers, it is the big thing that kind of came out of this discussion that we were having in terms of how... rather than in a traditional sense like with soap operas, for example, they would go "oh, okay, we've got a script and then it needs to get past by broadcasting standards or whatever," do you know what I mean? It needs to... and it would have lots of consultation. With YouTubers, suddenly, one kid with an iPhone can go and make a video that gets viewed 10,000 times that has absolutely no... the Logan Paul is a good example of that, of him...

Ann

John: Yeah, because that threw up all sorts of issues because... so my kids also were watching his channel quite regularly and it seemed fairly innocuous. However, with that, there was a clear disconnect for him, wasn't there, between what he was filming and what he was going to put on YouTube and for me I think that is an interesting area of research, about the emotional connection when you have a phone in between you and what is happening.

Si

Martin: Which I am sure is a Black Mirror episode just waiting to happen, isn't it?

Ann

John: I agree, Black Mirror, everyone should watch Black Mirror.

Si

Martin: I am sure Derren Brown has done things as well which I know obviously have been sensationalised and stuff, but Derren Brown is great. But yeah, there have been things, isn't there, on, like, on kind of bystander behaviour almost as well where...

Ann

John: Yes, yes.

Si

Martin: ...when people feel disassociated from some thing, they will kind of encourage more and more... there is a really good one with, like, they encourage bad things to happen to this one guy and, like, the studio audience and it ends with — I will not spoil it — but it ends with a big shock and it was really interesting to see how people disassociate themselves, and I suppose it is coming back to what you were saying, Ann, about like with the people saying it is attention seeking in terms of it is easier for people to kind of disassociate from something sometimes and kind of put a little barrier in between them and something bad almost, you know what I mean.

Ann

John: And I guess, what Si said about YouTube videos comes back to that saying if he have lost any idea of having any control over the content of what people view because it is completely unregulated and anyone going out with an iPhone can have footage about the news, we have got 24-hour news now, so it is really difficult. You can have guidelines but it is really difficult for people to know about them. I think it goes back to educating people about their personal responsibilities.

Bozo

Lugonja: So one of the things with NCMH is the promotion of understanding and promotion of education, and also, Ann, you are involved NCMH as one of our PRS. So could you tell about some of the things that you are involved with at the National Centre for Mental Health and some of the work that we do as a collaboration?

Ann

John: So on the research side, I work with linking routinely collected data, so all the stuff that happens as part of our day-to-day contact in health services and other services, but we link it anonymously, so it is privacy protecting, but it means we can look at hundreds of thousands of people, and I think in mental health, that is really important because when people do big studies, it actually requires things from the participants, and people with mental health problems often are in a space where they are able to make that sort of commitment and then when you try and come back and talk to people, it is difficult for them. Whereas when we work with routinely collected data, people with mental health problems have a voice in research. So we do a lot of work on self-harm and suicide, but then also people with serious mental health problems and common mental disorders. And then I do lots of work with you really about getting education and awareness out there. One of the ones I enjoy the most was an even you put on in Swansea in the Liberty Stadium called It's a Man's Thing. Trying to get men to come and talk about their mental health and hear us chat and engage them is really difficult, and you had a

simulated racing car, you had football players and rugby players, and you managed to fill that room...

Bozo

Lugonja: That is our _____ who managed to fill that room, I had nothing to do with it. _____ looking at samples.

Ann

John: But it was amazing. And the conversation that we had, you know, partly because there were a bunch of football and rugby players talking about the things that they had struggled with, which were a bit like, you know, being unemployed when they had had injuries or their careers had come to an end, and the conversations we had stayed with me to this day. There was one guy who stood up and was basically saying that he had suffered with mental health problems from a young age but had never... what could he do because he did not feel like he could talk to his GP about them? We all went... actually _____ on us to make it so that you can, and I think one of the big things we need to do going forward is develop and deliver services that men feel comfortable going to.

Bozo

Lugonja: That feeds in nicely, Si, to your Heads Above The Waves. If we finish up talking about some of what your charity do, how you got involved, the shop as well as on the precall.

Si

Martin: I always feel kind of bad talking about what we do, which I should not because we are great, we are awesome. But one of the things that we have always wanted to be is something that is not... okay, so I hope this does not sound like I am bashing anything else because everyone is doing really great work, but one of the things we wanted to be is not something that is particularly called in clinical and not something that is like childish or condescending, just something that is like, we are old people and we have been through rubbish stuff as well, so we are here for you, and kind of try to be on that level. One of the things that we have done to try and fund our work is to have like merch that has got like messages behind the designs, so it is like cool T-shirt that you would want to wear anyway but when you buy it there is like a swinger type that explains a little bit about mental health and hopefully is like a bit of a conversation starter. The way that I always look at it is if I see someone in a band T-shirt that I like, I will be like "oh, sweet band" in the way that we will... Slipknot, yes. But then you kind of like have that conversation and maybe that leads to "oh, I saw this band play at our festival" or "I loved the album whatever." The idea would hopefully be that it could be something that starts conversations about mental health and particularly about positive ways of coping. As well as, yeah, that kind of has... we stuff it full of... your order full of like flyers and postcards and general possibly good stuff that has got like nice messages to try and share with people, which originally started off as... we just had like three T-shirts that we would take around in our little suitcase to gigs and try and plug to

people and it is kind of... that was then helping us create content for website in which we share people's experiences...

Bozo

Lugonja: Do we have a link as well?

Si

Martin: Yes, hatw.co.uk, which has got like ways of coping with stuff. That has kind of then grown into... we have now got a shop where we sell merch out of... and it has also developed into... rather than just sharing people's experiences online is that we now go into schools and do workshops and sessions and teacher training and stuff as well to kind of... it is one thing to say playing the drums is really good, I think it is another thing to actually take a bunch of drums in and let kids have a bash _____ themselves, so yeah, that is one of the things that we are doing as well, and just yeah, kind of trying to take on and trying to get people to, well, to yeah, to talk about mental health openly. We are particularly trying to have a big push on getting men talking which is a really interesting area. For me in particular as well, I think we are kind of in this weird state where the definition of what it is to be a man is very blurred at the moment in terms of you have got some people who are really kind of like pints, matches, and then you got some people who are more like me, who are like music and feelings. I think we kind of need to have this unifying thing that, like, men are... it is okay to talk about stuff. We are also doing a big focus on trying to do things for and with the LGBTQ plus community as well, so I think it is great that that has come up in the conversation today as well.

Bozo

Lugonja: I think that is a great point at which to end. Just to say a massive thank you to you both for coming in and taking time genuinely out of your very busy schedules to speak to us today and get involved with the podcast. As usual, the best way for you guys to get... whoever is listening to us is to go on the National Centre for Mental Health website, so that is ncmh.info. Click on the podcast link. All the links that we mentioned today will be on there. Links to the Head Above The Waves, not water, waves. Some of the links to the research that Ann is doing, those are open access papers that anyone can read irrespective if you have got academic background or not. They are very really, really well thought up. All the resources we have spoken about as well. So please do check it out and have a look. Also links to Si's band.

Si

Martin: That is Music of Junior.

Bozo

Lugonja: Please make sure to rate and review our podcast, spread the word, let people know about the work that we do, and do get involved with National Centre for Mental Health. Check us out on Facebook, on Twitter, look up for on Instagram and all the events that we do as well across Wales, across the country. It will be great to hear from you. And if you want to

get in touch with us by email or by anything to tell us how we are doing, give us idea for any future episodes or just want to get involved with our research and our work, that will be fantastic. Thank you very much for listening and we will see you next time.