



Issue 2

**SUPPORT AWARENESS UNDERSTANDING RECOVERY**

April 2008

## Jumping into Spring with Scar Tissue

This issue:

1. Welcome
2. Spring is in the air:  
Keeping Fit
4. A New Way to Count
5. Self Injury Awareness  
Day (SIAD) 2008
7. Abuse Personal Safety  
Plan
9. Eating Disorders and  
Disordered Eating
11. Help Find a Name
12. Self Harm: Pros and Cons
14. Creative Writing
15. Wristbands and Keyrings  
Book Review
16. News in Brief

The first issue of the Scar Tissue newsletter went down a storm when it was published in February. I was really pleased with the response we had, with just under 50 people signing up to the mailing list; not at all bad! Although there were some issues that needed to be ironed out (I know not everyone was able to follow the links in the email - hopefully that'll be solved this time) it's all a great learning experience, and I've certainly found some things that I won't be doing again!

Trying to follow the success of the last issue has been a tough challenge, but we do like challenges here at Scar Tissue and I think you'll find this issue just as good (if not better) than the last. As usual we've got a great range of articles and information for you, including information on **getting more exercise** (now that the evenings are lightening up, at least here in the northern hemisphere, there's no excuse not to do some); a selection of stories and letters about how your **self injury awareness day** went and a very interesting article on **a new way to count your self harm free days**.

As well as all that we've got the **latest news** from Scar Tissue and its members; a great way of looking at **how you see yourself** and how to change it, and information on ordering the Scar Tissue **wristbands and key rings**, which have now been delivered (and look amazing).

That's it for my editorial this issue. If you have any comments or want to see anything featured, please drop

me a line at [letters@scar-tissue.net](mailto:letters@scar-tissue.net).

Bethan

# Spring is in the air: Keeping Fit

Now that spring is in the air and the nights, in the northern hemisphere at least, are getting lighter it's the perfect time to look at how you keep fit and see what you could improve.

Exercise is important in maintaining a healthy lifestyle, not just because it helps with posture, circulation and general good health, but because it makes you feel good. A recent MIND study showed that people who attend the gym regularly benefit from a more positive lifestyle, including a healthier diet and improved relationships.

Doctors at Nottingham Trent University have also found evidence of a chemical called phenylethylamine which is produced by the body during exercise and might explain why exercise can help people suffering from depression.

Exercising isn't all about going to the gym for hours a day though. When you do moderate intensity activity (brisk walking, painting, hoovering, and mowing the lawn) your breathing and heart rate will increase and you'll feel warm. You should also be able to talk without panting in between your words.

Exercise can also help get rid of feelings of anger and stress - two big things which make us want to self harm. Exercising and doing something to keep your hands busy means that you have fewer ways of self harming - have you ever tried cutting while on the rowing machine? It doesn't work! Exercise can also help to get out some of the emotions you might be feeling; anger or stress for example - two big things that contribute to wanting to self harm. Instead of turning the anger in on yourself, put it into running up and down the stairs or playing a game of football. It really does work.

You should be looking at doing about 30 minutes of moderate intensity exercise (for example a brisk mile and a half walk) at least five times a week. This isn't as hard as it sounds though, so don't panic. Here are some simple things you can do:

- walking up stairs instead of using lifts
- walking up moving escalators
- walking instead of driving for short journeys
- doing the housework at double-time
- DIY and gardening

You could also think about finding an exercise partner to go to the gym, yoga classes or on walks with. Exercise is much more enjoyable if there are two or more of you involved - you get to talk to your friends and spend quality time with them as well as getting fit.

Here are some simple exercises you can do at home, taken from [www.fitsetp.com](http://www.fitsetp.com).

### Wall Push Ups:

- Stand facing a wall with your feet about 1 to 2 feet back from it
- Place your hands on the wall, just about shoulder width apart
- Bending at the elbows, lower yourself forward towards the wall then push yourself away from it
- Keep your body stiff and straight during the movement.



### Presses:

- Use something around the house as a weight - soup tins or milk jugs with water in them
- From a seated or standing position, hold the weights just above your shoulders
- Push the weight up overhead slowly



### Crunches:

- Lie flat on your back with your knees bent and your feet on the floor
- Put your hands where they feel comfortable - on your chest or beside your head maybe, Don't pull on your head though.
- For the typical crunch, you simply roll your upper torso forward
- To increase the effectiveness of it, push your chest and head up to the ceiling while pushing your lower back flat on the floor
- This will automatically encourage you to follow a crunching pattern
- Hold your position at the top of the movement for a second and squeeze hard



Think of some other exercises you can do. There are lots of websites which can give you tips and ideas, and lots of magazines have advice and articles on exercise and healthy living. You can also buy good exercise DVDs at a reasonable price and do these in the comfort of your own home. Stick some of your favourite music on to make the time fly by!

Most importantly, do what you enjoy doing. If you don't like going to the gym but love cycle then head out on your bike. You're much more likely to want to exercise if you're doing what you enjoy.

## A New Way to Count

By Nonesuch Solo

People keep talking about how many days they have been SI free. Then when they slip back into it again, they say "nine whole days down the drain," or something to that effect. This makes a person who's trying so hard sound like a horrible failure!

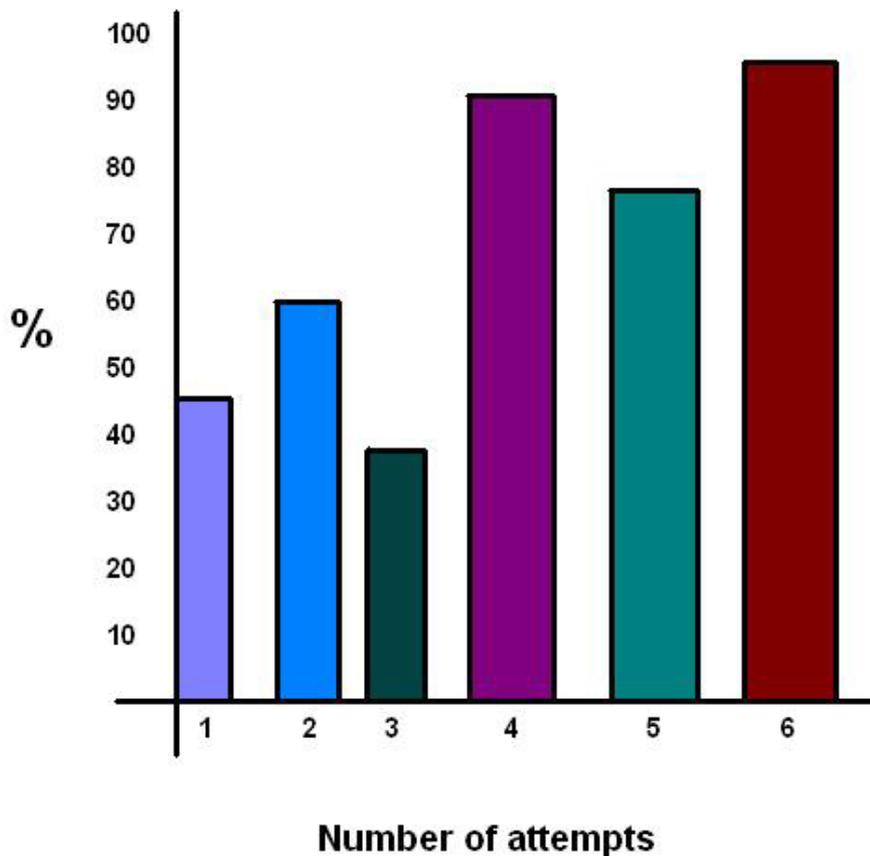
So I propose a NEW way to count. Let's say you're working on stopping, and you have fifteen days before you slip. That's not fifteen days wasted! Since you only really 'failed' on the sixteenth day, let's make it a ratio: for 15 of the last 16 days, you've been SI-free. That's 15/16, 0.9375, or 93.75%. Wow! Since you started counting for this time, you've made it 93.75% of the time! I wish I could get that on a test!

If you only had six days SI-free, that's still 6/7, or 85.7%.

If you feel you've lost a huge run of forty-six days, that's 46/47, or 97.87%!

It's a bit more encouraging than saying, "I just blew twelve days..." 92.3%!

At the risk of sounding uber-nerdy, you could even plot a graph. On the x-axis, number of times you've tried to "quit" and on the y-axis, a scale for percentages.



# Self Injury Awareness Day 2008



As we reported in the last issue, March the 1st was self injury awareness day (SIAD); the one day of the year devoted to raising the awareness of self injury around the globe.

Scar Tissue members got right into the spirit and the message board was flooded with ideas, advice and suggestions of what could be done. Many people sent out emails and letters to local and national newspapers and TV stations, and some even got interviewed!

We've included some of your stories here.

Using the self injury awareness day letter that Mary wrote for the website (<http://www.scar-tissue.net/aware.html>) as a template, Didge wrote to her local MP and got a reply to say he'd send it to the public health minister. Not content with just that though, she also emailed her local paper about self injury awareness day and was subsequently interviewed! The story appeared in the [Flint Evening Leader](#) and was a well written, sympathetic account of self injury. Didge came across brilliantly, talking honestly and openly about her experienced, and even prompted a [reply](#) the following day - showing 'real courage, and tak[ing] a vital positive step which could help herself and others to come to terms with, and tackle, the addiction'.

Banana\_Face also wrote to her MP, using Mary's template, and got a very encouraging response:

Thank you very much for your email of 17 February, drawing my attention to the mental health condition which results on some people to intentional self injure. I was very interested to hear your views about this tragic problem and agree we need to ensure that those who are affected have the care and support they need to overcome their complusion to inflict physical pain on themselves.

I am very encourages to hear that some support is available and I will be glad to support this principle, your aim to raise awareness about what help and support sufferers can access. I will also forward your letter to the responsible Health Minister to seek her views on the matter and will write again when I receive a reply.

Knerrit and DreamingButterfly81 both decided to let the people closest to them know about self injury and how they've been affected by it. Knerrit wrote a very informative email (also posted as a MySpace bulletin) about self harm and why people do it, and also looked at the myths surrounding self harm. The email also gave links to places where people could find more information about self harm, including Scar Tissue!

DreamingButterfly81 also posted a MySpace bulletin, again talking about self harm and her experiences with it. She gave really well written and a completely honest account of what it's like to deal with self harm, and hopefully raised a lot more awareness about it.

I also did my bit for self injury awareness day by emailing every newspaper in Wales, and each Welsh MP and Assembly Member. The newspaper coverage went well, with the letter appearing in almost every paper. I was also asked to do an interview for the [Wales on Sunday](#) paper. While it wasn't exactly what I wanted from the interview, it has helped get the message out there about self harm.

I also sent leaflets to my occupational health department in work and got a bit of information up on our 'daily news' bulletin plasma screen so managed to raise a bit of awareness within the DVLA. Unfortunately I only got one reply from the MPs and AMs I emailed. A positive reply, admittedly, but I think our MPs need to take a bit more notice of what their constituents say.

Of course self injury awareness day is over for 2008, but that doesn't mean we can stop raising awareness. There are plenty of things you can do, from wearing orange (you could buy a Scar Tissue wristband or keyring, or just wear an orange t-shirt or shoelaces) to getting involved in a local youth group and raising awareness with them.

The Scar Tissue website has a lot of useful information on how you can go about raising awareness, and if you have any more ideas we'd love to hear from you. You can still let us know how you got on with promoting self injury awareness day as well. Just send your stories to [letters@scar-tissue.net](mailto:letters@scar-tissue.net).

## FAQs

Anyone who self injures will inevitably be asked the question 'Why do you do it?' Well at Scar Tissue we've made as comprehensive a list of frequently asked questions concerning self injury and depression as possible. The list includes the obvious (who, how and why) as well as the distinction between self harm and suicide; body modification and self injury and what support is there for parents and carers.

Check the FAQs out on the [website](#), and if you can think of any more questions that need to be answered drop me a line at [wolfbane@scar-tissue.net](mailto:wolfbane@scar-tissue.net)

## Abuse Personal Safety Plan

By Tribe

In any situation your safety is the most important thing. While it's easy to say that, when you're in an abusive relationship it's much harder to believe. Listed below are some tips to help keep you safe, and things to think about if you're considering leaving the relationship.

If you are in an abusive relationship, think about:

- Having important phone numbers nearby for you and your children. Numbers to have include the police, hotlines, friends and the local shelter.
- Friends or neighbours you could tell about the abuse. Ask them to call the police if they hear angry or violent noises. If you have children, teach them how to dial 911.
- Make up a code word that you can use when you need help.
- How to get out of your home safely. Practice ways to get out.
- Safer places in your home where there are exits and no weapons. If you feel abuse is going to happen try to get your abuser to one of these safer places.
- Weapons in the house. Think about ways that you could get them out of the house.
- Even if you do not plan to leave, think of where you could go. Think of how you might leave. Try doing things that get you out of the house - taking out the trash, walking the pet or going to the store. Put together a bag of things you use everyday (see the checklist below). Hide it where it is easy for you to get.
- Going over your safety plan often.

If you consider leaving your abuser, think about:

- Four places you could go if you leave your home.
- People who might help you if you left. Think about people who will keep a bag for you. Think about people who might lend you money. Make plans for your pets.
- Keeping change for phone calls or getting a cell phone.
- Opening a bank account or getting a credit card in your name.
- How you might leave. Try doing things that get you out of the house - taking out the trash, walking the family pet, or going to the store. Practice how you would leave.
- How you could take your children with you safely. There are times when taking your children with you may put all of your lives in danger. You need to protect yourself to be able to protect your children.
- Putting together a bag of things you use everyday. Hide it where it is easy for you to get.
- Think about reviewing your safety plan often.

If you have left your abuser, think about:

- Your safety - you still need to.
- Getting a cell phone. Your local Domestic Violence Agency may be able to provide you with a cell phone that is programmed to only call 911. These phones are for when you need to call the police and cannot get to any other phone.
- Getting a PPO from the court. Keep a copy with you all the time. Give a copy to the police, people who take care of your children, their schools and your boss.
- Changing the locks. Consider putting in stronger doors, smoke and carbon monoxide detectors, a security system and outside lights.
- Telling friends and neighbours that your abuser no longer lives with you. Ask them to call the police if they see your abuser near your home or children.
- Telling people who take care of your children the names of people who are allowed to pick them up. If you have a PPO protecting your children, give their teachers and babysitters a copy of it.
- Telling someone at work about what has happened. Ask that person to screen your calls. If you have a PPO that includes where you work, consider giving your boss a copy of it and a picture of the abuser. Think about and practice a safety plan for your workplace. This should include going to and from work.
- Not using the same stores or businesses that you did when you were with your abuser.
- Someone that you can call if you feel down. Call that person if you are thinking about going to a support group or workshop.
- A safe way to speak with your abuser if you must.
- Going over your safety plan often.

Abusers try to control their victim's lives. When abusers feel a loss of control - like when victims try to leave them - the abuse often gets worse. Take special care when you leave and keep being careful even after you have left.

There are organisations which can help you if you are being abused and want help leaving the relationship. You could try looking at these websites for more information:

[www.ncadv.org](http://www.ncadv.org)

[www.ndvh.org](http://www.ndvh.org)

[www.samaritans.org.uk](http://www.samaritans.org.uk)

[www.womensaid.org.uk](http://www.womensaid.org.uk)

[www.refuge.org.uk](http://www.refuge.org.uk)

Women's Aid and Refuge also run a free-phone 24 Hour National Domestic Violence Helpline on 0808 2000 247.

## Eating Disorders and Disordered Eating

by kahliya

I know a lot of people don't tend to distinguish between eating disorders and disordered eating, but there is a big difference and the fact that most people just lump disordered eating into the eating disorder category is feeding the general public perception that people with serious eating disorders can actually control them 'if they wanted to'. My hope is that this article will help to educate people further about serious eating disorders and discourage those who employ disordered eating.

Both eating disorders and disordered eating are problems in themselves. The main differences between the two are:

### Eating Disorders

- tend to be an attempt by the sufferer to control a life they feel is spiralling out of control - patients with eating disorders do not make conscious decisions to restrict their diets or to purge, these activities are compulsions driven by an intense fear of gaining weight that ultimately controls the patients life until techniques are learned to overcome this fear. Eating disorders develop overtime it is impossible to point out a 'start date' for an ED.
- you cannot decide to be anorexic or bulimic - and you cannot diagnose yourself! Diagnosis is made using a combinations of observations and medical exams by a health professional
- eating disorders generally do not resolve themselves nor do they stop and start, recovery rates are relatively low when compared with other psychological illnesses such as reactive depression

### Disordered eating

- is an attempt to control a persons weight by unhealthy means - disordered eating is a conscious decision to 'diet' by unhealthy means (i.e. restricting or purging)
- disordered eating is also a term used when a person consciously employs anorexic and bulimic traits for a period of time to loose weight - or for when a person exhibits some anorexic or bulimic traits for less than 3 months
- disordered eating often goes through transient phases - i.e. - stopping and starting, a person will employ this mode of weight loss for a few weeks/months and will stop - generally because of low energy or overwhelming hunger and may decide to start again leading to a yoyo effect on the persons weight

**Next, I want to outline the main differences between the two.**

## Eating Disorders

The main eating disorders recognised by both the ICD 10 (International Classification of Diseases - or the diagnostic manual used in Europe/Australia/Asia and published by the WHO) and the DSM-IV (Diagnostic and Statistical Manual of Mental Disorders - or the diagnostic manual used mainly in the US) are:

- anorexia
  - bulimia
  - BED (binge eating disorder) also OED (overeating disorder)
- and
- EDNOS (eating disorder not otherwise specified)

These are recognised psychological conditions that present with physical symptoms that can detrimentally affect physical and mental health.

It is possible to have two simultaneous diagnoses and it is also possible that an eating disorder will present as a co-morbid problem of another psychiatric/psychological illness such as a personality disorder or a compulsive disorder. Each individual disorder is further defined by its diagnostic criteria. Each manual specifies that the diagnosis must be made by a health professional.

## Disordered Eating

Disordered eating is not a recognised psychiatric illness. It is a term that is used by some people to describe a wide variety of irregularities in eating behaviour that do not warrant a diagnosis of a specific eating disorder. Disordered eating is often the term given to the eating patterns of someone who consciously makes the decision to restrict their diet or to purge where the psychopathologies of anorexia, bulimia and OED are not present, where they are not diagnosed as anorexic or bulimic nor do they qualify for either diagnosis or present with the physical and psychological symptoms of either condition.

Disordered eating can also be a collective term given to a number of 'fashionable and popular diets' that encourage removing certain required elements (such as carbohydrates) from the diet.

Disordered eating can seriously damage health especially when it is used with things like diet pills! It can worsen conditions like diabetes and can have a severe and lasting effect on general health, energy levels, nutrition and psychological illnesses like depression, bipolar disorder, etc.

This information was compiled from a number of sources.

## A New Organisation Needs A Name

Recently we had a request from a new organisation. They wanted to know if they could post on the message board to find a new name. We said of course, and the topic is now on the board [here](#), but they're still looking. Can you help?

Will, one of the founders, says this:

I'm part of a group of people with personal experience of self-harm who are in the process of setting up a new self-harm organisation and would really appreciate your help thinking of a name!

The organisation will be voluntary and not for profit. Its primary aim will be to promote the voices of people who self-harm and to make sure that these voices heard. We will work with people who self-harm to conduct user-led research, publish reports on their experiences, and hold conferences to discuss the research findings. It will be very much focused on making sure that people who self-harm get to have their views heard!

Can you help us think of a name for the organisation? We want to choose a name at the beginning of May - if we choose your name then there will be a prize (although we haven't decided what this is yet!).

Things to bear in mind:

- We would prefer not to have acronyms in our name - it needs to "do what it says on the tin" as much as possible.
- We need to buy a domain for our website so don't choose something that is already being used - you can check here - [www.123-reg.co.uk](http://www.123-reg.co.uk)
- We prefer the word "self-harm" to "self-injury" or any other terms that get used to describe the same sort of thing.

You can give as many ideas as you want - please post them on this messageboard, or if you don't want to you can PM me!

Thanks for all your help - I never realised how difficult thinking up decent names could be!

Will

So if you think you can come up with a name, please post it in the thread on Scar Tissue, or send Will a PM. As soon as I hear who's won (if it's anyone on Scar Tissue) I'll let you know, and find out what the prize is!

## Self Harm - the Pros and Cons

A good way of establishing whether you need to self harm, and if you don't what you can do instead, is to work out the pros and cons. What happens if you do self harm? What happens if you don't? What happens if you mow the lawn or go for a walk instead? What are the advantages or disadvantages of each behaviour?

This is something that I do a lot when I'm trying to decide what the best course of action will be. It helps you to take a step back and look at the situation from an outsider's perspective, and it can be used for anything from deciding whether to have an extra slice of cheesecake to what car you want to buy.

It's an easy exercise to do and consists of writing two sets of lists. It allows you to think about the positive and negative aspects of getting through a crisis without doing something harmful or impulsive, against the positive and negative aspects of handling the situation by engaging in harmful or destructive behaviour. By doing this you can focus not only on the short term advantages and disadvantages of this behaviour but also take a more long term view and think about some of the negative consequences which accompany destructive behaviour.

### Instructions:

Draw up a table divided into four sections.

The upper section is for a list of the pros and cons of not tolerating the distress - that is, coping by hurting yourself, abusing alcohol or drugs or doing something else impulsive or destructive.

The lower section is for another list of the pros and cons of tolerating the distress - that is coping by using the crisis survival skills.

When making these lists look at both the short term positive and negative consequences and more long term positive and negative consequences. Think about and list the positive consequences of tolerating the distress and engaging in more effective behaviour. Imagine in your mind you good you will feel if you achieve your goals, if you don't act impulsively. Think of all the negative consequences of not tolerating your current distress and of acting impulsively to escape the moment. In your list, focus on your long term goals, the light at the end of the tunnel. Remember times when you have felt better.

If you want to, you can save and print out the picture on the next page, giving you some space to analyse the pros and cons of engaging in non-helpful behaviour. You can also use this as the basis for your own table:

The unhelpful behaviour I am analysing is: \_\_\_\_\_

<p>Advantages (Pros) of me doing this (what keeps the behaviour going – short term reinforcers)</p>	<p>Disadvantages (cons) (Negative consequences – usually more long term) (Motivator for change)</p>
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**Doing something skilful when I am distressed eg dealing  
with distress skills**

<p>Advantages (Pros) of doing something more skilful (motivator for change – why doing something different would be a good idea)</p>	<p>Disadvantages (cons) (The barriers to change – what keeps you stuck)</p>
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## Creative Writing

### A Long Way to Go by Wish Upon a Star

Such a long, long way to go. Where am I going because I don't know. I'm going to follow the road until I can finally walk in the sun, instead of the rain. In time I know I'll be fine, just walk along with me and you'll see. Sometimes life gets me down and it seems so hard. Sometimes I find myself thinking, "Where is the point?" I may not see it but its there; I just need to find it.

Such a long, long way to go. Where am I going because I don't know. All I know is that I cant go through life alone and even if I feel it, I am never alone. I know I am not alone; I will always have you as long as you say you are here. Such a long, long way to go. Where am I going because I don't know. I'm on a road and I'm following it. It will have ups and downs but the road I want to follow leads to my happy ending. It wont be easy, I'm walking and it's in my own time but I will get there.

Such a long, long way to go and back then I didn't know. I didn't know that I was following a road, which was in a circle. The circle was viscous. It had roads leading in different directions coming off of it but I kept going around and around. Never going anywhere. Never getting anywhere. I told everyone I was getting there but I wasn't, I couldn't. This road was terrifying and so destructive. It hurt me a lot of the time and if it wasn't hurting me physically, it was hurting me mentally. If the road wasn't hurting me then I would be hurting myself. I deserved it; I wouldn't get off the road.

Some days were worse than others on this road but there was never an "ok" day. It was always raining; just some days it had storms too.

One day the storm on the road was horrible, it got so frightening. I had had enough. I told myself I will get on a better road. I will have sunny days, not rainy ones.

Such a long, long way to go and where am I going because I want to know. Back on the old road I never cared. But now I do. I care about every little thing. Maybe I care too much but I've learned it's better than not caring at all. Life is hard. I'm not saying that it's easy. It's far from it but what I'm saying is that its ok to find it hard. I had lots of help and I need help to stay off the old road. Some day, maybe not tomorrow and maybe not next week I will be able to stay off of it by myself. Although I will still have help if the clouds start to roll in because everyone's road are full of ups and downs; they are as unpredictable as the weather.

Such a long, long way to go and where I'm going I don't know but I'm going to follow my road, get my happy ending and my sunshine.

## Scar Tissue Wristbands and Keyrings

I told you in the last issue that we were selling Scar Tissue wristbands and keyrings. Like most non-profit organisations, Scar Tissue is funded by myself and Alison, who pay for the site with our own money and dedicate our time to running it.



We decided that we'd start selling wristbands and keyrings to help cover the cost of running Scar Tissue (all money raised goes back into the site), as well as raising our profile.

The wristbands and keyrings were delivered shortly after self injury awareness day, and already we've sold more than 100! Both wristbands and keyrings are made of orange silicone and are embossed with the Scar Tissue name and website address. Check them out (and order) on our [services](#) page.

## Book Review – Cutting Steven Levenkron

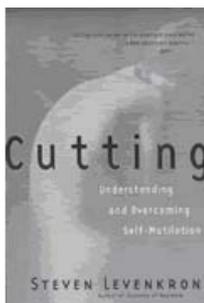
by Mary Hillery

As an avid reader and being passionate about raising awareness about self-injury, I make it my aim to read pretty much anything which is written about the subject. Over the past ten years there has been a surge in the number of books published about self injury/self harm. All of these are suitable for different types of people, but most will have a certain appeal to people who self-injure.

Some books might be too graphic for individuals depending on their frame of mind at the time of reading. Other books have particular tone, so will appeal only to certain people. Hopefully these reviews will give you a better idea before you commit to buying.

Please feel free to e-mail [Mary](#) with the subject line "Book reviews" if you have any feedback, constructive criticism, comments, or suggestions.

### Cutting: Understanding and Overcoming Self-Mutilation by Steven Levenkron



Particularly suitable for therapists, and family members of those who self-injure.

'Cutting' was published in 1999, and at the time was a very useful addition to the literature on self-injury. Levenkron is a psychotherapist, and his book uses case-studies to illustrate self-harm and how complex it is. It is probably of most use to therapists, but also has some useful information about how to help people who self-harm.

## Scar Tissue News in Brief

Scar Tissue Creative Writing Booklet - We brought up the idea of creating a Scar Tissue creative writing booklet a while ago but the idea fizzled out. Now that we have so many new members, we thought we'd revive the idea again. The idea is to create a booklet of essays, creative writing and artwork, covering both self injury and other topics you want to write about. If you're interested, please see [this topic](#) on the message board, or email [letters@scar-tissue.net](mailto:letters@scar-tissue.net).

Post Secret - The Scar Tissue Post Secret thread has always been a popular one but it's not all that secret given you have to be logged in to post! Thanks to jennyb though, we now have a whole website we can use to post secrets, and it's anonymous. Check out this link: <http://www.telljennyasecret.blogspot.com/>

Scar Tissue Suicide Policy - Scar Tissue was set up, and continues to run, as a self harm support board rather than a suicide support board. While we know that sometimes the two are very often linked, we are unable to provide counselling or prevention strategies if you are suicidal. That's not to say that if you are feeling suicidal you can't post about it. But in order to protect Scar Tissue from any liability we've created a [suicide policy](#) and encourage you to read it.

Scar Tissue Wristbands and Keyrings - Our self injury awareness wristbands and key rings have now been delivered and the first lot have been sent out. Both wristbands and key rings are made of orange silicone and are embossed with the Scar Tissue website address and the words 'self injury awareness'. Check them out (and order online) at our [services](#) page.

That's it for this edition. I hope you've enjoyed reading, and that we'll see you on the site and boards. Don't forget you can let us know what you think of the newsletter, the message board or the website, and we'll publish a selection of comments next issue. You can contact us at [letters@scar-tissue.net](mailto:letters@scar-tissue.net).

Until next time, stay safe.  
Bethan

[www.scar-tissue.net](http://www.scar-tissue.net): Support Awareness Understanding Recovery

