A disturbingly high number of children report that they self-harm — but why is this, and what has gender got to do with it? Joan Garrod investigates

Most media outlets in August 2018 reported that around a quarter of girls and almost one in 10 boys aged 14 in the UK were self-harming. The figures came from the Good Childhood Report, published by the charity The Children’s Society, using data from the longitudinal Millennium Cohort Study (MCS), which is following the lives of around 19,000 children born in the UK, 2000–01.

Out of 5,624 girls who responded to the survey question, 1,237 said that they had self-harmed. Based on the responses from all children, it was estimated that some 109,000 14-year-olds may have self-harmed — 76,000 girls and 33,000 boys. Further evidence from the NHS revealed that admissions to hospital for self-harm among girls aged 18 and under have almost doubled in the past 20 years, from 7,327 in 1997 to 13,463 in 2017.

Why do children self-harm?
The MCS data shows that measures of children’s self-reported wellbeing and signs of depression were related to the likelihood of self-harm. Over half of children with low levels of life satisfaction had self-harmed, compared with an average of around 15%. Why, though, should there be such a difference between girls and boys?
Gender differences

The self-report studies showed that there were noticeable gender differences in children’s subjective wellbeing — basically feeling good about life. From the start of secondary school onwards, girls are less happy than boys with most aspects of their life. The largest gap is associated with satisfaction about one’s appearance. In the MCS, the children were asked whether they were exposed to comments and jokes about appearance and sexuality. The perception that this happened ‘all the time’ proved to be more important for girls’ happiness and wellbeing than for boys. In fact, boys who said that such things happened ‘all the time’ had higher wellbeing scores than boys who said that it only happened ‘sometimes’.

Traditional stereotypes

The Children’s Society used their own annual wellbeing survey to explore gender norms. The survey looked at children aged 10–17 from 2,000 households in the UK, and asked them which of a list of six attributes they thought that their friends would say was the most important for a girl and a boy. The responses reflected traditional gender stereotypes. ‘Being good-looking’, ‘being caring’ and ‘having good clothes’ were chosen as important for girls, and ‘being tough’ and ‘being funny’ as more important for boys. Those girls whose friendship groups accepted these traditional stereotypes showed the lowest scores for happiness and wellbeing.

Conclusions

So, both non-stop comments about appearance and belief in traditional gender stereotypes appear to be particularly harmful to girls’ wellbeing, with the potential to affect health and lead to self-harm.

The Global Early Adolescent Study, carried out for the World Health Organization, looked at 10–14 year old children across 15 countries. The lead researcher, Kristin Mmari, concluded that: ‘Adolescent health risks are shaped by behaviours rooted in gender roles that can be well-established in kids by the time they are 10–11 years old.’

Activities

1. Read the summary of The Children’s Society report and details of the Millennium Cohort Study (both listed in the references below).
2. Write brief answers to the following:
   - Identify and explain two advantages of longitudinal studies.
   - Identify and explain two possible disadvantages of longitudinal studies.

Weblinks

An interview with the principal investigator for the Millennium Cohort Study:
www.tinyurl.com/y9mvw2cv

A CNN London news item on The Children’s Society Good Childhood Report:
www.tinyurl.com/y92wqozs

Read the Millennium Cohort Study:
www.tinyurl.com/ybqpcq3c

Take a look at the Good Childhood Report 2018 summary:
www.tinyurl.com/y8rb4s2r

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