During March our wellbeing focus is on raising awareness of National Ovarian Cancer Month and self-harming. There will be articles on StaffNet during the month on these issues and our Staff Wellbeing Champions will be sharing this to local areas.

**National Ovarian Cancer Month**

Ovarian cancer, is one of the most common types of cancer in women. The ovaries are a pair of small organs located low in the tummy that are connected to the womb and store a woman’s supply of eggs.

Ovarian cancer mainly affects women who have been through the menopause (usually over the age of 50), but it can sometimes affect younger women.

**Symptoms of ovarian cancer**

- Common symptoms of ovarian cancer include:
  - feeling constantly bloated
  - a swollen tummy
  - discomfort in your tummy or pelvic area
  - feeling full quickly when eating
  - needing to pee more often than normal

The symptoms aren't always easy to recognise because they’re similar to those of some more common conditions, such as irritable bowel syndrome (IBS).
Because of the similarity of IBS symptoms, only a third of women would see a doctor when they experience a major symptom of ovarian cancer, according to the charity Target Ovarian Cancer.

When faced with persistent bloating, 34% of 1,142 women questioned by YouGov said they would visit their GP. Half said they would change their diet by doing things like cutting out gluten or eating probiotic yoghurts. The charity is concerned about the "alarmingly low rate of awareness" of bloating as a symptom of cancer. Previous research by the charity has shown that only one in five women could name it as a symptom. The survey spoke to women across the UK and asked what they would do if they were "bloated regularly". Those polled were allowed to choose more than one option but only 392 said they would book an appointment with their GP.

NHS England advice is that anyone who has been feeling bloated most days for the last three weeks should tell their doctor. Bloating may be caused by other conditions, but if it is persistent and doesn't come and go it should be checked out.

The disease is more likely to develop in women over 55, but the charity found this age group was the least likely to check symptoms online, so the least likely to educate themselves that it could be ovarian cancer. In the 18-24 age group 64% said they would do an online search.

Being Together in Manchester is an event on 17.04.18. This is a free positive and informative day for women like you living with or beyond ovarian cancer.

Further information

- http://ovarian.org.uk/
- http://www.ovacome.org.uk/

Self-Harm Awareness Day – 1 March 2018

Self-harm is the term used to describe when someone deliberately hurts themselves as a way of dealing with their emotions. They may do this in a number of ways, including:

- cutting or scratching themselves
- burning themselves with a flame or something hot
- causing bruising to the body by hitting themselves
- throwing their body against something that will hurt
- taking overdoses of tablets or medication
- inserting objects into the body
- hair pulling (also known as trichotillomania)

This is by no means an exhaustive list.

Self harm is VERY different to suicidal intent, but at times the two may be close. Someone who is suicidal feels as if they can't take anymore and their only option is to end their life, whereas someone who self harms feels that they can't take anymore (of whatever they're feeling) and their only option is to harm themselves in order to stay alive. If you tell them to STOP when they're not ready, imagine what they could feel their only option is.

Who self harms

There is no straight forward answer to this and many people do not present with injuries at A&E. The truth is - anyone is at risk from self harming at some point in his or her life depending on the
experiences they have and the way they feel about these experiences. Popular culture would have you believe that young girls predominantly self harm but the research suggests otherwise. Findings suggest that in fact for the age range of mid 30s, men represent the majority of people attending Accident and Emergency for the treatment of self harm.

There is also a high rate of self harm amongst the LGBTQI community. The statistics for young people in the LGBTQI community who have considered suicide is 59%, while 48% have self-harmed[1]. These numbers sadly reflect the feeling of being alone and the emotional turmoil that many journey through.

**Self harm is NOT**
- attention seeking or manipulative; self harm is neither of these things
- a mental illness; it is a symptom of internal stress or distress
- just a young person's problem
- a suicide attempt, but is about staying alive
- the problem but would suggest that the person is struggling with something else, it is a symptom of emotional distress
- a problem that cannot be solved, people can learn to manage their emotions in a different way
- for the pain, but for the respite people gain from their emotional pain or stress
- a behaviour that is risky to others

**Coping with self harm**
The severity of self harm is not directly related to the level of distress that the individual is feeling. The fact that someone has harmed themselves is what is significant, not what they did or how severe their harm was.

**The language that we use...**
It is advisable not to describe the person who self harms as a 'self harmer', as this defines the individual only in terms of their self harm, and leaves little room for other areas of their personality to be described or explored.

**Further information**
- Mental Health in Manchester
- University Counselling Service
- https://www.selfharm.co.uk/
- http://www.harmless.org.uk/
- MIND
- University research on 1 March 2018

**Other events**
- Marie Curie Great Daffodil Appeal 2018
- International Women’s Day (8/3)

**Blog**
If you would like to share your wellbeing experiences or expertise why not contribute to the blog?
https://wellbeinguom.com/