

## Interventions for Dealing with Self-Injury

### Family

When family members find out about a loved one who self injures, most feel at a loss. They might begin to question their past behavior toward their child/relative and worry that, from now on, every word or action will prompt an incident of self-injury. Family members usually describe initial feelings of shock, fear, confusion, and frustration. Many fear that their child/relative will commit suicide.

Family members of self injurers often agonize about how to approach the topic. Some relatives want to deny the problem, or think the behavior is too crazy to accept or understand. Others are worried about how this behavior will reflect on them.

### **Intervention Tips**

The first thing to do when you suspect, or find out, that your loved one is self injuring is to think through how you are going to respond.

If you are only suspicious, then ask your child/relative if they are physically harming themselves. If you know they are, tell them that you are there to help. Share your concerns in a nonjudgmental manner. Tell them that you know they must be in a lot of emotional pain, and you are sorry that they are 'needing' to do this in order to feel better.

If they say, "it's no big deal", ask them if the reason they are saying that, is because they fear you'll get mad. If they answer no and continue to minimize the behavior, then tell them that you would like to get a professional evaluation. Ask them if they have had thoughts of suicide. If they say yes, then ask if they have a plan. If they do, then get immediate professional help by taking them to an emergency room or psychiatric hospital for an evaluation.

If they say no, then ask them if they know why they self-injure and whether or not they are scared. Tell them you'll be there to listen to whatever they have to say. Be prepared to hear things that may be difficult for you to accept. If you know that you have not always been there for them, consider telling them that you will be there for them now. If you are sorry, tell them so, even if it wasn't under your control (e.g., illness, divorce, job demands etc.). Tell them that self-injury is not something they have to, or should, deal with by themselves. Things not to do or say:

1. Display anger
2. Tell them to just stop it
3. Injure yourself - to show them how it makes you feel when they self-injure
4. Think of it as 'just a phase', or 'just for attention'
5. Punish or ground them

## Interventions for Dealing with Self-Injury

### Friends

If you are a boyfriend, girlfriend, a best friend, or just a friend of someone who self-injures it is important that you take care of yourself first. People who self-injure often put friends (intentionally or not) in helpless situations. A common request of a self-injurer is to ask a friend not to tell anyone else about their self-injury. They may hold you 'hostage' with the threat, "if you tell..... I'll cut myself". You may think you always have to be available so that they do not self-injure. Friends tend to want to help the self-injurer in any way that they can, even if the self-injurer does not want the help. Knowing how much, and how often to intervene can be overwhelming. Setting boundaries within the relationship or deciding when to let go can also be stressful.

### **Intervention Tips**

1. Tell your friend that you cannot keep their self-injury secret. Explain to them that it puts you in an uncomfortable position. Tell them you will confide in people that you think can help (teachers, school counselor, school nurse, clergy, your parents, therapist, family doctor....)
2. Know your limits. Are you spending more time worrying about your friend self-injuring, and less time about your needs?
3. If your friend self-injures and blames you, tell them that you are not taking responsibility for their self-injury. This scenario is most common after a 'break up.' The self-injurer may tell you, "if you leave me I'll injure." Do not stay in the relationship as a result of manipulative threats. Tell them that you hope they will take responsibility for their behavior, not self-injure and get the help they need.
4. Let them know that you are willing to help them look for information regarding treatment options.
5. Remember, a healthy relationship is one of honesty, compromise and communication.

## Interventions for Dealing with Self-Injury

### Schools

School professionals such as teachers, nurses and counselors are frequently the first adults to know of a student's self-injurious behavior. They may notice wounds, or may be notified by another student. On occasion, a student will decide to disclose to a teacher whom they trust. When a staff member notices that a student has wounds, suspects that a student is injuring or has the behavior brought to their attention by another student, the situation must be addressed and not ignored. One of the most important things to remember is that the tone of your response can be equally, or even more important than your actual words. The goal is to respond in a calm, non-judgmental fashion.

Self-injury is an attempt to cope with a problem and not the problem itself. It is often a cry for help (either conscious or unconscious). Most self-injurers experience themselves as being invisible. Ignoring the behavior only validates this belief, possibly causing them to become even more dangerous to themselves. The key is to focus on the underlying feelings and issues rather than focusing on the behavior itself.

Don't be afraid to state, "I've noticed injuries that appear to be self-inflicted, I care about why you might be doing that" or "it appears you have hurt yourself, do you want to talk about it?". Even if the student denies that the wounds are self-inflicted, the fact that the behavior was attended to and addressed directly is the first step towards healing. You have made it clear that they are not invisible and that you are available when the student is ready to seek help.

If you believe that a student is self-injuring, let them know that you want to aid them in getting the help they need. It is most important to be empathic with the student. Remember, the self-abuser may be feeling shame and you do not want to further this shame. Please DO NOT reprimand or send the student to the principal as a behavioral problem. Instead, your concerns should be brought to the attention of the school counselor if one is available to you. If your school does not have access to a school counselor, then another school professional (depending on your school's protocol) will need to assess the student for safety, especially if suicidal thoughts accompany the self-injurious behavior.

If the student has fresh wounds, they will need to be assessed by the school nurse and/or emergency room to determine severity and to make sure that the wound is properly treated. Our practice is to not focus on the injury, but rather on the events, feelings and thoughts preceding and following injuring.

### **Intervention Tips:**

Unstable, unpredictable or invalidating environments contribute to adolescent anxiety and frustration, which, in turn, can contribute to an increase in self-injurious impulses and injury. Therefore, stability and empathy are among the most important ingredients for success in working with self-injurers. Everyone in the system is responsible for providing a caring environment. Some descriptors of a caring environment are:

- Neutral (i.e., non-judgmental and non-punitive).
- Accepting. Staff can validate self-injurers' emotions. (A common theme among self-injurers is that their emotions were not validated during early family life).
- Amenable to staff contact. Since we want to encourage students to talk to staff about self-injurious impulses, staff can demonstrate openness to listening to them.

- Calm. Staff serves as models for emotional control, conflict-resolution and problem-solving skills.
- Dependable, structured and predictable (schedules, individual sessions, group time, consequences and/or expectations).
- Consistent (staff remains neutral: rules, rewards and consequences are the same each day). Further, staff members display a consistent "personality" each day.
- Confidential and private. Staff refrains from discussing students when others are around and refrains from discussing sensitive issues with students (i.e., diagnosis, family conflict, etc.) in public (i.e., hallways, classrooms).
- For more specific direction on how to intervene with students who injure and helping them disclose to parent(s)/guardian(s), please see "[Self-Injury: A Manual for School Professionals](#)" (please click title to view manual).