

A General Guide to Understanding Self-Injury

Self-injury typically refers to a variety of behaviours in which an individual intentionally inflicts harm to his or her body for purposes not socially recognized or sanctioned and without suicidal intent (ISSS, 2007).

Self-injury can include a variety of behaviours but is most commonly associated with:

- intentional cutting, carving, or puncturing of the skin
- scratching
- burning
- ripping or pulling skin or hair
- self-bruising (through punching objects with the intention of hurting oneself or punching oneself directly)

Tattoos and body piercings are not usually considered self-injurious unless done with the intention to harm the body. Although cutting is one of the most common and well-documented behaviours, self-injury can take many forms. Over 16 other self-injury behaviours have been documented in a college population and several studies have shown that individuals who self-injure often use multiple methods.

Self-injury can be and is performed on any part of the body but most often occurs on the hands, wrists, stomach and thighs. The severity of the act can range from superficial wounds to lasting disfigurement.

Fast Facts: why self-injury?

- Up to 25% of youth and young adults have self-injured at least once. One quarter of these have done it many times.
- Most people who self-injure say they do it to feel better, to express their pain and/or to stop feeling numb.
- Professionals and the general public mistakenly think of self-injury as a 'female' behaviour.
- Non-suicidal self-injury is not a suicide attempt because it is done as an effort to feel better, not to end life.
- You cannot force someone to stop self-injuring; however, with support, many will choose to stop.



Common Misconceptions About Self-Injury

Misconception	Truth
Self-injury is a failed suicide attempt.	Self-injury is NOT an attempt to die. Most people who self-injure say they do it to feel better, to express their pain and/or to stop feeling numb. In fact, some people who self-injure even say they do it to stop themselves from acting on urges and thoughts to kill themselves. Although self-injury and suicide attempts are different behaviours, many individuals who self-injure also may struggle at times with suicidal feelings.
The injury isn't very bad, so it isn't serious.	The seriousness of a person's distress is NOT related to the severity of the self-injury. Research has shown that self-injury is related to emotional difficulties, distress and sometimes suicidal feelings. Therefore, any degree of self-injury needs to be taken seriously.
Self-injury is just an attempt to get attention.	Self-injury is NOT about trying to get attention. Self-injury is often done in private and many people keep it a secret from others. Some people who self-injure never tell anyone about it. If they tell someone, they may be more inclined to tell a friend or to share their self-injury experiences online. Because many individuals who self-injure have difficulties telling others how they feel, some may use self-injury to show others the distress they find hard to put into words. This is not about trying to get attention but about an attempt to communicate their pain or intense emotions.
People who self-injure have a personality disorder.	Many people who self-injure do NOT have a personality disorder. Sometimes self-injury is a symptom of borderline personality disorder (BPD) — a mental health illness involving a long-term pattern of difficulties dealing with emotions, impulsivity, and unstable relationships — but a diagnosis of BPD cannot be made based on self-injury alone. There are other symptoms of BPD that must be present in order to receive this diagnosis and many people who self-injure do not have these other symptoms.
Self-injury is a sign that someone has been abused.	Although self-injury is quite prevalent amongst individuals with a history of abuse, not everyone who has been abused will self-injure and not everyone who self-injures has been abused. It is very important not to assume that self-injury is an indicator of abuse.
People who self-injure don't feel pain.	People who self-injure DO feel pain. Sometimes when a person feels numb, or like they are separated from their body, the purpose of self-injury is to feel pain (that is, the goal is to feel something, even if it is pain). However, some individuals who self-injure say that sometimes they do not feel the pain, that they feel disconnected from their body during the self-injury but this is not always the case.
Self-injury is a phase or a teen fad that people grow out of.	Self-injury is NOT a trend, a fad, or a phase. Self-injury is an attempt to cope with some very difficult feelings. It is often referred to as an 'unhealthy coping strategy'. Research shows that using self-injury at any point in one's life is a sign that the person is struggling to cope. Most people do not grow out of self-injury without finding healthier ways to cope. This can be very difficult and may require professional help. Self-injury doesn't get better on its own.

It is unclear whether self-injury is increasing or if as youth and young adults mature they learn healthier coping strategies and the use of self-injury decreases. In any case, non-suicidal self-injury is not a rare or unusual occurrence amongst youth and young adults.

Who is at Risk of Self-Injury?

One of the most commonly found risk factors for non-suicidal self-injury is having difficulties with regulating emotions. This means individuals who experience intense negative emotions that they find intolerable, which is often combined with difficulty expressing emotions, are more at risk for self-injury.

There may be many reasons for these difficulties, including past life experiences and/or temperament. Research has shown that in adolescent samples females are more likely to report having self-injured. However, by late adolescence or young adulthood, males and females report similar rates of self-injury. Research has also shown that females may be more likely to seek help or report their self-injury than males, leading professionals and the general public to mistakenly think of self-injury as a “female” behaviour.

In addition, some research has indicated that being a member of a group that is likely to experience social prejudice (i.e., a group that is marginalised) may increase the risk for self-injury. For example some research has shown that people who are lesbian, gay, bisexual or transgender may be more likely to engage in self-injury. With more stress in one’s life, it can be more difficult to cope.

People who self-injure sometimes have mental health difficulties such as depression, post-traumatic stress disorder (PTSD), or eating disorders. However, many people who self-injure do not have a mental illness.

Self-injury is a sign of significant distress.

Why do People Self-Injure?

One of the most common reasons for self-injuring is to deal with intense negative emotions (like sadness, stress and anger) and thoughts (such as negative thoughts about oneself). These feelings or thoughts are felt to be so intense and overwhelming that they are intolerable. People who self-injure frequently report that following the self-injury they experience a “relief” from these negative emotions/thoughts for a short time.

Sometimes people self-injure to punish themselves for things they feel guilty about, or when they are really hard on themselves and feel they have not done well enough.

Some people self-injure to reconnect with themselves and others (that is, to feel something, even if it is pain).

Some people use self-injury to tell others about how they feel.

There are many other reasons for self-injuring and someone may self-injure for more than just one reason or the reason for the self-injury may change over time as the self-injury continues.



Can People Stop Self-Injuring?

Self-injury is not a life-sentence. People CAN and DO STOP self-injuring. However, the longer a person self-injures, the more difficult it can be to stop. It is important to remember that stopping a behaviour that has become a frequently used unhealthy coping strategy will take time and effort and having support in doing this would be helpful.

Many people who self-injure do it in private and work very hard to keep it a secret. In these cases, the self-injury may sometimes be accidentally discovered. Some people who self-injure will tell one or two close friends or family members; often they will tell others who self-injure when they're online. Other people who self-injure will talk to a professional (like a counsellor, psychologist or a doctor) about their self-injury. It is important that people who self-injure are provided with helpful resources.

Mental health professionals (such as counsellors, social workers, psychologists and psychiatrists) are trained to help people learn healthier ways to cope and can be helpful in supporting someone who self-injures.

Some people who self-injure are not ready and/or willing to seek professional help. It is possible to learn healthier ways to cope without a professional but it may be extremely difficult. People who self-injure cannot be forced to stop. Sometimes people who self-injure do not want to stop self-injuring.

Remember that self-injury serves a purpose and stopping can be difficult. When people who self-injure start learning healthy ways to cope, then they find stopping self-injury easier.

Where Can I Find More Information?

There is a growing selection of tools and guides available online to help those who self-injure, their loved ones and the professionals who are working with them. Here are some places we recommend:

The Mental Health Foundation in New Zealand offers online factsheet with advice about self-care and supporting others, and links to other resources and help services.

<https://www.mentalhealth.org.nz/get-help/a-z/resource/49/self-harm>

Common Ground – a short guide for parents, families and friends of teenagers:

<http://www.commonground.org.nz/common-issues/the-hard-stuff/self-harm/>

Youthline provides real-time 24/7 free phone, text, email and online counselling to support young people who are self-harming – and can also provide this support for parents and family.

Free phone 24/7: 0800 376 633, free text 234 or email talk@youthline.co.nz

<https://www.youthline.co.nz/self-harm.html>

Lifeline provides real-time 24/7 free phone, text, email and online counselling to support young people who are self-harming – and can also provide this support for parents and family.

Free phone 24/7: 0800 543 354 (0800 LIFELINE)

Acknowledgement

This resource was adapted from materials created at McGill University and the University of Guelph, by their expert teams of researchers and practitioners. To see more about them and their world-class work, go to www.sioutreach.com

Disclaimer: All information in this guide is provided for information and education purposes only. The information is not intended to substitute the advice of a mental health professional. You should always consult your doctor for specific information on personal health matters, or other relevant professionals to ensure that your own circumstances are considered.

Please feel free to download and share this resource where it can support a person or their family experiencing self-injurious behaviours.

