

DON'T

- Don't ignore the behavior or assume it's just a phase
- Don't panic
- Don't criticize
- Don't be overly sympathetic
- Don't give ultimatums or demand the youth give up self injury immediately
- Don't use punishment or negative consequences
- Don't overprotect by monitoring every move (but do notice what's going on)
- Don't keep your child from seeing friends
- Don't blame yourself
- Don't take it personally if your child won't talk about the behavior
- Don't say "you're just doing it for attention"

KEEP COMMUNICATING WITH YOUR CHILD

- Allow conversations to revolve around what he/she wants to talk about
- Have fun together
- Give your child specific feedback about what their strengths are
- Support your child in positive extra-curricular activities
- Encourage outreach in the community - volunteerism



Resources

Your School Social Worker, School Counselor, School Psychologist or School Nurse.

Child Guidance Center: (402) 475-7666

Bryan LGH West Child Adolescent Psychiatric Services: (402) 481-5376

Nebraska Family Helpline: 1-888-866-8660

WEBSITES

TeenHelp.com

www.selfinjury.bctr.cornell.edu

www.copecaredeal.org

BOOKS FOR PARENTS

When to Worry: How to Tell If Your Teen Needs Help and What To Do About It, by Lisa Boesky

The Parents Guide to Self Harm: What Parents Need to Know, by Jane Smith

Bleeding to Ease The Pain: Cutting, Self-Injury and The Adolescent Search for Self, by Lori Plante

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

Bodily Harm, by Karen Conterio, Wendy Lader

The Scarred Soul, by Tracy Alderman, PhD

Helping Teens Who Cut: Understanding and Ending Self-Injury, by M. Hollander

Freedom from Self-Harm: Overcoming Self-Injury with Skills from DBT and Other Treatments, by K. L. Gratz and A. L. Chapman



1-888-866-8660
For the hearing and speech impaired with TTY equipment call 1-888-556-5117
www.nebraskafamilyhelpline.ne.gov

- Trained counselors 24/7/365
- Children's behavioral issues
- Parent/child conflict resolution
- Youth mental health referrals

Need help? Don't know where to start?

Dial 2-1-1 or go to www.ne211.org.

Provided by LPS School Social Workers
BECAUSE FAMILIES MATTER



Non-Suicidal Self Injury



An ever increasing number of young people are turning to self-injury in order to cope with pressures of modern living.

One of the largest adolescent problems in the U.S.

A sign that something is wrong.

Requires mental health services to determine why and what kind of assistance will help.

 Lincoln Public Schools
Department of Student Services

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SELF-INJURIOUS BEHAVIORS ARE

- deliberate acts that damage body tissue.
- often repetitive mutilation of the body or a body part.
- not done with suicidal intent.
- a definite sign that an individual needs the help of a mental health professional.

Counseling can help individuals work through difficult situations and feelings and learn coping skills to handle intense emotions.

TYPES OF SELF-INJURY (in order of frequency)

- Scratching or Pinching
- Banging or Punching objects (#1 in males)
- Cutting (#1 in females)
- Banging or Punching self (e.g. head)
- Carving words into skin
- Ripping or tearing skin
- Burning self
- Rubbing sharp objects into the skin
- Trichotillomania (pulling out hair)
- Breaking bones
- Ingesting substances/ objects
- Dropping acid onto skin
- Body mutilation (e.g. genitals)
- Inserting objects under the skin



Understanding Self-Injurious Thinking

WHY DO YOUTH SELF-INJURE?

- To get rid of or manage painful or overwhelming emotions or racing thoughts
- To “feel something” instead of feeling numb
- To anchor themselves in reality
- To gain a sense of control over self and others
- To temporarily forget or distract from painful circumstances
- To communicate pain
- To feel acceptance/belonging with a particular peer group

YOUNG PEOPLE MOST OFTEN REPORT THEIR SELF INJURIOUS BEHAVIORS WERE LINKED WITH

- Feelings of isolation
- Conflict with parents/family
- Divorce of parents
- Grief
- Feelings of rejection by peers or family
- History of physical, emotional and/or sexual abuse
- Low self-esteem
- Being bullied
- Issues or questions related to sexual orientation
- Self harm or suicide of someone close to them

SELF INJURY IS OFTEN ADDICTIVE

Persons that self injure and experience relief or desired pain often repeat those type behaviors.

There is a biochemical relief that comes from self injury as the body releases endorphins for pain management.

Youth often ruminate on these behaviors, thinking about them and when they will do them again. These thoughts can interfere with

youths’ ability to focus on school work and engage in healthy activities, relationships and coping strategies.

Self Injury and Suicide

Self injury is an attempt to cope with life, not end it. Self injury may actually serve to keep an individual from suicide.

There isn't a large risk that self injurious behavior can be lethal, but it is possible.

Research does show that individuals who attempt suicide are much more likely to have some history of self injury than the general population.

Warning Signs

- Unexplained frequent injuries, cuts, burns
- Wearing long pants and sleeves in warm weather
- Avoidance of activities that involve showing themselves (e.g. swimming)
- Secretive behaviors and wanting to be alone a lot
- Difficulty dealing with feelings
- Relationship problems
- Poor functioning at school and home

Be Aware

TEXTING AND INTERNET CAN BE USED

- To share how to self injure or how to cover self injury
- Make dares
- Share photos

Tips for Families

Discovering your child is harming themselves can be devastating. Most self-injurers report that a person’s reaction and response to disclosure is very important. Although it seems common sense to tell your child to stop self injuring, it may well be their only means of coping with strong emotions. Stopping immediately may be very unrealistic and expecting or demanding youth quickly give it up can result in more lying and secrecy. Self injury is a symptom of a problem. Youth can and will stop self injuring with education, support and help addressing the problems in their lives.

DO

- Let your child know you love him/her
- Express care and concern and desire to help
- Accept your child even though you do not accept the behavior
- Respond with respectful curiosity
- Ask in a non-punitive, non-accusatory and non-judgmental manner; “Are those cuts? Do they make you feel better?”
- Emphasize hope for their life circumstances
- Brainstorm alternatives to self injury (Talking, writing, exercise.....)
- Contact a mental health professional to assist you and your child

(Your school social worker, counselors, psychologist or nurse can assist you in locating resources in the community.)

