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A Parents' Guide to Self-Injury

Important Notice: The information presented below is provided for educational purposes only and is not a substitute for consulting a psychologist or other professional advisor to discuss your unique situation. Please consult a professional for help with your situation. If you would like to talk with me about it, you may call my office at 914-329-5355.

What is self-injury?

Self-injury is anything someone does to deliberately cut, scratch, burn or hurt themselves in some way. Hair-pulling, though similar, has other components not addressed in this article.

What can you tell us about who engages in this behavior?

The typical person who engages in this is a teenage girl, though males will also self-injure. There is no particular race, socio-economic status or other demographic for those who cut. Research suggests many, though not all, have been sexually or physically abused. Most start around the ages of 13-14 years old, although some could start as early as t 11-12 years of age. It is important to remember that there is no set formula for this behavior, so these ages are only a guideline. Self-injury affects 9% of the teenage population.

What are some common myths or misconceptions about self-injury?

There are many things that people have come to believe about self-injury that are not true. Sometimes a belief is the result of misinterpreting what you see, other times it's simply misinformation that has been shared. Below are some of the most common myths or misconceptions associated with self-injury:

- They are doing it to hurt themselves
- They are suicidal
- Parents blame themselves
- They are doing it for attention
- Kids do it when parents are not home (they might do it in the next room)
- Everyone's doing it
- It's from peer pressure
- Drugs/alcohol use triggers cutting

Despite popular misconceptions, people self-injure because they can manage the physical pain easier than they can manage the emotional pain. You may be surprised to learn that most kids say it doesn't hurt when they cut. Pain or attention is generally not what they are seeking by cutting.

Though it may be hard to imagine, cutting can be a way to make emotional pain more manageable.

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What are the symptoms? What might a parent see or hear?

A parent may notice secretiveness, wearing long sleeves or pants in hot weather, or that their teen seems more closed down.

Is there anything that happens "ahead of time" that might alert a parent of this possibility?

Teens who self-injure usually have difficulty modulating or controlling their emotions. They get very overwhelmed by situations that others might brush off.

They may be the type of kid that gets "stuck" in a mood and has difficulty getting out of it. Most kids who self-cut are considered emotionally reactive and require help to learn how to activate the part of their brain that controls logical thinking and reasoning instead of the part that gets him stuck in the "mood".

What is positive about this is that managing your emotions is a skill that can be learned, although for some it takes more work than others.

Be alert to your child' behavior, asking yourself:

- Is my child's behavior mood dependent?
- Is there a big difference between what he/she can do when in a good mood versus when in a bad mood?
- Can she let go of her mood to get chores, homework, etc. done?

Most people find it easier to get things done when in a better mood but teens who cut usually have an even harder time accomplishing something depending on if they are calm or agitated.

How dangerous is this? What should a parent's concern be about this?

Most parents focus on the actual act of cutting as the dangerous part. Of course there is some element of danger since there is a sharp object involved. If it is not clean an infection can occur. Some kids get "discovered" because they cut too deep and bled a lot and got concerned and went to their parents for help. This usually does not happen, however, and many cuts are superficial.

The "danger" is really in the deep emotional state the teen is in and the difficulty she/he has in getting themselves out of it.

What can a parent do if they walk in on or immediately after a child has harmed themselves?

Attempt to remain calm. Do not yell at your child. Give your child a big hug if they will let you and let them know you want to help them in any way you can, even if that means having your child talk to someone other than themselves (other than you, the parent).

Reassure your child they are not "crazy" and validate their feelings. Sometimes just hearing a parent say "I understand you are sad, upset, angry, etc".. can be a tremendous help.

Remember, a teen who cuts doesn't have the same mental resources you have in terms of solving a problem, but they can develop these capabilities if you help your child to learn them.

Is there anything a parent should NOT do?

A quandary many parents might not even know they might have is whether or not they should take all blades and sharp items out of the house, particularly out of your child's room.

Every situation is different and this is why I advise parents to talk with a psychologist about their situation.

A parent can remove the items and this may surely make it more difficult for their child to cut, however, many children who cut are self-soothing. Sometimes just the idea of having the blade in their room, in their special place, is enough of a sense of security. Taking it away may raise the anxiety level even higher which might then cause the child to seek out pain relief from a different source.

Also know, some kids use things like safety pins, their own nails and even pens. I know it seems counterintuitive to leave them there and this is why you should talk with a psychologist about what is best for your child. The main point is to attempt to focus on the issues that are causing your child to feel like they need to self soothe instead of focusing primarily on the cutting.

Where do you go for help if your child is self-injuring or if you suspect this is happening? You can use the same process that you would use to find help for any psychological issue your child is having.

Get a referral from your pediatrician or school psychologist for a therapist who specializes in children and adolescents as well as one who uses techniques such as CBT (cognitive behavioral therapy) and DBT (Dialectical Behavior Therapy.)

What have you found to be the parents biggest fear(s) about this?

A parents' biggest fear is that their child is trying to commit suicide or that she will cut herself so deeply that she will kill herself. Additionally, it can be very upsetting for a parent when they learn that their child has been feeling so badly without them knowing it.

What have you found to be the child's biggest fear or concern about this?

A child may be afraid that they will not find something else to take the place of cutting that helps them as much as cutting does. Also, once their parents find out, they can become concerned about disappointing their parents if/when they continue to cut.

What, if anything, might a parent do to help prevent this from happening with their child? There are many things a parent can do that will facilitate open communications with their child. First, attempt to have open dialogues with your child on a regular basis. For example, one idea is to take advantage of random opportunities for open talking such as a car ride to the dentist. You can also create opportunities, such as inviting your child to come along while you run errands or helping with homework.

When your child does open up to you be conscious of how much listening you are doing as opposed to talking. Kids want to be heard and not talked over. Show them you are listening by making small comments about what they are saying and validate their feelings. Acknowledge how difficult it is to talk about feelings and how much easier it seems to keep them inside and let them know that if they keep their feelings inside, those feelings will build up until they feel like they want to explode and need a release which might then come in a negative manner.

Although teens may seem to crave independence, and they do in many ways, they also **know they need boundaries in order to feel safe and loved**. Show your child you love them by enforcing house and family rules and make sure they know what you expect from them. Of course they will try to test these limits but that is all normal and should be expected.

A good line I heard someone say to their daughter every time they walked out of the house was, "Make smart choices." If you raise your children with a good moral system that usually stays with them.

Look for opportunities to catch your child doing something right and acknowledge it more than focusing so much on the negatives. Of course, negative behaviors need to be addressed. Though it may be a challenge, be concise about the issue and restate your expectations. Make sure there is some type of consequence for the negative behavior.

You are usually your child's first role model so show them through your own actions how to be a respectable and respectful person – be someone that your child can admire and look up to.

Try to put your child's needs before your own so they grow up to do the same for their children. Spend time with your children without your cell phone or laptop. I have seen many families, parents included, sitting in a restaurant, each person on their phones or other electronic devices, totally ignoring each other.

"Emotion Regulation"

As mentioned earlier, teens who cut typically have difficulty regulating their emotions. Try to help them to focus on changing their reaction to feelings.

Helping them to focus on changing their reaction to feelings is a way to your teen to grow and develop.

With support, they can learn to change their reaction to the emotion as well as how intensely and how long they feel it. Help them to understand the importance of accepting and acknowledging one's own feelings. To do this you have to be willing to have the feeling and then work at modulating it. If you can't or don't accept the feeling you have, it will lead to either ineffective ways of dealing with the feeling or sitting in the feeling and making it grow, usually in a negative way.

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