

Cornell Research Program on Self-Injury and Recovery

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Information for parents

What you need to know about self-injury.

Who is this for?

Parents of those dealing with self-injury

What is included?

How do you know if your child is self-injuring?

Dealing with feelings about this discovery

Talking to your child about his/her self-injury

What to avoid saying to your child

Activities to help others manage their urges

Self-injury and your relationship with your child

Self-injury and the home environment

Finding treatment

Supporting your child while he/she is getting help

Discovering Self-Injury

How do I know if my child is self-injuring?

Many adolescents who self-injure do so in secrecy and this secrecy is often the clearest red flag that something is wrong. Although it is normal for adolescents to pull away from parents during times of high involvement with friends or stress, it is *not* normal for adolescents to be withdrawn, physically and emotionally, for long periods of time. It is also important to note that not all people who self-injure become distant and withdrawn — youth who put on a happy face, even when they do not feel happy, may also be at risk for self-injury or other negative coping behaviors. Some other signs include:

- Cut or burn marks on arms, legs, abdomen
- Discovery of hidden razors, knives, other sharp objects and rubber bands (which may be used to increase blood flow or numb the area)
- Spending long periods of time alone, particularly in the bathroom or bedroom
- Wearing clothing inappropriate for the weather, such as long sleeves or pants in hot weather

What might I feel when I learn that my child is self-injuring, and how do I deal with these feelings?

If you learn your child is self-injuring, you are likely to experience a range of emotions, from shock or anger, to sadness or guilt. All of these are valid feelings.

• Shock and denial

Because self-injury is a secretive behavior, it may be shocking to learn that your child is intentionally hurting him or herself; however, to deny the behavior is to deny your child's emotional distress.

• Anger and frustration

You may feel angry or frustrated that your child has possibly lied to you about his/her injuries or because you see the behavior as pointless or because it is out of your control.

As one parent said, "There is a frustration in terms of that little voice in the back of your mind that is saying 'just stop it!' It's very hard, I think knowing more about the condition and about the underlying factors makes it easier to push that little voice away."

...but remember that *you can never control another person's behavior*, even your child's, and trying to do this does not make things better.

• Empathy, sympathy and sadness

Though empathy helps you to understand your child's situation, sympathy and sadness can sometimes be condescending because they imply that your child needs to be pitied. These feelings may also hinder your ability to understand the behavior.

• Guilt

You may feel as if you did not offer enough love and attention to your child. However, though your actions can influence your child's behavior, you do not *cause* their self-injury.

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General stress-relieving techniques may help with managing these difficult emotions. For specific suggestions, visit http://www.selfinjury.bctr.cornell.edu/factsheet_coping_alternatives.asp

How do I know if I am doing or saying the right thing?

- Parents need to ask for feedback from their child about how well they are doing their job as parents.
 - This demonstrates that they are truly engaged in improving and strengthening their relationship with their child.
 - Parents can identify specifically what they can do to contribute to their child's success.

Are there any activities I can complete with my child to help them manage their urges to self-injure?

The Nillumbik Community Health Service has developed an activity for identifying who can be helpers and specifically how they can help. There is a worksheet to fill in who is available at different times throughout the day for support. To link to this worksheet, see http://www.nchs.org.au/Docs/SelfHarm_StuInfoPack.pdf. If your child has already developed a list of effective coping strategies for managing distress (for more on this, see http://www.selfinjury.bctr.cornell.edu/factsheet_coping_alternatives.asp), this information can be put together to create a "help card," which includes your child's top coping strategies and phone numbers of support people, and can be easily carried around in a wallet for whenever the need for support may arise. Go to Appendix M of <http://www.sfys.infoxchange.net.au/resources/public/items/2004/12/00131-upload-00001.doc> to link to the help card activity.

"Parents, there is hope. If you are facing some of the difficulties we have... don't give up. You need to fight; many teachers, doctors and counselors may not have the knowledge or ability to help – keep fighting. Don't give up; there can be a bright light at the end of the tunnel."

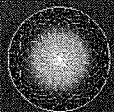
– Parent collaborators on CRPSIR team

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To read more about the personal experiences of these parents, see http://www.selfinjury.bctr.cornell.edu/factsheet_personal_stories.asp

"I stopped because I developed a sense of worth and, to some extent, love for myself. I also have come to understand that it is painful for those I love to know I cut myself, so I have partially stopped so I would not hurt them. I've learned better coping strategies as well."

– Survey Participant



Improving the Home Environment

What aspects of the home environment might be affecting my child's self-injury?⁶

- **Repression and/or mismanagement of emotion**

Self-injury is most commonly understood as an emotion regulation technique. This suggests that individuals who practice it have difficulty regulating emotional states healthfully. In some cases, this tendency is a result of a family history of repressing or mismanaging emotion, such as when family members either do not know how to constructively express negative feelings like anger or fear, or when they withhold demonstrations of love and tenderness with their children.

- **Family secrets**

All families have stories to tell, not all of which are easy to share or hear. When a child or adolescent is directly involved with negative events occurring within the family and then told or chooses not to share what is happening with someone he or she trusts, he/she may suffer—psychologically and physically. Depression, anxiety, and a variety of self-injurious behaviors are all potential consequences of keeping family secrets.

How can I foster a protective home environment?

- Model healthy ways of managing stress.
- Keep lines of communication and exchange open.
- Emphasize and uphold the importance of family time.
- Expect that your child will contribute to the family's chores and responsibilities.
- Set limits and consistently enforce consequences when these are violated. Consider positive consequences, such as working in a soup kitchen or other community service.
- Respect the development of your child's individuality.
- Provide firm guidelines around technology usage. Many individuals who struggle with self-injury report spending several hours a day interacting on the Internet with other self-injurers (particularly via message boards—many of which are not regulated) while engaging in their harming behaviors. Though the majority of the information shared is supportive, some of these sites actually encourage self-injury and even share harming techniques.
- Do not take your child's self-injury tools away. This suggestion is often surprising to parents. However, if your child has the strong urge to injure him/herself,

he/she will find a way (and it may not be as safe). Also, using the same tools is sometimes part of the ritual of self-injury, so the panic of losing this aspect of control can actually trigger more harming episodes.

- Remember that respect is a two-way street.
 - Keep the atmosphere at home inviting, positive, and upbeat.
 - Positive emotion promotes resiliency and serves as a protective measure.
- Practice using positive coping skills together.
- Avoid over-scheduling your child and putting too much pressure on him or her to perform.
- Don't expect a quick fix. There will be setbacks along the way to recovery, and a slip does not mean that your child is not making progress; these are common during stages of change. See the next page for more information about the **five stages of change**, which has been applied to a broad range of behaviors.

"Easy access to a virtual subculture of like-minded others may reinforce the behavior for a much larger number of youth."

—Janis Whitlock, Ph.D., MPH



How can I help my child get the most out of professional help?

- **Individual Therapy**
Avoid interrogating your child about what he/she talks about in individual therapy. The individual who self-injures is likely to need and want a measure of privacy as therapy progresses, but will also need to include significant others in some way over time. Don't expect too much in the beginning and continue working to keep lines of communication open.
- **Family therapy**
Individuals live in families and families typically have a host of belief systems and behaviors that influence individual behavior. Increasing all family members' awareness of how the family system may inadvertently feed an individual's self-injury can be a critical step in recovery.
- **Art therapy and other visualization/multi-sensory techniques**
Symbols and metaphors that appear in these modalities can be used to explore thoughts and feelings that may be hard to express in words. Many adolescents indicate that these therapies were most beneficial to them in their individual and family therapy sessions.
- **Group therapy**
This may be beneficial if your child is experiencing peer difficulties and can provide additional support outside of the home.
- **Consider inpatient treatment, if necessary**
S.A.F.E. Alternatives is currently the only inpatient treatment center for self-injury. For more information about what they offer, visit: <http://www.selfinjury.com>



Remember to take care of yourself as well! Set up your own support network. The National Alliance on Mental Health offers support groups for family members of individuals with a mental illness.

http://www.nami.org/Template.cfm?Section=Your_Local_NAMI&Template=/CustomSource/AffiliateFinder.cfm to find a group in your local area.

¹ Quote from *Self-harm: management and intervention* section of BNPCA Project Report (2004).

² Paraphrased from the preface of Selekman (2006).

³ List of examples from preface of Selekman (2006).

⁴ Quote from *In their own words* section of the Self-Injury: A Struggle website.

⁵ Example from *Self Harm: A peer-influenced behavior* section of BNPCA Project Report (2004).

<http://www.sfs.inboxchange.net.au/resources/public/items/2004/12/00131-upload-00001.doc>

⁶ Paraphrased from introduction of Selekman (2006).

⁷ Summarized from *How to find a therapist* section of the SAFE Alternatives website.

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FOR MORE INFORMATION, SEE: www.selfinjury.bctr.cornell.edu

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