

Self-Injury in Our Youth

Joni Orazio, MD, DFAPA

There is an alarming incidence of non-suicidal self-injury (NSSI) in children and teens. NSSI is self-injury without suicidal intent directly related to repeated unregulated emotional pain. It is estimated that 15-25% of all teenagers engage in NSSI, 60% are female, and the majority do not reach out for help. NSSI crosses all racial and socioeconomic demographics and affects all children, often including successful high achievers. Most, not all NSSI teens, will improve significantly in their 20's.

The increase in NSSI is postulated to be the result of references to self-injury in song lyrics, by celebrities, on television, and in social media that includes pro-injury websites that glorify NSSI. Additionally, NSSI as a shared experience has been on the rise.

NSSI stems from a need to reduce overwhelming emotional pain. NSSI creates a release of emotional tension by induction of physical pain, with forthcoming guilt. As you can see this creates a revolving cycle: emotional pain - self-injury - release - guilt - emotional pain.

Not unlike other forms of addiction, NSSI is believed to alter brain functioning through the opioid system. If the act is continued, one becomes dependent upon NSSI to feel some semblance of normalcy, and tolerance to its effect can lead to increased injury to experience a sense of relief.

Common methods of NSSI include:

- Cutting
- Burning
- Scratching
- Hitting/punching

NSSI is a behavior that is always hidden from parents with few exceptions. Signs that a teen may be engaged in NSSI are:

- Scars
- Cuts on thigh, stomach, wrist, arm and chest
- Suddenly wearing long sleeves or pants
- Blood stains on sheets or clothes
- Shyness when dressing
- Emotional and relationship distress
- Withdrawal from family and friends
- Finding sharp objects in their belongings

When a parent discovers their teen is engaging in NSSI, it is imperative to get professional help, starting with their pediatrician. It is important to address NSSI quickly and calmly, while validating their feelings, and expecting that this will not stop overnight. Parents cannot be their child's sole support to stop NSSI.

Treatment of NSSI most often includes:

- Treating underlying depression and anxiety
- Cognitive and Dialectic Behavioral Therapy
- Substitution, distraction and alternative techniques
- Exercise

What parents can do is to not get angry, create family quality time, make themselves available in a healthy way to support their teen, and seek help immediately.

Resources: www.selfinjury.com

1-800-DONT-CUT