

# SELF-HARM IN ADOLESCENTS: A GUIDE FOR PARENTS AND CARERS

## What is self-harm?

Self-harm typically refers to intentionally physically harming oneself. This can include various behaviours such as cutting, burning, hitting, scratching, or overdosing on drugs, over-the-counter or illegal medications.

## How common is self-harm in adolescents?

Self-harm behaviour may begin during adolescence, but can begin earlier. Approximately 16-18% of adolescents aged 11 – 18 years self-harm.

## Understanding why adolescents self-harm

People self-harm for different reasons. Self-harm can be a way to cope with intense negative emotions. Self-harm can be used to feel something instead of feeling numb. It can be used to communicate to important people a need for help. Adolescents who self-harm may be experiencing a range of difficulties. This may include issues with family relationships, peer relationships, bullying, feelings of loss, feeling overwhelmed, low mood, feelings of anxiety or another mental health disorder, low self-esteem or worries about their identity and who they are in the world. Some adolescents who self-harm may also engage in risky sexual or drug and alcohol use.

Self-harm can provide short-term relief from emotional pain, which is why it can become more frequent. However, while it can provide some relief in the short-term, it leads to other difficulties over a longer period of time including the possibility of serious injury or death. Self-harm is not always a suicide attempt, but still needs to be taken seriously.

## RESPONDING TO YOUR CHILD IF THEY SELF-HARM

### Responding if you notice or are told about self-harm

- Try to remain calm – take a deep breath and don't panic. Doing this will help your child to learn they can confide in you without worrying about you becoming upset or angry.
- Give your child a chance to tell you what's happening. It can be easy to try to fix their problems, but do your best to just listen and understand their experiences when they are first telling you about what is going on for them.
- Do your best to refrain from saying things in an angry or blaming manner. Often when feeling helpless and distressed it can be automatic to react with anger or blame, but this is not helpful in the moment.
- Provide first aid without judgement if needed, attend a medical appointment or the hospital if necessary.
- Get your own support early and think about how others might help.
- If your child is acutely suicidal get help immediately by calling 000 or attending the emergency department.

## LISTENING AND CONNECTING WITH YOUR CHILD

### Understanding your child

- Listen curiously and observe what your child is talking about, feeling, and doing.
- Demonstrate to your child that you understand what they are saying, trying not to fall into 'fix-it' mode.
- Communicate that your child's choice to self-harm is understandable given the current events or life circumstances. It is possible to understand while not approving of the behaviour.
- Provide hope for your child that together you can learn different approaches to cope with emotions – it is important for them to know it is normal to feel up and down and that they can learn better ways to manage these emotions.

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## Connecting with and supporting your child

- Make time to do something together that provides an opportunity to talk and connect with your child. You may find your child struggles to engage in activities or conversation. This is not uncommon – work on finding something you can do together to enjoy each other's company.
- Offer reassurances to your child and comfort them in a way they respond to – whether that is using physical touch like hugs, or telling them that you love and support them. Try using text, messenger, or writing a note.
- Explore non-verbal ways that build comfort, peace and a sense of support around them (this might include stocking favourite foods, writing on a kitchen board to keep them updated with household goings on, or easing expectations around homework and chores).
- Set up routines in your house – having dinner as a household or doing regular activities can help provide opportunities for connection. If they struggle to engage with this, hearing the rest of the household functioning normalises this activity. Routines will help both you and your child.

## PRACTICAL STRATEGIES THAT MAY HELP

### Seeking help

- Seek help early by talking to medical and mental health professionals including GPs and psychologists.
- Ask questions if you are unsure or concerned about something – medical and mental health professionals will be able to provide information or point you in the right direction.
- It is important to find professionals who are able to address your needs – it is okay to seek other help if you need.
- Consider mental health support for other siblings or family members if needed.
- Speak to teachers and wellbeing staff so they know what is happening and can support you and your child.

### Minimising harm

- Talk to health professionals about a care plan.
- Offer alternatives to self-harm that replicate the sensation but aren't harmful long-term.
- This may include holding ice, eating chillies, cold showers, drawing on the body part they want to harm in red pen, or snapping an elastic band against their wrist.
- Consider restricting objects your child may use to self-harm, including knives, belts or ropes, and medications, but only if the situation is an emergency.

### Keeping yourself well

- Practice self-care and self-validation, which also models self-care to your child.
- Reflect on your own emotions. You may feel confused, sad, helpless or angry – this is normal.
- GPs (book a double appointment to talk), psychologists, counsellors, family therapists and phone-based crisis services (i.e. Lifeline, BeyondBlue, Qlife, Suicide Call Back service) can provide support for you.
- Give yourself time to cry or relax.
- Talk to friends and family for support.

*This resource was collaboratively developed with parents and carers of adolescents who engage in self-harm*