

Self-Harm

Making Sense of It

Information for whānau supporting a young person who is harming themselves



What is self-harm?

Self-harm includes things a young person does to hurt themselves. It might include:

- cutting or scratching
- taking too much or too little medication
- burning
- putting items into, or under, the skin
- swallowing things which aren't designed to be eaten
- strangling or hanging.

What self-harm is not:

- *"attention seeking"* – young people are distressed and looking for connection and support.
- *"a mental health disorder"* – your young person is distressed. They may, or may not, have a mental health condition, or need mental health treatment, but they definitely do need support.
- *"they will kill themselves"* – not all young people who self-harm have suicidal thoughts, but they might have. This can change over time.
- *"this is forever"* – self-harm might ebb and flow over time. Your young person may have periods of self-harm, stop, and then start again. They may harm themselves for a short time and then never again.
- *"this is all my fault"* – this is not a parenting fail. Your young person is communicating their distress. This can be caused by a lot of different things.
- *"uncommon"*. Self-harm is relatively common and worryingly, around 1 in 4 young people are reporting self-harm each year in Aotearoa New Zealand. Just because something is relatively common, it doesn't mean you can't feel distressed or upset about it.

How do parents/whānau feel?

- Self-harm is a challenge for your whole family and whānau, not just the young person who is struggling.
- If you find out about self-harm from someone else, this may be particularly shocking or upsetting.
- Parents and whānau can have a mix of feelings including caring, worry, anxiety, sadness, shame, shock and wanting it to stop.
- Lots of parents and whānau feel really angry about the situation, but not with their young person.

"I was phoned by the school counsellor about my young person self-harming. Even though I knew something was wrong ... I was initially shocked. I was upset she hadn't been able to talk to me and sad."

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"In some ways I found it helpful to know that self-harm was common, however I also found this unhelpful. When it is constantly mentioned it makes you feel like people are minimising the situation for your child. Even though I still worried about suicide it was helpful to be told that not all children who self-harm have suicidal thoughts."

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Communication of caring

- Take this seriously.
- Try to remain calm.
- Listen to your instincts as a parent. Self-harm lets you know that something is not working for your young person.
- Listen to them without judgement. Pay attention. Put your phone away as you listen.
- If your young person is cutting, help with first aid and seek medical care if you are unsure about stitches or infection. It might not be helpful to take everything sharp away.
- Talk with your young person about helping to keep them safe. For example, by making sure that medications and poisons are in a safe place. If you have a gun in your home make sure it is hard to get and the ammunition is in a different, safe place.
- Find a way to regularly connect with your young person. For example an activity that you can both enjoy. This creates an opportunity to talk, to relax, and just be together.
- Young people need meaning and activity in their lives, which can include school, training, work, sports and/or community groups. It is generally better for young people struggling with self-harm to be doing something with their time, rather than nothing.

“I try to control my own distress and panic and speak in a compassionate tone with her. Recently she saw me cry for probably the first time. I think she carries shame for the distress she is causing us, so I normally try to stay much calmer when I am talking to her about these situations, so as not to make her feel any worse than I know she already does.”

“I was upset to see new self harm. I asked son if we could discuss the reasons why he felt the need to self harm after not harming for a wee while. Took a while for him to want to off load what was happening in his head.”

Communication and hope

It is OK to talk directly about self-harm, but remember your young person is more than self-harm and won't want to only talk about self-harm.

Ideas for conversations that create connection:

- What is going well for you at the moment?
- How is getting up and going to school/work for you?
- How are you getting on with staying at school/work for the day?
- How are things going with your friends?
- What are you enjoying most at the moment?
- What is tough for you right now? Remember, I am here for you.
- What are the things that worry you most?
- Lets find some solutions together.

“I gave her a hug, told her we loved her and that we would figure it out together.”

“I reached out to the school social worker and my daughters kaiako. Also extended whānau members, my daughter has a group of 'safe' people (people that she trusts) which are her go to people and consist of whānau and her kaiako.”

Who can you ask for help or support

- Get help from people you trust, such as whānau or friends, so they can help you help your young person.
- Professionals like Healthline, the National Poisons Centre, your General Practitioner (GP), School Guidance Counsellor, Social Worker in School.

In an emergency call 111.

