



Fact sheet 8

Deliberate self-harm and suicide

All self-harm deserves serious assessment. If you are concerned that a member of your family is self-harming, then seek help from your family doctor or local mental health service.

This fact sheet will help you to understand deliberate self-harm and how it relates to suicide and suicide prevention.

What is deliberate self-harm?

Deliberate self-harm (also known as self-injury) refers to the attempt to inflict physical harm to one's self and is often done in secret. Cutting, burning and ingesting toxic substances are the most common methods of deliberate self-harm, but other methods are also commonly used. It is more common among young people aged 11-25 years.

Deliberate self-harm varies with the individual. Some people deliberately self-harm regularly, while others may do it only once or twice and then stop. They may injure themselves in response to a specific problem and stop once the problem is resolved. Others may self-injure over a much longer period, whenever they feel pressured or distressed, and use it as a way of coping, particularly where they have not learned or cannot use more positive ways of coping.

Why people deliberately self-harm

People who deliberately harm themselves typically report feeling hopeless, anxious and rejected, having low self-esteem and finding it difficult to cope with the events in their lives. They often find it difficult to explain their feelings to others. They say that they do it to release tension or pressure, to reduce emotional pain, to punish themselves due to feelings of guilt and shame, to avoid letting others know how they are feeling, or to give themselves a sense of control over their lives. Deliberate self-harm may also be a symptom of an underlying mental illness requiring treatment by a health professional.

Links between suicide and deliberate self-harm

Deliberate self-harm should always be taken seriously:

- One of the major predictors of suicide is a previous episode of deliberate self-harm, including previous suicide attempts.
- Some research suggests people who self-harm are at increased risk of suicide, but other evidence indicates that they have no intention of dying and that harming themselves is their way of coping with life. However, even if there is no suicidal intent accompanying the deliberate self-harm, the risk of accidental death is very real.
- People who repeatedly injure themselves may come to feel that they cannot stop, and this may lead to feelings of hopelessness and possibly suicidal thoughts.
- People who self-injure and those who attempt suicide have similar feelings of hopelessness, often believing that things will never improve or that they have lost all control over their life. Additionally, if self-injury does not relieve tension or control negative thoughts and feelings, the person may injure themselves more severely, or may start to believe they can no longer control their pain and may consider suicide.

Responding to people who deliberately self-harm

Self-injury should always be treated seriously, no matter what its cause or motivation. It is important that the person receives immediate and appropriate health care that is skilful and non-judgemental, and continues to receive adequate support throughout treatment and recovery. Ongoing sensitive care and support for people who self-injure may reduce this behaviour and reduce the likelihood of accidental death resulting from self-injury.

Many suicide prevention activities, such as those that aim to build individual resilience may also help to reduce self-harming behaviours and prevent someone who self-injures from considering suicide in the future.

Dos and don'ts for friends and families

People who deliberately injure themselves are often very distressed, and require support and care from family, friends, and the community and health professionals. Here are some tips on how to best support and care for someone who self-injures:

1. Seek medical help. This is an important first step.

Some health professionals may dismiss it as attention-seeking, so it is crucial to go with the person to the hospital or medical office to ensure that he or she is treated sensitively and receives the care that is needed.

2. Ask the person if they have considered suicide.

The person may not have suicidal thoughts so they may become uncomfortable or upset. However, it is important to rule it out, or to seek support. Always take self-injury seriously and pay particular attention if the person talks of feeling depressed, hopeless or anxious, as these may also be associated with suicidal thinking.

3. Take care how you react. It can be distressing to find that someone is self-injuring, or to see their injuries.

- Try not to panic, become angry, reject the person or ignore the problem. Don't take the self-injury personally by thinking that the person is doing it to hurt you. These reactions may increase the person's feelings of guilt and shame. Remain calm and focus on supporting the person and helping him or her to find better ways to cope.
- Don't condone the self-injury. Be non-judgemental, and let the person know that you will continue to support them throughout their recovery and that you will be there for them no matter what they do.
- Don't give an ultimatum. It can be tempting to demand that the person stop their self-injury immediately. This may drive the person away, make them feel more rejected, decrease their trust in you, and make them believe you are not listening.
- Listen to the person so they feel heard and supported and reassure them that the conversation will be treated confidentially.

4. Provide the support the person needs. Self-injury is more likely to stop if the person can learn other ways to cope with their feelings and emotions:

- Help the person to find other coping strategies.
- Encourage the person to seek further help. There are many people and organisations that can help the person find better ways of coping and dealing with the issues underlying their self-injury.
- Suggest options for support (eg. seeing their local doctor or another health professional) and offer to accompany the person to their appointment.
- Do not pressure the person into any treatment they are not comfortable with.

More information

- Lifeline – 24 hour crisis counselling available across Australia: Ph: 13 11 14; www.lifeline.org.au
- *Living Is For Everyone (LIFE) – A Framework for Prevention of Suicide in Australia* (2007). Commonwealth Department of Health and Ageing: Canberra.
- *Living Is For Everyone (LIFE) – Research and Evidence in Suicide Prevention* (2007). Commonwealth Department of Health and Ageing: Canberra.
- Mental health & well being – information on the Australian Government's role and contributions to mental health reform activities in Australia: www.mentalhealth.gov.au
- Mental Health Foundation of New Zealand – Self-harm: An information booklet for young people who self-harm and those who care for them: www.mentalhealth.org.nz
- Mental Health Foundation (UK) – Self-harm publications (Truth About Self-Harm, Truth Hurts Exec Summary, Truth Hurts Report): www.mentalhealth.org.uk
- Nillumbik Community Health Service – self-harm information packs available at: www.nchs.org.au
- The Royal Australian and New Zealand College of Psychiatrists (RANZCP) – offers a self-harm treatment guide for consumers and carers: www.ranzcp.org
- Royal College of Psychiatrists (UK) – offers a range of resources: www.rcpsych.ac.uk
- Salvo Care Line (Salvation Army) – offers a crisis counselling service available throughout Australia: visit www.salvos.org.au for the number in your state.
- Samaritans (UK) – offers information about self-harm: www.samaritans.org
- SANE Helpline – offers a wide range of information about self-harm: Ph: 1800 18 SANE (7236); www.sane.org