

# Self-Injury

Self-Injury occurs with students who cut themselves with razors, sharp objects or pins. Rather than cutting, some students punch or burn themselves. In all of these cases, suicide is often not the desired outcome from the behavior. They often are able to find a brief respite from their emotional pain. Students who self-injure may be looking for other people to notice their behavior and talk to them about their pain--- a “cry for help” of sorts. Then again, other students who self-injure are very private about their actions and have no desire to let others know of their behaviors.

Given these different motivations and methods, helping a student who engages in self-injury behavior (SIB) can be difficult. In some cases, efforts to help can escalate the behavior or push the student further from seeking help. A common theme to help anyone who is engaged in a behavior of concern (e.g. cutting themselves, discussing suicidal thoughts, sharing hurtful stories or gossip) is to engage these students in a curious and caring discussion about your concerns for their wellbeing. Too often, we can jump to acting out of fear when we encounter a behavior we don’t know how to help someone with. Asking them about their behavior and sharing your concern is a good place to start.

Here are some general guidelines when trying to help a student with self-injury.

➤ ***I don’t want to talk about it.***

Understand that SIB is often an embarrassing behavior that college students struggle to talk about. As with making that first counseling appointment, the stigma associated with talking about problems with someone you don’t know can be difficult to overcome. Once the first conversation happens, SIBs are often reduced and the process of healing can begin.

➤ ***An addictive mind.***

Depending on how long the student has engaged in SIB, there may be an addictive quality to their behavior. Cutting produces chemicals in the brain that can increase the desire to cut again in the future. As with working out at the gym, those who engage in SIB report a “high” that accompanies their cutting. They often describe a release that occurs following SIB. The problem, as with other addictions (alcohol, gambling, substances...) is the life impact it has on the student (losing a job because of scars, not wearing short sleeves or shorts, feeling different or broken and isolating).

➤ ***Give it time.***

SIB often occurs more frequently with female students and during high school. With counseling, students with SIB often reduce their frequency in college. “Getting better,” is often a developmental process where a student grows out of the SIB behaviors that formed during their teenage years because they had trouble expressing their pain verbally to others. As mentioned earlier, there are many ways students work through SIB---some simply find better ways to cope with their pain, frustration and anger.

➤ ***Sometimes, SIB is more dangerous.***

While not common, SIB can transfer into more dangerous behavior related to suicide or students who hurt themselves related to a thought disorder (e.g. hearing voices with schizophrenia) or obsessive-compulsive disorder (OCD). Students may suffer from other mental health problems that will require counseling and medication. The best way to help a student is to help them form a connection to counseling.

➤ ***Another way to see it.***

There are several religious practices that have a history of seeing self-injury as a way to reach a higher level of reflection, commitment and direction in life. Likewise, some students engage in body modifications (such as tattoos and piercings) that share some similar qualities. For some, practices such as body piercing or religious fasting may be similar to behaviors that students who engage in SIB have. Some consideration needs to be given to those who are self-injuring, but who have different reasons for engaging in this behavior.

➤ ***A connection to therapy.***

The best way to help someone who is struggling with SIB is to help them connect to a therapist or psychologists. There are many reasons and motivations students have to engage in SIB. There are many different levels of SIB (from superficial scratches to students who spend hours cutting into their skin, tendons and muscles). The severity and course of treatment can be better planned and monitored when the student is connected to a counseling center.

