



Families and Carers

Understanding Self-harm and Suicidal Thinking

What is self-harm and why do people do it?

Self-harm can be used for many different reasons, depending on the person and the situation and can be common in people with personality disorder. People may self-harm to control difficult or overwhelming feelings, gain relief from emotional pain, to feel 'something' when experiencing numbness, to express anger or to communicate a need for help.

People who self-harm may have been experiencing a range of problems including:

- Difficulty getting along with family members or friends
- Feeling isolated or bullied
- Relationship breakup
- Current or past physical, sexual, or emotional abuse or neglect
- Loss of someone close such as a parent, sibling or friend
- Serious or ongoing illness or physical or emotional pain

Even if a person has been in treatment for some time, self-harm can reappear at times of significant distress. Often it provides short-term relief but in the longer-term it can be problematic and lead to permanent scarring or bodily damage.

Is self-harm the first step towards suicide?

Self-harm and suicide is not the same thing. Self-harm is not necessarily linked to suicide and does not indicate the person will suicide in the future. A person who self-harms may never make a suicide attempt and a person who makes a suicide attempt may never self-harm. Self-harm is often a cry for help or a way to release overwhelming feelings or to feel 'something' when numb.

Suicidal thoughts such as "I just want to die" or "I can't go on living anymore" need to be talked about and taken seriously. If the person has voiced these thoughts to you, they are trusting that you may be able to help and you should consult a health professional about this immediately. Suicide often stems from the person being desperate to end their emotional pain but not knowing how to problem solve effectively to do this.

Self-harm, suicide and stigma

Self-harm and suicide attempts are not well understood by the general community. Many people think that self-harm is just "attention seeking", and that suicide attempts, thoughts, feelings and behaviours are shameful, or that talking about them will give people "ideas" and increase the chance of them being carried out. These are misunderstandings and make it hard for people to talk openly and intervene in a timely manner. It is important that self-harm and suicidal thoughts and behaviours do not become a household secret. These issues should be talked about including with professionals.

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The difference between self-harm and suicide attempts

It is distressing to witness the one you love hurting themselves, but it is important to stay calm and distinguish between self-harm and suicidal behaviours so that you know the appropriate action to take. Firstly, you need to determine whether the person's intention was to self-harm or suicide, and how lethal the injury is:

1. If self-harm and the damage is likely to be lethal, that is, the person intended on cutting for self-harm but caused significant damage to a major artery, seek immediate medical attention.
2. If self-harm and the damage is superficial and not likely to be lethal, this is an opportunity for the person to take responsibility for their behavior and apply simple first aid. Try not to "fuss over" the injury as the person may learn that they need to engage in self-harm to gain attention and care. Instead, show the person you care about them as a person while paying minimal attention to the injury itself. Talk to your loved one about what happened prior to the self-harm that led to this behavior and problem solve other ways they may be able to manage difficult times in the future.
3. If suicide and the damage is likely to be lethal, seek immediate medical attention.
4. If suicide and the damage is not likely to be lethal, seek help from a medical doctor or health professional so the person can find alternative ways to problem solve their difficulties.

Once the crisis has subsided, talking to a health professional for your own support, including ways to help the person increase problem solving and alternate coping strategies, may be important. When in doubt about the lethality of self-harm or suicide attempts, seek medical attention even if the person is resistant to professional help.

What can I do to help?

There are some things you can do to help your loved one with their recovery, while remembering that ultimately the person needs to work on their own skills to reduce self-harm and suicidal behaviours. Helpful strategies may include:

- Be open to talking about self-harm and suicidal thoughts and behaviours in spite of the stigma you or they may feel. This can help reduce shame and develop trust in your relationship. You are more likely to be able to help if the person knows they can disclose their thoughts and feelings to you.
- Be patient with the person – it is likely that the person has been behaving or feeling this way for a long time. Acknowledge small steps towards recovery, such as using other self-soothing or communication techniques in times of distress. It is expected that the person will self-harm again at particularly difficult times, let them know that you still care for them.
- Validate and encourage – validate the person's pain so they know they have been heard and encourage them to use other coping strategies or talk to a health professional. For instance, try saying "I hear how distressed you are, so distressed that you have cut yourself and are talking about ending it all. It's important that we talk about these feelings, and I'm grateful that you've told me. What other options do you have to ease your emotions? What strategies could you use? What would it be like to talk to a professional about these difficult feelings?"
- Take care of yourself – it is difficult supporting a person who self-harms or makes suicide attempts. It is important to have people that you can talk to about your own experiences of this situation. Make sure you take time out for yourself and keep up your own self-care.