**Self-Directed Violence:**

***Self-Directed Violence (SDV)*** *formerly referred to as Self-Harm*, is an increasingly pervasive symptom of emotional distress & a way of dealing with deep emotional pain and includes anything you do to intentionally injure yourself.

Some of the more common ways include:

* Cutting or severely scratching your skin
* Burning or scalding yourself / Hitting yourself or banging your head
* Punching things or throwing your body against walls and hard objects
* Sticking objects into your skin
* Intentionally preventing wounds from healing

Because it involves physical damage to the sufferer, self-harming behavior can easily—**though not always accurately**—be interpreted as a precursor to suicidal behavior.

Unfortunately, parents are often so scared by their adolescent’s self-harm that they overreact, which **inadvertently shames their already ashamed child.** Their assumption is that their child is going to take the “next step” and commit suicide.

It is important to know that self-harm does not always lead to [suicidal behavior](https://www.newhavenrtc.com/suicidal-ideation/suicide-prevention/).

**SDV** can *also* include *less* obvious ways of hurting yourself or putting yourself in danger, such as driving recklessly, binge drinking, taking too many drugs, or having unsafe sex.

**Self-Directed Violence /COMMON MYTHS:**

**Myth 1: People who cut and self-injure are trying to get attention.**

**Fact:** The painful truth is that people who self-harm generally hurt themselves in secret. They aren’t trying to manipulate others or draw attention to themselves. In fact, shame and fear can make it very difficult to come forward and ask for help.

**Myth 2: People who self-injure are crazy and/or dangerous.**

**Fact:** It is true that many people who self-harm suffer from anxiety, depression, eating disorders, or a previous trauma-just like millions of others in the general population, but that doesn’t make them crazy or dangerous. Self-injury is how they cope. Sticking a label like “crazy” or “dangerous” on a person isn’t accurate or helpful.

**Myth 3: People who self-injure want to die.**

**Fact:** When people self-harm, they are usually not trying to kill themselves—they are trying to cope with their problems and pain. In fact, self-injury may be a way of helping themselves go on living. However, there is always the risk of a more severe injury than intended and, in the long-term, people who self-injure have a much higher risk of suicide, which is why it’s so important to seek help.

**Myth 4: If the wounds aren’t bad, it’s not that serious**

**Fact:** The severity of a person’s wounds has very little to do with how much they may be suffering. Don’t assume that because the wounds or injuries are minor, there’s nothing to worry about.

More often, there is **deeper** meaning to self-injury than what might be readily observable;

**Self-harm** is often the ONLY way they know how to:

* Cope with feelings like sadness, self-loathing, emptiness, guilt, and rage
* Express feelings you can’t put into words or release the pain and tension you feel inside
* Feel in control, relieve guilt, or punish yourself
* Distract from overwhelming emotions or difficult life circumstances
* Make you feel alive, or simply feel **something**, instead of feeling numb

**When talking about Self-Directed Violence:**

1. **Don’t overreact or appear shocked. Focus on FEELINGS**:

Be aware that talking about self-harm can be very stressful and bring up a lot of emotions with your caller. Don’t act frightened when you discover someone is practicing self-injury. If they sense signs of anxiety or nervousness on the part of the (TW)Worker, that will make them **unreceptive** to being open and building a connection.

Reflecting FEELINGS, especially the **negative** ones will help validate your caller and open the door to better understanding for both parties.

1. **Don’t insist that they “stop”, but express love and concern.**

If a caller confesses to cutting, walk a mile in her shoes. She may feel like the world is unsafe, maybe since childhood. Maybe she has suffered neglect or physical, sexual or emotional abuse. Maybe she’s been robbed of her self-esteem. **Because she can’t trust herself or others, she copes by cutting herself.**  And like any compulsion, the problem can’t go away at a whim. **Demanding that they stop can *actually* make them feel condemned and even MORE compelled to cut.**

It is important for the self-injurer to try to find **their own** creative ways as outlets for emotions and alternate options for replacing self-harm.

**Things NOT to say:**

* **“I could never do that to myself. It would hurt too much.”***This makes the individual feel* ***more*** *judgement and shame. Realize that self-mutilation is not about YOU and you* ***should refrain from injecting personal feelings into it.***
* **“You don’t need to do this.”**
*This invalidates the callers feelings and doesn’t help because they do NOT feel they are ABLE to stop. These individuals have stated that they MUST do it to help them cope with life.*