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# Tips for Preventing Self-Harm in Teens

Conversations with a Child Psychologist

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# Today's Structure

- Education about the nature, prevalence, risk-factors, and maintaining factors for self-harm
- Family strategies to prevent or detect early signs of self-harm
- First line behavioral health interventions for self-harm

# Patient Story

Ellie, a 14 year-old female patient, attended an outpatient PCP visit that was scheduled by her mother due to concern for irritability and strong mood fluctuations. Mother reported Ellie has been experiencing increased social stress at school including teasing from a group of peers. She noted Ellie spends much of her time at home in her bedroom. Mother reported her relationship with Ellie was once strong and now Ellie gets angry or annoyed easily when they talk. Mother stated Ellie has told her she scratches herself when she is angry. Mother knows a few of Ellie's peers have engaged in self-harm and she worries Ellie may be doing the same. She does not know how to talk to her daughter about it.



# Information about Self-Harm

- 30-50% of all adolescents (single instance)
- ~17% of adolescents (repeated instances)
- Average age of first self-harm is 13 years-old
- Unclear whether there is a sex difference
  - Boys are thought to be more likely to under report
- Sexual and gender minorities at particularly high-risk (50%)
- 45% of people use cutting as their primary or only method of self-injury
- Prevalence is increasing
  - Emergency room trends show 50% increase between 2009-2022
- ~50% of people seek help for their self-injury but only from friends instead of professionals

## RISK FACTORS



*Having friends or family members who self-injure*



*Mental health conditions and isolation*



*Experiencing stressful life situations*



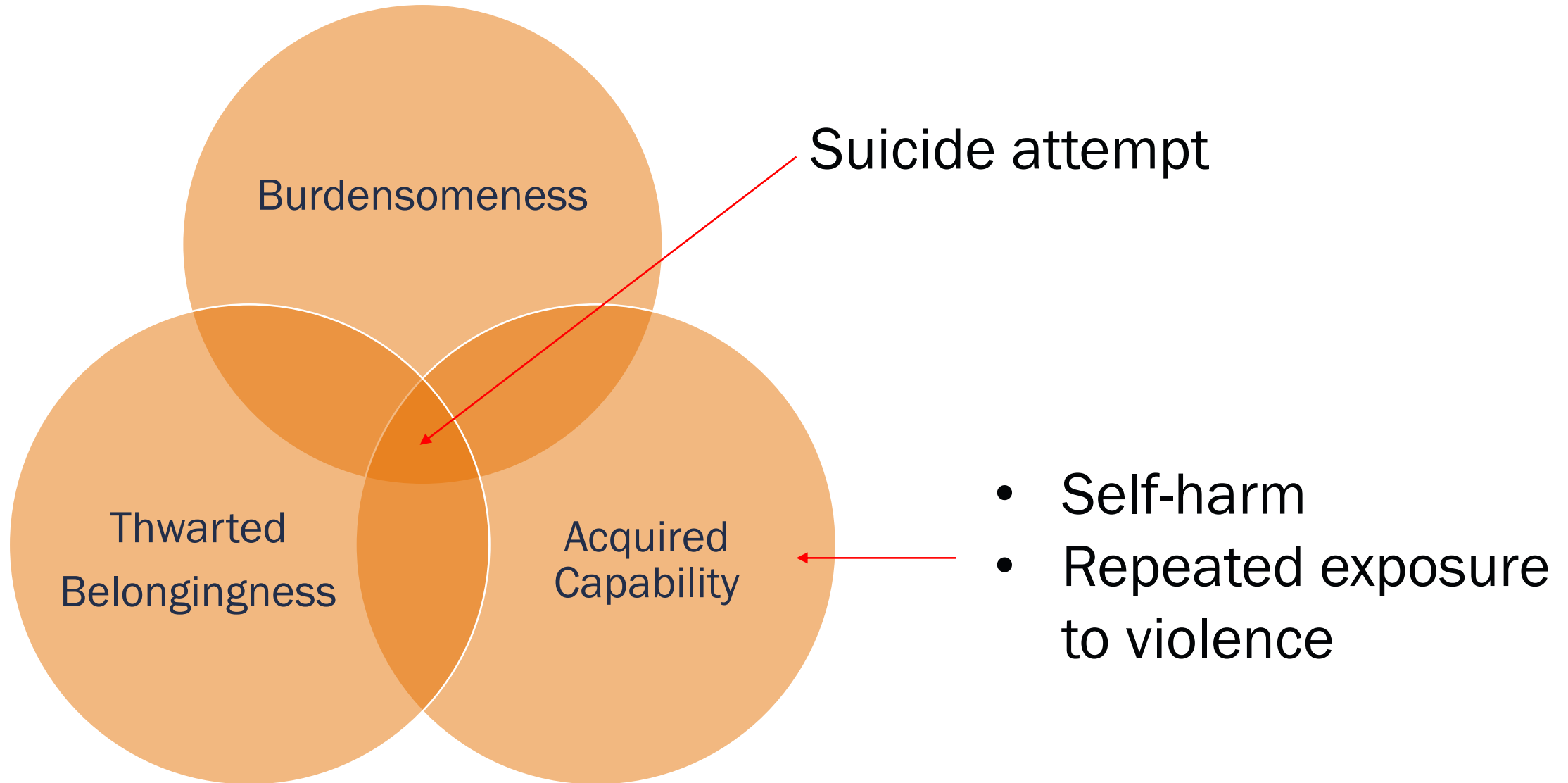
*Drug and alcohol use or addiction*

# Information about Self-Harm

## Functions of Self-Harm

- Affect regulation (“it calms me down/relieves tension”)
  - Management of distressing thoughts or SI (“helps me get my mind off my problems”)
  - Gain control (“I feel so overwhelmed; helps me focus”)
  - Feel excitement (“otherwise I just feel empty”)
  - Self-punishment (“I deserve it”)
  - Stop dissociative experiences (“makes me feel real”)
  - Garner social support
  - Decrease demands (homework, chores, etc)
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- Self-harm is usually impulsive and stems from emotional pain
    - Less than one hour of planning
  - Self-harm is not usually manipulative or “attention-seeking”

# Interpersonal Theory of Suicide (Joiner et al., 1999)



# How to Talk to Your Teen

- Setting: Private and minimal interruptions
- Emotions: Everyone calm
- Start the conversation
  - Open-ended statements: “I have noticed you have seemed down lately.”
  - Open-ended questions: “How have you been coping with all this stress?”
- Keep the conversation going with reflection of the teen’s emotions and disclosed content
- Ask *THE* question: Some people hurt themselves when they feel strong emotions. Have you ever done this?
- Avoid strong reactions, expressing judgement, or disagreeing with what the teen says
- Calmly express concern: “Your health, happiness, and safety means everything to me. How can we work together to keep you safe?”

# Prevention Strategies

- Schedule brief daily check-ins
  - Caregivers should make this a plan with their teen
  - Around the same time each day
  - “How are you feeling?”
  - Rate mood/anxiety 1-10
  - “What do you need in this moment?”
    - A hug, fun distraction, sit quietly together, talk, go for a walk, be productive, etc.
- Routine decreases defensiveness

# Behavioral Health Professional Intervention

## Assess

- Frequency, severity, method, risk-factors, maintaining factors

## Inform a parent or caregiver

- Collaborative approach with the patient
- Emphasizes the importance of safety and the seriousness of this behavior

## Develop a safety plan

- Restrict access to means (check-out razors, scissors; put kitchen knives up high; take away lighters)
- Decrease time spent alone at home
- Daily check-in time with parent or caregiver
- Code word

# Behavioral Health Intervention (cont'd)

- Identify the functions of self-harm
  - What other strategies might provide similar results?
- Improve ability to communicate feelings
- Improve problem-solving abilities
- Involve parents or caregivers in treatment
  - Improve family relationships and work as a team to decrease self-harm behaviors
- Assess the impact of social media and friendships; potentially make changes

# Patient Story - Resolution

Ellie, a 14 year-old female patient, attended an outpatient PCP visit that was scheduled by her mother due to concern for irritability and strong mood fluctuations. Mother reported Ellie has been experiencing increased social stress at school including **teasing from a group of peers**. She noted Ellie spends much of her **time at home in her bedroom**. Mother reported her relationship with Ellie was once strong and now Ellie gets angry or annoyed easily when they talk. Mother stated Ellie has told her **she scratches herself when she is angry**. Mother knows a few of Ellie's **peers have engaged in self-harm** and she worries Ellie may be doing the same. She does not know how to talk to her daughter about it.

- Teach mother strategies to talk with Ellie
- Begin behavioral health treatment for mood
- Intervene as a team on self-harm, if disclosed

# Summary

- Self-harm is common but not trivial
- Talking about self-harm will not cause self-harm
- Family intervention that involves means restriction and safety planning are key interventions for a teen that is self-harming

# Next Conversation

- 4/14/26 [Tips for Helping Kids Cope when the World Feels Scary](#) with Emily Gonzalez, PhD, ABPP, Clinical Child/Adolescent Psychologist
- Recordings are posted here:  
<https://med.virginia.edu/pediatrics/about/uva-health-childrens-conversations-with-a-child-psychologist/>





# Mental Health Emergencies

## EMERGENCIES

- Go to your nearest **Emergency Room** or **call 911**
- National Suicide Prevention Lifeline **call or text 988** or on-line chat <https://chat.988lifeline.org/>
- Trans Lifeline **(877) 565-8860** 11:00 a.m. to 5:00 a.m. EST
- Trevor Project Lifeline **(866) 488-7386** available 24/7



# Mental Health Resources

## FIND A PROVIDER

- Virginia Community Services Boards: mental health, substance use, and mental health emergencies <https://vacsb.org/csb-bha-directory/>
- Psychology Today: psychotherapists, psychiatrists) <https://www.psychologytoday.com/us/therapists/>
- American Psychological Association: psychologists <https://locator.apa.org/>
- Comprehensive information about effective child psychotherapies <https://effectivechildtherapy.org/therapies/>



# Mental Health Resources

## EXPLAINERS

- Mental Health America: Mental Health 101 <https://screening.mhanational.org/mental-health-101/>
- Child Mind Institute: Complete Guide to Getting Good Care <https://childmind.org/guide/parents-guide-to-getting-good-care/>
- Child Mind Institute: Topics A-Z <https://childmind.org/topics-a-z/>
- Child Mind Institute: Symptom Checker <https://childmind.org/symptomchecker/>



# Other Resources

## Bridge2ResourcesVA

Resources for (almost) every need across Virginia

<https://bridge2resourcesva.org/> all languages

## Do You Need Food Today?

call 540-248-3663 Monday-Friday 9am - 5pm or go to

[www.BRAFB.org/findfood](http://www.BRAFB.org/findfood) all languages

- Enter your location in the linked map to search for free groceries, fresh produce, and meals near you.
- Once you've picked a nearby food pantry, call them for details.

# Use MyChart !

Questions?

Contact the MyChart Helpdesk

MYCHART@VIRGINIA.EDU

CALL 434.956.7493



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Recording is off....

# *Ask Me Anything*

*Please answer 5 quick questions about today's talk!*

[https://bit.ly/feedback\\_1234](https://bit.ly/feedback_1234)

