



How to help youth who self-injure?

New paper identifies the most promising treatments

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Evidence-Based Talk Therapies for Self-Injurious Thoughts and Behaviors in Youth

Self-injurious behaviors are actions aimed at intentional and direct injury to one's own body, including nonsuicidal forms of self-injury (e.g., skin-cutting and burning) and suicidal self-injury (e.g., suicide attempts). These behaviors are relatively rare in childhood but increase dramatically during the transition to adolescence. It is estimated that each year approximately 16% of adolescents will seriously consider killing themselves and 8% will attempt suicide. Nonsuicidal self-injury is even more common among youth: around 18% of adolescents report engaging in these behaviors. Given that self-injurious behaviors typically begin and increase dramatically during adolescence, and cause significant impairment in social, familial, and academic contexts, the field is in urgent need of treatments that specifically target self-injurious behaviors in youth.

The good news is that several treatments for self-injury have been developed in past few decades and many in the past 10 years. A recent review of treatments for self-injurious youth conducted by Drs. Catherine Glenn, Joseph Franklin, and Matthew Nock at Harvard University identified 16 different treatment approaches that have been examined for reducing self-injurious behaviors in adolescents. A number of interventions (6 total) have shown potential promise including cognitive-behavioral, family-based, interpersonal, and psychodynamic treatment packages. However, there currently are no "well-established" interventions, and no single treatment package has demonstrated superior efficacy for reducing self-injurious thoughts or behaviors in adolescents. Although there is no clear-cut first-line intervention for self-injury, the review did highlight the following common therapy components that may enhance treatment for this population: fostering familial and other interpersonal relationships, improving parent education and training (e.g., parental monitoring), and strengthening adolescents' coping skills (e.g., emotion regulation). Future studies – specifically randomized controlled trials – are needed before strong conclusions can be made about the efficacy of any particular treatment.

Source: Glenn, C. R., Franklin, J. C., & Nock, M. K. (2014). Evidence-Based Psychosocial Treatments for Self-Injurious Thoughts and Behaviors in Youth. *Journal of Clinical Child & Adolescent Psychology*, 44(1), 1-29.

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RESOURCES: For more information, interested readers can go to www.effectivechildtherapy.com. The website offers free videos on a variety of child/adolescent therapy topics, including videos describing various evidence-based treatment approaches; there are videos for [parents](#) and [professionals](#).