

FIVE THINGS TO KNOW ABOUT ...

Nonsuicidal self-injury

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Nonsuicidal self-injury is a prevalent, poorly understood behaviour

Nonsuicidal self-injury refers to the deliberate destruction of one's body tissue without suicidal intent.¹⁻³ Forms of self-injury include cutting, burning and self-hitting, but not socially sanctioned behaviours (e.g., piercing). Between 14% and 21% of youth and young adults have engaged in nonsuicidal self-injury at least once, about 25% of whom having done so repetitively.³ There is little to no sex-related difference in prevalence among community samples, despite the higher proportion of females who engage in the behaviour in clinical settings. Research indicates that professionals often hold misconceptions around nonsuicidal self-injury, which may affect clinical care.⁴



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Nonsuicidal self-injury rarely indicates the presence of borderline personality disorder

Empirical consensus indicates that most people who engage in nonsuicidal self-injury do not meet the diagnostic criteria for borderline personality disorder.^{1,3} However, youth engaging in the practice often experience mental health symptoms, including depression, anxiety, inattention and impulsivity.¹⁻³

Resource

- Self-injury Outreach and Support (www.sioutreach.org) is a nonprofit outreach initiative providing current information and resources for patients and physicians.

A history of physical or sexual abuse is not always present

Historically, nonsuicidal self-injury was considered an indicator of abuse or trauma. Recent research has shown that many people with a history of physical or sexual abuse are at risk of nonsuicidal self-injury. However, most who engage in nonsuicidal self-injury do not have this history.¹⁻³

References

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Attention-seeking behaviour and manipulation are seldom motivations for nonsuicidal self-injury

Although often perceived as attention-seeking or manipulative behaviour, nonsuicidal self-injury has multiple motivations.⁵ It is predominantly used to regulate or manage perceived intolerable negative affect and often remains secretive.^{2,3,5} Some of the less common motivations include self-punishment and a means of communicating distress.⁵

Suicidal behaviour and nonsuicidal self-injury are distinct

Unlike nonsuicidal self-injury, suicidal behaviour reflects an explicit intent to die. Moreover, suicidal behaviour tends to be less frequent and has higher lethality. However, researchers have shown that nonsuicidal self-injury can be associated with suicide risk. Therefore, clinical presentation of nonsuicidal self-injury merits an assessment for suicide risk.¹⁻³

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