



Nonsuicidal Self Injury Behavior

(NSSI) Presented to School Counselors 8.15.25
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School Counselors, present to your Faculty & Staff





What is NSSI?

- The International Society for the Study of Self Injury defines NSSI as **“The deliberate, self inflicted destruction of body tissue without suicidal intent.”**

In other words, intentionally injuring oneself.





Highest among adolescents ages ____ to ____ .



Why Self Harm?



Negative Coping Mechanism to manage overwhelming/intense feelings.

People might self-harm to:

- **Process** their negative feelings
- **Distract** themselves from their negative feelings
- **Feel something** physical, particularly if they are feeling numb
- Develop a **sense of control** over their lives
- **Punish themselves** for things they think they've done wrong
- **Express emotions** that they are otherwise **embarrassed** to show

Everyone needs a way to cope with their emotions.





Typically, students who self injure are **not thinking about suicide**. Many are avoiding suicide by **controlling their pain** by self-injuring.

There can be a history of trauma, neglect, sexual trauma.





Common Types of Self Injuries

- Cutting
- Scratching
- Burning
- Carving words or symbols into skin
- Hitting or punching oneself
- Pulling hair out
- Piercing skin with objects such as thumb tacks, hair pins, razors
- Picking at existing wounds





The Signs

- **Unexplained injuries;** scars, bruises, cuts, burns, (often on arms, thighs, abdomen), broken bones, fingers, hands, wrists, toes.
- **Clothing choices** designed to cover up self injuries. Can be inappropriate for the weather, environment or situation.
- **Secretive behavior** including spending lots of time isolated. In restrooms at school.
- **Refuse to be part of activities** that require changing clothes like PE, sports, etc.



What should I do when Student is engaging in self injury behavior?



1. **Report behavior to school counselor.**
2. School counselor meets with student.
3. School counselor escorts student to nurse for wound care if necessary.
4. School counselor then notifies parent/guardian.
5. School Counselor offers education and may offer outside referral services.
6. School counselor follows up with student.

If counselor not on campus, please notify nurse for wound care. Notify counselor upon return.

Counselor completes form for documentation.

FORM: https://drive.google.com/file/d/1-SUay2p5NERwyGTxHUQLD9mEBH5sHSi8/view?usp=drive_link



Effects of Self Harm



- Permanent Scars
- Uncontrolled Bleeding
- Infection
- Guilt or shame
- Diminished sense of self
- Addiction to the behavior



What can we do at a Tier 1 level?



- Self Management Lessons: Teach how to identify emotions. Brain Science.
- Teach healthy regulation skills.
- Educate students, faculty, staff and families on NSSI.



Tier 2 Interventions



- Nurse Wound Check
- Individual Counseling
 - Brain Science Review
 - Identify Trigger
 - Identify Feelings
 - Big or Small
 - Regulation Skill/Skills (Gold Card)
 - Comfort Kits (replacement behavior)



Tier 3 Interventions

- Referral Mental Health Provider
- Emergency Conference with Parent



References



Nelson, M.D., Piccin, R. (2014). Working With Nonsuicidal Self-Injurious Adolescents.

In T.P. Remley, Jr., W.D. Rock, & R.M. Reed (Eds.), *Ethical and legal issues in school counseling* (4th ed., pp. 137-147). Alexandria, VA: American School Counselor Association.

Additional resources:

Dr. Patton- <https://rncyj.glideapp.io>

See My Pain Work Book

To Write Love on her Arms Podcast

<https://www.crisistextline.org/topics/self-harm/#what-is-self-harm-1>

<http://www.selfinjury.bctr.cornell.edu/perch/resources/distraction-techniques-pm-2.pdf>






The following section is for school counselors.



School Counselor Documentation



 **NONSUICIDAL SELF INJURY (NSSI)
SCHOOL COUNSELOR DOCUMENTATION**
Confidential

Resource Literature
<http://www.selfinjury.bctr.cornell.edu/perch/resources/distraction-techniques-pm-2.pdf>

Student Name _____ Date: _____
Grade: _____ ID#: _____ School Counselor: _____
Student Referred By: _____

What type of injuries were reported/observed:
Scratching, pinching, preventing wounds from healing, punching or banging self or objects, self bruising, sticks objects into skin, cutting, carving, burning, self-bruising, breaking bones. Other:

Step 1: **Please ensure student injuries are evaluated by the school nurse for wound care if open wounds present.**

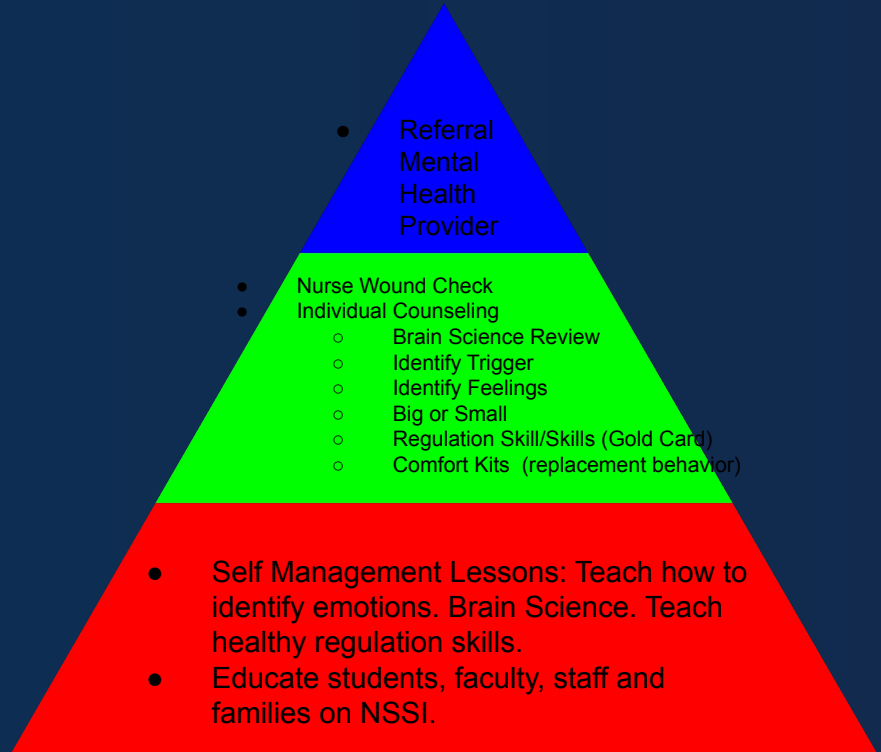
Step 2: Ask the student if their self injury behavior was an attempt to kill themselves? If the answer is yes, proceed with district suicide protocol.

Consider Tier II or Tier III interventions pending frequency. (1-2 lifetime incidents, 3-10 lifetime incidents, more than 10 lifetime incidents)

Step 3: Assist student in regulating. Identify the feeling, how big and a positive regulation skill they are willing to try in the future. When able to go back to class, send the student back to class.

Step 4: Notify parent. Offer resource list and or permission slip to assist student as needed to co-regulate and or regulate for future occurrences.

Parent/Guardian Notified: Name: _____ Date/Time: _____



Tier 2 Interventions: Comfort Kits, Gold Card Coping Skills, Replacement behaviors



Non-Suicidal Self-Injury Practical Interventions and Tools for Students

Interventions

Comfort Kit (Cindy Morton)

The goal of a comfort kit is to provide a distraction for students who engage in self-injurious behaviors. Fill the kit with a few tactile tools and sensory items. It is more effective if you limit the kit to three to four items.

How to use the kit?

Start out strong by allowing the distressed student to come into your office and use his or her kit for about 20-30 minutes. As time goes on during the year, slowly reduce the student's time with the kit and progressively move the location of the kit so the student can access it without your presence (you can include a sand timer). The goal is to place the kit in his or her possession where the student can look at the items and become distracted from the act of NSSI.

Items to include in a kit:

- **Glue** - Glue gives the sensation of pulling on the skin which mimics the sensation students desire when cutting, burning, or picking the skin.
- **Highlighters** (suggested colors are yellow and green)- Highlighters can be used for the student to make visual marks on the skin which is often another desired result of NSSI.
- **Tape**- Like glue, tape also provides a sensation of pulling on the skin which mimics the sensation students desire when cutting, burning, or picking the skin.
- **Band aids**- Like glue and tape, band aids also give the sensation of pulling on the skin which mimics the sensation students desire when cutting, burning, or picking the skin.
- **Bag** with sand and rocks, a manipulative like clay or play doh, or stress ball

Distraction Techniques (Kilburn & Whitlock; National Self Harm Network):

- Reach out to others (*students can call SAFE Alternatives 1-800-DONT-CUT*).
- Encourage students to express themselves creatively through a journal, a song, or drawing, or writing poetry.
- Students can nurture themselves by taking a bubble bath, watching a funny movie, listen to music, or take a shower.
- Find constructive activities like cooking, cleaning, doing homework, organizing their room or dyeing their hair.



Re-CAP:



- NSSI **does not equal** suicide ideation
- After completion of NSSI Assessment form and **notify parent**
- **Open wounds** →Nurse→Assess
- **Not an ER** →can return to class after NSSI protocol
- **ER or Urgent matter**→follow NSSI protocol, bring in parents provide resources.
- Help students identify triggers, feelings, and replacement behaviors
- Present NSSI presentation to faculty/staff. Make copy (email)

○



What would you do?



Teacher refers student to counselor when she noticed student was attempting to use a pencil sharpener to possibly cut her arm.

Student discloses to counselor, she has never cut before. She doesn't have an open wound. She admits she was curious about cutting herself because she heard a friend talking about it.



What would you do?



Admin walks student to school counselor because they noticed a couple of fresh wounds on the inside of a student's arm.

Counselor takes student to nurse. Nurse addresses the wounds. Superficial.

Counselor then takes student to their office. Student shares he cuts occasionally when he is feeling very anxious. He has cut himself a few different times over the years. He discloses he is not suicidal when counselor conducts interview. He is in overall positive spirits. He was nervous about first day of school.



What would you do?



Student checks in at a 1 = need help. When you go gather student, student appears unwell. Student expresses they feel extremely upset, nervous, anxious, sad. Student is holding back tears as you walk to your office.

As you listen, you notice the student has many fresh wounds on their leg. Although student tells you they aren't suicidal, you are very concerned about: their affect, the number of previously healed markings and the number of fresh wounds on the students person.

You walk the student to the nurse to address open wounds. Then walk the student back to office.

