Self-injury is any behaviour that causes physical harm to the person doing it. It can be dangerous for both the person and those around them, as well as upsetting to anyone who witnesses it. This information sheet gives information on self-injury and how to support a person who self-injures.

**What is self-injury?**

Self-injury is any behaviour that causes physical harm to the person doing it. This can include biting, scratching, picking, hitting and many more. It can result in serious harm to the person including cuts, bruises or even broken bones.

Self-injury is different from self-harm because it is not associated with mental health problems. People self-harm because they use it as a way to let out their emotions or to escape traumatic ideas or memories.

It is possible that some people with both self-injure and self-harm; there may be some overlap and the two may be difficult to separate. Don’t assume that self-injury is caused by mental health problems as many autistic people self-injure but do not self-harm.

**Why do people self-injure?**

Self-injury is common in autistic people. It is important to try and understand why a person might be self-injuring. What are they trying to do or say with their actions? Self-injury may be caused by stress, anxiety or sensory problems or it may be an attempt to communicate.

**Some of the most common causes of self-injury are:**

- Reacting to illness or pain
- A high pain threshold or being under-sensitive to touch
- Sensory problems – trying to block out or reduce an uncomfortable sensation
- Continuing behaviours that are usually seen in younger children - such as hand mouthing, which is common in babies and toddlers
- Communication
- Demand avoidance
- Habit or learned behaviour
- Repetitive behaviour or routine.
- Neurological conditions such as epilepsy, Tourette’s Syndrome and Catatonia.
Self-injury could be caused by a combination of these issues, or they could originally have been caused by one thing and become a habit or routine. It is important to try to tackle these issues as quickly as possible to prevent the behaviour from becoming habit. If someone is verbal or can use a communication system, then they may be able to tell you why they self-injure. If the person is non-verbal, or is unable to explain or understand why they self-injure, you will need to take more ‘trial and error’ approach to find something that works.

**How do I support someone who self-injures?**

If the person you care for begins to self-injure, you need to act quickly to reduce the risk of damage.

1. Stay calm and quiet so that you do not make the situation worse.
2. Try to get the person’s attention and re-direct them to something else.
3. Try to find something to replace the behaviour. For example, if they are biting themselves, you can give them something else to bite on.
4. Provide something to block the person, this may be a cushion to prevent head banging or specialist equipment or rooms.
5. Stop any sensory input that may be causing distress, such as loud noises or bright light.

Once the incident is over, you can start to think about how to prevent or manage the self-injury. Visit your GP to rule out any medical reasons for the behaviour. Your dentist may also be able to help rule out any problems with the person’s mouth, gums or teeth.

You should explain:

- Exactly what happens
- When it happens
- What else is usually going on when it starts
- How long it lasts
- How long the person has been doing this.

It may help to keep a diary of incidents, covering each of the above points, to help you to remember key information.

You can also reduce stress and anxiety, which may be a cause or trigger of self-injury or may simply make it worse or more regular. Reducing stress will mean different things to different people. It may include increasing structure and routine or allowing them to engage in things they enjoy.
You should consider possible sensory causes. Once you have completed the diary to show to your GP, you can use it to look at possible sensory issues that may be affecting the person’s self-injury. If several of the events happened straight after loud noises for example, you may be able to support the person by keeping their environment quiet and calm.

If you have ruled out each of the causes, or the changes you have made need reinforcement or support, you may need to try some more direct interventions. Some people may require medication to help them to stay calm or to reduce their self-injury.

Always speak to your GP about this.

Positive strategies

Some people will see improvements by using physical exercise or rewards for positive behaviour. Rewards in particular may be useful to help someone to break a habit. The reward can act as a distraction if they are starting to fall into an old routine of self-injury. Other strategies may include meditation or relaxation techniques.

Conclusion

It is important to remember that self-injury may be a form of communication. Whether the person is trying to communicate a sensory need, stress or pain, you need to work out the message before you can help. Each person is an individual and so you will need to work with them closely to understand their needs and how you can support them best.