Indian Health Service 2012 National Behavioral Health Conference Welcome I Hurt So I Cut

LORI E. MEDINA, MSW,LMSW, LCSW,CMFSW <u>Lori-medina@cherokee.org</u> casstex@aol.com Office #918-207-4969 Cell #479-263-1523

House Keeping

- Please be sure to sign in and out on the Sign In Sheets located near the entrance to this room.
- Please complete the evaluation at the end of this presentation.
- For more information on Continuing Education Units (CEUs), please visit the Registration Desk

Comfort Room

- To promote wellness and self-care, a Comfort Room is available in Atrium Room 8 for your use.
- If you need further assistance, please visit the Indian Health Service Division of Behavioral Health Booth.

Crisis Hotline Numbers

- Suicide Prevention Lifeline Number:
- 1-800-273-TALK (8255)
- National Domestic Violence Hotline:
- 1-800-799-SAFE (7233) or TTY 1-800-787-3224
- National Child Abuse Hotline:
- 1-800-4-A-CHILD
- Sexual Assault Hotline:
- 1-800-262-9800

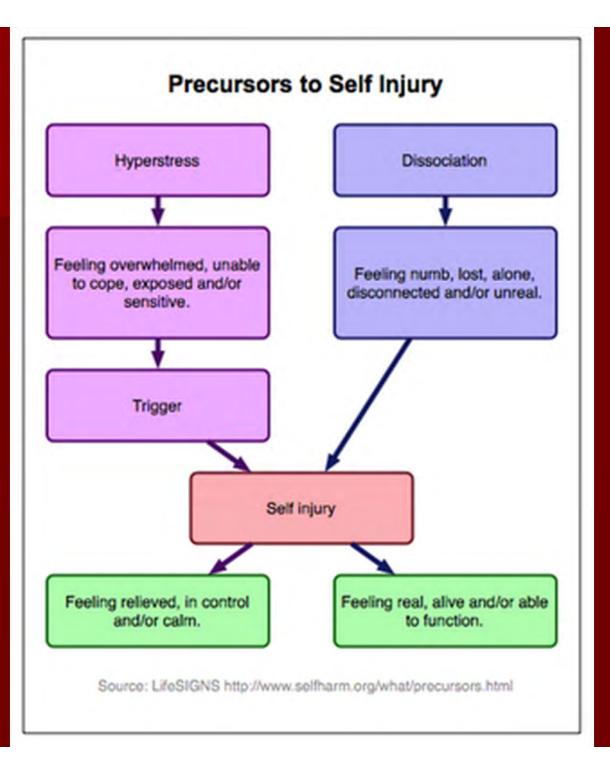
WARNING PRESENTATION MAY BE TRIGGERING AND EXTREMELY **GRAPHIC** AND EXPLICIT





HISTORY HANDOUT





What is self-injury (SI)?

- SI can be defined as the attempt to deliberately cause harm to one's own body and the injury is usually severe enough to cause tissue damage
- It is NOT SI for sexual gratification, religious practices, body decoration and or fitting in or being cool
- Common forms: cutting, biting, burning, head banging, ripping hair out, breaking bones, and piercing, embedding or carving

Some believe that SI is a way to kill yourself

- SI is a way of expressing anger, agitation, and pain that many adolescents face when they are depressed or suffering other mental health issues
- Depressed adolescents isolate and that isolation can lead them to take their pain and anger out on themselves

- Brief episode of SI (scratch arms or legs once or twice and then leave it at that)
- Can turn into a regular occurrence
- Pain and or depression is very intense
- May become disconnected from real self (known as dissociative state)
- Protection of feelings
- Two types of SI, see the blood or feel the pain can be both
- Feel numb or lost
- Physical pain of SI brings the focus back to reality

Can be quite scary

- Act of cutting and the release of blood have revived them
- Frightened by what they have done to themselves
- Many who SI do not feel any pain when they are hurting themselves
- They can break their own bones, burn themselves with hot irons, or cut up their arms with no feeling of pain

- Researchers have discovered the stress of traumatic memories or emotional pain causes the brain to release chemicals that act as a kind of pain reliever
- These chemicals are powerful opiates that block the physical pain of SI
- Some researchers believe that cutting and other self-harming behaviors can become addictive as the person begins to crave that rush of opiates and the calming effect they have come to rely on
- Once cutting starts, it can be very difficult to stop even if they realize it is not a healthy thing to do

Addiction?

- SI can be addictive
- It works
- It is quick and easy
- Makes the "bad" stuff go away for awhile
- Why would you want to go through the hard work of finding other ways to cope?
- Negative consequences add up
- People do seek help

Coping

- We are not born knowing how to express and cope with our emotions
- We learn from parents, siblings, friends, schoolteachers, everyone in our lives
- One important factor common to most people whom Self-injure , whether they were abused or not , is INVALIDATION
- Most were taught at an early age that their interpretations of and feelings about the things around them were bad and wrong

Learned that certain feelings were not allowed

- Abused people may have been severely punished for expressing certain thoughts and feelings
- Role models growing up were not good and did not provide coping strategies
- Usually did not grow up around others that were coping effectively with stress
- SI is a maladaptive coping mechanism, a way to stay alive

Performance Anxiety
Emotional Constriction
Defenseless Personality
Hopelessness
Helplessness

GOALS OF SI

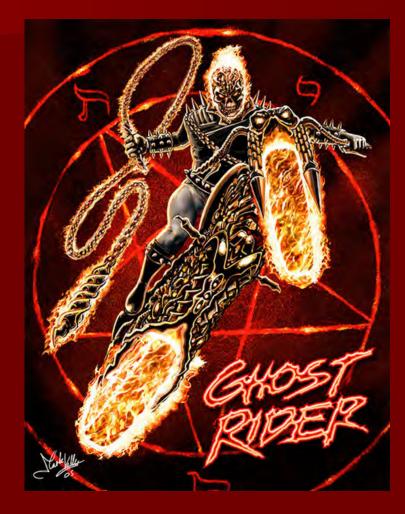
Problem Solving
Coping Strategies
Regulation of Emotions

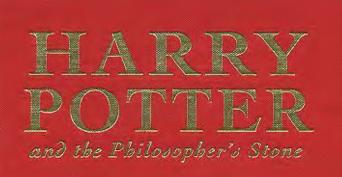
ADOLESCENTS THAT SI

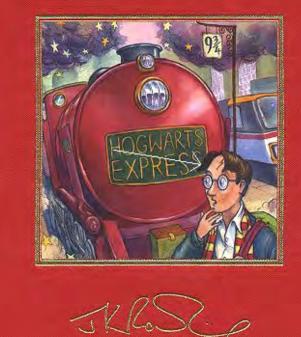
Achieve Control of Self Dissociative Conditions Blaming self Achieve emotional Control Anger Uncontrollable Rage Psychosis Protection from Abandonment



MOVIES/BOOKS/MAGAZINES









MOVIES THAT PORTRAY SELF-INJURY ADOLESCENTS THAT IDENTIFY WITH CELEBRETIES MAGAZINE COVERS WITH CELEBRITIES THAT SI

CELEBRITIES WHO SI VIDEO



MUSIC



MICHAEL JACKSON

MARILYN MANSON

MARILYN MANSON ALBUM-2007 "EAT ME, DRINK ME" FEATURED SONG "IF I WAS YOUR VAMPIRE"

KING DIAMOND

KING DIAMOND "THE OATH" (SATANISM)

INSANE CLOWN POSSE

INSANE CLOWN POSSE "CEMETARY GIRL"



RAZAKEL "MURDER POTION" AND "LAUGHTER OF THE DEAD"

AFFILIATIONS

WICCA (TYPICALLY DOES NOT SI)
SATANISM
GOTH/VAMPIRE
EMOS/SCENE
GANGS

SIGNS AND SYMBOLS

MARK OF THE BEAST
SWASTIKAS
ANTI-CHRIST (UPSIDE DOWN CROSS)
PENTAGRAM
SATANIC MOON
HEXAGRAM
EYE IN PYRAMID











Evil Eye - ake the udjat or Eye of Borus. This symbol represents the ever vigilant Satan. Note the tear drop indicating Satan's mourning due to the fact that he has not yet won every one to his side.



Star of Lucifer (Satan's Star) - When reversed it is the Star of Diana of the Wiccan religion. The occult has a particular fascination with astrology.

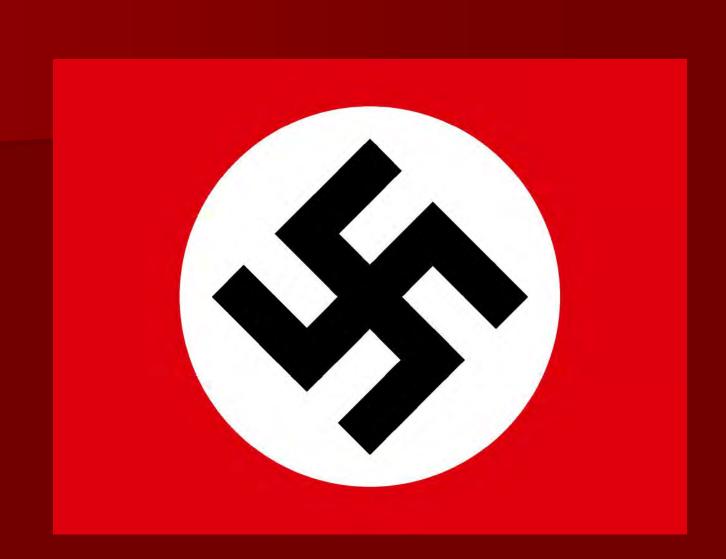


Mark of the Beast - Taken from the Book of Eavelation Ch. 13:16-18. This is the symbol for the Anti-Christ or Satan's mark. It can be written or drawn in a variety of ways as noted here. Three intertwined six's or three lettor "F's";" 7" being the sixth letter of the alphabet.



filuminated Cross - Originally a gang symbol, now adopted by Satanists indicating that the cross of Christianity has lost its' power. Often times found as a homemade tattoo on the left hand between the thunb and forsfinger.

LIVE LIVED NATAS REDRUM Backwards writing - Satanists have adopted the practice of writing backwards. Note the words to the left when reversed spoll EVIL, DEVIL, SATAR, MURDER. This is particularly popular among the young and is usually written on their knuckles or as graffiti, (see chapter V, . Profile of Susceptible Youth. item 23).







WICCA

IT IS EXTREMELY PERSONAL TO EACH PERSON'S RELIGIOUS EXPERIENCE WITHIN THE TRADITIONS AND A COMPLETE UNDERSTANDING OF THE SPIRITUAL PATH VIEWED AS POSITIVE ENCOURAGED TO HOLD A HIGH STANDARD OF BEHAVIOR AND EMPATHY BELIEVE THAT MOST PEOPLE NEED TO MAKE THEIR OWN RELIGIOUS CHOICE

SANTANISM

SINCE THE BEGINNING OF TIME, EVERY CULTURE AND SOCIETY HAS HAD A FORM OF OCCULTIC BELIEF. SANTANISM IS CENTURIES OLD, AND LIKE MOST PAGAN RELIGIONS, PREDATES CHRISTIANITY. IT SURVIVES AND PROSPERS BECAUSE IT'S MYSTERIOUS AND ELABORATE RITES ARE FILLED WITH SECRETS, SINS, AND SEX AND THIS IS THE DRAW FOR THE 44 ΔΠΟΙ Εςςέντς

SACRIFICE IS A UNIVERSAL PHENOMENON IN THE HISTORY OF **RELIGION WHEREBY SOMETHING IS** GIVEN TO THE GODS AND BECOMES HOLY. PERSONS OFFERING SACRIFICES EXPECT TO RECEIVE SOME PHYSICAL OR SPIRITUAL GOOD. SACRIFICES CAN INCLUDE ANIMALS, BLOOD, FOOD, DRINK, TOBACCO, AND HUMAN BEINGS.

THE SATANIC BIBLE IS VERY SIMPLE. VERY YOUNG CHILDREN UNDERSTAND THE CONTENTS AND THAT IS THE DRAW ALSO FOR THE YOUNG

THOSE WHO CHOOSE IT FOCUS THEIR LIVES, AND INDEED THEIR VERY SOULS, ON THE SELFISH FREEDOMS AND THE PROMISE OF POWER OVER ALL THEY DESIRE.







GOTH

ENSPIRED BY THE 18TH CENTURY GROUPS:

- VICTORIAN=VELVET AND LACE
- CYBER=PLASTIC/VINYL
- VAMPIRE/VAMPYRE=VAMPIRES
- BLADES=BLADE MOVIE LIKENESS
- CROWS=CROWS MOVIE LIKENESS
- POSEURS=FASHION
- WEREWOLVES=WOLVES/BIRDS OF PREY
- FAERIES=WINGS
- SLAVES/SERVANTS=SERVITUDE

GOTH SUBCULTURE IS FOUND IN MANY COUNTRIES BEGAN IN ENGLAND IN EARLY 1980'S IT CONTINUES TODAY TO DIVERSIFY AS YOU SEE FROM THE MANY GROUPS ASSOCIATED WITH MUSIC WHICH **INCLUDES A NUMBER OF DIFFERENT** STYLES; GOTHIC ROCK, DARKWAVE, ETHEREAL, NEO-MEDIEVAL AND NEOCLASSICAL

ASSOCIATED WITH STYLES OF DRESS WITHIN THE GROUPS; DEATHROCK, PUNK, ANDROGYNOUS, VICTORIAN, SOME RENAISSANCE AND MEDIEVAL STYLE ATTIRE, OR ANY COMBINATIONS OF THE ABOVE

ASSOCIATED WITH DARK ATTIRE, MAKE-UP AND HAIR

INFLUENCES:

1960'S TV SERIES THE ADDAMS FAMILY AND THE MUNSTERS LATER INFLUENCES:

GOTH AND HORROR FILMS; THE CROW THE NOVEL BY NEIL GAIMAN THE SANDMAN

FASCINATION WITH THE MACABRE RAISES PUBLIC CONCERN A STUDY PUBLISHED ON THE BRITISH AL JOURNAL CONCLUDED THAT MED **TFICATION AS BELONGING TO** THE JLTURE (AT SOME PO SUBC GOTH THEIR LIVES) WAS THE BEST PREDICTOR OF SI AND ATTEMPTED SUICIDE (AMONG YOUNG TEENS". THE STUDY WAS BASED ON A SAMPLE OF **15 TEENAGERS WHO IDENTIFIED AS** GOTHS, OF WHICH 8 HAD SI BY ANY METHOD AND 7 HAD SI BY CUT TING, SCRATCHING OR SCORING, AND 7 HAD ATTEMPTED SUICIDE



VAMPIRE

BLOOD DRINKERS
 SEXUAL FEEDERS
 MIND CONTROL



EMO VS. SCENE **ENSPIRED AROUND ENSIPIRED BY 1980'S** 2004

- EMO KIDS ARE MORE MUSICTO BE LIVELY, HAPPY AND **GENERA** COLORFUL
- MOSTLY EMOTIONAL
- GET DEPRESSED FAST
- CUT THEMSELVES
- SENSITIVE AND SHY
- FEELINGS GET HURT EASILY ENTHUSIASTIC
- DARK COLORS
- DEJECTED

PUNK SCENE

- LOVE MUSIC
- CHEERFUL
- DO NOT DEPRESS EASILY
- KNOW HOW TO FIGHT
- CRAZY AND RANDOM
- - ATTENTION SEEKING
 - **BRIGHT COLORS**

EMO KIDS ALWAYS HAVE SIDE FRINGES

- EMO BOYS HAVE LONG HAIR EMO GIRLS HAVE SHORT HAIR
- BLOND OR BLACK HAIR
 WITH RANDOM
 COLOURS IN THEIR HAIR
- WEAR BAND SHIRTS WITH SKINNY JEANS

- SCENE GIRLS HAVE HAIR EXTENSIONS SHORT AT THE TOP AND BACKCOMBED
- BIG AND FLUFFY HAIR STYLES
- WHERE GIRLY CLOTHES WITH LOTS OF MAKE-UP



EMO LOVES SOFT MUSIC

- TRY TO MAINTAIN RELATIONSHIPS AND ARE LOVED BY THEIR FRIENDS
- PHILOSOPHY OF LIFE ALWAYS GLOOMY FACE/SAD AND FEEL AS IF LIFE IS A PAINFUL THING

- SCENE LOVES
 HARDCORE MUSIC
- MIGHT HAVE MANY FRIENDS BUT DO NOT MAINTAIN RELATIONSHIPS FOR MORE THAN A WEEK
- PHILOSOPHY OF LIFE IS LIVELY, VIBRANT AND EMOTIONALLY BRAVE AND LOVE IT

EMO VS. GOTH

- DEPRESSION
- DARKNESS
- SUICIDE
- CUTTING
- BAND T-SHIRTS, LAYERED WITH HOODIES AND/OR LONG-SLEEVED SHIRTS TIGHT JEANS CONVERSE OR CANVAS FLATS
- SCARVES AND HOODIES ARE STAPLES
- PLAIN BLACK HAIR

- DEPRESSION
- DARKNESS
- SUICIDE
- CUTTING
- MORE FANCY DRESSERS THAN EMO'S YET USUALLY ALL BLACK UNLESS ARE RAVER-GOTHS, GLITTER-GOTHS AS THEY LIKE COLOR AND LOTS OF IT
- LACE, FRILLS, BOWS, DANGLING JEWELRY, LEATHER CHOKERS, CORSETS MORE GYPSY, VICTORIAN AND MORE CLASSY
- BRIGHT COLORED HAIR



GANGS IN OKLAHOMA

BLOODS CRIPS ARYAN BROTHERHOOD BLACK GANGSTER DISCIPLES BORN TO KILL KU KLUX KLAN LATIN KINGS & QUEENS WHITE ARYAN RESISTENCE

WHILE DIFFERENCES EXIST AMONG THESE GROUPS, IT IS THE COMMON DENOMINATORS OF HOMICIDE, SUICIDE, SELF-MUTILATION, GRAVE ROBBERY, ANIMAL ABUSE, BLOOD/DEATH METAL MUSIC AND FANTASY ROLE PLAYING GAMES THAT BIND THE MORE BIZARRE TOGETHER.

CRITERIA FOR POSSIBLE SI

Phyisically Abused Sexually Abused Mentally /Emotionally Abused Neglect Substance User Mental disorder Abandonment issues Suicidal Domestic violence

PHYSICAL ABUSE

INTENTIONAL ACT OF A CAREGIVER AGAINST A CHILD. BRUISING, BURNING, BITING, HAIR LOSS, BREAKING BONES, BRAIN INJURY, INTRA-ABDOMINAL INJURIES, AND MOUTH INJURIES.

SEXUAL ABUSE

DEFINITION:

"THE EXPLOITATION AND MISTREATMENT OF CHILDREN

IN WAYS THAT PROVIDE EROTIC GRATIFICATION FOR THE ABUSER. SEXUAL ABUSE CAN INCLUDE SEXUAL INTERCOURSE, FONDLING GENITALIA, FROTTEURISM, TAKING OR SHOWING PORNOGRAPHIC PICTURES, OTHER FORMS OF SEXUAL ACTING OUT, RAPE, SEDUCTIONS, SEXUAL HARASSMENT, AND SEXUAL COERCION

THE SOCIAL WORK DICTIONARY ROBERT L. BARKER

MENTAL/EMOTIONAL ABUSE

- THE MOST UNDER-REPORTED FORM OF ABUSE
- THE MOST DIFFICULT FORM OF ABUSE TO SUBSTANTIATE
- REPEATED PATTERN OF CAREGIVER BEHAVIOR OR AN EXTREME INCIDENT OF BEHAVIOR CONVEYING TO CHILDREN THEY ARE WORTHLESS, FLAWED, UNWANTED, ENDANGERED, OR ONLY OF VALUE IN MEETING ANOTHER'S NEED.

 SIX FORMS OF MENTAL ABUSE: SPURNING, EXPLOITING/CORRUPTING,TERRORIZING, DENYING EMOTIONAL RESPONSIVENESS, ISOLATING; AND UNWARRENTED DENIAL OF MENTAL HEALTH CARE, MEDICAL CARE, OR EDUCATION

EMOTIONAL TRAUMA OCCURS WITH PHYSICAL AND SEXUAL ABUSE BUT IT CAN ALSO OCCUR INDEPENDENTLY.

NEGLECT

DEFINITION:

"FAILURE TO MEET ONE'S LEGAL AND MORAL OBLIGATIONS OR DUTIES, ESPECIALLY TO DEPENDENT FAMILY MEMBERS. WHEN SUCH CONDUCT RESULTS IN POTENTIAL HARM TO OTHERS, LEGAL PROCEEDINGS MAY BE TAKEN TO COMPEL THE PERSON TO MEET THE RELEVANT OBLIGATIONS OR FACE PUNISHMENT". THE SOCIAL WORK DICTIONARY

ROBERT L. BARKER

SUBSTANCE ABUSE

DEFINITION:

"A MALADAPTIVE PATTERN OF USING CERTAIN DRUGS, ALCOHOL, MEDICATIONS, AND TOXINS DESPITE THEIR ADVERSE CONSEQUENCES".

THE SOCIAL WORK DICTIONARY ROBERT L. BARKER

MENTAL DISORDER

DEFINITION

"IMPAIRED PSYCHOSOCIAL OR COGNITIVE FUNCTIONING DUE TO DISTURBANCES IN ANY ONE OR MORE OF THE FOLLOWING PROCESSES: BIOLOGICAL, CHEMICAL, PHYSIOLOGICAL, GENETIC, PSYCHOLOGICAL, OR SOCIAL. MENTAL DISORDERS ARE EXTREMELY VARIABLE IN DURATION, SEVERITY, AND PROGNOSIS, DEPENDING ON THE TYPE OF AFFLICTION".

THE SOCIAL WORK DICTIONARY ROBERT L. BARKER

ABANDONMENT

Definition:

Adolescents left with family and friends that will not meet the needs of the child

Older children thrown out of their homes due to behaviors

Parents moving without the child knowing where they are

SUICIDE/IDEATION/ATTEMPT

DEFINITION:

- The act of attempting to or intentionally killing oneself
- Serious contemplation of suicide, or thought patterns that lead to killing oneself
- Plan, method or intent

DOMESTIC VIOLENCE

DEFINITION:

DOMESTIC VIOLENCE IS A PATTERN OF BEHAVIOR USED TO ESTABLISH POWER AND CONTROL OVER ANOTHER PERSON THROUGH FEAR AND INTIMIDATION, OFTEN INCLUDING THE THREAT OR USE OF VIOLENCE

RISK FACTORS

- Isolation/Aloneness
- Victim Of Bullying
- Acculturation Challenges
- Academic Challenges
- Impulsivity
- Family Chaos/Dysfunction
- Legal Status
- Mental Health Diagnosis
- Loss Of Love
- Escape From Child Abuse

Common Disorders Associated with SI

Depression Generalized Anxiety Disorder Bi-Polar Schizophrenia Obsessive Compulsive Disorder Anorexia/Bulimia Posttraumatic Stress Disorder Borderline Personality Disorder Psychotic Disorders

DEPRESSION WITH ALCOHOL

- FEELINGS OF DESPAIR
- ANHEDONIA
- DYSPHORIA
- IMPAIRED FUNCTIONING
- FAMILY TURMOIL
- LEGAL PROBLEMS
- NEGATIVE SOCIAL CONSEQUENCES:SUSPENDED/EXPELLED
- PEER GROUP ACTIVITIES
- FAMILY TRADITIONS: PATTERNS/HISTORY
- MULTIPLE RELAPSES
- SUICIDAL IDEATION/ ATTEMPTS/SI

DEPRESSION WITH CANNABIS

- FEELINGS OF DESPAIR
- LACK OF ENERGY
- WITHDRAWAL FROM SOCIAL SUPPORT
- USE FOR TEMPORARY RELIEF OF DEPRESSION
- LEGAL PROBLEMS
- NAGATIVE SOCIAL CONSEQUENCES
- PEER GROUP ACTIVITIES
- FAMILY PATTERNS/HISTORY
- REACTION TO DEPRESSED MOOD
- CANNABIS EXACERBATES DEPRESSION
- SI BEHAVIOR
- MULTIPLE RELAPSES

ANOREXIA/BULIMIA WITH AMPHETAMINE

POOR BODY IMAGE ANXIETY OVER WEIGHT GAIN RESTRICTS FOOD INTAKE USE AMPHETAMINES FOR APPETITE CONTROL FEAR OF GAINING WEIGHT FEAR OF BECOMING FAT BINGE EATING

SELF-INDUCED PURGING

- SERIOUS MEDICAL PROBLEMS
- DEPRESSIVE SYMPTOMS: ANHEDONIA, DYSPHORIA, IRRITABILITY, SLEEP DISTURBANCE, ATTRACTION TO DEATH
- SUICIDAL IDEATION/ATTEMPTS
- SI BEHAVIORS
- FEELINGS OF WORTHLESSNESS, SELF-HATE, INTENSE GUILT, SELF-CRITICISM, REJECTION AND ALIENATION
- LEGAL PROBLEMS
- VOLATILE ANGER
- IMPAIRED SOCIAL FUNCTIONING
- ANXIETY
- TENSION

POSTTRAUMATIC STRESS DISORDER WITH POLYSUBSTANCE

- CONFRONTED WITH AN ACTUAL OR THREATENED DEATH OR SEROUS INJURY TO SELF
- FEAR, HELPLESSNESS, OR HORROR
- RELIVING THE TRAUMATIC EPISODE WHILE INTOXICATED OR UNDER THE INFLUENCE OF DRUGS

AVOIDANCE BEHAVIORS: SUBSTANCE ABUSE, TO DIMINISH EXOSURE TO THOUGHTS, FEELINGS, OR CONVERSATIONS ASSOCIATED WITH THE TRAUMA

INCREASE IN SYMPTOMS OF ANXIETY: SLEEP DISTURBANCE, POOR CONCENTRATION, RAGE MAMAGEMENT

- NEED FOR CHRONIC CHAOS, RISK-TAKING, SOCIALLY INAPPROPRIATE BEHAVIOR, HIGH RISK DRUG USE PATTERNS
- CHRONIC MALADAPTIVE PATTERN OF SUBSTANCE USE AMONG THREE GROUPS OF DRUGS
- FATALISTIC OUTLOOK TOWARDS THE FUTURE
- HIGH RISK FACTOR FOR SI BEHAVIORS
- HIGH-RISK FACTOR FOR COMPLETED SUICIDE
- MULTIPLE RELAPSES
- NON-COMPLIANCE PATTERNS IN TREATMENT
- NEED TO BE COERCED INTO TREAMENT AND OR COUNSELING

BORDERLINE PERSONALITY DISORDER FEMALE WITH ALCOHOL

- DIFFICULTY WITH EMOTIONS
- LOWERED CAPACITY TO MANAGE STRESS
- CHRONIC SUICIDE IDEATION AND/OR INTENT
- INTOLERANCE TO REJECTION IN A RELATIONSHIP
- VIOLENCE AS A CONTROL STRATEGY IN RELATIONSHIP
- DISPLAYS ISSUES OF PTSD WITH A NEED FOR SOCIAL TURMOIL AND CHAOS

BORDERLINE PERSONALITY DISORDER FEMALE WITH ALCOHOL CONTINUES

- FEELINGS OF ISOLATION AND ABANDONMENT AS INTOLERABLE
- ENGAGES IN PARA-SUICIDAL BEHAVIORS CUTTING SELF TO FULFILL PSYCHOLOGICAL NEEDS
- ABUSES ALCOHOL
- ABUSES ALCOHOL TO REGULATE EMOTIONS
- EPISODES OF DEPRESSION
- SUICIDAL URGES ESCALATE WHILE UNDER THE INFLUENCE OF SUBSTANCES

BORDERLINE PERSONALITY DISORDER MALE WITH POLYSUBSTANCE

- ANGER MANAGEMENT PROBLEMS
- OUTBURSTS
- RAGE EPISODES
- LOWERED CAPACITY TO MANAGE STRESS
- PARA-SUICIDAL BEHAVIORS SELF-MUTILATION TO FULFILL PSYCHOLOGICAL NEEDS
- CHRONIC MALADAPTIVE PATTERN WITH THREE GROUPS OF DRUGS
- IMPULSE CONTROL PROBLEMS
- VIOLENT BEHAVIOR
- INABILITY TO ACCEPT REJECTION IN RELATIONSHIPS
- CHRONIC DEPRESSION

BORDERLINE PERSONALITY DISORDER MALE WITH POLYSUBSTANCE

- PROJECTION OF BLAME
- DISREGARD FOR RULES
- LACK OF EMPATHY AND RIGHTS OF OTHERS
- ISSUES OF PTSD NEED FOR TURMOIL AND CHAOS
- TREATMENT UNDER COERCION
- SUICIDE URGES ESCALATE WHILE UNDER THE INFLUENCE

BI-POLAR DISORDER FEMALE WITH ALCOHOL

- DEEP SADNESS
- LACK OF INTEREST
- LOW ENERGY
- SOCIAL WITHDRAWL
- HOPELESSNESS
- MANIC EPISODES: PRESURRED SPEECH, FLIGHT OF IDEAS, GRANDIOSITY AND IRRITABILITY, REDUCED NEED FOR SLEEP, HIGH ENERGY, AND LOSS OF INHIBITION
- NONCOMPLIANCE WITH PRESCRIBED MEDICATIONS
- MULTIPLE SOCIAL DISRUPTIONS: SOCIAL NETWORK, HEALTH ISSUES
- MANIC STATE: ABUSES ALCOHOL
- DEPRESSIVE STATE: ABUSES ALCOHOL, MANAGE ISOLATION, FEARS OF THE FUTURE, SHAME, GUILT, AND EMOTIONAL TURMOIL
- SUICIDAL URGES
- SI BEHAVIORS

BI-POLAR DISORDER MALE WITH POLYSUBSTANCE

- PATTERN OF NON-COMPLIANCE WITH PRESCRIBED MEDICATIONS
- MULTIPLE SOCIAL DISRUPTIONS: LOSS OF SOCIAL NETWORK, AND SIGNIFICANT HEALTH ISSUES
- CHRONIC MALADAPTIVE PATTERN OF AT LEAST THREE GROUPS OF SUBSTANCES
- USES MOOD-ALTERING SUBSTANCES
- LEGAL DIFFICULTIES
- MULTIPLE FAILURES
- MANIC PHASE INCREASED USE
- COERCED INTO TREATMENT
- SUICIDAL URGES
- SI BEHAVIORS

SCHIZOPHRENIA WITH POLYSUBSTANCE

- DISTRUST
- FEAR
- APPREHENSION
- AUDITORY/VISUAL HALLUCINATIONS
- DELUSIONS OF GRANDEUR
- PERSECUTION
- SOMATIC SENSATIONS
- EXTREME AGITATION
- IRRITABILITY
- ANGER
- UPREDICTABILITY

LACK OF IMPULSE CONTROL PHYSICAL ACTING OUT WITHDRAWAL FROM RELATIONSHIPS EGOCENTRIC IDEAS FANTASIES FEAR OF MENTAL ILLNESS: FURTHER DETERIORATION, UNWANTED DEPENDENCY ON FAMILY, PERIODS OF INSTITUTIONS

MULTIPLE LOSSES: FAMILY, SOCIAL SUPPORT, EDUCATIONAL OPPORTUNITIES

- MALADAPTIVE USE OF THREE DRUG GROUPS
- DEPRESSION: SLEEP DISTURBANCE, LACK OF APPETITE, HOPELESSNESS, LOSS OF ENERGY AND FLAT AFFECT
- VULNERABILITY TO SUICIDAL IDEATION, INTENT, ATTEMPTS, AND COMPLETION
- SI BEHAVIORS
- ALLEVIATE FEELINGS OF ISOLATION AND DESPAIR

OBSESSIVE COMPULSIVE DISORDER WITH CANNABIS

- PERSISTENT THOUGHTS AND/OR IMPULSES ARE INTRUSIVE AND INAPPROPRIATE
- UNREALTED TO REAL-LIFE PROBLEMS
- ANXIETY
- STRESS
- REPETITIVE BEHAVIORS: HAND WASHING, COUNTING, REPEATING WORDS
- OBSESSIONS
- COMPULSIONS
- EXCESSIVE
- INAPPROPRIATE
- UNREASONABLE

USE OF CANNABIS TO PREVENT ANXIETY USE OF CANNABIS TO MINIMIZE OR CALM COMPULSIVE BEHAVIORS DURING SOCIAL INTERACTIONS NEGATIVE LEGAL, SOCIAL, RELATIONAL **CONSEQUENCES** SUICIDAL IDEATION AND URGES ■ SI BEHAVIORS

CO-OCCURING DISORDERS ARE THE EXPECTATION-RISK FACTORS

- Substance Related Disorders
 Addict
- Multiple treatment and relapse history
- Alcohol, Cannabis, Heroin, Nicotine, Cocaine, Amphetamines
- Addiction is a DISEASE
- Self-medicating Mentally III
- Multiple Losses

HOW MY LIFE FEELS VIDEO

Help

- Once a pattern of self-inflicted violence stabilizes real work can be done on the problems and issues underlying the self-injury
- Research is currently being done on medications that stabilize mood, ease depression, and calm anxiety that may reduce the urge to self-harm
- Do not coerce self-injury into treatment and or counseling
- Attempts to reduce or control the amount of selfharm should be based on the willingness to undertake the difficult work of controlling and/or stopping SI

Treatment should not be based on a practitioner's personal feelings about the practice of SI

Evidence-based practices should be utilized with the treatment of SI

Most Common Instruments

Razors/knives Broken glass Lighters/matches/candles Pieces of metal/needles Tacks, scissors, nails, etc. Wire hangers Cigar cutter

Do Cutters Really Want To Die?

- Nine times out of ten SI is a cry for help
- Most cutters use thoughts and threats of suicide for a permanent solution to a temporary problem
- Cutters often SI to turn emotional pain into a physical pain
 Hides the real problem

SI /Suicide Attempt?

Cutting can lead to accidental death
SI can be a warning sign
Suicidal thoughts trigger the need to inflict pain

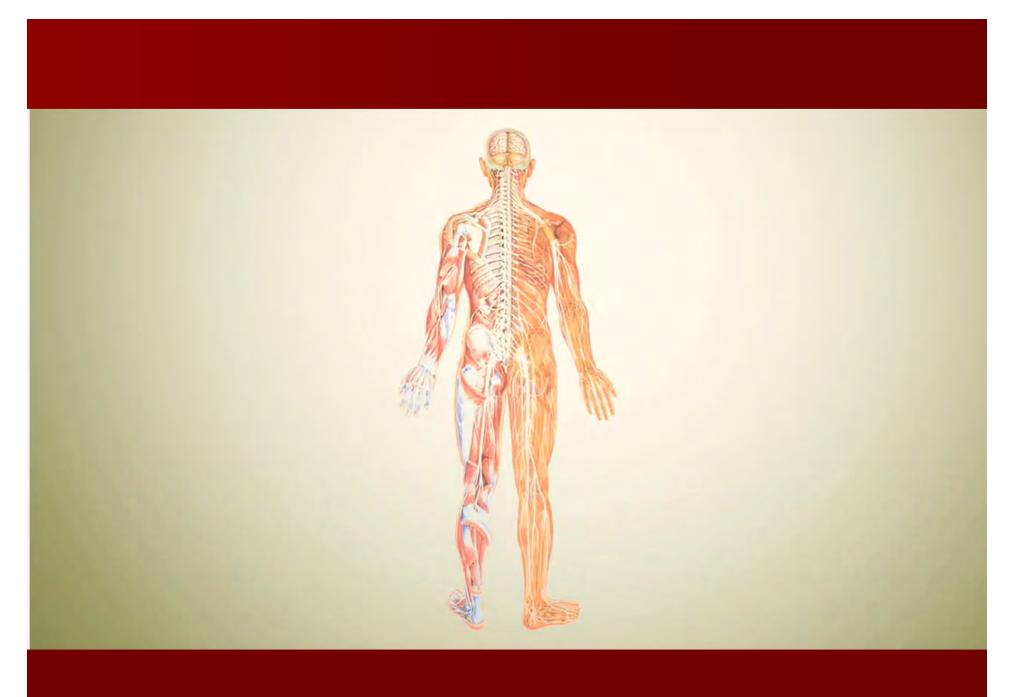
SI can sometimes be a cry for help

People who inflict physical harm on themselves are often doing it in an attempt to maintain psychological integrity---it's a way to keep from killing themselves

Release of unbearable feelings and pressures through self-harm

Eases urge toward suicide

Some people do later attempt suicide but they most always use a method different from their preferred method of self-harm



WHY?

ADOLESCENT MALES

- Afraid of not having the physique of a body builder
- Being too small
- Fear girls will reject them
- Afraid they cannot perform sexually
- Fear of appearing weak in the eyes of their friends

ADOLESCENT FEMALES

- Feeling inferior because they do not have perfect bodies (magazines, music videos etc.)
- Lack of acceptance from peers
- Afraid of never being good enough for a boy to love and accept them without the involvement of sex

CASE STUDY

SELF-INJURY ISSUES SUICIDE POTENTIAL INTERACTION BETWEEN ALCOHOL, SELF-INJURY, SUICIDE, MENTAL HEALTH AFFILIATIONS WITH MUSIC, GANGS, **GROUPS ETC.** FOCUS OF THERAPY TREAT THE BEHAVIOR NOT THE SYMPTOM

TREATMENT PLANNING

ASK:

- What hurts you?
- Have you ever attempted suicide?
- Do you now or have you ever had thoughts of suicide? (plan, method or intent?)
- Do you engage in self-harming behaviors i.e. cutting, burning, scratching etc.?
- How many times have you engaged in this activity?
- How can I help you?

Three evidence-based interventions for the SI adolescent population Dialectical Behavior Therapy Marsha Linehan Motivational Interviewing William Miller & Stephen Rollnick Cognitive Behavioral Therapy Aaron beck & Cory Newman

DIALACTICAL BEHAVIOR THERAPY (DBT) ALEC L. MILLER AND MARSHA M. LINEHAN

REALITY AS CONTINUOUS DYNAMIC HOLISTIC TENSION BETWEEN THESIS AND ANTI-THESIS WITHIN THE SYSTEM POSITIVE AND NEGATIVE GOOD AND BAD CHILDREN AND PARENTS CLIENT AND THERAPIST PERSON AND ENVIRONMENT

INTERGRATION WHAT WILL PROMOTE CHANGE POLAR OPPOSITE IDEAS IDEAS CONTAIN THEIR OWN **OPPOSITIONS** CHANGE BY PERSUASION PERSUASION BY USING PERSONAL LOGIC **INSTEAD OF IMPERSONAL LOGIC** (THERAPUETIC RELATIONSHIP)

NEW MEANINGS WITHIN OLD MEANINGS CONSIDER THE ESSENCE OF CHANGE

MOTIVATIONAL INTERVIEWING WILLIAM R. MILLER/STEPHEN ROLLNICK

COLLABORATION
 CLIENT'S EXPERTISE AND PERSPECTIVES
 EVOCATION
 MOTIVATION TO CHANGE RESIDES WITHIN
 AUTONOMY
 RIGHT TO SELF-DETERMINATION/CHOICE

COGNITIVE BEHAVIOR THERAPY

BEHAVIORISM EVALUATION OF BEHAVIORS EXPECTATIONS ADAPTIVE ATTRIBUTIONS PROBLEM-SOLVING SKILLS CONSTRUCTIVE SELF-MANAGEMENT **COPING SKILLS** SOCIAL SKILLS PERSONAL COMPETENCIES

Problem identification

- Identify client's problem first
- Validate adolescents hurts
- Individual Therapy

Family Therapy

Identify family dynamics

Patterns/structure/rules and boundaries

Advocate for change within the family

Identify Family roles

Stressors: Emotional discomfort

Symptoms: Reactions to stressors, defy current coping and problem solving strategies

Prioritize for immediate attention

GOALS

The goal of treatment is to manage not eliminate pain
Process is to teach management skills
Helping relationship between client and therapist

OBJECTIVES

Manage stress:
 Define the problem
 List options and or solutions
 Pros and cons of situation
 Plan of action
 Role play
 Relaxation Techniques

Journal in treatment: Thoughts and Concerns Anger **Faulty Beliefs Negative Coping Skills Positive Coping Skills** Homework **Problem Solving Skills**

Safety plan
 Crisis plan
 Whom will you call?

THERAPIST BARRIORS TO TREATMENT

LACK OF KNOWLEDGE LACK OF AWARENESS YOUR PERSONAL FEELINGS ABOUT SI LACK OF EMPATHY DISGUST FRUSTRATION AND CONTROL FEAR AND OVERREACTION

CLIENT BARRIORS TO TREATMENT

RESISTANCE:

- CONCEALING SELF-INJURIOUS BEHAVIORS
 REFUSAL TO DISCUSS SI
- UNWILLING TO DECREASE OR ALTER SI
- FEAR OR CHANGE
- CHANGE IS DIFFICULT AND FRIGHTENING
- MET WITH ANXIETY, APPREHENSION AND HESITANCY

BOUNDARIES: BECAUSE SI IS SO SECRETIVE YOU BECOME THE ONLY PERSON THEY HAVE TOLD AND THEN YOU ARE THEIR SOLE SUPPORT. GUIDANCE ASSISTANCE GREATER DEMANDS ON YOUR TIME WILL RAISE BOUNDRY ISSUES EXPRESS YOUR BOUNDARIES AND TIMES YOU CAN BE REACHED TO AVOID CONFUSION

THERAPEUTIC STRATEGIES

- RAPPORT: TRUST, DIGNITY, AND RESPECT
 NONJUDGMENTAL
- BE ATTENTIVE
- LISTEN AND RESPOND TO WHAT THEY PRESENT (WHETHER SELF-INFLICTED OR PERPETRATED BY ANOTHER)
- VALADATION
- STAY CONNECTED
- ACCEPTANCE
- CLIENT'S ANCHOR TO REALITY AND SANITY

CONTRACTS:

WRITTEN OR VERBAL AGREEMENTS (NOT RECOMMENDED FOR SI POPULATION BECAUSE IT IS NOT LIFE THREATENING AND IT SERVES AN IMPORTANT ROLE IN COPING, IT WOULD BE UNWISE AND/OR UNREALISTIC TO ASK THE CLIENT JUST TO STOP THE BEHAVIOR PARADOX IS NOT RECOMMENDED FOR SI POPULATION BECAUSE PARADOX MEANS PRESCRIBING A TREATMENT THAT IS IN OPPOSITION TO THE DESIRED OUTCOME. THIS MIGHT ENCOURAGE CLIENTS TO DRAMATICALLY INCREASE THE FREQUENCY OR SEVERITY OF THE THEIR INJURIES.

MEDICATIONS:

MEDICATIONS FOR TREATMENT OF SI BEHAVIORS IS LIMITED

MAY BE USED WITH A MENTAL HEALTH DIAGNOSIS BUT NOT SPECIFICALLY FOR SI

 TREAT THE PROBLEM, NOT THE SYMPTOM:
 SI IS A SYMPTOM OF A MORE SERIOUS DEEPLY ROOTED PROBLEM

INTERVENTIONS

RUBBERBANDS RED PEN DANCE MOVEMENT THERAPY MUSIC THERAPY ANIMAL THERAPY ART THERAPY

Cutting My Secret Obsession

Katie's Story