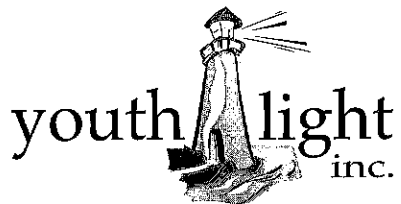


# See My Pain!

Creative Strategies and Activities for Helping  
Young People Who Self-Injure

By: Susan Bowman, Ed.S., LPC  
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Cover Design and Layout by Diane Florence  
Project Editing by Susan Bowman and Kaye Randall  
Cover Photo by Jay Gross

ISBN  
1-889636-62-2

Library of Congress Number  
2004100688

10 9 8 7 6 5 4 3 2  
Printed in the United States

# Dedication

I dedicate this book to my three daughters April, Melissa and Autumn. As a teenage single parent there were trying times raising three daughters alone. Throughout my ten years struggling to make ends meet, my children were my hope and joy God brought into my life and a constant motivation to keep me moving ahead toward my goals. I know life was difficult for them being raised in poverty and without a dad. It ultimately contributed to difficulty during their adolescent years. There were times when I felt all I could do is pray! Now that they are grown, I can clearly see how God always had a hand in their lives and helped them through tough times. I also believe their experiences have made them stronger. I thank God for answering my prayers and allowing me the privilege of having three beautiful daughters who all deserve the very best that God has to offer.

— Susan

I would like to dedicate this book to my daughter Brianna. She has been my inspiration to always try harder, reach higher, and to go deeper inside myself for strength. She has encouraged me in everything I do. I feel so humbled that God has entrusted her to me. Being a mother has enabled me to experience emotions at a depth I didn't know existed. It has been an amazing privilege to be Brianna's mother.

As a teenager, Brianna experiences the same angst that most teenagers do, the same turmoil, and the same quest for answers. She, like the teenagers we work with, is discovering who she is, her strengths and her own voice. It is a journey that at times is scary, frustrating and lonely. It is also a journey that is full of emotions that need to be expressed and heard... really heard. As a mother, I know the importance of allowing her to find her voice. I hope this book helps those who are on the same journey.

Brianna, I know you will find what you are looking for. I love you.

— Kaye

Jeremiah 29:11

We would also like to dedicate this book to all those young people who feel lost and don't know where to turn. We pray that the person buying this book will reach out to those who are hurt and feeling rejected. Our young people need you to encourage them and to remind them of how much God loves them and accepts them just the way they are.

— Susan & Kaye

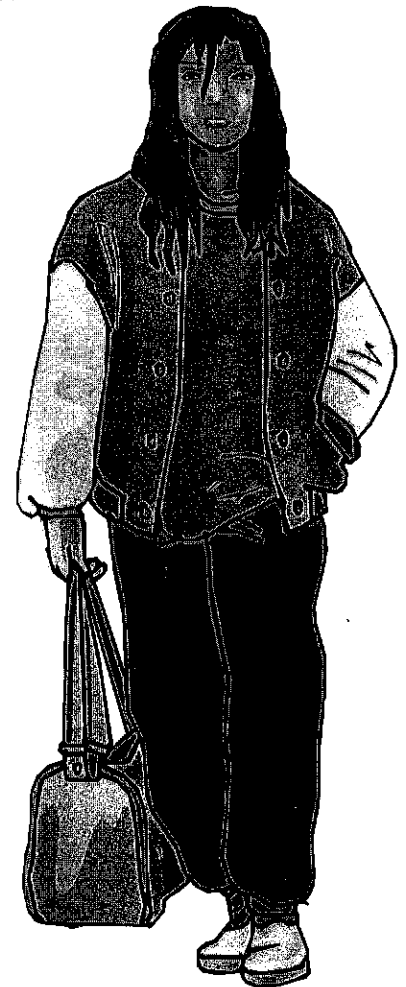
# Acknowledgements

We would like to thank Melissa, Angel and Mara who have all helped in some way with the writing of this book. We appreciate your valuable contributions.

Thanks to Sue Watson, Ed.S. counselor at Davis Elementary for her comments and suggestions.

In addition, we want to acknowledge Bob Bowman for his encouragement, ideas and support. Bob, you helped tremendously with your professional ideas and suggestions. We also want to thank you for your patience with us during the writing of this book. There were times when we really tested your patience towards the final writing but, you continued to be encouraging. We greatly appreciate your guidance.

We especially want to thank our Lord and Savior, Jesus Christ, for the opportunity to write a book to help our troubled youth. Without Him none of this would be possible. For He is our reason for being in this profession.



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# Introduction

## © How To Use This Book

This book is intended to be used by the helping professional who has encountered a child or adolescent who engages in self-injury. The purpose of this book is to provide professionals with a collection of creative approaches that can help children/adolescents who self-injure to; express their feelings, understand what motivates them to self-injure, and explore new methods of coping. For those of you who need updated research on the topic of self-injury, we have provided a review of the professional literature. If you are not as interested in research but just want some suggestions on creative ways to approach these troubled young people, we have included many different approaches that we believe can be effective in reaching and helping young people who self-injure. The activities in this book can be used with an individual child or adolescent or in a small group setting. These activities are intended to help the child/adolescent explore and share their feelings. This can also help you to connect with the child/adolescent and understand their thoughts and emotions while helping them to explore other ways of coping. Many of these activities are reproducible and some may be completed on a separate sheet of paper. For those times that you would like to extend an activity, we have included follow-up suggestions or variations after each strategy.

These strategies have been successfully used in private practice and in school settings with various populations. We hope you will take the time to explore the activities in this book and consider some that you may want to add to your repertoire of strategies when working with a child/adolescent who self-injures.

Using a variety of creative approaches can help young people to externalize their feelings in a non-threatening manner, since self-injury involves internal processes that are difficult to express. Our hope is that through a caring and trusting relationship you can use some of the approaches mentioned in this book to help children/adolescents; communicate, cope, heal, and find new meaning and purpose in their lives.



# Introduction

(Cont.)

## © What is Self-Injury (SI)

SI is a word we are hearing a lot more of these days. (To simplify the terms used in this book we will use "SI" when referring to self-injury) The term self-injury seems to be more commonly used for self-harming behavior. This could be because the word self-mutilation sounds so harsh and grotesque. Other terms that have been used to describe this behavior are cutting, self-inflicted violence, self-harm, self-attack, and para-suicide.

With Princess Diana and other famous people revealing their struggle with SI, professionals have taken a more in depth look at this behavior. According to Conterio & Lader, 2002, "the incidence of habitual self-injurers is nearly 1% of the population." It is so common that websites such as (SAFE-Alternatives.com) were created to provide information and a safe place for those who self-injure to access. As of the time this book was written SI was not formally recognized as a disorder in the Diagnostic and Statistical Manual of Mental Disorders IV.

Years ago reports of SI were mostly restricted to individuals dealing with serious retardation or psychosis (Nichols, 2000; MacAniff & Kiselica, 2001). According to Favazza (1998) there are three types of self-injurious behavior. The first is Major Self-Mutilation and includes such things as castration and amputation sometimes seen in psychotic patients. The second type is Stereotypic Self-Mutilation and includes the rhythmic head-banging seen in people who are diagnosed as autistic or mentally retarded. The third type or the most common form is Moderate or Superficial Self-Mutilation. It includes the following behaviors: cutting; 72%, burning/abrasions; 35%, self-hitting; 30%, picking, and pulling skin and hair; 22%, hair pulling; 10%, bone breaking; 8%, and multiple methods; 78% (Holmes, 2000).

For the purpose of this book we will focus on this third type of SI, Moderate or Superficial Self-Mutilation. This is the most common type of SI seen in schools today.

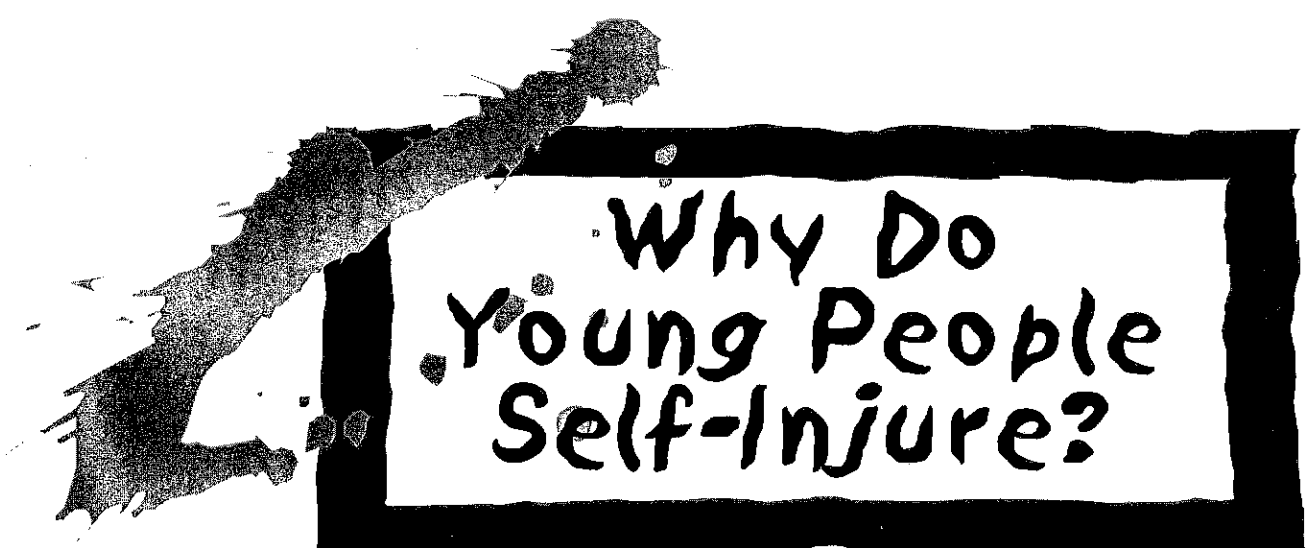
# Introduction

(Cont.)

## © The SI Profile

We believe that in working with children/adolescents who SI, one needs to look much deeper than the visual wounds. We first need to look at the profile of someone who self-injures before learning the underlying causes. Typically, those who self-injure are female and 14 is the common age for first engaging in self-injury (Ross & Heath, 2002). However, there are an increasing number of males who engage in this behavior especially in the prison population. Those who SI typically have low self-esteem and self-worth. Many who SI have a perception that they are "not as good as" their peers. They are unable to live up to their perception of the expectations placed upon them. Adolescence can be a very difficult time of transition. Teens experience pressures from family, peers, intimate relationships and societal expectations. Developmentally this is a time of self-discovery of their identity and autonomy. Overwhelmed and frustrated, some teens are not able to cope. These outside stressors can become internalized and some teens feel the only release from the pressure is when they SI (Ng, 1998). There also appears to be a connection between a history of childhood physical and sexual abuse and SI (Ng 1998; MacAniff & Kiselica, 2001; Selekman, 2002). Those who SI may have suffered from physical or emotional neglect or abandonment by a parent (caregiver) or suffered the loss of a parent through divorce or death. There may exist a tense or abusive relationship between the parents. Often there is a lack of communication concerning emotional issues as part of the family dynamics (Webb, 2002).





# Why Do Young People Self-Injure?

## © Underlying Causes

There may be many different reasons why someone would SI. Most young people hurt themselves to cope with feelings of confusion and emptiness (Trautman & Connors, 1994; Alderman, 1997; Conterio & Lader, 2002) and to release pent-up emotions (Tantam & Whittaker, 1992; Pipher, 1994), emotional numbness, and to end feelings of depersonalization (Tantam & Whittaker, 1992). It also provides a means of dissociating because of a disconnection from parents, others and eventually from themselves (Levenkron, 1998). These children and adolescents have weak coping skills, appear depressed, and tend to have poor family communication (Webb, 2002). Unfortunately, many who SI cannot think of any other way to deal with the pressures that they are experiencing. The following is a brief synopsis of the different functions that SI provides for those who self-injure.

**Relief from Intense Emotions.** One of the most common reasons for SI is to get relief from intense emotions since many people who engage in this behavior are not able to regulate or control their feeling response (Alderman, 1997). They may find it difficult to identify, express, or release their emotions. They also lack the ability to experience and express emotions as others do, such as crying, yelling, or screaming. People who SI commonly report that before the incident they experienced negative thoughts about themselves and their situation (Alderman, 1997), including perceived rejection from people or situations (Hyman, 1999; Farber, 2000).

For some, SI is used as a form of communication. People who have **difficulty expressing their feelings** to others verbally, may SI to communicate to those around them what he/she is experiencing inside. What many who SI are trying to say is, **"See My Pain!"**

# Why...

(Cont.)

Many people who SI have difficulty expressing emotional pain. At a time when people can't adequately express their emotions, they may turn to self-inflicted violence as a method of expression. It is **easier to handle physical pain than the emotional pain** (Ng, 1998).

Many who SI feel a lack of control of their emotions. SI provides a way to **gain a sense of balance and control over those emotions**. Although this is an unhealthy approach, for the one who SI, this may be the only choice he/she believes they have.

Some people use SI as **an attempt to make internal wounds external** and to nurture and heal these wounds. Once the emotional pain or trauma is made external, it is easier to nurture and heal than when it existed only on the emotional level. That gratifying part of SI then becomes the self-care, which a person can provide afterwards.

Research shows that many of the people who self-injure were abused as children (MacAniff & Kiselica, 2001). As children, they may have been **taught that certain behavior, thoughts, or feelings deserve punishment**. This lesson follows him/her into adulthood and may influence the way he/she treats themselves.

Another reason a person may SI is to **re-enact abuse**. Some may replicate the abuse so they can feel a sense of control (Alderman, 1997). Some may re-enact the abuse as part of post-traumatic stress during a flashback. Some people who SI may not know why they act out the abuse, but simply feel the need to do so.

Many people engage in **negative coping techniques**. These include addictive behaviors such as: alcohol and/or other drug abuse, eating disorders, smoking, gambling, and SI. Some people who repeatedly self-injure actually feel an opiate "high" from the release of endorphins and it is a form of self-medication (Levenkron, 1998; Ng, 1998; Conners, 2000).



# Why...

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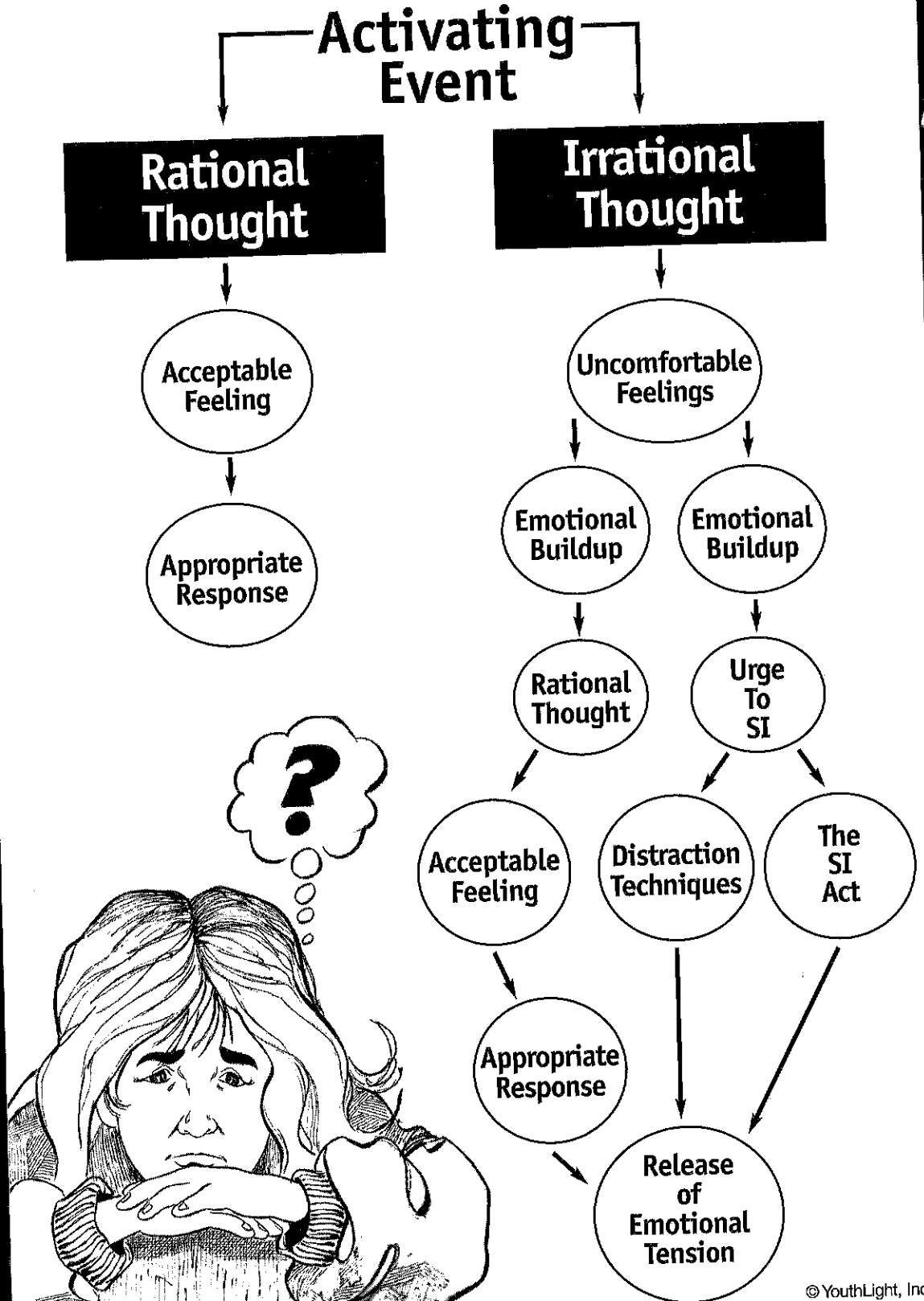
Dissociation is described by Alderman (1997) as a "psychological state in which the individual experiences an alteration in consciousness, memory, and sometimes, identity." (p. 75) Everyone dissociates to some extent, however, for most people it is fairly mild, such as tuning out someone who is talking to you. Some people use dissociation as a defense mechanism to protect themselves from overwhelming emotional or physical pain. But these dissociative states themselves can become overwhelming. SI is one method to reduce, prevent, or end a **disturbing dissociative state**.

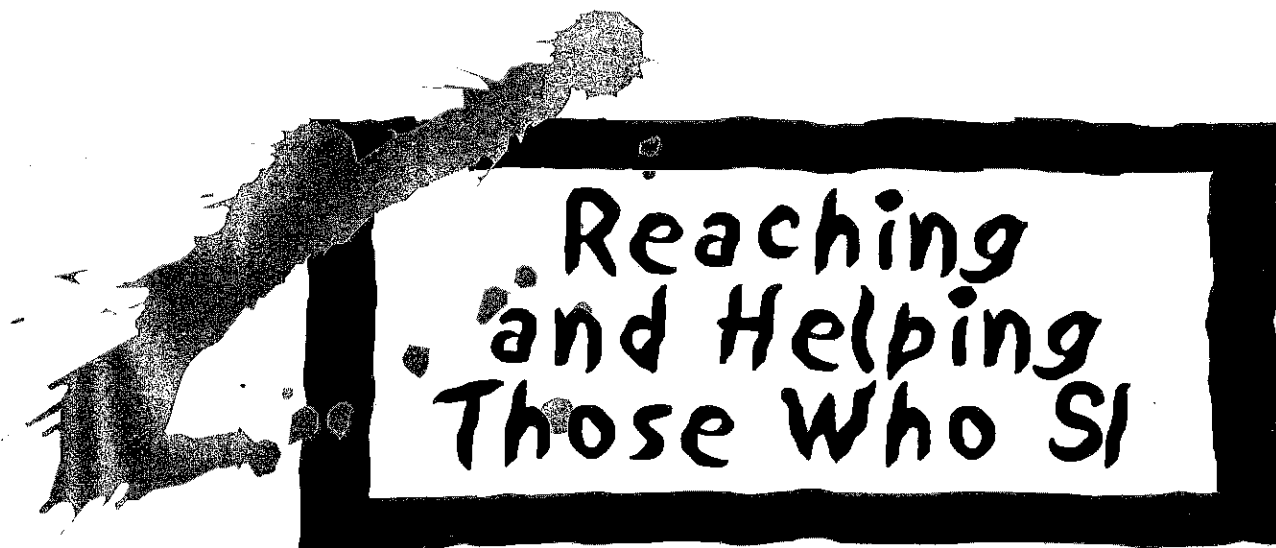
## © The SI Sequence Model with Primary Points of Intervention

Self injury must be understood in terms of a sequence of several events that are dependent upon one another. This sequence begins with an **activating event** that is marked with distress such as a loss of a relationship, peer rejection, or disappointing conflict with a parent, teacher, or peer. **Irrational thoughts** about this event may, in turn, escalate the intensity of **emotions** such as anger, frustration, sadness and/or loneliness. These emotions lead to an increase of internal tension and pressure that can become overwhelming. This extreme emotional arousal is similar to a volcano getting ready to erupt. At some point the pressure needs to be released. With SI individuals, the **urge** to hurt themselves comes forth impulsively as the only viable means for relief. The result of the **self-injurious act** is a release of endorphins that flood the body and give the person a sense of **relief** (Levenkron, 1998; Ng, 1998). This helps to act as a counterbalance for the intense emotions. The next stage of the sequence may be feelings of **shame** and/or **guilt** resulting from the behavior they have just engaged in. These feelings can, themselves, become part of a new activating event that restarts the SI sequence once again.

Once you understand the sequence of the child/adolescent's SI behavior, you can now identify primary points of intervention. On the following page is a reproducible copy of the SI Sequence Model that you can use with a child/adolescent who self-injures. You can use this model to individualize the child/adolescent's sequence and primary points of intervention. At these points of intervention, develop strategies specific to that stage of the sequence that will help break the cycle of self-injurious behavior. Below is a sample of how you can use this model.

# SI Sequence Model





# Reaching and Helping Those Who SI

## © Overview of Therapeutic Approaches

In working with this population, it is important to have an understanding of the various traditional approaches to treatment. Many therapists use a cognitive-behavioral approach in working with children/adolescents who SI.

**Cognitive-behavioral** methods can be helpful when working with children/adolescents who SI. Cognitive-behavioral therapy combines two kinds of psychotherapy: cognitive therapy and behavior therapy. Cognitive therapy shows how certain thought patterns cause uncomfortable feelings. Sometimes thoughts can cause someone to have a distorted view of reality. Behavioral therapy can provide an awareness of the triggering situations and the harmful reactions to them. In becoming more aware, these triggers lose their power to create negative emotions that may surface. When combined, this form of treatment can target specific behaviors, feelings, and thinking (cognitive) patterns with the goals of changing them. It is based on the premise that our thoughts cause our feelings and behaviors, not external cues. Therefore if we can control our thoughts then we can control our emotional reaction to those thoughts.

RET (Rational Emotive Therapy) developed by Albert Ellis, can help the person who SI dispute their irrational thoughts about the triggering situations (Hafner, 1992; Selekman, 2002). Ellis developed the "ABC" model and then later added "D" and "E." The model is as follows:

- A=Activating event**
- B= Belief**
- C= Consequences**
- D= Dispute irrational beliefs**
- E= Effects of rational beliefs**

# Reaching...

(Cont.)

In this model, the child/adolescent can learn to control their negative emotions. This also allows them to think of more rational reasons for a situation that will cause a healthier behavioral outcome. This therapeutic approach can help children/adolescents who SI to look at their pattern of thinking before they begin self-injuring.

**DBT** (Dialectical Behavioral Therapy) helps to teach skills for coping with sudden, intense surges of emotion (Holmes, 2000). While teaching people to manage crisis situations the goal of DBT is to reduce self-injuring and life-threatening behaviors (Linehan, 1993). Basically, DBT maintains that some people, due to invalidating environments during childhood and due to biological factors as yet unknown, react abnormally to emotional stimulation. Clients meet weekly for individual and group therapy sessions to address these issues and to practice skills for managing crisis situations.

**Group Work** is another approach for working with SI, although less common. Groups need to be highly structured, limited in numbers and focus on skill building (Holmes, 2000; Selekman, 2002). Group therapy can provide a safe place to connect with others while practicing strategies and new problem solving skills (Rose, 1998). Through connecting with others who self-injure, the child/adolescent realizes that they are not alone and this can help to facilitate better communication skills. Group therapy also provides an opportunity to practice healthier coping strategies through role play.

**Art Therapy** is another approach that has been used with children/adolescents who self-injure. In art therapy there are no boundaries and this allows the child/adolescent to express themselves more freely (Milia, 2000). In addition, art media can provide a tactile approach to therapy those children/adolescents who SI can identify with. Using this approach allows children/adolescents to use their hands in a healing way instead of a hurting way.

Many experts agree that there is no magic wand or single treatment approach for working with SI. A combination of treatment is most effective (Conterio Lader, 1998; Ernst, 2000; Ng, 1998; Selekman, 2002).



# Suggestions...

## © Suggestions for professional counselors/social workers/psychologists:

It is important to create an environment that provides empathy, caring, unconditional acceptance, trust and rapport among other things (MacAniff & Kiselica, 2001; Conterio & Lader, 2002) The child/adolescent needs to feel that he/she is in this type of environment in order to be able to discuss the deep emotional issues he/she may be facing. In addition, they need a helper who will be committed, consistent, firm and have established boundaries. A professional helper also needs to build on the child/adolescent's personal strengths and instill hope (Selekman, 2002).

For counselors, social workers, psychologists, and other professionals who see this type of behavior, SI can be very challenging to understand and treat. When I first began to see this behavior in my own practice, I contacted other professionals to determine what methods they used in working with this population. The primary response I received from these professionals was that they referred SI clients to someone else. This was very disturbing to me since there is such a demand for professionals who can work with SI. Many professionals do not know how to work with these clients. They experience what I term the "freak out" factor. They don't understand the behavior and don't know what to do to help. Given this particular behavior that reaction is understandable. However, if you have a gift for working with children and adolescents then that is the first step in connecting with the child/adolescent who self-injures. With more information available on this topic, you can increase your level of skills and become more comfortable working with this population.

The primary need for these clients is to be heard, understood, validated, and taught healthier ways of coping with their emotions. When we, as professionals, give the child/adolescent a voice, then we are helping in his/her pursuit of healthier coping. Once a positive, trusting relationship is established, a multi-faceted approach can be incorporated into the treatment plan including learning how to replace self-destructive behaviors with effective self-management skills (MacAniff & Kiselica, 2001).

It is important to know the Do's and Don'ts of how to connect with and help someone who self injures. The following suggestions can provide a guide to making those connections, as a professional helper, an educator or family member.

# Do's & Don'ts

Do

- show the child/adolescent unconditional acceptance.
- accept him/her as a person regardless of the behavior.
- make understanding the underlying causes for the behavior a goal.
- encourage a commitment to try positive alternative behaviors for coping.
- suggest a list of coping techniques to be used rather than SI.
- understand that this list is flexible and can always change.
- encourage open communication no matter what the behavior.
- acknowledge his/her efforts to cope with very difficult emotions.
- show that you care about the injuries.
- communicate that it is okay to talk about SI.
- help him/her discover their identity.
- remember that you are not responsible for the child/adolescent's behavior.

Don't

- be afraid to ask the question, "Do you SI?"
- make eliminating the behavior the primary goal.
- tell the child/adolescent to stop the SI behavior.
- use contracting as a reward or punishment system.
- make a safety contract. This may create a need to please you and further the feelings of inadequacy for the child/adolescent.
- make him/her feel ashamed or guilty about his/her behavior.
- feel responsible for the child/adolescent decision to SI.
- be the only source of support for the child/adolescent.
- leave the family out of the healing process.

# Suggestions...

(Cont.)

## © Suggestions for Teachers

Teachers have many more responsibilities today than they did years ago. If you are a teacher I'm sure you would agree that it wasn't the same ten years ago when schools could focus more on teaching and not dealing with all the other problems that are in today's classroom. It is virtually impossible for teachers to discern which students have psychological problems, know the red flags of a student with hidden rage or know which students are on medication and the side effects. In addition, some teachers are expected to know how to handle tragedies such as a terrorist attack, school shooting, or suicide. Faced with many of these concerns, teachers are still receiving limited training in how to effectively handle these challenges. SI is now another growing problem to add to that list. Many teachers have not been trained in SI and do not know how they should handle a student who shows signs of this behavior. Often students will come to a teacher that he/she trusts and either tell the teacher about the SI behavior or show where on their body he/she self-injured.

It is important for teachers to know the Do's and Don'ts of how to handle such situations. Teachers need to know that in following these suggestions they cannot stop the SI and they need to refer any student who they suspect of this behavior to the school guidance counselor, school social worker and the school nurse.

The following Do's and Don'ts are suggestions for helping teachers respond to any student they think may be involved in self-injurious behavior.



# Do's & Don'ts

(Cont.)

## Do

- try to approach the student in a calm and caring way.
- accept him/her even though you do not accept the behavior.
- let the student know how much you care about him/her and believe in his/her potential.
- understand that this is his/her way of coping with the pain that he/she feels inside.
- refer that student to your school's counselor, social worker and or nurse.
- offer to go with that student to see the professional helper.
- listen! Allow the student to talk to you. Be available.
- discover what the student's personal strengths are and encourage him/her to use those strengths.
- help him/her get involved in some area of interest, a club, sport, peer program, outreach project, e.g., volunteer at a local animal shelter or wildlife sanctuary, help an older person at a nursing home, tutor a young child after school or mentor a child with low self-esteem.

## Don't

- say or do anything to cause the student to feel guilt or shame (e.g., "What did you do to yourself?" "Why did you do that?")
- act shocked or appalled by his/her behavior.
- talk about their SI in front of the class or around his/her peers.
- try to teach him/her what you think he/she should do.
- judge the student even if you do not agree with him/her.
- tell the student that you won't tell anyone if he/she shares self-harming behaviors with you.
- use punishment or negative consequences if a student does SI.
- make deals in an effort to get the student to stop SI.
- make promises to the student that you can't keep.

# Suggestions...

(Cont.)

## © Suggestions for the Family

Parents/guardians already have a difficult time trying to understand the behavior of a normal adolescent, so dealing with an adolescent who self-injures can be very difficult and confusing. The way in which parents respond to SI can make a difference in the outcome. For example, some moms/guardians tend to feel that they are the reason for their child's SI. When feelings of guilt are communicated to the child/adolescent this can exacerbate the situation and cause the young person to alienate even more from the parent/guardian. If parents/guardians are educated on what SI is and the reasons why young people feel the need to SI, they would be able to respond in a more helpful way by seeing beyond the behavior itself. Here are some suggestions you can share with parents/guardians and other family members who have someone in their family who self-injures.

First, be sure that the family is undergoing counseling with a therapist or other professional helper who has experience in SI. Parents/guardians cannot expect that by following these or other suggestions they can stop SI from happening. It is important for the family to have a strong support system of their own. Also, remind families that just because they have a child who self-injures does not make them "bad parents". Blaming themselves will not make the behavior go away. They also need to know that they are not alone. Many other parents struggle with this same problem.



# Do's & Don'ts

(Cont.)

Do

- accept your child even though you do not accept his/her behavior.
- let your child know how much you love him/her, not only when he/she SI, but at other times as well.
- understand that this is his/her way of coping with the intense pain that he/she feels inside.
- encourage healthier methods of coping by allowing him/her to brainstorm other ways other than hurting him/herself.
- listen! Keep communication open by talking about things that would interest him/her even if it doesn't interest you.
- ask open questions (what or how) to encourage him/her to open up. Allow conversations to revolve around what he/she wants to talk about no matter how silly or crazy it may seem to you.
- allow him/her to share what they're feeling deep inside either with words (journaling) or in art (drawing, painting, creating, or any other way he/she can communicate their feelings).
- make your home a "Safe Place" by removing anything that could be used as a tool for SI.
- have fun together! Try to do some fun things together. (let him/her choose fun activity that is interactive, not just going to the movies) Although he/she may complain at first, your child really does want to spend time with you.
- discover what his/her personal strengths are and encourage him/her to use those strengths during difficult times.
- help your child to get involved in some area of interest, after-school activity, a good cause or other good will effort.
- encourage some kind of outreach in the community. e.g., volunteering at a local animal shelter or wildlife sanctuary, helping an older person at a nursing home, tutoring a young child after school or mentoring a troubled young child.

# Do's & Don'ts

(Cont.)

## Don't

- say or do anything to cause guilt or shame. ( e.g., "Why would you do such a thing?" "How could you?")
- act shocked or appalled by his/her behavior.
- talk about his/her SI in front of friends or with other relatives.
- try to teach them what you think they should do.
- use punishment or negative consequences when he/she SI.  
(The reason he/she feels they need to SI is because he/she is hurting emotionally about someone or something).
- overprotect by monitoring every move he/she makes but do notice what's going on.
- deny that your child is self-injuring as a way of coping.
- keep your child from seeing friends but, monitor who he/she does see.
- blame yourself for your child's behavior.



# Assessing and Diagnosing SI

As part of the assessment process there are many factors to consider such as date of first onset, motivation, method, and frequency. It is also important to determine if there are any other diagnosable behaviors that are a cause for concern such as: Anorexia, Bulimia, Obsessive Compulsive Disorder, Post Traumatic Stress Disorder, Depression or Borderline Personality Disorder. When diagnosing SI as a primary behavior, many practitioners use the classification of Impulse Control Disorder NOS.

It is also important to explore the underlying causes to determine the most appropriate method of treatment. For example many children/adolescents who have been physically, emotionally and or sexually abused (MacNaff & Kiselica, 2001). Another underlying cause for SI in children/adolescents may be connected with growing up in an environment which is emotionally invalidating.

In addition, it is important to rule out behaviors which are **not** indicative of SI behavior. The following are a few of these behaviors:

- Injury for the purpose of belonging to a particular group, ie. rituals
- Tattoos or body piercings
- Suicide attempts





# Assessing...

(Cont.)

## © A guide to treatment goals:

- Assess SI history
- Assess for comorbidity
- Develop a safe environment at school and at home
- Explore and develop safe alternatives to SI
- Develop improved coping skills
- Help develop cognitive restructuring/reframing skills
- Improved interpersonal communication and connection
- Improved self-esteem
- Family intervention

## © Sample assessment questions:

- How old were you when you began the SI behavior?
- What was happening in your life when the SI behavior began?
- What was the triggering event that precipitated the first time you SI?
- What made you choose SI?
- How often do you SI?
- Which method or methods do you use to SI?
- What tools do you use to SI?
- Where on your body do you SI?
- Are you aware of why you choose a particular part of the body to SI?
- Are you aware of a pattern to your SI behavior?

# Activity

## Personal Timeline Assessment

### Overview

Children/adolescents will describe when their self-harming behavior began and the past events that influenced their self-harming behavior.

### Materials Needed

Personal Timeline Assessment  
Colored pens or pencils  
Separate piece of paper (optional)

### Procedure

Review the timeline on the following page with the child/adolescent. Then with a colored pen or pencil have the child/adolescent draw lines vertically from their timeline to represent any difficult events that took place such as a loss of some kind: a move, family changes, a frightening or traumatic event, a painful event, etc. If he/she remembers the year have him/her write that down. Then with a different color pen or pencil have him/her draw a line to show when his/her self-harming behavior began. If he/she remembers specific events that took place around that time, draw lines showing if the event happened before or after the SI.

### Follow Up

Have child/adolescent share with you which events contributed to an increase in how often he/she SI and the severity of the SI.

Looking at the events that led up to the SI, have child/adolescent describe the reason he/she chose to SI.

# My Personal Timeline

Directions: On the timeline below draw lines vertically from your timeline to represent any difficult events that took place such as: a loss of some kind, a move, family change, a frightening or traumatic event, a painful event, etc. If you remember the year write that down also. Then, with a different color marker or pen draw a line to show when your self-harming behavior began.



\_\_\_\_\_  
Age of first memory

\_\_\_\_\_  
Age now

# Activity

## My Life Survey

### Overview

Children/adolescents will describe their SI experience through the following survey. They will fill in the blank survey.

### Materials Needed

My Life Survey on the following page  
Pen or pencil

### Procedure

Have the child/adolescent complete the following "My Life" survey. Then have him/her share their responses with you.

### Follow Up

Have the child/adolescent share in more detail what usually happens before he/she SI.



# My Life Survey

Name: \_\_\_\_\_

1. How often do you SI? (Circle one)

Never Sometimes Daily Weekly Monthly Other: \_\_\_\_\_  
(explain)

2. How do you SI?

\_\_\_\_\_

3. Where do you SI on your body?

\_\_\_\_\_

4. How would you describe your injuries?  
(Circle the level of severity on the scale below)

Minor ..... Serious

1      2      3      4      5      6      7      8

5. How do others react when you do this?

\_\_\_\_\_

\_\_\_\_\_

6. Describe your feelings before, during and after you SI.

Before: \_\_\_\_\_

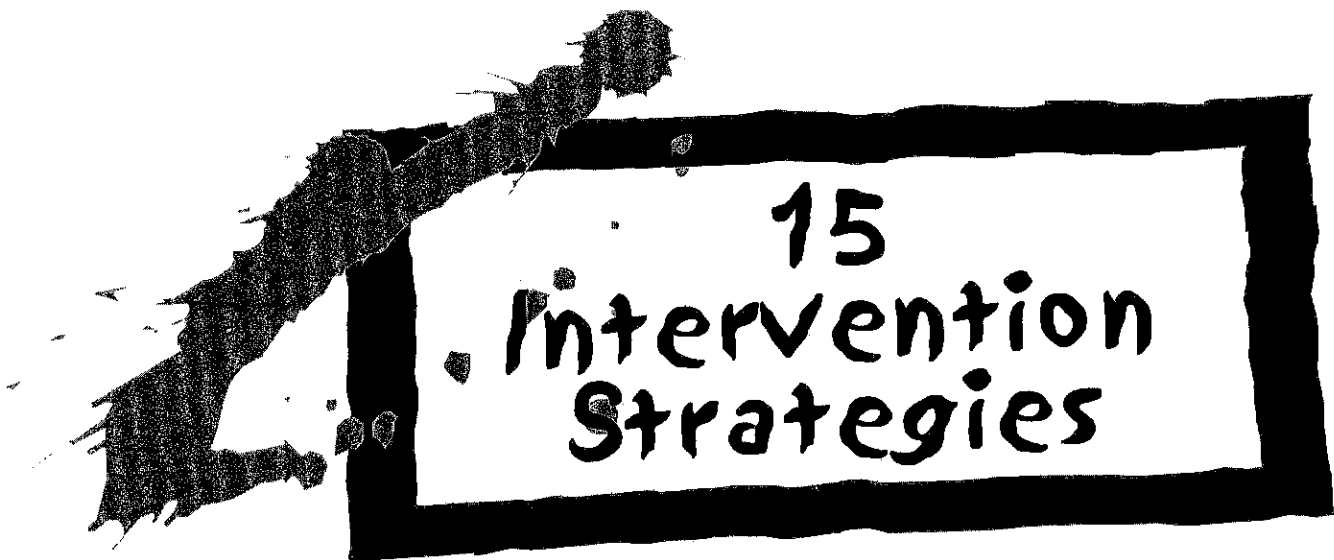
During: \_\_\_\_\_

After: \_\_\_\_\_

7. What other ways have you expressed these feelings?

\_\_\_\_\_

\_\_\_\_\_



# 15 Intervention Strategies

This section includes strategies and activities to use with children and adolescents who SI. Some of the strategies include reproducible worksheets.

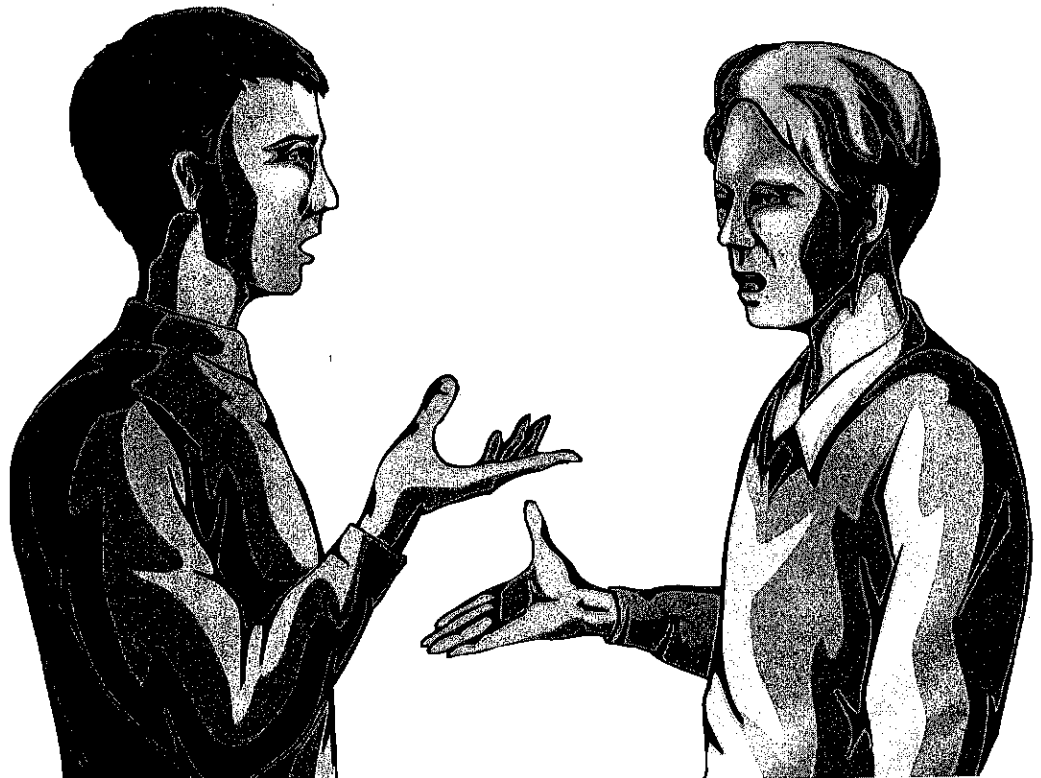
1. Crucial Communication Skills
2. Personal Strength Coaching
3. Relaxation/Guided Imagery
4. Reflective Journaling
5. Visual Arts
6. Clay
7. Sand Tray
8. Metaphors
9. Music
10. Story Telling
11. Tactile Diversion
12. Creative Dramatics
13. Mentoring
14. Animal Assisted Therapy
15. Prayer Power

# Strategy #1

## © Crucial Communication Skills

Communication skills such as attending, body language, and feeling statements are rarely taught during the elementary school years and yet are so needed. People communicate all the time through either verbal or non-verbal communication. Many times people engage in casual conversations without ever sharing anything personal. Often, when people try to share personal concerns with someone, that person might listen for a short time but then they begin talking about themselves. It is hard to find a good listener these days. Peer helper programs where there is adequate training help teach children these valuable skills. We have provided a summary of these same skills to teach your child/adolescent. These skills have helped children and adolescents to share their feelings more appropriately, listen to others more effectively and show they care by learning to use facilitative responses.

Once a child or adolescent has successfully learned to be an effective peer helper, it can be helpful to have them work with younger peers to offer help and encouragement (MacAniff & Kiselica, 2001). With supervision, this approach can allow the helpee to feel listened to and the peer helper to feel worthwhile and significant.



# Activity

## Name That Feeling

### Overview

Children/adolescents will develop their own feeling word vocabulary.

### Materials Needed

Name That Feeling worksheet  
Variety of music selections  
Tape, CD or a computer to play music selections  
Pen or pencil  
Paper  
Dictionary or Thesaurus

### Procedure

Share with the child/adolescent how all people have feelings. Some feelings are pleasant and some are unpleasant. There are no "bad" feelings. He/she may have heard that the feeling anger was a "bad" feeling. Anger itself is not a bad feeling, it is what we do when we are angry that can have a negative consequence. Sharing these feelings verbally is the first step toward a healthier way of expressing our inner most feelings.

### Follow Up

Have the child/adolescent do a feeling word race to see how many feeling words he/she can think of for each category below.



# Name That Feeling

Using different music selections, describe whether you hear mostly pleasant or unpleasant feelings in the song. Write below the name of the song and what feeling words come to mind when describing that song. Let's see if you can come up with at least ten in each column.

## Unpleasant

## Pleasant

Song title	Feeling	Song title	Feeling

# Activity

## How Do You Cope?

### Overview

Children/adolescents will describe how they typically respond to various feelings and how healthy or unhealthy these responses are for coping.

### Materials Needed

Name That Feeling worksheet from previous page  
Feeling + Behavior = ? worksheet on the following page  
Pen or pencil  
paper

### Procedure

Now have the child/adolescent describe a feeling word from their feeling word list created on the previous page and then provide what his/her response is to that particular feeling.

### Follow Up

Have the child/adolescent describe the situation in more detail how he/s responded to each feeling. Ask whether he/she thinks their response was healthy or unhealthy. If unhealthy, think of some other ways to respond.

# Feeling + Behavior = ?

Directions: Using the words from the previous activity, (alternate between pleasant and unpleasant feeling words) describe what your response usually is to that feeling. For example, if the feeling word is sad, some people may respond to sad feelings by crying, wanting to be alone or talking to another person as a way to cope.

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

Feeling Word: \_\_\_\_\_

Response: \_\_\_\_\_

# Activity

## Are You Really Listening?

### Overview

Children/adolescents will learn the basics of effective communication skills.

### Materials Needed

5 Valuable Tips for Listening More Effectively worksheet on the following page

### Procedure

Ask the child/adolescent if they sometimes feel he/she just can't talk to their parents and there seems to be a wall between them. This could be because many people lack training in how to communicate effectively with others. When people learn to communicate more effectively, it helps build a trust where they can talk to each other about almost anything. Better communication has helped gang members to work out their issues without violence or bloodshed. Open communication has led to stronger marriages, healthier relationships, reduced violence, cultural understanding, and alternatives to terrorism, and war. It can also cause a young person to not feel he/she has to self-injure to express how they feel.

### Follow Up

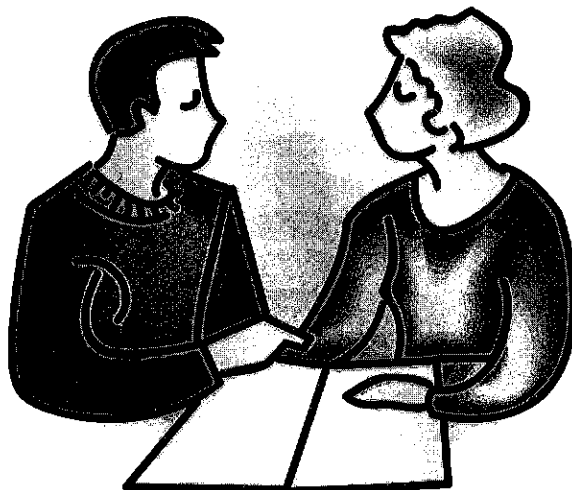
Initiate a conversation using the 5 Tips on the following page as a guide.

**Try this:** Next time you are around a close friend or family member ask them "What" "How" questions about something that interests them or is important to them. Also, watch your body language. Are you looking at them? Are you giving them your full attention? Notice their response. Did he/she get into a conversation with you? Did they feel like you care about what they had to say? Did it feel awkward? Good! Congratulations! You have just learned the basics of communication skills training. These skills take an entire semester for beginning counselors to learn in graduate school. Everyone should know these skills not just professional counselors.

Remember, you don't usually use these intense listening skills when just chatting with a group of friends or your family. These are skills to use when; meeting a new friend, wanting a closer relationship with a family member, or if someone you know has a concern or needs to talk to you about it. To summarize, review the 5 Tips on the next page.

# 5 Valuable Tips for Listening More Effectively

- Tip 1:** Look at the person who is talking.
- Tip 2:** Lean forward with arms not crossed.
- Tip 3:** Ask mostly "what" and "how" questions.
- Tip 4:** Don't interrupt but nod your head, or use other non-verbal cues to show you are following the talker.
- Tip 5:** Keep your focus on the person who is talking.



# Activity

## Facilitative Responding Skills

### Overview

Children/adolescents will learn how to communicate feelings more effectively through facilitative responding skills.

### Materials Needed

None

### Procedure

Explain to the child/adolescent that they are now ready for advance skills training. These skills will equip him/her in becoming good listeners while learning how to express his/her own thoughts and feelings. Let the child/adolescent know that when using this kind of intense listening more people may come to him/her when needing to talk about personal problems or concerns.

### Follow Up

Practice using these skills with a family member or close friend until they are comfortable.

Today you will learn effective responding skills. Remember, you must practice these skills with family, a close friend or a professional because they will seem awkward at first.

- ♥ After a person has shared with you, **summarize** in your own words what you heard them say. Example; *"You and your friend are not talking."*
- ♥ **Listen for feelings** (either pleasant or unpleasant) and try say something back using a feeling word that is appropriate. Example: *"You're hurt by what your friend said about you."*
- ♥ **Don't give advice**-just listen. People really don't want you solve their problems. Allow them to do their own problem-solving. Example: *"What can you do about that?"*
- ♥ **Accept** the person and don't judge what they did as "bad" or "wrong".
- ♥ **Always recognize what your limitations are.** (see next page)

# Limitations

## **Confidentiality:**

Let the person talking know that if they share something that could be dangerous to them or others that you will need to tell a trusting adult.

## **Training:**

Remember, you are not a professional and do not have the training or knowledge they have. Refer people to a professional if they have more serious issues.

## **Time:**

Everyone is limited to how much time they can devote to listening to others share their problems. You may not always have time to listen, be honest and tell others how much time you have.

## **Energy:**

We may be too tired to listen or lack the mental energy to. Choose another time to listen to them when you are not so tired.

## **Issue Sensitivity:**

We all have sensitive areas and personal beliefs about topics such as; abortion, homosexuality, self-injury, religious beliefs, etc. It is important that you be up front about these sensitivities and that may mean having that person to talk to another caring listener.



## Strategy #2

### © Personal Strength Coaching\*

All people have personal strengths and need to know what these strengths are and how to tap into them when faced with the many challenges in life. Personal strengths are what make us who we are. We sometimes use our strengths and don't even realize it. Our job as professional helpers is to assist our children/adolescents in discovering what their personal strengths are, learning how to tap into these strengths when facing difficulties, and how to apply these strengths toward personal goal setting. To be a Personal Strength Coach we need to constantly remind our children/adolescents of how to utilize their personal strengths in all situations. Once your child/adolescent becomes aware of what his/her personal strengths are you can help him/her learn to apply these strengths when experiencing situations that he/she believes is hopeless and think the only way out is to SI.



\*Developed by Bowman, R. P. (1990). *Motivating At Risk Students*. Chapin, SC: Developmental Resources, Inc.



## The AWARE Life Model

### Overview

Children/adolescents will gain an awareness of how their thoughts and perceptions can influence their outlook on life.

This activity is based on a therapeutic approach called Health Realization (HR)\* and is a principle-based psychology that is used across diagnoses, diverse populations and cultures. Developed by Roger Mills and Elsie Spittle, HR helps clients to discover their natural inner source of happiness and healthy psychological functioning (Mills & Spittle, 2001). Mental health and wisdom are recognized to be innate and always available/accessible to every human being regardless of past or present circumstance or situation. Clients are helped to regain their own innate state of health and well-being (a naturally healthy state of mind) through understanding the principles of HR. This allows the client to recognize how their own insecure thinking/feeling leads to self-mutilating behavior and interferes with their natural sense of self-esteem, common sense and confidence that is already within them. Disappointments, upsets, traumas are then handled in a healthy, common sense manner. Feelings are recognized to be a signal of the quality of thinking/state of mind and not something that needs to be analyzed, struggled with or acted on. Gaining insight into the source of experience from mind, thought and consciousness leads naturally to positive shifts in the level of psychological functioning of the individual.

### Materials Needed

A copy of The AWARE Life Model  
Pen or pencil

### Procedure

Explain to the child/adolescent how his/her perceptions can influence our view of life. The first step is to become aware of how negative thoughts can lead to self-harming behaviors. The next step is to realize that you have the ability within you to change these thoughts. Next, have the child/adolescent review the model on the next page and using a personal situation have him/her write how he/she can apply this model to their own situation.

### Follow Up

Have the child/adolescent teach this model to another peer or younger student.

\*Contributed by Rita J. Shuford, Ph.D. Director of Clinical Services, Hawaii Counseling and Education Center, Inc. 970 N. Kalaheo Ave., Suite C-214 Kailua, Hawaii 96734(808)254-6484 E-mail: hcec@lava.net Website: www.hawaiiicenter.net Rita uses the HR model as her primary approach in working with SI clients.

# The AWARE Life Model

Directions: Choose a current personal situation and use this model to create a more positive awareness for the way you think about it. For each AWARE word below write a specific plan to change your thoughts in helping you view your situation more positively.

## Attitude

If I have a healthy attitude I will live a happier life.

---

---

## Wisdom

It takes wisdom to accept the things I cannot change and the courage to change the things I can.

---

---

## Affirm

I will affirm myself daily.

---

---

## Restore

I will replace any thoughts of self-injury with healthier alternatives.

---

---

## Embrace

I will embrace a world full of opportunities.

---

---

# Activity

## Realize Your Own Personal Strengths

### Overview

Children/adolescents will gain an awareness of what their personal strengths are and develop a strength words vocabulary.

### Materials Needed

My Personal Strengths Are worksheet on the following page  
Pen or pencil

### Procedure

Explain to the child/adolescent how their personal strengths are what make him/her who they are. Sometimes he/she use their personal strengths and don't even realize it. Share how they can learn what their personal strengths are and how to tap into these strengths when facing difficulties or having thoughts of SI. Have the child/adolescent look through the list of personal strength words on the following page. Have him/her place a check in front of each word that describes him/her. Afterwards, have them share these.

### Follow Up

Describe how these personal strengths could help you to:

- ♥ Survive an emergency situation
- ♥ Cope with someone who mistreated you
- ♥ Work through a personal tragedy
- ♥ Work toward a personal goal
- ♥ Be successful at school, at home
- ♥ Deal with a stressful situation
- ♥ Overcome feelings of helplessness
- ♥ Find alternatives to self-injury
- ♥ Communicate your feelings
- ♥ Connect with others

# My Personal Strengths Are...\*

"Learning about one's personal strengths is an important step toward building the kind of self-confidence and positive motivation that can last a lifetime."  
— Anonymous

Directions: Place a check before all the words that describe your personal strengths.

- |                                       |                                       |                                      |  |
|---------------------------------------|---------------------------------------|--------------------------------------|--|
| <b>A</b>                              | <b>E</b>                              | <b>I</b>                             | <b>Q</b>                               |
| <input type="checkbox"/> Accepting    | <input type="checkbox"/> Eager        | <input type="checkbox"/> Interested  | <input type="checkbox"/> Quiet         |
| <input type="checkbox"/> Adventurous  | <input type="checkbox"/> Efficient    | <input type="checkbox"/> Involved    |  |
| <input type="checkbox"/> Appreciative | <input type="checkbox"/> Encouraging  | <b>L</b>                             | <b>R</b>                               |
| <input type="checkbox"/> Artistic     | <input type="checkbox"/> Energetic    | <input type="checkbox"/> Laidback    | <input type="checkbox"/> Reasonable    |
| <input type="checkbox"/> Assertive    | <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Leader      | <input type="checkbox"/> Reliable      |
| <input type="checkbox"/> Athletic     |                                       | <input type="checkbox"/> Likable     | <input type="checkbox"/> Resourceful   |
|                                       | <b>F</b>                              | <input type="checkbox"/> Loving      | <input type="checkbox"/> Respectful    |
| <b>B</b>                              | <input type="checkbox"/> Fair         | <input type="checkbox"/> Loyal       | <b>S</b>                               |
| <input type="checkbox"/> Bold         | <input type="checkbox"/> Faithful     | <b>M</b>                             | <input type="checkbox"/> Self-Aware    |
| <input type="checkbox"/> Brave        | <input type="checkbox"/> Flexible     | <input type="checkbox"/> Mature      | <input type="checkbox"/> Sensitive     |
| <input type="checkbox"/> Bright       | <input type="checkbox"/> Forgiving    | <input type="checkbox"/> Motivated   | <input type="checkbox"/> Sharing       |
|                                       | <input type="checkbox"/> Friendly     | <b>N</b>                             | <input type="checkbox"/> Sincere       |
| <b>C</b>                              | <input type="checkbox"/> Fun-Loving   | <input type="checkbox"/> Neat        | <input type="checkbox"/> Supportive    |
| <input type="checkbox"/> Calm         | <b>G</b>                              | <input type="checkbox"/> Nurturing   | <input type="checkbox"/> Survivalist   |
| <input type="checkbox"/> Caring       | <input type="checkbox"/> Generous     | <b>O</b>                             | <b>T</b>                               |
| <input type="checkbox"/> Cautious     | <input type="checkbox"/> Gentle       | <input type="checkbox"/> On Task     | <input type="checkbox"/> Team Player   |
| <input type="checkbox"/> Clever       | <input type="checkbox"/> Giving       | <input type="checkbox"/> Open-minded | <input type="checkbox"/> Thoughtful    |
| <input type="checkbox"/> Confident    | <input type="checkbox"/> Good Sport   | <input type="checkbox"/> Optimistic  | <input type="checkbox"/> Tolerant      |
| <input type="checkbox"/> Considerate  | <b>H</b>                              | <input type="checkbox"/> Organized   | <input type="checkbox"/> Trustworthy   |
| <input type="checkbox"/> Cooperative  | <input type="checkbox"/> Hard Worker  | <b>P</b>                             | <b>U</b>                               |
| <input type="checkbox"/> Courageous   | <input type="checkbox"/> Helpful      | <input type="checkbox"/> Patient     | <input type="checkbox"/> Understanding |
| <input type="checkbox"/> Courteous    | <input type="checkbox"/> Honest       | <input type="checkbox"/> Perceptive  | <input type="checkbox"/> Unique        |
| <input type="checkbox"/> Creative     | <input type="checkbox"/> Humble       | <input type="checkbox"/> Persevering | <input type="checkbox"/> Unselfish     |
| <input type="checkbox"/> Curious      | <input type="checkbox"/> Humorous     | <input type="checkbox"/> Positive    | <b>W</b>                               |
| <b>D</b>                              | <b>I</b>                              | <input type="checkbox"/> Prepared    | <input type="checkbox"/> Warm          |
| <input type="checkbox"/> Dedicated    | <input type="checkbox"/> Independent  | <input type="checkbox"/> Punctual    | <input type="checkbox"/> Witty         |
| <input type="checkbox"/> Dependable   | <input type="checkbox"/> Insightful   |                                      |  |
| <input type="checkbox"/> Determined   |                                       |                                      |  |
| <input type="checkbox"/> Devoted      |                                       |                                      |  |
| <input type="checkbox"/> Disciplined  |                                       |                                      |  |

## Strength Coaching\*

### Overview

Children/adolescents will learn to apply their personal strengths from previous successes to future goals.

### Materials Needed

The Strength Coaching Model worksheet on the following page

Pen or pencil, paper

List of their personal strength words from previous activity

### Procedure

Have the child/adolescent write out their own strength coaching model following the instructions on the next page. Ask them to use this as a guide whenever they get discouraged or feel the need to SI.

### Follow Up

Teach the Strength Coaching Model to a younger child and help them through each step and have them teach it to someone else.



# The Strength Coaching Model\*

Directions: On a separate sheet of paper write your responses to the following model.

**S**hare some of your successes

**P**ersonal strengths that helped you succeed are...

**E**xplore how you can use these same personal strengths to help you get through difficult times

**C**reate a new, positive goal you want to accomplish

**I**mmediately act on this goal

**A**llow yourself to not be perfect (it's okay to make mistakes)

**L**et at least one significant other person know about your goals and accomplishments

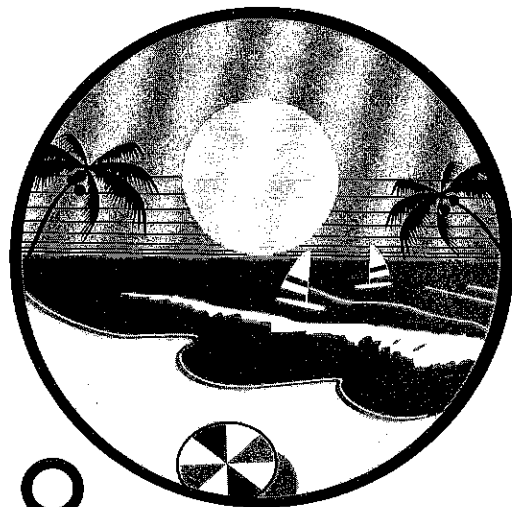
And remember that you are **SPECIAL!**

\*Adapted from Bowman, (1990). Motivating At Risk Children. Chapin: SC. Developmental Resources, Inc.

# Strategy #3

## © Relaxation/Guided Imagery

Relaxation/Guided Imagery can be helpful for teaching self-management skills to a person who SI. It can help to control breathing and combat the irrational thoughts during stressful situations (Selekman, 2002). Guided Imagery can be especially good for addicted teenagers, "providing a healthier way to reach an altered state of consciousness," (Naparstek, 1999). Since many child/adolescent problems are related to their own self-image, guided imagery can be an effective tool for counselors to use (Gladding, 1998). Selekman (2002) provides an example of a visualization exercise he calls "Imaginary Time Machine." This exercise allows the child/adolescent to use all their senses while traveling back in time where they can work on unresolved issues from their past. Guided Imagery, when used properly, can help the child/adolescent to: rehearse skills, visualize the future, and consider possible outcomes and alternatives (Myrick and Myrick 1993). If all young people could learn relaxation techniques from the elementary years, they would be better equipped to handle many of life's challenges later in life.



## Body Breathing

### Overview

Children/adolescents will learn how to relax through a breathing technique.

### Materials Needed

None

### Procedure

Talk about how anxiety, stress or frustration can lead to the urge to SI. By learning this breathing technique it can help him/her to calm the chaos they are feeling internally. Then, have the child/adolescent practice the following breathing exercise with their eyes closed as you read the instructions below to them. Encourage him/her to practice this breathing technique at least twice a day.

### Follow Up

Have the child/adolescent share times that this kind of breathing can help them; at school, at home, at work, etc.

## Body Breathing

Directions: Sit or lie down comfortably with your eyes closed and nothing in your hands.

- Breathe in deeply through your nose to the count of 5.
- Now exhale through your mouth slowly to the count of 5. Repeat.
- Notice the changes in your body, for example your arms, shoulders, neck, head, etc.
- Think of only pleasant thoughts and concentrate on your breathing.



## Mind Escape

### Overview

Children/adolescents will learn relaxation strategies using music.

### Materials Needed

A collection of relaxation music (without lyrics) that would include instrumental, environmental or contemporary selections.

A CD player or computer

### Procedure

Provide a quiet place without bright lights for the child/adolescent to relax using the Body Breathing technique. Then with eyes closed have the child/adolescent listen to the different music selections and try to imagine themselves in a calming place and what kind of discoveries he/she encountered while there. After each music selection have the child/adolescent share their special place, what they saw and what emotions they experienced. Then, have him/her share how relaxation could help to redirect those thoughts that lead to SI.

### Follow Up

After listening to a music piece have the child/adolescent draw what he/she imagined while the music was playing. Write a story, poem or song that goes along with each of the music selections.

### Sample Music Selections

- Environmental (E.g., waterfall, babbling brook, ocean, thunderstorm)
- Nature (e.g., birds, frogs, whales, wolves)
- Instrumental (E.g., flutes, guitar, keyboard, piano, violin, synthesizer)
- Voices (E.g., chanting, humming, sounds without any words)

## Imagine That

### Overview

Children/adolescents will learn how to relax through guided imagery.

### Materials Needed

A comfortable place for children/adolescents to lie down

### Procedure

Using the Body Breathing technique help the child/adolescent to relax. Then slowly read one of the exercises below. (Note that some of these would not work well in a school setting) Ask the child/adolescent to share what he/she experienced after each visualization exercise.

### Follow Up

Have the child/adolescent share situations in their life where guided imagery could be helpful. Talk about how this could help prevent him/her from thoughts of SI.

## Visualization Exercises

- While lying down, close your eyes and starting with your toes completely relax each part of your body a little at a time. Once you get to your head relax your eyes and then clear your mind of any worries or responsibilities. Now picture yourself lying on a beach. Feel the warm sun on your face, smell the salt air, hear the waves crashing and the seagulls flying by. Describe what you see at your imaginary place.
- Close your eyes and try to completely relax your body. Now with eyes closed visualize yourself taking a trip anywhere in the world. You can bring one person with you. See yourself there. What do you see? What are the smells? What can you hear around you? Who is there with you? As you explore the area you come across what looks like a treasure box. You kneel beside the box and slowly open it. What do you find inside? Now take what you found and share it with a special person.
- With eyes closed try to relax your entire body. Concentrate on your breathing. Picture yourself in a place that you consider very safe. What is this place like? How does it look, smell, feel? Are there other people there? If so, who? What do you do while in this place? There is a knock on the door and you open it. Who is there? How do you feel when you see this person? This person hands you a beautifully wrapped present and you open it. What is it? Share your experience and how it relates to your own life.

## Take Back Control!

### Overview

Children/adolescents will discover that his/her emotional pain can be controlled through a visualization exercise.

### Materials Needed

A comfortable place for children/adolescents to relax

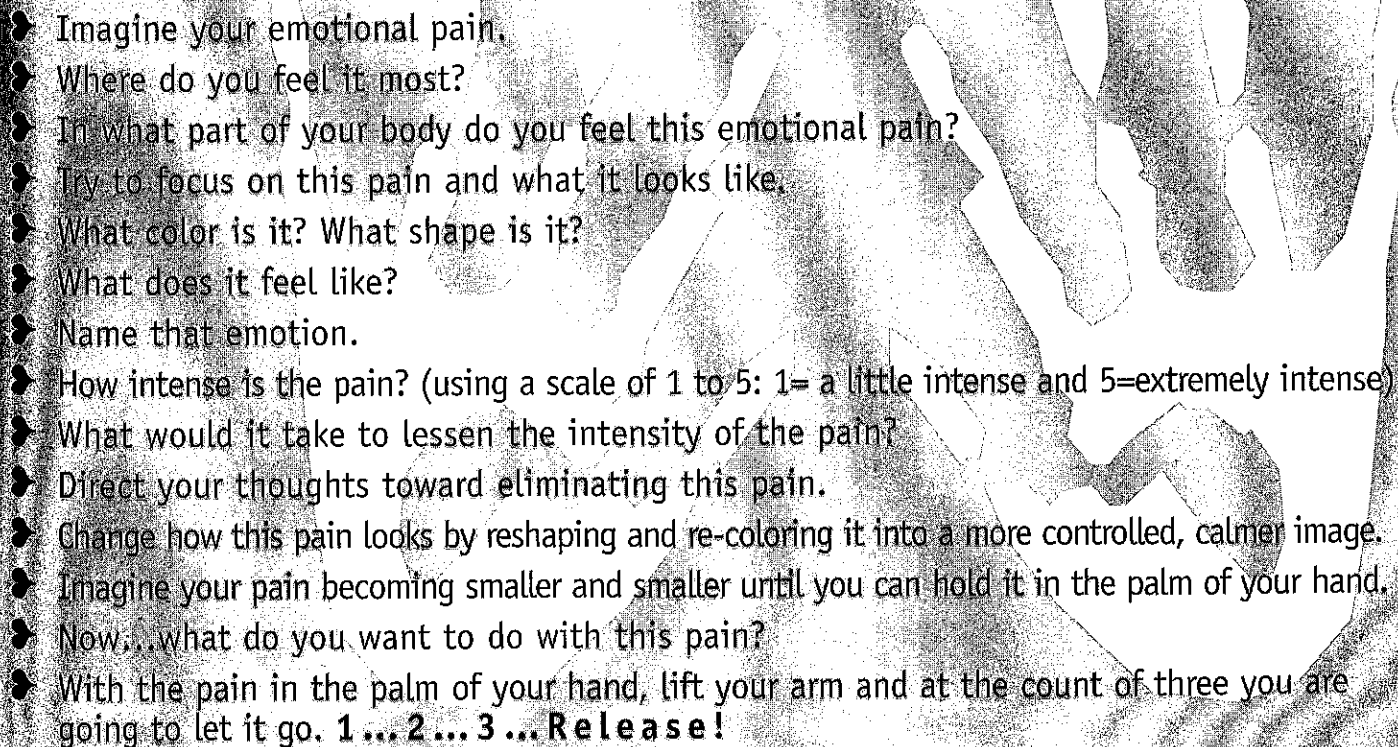
### Procedure

Using the Body Breathing technique help the child/adolescent to relax. Then use the flow chart below to guide them through a visualization exercise. At the completion of the flow chart have the child/adolescent share what this experience was like for him/her.

### Follow Up

Have the child/adolescent create his/her own flow chart.

### Flow Chart

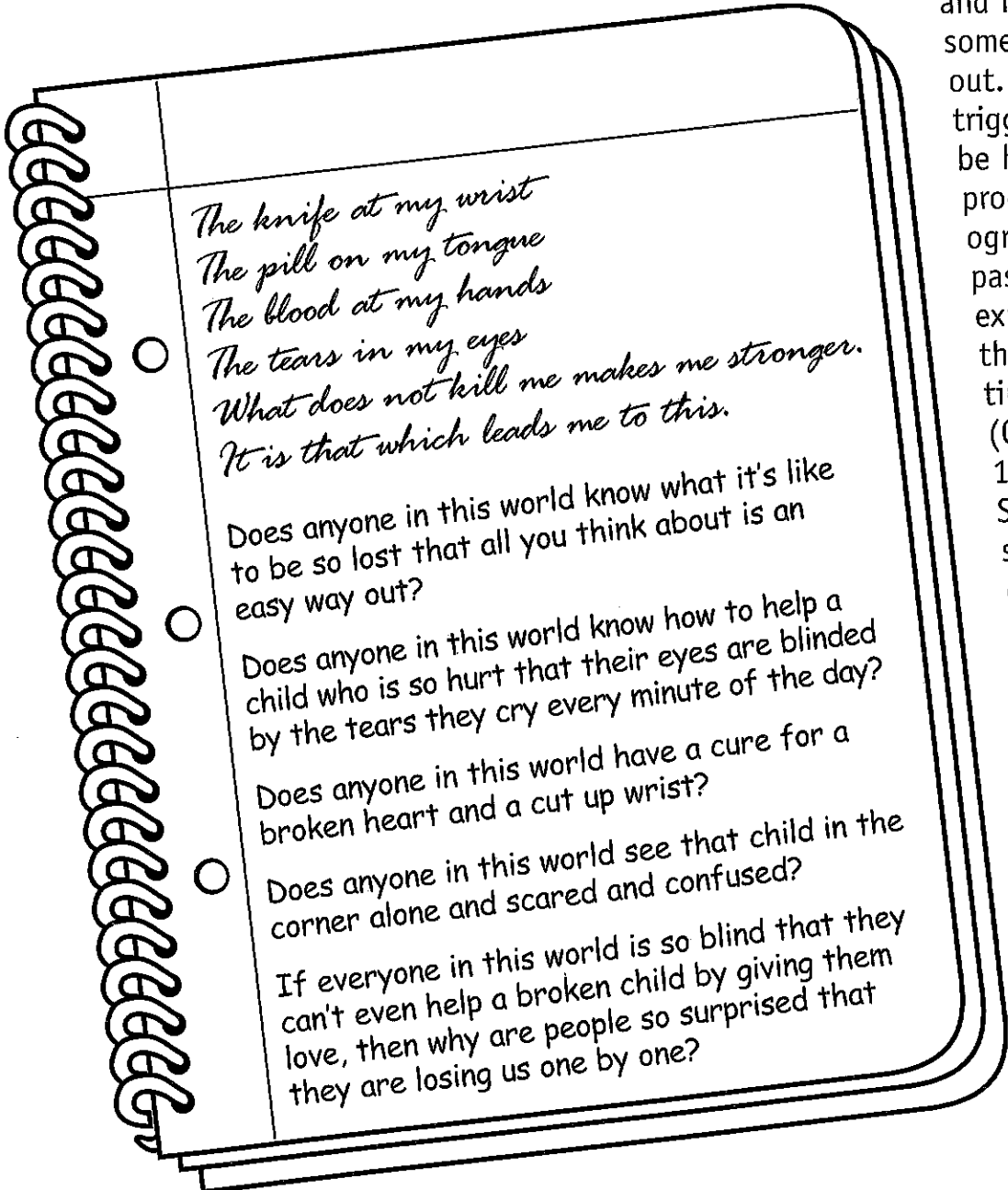
- 
- Imagine your emotional pain.
  - Where do you feel it most?
  - In what part of your body do you feel this emotional pain?
  - Try to focus on this pain and what it looks like.
  - What color is it? What shape is it?
  - What does it feel like?
  - Name that emotion.
  - How intense is the pain? (using a scale of 1 to 5: 1= a little intense and 5=extremely intense)
  - What would it take to lessen the intensity of the pain?
  - Direct your thoughts toward eliminating this pain.
  - Change how this pain looks by reshaping and re-coloring it into a more controlled, calmer image.
  - Imagine your pain becoming smaller and smaller until you can hold it in the palm of your hand.
  - Now... what do you want to do with this pain?
  - With the pain in the palm of your hand, lift your arm and at the count of three you are going to let it go. **1 ... 2 ... 3 ... Release!**

# Strategy #4

## © Reflective Journaling

Journaling is another approach that can be very therapeutic. Dr. Val Farmer in his article, *Get it Down: Get it Out* shares how journaling “helps release stress and deal with trauma”. For those who are not likely to tell you how they feel, journaling can provide a way to express themselves. For someone who has trouble expressing feelings, writing can elicit self-understanding (Farmer,

2002). Journaling is a healthy and non-threatening way for someone to get their feelings out. Keeping a log of what triggers someone to SI can be helpful in the treatment process. Writing an autobiography can help to look at past events and allow expressions of anger and at the same time recall happy times that convey hope (Conterio and Lader, 1998). Many people who SI can go to websites and send their questions or concerns and receive support from others or find helpful resources.



*The knife at my wrist  
The pill on my tongue  
The blood at my hands  
The tears in my eyes  
What does not kill me makes me stronger.  
It is that which leads me to this.*

Does anyone in this world know what it's like to be so lost that all you think about is an easy way out?

Does anyone in this world know how to help a child who is so hurt that their eyes are blinded by the tears they cry every minute of the day?

Does anyone in this world have a cure for a broken heart and a cut up wrist?

Does anyone in this world see that child in the corner alone and scared and confused?

If everyone in this world is so blind that they can't even help a broken child by giving them love, then why are people so surprised that they are losing us one by one?

# Activity

## Write All About It

### Overview

Children/adolescents will learn how to share their thoughts and feelings through reflective journal writing




### Materials Needed

A journal or notebook  
Pen or pencil










### Procedure

Discuss that when people write out how they feel they are communicating their inner most thoughts. Journaling can help you think through tough situations, develop ways of coping and resolve inner conflicts. Then, have the child/adolescent choose a topic from the list below and write about it in a journal. They may or may not want to share what they wrote. Let the child/adolescent choose. However, this deep expression of feelings can have more of a healing effect when shared with another trusting person.

### Variation

-  Write a story about your life and have it published.
-  Keep a success journal to record all your successes.
-  Write a children's story that you can share with a younger child.

### Suggestions for Journal Topics

-  Keep a daily journal of your feelings and thoughts.
-  Write about a pleasant memory.
-  Write about a sad time in your life.
-  Write about something that really makes you angry.
-  Write about your feelings before thinking of self-injuring.
-  Write about different coping techniques you could do instead of self-injuring.
-  Keep a daily success journal where you keep a record of your successes.
-  Write a letter to someone close to you who; died, moved away, got mad at you, lied to you, doesn't understand you.
-  Write a letter to a family member whom you have difficulty sharing your feeling with.



# Activity

## Dream Weaver Journal

### Overview

Children/adolescents will learn how to share their dreams through journal writing.

### Materials Needed

A journal or notebook

Pen or pencil

### Procedure








Explain that a Dream Weaver is one who weaves together the meanings of dreams and how they can tell us about our life's story. Using the suggestions below, have the child/adolescent keep a Dream Journal. They may or may not want to share what they wrote. Let them choose.

### Follow Up

What similarities did you discover about your dreams and your life?  
What if any patterns or themes do you see in your dreams?

## Use the helpful hints below to keep your own Dream Weaver Journal

### Hints:

-  Keep a notebook or journal, pen or pencil beside your bed at night.
-  Remember to jot down the important events from your dream.
-  Write down what your feelings were during the dream.
-  Write about your other senses, the situation, who or what was involved, etc.
-  Write about the outcome or end of your dream.
-  Write about any unfinished business or unresolved conflicts.
-  Relate your dreams to possible reasons for self-injuring.

## Remember When...

### Overview

Children/adolescents will write about pleasant memories to focus their thoughts on positive events.

### Materials Needed

A journal or notebook  
Pen or pencil

### Procedure

Have the child/adolescent write about memories they have using the guide below. Have them share any feelings associated with a particular memory.

### Follow Up

Share in more detail the events you wrote about in your journal. How can reflecting on these memories help you during the times you are at risk for self-injuring.

### Describe in Writing

- ✍ A favorite memory of your family, friends.
- ✍ Something you succeeded at.
- ✍ An exciting time in your life.
- ✍ A time you felt very proud of something you did.
- ✍ A time you made a decision not to SI.
- ✍ A time you felt happy.
- ✍ A pleasant memory of a person that you lost.
- ✍ A time you felt really connected to someone.
- ✍ A time and place where you felt safe.

# Activity

## "Dear God..."

### Overview

Children/adolescents will write in their journal about personal and sometimes painful experiences.

### Materials Needed

A journal or notebook  
Pen or pencil

### Procedure

Have the child/adolescent write a letter to God concerning the situations mentioned below.

### Follow Up

Share how writing these letters can help you to deal with tough situations.

### Directions: The following are suggestions for a Dear God letter.

- ✎ Something that no one else knows about you.
- ✎ What you would say, if you could, to someone or something you lost.
- ✎ A letter of forgiveness to someone you have hurt.
- ✎ A letter to someone who has hurt you.
- ✎ A time when you self-injured.
- ✎ Why you self-injure.
- ✎ A letter asking for help.
- ✎ A letter asking for guidance.



# Strategy #5

## © Visual Arts

Visual Arts can be another non-threatening way to have a person who SI describe how he/she feels. Art therapy can be used throughout the lifespan. It can include painting, drawing, photography, and sculpture. Many people who SI like the tactile sensations of the art media against their skin and the fact that there are no boundaries (Milia, 2000). Trautmann and Connors (1994) use a drawing exercise where the child/adolescent draws a picture of themselves and then paint or color the areas where he/she would have hurt themselves. Violet Oaklander and Iliana Gill have found great success in using art therapy with abused children and adolescents. When using visual arts in counseling, hope is created and a chance for new growth can take place (Gladding, 1998).

*"Only when I stand  
painting before  
my easel do I feel  
somewhat alive."*

*– Vincent van Gogh*



## Self-Portrait

### Overview

Children/adolescents will create a self-portrait.

### Materials Needed






Pen, pencil, crayons, or other art media  
Separate piece of paper

### Procedure

Have the child/adolescent draw a self-portrait describing how they see themselves. Then have the child/adolescent share their drawing.

### Follow Up

Have the child/adolescent draw:

-  an image representative of SI.
-  an image representing his/her feelings.
-  an image of the feelings they have prior to SI.
-  their life without SI.
-  a picture of where they see themselves in two years, five years, ten years.



## Bridging

### Overview

Children/adolescents will learn what it takes to make positive changes in their life.

### Materials Needed

Bridging worksheet on the following page  
Colored pencils, markers or crayons

### Procedure

Copy the *Bridging* worksheet and ask the child/adolescent to draw on the left side a picture or symbol of a difficult situation that he/she is experiencing right now. Then, on the right side of the worksheet have him/her draw a picture or symbol of his/her personal strengths. Now in the middle (center) of the worksheet have him/her draw three lines that connect the first drawing to the second drawing. Have him/her choose three personal strength words and write how these personal strengths can help in coping with this situation.

### Follow Up

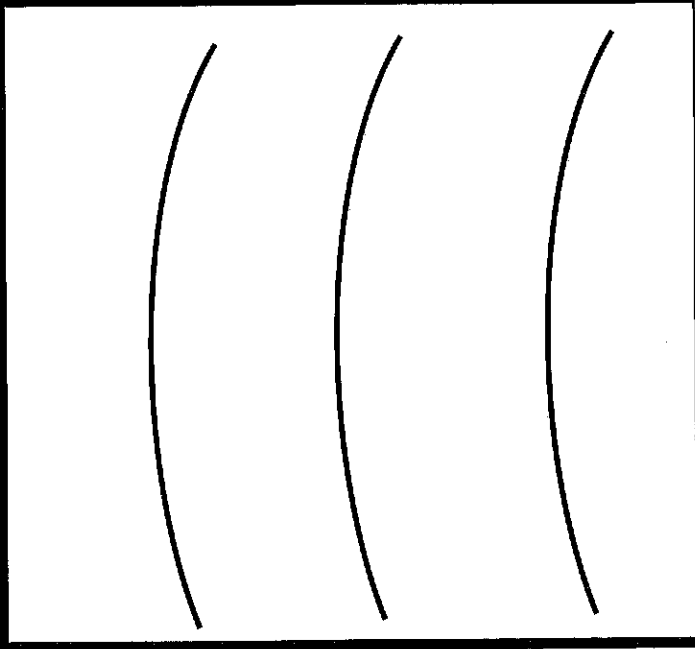
Set a deadline for when you will start acting on these strategies.  
Share this activity with someone you can trust.

### Variation

Have the child/adolescent draw a picture or symbol of their SI on the left and a picture or symbol of their life without SI on the right, using the same directions as above.



# Bridging

PERSONAL STRENGTHS	STRATEGIES USING YOUR PERSONAL STRENGTHS	DIFFICULT SITUATION
		

## Healthy Connections

### Overview

Children/adolescents will learn the importance of having a healthy support system especially during difficult times.

### Materials Needed

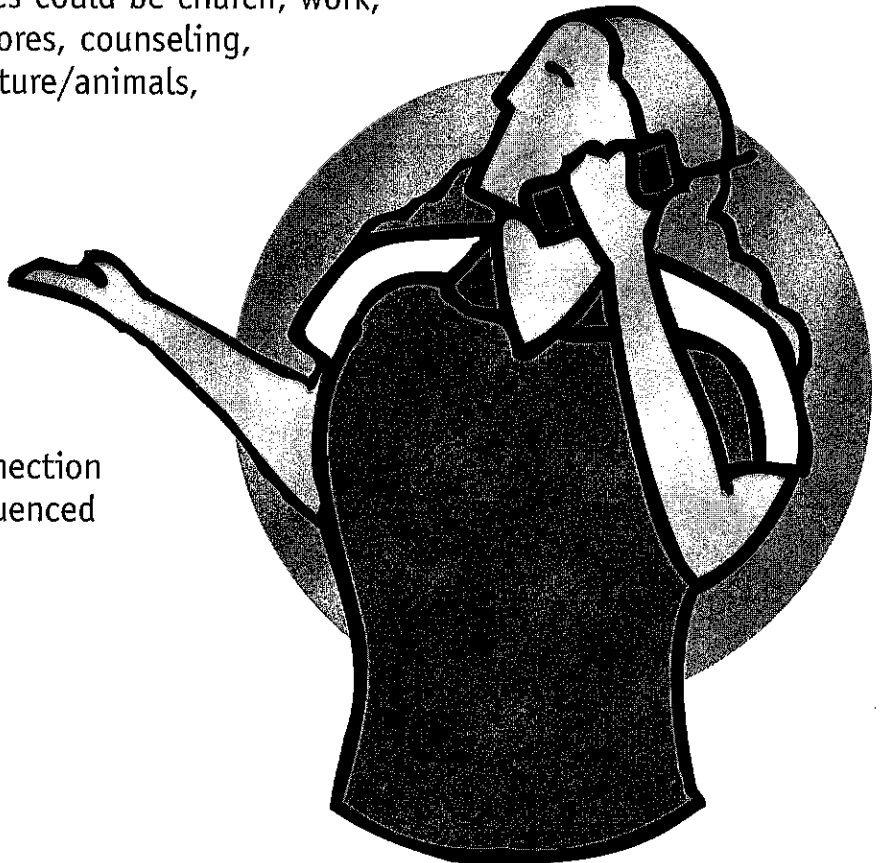
Healthy Connections worksheet on the following page  
A pen or pencil

### Procedure

Note on the worksheet that there is a circle in the center with five empty circles (resources) surrounding it. Have the child/adolescent write his/her name in the center circle. Then, have him/her draw a picture or symbol in each outer circle representing an identified resource that can be helpful. Some examples of resources could be church, work, phone, computer, stores, counseling, parks/recreation, nature/animals, clubs, etc.

### Follow up

Have children/adolescents look at their drawing. Have them share how each connection in their life has influenced them in some way.

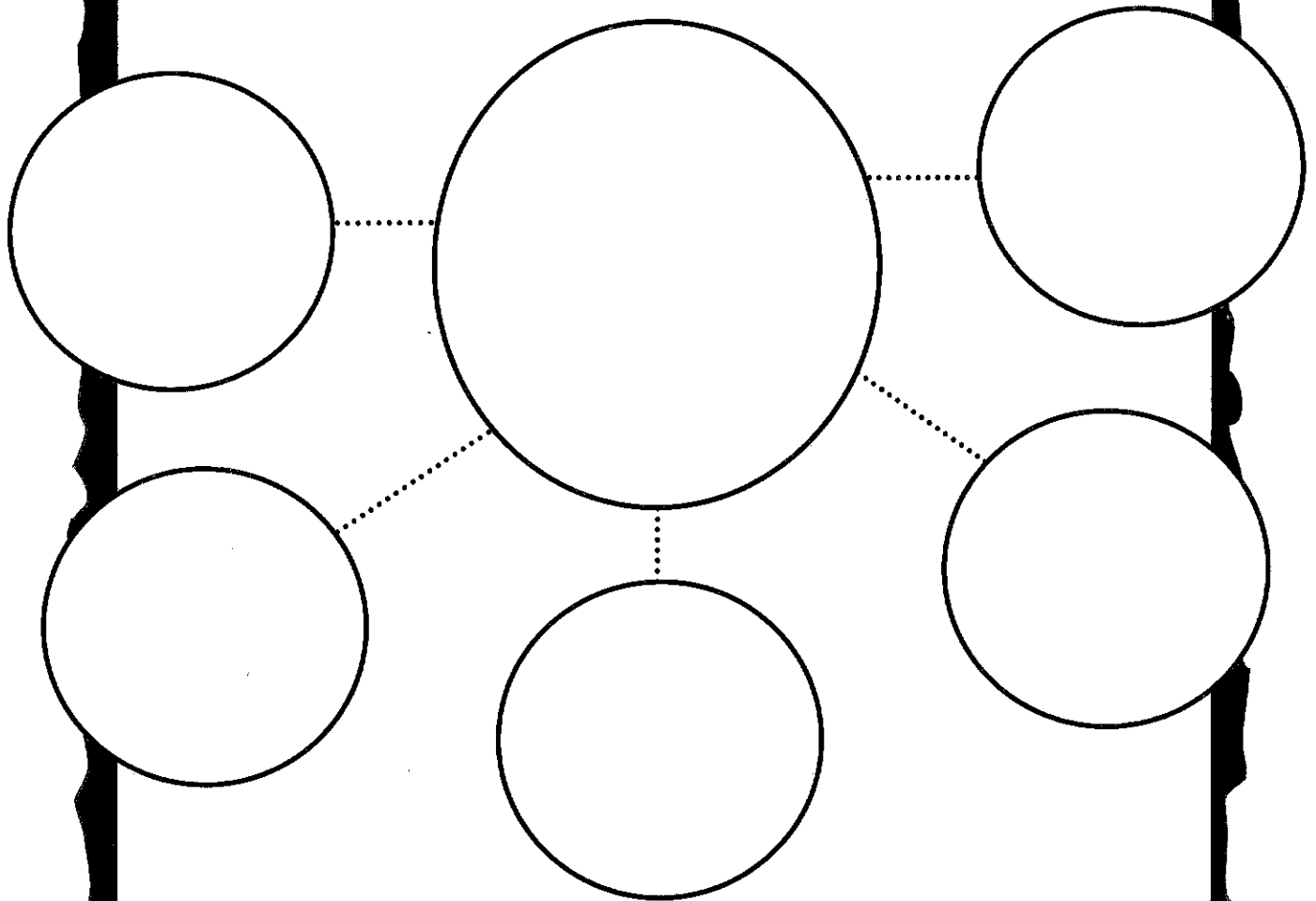


# Healthy Connections

Directions: Write your name in the center circle. Next, draw a picture or symbol in each outer circle showing a resource that is helpful to you.

Answer the following questions about your drawings.

- ☞ Which of these connections are helpful resources?
- ☞ Which connections can help you when you feel the need to SI?
- ☞ Which of these connections can help keep you from SI?
- ☞ Which of these connections can help you in thinking of healthier ways to express your emotions?
- ☞ How will you use these resources to help you?



The way we see ourselves can determine how we view the world and all its resources available to us. If we perceive ourselves as a likable person with a lot of positive qualities then we see the world as full of possibilities and adventures. In contrast if we perceive ourselves as ugly, worthless and incapable we will probably see the world as an unfair place full of problems and injustice. Take advantage of the resources available to you.

— Anonymous

## Media Madness

### Overview

Children/adolescents will create his/her own personal movie as a way to share what he/she is experiencing.

### Materials Needed

Creating Your Own Personal Movie worksheet on the following page  
Video or digital camera

### Procedure

Discuss with children/adolescents how movies provide a way for us to re-live past events, reflect on positive memories, and create new ones. Check to see who has access to a video or digital camera. Have them create a movie about their life. Then, hold a "Movie Day" and have each child/adolescent show his/her own personal video.








### Follow Up

Have children/adolescents share what this experience was like.



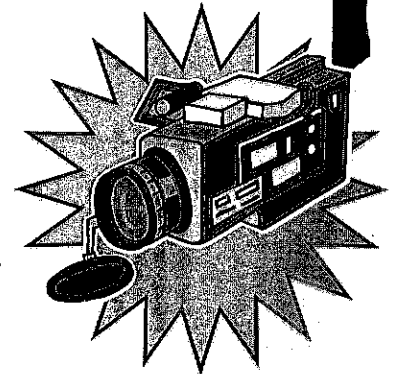
# Creating Your Own Personal Movie

Directions: Create your own movie: Take film footage or photos of what interests you most or what you want to tell others about yourself. For example: likes/dislikes, beliefs, strengths, favorite music, hobbies, etc. Your video needs a beginning, middle and a conclusion or ending. The length is up to you. You may want to start with something about 20-30 minutes long. The following are suggestions for you to consider before starting your movie. If you are a technical person you can create your movie on a computer that has a movie program and burn a DVD of your final work.

-  **Decide who will be your audience.**
-  **Decide who will be involved in your production.**
-  **Write up an outline of how you want to organize your movie.**
-  **Think of what message you want to convey to others through your movie.**
-  **Decide on a format you want to include.**  
(Interview, observation, illustrations, music, "Real-TV" type coverage, sound effects, video vs. stills, etc.)
-  **Give your movie a title.**
-  **Have fun while making your movie!**

## Suggestion:

You may want to share your finished production with family and friends first. If it is appropriate and intended to be shared with younger people you may want to contact your school counselor or social worker to find out how you could show this to some students. After showing the movie have a short discussion about it.





# Strategy #6

## © Clay

Clay is something the child/adolescent can feel, mold, or manipulate and is especially helpful to someone who SI (Trautmann & Connors, 1994). It provides a means for working through inner conflicts. The unique thing about clay is that the child/adolescent can be aggressive with it by punching, pounding or cutting it up and yet it (the clay) does not punish or strike back (Milia, 2000). Since SI is a very physical behavior it makes sense to use an art medium where the child/adolescent can use their hands and creativity. With clay the child/adolescent can mold a self-portrait, a SI trigger, a new behavior, a safe place or a symbol of their personal strength. It can also make it possible for the transference of self-relating to an object outside their body (Milia, 2000). Besides, it is a lot healthier for a child/adolescent to cut clay than their own skin.



# Activity

## Say It With Clay

### Overview

Children/adolescents will learn a tactile way to express a variety of emotions and situations. They will also learn how to transfer any abusive behavior into clay.

### Materials Needed

Modeling clay or Model Magic™

Plastic for the floor or work area

A piece of string and/or plastic knife for cutting the clay

### Procedure

Have the child/adolescent first get used to the clay by working with it as he/she talks to you. Then give him/her a specific objective (see the list below) and have him/her create anything that comes to mind. Allow enough time for this.

### Follow Up

Have the child/adolescent sculpture their safe place. Have them share what and where this place is.

### Sample Clay/Model Magic Work

- Create a symbol of your life right now.
- Show something you wish you could change.
- Create a symbol for happiness.
- Create a self-portrait.
- Show something you wish you had more control over.
- Sculpture an animal that most represents you.
- Create a symbol of hope.
- Create a symbol of your feelings prior to SI.
- Create a symbol of someone or something that is most helpful to you.
- Create a symbol of safety.

# Activity

## Get It Out!

### Overview

Children/adolescents will learn a tactile, non-threatening way to express their feelings.

### Materials Needed

Modeling clay or Model Magic™

Plastic for the floor or work area

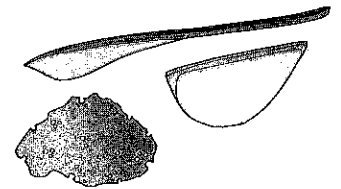
A piece of string and/or plastic knife for cutting the clay

### Procedure

Using the clay, have the child/adolescent sculpture the different feelings described below. Then, ask what he/she wants to do about this particular feeling. If they want to squish the clay with their hands, pound the clay or tear it apart, tell them it is okay. (With young children you may have to set limits on how far they can go.) Then have the child/adolescent create a symbol of a new, pleasant feeling.

### Follow Up

Have the child/adolescent explore different ways the clay can be used as a diversion from self-harming behavior.



### Directions

- ☛ Sculpture in the clay what each of these feelings look like to you.
- ☛ Show in the clay what you want to do with that feeling.
- ☛ Recreate a new, pleasant feeling to replace the unpleasant one.

### Unpleasant feelings:

Anger

Hurt

Afraid

Depressed

Sadness

Helpless

Alone

Shame

### Pleasant feelings:

Hopeful

Calm

Happy

Proud

Loved

Connected

Comforted

Worthwhile

# Activity

## A Safe Place

### Overview

Children/adolescents will learn a tactile, non-threatening way to create a safe place.

### Materials Needed

Modeling clay or Model Magic™

Plastic for the floor or work area

A piece of string and/or plastic knife for cutting the clay

### Procedure

Have the child/adolescent create his/her safe place.

Then have the child/adolescent share how it makes him/her feel safe.

### Discussion Questions

1. Describe your safe place.
3. How does this place make you feel safe?
4. What do you do while in your safe place?
5. Is there anyone in your safe place?
6. Who would you want in your safe place? Why?

### Follow Up

Have the child/adolescent share how this safe place can help to distract him/her from thoughts of SI.



## Healing Sculpture

### Overview

Children/adolescents will learn how to create a healing sculpture from clay as a tactile way to deal with emotions while causing a diversion to SI.

### Materials Needed

Modeling clay or Model Magic™  
Plastic for the floor or work area



### Procedure

Have the child/adolescent create their personal image of healing. Then have him/her share how this image can help to refocus his/her thoughts during emotionally difficult times. Next, have the child/adolescent describe how this image can help him/her in different settings such as: home, school, friends, relatives, etc.

### Follow Up

Have the child/adolescent share how this healing image can help to distract them from the urge to SI.

# Strategy #7

## © Sand Tray

Sand Tray allows the child/adolescent to feel in control, while they work out their past conflicts through self-discovery (Oaklander, 2000). It also provides a safe, protected and accepting environment for the child/adolescent (Gladding, 1998). Within this safe environment the child/adolescent can create their world, re-enact past conflicts, help resolve painful events, create their safe place, try out new behaviors and create their future world. Over time this symbolic working through of issues can offer a child/adolescent encouragement and support (Gladding, 1998). Sand tray can also allow the child/adolescent to take responsibility for their work (Homeyer & Sweeney, 1998).



**Sand tray from a girl referred for self-injury. The doll represents the way she feels at school and the soldiers represent her feeling that everyone is against her.**

# Strategy #7

(Cont.)

## © Overview of Sand Tray

Children/adolescents will learn how to share their feelings symbolically through sand tray.

### Materials Needed

A sand tray (see the list of suggested sand tray items on the following page)  
Comfortable area on the floor or a table

### Procedure

Have the child/adolescent first feel the sand with his/her hands to get used to the texture. Allow enough time for the child/adolescent to select the items he/she wishes to use to create the sand tray. Give him/her a ten minute warning before the end of the session for time to share his/her sand tray creation with you. Review the tips below before giving your child/adolescent sample activities to do in the sand tray.

### Follow Up

Have the child/adolescent create their own fantasy story in the sand tray and take photos or a video of each scene.

### Tips:

- As a helper it is important to remain indifferent when observing the child/adolescent's sand tray creation.
- It is important to not judge a creation as right or wrong, but as a symbol of what is going on in the child/adolescent's world.
- Once they finish the sand tray ask him/her open questions about what he/she created. Although it may look complicated to you it may make perfect sense to them.
- The important thing is to listen and be open to what they share!
- Take photos (with their permission) of just the sand tray creation. (When you take photos of each one it helps to see any changes that took place and how the child/adolescent worked through situations or conflicts.
- Understand the stages most children/adolescents progress through during sand tray work. According to Allan and Berry (1987) the three stages in sand tray are as follows:

**Stage 1:** Chaos (unstructured, haphazard)

**Stage 2:** Struggle (campaigns, strategies, stories with sequences)

**Stage 3:** Resolution (the stories have endings)

# Sand Tray Items

- ① **People figures of different ages, genders and races**  
(try to not have movie star figures, include figures that are "adolescent" age. Figures with a sports theme are good as long as they include both genders. Include figures that represent different careers).

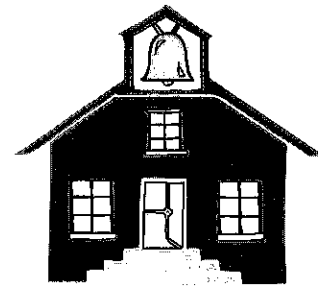
- ② **Vehicles**  
(cars, motorcycles, boats, planes, skateboards, rockets)



- ③ **Structures**  
(small box or house, apartment, school building, plastic cup, fences, window, door)

- ④ **Furniture**  
(chair, bed, couch, school desk)

- ⑤ **Predatory Animals**  
(Bears, lions, sharks, wolves, dinosaurs)



- ⑥ **Prey Animals**  
(Birds, sheep, other small animals)

- ⑦ **Domestic Animals**  
(dogs, cats, horses)



- ⑧ **Nature**  
(different kinds of trees, bushes, stones, shells, flowers, rock, feather, glass stones, etc.)

- ⑨ **Fantasy**  
(crystals, wand, stars, wishing well, wizard, super hero, treasure chest that opens)

- ⑩ **Other Symbols/Objects**  
(small flags, a watch, a piece of fabric, kitchen utensils, blocks, a cross or other religious symbol)



# Activity

## My Sand Tray World

### Nondirective Sand tray ideas:

- Create a world
- Create your world.
- Construct a scene

### Directive Sand tray ideas:

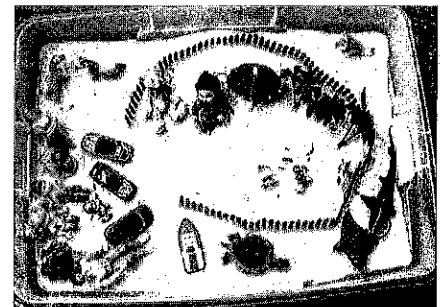
#### A. Directive-Situational

- Show a memory from your childhood.
- Show a sad time in your life.
- If you could change one thing in your world, show what that would be.
- Show your family doing something together.
- Show a difficulty you are currently having. Then show what would probably happen if you tried different possible solutions.
- Show a dream you once had.
- Show a situation that could trigger a self-injurious act.

#### B. Directive-Symbolic

##### Create a world showing:

- outer pain vs. inner pain.
- what hope would look like.
- what a hidden secret would look like.
- what healing would look like.
- something that needs protection.
- where something is being damaged. Then, add some force, object or strategy that prevents more damage from being done.
- what people don't see on the inside.



# Strategy #8

## © Metaphors

Metaphors can be used to represent personal strengths, a safe place, a positive memory or accomplishment. The symbolic language that metaphors provide can help to clarify understanding of experiences that are not easily described literally Bowman (1995). Connors (2000) refers to The Jigsaw Puzzle metaphor used to describe the life of someone who SI and the piecing it back together as part of the healing process. Metaphors can especially help those who have difficulty expressing how they feel with words. Learning how to use metaphors can help children/adolescents describe life's challenges in a new light. Describing something about yourself in an object is less threatening than having to talk about it. When children/adolescents are asked to find something in nature to describe their life right now they tend to share much more than just asked the question.



## Motivational Metaphors

### Overview

Children/adolescents will learn how to use metaphors to describe their personal characteristics and use them as motivational tools.

### Materials Needed

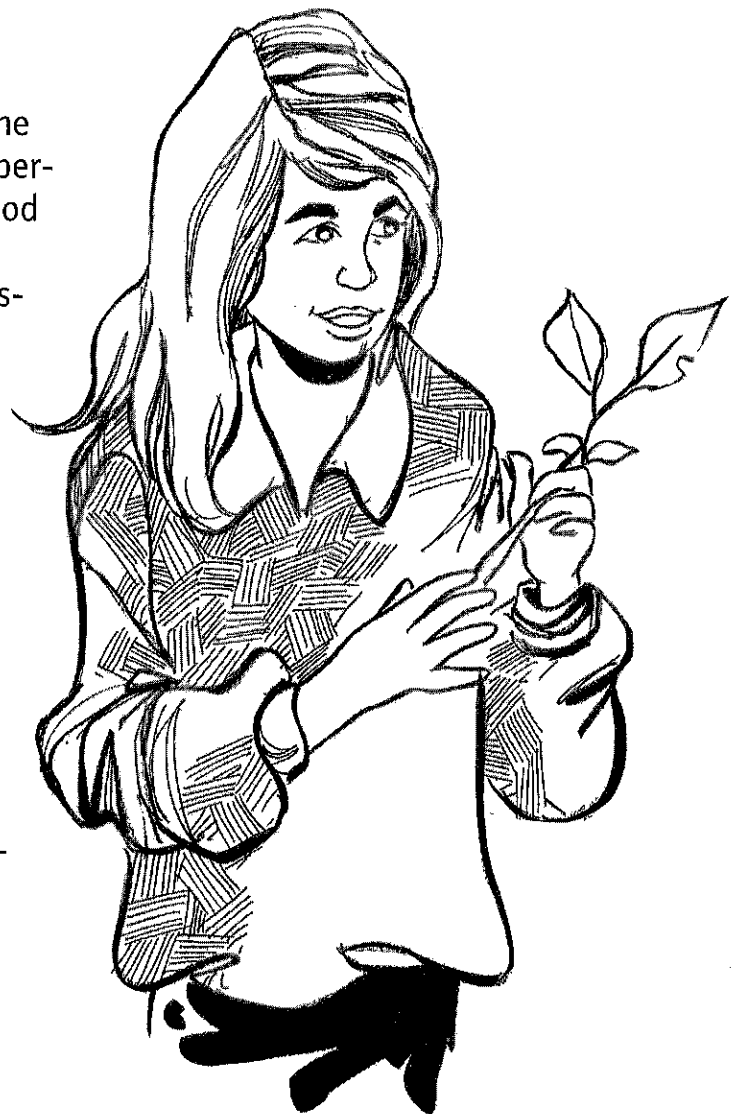
Motivational Metaphors worksheet on the following page  
Pen or pencil

### Procedure

On the following page have the child/adolescent list his/her personal characteristics (E.g., good listener, friendly, determined, caring). After each characteristic have the child/adolescent think of a metaphor to remind him/her of that particular trait. Discuss how this can be used to help motivate him/her during difficult times. Share the examples on the following page.

### Follow Up

Find a symbol or object that represents one of your characteristics and carry it around with you as a reminder.



# Motivational Metaphors

Metaphors are symbols one uses to describe someone or something. For example, if someone is very organized a calendar or palm pilot would be a symbol of that strength. Metaphors can also help to motivate people and include symbols that describe something one can do well to help encourage them during difficult times.

Directions: Name some of your personality traits below. After each trait think of a symbol or metaphor that represents this characteristic. See the samples below and then create your own. Either draw or write this symbol or metaphor.

### Some Examples:

- Caring ..... A stuffed animal
- Sense of humor ..... A feather (tickle, light hearted, etc.)
- Insight ..... A light

### Things I can do well

---

---

---

---

---

### Metaphor, Symbol


Adapted with permission from Bowman (1994). Motivating "At Risk" Adolescents.  
Chapin, SC: Developmental Resources, Inc.

# Activity

## My Life As A Metaphor

### Overview

Children/adolescents will learn how to use metaphors to describe his/her life.

### Materials Needed

My Life as a Metaphor worksheet on the following page  
Pen or pencil

### Procedure

Have the child/adolescent write a metaphor for each situation listed on the following page. Then have him/her share why that particular metaphor was chosen.

### Follow Up

Find a symbol or object that represents you and your life. Describe how it symbolizes you. Then find a metaphor that symbolizes your abilities to overcome challenges.



# My Life As A Metaphor

Have you ever described situations in your life using symbols or metaphors? Have you ever heard someone say, "My life recently has been like a roller coaster ride"? What are they saying about their situation? What if someone said, "I feel like the invisible man?" What do you think they mean by that?

Directions: Look at the situations on this page and think of your own life, describing a metaphor for each one.

---

## Situation

## Metaphor

---

Going to school.....

Going on a trip with my family .....

Doing homework .....

How I feel about myself .....

When I get angry .....

When I feel sad.....

My relationship with the opposite sex .....

My time alone.....

Talking with my parents/guardians.....

When I listen to music .....

Being around my closest friends .....

When I am feeling hurt.....

When I feel like self-injuring .....

# Activity

## Symbolic Scavenger Hunt

### Overview

Children/adolescents will learn how to describe his/her life using metaphors found in nature.

### Materials Needed

Nature

### Procedure

Have children/adolescents find an object in nature that describes his/her life right now. Remind him/her to respect all living things and to only look for objects on the ground and not hurt anything living. Then have the child/adolescent share these objects with the group.

### Discussion Questions

1. What did you enjoy most about this activity?
3. How does the object you chose represent you?
4. How does this object represent how you feel about yourself?
5. How does this object relate to a specific situation in your life?
6. How can this object represent a symbol of hope for your life?

### Follow Up

Have the children/adolescents take the objects that represent any emotion or event that has negatively affected his/her life and then bury it. Then, have him/her choose an object that represents a new beginning.



# Activity

## If I Were a ...

### Overview

Children/adolescents will think of creative ways to describe themselves using metaphors.

### Materials Needed

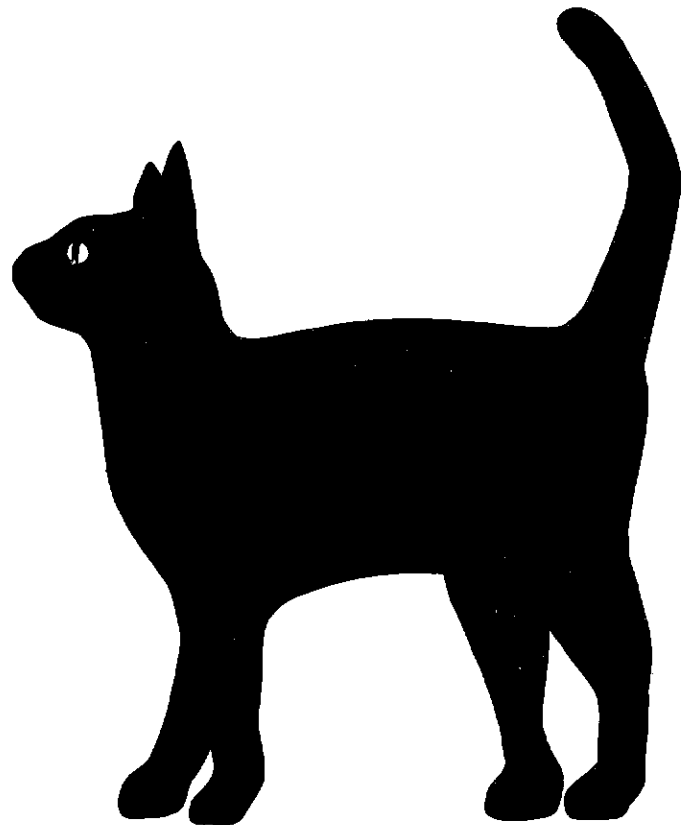
If I Were a ... worksheet on the following page  
Pen or pencil

### Procedure

Have the child/adolescent answer the questions on the next page. After answering the questions have him/her share their responses with you and why he/she chose that particular metaphor.

### Follow Up

Have children/adolescents share other creative ways to describe themselves. Using a metaphor have children/adolescents describe the painful emotions that he/she sometimes experience.





# If I Were a ...

Directions: Complete the following sentences below.

1. If I were an animal I would be a

---

2. If I could be another person I would be

---

3. If I were a color I would be the color

---

4. If I could be a body of water I would be a/an: (circle one)

brook      ocean      pond      stream      puddle

5. If I could be a famous person I would be

---

6. If I were a shield I would

---

---

7. If I were a safe place I would be

---

# Strategy #9

## © Music

Music is such an important part of our lives. It is universal and can be heard almost anywhere you go today, including the public restrooms. Music can be utilized as another approach for helping teens manage their pain, reduce stress and learn to relax (Werblin, 1999). Music can provide relaxation during stressful times and a distraction during those times when a person feels like self-injuring. Unfortunately, many children and teens listen to music that includes lyrics about violence, sex, drugs, rage and sometimes self-injury. Since their music is such an important part of their world, why not use music as a therapeutic tool for connecting with these young people. Music can be a powerful tool for facilitating self-awareness, evoking forgotten memories, communicating feelings and bringing people together (Bowman, 1987; Ortiz, 1997). Dr Ortiz in his book *The Tao of Music* talks about how music can reduce stress and tension while triggering endorphins to help the mind temporarily escape into a "painless world." The music environment can also become the container for destructive issues instead of the self (Jackson, 2002).



# Activity

## Name That Tune

### Overview

Children/adolescents will learn how to use music to describe their emotions.

### Materials Needed

Name That Tune worksheet on the following page  
Pen or pencil

### Procedure

Have the child/adolescent read and answer the questions about music. Then, have him/her share their responses.

### Variation


Have children/adolescents write his/her music piece to describe their personal life.



# Name That Tune




Directions: Write actual songs or the kind of music that comes to mind for each question below. Then share how this music makes you feel.

 What kind of music do you like to listen to while with your friends?

---


---

---

 How does it make you feel?

---

---

 What kind of music do you like to listen to when you are alone?  
How does it make you feel?

---

---


---

 Name some songs, that when you hear them you usually become sad.

---

---

---

 What are some songs that usually make you feel happy and encouraged?

---

---


---

 Name some songs that usually make you feel mad or angry.

---

---

---

 What type of music do you listen to when you need to relax?

---

---

# Activity

## Music Masterpiece

### Overview

Children/adolescents will learn how to describe their inner pain with music and then interpret their pain into a sound.

### Materials Needed

Tape or CD player  
Soothing or relaxing music without lyrics  
Comfortable place away from disruptions  
Headphones (optional)



### Procedure

Ask the child/adolescent that the next time he/she feels intense pain to try the following exercise. First, they need to find a place to relax while you play soothing music in the background. Next, have the child/adolescent practice deep breathing until they become totally relaxed. Once relaxed, have him/her focus on where he/she feels the pain, the size and shape of the pain. Then, ask him/her to translate that pain into a sound. Once he/she has described that sound ask him/her to change the painful vibrations into healing sounds.

### Discussion Questions

1. How did it feel doing this activity?
2. How could this activity help you deal with certain kinds of pain?
3. How could this activity help someone who is thinking of self-injuring?
4. What does the healing sound look like?
5. What kind of music did you use to describe the healing sound?

### Follow Up

After completing this activity describe the size and shape of the pain now. Did it change? If so how?

# Activity

## Musical Collage\*

### Overview

Children/adolescents will piece together several small snippets of personally meaningful music to describe their life.

### Materials Needed

Pen or pencil

Tape recorder or computer with DVD player

### Procedure

Have the child/adolescent to record 10 – 20 second segments from songs that have personal meaning to his/her life. These segments should be recorded one after the other, so that a collage of brief musical parts becomes one new musical piece.

### Discussion Questions

1. What feeling words could be used to describe the emotions in this collage?
2. What is one thing that stands out about you in this musical collage?
3. On a scale from 1 – 5, with 1 being the most happy and 5 being the most unhappy, what number would you use to rate your collage?
4. What part of your musical collage describes you best? Why?
5. What does your collage say about your life right now and where you see yourself in the future?

### Follow Up

Have the child/adolescent tell about some songs that describe their friends, family and personal goals.

\*Adapted from Bowman, R.P. (1987) Approaches for counseling children through music. *Elementary School Guidance & Counseling*.

# Activity

## The Art of Music

### Overview

Children/adolescents will learn to relax while expressing themselves through the combination of music and art.

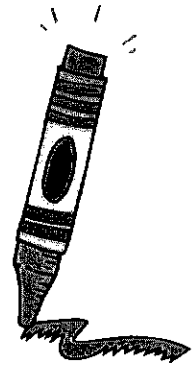
### Materials Needed

Pen or pencil

Cardstock paper

Colored markers, pencils, pastels, or paints

Tape or CD player with a variety of music selections



### Procedure

Ask children/adolescents to listen to various selections of music. With his/her eyes closed, have him/her take a marker or crayon and let his/her hand move to the sounds of the music. Tell him/her this will be abstract in nature and not to worry if it is unrecognizable.

### Discussion Questions

1. What senses were you aware of during this activity?
3. Were you able to let go and “flow” with the music? Why or why not?
4. How could this activity teach you to let go of negative emotions?
5. Do different sounds or rhythms evoke different emotions? Why?
6. Describe different sounds and the emotions or feelings these sounds may produce.

### Follow Up

Ask the child/adolescent what happened when he/she focused on the rhythms from the music. Then ask him/her how this exercise can be a helpful coping tool.

# Strategy #10

## © Story Telling

Story telling provides a non threatening way to gain more insight into difficult situations that children/adolescents experience. When children/adolescents read about people and/or characters that are experiencing similar feelings, then he/she can identify with the character and the child/adolescent feels less alone. When this happens then he/she can gain new insights and learn new coping strategies based on how the characters handled the situation.

Stories can offer real life examples that can relate to the person who engages in self injury. In his book, *Living On The Razor's Edge*, Selekman shares how he uses a Native American technique of telling valuable life lessons in stories to those who SI (2002). In addition, stories of famous people who self-injured such as Princess Diana or Johnny Depp can help those who have SI realize that they are not alone. How others overcame this pattern of behavior can offer hope and encouragement to those who SI.





# Activity

## Once Upon A Time...

### Overview

Children/adolescents will create their own stories by connecting a beginning and an end already provided.

### Materials Needed

The Once Upon A Time worksheet on the following page  
Pen/pencil  
Writing paper

### Procedure

Have children/adolescents finish the stories on the next page. A beginning and an end is already provided. Ask them to be creative.

### Discussion Questions

1. What was this experience like for you?
2. What situations in your own life were similar to the stories you created?
3. What thoughts and feelings did you experience while writing these stories?
4. How did you decide on what the ending of the story should be?
5. What influences can affect how each story ends?

### Follow Up

Looking at your own life story, write several options for how you think it will end. Then, write several options for how you want it to turn out.



# Once Upon A Time...

Directions: Below is the beginning and the end of several potential stories. Write your own story by connecting the beginning to the end. Use your imagination.

## Beginning

## End

It was a rainy, miserable day...

...she will never do that again.

Josh was disgusted with...

...and he was proud this time.

Brandi was a tenth grade student who...

...she was sorry it ever happened.

Sara stopped talking to her friends...

...and Sara smiled once again.

It happened again...

...now things were even worse.

Katie was afraid to be alone...

...now her friends saw a real difference in her.

Angel ended up hurting herself again...

...she enjoyed her new role as a mentor.

Jeremy was so angry that he...

...started a peer mediation group at his school.

Jen first began cutting when she was...

...and Jen realized that it felt good to be able to express her feelings without cutting.

Once upon a time...

...and they lived happily ever after.

## Autobiographies

### Overview

Children/adolescents will write their biographies to share with someone who is experiencing similar experiences.

### Materials Needed

Writing journals, notebook paper  
Pen or pencil

### Procedure

Ask children/adolescents to first read an interesting autobiography about a young person from the library or book store. Then, ask him/her to write his/her life story that includes how he/she was able to overcome some difficulties. Have him/her share feelings he/she had at different points of his/her life. Then, ask him/her to share successes, joys and the personal strengths that helped him/her get through those difficult times. Encourage him/her to have an English teacher or someone else to edit his/her autobiography.

### Follow Up

Have children/adolescents share their stories with several publishing companies to look into the possibility of having his/her story published.



## Success Stories

### Overview

Children/adolescents will use their imagination to write a children's story about a character who had some difficulty but then was able to resolve it.

### Materials Needed

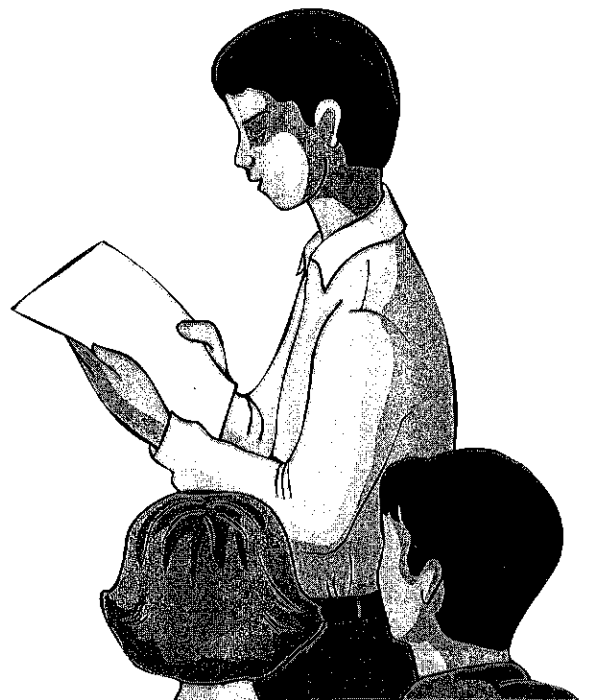
Computer to type and print out their story  
Cardstock or laminated cover for their story  
Colored markers, crayons or pencils

### Procedure

Have children/adolescents write a children's story with illustrations using a human or animal character. Have the story share about a difficulty the character had and then how he/she was able to resolve it. Ask him/her to either hand write it neatly or type it into the computer and then print it out. After completing the story ask him/her make a book cover with the title on either a card stock or laminate cover. Once this is completed, have him/her read it to a younger child or to a P-K through first grade class.

### Follow Up

Have the child/adolescent assist the school counselor during classroom guidance visits and share their story with the younger children.



# Activity

## What Do You Mean?

### Overview

Children/adolescents will define what he/she believes the quotes on the following page mean and apply them to his/her personal life.

### Materials Needed

Famous Quotes worksheet on the following page

### Procedure

Have the children/adolescents read each quote on the following page and write down what he/she thinks it means. Have the child/adolescent share answers to the following questions.

### Discussion Questions

1. Apply one of these quotes to a personal experience or situation you are going through right now.
3. Which one is your favorite quote? Why?
4. If you could describe your life with a quote what would it be?
5. Share some favorite quotes that you have heard.
6. Create an inspirational quote to help you during difficult times.

### Follow Up

Allow children/adolescents to make up his/her quotes and share these with peers or adults. Create an inspirational quote book with some of your favorite quotes.

# Famous Quotes

Directions: Write on the line below what you think the quote means.

*The task ahead of us is never as great as the power behind us.*  
— Alcoholics Anonymous

---

*When will people understand that words can cut as sharply as any blade, and that those cuts leave scars upon our souls?*  
— Author unknown

---

*Face the thing you fear, and you do away with that fear.*  
— Source Unknown

---

*Only those who dare to fail greatly can ever achieve greatly.*  
— Robert F. Kennedy

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*The best and most beautiful things in the world cannot be seen or even touched. They must be felt with the heart.*  
— Helen Keller

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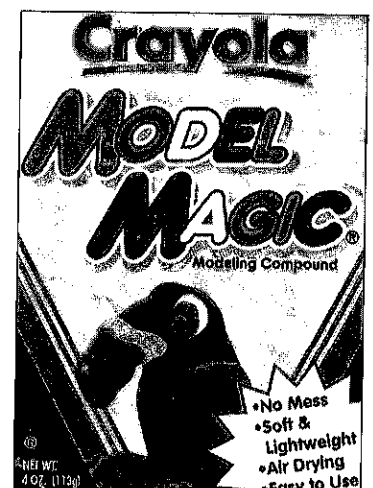
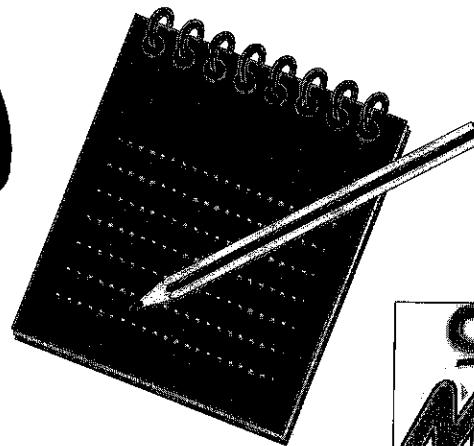
*When I look at the future, it's so bright it burns my eyes.*  
— Oprah Winfrey

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# Strategy #11

## © Tactile Diversion

Tactile diversion techniques can be used to overcome the urge to cut such as; squeezing ice, taking a cold bath, biting into something that is strongly flavored (Holmes, 2000). These diversion strategies can help the person who self-injures to get through that intense moment they think of hurting themselves. At the same time diversion techniques provide a new way of coping that can help keep him/her from trying to hurt him/herself or at least delay the SI behavior. Such a delay can help him/her to calm down and think of a more positive way to cope. Why not provide a "A Comfort Kit"? This could be a lunch bag or small box that is filled with tactile diversion items such as those listed on page 97. We recommend that two versions of this kit be available for children/adolescents who SI. One would include items more appropriate for school and one could be more personalized for use at home.



## Comfort Kit

### Overview

Children/adolescents will create their own personal *Comfort Kit* to help them if they ever feel the urge to SI.

### Materials Needed

A lunch-sized insulated bag, plastic bag or small box  
*Comfort Kit* items listed on the next page

### Procedure

Looking at the suggested list of items (on the next page), have the child/adolescent collect these to create their own *Comfort Kit*. Have the child/adolescent share their answers to the questions below.

### Discussion Questions

1. How can each of these items be used to prevent you from SI.
3. Which *Comfort Kit* item do you like the most?
4. Which *Comfort Kit* item do you use the most?
5. What is another item that could be included?
6. Which item could be most helpful for you when you are: angry, frustrated, sad, lonely, anxious, misunderstood, hurt or feeling rejected. (Add any other emotions not mentioned that you may experience)

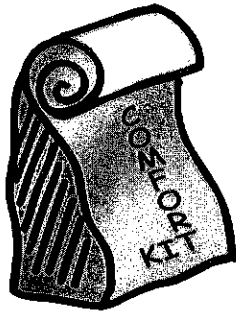
### Follow Up

Have the child/adolescent practice using the items in order to become familiar with using the *Comfort Kit*.

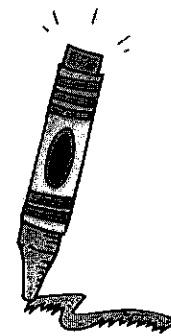


# Comfort Kit Items

## Generic Comfort Kit:



- Sand timer
- Squeeze ball
- Hand lotion
- Small packet of Model Magic
- Strategy cards
- Biofeedback card
- Mini journal, mini pen
- Drawing pad with colored markers
- Thick rubber band
- Glitter wand
- Escape pass to the guidance office\*



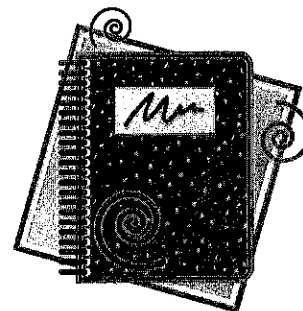
## Individualized Kit Items:

- Picture of your favorite person or thing.
- Picture of your favorite place.
- Index card with names of people who you can call.
- Index card with strategies you have developed.
- Thick rubber band with your favorite quote written on it.
- Portable CD Player with your favorite music.

## Other suggested items:



- Dot to Dot book
- Peelable fingernail polish
- Small bag potpourri
- Sketch-a-pad



\* Child/adolescent should be escorted by a peer leader to the guidance office

# Strategy #12

## © Creative Dramatics

Creative dramatics can be an excellent way for children/adolescents to: express feelings, try out different situations, resolve conflicts, practice new behaviors, and have fun. Role-playing is an important tool for learning new behaviors (Levenkron, 1998).

Adolescents especially respond well to creative dramatics since their whole life seems like a drama. Acting out different situations allows the child/adolescent to see things differently. For example a shy person acting out the role of someone who is extremely outgoing can allow that person a chance to play out a new personality. Creative dramatics can help to anchor new coping skills while expanding comfort zones.



# Activity

## Act It Out

### Overview







Children/adolescents will act out situations and suggest alternative ways to deal with each.

### Materials Needed

Role Play Ideas worksheet on the following page  
Spacious area for the role play

### Procedure

Have children/adolescents role play various themes (a suggested list is on following page. After the role play have the children/adolescents review the basic theme of the role play. Then discuss the following:

-  Describe each of the characters in the play.
-  Describe the feelings of each of the characters.
-  What was the problem or conflict?
-  How was this conflict resolved? If so, was this solution helpful?
-  What are some other ways that this situation could have been resolved?
-  How can you apply this to a situation you have experienced?

### Follow up

Have children/adolescents write their own script and then act it out.

# Role Play Ideas

## Role Play Guidelines

Keep the plays brief.  
 Don't have it go on too long.  
 Have a beginning and end.  
 Before you begin don't reveal what the play is about.  
 End the play without resolving the conflict.

### Family Dinner: 3-4 people

(show at dinnertime the following; non-verbal family, argumentative family, busy family with little time to talk, parents trying to communicate with their child, single parent family, etc.)

### Peer Pressure: 4-5 people

(several students trying to talk another student into doing something; drugs, go to a drinking party, have sex, cutting school, acting a certain way, self injuring, bullying another student, etc.) Hint: Have one or two students try to talk the other person out of doing it.

### Secrets: 3-4 people

(one person shares something personal with another student and that person shares it with someone else and so on; may be pregnant, has STD or AIDS, thinks he/she is gay, anorexic and/or bulimic, cuts or harms themselves, thinking of running away, talks about hurting someone, etc.)



## Life Sculptures

### Overview

Children/adolescents will act out their life using drama.

### Materials Needed

Space for the drama

### Procedure

Talk about how life is like a play or drama. We all have scripts and are placed in different scenes with different characters. Ask them to think of their own personal life and how it would look in a drama. Then discuss the following questions.

### Discussion Questions

1. What was this experience like for you?
2. What feelings or emotions did this role play bring to mind.
3. What new ideas or strategies did you discover?
4. How was your role play helpful in practicing strategies that you already knew but were not using?
5. In what situations will you practice what you've learned?

### Follow Up

Re-write a script from your life having a more positive ending.

Using hand movement, gestures, symbols, body language, props, etc. act out a drama of your life. Use the following suggestions as a guide:

- **Characters:** family members, friends, other adults, boy/girlfriend
- **Scenes:** home, school, friend's house, room, church, outside
- **Props:** table, chair, cross, book, picture, watch, cell phone, door
- **Scripts:** yourself at home, at school, in public, at church, with friends

## Lights, Camera, Action!

### Overview

Children/adolescents will write and perform a drama for their peers or younger students.

### Materials Needed

Adequate space for the drama

### Procedure

Have children/adolescents meet in groups of 4-5. Then ask each group to write a drama for one of the topics listed below. Allow each group enough time to rehearse their drama and perform it for you. Once the group is ready arrange for them to present their drama to a group of younger children or their peers.

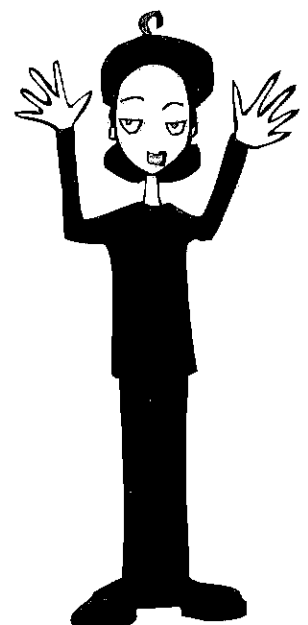
### Follow Up

Have the child/adolescent start a drama club at their school or in their community.



### Suggested Themes For Dramas:

- Say no to drugs
- Bullying
- Peer pressure
- School pressure
- Family stress
- Overcoming fear
- Finding hope
- Fitting in
- Reaching out to others
- What a real friend is
- Learning how to share your feelings



# Strategy #13

## © Mentoring

Mentoring can provide a positive role model where one is missing and encouragement during difficult times. A mentor needs to be accepting and not react negatively to the mentee's behavior. To mentor high risk children and adolescents there needs to be adequate training and on-going support group meetings (Bowman & Bowman, 1997). Mentors have had such a positive impact on youth that they could play an important role in a mentee's recovery process. Mentoring can help improve self-esteem (Feigley, 1995), improve peer relations (Hunter, 1994), offer a safe place, and trusting relationship (Mosqueda & Palaich, 1990), and improve a mentee's aspiration (Lee & Cramond, 1999).



## Suggested Mentoring Activities

### Games

- Play non-competitive board games.
- Play computer games designed for two people.
- Do a scavenger hunt together.
- Make up a game together and play it.

### Creative Arts

- Make a "Me Collage" (a collection of pictures/words that describe your mentee).
- Design a personal coat-of-arms (with symbols that describe your mentee).
- Make an "I Can" (a can covered with cut-out pictures of eyes from magazines) and fill it with statements about what your mentee can do well.
- Write and/or sing a rap song with your mentee about mentoring.
- Make up a skit on a certain topic and present it to the class.
- Have your mentee play his/her favorite music and discuss its meaning.
- Design and create a presentation for a school bulletin board.
- Create a display for a multicultural fair.

### Sports/Athletics

- Shoot baskets (basketball).
- Play catch (baseball, football).
- Have your mentee show or teach you about a sport or athletic skill.
- Exercise together (jog, walk, aerobics, etc.).
- Collect information about famous athletes and/or teams.
- Attend a sporting event together.
- Arrange for your mentee to meet a college or professional athlete.





# Activity

(Cont.)

## Career Exploration

- Help out on "Career Day."
- Build a special project together and put it on display.
- Volunteer at school functions.
- Arrange for your mentee to take a career interest test and talk about the results.
- Visit and interview people in various careers.
- Arrange for your mentee to "shadow" you at your job site.
- Visit the vocational program at a nearby high school.
- Check out different kinds of careers in the school library or career center.

## Other Activities

- Have your mentee keep a "Success Journal" (a diary of daily accomplishments).
- Cook a special meal together.
- Sew something together.
- Plan an outing or activity with the other mentors and mentees.
- Take a walk around the school grounds or park just to talk.
- Participate in a ropes course with other mentors and mentees.
- Have breakfast or lunch together at the school.
- Have a meal together at a restaurant.
- Learn to perform a magic trick together.
- Challenge each other to reach some personal goal.

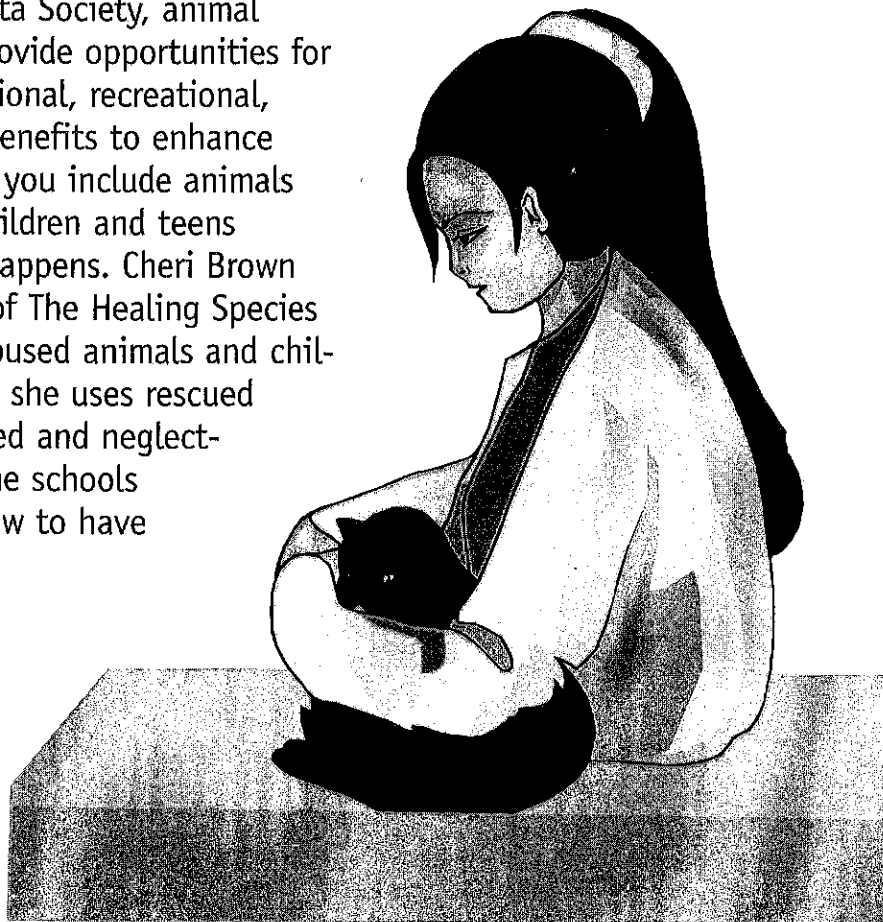


# Strategy #14

## © Animals and Nature

Animal Assisted Therapy (AAT) has been around for some time now. There are several nationally recognized organizations that provide guidelines for people who want to use their pet for therapy purposes. The most common are: The Delta Society, The Latham Foundation, International Society for Anthrozoology (ISAZ), and People, Animals, Nature, Inc. (PAN). Although dogs are the most commonly used animal for AAT, other animals have shown their therapeutic ability to help humans. For instance using horses (equine therapy) to help the physically and mentally challenged is now recognized as a treatment tool for psychotherapy (Drewry, 1998). Dolphins also provide therapy to children suffering from many kinds of disabilities. The fact that animals don't talk back, and are very accepting of all people no matter what they look like could explain why animals possess such a natural therapeutic ability.

According to the Delta Society, animal assisted activities provide opportunities for motivational, educational, recreational, and/or therapeutic benefits to enhance quality of life. When you include animals in your work with children and teens something magical happens. Cheri Brown Thompson, director of The Healing Species is an advocate for abused animals and children. In her program she uses rescued dogs that were abused and neglected to assist her in the schools teaching students how to have compassion toward animals and other people. Cheri says, "no matter how we start out, no matter what hurts our heart, we can rise above!"



## Animal Language

### Overview

Children/adolescents will learn how, like pets, people communicate through body language to others what they are feeling.

### Materials Needed

A trip to a local animal shelter or Humane Society(optional)  
Animals Can Talk worksheet from the following page  
A notepad  
Pen or pencil

### Procedure

Discuss with the child/adolescent how people are like dogs and other animals in that they communicate through body language. The difference is that animals cannot express themselves with words like people. Have the child/adolescent observe a dog or cat and see if he/she can recognize what emotions the pet is communicating through body language. Tell him/her to pay attention to the pet's sounds, eyes, head gestures, stance, and other non verbal cues. Then have the child/adolescent share how his/her behaviors were similar or different. Ask the child/adolescent to share times when his/her body language can communicate a different message. Ask how being aware of body language can be helpful in recognizing certain emotions.

### Follow Up

Have the child/adolescent share how pets can help people learn to communicate more effectively.



# Animals Can Talk

Observe a dog or cat displaying the following emotions and then describe what animal behaviors show that emotion. Then think of how you communicate non-verbally that same emotion and describe what behaviors you exhibit when feeling that particular emotion.

**Pet**

**You**

**Excited:** \_\_\_\_\_

\_\_\_\_\_

**Happy:** \_\_\_\_\_

\_\_\_\_\_

**Afraid:** \_\_\_\_\_

\_\_\_\_\_

**Playful:** \_\_\_\_\_

\_\_\_\_\_

**Attention Seeking:** \_\_\_\_\_

\_\_\_\_\_

**Hurt:** \_\_\_\_\_

\_\_\_\_\_

**Sad:** \_\_\_\_\_

\_\_\_\_\_

**Love:** \_\_\_\_\_

\_\_\_\_\_

# Activity

## The Miracles of Nature

### Overview

Children/adolescents will learn how to experience relaxation through nature.

### Materials Needed

Nature

Explore Miracles of Nature worksheet on the following page

### Procedure

Have the child/adolescent choose an assignment from the following page. Encourage him/her to choose a different one to do each week.

### Follow Up

Have the child/adolescent share times in their life where being around nature helped them to calm down or feel at peace.

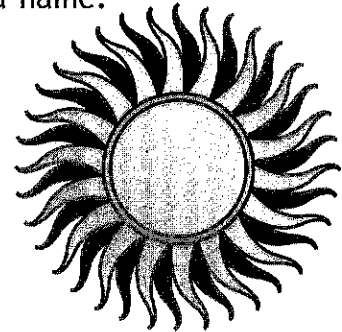


# Explore Miracles of Nature

Have you ever sat alone at the ocean and just listened to the sound of the waves or watched the sunset? Or have you ever looked up at the stars at night and noticed the constellations and planets? Nature is all around us. In fact if it wasn't for nature we could not exist. Human beings are all drawn to nature because it fulfills the need to connect with God's creation and discover the greater purpose of our existence. The most constant, reliable and predictable things in this world come from nature. Whenever we go to the beach we can expect to hear the sound of waves. If we look up at the night sky we can count on the planets and stars always being there. We can always count on nature as long as we don't mess it up. Nature inspires us and helps us to think more creatively. It can help us defuse our anger, soothe our sadness, discover our true selves and appreciate the miracles that surround us.

Directions: Consider the following miracles of nature. Choose one to do each week. Commit to doing one anytime you think about self-injuring.

- ☉ Watch a sunset and reflect on the positive memories of that day.
- ☉ Go away from the city lights and look up at the stars and thank God for His creation! What constellations can you name?
- ☉ Take a nature walk with your family or a friend.
- ☉ Sit in front of a brook or stream.
- ☉ Take a sketch pad with you on your nature walk and draw whatever comes to mind.
- ☉ Visit an animal sanctuary or wildlife park.
- ☉ Next time you go to the ocean sit on the shore, close your eyes and really listen.
- ☉ Go outside at night and try to identify all the different sounds you hear.
- ☉ While on a nature hike collect things from the ground and make a nature collage with them.
- ☉ Watch a thunder storm from a safe distance.
- ☉ Take a canoe trip with a friend down a river and notice the scenery.
- ☉ Look for interesting shells along the beach.
- ☉ Go camping and notice all the sounds around you.
- ☉ Next time you see a deer, try to quietly observe it without it noticing you.
- ☉ Take a camera with you next time you go outside and take pictures of nature.



# Activity

## Friends For Life

### Overview

Children/adolescents will learn how animals can help people through difficulties.

### Materials Needed

None

### Procedure

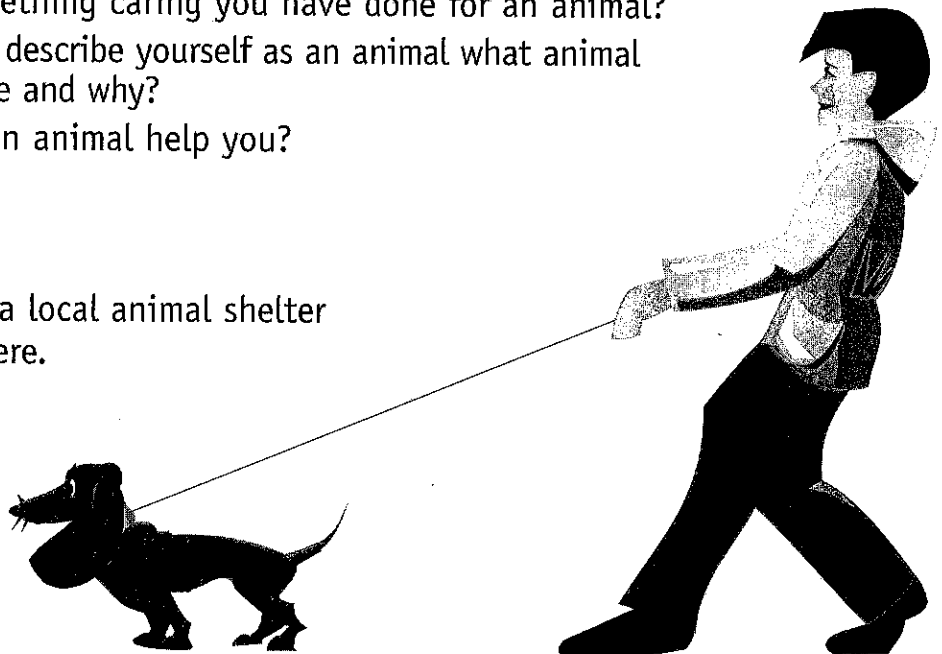
Ask children/adolescents if they have ever seen, Miracle Pets or another TV program that shows how pets have saved humans. Talk about how animals have been known to help so many people who were sick, injured, depressed, and lonely or had their life threatened. Have the child/adolescent share his/her responses to the following questions.

### Discussion Questions

1. What is something AMAZING you have seen an animal do?
2. Share your favorite animal story or movie. What did you like most about it?
3. What is something caring you have done for an animal?
4. If you could describe yourself as an animal what animal would you be and why?
5. How could an animal help you?

### Follow Up

Adopt a pet at a local animal shelter or volunteer there.



## Pet Diversion

### Overview

Children/adolescents will learn how animals can provide a healthy diversion to self-harming behavior.

### Materials Needed

A pet

### Procedure

This will only work for those children/adolescents who have a pet or have access to a pet. Have the child/adolescent focus their attention on the pet whenever they feel the urge to self-injure. Afterwards, talk to him/her about how a pet can help during those difficult times.

### Follow Up

Have the child/adolescent try to focus their attention on other people such as a younger sibling or grandparent whenever they feel like self-injuring.





# Strategy #15

## © Prayer Power

Prayer Power is the reason many of us are where we are today. The power of prayer is underestimated in our society. We live in a nation under God, use money that says "In God We Trust," casually

use the phrase, "Oh My God," and yet so many do not believe in God. Prayer is a powerful resource to our children/adolescents who are faced daily with circumstances that are out of their or our control. Why do so many people in our country only accept prayer as a resource after there has been a natural disaster, terrorist attack or other personal tragedy? It is almost as if we resort to prayer when nothing else works. Why can't we teach children to pray before making important decisions, before confronting their peers, before they start feeling depressed or sad? Prayer can cause us to be thankful, humble, generous, forgiving, calm, insightful, and to understand that some things in life we cannot change.



## The 7 Steps

### Overview

Children/adolescents will learn how prayer can help them through difficult times

### Materials Needed

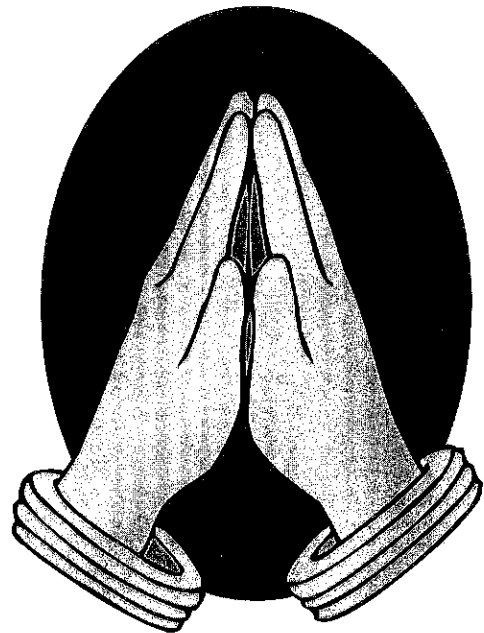
7 Steps to Praying worksheet on the following page

### Procedure

If appropriate in your work setting ask: "Have you ever prayed when you felt depressed, sad, lonely or hopeless? Maybe you said a prayer while riding in the car or while walking down the road or alone in your room. Many people pray and don't think twice about it. Share with the child/adolescent that we are all spiritual beings and that praying is a way of communicating and finding that inner peace and strength that we all possess. When we realize that we are only human and have limitations we can humble ourselves before God, our creator, and ask for His guidance and direction. We cannot do it alone and God wants us to ask Him for help.

### Follow Up

Have the child/adolescent ask a parent or other family member what they do to pray. Maybe this person could pray with him/her.



# 7 Steps to Praying

If you have never prayed before consider these helpful steps below and give it a try. The power of prayer can change your life! Many people have had life changing experiences as a result of prayer.

- Step 1** Find a quiet place where there is no noise or distractions.
- Step 2** Get comfortable by sitting, kneeling or lying down.
- Step 3** Talk to God as if you were talking to your closest friend.
- Step 4** Start by thanking Him for what He has given you: life, family, friends, etc. When you really think about it there is a lot to thank Him for.
- Step 5** Next, share your burdens, concerns and problems with Him.
- Step 6** Ask God to help you make the right decisions.
- Step 7** Close by asking God to forgive you for any wrong decisions you have made. Ask for His guidance, direction and strength.

**Let Prayer Make A  
Difference In Your Life!**

## My Personal Prayer Journal

### Overview

Children/adolescents will learn to journal their prayers and answers to prayers as a way of visually noticing their spiritual growth.

### Materials Needed

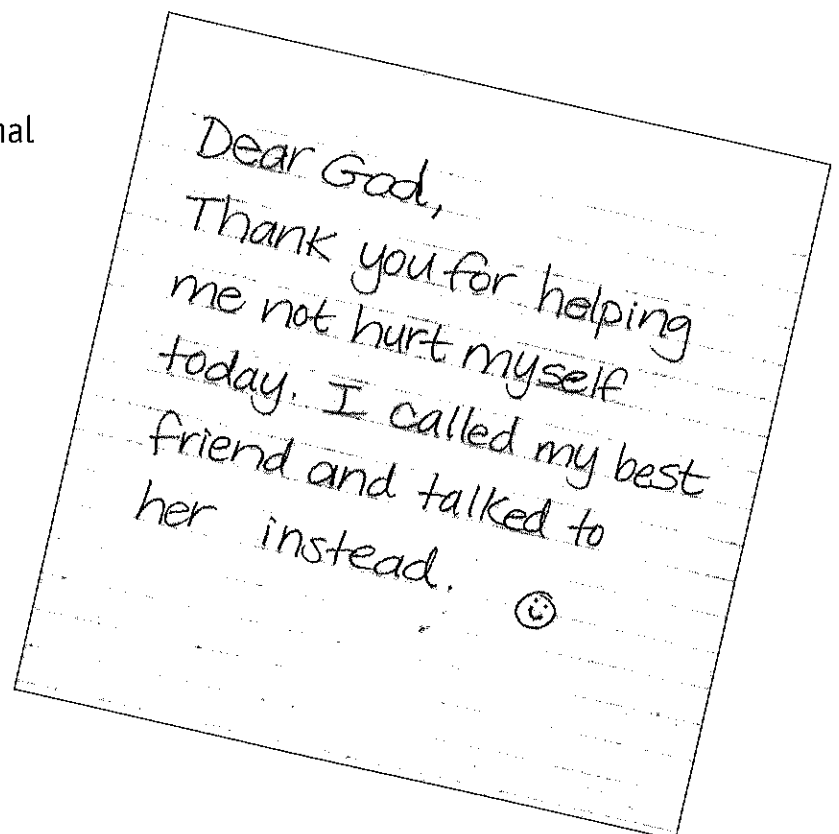
A personal writing journal or notebook  
Pen or pencil

### Procedure

Ask the child/adolescent to keep track of their prayer requests in a journal. Then ask him/her to write any answers to prayers. Remember to include the "small stuff" such as going an entire day without cutting, not getting into a conflict, or experiencing a success.

### Follow Up

Share your prayer journal with another trusting adult.



# Activity

## Become A Prayer Warrior

### Overview

Children/adolescents will learn compassion and empathy by praying for and helping others.

### Materials Needed

Time

### Procedure

Ask the child/adolescent to find a community outreach program, a local shelter, mission project or an individual to pray for and reach out to. This may mean volunteering his/her time, becoming a pen pal, meeting with a younger child weekly or starting his/her own prayer outreach. Afterwards, discuss the following questions with him/her.

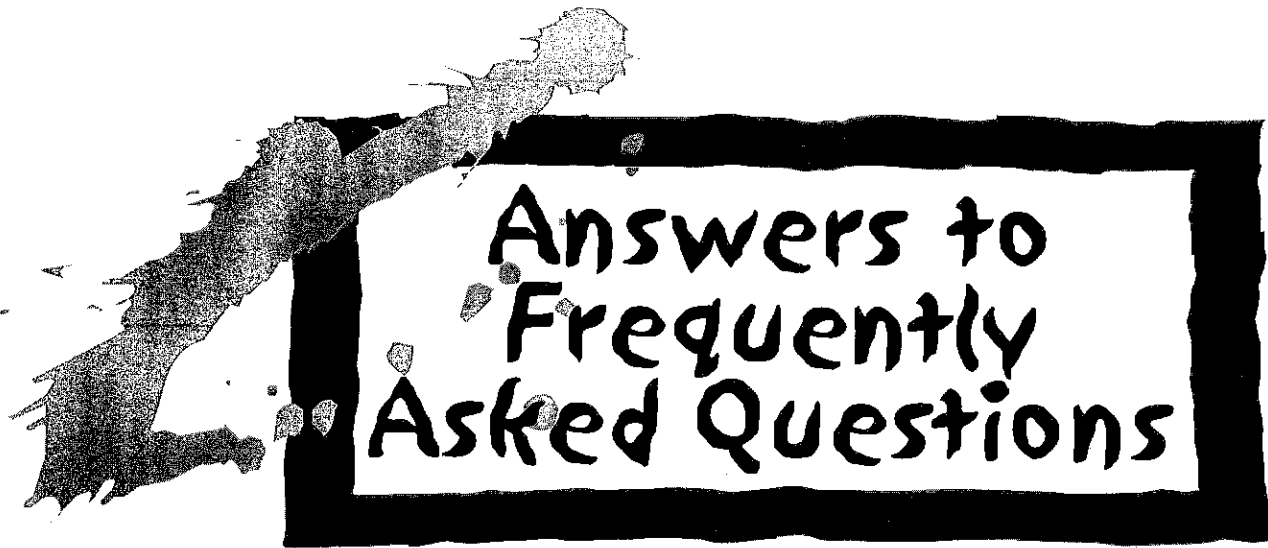
### Discussion Questions

1. How was this experience helpful to you?
3. What did you like most about your volunteer work?
4. What was the most frustrating part of your work?
5. What was one meaningful experience you had?
6. How could you share what you experienced with others?

### Follow Up

The child/adolescent may want to participate in a mission's trip where he/she can reach out to disadvantaged people in our country or other parts of the world by putting their prayer into action.





# Answers to Frequently Asked Questions

## ⑥ Is excessive body piercing and tattooing considered self-injury?

It is important to consider the motivation behind the act. Why is the child/adolescent engaging in the behavior? If the body piercing or tattooing is a response to some type of emotional discomfort, then yes, this would likely be considered SI.

## ⑥ Do no-harm contracts work?

No-harm contracts have the potential to do more harm than good. If the child/adolescent is not ready to give up SI, then they may agree to sign a contract in order to please you. This may cause him/her to feel guilty and isolated if he/she breaks the contract. Perhaps a variation of the no-harm contract may be considered. For example, a contract stating that the child/adolescent will use distraction techniques before engaging in SI.

## ⑥ Is self-injury attention seeking behavior?

SI can be viewed as a form of communication, so in those terms, the child/adolescent is seeking attention as a means to express the internal pain they are experiencing. His/her feelings and experiences need to be validated rather than ignored.

## ⑥ Why is the act of self-injury an emotional release?

Compare this process to that of a volcano prior to erupting. The volcano is churning inside and building up pressure, then finally explodes. This is similar to a child/adolescent holding in his/her emotions for various reasons until he/she has to release the pressure. When he/she SI, this releases that internal pressure.

# FAQs

(Cont.)

## ☉ Is there a contagion factor among adolescents?

Anecdotal accounts suggest that there is contagion among adolescents. Children/adolescents share information and practice unhealthy behaviors to cope with their lives.

## ☉ Why use rubber bands as a distraction technique?

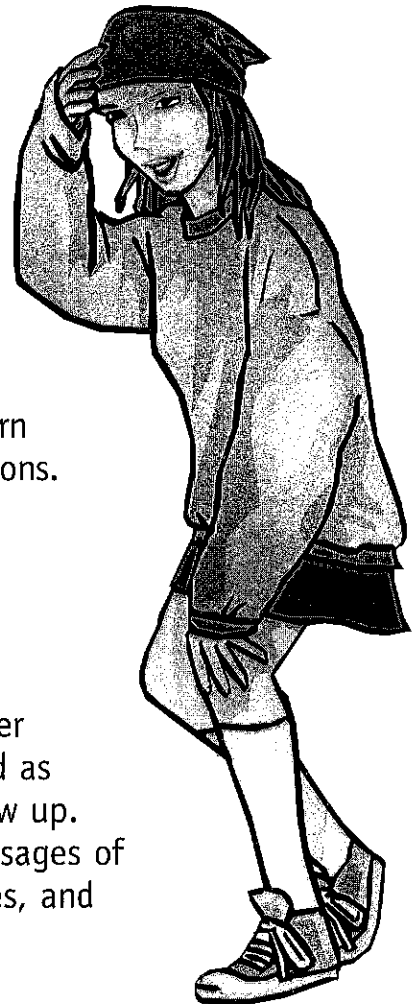
Rubber bands can be used as a distraction technique to interrupt the cycle of SI. The sharpness of the snap of the rubber band can help to delay or serve as a substitute for SI. This can be used as a temporary measure while the child/adolescent is learning more advanced methods of coping such as relaxation techniques or journaling.

## ☉ Does over protective parenting contribute to SI?

Just as neglectful parenting can contribute to SI behaviors, over protective parenting can as well. As parents we want to protect our children from life's normal hurt and pain, but if he/she never experiences hurt, pain or rejection then the child/adolescent will never learn how to cope with the inevitability of these emotions.

## ☉ What is the connection between SI and poor impulse control?

Children/adolescents learn how to handle his/her emotions by what he/she has seen role modeled as a child in the environment in which he/she grew up. Children/adolescents are overwhelmed with messages of instant gratification through media, video games, and peer influences. This contributes to the need to immediately alleviate the emotional pain by SI.



# FAQs

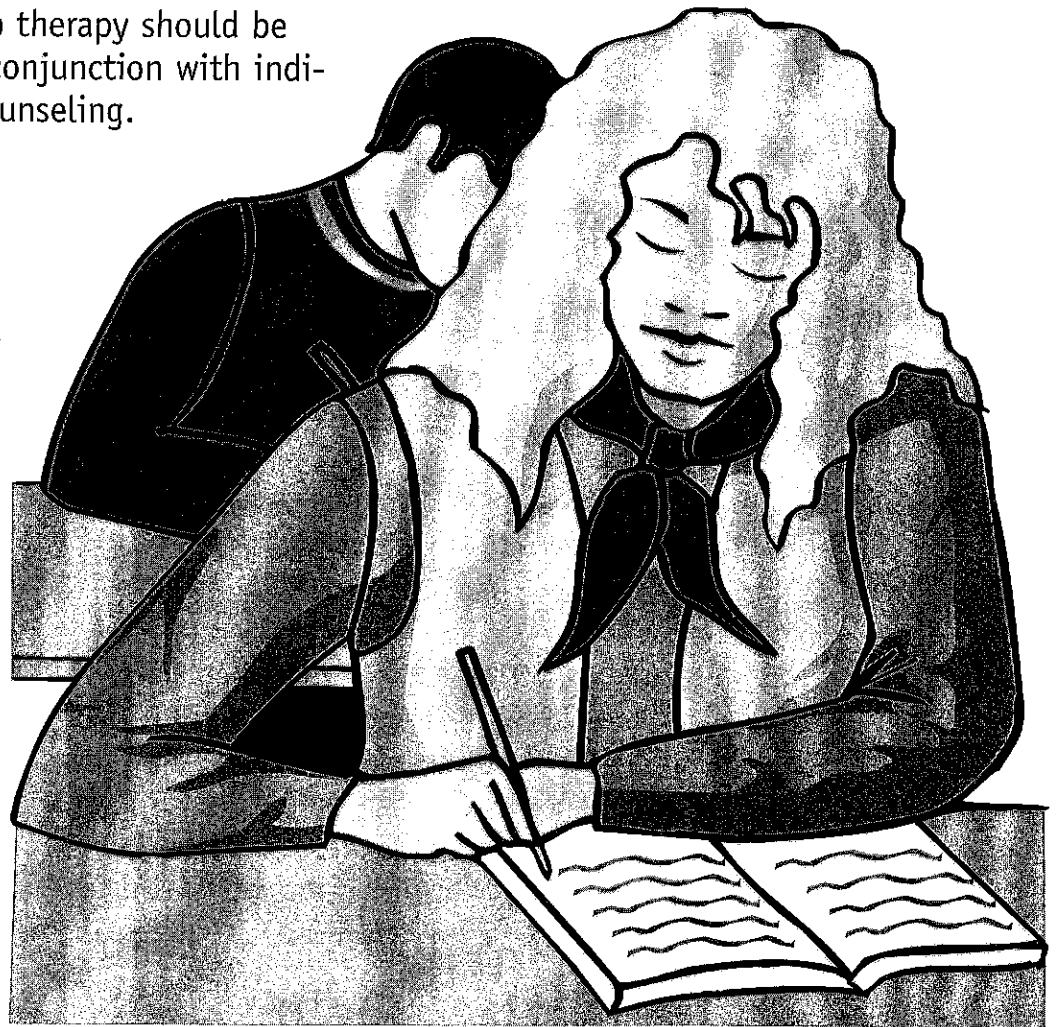
(Cont.)

## ☉ Is SI a life long problem?

It can be. As with any addiction, SI is a coping mechanism that is always available as a choice. This behavior is an unhealthy way to cope with difficult emotions. The child/adolescent who engages in the behavior will always have the knowledge that this is an unhealthy coping mechanism that has worked to temporarily relieve the emotional pain.

## ☉ Can group therapy be helpful?

Yes, group therapy can be helpful. However, it is important for the facilitator to be experienced and that the sessions are structured but flexible. Group therapy offers the child/adolescent an outlet to share his/her experiences in an open and accepting environment while learning coping skills that may help him/her overcome the need to SI. Group therapy should be used in conjunction with individual counseling.





# Conclusion

- ⑥ Although there is still so much to learn about this topic, there are some approaches that have been successful in helping those who SI. We have learned the importance of a positive relationship when working with self-injurers. In addition, we know that it is best to use a multifaceted approach. There are a growing number of outreach services for those who SI. Most of these resources can be found on the internet and include personal stories of self-injurers, materials and where to go for help. (See page 127 for a list)

Linda Davis Kyle summed it up so well in this statement:

Counselors hold keys in prevention and in treatment, for they can help to educate society and lead their patients toward healing. With love and respect from family and friends and guidance from qualified professionals, teens can feel nurtured and appreciated; and they can realize and enjoy life while they live it.

(Kyle, 1999, p. 37)

- ⑥ We want to encourage you to take time to be around children/adolescents to just listen and learn their world. If children and adolescents know that they can share their true feelings without being judged or criticized, there is a strong probability that they will not feel the need to SI. Children and teens need our help in realizing their personal strengths and potential for becoming productive and happy individuals.



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## About The Authors

Susan Bowman is a licensed therapist and specializes in helping troubled adolescents and their families. She is a former social worker for child protective services, and an elementary, middle and high school guidance counselor. She has also worked as a Title I counselor for incarcerated youth. Susan has coordinated youth programs such as peer helping, young women's career club, mentoring and teen parenting. She has conducted seminars throughout the US and abroad for professional educators on creative strategies for working with troubled adolescents. She has also worked annually as a visiting adjunct instructor for a summer graduate course entitled, Counseling Through the Creative Arts at Long Island University, Long Island, NY.

**Susan has authored or co-authored the following books:**

- **The Co-Piloting Mentor Program, Leaders Guide**
- **Becoming a Co-Pilot Handbooks (K-5 and 6-12)**
- **Individual Counseling Activities for Children**
- **Individual Counseling Lessons for Adolescents**
- **Chill Out Bag, The Anger Rx**
- **The Adventures of Dakota: A Friendly Wolf Who Teaches Children Lessons About Life**

Susan dropped out of school in the 8th grade and ran away from home. At the age of nineteen she had three children, was divorced and had to depend on welfare for financial support. Through perseverance, faith in God and a personal mentor, she later worked to receive her GED. During her ten years as a single parent she worked her way out of poverty and through college. This experience has given Susan a unique ability to encourage high-risk adolescents to focus on pursuing goals and discovering their personal strengths.



## About The Authors

Kathleen (Kaye) Randall is a licensed social worker who provides counseling services for adults, adolescents, children and their families on a wide variety of issues. She is a former adoption specialist who provided direct short-term intervention for clients in crisis; adoptive counseling services for children in foster care, adoptive counseling services for foster families as well as prospective adoptive families. In March of 2001 she was awarded Social Worker of the Year for the state of South Carolina by the Council on Adoptable Children – a national organization

Kaye has conducted workshops for troubled youth at the Department of Juvenile Justice. In addition, she provided a program analysis on the efficacy of the cognitive behavioral intervention model currently being utilized at a diagnostic preschool at a psychiatric inpatient/outpatient facility. She developed a curriculum for a victim of sexual abuse support group. She also conducts national and international seminars throughout the United States and Canada for professional counselors, educators and other professionals on creative strategies for working with troubled adolescents who self-mutilate. Kaye developed a 75 page workshop booklet of strategies and helpful resources for professionals on the topic of self-mutilation.

Kaye is a single mother of an eighteen year old girl. She has raised this child while putting herself through school to earn her Bachelor's degree and then her Master's degree. Kaye has a passion for working with adolescents. She believes that this is an empowering time in their lives when they could learn to have the ability to make dynamic choices for themselves. She often feels humbled and thankful that God has led her in this direction to serve and to help His children who are troubled.



# Websites On Self-Injury

[www.focusas.com](http://www.focusas.com)

[www.healthyplace.com](http://www.healthyplace.com)

[www.teenhealthcentre.com](http://www.teenhealthcentre.com)

[www.siari.co.uk](http://www.siari.co.uk)

[www.selfinjury.org](http://www.selfinjury.org)

[www.ruinyourlife.com](http://www.ruinyourlife.com)

[www.kolobcanyonrtc.com](http://www.kolobcanyonrtc.com)

NOTE: Websites may change over time. You can find most websites on this topic by doing a search for the word; Self-Mutilation or Self-Injury.