

## **The Scarred Soul**

Understanding and ending self harm.

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If you don't totally understand the concept of self-injury, you are definitely not alone. Many people, professionals included, have ideas about self-injury that aren't entirely accurate and often based on false beliefs.

Self-injury can best be defined as an act of violence (cutting, burning, etc.) that is done to oneself, by oneself, without the intent of suicide. Sometimes self-injury is called self-inflicted violence, self-harm, self-mutilation or cutting.

One of the most common misconceptions is that self-injury is the same thing as suicide. Suicide is the intentional act of killing one's self. Suicide is a purposeful end to one's life, while self-injury is most typically performed as an act of self-preservation, an act to sustain life. In basic terms, self-injury is a method of coping.

Self-injury generally provides temporary relief to intense emotional pain. Suicide is obviously a permanent solution to emotional and/or physical suffering. The damage done from self-injurious behaviors typically does not require medical intervention and is rarely lethal. Most of the people who intentionally hurt themselves never seek medical treatment and keep their injuries hidden. Those who attempt suicide often need medical intervention and the results of the suicide attempt are intended to be lethal.

One other difference between self-injury and suicide is that suicide is often attempted/contemplated while the individual is under the influence of alcohol or drugs. Most of the time, when people self-injure they are not using any substances.

In an emergency room, two people might be brought in with very similar injuries, such as lacerations to the wrists. While it would be easy to assume that both injuries might have resulted from a failed suicide attempt, the only sure way to know is to ask. If after hearing the reason for the injuries you're still not sure what happened, asking the person in a very direct manner, "Were you trying to kill yourself?" and "Were you hurting yourself to feel better?" might help clarify the issue.

Self-injury is cyclic in nature with factors preceding the actual act of physical injury and factors following the behavior. Dissociation is one of the factors that comes into play immediately prior to the act of self-injury. Everyone dissociates to some degree. At a benign level, dissociation may be described as "zoning out" and may result in driving past the freeway ramp on which you intended to exit. At the extreme end of the dissociative spectrum is dissociative identity disorder, a psychological phenomenon in which an individual develops, typically as the result of chronic, severe trauma, two or more distinct personalities. When people self-injure they are typically in a dissociated state, allowing them to feel little or no pain while they injure themselves.

Physiologically, endorphins are released when we are injured or stressed. Endorphins are neurotransmitters that act similarly to morphine and reduce the amount of pain we experience when we are hurt. Joggers often report experiencing a "runners high" when reaching a physically stressful period. This "high" is the physiological reaction to the release of endorphins - the masking of pain by a substance that mimics morphine. When people self-injure, the same process takes place. Endorphins are released which limit or block the amount of physical pain that's experienced. Sometimes people who intentionally hurt themselves will even say that they felt a "rush" or "high" from the act. Given the role of endorphins, this makes perfect sense.

These two dynamics, dissociation and the release of endorphins, serve to mask the physical pain that would seem to accompany self-injury. Regardless of whether the injury we sustain is accidental or intentional, our body knows how to protect itself.