K-12 SAP Trainings & SAP Thematic Workshops

K-12 SAP TRAININGS are held at The Conference Center, Saint Vincent College.
Dates: March 24, 25, 26, 2020; May 11, 12, 13, 2020
The Training is designed for new members of either a secondary or elementary S.A.P. team. This is also appropriate for Mental Health and Drug and Alcohol Treatment Staff and School-Based Probation Officers who have been assigned the role of "ad hoc" S.A.P. team members. Those individuals needing to make up a training session from a prior training will be able to complete those requirements at this training. For additional information or to register, please call Saint Vincent College Prevention Projects at 724-805-2050.

SAP Thematic Workshops: May 5, 2020

Awareness Days
You can easily take advantage of special events to raise awareness of an important issue or cause. Here are a few up-coming events for MARCH.

Kick Butts Day—March 18—http://www.kickbuttsday.org


American National Nutrition Month—http://www.nationalnutritionmonth.org/nnm/


National Developmental Disabilities Awareness Month—http://nacdd.org/events/

Self Injury Awareness Month (SAID)—http://www.scar-tissue.net/aware.html
TOPICS OF INTEREST...

SPRING THEMATIC WORKSHOP – May 5, 2020 at The Conference Center, Saint Vincent College. This training will focus on SAP Team function and best practices. For more information or to register, please call the Saint Vincent College Prevention Projects at 724-805-2050. The cost of the training is $40.00 and this includes continental breakfast and lunch. Act 48 credits are given.

K-12 SAP TRAINING—March 24,25,26, 2020 at The Conference Center, Saint Vincent College. Training is designed for new members of either a secondary or elementary S.A.P. team who have not completed the initial training with their team. This is also appropriate for Mental Health and Drug and Alcohol Treatment staff and school-based probation officers who have been assigned the role of "ad hoc" S.A.P. team members. Those individuals needing to make up a training session from a prior training will be able to complete those requirements at this training. For information or to register, please call the Saint Vincent College Prevention Projects at 724-805-2050.

CSAY Youth Mt. Pleasant Jr/Sr High School

Prevent Suicide PA holds an annual PSA Contest for youth suicide prevention. Students who are part of CSAY Youth Mt. Pleasant submitted an entry in the 60 second video category and won 1st place. This contest is open for all schools across the Commonwealth of Pennsylvania. Finalists were selected by the PSA Advisory Board and then voting was opened up to students and the public.

Bryce Jaworski, Ashlynn Scherer and Jillian Gearhart, all students of Mt. Pleasant Area High School put together the video. Jodi Ovitsky, CSAY Youth Advisor and Mt. Pleasant High School Biology/Chemistry Teacher assisted the students with submission of the entry and publicizing the voting process.

As contest winners, the students will receive free tickets to a Pittsburgh Pirate game where they will be recognized and honored on their achievement on the field. Their winning PSA video will also be played on the big screen at the game. Locally, the Mt. Pleasant Journal wrote an article on the students and on Monday, February 17, 2020 they were formally recognized at the Mt. Pleasant Area School Board Meeting.

2020 WINNER of the 60 Second Video Category

Mount Pleasant Area Jr/Sr High School

“Suicide Prevention PSA”
By Ashlynn Scherer, Bryce Jaworski, and Jillian Gearhart

“We have had several students die by suicide or attempt suicide within our high school in the last year. Many students have realized it is a problem and want to help.”

The video link: http://psa.preventsuicidepa.org/2020psa/
We’re looking for Sponsors!

We are seeking community sponsors to ensure our first annual walk is a success. Donations will be used to help with costs for participant t-shirts, food, and music. Sponsors giving a donation of $200 or more will have their logo included on the back of the STOMP OUT THE STIGMA t-shirts. If your organization would like to donate to our event, please complete the form on the back of this flyer.

- Make your check payable to: Westmoreland Intermediate Unit Foundation and mail the form and payment to Ms. Kyra Matachak, Westmoreland Intermediate Unit, 102 Equity Drive, Greensburg, PA 15601.

We’re looking for Vendors!

We would love to have organizations that support youth mental health represented at our event on April 25, 2020! We will have vendors inside and outside the Activity Center at Twin Lakes. Vendors placed outside may want to bring a small tent. If your organization is interested in setting up a table to share information and distribute materials, please send an email Kyra Matachak at kmatachak@wiu7.org.
PROBLEM GAMBLING CONFERENCE

MARCH 25, 2020  9:00 AM - 3:00 PM

FEATURING INDUSTRY PROFESSIONALS SPEAKING ON GAMBLING-RELATED BEHAVIORS

- Similarities/Differences Between Substance Use Disorder and Disordered Gambling
- Older Adults and Gambling
- Online Sports Betting Now and the Future

Westmoreland County Community College
Student Achievement Center
145 Pavilion Lane, Youngwood, PA 15697

For more information contact:
sdunford@wedacine.org

Westmoreland Drug & Alcohol Commission, Inc.

WESTMORELAND COUNTY COLLEGE
MISSION & VALUES

Purpose: To serve as the national advocate for programs and services to assist people and families affected by problem gambling.

Vision: To improve health and wellness by reducing the personal, social and economic costs of problem gambling.

Mission: To lead state and national stakeholders in the development of comprehensive policy and programs for all those affected by problem gambling.

CORE VALUES

Neutrality: We do not take a position for or against legalized gambling. We advocate solely for those affected by problem gambling.

Collaboration: We believe that our mission is best served by the collaborative action of a broad range of people and organizations.

Respect: We will treat all those affected by problem gambling and all stakeholders with respect.

CREDIBILITY

We will strive to be an objective, accurate and reliable source of information for all those concerned with problem gambling.

HISTORY

The organization was founded in 1972 by Msgr. Joseph A. Dunne and Dr. Robert Custer, among others. From the outset the Council established two principles that remain in effect today: that the organization would be the advocate for problem gamblers and their families, and that it would take no position for or against legalized gambling. This stance is encompassed today in our vision and mission statements above. A history of the NCPG from 1972 to 1985 by Msgr. Dunne was published in the Journal of Gambling Studies, Vol. 1, Issue 1. NCPG was conceived as the national representative of the problem gambling field and is organized with 3 classes of members: state affiliate, corporate and individual. The NCPG concentrates efforts on the national level, while the state affiliates work at the state and local level.

Info from: https://www.ncpgambling.org/about-us/mission-values/
NATIONAL PROBLEM GAMBLING HELPLINE
1-800-522-4700

The National Council on Problem Gambling operates the National Problem Gambling Helpline Network. The network is a single national access point to local resources for those seeking help for a gambling problem. The network consists of 28 call centers which provide resources and referrals for all 50 states, Canada and the US Virgin Islands. Help is available 24/7 and is 100% confidential.

The National Problem Gambling Helpline Network also includes text and chat services. These features enable those who are gambling online or on their mobile phone to access help the same way they play. One call, text or chat will get you to problem gambling help anywhere in the U.S. 24/7/365.

Help is also available via an online peer support forum at www.gamtalk.org.

Kick Butts Day is now March 18, 2020

The Take Down Tobacco National Day of Action is a day of activism where communities across the globe rally to push for the first tobacco-free generation. Youth tobacco rates are at a 20-year high in the U.S. due to the worsening youth e-cigarette epidemic, and tobacco is still the No. 1 cause of death in the U.S. and across the globe. On March 18, 2020, students, teachers, parents, elected leaders, health professionals, advocates and concerned citizens just like you are standing up to Take Down Tobacco.

What is Take Down Tobacco?

Take Down Tobacco is a fresh take on Kick Butts Day — the Campaign for Tobacco-Free Kids annual day of action. The Take Down Tobacco program is a 365-day effort that culminates every March with the Take Down Tobacco National Day of Action. 2020 marks the 25th anniversary of this program, and there have been many important victories since the first Kick Butts Day was held in 1996.

Over the past quarter century, the U.S. has made remarkable progress in doing just what the Kick Butts Day name describes: kicking butts. But even though youth smoking rates are on a downward trend and at an all-time low, skyrocketing youth e-cigarettes rates are reversing the progress we’ve made toward achieving the first tobacco-free generation. And of course, from cigarettes and cigars to smokeless tobacco to heat-not-burn cigarettes, the tobacco industry peddles a wide range of addictive and dangerous products that put kids at risk across the globe.

Take Down Tobacco is a reflection of both how far we've come and how far we still need to go to achieve the first tobacco-free generation.

Info from: [https://www.takedowntobacco.org/about](https://www.takedowntobacco.org/about)
FDA finalizes enforcement policy on unauthorized flavored cartridge-based e-cigarettes that appeal to children, including fruit and mint

Companies that do not cease manufacture, distribution and sale of unauthorized flavored cartridge-based e-cigarettes (other than tobacco or menthol) within 30 days risk FDA enforcement actions.

January 02, 2020

Amid the epidemic levels of youth use of e-cigarettes and the popularity of certain products among children, the U.S. Food and Drug Administration today issued a policy prioritizing enforcement against certain unauthorized flavored e-cigarette products that appeal to kids, including fruit and mint flavors. Under this policy, companies that do not cease manufacture, distribution and sale of unauthorized flavored cartridge-based e-cigarettes (other than tobacco or menthol) within 30 days risk FDA enforcement actions.

“The United States has never seen an epidemic of substance use arise as quickly as our current epidemic of youth use of e-cigarettes. HHS is taking a comprehensive, aggressive approach to enforcing the law passed by Congress, under which no e-cigarettes are currently on the market legally,” said HHS Secretary Alex Azar. “By prioritizing enforcement against the products that are most widely used by children, our action today seeks to strike the right public health balance by maintaining e-cigarettes as a potential off-ramp for adults using combustible tobacco while ensuring these products don’t provide an on-ramp to nicotine addiction for our youth. We will not stand idly by as this crisis among America’s youth grows and evolves, and we will continue monitoring the situation and take further actions as necessary.”

“As we work to combat the troubling epidemic of youth e-cigarette use, the enforcement policy we’re issuing today confirms our commitment to dramatically limit children’s access to certain flavored e-cigarette products we know are so appealing to them – so-called cartridge-based products that are both easy to use and easily concealable. We will continue to use our full regulatory authority thoughtfully and thoroughly to tackle this alarming crisis that’s affecting children, families, schools and communities,” said FDA Commissioner Stephen M. Hahn, M.D. “Coupled with the recently signed legislation increasing the minimum age of sale of tobacco to 21, we believe this policy balances the urgency with which we must address the public health threat of youth use of e-cigarette products with the potential role that e-cigarettes may play in helping adult smokers transition completely away from combustible tobacco to a potentially less risky form of nicotine delivery. While we expect that responsible members of industry will comply with premarket requirements, we’re ready to take action against any unauthorized e-cigarette products as outlined in our priorities. We’ll also closely monitor the use rates of all e-cigarette products and take additional steps to address youth use as necessary.”

The final guidance outlining the agency’s enforcement priorities for electronic nicotine delivery systems (ENDS), such as e-cigarettes and e-liquids, comes as the 2019 National Youth Tobacco Survey (NYTS) resultsExternal Link Disclaimer on e-cigarette use show that more than 5 million U.S. middle and high school students are current e-cigarette users (having used within the last 30 days) – with a majority reporting cartridge-based products as their usual brand.

The NYTS survey, which is conducted annually by the FDA in conjunction with the Centers for Disease Control and Prevention, also shows that of current youth e-cigarette users in 2019, approximately 1.6 million were using the product frequently (use on 20 days or more in a 30-day period), with nearly one million using e-cigarettes daily. Additional data from another federal surveyExternal Link Disclaimer further underscore that youth are particularly attracted to e-cigarette flavors such as fruit and mint, much more so than tobacco or menthol flavored e-cigarettes. These overall levels of youth e-cigarette use are particularly concerning because using e-cigarettes puts them at risk for nicotine addiction and other health consequences. In particular, evidence shows that youth exposure to nicotine can adversely affect the developing adolescent brain and that, compared with non-users, youth who use e-cigarettes are more likely to try conventional cigarettes in the future.
On Aug. 8, 2016, all e-cigarettes and other ENDS products became subject to the FDA’s tobacco authorities, including the premarket authorization requirements in the Federal Food, Drug, and Cosmetic Act (FD&C Act). All e-cigarettes and other ENDS products on the market at that time needed to have authorization from the FDA to be legally marketed. However, as an exercise of its enforcement discretion, the agency had deferred enforcement of the premarket authorization requirements. To date, no ENDS products have been authorized by the FDA — meaning that all ENDS products currently on the market are considered illegally marketed and are subject to enforcement, at any time, in the FDA’s discretion.

Beginning 30 days from the publication of the notice of availability of this guidance in the Federal Register, the FDA intends to prioritize enforcement against these illegally marketed ENDS products by focusing on the following groups of products that do not have premarket authorization:

- Any flavored, cartridge-based ENDS product (other than a tobacco- or menthol-flavored ENDS product);
- All other ENDS products for which the manufacturer has failed to take (or is failing to take) adequate measures to prevent minors’ access; and
- Any ENDS product that is targeted to minors or likely to promote use of ENDS by minors.

Cartridge-based ENDS products are a type of ENDS product that consists of, includes, or involves a cartridge or pod that holds liquid that is to be aerosolized when the product is used. For purposes of this policy, a cartridge or pod is any small, enclosed unit (sealed or unsealed) designed to fit within or operate as part of an ENDS product.

By not prioritizing enforcement against other flavored ENDS products in the same way as flavored cartridge-based ENDS products, the FDA has attempted to balance the public health concerns related to youth use of ENDS products with considerations regarding addicted adult cigarette smokers who may try to use ENDS products to transition away from combustible tobacco products. In addition to data showing that cartridge-based ENDS products are most commonly used among youth, important findings from the 2019 Monitoring the Future survey focusing on youth use of JUUL indicate that youth preference for menthol- and tobacco-flavored e-cigarettes is much lower than that for mint- and fruit-flavored e-cigarettes. Because of the relatively low numbers of youth using both menthol- and tobacco-flavored, cartridge-based ENDS products, these products are not among the current enforcement priorities. However, should the FDA become aware of an increase of youth using any other flavored products (both cartridge-based or otherwise), the agency will take additional steps to address youth use of those products if necessary.

For all other products (cartridge-based or otherwise), including menthol-, tobacco-, and non-flavored ENDS products, the FDA will also prioritize enforcement where the manufacturer fails to take adequate measures to prevent youth access. For example, the FDA will consider whether the manufacturer has implemented adequate programs to monitor retailer compliance with age-verification and sales restrictions or if it has established and enforced penalties against retailers that fail to comply with those programs. The agency also will consider whether the manufacturer uses adequate age-verification technology (or requires that retailers who sell its products use such technology) to prevent underage access to its website and to prevent underage sales through the internet. In addition, consideration will be given to whether the manufacturer limits (or requires retailers who sell its products to limit) the quantity of ENDS products that a customer may purchase within a given period of time.

The FDA also intends to prioritize enforcement with respect to any ENDS products that are targeted to youth or likely to promote use of ENDS by youth. Examples include: products marketed with labeling and/or advertising that resemble kid-friendly foods and drinks such as juice boxes or kid-friendly cereal; products marketed directly to minors by promoting ease of concealing the product or disguising it as another product; and products marketed with characters designed to appeal to youth.
Importantly, the FDA’s enforcement priorities are not a “ban” on flavored or cartridge-based ENDS. The FDA has already accepted and begun review of several premarket applications for flavored ENDS products through the pathway that Congress established in the Tobacco Control Act. Manufacturers that wish to market any ENDS product – including flavored e-cigarettes or e-liquids – are required by law to submit an application to the FDA that demonstrates that the product meets the applicable standard in the law, such as whether the product is appropriate for the protection of the public health. If a company can demonstrate to the FDA that a specific product meets the applicable standard set forth by Congress, including considering how the marketing of the product may affect youth initiation and use, then the FDA could authorize that product for sale.

The guidance also states that, after May 12, 2020, the FDA intends to also prioritize enforcement against any ENDS products that continue to be sold and for which the manufacturers have not submitted a premarket application. For ENDS products other than those in the three groups described above, if premarket applications are submitted by that date, the FDA intends to continue to exercise enforcement discretion for up to one year pending FDA review of the applications, unless there is a negative action by the FDA on such application or the product is authorized to be marketed by the FDA.

The FDA has demonstrated a deep commitment to taking steps to prevent youth from using and becoming addicted to any tobacco product, including e-cigarettes. This enforcement policy is an important step in the agency’s ongoing work to ensure these products are not marketed to, sold to, or used by kids, as outlined in the agency’s Youth Tobacco Prevention Plan, including investing in public education campaigns to educate youth about the dangers of e-cigarette use, provide resources to educators, parents and community leaders to prevent youth use, as well as further explore how to help those kids who are already addicted to e-cigarettes quit.

The FDA, an agency within the U.S. Department of Health and Human Services, protects the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines and other biological products for human use, and medical devices. The agency also is responsible for the safety and security of our nation’s food supply, cosmetics, dietary supplements, products that give off electronic radiation, and for regulating tobacco products.

Self-Harm Awareness Month

The self-harm cycle

Shame/grief → Emotional suffering

Emotional overload → Panic

Panic → Self-harm

Self-harm → Temporary relief

Temporary relief → Shame/grief

Self-harm usually starts as a way to relieve the build-up of pressure from distressing thoughts and feelings. It's important to know that this relief is only temporary because the underlying reasons still remain. Soon after, feelings of guilt and shame might follow, which can continue the cycle.

Where can I get Help?...next page
How to Deal With Self-Harm...

Emotions can be really painful sometimes. It’s totally normal to need ways to cope with and process the hard things in your life. If you are using self-harm to manage your emotions, we’re here for you. And, we want to help keep you safe.

Here are some ways to push through, process, and cope with your emotions.

- **Text to cool down.** If you’re dealing with painful emotions, we’re here to help. Shoot us a text to connect with a real human and strategize healthy coping mechanisms to manage your emotions. Text HOME to 741741 to connect with a real human.

- **Get creative.** Studies show that diving into making art can help people process emotions. So, next time you’re feeling like self-harming, grab your sharpie and doodle your worries away. A bonus: you can totally suck at it and still reap the same rewards.

- **Find your zen.** Keeping yourself safe from self-harming is all about finding healthy alternatives to work through the hard stuff. Researchers found taking time to re-center through meditation to be a powerful way to find your cool and calm. Try using an app like Headspace to get on the meditation bandwagon.

- **Talk to a pro.** Self-harm is serious. And, while the intention behind self-harm usually is not death, it can still be dangerous—both physically and emotionally. Talking to someone who can help you find alternatives is incredibly important. Of course, you can start by texting us. Also, consider telling someone you know who can help you connect with a professional.

Info from: [https://www.crisistextline.org/get-help/self-harm](https://www.crisistextline.org/get-help/self-harm)
### Westmoreland County Contact Info

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Address</th>
<th>Phone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Westmoreland Drug &amp; Alcohol Commission, Inc.</td>
<td>First Floor Suite 110</td>
<td>724-830-3617</td>
<td><a href="http://www.co.westmoreland.pa.us/">http://www.co.westmoreland.pa.us/</a></td>
</tr>
<tr>
<td></td>
<td>40 N Pennsylvania Ave</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Greensburg, PA 15601</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southwestern Pennsylvania Human Services, Inc.</td>
<td>203 S Maple Ave, Greensburg, PA 15601</td>
<td>724-834-0420</td>
<td><a href="http://www.sphs.org">http://www.sphs.org</a></td>
</tr>
<tr>
<td></td>
<td>Hours: Monday-Thurs 8:30-9:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Friday 8:30-5:00pm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hours: Mon-Thurs 8:30-9:15 PM</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Friday 8:30 AM-5:00 PM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SVC Prevention Projects</td>
<td>701 Fourth Avenue, New Kensington, PA</td>
<td>724-805-2050</td>
<td>724-805-2050</td>
</tr>
<tr>
<td>Laurel Sherbondy</td>
<td>724-339-7180</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donna Cartia</td>
<td>724-805-2050</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### AVAILABLE SERVICES FROM SVCPP:

**LOOK FOR THE SAINT VINCENT COLLEGE PREVENTION PROJECTS AT MANY SCHOOL EVENTS THROUGHOUT WESTMORELAND COUNTY**

**Lunch and Learn Presentations**

Presentations are available to your community group, business or organization at minimal cost or FREE. Topics include: Current Drug Trends, Power of Parents, Gambling/Gaming Awareness, Responsible Gambling, Talking with your Kids, and The Dangers of Underage Drinking.

**RADAR (Free Materials)**

Regional Alcohol/Drug Awareness Resource, information Center

The Saint Vincent College Prevention Projects provides free materials (pamphlets, brochures, posters, etc.) to schools, organizations, community groups, and to the general public on various topics that include: alcohol, tobacco, drugs, violence prevention, child guidance, and medications and the elderly.

To schedule a program for your business, school or organization, please contact Beth Joseph, Prevention Education & Community Outreach Services Manager at Saint Vincent College Prevention Projects at 724-805-2050 or email beth.joseph@stvincent.edu
What Parents Need to Know About Kids Who Self-Harm...

Discovering that someone you love is self-harming is frightening. It is also very confusing. As a parent, it is difficult to comprehend that no matter how much love you give to your child, it may not be enough to prevent him or her from hurting themselves.

**Who self-harms?**

Approximately 15% of young people self-harm. 34% begin between the ages of 17 and 20, although it can start as young as 12 or even younger. Self-harm is particularly associated with girls, but boys do it also. Self-harmers typically look like the child who sits next to your child in math class, the popular teen who just became prom queen, or the star athlete. Many are perfectionistic, high achieving, and sensitive. Many self-harmers, on the outside, appear to have it all together. But on the inside, there is emotional unrest. Self-harm is defined as the compulsion to deliberately inflict physical pain on one’s self. Professionals also call this self-mutilation, cutting, and non-suicidal self-injury (NSSI).

Common methods are excessive scratching, scab picking, and burning. Many individuals engage in more extreme behaviors such as cutting or breaking bones. Sounds scary, I know. However, most experts agree that self-harm is not always associated with suicidal thoughts. Children who self-harm don’t necessarily want to die. Rather, they just want the pain to end.

**What causes self-harm?**

For many parents, it is difficult to imagine why anyone would intentionally harm themselves. Young people are faced with a host of physical and emotional changes as well as external pressures such as academic, and social demands. Fear, hopelessness, and shame are just a few emotions that can drive one to self-harm.

**Self-harm is a symptom of a larger problem, as well as a method for relieving extreme stress and overwhelming emotions.** A young person who has difficulty expressing negative emotions could turn to extraordinary methods such as self-harm as an outlet. Studies show that self-harming releases endorphins in the brain that reduces tension and can result in a sense of calm. Simply put, the physical pain that results from self-harm alleviates the unbearable emotional pain. Self-harming offers your child the illusion that they are in control over their life circumstances. As a parent, you may not be able to stop their pain, but there are ways to help.

**What should parents be aware of?**

* **Warning signs:** Self-harm is difficult to detect because it is primarily done in secret. Individuals hide it because they feel that no one could possibly understand. Signs to look for in your child include increased sad mood, withdrawal from friends and activities, and spending long periods of time alone. Also, notice if your child wears long sleeves and jackets in very warm weather. When you first discover it, it is natural to be shocked, worried, and even angry. Avoid barraging them with questions they may not know how to answer. Reassure him or her that you are there to help. Your child may even feel a sense of relief that the secret is finally out.
* **Talk about difficult topics.** Major life transitions such as divorce, financial pressures, and death can take a toll on the entire family but may cause additional stress for children. It’s easy for us as parents to focus on managing the day to day activities and lose sight of our children’s emotional needs. Children worry and suffer too. They don’t always have the ability to articulate their emotions effectively. Encourage emotional expression and help your child to better understand his or her triggers by periodically checking in particularly in the days leading to an upcoming event: “Hey, I know that big final (or dance) is coming up, how are you feeling about it?”

* **Temporary relief:** My clients often share that when they self-harm, the pressure of bottled up emotions is suddenly gone. When talking to your child, it is important to note that the stress only goes away for a few hours or a few days. While there is temporary relief from the symptoms of the problem, the underlying core issue has not been resolved. Therefore, whenever pressures begin to resurface, the urge to cut returns. Professional help will enable your child learn effective coping strategies that will provide longer term relief.

* **Quitting is not easy.** Some young people quit on their own, but many do not. Self-harm is a form of addiction and being unsuccessful at quitting can lead to feelings of discouragement and shame which can kick the self-destructive cycle back into gear. Celebrate your child’s decision to quit. As a parent, you will desperately wish for things to be different. Know that your child has that same desire. However, the healing process will take time. Expect setbacks and inform your child that you are there and that you love them regardless.

* **Art of distraction.** Parents cannot force a child to quit, but they can help provide healthy outlets. *Ask your child what they believe that they need.* Do they need to talk? Reduce a heavy academic load? Switch to another (less stressful) extracurricular activity? Studies show that many forms of exercise can minimize anxious and depressive feelings. In addition to physical activity, watching a funny movie, drawing, taking a bubble bath, or listening to soothing music are helpful distractions. Additionally, writing about feelings in a journal or talking to a trusted friend can do wonders for dissipating stress.

* **Find the right professional.** If you notice signs of self-harm, immediately consult a counseling professional that has experience and training in this area. Don’t be surprised if it takes several sessions to notice improvements. If your child is already seeing a professional for a while but the self-harm continues, it is probably time to find someone new. You and your child can love a therapist, but perhaps additional interventions are needed. Effective strategies vary depending on the professional. Some techniques help your child understand the root causes of the self-harm. Alternatively, other interventions focus on behavior change or understanding their reactions to events that trigger the need to self-injure.

If someone you love is self-harming, know that you alone cannot fix it. You can simply be a loving presence and point them towards help. Stay encouraged and don’t give up! Expect that it may take several months—or longer—before your child eventually heals. The good news is that many children outgrow this. With good professional care, your child can learn more healthy ways to cope with pain.