



Cognitive Behavioral Therapy for Self-Harm

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Background: In recent years Self-harm is occurring with increasing frequency. Self-harm constitute a major risk factor for completed suicide, until now few interventions specifically designed to prevent Self-harm have been assessed. Cognitive-behavioral therapies have received the most research consideration as evidence-based treatment for decreasing self-injury. Specific therapies declining under this field include problem-solving therapy, dialectical behavior therapy, and standard cognitive-behavioral treatment. Cognitive Behavior treatment using functional assessments of self-injury to inform treatment, teaching specific skills (e.g., problem-solving, distress tolerance, assertive communication), using behavioral interventions (e.g., exposure, activity scheduling, removing reinforcers), and implementing cognitive restructuring.

Aim: To investigate the efficacy of a short cognitive-behavioral therapy intervention with 20 adolescents and adults who had recently engaged in self-harm.

Method: A purposive sample of 20 was selected randomly and was assessed at a hospital emergency department within 24 hours of the attempt. All subjects and divided into experimental group (N=10) and control group (N= 10). Experimental group received 20 sessions of manual based intervention. Pre assessment was carried for both the group at the beginning of the intervention. Post assessment was done for both the groups after completing CBT intervention. Third assessment was follow up assessment, which was done, carried at 4th week after post assessment.

Results: Patients who received cognitive-behavioral therapy in addition to treatment as usual were found to have significantly greater reductions in self-harm, suicidal cognitions and symptoms of depression and anxiety, and significantly greater improvements in self-esteem and problem-solving ability, compared with the control group.

Conclusions: Cognitive-Behavior therapy was effective in preventing self-harm for whom recently self-harm. These findings increase the evidence that a time-limited cognitive-behavioral intervention is effective for patients with recurrent and chronic self-harm.

Key words: Cognitive-Behavioral Intervention, Self-Harm