

Self-harm among BC youth

This fact sheet explores the self-harm experiences of youth who completed the 2023 BC Adolescent Health Survey (BC AHS). It identifies youth who are more likely to self-harm; the association between self-harm and suicide attempts; different types of self-harm; and how youth who have self-harmed can be supported.

Self-harm is defined as youth deliberately hurting themselves in the past year without intending to kill themselves.

For more information about the BC AHS, please visit mcs.bc.ca/about_bcahs.

Internationally, rates of intentional self-harm without suicidal intent have ranged from 12% to 34% among youth, with males the least likely to self-harm (Denton & Alvarez, 2024). Cutting is the most frequently used method of self-harm among young people (Massoodi et al., 2025; Neupane & Mehlum, 2023). Most youth who self-harm do not attempt suicide (Robinson et al., 2021), but they are more likely than their peers who have not self-harmed to go on to attempt suicide (Mars et al., 2019).

Youth might self-harm for a variety of reasons. The 2018 BC AHS asked youth who had self-harmed about their reasons for having done so the last time. The most commonly reported reason was to calm themselves down (57%; Smith et al., 2019), which was consistent with other studies showing that emotion regulation was a common reason for self-harm among youth (Massoodi et al., 2025).

Risk factors for non-suicidal self-harm include childhood maltreatment; peer victimization; relationship difficulties and losses; low self-confidence; and mental health challenges (Shao et al., 2021; Sivertsen et al., 2025; Vergara et al., 2019; Wang et al., 2022). Also, youth who spend more time on social media each day have been found to be at greater risk of self-harm (Tørmøen et al., 2023). However, social media use might also help youth who self-harm to feel less isolated and to connect to supports and services (Marchant et al., 2017).

Quotes from youth who completed the 2023 BC AHS are included throughout this fact sheet.

Overview of self-harm among BC youth

"I haven't self-harmed in the last 12 months."

Grade 11 female

"I've thought about self-harm."

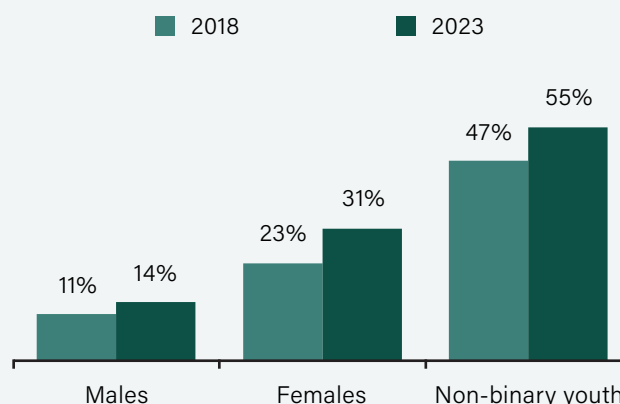
Grade 8 non-binary youth

"I cut myself."

Grade 9 female

Just under a quarter (24%) of BC youth aged 12–19 had cut or injured themselves on purpose without trying to kill themselves in the past year. This percentage was higher than 5 years earlier (17% in 2018) and a decade earlier (15% in 2013). Males were the least likely, and non-binary youth were the most likely, to have self-harmed.

Youth who self-harmed in the past year



Seventeen percent of youth had self-harmed multiple times in the past year. This included 7% who had self-harmed six or more times (25% of non-binary youth vs. 9% of females vs. 3% of males).

Among non-binary youth, there were no differences in rates of self-harm based on their grade level. However, for males, those in Grade 7 were the most likely to have self-harmed (e.g., 18% vs. 13% in Grade 12), and rates were similar among males in Grades 8 through 12. In contrast, for females the percentage who self-harmed was generally higher for those in the middle grades; for example, 35% of females in Grade 9 had self-harmed compared to 27% in Grade 12.

At every grade, youth were more likely to have self-harmed than 5 years earlier. For example, among males in Grade 7, 18% had self-harmed, compared to 12% in 2018. The pattern was similar for all genders.

There did not appear to be a link between self-harm and whether youth were in a middle-school system or one where they transitioned directly from elementary to high school.

Youth who identified as a sexual minority (e.g., lesbian, gay, bisexual) were more likely to self-harm than those who identified as straight (45% vs. 17%).

Regionally, self-harm rates ranged from 21% in Fraser to 29% in the North, with the highest rate in the Northwest Health Service Delivery Area (34%).

“I’ve been struggling with self-harm and depressive episodes. I used to be an honour roll student, I’m now falling behind. I wish school could accommodate to me. I’m not ‘disabled’ enough to receive the help/assistance I need. I hate it, and am embarrassed of it.”

Grade 12 female

“I used to hurt myself a lot during 7th & 8th grade. I’m still struggling with it now and I don’t know what to do.”

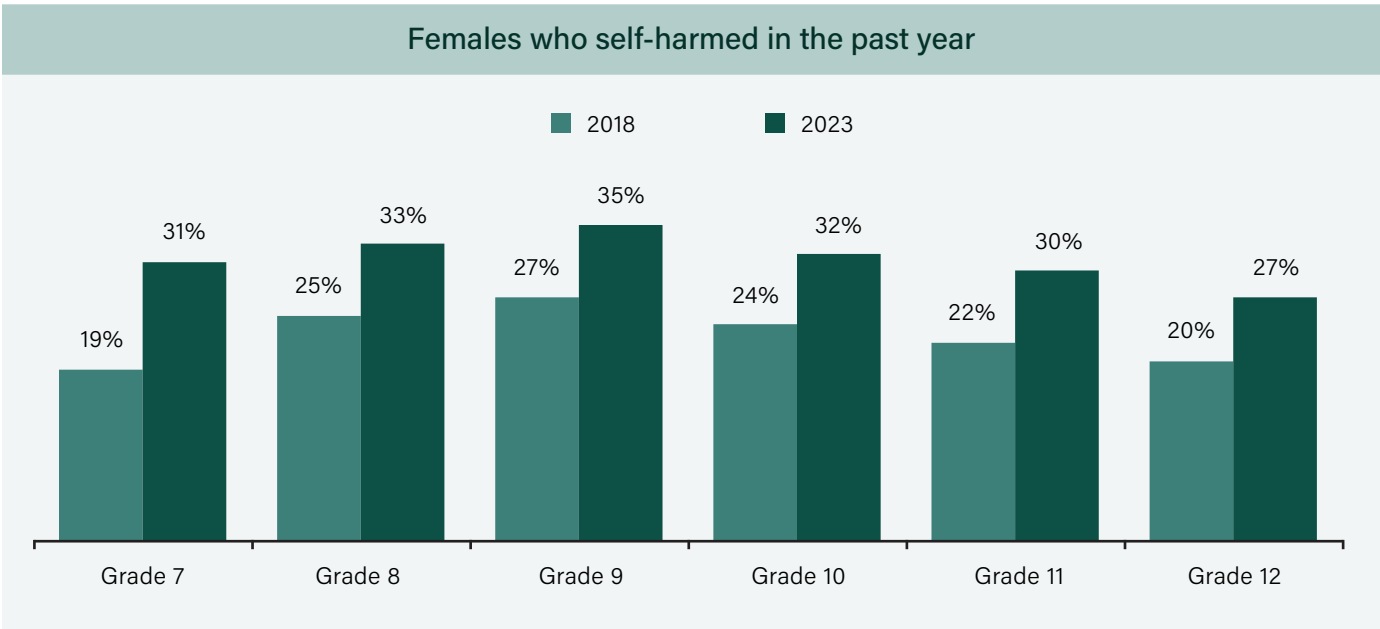
Grade 9 male

“I used to have an addiction to self-harm but I’m better now.”

Grade 7 female

“I cut myself whenever I feel like a disappointment, whether it’s because of my sport or school workload or the stress and anxiety I have.”

Grade 11 female

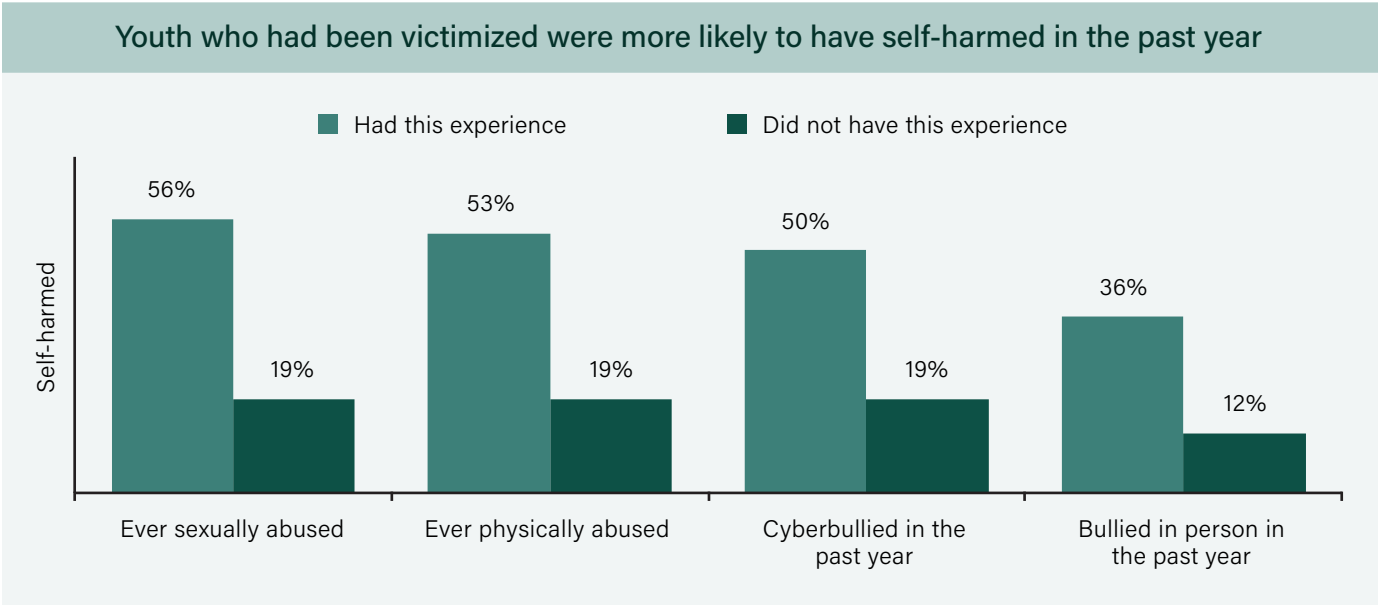


Note: Not all differences within 2018 and 2023 were statistically significant.

Youth at greater risk of self-harming

Some experiences in youth’s lives increased their likelihood of self-harming in the past year. These included:

- **Being victimized**—such as experiencing sexual abuse, physical abuse, cyberbullying, and being bullied by another youth at school or on the way to or from school.
 - **Relationship challenges and feeling disconnected from others.** For example, self-harm rates were higher among youth who:
 - Did not get along with those around them (48% self-harmed vs. 18% of youth who got along with others).
 - Had no close in-person friends (31% self-harmed vs. 23% with at least one such friend).
 - Usually felt lonely (50% self-harmed vs. 9% who never or hardly ever felt lonely).
 - **Experiencing bereavement.** Youth who had lost someone close to them were more likely to have self-harmed (26% vs. 18% of those who had not experienced bereavement).
 - **Reporting poorer mental health and well-being.** For example, self-harm rates were higher among youth who:
 - Did not feel good about themselves (53% self-harmed vs. 10% of youth who usually felt good about themselves).
 - Experienced extreme stress in the past month (55% self-harmed vs. 19% who did not experience this level of stress).
 - Managed their stress only fairly well or poorly (36% self-harmed vs. 14% who managed their stress well or very well; among those who experienced stress).
- “Many students can be pushed over the edge to self-harm or suicide due to the extreme levels of stress.”*
Grade 12 male
- **Engaging in nighttime social media use.** Among all youth, 27% who were on social media after their expected bedtime had self-harmed in the past year (vs. 18% of those not on social media at night). However, this association seemed to be driven by females (34% vs. 22%) and non-binary youth (58% vs. 49%), and was not significant for males.



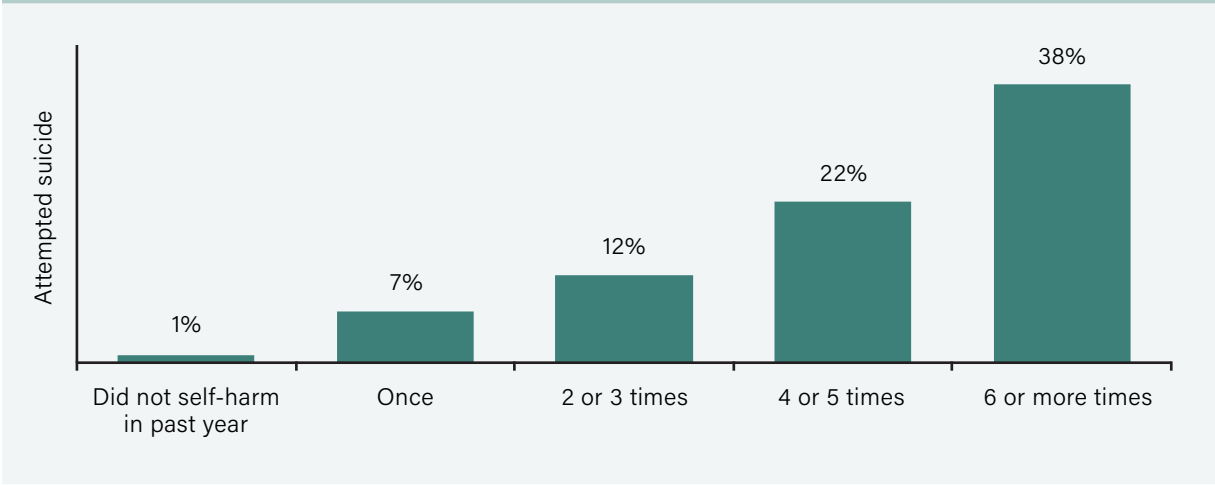
Self-harm and suicide attempts

Most youth who had self-harmed in the past year (81%) had not attempted suicide during that time. However, they were 19 times more likely than youth who had not self-harmed to have attempted suicide (19% vs. 1%). Also, the more times youth had self-harmed in the past year, the more likely they were to have attempted suicide during that time. This finding was similar for youth of all gender identities.

“[I would like to learn more about] how to not have the urge to hurt yourself or suicide. How to handle stress or overcome stress.”

Grade 8 female

The more frequently youth self-harmed in the past year, the more likely they were to have attempted suicide during that time



Self-harm other than cutting

“I struggle with finding ways to cope with my feelings of anxiety and depression. I often turn to various forms of self-harm to escape my mental pain.”

Grade 12 female

Over a quarter of youth (28%) reported engaging in deliberate self-harm other than cutting in the past year (51% of non-binary youth vs. 35% of females vs. 20% of males).

When each gender was considered separately, the most commonly reported self-harm method (other than cutting) for females and non-binary youth was starving themselves, while for males it was over-exercising or exercising with an injury. Males were generally the least likely to report each of the methods of self-harm. One exception was that males (and non-binary youth) were more likely than females to report purposely getting in a physical fight as a way of hurting or punishing themselves (5% vs. 3%).

Types of self-harm youth engaged in during the past year, other than cutting			
	Males	Females	Non-binary youth
Starved themselves	6%	27%	39%
Over-exercised or exercised with an injury	9%	12%	17%
Used alcohol or other substances	6%	13%	16%
Made medical situation worse	2%	6%	14%
Had unsafe sex	2%	3%	6%
Got in a physical fight	5%	3%	5%
Overdosed	1%	2%	5%
Overused laxatives	<1%	1%	3%
Drove recklessly	2%	2%	2%

Note: Youth could mark all that applied.

Supporting youth who have self-harmed

All findings in this section are among youth who self-harmed in the past year.

“[I would like to learn more about] self-harm because I am doing it & trying to find better coping skills.”

Grade 8 non-binary youth

“I struggle with self-harm and I don’t have resources that I can go to for help.”

Grade 8 female

Protective factors are assets associated with an increased likelihood of positive health and well-being, and a reduced likelihood of health risks, such as self-harm.

Given that the more times youth self-harmed the more likely they were to have attempted suicide, this section identifies supports and other protective factors among youth who had self-harmed that reduced their likelihood of self-harming multiple times. It also identifies protective factors associated with reduced distress and enhanced well-being among youth who self-harmed.

Supportive adults

“My parents do know [I’ve self-harmed] and I have stopped for a while because things have been improving.”

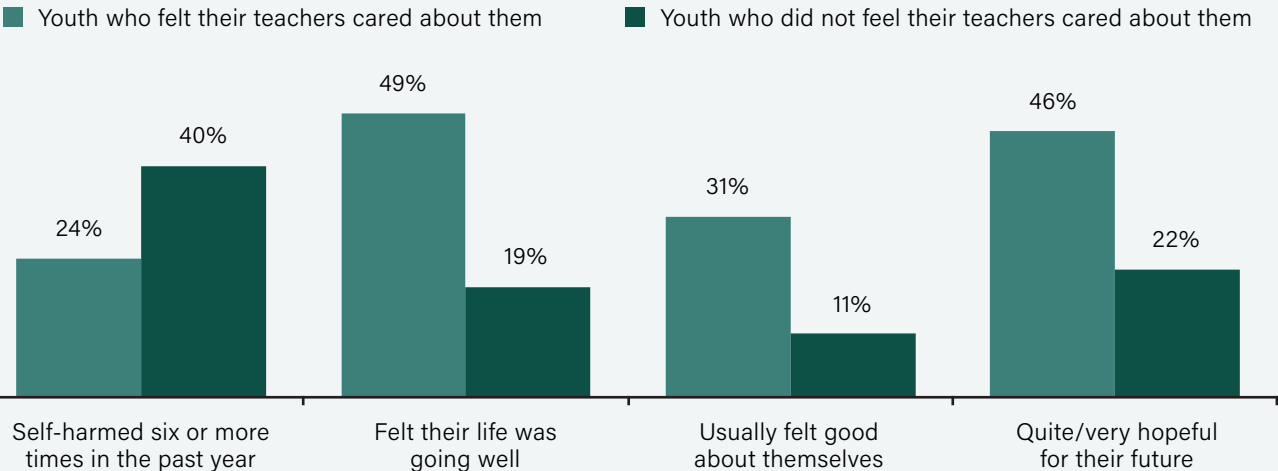
Grade 10 male

Among youth who self-harmed in the past year, those who had an adult they felt comfortable talking to if they had a serious problem were less likely than those who did not have such an adult to have self-harmed multiple times (68% vs. 77%), including six or more times (26% vs. 36%). They were also less likely to report emotional distress, such as loneliness (44% usually felt lonely vs. 65% of youth who did not have an adult they could turn to) and extreme stress in the past month (26% vs. 35%).

Youth with this type of adult support were also more likely to report positive health and well-being, including to feel quite or very hopeful for their future (41% vs. 23% of youth who did not have a supportive adult in their life).

Having supportive adults at home, school, and in the broader community were all protective among youth who self-harmed. For example, youth who felt an adult in their community really cared about them were less likely than those who did not feel this way to have self-harmed more than once in the past year (69% vs. 75%), and were more likely to usually feel good about themselves (24% vs. 15%) and to report having a good life (56% vs. 41%).

Youth who felt their teachers cared about them were less likely to self-harm multiple times and were more likely to report positive well-being (among those who self-harmed in the past year)



Peer relationships

"I can't stop hurting myself. My boyfriend is the only one there for me."

Grade 11 female

"I only have one true best friend that I tell everything about. Family, Anxiety, hurting myself, ups, downs, etc."

Grade 9 female

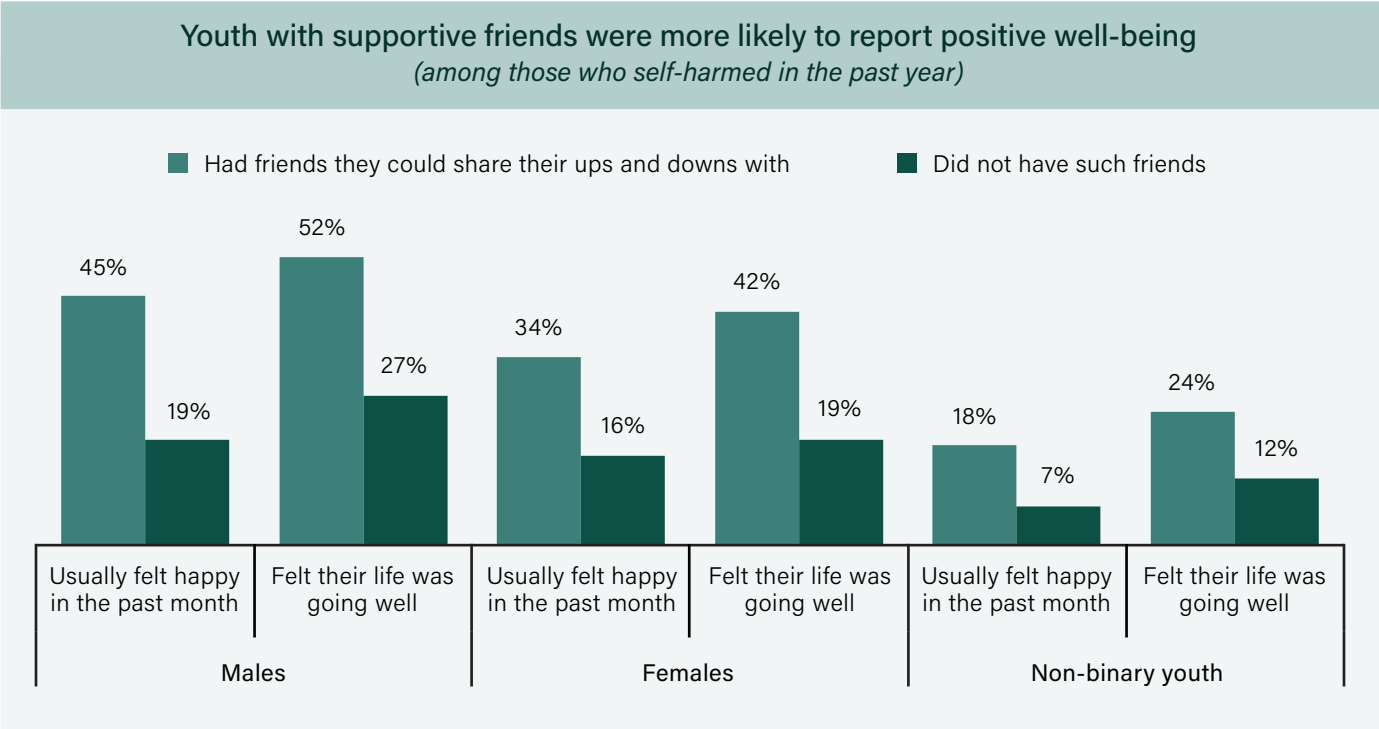
Spending enough time with friends was associated with positive health and well-being among youth who had self-harmed. For example, youth who felt they spent the right amount of time with friends were less likely than those who spent insufficient time with friends to have self-harmed on multiple occasions, including six or more times in the past 12 months (27% vs. 33%), and were more likely to report good or excellent mental health (29% vs. 16%) and to usually feel happy in the past month (35% vs. 21%).

Quality of friendships was also important, including having friends whom youth could share their ups and downs with. For example, youth with these types of friends were more likely than those without such friends to report good or excellent mental health (28% vs. 15%) and to feel they had a good life (58% vs. 38%).

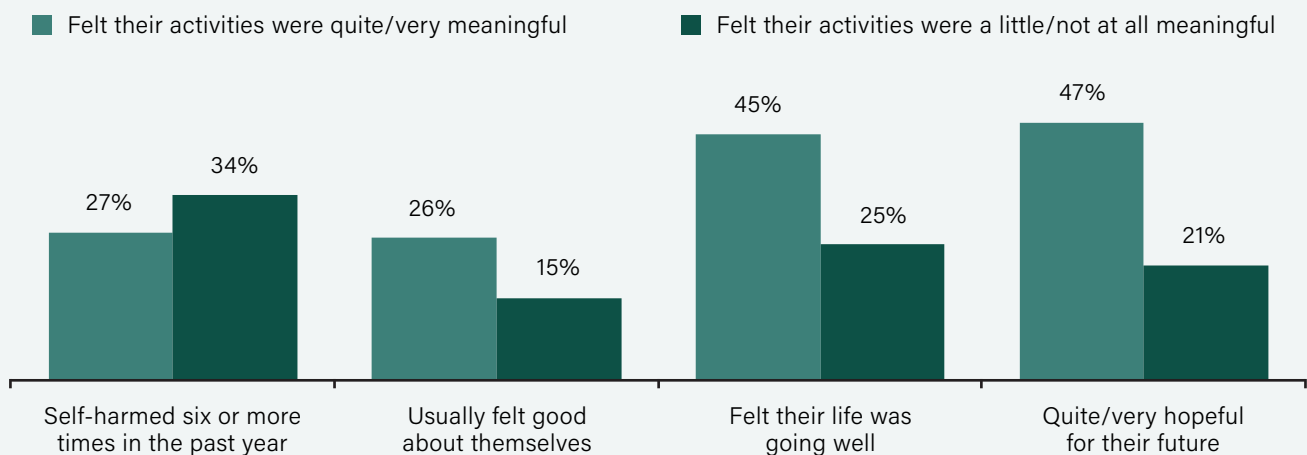
Involvement in activities

Youth who enjoyed taking part in physical activity and felt meaningfully engaged in their activities were less likely to have self-harmed multiple times and were more likely to report positive well-being. For example, youth who enjoyed being physically activity quite or very much were less likely than those who enjoyed it only a little or not at all to have self-harmed six or more times in the past year (26% vs. 38%). They were also at least twice as likely to report positive well-being, including feeling good about themselves (27% vs. 13% of youth who enjoyed physical activity only a little or not at all), that their life was going well (44% vs. 22%), and quite or very hopeful for their future (45% vs. 20%).

Similarly, taking part in activities that youth found meaningful was protective. These youth were less likely than those who did not feel their activities were meaningful to have self-harmed more than once in the past year (68% vs. 75%), and were more likely to report positive well-being.



Youth who felt their activities were meaningful were less likely to have self-harmed multiple times and more likely to report positive well-being (among those who self-harmed in the past year)



Contributing to the prevention of self-harm

The factors that were identified as protective among youth who self-harmed were also associated with a reduced likelihood of self-harming among youth who were at risk of doing so. For example, among youth who managed their stress only fairly well or poorly, those who had an adult they felt comfortable talking to if they had a serious problem were less likely to self-harm in the past year than those who did not have such an adult in their life (30% vs. 54%).

Among youth who usually felt lonely, those who were connected to activities they found quite or very meaningful were less likely to self-harm in the past year (47% vs. 55% of youth who felt their activities were only a little or not at all meaningful).

Similarly, among youth who had been bullied at school or on the way to or from school in the past year, having a supportive friend reduced their likelihood of self-harming during that time (32% self-harmed vs. 48% of youth without such a relationship), as did having an adult in the community who really cared about them (33% vs. 42%).

Conclusion

Consistent with past research, youth at greater risk of self-harming included those who had experienced victimization, relationship challenges, loneliness, loss, and poor mental health and well-being. Also, nighttime social media use appeared to be linked to self-harm for females and non-binary youth.

Self-harm might look different for youth of different gender identities. For example, overall females and non-binary youth were more likely than males to cut and deliberately hurt themselves, as well as to harm themselves in other ways such as by starving themselves and misusing medications. However, males were more likely than females to get into a physical fight as a way to hurt or punish themselves. These findings suggest that gender-specific approaches may be warranted when supporting youth who self-harm.

The more often youth had self-harmed in the past year, the more likely they were to have attempted suicide during that time. Protective factors were identified among youth who self-harmed which reduced their likelihood of self-harming multiple times in the past year. These included having a caring adult at home, school, and/or in the community; having supportive friends; being involved in physical activities they enjoyed; and taking part in activities which they found meaningful. These protective factors were also associated with reduced distress (e.g., loneliness, extreme stress) and enhanced well-being among youth who self-harmed. Further, these supports and connections appeared to contribute to preventing self-harm among youth at greater risk of self-harming. Findings highlight the importance of youth having access to supportive relationships, and opportunities to engage in activities they find meaningful.

Resources

Self-harm: What families need to know.

Podcast episode that covers reasons youth might self-harm and what caregivers can do to support their child. Collaboration between BC Children's Kelty Mental Health Resource Centre and FamilySmart: keltymentalhealth.ca/podcasts2e1

Calm Harm.

An app that helps to manage the urge to self-harm: calmharm.stem4.org.uk/

Canadian Mental Health Association.

Information about self-harm, including how to recognize it among others and how to support those who self-harm: bc.cmha.ca/documents/self-harm-2

Self-injury Outreach and Support (SiOS).

Information on self-harm, tools to cope, and guides to help others who self-harm: www.sioutreach.org

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