

Deliberated self-harm (DSH) is defined as any form of self-injurious behaviour. It is conscious targeted injury to him or herself, deliberate invasion of personal physical identity. Picture of self-harm is unconfined in accordance with form, quantity and measure of urgency. Self-harm can take a number of forms. The main methods of DSH are

cutting (knife, blade, nail, scissors);

scratching (nails).

taking overdoses of tablets or medicines,

punching oneself;

pulling out hair,

burning (cigarettes, lighter)

There are used various places on the body, where someone self-harm. It is forearm, arm, leg or hip most frequently, abdomen and face too.

We can group self-harm into impulsive and compulsive. Impulsive self-harm is episodic or recurrent behavior, which brings some sort of respite. Compulsive self-harm is urgent and recurrent ritual behaviour, which has a symbolic character.

Motives for DSH vary. Who self-harm often reports self-punishment, escape from a terrible state of mind and the desire to stop bad feelings.

DSH is very dangerous because of high risk of suicide, possible threat of life, possibility of „infection“, craving and very difficult pharmacological and psychotherapeutic suggestibility.

Rates of deliberate self-harm appear to be rising among young people. Self-harm is most common in children over the age of 11 and increases in frequency with age. Self-harm is more common amongst girls and young women than amongst boys and young men.

The tendency of this dissertation was to give an extended description of DSH enriched with concrete cases of children and teenagers. Attention is put to work with special diagnostic material too.