

# Self Harm

## Guidelines for staff within school and residential settings

Developed by the Adolescent Self Harm Forum  
(Oxfordshire)

Oxfordshire & Buckinghamshire   
Mental Health Partnership NHS Trust

Oxfordshire   
Primary Care Trust

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COUNTY COUNCIL**  
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Oxfordshire birth-18s  
Primary Child + Adolescent Mental Health Services

November 2007

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**Self Harm: Guidelines for staff within  
school and residential setting**

**November 2007**

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These guidelines were produced as the result of collaboration between Oxfordshire Education Department, Oxford Samaritans, Oxfordshire Mental Healthcare Trust and the Department of Social and Health Care. They were written by the Oxfordshire Adolescent Self Harm Steering Group. They are primarily intended for use in secondary schools and in residential settings and should be read in conjunction with the Local Safeguarding Children's Board (LSCB) guidelines 2006

The current Oxfordshire Adolescent Self Harm Steering Group would like to thank the original steering group members who developed the guidelines for school:

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## **Self harm**

### *guidelines for staff in school and residential settings*

*These guidelines have been produced in response to the interest and enthusiasm shown by teachers who took part in the survey undertaken by the Adolescent Self Harm Forum in June 2001 and a growing recognition of the needs of children in the residential sector. They are intended to help school and residential staff to support young people who harm themselves and to access appropriate services where needed.*

#### **What is self harm and how common is it?**

Self harm is any behaviour such as self-cutting, swallowing objects, taking an overdose, hanging or running in front of cars etc., where the intent is to deliberately cause self harm.

Some people who self harm have a strong desire to kill themselves. However, there are other factors which motivate people to self harm including a desire to escape an unbearable situation or intolerable emotional pain, to reduce tension, to express hostility, to induce guilt or to increase caring from others. Even if the intent to die is not high, self harming behaviour may express a powerful sense of despair and needs to be taken seriously. Moreover, some people who do not intend to kill themselves may do so, because they do not realise the seriousness of the method they have chosen or because they do not get help in time.

Over the last forty years there has been a large increase in the number of young people who deliberately harm themselves. A recent large community study in the UK found that in 15-16 year olds, approximately 6.9% of young people (3.2% males and 11.2% females) had self harmed in the last year. **See** Hawton et al. (2002) Deliberate self harm in adolescents: self report survey in schools in England. *BMJ*, 325, 1297-1211.

#### **What causes self harm?**

##### **Risk factors**

The following **risk factors**, particularly in combination, may make a young person vulnerable to self harm:

##### *Individual Factors*

- Depression/anxiety
- Poor communication skills
- Low self esteem
- Poor problem solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse

##### *Family factors*

- Unreasonable expectations  
Abuse (physical, sexual, emotional or neglect)
- Poor parental relationships and arguments
- Depression, deliberate self harm, suicide or other mental health difficulties in the family
- Drug/alcohol misuse in the family
- Domestic violence

### *Social factors*

- Difficulty in making relationships/ loneliness
- Persistent bullying or peer rejection
- Easy availability of drugs, medication or other methods of self harm

The pressures for some groups of young people and in some specific settings may increase the risk of self harm.

- Young people in residential settings (e.g. inpatient units, prison, sheltered housing or hostels or boarding schools)
- Young people with mental health difficulties

### **Triggers**

A number of factors may **trigger** the self harm incident.

- Family relationship difficulties (**the most common trigger for younger adolescents**)
- difficulties with peer relationships e.g. break up of relationship (**the most common trigger for older adolescents**)
- Bullying
- Significant trauma e.g. bereavement, abuse
- Self harm behaviour in other students (contagion effect)
- Identification with a peer group which promotes self harm
- Self harm portrayed or reported in the media
- Difficult times of the year (e.g. anniversaries)
- Trouble in school or with the police
- Feeling under pressure from families, school and peers to conform/achieve
- Exam pressure
- Times of change (e.g. parental separation/divorce)

### **Warning signs**

There may be changes in the **behaviour** of the young person which are associated with self harm or other serious emotional difficulties.

- Changes in eating/sleeping habits
- Increased isolation from friends/family
- Changes in activity and mood e.g. more aggressive than usual
- Lowering of academic grades
- Talking about self-harming or suicide
- Abusing drugs or alcohol
- Becoming socially withdrawn
- Expressing feelings of failure, uselessness or loss of hope
- Giving away possessions

### **Examples of self harming behaviour**

- Cutting
- Taking an overdose of tablets
- Swallowing hazardous materials or substances
- Burning – either physically or chemically
- Over/under medicating e.g. misuse of insulin
- Punching/hitting/bruising
- Hair pulling/skin picking/head banging
- Episodes of alcohol/drug/substance misuse or over/under eating can at times be acts of deliberate self harm

Self harm can be a transient behaviour in young people that is triggered by particular stresses and resolves fairly quickly, or it may be part of a longer term pattern of behaviour that is associated with more serious emotional/psychiatric difficulty. Where there are a number of underlying risk factors present, the risk of further self harm is greater.

N.B. Some young people get caught up in mild repetitive self harm such as scratching, which is often done in a peer group. In this case it may be helpful to take a low key approach, avoiding escalation, although at the same time being vigilant for signs of more serious self harm.

### What keeps self harm going?

Once self harm (particularly cutting) is established, it may be difficult to stop. Self harm can have a number of functions for the student and it becomes a way of coping.

Examples of functions include:

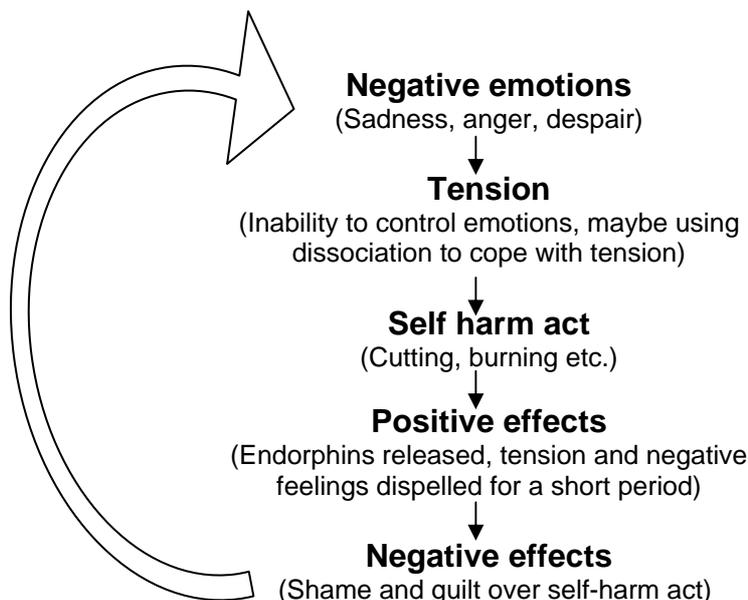
- Reduction in tension (safety valve)
- Distraction from problems
- Form of escape
- Outlet for anger and rage
- Opportunity to feel
- Way of punishing self or others
- Way of taking control
- Care-eliciting behaviour
- A means of getting identity with a peer group
- Non-verbal communication (e.g. of abusive situation)
- It can also be a suicidal act

### The cycle of self harm/cutting

When a person inflicts pain upon himself or herself the body responds by producing endorphins, a natural pain reliever that gives temporary relief or a feeling of peace.

The addictive nature of this feeling can make self harm difficult to stop.

Young people who self harm still feel pain, but some say the physical pain is easier to stand than the emotional/mental pain that led to the self harm initially.



## Coping strategies

### 1. Using support networks

It is helpful to identify the support people in a young person's life and how to get in touch with them. Examples are friends, family, school teacher, counsellor. Knowing how to access a crisis line is also important.

"My safety net" (see appendix A) can be a useful way of recording the support people in a young person's life.

### 2. Distraction activities

Replacing the cutting or other self harm with other safer activities can be a positive way of coping with the tension. What works depends on the reasons behind the self harm. Activities that involve the emotions intensely can be helpful.

Examples of distraction methods:

- Contacting a friend or family member
- Going for a walk/run or other forms of physical exercise
- Getting out of the house and going to a public place e.g. a cinema
- Reading a book
- Keeping a diary
- Looking after an animal
- Watching TV
- Listening to music

### 3. Coping with distress using self soothing

- Using stress management techniques such as relaxation
- Having a bubble bath
- Stroking a cat or other animal
- Going to the park and looking at the things around you (birds, flowers, trees)
- Listening to the sounds as you walk
- Listening to soothing music

### 4. Discharging unpleasant emotions in other ways

Sometimes it can be helpful to find other ways of discharging emotion which is less harmful than self harm:

- Clenching ice cubes in the hand until they melt – this can relieve some tension
- Writing, drawing and talking about feelings
- Writing a letter expressing feelings, which need not be sent
- Going into a field and screaming
- Hitting a pillow /soft object
- Listening to loud music
- Physical exercise can be a good way to discharge emotion

*In the longer term* a young person may need to develop ways of understanding and dealing with the underlying emotions and beliefs. Regular counselling/therapy may be helpful. Family support is likely to be an important part of this.

It may also help if the young person joins a group activity such as a youth club, a keep fit class or a school based club, that will provide opportunities for them to develop

friendships and feel better about themselves. Learning stress management techniques, ways to keep safe and how to relax may also be useful.

## Reactions of staff

Staff may experience a range of feelings in response to self harm in a young person (e.g. anger, sadness, shock, disbelief, guilt, helplessness, disgust or rejection). It is important for all work colleagues to have an opportunity to discuss the impact that self harm has on them personally. The type and nature of the forums where these issues are discussed may vary between settings.

In schools young people may present with injuries to first aid or reception staff. It is important that these frontline staff are aware that an injury may be self inflicted, and that they pass on any concerns. Within residential settings, young people may present to a range of staff, including key workers, domestic staff, admin staff or cooks.

## The urge to escape difficulties

For some young people, self harm may express the strong desire to escape from a conflict or unhappiness at home and to live elsewhere. Injuring oneself can achieve a temporary respite if it entails a hospital admission or a short break at the home of a friend or relative. The young person may request admission to foster care or a residential home and parents may doubt their ability to cope at this stage. Entering care carries with it many long-term disadvantages and increased vulnerability for the young person. It is far preferable to try to support the young person and family members in finding a resolution to their difficulties than to separate them further.

For those who are already in care, self harm may still be an expression of a desire to escape from their situation, for example, leaving the home. As before, it is important to support the young person, understand the nature of their difficulties and help them to find a way of resolving them.

If you believe that a young person would be at serious risk of abuse in returning home or in remaining in their residential setting, you should consult a Social Worker for advice.

## How to help

### Within Schools

#### 1. First line help

- When you recognise signs of distress, try to find ways of talking with the young person about how they are feeling.
- Build up a full picture of the young person's life by talking to their form tutor, year head, and any adults who come into contact with them. Find out their particular strengths and vulnerabilities.
- What appears to be important for many young people is having someone to talk to, who *listens properly* and does not judge. This person may be a mentor, counsellor, youth worker, school health nurse, teacher, personal connexions adviser, special educational needs co-ordinator, behaviour support teacher, educational social worker, educational psychologist etc.
- It is important that all attempts of suicide or deliberate self-harm are taken seriously. All mention of suicidal thoughts should be noticed and the young person listened to carefully.

- If you find a young person who has self harmed (e.g. overdose, self-cut etc.) try to keep calm, give reassurance and follow the first aid guidelines as directed by school policy. In the case of an overdose of tablets (however small) advice must be obtained from a medical practitioner (GP or Accident and Emergency Department).
- Take a non-judgemental attitude towards the young person. Try to reassure them that you understand that the self-harm is helping them to cope at the moment and you want to help them, and explain that you need to tell someone. Try to work out together who is the best person to tell (see paragraph on confidentiality).
- Discuss with the young person the importance of letting parents know and any fears they have about this.
- Contact parents (unless there are particular reasons why they should not be contacted) and discuss the school's concern. Give parents the parents' fact sheet (Appendix E) and help the parents to understand the self harm, so that they can be supportive to the young person.
- Suggest to the parents a referral to PCAMHS, or an appointment with the GP if there are serious medical issues. Ask for feedback from the parent so that the school can work with the young person.
- Social Work colleagues in the Children, Young People and Families Assessment Team (previously Social Services) should be informed if what the young person says or does raises child protection concerns. Follow the LSCB Guidelines, 2006. Document any conversations you have had with the social worker. Record who you spoke to, the time, date and any advice they have given you to follow. Self harm itself can be considered a child protection issue either if it is serious or if parents are not addressing it adequately.
- If your contact with the young person reveals that their future health and development are at serious risk then consult with the Children, Young People and Families Directorate.
- To make a social work referral to the Assessment Team, Children, Young People and Families Directorate, use the form developed by this Department to document your knowledge/observations of the young person and their family and send/fax it to the young person's local Child and Families Assessment team. Copies of this form should be held in your school or are available from the Children, Young People and Families Directorate. You should inform the young person and parent(s) if you are making a social work referral, unless it would compromise someone's safety to do so.
- If other agencies are already involved with the young person then it may be important to liaise with these agencies and work together.
- Follow up the parents' meeting with a letter indicating your concern (Sample Appendix B).
- Have crisis telephone numbers available and easily accessible to young people.
- Follow the school policy of informing the senior management /leadership team of your concerns.
- Record any incident (Sample Appendix C).
- Seek support for yourself if necessary.
- Advice can be obtained from the PCAMHS telephone consultation service (see Appendix G).

## 2. Longer term support of a young person who self harms

It may be appropriate to provide more ongoing support within school for a young person who is self harming. It is important that those who undertake this role feel able to do so and are fully supported by management.

### Within residential setting

#### 1. First line help

- When you recognise signs of distress, try to find ways of talking with the young person about how they are feeling.
- Build up a full picture of the young person's life on admission to the home, by looking at the care plan and essential information, talking to their social worker, parents and any adults who come into contact with them. Find out their particular strengths and vulnerabilities and complete a risk assessment. Complete the Mental Health Screening Questionnaire (MAYSI).
- What appears to be important for many young people is having someone to talk to, who *listens properly* and does not judge. This person may be their key worker, social worker, counsellor, youth worker, school health nurse, teacher, personal connexions adviser, special educational needs co-ordinator, behaviour support teacher, educational social worker, educational psychologist, outreach worker etc.
- It is important that all attempts of suicide or deliberate self-harm are taken seriously. All mention of suicidal thoughts should be noticed and the young person listened to carefully.
- Any mention of suicidal thoughts or intentions should be recorded and shared with the senior member of staff on duty.
- If you find a young person who has self harmed (e.g. overdose, self-cut etc.) try to keep calm, give reassurance and follow the first aid guidelines or, where previously agreed, encourage the young person to administer their own first aid with appropriate support. In the case of an overdose of tablets (however small) advice must be obtained from a medical practitioner (GP or Accident and Emergency Department).
- Take a non-judgemental attitude towards the young person. Try to reassure them that you understand that the self-harm is helping them to cope at the moment and you want to help them, and explain that you need to share this with the Senior Manager on duty.
- Discuss with the young person the importance of letting parents or social worker know, where relevant, and any fears they have about this. This may depend on their legal status.
- Contact the social worker and parents (unless there are particular reasons why parents should not be contacted) and discuss the concern of the residential unit. Give parents the parents' fact sheet (Appendix E) and help parents understand the self harm so that they can be supportive to the young person.
- Make a referral to PCAMHS or to the GP if there are serious concerns about physical or mental health. If the young person refuses to go to the GP surgery, it may be possible to arrange for a home visit in serious circumstances.
- **During working hours**, consultation can be obtained through the Attach team or through PCAMHS telephone consultation service. If the patient is already known to Specialist CAMHS, then the care coordinator should be contacted.

- **Outside working hours**, if the young person is in a serious medical condition, the ambulance should be called as a matter of urgency. The senior manager should be contacted as soon as possible. If the young person has self harmed but is in a stable condition, the senior manager should be contacted to discuss a plan of action, including assessment by the GP. Parents should be informed. The Social worker and care coordinator, if relevant, should be informed the next day.
- The young person's Social Worker and the Assessment Team within Children, Young People and Families Directorate (previously Social Services) should be informed if what the young person says or does raises child protection concerns. Follow the LSCB Guidelines, 2006. Document any conversations you have had with the social worker. Record who you spoke to, the time, date and any advice they have given you to follow. Self harm itself can be considered a child protection issue either if it is serious or if parents/carers are not addressing it adequately.
- If other agencies/professionals are already involved with the young person then it will be important to liaise with these agencies and work together.
- Have crisis telephone numbers, e.g. Samaritans, Young minds, available and easily accessible to young people.
- Record any incident.
- Seek support for yourself if necessary.

## **2. Longer term support of a young person who self harms**

It is important to understand the reasons behind the self harm and support the young person in keeping safe. Key workers should work with the young person to build up self esteem, develop problem solving skills and encourage strategies to cope with difficult feelings. If the young person is involved with CAMHS they should support attendance at appointments and encourage them to make use of the support offered.

## **Understanding the self harm**

It may be helpful to explore with the young person what led to the self harm - the feelings, thoughts and behaviour involved. This can help the young person make sense of the self harm and develop alternative ways of coping.

## **Confidentiality**

Confidentiality is a key concern for young people and they need to know that it may not be possible for their support member of staff or residential worker to offer complete confidentiality. If you consider that a young person is at serious risk of harming him/her self or others then confidentiality cannot be kept. It is important not to make promises of confidentiality that you cannot keep, even though the young person may put pressure on you to do so. If this is explained at the outset of any meeting the young person can make an informed decision as to how much information they wish to divulge.

## **Strategies to help in school or residential settings**

- Arrange a mutually convenient time and place to meet
- At the start of the meeting set a time limit
- Make sure the young person understands the limits of your confidentiality
- Encourage them to talk about what has led them to self harm
- Remember that listening is a vital part of this process

- Support the young person in beginning to take steps to keep him/herself safe and reduce the self-injury (if they wish to) e.g.
  - remove washing implements used to cut
  - avoid alcohol if they feel they are likely to self-injure
  - take better care of injuries (the school health nurse or first aider may be helpful here)
- Help them to learn how to express their feelings in other ways e.g. talking, writing, drawing or using safer alternatives (as described earlier)
- Help them to build up self esteem
- Help them to find their own way of managing their problems e.g.
  - if they say they dislike themselves, begin working on what they say they do like
  - If life at home is impossible, begin working on how to talk to parents/carers
- Help them identify their own support network (Sample, Appendix D)
- Offer information about support agencies; remember some internet sites may contain inappropriate information

## Further considerations

- Record any meeting with a young person; include an agreed action plan including dates, times and any concerns you have. Document who else has been informed of any information.
- It is important to encourage young people to let you know if one of their group is in trouble, upset or shows signs of harming. Friends can worry about betraying confidence, so they need to know self harm can be dangerous to life, and by seeking help and advice for their friend they are taking a responsible action.
- It can happen that two or more young people may self harm simultaneously. It is important that each case is looked at individually in terms of levels of risk and need in the first instance. It is of course important at a later stage to consider what it was within the group dynamic that led to this situation and how best it could be managed in the future. (see Issues regarding contagion).
- The peer group of a young person who self harms may value the opportunity to talk to an adult, either individually or in a small group.

## Response of supportive members of staff

For those who are supporting young people who self harm, it is important to be clear with each individual how often and for how long you are going to see them (i.e. the boundaries need to be clear). It can be easy to get caught up into providing too much, because of one's own anxiety. However, the young person needs to learn to take responsibility for their self harm.

If you find the self harm upsets you, it may be helpful to be honest with the young person. You need to be clear that you can deal with your own feelings and try to avoid the young person feeling blamed. They probably already feel low in mood and have a poor self-image; your anger/upset may add to their negative feelings. However, your feelings matter too. You will need the support of your colleagues and management, if you are to listen effectively to young peoples' difficulties.

## **Issues regarding contagion**

When a young person is self harming it is important to be vigilant in case close contacts of this individual are also self harming.

Occasionally schools or residential settings may discover that a number of students in the same peer group are harming themselves. Self harm can become an acceptable way of dealing with stress within a peer group and may increase peer identity. This can cause considerable anxiety in school staff, parents and carers, as well as in other young people.

Each individual may have different reasons for self harming and should be given the opportunity for one to one support; however, it may also be helpful to discuss the matter openly with the group of young people involved. In general it is not advisable to offer regular group support for young people who self harm.

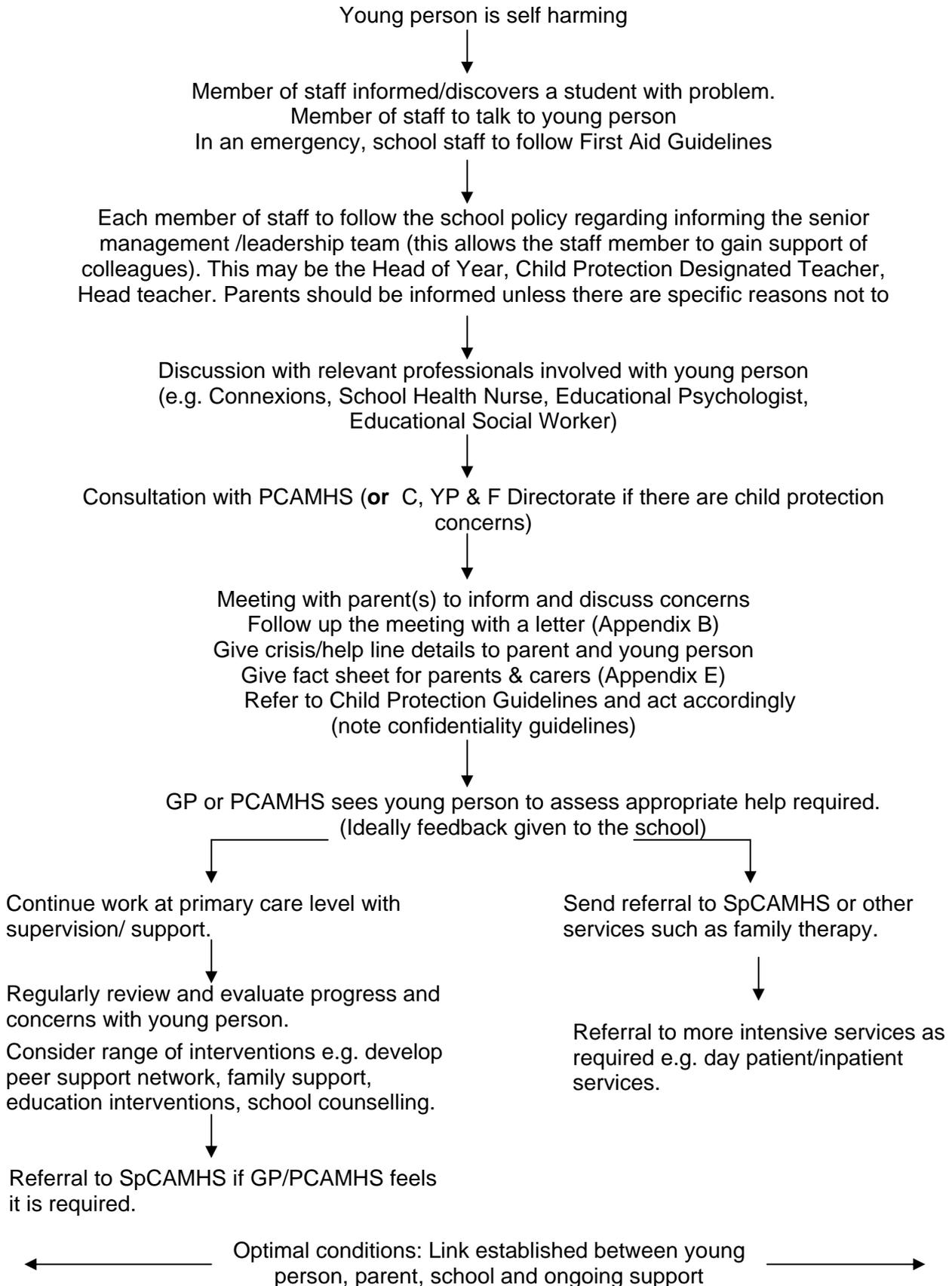
## **Support/training aspects for staff**

Staff giving support to young people who self harm may experience all sorts of reactions to this behaviour in young people (e.g. anger, helplessness, rejection); it is helpful for staff to have an opportunity to talk this through with work colleagues or senior management.

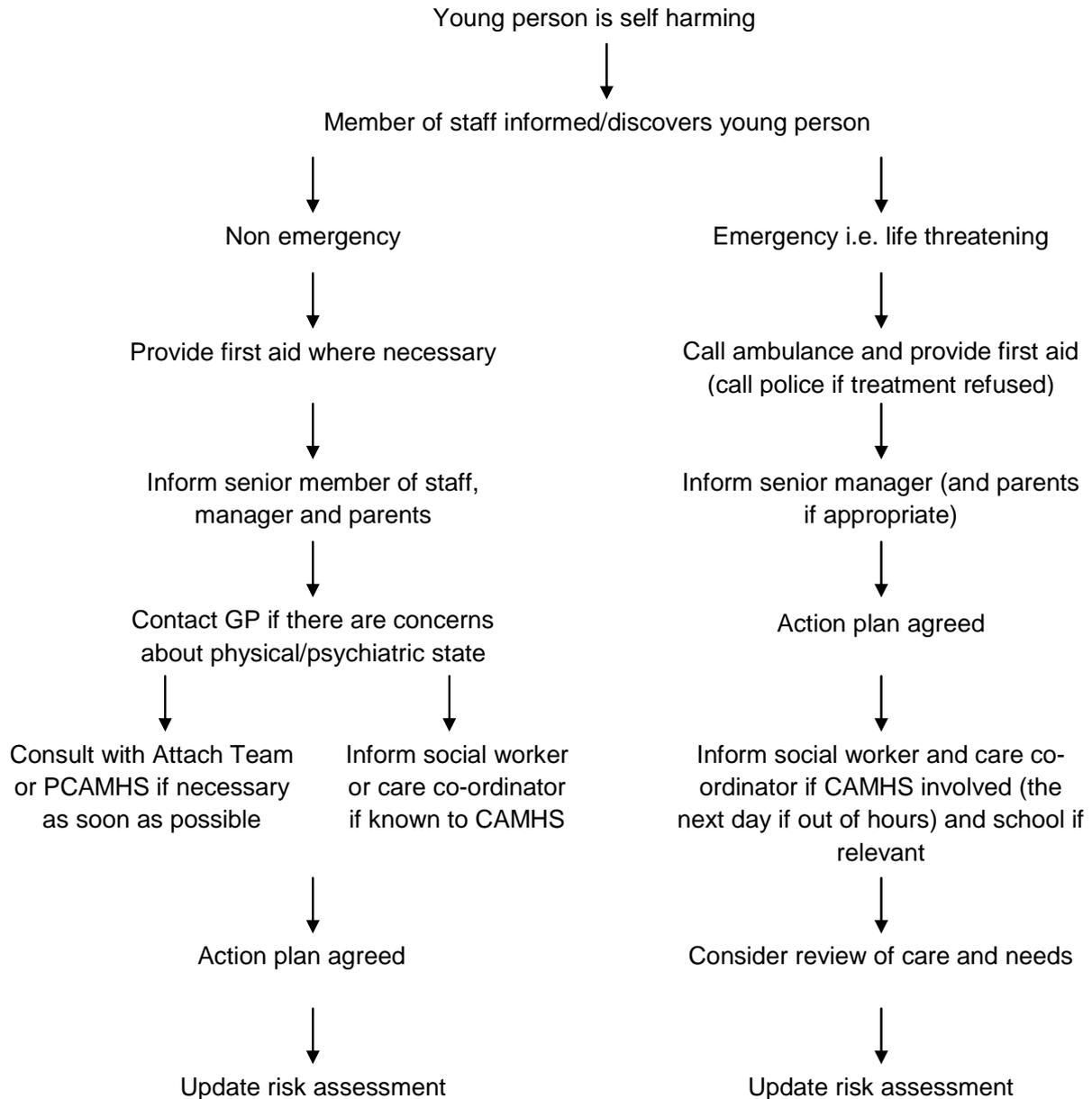
Staff taking this role should take the opportunity to attend training days on self harm or obtain relevant literature. Liaison with the local Primary Care CAMHS (PCAMHS) or specialist child and adolescent mental health team (SpCAMHS) may be helpful or attendance at the Adolescent Self Harm Forum where peer networks and support can be established.

## Helping young people who self harm

### 1. Flow chart for young people in schools



## 2. Flow chart for young people within residential settings



### General aspects of prevention of self harm

An important part of prevention of self harm is having a supportive environment in the school or residential setting which is focused on building self esteem and encouraging healthy peer relationships. An effective anti-bullying policy and a means of identifying and supporting young people with emotional difficulties is an important aspect of this.

A check list of procedures and practices that can help manage and prevent self harm is to be found in Appendix A.

## Appendix A

### Checklist for schools:

#### Supporting the development of effective practice

##### School policy

The school has a policy or protocol for supporting students who are or are at risk of self-harming. The school governors have approved this.

The Oxfordshire Self-harm Guidelines have been approved by the school governors.

##### Training

ALL new members of staff receive an induction on child protection procedures and setting boundaries around confidentiality.

ALL members of staff receive regular training on child protection procedures

The following staff groups- reception staff, first aid staff, technicians and lunchtime supervisors receive sufficient training and preparation for their roles.

Staff members with pastoral roles (Heads of Year, designated teacher for child protection, etc) have access to training in identifying and supporting students who self-harm

##### Communication

The school has clear open channels of communication that allow information to be passed up, down and across the system

All members of staff know to whom they can go if they discover a young person who is self-harming

The senior management team are fully aware of the contact that reception, first aid staff, technicians and lunchtime supervisors have with young people and the types of issues they may come across

Time is made available to listen to and support the concerns of staff on a regular basis

##### Support for staff/students

Staff know the different agency professionals who visit the school i.e. School Counsellors, Connexions Personal Advisers, etc

Male members of staff are supported in considering their responses to girls whom they notice are self-harming

Staff know how to access support for themselves and students  
Students know to whom they can go for help

##### School ethos

The school has a culture that encourages young people to talk, adults to listen and believe

## Appendix B

### Sample of letter to parents of students at school

Date

Dear (Parent/Carer)

Thank you for coming to school to discuss.....

After our recent meeting I am writing to express concern about .....’s safety and welfare. The recent incident of self harm (or threat to self harm) by ..... suggests that he/she may need professional help.

I recommend that you visit your local GP for advice and help and/or as agreed, we have sent a referral to PCAMHS.

We will continue to provide support within the school community but would appreciate any information that you feel would help us to do this as effectively as possible.

If there is anything else we can do to help ..... please contact me.

Yours sincerely,

Title

Copies to:

## Appendix C

### Sample of an incident form to be used when a young person self harms at school

School /College		Date of report	
Staff member		Position	
Young person's name			
Age	Gender	Year	Special needs
Incident			
Date and time of occurrence			
Action taken by school personnel			
Decision made with respect to contacting parents (and reasons for decision)			
Recommendations			
Follow up			
Copies to:			

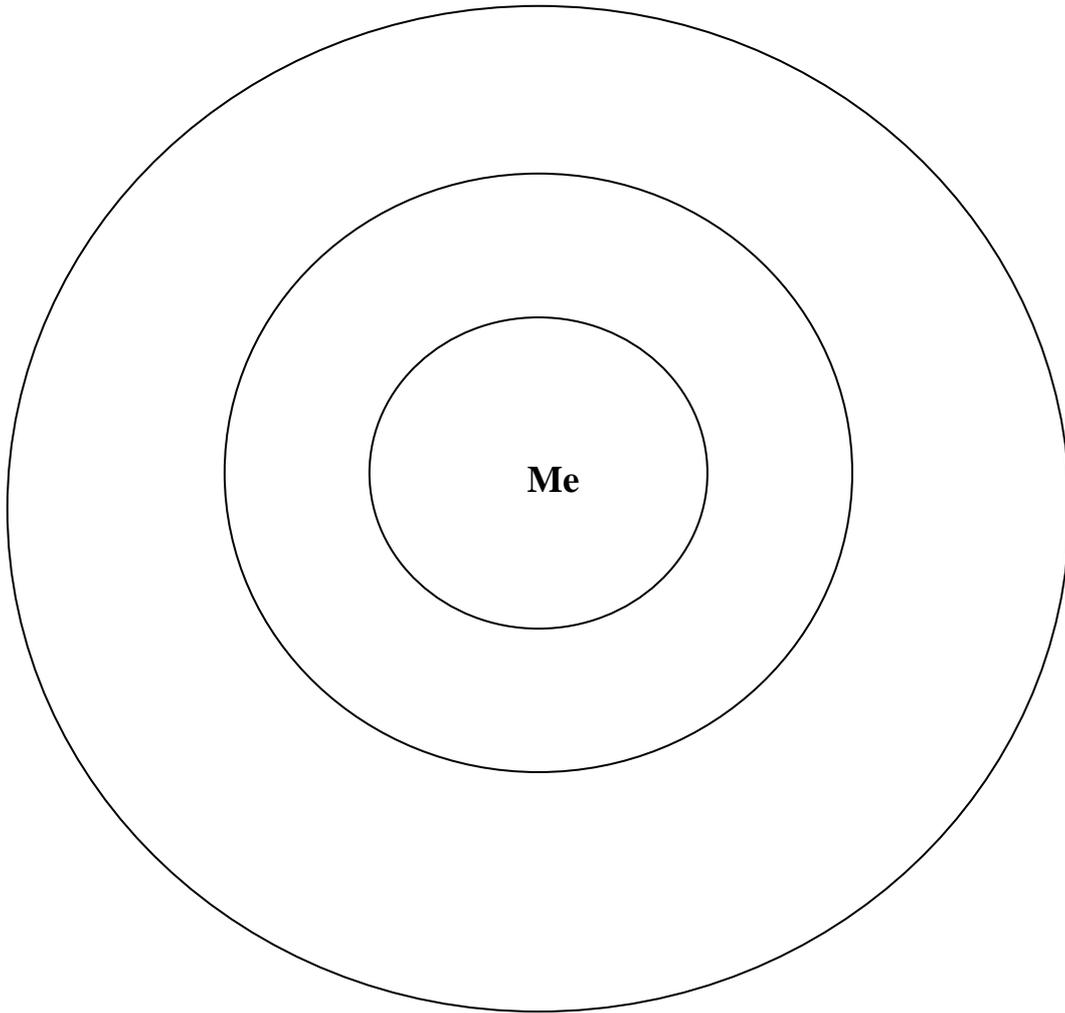
## Appendix D

### My Safety Net

There are different types of people in our lives; try to identify some people in each of the groups below that you would feel comfortable talking to:

1. Family and close friends
2. Friends and people you see every day
3. Help lines and professional people you could go to for help

Also, write into the space below the safety net the things that you can do yourself to cope with difficult feelings and keep yourself safe.



**Things I can do myself to cope with difficult feelings:**

## **Appendix E**

### **Fact sheet for parents /carers on self harm**

It can be difficult to find out that someone you care about is harming him or her self. As a parent / carer you may feel angry, shocked, guilty and upset. These reactions are normal, but what the person you care about really needs, is support from you. They need you to stay calm and to listen to them. The reason someone self harms is to help them cope with very difficult feelings that build up and which they cannot express. They need to find a less harmful way of coping.

#### ***What is self harm?***

Self harm is any behaviour such as self-cutting, swallowing objects, taking an overdose, hanging or running in front of cars etc. where the intent is to deliberately cause harm to self.

#### ***How common is self harm?***

Over the last forty years there has been a large increase in the number of young people who harm themselves. A recent large community study found that in 15-16 year olds, approximately 6.9% of young people had self harmed in the previous year.

#### ***Is it just attention seeking?***

Some people who self harm have a desire to kill themselves. However, there are many other factors which lead people to self harm, including a desire to escape, to reduce tension, to express hostility, to make someone feel guilty or to increase caring from others. Even if the young person does not intend to commit suicide, self harming behaviour may express a strong sense of despair and needs to be taken seriously. It is not just attention seeking behaviour.

#### ***Why do young people harm themselves?***

All sorts of upsetting events can trigger self harm. Examples are: arguments with family, break up of a relationship, failure in exams or bullying at school. Sometimes several stresses occur over a short period of time and one more incident can be the final straw. Young people who have emotional or behavioural problems or low self-esteem can be particularly at risk from self harm. Suffering a bereavement or serious rejection can also increase the risk. Sometimes young people try to escape their problems by taking drugs or alcohol. This only makes the situation worse. For some people self harm is a desperate attempt to show others that something is wrong in their lives.

#### ***What can you do to help?***

- Keep an open mind
- Make the time to listen
- Help them find different ways of coping
- Go with them to get the right kind of help as quickly as possible

Some people you can contact for help, advice and support are:

- Your family doctor
- Young Minds Parents Information Service. Tel: 08000 182138
- The Samaritans. Tel: 08457 90 90 90
- MIND Infoline. Tel: 020 8522 1728 (Self help books also available)
- Youth Access. Tel: 0208 772 9900
- School Health Nurse
- Health Visitor

Information leaflet available through: [www.nch.org.uk/selfharm](http://www.nch.org.uk/selfharm)

## Appendix F

### Fact sheet for young people on self harm

#### ***What is self harm?***

Self harm is where someone does something to deliberately hurt him or herself. This may include: cutting parts of their body, burning, hitting or taking an overdose.

#### ***How many young people self harm?***

A recent large study in the UK found that about 7% (i.e. 7 people out of every 100) of 15-16 year olds had self harmed in the last year.

#### ***Why do young people self harm?***

Self harm is often a way of trying to cope with painful and confusing feelings. Difficult things that people who self harm talk about include:

- Feeling sad or feeling worried
- Not feeling very good or confident about themselves
- Being hurt by others: physically, sexually or emotionally
- Feeling under a lot of pressure at school or at home
- Losing someone close; this could include someone dying or leaving

When difficult or stressful things happen in someone's life, it can trigger self harm. Upsetting events that might lead to self harm include:

- Arguments with family or friends
- Break-up of a relationship
- Failing (or thinking you are going to fail) exams
- Being bullied

Often these things build up until the young person feels they cannot cope anymore. Self harm can be a way of trying to deal with or escaping from these difficult feelings. It can also be a way of showing other people that something is wrong in their lives.

#### ***How can you cope with self harm?***

Replacing the self harm with other safer coping strategies can be a positive and more helpful way of dealing with difficult things in your life.

Helpful strategies can include:

- Finding someone to talk to about your feelings (this could be a friend or family member)
- Talking to someone on the phone (you might want to ring a help line)
- Sometimes it can be hard to talk about feelings; writing and drawing about your feelings may help.
- Scribbling on and/or ripping up paper
- Listening to music
- Going for a walk, run or other kinds of exercise
- Getting out of the house and going somewhere where there are other people
- Keeping a diary
- Having a bath/using relaxing oils e.g. lavender
- Hitting a pillow or other soft object
- Watching a favourite film

### **Getting help**

In the longer term it is important that the young person can learn to understand and deal with the causes of the stress that they feel. The support of someone who understands and will listen to you can be very helpful in facing difficult feelings.

- **At home** - parents, brother/sister or another trusted family member
- **In school** - school counsellor, school nurse, teacher, teaching assistant or other member of staff
- **GP** – you can talk to your GP about your difficulties and he/she can make a referral for counselling
- **Help lines**
  - Young Minds. Tel: 0800 0182 138  
[youngminds@org.uk](mailto:youngminds@org.uk)
  - The Samaritans. Tel: 08457 90 90 90  
[jo@samaritans.org.uk](mailto:jo@samaritans.org.uk)
  - MIND Infoline. Tel: 020 8522 1728 (Self help books also available)
  - Youth Access. Tel: 0208 772 9900
- Information leaflet available through: [www.nch.org.uk/selfharm](http://www.nch.org.uk/selfharm)
- Another useful address is
  - National Self Harm Network
  - PO Box 16190
  - London NW1 3WW
  - [www.nshn.co.uk](http://www.nshn.co.uk)

### **My friend has a problem - How can I help?**

- You can really help by just being there, listening and giving support.
- Be open and honest. If you are worried about your friend's safety, you should tell an adult. Let your friend know that you are going to do this and you are doing it because you care about him/her.
- Encourage your friend to get help. You can go with them or tell someone they want to know.
- Get information from telephone help lines, website, library etc. This can help you understand what your friend is experiencing.
- Your friendship may be changed by the problem. You may feel bad that you can't help your friend enough or guilty if you have had to tell other people. These feelings are common and don't mean that you have done something wrong/not done enough.
- Your friend may get angry with you or say you don't understand. It is important to try not to take this personally. Often when people are feeling bad about themselves they get angry with the people they are closest to.
- It can be difficult to look after someone who is having difficulties. It is important for you to find an adult to talk to, who can support you. You may not always be able to be there for your friend and that's OK.

## Appendix G

### Useful contacts

PCAMHS Consultation (for professionals) Monday - Friday 9am - 5pm	Tel: 01865 845760
Young MINDS Monday and Friday 10am - 1pm Tuesday - Thursday 1pm - 4pm	Tel: 0800 018 2138 Youngminds@Ukonline.co.uk
Young MINDS Parents Information Service	Tel: 0800 018 2138
Bristol Crisis Service for Women Friday and Saturday 9pm - 2:30am Sunday 6pm - 9pm	National helpline 0117 925 1119
Samaritans	24 hour helpline 08457 90 90 90
Childline	24 hr helpline 0800 1111
CALM(Campaign Against Living Miserably) 7 days a week 5pm - 3am	Helpline for 15 - 24 year old males 0800 58 58 58

#### Web sites

NCH - useful web site for information on self harm

[www.nch.org.uk/selfharm](http://www.nch.org.uk/selfharm)

The Young People and Self-Harm Information Resource Website

[www.ncb.org.uk/selfharm](http://www.ncb.org.uk/selfharm)

Self-Injury and Related Issues (SIARI)

[www.siari.co.uk](http://www.siari.co.uk)

National Self-Harm Network

PO BOX 16190

London NW1 3WW

[www.nshn.co.uk](http://www.nshn.co.uk)

#### Useful references

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Hawton, K. (2006) By their own young hand. Deliberate self harm and suicidal ideas in adolescents. Jessica Kingsley Press.

Schmidt, U and Davidson, K. (2000) Life after self harm: A guide to the future. Hove: Brunner-Routledge.