



**Self Harm  
Guidance for Carers and Workers in Buckinghamshire  
November 2010**

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These guidelines are primarily intended for use by Professional carers/workers within Buckinghamshire and should be read in conjunction with the Buckinghamshire Safeguarding Children's Board (BSCB) procedures.

These guidelines are based on the Self Harm Guidelines for Staff within School and Residential Settings developed by the Oxfordshire Adolescent Self Harm Forum Steering Group (with representatives from OBMH, Oxfordshire PCT, Oxfordshire County Council, Oxfordshire PCAMHS, Oxfordshire Samaritans and Oxford University Centre for Suicide Research).

## Self harm guidelines

These guidelines are intended to help carers and workers to support young people up to the age of 18 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?

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

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

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.

## 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.

### What keeps self harm going?

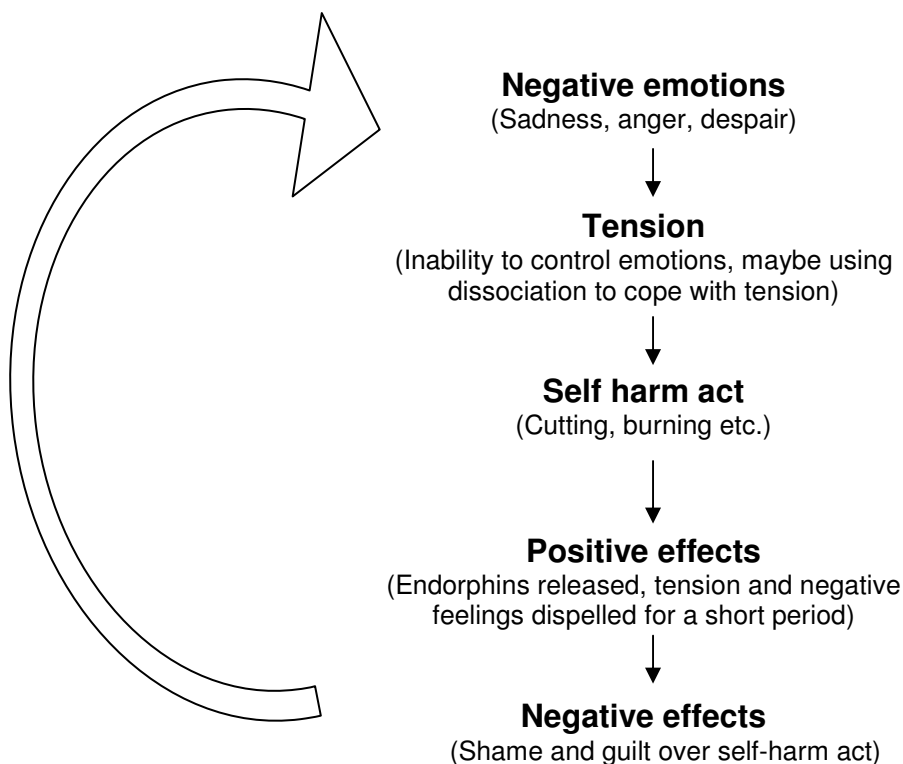
Once self harm (particularly cutting) is established, it may be difficult to stop. Self harm can have a number of functions for the student and it becomes a way of coping.

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.

### **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. Support from family members or carers 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 often carries with it many long-term disadvantages and increased vulnerability for the young person. It is acknowledged that for some young people being looked after is the best way forward but in most cases it is 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.

If a child or young person goes missing from home or from a residential setting then the BSCB procedures should be initiated.

Thames Valley Missing Children Procedure: [www.bucks-lscb.org.uk/procedures](http://www.bucks-lscb.org.uk/procedures)

## How to help

**If you are concerned that an episode of Self Harm was a serious attempt by the Young Person to end their life, please contact your local CAMHS Tier 3 team Duty Line (see appendix F) immediately.**

### 1. First line help

When you recognise signs of distress try to talk with the young person about how they are feeling.

- Record and share with senior member of staff.
- When a young person has self harmed keep calm, give reassurance and follow the agreed first aid guidelines.
- In the case of an overdose of tablets advice must be obtained from a medical practitioner (GP or Accident and Emergency Department).
- If the young person is in a serious medical condition then an ambulance must be called.
- Try to work out together who you need to inform (see paragraph on confidentiality).
- Discuss the importance of letting parents know and address any concerns they have about this. For Children in Care discussion should include notifying the Social Worker (depending on the legal status of the Child).
- Contact parents to discuss concerns unless there are particular reasons why they should not be contacted. In these cases consult with designated safeguarding lead. Give the parents' fact sheet (Appendix D) when appropriate.
- For Children in Care contact their Social Worker in the first instance.
- Suggest to the parents and/or Social Worker a referral to CAMHS, or an appointment with the GP if there are serious medical issues. If young person is known to CAMHS contact Lead Professional / Care Co-ordinator or local teams duty line (Mon-Fri, 9-5).
- Ask for feedback from other agencies to support work with the young person.
- Work within Buckinghamshire Safeguarding Children Board policy/guidelines as appropriate (Child Protection Policies).
- Follow up contact with parents with a letter indicating your concern (Sample Appendix B).
- Have crisis telephone numbers available and easily accessible to young people.
- Follow agreed policy with regard to informing the senior management of your concerns.
- Record any incident (Sample Appendix C).
- Seek support for yourself if necessary.
- Advice can be obtained from the CAMHS telephone consultation service (see Appendix F).

### 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/staff 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 be supported to attend appointments and be encouraged to make use of the support offered.

### Understanding and prevention of 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.

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 schools manage and prevent self harm can be found in Appendix A.

## **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.
  - 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.
- 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, multiple and copycat behaviours**

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.

Where there appears to be linked behaviour or a local pattern emerging, a multi-agency strategy meeting should be convened.

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

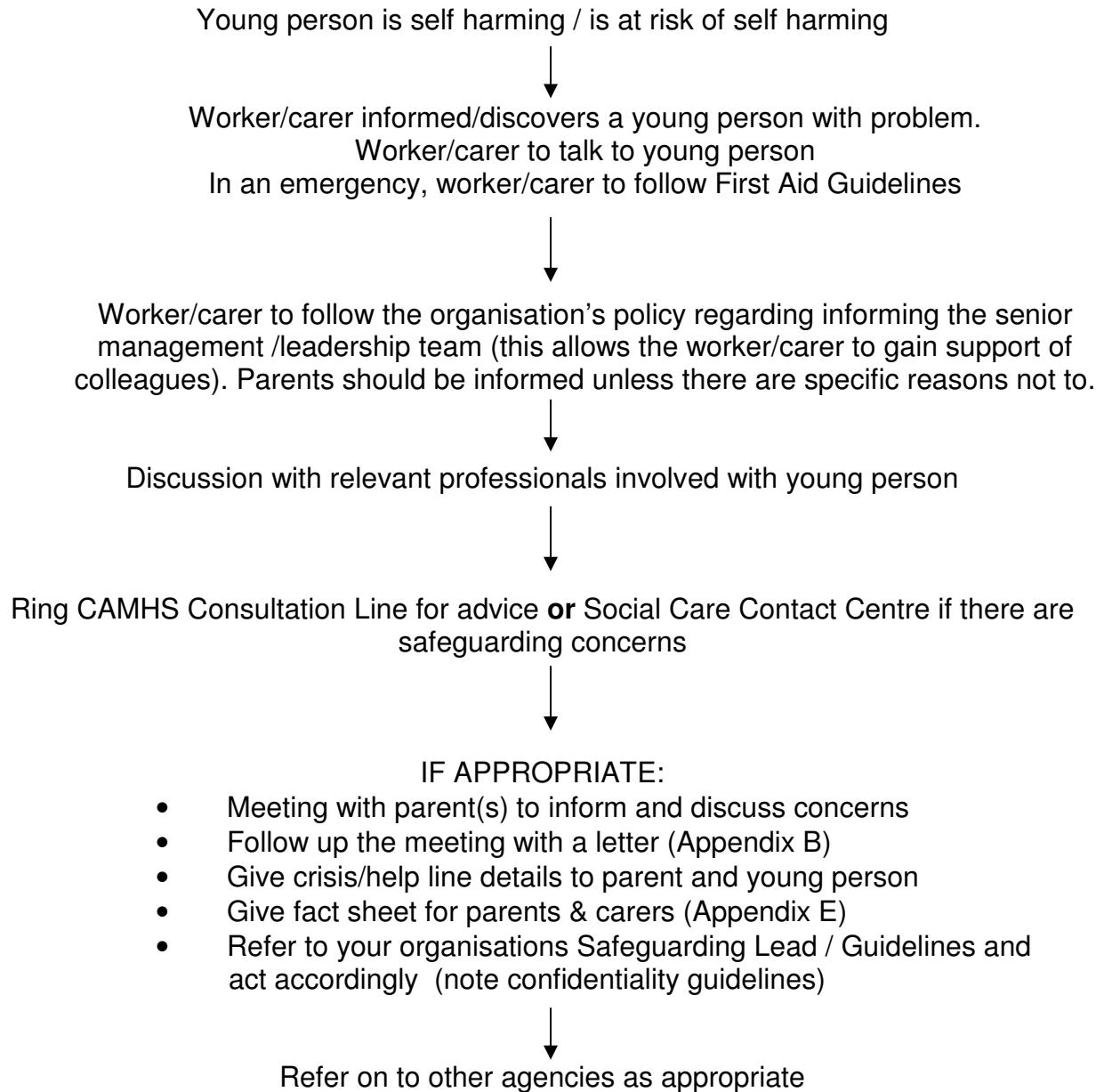
Staff giving support to young people who self harm may experience all sorts of reactions to this behaviour in young people (e.g. anger, helplessness, rejection); it is helpful for staff to have an opportunity to talk this through with work colleagues or senior management.

Staff taking this role should take the opportunity to attend training days on self harm or obtain relevant literature. Liaison with the local Child and Adolescent Mental Health Service may be helpful.

Consideration needs to be given to the impact the young person's self harming may have on their peer group.

**Helping young people who self harm: Flow chart for young people.  
(universal)**

**If you are concerned that an episode of Self Harm was a serious attempt by the Young Person to end their life, please contact your local CAMHS Tier 3 team Duty Line (see appendix F) immediately.**



## Appendix A

### Self Harm Guidelines - Checklist for schools: Supporting the development of effective practice

The school has a policy or protocol approved by the governing body concerning self-harming

ALL new members of staff receive an induction on self harm procedures and confidentiality

ALL members of staff (teaching and non-teaching) receive regular training on child protection procedures

The school has clear channels of communication that apply to this issue

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

Staff are supported throughout all processes concerned with this issue

Staff know how to access support for themselves and students

Students know who to go to for help

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

Students are consulted on any curriculum provision (eg in PSHE) and pastoral support provided.

**Appendix B**

**Sample letter to parents following meeting about self harm**

Date

Dear (Parent/Carer)

Thank you for coming 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 the Children and Adolescent Mental Health Service (CAMHS).

We will continue to provide support to ....., 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

Young person's name

Date of report

Date of Birth

Gender

Professional's name

Job title

Agency

School /College attended

Year

Special Needs

Incident

Date and time of occurrence

Action taken by professional

Decision made with respect to contacting parents  
(and reasons for decision)

Recommendations

Follow up

Copies to:

## Appendix D

### 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?***

Try to:

- 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: 0808 802 5544
- The Samaritans.      Tel: 08457 90 90 90
- MIND Infoline.      Tel: 0845 766 0163
- Youth Access.      Tel: 0208 772 9900
- School Health Nurse/ Health Visitor

## Appendix E

### Information 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



## Appendix F

### Useful addresses and telephone help lines

<b>CAMHS Consultation</b> 9am – 5pm Mon – Fri:	01296 565365
<b>Aylesbury CAMHs</b> (duty line):	08442252414
<b>High Wycombe CAMHs</b> (duty line):	01296 564130
<b>Amersham CAMHs</b> (duty line):	01296 565250
<b>Addaction</b>	01296 331933
<b>Young MINDS</b> 102 – 108 Clerkenwell Road London EC1M 5SA E-mail <a href="mailto:youngminds@Ukonline.co.uk">youngminds@Ukonline.co.uk</a>  Mon and Fri. 10am – 1pm Tues, Weds, Thurs. 1pm – 4pm	020 7336 8445
Young MINDS Parents Information Service	0808 802 5544
<b>Bristol Crisis Service for Women</b> PO BOX 654 Bristol Avon BS99 IXH Fri. and Sat. 9pm– 2.30am Sun. 6pm-9pm	0117 925 1119
<b>R-U-Safe?</b> Young Women's Service The Centre Castlefield High Wycombe Buckinghamshire HP12 3LL	01494 534381
<b>Samaritans</b> 24 hour helpline	08457 90 90 90
<b>Childline</b> 24 hr helpline	0800 1111
<b>CALM</b> (Campaign Against Living Miserably) Helpline for 15 –24 year old males 7 days a week 5pm –3am	0800 58 58 58

## **Web sites**

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**

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