

# Managing Self-Harm

Practical Guidance for Schools  
Supporting the School's Self-Harm Policy



Produced by  
Dr Lynette Rentoul, CAMHS Clinical Lead  
NHS Kernow

Summer 2015



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## 1 Overview

### 1.1 Aim and purpose of this guidance document for schools

This document has been developed in response to a request for guidance for schools on self-harm from the Cornwall Multiagency Emotional Wellbeing and Mental Health Board. It will support and complement the Self-Harm Policy that your school has, or will develop, in relation to self-harm. It should be read and implemented alongside the *Self-harm among children and young people: A strategy for Cornwall and the Isles of Scilly* document.

This document recognises the concern with the growing number of young people who harm themselves, both locally in Cornwall and in Great Britain. *“Our young people have the highest rates of self-injury in Europe”* (Madge, N. National Children’s Bureau). Research also confirmed that many school staff struggle to know how to respond to incidents of self-harm within school. Teachers interviewed spoke of feeling *“fazed, repulsed, bewildered, sorry and mystified”* when faced with young people who had harmed themselves (Truth Hurts Inquiry: Mental Health Foundation).

Every school is different and the policy each school creates will be unique to that school in order that it best serves its staff, pupils and parents. Please use this guidance to help you consider what factors you wish to include in your policy and ways to implement it effectively. It is important that all staff know how to respond to self-harm sensitively, systematically and strategically, including knowing when to inform a pupil’s parent and which teachers are informed.

### 1.2 This guidance also aims to:

- Increase understanding and awareness of self-harm.
- Alert staff to warning signs and risk factors associated with self-harm.
- Provide guidance for staff dealing with students who self-harm.
- Help senior leaders within schools consider how to support staff that have to deal with self-harm, ensuring they can deal with the feelings self-harm evokes.

However, it is not within the scope of this document to go into detail about specific difficulties that may be associated with self-harm, or its links with emotional or mental health concerns such as drug taking or drinking alcohol in excess, low mood, anxiety, or marked family or peer relationship difficulties which require specific interventions. The Guidance aims to provide key information upon which each School Self-Harm Policy will be based.

### 1.3 Key Content for each School Self-Harm Policy

- 1 Aims and purpose of the Policy.
- 2 Definitions of self-harm; clarifying what self-harm is.
- 3 Risk factors associated with self-harm.
- 4 Relationship of the Self-Harm Policy to other policy documents, in particular Safeguarding procedures and policies; Risk Assessment processes; and Confidentiality.
- 5 Roles and responsibilities of all school staff.

- 6 Clear pathways for immediate (including risk assessment) and ongoing response to self-harm.
- 7 The importance of training for school staff on dealing with self-harm, self-harm care, and referral pathways and flowcharts guiding response to self-harm, to increase the whole school's understanding and confidence.
- 8 Arrangements for recording, audit, monitoring and evaluation of incidents of self-harm in the school.
- 9 Date Self-Harm Policy is established by the Governing Body; date for full implementation of the Self-Harm Policy.
- 10 Support for parents, siblings and peers.

## 2 What is self-harm?

On occasion, we may all act in ways that could be considered as harmful to ourselves. However, self-harming is when someone chooses to inflict pain on themselves in some way. It includes, but is not limited to:

- Cutting.
- Overdosing (self-poisoning).
- Hitting.
- Burning or scalding.
- Pulling hair.
- Picking or scratching skin.
- Self-asphyxiation.
- Ingesting toxic substances.
- Fracturing bones.

*“Self-harm may be a response to strong feelings and distressing experiences, which are hard to deal with. During adolescence, young people may encounter particularly painful emotional events for the first time. Adolescents who self-harm describe feelings of powerlessness and despair, and say they turn to self-harm to release powerful and frightening emotions, relieve unbearable tension, or gain a fleeting sense of control” (Do more good than harm, 2006).*

Some young people harm themselves in less obvious, but still serious ways, such as taking drugs, having unsafe sex, or binge drinking. Some simply starve themselves (Royal College of Psychiatrists, 2012). It is usually a sign that something is wrong in the life of that young person (Young Minds, 2014). It can feel to other people that these things are done calmly and deliberately – almost clinically, but we know that someone who self-harms is usually in a state of high emotion, distress and unbearable inner turmoil. Some people plan to self-harm in advance; for others, it happens more impulsively on the spur of the moment. Some people self-harm only once or twice, but others do it regularly – it can be hard to stop.

For many children and young people self-harm is a way to communicate emotional distress. Self-harm is behaviour – and behaviours are ways of communicating feelings. Self-harm is one way of communicating high levels of distress and is often an expression of the need for strong and often poorly understood feelings to be validated, accepted, understood and attended to. Self-harm may also be an expression of unmet needs and longings, which cannot be put into

words. In this sense, self-harm is a way of seeking others to understand and attend to these needs. It is important to understand what these needs are and how they might be met. It is important to remember that the needs are legitimate, but the young person may need help to find more functional ways to communicate in order to secure appropriate support. It may be that there is a problem at home, an issue of bullying, marked relationship difficulties, or overwhelming feelings that are ill understood. The young person may feel that no-one is listening to them or hearing them, and so develop more remarkable ways of communicating their distress.

*“Self-harm used to be a way of getting rid of the feelings inside me. To get rid of all the hurt, anger and pain that I was feeling. The rush it gave, the sense of feeling better was always short-lived. So short that I was doing it many times ... I’m trying to get my life ‘normal’, though for me self-harm is normal. Something that I have always done to mask my feelings. I don’t know how to release my feelings in any other way and find talking exceptionally difficult.”*

### 3 Who self-harms?

There is not one type of person who self-harms. Some groups are more vulnerable than others but each case is individual. We know that there are factors that contribute to the risk of self-harm (Supporting Children at Risk of Suicide, 2013). These include:

#### 3.1 Risk Factors

- Attempted suicide or self-harm by a family member.
- Low self-esteem; marked relationship difficulties.
- Mental health problems such as depression and anxiety.
- Marked family conflict (periods in Local Authority care, parental conflict, domestic violence, parental mental health problems).
- Ongoing marked family relationship problems.
- Past or present physical or sexual abuse, neglect or trauma.
- Family models of self-harm.
- Bullying, including cyber-bullying and homophobic bullying.
- Children and young people who experience poor emotion regulation, and have ineffective emotional regulation coping strategies. This may be linked to insecure attachment histories.

It is important to recognise that sometimes none of these risk factors may appear to be present. Some young people who harm themselves may appear well and from highly supportive backgrounds; they suffer internally and resort to harming themselves as a means of coping. Sometimes groups of young people influence each other by discussing self-harm – in a kind of contagion of self-harming behaviour. Each person is unique and will have found the practice of self-harm by their own route, and rely on it at times of stress due to the sense of release, control and relief it offers to them (see Appendix 4).

The reality is that:

- Boys are affected by self-harm as well as girls but are less likely to tell anyone about it.

- It is not always easy for a young person to stop self-harming behaviour.
- Young people from all walks of life can be affected by self-harm, regardless of their social or ethnic background.

### 3.2 Is there a link between suicide and self-harm?

People often think that self-harm is closely linked to suicide; however the vast majority of people who self-harm are not trying to kill themselves – rather they have some hope that by communicating their distress something will be understood and someone will attend to them. It is a way of coping with strong and painful feelings and circumstances. However, it is not always clear from the severity of the self-harm what the intention of the young person is. If you discover that someone is self-harming, it gives you a real opportunity to help them deal with the underlying problems they are wrestling with. Therefore, it is important that you explore with them what their intentions are, and what it is that cannot be tolerated with the support of more healthy coping skills. In rare circumstances, the internal distress becomes so great that self-harming becomes increasingly dangerous and can become a real threat to life; or the way in which the young person harms themselves becomes more dangerous – either by accident or intent. This, of course, requires close monitoring.

## 4 Why young people self-harm

There are many reasons why young people resort to self-harm as a means of managing strong and painful feelings.

*“My emotions can vary rapidly and be very intense. If in an emotionally charged situation, I will either during or shortly after harm myself. I’m not good at dealing with emotions or communicating mine to others.”*

*“I don’t deal with daily stress very well, so when extra events occur however big or small my tension levels rise, resulting in my needing a ‘release’. Self-harm has proven to be the most successful in dealing with this.”*

The reasons include some of the following factors:

- Some young people have a long history of not knowing how to regulate their own strong feelings – especially those feelings which they find internally threatening, distressing, difficult, overwhelming or shameful. This may be linked to their own family relationships and attachment histories. Self-harm offers a means of regulating emotions, which affords a temporary sense of release, relief and control.
- Linked to the above, some young people did not receive enough parental support in calming and soothing when distressed when they were younger, and this legacy compromises their capacity to manage strong and painful feelings as they develop. This is an increasing problem as they become more independent and are expected to manage their own distressing experiences and feelings.
- Other young people cannot rely on the help and support of friends and family when they are distressed; or they may not know how to communicate their strong feelings to friends and family.

- Some young people feel they have very little control over their circumstances and this leaves them with limited routes of expressing their frustrations and powerful feelings. Self-harm offers these young people a sense of control.
- Self-harm is also linked to other mental health problems in childhood and adolescence, such as anxiety and depression.
- Self-harm is more common among young people who live in families characterised by conflict, domestic violence, parental mental health (including parenting self-harming), and poor attachment histories.

*“When I first started self-harming, it helped me through a difficult time in my life. It was so effective at making me feel better, more powerful in a way, and like I didn’t need anyone else at all to talk to or to talk to me. I could face down that teacher who kept telling me to take my nose stud out. Any time anyone upset me at school or at home I always had my little secret friend to help me.”* Chloe aged 15 (Childline, 2007).

Mark said his parents were putting too much pressure on him to succeed; the first time he cut himself was after a row. His parents constant arguing made him so anxious he kept cutting his arms and legs. He reported that they made him feel *“little, useless and depressed”*.

There are many reasons why young people may harm themselves. These reasons are best understood by considering the perspective of the child or young person.

#### 4.1 A young person may self-harm because:

- It is a way of dealing with intense and painful feelings and provides a sense of relief afterwards. The strong feeling of relief (and even power at overcoming pain) may be a powerful driver to repeat self-harming.
- It is a way to communicate their distress, especially for young people who lack other routes to express themselves and to have this distress understood, accepted and attended to.
- It may be a way of exacting retaliation or punishment on those close to them, when they are left feeling hurt or unable to resolve negative feelings about others – especially if they feel that others are responsible for their distress. This process may operate unconsciously.
- It can be a way to influence or control others and it may, on occasion, be used to elicit care, affection or confirm love from those close to them. Young people with limited resources for controlling their environment can use self-harm to influence the feelings and actions of others.

*“I don’t think they love me. They argue all the time and my dad sometimes hits out at me.”* Chrissie, aged 14 (Childline, 2007).

This may leave professionals and carers feeling manipulated; however, it is important to remember that self-harm communicates something that a child or young person is unable to say through usual means. Understanding this ‘communication gone wrong’ is likely to go some way in reducing or preventing recurrence.

*“I cut myself when I am angry. It hurts, but it helps my anger.”* Lisa, aged 11 (Childline, 2007).

## 5 How self-harm works

Self-harm is primarily a way to cope, and in some cases it may feel like the only way to deal with feelings that are so distressing that no alternatives are thought to be helpful. Young people say that self-harm works for them in the following ways:

- **Relief of feelings** : by hurting themselves, young people report they are able to release feelings that feel unbearable when held inside.
- **Distraction**: self-harm can provide distraction from the internal emotional pain, which may feel unbearable.
- **Communication**: self-harm is primarily a means of regulating feelings rather than gaining a response from others; however self-injury may also be a means of communicating distress without using words.
- **Comfort**: self-harm may be experienced as soothing and comforting by some young people; this may come about from the release of tension, but also by providing an opportunity to seek care and nurture from others. This is particularly important for young people with poor self-regulation skills.
- **Feeling alive or real**: sometimes young people's real life experiences leave them feeling numb or unreal. Hurting one's body may be experienced as a way of breaking through these feelings, and experiencing something that makes them feel alive and real again.
- **Self-punishing**: some young people carry feelings of shame, low self-esteem, self-blame – when these feelings become hard to bear some young people harm themselves as a way of punishing themselves. This process may operate unconsciously.
- **Control**: some young people explain that they feel the need for control in their lives (which is often characterised by a sense of lack of control). Self-harm can be seen in terms of gaining control – by controlling injuries to their own body. Determining the nature, site, timing and severity of harm to the body is a way of staking claim to one's own body.

## 6 Warning signs

There may be no warning signs, and often people who self-harm go to great lengths to conceal their injuries, so it can be hard to know for sure if a person is self-harming. If you notice any change in a child or young person that concerns you, it is important to open up a conversation with that young person. You may notice higher levels of expressed distress, or increasing withdrawal in a young person. You may notice that a young person is wearing long, heavy clothes, even in warm weather, which may be a way of hiding signs of self-harm. If you do not feel able to open up a conversation, then ask an appropriate staff member (consider your Safeguarding Lead, where appropriate) and follow your school's Safeguarding procedures. A change in behaviour, attitudes or attendance at school might be significant and should be followed up. Parents or school staff may identify that a young person's internet activity is a concern (eg accessing self-harm websites or groups). Parents may be the first to pick up on warning signs and they should be encouraged to discuss these with the school.

## 7 Responding to Self-Harm in schools

In primary schools it is recommended that self-harm is referred to in the school's Safeguarding policy. It is recommended that all secondary schools should have a school Self-Harm Policy, which contains the protocol of how to deal with self-harm in the school. It will need to include how and when a pupil's parents are informed, which staff are informed, and how to support staff dealing with incidents of self-harm. There needs to be a designated member of staff to manage and co-ordinate the school's response to self-harm. This will usually be the designated Safeguarding Lead. This may not be the person who takes the immediate action, when a child self-harms or discloses self-harming behaviour. **It will be helpful to follow the guidance in the 'Immediate Intervention Flowchart' (Appendix 1) to assess what action to take.** If you are the Safeguarding Lead, staff will refer cases of self-harm to you to deal with. After the initial incident and once you are happy that the young person is safe, both physically and emotionally (for example that wounds have been attended to), you will need to gather more information and plan ongoing support for the young person. **Follow the 'Ongoing Support' guidance (Appendix 2) to decide what subsequent action to take.** It is important that all staff are clear what their responsibilities are and who they should speak to when self-harm is disclosed or suspected, therefore both the Immediate Intervention Flowchart and Guidance need to be shared with all staff.

### 7.1 General advice for school staff dealing with disclosures

- Listen actively to the pupil, and seek to understand the situation from their point of view in a non-judgemental, respectful and empathic way. It is important to try to validate the feelings of the young person and understand their experience.
- Ensure that the young person understands who you will need to share information with in order to help keep them safe.
- It is important to have some understanding of the risk presented, and access to guidance on assessing risk in schools (see Appendix 4).
- Learn about self-harming behaviour, and the difference between suicide and self-harm. Encourage all school staff to attend training in self-harm, to support their understanding and capacity to respond to self-harm in appropriate ways.
- It is important to remember that if someone tells you that they self-harm, it could be a sign that they trust you and are willing to share this very personal problem with you. Respond to this trust in a thoughtful and reflective way. Be aware that the young person may be experiencing guilt and shame in relation to their self-harm.
- Self-harm is not the only way for people to deal with emotional distress. Try to encourage the pupil to seek alternative coping mechanisms. However, do not expect them to be able to stop self-harming, or develop new coping strategies immediately or in the short term.
- It is unlikely to be a good idea to send the pupil home as they will be in distress and the issue needs to be dealt with sensitively, allowing the pupil time and space to talk and be listened to. It is important to ensure the safety of the student, and so keeping them in a safe place at school is part of this.
- Be aware that social media is sometimes used by young people to enquire about ways to self-harm, or to share details or images of their self-harming with their peers.
- Be aware that supporting young people who harm themselves may evoke feelings of anxiety, frustration, repulsion, bewilderment and helplessness. It is important not to

convey these feelings to the young person who self-harms. But staff need to take care of themselves – seek support when they need it; be aware of their own feelings and limitations, and not offer more help than can be coped with.

- Your designated Safeguarding Lead will know about a number of routes for accessing additional support (if this is deemed appropriate). For example, the school nurse, the school's Primary Mental Health Worker or Educational Psychologist may be able to offer additional advice/guidance. Alternatively, they may decide to contact specialist CAMHS or the Multi-Agency Referral Unit.
- Discuss this incident with your Safeguarding Lead. However, if you are the Safeguarding Lead, make sure that you have access to trusted colleagues who can help you think difficult decisions through.

## 7.2 Things to remember

- Anyone from any walk of life or any age can self-harm, including young children (most common in young people between the ages of 11-25 years). Self-harm affects people from all family backgrounds, religions, cultures and demographic groups.
- Self-harm affects both males and females, although boys and girls may harm themselves in different ways.
- People who self-harm often keep the problem to themselves for a very long time, which means opening up to anyone about it can be difficult.
- You can't tell someone who self-harms to simply stop – it is not that easy! Self-harming behaviour may have developed in the context of high distress, poor emotion regulation and underlying difficulties over a long period of time. Developing new coping strategies may also take time to establish and embed.

## 7.3 Advice for Pastoral Staff and the Safeguarding Lead re Disclosures and Confidentiality

If there are concerns about self-harm in a primary school it is important for the young people to know about issues of confidentiality and how these will be dealt with. Secondary school pupils must also be aware of the school's Self-Harm Policy, especially issues of confidentiality, and what to expect if they disclose self-harm to a teacher or member of staff. Confidentiality will, no doubt, be a key concern for pupils, and they need to know that staff will need to share information with the Safeguarding Lead. The parameters of confidentiality will need to be explained. It can be very challenging to decide whether to break a young person's confidentiality and disclose self-harm to their parents, or to other important adults in a young person's life. However, a young person who is hurting him or herself is often struggling to manage intense distress without enough support, or is struggling to communicate this. Very often a reluctant young person can be helped to tell (or let you tell) their parents what has been happening. When this is not the case, there are no hard and fast rules, but ask yourself the following questions:

- Will you put the young person at greater risk by telling their parents? If you are concerned about the safety of the young person, you must discuss the issues with your Safeguarding colleagues within the school and in the Council.
- What is the young person's family situation? It is important to remember that if you do disclose, give a young person as much control as possible over the process. For example, do they want to tell their parents themselves; do they want to be present

when you talk to them? Ensure that you follow up with the young person after this conversation to check the impact and outcome of this conversation on the young person.

- Do you need to see advice from the Multi-Agency Referral Unit?

## 8 Roles and Responsibilities within Schools

### 8.1 Head Teacher

- Head teachers have a pivotal role to play in developing positive mental health strategies in schools. They should recognise the need to develop a whole school awareness of mental health and emotional health issues, including self-harm, and be supported to do so.
- Consider the need for PSHE as part of addressing the young people's emotional wellbeing and mental health needs.
- It is important that the head teacher supports the prioritisation of self-harm training for school staff alongside other mandatory training. This support for training is crucial to enable staff to feel confident in supporting young people in effective, non-judgemental and respectful ways.
- In secondary schools, in collaboration with the school's Governing body, the head teacher will develop and implement a school self-harm policy using the guidance provided (or delegate this to an appropriate member of staff).
- Ensure staff, parents and pupils are aware of their roles and responsibilities when implementing the policy across the school.
- Appoint one or more designated key staff to be responsible for all incidents relating to self-harm.
- Ensure that all designated staff receive full and appropriate training regarding self-harm and are fully confident with the procedures to follow.
- Provide practical and emotional support for key staff dealing with self-harm, and consider protecting time for staff to have group or individual supervision. Primary Mental Health Workers may be able to offer consultation and/or supervision for staff who are managing issues related to self-harm.
- Ensure that all staff, including teaching assistants, laboratory technicians and other non-teaching staff are made aware of, and understand, the self-harm policy, and receive training as appropriate.
- Ensure that good procedures are in place for record keeping, audit and evaluation of all activities in relation to self-harm in the school.
- Ensure that all staff know where they can access support if required.

### 8.2 Governing body

The governing body need to work with school staff in order to:

- Provide pupils with open access to information about self-harm and details of who to go to for help and support.
- Decide, in collaboration with the school senior leadership team, how awareness and understanding of self-harm should be promoted. This includes self-harm being covered

in the school PSHE curriculum, extra-curricular presentation for parents, and training for all school staff.

- Consider issues of parental consent and whether parents/carers or guardians should be invited to learn more about self-harm.
- Review special permissions for pupils who self-harm, for example 'time out' of the classroom during emotional distress and permission to wear long sleeves for sports.
- Support the development of procedural policy for self-harm incidents occurring at school.
- Be clear about what behaviour cannot be accepted, and ensure that all pupils are aware and understand the guidance (for example, self-harming in front of other pupils or threats to self-harm as bargaining, may be deemed by the school as unacceptable).

### 8.3 All Staff and Teachers

- Review all self-harm guidance and policy documents, alongside Safeguarding policy documents, and be aware of guidance on communication processes.
- Be clear who you need to inform if you are concerned about self harm and the referral route.
- Discuss an incident or disclosure of self-harm with a designated member of staff as soon as you become aware of the problem, and inform the pupil that you are doing this.
- Make it known to pupils that there are staff available to listen to them (and how they can be accessed).
- Remain calm, respectful, sensitive and non-judgemental at times of student distress.
- Do not adopt a dismissive or belittling attitude in relation to the reasons for a student's distress.
- Encourage pupils to be open with you and assure them that they can get the help they need, if they are able to talk.
- Endeavour to enable pupils to feel in control by asking what they would like to happen and what help they feel they need.
- Do not make promises you can't keep, especially regarding issues of confidentiality.
- Provide and encourage access to external help and support where possible.
- Monitor the reactions of other pupils who know about the self-harm, and refer on to appropriate staff if required.
- Avoid asking a pupil to show you their scars or describe their self-harm.
- Avoid simply telling a pupil to stop self-harming – you may be removing the only coping mechanism they have.

### 8.4 Designated Self-Harm/Safeguarding Lead

- Ensure the implementation of the Self-Harm Policy, communicate with each other and report back to the Safeguarding Lead and/or Head teacher at each stage of the process.
- Maintain up to date records of pupils experiencing self-harm, incidents of self-harm and all other concerns surrounding the issue.
- Communicate with the Safeguarding Lead and/or Head teacher, and other key staff, on a regular basis and keep them informed of all incidents and developments.
- Monitor the support provided and progress of the students in your care and maintain communication with them.

- Ensure you are fully confident in your understanding of self-harm and seek additional information and/or training if you feel it necessary. You may need to reflect upon, and update, your practice in relation to those who self-harm.
- Contact other organisations and key services in your area and find out what help and support is available for young people who self-harm.
- Liaise with the Safeguarding Lead and/or Head teacher and pupil to decide if any other members of staff who have contact with the pupil should be made aware of the self-harm and underlying concerns. Whenever possible adhere to the 'need to know' principle.
- Ensure that all first-aiders are well informed about self-harm.
- Inform the pupil's parents, if appropriate, and liaise with them as to how to best manage the situation.
- Be aware of when it is essential to liaise or share information with other professionals (such as social services, educational psychologists, GP, Primary Mental Health team, CAMHS).
- Respond to any mention of suicidal feelings or behaviour as a matter of urgency (see Appendix 1).
- Take care of your own emotional wellbeing and seek support/supervision as and when necessary.

## 8.5 Pupils

- Students should have access to leaflets and guidance about self-harm, including guidance for young people, which clearly sets out their rights, and what they should expect when they disclose their self-harm to professional staff.
- If young people are under emotional distress or talk about self-harming at school, encourage them to talk to a staff member as soon as possible.
- Ensure that young people are aware that the teachers and designated self-harm staff are there to help them. The more you can talk to them the better able they will be to give you the support and help you need. However, as with all cases where your safety is at risk, and your teacher is concerned in a serious way about your safety or wellbeing, he or she may have to break your confidentiality for your own safety.
- If young people are worried that a friend may be self-harming then encourage them to talk to a member of staff for support and guidance.
- See Appendix 4 for Leaflet for Young People.

## 8.6 Information a school may want Parents to have access to

- The school's Self-Harm policy.
- Information about self-harm.
- If your child is self-harming, work closely with the school and take an active role in deciding the best course of action for your child.
- Information about how to keep the school informed of any incidents outside of school that they feel school staff should know about.
- How to take care of themselves and seek any emotional support they may need in dealing with their child's self-harm.
- See Appendix 5 for Leaflet for Parents/Carers.

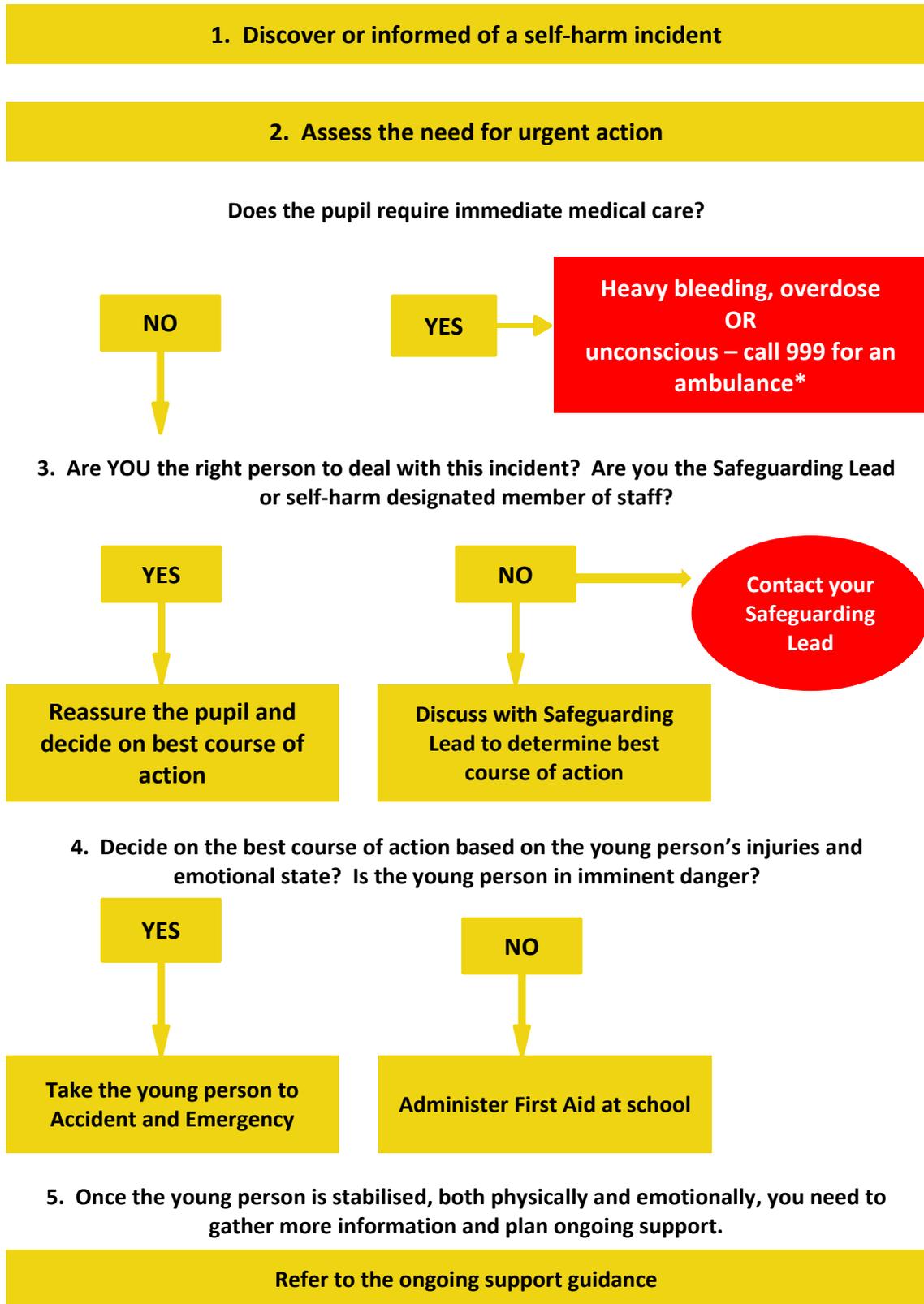
## References and useful information sites

- 1 National Self-Harm network ([www.nshn.co.uk](http://www.nshn.co.uk))
- 2 Young Minds have produced excellent publications and helplines for parents and young people ([www.youngminds.org.uk](http://www.youngminds.org.uk))
- 3 Young Minds booklet: Worried about self-injury.
- 4 Truth Hurts: National Inquiry into Self-Harm among young people. Mental Health Foundation.
- 5 Managing self-harm in young people (2014). Royal College of Psychiatrists.
- 6 NICE (2013) NICE Quality Standard 34. Quality Standard for self-harm.
- 7 NICE (2011) Self-harm: Longer term management. NICE clinical guidance 133.
- 8 Arnold, L. & Magill, A. Working with self-injury: a practical guide.
- 9 Arnold, L. & Magill, A. What's the harm? A book for young people who self-harm or self-injure.
- 10 National Children's Bureau: information on a wide range of initiatives relating to young people who self-harm.
- 11 SelfHarm.co.uk. ([www.selfharm.co.uk](http://www.selfharm.co.uk))
- 12 Childline. ([www.childline.org.uk](http://www.childline.org.uk)) ]
- 13 NSPCC. ([www.nspcc.org.uk](http://www.nspcc.org.uk))
- 14 Young Minds Parents Information Service. Tel: 0808 802 5544.
- 15 Social Care Institute for Excellence (SCIE; 2005) Research Briefing 16: Deliberate Self-Harm (DSH) among children and Adolescents: London: SCIE
- 16 Shapiro, S. (2008) Addressing Self-Injury in the School Setting. School Nursing, 24 (3) pp. 124-130.
- 17 National Institute for Health and Clinical Excellence (2013). Providing help for those who self-harm. Available at [www.nice.org.uk/newsroom/features/providing\\_help\\_for\\_those\\_who\\_self-harm.jsp](http://www.nice.org.uk/newsroom/features/providing_help_for_those_who_self-harm.jsp)
- 18
- 19 Self-harm package for young people. Produced by Cornwall Foundation Trust.
- 20 Worried about self-harm. Young Minds Leaflet.
- 21 Well at School ([www.wellatschool.org](http://www.wellatschool.org)). Guidance and advice for teachers and other educational professionals about children who self-harm.
- 22 Self-harm and Eating Disorders in Schools: A Guide to whole school strategies and practical support (2015). Pooky Knightsmith.

Appendix 1 – Immediate Intervention Flowchart for School

Immediate Intervention Flow Chart for \_\_\_\_\_ School

Listen, talk to and include the young person throughout the process



\*NICE guidance suggests all cases of children or young people under the age of 16 that attend A&E after harming themselves should be admitted to a paediatric ward for assessment (WLMHT & Ealing Children’s Social Care 2013)

## Appendix 2 – Ongoing Support Guidance (Lead Designated Staff)

It is important to assess the young person at regular intervals as things may change. It is good practice to keep a record of these meetings, and record any information you gather during discussions with the young person and their parents. If other professionals are involved you may want to consider initiating a multiagency meeting (e.g. CAF).

To make certain the young person has the opportunity to talk and be taken seriously you may want to use the following series of questions to help you understand the episode and gather essential information to know how best to respond:

### 1 About the self-harm

- 1 How are you feeling now?
- 2 Can you tell me a bit about what's happened?  
(The type of information you might want to gather includes:
  - What was used to self-harm?
  - When did it take place and where?
  - What time of day/night?
  - What did the young person do?
  - Who was around at the time?
  - Who did they tell?
  - What did they do?)

It is important to listen to the young person and let them tell you their views.

### 2 Degree of intent and risk of further self-harm

- 1 What did you hope might happen following the self-harm?
- 2 Did the self-harming help in some way, and if so, how did it help?  
(Information it might be useful to gather includes:
  - How long has the young person been thinking about harming himself or herself?
  - Was the act impulsive or part of a long-standing plan?
  - What were they thinking at the time of the self-harm?
  - Who knew that they were feeling so bad? What would they have wanted them to do?
  - What did they expect to happen as a result of the self-harm?)

### 3 Other vulnerabilities affect the self-harming behaviour

Through conversation with the young person, find out whether any of the following may be relevant to them.

Trauma	Family violence, child abuse, bullying
Life events	Parent divorce, exams, and bereavement
Cultural factors	Identity, sexuality, and language
Social support	Friendship/relationship breakdown, isolation
Family	Mental health of parents, domestic violence

### 4 Who knows about the young person's self-harming?

- Who knows the pupil has/is self-harming?
- How does the young person feel about this?
- How have parents/carers been engaged?
- What support has been provided to the young person and their parent/carer?

### 5 What services need to be involved?

- Has a referral been made previously?
- School nurse – complete and submit a form indicating concern.
- Consider immediate referral to CAMHS if they have thoughts/plans about suicide, feelings of hopelessness or recognised mental health problems. If you are concerned, contact your Primary Mental Health Worker (PMHW).
- If an urgent assessment is required from CAMHS advise parents/carer to take the young person to their GP to make an urgent referral to CAMHS.

### 6 Re-assess regularly. Is follow-up required?

- Follow up with young person and/or parents.
- Follow up with Head Teacher and Designated Lead for self-harm.
- Follow up with the School Nurse and GP.
- Follow up with CAMHS or Primary Mental Health.
- Make sure parents/carers and young person have a copy leaflets to go through and talk about content (See Appendix 4 and 5).
- What has helped in the past?
- What might be able to help in the future?

Listen to the young person throughout the process.

## Appendix 3 – Protective Factors and Risk Factors

Protective Factors	Risk Factors
<b>Family Factors</b>	<b>Family Factors</b>
<b>Child</b> <ul style="list-style-type: none"> <li>• High self-esteem</li> <li>• Good problem-solving skills</li> <li>• Easy temperament</li> <li>• Able to love and feel loved</li> <li>• Secure early attachments</li> <li>• Good sense of humour</li> <li>• A love of learning</li> <li>• Being female</li> <li>• Good communication skills</li> <li>• Belief in something bigger than the self</li> <li>• Having close friends</li> </ul>	<b>Child</b> <ul style="list-style-type: none"> <li>• Low self-esteem</li> <li>• Few problem-solving skills</li> <li>• Difficult temperament</li> <li>• Unloving and reject love from others</li> <li>• Difficult early attachment</li> <li>• Tendency to see things literally</li> <li>• Fear of failure</li> <li>• Genetic vulnerability</li> <li>• Being male</li> <li>• Poor communication skills</li> <li>• Self-centred thinking</li> <li>• Rejected/isolated from peer group</li> </ul>
<b>Parents</b> <ul style="list-style-type: none"> <li>• High self esteem</li> <li>• Warm relationship between adults</li> <li>• High marital satisfaction</li> <li>• Good communication skills</li> <li>• Good sense of humour</li> <li>• Capable of demonstrating unconditional love</li> <li>• Set developmentally appropriate goals for the child</li> <li>• Provide accurate feedback to the child</li> <li>• Uses firm but loving boundaries</li> <li>• Believes in and practices a 'higher purpose'</li> </ul>	<b>Parents</b> <ul style="list-style-type: none"> <li>• Low self-esteem</li> <li>• Violence or unresolved conflict between adults</li> <li>• Low marital satisfaction</li> <li>• High criticism/low warmth interactions</li> <li>• Conditional love</li> <li>• Excessively high or low goals set for the child</li> <li>• Physical, emotional or sexual abuse</li> <li>• Neglect of child's basic needs</li> <li>• Inconsistent or inaccurate feedback for the child</li> <li>• Parents with drug or alcohol problems</li> <li>• Parental mental health problems</li> </ul>
<b>Environmental Factors</b>	<b>Environmental Factors</b>
<b>School</b> <ul style="list-style-type: none"> <li>• Caring ethos</li> <li>• Students treated as individuals</li> <li>• Warm relationships between staff and children</li> <li>• Close relationships between parents and social</li> <li>• Good PHSE</li> <li>• Effectively written and implemented behaviour, anti-bullying, pastoral policies</li> <li>• Accurate assessment of special needs, with appropriate provision</li> </ul>	<b>School</b> <ul style="list-style-type: none"> <li>• Excessively low or high demands placed on a child</li> <li>• Student body treated as a single unit</li> <li>• Distance maintained between staff and children</li> <li>• Absent or conflictual relationships between staff and school</li> <li>• Low emphasis on PHSE issues</li> <li>• Unclear or inconsistent policies and practice for behaviour, bullying and pastoral care</li> <li>• Ignoring or rejecting special needs</li> </ul>
<b>Housing and community</b> <ul style="list-style-type: none"> <li>• Permanent home base</li> <li>• Adequate levels of food and basic needs</li> <li>• Access to leisure and other social amenities</li> <li>• Low fear of crime</li> <li>• Low level of drug use in the community</li> <li>• Strong links between members of the community</li> </ul>	<b>Housing and community</b> <ul style="list-style-type: none"> <li>• Homelessness</li> <li>• Inadequate provision of basic needs</li> <li>• Little or no access to leisure and other social amenities</li> <li>• High fear of crime</li> <li>• High levels of drug use</li> <li>• Social isolated communities</li> </ul>

**Staying safe** is an important message for someone who self-harms, so that the physical risks, such as infection, are reduced as much as possible.

This includes keeping wounds (and any tools used) clean. It is also essential to have access to a first aid kit - antiseptic wipes and plasters.

### Coping strategies and distractions

Replacing self-harm with other, safer, coping strategies can be a positive way of dealing with difficult feelings. Different things work for different people, so you may need to try a few approaches to see what works for you. Helpful strategies when you want to self-harm can include:

- Hitting pillows, cushions or bean bags and having a good scream
- Going for a walk or run, or other kinds of exercise
- Snapping an elastic band on your wrist
- Watch your favourite TV show/funny videos online
- Crying is good
- Try to be around people until the urge or feeling passes
- Talking to someone you trust
- Avoid social media that makes you feel worse/bad about yourself
- Looking at supportive websites/message a helpline
- Read a good book
- Holding an ice cube against your skin instead of cutting
- Play video games
- Wrap your usual tool in a whole roll of sticky tape so that it's difficult to access.

### Support in Cornwall

**www.kooth.com** Free online support for young people in Cornwall and the Isles of Scilly  
**www.mindyourway.co.uk** Mental health and wellbeing services for young people in Cornwall  
**www.savvykernow.org.uk** Friendly advice and services in Cornwall and the Isles of Scilly  
**www.youthkernow.org.uk** A website for young people in Cornwall including an A-Z of services

### National support websites

**www.epicfriends.co.uk** Advice on how to help friends who are struggling to cope emotionally  
**www.thesite.org** Non-judgmental support, information, discussion boards and live chat  
**www.selfinjurysupport.org.uk** Supports girls and women affected by self harm  
**www.youngminds.org.uk** The voice for young people's mental health and wellbeing  
**www.childline.org.uk** Advice, info and help online or by telephone **0800 1111**  
**www.lifesigns.org.uk** User-led information and support for people who self-harm  
**www.samaritans.org 08457 90 90 90** Telephone support for anyone who needs to talk

### Apps

**www.docready.org** Docready helps you get ready for the first time you visit a doctor to discuss your mental health  
**www.thesite.org/apps-and-tools/stressheads** Stressheads is an app to help you deal with all kinds of life stress  
**www.headspace.com** meditation app for mindfulness techniques  
**www.inhand.org.uk** a mental wellbeing app designed by young people for young people

### Get help now

In an emergency, **dial 999**. You can also call your GP out of hours service or go to A & E

*"We are all fighting our own battles and we are all strong enough to win. We just need to believe."*



[www.savvykernow.org.uk](http://www.savvykernow.org.uk)

[@SavvyKernow](https://twitter.com/SavvyKernow)  
[f /SavvyKernow](https://www.facebook.com/SavvyKernow)



## Self-Harm

**What to do if you are worried about self-harm. Information for young people.**



*"You are NEVER alone. It may be hard to tell someone but then at least you know that someone is there for you."*

Quote by a young person to offer support to other young people who are self-harming

## What is it?

Self-harm is where someone does something to deliberately hurt themselves when they find things difficult to cope with. It can include things like:

- Cutting
- Overdosing (self-poisoning)
- Hitting (self and others)
- Burning or scalding
- Picking or scratching skin
- Pulling hair
- Ingesting toxic substances (like bleach)
- Eating disorders

## Who does it?

There is not one type of person who self-harms. It does not depend on sex, age, religion or background. Both sexes self-harm, but their methods may be different, for example males may engage in behaviours such as fighting. **Both adults and young people can self-harm.** LGBTQ young people, those who have been abused or witnessed Domestic Violence, have been in care/adopted, identify as emo, been bullied or experienced parental substance misuse are potentially more at risk of self-harm or other mental health concerns.

## Why do they do it?

People self-harm for a number of reasons. Something might have happened to make them feel bad about things. This could be stress or anxiety, friendship or relationship difficulties, isolation or loneliness, low self-esteem, questioning sexuality or gender. **But often there is no known cause or trigger.**

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*"Self-harm doesn't mean I'm weak, it means I'm hurting."*

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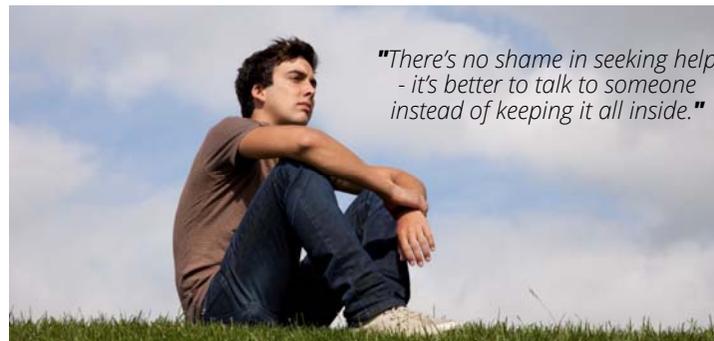
## Someone has told me they are hurting themselves; what should I do?

### Do

- Offer your friend a kind smile or hug, and ask "what can I do to help?"
- Listen to your friend
- React calmly and be reassuring and supportive
- Let your friend know they aren't alone
- Encourage them to ask for help from an adult, and look up ideas for support and information online together
- Ensure they get medical attention if this is needed
- Make sure you find someone to talk to who can support you

### Don't

- Be judgmental
- Be dismissive of their problems
- Tell them to stop
- Panic
- Feel it is your responsibility to make things better
- Promise to keep this a secret—if you feel your friend is unsafe, tell a trusted adult. This is to keep your friend safe so they can get the help they need



*"There's no shame in seeking help - it's better to talk to someone instead of keeping it all inside."*

## Social media & websites

There are some really good websites that have information and advice about self-harm and coping strategies. **But** there are some sites and social media that can be dangerous. They can put people who self-harm, or those who are thinking about it, at risk. **Only use safe sites**, like those recommended in this leaflet. If a site makes you feel uncomfortable in any way, it's best to close it straight away.

## Getting help - it's good to talk!

Although people who self-harm often find it difficult to tell others, **many say that they would like to get help and that talking about it would be a good starting point.**

The support of someone who understands and will listen can be very helpful in facing difficult feelings, and the reasons **behind them.**

**At home** you may be able to talk to parents or carers, or another trusted family member.

**Sometimes talking to people at home can be difficult**, but there are plenty of people to talk to who might be the first step towards getting help and support.

- **In school or college** A teacher/tutor, learning mentor, teaching assistant or other trusted adult. Some schools/colleges have counselling or drop-in centres and school nurse drop-in sessions.
- **Outside school** Youth workers, sports coaches, Guides / Scouts leaders and church leaders can all be good people to talk to, to get help.
- **GP** Going to see a GP or practice nurse can be a really useful way of getting advice and support. You can prepare yourself for what to expect at an appointment by going to [www.docready.org](http://www.docready.org)
- **Websites/helplines** If a person who is self-harming is reluctant to tell someone face-to-face, they can get help and advice from a helpline or website. See our list of safe contacts on the back of this leaflet.
- Go to [www.SavvyKernow.org.uk](http://www.SavvyKernow.org.uk) for a list of Young People Friendly services in Cornwall

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*"Stop. Count to ten. Share your feelings with someone you trust when you are ready."*

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All of the quotes used here are from young people who know about self-harm and want to offer encouragement to others to get help.

This leaflet was written with the help and advice of young people in Cornwall and the Isles of Scilly

### When your child is worried about a friend

Your child may tell you about a friend who is self-harming. This can be worrying and confusing for them. Support them by listening and advise them to encourage their friend to seek support from a trusted adult.

Help them understand that they may feel bad that they can't help their friend enough, or guilty if they may have to tell other people they are concerned about their friend's safety. Tell them these feelings are common and don't mean that they have done something wrong or not done enough.

There is a leaflet in this series for young people.

*"You are NEVER alone. It may be hard to tell someone but then at least you know that someone is there for you."*

Quote by a young person to offer support to other young people who are self-harming

### About this leaflet

The NHS and Cornwall Council have been working with schools in Cornwall to develop a countywide strategy for self-harm.

Together our aim is to make sure that we support young people not to self-harm. We also aim to offer the best possible support for those who do self-harm and their families.

This leaflet is intended to help all parents and carers understand what self-harm is, and to help those whose children self-harm.

Perhaps the most important thing we can do together is to build the emotional resilience of our children and young people. If young people develop the skills to combat adversity and deal with the emotional rollercoaster of childhood and the teenage years, the rate of self-harm will start to reduce. You can find out more about the work going on at:

[www.savvykernow.org/parents](http://www.savvykernow.org/parents)

This work on self-harm is a partnership project by Cornwall Council, NHS Kernow, Council of the Isles of Scilly, schools and young people.

### Support in Cornwall

[www.kooth.com](http://www.kooth.com) Free online support and counselling for young people in Cornwall  
[www.mindyourway.co.uk](http://www.mindyourway.co.uk) Mental health and wellbeing services for young people in Cornwall  
[www.savvykernow.org.uk](http://www.savvykernow.org.uk) Friendly advice and services in Cornwall and the Isles of Scilly  
[www.supportincornwall.org.uk/](http://www.supportincornwall.org.uk/) Cornwall Care & Support Directory (A-Z of services)

### National support websites

[www.familylives.org.uk/](http://www.familylives.org.uk/) Listening, supportive and non-judgmental advice for parents and carers

[www.healthtalk.org/](http://www.healthtalk.org/) has a section where parents share their experiences and advice

[www.epicfriends.co.uk](http://www.epicfriends.co.uk) Advice for young people on how to help friends who are struggling to cope emotionally

[www.thesite.org](http://www.thesite.org) Non-judgmental support, information, discussion boards and live chat

[www.selfinjurysupport.org.uk](http://www.selfinjurysupport.org.uk) Supports girls and women affected by self harm

[www.youngminds.org.uk](http://www.youngminds.org.uk) The voice for young people's mental health and wellbeing

[www.childline.org.uk](http://www.childline.org.uk) Advice, info and help online or by telephone **0800 1111**

[www.lifesigns.org.uk](http://www.lifesigns.org.uk) User-led information and support for people who self-harm

[www.samaritans.org](http://www.samaritans.org) **08457 90 90 90**

Telephone support for anyone who needs to talk

### Apps

[www.docready.org](http://www.docready.org) Docready helps young get ready for the first time you visit a doctor to discuss mental health issues like self-harm.

[www.thesite.org/apps-and-tools/](http://www.thesite.org/apps-and-tools/)

**stressheads** Stressheads is an app to help deal with all kinds of life stress

[www.headspace.com](http://www.headspace.com) meditation app for mindfulness techniques

### Get help now

In an emergency, **dial 999**. You can also call your GP out of hours service or go directly to A & E.

## Self-Harm

Information about self-harm for parents in Cornwall and the Isles of Scilly.



*"Be understanding. Don't be frightened. Don't be frightened to talk to them about it. Don't be frightened to get help. Get help as soon as you can... Take notice. Don't ignore it but try and be empathic and compassionate because they don't need judgments. They feel, they feel as bad about themselves as it is. They need your support and your love and your care, yeah, that's what I would say." (Parent)*

## What is Self-Harm?

Self-harm is when someone intends to hurt themselves or chooses to inflict pain on themselves in some way. This can include:

- Cutting
- Overdosing (self-poisoning)
- Hitting (self and others)
- Burning or scalding
- Picking or scratching skin
- Pulling hair
- Ingesting toxic substances (like bleach)
- Eating disorders

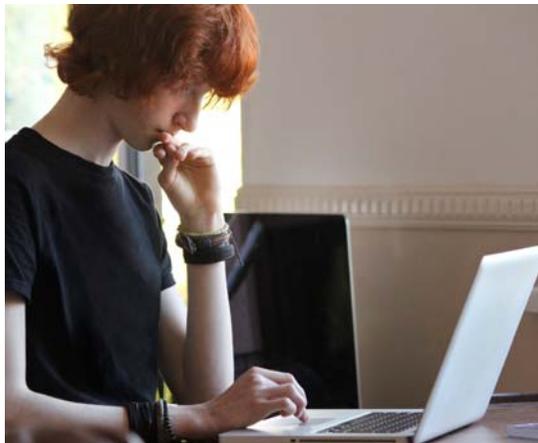
*“Self-harm used to be a way of getting rid of the feelings inside me. To get rid of all the hurt, anger and pain that I was feeling... Something that I have always done to mask my feelings. I don't know how to release my feelings in any other way and find talking exceptionally difficult.” (Young person)*

## Who self-harms?

There is not one type of person who self-harms. It does not depend on sex, age, religion or background. Both sexes self-harm, but their methods may be different, for example males may engage in behaviours such as fighting. **Both adults and young people can self-harm.** LGBTQ young people, those who have been abused or witnessed DV, have been in care/adopted, identify as emo, been bullied or experienced parental substance misuse are **potentially** more at risk of self-harm or other mental health concerns.

## Why do people self-harm?

People self-harm for a number of reasons. Something might have happened to make them feel bad about things. This could be stress or anxiety, friendship or relationship difficulties, isolation or loneliness, low self-esteem, questioning sexuality or gender. **But often there is no known cause or trigger.**



Some reasons given by people who self-harm include:

**Relief of feelings** By hurting themselves, people say they are able to release feelings that seem unbearable when held inside.

**Distraction** Self-harm can provide distraction from internal emotional pain.

**Communication** Self-harm may be a way of communicating distress.

**Comfort** Self-harm may be experienced as soothing and comforting; from the release of

tension, but also by providing an opportunity to seek care and nurture from others.

**Feeling alive or real** Sometimes life experiences leave people feeling numb. Hurting their body may be a way of making them feel alive and real again.

**Self-punishing** Some people carry feelings of shame, low self-esteem and self-blame, and may harm themselves as a way of punishing themselves.

**Control** Self-harm can be a way of feeling in control when other things in people's lives feel out of control.

## Is there a link to suicide?

People often think that self-harm is linked to suicide; however the vast majority of people who self-harm are not trying to kill themselves.

## Is self-harm attention-seeking or 'fashionable'?

Anyone who is self-harming is struggling with difficult feelings and their behaviour needs to be seen as indication of an underlying problem, not attention-seeking. In fact, most people who self-harm go out of their way to hide any evidence of what they've been doing, even from close friends and family.

## Is Social Media dangerous?

There is some concern about the role of the web and social media in encouraging self-harm or copycat behaviour. This can be linked to publicity about 'celebrity' self-harm or sites that encourage young people to share experiences or photos of self-harm, or that actively promote self-harm.

That is why it is important to encourage the signposting of trusted, safe sites like the ones on the back of this leaflet when looking for information about self-harm and support available.

*“Just don't give up, don't give up because there is help out there, there is... it's been hard, very, very, very hard at times but you will get there. You will and I know it's such a total cliché and you, I used to hear it all the time but it is so true and you have to talk. Don't keep anything to yourself and go and see your GP yourself with regards to your own health and well-being because you need to stay strong.” (Parent)*

## How to help your child

**Don't panic or over-react** if your child discloses self-harm (even though you might feel shocked). Respond to the trust you've been shown by reassuring and listening non-judgmentally.

**You may be worried** or upset and feel disbelief, shock, anger and even guilt or denial. These reactions are normal but try to stay calm and supportive for your child (**and it's important to seek support for yourself when needed**).

**It is important to recognise how hard it may be for the young person to talk to you.** It may take a lot of courage for a young person to discuss their self-harm and their feelings, and it may be difficult for them to put things into words. Gentle, patient encouragement can help.

You may not be the first person your child discloses to. This does not mean they don't trust you. Rather it may be because they don't want to hurt or upset you, or they feel ashamed. **It may be easier for them to tell someone else as first step** to getting help.

If your child is self-harming, **work closely with their school. Take an active role in deciding the best course of action for your child.** They will not be judgemental, and will want to work with you to support both you and your child.

The school will know how to **access additional support.** Your GP surgery can help too.

**Telling someone who self-harms to simply stop is not helpful.** Self-harm is a coping strategy which helps the young person deal with their emotional distress. Taking away their chosen form of coping could be dangerous. Developing new coping strategies may take time and may need professional support.

## Harm minimisation

Is one way you can help your child. You may find it very difficult to think that your child will continue to self-harm, but it is important that the physical risks, such as infection, are reduced as much as possible. Make sure first aid supplies are freely available and make an agreement that they will look after themselves if they continue. At the same time, **help them to find strategies to reduce the self-harm such as distraction techniques** (see the ideas in the young people's version of this leaflet or on some of the safe sites listed overleaf)

## Support for schools

The NHS, Cornwall Council and agencies in Cornwall are working together to provide support for schools, young people and families. We are working closely with schools on a positive response to self-harm to offer information about best practice guidance; training and policy development.

The document '**Managing Self-Harm Practical Guidance for Schools**' aims to

- Increase understanding and awareness
- Alert staff to warning signs and risk factors
- Provide guidance for staff
- Help senior leaders consider how to support staff, students and families

You can find this document at:

[www.cornwallhealthyschools.org/selfharm](http://www.cornwallhealthyschools.org/selfharm) along with downloadable copies of the other leaflets available in this series:

- For parents and carers
- For young people

## Helping to reduce self-harm through supporting young people

Perhaps the most important thing we can do together is to build the emotional resilience of children and young people across society and, in particular, in school. If young people develop the skills to combat adversity and deal with the emotional rollercoaster of childhood and the teenage years, the rate of self-harm will start to reduce.

This is something the partnership involved in this work are committed to doing through projects work like **Headstart Kernow; the Healthy Schools' Resilience and Self-Esteem Toolkit (ReSET), and Savvy Kernow.**

This work on self-harm is a partnership project by Cornwall Council and NHS Kernow, Council of the Isles of Scilly, schools and young people.

## Support in Cornwall

**www.kooth.com** Free online support / counselling for young people in Cornwall  
**www.mindyourway.co.uk** Mental health and wellbeing services for young people in Cornwall

**www.savvykernow.org.uk** Friendly advice and services in Cornwall and the Isles of Scilly

## National support websites

**www.epicfriends.co.uk** Advice for young people on how to help friends who are struggling to cope emotionally

**www.thesite.org** Non-judgmental support, information, discussion boards and live chat

**www.selfinjurysupport.org.uk** Supports girls and women affected by self harm

**www.youngminds.org.uk** The voice for young people's mental health and wellbeing

**www.childline.org.uk** Advice, info and help online or by telephone **0800 1111**

**www.lifesigns.org.uk** User-led information and support for people who self-harm

**www.samaritans.org / 08457 90 90 90**

Telephone support for anyone who needs to talk

## Apps

**www.docready.org** Docready helps young people get ready for the first time they visit a doctor to discuss mental health

**www.thesite.org/apps-and-tools/**

**stressheads** Stressheads is an app to help deal with all kinds of life stress

**www.headspace.com** meditation app for mindfulness techniques

*"We are all fighting our own battles and we are all strong enough to win. We just need to believe."*

For more information / resources / training / signposting contact the C&YP (5-19) Wellbeing / Healthy Schools Team

01209 313419

healthy.schools@cornwall.nhs.uk

www.healthyschools.org/



# Self-Harm

**Information about supporting young people who self-harm for school staff in Cornwall and the Isles of Scilly.**



*"Don't get me wrong, not in a heartbeat do I think that self-harm is a good or positive thing, or anything besides a heart-breaking desperate act that saddens me every time I hear about it. But there's a reason why people do it."*

For more information about our school policy for managing self-harm and how to get help / advice contact:

## What is self-harm?

Self-harm is where someone does something to deliberately hurt themselves when they find things difficult to cope with. **It can include things like:**

- Cutting
- Overdosing (self-poisoning)
- Hitting (self and others)
- Burning or scalding
- Picking or scratching skin
- Pulling hair
- Ingesting toxic substances (like bleach)
- Eating disorders

*“Self-harm used to be a way of getting rid of the feelings inside me. To get rid of all the hurt, anger and pain that I was feeling... Something that I have always done to mask my feelings. I don't know how to release my feelings in any other way and find talking exceptionally difficult.”*

## Who self-harms?

There is not one type of person who self-harms. It does not depend on sex, age, religion or background. Both sexes self-harm, but their methods may be different, for example males may engage in behaviours such as fighting. **Both adults and young people can self-harm.** LGBTQ young people, those who have been abused or witnessed Domestic Violence, have been in care/ adopted, identify as emo, been bullied or experienced parental substance misuse are **potentially** more at risk of self-harm or other mental health concerns.

## Why do people self-harm?

People self-harm for a number of reasons. Something might have happened to make them feel bad about things. This could be stress or anxiety, friendship or relationship difficulties, isolation or loneliness, low self-esteem, questioning sexuality or gender. **But often there is no known cause or trigger.**

Some reasons given by people who self-harm include:

**Relief of feelings** By hurting themselves, people say they are able to release feelings that seem unbearable when held inside.

**Distraction** Self-harm can provide distraction from internal emotional pain.

**Communication** Self-harm may be a way of communicating distress.

**Comfort** Self-harm may be experienced as soothing and comforting; from the release of

tension, but also by providing an opportunity to seek care and nurture from others.

**Feeling alive or real** Sometimes life experiences leave people feeling numb. Hurting their body may be a way of making them feel alive and real again.

**Self-punishing** Some people carry feelings of shame, low self-esteem and self-blame, and may harm themselves as a way of punishing themselves.

**Control** Self-harm can be a way of feeling in control when other things in people's lives feel out of control.

## Is there a link to suicide?

People often think that self-harm is linked to suicide; however the vast majority of people who self-harm are not trying to kill themselves.

## Is self-harm attention-seeking or 'fashionable'?

Anyone who is self-harming is struggling with difficult feelings and their behaviour needs to be seen as indication of an underlying problem, not attention-seeking. In fact, most people who self-harm go out of their way to hide any evidence of what they've been doing, even from close friends and family.



## Websites and Social Media

There is some concern about the role of the web and social media in encouraging self-harm or copycat behaviour. This can be linked to publicity about 'celebrity self-harm or sites that encourage young people to share experiences or photos of self-harm, or that actively promote self-harm.

That it is why it is important to encourage the signposting of trusted, safe sites when looking for information about self-harm and support available. See list on back.

## How to help

- **Don't panic or over-react** if someone discloses self-harm (even if you feel shocked). Respond to the trust you've been shown by reassuring and listening non-judgmentally.
- **Telling someone who self-harms to simply stop is not helpful.** Taking away their chosen form of coping could be dangerous. Developing new coping strategies may take time and may need professional support.
- **Don't take away control;** involve the young person in discussions about next steps - referrals, appointments and parental involvement.
- **You are not alone.** Know your school's policy on self-harm. If possible, attend training to help you understand and respond to self-harm.
- **If you receive a disclosure you must tell the school Safeguarding Lead.** Ensure that the young person knows who you will need to share information with to help keep them safe.
- Supporting a young person with self-harm issues may evoke a variety of feelings. **It's important to seek support for yourself when needed.**

*“Supporting someone who self-harms can be very difficult and challenging. It can create many feelings, including fear, anger, frustration, helplessness and sadness. It is very important that people supporting the young person are in turn supported (by friends, colleagues and managers) to help them to deal with their feelings.”*

### Harm minimisation

Staying safe is an important message for someone who self-harms, so that the physical risks, such as infection, are reduced as much as possible. Make sure that anyone who discloses self-harm understands the risks and know how to minimise them. This includes keeping wounds (and any implements used) clean.

Your specific school policy **may** include access to first aid supplies in school. This is not condoning / promoting self-harm, rather recognising that young people can't just stop but helping them to stay safe while they get support.

At the same time, help the young person try to find strategies to reduce the self-harm such as distraction techniques. There are a list of possible strategies included in the young person leaflet.

## **Appendix 7 – What is helpful and what is not helpful in supporting young people who have self-harmed?**

### **Things that young people have said are their most successful alternatives to self-harming:**

#### **What you can do**

If you are at all concerned that the young person is at risk or worried about their mental health it is advisable to seek advice from your school, Primary Mental Health Worker or CAMHS (as outlined above in Appendix 2).

If it is felt that the self-harm is not a major threat to the young person's safety, it may be appropriate to support the young person within their present situation. Listening and caring is the most important thing you can do to help. It might not seem much, but showing that you want to know and understand can make a lot of difference.

Seeing the person behind the self-harm is important to show that you care about the whole person and not just the self-harm. The person may find it much more helpful for you to focus on their feelings, rather than dwelling on the self-harm. Accepting the self-harm helps them cope and can help to show that you understand that, at the moment, self-harm works for the person when nothing else can.

Accepting mixed feelings is very helpful. The young person might hate their self-harm, even though they might need it. It helps the person a lot if you accept all of these changing and conflicting feelings.

Help the young person find further support. They may need help in addition to what you can give. You can support and encourage them in finding this (see the self-harm leaflets – Appendix 4, 5 and 6).

Show concern for the young person's injuries. By offering the same compassion and respect you would show for any other sort of injury, you are showing the person that their body is worth caring about. If the person shows you a fresh injury, offer the appropriate help in the same way as if it was an accidental injury. There is no need to overreact just because it is self-inflicted. Voice any concerns you may have but listen to the person's feelings about what they want to happen. Work out, together, a way of taking care of their health and safety.

It is important to recognise how hard it may be for the young person to talk to you. It may take a lot of courage for a young person to discuss their self-harm and their feelings, and it may be difficult for them to put things into words. Gentle, patient encouragement can help.

Help the young person find alternatives to self-harm. Replacing the self-harm with other, safer, coping strategies can be a positive and more helpful way of helping the young person to cope. Young people have said that their most successful alternatives include:

- Hitting pillows, cushions or bean bags and having a good scream.

- Going for a walk, run or other kinds of exercise.
- Snapping an elastic band on their wrist.
- Writing down thoughts/feelings on paper and maybe ripping them up.
- Or scribbling on and/or ripping up paper.
- Keeping a diary.
- Calling and talking to a friend.
- Creative alternatives like art or listening to music.
- Looking at self-help websites.
- Having a bath/using relaxing oils eg lavender.
- Using a pen to draw on skin in the place they might usually cut.
- Holding an ice cube against their skin instead of cutting.
- Wrapping the usual 'tool in a whole roll of sticky tape so that it's difficult to access. They are not removing the tool, just giving them time to think about what they want to do.
- Encourage the young person to set themselves a target, eg 10 minutes, and promise themselves not to harm in this time; once they get to the 10 minute point, they set a new target of 15 minutes, and continue...

### **What not to do**

Don't tell the person off or punish them in some way. This can make the person feel even worse, so could lead to more self-injury.

Don't blame the young person for your shock and upset. You have a right to feel these things, but it will not help if you make the person feel guilty about it.

Don't jump in with assumptions about why the young person is self-harming. Different people have different reasons and it is best to let the young person tell you why they do it.

Don't avoid talking about it. Avoiding talking about it won't make the self-harm go away, but will leave the young person feeling very alone.

Don't try to force them to stop self-harming. Doing things like hiding razor blades or constantly watching the young person doesn't work and is likely to lead to harming in secret, which can be more dangerous.

Don't ask a young person to promise not to self-harm. This will not work, but is likely to put a lot of emotional pressure on the young person and can set them up to feel guilty.

Don't treat the young person as mad or incapable. This takes away their self-respect and ignores their capabilities and strengths.

Panicking and overreacting can be very frightening for the young person. It is better to try and stay calm and take time to discuss with them what should be done next.

Don't forget to look after your needs when supporting a young person who is self-harming. It is important to seek support for yourself when needed, perhaps by being able to talk to a colleague or supervisor.

## Appendix 8 – Working with Parents

The book 'Self-Harm and Eating Disorders in Schools: A Guide to whole school Strategies and Practical Support' (2015) has some very helpful guidance about working with parents. This includes guidance on how to set up the first meeting with parents/carers, and bearing in mind

- Location
- Who should attend
- The room set up
- Remaining objective
- Focusing on practical steps
- Agreeing next steps
- Giving them information to take away

It is always preferable to inform a parent of their child's self-harming behavior in a face-to-face meeting where you can read and respond to body language. However, it is not always possible so you may have to have the initial conversation on the telephone. Bear in mind the following issues:

- Which parent/carer the student would prefer you to speak to.
- Plan what you want to say (it may be helpful to have a checklist such as the one provided in the reference above).
- Call at a time which is good for both you and the parent/carer (so that the conversation is not rushed).
- Focus on the call.
- Ask how the parent/carer is feeling.
- Encourage the parent/carer to ask questions.
- Suggest a face-to-face meeting.

## Appendix 9 – Confidentiality

- Professionals should adhere to their own school guidelines regarding information sharing and confidentiality. The child/young person must be involved wherever possible and consulted on his/her views.
- Professionals should always take age and understanding into account when involving children and young people in discussions and decision making – Gillick competence.
- There should be clear explanations about what is going to happen and the choice and rationale for certain courses of action.
- It is important not to make promises of confidentiality that you cannot keep. Professionals should tell a child/young person when they may have to share information without their consent, if they are, or someone else is, at risk of significant harm.
- Information given to professionals by a child/young person should not be shared without the child/young person's permission except in exceptional circumstances. Such exceptional circumstances will include:
  - A child is not old enough or competent enough to take responsibility for themselves (Gillick competence).
  - Urgent medical treatment is required.
  - The safety and wellbeing of a child/young person is at risk, or there is the possibility of harm to others (ie child protection or suicide).
  - By virtue of statute or court order.
  - For the prevention, detection or prosecution of serious crime.
- If there is reasonable professional concern that a child may be at risk of harm this will always override a requirement to keep information confidential. If a child or young person reveals that they are at risk, the practitioner should follow the local safeguarding process immediately.
- Find out whether the young person would like to be with you when you talk to parents/carers.
- Keep the young person informed.

## Supporting the Emotional Health and Wellbeing / Resilience of Young People in Cornwall and the Isles of Scilly

This work on self-harm is a partnership project by Cornwall Council, NHS Kernow, Council of the Isles of Scilly, schools and young people

It has been published and disseminated by the Cornwall Children and Young People Wellbeing / Healthy Schools Team on behalf of the group.

Copies of the guidelines and the accompanying leaflets for Young People, Parents & Carers and School Staff can be downloaded from our website:

[www.cornwallhealthyschools.org/](http://www.cornwallhealthyschools.org/)

You can also use the website find out more information about our work to support Emotional Health and Wellbeing / Resilience of Young People and the work of our partners across Cornwall and the Isles of Scilly.

Further information / guidance for Young People and Parents & Carers can also be found on our Young People Friendly Services website:

[www.savvykernow.org.uk/](http://www.savvykernow.org.uk/)

