Kirklees Council

Self-Harm



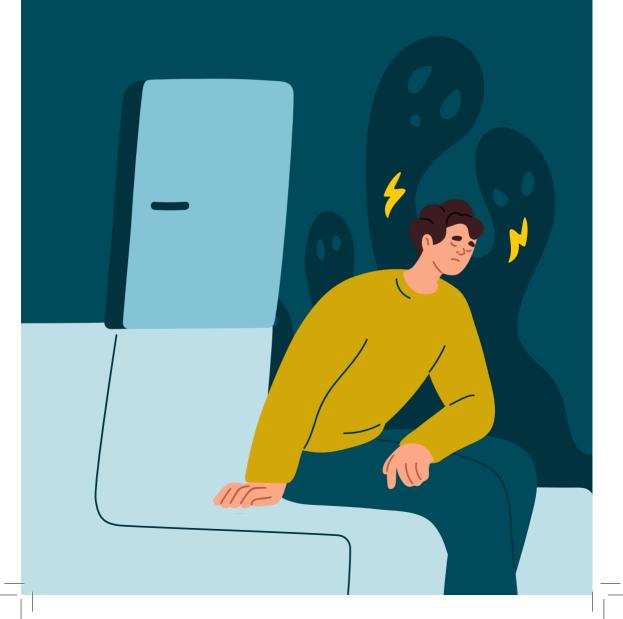




This guide is to support anyone who works with children and young people to have:

A conversation about self-harm more confidently.

An increased awareness about self-harm and associated signs and symptoms.



WHY HAVE WE CREATED THIS GUIDE?

When a young person self-harms, it can be upsetting, difficult and complex to address. This is a supportive guide, to help overcome some of these difficulties and provide some reassurance to those working with voung people. This guide has been created to try and get the conversation going, to reduce stigma around self-harm and improve confidence for those who work with young people. This guide has been produced with support from: Kirklees Council Public Health, Children and Adolescent Mental Health Services (CAMHS). Northorpe Hall. South West Yorkshire Partnership NHS Foundation Trust. Battle Scars and Child Protection & Family Support Social Workers, Elements of this guide have been reviewed by children and young people from Northorpe Hall Youth Voice Group.



WHO IS THIS GUIDE FOR?

Anyone who works with children and young people. Some examples of roles are given below:

- · School teachers, teaching assistants, lunchtime supervisors
- External staff who work within schools
- Health professionals, including A+E staff, nurses, GP's
- · Children and young people community services
- · Volunteers
- Other public services such as transport or police
- Social Workers and Family Support Workers

WHAT IS SELF-HARM?

A young person may self-harm to help them cope with intense feelings or to feel more in control.

Self-harm can take many different forms and be very complex, but every action should be taken to support an individual who selfharms. It is important to try and understand the causes for their self-harming behaviours.

Remember any person could selfharm, but every person is different.

Possible reasons behind self-harm:

- Dealing with emotions, feelings or overwhelming situations and experiences
- An expression of personal distress
- To try and regain control over something
- · Boredom
- Individuals can also self-harm when they are happy
- Self-harm can go undetected. It's not always obvious. It could be something that's easily disguised as something else and could crop up at any time.

Some examples of self-harm include (in no particular order):

- Self-poisoning
- Overdosing
- Eating disorders
- Pulling hair
- · Putting self in dangerous situations
- Neglect
- Obsessive compulsive disorder
- Sabotaging relationships
- Burning

Bitina



Types of behaviour to look out for:

- Panic attack symptoms
- Changes in ability to pay attention
- · Needing to be alone
- · Mood dropping
- · Retreating inside
- · Manic behaviour
- · Being severely agitated



CONTEXT

National

Self-harm does not necessarily mean someone is experiencing suicidal thoughts or feelings. However, as well as being an important issue to address, we know that self-harm is associated with a significant risk of subsequent suicide. It is therefore important that we focus efforts on prevention and the provision of consistent high-quality care for self-harm (Suicide Prevention in England, 5 year cross-sector strategy, 2023-2028). During the Covid-19 pandemic, a study showed that lockdown restrictions were identified as influencers of self-harming behaviours: such as reduction of services, isolation, and loneliness (Hawton et al., 2021).

Local

Rates of emergency hospital admissions for self-harm amongst 10–24-year-olds in Kirklees are 269 per 100,000 (2021/22). This is lower than the Yorkshire and Humber rate of 321 per 100,000 and the England rate of 427 per 100,000 (2021/22). Despite the rates being lower in Kirklees, the occurrence of self-harm in all communities is likely to be much higher. Therefore, we must continue to focus our efforts locally in raising awareness of self-harm and supporting parents and professionals to feel better equipped to have supportive and non-judgmental conversations.

Links

https://www.gov.uk/government/publications/suicide-prevention-strategy-for-england-2023-to-2028

https://www.sciencedirect.com/science/article/pii/S0165032721000288

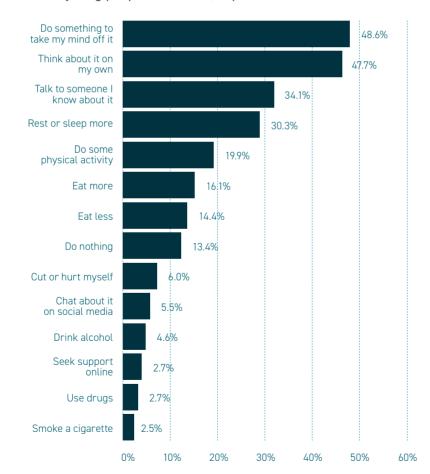
KIRKLEES YEAR 9 SURVEY 2023

2255 year 9's from 17 different Kirklees schools took part in the survey. From this, 6% of children said they would cut or hurt themselves to deal or cope with their worries.



Dealing with worries

What young people do to deal/cope with their worries:



OPENING UP THE CONVERSATION

Do...

- Approach them, e.g. ask "are you struggling?". They will find it extremely difficult to tell you without a prompt
- Listen building trust is the best way forward
- Respect boundaries let them control the conversation
- Be honest if you don't understand
 tell them you don't understand
- Be honoured if they told you

 this can take a lot of trust

 and courage
- Try to work on identifying triggers with them
- Treat them as any other person – don't show hate
- Offer to talk about it: "would you like to talk about it?" but don't insist
- Encourage first aid and cleanliness to avoid risk of infection
- Encourage them to seek medical attention if required
- Call 999 or rush them to hospital if they have overdosed or self-poisoned

Don't...

- Show disgust or hate. Instead, honest reactions (e.g. shock, surprise) are expected or even hoped for
- Make assumptions. Instead, help them get to the root of the problem and encourage them to reach out to you when they're struggling
- Ask why they might not know at this time or be ready to open up
- Ask them to stop. It's not that simple. Instead, you can offer your support to be there no matter what
- Add guilt they will already be feeling bad enough
- Take away their 'tools', unless there is strong indication of suicidal intent, or they ask you to
- Treat self-harm as a disorder or disease
- Make them self-conscious of their scars or ask to see them
- Pressure to talk if they feel uncomfortable
- Refer to them as a 'self-harmer'.
 Self-harm is what they do, not who they are

WHAT DO YOUNG PEOPLE SAY ABOUT SELF HARM?

"LET US CHOOSE WHO WE WANT TO TALK TO"

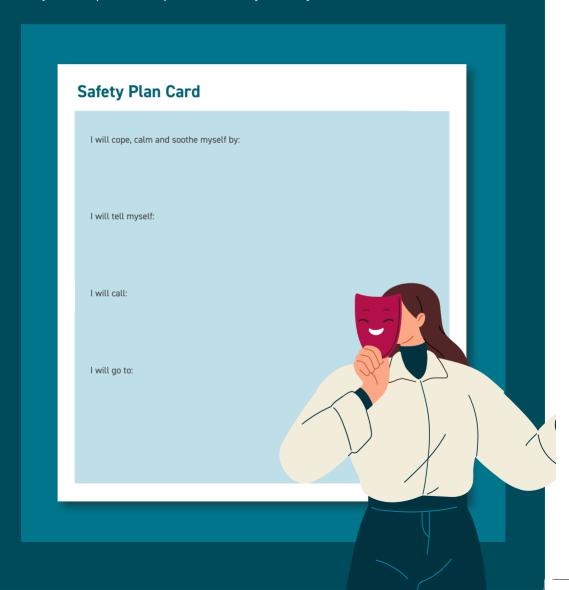
"BECAUSE SELF-HARM IS QUITE TABOO IT'S QUITE HARD TO TALK ABOUT, AND I WAS WORRIED ABOUT HOW PEOPLE WOULD REACT" "OPEN UP TO "TELL OTHERS ON A NEED-TO-PEOPLE YOU KNOW BASIS" TRUST" "TREAT US WITH RESPECT"



SUPPORT & MANAGEMENT STRATEGY IDEAS

Safety Plan Cards:

By supporting a child or young person to use the safety plan cards, they can help to develop their own ways to stay safe from harm.



Trigger Log:

The trigger log has been designed to support children and young people to identify with what triggers their feelings and emotions.

This shouldn't be given to a young person to complete on their own, but could be completed with a friend, family member or support worker.

Trigger Log Complete when you feel triggered to self-harm. Where was I? (at home, at work, in a mental health service? What time was it? (8am, noon, late evening?) Who was I with? (family, no one, professional) What happened? (did someone say something, did I see something?) How did I feel? (upset, sad, angry anxious?) Can I identify the trigger? If yes what was it? How can I avoid that trigger? How could I let it affect me less next time? (talk to someone, use distractions)



SHARING INFORMATION

Sharing information with parents/carers

Whenever it is possible, the young person should be involved in decision-making around their care. This will help to develop a trusting relationship between the professional and child. However, the child's capacity to make this decision should be considered.

Sharing information with parents/carers can be very beneficial, as it helps to build on a collaborative approach to the child's care. It will also help develop a shared understanding of the child's needs and difficulties.

Sharing information with professionals

There may be a time when it is necessary to share information about a child or young person with another professional. This might be due to them changing class at school or a care provider leaving.

The best way to make a child aware of this is to let them know from the beginning of a conversation that what they do say could be shared if it is necessary to keep them safe. However, remind them that you are there to help.

This is an important time to support the young person as much as possible, remain open with them and monitor the progress of the transition. This will also help to ensure the young person feels in control of their care.

CONFIDENTIALITY GUIDANCE

If there are risks to an individual's safety, then confidentiality might be breached. If someone is engaging with support and the self-harming behaviour is controlled, then confidentiality may not need to be breached.

As documented in the latest NICE Guidance (2022), schools and educational settings should have:

 Policies and procedures for staff to support students who self-harm

Battle Scars, a self-harm support charity in Leeds, provide guidance on their website for how to write a self-harm policy that works for your workplace:

https://www.battle-scars-self-harm. org.uk/uploads/2/5/5/3/25538523/ bs_self_harm_policy_flowchart_ v3_11-04-2020.pdf

Young people can be involved in the design process too, to help make the policy more appropriate for them.

TRAINING AND AWARENESS FOR PROFESSIONALS

Health Education England:

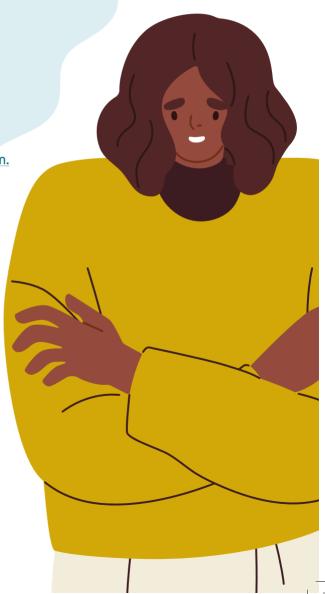
e-learning for healthcare modules e.g. Suicide and Self-Harm Prevention—Skills for Adults https://portal.e-lfh.org.uk/

Battle Scars: Private or individual booking for 2-hour or 1-day workshops. Includes complexity of self-harm, common myths, how to talk about self-harm and triggers (to name a few). https://www.battle-scars-self-harm.org.uk/self-harm-training.html

MindEd: Further training available for those volunteering, working or studying in the field www.minded.org.uk

Kirklees Council Mental Health Webpage:

Up-to-date information on all types of mental health-related training courses in Kirklees. https://www.kirklees.gov.uk/beta/mental-health/mental-health-training-courses.aspx



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