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SELF HARM

How to think about it and what to do about it at a practical level

AN EPIDEMIC?

Health

NHS figures show 'shocking' rise in self-harm among young

Upward trend is more pronounced among girls and is evidence of increased social pressures on children, say experts



This article is 10 months old

<
2,642

Denis Campbell Health
policy editor

Sunday 23 October 2016 16.40 BST



Pressures on young people included those at school, on social media, family breakup, growing inequality, body-image fears, abuse and increasing sexualisation. Photograph: Artranq/Getty Images/iStockphoto

The number of children and young people self-harming has risen dramatically in the past 10 years, new [NHS](#) figures obtained by the Guardian show.

The sharp upward trend in under-18s being admitted to hospital after poisoning, cutting or hanging themselves is more pronounced among girls, though there have been major rises among boys too.

Experts say the rise is shocking confirmation that more young people are experiencing serious psychological distress because they are under unprecedented social pressures.

The number of girls under 18 who have needed hospital treatment after poisoning themselves has gone up from 9,741 in 2005-06 to 13,853 - a rise of 42% - figures

is-figures-show-shocking-rise-self-harm-young-people#img-1 by NHS Digital show. The numbers of boys ingesting a poisonous

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SERIOUS
THAN IT
EVER WAS?

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Self-harm hospital admissions of children show 'frightening rise'

9 December 2016 Health



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THINKSTOCK

Self-harming was a massive release for Sophie at a difficult time in her life, but she ended up in hospital aged 15 - like thousands of other children in England and Wales.

The children's charity NSPCC says nearly 19,000 children were admitted to hospital after harming themselves last year - a 14% rise over three years.

It called the figures "frightening".

MORE
SERIOUS
THAN IT
EVER WAS?

In 2014, 20% of young women
reported having ever self-harmed
(2 x the rate in young men
3 x higher than 5 years ago)

McManus S, Hassiotis A, Jenkins R, Dennis M, Aznar C, Appleby L. 'Chapter 12: Suicidal thoughts, suicide attempts, and self-harm', in McManus S, Bebbington P, Jenkins R, Brugha T. (eds) *Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014*. Leeds: NHS Digital

WHY TALK ABOUT IT?

Over half of young people who die by suicide have a history of self-harm

The National Confidential Inquiry into Suicide and Homicide by People with Mental Illness *Suicide by children and young people in England*. Manchester: University of Manchester, 2016.

http://research.bmh.manchester.ac.uk/cmhs/research/centreforsuicideprevention/nci/reports/cyp_report.pdf

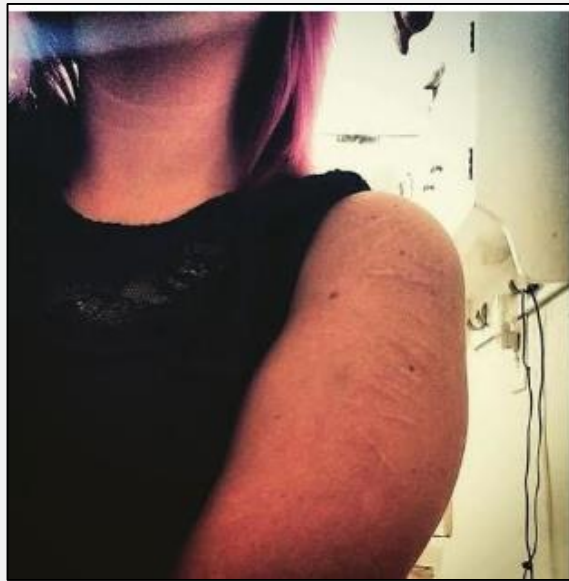
Self harm increases the risk of suicide 10 x

A
PRECURSOR
OF A MAJOR
KILLER IN
THE UK

Suicide is the leading cause of death in young people¹, accounting for 14% of deaths in 10-19 year olds²

1. Office for National Statistics (ONS) Suicide in the United Kingdom, 2014 Registrations. *Statistical Bulletin* 2016:1-33.

2. Office for National Statistics (ONS) Deaths registered in England and Wales: 2015. *Statistical Bulletin* 2016: 1- 8



SO WHEN YOU'RE
FACED WITH THIS...

....as you're delivering HPV
vaccines for example

WHAT SHOULD
YOU HAVE IN
MIND?

Remember

- the shame and secrecy that's often associated with this behaviour
- the importance of this act as a communication which needs to be responded to with care
- the association between self harm and difficulties in intimate relationships

THIS IS A COPING STRATEGY

Maybe not the best, but this is the way this young person is managing unmanageable stuff at present



TEENAGE MISADVENTURE

[HTTPS://VIMEO.COM/191623587](https://vimeo.com/191623587)

COMMONEST METHODS

- Self-poisoning (often medication overdose)
- Self-injury (often cutting)

OTHER WAYS TO SELF HARM

- hitting or bruising
- intentionally taking too little or too much medication
- burning
- hanging
- suffocation

COMMONEST CAUSES

- Problems with family, friends and peers
- Sexual orientation. If LGBT likely to suffer bullying
- Psychiatric disorders including substance misuse and conduct problems leading to criminal justice issues (60% of older adolescents with self-harm have depression)

HOW SHOULD YOU BEHAVE?

Stay calm, unflustered and most of all give out NON-JUDGEMENTAL vibes

Perhaps say something like
“I can see you’ve been cutting. Is that something you’ve been using as a way of coping for a while?”

Really listen to their answer

- ▶ A to Z index
- ▶ Mental Health Services
- ▶ Mental Health Info Shop
- ▶ More information
- ▶ Problems & Disorders
- ▶ Parents and Youth Info
- ▶ Partners in Care Campaign
- ▶ Treatments & Wellbeing
- ▶ Choosing Wisely

No Harm Done



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Tweets

Hmm, an empty timeline.
That's weird.

Check for Tweets

[HTTP://WWW.RCPSYCH.AC.UK/HEALTHADVICE/NOHARMDONE.ASPX](http://www.rcpsych.ac.uk/healthadvice/noharmdone.aspx)

3 MAIN STEPS

1. LISTEN

2. HEAR

3. SUPPORT

and include **RISK
MANAGEMENT** in your
support

LISTENING

Now, not later

Let them see you're
working hard to keep
the space private

Put off anything that's
not urgent ie give them
your time

HEARING

Let them talk as much as they need to / can without interrupting to clarify or ask questions

Use echoing statements, containing their words, to check back in that you've understood correctly

SUPPORTING

Recognise internally the unbearableness, for them, of whatever situation has driven them to this

Promote a message of hope*

Don't offer simplistic platitudes or over-share**

SAFETY

Physical: are they at any immediate medical risk?

Safeguarding: are they currently at risk from others, either adults/parents or peers?

Mental: are they actively suicidal?

CASE I

Maria (in Year 9) is brought to your office by her friend, Ellie. Maria told her this morning that she'd had a row with her mum last night and taken some of her mum's medicines. Today at school, Maria has been complaining of feeling sick. It's now the beginning of morning break.

How do you talk with Maria?

What do you need to do?

Who do you need to talk to?

How do you follow through?

CASE 2

It's the beginning of the autumn term. Aisha (Year 11) is brought to see you by the PE teacher. She had become very challenging at the beginning of the PE lesson, refusing to get changed. The teacher knows her well, and knew this wasn't in character. She asked if everything was OK, and Aisha showed her a tiny bit of her forearm, saying she didn't want everyone to see 'this' (there were multiple fine cuts)

How do you talk with Aisha?

What do you need to do?

Who do you need to talk to?

How do you follow through?

CASE 3

You are school nurse for a secondary PRU and you know Jerome well. You're rather fond of him. He's in Year 10 and is always breaking things at school - breaking things in a way that leaves him with cuts/broken flesh and sometimes badly bruised knuckles, one time a broken finger. He's got a really hard home life, and recently his levels of destructiveness have massively increased. Last week the police picked him up for fast driving a stolen moped. He comes to see you with more skin wounds.

Is this self harm?

What can you do?

How can you best help Jerome get the help he needs?

How do you follow through?

EDUCATION
AND PSYCHO-
EDUCATION IN
THE LONGER
TERM

Cutting is addictive; you get opiate release. Substituting exercise can work longer term. Praise resisting cutting.

Danger is a great distraction from misery

Cuts need to be kept clean

Cheloid is an issue with non-white skins (bio-oil daily)

FUTURE PLANNING

Identify times that they are likely to feel more stressed/upset/distressed

What signs can they look out for that mean they are going to enter a self-harm-at-risk zone?

What can they do to reduce the emotional build up?

ADVICE FOR PARENTS AND CARERS

- ▶ A to Z index
- ▶ Mental Health Services
- ▶ Mental Health Info Shop
- ▶ More information
- ▶ Problems & Disorders
- ▶ Parents and Youth Info
- ▶ Partners in Care Campaign
- ▶ Treatments & Wellbeing
- ▶ Choosing Wisely
- ▶ Translations
- ▶ Work and Mental Health

No Harm Done



Things can change
Information and help for young people worried about self-harm.
[Download the PDF >](#)

A parent's journey
Next steps for parents or carers whose child is self-harming.
[Download the PDF >](#)

Professionals' pack
Recognising and responding to self-harm outlines next steps for staff working with young people.
[Download the PDF >](#)

consolidated pack
Download all three resources (Things Can Change, A Parent's Journey and Recognising and responding to self-harm) as one PDF file.
[Download the PDF >](#)

About the project

No Harm Done – three short films, co-created with young people, parents and professionals, reflecting their real life experiences of self-harm. The films provide hope and give practical

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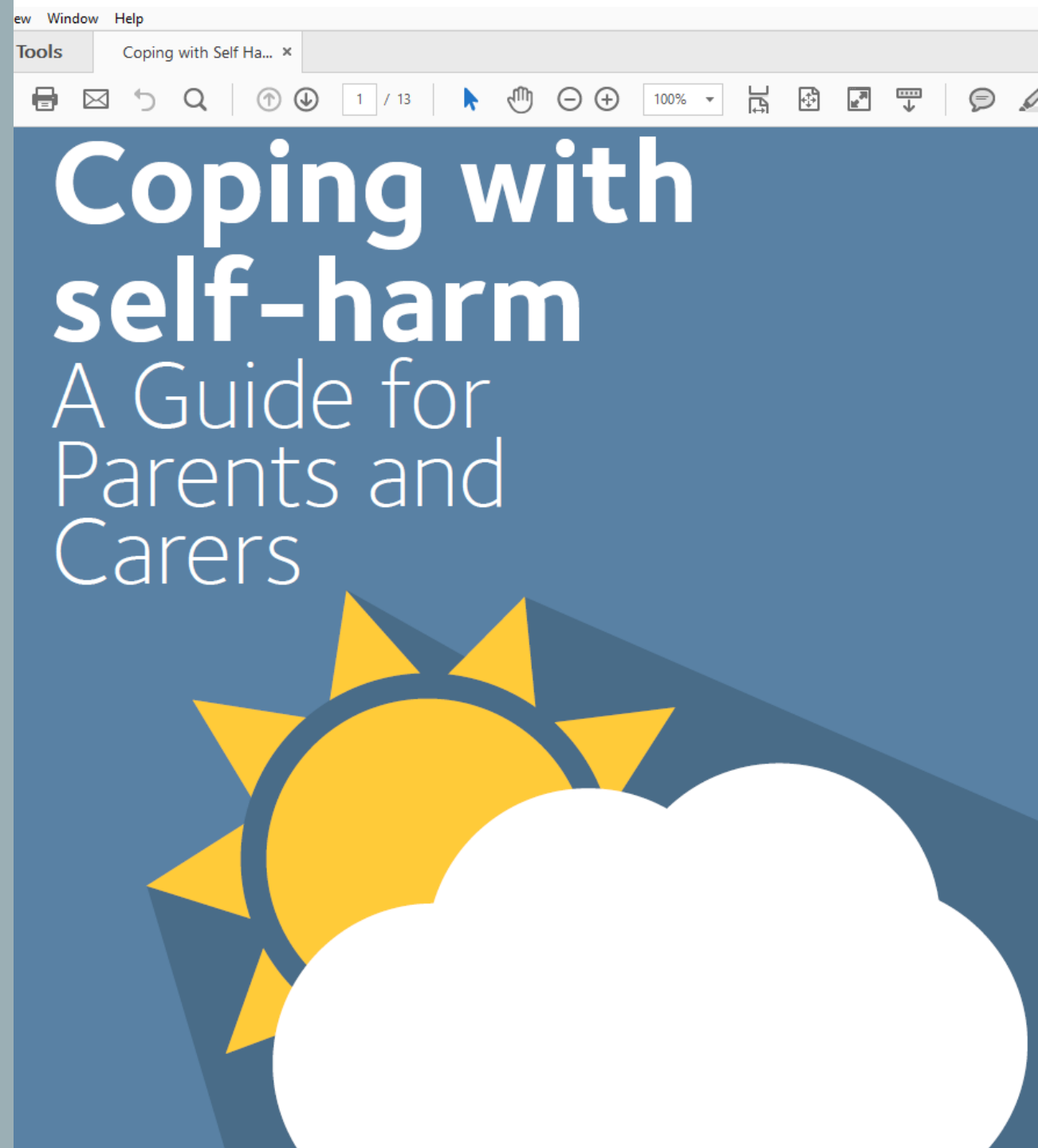
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ADVICE FOR
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ADVICE FOR PARENTS AND CARERS



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Key facts about psychiatry

TRAIN IN PSYCHIATRY
Training, exams & events

WORK IN PSYCHIATRY
Supporting members and services

USEFUL RESOURCES
Books & key tools

HEALTH ADVICE
Information about mental health

Royal College of Psychiatrists ▶ Health Advice ▶ Parents and Youth Info

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Mental Health and Growing Up Factsheet

Self-harm in young people: information for parents, carers and anyone who works with young people



About this leaflet

This is one in a series of factsheets for parents, teachers and young people entitled *Mental Health and Growing Up*. This factsheet looks at the reasons behind why people self-harm, and offers advice about what to do to help.

- [Michelle's story, aged 16](#)

What is self-harm?

Self-harm is a term used when someone injures or harms themselves on purpose rather than by accident. Common examples include 'overdosing' (self-poisoning), hitting, cutting or burning oneself, pulling hair or picking skin, or self-strangulation. Self-harm is always a sign of something being seriously wrong.

Why do young people harm themselves? Unfortunately some young people use self-harm as a way of trying to deal with very difficult feelings that build up inside. This is clearly very serious and can be life threatening. People say different things about why they do it.

- Some say that they have been feeling desperate about a problem and don't know where to turn for help. They feel trapped and helpless. Self-injury helps them to feel **more in control**.
- Some people talk of feelings of anger or tension that get bottled up inside, until they feel like exploding. Self-injury

Who is at risk?

An episode of self-harm is most commonly triggered by an argument with a parent or close friend. When family life involves a lot of abuse, neglect or rejection, people are more likely to harm themselves. Young people who are depressed, or have an eating disorder, or another serious mental health problem, are more likely to self-harm. So are people who take illegal drugs or drink too much alcohol.

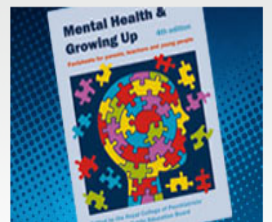
Many young people who self-harm with a wish to commit suicide also have mental health or personality difficulties; often the suicide attempt follows a stressful event in the young person's life, but in other cases, the young person may not have shown any previous signs of difficulty.

Sometimes the young person is known to have long standing difficulties at school, home or with the police. Some will already be seeing a counsellor, psychiatrist, or social worker. There has been an increase

LOGIN - MEMBERS AREA +

Make a donation

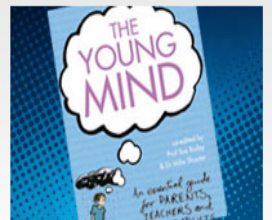
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Mental Health and Growing Up: Factsheets for parents, teachers and young people

[Read the factsheets](#)

[Buy as a book](#)



The Young Mind: an essential guide for parents, teachers and young adults

Support us

Print this leaflet

A GREAT TRAINING WEBSITE

The screenshot displays the MindEd website interface. At the top, there is a green header bar containing the MindEd logo, a 'Live Chat' button, a search bar with the text 'Search the e-learning', and the NHS Health Education England logo. Below the header, a 'Home' link is visible. The main content area features a list of training resources, each with a MindEd icon, a title, an 'Expand All' link, and an information icon. Some items also have a 'Launch' button. The list includes:

- MindEd Core Content (Universal) - Expand All
- MindEd Counselling - Expand All
- MindEd Healthy Child Mental Health Framework - Expand All
- MindEd Targeted & Specialist CAMHS - Expand All
- MindEd Digital Risk Resources - Launch
- MindEd For Families - Launch
- MindEd General Resources - Launch
- MindEd Learning Paths - Expand All

At the bottom of the page, a green footer bar contains the text: 'e-LH is a Health Education England Programme in partnership with the NHS and Professional Bodies'.

A GREAT WEBSITE FOR YOUNG PEOPLE



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Check in with how you're feeling and try short activities
tuned to your emotions.

AVAILABLE ON:





USEFUL WEBSITES

- <http://www.rcpsych.ac.uk/healthadvice/noharmdone.aspx>
-
- <https://www.psych.ox.ac.uk/news/new-guide-for-parents-who-are-coping-with-their-child2019s-self-harm-2018you-are-not-alone2019>
-
- <http://www.rcpsych.ac.uk/healthadvice/parentsandyoungpeople/parentscarers/self-harm.aspx>
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