



Durham Safeguarding Children Partnership

Children and Young People Self-harm Pathway

Information for Practitioners

Contents

Children and Young People Self-harm Pathway	3
Self-harm	4
Quick guide to help you decide who to ask for help or support	5
Key things to remember	8
What children and young people want practitioners to know about self-harm	10
Responding to the child/young person	11
Building a picture of self-harm (5 W's)	12
Top tips for communicating with parents/carers	13
Resources	14

Children and Young People Self-harm Pathway



Who is it for?

This pathway is for **all practitioners** working with children, young people and their families, from 'universal' services (that any child/young person can access) such as sports clubs, youth clubs, schools and school health to targeted and specialist services such as Family Help, Children's Social Care and crisis services.



Why have a self-harm pathway?

For practitioners to understand:

- » what self-harm is
- » why children and young people self-harm
- » how to help prevent self-harm if a child/young person is thinking about it
- » the signs of self-harm
- » know how to approach it or talk about it if a young person shows the signs or tells you they are self-harming
- » who you can speak to for support – to help you help the child/young person and support for the child/young person directly
- » what support is available and when to ask for it
- » what children and young people want us to know about self-harm

Self-harm

What is self-harm?

- » Deliberately hurting their own body on purpose
- » Usually, a way of showing that the child/young person is in distress

How do people self-harm?

- » Scratching
- » Cutting
- » Overdose
- » Burning
- » Biting
- » Choking

This list is not exhaustive so it's important that practitioners stay curious about the different ways that children and young people self-harm

What is the purpose of the self-harm?

- » For many young people, physical pain is a distraction from the emotional pain they are struggling with
- » A way to feel in control
- » Struggling with mental health
- » Can be a way of expressing or managing their feelings – could be linked to trauma
- » A way to feel something, when they often feel numb
- » A way of communicating/eliciting care
- » Self-punishment

How serious is it?

- » How long has it been going on?
- » How often is it happening?
- » How serious is the injury – Risk to life? Risk to health? Risk to emotional wellbeing?
- » What is the impact on the child/young person?

Be mindful of language when describing how serious the self-harm is. Referring to self-harm as 'superficial' or 'attention seeking' can mean that a child/young person's distress isn't acknowledged

Quick guide to help you decide who to ask for help or support

Prevention

Helping children and families to cope with stressful times. Spotting the signs that the child/young person is struggling.

Offer support that helps to create:

- » Sense of belonging
- » Caring and nurturing relationships
- » Involvement in activities
- » Positive self-esteem
- » Child/young person being able to share feelings and worries and know who they can talk to
- » Skills to build resilience, e.g. mindfulness, positive self-talk
- » A sense of control and agency in their life

What might we be seeing?

- » Tired or not sleeping well
- » Weight loss or gain
- » Unwashed hair or clothes
- » Changes to behaviour that are out of character
- » Changes at home, e.g. separation, loss, family illness
- » Lateness or absence from school
- » Signs of worrying, e.g. fidgeting, irritable, quiet, losing concentration
- » Constantly checking mobile phone
- » Falling behind in learning
- » Changes in friendship group

Getting advice

You've spotted some signs. Building a picture of what is happening and what else is needed.

This could include conversations with:

- » Child/young person themselves
- » The parent/carer
- » Other people who know the child/young person well, e.g. school, sports clubs

Explore other support in place.

Understanding the self-harm – is it a one off or ongoing?

Consider:

- » The '5 W's':
 1. What does the self-harm look like?
 2. What has happened to the child/young person in their life?
 3. What has triggered the self-harm?
 4. What keeps the self-harm going?
 5. What helps/what can we do about it?
- » Support as per prevention
- » Family Hub offer

What might we be seeing?

- » Nail biting, scratching, early signs of emotional distress
- » Possible history of self-harm
- » Other children making comments about self-harm
- » Changes in behaviour, e.g. acting out or withdrawing
- » Other children/family/community members involved in self-harm
- » Avoidance, low motivation
- » Covering up arms/legs or avoiding P.E.
- » Blood stains on clothes/tissues
- » Change in sleep pattern
- » Traumatic event
- » Anxious about school
- » Bed wetting

Quick guide to help you decide who to ask for help or support

Getting help

Self-harm has become a regular coping strategy. Risks and frequency are increasing, and the child/young person needs a plan of support.

Consider:

- » Family Help
- » Enhanced Pastoral Support in school
- » Therapeutic support in school, e.g. school counsellor
- » Emotional Health Team/Family Health Nurses
- » GP
- » Conversations with CAMHs (Child and Adolescent Mental Health Services)
- » Communicating with community services, e.g. sports clubs, youth clubs
- » Multi-agency meetings, e.g. Team Around the Family (TAFs) to co-ordinate support
- » Safety planning

What might we be seeing?

- » No improvement after previous advice/support offered
- » Behaviour that is out of character, e.g. withdrawn, aggressive, avoidance
- » Unexplained bruises, cuts, burns or bite marks on body
- » Cuts that aren't healing or frequent cutting
- » Changes in school – behaviour, attendance, attainment, friendships
- » Neglecting personal hygiene to a level that is unusual for that child/young person
- » Frequent headbanging
- » Sleep issues
- » Deliberate change in eating
- » Staying out late/not checking in
- » Experimenting with drugs/alcohol

Getting more help

Frequency and severity of self-harm is escalating, leading to injury and/or suicidal thoughts. Self-harm is seriously impacting on daily life. Treatment is needed. Be curious about what else might be going on in the child/young person's life.

- » CAMHs referral
- » Crisis team as needed
- » Safeguarding response
- » Safety planning

Provide co-ordinated support from services via multi-agency meetings.

What might we be seeing?

- » Signs in previous tables may or may not be present
- » Situation is getting worse despite support offered
- » Presenting behaviours are becoming more serious
- » Suicidal thoughts alongside self-harm
- » Sudden onset of more serious self-harm
- » Identification of a previously unknown traumatic event
- » Unable to attend school or access learning
- » Expressions of hopelessness, wanting to die
- » Socially isolated
- » Increased concerns from people who know the child/young person well
- » Impact on others, e.g. disruption in lessons

Quick guide to help you decide who to ask for help or support

Help in a crisis

The child/young person is at immediate risk of harm or has been harmed. There is risk of serious injury/being hospitalised. The child/young person is suicidal or plans to take their own life.

- » Attendance at A and E
- » Crisis team
- » Dial 999
- » Safeguarding response
- » Safety planning communicated across all agencies involved with the child/young person

Provide co-ordinated support from services via multi-agency meetings

What *might* we be seeing?

- » Signs in previous tables may or may not be present
- » Threat to take own life
- » Overdose
- » Cutting that needs medical attention
- » Intent to seriously harm themselves
- » Psychotic symptoms, e.g. hearing voices, hallucinations, paranoia

Key things to remember



The **reason for the self-harm and the level of risk can change or be fluid**, for example being told one thing, but seeing something else.

Asking questions is okay – e.g. ask if the child/young person is intending to end their life or not. This can help to identify what support is needed.

Self-harm doesn't automatically mean a child/young person wants to end their life. There can be both, but a child/young person can also be suicidal without any current or previous self-harm.

If a child/young person has taken an overdose or more tablets than they should, this needs to be investigated immediately on finding out, even if this is a few days later. **Any overdose or ingestion of substances/self-poisoning needs medical attention.** Remember, the impact of overdose affects everyone differently, so the child/young person needs to be checked over.

Practitioners should **'hand hold'** until the child/young person is receiving the right support. Risks can change quickly, and factors impacting on the child/young person and the self-harm can be complex, so we don't want gaps in service provision. Ensure that the family feels supported in this period. If you're not sure what support they are accessing, do ensure you find out.



It's not just physical signs – be on the lookout from the earliest opportunity for signs of emotional distress:

- » becoming very withdrawn and not speaking to others
 - » signs of depression, such as low mood, tearfulness or a lack of motivation or interest in anything
 - » signs of low self-esteem, such as thinking they're not good enough
 - » talking about ending things or not wanting to go on
-

Be a caring presence in the moment. Use active listening. By *being with* the child/young person, this will make a huge difference to how they experience the conversation.

If you see the signs, consider **who is the best person to speak to the child/young person about the self-harm.** Who do they trust?

Key things to remember



Confidentiality – the child/young person does need to be aware that if we think they are at risk of, or they are self-harming, then we need to share this. Remember to involve the child/young person and keep them informed. Who would they want you to tell? Who wouldn't they want you to tell and why? Who *could* we tell? Who do I *need* to tell and why?

Eating disorders – you may notice some similarities in signs and behaviours between self-harm and eating disorders, for example, both can be a way of coping with feelings, or a form of self-punishment. However, eating disorders can be complex and need a distinct assessment and treatment plan. Families should be encouraged to speak to their GP if they are worried about their child having an eating disorder.

For more information on eating disorders, please see [Beat Eating Disorders](#).



What children and young people want practitioners to know about self-harm

I was doing it for the sense of relief it provided

At school I would find excuses not to do P.E. so I wouldn't have to get undressed

The conversation with men about mental health needs to open up more, so we can move away from this 'man up' culture

Sometimes you just need to let the person know that you care about them and that you're there to listen

I want to talk to someone who I trust

Responding to the child/young person

Do

- ✓ Slow down and go at the child's pace. Take a calm, non-judgemental approach
- ✓ Have conversations about how they've been feeling lately (not just around self-harm)
- ✓ Use active listening skills, ask open questions and clarify if you aren't sure
- ✓ Establish if they need medical attention and stay with them if they are at immediate risk
- ✓ Be clear about your duty of care – follow procedures and involve the child/young person in any action you take
- ✓ Make sure you take time afterwards to reflect on your own feelings and any support you might need. Seek advice and support from colleagues/managers if you need it.

Don't

- ✗ Tell them to 'stop' or immediately offer solutions or alternatives
- ✗ Appear overwhelmed or panicking
- ✗ Use sanctions or consequences
- ✗ Ask them to talk to someone else, or assume someone else is dealing with it
- ✗ Make assumptions about the methods or the reasons – ensure you ask after each incident
- ✗ Make agreements you can't keep

Building a picture of self-harm (5 W's)
 – use this framework to help you in your assessment of the situation



Top tips for communicating with parents/carers

When a parent/carer finds out that their child has self-harmed, this can be hard to accept and it's natural to feel worried or upset. Some parents or carers may blame themselves or feel powerless to help. Self-harm may also be a coping strategy for things that are happening at home so it's important that parents/carers understand how to respond in supportive ways.

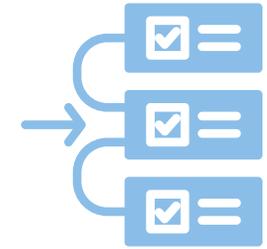


The following tips can be shared with parents/carers for them to try with their child:

- ★ Show your child that you are there for them when they choose to talk, and consider other ways they could communicate with you – for example writing something down, using text messages
- ★ Listen to your child and let them know that you take their feelings seriously and you want to try to help them
- ★ Let your child know that you care about them
- ★ Try to help them manage their feelings
- ★ Remind them of other ways to cope, but without judging their behaviour around the self-harm
- ★ Take talk of suicide very seriously
- ★ Don't let self-harm become the focus of your relationship with your child
- ★ Remind your child of their strengths and abilities
- ★ Work out with your child ways to make it less likely that they could seriously self-harm (e.g. by storing medication or removing sharp objects)
- ★ Watch for signs of bullying or abuse that may be triggering self-harm
- ★ Be vigilant about what they are accessing online



Resources



First Contact (including Emergency Duty Team) – 03000 267 979

– select 'safeguarding' if you have immediate worries about a child/young person's safety

CAMHs Crisis and Liaison Team – NHS 111 (select option 2) –

available 24/7 when the child/young person is in crisis

999 – in a crisis

Early Help Triage – 03000 267 979 (Option 1, Option 2 and

Option 4) – advice and guidance including signposting to support services and access to Early Help/Family Help support

Find out what's on at your nearest Family Hub – Durham – Family

Hubs offer a range of services in the community to support children and families from the earliest opportunity

Self-Harm: Guidance for School Based Staff – for more information

and advice about identifying and responding to pupils who self-harm

Specialist SEND and Inclusion Support – 03000 263 333 (Special

Educational Needs and Disabilities) – for further advice and support for schools

Young Minds – information for young people and parents/carers around difficult feelings and how to feel better

Calm Harm – a free app that helps children and young people manage or resist the urge to self-harm

NSPCC self-harm (National Society for the Prevention of Cruelty to Children) – advice for parents/carers and practitioners to help understand why children and young people self-harm and how to support them

Recovery College Online – information for young people and practitioners about mental health and wellbeing

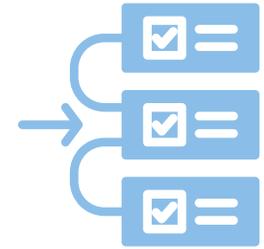
Anna Freud – resources for children and young people, families and practitioners to support children and young people's mental health

Self-Care Resources for Young People | Anna Freud

Papyrus UK Suicide Prevention | Prevention of Young Suicide

– is a child/young person you know not coping with life?
Resources for suicide prevention advice

Resources



Distractions – only to be used if the young person is ready for this and they don't want to be self-harming. We need to understand what the child/young person is trying to communicate through self-harm first

Kooth – offers free, safe and anonymous support to children and young people, whatever they may be feeling

Coping with self-harm: a guide for parents and carers – advice for parents and carers about how to cope when a child/young person in their life is self-harming

The Solihull Approach Model – Togetherness – understanding behaviour as communication and how best to respond

5 steps to mental wellbeing – NHS – trying these things could help a child/young person feel more positive and able to get the most out of life

Samaritans – available 24/7 if a child/young person needs someone to talk to

MindEd For Families – a free learning resource about the mental health of children, young people and adults

Waves – a support group for parents/carers living in Durham and Darlington who care for a child/young person with emotional or mental health difficulties

If U Care Share – offer free training around mental health and suicide prevention

National Crime Agency press release – for more information about the rise of online COM (Community) networks and their role in encouraging victims to self-harm



