

Self-Harm Policy

A Model Policy for Use in Schools / Colleges

Please feel free to adapt and adopt this policy which is based on work supported by the National Institute for Health Research under its programme Grants for Applied Research Scheme.

Self-Harm Policy

1. Introduction

Recent research indicates that about one in ten young people in the UK engage in self-harming behaviours, and that this figure is higher amongst specific populations, including young people with special educational needs. School staff can play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm.

2. Scope

This document describes the school's approach to self-harm. This policy is intended as guidance for all staff including non-teaching staff and governors.

3. Aims

- To increase understanding and awareness of self-harm
- To alert staff to warning signs and risk factors
- To provide support to staff dealing with students who self-harm
- To provide support to students who self-harm and their peers and parents/carers

4. Definition of Self-Harm

Self-harm is any behaviour where the intent is to cause harm to one's own body for example:

- Cutting, scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs
- Swallowing hazardous materials or substances
- Burning or scalding
- Hair-pulling
- Banging or hitting the head or other parts of the body
- Scouring or scrubbing the body excessively

You may also want to consider risk taking behaviours under this policy, including those involving sexual or psychological risk.

Self-harm is usually conducted at times of anger, distress, fear, emotional worry, low mood or low self-esteem in order to manage negative feelings. To gain an understanding of why people self-harm, see appendix 1.

5. Risk Factors

The following risk factors, particularly in combination, may make a young person particularly vulnerable to self-harm:

Individual Factors:

- Depression / anxiety
- Poor communication skills
- Low self-esteem
- Poor problem-solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse

Family Factors

- Unreasonable or unsustainable expectations of self or parents
- Neglect or physical, sexual or emotional abuse
- Poor relationship with parents
- Depression, self-harm or suicide in the family
- Being a currently or previously looked after child
- Being a young carer

Social Factors

- Difficulty in making relationships / loneliness
- Being bullied, teased or rejected by peers

6. Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing difficulties that may lead to thoughts of self-harm or suicide. These warning signs should **always** be taken seriously and staff observing any of these warning signs should seek further advice from one of the designated teachers for safeguarding children - XXXXXXXXXXXX

Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating / sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Lowering of academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing – e.g. long sleeves in warm weather
- Secretive behaviour
- Skipping PE
- Lateness to or absence from school

7. Staff Roles in working with students who self-harm

Students may choose to confide in a member of school staff if they are concerned about their own welfare, or that of a peer. School staff may experience a range of feelings in response to self-harm in a student such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. However, in order to offer the best possible help to students it is important to try and maintain a supportive and open attitude – a student who has chosen to discuss their concerns with a member of school staff is showing a considerable amount of courage and trust.

Students need to be made aware that it may not be possible for staff to offer complete confidentiality. **If you consider a student is at serious risk of harming themselves then confidentiality cannot be kept.** It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-harm should consult one of the designated teachers for safeguarding children - XXXXX, or the designated governor for safeguarding children – XXXXX.

Following the report, the designated teacher / governor will decide on the appropriate course of action. This may include:

- Contacting parents / carers
- Arranging professional assistance e.g. doctor, nurse, social services
- Arranging an appointment with a counsellor
- Immediately removing the student from lessons if their remaining in class is likely to cause further distress to themselves or their peers
- **In the case of an acutely distressed student, the immediate safety of the student is paramount and an adult should remain with the student at all times**
- **If a student has self-harmed in school first aid issues should be addressed as a priority**

8. Further Considerations

Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- An [action plan](#) (if considered appropriate)
- Concerns raised
- Details of who should be informed, what they should be told and why

This information should be stored in the student's child protection file.

It is important to encourage students to let you know if one of their friends is in trouble, upset or showing signs of self-harming. Friends can worry about betraying confidences so they need to know that self-harm can be very dangerous and that by seeking help and advice for a friend they are taking responsible action & being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

The peer group of a young person who self-harms may value the opportunity to talk to a member of staff either individually or in a small group. Any member of staff wishing for further advice on this should consult one of the designated teachers for safeguarding children.

When a young person is self-harming it is important to be vigilant in case friends begin self-harming. Occasionally schools discover that a number of students in the same peer group are harming themselves.

9. Responding to self-harm 'fads'

Schools are increasingly reporting low level self-harm 'fads' sweeping through the school. This can take many different forms including:

- Superficial cutting
- Superficial burning
- Scratching
- Aerosol burns

This form of self-harm is usually superficial and is a behavioural issue rather than a coping mechanism for individuals.

A zero tolerance policy should be implemented with the school behaviour ladder being consistently followed. The following rules should be enforced:

- Injuries must be covered
- Long sleeves in PE if necessary
- Self-Harm on school premises is punishable in accordance with the school's behaviour policy
- Self-harm incidents should be responded to dispassionately and practically

In addition to addressing the group, it is important to talk privately with each individual as a minority may turn to self-harm as a coping mechanism even once their friends have stopped. Individuals should also be followed up with some months later as any pupil who has self-harmed once is more likely than their peers to turn to secretly self-harming in the future as a means of coping with difficult situation.

Appendix 1 – Understanding Why People Self-Harm

There are a wide range of reasons why people turn to self-harm and every single case is different but there are certain themes that recur time and time again. Here are some quotes from young people who've self-harmed to illustrate some of the most common reasons given in order to help you understand some of the reasons young people turn to this unhealthy coping mechanism.

Control

During adolescence, a time when young people are keen to assert their independence, they can begin to feel very out of control of their own lives. This can be for a number of reasons, perhaps their life is in chaos with difficult relationships at home or school, or perhaps they feel like they're being told what to do every minute of the day and don't have the freedom they'd like from parents or teachers. When you can't control anything else in your life, you can completely control your own body.

*"I know it's a really negative kind of control but when your whole life is complete S**t you take what you can, Y'know? And as I burnt myself I would feel in control for a while. I guess I was on self-destruct and that was bad but at least it was me driving this."*

"The day I realised that nobody could take control of my body but me, I felt really powerful. In the past I'd been weak and other people had controlled my body but now it's mine. I can care for it if I want to care for it and I can hurt it I want to hurt it. It's MINE."

"I'm 16. Every day of my life I've been told what to do from the moment I wake up to the moment I go to sleep. I'm sick of it. This is just my secret way of asserting a bit of control in my life."

Release and Communication of Feelings

For people who struggle to communicate or express their feelings in another way, self-harm can feel like the only way to communicate and release those feelings.

"I'm not good with words. I'm good at cutting. When there are more cuts it means I need more help."

"Sometimes I'd have so many different feelings inside me I thought I was going to explode. Then I'd cut myself and I'd instantly feel a bit better, like releasing a valve."

"It gave me a buzz. Like a drug. It didn't last long and soon I'd be back to square one, but for a few blissful moments I'd be free from all my problems."

Physical Rather Than Emotional Pain

For some people, physical pain can be a way of communicating emotional pain which is too hard to talk about. Or it can provide a more manageable form of pain that

they can tend to rather than facing up to the emotional and psychological injuries they may be suffering with e.g. as a result of abuse.

*"I was proper f****d up and I didn't know how to make it go away, but some days I felt like maybe I could physically cut away the pain."*

"It was a physical expression of the emotional pain I was feeling but couldn't begin to explain."

"Cutting was something I could talk about and ask for support with unlike the other things that were going on."

Punishment

Some people talk about using self-harm as a way of punishing themselves when they don't live up to expectations – this tends to either be young people who are perfectionist in nature, or those with a history of systematic abuse who have learned that they deserve to be punished.

"If I didn't do as well as I'd hoped I would then I'd take a load of pills and go to sleep. It made me numb. Kind of like a mini coma. It was the only way I could stop thinking about how I'd let myself down."

"I was always punished as a kid. If I was late, if I did something stupid, if I didn't do well enough at school. My Dad used to punish me physically. Once I went into care I guess I kind of took over the punishment myself. People would tell me that it was okay to make mistakes and I shouldn't punish myself but it made me feel better."

Nowhere else to turn

Some young people talk about not being aware of a better way to deal with their problems.

"Some people drink, some people take drugs, some people paint pictures, I burn myself. It's not really that big a deal, it's just the way I deal with things."

"It's the only thing that makes me feel better. Nothing else I've tried gets through."

Appendix 2 – Changing self-harming behaviours

Here are some simple ideas that you can use to support someone who is trying to reduce how much they self-harm. Be realistic in your expectations and be sure to celebrate progress, no matter how minimal.

Time and Place

People who frequently self-harm will often do so in the same place and at similar times each day. Talk to them about whether it's possible to try to disrupt this routine. Can you work with them to think of an alternative activity they might be able to do at their trigger time, or is there somewhere different they could go? As a minimum perhaps you can think with them about how to ensure they are not alone at the times when they are most vulnerable from self-harm. If it's not possible for them to be physically accompanied, you might suggest they phone a helpline such as Childline or the Samaritans so they feel less alone.

Means for Self-Harm

Some people will always use the same implement to self-harm with. If they are ready, they might think about throwing away this implement. Doing so prematurely may leave them feeling very desperate and vulnerable so this needs to be carefully considered. If they are not yet ready to dispose of their implement then they might consider locking it away, either in a safety deposit box or even simply in a shoebox wrapped up with tape or ribbon. Making their preferred implement less available will provide valuable thinking time and remove some of the impulsivity from the act of self-harming, making it a little more likely they'll be able to think of an alternative coping mechanism.

Another helpful approach is to encourage them to reduce their easy access to items that might be used for self-harming. This might mean locking away or removing things like blades, knives and medicines where they cannot be so easily accessed.

Try to Break Rituals

Self-harming activities can become highly ritualised, adding a feeling of control to the process and providing a sense of relief and release to the person harming. Trying to remove some of the more ritualised or repeated parts of their self-harming behaviours can reduce the reinforcement that young people feel from the activity. It also makes it harder for them to self-harm on auto pilot which, again, reduces the likelihood of them going through with an act of self-harm.

If a young person feels comfortable enough to talk to you about their self-harm rituals, take a real interest and try to understand their motivations behind each part of the process. Question why they do each thing and where possible make suggestions for alternative behaviours. Occasionally your words and questions will have an impact on the sufferer and play back to them during a self-harm act and empower them to stop.

Challenge Thoughts

A more general approach to challenging self-harming behaviours is to challenge the thoughts and feelings that surround and trigger those behaviours. Often there are a whole host of negative thoughts that surround each act of self-harm which the sufferer never thinks to challenge. Explore these thoughts and actively challenge them, providing evidence to back up your viewpoint where you can; for example you might challenge the thought 'I'm a complete failure' with 'Do you think perhaps that your standards are unrealistic? Other people would be happy to get 60% on a test but you are upset because you got 80%. Why is 80% not good enough?' Or 'Would you consider your friend Daniel a failure if he'd scored 80% on that test? Why not...' Over time, you can encourage the sufferer to challenge their thoughts in the same way, but it is likely to take quite some time.

Appendix 3 – Useful sources of support

www.youngminds.org.uk – Young Minds are committed to supporting the emotional wellbeing of all pupils. This website has lots of resources and advice for teachers on a range of mental health issues.

www.selfharm.co.uk – support for young people impacted by self-harm

Samaritans - The Samaritans helpline is available 24 hours a day 365 days a year and their trained advisers are a great source of support if you need to talk to someone.

Helpline: 08457 90 90 90 | **Email:** Jo@Samaritans.org |

Website: www.samaritans.org/

Papyrus - Papyrus is aimed specifically at preventing suicide in young people. They have a free UK helpline which provides support and advice for young people at risk or those who care about them.

Helpline: 0800 068 41 41 | **Email:** pat@papyrus-uk.org |

Website: www.papyrus-uk.org/