



# HEALTHIER MINDS

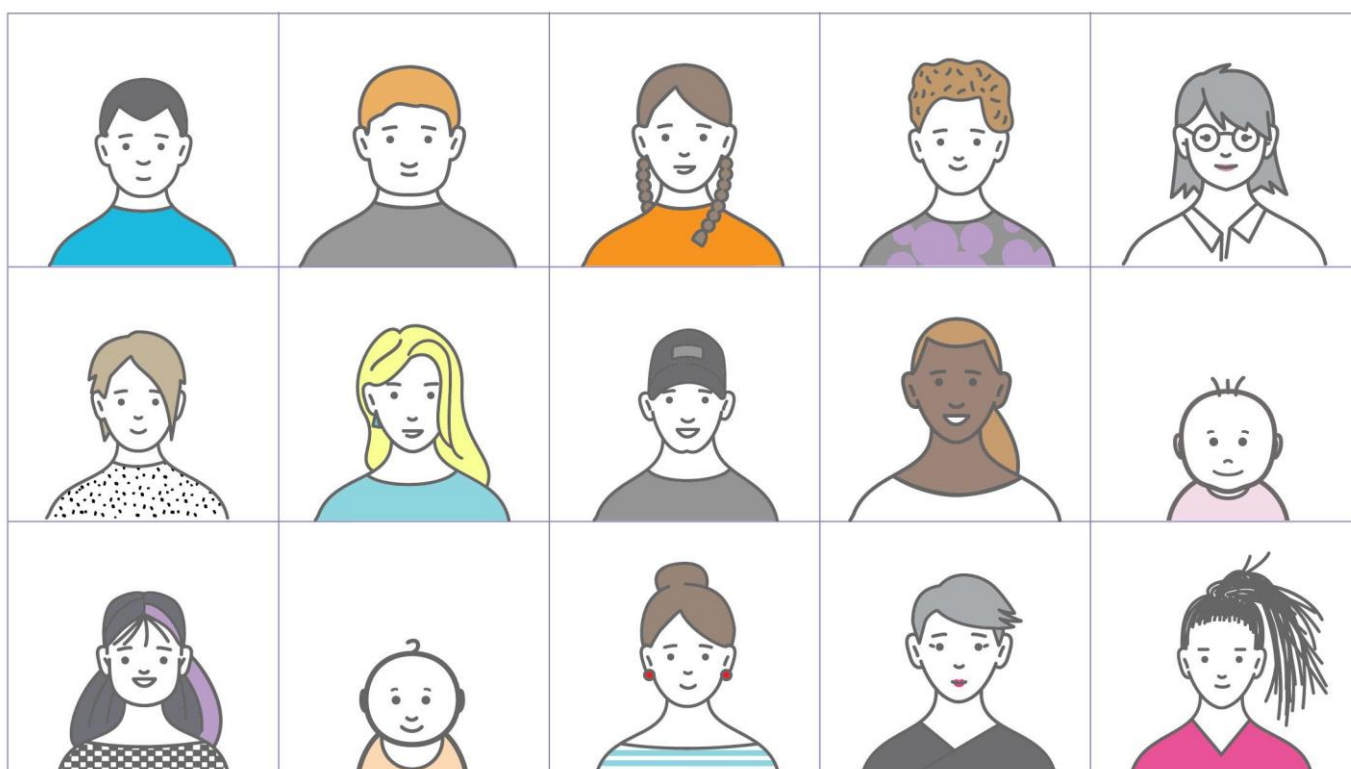


Getting it Right in East Renfrewshire

## Self-Harm: Supporting Children and Young People and Responding to Incidents of Self-Harm

Multi-Agency Practitioner Guidance

Working Together to Keep Our Children Safe



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## Introduction to the Guidance

Local and national data suggest that rates of self-harm amongst children and young people are increasing alongside concerns about mental health more generally. Data collected by Samaritans also suggests that self-harm behaviours often emerge during adolescence, however, low numbers of adolescents seek support from adults in educational and wider youth settings (Samaritans, 2020). The same survey identified that in education and youth settings, staff express a lack of knowledge and confidence in talking to young people about self-harm preventing them from effectively recognising and responding to self-harm.

This practitioner guidance has been developed with the intention of guiding and supporting practitioners from all sectors and services in East Renfrewshire Council working with children and young people to recognise and respond in situations where a child or young person is considered at risk of self-harming behaviours or is engaging in self-harming behaviours. We hope this guidance will serve to increase the awareness, understanding and confidence of practitioners working in these settings in order to enhance the likelihood that young people will seek support and access early intervention which is crucial to improving outcomes.

The principal aims of this guide:

- Provide practitioners with clear guidance and procedures for supporting anyone engaging in, disclosing, or at risk of self-harming behaviour
- Support practitioners to carry out an initial risk assessment and take appropriate action
- Minimise immediate risk and harm by guiding practitioners to provide caring and compassionate, practical and emotional support to the young person as a first response
- Consider the support needs of parents or carers and other family members
- Highlight a range of local and national organisations which can provide effective support, information and guidance
- Consider preventative approaches which enhance the resilience and coping responses of young people to reduce the risk of self-harm
- Encourage organisations to consider how practitioners are supported and cared for when responding to self-harming behaviour

Self-harm can affect people of any age and as such this guidance will be useful for practitioners working with children and young people of any age.

### **[The East Renfrewshire Child Protection Committee Young Persons' Safety Planning Protocol](#)**

explicitly identifies serious incidents of self-harm as one of the criteria for referral for multi-agency assessment, planning and decision making. As such these guidelines should be considered alongside this document accessible [here](#).

## Mental Health and Wellbeing

The increase in reported incidents of self-harm in recent decades and during the Covid-19 pandemic has raised significant concern about the mental health and wellbeing of children and young people. Promoting and supporting mental health is of paramount importance in East Renfrewshire and the council is committed to investing in evidence based and best practice approaches. This is reflected in the ERCPC commitment to Getting It Right for Every Child (GIRFEC) and the focus on building capacity across the workforce to identify and support the needs of children and young people to ensure they are Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible and Included. Research outcomes and the experience of professionals working with children and young people has highlighted the crucial role played by front line staff in directly supporting and promoting wellbeing, therefore we consider that building capacity, confidence and a promoting a shared understanding of mental health and self-harm is fundamental to making a positive difference to those we support.

In 2020, East Renfrewshire's Healthier Minds Framework was developed to support and promote the mental health and wellbeing of all young people by providing information to develop children and young people's talents and abilities in a way that will support them to meet life's common challenges, develop their resilience, and have healthier minds as a result. You can access information and resources on a wide range of topics at the [Healthier Minds website](#).

### Covid-19

Emerging evidence suggests a deterioration in mental health and wellbeing prior to, and during the Covid-19 pandemic and restrictions. Social distancing, stay at home guidance and school closures, have had, and will continue to have, an adverse effect on the mental health and wellbeing of some children and young people even as restrictions ease (Mental Health – Scotland's Transition and Recovery, Scottish Government, 2020).

**“The Covid-19 crisis has had a profound impact on the mental health of many young people. This may be related to fears about the virus, social isolation, the loss of routine and structure, and in some cases bereavement or other traumatic experiences.”**

**Emma Thomas, Chief Executive of Young Minds**

A key priority in Scotland's Transition and Recovery Plan is to improve understanding of self-harm and strengthen support for those affected. **In 2023, the Scottish Government launched a [self-harm strategy and action plan](#) to improve support for people who self-harm.** This makes Scotland the first country in the world to have a dedicated self-harm strategy. This document aims to reflect the principles and actions set out in the national strategy and action plan.

## Current National and Local Context

- In 2020 in Scotland, 1400 children and young people were treated in hospital for injuries sustained by self-harm (Scottish Government figures)
- 1 in 6 young people aged 16-24 in Scotland have self-harmed at some point in their lives (The Scottish Health Survey, 2019)
- Of self-harming adults surveyed in Scotland, 80% reported being 17 or under when they first self-harmed while 47% were between 11 and 15 years old.
- An estimated 14% of 14-15 year olds are thought to self-harm (O'Connor et. al., 2009)
- The number of children aged nine to 12 admitted to hospital across the UK due to self-harm increased from 221 in 2013-14 to 508 in 2019-20
- Reported self-harm rates are higher in girls than boys, however, rates amongst boys are likely to be underestimated due to underreporting. This reflects the ongoing stigma and shame associated with mental health difficulties in boys.

### East Renfrewshire Context

- 13% of all referrals to the Healthier Minds Service are for concerns related to self-harm, however, a far higher number of those supported by the Healthier Minds Service go on to disclose self-harm behaviour
- 87% of those referred for concerns related to self-harm are female and the majority are aged 13-15 years old
- Anecdotally, practitioners across sectors and agencies are reporting an increase in incidences of self-harming behaviours and disclosures

***Local and national statistics are likely to be an underrepresentation of the true extent of self-harming behaviour as many children and young people who self-harm will not be identified, present to hospital or seek help.***



## What is Self-harm?

Self-harm is defined as **intentional self-poisoning or injury, irrespective of the apparent purpose** (National Institute for Health and Care Excellence (NICE), 2022). This includes both physical and psychological injury and would include any behaviour that serves a function of self-harm and adversely affects a person's psychological or physical health.

Self-harm can take a number of forms but all self-harm is a sign of emotional distress and should be taken seriously. While the reasons behind self-harming behaviour can be multi-faceted and complex it is predominantly accepted to be a coping strategy for managing distressing or overwhelming thoughts, feelings and experiences.

“Self-harm is most often used as a coping strategy for dealing with psychological pain. It isn't attention-seeking, it isn't a 'cry for help' or something that can be 'cured'. Self-harm can affect anyone, of any age, from any background. People who self-harm don't always have suicidal feelings. Instead, the act of self-harm is often a coping mechanism to help them deal with life's stressors.”

Place2Be

Examples of self-harming behaviours can include but are not limited to:

- Cutting
- Burning
- Head banging
- Hair pulling (trichotillomania)
- Self-poisoning
- Scratching
- Severe bruising or breaking bones by inflicting blows to the body
- Inserting objects into the body
- Ingesting harmful substances
- Swallowing objects
- Tightly binding body parts
- Asphyxiation / suffocation
- Digital Self-harm

Other risk-taking behaviours which may also be associated with self-harm include:

- Eating problems and eating disorders (for further information and guidance on supporting pupils with eating problems and eating disorders please refer to [Healthier Minds](#))
- Drug and alcohol misuse
- Dangerous driving or extreme sports
- Unsafe sex/multiple sexual partners (Risks of Child Sexual Exploitation)

### Digital Self-harm

Digital self-harm has appeared with the increased use amongst young people of social media. Digital self-harm involves anonymously posting hurtful and sometimes verbally abusive remarks about oneself online and is more commonly seen in boys than girls. It differs from other forms of self-harm in that it does not cause physical harm but is still driven by the same strong and overwhelming feelings of distress.

### Risk Factors

The factors that increase a young person's vulnerability to self-harm are complex and it is impossible to predict with any certainty who might be at risk. However, certain social groups or adverse experiences are associated with an increased risk including:

- self-harm or suicide behaviour in family members or friends
  - childhood trauma or abuse
  - care experienced
  - socio-economic deprivation
  - mental health concerns
  - gender dysphoria
  - neurodevelopmental needs
  - LGBTIQ+
  - substance misuse
  - parental separation or conflict
  - bereavement
  - bullying
  - relationship difficulties
  - academic pressures
- (Platt, 2009)

### **The influence of media and social media**

Young people are highly influenced by how topics such as self-harm are portrayed through social media. Media coverage has the potential to normalise self-harm behaviour, especially if it is portrayed as a common or effective way of coping with emotional distress. Traditional media is subject to guidance around how self-harm is reported. However, social media content is much more difficult to control and children and young people are vulnerable to the effects of normalised or glamourised self-harm behaviour. The types of content that children and young people are viewing should be explored as part of any assessment and support.

### **Protective Factors**

Where a young person has a number of protective factors in their life, their risk of self-harming behaviour will be reduced. Identifying a young person's protective factors can be a helpful part of creating a safety plan. This includes but is not limited to:

- nurturing and supportive family relationships
- friendships and feeling of belonging within a social group
- sense of connectedness (school community, groups, job, sports teams etc)
- good physical health including adequate sleep routines, good nutrition and physical exercise
- ability to regulate emotions, behaviour and thoughts
- optimistic outlook on life and a general sense of hopefulness
- good problem-solving skills
- sense of purpose and aspirations
- positive self-image
- resilience in the face of adversity
- religious faith or spirituality



## Functions of Self-harm Behaviour



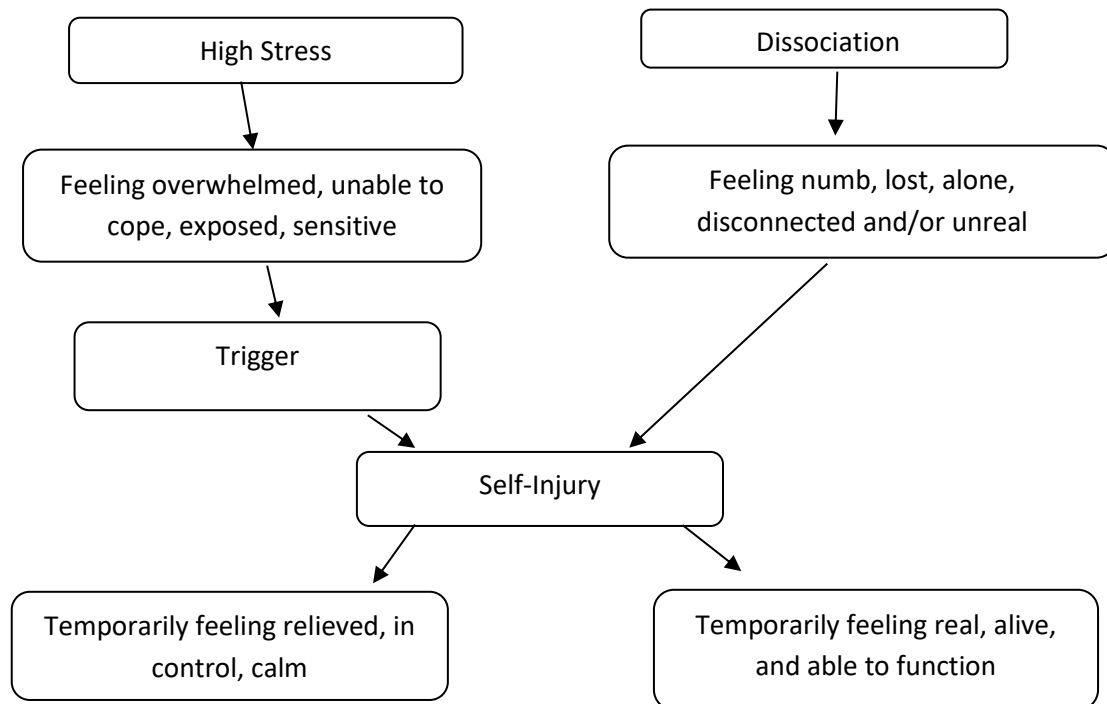
As with all behaviour, self-harming behaviour is communicating something about the young person's experience. Various studies e.g. Stänicke, Line & Haavind, Hanne & Gullestad, Siri (2018) have explored the reasons behind self-harming behaviour providing us with a greater understanding of this complex area. **While the reasons behind self-harm can be multi-faceted and complex it is predominantly accepted to be a coping strategy for managing distressing or overwhelming thoughts, feelings and experiences. The young person may be seeking:**

- temporary release from intense feelings, pressure, anxiety and stress
- to experience the sense of being real or alive; of feeling something other than emotional numbness and dissociation
- to externalise and/or take control of emotional internal pain
- to inflict self-punishment related to feelings of poor self-image and self-worth
- to stay alive in spite of significant emotional distress
- on rare occasions, to influence others or connect with others





As this diagram highlights both states of high stress and dissociation can lead to self-harming



### The Cycle of Self-Harm



## **Warning Signs**

People who self-harm will often work hard to hide their injuries and their behaviour, however, there are often indicators, which may present as more general emotional wellbeing and mental health concerns or as specific self-harm indicators:

### **Specific to Self-harming behaviour**

- Consistently wearing long sleeves even at inappropriate times or in warm weather
- Reluctance to participate in physical activity
- Avoiding changing clothes in front of others e.g. for p.e. or in changing rooms
- Spending more time in the bathroom
- Unexplained cuts or bruises, burns or other injuries especially on the non-dominant side
- Blood on clothing or tissues
- Reporting frequent 'accidents' which cause physical injury
- Regularly bandaged arms/wrists
- Frequently talking about self-harm
- Regularly asking for first aid supplies
- Razor blades, scissors, knives, plasters have disappeared
- More regularly showering or bathing
- Talking about self-harm

### **More general wellbeing indicators**

- Consistent low mood
- High levels of stress and anxiety
- Mood changes
- Expressing feelings of low self-esteem or worthlessness
- Changes in eating or sleeping patterns
- Withdrawing from, or changing, friendships
- Withdrawal from, or loss of interest in hobbies and activities that were previously enjoyed
- Misuse of substances
- Spending more time alone, becoming more private or defensive
- School absenteeism

## Self-Harm and Suicide

The relationship between self-harm and suicide is complex and it's important to understand that **the vast majority of people who self-harm do not have suicidal feelings**. However, suicide risk is 30 times higher in young people who self-harm as the self-harm escalates or accidental death (Hawton et. al, 2020).

Self-harming behaviours are most often a coping mechanism to help a person deal with life's stressors. In fact, self-harming is often a person's way of staying alive and coping with very challenging experiences and feelings. The difference between self-harm and suicide centres can be seen in the intent of the behaviour. For most young people, the intention of self-harming behaviour is to manage challenging feelings or to feel alive. Whereas a child's behaviour is suicidal when the desire or intent is to end their life.

Despite this difference between self-harm and suicide, self-harming behaviour is a clear communication of distress and is a significant risk factor for suicide. This may be due to escalating distress leading to increased and more serious self-harm or accidental death. As such, all self-harming behaviour should be taken seriously. It is important to ask someone you are worried about whether they have any thoughts of taking their own life. This will not put the idea into their head and may help them to open up about how they are feeling.

For more information and guidance related to suicide prevention and support please refer to the [Healthier Minds website](#). Suicide first aid training (ASIST) is available to all East Renfrewshire employees. If you have immediate concerns about the safety of a young person please contact the emergency services on 999.

# Child Protection, Consulting Young People, Confidentiality and Consent, and Information Sharing

## Definition of Child or Young Person

For the purposes of this document, references to 'children' and/or 'young people' includes all those under the age of 18.

## Child Protection and Young Persons' Safety Planning Protocol

The East Renfrewshire Child Protection Committee Young Persons' Safety Planning Protocol provides a framework for multi-agency assessment, planning and decision making for young people whose behaviour puts themselves and others at risk of harm. This protocol identifies self-harm as a criteria for referral through Children's Services Request for Assistance (for young people aged 18 and under) in the following circumstances:

- I. He / she is involved in serious incidents of self-harm (consideration needs to be given to the nature of the incident, pattern of behaviours / seriousness of incident / level of self-awareness / likelihood of repeated action / whether any other specialist agency, such as Child and Adolescent Mental Health Service and Healthier Minds, are involved).
- II. There is no existing multi-agency plan and support in place for the young person or the referrer considers that the current multi-agency support and plan is insufficient to manage the risk that the vulnerable young person poses to themselves or others.

*East Renfrewshire Child Protection Committee Young Persons' Safety Planning Protocol p.3*

Child Protection procedures should also be considered if, in relation to the self-harm behaviour:

- there is reasonable cause to believe the young person may have been subject, or be at risk of being subject, to physical, emotional or sexual abuse, neglect, child sexual exploitation, child trafficking or enforced labour
- there is reasonable cause to believe that the self-harm behaviour will increase the risk of the young person being vulnerable to abuse or neglect (e.g. through reaction of others to the behaviour or lack of care for wounds)

Consult with your child protection coordinator if you are unsure.

## Confidentiality and Information Sharing

*"Concerns about confidentiality must not obstruct the exchange of information between agencies / organisations which may be essential to the protection of young people at risk of significant harm to themselves or others."* [East Renfrewshire Young Persons' Safety Planning Protocol \(2022\)](#)

Children and young people have a right to confidentiality whenever possible and appropriate. Furthermore, developing a trusting relationship with a young person is key to supporting their

wellbeing needs and confidentiality is a central component in this relationship. However, an adult cannot promise to maintain confidentiality at all times. The law recognises that in certain circumstances the duty of care is greater than the duty to respect confidentiality. Where a staff member is concerned that a child or young person is at risk of harm this will always supersede requirements to maintain confidentiality. The Children's and Young Persons (Scotland) Act 2014 places a duty on all services to share information securely and proportionately to promote, support or safeguard a child or young person's well-being. If it is deemed necessary to pass information on, staff should clearly communicate to the child or young person the reasons for the information being passed on and to whom. The welfare of the child or young person remains paramount throughout all stages of decision making.

There should be clear explanations about what is going to happen and the choice and rationale for certain courses of action. Information should not be shared with others without the young person's permission except in exceptional circumstances such as:

- the child is not old enough or competent to understand and take responsibility for themselves
- 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
- there is a serious risk to public health
- 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 professional or agency requirement to keep information confidential. Professionals should tell young people when they may have to share information without their consent unless this is felt to not be in the interests of the child's welfare (e.g. that sharing information may lead to increased levels of risk).**

### **Informing Parents and Carers about Self-Harming Behaviour**

Regardless of the age of the young person it is important that parents/carers are made aware of the concerns. This should be discussed openly with the young person so they understand the importance of key adults sharing information in order to provide the best support and keep the young person safe. There will be scenarios where the young person does not want their parent/carer to know about the self-harming behaviour. In these situations there is no one definitive response and generally the following applies:

- The best interests of the child must be considered and this is critical in any decision making process
- The views of the child are relevant, however, definitely not determinative

For children and young people of any age, an assessment should be made as to the level of understanding of the child and the significance of the self-harm behaviour. The duty of care to ensure the safety of the child is always greater than the expressed wish for confidentiality. Staff are encouraged to seek support and consultation from their line manager and all decisions and actions taken should be documented.



## Responding to Self-Harm Behaviour

### **Your First Response is Important**

Take all threats of self-harm and suicidal behaviour seriously.

At all times treat the young person with dignity and respect, be empathic and non-judgemental.

Remember it is likely that the reason for the behaviour is an attempt to cope with strong, overwhelming feelings.

### **First Response**

Your first response to a disclosure of self-harm or suspected self-harm is an important one. Your verbal response and body language can promote trust and encourage the young person to open up.

### **Stop, breathe, stay calm and patient**

Suspecting, or discovering that, a young person is self-harming can cause an overwhelming array of emotions like panic, anger, sadness, frustration. All of these are normal reactions but are likely to impact your initial interaction with the young person and may be counterproductive to encouraging an open and honest discussion. Take a breath, try to put your feelings to one side for now and focus on what the young person needs.

### **Find somewhere quiet and private**

Encouraging the young person to talk will require time, patience and a quiet, private space. Talking about self-harm won't encourage them to engage in more self-harming behaviour. Start the conversation by expressing that you are worried about them and want to check if they are okay. Tell them what you have noticed about their behaviour, that you are there and ready to listen and help. If they have disclosed to you their self-harm behaviour it is good to acknowledge this – thank them for coming to you, reinforce how hard that must have been and reassure that they have done the right thing by seeking help.

### **Encourage them to talk but follow their lead**

Talking about self-harm can be tough for everyone involved. Try to be patient, take your time and try not to push for more information than they are willing to give. Allow or encourage the young person to do most of the talking. Be caring in your verbal and non-verbal communication. Use active listening skills and phrases such as 'that sounds really difficult, tell me more about that.'

### **Ask them if they have self-harmed**

You may think you don't need to as it may be obvious or they may have shown you their wounds. However, even if they tell you explicitly or show you it is advisable to clarify what they have said and that they have made the wounds themselves. This ensures there is no misunderstanding and focuses the conversation moving forward. If you suspect that the young person has self-harmed but they don't offer this information, sensitively but directly ask the question.

“I’ve noticed you wearing long sleeves more often and you don’t seem your usual self. Sometimes when people are having a hard time they can self-harm. Have you been self-harming?”

“I noticed some marks on your arm, I’m worried about you and want to help. Are you hurting yourself?”

### **Focus on listening and be genuinely interested in what they have to say**

It might be hard because of your own strong feelings about it but only by listening can you really hear and understand their experience. Try not to panic, avoid offering solutions and instead just listen.

### **Thank them for talking to you and acknowledge how difficult it must have been**

You may well be the first person they have discussed this with. It’s important to acknowledge how big a step this is for them.

### **Reassure that you want to help them find other ways of managing difficult times**

You cannot necessarily fix this for them but reassuring them that you want to help and that you are not dismissing their feelings will be crucial in their recovery.

## **Common Traps**

### **It is common for those supporting a young person who is self-harming to think:**

I must fix this or I must stop this behaviour

This person needs a specialist not me

Neither of these are helpful. It is not your job, and neither is it realistic to expect you, to fix or stop the behaviour. Rather your role is to listen and help the young person think more clearly about the function of the behaviour and explore other coping strategies. Furthermore, while the person may benefit from a specialist service, the young person is choosing to speak to you and that makes you the most helpful resource to this person at this moment in time.

### **Other Things to Avoid**

Generally speaking, when a young person is talking to you about their self-harm this is positive so try not to worry too much about saying the wrong thing, rather, focus on listening and follow their lead.

However, if possible avoid:

- Telling them to stop

This is unlikely to make them stop and may result in the young person disengaging from your conversation. Recovery takes some time and this request could reinforce their low self-esteem and shame. Remember for many young people it’s an addiction and should be managed in the same way as any other addiction.



***“Many young people fear a loss of agency and control when disclosing self-harm. This could include concerns that supporting adults will seek to stop them from self-harming completely, when individuals may still view self-harm as a way of coping with difficult emotions and experiences.”  
(Samaritans 2020)***

- Showing disgust or judgement

Any young person who feels judged is less likely to open up and be honest.

- Talking too much

As adults we often want to help by fixing young people’s problems and this can lead to us talking more than them and offering solutions. Instead, try to be comfortable with silences, focus on listening and ask open questions.

- Asking why

Asking why is different to asking what is helpful about the self-harming. “Why” can communicate judgement and the young person might genuinely not know why they do it so will be unable to answer this in any helpful way.

- Asking them to consider the impact of their behaviour on others

This is likely to reinforce feelings of low self-esteem and self-worth. They will already feel guilt and shame and it is likely to make them feel worse if they feel they are letting others down.

- Telling them all the reasons they should be happy and positive

This dismisses the complexity of the reasons behind the self-harming behaviour. Exploring what these might be will far more effective than trying to convince the young person that they should feel differently.

### **Establish type of self-harm, frequency and severity**

In gathering a full picture of the self-harm behaviour, potential triggers, risks and protective factors, asking direct questions about this can be helpful. If this has not been raised naturally during the course of your initial discussion, try to establish:

- Where on your body do you self-harm?
- What do you use?
- How do you care for your wounds?
- Have you ever hurt yourself more than you planned?
- Have your wounds ever become infected?
- Do you have anything with you just now that you could use to hurt yourself?

## Other Influential Factors

Exploring additional influential factors can help you understand what might be sustaining or exacerbating the behaviour. The most common of these are:

- friends who also self-harm or who talk openly about self-harm
- social media

Both have the potential to normalise self-harm as a helpful and appropriate coping strategy and can perpetuate the problem as young people find others who share their feelings. The good news is that a search on Google of how to self-harm produces only helpful and supportive sites, however, there are plenty of more secretive sites and discussion forums which promote a culture of self-harm which young people can access if they know how.

It is helpful to explore what these influences are, help the young person to consider whether these are helping or exacerbating the behaviour. Finally, this can add to the support planning process by facilitating discussion about more helpful influences such as other friends, family members, supportive adults, websites, apps and text or phone lines.

**“Who do you talk to about this?”**

**“Do you have friends who also self-harm/hurt themselves/cut?”**

**“What do you find helpful about talking to others who self-harm?”**

**“I wonder if there is anything unhelpful about talking to others who self-harm.”**

**“Have you looked at any websites about self-harm? What messages do they give you about self-harm?”**

**“Websites which promote ways to self-harm make you think they want to help. I can understand why you would feel that’s what you need right now. But these sites are not helping you to manage how you are feeling. They are stopping you from getting the best care and support. Can we look at some others that can give you the help you deserve?”**

## Continuing the Conversation

Once you have established that the person is self-harming you can start to explore with them the reasons for the behaviour which will help you uncover ways you can help.

**Acknowledge the young person’s experience by repeating and reflecting back key thoughts and feelings**

Use good listening skills to help the young person express how they are feeling. Repeating and reflecting back demonstrates that you are listening, that you care and you value them and their experience. It also prevents you doing too much problem solving and helps you clarify any points you aren’t sure about.

### **Use the same words as they do about the self-harming behaviours**

Again this shows that you are listening and value their unique experience.

### **Ask them what they find helpful about it**

This is a very non-judgemental question which attempts to get to the heart of the function that the behaviour serves for the young person. If you can work out together why or how it is a helpful strategy for them you will have an opportunity to start to identify other safer and more helpful strategies which might produce the same outcome. It may also introduce the idea that there might be unhelpful elements to it which makes them think a bit more deeply about it and again hints at the concept of other things that might achieve the same goal

**"It sounds as if self-harming is helpful for you in some ways. Can you tell me how it feels afterwards for you?"**

**"It sounds as if cutting makes you feel better? Can you tell me more about that – in what ways do you think it helps you?"**

### **State that you understand why the person would self-harm – reflect back the triggers and consequence**

This is not colluding, agreeing with or reinforcing self-harm as a solution. It will however help the person to trust and have confidence in you, that you can listen, understand and help them. It is helpful to reflect back the triggers, the consequences and then state your position that it is understandable a person would try to cope in this way.

**"so you mentioned there that when you've fought with you dad and you're alone in your room thinking it over you feel guilty, hopeless and overwhelmed and when you cut those feelings goes away. It's really understandable that you would try to cope in that way."**

### **Supporting Change**

Once you've acknowledged how it is helpful for the young person, **help them explore the drawbacks, negatives or risks.** Highlighting the risks and drawbacks can provide the motivation to make changes.

**"I wonder if there are any drawbacks to you cutting"** rather than **"what are the drawbacks to you cutting?"**

Help them identify exceptions, when they use other strategies and introduce the idea of alternatives

**"Are there times when you manage to cope without cutting?"**

Reassure the young person that you want to help them find other ways of managing difficult times

If the young person can't find any drawbacks acknowledge how hard it can be to find a reason to stop doing something that helps. Listen carefully to their story – listen for any subtle hints of drawbacks that you can reflect back.

**“You mentioned before that you would like to go on the trip but you can’t because of the marks. I wonder if cutting is stopping you doing things you want to do and that could really help you”**

Try asking some different questions which hint at the drawbacks and listen closely for any hints of drawbacks raised by the young person.

**“If you didn’t self-harm how might things be different for you?”**

**“If you had other ways of coping with difficult times what would that be like”**

### **What Next? Consider Safety Planning**

Once the person is motivated to change, you can begin to help them consider alternative behaviours that can replace the self-harm. Ideally, these should come from the young person themselves, but you may need to have suggestions of your own. Information on distraction techniques and alternative behaviour strategies can be found [here](#). Once appropriate alternative coping strategies are established, these should be used to form part of the person’s [safety plan](#). It may be helpful to have them write this plan down or write it together. That way you can return to it to establish if it is successful or needs to be changed. It can be written in a formal safety plan or noted in a mobile phone depending on what the young person prefers.

Asking the person to keep a [diary](#) can be a useful way to evaluate the success of the management plan. This should be used to note any triggers, how often the young person self-harmed, and any other coping strategies they used. This will need to be monitored regularly.

Once the person has an established management plan, they will need support to implement and modify the plan as necessary. It is likely that the young person will experience a combination of success and failure so it is important to highlight the successes and not to assume the plan is not working. Any reduction in self-harming behaviour is an indication of success, and a diary will help to establish this pattern and make it explicit for the young person. Continuing to self-harm does not indicate failure and it may not be realistic to expect them to stop altogether. Help them to set specific, measurable, achievable, realistic goals. Regular check-ins are really important. Don’t expect a young person to manage the plan themselves over a long period of time particularly in the initial stages. A check-in every day or every few days might be necessary.

Remember to look after yourself when you are supporting a young person who is self-harming. Seek support from your line manager, colleagues and from partner agencies. Consult with them on a regular basis and seek advice where necessary.

## Harm Minimisation

Those who self-harm are often using it as a coping mechanism. It is a way of keeping them alive therefore, we need to consider this in our response and support. Harm minimisation as part of a holistic plan respects that self-harm is a coping mechanism and that just stopping is unrealistic. It creates the conditions for keeping the young person safe even while self-harming. It encourages the young person to take some responsibility and ownership around self-care. Alongside safety rules, harm minimisation can be effective for guiding, preventing and minimising self-harm or the impact of self-harm behaviour.

This might include considerations about self-care of wounds such as only using clean implements, understanding the increased risks of certain cuts, learning to care for wounds and maintaining a first aid kit. It may also include rules around trying other strategies first to encourage the urge to self-harm to pass such as counting to 10, listening to a particular song or phoning a friend.

### Removing harmful objects

Harm minimisation approaches consider that removing items which may be used for self-harm may not be helpful and may actually cause more harm as the person seeks out alternative ways to hurt themselves. However, depending on the nature of your organisation and the risk to other people, if someone is in possession of a harmful item, it may be necessary to consider whether the item can and should be removed. This can be justified on the grounds of duty of care to the young person and to others, however this is likely to have a significant negative impact on a trusting relationship and as such should be considered only as a last resort.



## Involving and Supporting Parents

It is important that parents and carers are involved as early as possible. Children and young people may be reluctant for parents to find out about the self-harming behaviour but should be encouraged and supported to inform and discuss concerns with them. This can take a number of formats – in person, over the phone or virtual meeting but in person is always preferable.

If you are initiating contact with parents about an incident of self-harm, discuss the plan with the young person:

- where and when will the meeting take place?
- who will be present?
- does the young person want to be present? If not, where will they be and who will stay with them?
- does the young person want to speak or would they prefer the adult to speak?
- what will the young person or adult say?
- what outcomes are the young person and adult hoping for?

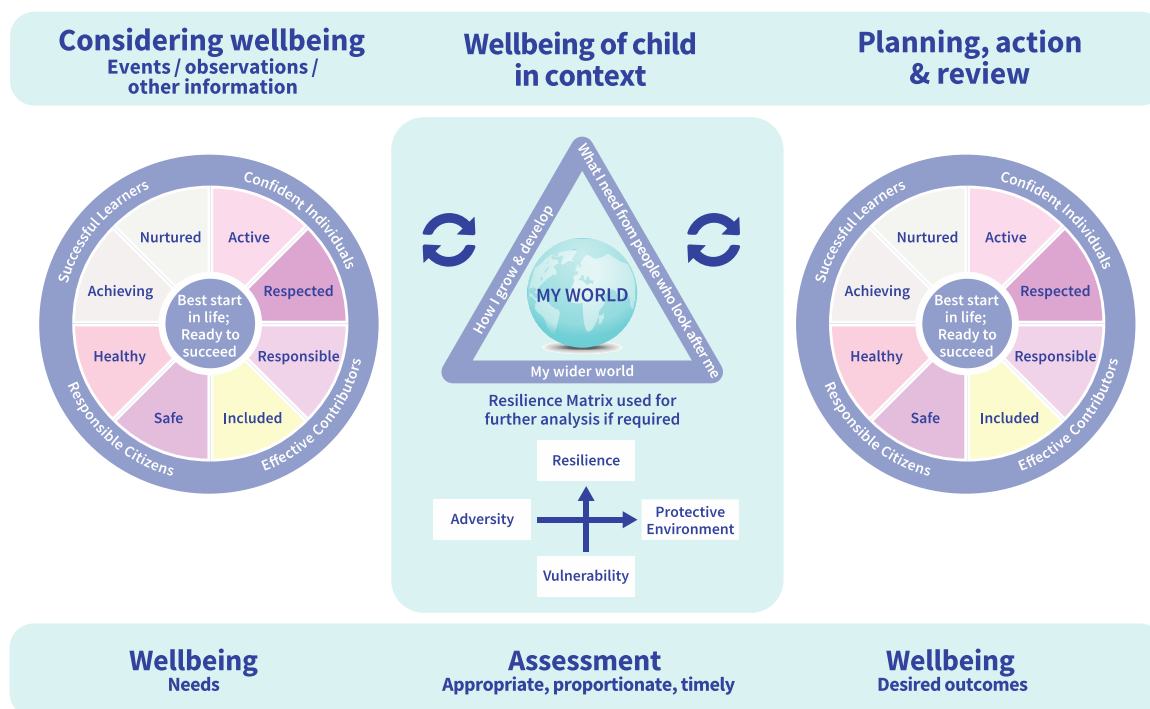
Formats such as this [planning tool](#) can help the young person and adult plan for the meeting and guide the meeting itself, however, it is meant as a guide only and should not restrict the discussion.

When a family is in distress, it is often difficult for them to be truly present, to be able to listen calmly to their child's concerns and to know how to help. They may be struggling with feelings of fear, anger, denial, shame or disbelief. Parents and carers will require help to identify support systems and resources available to them. Remain calm and show as much care, concern and sensitivity for the family as for the young person. Make available to parents [local sources of support](#), [national organisations](#) and [information](#) about self-harm and how they can help and support their child.

## A Guide to Assessing Need and Responding

The Getting it Right for Every Child (GIRFEC) national practice model and resilience framework can be helpful for assessing the holistic needs of the young person and identifying appropriate supports.

### National Practice Model



### The East Renfrewshire Child Protection Committee Young Persons' Safety Planning Protocol

The East Renfrewshire Child Protection Committee Young Persons' Safety Planning Protocol provides a framework for multi-agency assessment, planning and decision making for young people whose behaviour puts themselves and others at risk of harm. This protocol identifies self-harm as a criteria for referral through Children's Services Request for Assistance in the following circumstances:

- I. He / she is involved in serious incidents of self-harm (consideration needs to be given to the nature of the incident, pattern of behaviours / seriousness of incident / level of self-awareness / likelihood of repeated action / whether any other specialist agency, such as Child and Adolescent Mental Health Service and Healthier Minds, are involved).
- II. There is no existing multi-agency plan and support in place for the young person or the referrer considers that the current multi-agency support and plan is insufficient to manage the risk that the vulnerable young person poses to themselves or others.

## Assessing and Responding to Incidents of Self-Harm

The following is designed as a **guide to assessing and responding to an incident of self-harm**. There will be variations in procedure depending on your organisational context and the individual circumstances. It should not be viewed as a checklist. Risk assessments should no longer be used as a way of deciding who receives support as it cannot accurately predict future risk of self-harming (NICE Guidelines, 2022).

**However, the following can be used as part of the holistic assessment of the young person's needs and planning for their immediate and long-term psychological and physical safety.**

### Self-Harm Concern is identified through:

Disclosure of information from the young person, friend, family member, staff member or other source  
Self-harm behaviour is witnessed

### Is there evidence that the young person has suffered a serious injury including deep cuts, serious burns or has ingested any harmful substance?

No	Yes
<p>Remain calm</p> <p>Administer First Aid as required</p> <p>Inform a member of SMT</p> <p>Arrange a suitable space to speak to the young person privately</p> <p>Explain boundaries of confidentiality and consent – parents/carers should always be informed unless you have good reasons related to care and welfare or the young person is 16 or over and refuses consent</p> <p>Conduct risk assessment</p> <p>Remain with the young person</p> <p>Consider whether removal any potential harmful objects or substances is necessary.</p>	<p>Remain calm and stay with the young person at all times</p> <p>Contact emergency services - 999</p> <p>Administer First Aid as required</p> <p>Inform Parents/Carers and line manager – follow Child Protection protocols regardless of consent from the young person</p> <p>Inform Social Work through Request for Assistance 577 8300</p> <p>Consider whether removal any potential harmful objects or substances is necessary.</p> <p>Record the incident in pastoral notes (or as appropriate for your setting) as a significant event.</p>



Assessment and Planning		
Emerging Concerns	Increasing Concerns	High Levels of Concern
<p>Self-harm is unlikely to cause serious harm; cuts (if present) are not deep</p> <p>Self-harm is very infrequent</p> <p>YP has no thoughts of suicide or plan</p> <p>YP is willing to talk to someone</p> <p>YP has a high number of protective factors</p> <p>YP has little history of self-harm, a generally manageable amount of stress, and at least some positive coping skills and some external support.</p>	<p>Self-harm is unlikely to cause serious harm</p> <p>Self-harm is occurring more regularly</p> <p>Injuries require First Aid treatment</p> <p>Method of self-harm has changed</p> <p>YP has thoughts of suicide but no plan</p> <p>YP is willing to talk to someone</p> <p>Risk factors are present</p>	<p>Self-harm is escalating in seriousness and frequency</p> <p>Injuries require hospital treatment</p> <p>YP has thoughts of suicide</p> <p>YP has had a previous suicide attempt</p> <p>High number of risk factors present and low level of protective factors</p> <p>YP is reluctant to talk to someone</p> <p>YP has few positive supports or coping strategies</p> <p>No existing multi-agency plan and support in place or current multi-agency support and plan is insufficient to manage the risk</p>
Consider Actions	Consider Actions	Consider Actions
<p>Seek consent to share information with parents/carers</p> <p>Support YP to create a safe plan</p> <p>Agree arrangements for check-ins</p> <p>Share signposting information</p> <p>Keep in regular contact and be aware of any changes in presentation</p> <p>Consider the need for a Stage 2 Wellbeing Plan</p> <p>Debrief all staff involved</p>	<p>Seek consent to share information with parents/carers.</p> <p>Support YP to create a safe plan</p> <p>Agree arrangements for check-ins</p> <p>Create Stage 2 Wellbeing Plan</p> <p>Ensure the YP does not leave without a responsible adult</p> <p>Share signposting information</p> <p>Consider referral to Healthier Minds Service, CAMHS or SW</p> <p>Keep in regular contact and be aware of any changes in presentation</p> <p>Debrief all staff involved</p>	<p>Inform parents/carers regardless of consent from the YP</p> <p>Inform Request for Assistance in line with <a href="#">CPC Young Persons Safety Planning Protocol</a></p> <p>Support YP to create a safe plan</p> <p>Agree arrangements for check-ins</p> <p>Create Stage 2 Wellbeing Plan</p> <p>Share signposting information</p> <p>Refer to CAMHS</p> <p>Ensure the YP does not leave without a responsible adult</p> <p>Debrief all staff involved</p>

**The following actions should be considered in the event of any self-harm incident:**

Make time to talk to the young person.

Encourage and support the young person to discuss concerns with parents/carers. See [planning tool](#).

Signpost to [Healthier Minds and other relevant support organisations](#).

Record incident as appropriate to your setting.

Conduct a holistic assessment of the young person's needs and planning for their immediate and long-term psychological and physical safety.

Create a Safe Plan in collaboration with the young person including check-in and monitoring plan.

## Staff Wellbeing

Supporting the emotional wellbeing of young people is challenging for practitioners particularly when the young person is disclosing self-harm or suicidal behaviour. It is likely to have a significant impact on the emotional health and wellbeing of the adults providing that support. We are all vulnerable to the effects of stress, burnout and vicarious trauma which refers to stress and trauma that can occur in response to witnessing or hearing about other people's trauma. It is very normal for supporting adults to experience these and does not reflect on the ability, values or skills of a practitioner.

Stress, burnout and vicarious trauma can affect:

- Sleep routine
- Energy levels
- Ability to switch off
- Ability to think and focus
- Mood
- Motivation for spending with friends and family or engaging in hobbies

It is important that we are aware of these signs and know what we can do to help ourselves and who we can turn to for help.

### **Practice Self-awareness**

This refers to our ability to observe our own experiences, recognise symptoms in ourselves, be aware of our needs and limitations. Being more self-aware can help us identify the physical and emotional signs that we might be struggling and prompt us to take action.

### **Practice self-regulation**

This refers to our ability to cope with, and manage, our feelings. Often this comes from behaviours and activities we do to make ourselves feel better but it also comes from accepting that there are limits to what we can do, things outwith our control and professional and personal boundaries that we should maintain to keep ourselves safe and well.

### **Seek Balance**

Reflecting on the balance between personal time, professional time and time given to others and making small changes can make a big difference to our emotional wellbeing.

### **Workplace Considerations**

Each workplace setting is different and will require different considerations around supporting staff. Formal and informal procedures should be established for debriefing staff following incidents and on a regular basis as required. Supervision, check-ins, peer mentoring groups and buddy systems can help to promote staff wellbeing and support individuals during challenging times.

## Local Support Directory

### Education

#### Pastoral Support Team

The young person's pastoral support teacher (or class teacher/ASN Coordinator for primary aged pupils) will be key to identifying, responding, coordinating and planning support. A Wellbeing Plan should be developed in collaboration with the young person, parents and any other agency involved in the young persons' support. It may be appropriate to refer the young person to the Joint Support Team for consideration of other local services.

#### Educational Psychology Service

The Educational Psychologist may become involved if the self-harming behaviour is having a significant impact on the young person's engagement in school. The Educational Psychologist can offer consultation and advice, support for the family, signposting and in some cases, a short term piece of direct support for the young person.

Address: Council Offices, 211 Main Street, Barrhead, G78 1SY

Telephone Number: 0141 577 8510

Website: <https://blogs.glowscotland.org.uk/er/PsychologicalService/>

Healthier Minds Website: <https://blogs.glowscotland.org.uk/er/healthierminds/>

### East Renfrewshire Council

#### Healthier Minds Service

Anyone can refer a young person aged 10 and over to the Healthier Minds Hub where consideration of the most appropriate support will be discussed across a range of agencies including Children 1<sup>st</sup>, Counselling, School Nurse, CAMHS and Educational Psychology.

Frankie Robertson, Recovery & Service Development Co-ordinator - Children & Young People's Emotional Wellbeing

Email: [HealthierMindsHub@eastrenfrewshire.gov.uk](mailto:HealthierMindsHub@eastrenfrewshire.gov.uk)

Phone: 07387251073

<https://blogs.glowscotland.org.uk/er/healthierminds/healthier-minds-service/healthier-minds-service-2/>

#### GP

For any concerns about a child's physical or emotional health an appointment should be made with their GP.

## **Family Wellbeing Service**

The Family Wellbeing Service is delivered within East Renfrewshire by Children 1<sup>st</sup> and is accessed through GP surgeries. Support is offered to children, young people and families where concerns are impacting family life.

## **Local Social Work Children and Families**

There may be a role for Social Work if there are care concerns or if wider family issues are contributing to the self-harming behaviour.

Address: 211 Main Street, Barrhead, East Renfrewshire G78 1SY

Telephone Number: 0141 577 8300

Website: [www.eastrenfrewshire.gov.uk](http://www.eastrenfrewshire.gov.uk)

## **CAMHS**

Not all young people who self-harm have a mental health difficulty but there will be an increased risk of mental health concerns. It may be appropriate for a referral to CAMHS to assess whether the young person has a mental health concern and if mental health support is appropriate and necessary.

Address: Barrhead Health Centre, 211 Main Street, Barrhead, G78 1SY

Telephone Number: 0141 880 7886

## **Family First**

Our Family First Team offer free and confidential support and advice to families with children aged 11 years and younger.

## **Enable and Local Area Coordinators**

Enable provide a wide range of support services for people who have additional support needs in East Renfrewshire.

LACs can support families with children with additional support needs.

## **East Renfrewshire Carers Centre**

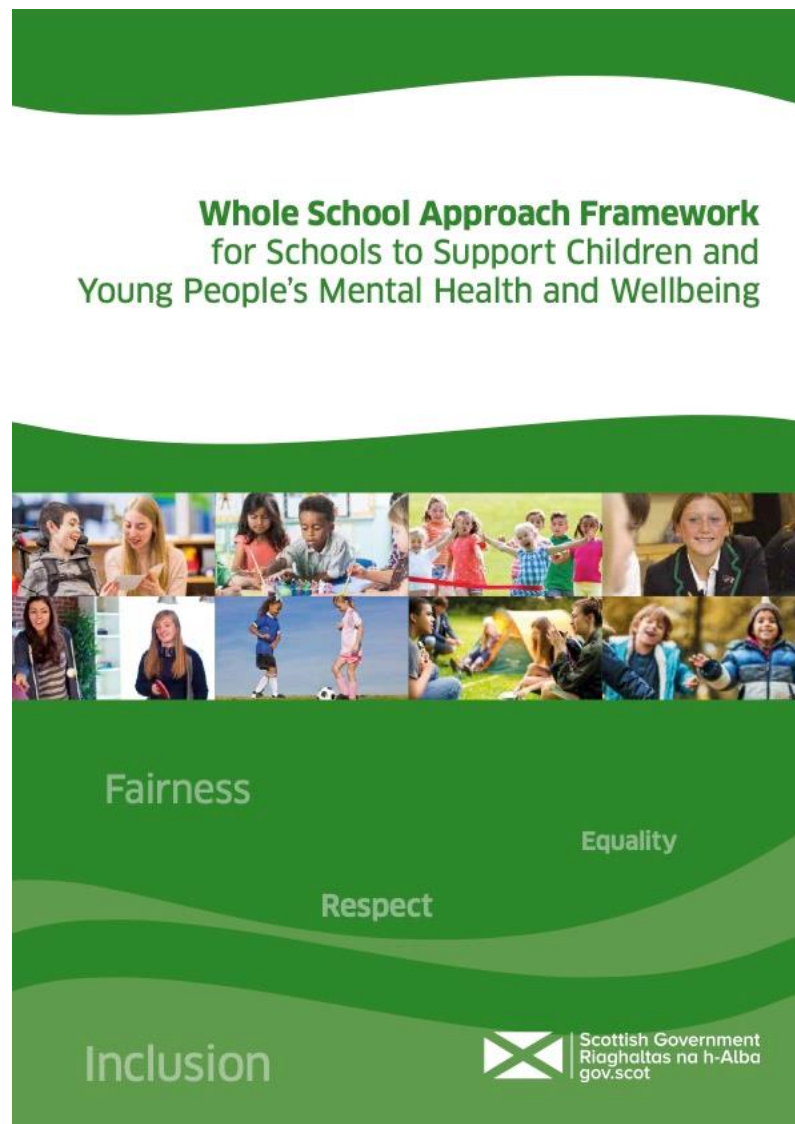
The Carers Centre specialises in supporting carers and young carers.

**Police Scotland** 101 / 999

**NHS 24** 111

## Whole School or Youth Setting Approach

This whole school approach framework for schools is designed to support school teams consider preventive and strategic approaches to supporting and promoting the mental health and wellbeing of all children and young people's. Click on the picture below to access the information and supporting documents. The information contained will also be useful for professionals working in other youth settings.



## Curricular Resources for use in Schools and Youth Settings

### On Edge Self-Harm Awareness Resource Pack for P6-S6

This curricular resource was developed in partnership with mental health and education professionals and funded by NHS Greater Glasgow and Clyde. It comprises of 4 lessons for use with children from P6-S6.

Click on the link below to access the On Edge Pack including 2 films plus all supporting resources.

<https://www.seemescotland.org/young-people/information-for-schools/partner-resources>



### Positive Mental Attitudes – Schools Curriculum Pack

This pack was developed to support teachers and practitioners to engage with young people about mental health issues. The lessons can be used individually and put together to provide a whole school approach to mental health education. The curriculum is designed for secondary pupils and the S4 lessons cover the topic of self-harm.

As the pack is now a number of years old the accompanying addendum details changes and additions to the content:

[Positive Mental Attitudes Curriculum Pack](#)

## **Building Capacity in East Renfrewshire Employees to Support Young People who Self-Harm**

All East Renfrewshire staff will have access to mental health and self-harm training as part of the Self-Harm Framework. Implemented across 4 levels, staff members can decide what level of training is most appropriate for them. The framework incorporates self-led online modules and interactive, in-person sessions. Click below for details:

<https://blogs.glowscotland.org.uk/er/public/selfharmtraining/uploads/sites/18540/2024/09/20133036/Self-Harm-Framework-September-24.pdf>

### **East Renfrewshire Healthier Minds Self-Harm One Day Training**

In 2022, East Renfrewshire launched its own 1 day Self-Harm Training session. This training is available to all East Renfrewshire employees.





# HEALTHIER MINDS



## Self-Harm Support Pack

**In this support pack you will find information, advice, strategies and resources to support a young person who is self-harming. Any plan or strategy should be fully discussed and agreed with the young person and reviewed regularly to monitor their progress.**

## Promoting Wellbeing: Preventive and Reactive Strategies

Self-harm is most often used as a coping strategy for dealing with emotional pain, distress or a feeling of numbness. Therefore, reducing the urge to self-harm requires the identification or development of alternative or less harmful coping strategies.

**Remember it is probably unrealistic to expect the young person to stop the self-harming behaviour immediately or completely. Make a plan to reduce the behaviour by trying and practicing different approaches.**

### Alternatives to Self-Harm

Traditionally recommended alternatives like drawing on the skin with red pen, flicking an elastic band against the wrist, pressing ice against the skin or biting into food with a strong taste such as chilli or ginger can occasionally effectively replace self-harming behaviour, however, more recently concerns have been raised that they may increase the behaviour as they cannot fully replace the sensation sought by self-harming. This is not to say that such alternatives are never helpful and if considered carefully with the young person and monitored may be effective at reducing the self-harm behaviour.

### Distraction Techniques and Coping Strategies

Distraction techniques are likely to be more effective at reducing the need to self-harm. The urge to self-harm is often likened to a wave which builds to a point and then dissipates over a period of time. Therefore, if the person can be encouraged to use a distracting activity when the urge to self-harm appears they may be able to avoid self-harming while the impulse is strong and find they have less need for it as the feeling dissipates. These distraction techniques have been identified by young people with lived experience of self-harming as helpful when the urge to self-harm appears. These same techniques are also helpful coping strategies for reducing and managing feelings of stress, anxiety, low mood and numbness.

- Go for a vigorous walk or run or do some high impact exercise
- Re-organise a room
- Hobbies e.g. baking, painting, drawing, sewing, knitting, sport, coding
- Play a musical instrument
- Read a book, magazine, comic
- Keep a journal or diary of your feelings
- Watch a favourite movie, video clip or listen to music
- Contact a friend
- Practice mindfulness or deep breathing
- Burst bubble wrap
- Play a game – Wordle, Candy Crush
- Take a shower
- Occupy hands with safe objects e.g. a rubix cube, stone, stress ball, blue tac, fidget spinner, popper
- Play a video game

## Identifying the Reason for the Self-Harm

Identifying the function, the reason or what the person gets from the self-harming behaviour is crucial for identifying alternative and distraction strategies. Here you will find ideas based on the identified function.

### When the self-harm occurs to cope with emotional distress:

Watch or listen to some comedy or something light-hearted

Draw or paint – e.g. [Mindful Colouring](#)

Listen to uplifting music

Write out thoughts or feelings in a journal

Carry 'safe' objects in pockets that can occupy your mind and hands

Practice [mindfulness or deep breathing](#)

Have regular check-ins with a trusted adult

Write down a list of your strengths and talents and make a plan to spend more time on these Spend time with people who make you feel good

Keep a journal of how you feel

[Make a Self-Soothe Box](#)

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

### When the self-harm occurs to stay alive:

Don't keep your feelings to yourself – reach out to someone you trust.

Make your environment safe – remove things that you could harm you - knives, pills or razors

Call a helpline such as [Childline](#), [Samaritans](#) or text [SHOUT to 85258](#)

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

### When the self-harm occurs to escape from feeling numb or disconnected (desire to feel something):

Chew something with a strong taste (chilli or mint)

Do some vigorous exercise – running, press ups

Draw on yourself with a red pen

Have a cold shower or squeeze ice

Practice [mindfulness](#) to help you feel more grounded

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

### When the self-harm occurs to gain a sense of control:

Write down some achievable tasks for the next few hours or day and work through them

Take on a role that carries responsibility or decision making e.g. part-time job, volunteering, pupil council representative, team sport

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

### When the self-harm occurs for self-punishment

Do some physical exercise

Try to release negative energy by hitting a punch bag or pillow

Write down how you feel on paper, then rip it up [Make a Self-Soothe Box](#) or memory box containing good things in your life, achievements, things you are proud of and grateful for

Have a hot shower

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

### When the self-harm occurs to connect with others:

Call, text or arrange to meet up with a friend

Create a list with a close friend of positive things you want to do or achieve in the next few days, month or even year

Plan a trip, event, or catch up with someone

Volunteer in your local community

Avoid triggering media content such as pro self-harm or suicide websites. Try joining more positive online forums such as a recovery group or general chat for young people like [Togetherall](#) (16+)

Do something to distract yourself for at least 15 minutes [The 15 Minute Rule](#)

# THINGS THAT HELP ANXIETY

BY @twentysevenLKLD



PHONE A  
FRIEND



DEEP  
BREATHING



HOLD ON  
TO SOMEONE



GO FOR A  
WALK



SHOWERS &  
BATHS WITH  
OILS



ENGAGE ALL 5  
SENSES



DISTRACTIONS  
(TV, PAINT NAILS,  
WALK DOG)



CALMING  
MUSIC



DO SOMETHING  
WITH YOUR  
HANDS



WRITE IT  
OUT



DRINK COLD  
WATER



CUDDLE A  
WEIGHTED  
BLANKET

## 15 Minute Rule

Research suggests that the urge to self-injure dissipates over time if not acted upon just like the wave analogy from earlier. Based on this finding, the 15 minute rule encourages the person to choose to do something else for a short period of time. Read more about the 15 minute rule here:

### The 15 Minute Rule

**“When the urge to self-injure comes upon you, check the time and tell yourself that you have felt the urge but you are going to choose to hold off of any self-harming behaviour for 15 minutes. For the duration of this 15 minute period keep busy and try one of the distraction techniques above. At the end of the 15 minutes check how you feel and make the choice about trying for another 15 minutes. You are in control, you make the choice.”**

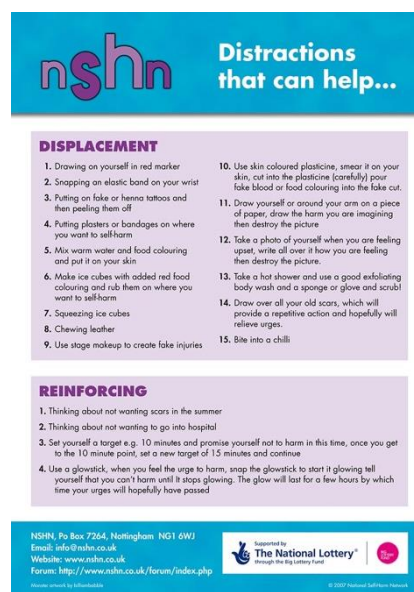
## Shout – Little Book of Coping Skills

To download your free little book of coping skills click on the picture below:



## NSHN Distractions That Can Help

For distractions and coping strategies click on the picture below:



The Penumbra charity has launched the [Self-Harm Network Scotland website](https://selfharmnetworkscotland.org.uk/) packed with useful information, advice and resources.

You can also get help for yourself or someone you are supporting.

<https://selfharmnetworkscotland.org.uk/>

## **Make a Self-Soothe Box**

Find out how others have made a self-soothe box to reduce symptoms of panic, anxiety and low mood at Young Minds:



## **Safety Planning and Diary Keeping**

Self-harm safety plans are a useful way to document your discussions with the young person, identify, triggers, helpful coping strategies and sources of support. It will also help monitor progress and keep the young person focused on the goal of reducing self-harming.

Safety plans can take many forms and do not need to be done with pen and paper. Apps such as Calmharm can provide a digital form of safety planning as can making a note of the plan directly in the young persons' mobile phone. Alternatively, complete the plan on one of the 2 suggested formats and keep a paper copy and/or photograph stored in the young person's mobile phone. Let the young person decide the best way to record, store and refer to their safety plan.

A diary is another useful tool to help the young person identify triggers to self-harming behaviours and track their progress.



# “My Safety Plan”

“I know I'm at risk of self harming when I feel”

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“My self harm is often triggered by”

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When I feel like this I will try -

Distractions are good here

This feeling will pass, I can do this

“

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”

Coping strategies I can use

“I will reach out to”

Name \_\_\_\_\_

Name \_\_\_\_\_

I can get help online from

text SHOUT to 85258

[www.samaritans.org/?nation=scotland](http://www.samaritans.org/?nation=scotland) 116 123

[www.themix.org.uk/get-support/speak-to-our-team](http://www.themix.org.uk/get-support/speak-to-our-team)

# “My Safety Plan”

My self harm is often triggered by:

.....

I know I'm at risk of self harming when I feel (or do):

.....

When I feel like this I will try (distractions are good here):

.....

Coping strategies I can use:

.....

I will reach out to:

Name .....

Name .....

Name .....

Name .....

I can get help online from:

text SHOUT to 85258

[www.samaritans.org/?nation=scotland](http://www.samaritans.org/?nation=scotland) 116 123

[www.themix.org.uk/get-support/speak-to-our-team](http://www.themix.org.uk/get-support/speak-to-our-team)

“This feeling will pass, I can do this!”



## My Wellbeing Diary

Date and Time	What was I doing or what was happening?	How was I feeling and how strong was the feeling (0 very mild – 10 very strong)?	What did I do?	What could I do next time instead to help me feel better?

## Find Support

### Ripple Suicide Prevention Online Interceptive Tool

<https://www.ripplesuicideprevention.com/>

Ripple is an innovative online interceptive tool designed to ensure more help and support is provided to individuals in distress. By installing Ripple on your device, anyone searching terms related to self-harm or suicide will be connected to helpful and free 24/7 sources of support.

### Get Help Quickly

#### Penumbra Live Chat Service

<https://selfharmnetworkscotland.org.uk/>

5 days a week, 6pm – 10pm

For anyone aged 12 + across Scotland who needs support with self-harm



### Childline Scotland

Call 0800 11 11

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

Free and confidential helpline for children and young people available 24/7. See the website for more information, advice, videos and resources.

### Give us a Shout

Text Shout to 85258 for free text support 24/7

<https://giveusashout.org/>

### Alumina

Free, online 7 week course for young people aged 10-17 struggling with self-harm. Each course has up to 14 young people across the UK.

<https://alumina.selfharm.co.uk/>

### Papyrus

Call Hopeline UK on 0800 068 41 41

[www.papyrus-uk.org](http://www.papyrus-uk.org)

For anyone struggling with feelings of suicide. Available from 9am – midnight every day.

[www.eastrenfrewshire.gov.uk/ercpc](http://www.eastrenfrewshire.gov.uk/ercpc)

**Samaritans**

Call 116 123

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

24 hour confidential helpline for those in crisis or who need to talk.

**The Mix**

Call 0808 808 4994

<https://www.themix.org.uk/get-support/speak-to-our-team>

Available 7 days a week from 4pm till 11pm

**For anyone aged 16 or over****Breathing Space**

Call 0800 83 85 87

<https://breathingspace.scot/>

Free, confidential phoneline for anyone in Scotland over the age of 16, feeling low, anxious or depressed. Available Monday to Thursday from 6pm - 2am and Friday to Monday 6pm - 6am.

**Togetherall**

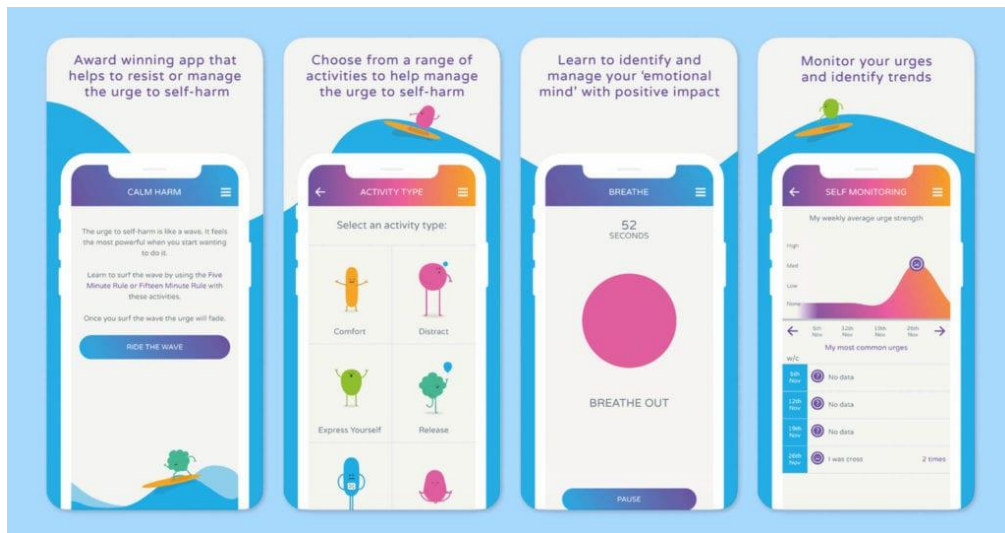
<https://togetherall.com/en-gb/>

safe, online community where people support each other anonymously to improve mental health and wellbeing.

**Apps****CALMHARM**

<https://calmharm.co.uk/>

Download the free Calm Harm App to help you manage or resist the urge to self-harm.



### Samaritans Self-Help App

<https://selfhelp.samaritans.org/>

Keep track of you are feeling, get help and advice for things you can do to cope, feel better and stay safe.



### Helpful Websites about Self-Harm

#### Harmless

<https://harmless.org.uk/>

Organisation which works to address and overcome issues related to self-harm and suicide.

#### Heads Above the Waves

<https://hatw.co.uk/>

Organisation which raises awareness of depression and self-harm in young people. Hear other people's stories and get help.

### Life Signs Self Injury Guidance and Network Support

<https://www.lifesigns.org.uk/>

Comprehensive information and support.

### **National Self-Harm Network**

<https://www.nshn.co.uk/>

Information, advice and online support forum.

### **Self Injury Support**

<https://www.selfinjurysupport.org.uk/>

Support for women and girls.

**Websites with helpful information, advice and resources about emotional health and wellbeing**

### **Aye Mind**

<https://ayemind.com/resource-map/>

### **Childline Scotland**

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

### **Cool 2 Talk**

<https://cool2talk.org/health-info-zone/>

### **SAMH**

<https://www.samh.org.uk/get-involved/going-to-be/information-help/children-and-young-people>

<https://www.samh.org.uk/about-mental-health/mental-health-problems/self-harm>

### **See Me**

<https://www.seemescotland.org/young-people/information-for-young-people/>

### **The Mix**

<https://www.themix.org.uk/>

### **Young Minds**

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

<https://www.youngminds.org.uk/young-person/my-feelings/self-harm>

If you are looking for information on.....

Bereavement or loss

LGBTQ+

Eating Disorders

Anxiety

## **Helplines for Parents and Carers**

### **Children 1<sup>st</sup> Parentline**

**08000 28 22 33**

<https://www.children1st.org.uk/help-for-families/parentline-scotland/>

Available 9am-9pm weekdays; 9am-noon weekends.

### **Young Minds Parents Helpline and Webchat**

Call 0808 802 5544

<https://www.youngminds.org.uk/parent/parents-helpline-and-webchat/>

Call free for detailed advice, emotional support and signposting about a child or young person up to the age of 25. Available from 9:30am - 4pm, Monday - Friday.

## **Information, advice and support for Families**

<https://www.familylives.org.uk/advice/teenagers/health-wellbeing/self-harm>

## **Support for Education Staff**

<https://www.educationsupport.org.uk/>

UK charity which supports the mental health and wellbeing of education staff. Visit the website for information, advice and resources or **call the helpline on 08000 562 561**.

## **Other Relevant Organisations and Websites**

### **CELCIS**

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

Centre for Excellence for Children's Care and Protection are the go-to organisation for specialist knowledge concerning the care and protection of children in Scotland, and work with people at all levels (strategic, operational and practice) in communities, across the country and internationally, to improve how services can be developed and delivered to meet the needs of children, young people and their families. The organisation bring together insight, influence and impact in ways to make positive, transformational change happen here in Scotland and across the world.

### **East Renfrewshire Healthier Minds**

<https://blogs.glowscotland.org.uk/er/healthierminds/>

Comprehensive information and resources on a range of emotional wellbeing topics.

### **Families Outside**

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

Charity supporting families affected by imprisonment.

### **Mindreel**

<https://mindreel.org.uk/>

Mindreel is an initiative to create a valuable learning resource using educational films that address a wide range of mental health issues.

## **Papyrus**

[www.papyrus-uk.org](http://www.papyrus-uk.org)

Papyrus is the leading charity working towards prevention young suicide. Find help, advice and resources for those thinking about suicide, parents/carers or other family members and professionals.

## **Place2Be**

<https://www.place2be.org.uk/>

**Place2Be is a children's mental health charity with provides support, advice and training to pupils, families and staff in UK schools.**

## **Scotland Suicide Prevention Action Plan**

<https://www.gov.scot/publications/scotlands-suicide-prevention-action-plan-life-matters/>

<http://www.healthscotland.scot/health-topics/suicide/suicide-prevention-overview>

## **The Cybersmile Foundation**

<https://www.cybersmile.org/>

The Cybersmile Foundation is a multi award winning anti cyberbullying non profit that provides expert help and advice around cyberbullying.

## **Young Scot Choices for Life**

<https://young.scot/campaigns/national/choices-for-life>

Young Scot Choices for Life aims to raise awareness amongst young people aged 11-18, about the dangers of smoking, alcohol and drugs as well as online safety and information on how to deal with negative peer pressure.

## **Youth Link Scotland Heids Together: A Wellbeing and Youth Work Resource**

<https://www.youthlinkscotland.org/resources/heids-together-a-wellbeing-youth-work-resource/>

Wellbeing toolkits, podcasts, activities and planners on wide range of mental health issues for use with children and young people.



## Sources and Additional Reading

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**HEALTHIER MINDS** 