Sources of help

Help for parents and carers

Professional Help:
- GPs
- School Nurses
- Counsellors/Therapists

Helplines and Online Information/Support:
- YoungMinds
  www.youngminds.org.uk
- YoungMinds Parent Helpline:
  0808 802 5544
  (Mon-Fri 9.30am-4pm)
- Samaritans
  116 123
  www.samaritans.org

For more information on the experiences of other parents and carers, go to http://www.healthtalk.org/self-harm or scan this code:


Help for young people

Professional Help:
- GPs
- School Counsellors
- School Nurses
- Child and Adolescent Mental Health Services*
- Adult Mental Health Services*
  *Usually through referral by GP or other professional

Helplines and Online Information/Support:
- YoungMinds.org.uk
- Childline – 0800 1111
- www.childline.org
- Samaritans – 116 123
- www.samaritans.org
- www.harmless.org.uk
- Mind (over 18s only)
  www.mind.org.uk
- Rethink
  www.rethink.org
- Harmless
  www.harmless.org.uk
- Royal College of Psychiatrists
  www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/parents/carers/self-harm.aspx

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About this guide

This guide was developed from talking to parents and carers of young people and is aimed at helping parents, carers, other family members and friends cope when a young person is self-harming. It includes information on the nature and causes of self-harm, how to support a young person when facing this problem and what help is available.

What is self-harm?

Self-harm is behaviour that is done deliberately to harm oneself. At least 10% of adolescents report having self-harmed. Self-harm can include, for example:

- self-cutting
- taking an overdose
- hitting or bruising
- intentionally taking too little or too much medication
- burning
- hanging
- suffocation

Although some people who self-harm may be suicidal, self-harm is often used as a way of managing difficult emotions without being a suicide attempt. However, self-harming can result in accidental death.

Is your child self-harming?

As a parent, you might suspect your child is self-harming. If you are worried, watch out for these signs:

- Unexplained cuts, burns or bruises
- Keeping themselves covered; avoiding swimming or changing clothes around others
- Being withdrawn or isolated from friends and family
- Low mood, lack of interest in life or depression
- Blaming themselves for problems or expressing feelings of failure, uselessness, hopelessness or anger

I think for parents... it’s important to know that you are not alone”

HealthTalk.org parent interview

What makes a young person vulnerable to self-harm?

Individual Factors: e.g., depression, anxiety, low self-esteem, hopelessness, poor problem-solving, impulsivity, eating disorders, drug or alcohol abuse, bullying (e.g., because of race or sexuality)

Family Factors: e.g., mental health difficulties in the family, poor parental relationships, drug/alcohol misuse in the family, unreasonable expectations, conflict between young person and parents, excessive punishments or restrictions, family history of self-harm, abuse, neglect

Social Factors: difficulties in peer relationships, bullying, peer rejection, abuse, availability of methods of self-harm, friends who self-harm, media and internet influences
Reasons for self-harm

Self-harm can serve several different functions:
- to manage extreme emotional upset
- to reduce tension
- to provide a feeling of physical pain to distract from emotional pain
- to express emotions such as hurt, anger or frustration
- a form of escape
- an effort to regain control over feelings or problems
- an attempt to punish themselves or others
- to elicit care from others
- to identify with a peer group
- self-harm can also be a suicide attempt

Possible future problems

- Self-harm can be a serious problem
- Repeated self-harm is common following a first episode
- Depending on the method, self-harm can lead to serious physical damage, including permanent scarring, the medical effects of a dangerous overdose, etc.
- Self-harm may be linked to other problems, such as depression, anxiety, eating disorders or drug and alcohol use, for which specific treatment may be required
- Individuals who have self-harmed are at higher risk of suicide than other young people, although the risk is still low

For these reasons, it is important where possible to tackle self-harming behaviour early.

Finding out about self-harm

Some children may tell their parents about their self-harm; other parents find out from friends, teachers or medical staff.

Discovering that your child is self-harming can be very upsetting and stressful. Parents may experience a range of emotions, including anger, sadness, helplessness, shame or disgust. It is normal to feel strong emotions and important to try and understand and accept them so that you don’t risk misdirecting them at your child. Try to think of their behaviour as an expression of deep emotions they can’t handle any other way.

Supporting your child

- Have a conversation, but don’t bring up self-harm straight away
- You could organise this around another activity, like a walk or drive
- Ask if anything is worrying them and how they are feeling
- Let them know you are not judging them or putting them down, and that you love them and that will not change
- Show that you are prepared to listen to what your child has to say
- If your child does not want to talk, see if they will write you a note, email or text message about how they feel
- Ask if they would rather speak to someone else (e.g., a GP, counsellor or helpline)
- If your child is able to be open about their self-harm, try to help them work out feelings and situations that may trigger it
- Try to think together of ways to handle strong feelings that don’t involve self-harm (see “Alternatives to Suggest” on page 7 for ideas)
- Help them think through their problems and see possible solutions
- Encourage them to think about the long view and how things may change in the future

If you’re hurting so badly in your head, to harm yourself on your skin... stops the feelings in your head.”

Healthtalk.org parent interview

“We worked out that if she sent me a blank text, I knew that she needed some company or a cuddle or some distraction.”

HealthTalk.org parent interview
Other ways to help:

- Take talk of suicide very seriously
- Don’t let self-harm become the focus of your relationship with your child
- Try to deal with self-harm in a matter-of-fact manner
- Let your child know that their emotions are real and important
- Remind your child of their strengths and abilities
- Reassure them that you do not think they are a failure whatever their difficulties
- Explain to your child that you want to help but may not know the best thing to do, and try to come up with a solution together (e.g., visiting the GP)
- Work out with your child how to make it more difficult for them to self-harm (e.g., by storing medication securely or removing sharp objects)
- Watch for signs of bullying or abuse that may be triggering self-harm

“"I used to ask, ‘On a scale from nought to ten, with nought being the worst and ten being the best, how low are you feeling?’””

HealthTalk.org parent interview

Managing injuries from self-harm

If you are concerned about a wound (e.g., if it is too deep to manage at home) or other serious injuries you should seek emergency medical help through your local Accident and Emergency service

Overdoses:

- Get your child to an emergency department as soon as possible
- Try to find out what they have taken and tell emergency medical staff
- If your child won’t tell you, look around for empty pill bottles or blister packs

Cuts and Wounds:

- Apply pressure to bleeding cuts using a bandage or towel (a tea towel may be less likely to stick to the wound)
- Clean the wound under running tap water and apply a sterile adhesive dressing
- If the wound has become infected (e.g., swelling, pus forming or spreading redness), encourage your child to seek medical help

Burns:

- Cool with cold water for 10 to 30 minutes, then cover with cling film
- Don’t use ice or any creams or greasy substances such as butter

For more information on handling wounds and burns, and information about when to see a doctor, see www.nhs.uk or ring NHS Direct on 111.

Scars:

- If your child has scars they are embarrassed about, you can look into commercial products that may help them fade
- Scars can also be covered by makeup
- Remind your child that most scars will eventually fade

“I went into practical mode. Maybe practical mode was easier to deal with than emotional mode. So you buy your antiseptic and you buy your cotton wool and you look after the cuts because that’s the easy bit.””

HealthTalk.org parent interview
Because self-harm is helping your child to cope with difficult feelings, it is important to think of other ways they might manage their feelings. These can include distraction, stress management techniques, and thinking of alternative methods of discharging extreme emotions. Sometimes joining a social activity or sports group can be helpful as a distraction. This can also provide a form of social support.

Some people find that putting off harming themselves can decrease or get rid of the urge. Reducing the accessibility of objects that might be used for self-harm (e.g., pencil sharpeners, knives, medication etc.) may help to delay the impulse to self-harm.

Alternatives to self-harm

Alternatives to suggest

Soothing/Stress Relief/Distraction:
- Going for a walk, looking at things and listening to sounds
- Create something: drawing, writing, music or sculpture
- Going to a public place, away from the house
- Keeping a diary or weblog
- Stroking or caring for a pet
- Watching TV or a movie
- Getting in touch with a friend
- Listening to soothing music
- Having a relaxing bath

Releasing emotions:
- Clenching an ice cube in the hand until it melts
- Snapping an elastic band against the wrist
- Drawing on the skin with a red pen or red paint instead of cutting
- Sports or physical exercise
- Using a punchbag
- Hitting a pillow or other soft object
- Listening to or creating loud music

When to seek further help

If you are concerned about your child, particularly if the self-harm or distress increases or you notice problems such as anxiety or low mood, you should seek further help.

- This is best done through your general practitioner (GP), who may refer your child to a community Child and Adolescent Mental Health Services (CAMHS) where an assessment would be done and a plan made for support and treatment
- If your child is reluctant to get help or doesn’t acknowledge the risks you can still receive advice from your GP
- Telephone advice lines can give you information (see sources of information at the back of this booklet)
- If your child goes to hospital for any reason related to self-harm, they should be seen by someone who will talk to them about self-harm and assess their mental well-being. If it is not clear whether this has happened, ask the staff about it

Telling others

Think carefully about who to tell about your child’s self-harming. This includes thinking about their possible reactions, and balancing your child’s need for privacy with your need for support.

Many parents say secrecy can make things more difficult: it can add to the pressure on both parents and child, and take away sources of help and comfort from other family members.

Talking to people you trust can be a huge help. If you haven’t told family members yet, you might consider speaking to a counsellor or calling a helpline to work through your feelings and decide how and when you might broach the topic of your child’s self-harm with friends and family.

“Don’t give up. There is help out there.”
Healthtalk.org parent interview

“As soon as you mention family mental health problems to a friend, it is quite common to have them reply, ‘Do you know, I have that as well.’”
Healthtalk.org parent interview
Other family members

You and your child can think together about how much you want to tell other family members, including brothers and sisters, about the self-harm

- Explain to other children and close family that your child is going through a difficult time – you do not need to give details
- Siblings may feel angry or that their sibling who is self-harming is being selfish and causing distress in the family
- You are still the parent: don’t be afraid to set boundaries on your child’s behaviour (e.g., how they treat siblings)
- Remember your other children need your attention and support as well
- Try to help them manage their feelings
- Watch for similar behaviours in your other children
- Remind them of other ways to cope: e.g., talking, relaxation, sports or art
- Listen to them and remind them that you love them
- The wider family may or may not understand why a child would self-harm, so you and your immediate family will have to think about how they might react and how you want to manage this

Attending to your own needs

It is normal for parents to experience strong emotions and it is important that you look after yourself as well as your child. Recovery from self-harm may be a long process, so try to find time for relaxation. Pay attention to the physical signs of stress, such as stomach aches, difficulty sleeping, or depression.

- Take time for yourself when you are upset. Do things you enjoy, such as going out with friends, exercise, hobbies, etc.
- Learn to identify and accept your own feelings. It may help to write them down.
- Find an outlet for your emotions, such as talking to a friend, relative or therapist. You may find other emotions coming out as anger – be careful that your child does not think this is directed at them.
- Give yourself permission only to do things that really need doing and don’t worry about less important tasks. Take time off work if you are able, and accept help from family and friends.

Try to keep communicating

Your child may remember what you say even if they don’t seem to be listening at the time, and may take your advice or talk to you later.

Don’t give up on your child

Trying to help your child may sometimes be frustrating. However, when they push you away is often when they need you the most. Remember, most young people who self-harm will stop sooner or later.

“I see the future as like a contour map – she will continue to get better and she will have long periods where life is good.”

HealthTalk.org parent interview