



Anna Freud
National Centre for
Children and Families

Self-harm

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What is self-harm?

Self-harm or self-injurious behaviour is the deliberate act of causing harm to the self with or without an intention to die from this harm.

It can involve cutting, pinching, hitting, scratching oneself, pulling out hair or banging the head or body. It is the expression of and temporary relief from overwhelming, unbearable and often conflicting emotions and feelings. Self-harming behaviours can become addictive and compulsive.

How common is self-harm?

[Research](#) suggest that 1 in 4 young women and 1 in 10 young men have self-harmed at some point in their life. Self-harm rates have also risen fastest among young people since 2000. [Research](#) adds further evidence that more young people may be struggling as a result of the pandemic.

Is it connected to suicidal feelings?

Sometimes young people feel suicidal whilst self-harming and may have an unconscious wish to die. Some feel ambivalent or indifferent about staying alive whilst they self-harm.

Often it is a way to manage difficult emotions rather than an attempt to end their life. Regardless of the reason or intent, it is important to pay attention to and explore what might be going on.



What factors are associated with self-harm?

Self-harm is more likely in young people with a history of abuse or neglect and those with depression, an eating disorder or other serious mental health disorder.

A history of bullying, taking illegal drugs or drinking too much alcohol, being in foster care or a history of attachment disruption, loneliness or low self-esteem, body image difficulties, family problems e.g. divorce, exam pressures and a sudden change in life or accident are also associated with increased likelihood of self-harm.

Why do young people self-harm?

Self-harm is often (but not exclusively) a **way to cope with unbearable feelings**.

Young people may self-harm to **feel more in control**. They may feel desperate about a problem and not know where to get help. It may help to relieve the tension of bottled up feelings. It can be used as a way to punish themselves when feelings of guilt or shame become unbearable.

The behaviour can also be a way of **expressing anger** towards an adult they care deeply about. By directing their anger towards themselves they can express it without getting into an argument with their parents.

Inflicting self-injury can have an **anti-suicide function**. Self-injury can prevent a young person from acting on suicidal thoughts.

Self-harm may be used as a "**grounding strategy**". Inflicting pain in the here and now can stop intrusive and painful memories and flashbacks and "ground" young people in the present moment.

Some young people have not developed an ability to ask for help or they may not feel comfortable to do so. Expressing their distress in a physical way can be a strategy to **ask for comfort**. We can think about this as care seeking, rather than attention seeking.



Signs to spot in FE students

Potential indicators that a young person is self-harming may be a young person:

- Keeping themselves fully covered even in hot weather.
- Not wanting to wear short sleeves or take off clothing for sports.
- Unexplained cuts, bruises, burns, usually on wrists, arms, thighs and chest.
- Unexplained blood stains on clothing or tissues.
- Signs that they have been pulling out their hair.
- Being withdrawn, anxious or depressed.
- Signs of low self-esteem, such as thinking they are not good enough.
- Talking about ending things or not wanting to go on.

How to start a conversation with a student if you're concerned

If you are worried that a young person is at risk, always follow your setting's safeguarding policies and procedures. Involve your designated safeguarding team as a matter of priority who will contact other services as necessary. If the young person is at immediate risk, ensure that they are taken to their GP or A&E as a matter of urgency, depending on the severity of the concern.

A good way to approach a student that you are worried about, is by asking them for a 'check in'.

Keep the conversation relaxed with a curious stance, and an open mind. Try to ask open ended questions rather than inadvertently appearing as though you already know how they are feeling and what is going on.

Young people who self-harm especially need to feel they are worthy of love and care. A trusting relationship can help them to explore their self-harm and identify different ways of coping with feelings or regaining control.

Ways you can support:

- Ask if the student would like to talk about their worries and take them seriously. Show them you care by listening, offer sympathy and understanding, and help them to solve problems.
- Take a non-judgemental approach, which accepts their negative feelings as valid.

- Ask them how they would like to be supported and letting them remain in control as much as possible (many people who self-harm feel they have a lack of control over their lives and feelings).
- Provide help and support without the expectation that the self-harm has to stop then and there.
- Ask if they can delay the urges and then notice if they are still as strong e.g. can they wait until they get home or until after dinner. Perhaps they can push themselves to wait a little longer each time.
- Make a list of distractions when they feel an urge, which could include:
 - ripping paper into small pieces
 - popping bubble wrap
 - writing or drawing
 - knitting or sewing
 - singing/dancing to a loud song
 - talking to a friend about something different
 - exercise
 - mindfulness/meditation
 - gaming
 - cleaning
 - cooking.
- Make a list of replacements when they feel an urge e.g. hold ice cubes against the skin, snapping rubber bands around wrist, drawing on the skin with red pen, putting on fake tattoos and picking them off, putting on plasters or bandages, chewing leather, physical expression like punching a pillow or throwing balls of paper, massaging the body area with cream, having a hot or cold shower perhaps with exfoliant.
- Reinforce the benefits of resisting the urge e.g. thinking about not wanting scars in the summer, thinking about not wanting to go to hospital.

Things to avoid:

- Forcing a discussion if the student is not ready to talk.
- Getting pulled in if they reject you but continue to be available by letting them know you are here whenever they are ready to talk.
- Ignoring, minimising or assuming that the behaviour is attention seeking, without acknowledging the young person's need for care. This approach tends to reinforce feelings of being worthless.

- Assuming every episode of self-harm is for the same reason.
- Reinforcing or perpetuating feelings of badness and the need for punishment. Try to find a balance between under- and over-reacting.
- Trying to make them stop self-harming (e.g. by removing self-harm tools), giving them ultimatums or doing things that they aren't comfortable with. Never ask them to 'promise' they won't harm themselves: this will only add more pressure.

Who else to involve

If the young person is at immediate risk, ensure that they are taken to their GP or A&E as a matter of urgency, depending on the severity of the concern. If their injuries involve wounds (e.g. cuts, burns), they should be cleaned, dressed and assessed by a medical professional.

It's important to familiarise yourself with any local support services that are available in your area and ensure you understand the pathways for referring students.

Young people can find mental health support and guidance on the [On My Mind](#) section of the Anna Freud Centre's website.

Some national organisations who may also be able to offer support include:

- **Harmless:** an organisation working to address and overcome issues related to self-harm and suicide
 - harmless.org.uk
- **DistrACT app:** an NHS app featuring content created by doctors and experts in self-harming and suicide prevention.
 - nhs.uk/apps-library/distract/
- **AFC Crisis Messenger:** a free, confidential, 24/7 text support service.
 - Text AFC to 85258

Notes and reflections

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