

ATTENTION SEEKERS?

Bespoke self-harm awareness training

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Self-harm Awareness delivered by Satveer Nijjar

Thank you for attending my session on self-harm awareness. You all engaged with the session really well, I hope you took something positive from it to apply in your interactions with those who self-harm. This was a short course with the emphasis on understanding what is behind the self-harm behaviours and appreciate there may be more questions raised than I was able to cover. I would recommend you complete this free suicide awareness training (20min)

<https://www.zerosuicidealliance.com/training> to complement the session.

At the end of this document is more information about the sessions I can offer alongside a list of useful websites and apps.

If you have any extra feedback, please do feel free to email it to me at satveer@attention-seekers.com.

What is self-harm?

“Self-harm refers to an intentional act of self-poisoning or self-injury... and is an expression of emotional distress.” **NICE**

Behaviours include:

- Head Banging
- Ligatures – around the neck and limbs
- Object Insertion
- Hair Pulling
- Burning
- Cutting
- Hitting with Objects
- Pinching
- Overdosing – medications and non-ingestants such as bleach

Eating Disorders, Substance Misuse and Alcohol Abuse are not included in this definition as there are separate services for these primary presenting conditions. Psychological harm and risk-taking behaviours are also not included but should be investigated as they could be signs of distress. Remember, the vast majority of people who self-harm do not intend on taking their own lives, self-harm and suicide have different intents.

What can lead to self-harm? Anything that causes a person distress. It is important to remember that it could be none of these and something else, or a combination of factors. Don't look for a bigger reason or dismiss the severity of their distress.

Functions of self-harm:

- As a coping mechanism – to manage the distress.
- Control – it's the only thing they feel they have control of in their life in that moment.

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- Relief of feelings – anything, including pain feels better than how they are feeling at that point in time.
- A Release – a way of release pain / distress/ frustration / anger etc.
- A Distraction – from the distress they are going through.
- To feel / be numb
- Self-punishment/Prevention of pain to another – they feel they deserve to hurt / it's better to hurt themselves than someone else (physically or emotionally)
- Communication of emotional pain – in the first instance to themselves and for some it may be to let others know

**Remember the bad day exercise – use it as a way of showing some understanding of self-harm behaviours, alongside relatability of managing distress with your client.

Relationship between self-harm and suicide:

- Self-harm does not necessarily lead to suicide thought statistically those who self-harm are more likely to die by suicide.
- You cannot measure risk of suicide solely based upon the method/frequency of self-harm
- Self-harm is often seen as a *coping mechanism* whereas suicide is about 'not living the life you are living'
- **Talking about suicide and suicidal thoughts is important... if you don't hold the discussion, who will?**
- Do not assume suicidal risk solely based upon presentation of behaviour, e.g. not ask someone about suicidal ideation as they scratched themselves and didn't cut deeply, or took 4 tablets and not 40.
- Use the risk assessment tool to practice having a conversation about suicidal thoughts with an individual. Please note this is a tool designed to be used for young people but it can help build the confidence of professionals in asking about suicidal thoughts.
- **If concerned always seek further advice/support – if you feel someone is at imminent risk call 999**
- If you follow this link: [harmLESS](#) it takes you to a planning tool for professionals working with children and young people who may be self-harming. It can help you have a supportive conversation and help the person make a plan to help keep themselves safe. It is not designed to replace any existing referral procedures or pathways. This is a useful tool for all as it can help build the confidence in asking about suicidal thoughts.

Broaching suspected self-harm:

- Do not initiate the conversation with focus upon the suspected injuries as this may come across as aggressive and accusatory e.g.
 - “What's that?” / “Show me your arm” / “What have you done there”
- Instead start a general conversation up and then broach it towards the end of the talk;

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- “Earlier, when you [reached for the cup/stretched your arm etc.] I noticed what appeared to be some injuries/marks on your arm, they looked sore. You don’t have to show me but if you do, I can check to see if they need medical treatment.”
- If they refuse, that is ok. Give medical advice and tell them who you will have to tell and also that they can come back to you, other appropriate staff members or signpost to ED/walk-in center/GP etc. if the injuries trouble them further.
- Remember the individual may be feeling scared/worried/anxious/nervous/guilty etc. and this may lead them to have a defensive response – so treat them with care, compassion and respect always.
- If they show you, then provide the appropriate necessary treatment.
- Any person who discloses they have self-poisoned or swallowed/inserted objects – requires a medical check urgently (GP/Hospital)
- Always make notes and pass the information on to the relevant individuals.

Responding to self-harm in the first instance:

- LISTEN to the individual and ask them what they would like to happen.
- Stay calm - Don’t be shocked / angry
- Provide any required first aid / or give first aid advice
- Don’t dismiss the severity of distress based upon the level of self-harm e.g. ‘just superficial.’ All self-harm is serious.
- Listen and accept their reasons if they are able to give them - Don’t look for something bigger.
- Don’t ask ‘Why are you self-harming’, instead try something like; ‘I can see you are distressed, would you like to talk about what has led you to feeling this way?’
- If they say they don’t know why - Don’t be abrupt or become the ‘interviewer’. Let them know you are there for them when they are ready, and that doesn’t have to be to talk about the actual self-harm, but what is behind it or how they are feeling.
- Appreciate and acknowledge what a big step the person has taken in order to disclose.
- Ask about suicidal thoughts – what was the intention of their behaviour?
- Self-harm isn’t the focus, it’s a symptom. Look beyond it.
- If you have to inform others, especially parent/carers, where possible give some options in how this could be done.
- Don’t feel the focus should be on stopping the self-harm. **Self-harm is a symptom of underlying distress.** Minimise risk and try to work with the underlying issue.
- Provide info on alternative coping techniques appreciating they are not simply a substitute for self-harm.
- Remember, the person may present to you with self-harm, but is not ready to talk about what is happening yet. You can still support them as you know they are in distress. The response should be in conjunction with the person and include

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support around harm reduction, medical support where applicable and alternative strategies.

- Consider what reasonable adjustments can be made e.g. breaks from lesson, wearing sleeved tops/long bottoms in PE, consideration of impact of medication where relevant.

Phrases / language to be aware of:

- **'It's just attention seeking'** – someone is seeking attention/support, this should be provided not dismissed.
- **'It's just a cry for help'** – why does the individual feel that they have to hurt themselves to get support? Let's respond and not ignore.
- **'It's just a phase/trend/copycat'** – we still have a duty of care and any form of self-harm should be investigated, including where groups of young people are self-harming.
- **'It's just superficial / not as bad as last time'** – the young person may feel they need to do it worse as they are being dismissed.
- **'When was the last time you self-harmed?'** – the focus is on the behaviour and not the underlying distress.
- **'Self-harmer'** – this is not their identity, it's a behavior.
- **'Committed suicide'** – suicide is not a crime, people die by suicide or 'take their own lives'

Remember self-harm is a symptom of underlying distress for the vast majority of individuals. Look at what's behind the presentation, are their trigger points or patterns of behaviour? Each individual is unique. If they come to you, to discuss the actual self-harm behaviour and not what's behind it, or, choose to talk about everything but the self-harm behaviour, you are supporting them. It's about them building trust and confidence in you. Remember, don't feel like you have failed if they don't stop self-harming – recovery means different things to different people.

Please email any enquires of bookings, questions or **feedback** of the session to: satveer@attention-seekers.com

Twitter @ _satveernijjar

Instagram @satveer_nijjar

Thank you again!

Satveer

Further sessions offered:

Below is an example of all the types of sessions Satveer can offer:

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In-house Professional CPD Training / Workshops / Conference Talks: Satveer is able to provide full day, half day and 2hr CPD training in-house to organisations in all sectors. She is also a workshop leader and conference speaker on the topic of self-harm. Alongside the self-harm training, Satveer is also able to provide a personal narrative on her journey of mental ill health, self-harm and suicide. The talks aims to reduce stigma of mental ill health, encourage people to seek support and support others. It is a story of emerging from difficult beginnings and not letting mental ill health be the story, but part of it.

Student sessions (School/college/university) - 4/5 PDC/PSHE sessions with students approx. 50mins to 1hr long. Ideally 30 in each session, but larger groups can be delivered too. Sessions broadly speaking cover: stigma and mental health, self-harm and suicide awareness, how to support yourself and/or a friend, how to manage distress, importance of talking, where to go for support.

In-house Education Staff CPD 1.5/2hr (3hr if on an inset) - all staff to be invited (I.e. teaching staff to admin to cleaning and dinner staff). This is a course in better understanding self-harm and covers:

This is not a substitute for a full day course but staff have consistently commented at how beneficial this course is as often it is only pastoral staff and SMT's who get to attend the full day yet they are the ones who may come across it first. It can be squeezed into 1.5hrs but this is not ideal.

Parent/carer session 1.5hr to 2hrs. This is a self-harm awareness session for parents, similar to the staff session but taking it to account the parental perspective and the emotions that can arise. Parents have consistently commented on how beneficial they found the session and how pleased they were that the school chose to tackle such a difficult, taboo and stigmatised subject. I am able to provide support to the school in promoting this session to parents.

Websites and apps suitable for professionals, clients, young people and parents/carers:

- **Journals and other writing resources include**
 - 'The Happy Self Journal' click: [The HappySelf Kids' Daily Journal For Boys and Girls Aged 6 to 12 – HappySelf Journal](#)
 - 'The Positive Planner', variety of resources for all ages, predominantly late teens/adults, click: [Shop • The Positive Planner - Make the Most of Today \(thepositiveplanners.com\)](#)
- **NEW online support, self-referral: Alumina** is a free, online 7 week course for young people struggling with self-harm. Each course has up to 8 young people, all accessing the sessions from their own phones, tablets or laptops across the UK. The courses take place on different evenings of the week and are run by friendly, trained counsellors and volunteer youth workers. Click: <https://www.selfharm.co.uk>

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- **MeeToo Connect App** - Teachers and support staff deserve the very best support for their mental health and wellbeing. MeeToo Connect provides education professionals with the tools to protect their own mental health, and better support their students.
- **MeeToo app** – The MeeToo app for young people U18, allows you to talk anonymously about difficult things with other people of a similar age or experience. You can get help with your problems or use your experiences to help others. The app is a safe space where all posts and replies are checked before going live so there is no harassment, bullying or grooming.
- **Hub of Hope App** – free to download app that provides services local to the student. If you are a service or know of a service that isn't represented on the app, please do submit the details via the online form. Also offers a crisis messenger service.
- **Every Mind Matters** <https://www.nhs.uk/oneyou/every-mind-matters/> A new website made by Public Health England to help people manage common mental health problems and support others.
- **Samaritans** – available 24/7 365 days a year. Free confidential support for all via text, email, letter, face to face .
- **Young Minds / Shout Crisis Messenger** – for young people who are in crisis (suicidal thoughts, bereaved, self-harm etc.), they can text 'YM' to 85258 and then receive support from a trained volunteer via text.
- **Risk assessment tool for suicidal ideation** – please note this is only a tool to give an indicator of suicidal risk, it should not be relied upon solely. All other factors should be taken into account. It should be used to help bring up the conversation of suicidal ideation and as a general measure, always seek further support and opinion.
<https://www.oxfordhealth.nhs.uk/harmless/assessment/>
- **YoungMinds.org.uk** – mental health awareness for young people
- **Mind.org.uk** – general mental health awareness TheCalmZone.net – male specific support
- **Campaign Against Living Miserably** – www.thecalmzone.net – this is a website aimed at reducing male suicide and stigma of mental ill health in males. It offers a helpline service alongside webchat.
- **Papyrus** – Support for those feeling suicidal or those who have been bereaved by suicide. Also offers a helpline called the 'HopeLine'.
- **Childline.org.uk** – support for young people in emotional distress
- **NHS MoodZone** – providing information on common mental health concerns including dealing with anger, exams etc.
- **Head Talks** - www.headtalks.com providing videos discussing all aspects of mental illness and recovery.
- **The Mix** – www.themix.org.uk – provides information on a range of issues affecting young people under 25yrs including – mental ill health, drugs, sexual health. Also offer a free helpline for young people.
- **Clear Fear App** – aimed for young people but can be for anyone. Helps individuals manage their anxiety.
- **CALM HARM App** – created by STEM4, this award-winning app is free to download and is designed to be used by young people who are self-harming. The APP is designed to reduce the level of self-harm and even prevent an episode of self-harm by providing delay tactics when the young person has the urge. Though designed for teenagers, there is no reason it can't be used by adults.

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- **FOR ME App** – an app designed by ChildLine to support young people up to the age of 19. The app covers many issues including self-harm, anxiety, bullying and body image issues.
- **Stay Alive app** – provides support for those worried about someone who is suicidal alongside support for individuals who are suicidal or at risk of suicide.
- **distrACT App** – an app designed to give information, support and alternatives to self-harm behaviours.

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