

Suicide and Self-Harm

Self-harm and suicide are **linked but may not always appear together**. Some people may self-harm to avoid suicide, and others may experience suicidal thoughts without self-harming.

Self-harm can escalate over time, and the underlying issues driving the behaviour may increase the likelihood of a suicide attempt.

Therefore, **self-harm should be addressed at the earliest signs** and **appropriate mental health support** should be provided to reduce the risk of suicide.



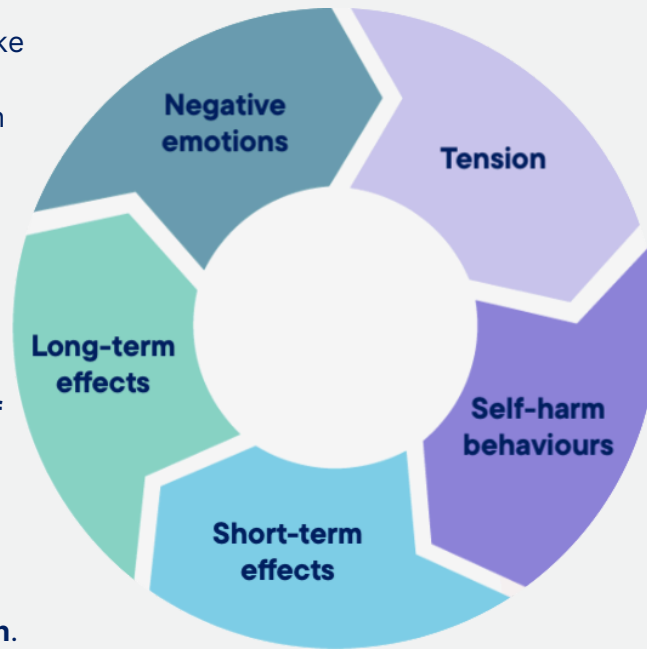
The Cycle of Self-Harm

The cycle of self-harm typically illustrates a complex **interplay of emotions and behaviours** that can occur when someone engages in self-harming activities.

Negative emotions can make an **individual feel uncomfortable**, resulting in a build-up of tension. Self-harming behaviours may occur to **release this tension**.

In the short term, this can provide **comfort, distraction, and a sense of control**. The long-term effects could be **shame or guilt**, leading to negative emotions and tension.

The cycle could start again.



SORTs Information Sheet

Print this sheet double-sided and fold along the dotted line to create a self-harm education booklet.

Definition of Self-Harm:

According to the Nice Institute for Health and Care Excellence (NICE):

Self-harm is defined as intentional self-poisoning or injury, irrespective of the apparent purpose.

Self-harm Behaviours



Self-harm is an **umbrella term** which includes a variety of behaviours:

Cutting

- Cutting the skin is the **most common method** of self-harm among 13-18-year-olds in England.

Hitting

- Often directed at the head and is more common among males.

Overdosing

- This is the most common reason for hospitalisation from self-harm.

Burning

- 10-20% of those who self-harm burn their skin (e.g., with cigarettes, hot water, erasers.)

Scratching

- Scratching is most commonly directed at the palms, wrists, arms and legs and may result in bruising.

Biting skin and pulling hair

- Biting skin and pulling hair occurs in around 16% of those who self-harm and may be a precursor to other forms of self-harm.

Swallowing

- Swallowing as a form of self-harm involves **intentionally** ingesting non-food items or harmful substances to inflict pain or injury.

Signs of Self-Harming Activity

The following activities could indicate the young person could be self-harming.

- Unexplained **cuts, scratches, burns or bruises**.
- Wearing **long sleeves** even in warm weather.
- **Avoid changing** clothes, swimming or exercising around others.

Other **warning signs** which could indicate a young person is struggling with their mental health:

- Becoming withdrawn or isolated.
- Poor school attendance/noticeable changes in school performance.
- Low Mood
- Sudden mood changes, e.g., aggression/anger.
- Lack of interest in previously enjoyed activities.
- Excessive self-blame.
- Expressing feelings of hopelessness or failure.
- Lack of interest in previously enjoyed activities.
- Changes in eating or sleeping habits.



It is important to remember that self-harm behaviour, reasons, and triggers can **vary widely** depending on the child.

Self-harm can be **sudden or unplanned** and can **occur once or repeatedly**. For many young people, it is **kept hidden and dealt with privately**.

All forms of self-harm, regardless of physical severity, need to be addressed and considered equally important indicators of distress.

Possible Reasons Children may Self-Harm

Young people, particularly adolescents, may be experiencing new life experiences or emotional events. They may feel as though they are **helpless** and **unable to problem-solve issues**, leading to large, **overwhelming emotions**. This could lead them to self-harm. **The most common reasons for self-harm are:**

- **Tension release** – The **most common reason** why young people self-harm is to manage very strong, negative emotions e.g., extreme anxiety or agitation.
- **Distraction** – Self-harm may be used to distract themselves from the unbearable emotional pain they are experiencing.

- **Control** – A young person may use self-harm to regain or maintain control over their emotions or problems.
- **Self-Punishment** – Young people may self-harm to punish themselves for doing or feeling something that they feel ashamed of or that they could not resist. They may not have control of these problems e.g., problems at home.
- **Communication** – Sometimes, when young people feel neglected or rejected, self-harm can be a way of communicating their distress to others. It can also be a way of asking for care and support.
- **Belonging** – Young people may self-harm to fit in socially with peers who are also self-harming. Self-harm signals their belonging to the group or strengthens their social position within the group.
- **Expressing and Managing Emotions** – All self-harm behaviours are different ways to express or manage negative thoughts and feelings.

Risk factors for self-harm among young people:

Individual

- Depression and anxiety
- Drug and alcohol misuse
- Low self-esteem
- Poor problem solving skills
- Impulsiveness
- Feeling hopeless
- Having ADHD or ASC
- Past or present sexual or physical abuse
- Trauma
- Neglect
- Identifying as LGBTQA+

Familial

- Parental mental health disorders
- Drug or alcohol misuse within the family
- Family history of self-harm or suicide
- Parental conflict or separation
- Being in the care system
- Domestic violence/abuse
- Sexual abuse, trauma
- Conflict with parents
- Parents' unreasonable expectations/pressure

Social

- Bullying/cyberbullying
- Homophobic/gender bullying or discrimination
- Peer rejection
- Difficult peer relationships
- Having friends who self-harm
- Being influenced by social media, websites or self-harm of well known figures in the media
- School pressure



Many factors can increase the risk of self-harm.

But remember: Young people may be exposed to multiple risk factors and not self-harm or not be exposed to any risk factors and still carry out self-harm behaviours.

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Supportive Response
To Self-harm



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