

Self Harming

INTRODUCTIONS:

- My experience in this area
- ***Important to make this workshop as relevant to your needs as possible, so I'd like to hear from you re what the more pressing issues / questions are for you regarding the issue of self harm***

WHAT IS SELF-HARM:

- It's important to gain a good understanding about this in order to ensure that our practice responses are going to be effective.

- ***In your experience, what sorts of understandings have you developed?***

- **Definitions** - I will define self harm in the following manner – (OHT)

“self harm can be considered to be a range to behaviours that have an intention to cause harm, that are in fact strategies to cope with other significant experiences of trauma, abuse, violence, and social and structural oppression.”

- Included in this definition of self harm are a range of behaviours such as:  
substance abuse  
eating issues  
cutting  
burning  
scratching  
poisoning,  
inserting or ingesting foreign objects  
and other high risk behaviours.
- There are two critical issues in this definition – firstly, the notion of **intention**. This is what distinguishes self harm from suicide. And secondly, and relatedly, self harm is about **copng** with life rather than ending life; it is a coping strategy. However, it is also important to note that self harm increases the risk of suicide.
- **Who self harms-** In general self harm tends to become an issue in adolescence or pre-adolescence. More young women than young men self harm.
- Admission to hospital figures (currently the only way of measuring the incidence of self harming) suggest that self harming behaviours are 10 times more common than suicide attempts for young people from 15-24 years. And there is a higher incidence of self harm for young women than young men.
- **Underlying issues** – therefore in order to understand self harm it is important to understand the underlying issues for people engaged in these behaviours.
- People do not engage in self harming behaviours for no reason.

- Whilst there are some common themes that can be seen in the stories of people who self harm, it is imperative that workers do not anticipate what the issues might be for people they are working with. Every person has their own story and as workers we must approach each person as unique.
- We know that self harm increases with a range of social factors such as:
  - childhood sexual abuse
  - physical abuse
  - witnessing violence
  - low income
  - early school leaving
  - homelessness
  - unemployment
  - involvement in criminal justice system
- We also know that Indigenous young people have higher rates of both suicide and self harm as do young people from non-English speaking backgrounds, and gay and lesbian young people.
- We also know that gender is significant in self harming. Young women self harm at higher rates than young men; conversely young men commit suicide at higher rates than young women. The ways in which women and men are socialised in society are significant here. In general, young women are encouraged to act in, young men to act out. There are many examples of this – men have higher rates of criminal offences, women have higher rates of depression.
- Therefore, self harm is both a coping strategy and a form of expression for young people. For many young people self harm expresses the pain that they feel in their lives. Self harm is often an expression of a loss of power or control that people have experienced. For example, there is a high correlation between experiences of sexual abuse and self harming behaviours.
- **Experience of self harm** - It is critical that as workers we develop an understanding of the experience of self harm from those we work with. This is particularly the case for those workers who have not engaged in behaviours such as this themselves; it is often difficult for other people to comprehend the experience for those who do self harm.
- ***What understanding do you have of how a person who self-harms might be feeling?***
- In my experience there are some general themes that young people I have worked with have consistently expressed:
  - feeling strong emotions that cant be communicated with words
  - creating a physical pain instead of an emotional numbness;
  - feeling alive;
  - a distraction from feeling the emotional pain; feeling overwhelmed by the emotional pain;
  - feeling in control of your body;
  - hating yourself and wanting to hurt yourself because you think you deserve it;
  - wanting to hurt yourself because others have hurt you and its what you know;
  - feeling better because it makes the emotional pain go away;

- Again the most common theme seems to be that people use self harming as a coping strategy, particularly to cope with some traumatic event in their lives.

### **PRACTICE RESPONSES:**

- There are several issues that we'll look at here:  
practice principles;  
strategies and skills;  
worker self-care;  
organisational issues;  
community responses.

### **Practice Principles:**

- The relationships we establish with the people that we work with are of the most fundamental importance. Many of these people's lives have been characterised by relationships of abuse and mistrust. It's critical that we work hard to establish appropriate, safe, trusting relationships.
- Be a real person with these people. Being genuinely interested and concerned about them is important. Most people can tell when you say something that you really don't mean.
- Creating a sense of safety in your work with people who self harm is imperative.
- As workers we must examine our own beliefs, values, and experiences in relation to self-harming to ensure that our issues don't become dominant in our work with others. Our attitudes, perceptions, feelings etc can have a big impact on how comfortable clients feel to talk to us – to disclose and then to talk about what's going on for them.
- Many workers feel that work in this area put this type of work into the too hard basket because they feel their skills are not sufficiently high. The most important skills required are simple – to listen and to care and to be a decent and responsible adult with these young people. And to be committed to reflecting on your practice and learning new skills that can help you with your work.
- People don't engage in self harming behaviours for no reason; in fact, it is quite normal for people to engage in such behaviours when they're experiencing severe trauma.
- Don't assume anything in this work; you have to ask each person what's going on for them.
- Let the person know that you are open to hearing what's happening for them and that you won't judge or interpret what they tell you (and then make sure you don't!). Young people who self harm often describe feeling very alone and unable to talk to other people about what's really happening for them
- Don't focus solely on the symptom / solution – the self harming behaviour – but on the underlying issues. These behaviours are coping strategies and should be

responded to in this way while the underlying issues are addressed and more healthy coping strategies are learnt.

- Attention seeking behaviour means something. Don't dismiss a person's pain because they are trying to get your attention and seek some help. These behaviours require our attention and the person is using desperate means to communicate with us.
- Don't panic in your work here, you need to be calm and consistent not moving around all the time as they are.
- We are not responsible for stopping the self harming behaviour. Don't try to rescue the people that you work with. And don't invest your sense of yourself as a worker in whether or not a person self harms again or not. This issue is not about you – don't make it about you. Some young people have said that it's something that they have had to go through and that it is a process. You can't rescue them or make them better; you can only support them to move through this in their own time and their own way.

### **Strategies and skills:**

- Something is being communicated to you here and often the person is not using words to do it. We have to be clever about understanding the message and encouraging people to share it with us in clearer ways.
- Look for the deeper message in the person's behaviour. Encourage them to tell their story. Let them know that you're interested.
- Get skills in using other, non-traditional forms of communication. Using creative processes such as paints, clay, collage, storytelling, symbol work, journaling, visualisations, inner child work, etc., can be immensely helpful here.
- In general this issue is about how people feel about themselves. This should be a central focus for our work with them.
- Get to know the person you are working with, not just their self harming behaviours. Find out what they like and dislike, nice things they do / can do for themselves, books they like to read. Show an interest in the whole person.
- Affirming the courage of the people that we work with is undervalued. All of these people have had traumatic experiences in some form and have survived in the best way that they could. Notice that and tell them about what you see.
- It will always be an important balance between focusing on the self harming behaviours but also attending to their underlying issues too. Often the crisis nature of the self harming behaviours keeps the focus away from what is really going on.
- Check out support networks for people and encourage them to use them where possible. It's important to people to have a range of different sorts of supports.
- Group work is challenging but very effective in this area.

- Ask for feedback from your clients and also ask how you might be able to help, what they want rather than assuming you know this.

#### **Worker self-care:**

- Self-care is critical; our work with other people depends on us keeping ourselves well and relaxed.
- Professional supervision is crucial for anyone working directly with people expressing intense issues.
- Regular opportunities to debrief with colleagues on an ongoing / daily basis is important.
- It's also important that we're able to recognise that working with issues such as this will be hard for us and will provoke strong feelings in us at times. This work can be frustrating and confronting in terms of our own issues. It is unavoidable that we'll be affected by this work. The critical issue is not that we have feelings about it but what we do with these feelings. It's important to recognise them and accept them as normal and as a sign of our humanness and sensitivity to the tragedy of these people's lives.
- Boundaries are important and help to keep us focused on what is and what is not our responsibility.
- It is important that you keep yourself physically and emotionally safe at all times. Never engage in behaviour that will put yourself at undue risk.

#### **Organisational issues:**

- All organisations working with people who self harm must have a range of clear policies and procedures that all staff and clients are aware of, including:  
Worker safety  
Safety for clients  
Confidentiality  
Duty of care
- Clients should be informed of confidentiality and duty of care policies at the commencement of their involvement in the service. Copies of these policies should be located in public spaces so that people can re-read them from time to time if they wish.
- If you need to take action against a person's wishes, it is advisable to inform the person beforehand; they have a right to know and dealing with these issues is an important part of your ongoing working relationship with them.
- Organisational support for workers doing this type of work is critical. Management and colleagues must be sensitive to the demands placed on workers in this work.

#### **Community Response:**

- Whilst self harming is a behaviour that individuals engage in, it reflects the nature of society and young people's experiences of life. Therefore, individual

responses alone will not alleviate the issue. The underlying issues that give rise to self harming must be addressed. Community responses to do this are an important part of our work as workers in this field.

- As workers it is important that we both engage in a range of community education and consciousness raising activities as well as working with young people to assist their participation in these community responses.

**CONCLUSIONS:**

- Any questions or comments before we finish?
- Complete evaluation form.
- Handout available.