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Coping with self-harm

A GUIDE FOR PARENTS AND CARERS

Adapted by Orygen, to meet the needs of young Australians and their carers.



About the guide

This guide was co-developed with parents and carers of young people, as well as young people themselves.

It 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, what help is available and how to support a young person who is self-harming.

This resource is an adaptation of the Coping with Self-Harm Guide produced by Oxford University Centre for Suicide Research. The original guide was produced with funding provided by the National Institute for Health Research (UK).

WHAT IS SELF-HARM?

Self-harm is behaviour that is done deliberately to harm oneself. Approximately one in ten Australian young people have self-harmed at some point in their lives.

Self-harm can include:

- self-cutting
- taking an overdose
- hitting or bruising
- scratching
- intentionally taking too little or too much medication
- burning
- 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-harm can result in accidental death.

IS THE YOUNG PERSON SELF-HARMING?

If you are worried that a young person is self-harming, here are some signs to watch out for:

- unexplained cuts, burns, bruises or blood on clothes
- 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- being withdrawn or isolated from friends and family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?

Each young person and each family are different. Here are some factors which may make a young person vulnerable to self-harm:

- **Individual factors** such as depression, anxiety, low self-esteem, hopelessness, poor problem-solving, impulsivity, frustration, eating disorders, drug or alcohol abuse, trauma
- **Family factors** including poor communication within the family, conflict between the parent(s) and the young person, unreasonable expectations, neglect, excessive punishments or restrictions, abuse, mental health difficulties, drug/alcohol misuse, family history of self-harm, financial problems
- **Social factors** like difficulties in peer relationships, bullying, abuse, availability of methods of self-harm, friends who self-harm, media and internet influences.

“It might be comforting to go, ‘oh, that’s me on a page, people understand me.’ Because a lot of the time I think I’m alone. I’m the only person self-harming. I’m the only person who feels anxious. But I’m not.”

Young person



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
- a form of experimentation
- self-harm can also be a suicide attempt.

POSSIBLE FUTURE PROBLEMS

- Self-harm can be a serious problem in its own right.
- Self-harm is often repeated after it happens for the first time.

- Depending on the method, self-harm can lead to serious physical injury, 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.

“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

Finding out about self-harm



Some young people may tell their parents about their self-harm. Other parents find out from parents of other young people, friends, teachers or medical staff. Discovering that a young person is self-harming can be very upsetting and stressful.

Parents may experience a range of emotions, including anger, sadness, helplessness, guilt, shame or disgust. It is normal to feel strong emotions and important to try and understand and accept those feelings, so that you don't risk misdirecting them at the young person. Try to think of the young person's behaviour as an expression of deep emotions they can't handle any other way.

“ 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](https://www.healthtalk.org)

Parent interview

SUPPORTING THE YOUNG PERSON

- Don't panic.
 - Let the young person know you are there for them.
 - Listen to the young person, don't try to solve a problem.
 - Have a conversation, but don't bring up self-harm straight away.
 - You could organise the conversation 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 they have to say; don't minimise the importance of their reasons for self-harm.
 - If the young person 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 general practitioner (GP), counsellor, or another family member).
 - If the young person is able to be open about their self-harm, try to help them work out any 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 12 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.
 - Take talk of suicide very seriously and seek professional support.

“ It's not that I don't want somebody to help me. Sometimes I just want people to listen. My parents wanted to fix everything: if you do this, everything will be fine. For me it was: just listen, for once.”

Young person

What are other ways to help?

- Don't let self-harm become the focus of your relationship with the young person.
- Try to deal with self-harm in a matter-of-fact manner.
- Let the young person know that their emotions are real and important.
- Remind them of their strengths and abilities.
- Reassure them that you do not think they are a failure, whatever their difficulties.
- Explain to the young person 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, a counselor, headspace).
- Work out with them how to make it more difficult for them to self-harm (e.g. by storing medication securely or removing sharp objects).
- Making self-harm difficult (see above) should not make talking about self-harm difficult.
- Watch for signs of bullying or abuse that may be triggering self-harm.

Remember that you may do everything you can to support the young person and yet the young person may self-harm again. Do not give up; seek help and support. Recovery is a long process.

“ We'd just take off for the day and go for a walk, find a waterfall. Things like that, that are actually good for both the parent and the young person.”

Parent



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 consult with your GP or seek emergency medical help through your local hospital emergency department or the ambulance service (000).

OVERDOSE

- Get the young person to an emergency department or call an ambulance (000) as soon as possible.
- Try to find out what they have taken and tell emergency medical staff.
- If the young person 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 the young person to seek medical help.

BURNS

- Cool with cold water for 10 to 30 minutes, then cover with cling film.
- Don't use ice, 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.healthdirect.gov.au or ring healthdirect on 1800 022 222 (24 hrs).

SCARS

- If a young person you care for 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 the young person 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



Alternatives to self-harm

Because self-harm is helping the young person 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.

“Don’t give up, there is hope out there.”

[healthtalk.org](https://www.healthtalk.org)
Parent interview

ALTERNATIVES TO SUGGEST

Soothing/stress relief/distraction

- Going for a walk, looking at things and listening to sounds.
- Creating something: drawing, writing, music or sculpture.
- Going to a public place, away from the house.
- Keeping a diary or journal.
- Stroking or caring for a pet.
- Watching TV or a movie.
- Getting in touch with a friend.
- Listening to soothing music.

Releasing emotions

- Clenching an ice cube in the hand until it melts.
- Drawing on the skin with a red pen or red paint instead of cutting.
- Sports or physical exercise.
- Using a punching bag.
- Hitting a pillow or other soft object.
- Listening to or creating loud music.

Everyone is different. Find out together what works, and don’t blame yourself or the young person if the alternatives to self-harm don’t work.

When to seek further help

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

This is best done through your GP, who may refer the young person to headspace or a community Child and Adolescent Mental Health Service (CAMHS) where an assessment would be done and a plan made for support and treatment.

If the young person is reluctant to get help, or they don’t acknowledge the risks, you can still seek advice from your own GP.

Telephone advice lines can give you information (see ‘sources of help’ at the back of this booklet).

If the young person 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 the young person's self-harming. This includes thinking about their possible reactions, and balancing the young person's need for privacy with your need for support. If appropriate, talk about it with the young person before telling other people.

Many parents say secrecy can make things more difficult: it can add to the pressure on both parents and the young person,

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 to decide how and when you might broach the topic of self-harm with friends and family.



Other family members

You and the young person should think together about who in the family, including their brothers and sisters, should know about their self-harm. Also, talk to the young person about what you want to tell other family members about their self-harm.

- Explain to siblings and close family that the young person is going through a difficult time – you do not need to give details; use age-appropriate language.
- Include the young person in the family conversation about self-harm.
- Siblings may feel angry or think 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) and maintain discipline.
- 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 young person 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.

“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](https://www.healthtalk.org)

Parent interview

Attending to your own needs

- It is normal for parents to experience strong emotions, such as guilt, self-blame, and shame. It is important that you look after yourself as well as the young person.
- Despite your best efforts, 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 and hobbies.
- 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 or relative.
- Seek professional support, such as your GP.
- Look for a support group for parents with experience of self-harm in the family. There may be a carer support group online or in your local area.
- You may find other emotions coming out as anger – be careful that the young person does not think this is directed at them.
- You may experience self-blame and guilt for the young person's self-harm. Remember that self-harm is not your fault.
- Give yourself permission only to do things that really need doing and worry less about non-important tasks.
- If necessary, take time off work.
- Ask family and friends for help and accept it.

“The young person needs support and counselling. But we, the parents, need support and counselling as well. To understand more of what’s going on and to get strategies to help ourselves and to help our children.”

Parent

TRY TO KEEP COMMUNICATING

The young person 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 THE YOUNG PERSON

Trying to help the young person may sometimes be frustrating. However, when they push you away is often when they need you the most. Recovery from self-harm is a long process and there is risk of a setback, despite your best efforts. Remember, most young people who self-harm will stop sooner or later.

“It’s not a quick fix. This is something that you should expect to be in the long haul for, but that doesn’t mean it’s the end as well.”

Parent



“My attitudes have changed a lot. I definitely felt a lot of shame when I was younger. I am in a much better place now. I still have my own struggles, but I am able to access **support**. I have a beautiful family that are there for me and I have friends. I am studying and I am doing normal young person’s stuff.

Hope is still out there; it just takes a bit of time. It takes a lot of work and a lot of energy and support to be able to come through the other side.

Family is one of the biggest things in my life now. You do become engrained in your own struggles. It’s very difficult to even think about outside of your bubble at the time when you are struggling so badly. So, with family, it’s important to maintain that **connection**. To be and to do things together, to experience stuff families do. Of course, it’s important to be able to talk about the difficult things, but it’s good to have ‘normal’ **experiences** together, to have fun and to celebrate.”

Young person

For more information on the experiences of young people, parents and carers, go to www.orygen.org.au/copingwithselfharm

Sources of help

Help for parents and carers

Professional help

GPs

Counsellors/therapists

Emergency, police and ambulance
000 (24 hrs)

Healthdirect
1800 022 222 (24 hrs)
www.healthdirect.gov.au

Helplines and online information/support

Lifeline
13 11 14 (24 hrs)
www.lifeline.org.au

Suicide callback service
1300 659 467 (24 hrs)
www.suicidecallbackservice.org.au

MensLine Australia
1300 789 978 (24 hrs)
www.mensline.org.au

Help for young people

Professional help

GPs

School counsellors

School nurses
headspace
www.headspace.org.au

Child and Adolescent Mental Health Services*

Adult mental health services*

* Usually through referral by GP or other professional

Helplines and online information/support

Kids helpline
1800 551 800 (24 Hrs)
www.kidshelpline.com.au

E-headspace
www.headspace.org.au/eheadspace
1800 650 890 (9am – 1am AEST)

Lifeline
13 11 14 (24 hrs)
www.lifeline.org.au

Suicide Callback Service
1300 659 467 (24 hrs)
www.suicidecallbackservice.org.au

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Orygen acknowledges the Traditional Owners of the lands we are on and pays respect to their Elders past and present. Orygen recognises and respects their cultural heritage, beliefs and relationships to their Country, which continue to be important to First Nations people living today.

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