



For DSLs, Schools,
Colleges & Youth Services

PORTUS

Understanding
Self-harm

Self-harm and Suicide Prevention

Guidance for Schools, Colleges, and Youth Services



Understanding Self-Harm and Suicide – Kingston, Richmond & Wandsworth

visit: www.richmond.gov.uk/portus

PORTUS

Understanding
Self-harm

How to develop an effective response to self-harming behaviours

Safeguarding

This guidance is not intended for use in circumstances where there is an immediate threat to life or risk of significant physical harm.

If you have serious and immediate concerns regarding the safety of a child or young person due to self-harm, suicidal thoughts or other significant risk issue then contact the emergency services by dialling **999**.

Another option is to call the Mental Health Trust which has a [24/7 Crisis Line \(0800 028 800\)](tel:0800028800).

VISIT CRISIS LINE



Concerned about a child or young person?

Anyone can make a referral if they are worried about a child or young person and think they may be a victim of neglect or abuse, whether as a member of the public or as a professional.

Professionals across all agencies have a responsibility to refer a child to Children's Social Care when it is believed or suspected that a child/young person:

- Has suffered significant harm and /or;
- Is likely to suffer significant harm and/or;
- Has developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent).

If you are worried about a child or young person under the age of 18, you should contact one of the [Single Points of Access](#) below. If your concern is outside of normal office hours, you should contact the emergency duty team.

Contact Kingston & Richmond

To make a referral online contact:

[Single Point of Access](#) ▶

During Office Hours, call: **020 8547 5008**

Outside Office Hours,
Emergency Duty Team call: **020 8770 5000**

Contact Wandsworth

To make a referral online contact:

[The Multi Agency Safeguarding Hub](#) ▶

During Office Hours, call: **020 8871 6622**

Outside Office Hours,
Emergency Duty Team call: **020 8871 6000**

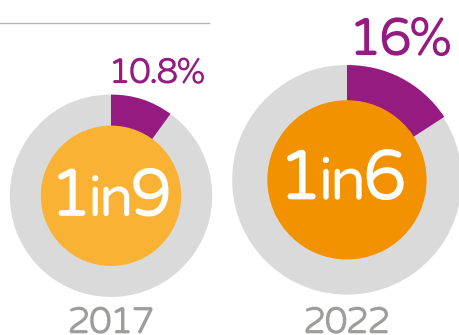
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Introduction

Three quarters of life-long mental health problems in the UK start before the age of 25. Compared to previous generations, children and young people today are considered to have worse mental health outcomes.

Children aged 5 to 16 years identified as having a probable mental health disorder.



Mental ill health is a leading cause of health-related disability amongst children and young people and can have long lasting effects.

The increase was evident in both boys and girls.

It is important to know that children and young people can recover from mental distress with the help of family, friends, and supportive adults.

A young person with a diagnosed mental health disorder is also more likely to have self-harmed or attempted suicide at some point.

Recent data from 2017 highlights that for young people between 11 and 16 years with a mental health disorder, 25.5% had self-harmed or attempted suicide at some point compared to 3% for those without a disorder. For those between 17 to 19 years with a mental health disorder the rate is even higher with almost half (46.8%) reporting that they had made a suicide attempt or self-harmed at some point.

Young women with a mental health disorder between the ages of 17 and 19 have been identified as a particular high-risk group with just over half (52.7%) reporting that they had self-harmed or made a suicide attempt.

Growing up can be difficult

Children and young people often report that they feel intense pressure due to exams, family circumstances, friendships and worries about what the future holds. Over time, this can affect their emotional and mental health.

It's likely that the reason you are reading this is because a child or young person in your care is experiencing difficulties with their mental health.



Resources to Help and Support.

With the right help and support children and young people can recover from mental health problems.

This resource offers guidance for staff working with children and young people under the age of 18 (under 25 for those with disabilities or for care leavers) who self-harm or feel suicidal.

It is aimed at staff who work with children and young people in a wide range of settings such as schools, colleges and youth or community groups.

This resource sets out key principles and ways of working but does not prescribe how to act in individual situations. It is not intended to override individual organisational or professional guidelines where they exist. It can however be used as a reference point for discussions about approaches to working with self-harm and suicidal thoughts and behaviours, or to highlight training needs.

Understanding Self-harm

Some children and young people self-harm to cope with difficult and distressing feelings. This may be through hurting themselves in some way or by putting themselves in risky situations.

Sometimes this can be simply experimenting in risk taking behaviours in the same way as experimenting with drugs and alcohol and may not always be a sign of difficult or distressing feelings.

It is not usually about ending their life but often a way of trying to manage overwhelming feelings. Sometimes young people feel unsure whether they want to die or not. They may talk about suicide when in reality they just want to stop feeling the way they do or escape the situation they're in.

Some children and young people do have suicidal thoughts and feelings and sometimes they harm themselves in ways that are very dangerous, and it is possible that they could accidentally kill themselves.

What is Self-harm?

Self-harm is a behaviour that is done to deliberately harm oneself. Although some people who self-harm may experience suicidal thoughts, self-harm is more commonly used as a way of managing difficult emotions. It does this by helping to regulate intense feelings.

Self-harm can include:

- Self-cutting
- Hitting, bruising, and scratching
- Intentionally taking too much or too little medication
- Burning
- Suffocating
- Going without food or binge-eating
- Putting yourself in risky or dangerous situations
- Getting into a fight you know you can't win
- Drinking alcohol to the point that you lose consciousness

Why do people self-harm?

Self-harm can fulfil 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
- to express their emotional pain so they will be taken seriously and get help
- to identify with a peer group



Recognising self-harm

Self-harm can include anything that causes an injury but can also be about taking risks. It can also involve using alcohol or drugs excessively – though many children and young people do not see this as self-harm or self-injury. Recognising these behaviours can be as important as those that are overtly causing harm as listed above.

Self-harm is often a habitual behaviour and exists on a wide spectrum from minimal physical

harm to more serious or life-threatening harm. It is important to understand the function and purpose of the self-harming behaviour to respond appropriately.

Regardless of the extent of the self-harming behaviour it is important to recognise that there is an underlying distress to understand and respond to.

To understand how self-harm can become habitual, the diagram below provides an insight into the cyclical nature of the behaviour.



The Addictive Model of Self-Harming Behaviour (Non-suicidal and Suicidal) - PMC (nih.gov)

As a member of staff, you may wish to get advice and support to help you work with the child or young person to access services.

Further information regarding the pathway of support for children and young people who deliberately self-harm can be found in this resource.



Self-harm and suicide risk

It is important that you are aware that sometimes, self-harm is associated with suicidal thoughts or behaviour. It is also important to know that even though self-harm is relatively common in young people, suicide is rare.

Attempted suicides are uncommon in childhood and early adolescence, but risk increases in the late teens and continues to rise into early adulthood.

Nevertheless, all people working with children and young people must be aware of the potential for someone to die by suicide and must work together to ensure that no child or young person feels suicide is their only option.

If you are concerned that a child or young person may be experiencing thoughts of suicide, the best way to find out is to ask them directly. We know that this can be difficult, and some staff can feel uncomfortable talking about suicide.

Self-Harm Safety Plan

To help you co-produce a personalised a step-by-step plan, you can use this **Example Safety Plan** ►



Download PDF here

<https://www.richmond.gov.uk/portus/files/self-harm-support-safety-plan-example.pdf>

The following Link provides excellent online training session to help you understand the process of developing a safety plan.
(You will need to register first).

MindEd self-harm online training ►

VISIT MindEd

The role of Youth services

The guidance in this document can help you understand how to support a young person who is hurting themselves because of emotional distress.

Youth services can support young people to find the help and support they need to cope with the difficulties they may be facing.

It's important to discuss sensitively with the young person how to help them and identify who to involve in the process. In most situations this will be someone from their school/college and or their GP.

Discuss with the young person who they would most like to help them.

Working with others

It is important to ensure parent's and carer's are involved in this process unless there are safeguarding concerns relating to the young person's family.

As young people should be attending an educational setting on a regular basis, schools and colleges are also well placed to support anyone who is facing emotional distress.

Many schools and colleges have Mental Health Support Teams or student well-being services to provide care and support. Each school and college will have a Mental Health Lead who can offer you advice and support.

The Portus Pathway and Toolkit provides important information to help schools and colleges support their students most appropriately.

In some situations a young person may not want their school or college to know about their self-harm if this is the case the toolkit and pathway can help you provide initial support and help you find the best support for the young person through their GP or through another appropriate person or organisation.

If a young person has disclosed that they have been thinking of suicide speak to the Designated Safeguarding Lead at their school or college.

If the young person requires an urgent response contact the 24/7 Crisis line 0800 028 8000.

Talking about suicide

Research tells us that talking about suicide does not put the idea into their head. In fact, talking with a child or young person about suicide creates a safe space for them to be open and honest about how they feel, and they will see you as a safe person to turn to.

How to respond

As a professional you are seen as a safe person by children and young people and by parents and carers. If a child or young person has come to you, or you think they may be self-harming, we understand that talking about the subject can feel harder than talking about other risk-taking behaviours such as unsafe sex or alcohol use. However, for the child or young person it can be a huge relief to have it voiced.

Refer to the **Self-Harm and Suicide Prevention Pathway** ▶ to help you and your colleagues to make decisions about the support required.

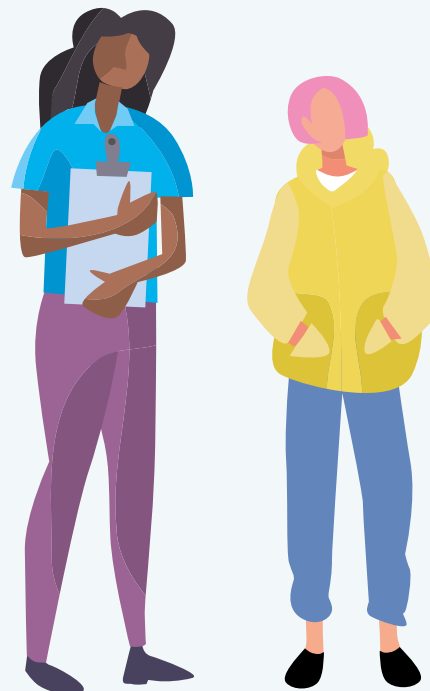
The following steps will help to create the best environment to provide support.

You should:

- Provide a safe and confidential space
- Listen and explain the limits to confidentiality
- Reassure the child or young person that their feelings are important and valid, and it may help to talk about them
- Tell the young person how courageous they are to be talking about difficult thoughts and feelings
- Stay calm and always provide an empathic and non-judgemental approach
- Use the **Risk and Strengths Assessment** ▶ and **Pathway** ▶ included in the toolkit to help you understand the context of the behaviour and to help you make an informed decision about next steps
- Check in with them regularly to make sure the support offered is making a difference

Be Open: Listen, Believe, Support

You may be the first person that they have spoken to, and it is important to establish a non-judgemental and trusting relationship. Often, individuals may feel ashamed, embarrassed, confused, or powerless. Take time to listen, to believe in what they are telling you and to support them through their journey.



Keep talking

Good communication between all those involved can help to coordinate care for the child or young person and improve their feelings of distress. Consent is the key to shared care it can be helpful to be clear about this from the outset with the child or young person, their family and their GP.

The following open questions can help to keep an ongoing dialogue:

- How are things for you right now?
- Can you say what's bothering you?
- What might help you?
- What would you like to happen next?



The child or young person's GP (General Medical Practitioner) can offer confidential and regular support for a wide range of health problems including the psychological distress and physical injuries of self-harm. Quick access to advice and, if necessary, an appointment should usually be available for urgent matters.

Talking to a child or young person about suicide

Talking to a child or young person about suicidal thoughts is not easy. Having the conversation is the most important thing.

What not to do

Children and young people have reported that the first time they speak to a professional they want to be treated with care and respect. It's really important to listen carefully and take what they say seriously, or they may not talk about it again.

Let them say and talk about what they need to, while you listen and empathise, before you jump in with any safeguarding policy that may apply. If/when you do apply this, allow the child/young person to feel involved in this, rather than all control be taken away.

It is important to understand that certain approaches can be unhelpful.

Please do not:

- Use a space that does not provide a safe and quiet environment to discuss the issue
- Be distracted by other priorities
- Overreact and panic
- Be dismissive, or assume it's 'attention-seeking' behaviour
- Add to their guilt by suggesting their behaviour will hurt others

Please check out the following **Crisis Tools** ► to improve your understanding of how to effectively support young people experiencing psychological distress.

The particularly vulnerable

Isolated children and young people with little or no support systems in place are particularly vulnerable and a cause for concern. These include Looked After Children or those who are not in school, education or employment. Children and young people who have little or no support in their family, perhaps because of parental mental or physical illness, parental substance misuse or family relationship breakdown may also be more vulnerable.



Asking the question

The following steps can help you find out if a child or young person is thinking about suicide.

- Ask directly. Use the word suicide. Practice asking first if this helps. It may give you more confidence.
- Stay calm. This is important as the child or young person may be looking at how you react to decide how much they should tell you.
- Be clear and direct. Look them in the eye and ask, 'are you thinking about suicide?'
- If you are unsure of how to start the conversation, contact the **Papyrus helpline HOPELINEUK on 0800 068 4141**
- Papyrus' specially trained advisers can talk you through what to say and how to support the child or young person during this conversation.
- Talking with a child or young person about suicide can be very difficult. If you need support following your conversation Papyrus, advisers are on hand to de-brief with you and help you to process what has been said and where to go next.



VISIT PAPYRUS

What if they say yes?

If the child or young person says that they have had, or are currently experiencing, suicidal thoughts the most important thing to do is **stay calm**.

Acknowledge how difficult it must be for them to talk about these thoughts to you and tell them you are there to listen.

The reasons why people experience thoughts of suicide are complex and differ from person to person. You may never fully understand them and that is OK.

Let the child or young person know that there is support available to help them and that your priority is to keep them safe.

Questions you could ask include:

How are things for you right now?

Can you say what's bothering you?

What might help you?

What would you like to happen next?



Assessing Suicide Risk

If you feel that the child or young person is at risk of suicide, then it is necessary to understand the seriousness and immediacy of the risk. Depression, hopelessness and continuing suicidal thoughts are known to be associated with high risk.

If the child or young person talks about killing themselves always take this seriously as many people who die by suicide have previously told a professional about their intention.

The following warning signs suggest that the risk is high:

- Self-harming behaviour is characterised by using a variety of harming methods
- Thoughts of suicide are frequent and not easily dismissed.
- A specific plan to die by suicide.
- Access to the means to die by suicide (for example, stockpiling tablets).
- Significant drug or alcohol abuse.
- A situation felt to be causing hopelessness, unbearable pain, or distress.
- Previous, especially recent, suicide attempt.
- Evidence of current mental illness.
- Limited protective factors that may prevent them from attempting suicide or harming themselves, for example, being socially isolated, poor relationships with parents/carers etc.
- No support mechanisms when distressed.
- Not accepting help from family and friends

Complete a Risks and Strengths Assessment ► for next steps



Download PDF here

<https://www.richmond.gov.uk/portus/files/professionals-risk-assessment.pdf>

There is also a **Suicide Safety Plan ►** example included in this resource. This easy to follow template can help you work with the child or young person to put together a personalised plan to help to keep them safe.

Refer to the Self-harm and Suicide Prevention Pathway ► for next steps



Download PDF here

<https://www.richmond.gov.uk/portus/files/cyps-self-harm-suicide-prevention-pathway.pdf>



Download PDF here

<https://www.richmond.gov.uk/portus/files/suicide-prevention-support-safety-plan.pdf>

Roles and responsibilities

THE SCHOOLS OR COLLEGES GOVERNING BODY

The governing body has the legal duty to safeguard and promote the welfare of their students. There should be a nominated governor for safeguarding who will have an oversight of responses to self-harm and suicide.

THE HEADTEACHER OR PRINCIPAL

The Headteacher/Principal has responsibility for establishing effective safeguarding procedures relating to self-harm, to ensure the duty of care of students and staff.

This should be supported by the implementation of a **Self-harm Policy** ► using the **Self-harm Suicide Prevention Guidelines Checklist** ►



Download PDF here

<https://www.richmond.gov.uk/portus/files/schools-colleges-checklist-supporting-effective-practice.pdf>

STAFF

Students may choose to confide in a member of staff if they are concerned about their own well-being, or that of a peer. Students may present with injuries to student services or reception staff in the first instance and it is important that these frontline staff are aware that an injury may be self-inflicted.

Staff should know what to do in such situations and follow a clear protocol agreed by the school/college in advance.

Staff may experience a range of feelings in response to self-harm in a student. However, to offer the best possible help to students it is important to maintain a supportive and non-judgemental attitude – a student who has chosen to discuss their concerns with a member of staff is showing a considerable amount of courage and trust.

Staff should:

- Enable students to feel in control by asking what they would like to happen and explore what they might need to help them
- Provide reassurance that help is available
- Use active listening techniques -
- Be non-judgemental
- Be reassuring and support them to seek help
- Check that they have access to self-care and treatment of wounds, if relevant
- Involve them in any safeguarding or disclosures to parents/others

Staff should try to avoid the following:

- Avoid saying 'self-harmer' – it is important to talk about a behaviour and not label a person. The best terminology is to refer to 'self-harming behaviour'
- Avoid 'commit' suicide – use take their own life or die by suicide
- Avoid asking a student to display injuries or scars or push for detailed information on the self-harm behaviour (unless they wish to share)
- Avoid making assumptions or stereotyping behaviour - don't say 'people generally/ usually...' Everyone is different
- Never refer to self-harm as a 'failed suicide attempt'
- Avoid asking a student to stop self-harming as this may be the only coping strategy they have
- Not work outside their remit and seek appropriate guidance from designated leads.

Confidentiality/information sharing

Students are entitled to expect personal information to remain confidential. This means that the information should not be disclosed to anyone including the student's parents/guardians.

Unless it is considered:

- In the interest of the health and safety of the child.
- For the prevention or detection of crime Even then care must be taken to limit disclosure to only those who 'need to know'.

Explaining Confidentiality

It is important not to make promises of confidentiality that a member of staff cannot keep, even though the student may put pressure on them to do so. If this is explained at the outset of any meeting the student can make an informed decision as to how much information they wish to divulge.

Students should be made aware that confidentiality will be maintained but that it cannot always be guaranteed. If a member of staff considers that a student is at risk of harming themselves or others, then confidentiality cannot be kept.

DSL, MHL Information

Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-harm should consult the Mental Health Lead (MHL) or Designated Safeguarding Lead (DSL) but in an emergency then any member of staff should assess the situation, administer first aid and/or call for an ambulance for emergency assistance.

Once informed, the Mental Health lead or DSL will decide on the appropriate course of action. This may include:

- Contacting parents / carers
- Arranging professional assistance e.g., doctor, nurse, social services
- Arranging an appointment with a school/college-based counsellor or therapist
- Removing the student from lessons immediately if remaining in class is likely to cause further distress to themselves or their peers
- Always remaining with the student if they are acutely distressed

Schools/colleges can make adjustments to help a student but be aware that they may not want you to be involved and you may not be aware of the situation.



Risks and strengths assessment.

It is important to ensure that there is a risk assessment in place which relates to the self-harming and or suicidal behaviour, possible triggers, and strategies to be used to minimise risk. The example **Risks and Strengths Assessment** ▶ is for guidance only and should be adapted according to individual need.

Following a risk assessment schools/colleges can refer to the **Self-Harm and Suicide Prevention Pathway** ▶. The Pathway has been developed using a graduated needs-based approach: Getting Advice, Getting Help, Getting More Help and Getting Risk Support.

Meetings Advice

Be mindful that some of the student's problems may arise from issues at home and they may wish for any initial meeting to be on their own. Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- Reference to the safety plan
- Concerns raised
- Details of anyone else who has been informed
- **Risks and Strengths Assessment** ▶ This information should be stored in the student's confidential child protection/safeguarding file.



[Download PDF here](https://www.richmond.gov.uk/portus/files/professionals-risk-assessment.pdf)

<https://www.richmond.gov.uk/portus/files/professionals-risk-assessment.pdf>

Dealing with contagion

When a student is engaged in self-harming behaviour it is important to be vigilant in case close contacts of this individual are also engaging in similar behaviours. Occasionally, schools/colleges or residential settings may discover that several students in the same peer group are harming themselves.

Self-harm can be seen as an acceptable way of dealing with stress within a peer group and may increase peer identity. This can cause considerable anxiety in staff, parents and carers, as well as in other students.

Students may have different reasons for their self-harming behaviour and should be given the opportunity for appropriate one-to-one support.

In general, it is not advisable to offer regular group support for students who self-harm. Where there appears to be linked behaviour or a local pattern emerging, a multi-agency strategy meeting should be convened organised through Children' Services.

Peer group support

It is important to encourage students to let staff know if one of their friends is in trouble, upset or showing signs of self-harming behaviour. Friends can worry about betraying confidences so they need to know that self-harm can be very dangerous and that by seeking help and advice for a friend they are taking responsible action and being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

The peer group of a student who self-harms may value the opportunity to talk to a member of staff either individually or in a small group.



Training for Staff

Staff are recommended to regularly access training on self-harm and suicide prevention.

Staff supporting students with self-harm should take the opportunity to attend training days on Mental Health First Aid, self-harm and suicide prevention as well as obtain relevant literature including this resource and pathway.

Many schools/colleges will struggle to release staff for training, but it is vitally important that staff feel confident to support students experiencing psychological distress.

Supporting Staff

Staff giving support to students may experience all sorts of reactions to this behaviour in students (e.g. anger, helplessness, rejection); it is helpful for staff to have an opportunity to talk this through with Mental Health Leads, Mental Health Support Teams and members of the Senior Leadership Team.

Managing PE/Sport Lessons

Students who self-harm should be actively encouraged to participate in sport. PE/Sport colleagues may need to be aware of the self-harm so that adjustments to normal clothing guidelines can be applied such as wearing a long sleeve top and alternative changing areas.



Training and Support Organisations

SUPPORT AND TRAINING FOR YOU

Crisis Tools.

The tools to help you support young people in crisis:
<https://crisistools.org.uk/>

National Institute for Health and Care Excellence

NICE guidelines on Self-harm
<https://www.nice.org.uk/guidance>

Mental Health First Aid England

Providing expert guidance and training to support mental health. Mental health training online and face to face

MHFA England

<https://mhfaengland.org/>

MindEd is a free educational resource on children, young people, adults and older people's mental health.

<https://www.minded.org.uk/>

Papyrus, prevention of young suicide.

HopelineUK

<https://www.papyrus-uk.org/papyrus-hopeline247/>

Call: **0800 068 4141** Text: **07860039967**

Email: pat@papyrus-uk.org

The PSHE Association

A membership association and charity, we support over 50,000 teachers and schools/colleges with resources, training, guidance, and advice.

PSHE Association | Charity and membership body for PSHE education

<https://pshe-association.org.uk/>

YoungMinds

A charity that provides support and advice to children, young people, parents, and carers and those working with children and young people

YoungMinds Website Parent and carer support Resources for professionals

<https://www.youngminds.org.uk/professional/resources/>

Zero Suicide Alliance FREE online training courses teach you the skills and confidence to have a potentially life-saving conversation with someone you're worried about.

<https://zerosuicidealliance.com/training>

Ripple

Ripple is an interceptive tool designed to present a visual prompt when a person searches for harmful keywords or phrases relating to the topic of self-harm or suicide. These phrases include any words or terminology which have been identified as displaying potentially damaging online content.

Ripple Suicide Prevention

ripplesuicideprevention.com

Helpful Resources for Families

The following resources can help families feel more confident about supporting their child:

- **Coping with Self-harm, a guide** for parents and carers
- **Free online course** helps parents discuss self-harm with their children.
- **Free e-training by the Zero Suicide Alliance** (20 minutes)
- **Self-harm: Parents' experiences - Overview** (healthtalk.org)
- NSPCC self-harm **support for families**
- Young Minds Parents **support line and webchat**
- MindEd for Families **website**
- **Calm Harm** is a free app that helps you manage or resist the urge to self-harm
- **7 ways to support children and young people who are worried or anxious** (annafreud.org)
<https://www.annafreud.org/schools-and-colleges/resources/7-ways-to-support-children-and-young-people-who-are-worried/>
- **How to Talk to Your Child about Mental Health** | YoungMinds
<https://www.youngminds.org.uk/parent/how-to-talk-to-your-child-about-mental-health/>
- **Families Under Pressure** - Maudsley Charity.
<https://maudsleycharity.org/familiesunderpressure/>

SUPPORT FOR CHILDREN, YOUNG PEOPLE, AND FAMILIES

South West London and St. Georges Mental Health NHS Trust

24/7 Mental Health Crisis Line
0800 028 8000.

Papyrus, prevention of young suicide.

HopelineUK
<https://www.papyrus-uk.org/papyrus-hopeline247/>
Call: **0800 068 4141**
Text: **07860039967**
Email: pat@papyrus-uk.org

Samaritans

Tel: **116 123 (24/7)**
www.samaritans.org

YoungMinds – Self harm factsheets for young people Parent Helpline and webchat. You can call us for free on **0808 802 5544** from 9:30am - 4pm, Monday - Friday.
<https://www.youngminds.org.uk/parent/>

Childline - If you're under 19 you can confidentially call, chat online or email about any problem big or small. Free 1-2-1 counselling available.
Call: **0800 1111**

Kooth. Online well-being community. Free 1-2-1 online counselling.
www.kooth.com

Shout

Text YM to **85258**.
Shout provides free, 24/7 text support for young people across the UK experiencing a mental health crisis.
All texts are answered by trained volunteers, with support from experienced clinical supervisors.
Texts are free from EE, O2, Vodafone, 3, Virgin Mobile, BT Mobile, GiffGaff, Tesco Mobile and Telecom Plus.
Texts can be anonymous, but if the volunteer believes you are at immediate risk of harm, they may share your details with people who can provide support.
Opening times: 24/7

The Mix

Offers support to anyone under 25 about anything that's troubling them.
Email support available via their online contact form.
Free 1-2-1 webchat service available.
Free short-term counselling service available.
Opening times:
3pm - 12am, seven days a week
Call: **0808 808 4994**
The Mix – Essential support for under 25s
<https://www.themix.org.uk/>

Calm Harm

A free app providing support and strategies to help you resist or manage the urge to self-harm.
Can be downloaded from Google Play or App Store.
Home - **Calm Harm App**
<https://calmharm.co.uk/>

Tellmi

A free app for teenagers (11+) providing resources and a fully moderated community where you can share your problems, get support and help other people too.
Can be downloaded from Google Play or App Store.
Tellmi App
<https://www.tellmi.help>

Combined Minds

Supporting young people's mental health
<https://combinedminds.co.uk/>

Be Headstrong

Real Life and Real Faith in the Real World | Head Strong
<https://www.beheadstrong.uk>

National Self-Harm Network

A supportive and dedicated forum.
<https://www.nshn.co.uk/downloads.html>

Alumina

Free online self-harm support for 11-19's.
<https://www.selfharm.co.uk/#help>

PORTUS
Understanding
Self-harm

Self-harm and Suicide Prevention

Guidance for Schools, Colleges, and Youth Services

PORTUS - Understanding Self-Harm and Suicide

A collaboration between The Royal Borough of Kingston,
Richmond & Wandsworth Borough Councils



visit: www.richmond.gov.uk/portus