



Royal College of
General Practitioners

Self-harm in children and young people

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Self-harm (SH) is a term used when someone intentionally harms themselves. Examples include, hitting, cutting, pulling hair, and overdosing. The incidence is rising with now 1 in 12 teenagers being affected by SH.¹

Self Harm can be a sign of an underlying health problem (such as):

- Depression
- Bullying
- Anxiety
- Eating disorders

It is a mode of communication which expresses the young person's sense of emotional distress often exacerbated by frustration or a sense of isolation.

Risk factors for SH in CYP

Sociodemographic and educational factors: - F:M 6:1, low socioeconomic status, gender dysphoria, restricted educational achievement.

Life events: - parental separation, death or divorce, past physical or sexual abuse, adverse childhood bullying, family history of mental illness or suicide, family discord

Psychiatric and psychological factors: - mental illness (especially depression, anxiety and ADHD), substance misuse, low self-esteem, hopelessness and perfectionism.

Ten top tips for GPs and primary care staff

1. The vast majority of self-harm in the community is hidden, so if you see something on inspection of a patient or are suspicious by observing unusual behaviours or mannerisms, do sensitively enquire and follow up where needed.
2. The disclosure of SH by a CYP requires courage and confidence and so when consulting with a CYP aim to create a comfortable and non-judgement environment whilst also highlighting that you are interested in the emotional wellbeing of the CYP and in helping them.
3. Gain a thorough history and sequence of events: when the self-harm started, the sites of harm, associated feelings (isolated, low, sad) and how the harming relates to those feelings and the frequency of harming.
4. Have they identified any triggers and if not, are there any worries or problems at home or outside of the home such as at school, college and work or among friends?
5. Is there any use of illicit drugs, alcohol or other forms of self-harm and ask about their physical health: eating behaviour, weight patterns, sleep and how they feel about themselves.
6. Have there been any thoughts of ending their life? SH is often used as an expression of an emotion or a feeling but sometimes it is used with suicidal intent or an acute mental health crisis and this is **crucial** to identify. It will therefore be vital to seek urgent psychiatric assessment if this is detected in the consultation.
7. Explore their protective factors, interests and resources and whom they live with and whom they feel safe to confide in (family/friends, school nurse/counsellor).
8. You may want to seek advice from the local CAMHS team including the accessibility of local agencies such as third sector youth counselling and support services.

9. If there is evidence of suicidal risk, mental illness or serious risk taking, explore how the CYP can keep safe. Involvement of the family may be needed and relieving any concerns about this is important. Offer a three-way conversation with a guardian or offer to speak to them on their behalf. Do arrange follow up yourself and make the appointment with the CYP.
10. Think Safeguarding'. Bear in mind the possibility of abuse and child sexual exploitation.

Be familiar with local safeguarding contacts if there are any safeguarding concerns. [Read the Information sharing and suicide prevention consensus statement.](#)

Useful resources for young people

The following resources may provide further reading for those interested in learning more about self-harm. For more information about children and young people's mental health, see the [RCGP Mental Health toolkit.](#)

Support for young people affected by self harm – www.selfharm.co.uk/home

YoungMinds – self harm factsheets -

http://www.youngminds.org.uk/for_children_young_people/whats_worrying_you/self-harm/further_info

Self-harm and risky behaviour - <http://www.MindEd.org.uk>

References

Hawton, K, Saunders, KE, O'Connor, RC. Self-Harm and suicide in adolescents. *Lancet* 2012;379(9834):2373-83

Roberts JH, Pryke R, Murphy M et al. Young people who self harm by cutting. *BMJ* 2013;347:f5250