

SELF-HARM AND SUICIDE PREVENTION

For people who work with adolescents

Working with adolescents can be rewarding, but it can also be challenging. We all have the potential to meet an adolescent in mental distress, who have self-harmed and/or has thoughts of suicide.

This guide for non-mental health specialists should be used alongside your relevant organisational policies, gives you key information that will help you to:

- ✓ Feel more confident talking about self-harm and suicide.
- ✓ Know how to respond appropriately.
- ✓ Understand when and how to seek further support.

Your support, at the right time, could make a huge difference for that young person.

- ♥ Talking about self-harm and suicide can bring up a wide range of emotions, especially if you or somebody you know has lived experience of self-harm suicidal thoughts, suicide attempts and/or have been bereaved by suicide.
- ♥ It is important that we take the time to look after ourselves, notice when we are feeling stressed or overwhelmed and know that this is acceptable.
- ♥ Self-care means a different thing to everyone, it may involve prioritising your own needs, talking to somebody you trust, or seeking more support through your community or a GP.

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1. Summary

The flowchart below describes the step-by-step process for supporting adolescents in distress. More detail on each part of the flowchart is provided in the relevant sections later in the guide.



2. Background and key messages



Understanding suicide: key facts

- Suicide is the act of intentionally killing oneself.
- Every suicide is a tragic loss and has devastating and lifelong impacts upon families, friends, educational settings, neighbours and communities.
- Suicide in young people is rare...but it happens. In England 201 children and young people aged 19 or under were registered to have died by suicide in 2023¹.
- Children and young people are a priority group in the [Suicide Prevention Strategy in England](#)².
- There is rarely a single cause of suicide. The causes are complex and individual.
- [National Childhood Mortality Dataset \(NCMD\) research](#)³ shows many factors in young people's lives are associated with suicide.
- A history of suicide attempt or self-harm is the biggest risk factor for suicide⁴. However, most people who have attempted suicide or have self-harmed do not die by suicide.
- Many young people who have died by suicide were not known to mental health services³.
- Suicidal thoughts often reflect a desire to end mental pain not necessarily wanting to die.
- They may be unable to see a time when things will be different.
- **Talking about suicide and asking young people directly and compassionately if they are having suicidal thoughts can be protective** because it:
 - Gives the person permission to express how they are feeling.
 - May be the first step to them seeking more help.
 - Reduces stigma associated with self-harm and suicide.

¹

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesintheunitedkingdom/2023>

² <https://www.gov.uk/government/publications/suicide-prevention-strategy-for-england-2023-to-2028>

³ <https://www.ncmd.info/publications/child-suicide-report/>

⁴ <https://sites.manchester.ac.uk/ncish/reports/suicide-by-children-and-young-people/>

Understanding self-harm: key facts:

- Self-harm is intentional self-poisoning or injury, irrespective of the apparent purpose. Examples include (but are not limited to) self-cutting, taking an overdose, swallowing objects or poisons, hitting, self-strangulation, and burning.
- The vast majority of young people who self-harm do not die by suicide. For some people, self-harming is a way of coping with their distress and a way to stay alive.
- The highest rates of self-harming behaviours are in 16–24-year-olds⁵. It is estimated that at age 14, one in twelve males and one in four females have self-harmed in the last 12 months⁶.
- Self-harm is a range of behaviours that can be an indicator of poor emotional health and wellbeing and challenges in coping with these issues.
- The reason(s) why a person may self-harm varies widely between individuals. This includes (but not limited to):
 - Coping with or distracting from distressing emotions or circumstances.
 - Regulating emotions, providing release, comfort or restoring calm.
 - Communicating feelings that are difficult to articulate or have not been listened to.
 - Gaining control or agency over one's body, feelings or circumstances.
 - A compulsion or habitual behaviour.
 - A form of self-punishment, linked to feelings of shame, guilt or low self-esteem.
- Self-harm is not something young people can just stop doing. **We need to approach young people with respect and support them with the underlying cause of their distress.**
- If someone has self-harmed, we know they are in distress. This means they may also think about suicide. We ask about suicide risk to ensure that we give them the chance to tell us if they are having thoughts of suicide.

⁵ <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/survey-of-mental-health-and-wellbeing-england-2023-24/suicidal-thoughts-suicide-attempts-and-self-harm>

⁶ <https://academic.oup.com/ije/article/48/5/1650/5366210>

3. Risk factors for self-harm and/or suicide

Every young person is unique and has different life experiences. This means that they have a different mix of risk and protective factors.

The risk factors for self-harm, suicidal thoughts and suicide can be thought of in three categories. Where these factors overlap, the association with self-harm and suicide is greater, especially when there are fewer protective factors.

Longstanding or background factors

Chronic physical and mental health needs including eating disorders, neurodiversity and neurodevelopmental conditions

Having Special Educational Needs and Disabilities (SEND)

Experiences of trauma abuse and neglect - Adverse childhood experiences (ACEs)

Sexual orientation, sexual identity, and gender identity

Dynamic or current stressors

Acute physical or mental health needs

Conflict within key relationships

Abuse or neglect

Bereavement

Drug or alcohol use

Problems at school, including academic struggles

Bullying, including cyber-bullying

Social media and internet use (including content that encourages self-harm or suicide)

Struggles with identity

Problems with the law

Financial stressors

Family/household factors

Physical or mental health difficulties in the family

Drug and/or alcohol use in the family

Conflict, abuse or neglect in the family

Parental separation

4. What are the signs to look out for?

There are some things you can look out for that may indicate someone is in distress.

Physical/ behavioural

Being tearful / withdrawn / lack of motivation / signs of self-neglect.

Unexplained injuries (on more than one occasion/ not consistent with how they say the injury was sustained) – bruises, cuts, burns.

Long or baggy clothing. They may also avoid changing in front of others or avoid situations such as PE.

Signs of pulling hair out.

Unexplained weight loss or gain.

Appearing too neat or ordered.

Secrecy – around behaviour, including online activity, and use of technology.

Verbal

May include expressions of feelings of depression, anger, irritability, anxiety, low self-worth or self-esteem, or feelings of loathing towards self, e.g.:

'I'm a failure'

'I feel nothing / numb'

'What's the point?'

'It's all too much'

They may also be quieter than usual, not speaking or expressing any feelings or emotions.

Their pain may be invisible, and they may be their normal self.

Note – some of these signs may also be a sign of physical or other abuse. Abuse is also a risk factor for self-harm and suicide and so they may co-exist. If you are worried that a young person is being abused, follow your organisational policy and the advice of the Plymouth Safeguarding Children Partnership: [Referral to Children's Social Care](#)⁷

⁷ <https://plymouthscb.co.uk/making-a-referral/>

5. Asking adolescents about self-harm and suicide

So how can you know what is going on in that young person's life?



The safest way is to ask them

Young people will respond best if you are direct, calm and non-judgemental.

Be prepared to take time and make yourself available to the young person



How to start the conversation

'I've noticed that you don't seem yourself lately'

'I'm wondering if things are a bit difficult for you at the moment'

'How are you really?'

'How do you feel about the future?'

'Sometimes when people feel overwhelmed, they might want to hurt themselves. Can I ask if you have self-harmed?'

'Are you having thoughts of suicide?'

The research on this is clear: talking to adults and adolescents about self-harm or suicide won't put the idea in their head.

If they have self-harmed or are feeling suicidal, the behaviour or thought is already there. If they aren't, it won't do any harm.

They may be feeling cut off from everyone around them, frightened and ashamed about their feelings. They may be desperate for help but afraid to ask due to fear of the response they may receive. They may have a history of trauma and may find it hard to reach out and trust people.

Talking to someone who **shows compassion** might be their **first step to seeking help**. It shows them that they have **permission to talk about their feelings**. It can be a **huge relief** to talk about what they are experiencing. This relief can be **protective**.

Don't let worrying about not knowing what to say or saying the wrong thing stop you from talking about self-harm and suicide. **Listening is enough**. If we approach the conversation with compassion and sensitivity, our words are likely to be interpreted in the way they are meant.

→ **If in doubt, reach out.** *It may save a life.*

6. Responding to a disclosure

What to do if they say 'yes'?

Follow these three steps from the [NHS England: Staying safe from suicide guide](https://www.england.nhs.uk/long-read/staying-safe-from-suicide/)⁸

Listen and Explore → Understand → Plan and Act

Listen and explore

- React calmly with compassion and empathy.
- Thank them for telling you. Acknowledge that they did the right thing by talking to somebody.
- Give them space to talk. Listen to them non-judgementally.
- Ask open questions, **you don't need to fix their problems at that moment.**
- Acknowledge their emotions, experiences and feelings of hopelessness.
- Discuss current and past thoughts or actions including what increased or reduced their risk
- **Ask if they have made a plan to harm themselves.**
- If self-harm, reassure them that you understand that it may be helping them cope at that moment.
- Reassure them that the intensity of their feelings can reduce in time and things can get better, even if they can't see that now.
- Remind them that they matter and that if they are in distress, help is available.

Understand

Develop a shared understanding of their safety using the 'Three Ps'

- **Presenting problem:** what are the current difficulties with staying safe?
- **Precipitating factors:** what increase the risk of acting on self-harm/suicidal impulses? (see section 2: risk factors)
- **Protective factors:** what reduces the risk of acting on self-harm/suicidal impulses? Examples include positive relationships, social networks, family, activities, spirituality

Act and plan

Address urgent safety concerns - identify appropriate crisis or professional help

- In a crisis, if you can and it is safe, stay with them until further help arrives.
- Together identify ways to interrupt their suicidal thoughts if they have them.
- **Check if they have a safety plan and support them to follow it. If they don't have one, suggest making one now.** A safety plan can also be used to help manage thoughts around self-harm.
- Explore realistic positive steps forward.

⁸ <https://www.england.nhs.uk/long-read/staying-safe-from-suicide/>

7. Crisis support

- In a **crisis**: call NHS **111** (select mental health option) for **Livewell Southwest's First Response Service (24/7)**.
- If somebody is about to or has **harmed themselves**: call **999** for an **Ambulance** or take them to **A&E**.
- If someone is at **imminent risk** of suicide, and their location is not known: call **999** for the **Police**.

If it is safe to do so, stay with them until somebody arrives.

Other crisis support:

- **Samaritans**: call 116 123 (24/7, 365)
- **Shout**: Text 'SHOUT' to 85258 (24/7, 365)
- **Papyrus**: call 0800 068 4141 (24/7, 365) (under 35s)

8. Safety plan

A safety plan is a tool for helping someone navigate self-harm and suicidal feelings and urges. It helps someone navigate crises, using a prepared plan. It might include⁹:



Principles of an effective safety plan:

- **Make the plan before reaching crisis point:** supported by somebody they trust.
 - **A safety plan needs to belong to the individual:** they to decide what goes into it.
 - **It needs to be a plan that is going to work:** they need access to it when they need it.
- Encourage them to have a copy on their phone and to share it with relevant family, friends and professionals. Review the plan regularly to check it's still relevant.

Where to find a safety / wellbeing plan template:

- [My Wellbeing Plan - PSCP](#)¹⁰
- [Papyrus Safety Plan](#)¹¹
- [A safety plan resource for Devon](#)¹²
- 'Grassroots Stay Alive' app

⁹ <https://www.england.nhs.uk/long-read/staying-safe-from-suicide/>

¹⁰ <https://plymouthscb.co.uk/sos-subject-of-suicide-dealing-with-distress/>

¹¹ <https://www.papyrus-uk.org/resource-suicide-safety-plan/>

¹² <https://www.devon.gov.uk/adult-social-care/independent-living/health-and-wellbeing/suicide-prevention-in-devon/a-safety-plan-resource-for-devon/>

9. Further guidance after a disclosure

Follow organisational policies:

- Refer to relevant **organisational policies**: e.g., safeguarding, self-harm and suicide prevention.

Confidentiality:

- Be honest that it is unlikely you will be able to promise total confidentiality. Discuss with the young person if you need to tell other people about your conversation.
- Disclosures about self-harm or suicidal thoughts should be escalated to the **safeguarding lead**.
- There also needs to be a discussion about **informing parents/carers**.
- If in doubt, speak to your manager or safeguarding lead.
- If they are reluctant to talk, ask them who they would feel comfortable speaking to.
- Suggest other sources of support such as [Childline](https://www.childline.org.uk/get-support/)¹³ and [Kooth](https://www.kooth.com/)¹⁴.

Next steps – agree a follow-up plan:

- Have you agreed a time that you will meet again or agreed another support route?
- Have you escalated appropriately according to your policies?
- Is there is a named lead who can coordinate care and wrap around support?
- Ensure suitable referrals have been made.
- Do you need to arrange a risk management meeting?

Be clear about the support you can offer: does your service offer crisis or 24-hour support?

Making case notes:

- Presenting problem: current self-harm behaviour or thoughts on suicide (in their own words)
- Precipitating factors
- Protective factors
- Action taken (e.g. safety plan, referrals made, crisis support details)
- Next steps (follow up)
- If possible, keep a copy of the safety plan on file.

¹³ <https://www.childline.org.uk/get-support/>

¹⁴ <https://www.kooth.com/>

Where to go for more support (outside of your organisation):

- **Child and Adolescent Mental Health Services:** [CAMHS | Livewell Southwest](#)¹⁵ offer options for self-referral and professional support. They provide mental health and psychological wellbeing support tailored to the needs of the young person in line with the [i-Thrive Model](#)¹⁶.
- Make an appointment with their **GP**.
- **Kooth**¹⁷: provides free, safe and anonymous online support. This includes articles, moderated discussion boards, live chat with a mental health practitioner and online text counselling.

Remember yourself: you need to ensure that you are supported:

- It is okay to acknowledge you may need support.
- What support is in place for you? Who will you debrief with after a difficult situation? Do you have formal supervision? Do you have access to an employee support programme?
- Consider your own safety plan – what protective factors do you have? What activities or strategies will you use to manage your emotions?
- **Pete's Dragons**¹⁸ offer support for anyone affected by suicide – this includes those affected in a professional capacity.

¹⁵ <https://www.livewellsouthwest.co.uk/childrens-services/camhs>

¹⁶ <https://www.plymouthonlinedirectory.com/article/3398/i-Thrive-Model>

¹⁷ <https://www.kooth.com/>

¹⁸ <https://www.petesdragons.org.uk/>

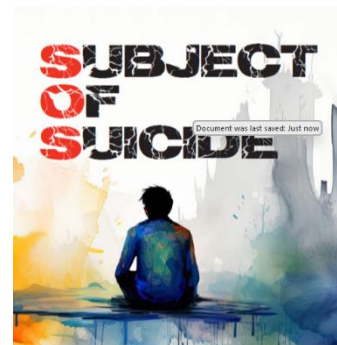
10. Additional considerations

Guide for young people – SOS: Subject of Suicide

Young people in Plymouth have collaborated with youth workers, the Council's Youth Participation Team and Public Health to create a resource to help other young people.

The booklet was designed to break down the barriers to people talking about suicide. It provides ideas to help young people and their friends support themselves and each other.

There is also a wellbeing (safety) plan that can be completed and kept for when needed.



[SOS \(Subject of Suicide\) – Dealing with Distress - Plymouth Safeguarding Children Partnership](https://plymouthscb.co.uk/sos-subject-of-suicide-dealing-with-distress/)¹⁹

Online safety

Digital platforms can expose vulnerable people to harmful content.

Professionals should:

- Be aware of online risks and behaviours.
- Promote safe online practices.
- Use available resources to support conversations about digital safety.

[Adolescent Online Safety - Plymouth Safeguarding Children Partnership](https://plymouthscb.co.uk/adolescent-online-safety/)²⁰

Postvention

Postvention refers to support provided after someone dies by suicide. Effective postvention:

- Helps individuals and communities grieve and recover
- Reduces the risk of further suicides

Resources for postvention planning:

- [Plymouth Educational Psychology Service - Critical Incident Response Pack](https://plymouthscb.co.uk/sos-subject-of-suicide-dealing-with-distress/)²¹
- [Schools guide | Papyrus](https://www.papyrus-uk.org/schools-guide/)²² - PAPYRUS has developed a guide to suicide prevention, intervention and postvention in schools and colleges, aimed specifically at education staff
- [Creating response plan | Communicating about suicide in schools | Samaritans](https://www.samaritans.org/how-we-can-help/schools/step-step/step-step-resources/creating-response-plan/)²³

The key to coping with a crisis is to plan, prepare and respond promptly. This is necessary to maintain the structure and order of the routine for young people, while facilitating the safe expression of grief.

¹⁹ <https://plymouthscb.co.uk/sos-subject-of-suicide-dealing-with-distress/>

²⁰ <https://plymouthscb.co.uk/adolescent-online-safety/>

²¹ https://www.plymouthonlinedirectory.com/media/3715/Educational-Psychology-Service-Critical-Incident-Response-Pack-Plymouth-City-Council-Educational-Service/pdf/Educational_Psychology_Service_Critical_Incident_Response_Pack_-_Plymouth_City_Council_Educational_S.pdf?m=1728296641087

²² <https://www.papyrus-uk.org/schools-guide/>

²³ <https://www.samaritans.org/how-we-can-help/schools/step-step/step-step-resources/creating-response-plan/>

Self-harm and suicide prevention – for people who work with adolescents

Suicide Bereavement Support

People who are bereaved (particularly by suicide) are more at risk of suicide themselves. This is especially true for young people. Local bereavement support is available.

- [Pete's Dragons](https://www.petesdragons.org.uk/)²⁴ are the commissioned service for specialist suicide bereavement support. They offer 1:1 support to anyone bereaved by suspected suicide, both adults and children.
- [Jeremiah's Journey](https://jeremiahsjourney.org.uk/)²⁵ specialise in supporting children, young people and families with bereavement from any cause.

Language and stigma

Decreased stigma reduces the barriers to somebody seeking help.

To reduce the stigma associated with suicide, use trauma-informed language.

Preferred language	Try to avoid
Die by/ death by suicide	Commit suicide (it is not a crime) Completed/successful suicide
Suicide attempt	A 'successful', 'unsuccessful', or 'failed' suicide attempt
Thoughts of suicide	'Just', 'only', 'threat', 'attention seeking'
Self-harm	'manipulative', 'attention seeking', 'just', 'only'

- Suicide or self-harming behaviour indicates mental distress. Phrases such as 'only/just attention seeking' or describing it as 'selfish' increase stigma.
- It does not take into account the level of mental pain and distress that an individual may be experiencing that they would inflict pain and harm on themselves.
- Every act of self-harm, irrespective of motive, needs to be taken seriously and deserves a compassionate, human response.

²⁴ <https://www.petesdragons.org.uk/>

²⁵ <https://jeremiahsjourney.org.uk/>

11. Training

Build your knowledge and confidence with training

Training equips professionals with the skills to intervene safely and effectively.

NHS England	https://www.england.nhs.uk/publication/staying-safe-from-suicide/ Free comprehensive NHS e-learning designed to complement the Staying Safe from Suicide guidance.
Samaritans	https://www.samaritans.org/how-we-can-help/schools/deal/ Free resource for teachers and other educational professionals designed to help develop resilience in young people.
	https://www.samaritans.org/about-samaritans/research-policy/internet-suicide/internet-safety-practitioners/training-resources/e-learning-module/ Free open access e-learning module on internet safety, suicide and self-harm, developed in partnership with Health Education England.
Livewell Southwest	https://www.livewellworkplacehealth.co.uk/training/ Free and paid for training available, e.g. ASIST (Applied Suicide Intervention Skills Training), MHFA (Mental Health First Aid), Community Suicide Awareness, Resilience and Self-Care, Community Suicide Awareness. Some courses do have a cost attached.
	STORM training in self-harm and suicide (2 days) led by CAMHS service, free for partners working in schools.
Papyrus	https://www.papyrus-uk.org/active-training/ Free and paid for suicide prevention training available to individuals, organisations and communities. E.g. 30-minute SPARK (Suicide Prevention Awareness, Resources, Knowledge) sessions, CPD-accredited SPOT (Suicide Prevention Overview Tutorial) and SPEAK (Suicide Prevention Explore, Ask, Keep safe) sessions.
NHS England MindED	https://www.minded.org.uk/ Suicide prevention and safety planning training and e-learning, aimed at those working with children and young people
Togetherness (NHS)	https://togetherness.co.uk/training-for-professionals/ Gives training in the use of the Solihull Approach to support emotional health awareness.
Zero Suicide Alliance	https://www.zerosuicidealliance.com/ Offers a range of suicide awareness courses. E.g. Suicide Awareness Autism and Suicide Awareness, University Suicide Awareness.
FutureLearn	https://www.futurelearn.com/courses/psychological-first-aid-for-children-and-young-people In partnership with UKHDA, provides psychological first aid training

12. Further resources

For professionals

[NHS England: Staying safe from suicide: best practice guidance](#)

[Papyrus: Schools guide](#)

[Samaritans: young-people-who-self-harm-a-guide-for-school-staff.pdf](#)

[YoungMinds: Responding to self-harm](#)

[Samaritans: Mental Health Education - Resources for teachers](#)

[Plymouth Online Directory: Children and young people mental health](#)

[Plymouth Online Directory: Eating disorders and self-harm](#)

For young people

[Plymouth Safeguarding Children Partnership: SOS \(Subject of Suicide\) – Dealing with Distress](#)

[Health For Teens: Everything you wanted to know about health](#)

[Royal College of Psychiatrists: Self-harm in children and young people](#)

[Papyrus: Prevention of Young Suicide](#)

[YoungMinds: Mental Health Charity for Children and Young People](#)

[Togetherness \(NHS\): Cornwall, Devon, Plymouth and Torbay](#)

[Livewell Southwest: Children & Young People](#)

[Young Devon: Changing the odds in favour of young people](#)

[Parental Minds](#)

[Mind: Help and support info hub - for 11–18-year-olds](#)

[Childline: Free counselling service for kids and young people](#)

For parents/carers

[Parental Minds: Get Support Today](#)

[Papyrus: New Guide for Parents](#)

[Mind: Supporting young people info hub - for adults](#)

[Samaritans: Parents and Carers - Mental health and your kids](#)

[Livewell Southwest: Parent Resources](#)

[YoungMinds: Parents Helpline - Mental Health Help for Your Child](#)

[Togetherness \(NHS\): Cornwall, Devon, Plymouth and Torbay](#)