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Concerns and complaints

We aim to provide you with a high quality service at all times. However, if you have any concerns, complaints or comments about your experience of our service then please tell a member of the team or contact the Patient Advice and Liaison Service on freephone 0800 328 7971.

If you would like to have information translated into a different language, please contact the Equality and Diversity Team at:
EqualityandInclusion@oxfordhealth.nhs.uk

Arabic يُرجى الاتصال بنا إذا كنت ترغبون في الحصول على المعلومات بلغة أخرى أو بتقديم مختلف.

আপনি এই তথ্য অন্য ভাষায় বা আলাদা আকারে **Bengali** পেতে চাইলে অনুগ্রহ করে আমাদের সাথে যোগাযোগ করুন।
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Chinese 若要以其他語言或格式提供這些資訊，請與我們聯繫

Polish Aby uzyskać informacje w innym języku lub w innym formacie, skontaktuj się z nami.

Portuguese Queira contactar-nos se pretender as informações noutro idioma ou num formato diferente.

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Early Intervention Service

Information for young people: Self harm and young people

Self harm and young people

Self-harming behaviours are a complex and challenging problem. Typically commencing in adolescence, such behaviours are indicative of significant psychological distress.

What is self-harm?

Self-harm refers to behaviours in which a person deliberately hurts or mutilates their own body, but which are not directly intended to result in death (although death may still occur). Any action, which is deliberately intended to cause death, is best regarded as a suicide attempt. People who self-harm are also at greater risk of suicide.

What to look for

There are many different types of behaviours that can be considered self-harming. These include:

- self-cutting e.g. cutting upper arms/wrists
- overdoses, ingesting excessive amounts of prescribed or illicit drugs
- self-burning, e.g. using cigarettes or lighters to burn the skin.

There are other behaviours that are not formally considered to be self-harming behaviours but are risk taking behaviours that can and often will lead to personal harm. A behaviour can be considered 'at risk' if it places the person or others in danger. Such actions include; driving cars at high speed, elicit drug use, or repetitive unsafe sexual practices in spite of knowledge and availability of safe sex practices.

A significant number of people who self-harm have experienced emotional, physical or sexual abuse, or an environment where they feel significantly undervalued.

Such young people may experience a range of intense emotions, (rage, despair, panic), which they find hard to deal with.

In most instances self-harm behaviours are an attempt to contain or control these distressing feelings. For example, young people may self-harm in order to gain control over the anger they feel towards others who may have rejected or abused them. Directing this anger towards their body and finding a sense of release gives some young people a sense of control over

the pain that they feel, or enables them to express it in some way.

What can be done?

Many young people who self-harm have difficulty forming stable, trusting relationships with others and are therefore difficult to engage in treatment. Encouraging a young person who is self-harming to seek assistance is often a difficult process. Even when they agree to see a counsellor it may take some time for any substantial change to occur.

Treatment involves dealing with any immediate medical complications of self-harm, if present. Specific treatment involves encouraging the young person into an ongoing therapeutic process, which aims to address any underlying mental health difficulties, and help the person to cope with their distress in more adaptive ways. A here and now, problem solving approach can be helpful in achieving this.