



**DURHAM CATHOLIC
DISTRICT SCHOOL BOARD**
Learning and Living in Faith

Guide to Supporting Students who Self-Injure



2020



Introduction

As part of Durham Catholic District School Board's Mental Health and Addictions Strategy, **Together for Mental Health**, this guide was developed in response to school staff concerns about the prevalence of self-injury in their students, especially in the adolescent years. School staff have an important role to play in early identification and effective referral of students who self-injure.

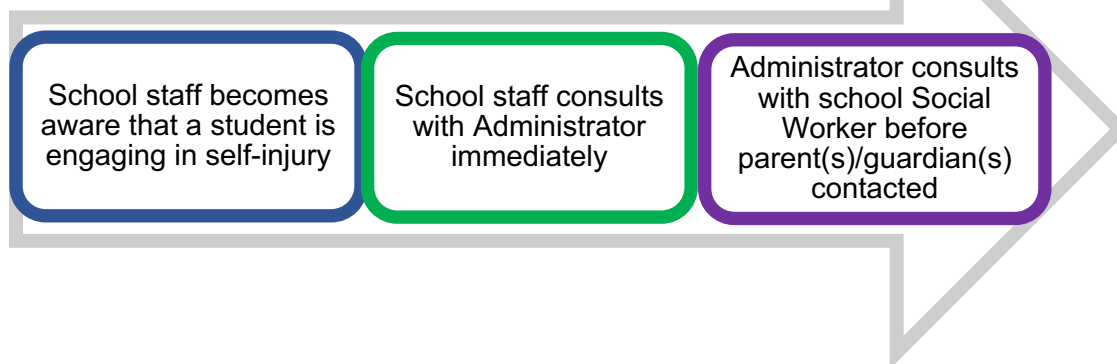
The information provided in this document is based on current research and has been developed to provide school staff with appropriate procedures for supporting students who engage in self-injury. It is provided for education and information purposes only. It is not intended to substitute for the advice of a physician or mental health professional, as it does not take into account each individual circumstance.

The document is organized into two main sections: **What Should I Do?** and **What Should I Know?** followed by a list of resources that can be shared with parents/guardians.

School staff are encouraged to become familiar with the information on the following pages, in order to support students who engage in self-injury.

NB: In order to use inclusive language, "they" is used as a singular pronoun throughout this document.

What Should I Do?



What should my initial response be when a student tells me about their self-injury?

Understand that this is a big moment for the student. The most important thing is to remain calm. **How you respond is critical and could impact the student's willingness to seek help in the future.** Use the following tips when speaking to the student directly:

Do:	Do Not:
<ul style="list-style-type: none">• Do approach the student in a calm, non-judgmental manner, with respectful curiosity.• Do use the student's own language when talking about self-injury, (e.g., if the student calls it 'cutting,' use that term in discussions with them).• Do listen, in order to better understand.• Do offer reassurance that people care and want to help; let the student know that they are not alone.• Do reassure the student this will not be discussed beyond those who need to know (e.g., parent(s)/guardian(s), Administrator) to ensure their safety.	<ul style="list-style-type: none">• Do not respond with panic, shock or disgust.• Do not show excessive interest in the details of the self-injury.• Do not ask the student to show wounds or injuries.• Do not try to stop the behaviour with ultimatums or threats.• Do not promise complete confidentiality. Others may need to be informed to ensure the student's safety (e.g., parent(s)/guardian(s), Administrator).• Do not talk about the student's self-injury around other staff and students.• Do not engage in whole-class conversations about self-injury.

Be sure to demonstrate concern for the student's overall well-being. Do not focus solely on the self-injury, as it is often a sign that other things are going on.

Note: Following initial disclosure, a staff member may be asked by an Administrator and/or school Social Worker to seek additional information for the purpose of determining next steps. The staff member is **not** expected to assess student's level of risk.

What if a student tells me that a friend is self-injuring?

In this situation, school staff consults with Administrator to determine next steps.

What if I suspect a particular student is engaging in self-injury?

A school staff member who feels comfortable, or who knows the student well, can initiate a conversation and make a general inquiry about the student's well-being. Use of "I" statements are often helpful; for example, "I am concerned about you." If a student denies or shuts down the conversation, it's important to keep the door open for future conversations by saying something like: "OK, well if you ever want to talk about anything, I'm available." **Consult with your Administrator if you have any concerns about a student's safety or well-being.**

Administrator Considerations

Important caution: It is not advisable to ask a student to show their wounds; however, if it is evident that the wounds are severe or life threatening, seek immediate medical attention. Follow usual practices if medical attention is required, including contacting parent(s)/guardian(s).

If immediate medical attention is not required:

- Consult with school Social Worker to establish a plan for next steps, including making contact with the parent(s)/guardian(s). Consultation should include a discussion around who should make contact, the recommended approach to initiating contact and a discussion around what key messages will be shared with parent(s)/guardian(s).
- It is strongly recommended that the student be advised in advance that the parent(s)/guardian(s) will be notified. Ideally, the student should be present and involved in the process of the phone call/meeting with the parent(s)/guardian(s).
- In all cases of self-injury, a suicide inquiry is important, even though engagement in self-injury does **not** automatically mean that a student is suicidal. Refer to page 4 for additional information.
- If suicide concerns are present, follow the steps as outlined in the DCDSB **Suicide Prevention and Intervention Protocol**, including consultation with the school Social Worker.
- If suicide concerns are **not** present, establish a plan for mental health supports.
 - **If mental health supports are already in place**, discuss plan with parent(s)/guardian(s) to ensure that existing mental health provider is aware of self-injurious behaviour. In some situations, school Social Work support may be offered, in addition to community supports.
 - **If no mental health supports are currently in place**, seek verbal permission for school Social Worker to meet with student to assess and explore need for supports.
- Consider which other staff members might need to know in order to assist in keeping the student safe. These decisions should be made in consultation with the school Social Worker. The student's input should also be considered.

What Should I Know?

What is self-injury?

Self-injury, also referred to as non-suicidal self-injury (NSSI), self-injurious behaviour, or self-harm is the intentional destruction of one's body tissue, without suicidal intent and for reasons not socially sanctioned. This definition excludes tattooing or piercing, and indirect injury such as substance abuse or eating disorders. The most common methods of self-injury include cutting, burning, scratching and bruising. Although the most common age of onset for self-injury is early adolescence, individuals at any age can engage in this behaviour.

The self-injury described in this document does not include self-injurious behaviour, such as repetitive, stereotyped head banging, that is sometimes seen among individuals with intellectual and developmental disabilities.

Why would a student engage in self-injury?

A student may engage in self-injury for a variety of reasons, the most common being to cope with difficult feelings (e.g., numbness, anxiety, stress, sadness). Self-injuring may help a student feel a sense of relief from these overwhelming negative emotions. There is often more than one reason for engaging in the behaviour, and the reasons can change over time.

What is the link between self-injury and risk for suicide?

In most cases, a student who engages in self-injury has a different intent than a student engaging in suicide-related behaviour. While self-injury is a sign of distress, it is usually not a suicidal act. However, self-injury is one of the risk factors for suicide. For all youth who engage in self-injury, it is important to conduct a suicide inquiry and to explore factors that are known to exacerbate risk. Consultation with the school Social Worker is important when determining how the suicide inquiry should be done.

What are some possible signs of self-injury?

Self-injury is often a secretive behaviour. The following are some possible signs of self-injury that school staff should be aware of:

- Unexplained cuts, burns or bruises, typically (but not always) on the arms, legs and stomach;
- Frequently wearing clothing that is inappropriate for the weather (e.g., long sleeves on a hot day);
- Reluctance to take part in activities that require a change of clothes (e.g., gym class);
- Possession of razors, shards of glass, knives, thumb tacks or other items that may be used to self-injure; and
- Reference to self-injury in a student's writing assignments, journals, art projects or conversations.

What is self-injury social contagion?

A concern in the school environment is the possibility of contagion or the spread of self-injury. Most commonly, this occurs through communication between peers about the behaviour and imitation by others.

The following guidelines will help in preventing self-injury contagion:

- Do not allow students to share detailed information regarding the injuries, or share related images or stories.
- Do not use school-wide assemblies or newsletters to address self-injury.
- Discourage overt display of injuries and wounds.
- Ensure that any discussion about self-injury includes the broader context; that is, as an unhealthy coping strategy among several others, such as substance abuse or risk-taking.
- Emphasize the need for students who are engaging in the behaviour to seek support.
- Focus intervention **individually**, as opposed to groups.

In some situations, other students are aware that a peer is self-injuring (e.g., if a student has posted on social media, shown their injuries to classmates, etc.). It is important that a caring adult be assigned to check in with these students who are potentially impacted, to ensure their well-being, without discussing specific details that the students don't already know.

Why do we have to contact parent(s)/guardian(s) when we have knowledge of self-injury?

“In loco parentis,” the legal principle that holds that educators stand in place of a parent while the student is at school, requires educators to inform parent(s)/guardian(s) if their child is engaging in self-injury. **It is the professional responsibility and obligation of school staff to notify parent(s)/guardian(s) where there is any potential for harm that may come to the child or youth, as in the case of self-injurious behaviour.**

When school staff are dealing with a situation of self-injury, it is strongly recommended that the student be advised in advance that the parent(s)/guardian(s) will be notified. Ideally, the student should be present and involved in the process of the phone call/meeting and aware of the specifics of the communication.

For students who are 18 and over, parental involvement should be carefully considered and will require permission from the student. This is part of the consultation process with the Social Worker to ensure any imminent safety concerns are adequately addressed. For an emancipated student, (i.e., one who has withdrawn from parental control) it may be appropriate to explore other options with them.

Note: Mental health professionals, including Social Workers and Psychological Services staff, must abide by rules of confidentiality as dictated by their professional College regulations when students disclose information that they do not want their parent(s)/guardian(s) to know. School staff do not have this same obligation of confidentiality.

How can we support parent(s)/guardian(s)?

- Be mindful that this information can be very difficult for parent(s)/guardian(s) to hear and that this may be the first time they're hearing it. Approaching the conversation with empathy and compassion is crucial.
- Parent(s)/guardian(s) may need help in understanding self-injury and coping with their own thoughts and feelings.
- The school's role is to encourage the parent(s)/guardian(s) to try and understand what their child might be going through; to recognize that their child is having a hard time coping; and to approach their child from a non-judgmental stance.
- Helping parent(s)/guardian(s) understand the difference between helpful and unhelpful responses is very important. School Social Workers can help with key messages and recommended approaches, or may be available to speak to parents directly.
- Parent(s)/guardian(s) can be provided with resources for understanding and effectively addressing self-injury, including those listed in the "Self-Injury Resources" section at the end of this document.

Content for this document has been informed by the following sources:

A Guide to Understanding Self-Injury for School Professionals, Self-Injury Outreach and Support
<http://sioutreach.org>

Non-suicidal Self-Injury in Schools: Developing and Implementing a School Protocol:
<http://www.selfinjury.bctr.cornell.edu/perch/resources/non-suicidal-self-injury-in-schools.pdf>

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Self-injury Resources

Online Resources:

Self-injury Outreach and Support (SiOS): www.sioutreach.org

The Self-injury Outreach and Support initiative, as part of a collaboration between McGill University and the University of Guelph, provides current information and helpful resources about self-injury to individuals who self-injure, those who have recovered, and those who play key supportive roles.

Guide for Parents and Families: <http://sioutreach.org/learn-self-injury/parents-and-families/>

If Your Child is Self-Injuring: <http://sioutreach.org/upgradetest/wp-content/uploads/2018/06/Parent-Infographic-3-1.pdf>

Books:

Smith, J. (2012). *The Parent's Guide to Self-Harm: What Parents Need to Know*. Oxford, England: Lion Hudson.

Hollander, M. (2017), *Helping Teens Who Cut, Second Edition*. New York, NY: Guilford Press