

An illustration of a person from behind, with a body covered in a network of black cracks, suggesting fragility or damage. Above their head is a large, dark, textured cloud. The person is standing on a light brown surface. To the left of the person are five horizontal bars of varying lengths, alternating in color between yellow and light blue. A silver chain is attached to the bottom of the person's legs and extends towards the bottom right corner of the image.

## EXTREME REACTIONS: Working with Clients who Self-Injure



**Deep Release**  
training counselling





**Causing harm to oneself is a way of providing temporary relief from overwhelming thoughts, feelings or experiences.**

## Some Basic Information and Understanding

The person who self-harms does not always do it deliberately

The person who self-harms does not always do it consciously

The person who self-harms does not always want to end their own life

Self-neglect can be a form of self-harm

Self-harming often becomes habitual and addictive

“*Deliberate Self-harm*” is now considered an unhelpful term – it carries a sense of blaming the person for their actions

Acts of self-harm can be **impulsive**, particularly for young people, and can be hard to control

Self-harming behaviours can be **habitual** (like brushing your teeth)

The person may **dissociate** while self-harming

Self harming can include **high risk behaviour**, physically, sexually or psychologically (*I’m not worth anything...*)

- Research suggests that 1 in 4 young women and 1 in 10 young men have self-harmed at some point in their life
- Even before the pandemic, people who self-harmed could struggle to access support, with only 38% receiving medical and/or psychological support
- Early research suggests that young people, particularly young women, have experienced much greater declines in their mental health during the pandemic, compared to others

**Our research adds further evidence that more young people may be struggling as a result of the pandemic**

**In our conversations with young people there were 4 key themes:**

- Access to mental health and self-harm support
- Family tensions
- Lack of peer contact
- Negativity about the future

**SAMARITANS**









*“A them-and-us position pathologises  
‘them’ and leaves ‘us’ untouched.  
Separating ourselves out from such a  
process makes it harder for us to  
connect in therapy...”*

*Quite simply, it is a shared human  
experience...”*

Working with Risk in Counselling & Psychotherapy”  
Andrew Reeves (Sage, 2015)





**Feeling Out of Control**



**Low Self Worth**



**Self-Punishment**



*I'd rather be physically hurt  
than emotionally...*

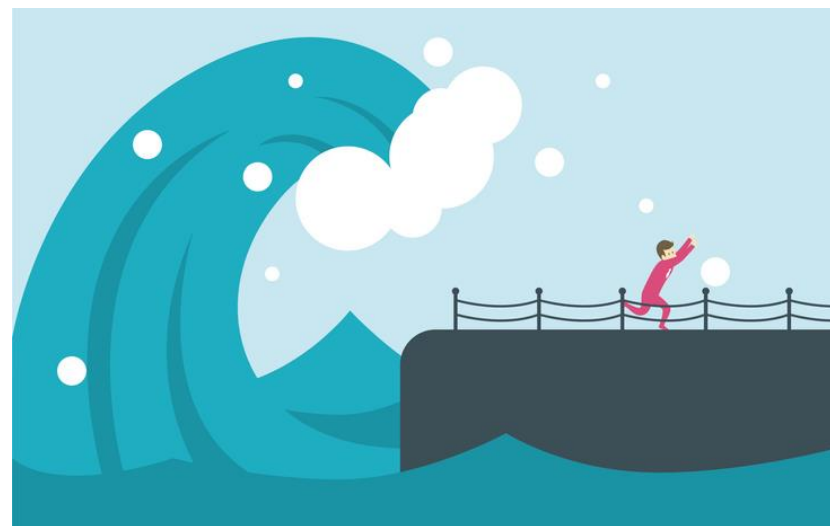
*You can put a Bandaid  
on your finger, but not  
on your heart.*

**Physical Release of Feelings**





**To Feel Something**



**To Escape Difficult  
Feelings or Memories**



**To Access Help**



**Nowhere Else to Turn**

# COMPULSIVE

- An irresistible craving to perform a self-harming act
- Repetitive
- Fear something terrible will happen if the act is not performed
- No choice
- Reduces anxiety, but sense of well-being doesn't last – destructive cycle
- Preoccupied with thoughts about self-injuring

I don't **cut** because  
I want to **DIE**,  
I **cut** because  
I want to **LIVE**.

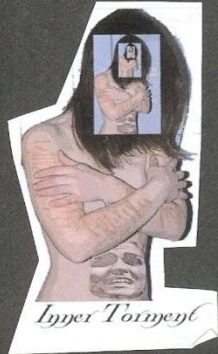




# IMPULSIVE

- No previous planning and little thought to the consequences
- Brain flashes the message, “*do this now...*”
- Occasional, when the need arises (not pre-planned)
- Can be under the influence of alcohol





#### SELF HARM

I TRIED HARD NOT TO DO IT  
BUT MY BODY CRIED OUT FOR IT  
I NEEDED TO DO IT  
I COULDN'T STOP IT.

WHY DID I WANT TO DO IT?  
I DON'T KNOW, IT JUST HAPPENED  
I COULDN'T PUT SPACE BETWEEN THE URGE AND THE ACTION  
AND WHEN IT HAPPENED I FELT BETTER.

THE PAIN THAT COMES WHEN I BREAK THE SKIN.  
HURTS, HURTS BADLY. BUT I DON'T CARE  
IT HAS TO BE DONE. I DESERVE IT.

SHE'S NOT ALLOWED TO ENJOY ANYTHING  
WHY SHOULD SHE BE IN GLADNESS?  
WHEN BS IS STRUGGLING, AND TRYING TO UNDERSTAND  
AND IF I DON'T DO IT  
WELL THEN THERE IS NOTHING  
AND NOTHING IS THERE  
I WANT TO MAKE SOMETHING  
SOMETHING THAT'S HURT AND PAINFUL  
IT'S ALL I KNOW.

25.1.09



I tried hard not to do it

But my body cried out for it

I needed to do it

I couldn't stop it

Why did I want to do it?

I don't know, it just happened

I couldn't put space between the urge and the  
action

And when it happened I felt better

The pain that comes when I break the skin

Hurts, hurts badly. But I don't care

It has to be done. I deserve it.

She's not allowed to enjoy anything

Why should she be in gladness?

When BS is struggling and trying to understand

And if I don't do it

Well then there is nothing

And nothing is there

I want to make something

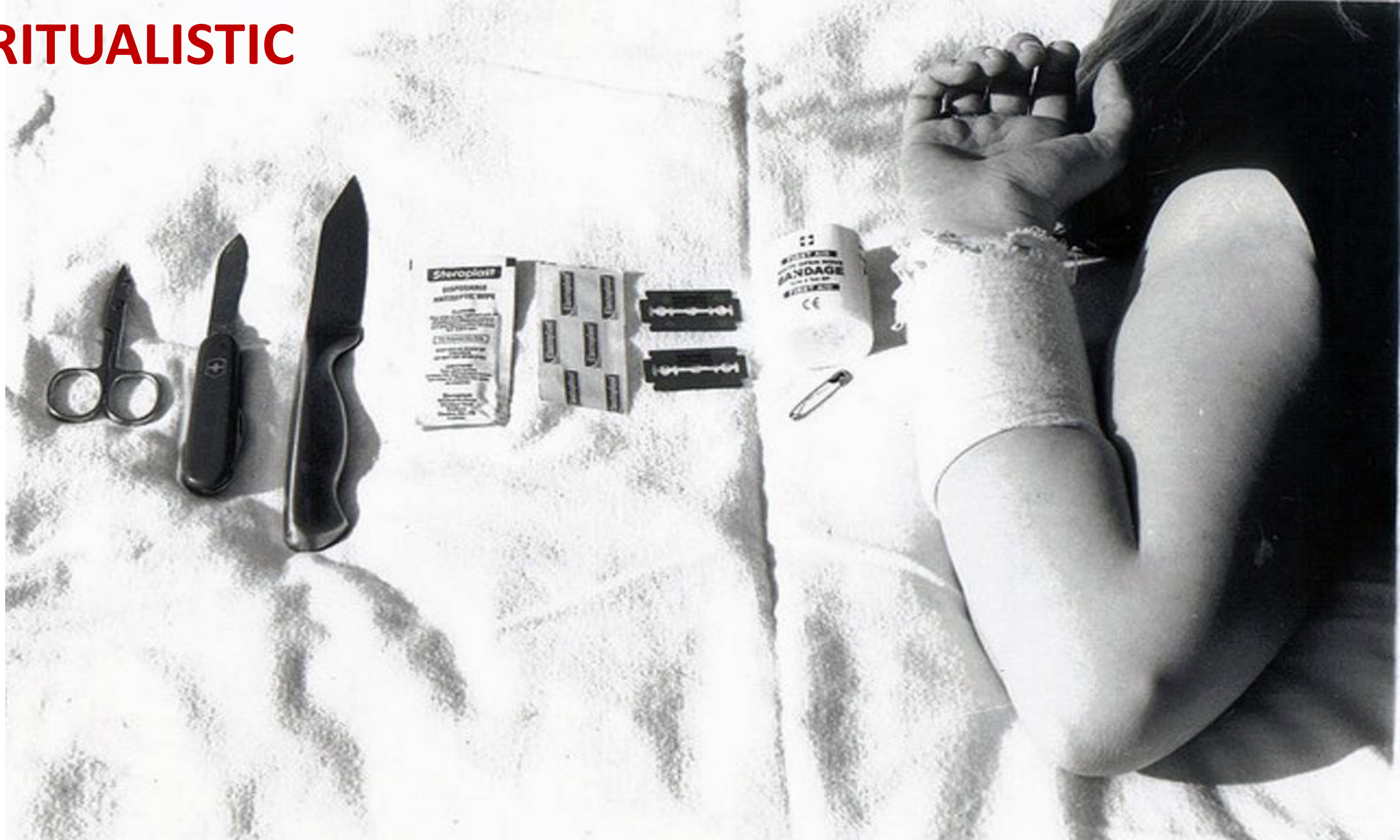
Something that's hurt and painful

It's all I know.

25.1.09



RITUALISTIC





***“Nothing  
works better  
than self-  
harming...”***

**Janina Fisher**



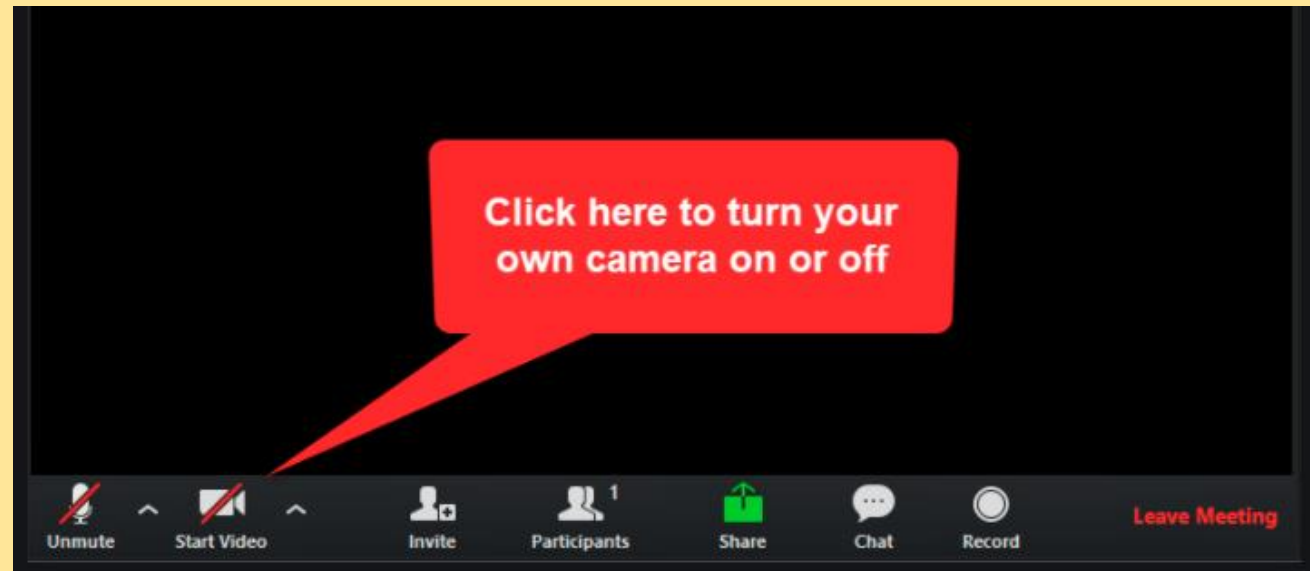


## Ange's Story

*"Abandoned..."*

**Please turn your  
video off for the  
film**

**THANK YOU!**





# Buddy Group Discussions

- Share your personal experience if it feels safe
- How do you feel about working with clients who self-harm?
- How did you respond to Ange's testimony?

**15 minutes – divide the time between you all**





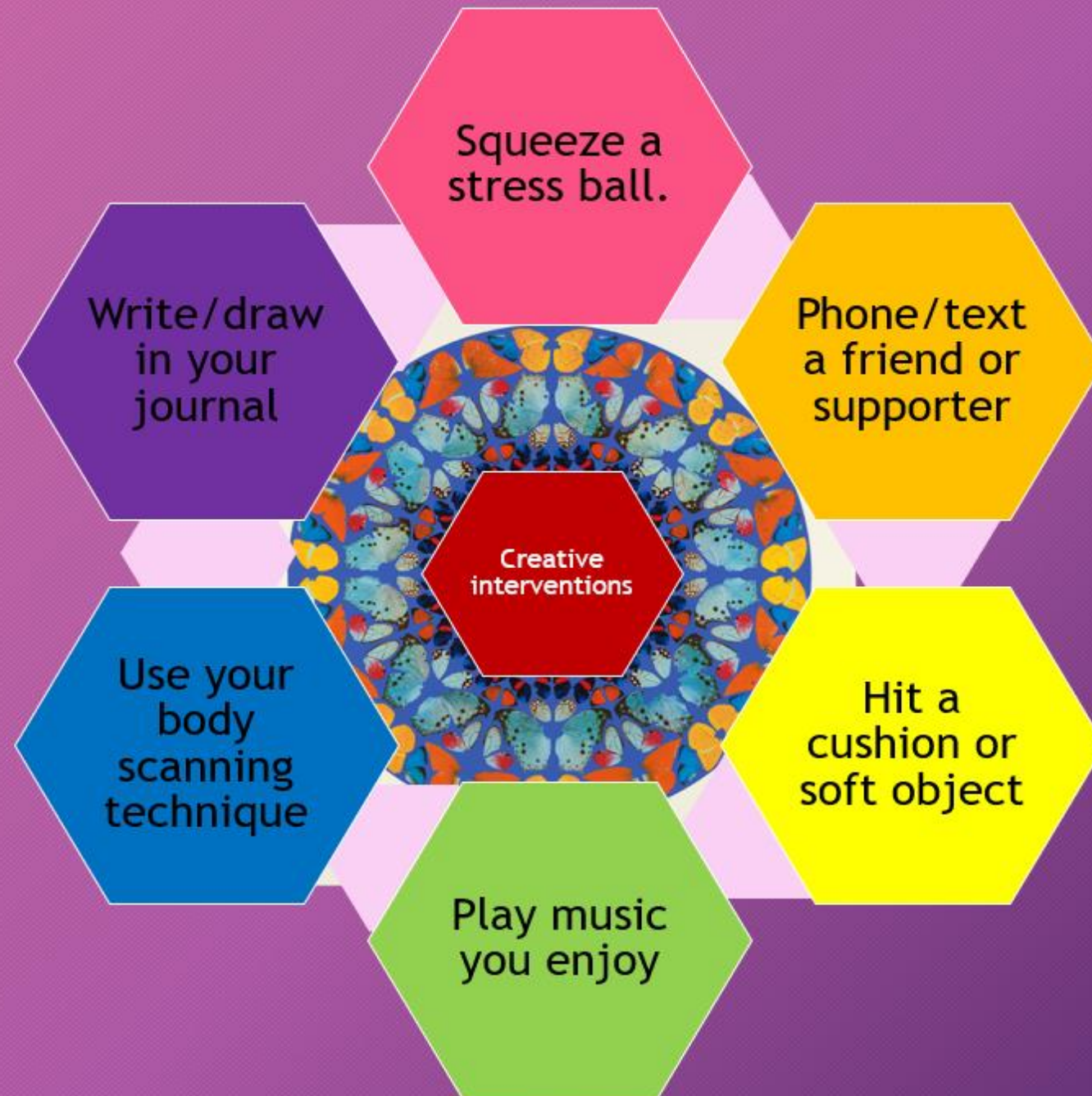


**5 MINUTES**





**?**  
**DO YOU**  
**HAVE**  
**ANY**  
**QUESTIONS OR**  
**COMMENTS?**



Freedom Creative Arts Therapy  
Sometimes talking is just not enough

© Cara Cramp



Self-harm

~~Deliberate self-harm~~

Self-injury

~~Self-mutilation~~

Self-inflicted violence

Self-injurious behaviours

Non-suicidal self-injury (NSSI)



**“In self-cutting... the body is used as an ‘object’  
that is simultaneously attacked and acts  
as a source of comfort.”**

*The Search for the Secure Base, Jeremy Holmes, 2002*

# WHAT IF IT HAPPENS....

- When you are not present ... (you hear the details from the client)
- Just before your client arrives... (you see the results)
- Right in front of you... (you watch it about to happen)









# Isn't it just attention seeking?

- it is a way of drawing attention to pain when words can't express it, and no one seems to be listening
- the person may be starved of value, praise and affection in childhood
- getting wounds tended (eg by nurse) produces a feeling of being cared for





# Isn't it just attention seeking?

## BUT

- people who self-harm often go to great lengths to hide their injuries
- being called an attention-seeker may stop them getting the help they need
- Jan Sutton: [“attention-needing”](#) is better





# Self-harm is not the problem: it's the solution

*"Doctors have told me I have a death wish, but I haven't. I harm myself to enable me to live. I know that if I didn't self-harm at the times I need to, I wouldn't be alive today. Self-harm is the only way I cope with the world and my life..."*

*"I often think about suicide but by self-harming it keeps a lid on things..."*



**BUT....**

**You may unintentionally end your life**

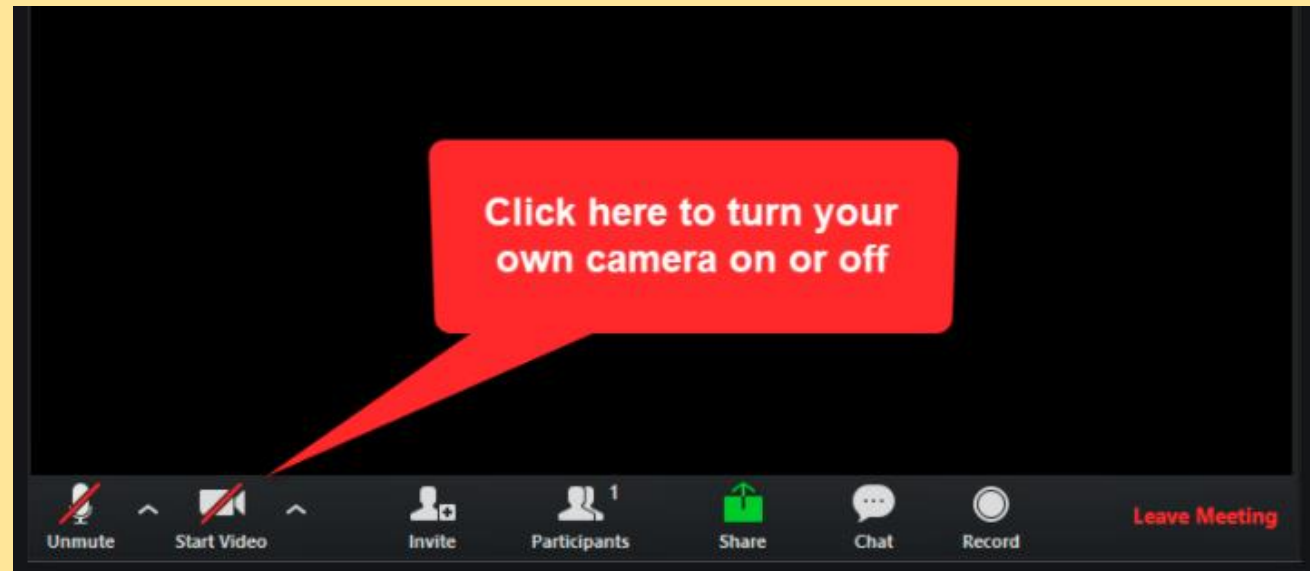


## Claire's Story

*"Longing for love..."*

**Please turn your  
video off for the  
film**

**THANK YOU!**





# Buddy Group Discussions

- Share your personal experience if it feels safe
- How do you feel about working with clients who self-harm?
- How did you respond to Ange's testimony?

**15 minutes – divide the time between you all**







**10 MINUTES**





**?**  
**DO YOU**  
**HAVE**  
**ANY**  
**QUESTIONS OR**  
**COMMENTS?**





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# Aaron's Story

<https://youtu.be/YddU3ZbcIMU>





# Isn't it mainly a teenage problem?

It is very common in teenagers

**BUT**

It affects every part of society, men and women, all ages groups, races, religions and educational backgrounds



# Isn't it mainly women who self-harm?

- Roots often lie in trauma and more women than men have suffered eg sexual assault or domestic violence
- Self-harming frequently stems from unexpressed strong emotions such as anger, bound up with fear and low self-esteem
- Self-injury can be anger turned inwards onto the self
- Men more commonly turn their anger into acts of aggression, vandalism and criminal behaviour
- Women suffer more from depression (often related to self-harm) – or is it just that they report it more?





# Self harm in LGBTQI young people

- Lesbian, Gay, Bisexual, Transgender, Queer and Intersex young people often feel marginalised in society, alienated by friends and fearful of coming out to their families
- For many, the journey to understanding and discovering their gender identity or sexual orientation can be extremely painful
- Some people know their sexual orientation from a young age, and some begin exploring this around the time of secondary school transition. For others, it might not be until late in their teens or even their twenties. Whenever it is, without a supportive and caring community around them, it can be very tough.
- The pain might come from the worry of not being accepted, or even being excluded by family or friends, from being bullied by others, or from fears and anxieties around coming out.



# Self harm in LGBTQI young people

- The statistics for young people in the LBGTQI community who have considered suicide is 59%, while 48% have self-harmed.
- These numbers sadly reflect the feeling of being alone and the emotional turmoil that many journey through.
- Knowing who you are in the quiet of your own bedroom is one thing, telling others is another.
- Often, the leap can feel too great if you are fearful of how others might respond. That feeling of being at odds with yourself is what can lead to self-harm.





## What about Tattooing / Body Art ?

*“Tattooing and piercing give a person self-worth either in their own eyes or in the eyes of their particular group. 'Look at me' can be the consequence of obvious and publicly displayed tattoos and piercings. They are noticeable and make a statement especially if displayed in strategic places as the head face, hands and neck: they surely do get noticed!*

*Tattooing is about individual motivation, communication and expression.*

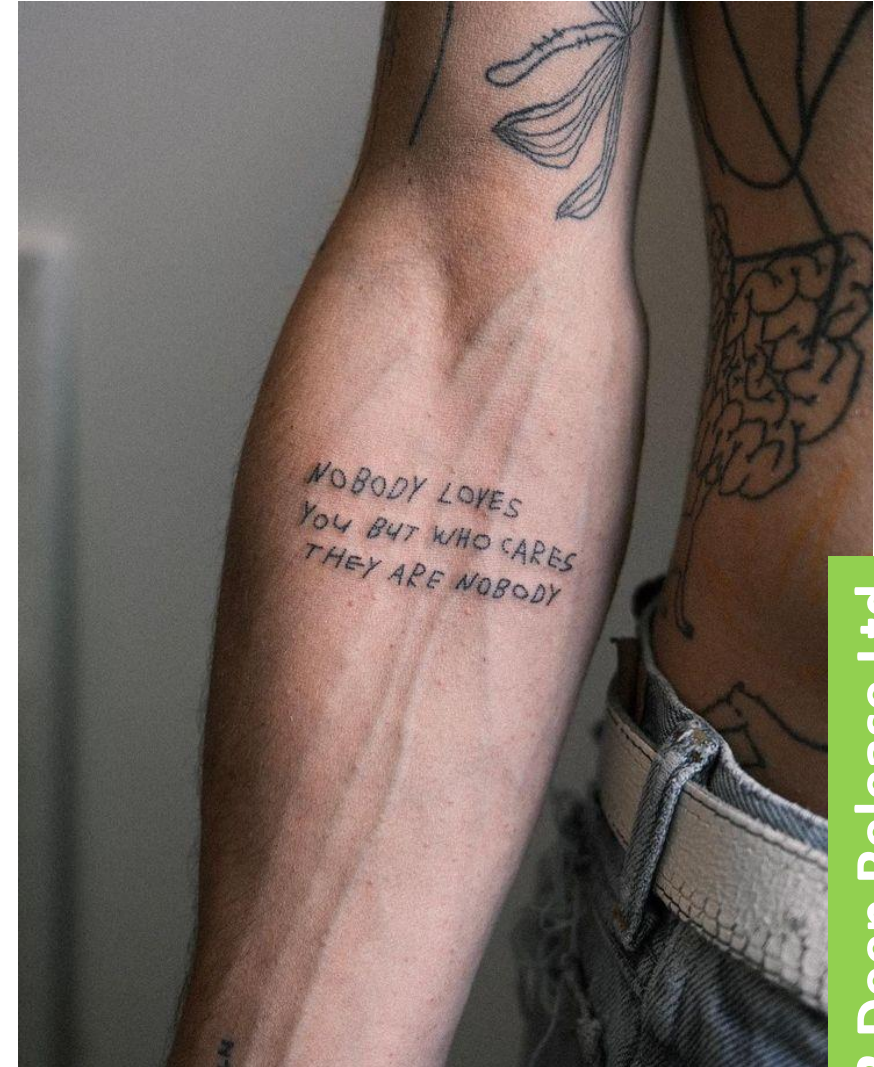
*Self harm is a destructive act, body art is a creative act; for me that is the dividing line.”*



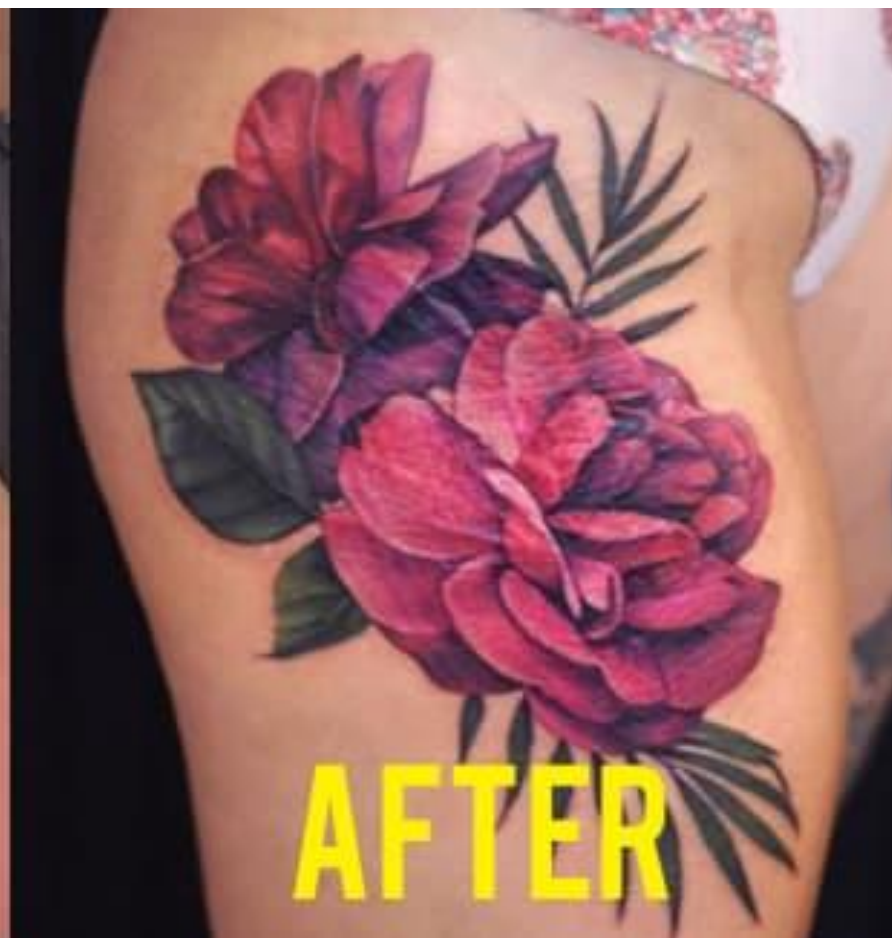
## What about Tattooing / Body Art ?

*“It’s definitely an area where more research is needed. Tattooing and piercings can be painful and remain painful for hours if not days. There is always the chance of infection which will extend the period of pain and discomfort. The tattooist performs the act and the rationalised individual does not carry the guilt of that act yet bears the pain and discomfort and therefore they absolve themselves of any guilt whilst controlling the situation. It becomes a socially acceptable vehicle of self-harm. The process becomes important, the act of tattooing and piercing, as the pain and discomfort produced helps rationalise away any guilt as the proxy act absolves the self-harmer of responsibility.”*

<https://yayofamilia.uk/blogs/news/tattooing-and-self-harm-what-artists-need-to-know>

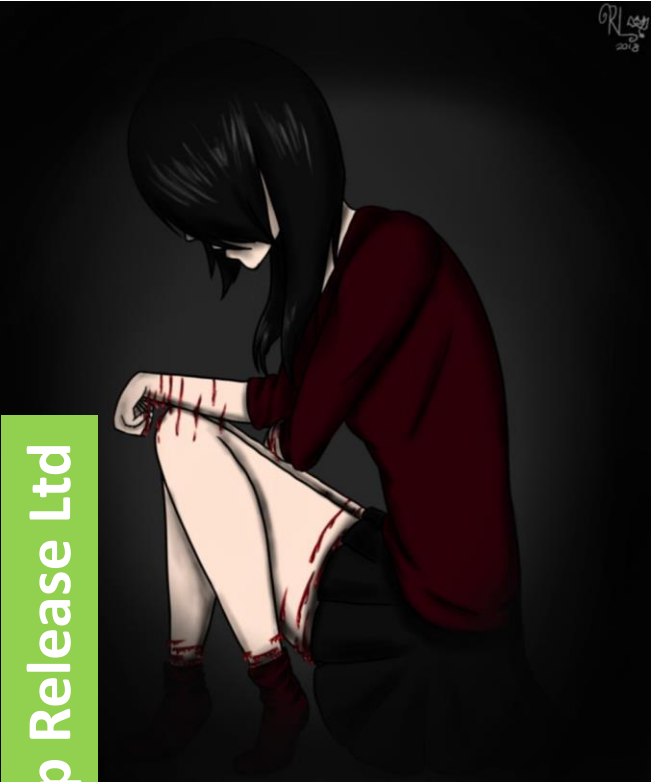






## Other factors to consider

- Some people pick up tips about self-injury from others, eg in psychiatric hospital
- Teenagers can be influenced by the media/internet/gangs
- Some people who self-harm have a diagnosed mental health disorder
- Some people who self-harm have Emotionally Unstable Personal Disorder
- Very common in people with Dissociative Identity Disorder
- People who self-injure rarely hurt others





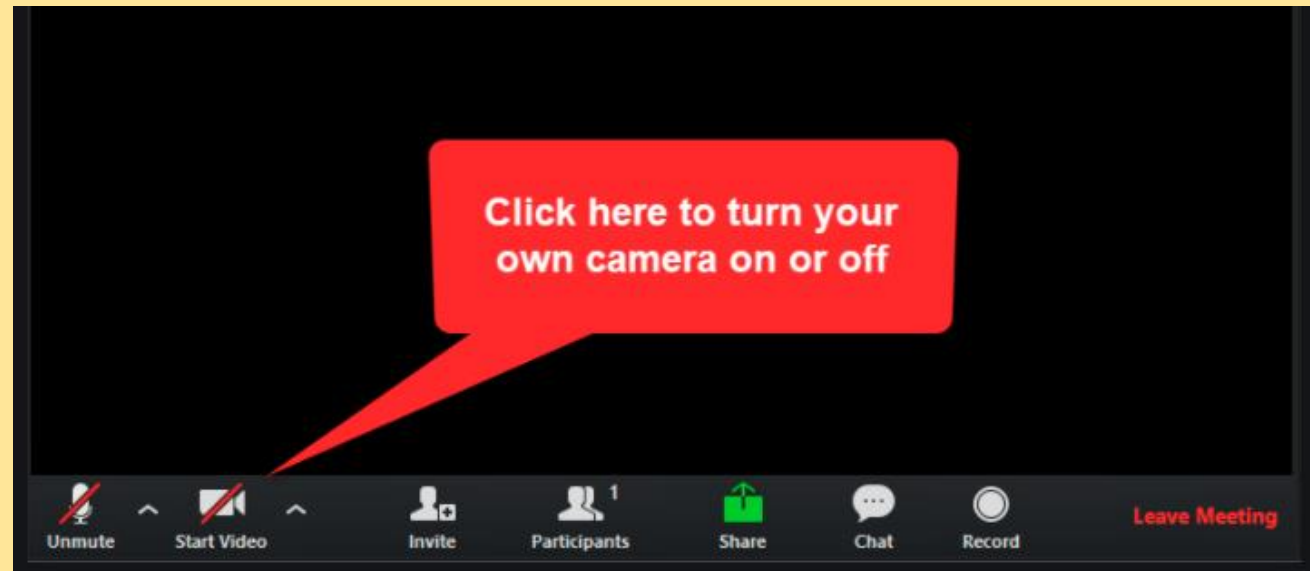


## Fi's Story

*"The girl in the mirror..."*

**Please turn your  
video off for the  
film**

**THANK YOU!**







**5 MINUTES**

# Identifying the Triggers

- When was the **first** time you felt the urge to hurt yourself?
- What is a **typical** time when you self-injure?
- What was the **worst** time?
- When was the **most recent** time?
- What did you need then – what do you need now?



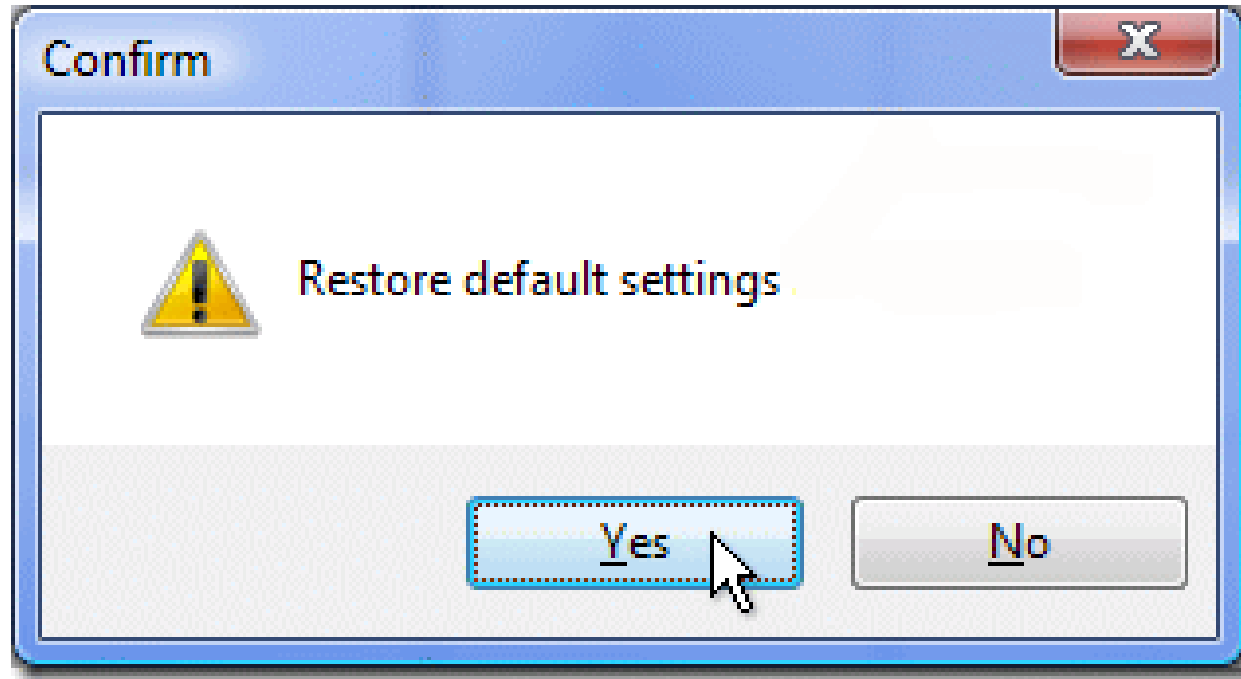


# Risk Assessment

- Good supervision!
- Be able to conduct dialogue around risk
- Be aware of your own relationship with self-injuring/self-harm behaviour and address in counselling
- Be able to prioritise issues within the counselling – not obsessed with self-harming behaviour, nor ignoring it
- Balance respect for client's autonomy with risk management
- Counsellor should not judge, but be empathic, compassionate and understanding and willing to be appropriately congruent
- Show your workings

**Not always easy!**

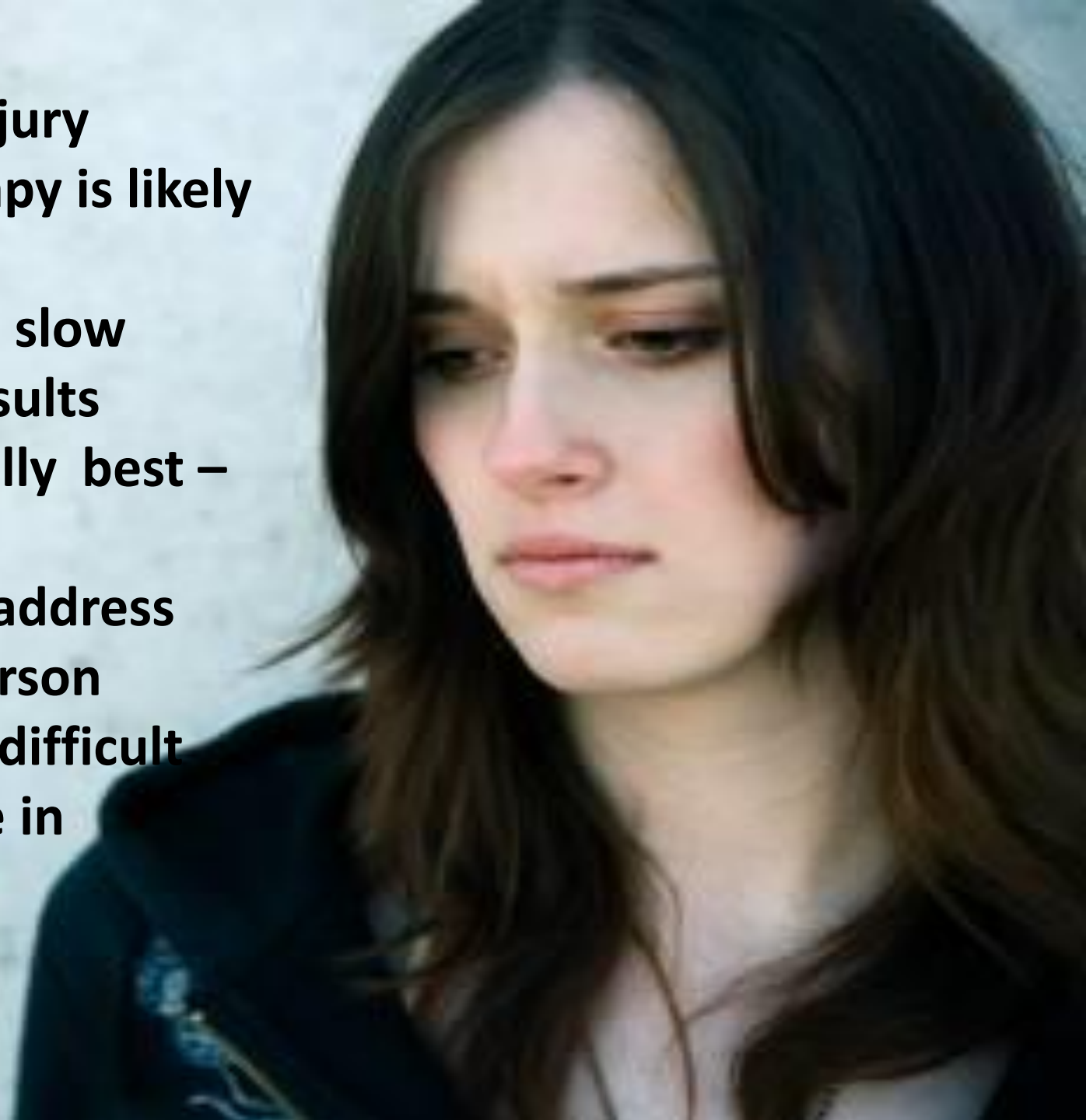
# Signs of Healing



- When a crisis hits, revert to the ‘factory settings’ of self-harming
- Need to reprogramme the computer each time!
- Sign of healing – longer gaps between the crises, and quicker recovery time



- Be open in talking about self-injury
- Understand that effective therapy is likely to take a long time
- Giving up self-harming can be a slow process – don't expect quick results
- An integrative approach is usually best – each person is different
- A primary goal of therapy is to address the underlying needs of the person
- Exploring trauma memories or difficult feelings may trigger an increase in self-harming behaviour



- **Trust is a key issue – it takes time to build.**
- **Contracts rarely work and can be counter-productive**
- **If you feel the client is unsafe hospital may be necessary, but not normally recommended**
- **Be aware that dissociation is a high likelihood – get specialist training**
- **Vicarious traumatisation is a real risk – get good support and supervision**



# Coping Strategies

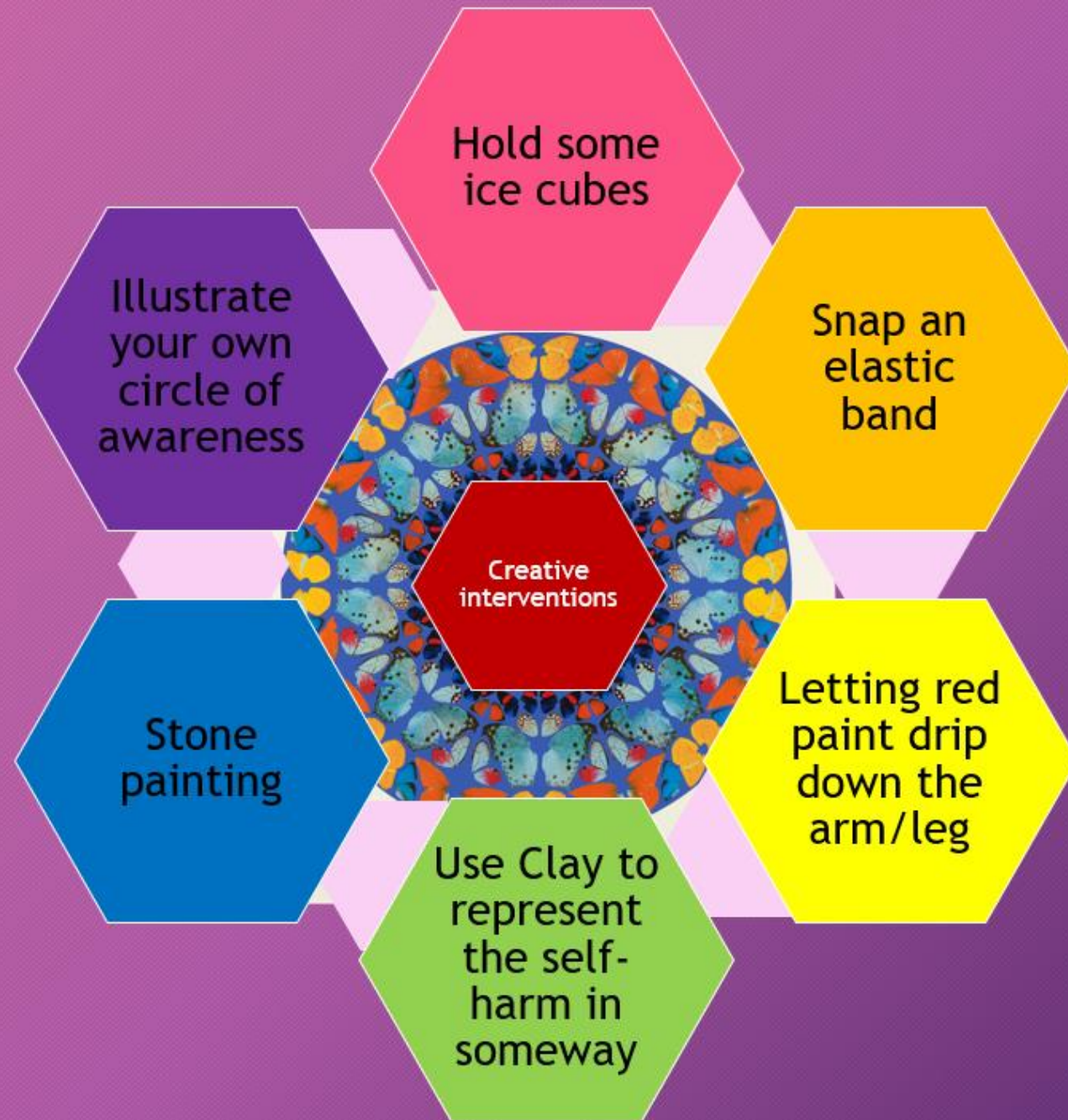
***“You want them to develop healthier coping strategies, certainly... So you’re really looking into how they cope: what works for them when they’re stressed?”***

***Maybe that’s cutting themselves, or maybe that’s burning themselves. That may not sound very good to you, but for them it’s working.***

***And when it’s working is not when they’re going to die. It’s when things aren’t working...***

**Lisa Firestone PhD**





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# Buddy Group Discussions

- Continue to discuss the issues and prepare any questions
- How did you respond to Fi's testimony?
- Say goodbye and exchange details if required

**15 minutes – divide the time between you all**







**?**  
**DO YOU**  
**HAVE**  
**ANY**  
**QUESTIONS OR**  
**COMMENTS?**





- Your GP can prescribe medication for anxiety or depression, or difficulties sleeping
- You can also be referred to your community mental health team (CMHT) which can include psychiatrists, psychologists, social workers, an occupational therapist and community psychiatric nurse

- Get some counselling (either NHS or private)
- They offer links to find out if there are Support Groups in your area
- They recommend <http://www.lifesigns.org.uk/scar-reduction/> to help with scar reduction



- They give links to Free Listening Services such as the Samaritans
- Text SHOUT to 85258 to contact the Shout Crisis Text Line, or text "YM" if you're under 19

- If you're under 19 you can also call 0800 1111 to talk to Childline (the number will not appear on the phone bill)
- The Self Injury Support webchat for women and girls is available Tues/Weds/Thursdays from 7-9.30 pm
- CALM webchat (for men) is open from 5pm to midnight every day



**Self-harm  
Fact Sheet**

<https://www.rethink.org/advice-and-information/about-mental-illness/learn-more-about-symptoms/self-harm/>





# Resources





# PACT LTD

## Original & Creative Counselling Resources

[www.pact-resources.co.uk](http://www.pact-resources.co.uk)



Erikson's Life Stages



Wheel of Life



Working with Animal  
Figures Online Pack



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Inner Child**  
for Counsellors and Psychotherapists



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- A closed group for counsellors & trainee counsellors
- Please answer the joining questions!



### Deep Release Ltd - Counselling & Training

Private group 1.5K members



+ Invite



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## YOUTUBE CHANNEL

**Search: Brain Body and Beyond**

- Videos on Life, the Brain and Relationships
- Please subscribe!



# COMING UP!

08  
NOV



Online Event

**Losing the Will to Live: Working with Suicidal Clients**  
Tues Nov 8

Price Starts from: £10.00

November 8, 2022  
9:30 am - 1:00 pm

16  
NOV



Online Event

**Psycho-Integration for Counsellors with Dr Chris**  
Weds Nov 16

Price Starts from: £10.00

November 16, 2022  
9:30 am - 1:00 pm

22  
NOV



Online Event

**A Masterclass in Working with the Roles Played in Anger Cards**  
Tues Nov 22

Price Starts from: £10.00

November 22, 2022  
9:30 am - 11:30 am

03  
DEC



Online Event

**Making the Most of Supervision (for Counsellors and Supervisors)**  
Sat Dec 3

Price Starts from: £10.00

December 3, 2022  
9:30 am - 1:00 pm

13  
DEC



Online Event

**Free Course: Introducing the new Roles Played in Groups cards**  
Tues Dec 13

Price: Free

December 13, 2022  
9:30 am - 11:30 am



Please send us  
your feedback!



*Thank you*

Contact us:  
[info@deeprelease.org.uk](mailto:info@deeprelease.org.uk)

[deeprelease.org.uk](http://deeprelease.org.uk)

[pact-resources.co.uk](http://pact-resources.co.uk)

