DHC talking therapies

NHS Surrey Talking Therapies

Coping with suicidal thoughts and self-harm: My Safety Plan

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Understanding suicidal thoughts

What are Suicidal thoughts?

Suicide is the act of intentionally taking your own life.

Suicidal feelings can range from being preoccupied by abstract thoughts about ending your life, or feeling that people would be better off without you, to thinking about methods of suicide, or making clear plans to take your own life.

If you are feeling suicidal, you might be scared or confused by these feelings. Maybe the suicidal thoughts come to mind, you might have mixed feelings about them. Suicidal thoughts are very common, but can be frightening and confusing. We tend to avoid talking about them, so we don't realise how common they are, but you are not alone. Many people think about suicide at some point in their lifetime.

Suicidal thoughts are a sign to seek support and change something in your life. Depression and pain distort our thinking. It can seem like we're wearing very dark tinted 'gloomy specs'. Everything looks different to how it really is. However, thoughts are thoughts - not necessarily how things are, although it certainly feels like the thoughts are true.

What does it feel like to be suicidal?

Everyone's experience of suicidal feelings is unique to them. You might feel unable to cope with the enduring difficult feelings you are experiencing. You may feel less like you want to die and more like you cannot go on living the life you have.

These feelings may build over time or might fluctuate from moment to moment. And it's common to not understand why you feel this way.

How you might think or feel:	What you may experience:
Hopeless, like there is no point in living. Tearful and overwhelmed by negative thoughts. Unbearable pain that you can't imagine ending. Useless, unwanted or unneeded by others. Desperate, as if you have no other choice. Like everyone would be better off without you. Cut off from your body or physically numb.	Poor sleep with early waking. Change in appetite, weight gain or loss No desire to take care of yourself, for example neglecting your physical appearance Wanting to avoid others Self-loathing and low self-esteem Symptoms of depression or anxiety or other mental health conditions like OCD or PTSD Urges to self-harm Making plans to end your life

Understanding self-harm

What is self-harm?

Many people harm themselves in different ways. Some by smoking, drinking, working too hard or exercising too much. For others self-harm can be more apparent and severe.

Self-harm is also known as self-injury and is where someone harms their body deliberately, without wanting to die. Many people who harm themselves also have suicidal thoughts.

Some people may harm themselves many times each day, for others it may be triggered be a specific event or memory or under emotional distress.

Why do people self-harm?

- To escape from feelings of emptiness, depression, shame
- To relieve pent up tensions pressure or anger
- To feel something – to know you exist
- To feel in control
- To express or stop sexual feelings
- To try to prevent distressing or 'disgusting' intrusive thoughts
- To forget something
- To stop themselves from taking their own life
- To get a thrill or adrenaline rush
- To punish yourself because you are feeling 'bad'
- To maintain negative beliefs, such as 'I'm flawed, worthless, and weird'
- To escape from feelings of guilt
- To cope with the expectations of others e.g. regarding sexuality or arranged marriages
- To let people know how bad things are
- To make your body show pain
- To obtain a response from others that you feel you won't get otherwise
- To get people to listen to you
- To feel a part of a group and have an identity

Coping with suicidal or self-harm thoughts:

Suicidal thoughts may keep occurring throughout difficult times. We can support ourselves in reducing the frequency or intensity of the thoughts by:

1. **Decreasing the distress that the thoughts bring**
2. **Increasing our resources to cope**

How can I decrease the distress and build on my resources to cope?

Things to Avoid

Alcohol
Drugs
Being alone
Smoking

Things to ask yourself...

- ? Are these thoughts facts or my opinion?
- ? What has helped me feel better in the past?
- ? What can I do right now that will help me feel better?
- ? What gives my life meaning?
- ? What are my goals, dreams or life values? E.g. Family, friends, pets, helping others, faith, spirituality, community life, connecting with nature

STOPP
TAKE A BREATH
OBSERVE What am I thinking? What am I reacting to? What am I feeling in my body?
PULL BACK Put in some perspective. See the bigger picture. Is this fact or opinion? How would someone else see this?
PRACTICE WHAT WORKS What's the best thing to do: for me, others, the situation.

Things to tell yourself...

- ✓ I've coped this far, I can get through the next.... (day, hour, 10 minutes).
- ✓ Things will look better in time.
- ✓ Depression is temporary – this will pass.
- ✓ Suicide is a permanent solution to a temporary problem.
- ✓ Depression/ Anxiety is distorting my thinking – these thoughts are the voice of depression. They are not facts. I don't have to act on them.
- ✓ The vast majority of people get better from depression / Anxiety. I will look back and be pleased that I chose to live.

Things to do...

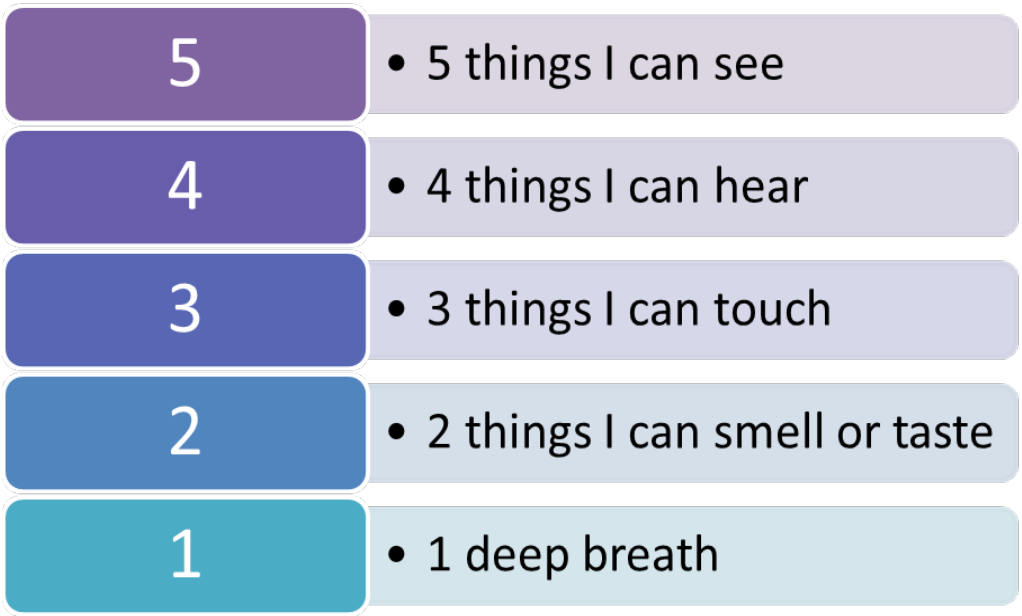
1) Self-soothing
2) Distraction
3) Talk to someone
4) Make a safety plan

1. Self-Soothing

Use all 5 senses to find things that will soothe you.

Vision	Focus your attention on looking at something nice, nature, a painting, watching a favourite programme or movie.
Hearing	Listen to a favourite piece of music, sounds of nature, sing.
Smell	Really notice smells – favourite soap, food, essential oil.
Taste	Use sensation of taste to focus your attention. Eat mindfully – savouring each moment.
Touch	Wear soft comforting socks, stroke a pet, give yourself a hand massage.

Count to five and ground yourself in the present:



Download a free app to your phone to support with breathing, grounding and distraction:

- **CalmHarm:** supports people to overcome the urge to self-harm through the use of various breathing, grounding, distraction and comfort techniques
- **Calm:** an app filled with meditation, relaxing music and nature sounds to support sleep and relaxation
- **Headspace:** teaches you how to use mindfulness and meditation to reduce stress and improve sleep

2. Distraction

For suicidal thoughts: Do something else, and focus your attention fully on what you're doing

- ✓ Gardening
- ✓ Household chores
- ✓ Physical exercise – walk, run, cycle, dance
- ✓ Tapping (Emotional Freedom Technique)
- ✓ Reading – magazine, self-help book
- ✓ Television
- ✓ Imagery
- ✓ Help someone else
- ✓ Go to the park, the beach – pay attention to nature
- ✓ Visit someone
- ✓ Music
- ✓ Stroke a pet
- ✓ DIY
- ✓ Feed the birds
- ✓ Sudoku or crossword
- ✓ Do something creative

For self-harm:

- ✓ Delay! Go for a run, tidy up etc.
- ✓ 10mins Delay tactic: say to yourself that you will wait 10 mins before you self-harm. When time is up, think again. Can you wait another 10 mins?
- ✓ Find some company
- ✓ Distract yourself! Flick through a magazine, tidy up, try a crossword
- ✓ Do something for someone else e.g. your friend, child, partner
- ✓ Use other strong sensations to distraction you. Try loud music, a cold shower, a fast run, squeeze something hard, eat hot chillies, eat ice cubes
- ✓ Shout a loud 'NO' or 'STOP'
- ✓ Rub ice across your skin where you might usually cut, or hold an ice-cube in the crook of your arm or leg
- ✓ Draw on your skin with red pen/paint

- ✓ Put elastic bands on wrists, arms or legs and flick them instead of cutting or hitting
- ✓ Try relaxation and breathing exercises. Use apps such as 'Headspace', 'Calm' etc.
- ✓ Exercise
- ✓ Call a friend or someone you trust
- ✓ Plan something fun
- ✓ Keep away from things you may use to harm yourself

3. Talk to someone

- ❖ Share your thoughts with a trusted friend or family member
- ❖ Share your concerns with your therapist to externalise your feelings and to find ways of reducing your thoughts and urges
- ❖ Read our 'What to do in a Crisis' document, which contains the telephone numbers for crisis support lines and the location of local safe havens. This can be downloaded from the Client Portal through our website or you can find the document attached to emails sent from our admin team

- ❖ Make an emergency appointment with your GP to discuss your symptoms and concerns
- ❖ If you are concerned about yours or someone else's immediate safety, call 999 or get to A&E where there are specialist mental health teams that can support you

Further questions and advice to consider:
Have you experienced anything similar before? If so, in what ways did you respond that was helpful? Is there anything you learned from that experience that you could apply now?

Are there any small steps you could take immediately that could be helpful? What are the smallest, simplest, easiest, steps you could take? In the next few minutes, hours, days?

As best you can, be **compassionate** to yourself. For example, consider if someone you care about was going through this experience. If you wanted to be kind and caring towards them, in what ways would you want to help them? What might you say or do? Then try treating yourself the same way.

4. Make a Safety Plan:

Use the next pages to think about ways you can reduce your distress and increase your resources to cope. Put the plan in a safe, easy to access place ready to use if you need it!

My Traffic Light Safety Plan

The traffic light safety plan helps you to recognise your triggers and warning signs and identify how your symptoms may escalate if you start to feel worse.

You can plan how you will manage your wellbeing and keep yourself safe when suicidal or self-harm thoughts or urges first enter your mind **(green)**, when they become hard to manage **(amber)** and when they feel unmanageable **(red)**. It is helpful to complete this plan when you are feeling well, so it is there for you when you may be struggling.

Green:
Triggers (What might bring this about? Think about specific situations.)

Symptoms (What symptoms will I notice? What will go through my mind? How might I feel physically and emotionally? What might I do/how might I behave as a result?)

Risk management plan (How will I keep myself safe? How can I take my mind off the thoughts?)

Amber:
Triggers (What might make things worse? Think about specific situations.)

Symptoms (What symptoms will I notice? What will go through my mind? How might I feel physically and emotionally? What might I do/how might I behave as a result?)

Risk management plan (How will I keep myself safe? What can I do to reduce the distress I'm experiencing? Who can I go to for support?)

Red:
Triggers (What might escalate this further? Think about specific situations.)

Symptoms (What symptoms will I notice? What will go through my mind? How might I feel physically and emotionally? What might I do/how might I behave as a result?)

Risk management plan (How will I keep myself safe? Who can I call in a crisis? Where is my safe place? What are my self-soothing techniques?)

My Safety Plan

My Triggers:

What are my thoughts? What do I usually think?	What do I feel? How do I usually feel?	What do I usually do? Is this helpful / unhelpful? What are the consequences?

What can I do to decrease the distress and build on my resources to cope?

Ways to reduce the distress:
What can I ask myself?

What can I tell myself?

What do I need to avoid?

Building resources to cope:
My self-soothing techniques:

My distraction techniques:

Who can I speak to? Where can I go for support?

Limiting the Damage of Self Harm

We encourage you to use the information in this booklet to consider safety plans and alternatives to self-harm. However, if you are going to self-harm, or already have, please consider the following information to ensure you do so as safely as possible:

Things to consider	When to seek medical attention
• Ensure anything you cut with is clean • Avoid visible, major blood vessels, tendons and nerves (such as the insides of the wrists, or the tops of the legs) • You are less likely to cause serious, long-term damage if you cut slowly, and do not cut deeply • Be aware of basic first-aid, consider keeping a first-aid kit handy (include things like bandages, plasters, dressings, antiseptic sprays/wipes) • Run burns under cold water for 10 minutes. Do not apply any creams, oils, grease, butter, ointments, adhesive dressings or cotton wool. Cling film can be used to loosely cover the burn and prevent infection, and never interfere with the burn or break any blisters – this will delay the healing and could lead to infection • Be aware of signs of infection such as redness in the area (particularly if it spreads/forms a red streak), swelling/warmth in the area, pain to tenderness at or around the site of the wound, fever, delayed wound healing, pus forming around or oozing from the wound, swollen lymph nodes in the neck, armpits or groin	• If the blood is pumping (apply pressure and call 999) • If the bleeding does not stop after 10 minutes of applying pressure • If you feel the cut is deep and may require stitches • If you think nerves or tendons may have been affected • If something is stuck in the wound • If the cut shows signs of infection • For any chemical burns • If you have overdosed on substances or medication, of have ingested toxic or poisonous substances • If you have any of the following symptoms of shock: a fast weak pulse; feeling faint, dizzy, weak or nauseous; rapid, shallow breathing In an emergency call 999 or go directly to A+E. If the situation is less serious, you could visit your GP or NHS walk in centre. To identify how serious your condition is, contact 111 **If you're ever in ANY doubt as to how serious the injury is, always seek medical advice.**

Reducing and Concealing Scars

Do try to keep the wound clean - Infected wounds are more likely to cause scarring.

Try using skin closure plasters and adhesive strips can help keep some wounds closed, which can help prevent further scarring.

Try to avoid picking at scabs - this interferes with natural healing and is likely to worsen scars.

Scars are more likely to form on joint areas such as the knees and elbows, so try avoid harming yourself in these areas.

The Changing Faces Organisation offers a skin camouflage service, free of charge. They have trained volunteers can teach individuals how to self-apply specialist cover creams. You will need a referral from your GP to access this support. Camouflage creams are available on prescription and last between six months and two years, depending on the area to be camouflaged and the frequency of use. For more information, call 0300 012 0275 or visit www.changingfaces.org.uk/.

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