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|  **Podcast 3 Transcript: The Definition Challenge**  |
| Intro | *This audio bulletin features views and insights from a range of contributors - which are not necessarily representing the views of Samaritans or those who’ve supported Samaritans’ work.**Please be aware this bulletin includes discussion of self-harm and suicide and that some of this content may be triggering. You can contact Samaritans for free, 24/7, by calling 116 123 or emailing**jo@samaritans.org* |
|  Sam Harrison | However, they view their coping strategy, or what it is that they're using to manage difficult emotions, that's their own definition of what self-harm is to them.  |
| Claire Dean (Narrator) | Welcome back to the third episode in our series on Self-Harm. Yesterday we looked at the potential benefits a new strategy could bring. Today we’re considering the starting point – how do you actually define self-harm? And why is it important? Here’s Samaritans Scotland’s Executive Director, Rachel Cackett. |
| Claire Dean (Narrator)  | Rory O’Connor is Professor of Health Psychology and Director of the Suicidal Behaviour Research Lab at the University of Glasgow. On the working group updating the NICE guidelines, he believes it’s absolutely crucial to be clear what we mean by self-harm.  |
| Prof. Rory O’Connor | Self-harm means different things to different people. And I always adopt the NICE guideline definition of self-harm, which is this broader definition of self-harm, which is "any form of self-injurious behaviour irrespective of apparent motive". And the reason I think that's an important definition is because it's... it's all-encompassing cos it recognises that self-harm is rarely driven by a single motive, or a single factor. And also, we know that people's explanations for why they self-harm often change across an episode or across time. But even if you go for this broad-based definition of self-harm which is accepting that there are different motives that underpin self-harm, I would always also try to ask about whether somebody is suicidal as well as engaging in self harm without suicidal intent. Because a lot of people who engage in what they describe as non-suicidal self-injury will also at the same time be acutely suicidal. And so, in terms of the treatment response... the treatment response will want to be helping that person manage their self-harm but also manage their suicidal thoughts. And so my concern is that if we go for this dividing self-harm into non-suicidal self-injury versus suicide attempts that we may miss the complexity and it may not be the best response of a young person or adult across the lifespan needs.  |
| Claire Dean (Narrator) | Mental health charity Penumbra provides a range of recovery-focused, community-based services and has dedicated self-harm teams across Scotland. Support Manager for the Thrive team, Sam Harrison also favours a broad definition. |
| Sam Harrison | So self-harm as far as Penumbra defines it, having an official definition is quite a difficult thing to have. I know that there are official definitions as far as what self-harm is concerned, but it tends to be for somebody who comes to seek support what they view their self-harm to be. So, we will have quite an open referral for people. So, it can be people who are using poisoning, people who are cutting, people who maybe do have eating disorder, people who maybe will use alcohol or substance misuse. So, it's quite broad. |

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| Claire Dean (Narrator) | Rachel Cackett agrees with many of the advantages of a broad definition, but also highlights why other people may favour a narrow definition. |
| Rachel Cackett | Well, if you have a limited definition of what you mean then it allows you to have quite a precise scope for things like research. And it means that when you set services up you can be quite clear about the criteria of whether or not somebody has access to that service. And, you know, there are ways in which it can allow you to manage the volume of what might come forward, of who might come forward to a particular service.  |
| Claire Dean (Narrator) | On the flip side, a narrow definition could exclude people from vital services. Here’s Sam Harrison and Professor Rory O’Connor. |
| Sam Harrison | I think if you had it really, really narrow, people could tend to fall through the cracks, they wouldn't necessarily be able to access the support. Regardless of what the method is behind somebody's self-harm, if they're using it to manage difficult emotions, if they're using it in order to have some form of control, it's the motivation, behind the act really, is what it is for that person. I think if we limit it to very, very strict definition of what self-harm is, you're going to miss so many people who are looking for support. |
| Rory O’Connor | If you go for the narrow definition of non-suicidal self-injury, you could miss out on the fact that somebody could also be acutely suicidal and that could be missed. But also, the fact is that it depends which episode of self-harm that the individual was talking about. Cos, without a doubt, lots of people who engage in self-harm, who have different episodes of self-harm...some of those episodes may be what they describe as a suicide attempt and others may be a non-suicidal self-injury episode. And so, for many they're mixed. So that's why I think it's important that we go for this broader-based definition.  |

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| Claire Dean (Narrator) | The way self-harm is defined also has an impact on the gathering of further data to better understand the issue. |
| Rachel Cackett | Well gathering data on self-harm is really key partly because we don't have enough of it. The likelihood is we're missing a lot of people who are self-harming. You know when Samaritans did its research, we gave ourselves a very clear definition of self-harm which meant that we could go very clearly to ask a group of people who fitted that definition, to answer our questions. And that allowed us to gather really valuable data. But if your definition is very broad it then becomes very difficult because the net is almost so wide.  |
| Rory O’Connor | Yeah, in Scotland we collect hospital treated self-harm data and that's important because we know the number of people who are presenting to clinical services. But that is only the tip of the iceberg. And I think my concern is that we don't really know about the scale of self-harm in the community. Now, most of the research evidence to date which has been collected in terms of self-harm in the community tends to focus on adolescent self-harm. And I understand that because that's when self-harm begins and there is a huge peak in self harm in that adolescent age population. But what I would like to see is routine data collected which gives us in-depth insights into the prevalence of self-harm across the population in Scotland. So, I would really, really urge government moving forward to consider ways, new ways in which we can collect these data routinely over time, but we need to understand the voices, the motives, the reasons, people's stories at the heart of understanding and the heart of developing services and responses which are tailored and are the best chance of success.  |

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| Claire Dean (Narrator) | Defining self-harm for a national strategy then is clearly a dilemma. But who should be defining it? |
| Sam Harrison | I think allowing a person to define what it is for themselves, so that if somebody is asking for support, that they're able to access it, and they are able to define what self-harm is for themselves. So however they view their coping strategy, or what it is that they're using to manage difficult emotions, that's their own definition of what self-harm is to them.  |
| Rory O’Connor | What's important in a sort of person-centred way, what's important in a compassionate way, is that we recognise what the self-harm means to that individual. So that's what drives the responses, that everybody’s reasons for self-harm are unique even though there are common factors and features and if...if we go for this broad definition, we can encompass that but we can get them the help and support they need.  |
| Rachel Cackett | And one of the contributions that we had to the engagement that we did after publishing the report is a question, you know, is self-harm not... is a definition of self-harm not owned by the people who see themselves as self-harming? And there is something really important in that discussion that we need to have. Who owns the definition of self-harm? Is it the policy makers, the service commissioners, the people who consider their behaviour to be harming to themselves?  |
| End Thanks | *Samaritans Scotland would like to thank the Scottish Government for supporting our work on self-harm.* |