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The Experiences of Social Care Workers in Managing Incidents of Self Injury with Young People in Care

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The experiences of social
care workers managing
incidents of self injury with
young people in care

IASCW/IASCE CONFERENCE

25. February 2009

Reasons for undertaking study

- Experiences of working with young people in Residential Care
- Professional challenges
- Liaising with colleagues in the field

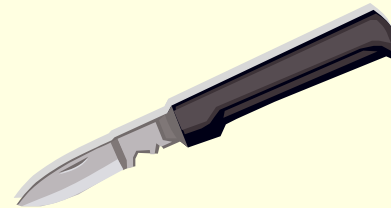
Terminology

- Sensitive nature of topic
- Lack of understanding of underlying motivation
- Definitions of self-harm, self-harm, risk taking behaviour
- Confusion with para-suicidal behaviour

- Self-injury differentiated from risk taking behaviour in this study

Definition of self injury

- *‘a compulsion or impulse to inflict wounds on one’s body, motivated by a need to cope with unbearable psychological distress or regain a sense of emotional balance. This act is usually carried out, without suicidal, sexual or decorative intent’ (Sutton et al, 2005:2)*



Objectives

- To explore the incidents of self injurious behaviour being displayed by young people living in residential centres in Dublin within the twelve months prior to the research data collection being undertaken.
- Explore effects of incidents on other young people.
- To gather a broad profile:
 - Age
 - Gender
 - Types of self-injurious behaviour

Objectives

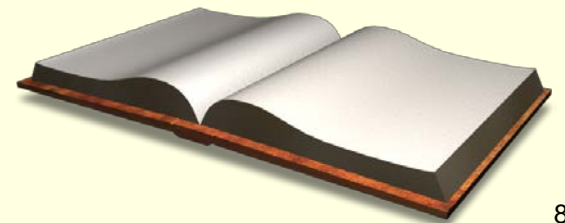
- Main objective – challenges for workers
 - Management of incidents
 - Understanding of the behaviour
 - Attitudes/feelings towards the young person during incident
 - Personal effects of incidents
 - Professional effects of incidents

Objectives

- To investigate the supports and training provided to participants in the management of incidents of self injury.

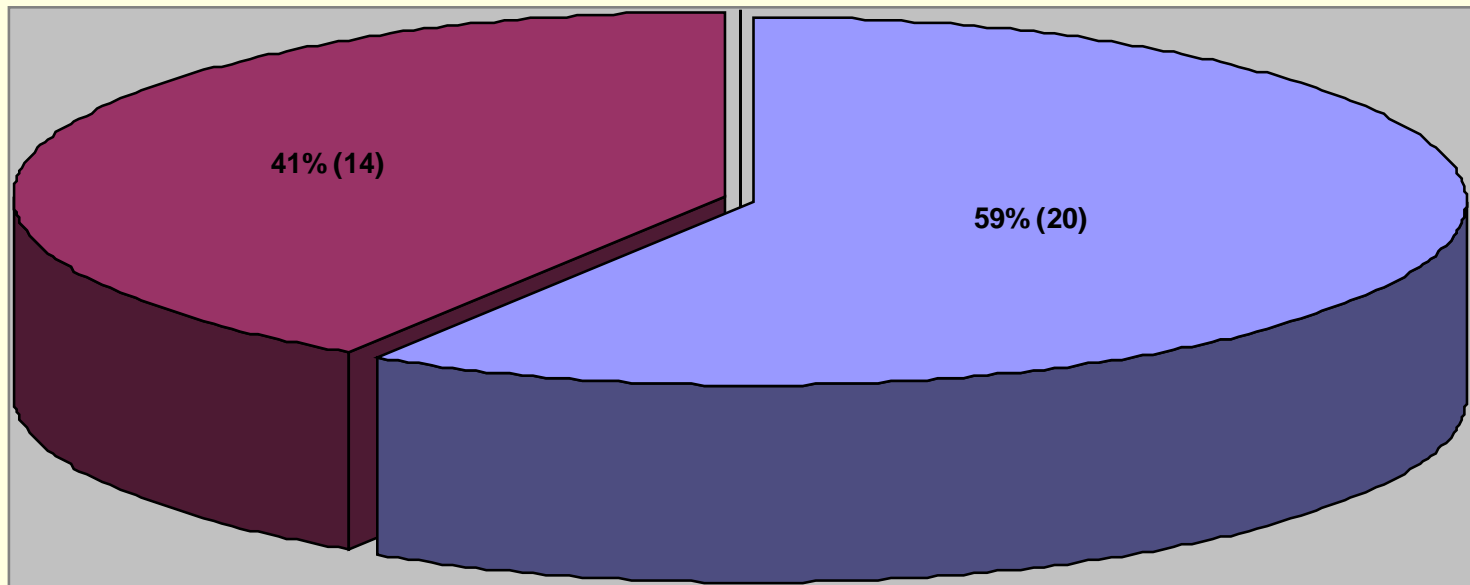
Methodology

- Phone survey of mainstream residential centres in Dublin (contact made with 34 centres).
- Units who had incident of self injury in the 12 months prior to data collection in February 2008 were sent a questionnaire.
- From questionnaires returned semi structured interviews were held with 10 care workers from a selection of units.



Number of Residential Centres Experiencing Incidents of Self Injury in 12 Months prior to Data Collection

Self injury

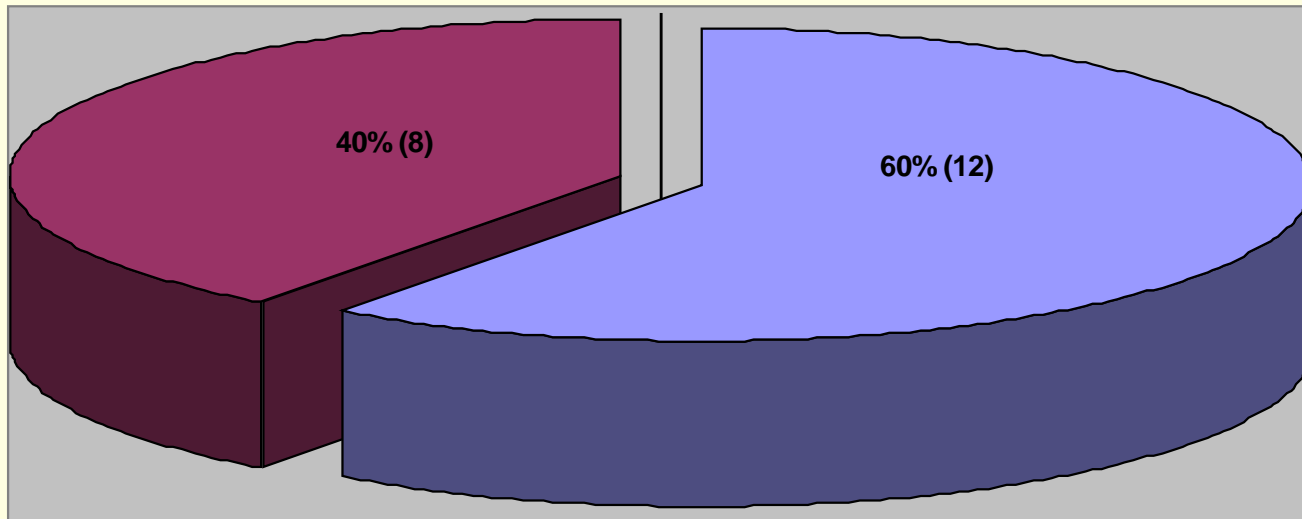


■ Centres with Incidents of self injury

■ Centres with no Incidents of self injury

Gender Profile of Young People

■ Self Injury



Age Profile of young people

<u>Males</u> <u>Age Profile</u>	<u>Number</u> <u>Incidents</u>	<u>Females</u> <u>Age Profile</u>	<u>Number</u> <u>Incidents</u>
5-10 years	1	5-10 years	0
11-14 years	3	11-14 years	3
15-18 years	7	15-18 years	5
18+	1	18+	0
Total	12		8

Findings of Study



<u>Type of self injury</u>	<u>Male</u>	<u>Female</u>
Self Cutting	8	6
Overdosing on medication	-	1
Lying On Road in front of traffic	1	-
Attempted Asphyxiation	1	-
Pulling out Pubic Hair	1	-
Punching Wall till Bleeding	1	-
Head Butting wall till Bleeding	-	1
Total	12	8



Experiences of Social Care Workers

Themes:

a/ Impact of Incidents on Workers

b/Feelings of Workers Towards young people during incidents

c/Challenges in Managing incidents

d/Effects of incidents on other young people in the centre

e/Support provided to workers post incident

f/Training needs of workers



a/ Impact of Incidents on Workers

- All workers said incident either personally or professionally affected them
 - Level of experience did not necessarily nullify effects on workers personally
- ‘ I had nightmares about the incident and how it could have gone wrong. The night before I’d go to work would get nervous and be thinking about the shift the next day’*

(Lisa, 15 years experience)

a/Impact of Incidents on Workers

- However some workers felt experience did help them deal with situation
- Most workers did take issues home and offloaded to partners or family
- One worker was vegetarian and had fear of blood. She began to buy red meat at butchers and handle. This helped her get used to blood so as not to react so shocked during incidents of self injury in work



b/Feelings of workers towards young people during incidents

- All workers expressed empathy towards young people
- Differentiation between feelings of handling difficult situation and feelings for young person
- Feelings towards young person were influenced by behaviours of young person and views of worker for reasons behind young person's behaviour. Less empathy if seen as attention seeking or pro active behaviour

b/Feelings of workers towards young people during incidents

- Length of time worker knew young person also influenced feelings
- Some workers felt frustrated at recognising young person's needs but not being able to meet them in care system e.g need for consistency and stability

c/Challenges for workers in managing the incidents

- The 10 workers identified a range of issues as challenging in managing these issues
 - Lack of knowledge of the young person
 - Lack of knowledge of self injury and self injurious behaviour

'it's hard trying to understand what is going on in young person's little mind. What would make you do that, pull out eyebrows, pubic hair and hair' (Mary)

c/Challenges for workers in managing the incidents

- Fear of saying or doing the wrong thing
- Expectations of colleagues and other professionals
- Expectations of managers and agency policy
- Fighting natural instincts in incidents to keep young person safe
- Attempting to appear calm in the situation
- Meeting needs of other young people in the centre

d/Effects of Incidents on other Young People in the centre

- Easier to manage incident if higher staff ratio and space in the centre to separate young people away from incident
- In some centres easy to distract young people away with more attractive activities
- Two of the workers of the ten identify the incident leading to copycat behaviour
- Other responses from young people varied from support for the young person to disapproval depending on severity of self injury

d/Effects of Incidents on other Young People in the centre

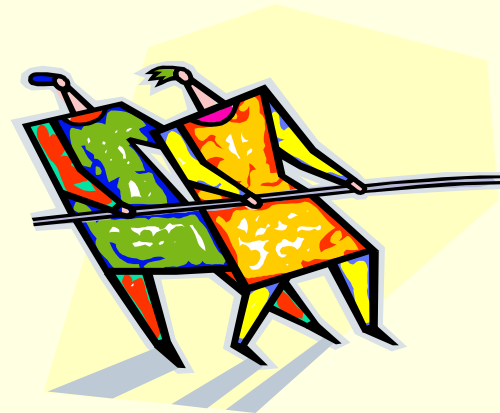
- For example young people in one centre scorned a young person who had cut her wrist for wiping the blood in a staff member's face
- One worker described affect on an 11 year child of older resident (17) self injuring as on the morning after incident there was blood on bathroom walls and door staff had not been able to clean it up

E/Supports provided to workers post incident

- Most participants identified positive support from managers. Importance of manager being in the next morning to support staff on duty
- Two workers felt management support post incident was unhelpful as the style of management focused on dissecting the incident and what the person did wrong. Focus on sticking to the policy in the future
- Many workers identified the support from colleagues on the floor as important

E/Supports provided to workers post incident

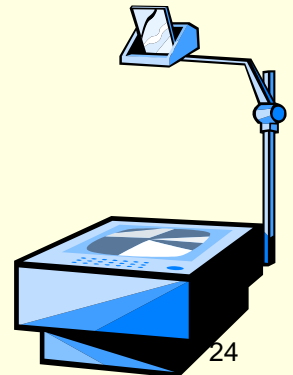
- Support from colleagues varied with some being very helpful while others (usually more experienced staff) tended to imply the worker was being over dramatic of incident



f/Training needs of workers

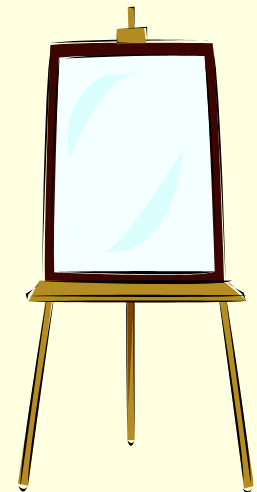
- Of 10 workers only 2 has specialised training on the issue of self injury. These workers felt it was very valuable in demystifying the issue and giving workers confidence in managing incidents

'The training was useful and helped you understand why kids self injure to release feelings inside' (Anita)



f/Training needs of workers

- Other workers felt elements of TCI training useful in managing incidents of self injury
- However all called for specific training on manage incidents particularly in relation to
 - why young people self injure
 - identifying triggers to behaviour (recognition not one blueprint)



f/Training needs of workers

- supporting the young person post incident
- possible alternatives to self injurious behaviour
- Recognition by some workers that residential care work has become more specialised and need for CPDs to continue to update workers skills and practice

Implications for Practice

- Effects of incidents personally on the worker and need for debriefing
- Identifying needs of young people behind the 'attention seeking behaviour'
- Attempting to demystify the issue of self injury in centres and help workers build their confidence by using skills and experience
- Agency policy versus the need of the young person



Implications for Practice

- Influence of copycat behaviour?
- Effects of behaviour on other young people?
- Policy led style of management not supportive post incident
- Team support/or lack of important to workers.
The importance of mixed range of experience on teams
- Inconsistency from supports outside the centre e.g response of A&E departments

Recommendations

- Identified policy guideline on self-injurious behaviour to be read in conjunction with ICMP.
- Policy distinguished from any policies on managing challenging behaviour.
- Policies enabling workers to use their knowledge and judgement of the young person in their care, to best manage the incident.



Recommendations



- A policy could be included in each residential centre's policies and procedures, outlining the supports made available to workers following incidents of self injury or other critical events.
- All relevant professionals working with young people in residential care should continue to recognise the importance of including young people in decisions regarding their lives and wherever possible strive to promote the participation of young people in their own care.

Recommendations

- In residential homes, where continuous episodes of self injury by a young person compromise the welfare of other young people living in the centre, respite care might be made available for either the young person self injuring or the other residents to ensure the needs of all young people in the centre are being met



Recommendations

- Residential managers might receive further training in relation to the supervision, debriefing and support of staff following critical incidents in their service. This training should include upskilling managers in recognising signs of post traumatic stress and supporting staff through this process.



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