

## Medical profession needs special training to handle self-harm, says international review

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Healthcare professionals are still not receiving the appropriate training and support they need to help people who self-harm and this can result in negative attitudes and inadequate levels of care.

Those are the key findings of a research review carried out by mental health specialists from the University of Nottingham, UK, and published in the October issue of the *Journal of Psychiatric and Mental Health Nursing*.

Staff nurse Jo McHale and lecturer Anne Felton studied 19 papers from the UK, Australia, Sweden and Ireland, dating from 1998 to 2009 and covering the views of 1,300 nurses, other healthcare professionals and service users. These included all aspects of self-harm, from patients who cut themselves to those that try to commit suicide.

"Research has historically shown that people who have self-harmed often have <u>negative experiences</u> because of the attitudes of the healthcare professionals employed to help them" says Jo McHale. "Our study showed that, on the whole little has changed. But there were a number of encouraging studies that highlighted how better education and clinical supervision can improve attitudes, especially when it is supported by government guidance."

McHale and Felton found that the lack of professional education on selfharm for healthcare staff was the main cause of <u>negative attitudes</u>. Where special education programmes did exist, they fostered more



positive attitudes and improved quality of care, because staff had a better understanding of why patients self-harm.

The researchers also discovered that lack of support left nurses feeling that they were failing in their duty of care towards patients who selfharmed and that fear of litigation affected their confidence.

"The gap between what health professionals saw as their role and what they were expected to do in practice also influenced negative attitudes" says Jo McHale. "For example, some felt it was wrong to remove client's property and that leaving them in nightwear to stop them self-harming contravened their rights. The people who self-harmed also had more challenging needs than medical patients on wards and were subject to different rules.

"Negative attitudes were also linked to the health professionals' perceptions of the client's ability to control their self harm. Staff were more negative if they felt that the factors leading to the self-harm were within the client's control.

"Service users who presented frequently at hospitals were also seen to challenge healthcare staff, affecting their professional ability and confidence to cope with such situations.

"On the plus side, attitudes were mainly positive when staff were knowledgeable about self harm and training and experience clearly did make a difference."

Specific findings from the 19 papers included:

## Lack of training



- Only nine per cent of the 53 nurses and 17 doctors who took part in a UK survey had received self-harm training.
- A survey of 43 Australian emergency department nurses found that only 21 per cent had received self-harm education and 88 per cent had heard other staff make negative statements about patients who had self-harmed.
- A UK study of 89 nurses and healthcare professionals working in an emergency department showed that staff felt self-harm training was inadequate and that beliefs about the causes of self-harm affected care provision.

## **Benefits of training**

- An Australian study reported that 29 emergency department nurses who had undergone special self-harm training listed new communication skills, positive effects and lessons for the future among the benefits.
- Fifty-two nurses and 15 junior medics from a UK emergency department gained a greater understanding of self-harm from an education programme and the initiative also resulted in better clinical recording on the patients' notes.
- Sixty-nine healthcare staff who took part in a UK study showed a sustained reduction in negativity following special self-harm education.

"The consensus in the papers we reviewed is that education and training are vital when it comes to caring for people who have self-harmed and that <u>health professionals</u> face similar issues across the world" says Jo



McHale.

**More information:** Self-harm: what's the problem? A literature review of the factors facing attitudes towards self-harm. McHale J and Felton A. Journal of Psychiatric and Mental Health Nursing. 17 pp732-740. (October 2010). DOI:10.1111/j.1365-2850.2010.01600.x

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