## **Annex A Illustrative Draft Outcomes**

(we will work with partners to refine by Spring 2024)

Actions	Short-Term Outcomes (Initial 18 months)	Medium-term outcomes ( 3 years)	Vision
Priority 1: Continue to expand and deepen knowledge and compassionate understanding of self- harm and tackle stigma and discrimination.	Increased availability of bespoke learning resources, which deepens understanding and tackles stigma. These resources are co-designed to meet the needs of people at higher risk of self-harm. These resources are taken up by people with a role in supporting people affected by self- harm, across a range of settings and services.	People with a role in supporting individuals affected by self-harm across a range of settings and services, are more confident in providing effective and compassionate support (including to people at higher risk of self-harm). People will also know where to go for further help, including for themselves.	<ul> <li>Our vision is for people who have self- harmed or are thinking of self- harm, to receive compassionate, recovery- focused support, without fear of stigma or discrimination.</li> </ul>
Priority 2: Continue to build person-centred support and services across Scotland to meet the needs of people affected by self-harm.	People who self-harm have greater understanding of self-harm and know where support exists.	More people who self-harm, or who are thinking of self- harm, reach out for support across a range of services (including people at higher risk of self-harm). More people affected by self-harm receive effective and compassionate responses, and as a result develop safer strategies (including people at higher risk of self-harm). The stigma and discrimination experienced by people who self-harm reduces.	
Priority 3: Review, improve and share data and evidence to drive improvements in support and service responses for people who have self-harmed or are at risk of doing so.	Self-harm considerations are increasingly embedded across policy and approaches to service delivery.	A greater range of services (clinical and non-clinical) offer and deliver effective and compassionate support for people who self-harm. This will be supported by lived experience insights, improved data and practice insights.	
		Data gaps are identified, considered, prioritised and addressed.	→