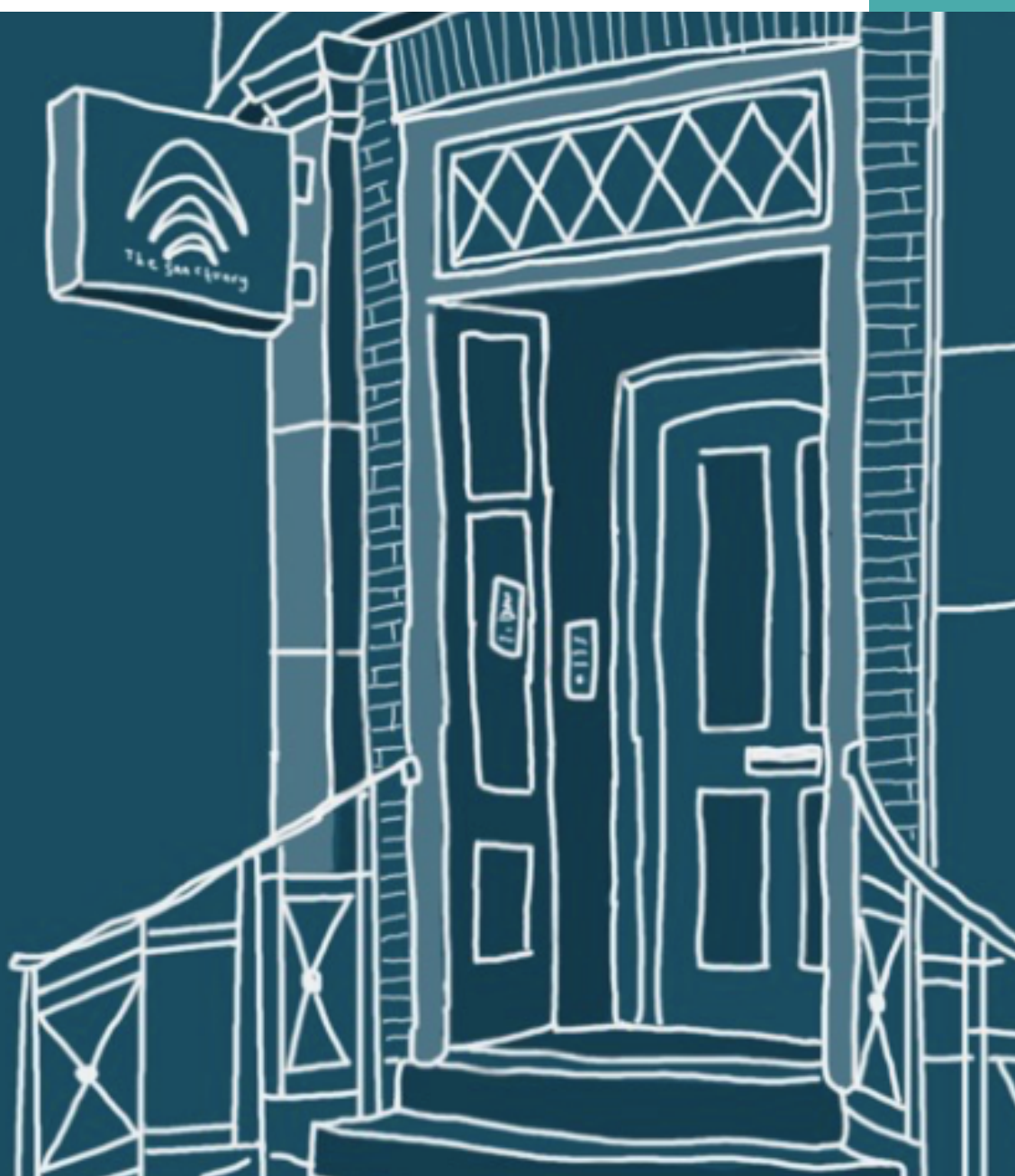


Exploring the helpful and unhelpful aspects of online peer support for self harm.





Abstract

Rational and Aims: Self-harm and suicide are both world-wide health concerns however there are constraints and barriers associated with accessing support from primary and secondary healthcare services. With the internet now globally prominent and easily accessible, online forums are increasingly being used as an alternative platform of support, however research highlighting the benefit of this is highly equivocal. The current study aims to explore this and determine the benefit or harm associated with internet use in order to inform recommendations for practice.

Method: 352 individuals with lived experience of self-harm completed a semi-structured online survey which examined their perspectives regarding the helpful and unhelpful aspects of internet use for self-harm.

Results: Both positive and negative responses to internet help seeking were endorsed by participants however there was a notable unhelpful endorsement for online peer support (particularly unmoderated) and 2 important themes emerged: 'Time frame' and 'Competitiveness.'

Conclusion: Online peer support seems to offer some early and brief benefits however with time these beneficial aspects appear to reduce becoming habituating with time; Caution to be exercised in the employment of peer group environments.

Introduction

Self-harm is a world-wide health concern and even before the global pandemic and subsequent lockdown we were witnessing a rising tide of self-harmful behaviour. Despite such global concerns, self-harm is a complex phenomenon and still not well understood. Findings from Townsend et al (2016) however have shed some light regarding the apparent pattern of deterioration experienced by those who self-harm over time whereby initially self-harm may act as a brief relief from negative thoughts and emotions but as time progresses this is replaced by the emergence of feelings of hopelessness and suicidal intent. Such findings are supported as self-harm is known to be the strongest risk factor for subsequent suicide and predicts the transition from suicidal thoughts to suicide attempts (Townsend, 2019). Although both self-harm and suicide are multidimensional in nature (Mars et al, 2019), embracing this complexity enables us to consider the wide range of opportunities where support can take place.

There are constraints and barriers associated with both self-harm and suicide prevention and according to Morgen et al (2017), less than 1/4 of children and adolescents who self-harm are believed to access support from primary and secondary healthcare services, instead turning to less traditional sources of support. There are a myriad of reasons resulting in this help-seeking reluctance however findings from qualitative studies suggests that 'avoiding stigma and treatment fears' (Fortune et al, 2008) are prominent barriers. Parents have been noted as a significant and ongoing support for those who self-harm (Wadman et al, 2018) however many parents find it difficult to understand why their child is self-harming and feel ill-equipped to effectively support them. Similarly, friends also offer a source of support and there is some indication that support from peers can help to delay the act of self-harm or the avoidance of it entirely (Wadman et al, 2018). However, as with parents many feel inadequate when dealing with such issues and in many cases, this results in unresolved problems. With the internet and social network sites (SNSs) now globally prominent for educational, recreational and social purposes access to both moderated and unmoderated discussion groups and content is now readily available and another source of support used by those in crisis.

Such websites and online forums dedicated to self-harm and suicide have been heavily criticized with some claiming that they 'encourage self-harmful and suicidal behaviour and may lead to contagion among users' (Becker & Schmidt, 2004). In contrast other research has suggested that websites and forums are in fact valuable resources with the potential for users to access positive experiences (Mehlum, 2000) as it provides a platform for them to offer each other sympathy, encouragement, and validation (Miller & Green, 1998). The current research aims to explore the benefit or harm associated with internet use regarding self-harm in order to inform recommendations for practice.

Method

Participants

A sample of 352 individuals (236 females [67%], 116 males [33%]) were recruited for this study. All participants had lived experience of repeated self-harm with their most recent episode being within 6 months prior to completing the study. 246 individuals were 18-35 years old (70% of sample) and 72 were 13-18 (20%).

Materials

Semi-structured online survey

Participants were presented with a semi-structured online survey designed by the researcher to examine the potential relationships between internet use and self-harm behaviours and/or perceptions of the extent to which this relationship was helpful.

Procedure

Participants were firstly asked to provide information regarding their internet use. Specifically, they were asked to differentiate between:

- (1) 'General Information'
- (2) 'Accessing service information'
- (3) 'Wound care'
- (4) 'Support'

The participants were then asked to further differentiate their use within the 'Support' category to establish what methods of accessing support they engaged in:

- (1) Online discussion or appointment with a professional (singular)
- (2) Online discussion or appointment with a professional (multiple)
- (3) Online discussion about signposting/service access
- (4) Online discussion/peer support groups (moderated)
- (5) Online discussion/peer support groups (unmoderated)

** Note, moderated refers only to the peer moderation of peer groups, with group guidelines being upheld and a process for managing this.

Participants then ranked a list of pre-selected helpful and unhelpful aspects of internet use for their self-harm, based on the importance and described reasoning for their choices.

Data collection & analysis

Data was collected using an online survey and analysed using qualitative and quantitative conceptual content analysis to identify the existence and frequency of helpful and unhelpful indications of internet use.

Results & Discussion

Many participants endorsed both positive and negative responses to internet help seeking. The most commonly endorsed benefits of internet use discussed by participants were:

- Reduced isolation
- Promotion of recovery
- Sense of belonging
- Reduced self-harm
- Reduced distress
- Reduced thoughts of self-harm

The most commonly endorsed detrimental impacts were:

- Increased distress
- Increased self-harm
- Increased thoughts of self-harm
- Introduction to new methods of self-harm

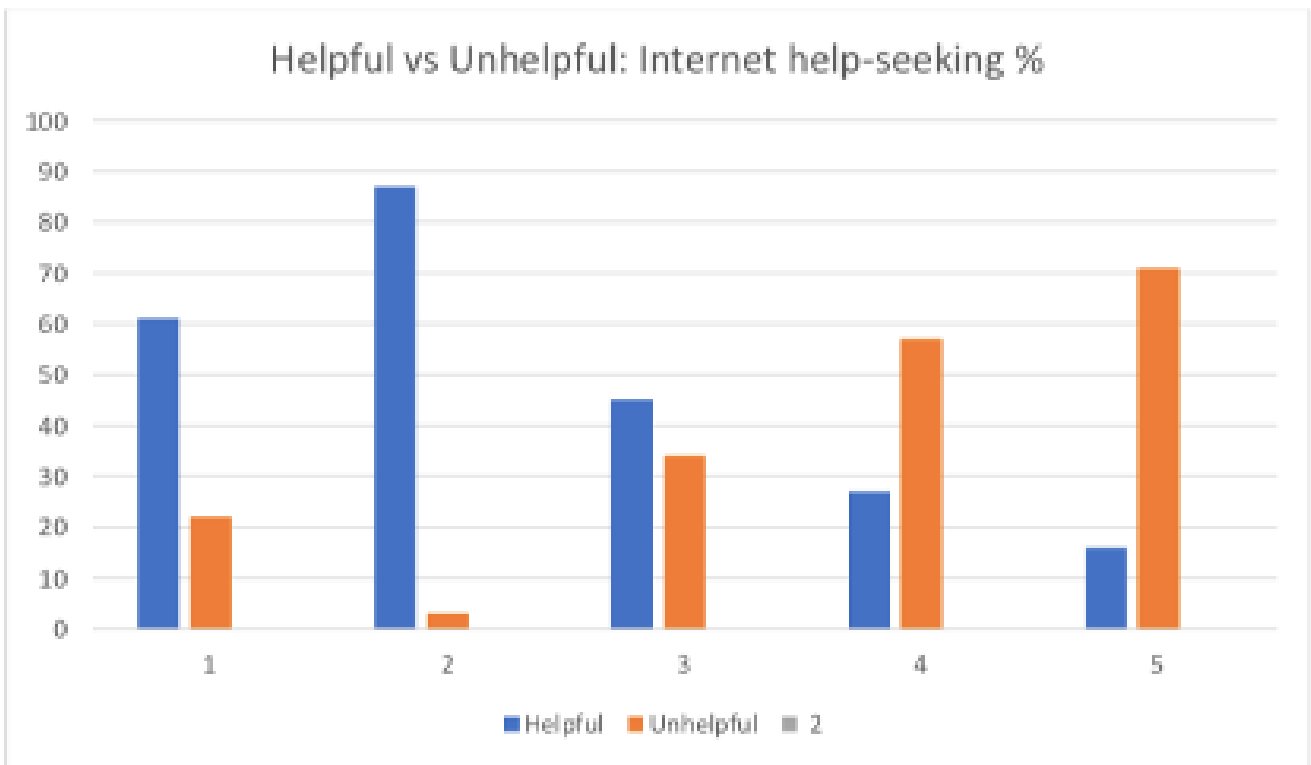


Figure 1. Demonstrates helpful vs unhelpful internet help-seeking with regards to (1) Online discussion or appointment with a professional (singular), (2) Online discussion or appointment with a professional (multiple), (3) Online discussion about signposting/service access, (4) Online discussion/peer support groups (moderated), (5) Online discussion/peer support groups (unmoderated).

In figure 1 we can see those methods of help-seeking associated with the endorsement of helpful vs unhelpful endorsement, by %. Notable is the elevated unhelpful endorsement for online peer support, particularly unmoderated.

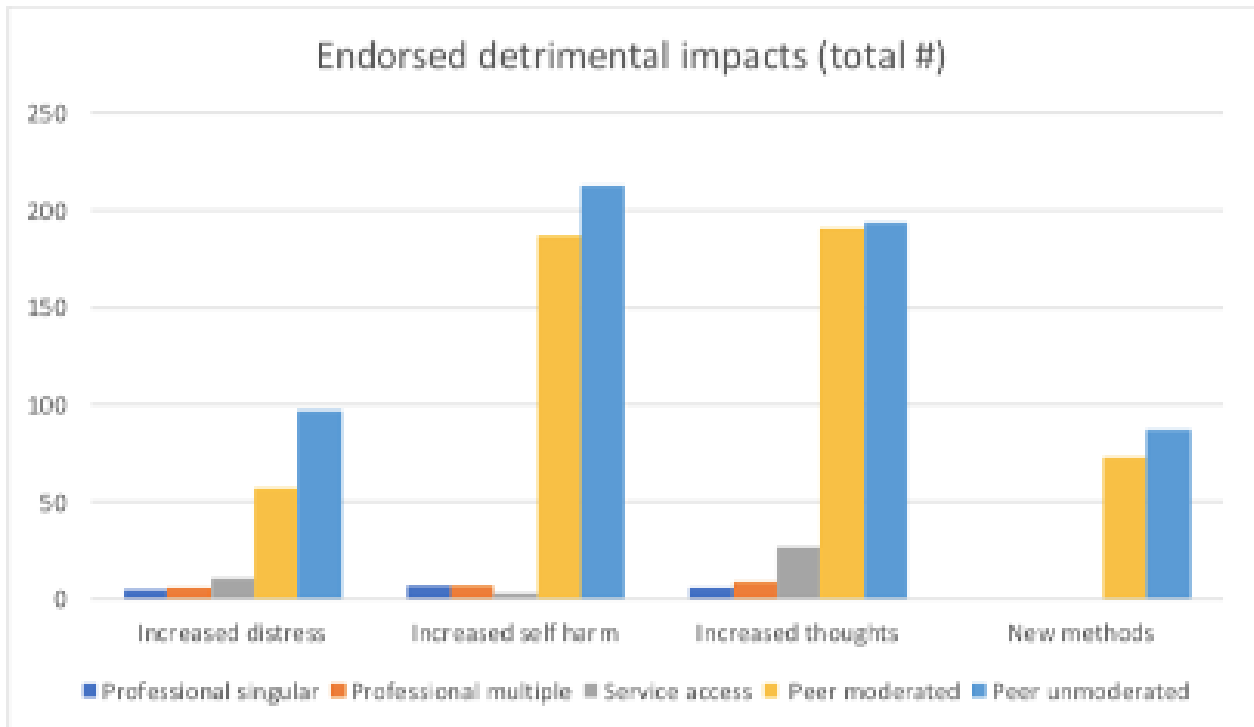


Figure 2. Demonstrates the total endorsed detrimental impact across each help-seeking internet source.

In figure 1 we can see those methods of help-seeking associated with the endorsement of helpful vs unhelpful endorsement, by %. Notable is the elevated unhelpful endorsement for online peer support, particularly unmoderated.

In Figure 2, by total number we can see the manner in which people found each internet help seeking method unhelpful. Whilst increased distress was endorsed by around 14%, the increased thoughts and rate of self-harm was significant with around 200 of respondents highlighting this as a detrimental impact of accessing moderated and unmoderated peer support.

In further exploration with those respondents that endorsed both helpful and unhelpful experience associated with their internet use, there were important themes that emerged.

(1) Time frame

This study did not ask individuals to rate helpfulness vs unhelpfulness at different stages in their self-harming trajectory. The interviews undertaken suggest that this is an imperative aspect for consideration. What was described almost unanimously amongst this cohort of individuals was that at first people found comfort and comradery in online groups.

“For the first time I felt as though there were other people like me. They coped in the same way as me. They got it” [R7] and “it was such a comfort to not feel as though I wasn’t mad anymore and that other people cut themselves to cope.” [R51]

This theme was common, respondents were relieved to find others that did the same as them, they describe consistently feeling connected by virtue of a shared behaviour. This connectedness initially reduced a sense of isolation.

“It became a place I would go regularly. Instead of talking to my friends, I went to my new friends because they understood me.” [R87]

“I generally find relationships really hard. I am shy. Talking online felt safe. I was anonymous. No one was judging me.” [R311]

When people were asked to compare their initial or early experiences with their latter experiences of online peer support there was a stark contrast. Respondents described much of their unhelpful experiences being associated with ‘later on’ in their time frame of using peer support services online. What seems to be helpful at first, seems to be prohibitive in recovery terms, further down the line; instead habituating individuals to their self-harm in order to enact support.

“I didn’t want to lose my sense of community. I belonged there because I self-harmed. If I stopped self-harming, there was no longer a reason to go there anymore and I didn’t want to lose it.” [R22]

“Over the time I used it [peer forum] people came and went. Those that went, I never heard from again. Those that stayed were the only constants in my life. The topic was shared, self-harm.” [R265]

“I am not sure I have thought of this much before now. It helped me so much to find ‘my people’ at first. It really did. But did it help me recover?... no... no I am confident it did the opposite actually. That makes me feel sad but, but... erm, there was no opportunity or hope there, no change. We talked about how hard things were and not really about what getting better would look like”. [R3]

“I wish someone had said, like, go on... go get help, get better, come and tell us about it. We will be here but we want it to be different for you. They didn’t!” [R39]

And finally, this comment from one of our younger respondents captures the dichotomy of the situation.

“I felt like that toy that you pull and pull and pull and it just keeps stretching. There was my real world. My mum and dad were worried about me. My friends at school didn’t ‘get it’ and I didn’t know what else to do. I wanted to be understood. I thought it was helping me, I did. But now when I look back I think I got stuck there.” [R173]

In summary, it appears that many people find their way to peer support and discussion forums by accident as they search online in an effort to (1) find understanding information and connection in relation to their experiences (2) make sense of themselves in relation to their self-harm and (3) to talk to people in a way that is anonymous or doesn’t cause harm to those whom they love. For the most part, individuals describe seeking support, understanding and companionship which initially yields a reward and highlights the helpful benefits of online environments. However, responders stated that these benefits weaken over time and due to their reliance upon the relationships forged as being a member of the online discussion forums, it becomes difficult to consider reducing self-harm (i.e., recovery) because to reduce self-harm it would also have a direct impact on the loss of status and relationships within the peer group.

(2) Competitiveness

One theme that emerged was that of the competitive nature of self-harm and how individuals can 'learn' from the exposure to others that self-harm, in both their method and severity of harming behaviours. One respondent describes this as:

"I self-harm because I hate myself. Whenever I saw or spoke to those whose self-harm was worse than mine it made me feel that I wasn't doing it [harming] bad enough. So I did it worse. More." [R43]

"Looking back it is obvious but I didn't see it at the time. I just didn't. I was really triggered by other people's descriptions of self-harm, it made me want to do it more. And then I would. Whether it was worse. More frequent. Different. With hindsight things got much worse much quicker when I was using the online groups. Some were worse than others." [R211]

Conclusion

To surmise, whilst online peer support group use seems to offer some early and brief catharsis, comfort, support, sense of belongingness and self-acceptance, with time these beneficial aspects appear to reduce. In the long term, and without facilitated intervention to the contrary, what appears to happen is that membership of the group becomes habituating, meaning that all members must maintain self-harm to retain group membership as well as the support, status and relationships formed in the online peer support environment. As such this habituation becomes counterproductive and leads to a stasis in the recovery process of the individuals that self-harm. At this point the transition from helpful to unhelpful group use was highlighted by the participants and caution should be exercised in peer exposed group support environments with this in mind.

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