Submission: Intentional Self-Harm and Suicidal Behaviour in Children

The following submission relates to two key areas outlined in the call for submissions. *The barriers which prevent children and young people from seeking help* and *the role, management and utilisation of digital technologies and media in preventing and responding to intentional self-harm and suicidal behaviour among children and young people*.

The findings reported below relate to a research project conducted by Dr. M Frost and Dr. L Casey at Griffith University in 2011. The study was conducted to examine the relationship between self-harm, help-seeking, and the Internet in a sample of 1,463 young people in Australia (647 reporting a history of self-harm). Young people were aged 14 to 25, with an average age of 18 years. The aim of the research was to sample a large group of young people with a history of self-harm thoughts and self-harm behaviour and to facilitate comparisons with young people who had no history of self-harm. As such, recruiting was strategic and ensuring a representative sample in order to assess prevalence rates was not prioritised. In spite of this, the final sample was relatively representative of Australian young people on many demographic variables. Young men were underrepresented in the sample.

Barriers which Prevent Children and Young People from Seeking Help

Young people with a history of self-harm report a greater need for help compared to other young people, but fewer of them engage in help-seeking (Evans, Hawton, & Rodham, 2005). Much of the early conversation in relation to low help seeking related to practical barriers, which may prevent young people from accessing help. However, attitudinal barriers are increasingly understood as a primary concern which may need to be addressed before practical barriers become relevant.

One significant barrier to seeking help for suicidal ideation and self-harm is help-negation. Help-negation refers to a decrease in actual help-seeking or intentions to seek help as psychological distress rises. The effect was initially identified in individuals experiencing suicidal crisis (Rudd, Joiner, & Rajab, 1995). A similar effect was reported by Carlton and Deane (2000) in non-clinical samples of young people: as suicidal ideation increased, intentions to seek help for suicidal thoughts decreased (Carlton & Deane, 2000). Subsequent studies showed that higher levels of suicidal ideation relate to lower levels of help-seeking from a variety of sources, including professionals and family and friends (Deane, Wilson, & Ciarrochi, 2001; Yakunina, Rogers, Waehler, & Werth, 2010).

The results of our study indicated that intentions to seek help for self-harm decreased with increases in the extent of the behaviour. This relationship held when general distress level and suicidal ideation were controlled statistically, suggesting a specific effect for self-harm itself over and above the effect of distress, for which a help-negation effect has been reported previously. Therefore, the more significant the extent of a young person's self-harm, the lower their intentions to seek help for self-harm. This effect occurred primarily for help-seeking from family and friends, who typically act as gatekeepers to care for young people under the age of 18. As such, this is a key barrier to help-seeking for young people in this age range.

Young people need to be able to identify self-harm as a serious problem and be willing to seek support before they become acutely distressed, in order to reduce the impact of help-negation (Wilson, Bushnell, & Caputi, 2011). As such, awareness of the risk of help-negation for young people with a history of self-harm may provide a number of potential avenues for intervention in order to facilitate help-seeking from informal sources such as family and friends. For example:

- Education about the help-negation process may assist young people to seek help early by increasing their awareness that a desire to withdraw from others may signal a need to seek help (Wilson, Bushnell, et al., 2011).
- Assisting young people to increase their emotional competency and feel more confident in expressing their problems and concerns to others may also assist them to seek appropriate and timely help (Cigularov, et al., 2008).
- Improving the ability of informal supports to respond to self-harm may increase help-seeking (Cigularov, Chen, Thurber, & Stallones, 2008).
- Increased education regarding help-negation for individuals who support young people may highlight the need to be more proactive in providing help (Sawyer et al., 2012; Wilson, Rickwood, Bushnell, Caputi, & Thomas, 2011).

As well as improving help-seeking from informal sources, the provision of additional options for seeking help through professional and technology based support may increase help-seeking for self-harm. As these sources are less affected by help-negation, their prominence in the mix of services provided for young people who self-injure may be raised to increase effectiveness. As such, the second part of this submission relates to the potential role of the internet as a gateway to care or an avenue through which to provide services.

The Role of Digital Technologies in Preventing and Responding to Intentional Self-Harm

Around one third of young people in our sample who reported a history of self-harm had used the Internet to seek help in relation to their self-harm. Over half of online help-seekers perceived that they had more support available to them online than offline.

Young people at highest risk of suicide and help-negation due to high rates of psychological distress, suicidal ideation and repetitive self-harm (Hawton & James, 2005; Owens, Horrocks, & House, 2002; Zahl & Hawton, 2004) were most likely to seek help online. Young people with a history of online help-seeking for self-harm were significantly less likely to have disclosed their self-harm to anyone offline, compared to those who had not sought help online.

Can Online Services Mitigate Barriers to Help-Seeking for Self-Harm

Our research found that there was no help-negation effect for help-seeking via the Internet. That is, there was no reduction in intentions to seek help via the Internet as the degree of self-harm increased.

However, barriers to help seeking were not completely mitigated when online help-seeking was considered. Barriers endorsed in relation to online help-seeking related to both perceived attitudes of others (e.g., *"I am afraid of what people might think if I seek help"*) and personal attitudes (e.g., *"I think help-seeking is a sign of weakness"*).

It seems plausible that the ability to seek help online may assist in reducing barriers associated with stigma related to concerns about the opinions or judgement of others as online help can be private and anonymous. However, it is unclear whether some young people are impacted by the opinions of individuals with whom they interact online in a similar way to offline communication. In addition, young people's own negative perceptions of and a desire to avoid association with mental illness (known as 'self' (Corrigan, 2004) or 'personal' (Griffiths & Christensen, 2007) stigma) may continue to create barriers to seeking help online (Fleming, Dixon, & Merry, 2012).

Universal online interventions that target a range of issues commonly faced by young people (e.g., relationship concerns, moving out of home) may assist in overcoming barriers associated with self-stigma, while providing a gateway to more in-depth services for those who need them (Collin et al., 2011). However, this may not be the most effective strategy. Young people may be more accurate in identifying a need for help when problems are identified as severe and specific (Farrer, Leach, Griffiths, Christensen, & Jorm, 2008). Universal interventions may not identify issues

specifically and, as such, may not target young people who need help most, such as young people who self-harm.

Therefore, overall, while it is likely that help-negation can be reduced by providing assistance via the Internet, continued research is required to better understand other barriers to online help-seeking in young people and how to mitigate these.

Can the Internet act as a Proximal Step to Offline Help-Seeking

The internet may act as a proximal step to help-seeking or a gateway to care for young people who self-harm. In our sample, over 60% of young people reported either a desire for information online that would help them to immediately talk to family, friends or a professional about their self-harm *or* a desire to access support online to begin with, but to eventually speak to someone offline about their self-harm. It is important to note, however, that one third of young people wished to receive all the help that they required through the internet.

What do Young People who Self-Harm want from Online Services for Self-Harm

Young people in our sample were able to identify what would be most important to them in an online service for self-harm, if they were to seek online help in the future. Participants were asked to identify preferred sources of potential online support for self-harm, using a list of possible online sources. The most popular suggestion was for *"an online service with direct links to professionals in real time via instant messaging"*.

An open question was also used to explore preferences for online help-seeking using thematic analysis. The key themes which emerged were information; guidance; reduced isolation; a safe online culture; facilitation of online and offline help-seeking; easy access to online services; and privacy.

The most frequently endorsed theme related to guidance. Young people reported a need for advice on how to help themselves, suggestions for reducing self-harm or strategies to avoid self-harm. They also indicated a need for harm minimisation in the form of advice about first aid and less damaging self-harm. A desire for personalised support from both professionals and peers emerged. The concept of 'someone there' was mentioned frequently, as was the desire to have contact with a 'real person'. As such, it appears that many young people who self-harm may be willing to engage with a professional online if support is provided in an appropriate way. A combination of professional and well moderated, safe peer support or stories may best facilitate engagement from young people who self-harm.

Summary

Intentional self-harm in children and young people is a complex problem. The above submission summarises a small part of our research in order to highlight two key issues in relation to this topic. Firstly, help-negation as a risk factor for low help-seeking in young people at high risk and secondly, the potential role of the Internet as a source of support less susceptible to help-negation effects. Help-negation is a concerning phenomenon in that the more severely distressed or suicidal a young person in feeling, the less likely they are to seek help. Similarly, as the degree of self-harm increases, intentions to seek help reduce. Establishing avenues for early intervention is essential; in order to assist young people to seek support in relation to self-injury before they become acutely distressed and therefore less able to seek help.

Compared to their peers, young people who self-harm may lack opportunities for informal help-seeking due to low levels of social support and invalidating or prejudicial family environments (Martin, Bureau, Cloutier, & Lafontaine, 2011; Warm, Murray, & Fox, 2002). Seeking help from family and friends in relation to self-harm also appears to be particularly impacted by help-negation. Professional help is difficult for children and young people to access without the support of their parents. As such, the internet may provide a useful gateway to care. Online services may connect young people with professional help online or act as a proximal step to offline help-seeking by providing young people with information, skills, support, intervention or referrals which assist them to access help offline. Young people in our sample had clear ideas regarding what they need from online services. As such, we highly endorse consultation with children and young people regarding the development of online and offline support services.

<div align="right">Dr. M Frost</div>

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