

NIHR Greater Manchester PSTRC

Plain English Publication Summary

Publication: [Exploring the acceptability of a brief online theory-based intervention to prevent and reduce self-harm: a theoretically-framed qualitative study](#)

Publication details (Vancouver format)

Keyworth, C., Quinlivan, L., Leather, J. Z., & Armitage, C. J. (2022). Exploring the acceptability of a brief online theory-based intervention to prevent and reduce self-harm: a theoretically-framed qualitative study. *BJPsych Open*. (2022) 0, e0, 1–8. doi: 10.1192/bjo.2022.568

What are the most important findings/conclusions in this paper? Why are they important?

The main findings are:

- People were generally positive about using the volitional help sheet to create 'if-then plans' (where a series of actions are agreed, so that 'if' X occurs, 'then' Y will be done) to try and reduce the urge to self-harm
- People thought the volitional help sheet could be used by healthcare professionals to complement existing healthcare

It is hoped that this intervention provides a useful tool for individuals to construct their own personalised 'if-then plans', and also as part of longer-term support for preventing self-harm as delivered by healthcare professionals.

What did you do?

We interviewed sixteen people with a history of self-harm, and who had taken part in a previous study of ours, which involved making 'if-then plans' to try to reduce the urge to self-harm. This was done using a tool called the volitional help sheet. We asked people to describe their experiences of using the volitional help sheet. We developed our interview questions and analysed the interview responses using a framework called the "Theoretical Framework of Acceptability" which allowed us to understand peoples' experiences of the intervention.

Why did you conduct this research?

We wanted to follow up our previous work by exploring in detail peoples' experiences of the volitional help sheet. By using something called the "Theoretical Framework of Acceptability" we could understand how a person thinks and feels about an intervention, and the effort required to engage with it (in our case, making 'if-then plans') to support people in trying to reduce the urge to self-harm. In exploring people's thoughts, experiences and feelings, we were able to identify specific ways that the intervention could be used – both personally, and by healthcare professionals.

What was known before your paper was published?

There is evidence that the volitional help sheet for self-harm is effective, however there was limited work understanding acceptability of the volitional help sheet (i.e. whether people approve of the intervention). Studies have previously explored acceptability of interventions for self-harm generally. However, few studies have explored acceptability of interventions in detail, and no studies have applied the "Theoretical Framework of Acceptability" to understanding acceptability of interventions for self-harm.

What is next? What is the potential impact of the work in this paper? What will change as a result of this paper (or the study it describes)?

The volitional help sheet is a brief intervention that could be incorporated into medical consultations and safety plans. Important considerations for use of the intervention include making sure the purpose of the intervention is clearly communicated to patients, and making sure the responses to the help sheet questions protect patients, rather than triggering them. Future research could explore the extent to which these brief interventions could be delivered as part of GP care.

Does this paper link in to a particular study / project? If so, please summarise the study and explain how this paper has improved understanding, or will move the study forward.

We previously developed an online tool to prevent and reduce self-harm among people who had previously self-harmed. The present research explores in more detail how a person thinks and feels about the tool, and specifically how it can be used by individuals, and by healthcare professionals, alongside existing healthcare.