Non-suicidal self-injury (NSSI) is a term that encompasses a variety of behaviors in which an individual intentionally inflicts harm to his or her body for reasons that are not socially sanctioned and are without suicidal intent (International Society for the Study of Self-Injury, 2007). As more researchers look to understand NSSI, questions about the behavior become more common on mental health-related surveys. Researchers often raise concerns about the relative risks and liabilities of using self-report measures to collect sensitive data.

Several studies have examined respondents’ levels of distress as a result of participating in a variety of sensitive survey research. One study assessing reactions to a telephone survey regarding violence and victimization found that the majority of respondents did not feel upset by survey questions, regardless of their victimization history. Of the small percentage of victimized participants who did report feeling upset, the majority believed that the survey contained questions that were beneficial to be asked (Black, Kresnow, Simon, Arias, & Shelley, 2006). Similar results were found in a study exploring adolescents’ reactions to survey items assessing drug use, suicidal behavior, and physical and sexual abuse: only a small percentage of adolescents reported feeling distressed by the survey items (4.4%), with those who have experienced sensitive events more likely to feel upset (Langhinrichsen-Rohling, Azar, O’Díbrien, Bowers, & Kilbert, 2005).

Little direct research, however, has focused on exploring distress related to answering survey items on NSSI and whether reports of feeling upset vary significantly by self-injury status. In addition, not much is known about the outcomes, both positive and negative, of reflecting upon difficult topics such as self-injury.

The ethics of self-report surveys assessing non-suicidal self-injury and other sensitive topics

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Introduction

Non-suicidal self-injury (NSSI) is a term that encompasses a variety of behaviors in which an individual intentionally inflicts harm to his or her body for reasons that are not socially sanctioned and are without suicidal intent (International Society for the Study of Self-Injury, 2007). As more researchers look to understand NSSI, questions about the behavior become more common on mental health-related surveys. Researchers often raise concerns about the relative risks and liabilities of using self-report measures to collect sensitive data.

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Little direct research, however, has focused on exploring distress related to answering survey items on NSSI and whether reports of feeling upset vary significantly by self-injury status. In addition, not much is known about the outcomes, both positive and negative, of reflecting upon difficult topics such as self-injury.

The focus of this research project is to determine whether self-report survey items assessing sensitive topics, such as self-injury, suicidality, traumatic life events and eating disorders, cause distress for respondents as whether or not questions about these topics cause individuals to think more deeply about their lives. We are equally interested in assessing what kinds of positive feelings respondents might have as a result of participating. In particular, we seek to understand how sensitive survey items affect individuals with a history of self-injury.

Methods

Sample

Our quantitative data were taken from the two closing questions of an eight-college survey of student mental health and well-being. The survey was designed to assess various mental health issues in a college population, but was focused on self-injury in particular. The progression of questions in the survey differed for NSSI respondents versus those not reporting on NSSI on general measures taken on the survey. In addition, the content of those questions varied by their self-injury status. Furthermore, those who indicated a history of NSSI felt questions more deeply about their life, while those who did not felt less about it. The survey includes 23 questions on NSSI and other sensitive topics, including questions on drug use, violent behavior, and sexual abuse.

Quantitative Findings

A and nine overarching codes for Question B. Any discrepancies in coding between the two research assistants were examined and a consensus was reached for each response based on what was deemed most suitable. Some responses received multiple thematic codes (up to three).

Survey prompted about half (47.9%) of respondents to think more deeply about their lives.

Almost three-quarters of respondents (72.7%) answered either “very untrue” or “somewhat untrue” when asked if they were upset by the survey.

Differences in respondents with a history of self-injury still reported that the survey did not make them particularly upset, with approximately 13% saying that it made them upset somewhat and only 6.9% of those with a recent history of NSSI “very upset”.

How did respondents react to the survey overall?

How did respondents react to the survey overall?

Quantitative Findings

- "Answering some of the questions on this survey caused me to think more deeply about my life”
- "Answering some of the questions on this survey caused me to feel upset”

Results

Survey prompted about half (47.9%) of respondents to think more deeply about their lives.

Almost three-quarters of respondents (72.7%) answered either “very untrue” or “somewhat untrue” when asked if they were upset by the survey.

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Qualitative Findings

“Survey caused me to feel upset”

“Survey caused me to think more deeply about my life”

Results

Survey prompted about half (47.9%) of respondents to think more deeply about their lives.

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Discussion

In general, few individuals reported experiencing distress as a result of participating in the survey. Of all respondents, 72.7% reported no negative effect of the survey and 47.9% reported that it caused them to think more deeply about their lives.

Responses did vary between groups, with those reporting a history of NSSI or suicidality more likely to report that while they found the survey upsetting, it also made them think more deeply about their lives. Those with a history of NSSI or suicidality were over twice as likely to endorse this response than those without such experience.

These findings suggest that while online surveys about NSSI may have the potential to cause stress in individuals with NSSI history, this stress could, in some instances, be beneficial and cause positive change. In their qualitative responses, respondents mentioned reflecting positively on their lives, thinking more deeply about their issues, raising concerns about themselves or others, and considering returning to therapy.

Research is still needed to understand the particularized and lasting effects of survey participation.

References
