

Self-criticism and self-injury: Testing a novel diary-based treatment approach

Submission date 05/03/2018	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 13/03/2018	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 27/06/2019	Condition category Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

The motivation to avoid pain and injury is a fundamental instinct. This makes nonsuicidal self-injury (NSSI) a very perplexing phenomenon. NSSI involves deliberate acts of self-harm without a specific wish to die. Increasingly common, NSSI is now a serious public health concern. What makes NSSI even more troubling, however, is its strong association with suicidal behavior. People who engage in NSSI are at high risk for later suicide. Despite numerous efforts there are few specific treatments for NSSI.

Through our previous work we have identified a novel treatment target - self-criticism. People who engage in NSSI report extremely high levels of self-criticism and self-hatred. Profoundly negative beliefs about the self are important because they remove a key barrier to NSSI and also motivate individuals to engage in self-injurious behaviors. Simply put, if you view yourself as bad, toxic, worthless or similar, you are likely to care little about your body. Harming it in an effort to feel better or to atone for being bad thus becomes a viable and potentially appealing option.

New approaches to the treatment of NSSI are very much needed. Our approach is based on our prior empirical work as well as our past experiences with people who engage in nonsuicidal self-injury. We seek to develop and test a new treatment that can be delivered directly to consumers via the internet and email. If this exploratory project is successful, our approach may help change the direction of current interventions for NSSI and lay the groundwork for highly focused prevention efforts.

Self-criticism is a major risk factor for engagement in NSSI. Self-criticism may be a promising treatment target, with some research showing success in reducing engagement in NSSI through increasing positive self-worth. Other research shows that people who engage in NSSI are less willing to endure painful experiences after their self-worth is increased.

The autobiographical self-enhancement training (ASET) intervention condition will examine a novel approach to targeting the mechanisms that drive NSSI behavior. The ASET treatment procedure was developed specifically for this study. It represents an adaptation of an approach we have created and used successfully with NSSI participants. The procedure seeks to undermine negative beliefs about the self by activating positive self-schemas. Participants will

receive training in this approach. They will then use it daily for a period of 28 days, describing something specific and positive about themselves each day in brief writing task.

An expressive writing (EW) intervention will be used as a comparison treatment condition. EW involves writing about one's emotions and in the context of describing stressful or upsetting experiences. Previous research shows that EW improves physical health and wellbeing. This study will be the first to examine expressive writing in the context of NSSI.

A journal writing (JNL) intervention will form the control condition. It will ensure that all study participants complete writing tasks. Participants in the JNL condition will write about daily events in their lives without any focus on emotional issues.

The online format of this study means that the interventions we are using can be made available to people regardless of where they live.

Who can participate?

People who used online forums related to suicide and psychopathology, were fluent in English, had daily internet access, and who had engaged in 2+ episodes of nonsuicidal self-injury in the past month were eligible to participate.

Benefits and risks of participating?

We did not expect significant risks to be associated with participating in this study. There was a potential risk that participants could find questions about self-harm to cause negative feelings or make them think about self-harm. Similarly, some people may have felt upset when responding to personal questions or when completing journal entries. However, we did not anticipate that these feelings would last for more than a few minutes. Moreover, if we learned that a participant was thinking about harming themselves, we provided them with a list of hotlines and resources to help keep them safe.

Regarding benefits, there was no guarantee of direct benefit to participants. However, participants may have benefited from extra monitoring and greater awareness of their thoughts and behaviors. There was also a chance that the activities may help them control self-harming behaviors, self-critical thoughts, or depression.

Where is the study run from?

The study was run entirely online, using Qualtrics. This means that participants were from both in and outside of the US, and they participated from their laptops or smartphones.

When is the study starting and for how long?

The study began on June 25th, 2016. The final participant completed the study on January 8th, 2017.

How long will the trial be recruiting participants?

Recruitment is now closed. The trial recruited participants for approximately 3 months.

Who is the main contact?

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Contact information

Type(s)

Scientific

Contact name

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Additional identifiers**Protocol serial number**

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Study information**Scientific Title**

Novel online daily diary interventions for non-suicidal self injury: A preliminary study

Study objectives

We predicted that, compared with the control intervention Daily Journaling (JNL), Autobiographical Self-Enhancement Training (ASET) would significantly reduce self-criticism, improve mood, and reduce the desire to self-injure and engage in Non-Suicidal Self Injury (NSSI). We also predicted that compared with JNL, Expressive Writing (EW) would provide general benefits and reduce feelings of depression.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Harvard University Institutional Review Board, 06/07/2016, IRB15-3940.

Study design

Randomized parallel trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Non-suicidal self-injury

Interventions

Participants were recruited from online forums related to self-injury and severe psychopathology (e.g. reddit.com/r/depression). Forum members who met the inclusion criteria and were interested in participating completed an online consent form and a ~45-min baseline

assessment. Participants were randomly assigned to one of three treatment groups (JNL, EW or ASET) using randomization software within Qualtrics. Each treatment was designed as a brief, daily diary treatment that could be completed from home or from a mobile device anywhere with internet access.

Participants assigned to ASET were asked to write for 5 min each day about something that happened that day that made them feel good about themselves as a person. Participants assigned to EW were asked to write for 5 min each day about something that bothered them or was on their mind that day. Participants in JNL were asked to write for 5 min each day about the events of the day in a general and factually descriptive way. For all groups, writing responses were monitored daily.

Participants were asked to complete daily writing assignments as well as four brief weekly follow-up assessments during the treatment month (i.e. 28 days). 4 weeks after the end of treatment, participants were contacted again (i.e. 1-month follow up/8 weeks after baseline to complete the first follow-up assessment. A final follow up assessment occurred 8 weeks later (i.e. 3-month follow-up/16 weeks after baseline).

Intervention Type

Behavioural

Primary outcome(s)

Primary outcomes were self-criticism, depression, self-cutting episodes, and overall NSSI episodes (including self-cutting). Self-criticism (using the Self-Rating Scale - self-report questionnaire) and depression (using the Beck Depression Inventory-II) were assessed at baseline, week 1, week 2, week 3, and week 4 of treatment, 4 weeks post-treatment and 12 weeks post-treatment.

Key secondary outcome(s)

Secondary outcomes were desire to discontinue NSSI, likelihood of future NSSI, days of active suicide ideation, and days of suicide plans. A self-report questionnaire version of the Self-Injurious Thoughts and Behaviors Interview was used to obtain measures of NSSI, suicide ideation, suicide plans, and suicidal behaviors. Each of these thoughts and behaviors were measured at baseline, week 1, week 2, week 3, and week 4 of treatment. These were also measured over two follow-up time points, at 8 and 12 weeks post treatment.

Completion date

20/11/2018

Eligibility

Key inclusion criteria

1. ≥ 2 NSSI episodes in previous month
2. Aged 18 years or over
3. Daily internet access
4. Fluent in English

Participant type(s)

Other

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

144

Key exclusion criteria

Inclusion criteria not met

Date of first enrolment

25/06/2015

Date of final enrolment

06/01/2017

Locations**Countries of recruitment**

United Kingdom

Australia

Canada

Costa Rica

Germany

Hungary

Ireland

Japan

Netherlands

Portugal

Romania

Russian Federation

Sweden

United States of America

Study participating centre
Department of Psychology, Harvard University
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Sponsor information

Organisation

The Eric M. Mindich Research Fund for the Foundation of Human Behavior.

Funder(s)

Funder type

Not defined

Funder Name

The Eric M. Mindich Research Fund for the Foundation of Human Behavior

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	22/08/2018	27/06/2019	Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes