



The COVID-19 pandemic meant that, along with many other trials, we had to pause the feasibility study in March before we had recruited any participants. But, since then, we have had a fantastic response from the sites involved, who are very keen to get going again, and we are working on getting everything ready to start up again in Autumn.

We have been working closely with PPI groups and sites to see what will work both for patients and the sites in the 'new normal'. Our therapists are adapting and moving all their training online and we are working with sites to deliver the interventions through a combination of remote and face-to-face working, at patient preference. The clinical trials team have been working round the clock to make sure all changes are approved and participants can be confident their data is just as safe with our adapted ways of working.

So what have we been doing?

Work has not stopped even with the trial paused. Interviews with therapists and service managers have taken place, papers have been fine-tuned and the team have been cracking on with all the background work that makes the trial possible.

We have also set up a COVID-19 response group with a mix of third sector organisations

and PPI representatives, to see how people who self-harm have been coping in lockdown. This grouping has resulted in a small side project led by Kate and Cara from the FReSH START team. The study involves telephone interviews with people who self-harm, sharing their experiences and views of accessing support in lockdown. We hope to get a better understanding of how people have been affected during this period and what could be done to ensure better access to support, if a similar period of restricted movement were to occur.

Papers

We are pleased to report that we have published the first scientific paper linked to FReSH START. The paper's lead author is Dr Daniel Romeu who is a psychiatrist in training. The title of the paper is, 'On-line resources for people who self-harm and for those involved in their formal and informal care: observational study with content analysis', published in the International Journal of Environmental Research and Public Health.

Daniel carried out a systematic search of the help available online to people who self-harm, their families and health professionals. He focused on easy to access websites as opposed to chat rooms. Websites he looked at included those linked to official bodies such as the National Institute for Health and Care Excellence, charities and other non-statutory groups. He found only a very small number of websites gave practical helpful advice about how to manage self harm and what really

helps. The helpful sites were also difficult to find unless you knew what you were searching for. You can read the paper here:

<https://www.mdpi.com/1660-4601/17/10/3532>.

Key learning points

In the UK, there are many websites that include information about self-harm.

These sites include professional bodies, independent third sector organisations or web groups.

Very few sites provide practical advice and support to help people who are self-harming or provide help for their families.

We found three sites that offered help around how to manage self-harm and strategies to reduce its frequency.

We also found specific websites for: parents who have children who self-harm; for people with learning difficulties; and for people in the prison system who are self-harming.

We are currently working on two more papers which we are hoping to submit shortly. We will provide details of both studies when they are published.



PPI And FReSH START

One thing that has been further reinforced since lockdown is the importance of PPI groups in research. With the onset of lockdown we began to wonder what effect this was having on service users, as face-to-face services closed and the number of self-harm presentations at A&E dropped significantly. Marsha McAdam, one of our PPI representatives, pulled together a group of PPI and third sector members to create a COVID-19 response group. With this group, we began to gather information on what service users were reporting, both in terms of access to services and the effects lockdown was having on their mental health. The issues raised gave rise to and shaped the COVID-19 study mentioned earlier.

The group have been heavily involved in shaping materials for the study, looking at project materials and helping to develop a comprehensive participant safety plan. They have all helped to promote the study to their networks and we have had a great response so far, with 5 interviews complete already. Self-injury Support have also provided excellent training to our researchers on how to carry out empathic interviews remotely.

This grouping has also allowed us to make some important new connections with organisations supporting the health and wellbeing of young African and Caribbean people. This connection has helped to raise some interesting differences in the perception of self-harm and research amongst these communities, and how we may need to tailor our approach to different communities. We are working together with these partners now on adapting the advert for the COVID-19 study, in the hope of gaining a more representative picture of experiences of self-harm and access to services in lockdown. We also plan to develop some awareness raising materials together in the long-term, to help open up discussion around self-harm in these communities and increase engagement with self-harm research in the future.