

Internet Support Groups For Survivors of Suicide
by William Feigelman, Ph.D.

This short article summarizes a larger work completed by three coauthors: Dr. Bernard S. Gorman, Karyl Chastain Beal, M.Ed., and Dr. John R. Jordan and myself. We began this project trying to assess how suicide survivors use internet support groups, what they value in them and whether they find these groups helpful in their efforts to cope with suicide loss. Because we couldn't adequately represent all different relationships survivors have with their lost loved ones, we confined this study to parents losing children.

With personal computers and Internet access now gaining a foothold in most American homes, Internet support groups have become a new opportunity for helping people connect with others who share similar problems, unexpected life changes and /or other stigmatizing conditions. The sparse, but rapidly expanding literature on these groups, suggests their use in helping people deal with a variety of issues: breast cancer, diabetes care, mental illnesses, occupational stress, traumatic brain injuries, and a variety of other problems including surviving suicide. Support groups offer opportunities to share important medical and technical information and provide an outlet for the exchange of emotional support.

Psychcentral.com lists some nineteen different national and international web-based support groups for suicide survivors. For our study we chose one of the longest-running Internet support groups for parents losing a child, the Parents of Suicide. Karyl Chastain Beal started this group in 1998, after her daughter's suicide. Presently this group, widely known as 'POS,' has over 700 affiliates, predominately from the US, with others from English-speaking countries around the globe. POS also includes an affiliated group for other relatives and friends, known as 'FFOS,' Families and Friends of Suicide.

As we began our project, the few studies of Internet support groups suggested that survivors who live in remote rural areas would be the dominant constituency. The claim is based on an assumption that survivors in smaller cities and towns are situated in under-served areas—where fewer face-to-face support groups and professional bereavement or counseling services are available, leading them to seek help on the Internet. By contrast, survivors in the larger cities and suburbs will more readily find in-person bereavement supports, leading them to use these resources, before taking help over the Internet. We thought our study would confirm these suppositions.

At a secured website we invited POS members to take an online survey on their use and views of Internet support groups. In addition, POS members were invited to complete a more detailed bereavement survey that was conveyed to them through the mail. (The longer bereavement study is part of an on-going research being completed by the above mentioned authors, and included over 500 child loss survivors.) Two-hundred POS members completed the Internet survey, and, of that group, 104 completed the longer mailed survey and also reported being a current participant in an Internet group. These 104 persons were contrasted against 297 other parent survivors of a child's suicide, who reported no current Internet group involvement and also reported some previous face-to-face (peer) support group participation.

Taking a look at our findings, one of our most striking results showed survivors spending a great deal of time participating in the Internet group. Almost half reported spending six or more hours weekly in the online group. Even when we looked at respondents who were currently involved in face-to-face support groups or who saw professional bereavement counselors, they

too, spent a great deal of time in the Internet support group, with nearly half spending six more hours weekly participating in the Internet group. One of the clear gains the Internet support group offered over face-to-face groups was the opportunity it presented for more extensive support group participation. Even if survivors belonged to a face-to-face support group that met twice monthly and also saw a bereavement counselor on a weekly basis, they would have had a difficult time matching the high level of participation possible in the Internet group. We asked our respondents what appealed to them most about this group, and the single most widely endorsed feature was its 24/7 availability. Two-thirds endorsed this feature before any of five others that were mentioned.

When we contrasted these Internet support group affiliates with those affiliated with face-to-face groups, we found they possessed some distinct demographic characteristics. They included more women, younger survivors, those reporting less affiliations with the major conventional faiths, survivors who lived alone, were divorced or separated, and had lower incomes and less formal schooling than face-to-face affiliates.

Another striking finding showed more Internet affiliates reporting more stigmatizing responses from family and friends following the suicide losses of their children. Compared to their face-to-face counterparts, fifteen percent more of the Internet affiliates reported experiencing unhelpful responses from family members after their suicide loss, and twenty percent more found friends, coworkers and acquaintances acting unhelpfully afterwards. These patterns suggested that the Internet group represented an important refuge for these survivors, who found less ready comfort and support from their personal communities.

We found no confirmation of the assertion that more rural residents were Internet affiliates: about as many Internet affiliates came from big cities, suburbs and small towns as the face-to-face affiliates. And rural residents spent about as much time participating in the Internet group, as the people living in other types of communities.

More than half of the Internet affiliates also had experiences in face-to-face groups. Yet, when they were asked which groups were most beneficial to meeting their bereavement needs on 17 different criteria, in each instance, they rated the Internet group as best. Affiliates were also asked an open-ended question whether their Internet group affiliation helped or hindered their recoveries. Helpful remarks exceeded hindering ones by a two-to-one ratio. It was unmistakably clear these survivors found this support group type especially meaningful in meeting their bereavement needs. Overall, the evidence we collected suggested that this Internet support group provided an important refuge to survivors experiencing less comfort and support from their personal communities. We offer these surprising and intriguing conclusions tentatively. Because our sample was based upon a single Internet support group, we cannot assume these patterns will carry across all parent survivor affiliates, or among a broad-based group of all other survivors.