

Research Paper

Exploring the Experiences of an Online Peer Support Service: An Inward Approach

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ABSTRACT

You're Wonderful Project; is a student-run organization providing online peer support, working towards awareness and accessibility of mental health services. The present study aims at understanding the organizational model of the online peer support system through exploring the experiences of the team that works within the set-up. For this study, a qualitative design was used. An interview guide was developed consisting of open-ended questions to explore the experiences of the team. Semi-structured interviews were conducted to gather data, across two timelines, to assess the various aspects for two groups of Support team members: 8 interviews were collected from Peer Support team members during Phase 1, while 10 interviews were collected from members during Phase 2. These individuals had worked for a minimum of 6 months in the team and had undergone training through psychologists about online peer support, and were currently working in the team. The data obtained was coded and subsequently analysed. The results indicated that although this was seen as an effective approach, especially because it provided anonymity, comfort and was free of cost, help-seekers are still gauging access to this service, or any kind of online counselling service. This study also identifies shortcomings and suggests future implications.

Keywords: *Online Peer Support, Clinical Experiences, Online Mental Health Services, Mental Health Awareness*

You're Wonderful Project; is a student-run organization aimed towards mental health advocacy, working towards mental health awareness, and enhancing accessibility of young adults and children. YWP; provides peer support to support people who may be undergoing mental health disturbances such as depression, anxiety, and trauma.

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The goal of counseling is to ease the distress, anxiety, and other concerns faced by the client (Richard, 2009). Due to technological advancements, individuals can not only look for therapists suited to their needs online but can engage in the therapeutic process via the internet. According to the Online Therapy Directory (n.d), online therapy offers advantages over conventional therapy for several reasons. Firstly, online therapy offers greater flexibility of timing, and couples/group therapy can take place even if all members are not present in the same location. Moreover, one can seek help from a therapist located in any part of the world, based on cultural familiarity and specialization. Powell (1998) has also found that easier access and flexibility are the chief reported advantages of online therapy. The same study also found that increased anonymity on the part of the client reduced defensiveness on the part of the patient.

Moreover, online therapy reduces the impact of stigma. Cohen and Kerr (2007) additionally point out that those groups, such as the terminally ill or differently-abled who do not find it convenient to attend physical therapy sessions might find online therapy advantageous.

However, concerns about the effectiveness and process of online therapy have also been addressed over time. As Chester and Glass (2006) note, the American Psychological Association and the British Association of Counselling and Psychotherapy have both individually released statements about the ethical practices to be followed during online therapy. Yet additional concerns about online therapy are still prevalent.

Online Peer Support

There are several definitions of peer support according to research. Peer support is understood as the use of problem-solving skills and active listening, to support peers (Ehly & Vazquez, 1998).

It is also understood simultaneously as a corpus of techniques and as an approach to people and their difficulties and challenges. It is the fusion of these two aspects that makes peer support what it is. The online peer support filled in as a virtual gathering spot is to rehearse (social) skills for arrangement in the disconnected world. It additionally permits the individuals to gain from one another's information and encounters and investigate recently acquired bits of knowledge and adapting abilities. (Smit, D. et al 2021)

The fact that the peer supporter is a peer of the group who provides the contact between the two with a basis that no amount of explaining could ever do. This common life experience makes a relaxed, to the point exchange possible, further enhanced by the confidentiality of all that is being said and done during a session (Van Kan, 1996)

At the same time, the equality of all parties involved in the session is established. Though peer supporters and help seekers have distinct roles in the peer support setting, as humans and as individuals sharing a common life experience, they are equal and working alongside each other.

The present manifestation of organized peer support is successful largely as a result of the mental health consumer movement in the 1970s. This social movement empowered former mental health service users to mutually assist each other and advocate for themselves. From these modest origins, peer support rapidly discovered novel applications in the management of chronic diseases (e.g .diabetes, mental health, heart disease, cancer, HIV/AIDS, substance

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abuse), screening and prevention (cancer, HIV/AIDS, infectious diseases), and maternal and child health (Tang, 2013).

In recent years, the notion of peer support has spread to include low-income developing countries where professional help may be hard to access for a significant proportion of the population. The presence of effective peer support programs can assist in overcoming barriers of stigmatization and inaccessibility frequently prevalent in developing countries (WHO, 2011).

A study evaluating peer-led platforms to facilitate empathetic conversations online helped the individuals gain a better insight into their emotional side. (Sharma, A. et al 2021)

In conclusion, online or web peer support offers many advantages. When carried out ethically by trained peer supporters, the efficacy of online peer support is good when providing emotional support to the help seekers. The use of certain writing techniques can further help facilitate positive outcomes in online peer support, though additional research is needed in these areas.

Present Study

The model of the organization is a step-model approach whereby services are provided to schools, and peer support groups are available for college students, following a more specialized group of the Clinical online peer support team, also known as the 'Peer Support Team'. Finally, the cases that require more attention and regular treatment are recommended to professional psychologists and/or psychiatrists based on the need of the case. The 'Peer Support Team' specifically uses a simpler version of cognitive and behavioral techniques to enhance communication between patients and counselors. The training that the team undergoes includes a series of workshops provided by licensed Counselling and Clinical Psychologists that provide workshops on topics like 'Forming Rapport', 'Following up with Cases online', 'Identifying common Mental Health Disorders', 'How to provide Crisis Intervention Care Online', etc. The paper is specifically focusing on further understanding the effectiveness of this approach in the realm of using online counseling tools in today's day and age.

The western world has conducted a lot of research on online counseling, as well as furthering the understanding of online peer support services. However, we are yet to conduct better research in developing countries like India, on the same. This current study aims to contribute to the knowledge-base of understanding online peer support through and exploring the experiences of individuals working in the team across the two timelines.

METHODOLOGY

Objectives

The objectives of the present study were:

- To explore the effectiveness of an online peer services set-up from the experiences of the trained service providers in the team.
- To study the growth of the YWP peer support team, its services, and experiences of the team across the two timelines.

A qualitative approach was used for this study in the form of a semi-structured interview questionnaire to collect data using audio interviews which were collected from the members of the Peer Support Team working in the organization. Open-ended questions were used to

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gauge the experiences of those working as service providers, and further explore the access of help-seekers to online peer support services such as this one. The sample size consisted of 18 participants (17 females and 1 male) all of whom were between the ages of 18 and 25 and lived in Delhi/NCR. The participants had been working in the You're Wonderful Project's Peer Support Team for at least 6 months and had undergone a series of training workshops from a qualified Psychologist on topics such as Online Counselling, Online Peer Support, Building a Rapport with Clients Online, and Tracking Recovery, among others. The respondents mostly had a background in Psychology and Social Work.

All participants signed a written informed consent form. They were informed that they could withdraw at any time if they desired. Participants agreed to the recording of their interviews, which were then anonymized and transcribed. Once the interviews were collected, a codebook was created using the Grounded Theory approach. The interview transcripts were coded using the Codebook by 2 blind coders who achieved 80% > IRR. After this, the coded transcripts were analyzed using thematic analysis as given by Braun and Clark (2006) and a table was made.

RESULTS

Table 1 Emergent themes from thematic analysis

Verbatim	Sub-Themes/Codes	Global Themes
<p><i>"I should be able to help them [clients] to some extent so that their suffering is less than what it would have been initially when they reached out."</i></p> <p><i>"Most people reach out because they don't have anyone to talk to. So, a lot of cases are of loneliness and not having good friends. So, they just want someone to listen to them and I'm a good listener".</i></p> <p><i>"[Identifying] when to say that this [case] is a little beyond what we can do to help but these are the steps that you can take to get professional help".</i></p> <p><i>"[I] provide assistance basically to spread more awareness about mental issues because people mostly overlook them and then they think that physical health is more important. So taboo is something which was my main goal, to remove the stigma around mental health."</i></p>	<p><i>Helping clients with issues</i></p> <p><i>Helping clients feel heard</i></p> <p><i>Encouraging clients to seek regular therapy</i></p> <p><i>De-stigmatization</i></p>	<p>Role of the Peer Support Team</p>
<p><i>"Communication needs to be more efficient, saying the right things. Need to brush it up, saying the right things at the right time. Shouldn't trigger the person. One time I said something I now think I shouldn't have."</i></p> <p><i>"Understanding that what is the perfect question, the perfect time to ask it, and the perfect rapport that you should have with the client to actually pull that question off is also important and it comes with experience."</i></p>	<p><i>Knowing what to ask when</i></p> <p><i>Therapeutic Approach</i></p>	<p>Challenges of working in the Peer Support Team</p>

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Verbatim	Sub-Themes/Codes	Global Themes
<p><i>“People are not comfortable revealing their identity and sharing their issues”</i></p> <p><i>“The services provided by the Peer Support Team are free of cost”</i></p> <p><i>“People want someone to listen. And that’s okay. But there are times when they do need professional help. But they don’t want to go that far. They want to continue talking. We are not equipped to say ‘that go to a professional’. We have to be with them and hear them”</i></p>	<p>Anonymity</p> <p>Free of Cost</p> <p>Easy Access</p>	<p>Facilitators for online help seeking</p>
<p><i>“I followed up [with the client] and she said that everything was sorted... So it was a two-session thing”</i></p> <p><i>“Google sheet can be maintained for notes on each client (summary of the conversation). This could also be beneficial for times when the person assigned to a case is not available and someone else from the team has to reply - they would simply have to go through a summary of the case and not read the entire conversation.”</i></p> <p><i>“One is to look at the feedback that the person gives and also when the person does not give any feedback, that is also something that is looked at. Also sometimes, people ask the cases whether they are finding the entire procedure useful or not. So first would be asking for direct feedback”.</i></p> <p><i>“I think the training sessions are something I’m always up for because we get to learn a lot. It’s like a one-to-one thing we have to do with people. So, in the training part, I get to learn a lot and it is the learning part which I find really rewarding “</i></p>	<p>Follow up mechanisms</p> <p>Maintaining summary records</p> <p>Soliciting client feedback</p> <p>Training from Professionals</p>	<p>Suggestions for More Effective Services</p>
<p><i>“The clients can give personal feedback on how much change they have experienced from when they first sought help to now. Also, when you talk to cases, you can feel the change in the person through their change in responses which could be another indicator.”</i></p> <p><i>“Personally feel that it’s making me a better self, affecting me in a good way. I see a certain kind of improvement in myself”</i></p>	<p>Bringing a positive change in the client’s life</p> <p>Personal Growth</p>	<p>Rewards</p>

DISCUSSION

This study sought to understand the experiences of the members across the two timelines, of an online peer mental health service with the aid of qualitative open-ended interviewing. The data gathered was subsequently coded, and the themes generated will now be discussed.

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While some of the areas that emerged over the course of the interviews are common across individuals working in the area of mental health, other codes were more specific to the medium of the internet and the contextual setup of the Peer Support team and the organization in context.

As the collected data for both the batches across the timeline was analyzed, a significant change in the responsibilities was seen. Along with the efficacy and effectiveness of changes that were brought in with the first batch, many were implemented in the second batch. With all these significant changes, the importance of the Research team and its work in the organization is also explained. The codes and themes emerged from thematic analysis from table 1 are discussed below:

1. Role of the Peer Support Team

The first theme deals with the roles and responsibilities that individuals working in the Peer Support Team are perceived to have. A broad spectrum of duties and responsibilities were common across individuals who joined the Peer Support Team, even though they came to be a part of the Peer Support Team in different ways. The different sub-themes in this area are helping clients deal with issues, helping clients feel heard, encouraging clients to seek regular therapy, and de-stigmatization.

1.1. Helping clients with issues

The primary goal of psychotherapy and mental health services is to alleviate distress and assist individuals in dealing with the various problems in their lives (CITE Intentions of helping clients to deal with their presenting concerns, both in terms of reducing immediate distress and finding more long-term solutions were held by most of the respondents. For instance, a participant said:

“I should be able to help them [clients] to some extent so that their suffering is less than what it would have been initially when they reached out.”

Statements like this reflect that the members of the Peer Support Team are motivated by an intrinsic desire to help people rather than any possible extrinsic rewards. Research evidence also indicates that helping others to improve their condition is a strong motive for becoming a peer helper. (Schroeder, Penner, Dovidio & Piliavin,1995).

1.2 Helping clients feel heard

Another major focus of most of the interviewees was to help clients feel heard. When individuals reach out for help, there is often a sense of isolation as the individual may lack persons in their social environment with whom they can talk about their mental health concerns. The members of the Peer Support Team sought to lessen these feelings of loneliness in their interactions with clients. For instance, one of the participants stated:

“Most people reach out because they don’t have anyone to talk to. So, a lot of cases are of loneliness and not having good friends. So, they just want someone to listen to them and I’m a good listener”.

This statement also points out one of the crucial functions of the Peer Support Team members in terms of simply being an accepting and open presence so that clients feel less alone. De Lisle (2016) notes that hearing your own words serves as an important affirming experience that permits individuals to feel ‘allowed’.

1.3 Encouraging clients to seek regular therapy

Given that the members of the Peer Support Team are not mental health professionals, clients with more serious mental health concerns are provided referrals to psychotherapists

and psychiatrists. One of the major tasks the helpers identified themselves performing was identifying when a case exceeded their capacity and guiding clients in discovering adequate professional help. In the words of another participant:

“[Identifying] when to say that this [case] is a little beyond what we can do to help but these are the steps that you can take to get professional help”.

Thus, the helpers are aware of their limitations and go to lengths to ensure that clients receive the appropriate level of intervention.

1.4 De-stigmatization

Given that there remains a considerable amount of stigma around mental health, especially in developing countries such as India. One of the major roles of the Peer Support Team that emerged was to help remove the stigma around the topic of mental health. As a participant spoke,

“[I] assist basically to spread more awareness about mental issues because people mostly overlook them and then they think that physical health is more important. So taboo is something which was my main goal, to remove the stigma around mental health.”

Therefore, apart from merely providing support to individuals who face mental health concerns, the Peer Support Team engages with the border conversation around mental health in an attempt to normalize it in terms of broader societal discourse. Creating awareness about mental health is positively linked to a reduction in stigma (Srivastava, Chatterjee & Bhat, 2016).

2. Challenges of working in the Peer Support Team

Being a part of the Peer Support Team associated with certain challenges. These challenges were largely associated with the online peer counseling model, though some of the challenges are found in regular face-to-face therapy as well. The various areas that emerged with this theme are knowing what to ask when, therapeutic approach, maintaining professional boundaries, communication gaps, providing referrals, scheduling timings, and maintaining uniformity.

2.1 Knowing what to ask when

Timing plays a crucial role in all forms of therapy, be it online or virtual. Questions about certain sensitive areas must be timed accurately to prevent the client from becoming defensive or triggering them. In online communication, where correspondence might be erratic and there is an absence of body language and other paralinguistic cues, this poses an additional problem. For instance, a participant said:

“Communication needs to be more efficient, saying the right things. Need to brush it up, saying the right things at the right time. Shouldn't trigger the person. One time I said something I now think I shouldn't have.”

This highlights the fact that helping people online comes with a lot of uncertainty, and there is a need for greater training on how best to interact with clients online so as not to end up unintentionally harming them.

2.2 Therapeutic Approach

While the Peer Support Team uses a largely cognitive-behavioral approach, the members are still concerned with various aspects of the therapeutic relationship including establishing rapport, maintaining objectivity, etc. For instance, a participant shared:

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“Understanding that what is the perfect question, the perfect time to ask it, and the perfect rapport that you should have with the client to pull that question off is also important and it comes with experience.”

Thus, the ambiguities of providing help online are once again highlighted, but it is noteworthy that experience is seen as playing an important role in developing proficiency in handling cases online.

2.3 Maintaining professional boundaries

Members of the Peer Support Team are themselves complex individuals with their own rich experiences and points of view. This resulted in the clients somehow getting personally affected by some of the cases, which created difficulties for them, as communicated in this excerpt by one participant:

“There’s also the problem of distancing yourself from the cases and clients. You have to do that on an active basis. You have to tell yourself that you’re not there to save everybody. You can try your best and even then, fail. You can do your bit but the rest is up to the client.”

Thus, while the members of the Peer Support Team may occasionally have to separate their personal experiences from the experiences of the clients, they acknowledge this limitation. On the other hand, some members were able to successfully aid clients with the help of selective disclosure, as indicated by the following excerpt:

“Depression is something that I have also dealt with.... I had an experience so I was able to help him. If there was anything I couldn’t help with, I asked other members of the Peer Support Team”

Therefore, by seeking out supervision, members of the Peer Support Team were able to successfully use self-disclosure to aid clients without violating boundaries. In other instances, cases were transferred to ensure that transference did not impede the progress made by the client.

2.4 Communication gaps

Certain difficulties of the Peer Support Team were attributed specifically to the online mode of therapy, as it created difficulties in accurately empathizing with the client’s concerns, due to the absence of paralanguage. Additionally, as it is not always possible to fix timings, continuity issues also emerge, as indicated in the following statement by a participant:

“...sometimes whatever we try to say they don’t want to take it, so sometimes the case stagnates and sometimes they just don’t want to carry it forward.”

Therefore, reluctance on part of the client as well as difficulties in understanding the frame of the client leads to some difficulties for the helpers.

2.5 Providing referrals

As the members of the Peer Support Team are not licensed mental health professionals, they often provide referrals to psychologists and psychiatrists who practice professionally. However, referrals come with their own set of challenges, including finding the perfect fit for the client, in terms of price point and approach; as well as persuading the clients to seek professional help. The struggles of the Peer Support Team members are evident in the following excerpt:

“[The client] had financial issues, clinical issues and whenever we would try to suggest measures to him or try to tell him what he should do, he wasn’t doing any of that. So we were reaching a dead end and even when we tried advising him to go and visit professionals, he wasn’t ready to go visit them.”

Therefore, despite the best efforts of the helpers, providing successful referrals remains an uphill task for the helpers.

2.6 Maintaining uniformity

Since the Peer Support Team is run by volunteers, maintaining consistency and continuity of interactions also becomes a challenge. For instance, a participant stated:

“Ideally, one person should focus on one case. Sometimes, when a person assigned to a case could be busy so someone else from the team replies to their case. But I feel that that person might not be able to respond as well as the person assigned, since they are the ones who have been talking to them from the start and they understand the case better.”

Therefore, there are some difficulties regarding ensuring that one person simultaneously handles a particular client, which is perceived to be the most helpful. However, in cases where one individual interacted with a client for an extended time, challenges remained, as the helpers often had to be online for extended periods throughout the day, and in some cases had to work to ensure the clients did not become dependent on them by being too available. Therefore maintaining uniformity involves a delicate balancing act wherein one person attempts to deal exclusively with a particular client to maintain continuity, but at the same time not remain overly available in a way that impedes the personal life of the helper and the progress of the client. In some cases of distress, however, due to lack of helpers or at odd hours, it becomes necessary for a case to be taken on by someone who isn't necessarily the lead helper on the case.

3. Barriers for online help-seeking

Certain factors emerged throughout the interview that was seen as creating hurdles to help-seeking online. These factors were fear of being misunderstood by the help giver, fear of judgment, stigma, and lack of awareness, technological barriers, and cost of therapy.

3.1 Fear of being misunderstood by the help giver

Seeking out help or going to therapy can be an intimidating experience that requires courage and vulnerability on the part of the help seeker. A very significant barrier for seeking help online was the feeling on the part of the client that they would not be understood by the help giver, as put forth in the following statement by a participant:

“I think the first one [barrier] would be, the willingness to reach out. Some people are very hesitant when it comes to reaching out for help...Even when they do seek help, they do not get the kind of response they expected so that would, I think put them off.”

This statement conveys that due to personal apprehension or negative experiences, clients were afraid of being misunderstood by the helper and thus reluctant to seek help.

3.2 Fear of judgment

In a similar vein to the previous sub-theme, several of the help seekers were afraid of being judged by the helpers. In the words of one of the participants,

“You need to be non-judgmental so that the person is comfortable talking to you.... People are not comfortable revealing their identity and sharing their issues.”

Therefore, it is evident that fear of being subject to scrutiny and judgment makes individuals reluctant to seek help.

3.3 Stigma and Lack of Awareness

In India, the discourse about mental health remains on the sideline. The importance of mental health in our day-to-day lives remains ignored and reflects in the experiences of many clients. In the words of a PST member,

“They might think that they don't need help or that their friends or their parents might convince them that they don't help.”

This highlights the powerful role societal stigma and lack of acknowledgment of mental health concerns plays in help-seeking. Additionally, factors such as peer pressure on the part of friends, having an invalidating family environment, and lack of personal acceptance were seen as contributing to the stigma that prevents help-seeking behavior among individuals.

3.4 Technology-Based Challenges

As opposed to conventional in-person therapy, online therapy poses unique challenges especially in the case of the Peer Support Team where the help giver and the help seeker communicate exclusively through writing, either via message or email. This leads not only to the loss of important visual and auditory cues, but many individuals have difficulty putting what they want to say into words. Online therapists have reported difficulty in forming rapport and dealing with abrupt terminations as challenges of providing services online (Novotney, 2017).

A report by a team member help,

“Like online-typing and writing messages is still difficult, you can’t connect with the person. [the help seeker] Might not be able to open up as much”

Therefore, the medium of interaction is considered to be a clear barrier by the helpers. Some of the helpers in their interview had suggested that expanding the scope of the Peer Support Team from purely written online counseling to tele-counseling as well might be beneficial.

3.5 Cost

While the services provided by the Peer Support Team are free of cost, many individuals who come to seek help from the Peer Support Team are reluctant to follow through with the referrals that they receive due to the prohibitive cost of therapy. In the words of a participant,

“They [the clients] need someone affordable, people don’t take the first step because of the money involved.”

In a country like India, where there is a shortage of licensed psychologists, the costs of therapy usually remain high, making access to therapy an issue of privilege.

4. Facilitators for online help-seeking

While traditional face-to-face therapy indubitably has certain advantages, certain features of online therapy make it more appealing for certain individuals. The chief advantages identified throughout the interviews were anonymity, cost, easy access, and easy mode of communication.

4.1 Anonymity

One of the advantages of online text-based support is that it does not require the client to disclose identifying information to avail services. In the words of a participant:

“People are not comfortable revealing their identity and sharing their issues”

Therefore, in formats such as those offered by the Peer Support Team, individuals are given a space where they can share their concerns without having to worry about being identified. Thus, these findings support prior research that underscores the importance of anonymity in the success of online therapy (e.g Powell, 1998)

4.2 Free of Cost

The services provided by the Peer Support Team are free of cost, and as mentioned before, access to professional mental health services is often a matter of privilege. Therefore individuals are drawn to online forums such as the one provided by the Peer Support Team so that they can alleviate distress to a certain extent without putting a strain on their finances

4.3 Easy Access

Not all individuals have people in their social environment with whom they are comfortable sharing their mental health concerns or simply venting their problems. In such a case, the Peer Support Team provides an easily accessible platform to share one's concerns. In the words of a participant,

“People want someone to listen. And that's okay. But there are times when they do need professional help. But they don't want to go that far. They want to continue talking. We are not equipped to say that go to a professional. We have to be with them and hear them”

This indicates that apart from assisting individuals with pressing mental health concerns, the Peer Support Team also provides emotional and social support to otherwise healthy individuals on a case-by-case basis. Additionally, the fact that one can communicate through text and there is no need to talk makes the Peer Support Team an easier mode of communication.

5. Suggestions for More Effective Services

While the Peer Support Team has been operating successfully for several years and has addressed thousands of individual cases, there is always room for improvement. This theme captures some of the various areas of improvement outlined by the interviewees. This includes strengthening follow-up mechanisms, creating client records, soliciting client feedback and training from professionals.

5.1 Follow up mechanisms

Since the services offered by the Peer Support Team do not follow specific time criteria, it becomes difficult to know the reasons for which a client stops communicating. Certain helpers had found following up useful on a personal level, as indicated in the excerpt below:

“I followed up [with the client] she said that everything was sorted... So it was a two-session thing”

Having such mechanisms in place will help ensure the well-being of the help seekers, by inviting them to reach out further, and will additionally serve as a troubleshooting mechanism to identify if certain approaches or responses rub the client the wrong way.

5.2 Maintaining summary records

As mentioned previously, the constraints of a volunteer-based mental help service sometimes result in more than one individual having to address the same case. In such a scenario, members of the Peer Support Team believe it will be useful to have a summary record of conversations for expediency.

In the words of a participant:

“Google sheet can be maintained for notes on each client (summary of the conversation). This could also be beneficial for times when the person assigned to a case is not available and someone else from the team has to reply - they would simply have to go through a summary of the case and not read the entire conversation.”

Therefore, maintaining summary records is seen as a beneficial organizational tool that will help the members of the team optimize their time and effort

5.3 Soliciting client feedback

All the participants of the study unanimously agreed that one way of strengthening the services offered by the Peer Support Team was to continuously solicit feedback from clients, both during the period of active contact as well as after the client has terminated contact. In the words of one of the participants:

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“One is to look at the feedback that the person gives and also when the person does not give any feedback, that is also something that looked at. Also sometimes, people ask the cases whether they are finding the entire procedure useful or not. So first would be asking for direct feedback”.

A lack of feedback from the clients was interpreted to be a form of feedback by the help givers, in the sense that I meant that *“the person didn’t find the procedure helpful and doesn’t even feel like talking.”*

Hence, feedback was considered to be of considerable importance both in tracking progress and distress levels throughout therapy, as well as gauging the overall level of satisfaction concerning the service provided.

5.4 Training from Professionals

Since most of the volunteers of the Peer Support Team are students and are in the process of learning themselves, receiving training from professionals and having workshops organized was seen to be a priority. In the words of a participant,

“I think the training sessions are something I’m always up for cause we get to learn a lot. It likes one thing we have to do with people. So in the training part, I get to learn a lot and it is the learning part which I find rewarding “

Therefore, training sessions are seen as a means to become a more effective helper as they provide opportunities for skill-building.

6. Rewards

Despite the challenges posed by working as a member of the Peer Support Team, many positive aspects and experiences emerged from being a member of the Peer Support Team. These include bringing a positive change in the client’s life as well as personal growth.

6.1 Bringing a positive change in the client’s life

Being able to bring about a positive shift for the client was the most frequently cited reward of being in the Peer Support Team. This is highlighted in the following excerpt:

“The clients can give personal feedback on how much change they have experienced from when they first sought help to now. Also, when you talk to cases, you can feel the change in the person through their change in responses which could be another indicator.”

Therefore, the process of working with the client provides both direct and indirect feedback about the progress that they are making, which results in feelings of satisfaction as well as contentment among the helpers.

6.2 Personal Growth

Some members of the Peer Support Team also reported that getting to interact and work with diverse individuals was a learning experience that led to personal growth. This is illustrated in the excerpt given below:

“Personally feel that it’s making me a better self, affecting me in a good way. I see a certain kind of improvement in myself”

Therefore, being a member of the Peer Support Team is seen as a positive influence of the helper’s sense of self, and therefore reinforces the motivation to be part of the Peer Support Team. Research also shows that personal enhancement is an important reward experienced by peer helpers (Terrion, 2010).

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As we discussed the roles and responsibilities that individuals working in the Peer Support Team, a significant change in responsibilities was noted over time. It brought about many changes, thus helping the PST model become more inclusive and diverse. The addition of the new self-care regimens and within the team discussion, maintaining the confidentiality brought in a lot of improvement. Maintaining help seeker tracker, Logistic work like POC, SOPS, Minute taking in meetings, talk to reminders, managing professional data, emails, and trackers was also introduced for the better functioning of the team. Exposure to various types of training like boundary setting, self-care, online peer support, etc also helped the team to work to help with the emotional support of the help seekers. However, few more changes were recommended by the team members thus helping improve the PST model framework.

CONCLUSION

Based on the findings of the present study, it can be concluded that the online peer support approach is multi-dimensional, with its own set of pros and cons. Anonymity, easy accessibility, free of cost, and an alternative mode of communication are factors that encourage people to seek help online; while on the other hand, fear of being judged/misunderstood, the stigma around seeking online help or going for therapy in general, and lack of awareness about such services can pose barriers to seeking online help. For the online peer supporters, this role is important to help individuals deal with their mental health issues by being heard and understood, encouraging them to seek regular therapy and de-stigmatization of mental health issues; however, it can be challenging in terms of communication gap due to online medium, to decide on the therapeutic approach based on client and case details, break resistance against not attending the online text messages, to be available for the help-seekers 24x7, and compassion fatigue or burnout after at some point of time.

Limitations and Future Implications

The sample size was too small for this research, although for a qualitative study it was an effective sample, it was small for this study. An inward approach can be biased. The team members will say positive things about the team and be more inclined to talk positively about the approach their organization is following. For true direction in understanding the effectiveness of this model, the clients need to be interviewed. Further, more exploration needs to go into comparing the effectiveness of an online peer support model with an in-person counseling model. It may also be beneficial to make the criteria for Peer Support Team members more stringent, and thus take in individuals with more training or more background in the field. Further, it will be helpful to ensure that the 'Peer Support Team' is trained by psychologists who are experts in Online Counseling, as opposed to In-Person Counseling.

REFERENCES

- Barak, A., & Bloch, N. (2006). Factors related to perceived helpfulness in supporting highly distressed individuals through an online support chat. *CyberPsychology & Behavior*, 9(1), 60-68.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Chester, A. & Glass, C. (2006) Online counseling: a descriptive analysis of therapy services on the Internet, *British Journal of Guidance & Counselling*, 34:2, 145-160, DOI: 10.1080/03069880600583170

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- Cohen, G.E. & Kerr, B.A. (1998). Computer-mediated counseling: an empirical study of new mental health treatment. *Computers in Human Services*, 15, 13-26.
- Collie, K.R., Mitchell, D. & Murphy, L. (2000). Skills for online counseling: maximum impact at minimum bandwidth. In J.W. BLOOM & G.R. WALZ (Eds), *Cybercounseling and Cyberlearning: Strategies and Resources for the Millennium*. Alexandria, VA: American Counseling Association, ERIC/CASS.
- Cook, J., & Doyle, C. (2002). Working alliance in online therapy as compared to face-to-face therapy: Preliminary results. *CyberPsychology & Behavior*, 5(2), 95-105.
- De Lisle, A. (2016). Being heard and understood in counselling. Retrieved from <https://www.counselling-directory.org.uk/memberarticles/being-heard-and-understood-in-counselling>
- Ehly, S. W., & Vazquez, E. G. (1998). Peer counseling. *Peer-assisted learning*, 219-233.
- Efstathiou, G., & Kalantzi-Azizi, A. (2005). Students' psychological web-counseling: A European perspective. Paper presented at the Fedora Psyche Conference, Groningen, The Netherlands.
- Maheu, M.M. & Gordon, B.L. (2000). Counseling and therapy on the Internet. *Professional Psychology: Research and Practice*, 31, 484-489.
- Novotney, A. (2017). A growing wave of online therapy. Retrieved from <https://www.apa.org/monitor/2017/02/online-therapy>
- Online Therapy. (n.d.). Retrieved from <https://www.onlinecounseling.com/online-therapy/>
- Powell, T. (1998). Online Counseling: a Profile and Descriptive Analysis. Available online at: <http://www.netpsych.com/Powell.htm> (22 July 2003).
- Richard, D. (2009). Features and benefits of online counselling: Trinity College online mental health community. *British Journal of Guidance and Counselling*, 37, 231–242. doi:10.1080/03069880902956975
- Schroeder, D. A., Penner, L. A., Dovidio, J. F. and Piliavin, J. A. (1995). *The Psychology of Helping and Altruism: Problems and Puzzles*, New York: McGraw-Hill.
- Sharma A, Lin I, Miner A, Atkins D, Althoff T. (2021). Towards Facilitating Empathic Conversations in Online Mental Health Support: A Reinforcement Learning Approach. *Association for Computing Machinery, New York, NY, USA*, 194–205. DOI: <https://doi.org/10.1145/3442381.3450097>
- Smit D, Vrijssen J, Groeneweg B, Vellinga-Dings A, Peelen J, Spijker J. (2021) A Newly Developed Online Peer Support Community for Depression (Depression Connect): Qualitative Study. *J Med Internet Res* 2021;23(7):e25917. DOI://www.jmir.org/2021/7/e25917
- Srivastava, K., Chatterjee, K., & Bhat, P. S. (2016). Mental health awareness: The Indian scenario. *Industrial psychiatry journal*, 25(2), 131–134. https://doi.org/10.4103/ipj.ipj_45_17
- Tang, P. (2013). A Brief History of Peer Support: Origins: Peers For Progress. Retrieved from http://peersforprogress.org/pfp_blog/a-brief-history-of-peer-support-origins/.
- Terrion, J. (2010). Motivation of paid peer mentors and unpaid peer helpers in higher education. *International Journal of Evidence Based Coaching and Mentoring*. 8. 85-103.
- Thomas, M. (2018). Charted: India's shocking attitudes towards mental illness. Retrieved from <https://qz.com/india/1237314/fear-and-apathy-how-indians-look-at-those-suffering-mental-illnesses/>
- World Health Organization. (2011). World report on disability 2011. World Health Organization.
- Wright, J. (2002a). Online counselling: learning from writing therapy. *British Journal of Guidance and Counselling*, 30, 285–298.

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Conflict of Interest

The author(s) declared no conflict of interest.

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