

Capstone Project: Part 4

The Gatehouse

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Table of Contents	
1.0 Introduction	3
Project description	3
Rationale	3
2.0 Project Focus	6
Project Aim	6
Overarching Questions	6
Central Problems to the Research Project	7
3.0 Literature Review	9
Triggers	9
Coping Mechanisms	10
Online Therapy\Clinical Approaches	11
Type of Data	14
Data Collection	15
Data Analysis	16
Research Methods and Tools	16
5.0 Ethical Considerations	18
7.0 Student Research Team Identities	21
8.0 Key Findings	23
Introduction	23
Compliant Participants	24
Improvement Areas	24
Triggers	25
Coping Mechanisms	25
Neutral Participants	25
Non-Compliant Participants	26
Triggers	26

Coping Mechanisms	27
Online Service Delivery	27
Hybrid Option	28
9.0 Contributions of this Research/Recommendations (to partner agency)	29
10.0 Limitations of research	32
11.0 Directions for future research	34
12.0 References	36
Appendix A	38

## 1.0 Introduction

### Project description

The research team, in partnership with the Gatehouse conducted comparative research, primarily by analyzing data collected by the partner through online surveys and analysis of secondary sources. The project:

- explored whether any components of the Gatehouses online services have caused or may cause harm to their clients (i.e., triggered their clients); and
- identified coping methods used by clients when they experience triggering events that may affect the online peer support, they received from the Gatehouse.

The results of the research project have sought to improve online services provided by the Gatehouse.

### Rationale

We undertook this project to identify and understand the triggers and the events that cause them in Sexual Abuse Survivors (survivors) that live with the trauma of childhood sexual abuse, as they apply to online services at the Gatehouse organization and in the trauma care sector as a whole (Ferguson & Noel-Morris, 2020). Persons who live daily with this trauma also may have a personal system of highly developed and or instinctual methods of coping with events that trigger the trauma that lives inside them, this is one of our primary research assumptions (Ferguson & Noel-Morris, 2020). Another research assumption is that these coping mechanisms could be identified and the knowledge of them and the methodology behind them could be applied to online

services, and thus serve to make those services have less potential of bringing on triggers (Ferguson & Noel-Morris, 2020). The final assumption of our research and perhaps the most important, is that because of the rapid deployment of online services as replacements for in person services due to the COVID-19 Pandemic, clients' exposure to triggering events may be increased. Through this research project all these assumptions will be tested (Ferguson & Noel-Morris, 2020).

Through regular and structured meetings with the research partner, the most pressing issues affecting The Gatehouse were carefully reviewed to determine possible research projects (Ferguson & Noel-Morris, 2020). Many organizations in the social services sector have seen the services they provide change considerably due to COVID-19, which has led to a move towards online service delivery (Ferguson & Noel-Morris, 2020). The Gatehouse is no different, and due to their focus on trauma avoidance and harm reduction, the concern of causing harm or “triggering” clients through these newly expanded online services is paramount (Ferguson & Noel-Morris, 2020). To support their clients, The Gatehouse has been conducting online participation surveys since June of 2020 to gauge the effectiveness of the new service format.

The Gatehouse and the Humber Student Research Team discussed and agreed that the review and analysis of the participation satisfaction surveys, to determine their effectiveness would be a good research project (Ferguson & Noel-Morris, 2020). This project involved identifying triggers experienced and coping mechanisms used by clients of the Gatehouse, which was found in the surveys completed by clients (Ferguson & Noel-Morris, 2020). In addition, access to older surveys dating back to 2017 has been granted, and the pre-pandemic data will be compared to data collected during the

Pandemic. The data from previously collected surveys and future satisfaction surveys will be the information that drives this project (Ferguson & Noel-Morris, 2020).

## 2.0 Project Focus

The purpose of our project was to identify triggers and methods of coping that clients of the Gatehouse, while accessing online services (Ferguson & Noel-Morris, 2020). The identification of triggers to trauma lived with by survivors of childhood sexual abuse that use the Gatehouses services, could aid in improving online services (Ferguson & Noel-Morris, 2020). The identification of coping mechanisms common within the client base could also improve online services offered (Ferguson & Noel-Morris, 2020).

Our thesis statement is: Peer supported online group sessions can be an essential tool to the care that adult survivors of childhood sexual abuse receive, if the online service is developed to be responsive, respectful, avoids potential triggers and incorporates coping strategies (Ferguson & Noel-Morris, 2020).

### Project Aim

We hoped to learn whether the online services currently offered by the Gatehouse had any triggering effects on participants. We also hoped to identify effective coping mechanisms for dealing with triggering events that may arise while using online services (Ferguson & Noel-Morris, 2020). Finally, we hoped to learn in which ways The Gatehouses online services can be improved (Ferguson & Noel-Morris, 2020).

### Overarching Questions

- 1) Are there aspects of online service provision that are inherently triggering to persons living with trauma (Ferguson & Noel-Morris, 2020)?

- 2) What are the online services provided by “The Gatehouse”, and to what degree does the organization currently rely on these services? How do the online services work (Ferguson & Noel-Morris, 2020)?
- 3) What are the most commonly reported triggering events experienced by clients of “The Gatehouse”, while they are accessing services online or otherwise (Ferguson & Noel-Morris, 2020)?
- 4) How do clients of “the Gatehouse”, who live with the trauma of childhood sexual abuse, cope with triggering events (Ferguson & Noel-Morris, 2020)?
- 5) What are the main obstacles that are preventing and may prevent clients from accessing and using current online services (Ferguson & Noel-Morris, 2020)?
- 6) Using the feedback data generated by the online surveys distributed by the Gatehouse, what changes do clients want made to online services (Ferguson & Noel-Morris, 2020)?
- 7) Taking all the available data into consideration, what will be the most helpful and harm mitigating elements that can be incorporated into existing and future online services at “The Gatehouse” (Ferguson & Noel-Morris, 2020)?

#### Central Problems to the Research Project

The main and central problem that this project faced was the transition from face-to-face service delivery to remote online service delivery (Ferguson & Noel-Morris, 2020). The change was hard for everyone, but for those living with trauma sudden change may have seriously impacted their comfort levels when using the services provided by



the research partner (Ferguson & Noel-Morris, 2020). Online services have been a paradigm shift for many clients, as they may have never participated in peer support groups online.

The degradation of comfort levels may be an initial trigger and may cause harm that could make certain clients stop using services (Malmo & Laidlaw, 2010). Therefore, the second problem we faced was how to measure dissatisfaction with the new service delivery format (Ferguson & Noel-Morris, 2020). There may be serious limitations to the data collected through online surveys. The data may not be representational of the client's actual feelings.

The third problem we faced was the selection and incorporation of suitable coping mechanisms in an online format. In the tight confines of the virtual environment, we may have been limited in the types of coping strategies we could recommend for incorporation (Ferguson & Noel-Morris, 2020). What works in the real world may not work in the virtual world, and significant adaptations may have been necessary (Ferguson & Noel-Morris, 2020).

### 3.0 Literature Review

This literature review for our research project along with the Gatehouse research incorporated the best sources that informed our project into the possible triggers and coping mechanisms experienced and used by the target demographic (Ferguson & Noel-Morris, 2020). The literature review highlights the most relevant resources to the research project that were identified in the annotated bibliography (Ferguson & Noel-Morris, 2020). The resources have been grouped into three main theme areas: Triggers, Coping Mechanisms and Online Therapy\Clinical Approaches.

#### Triggers

These three articles help paint the cyclical picture that is the reality of living with the trauma of childhood sexual abuse. The cycles often cause victims to be retraumatized by being reminded of the abuse through experiences called triggers or triggering events (Hodder-Fleming & Gow, 2005). These articles cumulatively speak to the different key aspects of how triggers manifest in the lives of survivors (Hodder-Fleming & Gow, 2005).

Understanding key triggering components like memory retrieval and anxiety was a key to our research, and these articles provide insight on those factors and many others. To be able to identify triggers in online services we carefully reviewed these articles to be able to weigh the occurrences of triggering factors that may exist in them.

The major gap in this area is that every survivor is different, and there is no one size fits all to understanding triggers (Hodder-Fleming & Gow, 2005). Throughout this exercise, we discovered triggering events that were new and unique to online services,

and which are not fully represented or not represented at all in the materials available on triggers.

We felt that the articles chosen on triggers run the gamut of scenarios and address the commonly understood areas of the issue (Malmo & Laidlaw, 2010). Memory and triggers to remembering are key and our information on this is strong (Malmo & Laidlaw, 2010). A weakness of course, is that we as yet did not have any direct information on triggers experienced during participation in online services, because the medium is very new.

### Coping Mechanisms

These articles examined a variety of ways in which survivors of abuse deal with triggering events are covered. Perspectives from a wide subject pool have been chosen, this includes women, substance abusers and survivors from other countries and more. The articles were analyzed to get the broadest picture of how survivors cope with triggering events and trauma in general. This overview aided us in identifying similar behavior exhibited by participants in online services offered by the research partner.

Due to the secondary nature of the research that was conducted, we sought out detailed guidelines to identify coping methods from only the responses given in the online surveys that were reviewed. These articles informed us as to the wide variety of ways that survivors cope, and with this knowledge it may be easier to find signs of coping mechanisms in the survey answers (Futa et al., 2003). We looked for specific traits and behaviors talked about by clients of the research partner, in order to indirectly or directly identify the coping strategies they may be using. These articles were essential in our

education as to what to look for in the responses to point us in the right direction (Futa et al., 2003).

We dealt with a major gap; in that we were not able to directly ask the clients what coping mechanisms they used. With a primary research method, it may have been possible to simply ask the participants using a variety of carefully crafted questions, about their personal coping methods (Ferguson & Noel-Morris, 2020). Using a secondary method of research, we essentially used an informed guessing methodology and developed skills to read between the lines (Ferguson & Noel-Morris, 2020). While this method was not ideal, we were able to identify patterns and coping mechanisms (Ferguson & Noel-Morris, 2020).

The strength of these articles was the wide variety of experiences covered, and perspective. This perspective on the types of coping mechanism is a serious strength, especially since the methods covered are both empowering and self-destructive (Futa et al, 2003). This two-sided approach creates essential and valuable objectivity that was built into our research (Futa et al, 2003). The weakness, however, is that through the medium of surveys, participants may have been reluctant to discuss their coping mechanisms, especially if they were self-destructive.

#### Online Therapy\Clinical Approaches

Due to the rapidly changing and new environment that covers online therapy there is a limited number of published resources covering their effectiveness and to the satisfaction of patients/service users (Ferguson & Noel-Morris, 2020). The articles we have included in our literature review on online service details possible pathways forward

for usage of online therapy in the psychotherapy sector (Ferguson & Noel-Morris, 2020). This avenue could offer a powerful prospect on how to administer online services and improve them moving forward (Bran et al., 2017).

These articles will offer important insights on how online services are developed and the therapy industry thinking behind that development. These articles are essential in understanding the minds and methodologies of the people treating the survivors of trauma (Bran et al., 2017).

There is a major gap in information concerning the implementation of the online service model. In the current climate caused by COVID-19 pandemic, online services are the primary medium of service provision, and much more information on this model is needed (Bran et al., 2017). Another gap, therefore, is the lack of patient and participant perspective articles on this subject. During the course of the research, we did encounter one new article that speaks to the differences between online services and person to person services (Bran et al., 2017). This connection was extremely important to our research. We also noted that many more articles concerning online services became available during the pandemic. While most were not relevant to our area of research it is good to seed expansion of thought in this area.

The strength of this section is the informed perspectives of industry professionals that have a breadth of knowledge from years of administering services. Another strength of these articles is the objective opinion of the articles that weigh the good with the bad of current modes of practice in therapy and in the new world online service provision (Amichai-Hamburger et al., 2014). A major weakness, however, is that this clinical

approach has been credited with causing trauma in some cases. Also, the article on online therapy is from the area of psychotherapy and not the peer support model that the research partner offers. The differences may seem superficial, but when applied could prove substantial.

## 4.0 Project Design

### Epistemological perspective

We have incorporated a constructivist epistemological perspective to this research project. We looked at uncovering the lived realities of the subjects of the research and learned what triggers they experienced and why (Ferguson & Noel-Morris, 2020). We also looked to see how these individuals adapted and applied coping methods in their lives (Ferguson & Noel-Morris, 2020). Ethnographic methodology was employed, to determine if any cultural settings may have had impacts on the types or severity of triggering events that may be experienced (University of Kansas, n.d.) We tried to incorporate the cultural aspects of the lived experiences of the participants into the narrative picture, as to how participation may be triggered (Ferguson & Noel-Morris, 2020). Note, that Ethnographic aspects will only be possible if relevant information is found in the data provided by the research partner (Ferguson & Noel-Morris, 2020). These lessons and perspectives were equally used to assess the coping mechanism used by the same individuals. The personal narratives and different cultural backdrops were weighed and compared to the theoretical assumptions of the research project goals (University of Kansas, n.d.).

### Type of Data

We collected data in a secondary format, as the data that informed this project was already collected by the time of analysis (University of Kansas, n.d.). The participants completed the surveys after they participate in peer support sessions online and after other online interactions with the Gatehouse (Ferguson & Noel-Morris, 2020). The format of the surveys uses ratings to gauge satisfaction and short answers that dig deeper on

feelings and experience. These responses were carefully reviewed to find the answers to our questions (Ferguson & Noel-Morris, 2020). The analysis of the questions involved the categorization of responses to better identify emerging themes that informed our research hypothesis. Also, the data was largely qualitative; although the surveys have a quantitative rating system, the weight of the numerical responses was judged qualitatively (University of Kansas, n.d.). See Appendix A for the draft questions, as well as the questions proposed by the Humber student research team (Ferguson & Noel-Morris, 2020).

#### Data Collection

The clients of the Gatehouse were the primary providers of the data that was analyzed during this project (University of Kansas, n.d.). The client base is made up of adult survivors of childhood sexual abuse who live with trauma and post-traumatic stress. Therefore, the persons providing data for this research project came from a very specific and detailed demographic (Ferguson & Noel-Morris, 2020).

The data itself was transferred to the research team by the agency contact Maria Barcelos. The method of data transfer was via email, and data was reviewed and kept in the strictest confidence (Ferguson & Noel-Morris, 2020). Furthermore, the research team had the opportunity to review the existing survey and provide suggestions on how to improve the survey; however, the additional questions were not included in the final version of the survey that was shared with clients (Ferguson & Noel-Morris, 2020).

The data for specific categories of interest in this project was collected from the data pool emanating from the main data source, the participation surveys (University of



Kansas, n.d.). Careful and methodical review of the source material will give us more targeted data on triggers and coping mechanisms (University of Kansas, n.d.). Plus, with an overview of current surveys and past surveys dating back to 2017, we sought to compile data that shows the differences and changes in services pre pandemic and during the pandemic (Ferguson & Noel-Morris, 2020).

### Data Analysis

The analysis of data was done comparatively, this comparison being made between older surveys and newer ones (University of Kansas, n.d.). The results of this comparison created a baseline for the differences in the new services accessed online that may inadvertently have triggering elements (Ferguson & Noel-Morris, 2020).

We will also assess the data by grouping responses into categories to determine if the responses indicate any patterns that will lead us to discovering triggers and also the coping mechanisms to them (University of Kansas, n.d.). The categories will be addressed separately, thus the same data will be reviewed and analyzed multiple times. Each time the same data is analyzed different variables will be focused on (University of Kansas, n.d.). This methodical approach will reveal elements of the client's responses and the experiences behind them at various levels, just as trauma is experienced at different emotional and interpersonal levels (Ferguson & Noel-Morris, 2020).

### Research Methods and Tools

We will be using mixed research methods for this project. The surveys that are designed to determine whether the vulnerable sector serviced by the research partner is being impacted negatively will be one method (Ferguson & Noel-Morris, 2020). The

partner initially designed these surveys prior to the involvement of the Humber Student Research team, but we have opportunity to contribute questions and therefore the surveys will be more in tune with our specific research needs (Ferguson & Noel-Morris, 2020).

Review of surveys that have been completed previously and archived, both those dating back to 2017 and those from earlier in 2020 at the beginning of the Pandemic, formed the secondary data analysis (University of Kansas, n.d.). These two methods mixed together formed our methodology for this project. Although, it is important to note that due to Pandemic restrictions, the bulk of our methods were on the secondary analysis side, while reviewing survey data that was provided by the research partner (Ferguson & Noel-Morris, 2020).

## 5.0 Ethical Considerations

It was essential that this research project did not harm the subjects of the research. Protecting the confidentiality of the participants and the data they are providing was of the utmost importance (Ferguson & Noel-Morris, 2020). Anonymity is also very important, and names of the participants were not shared with the research team, and thus not used when referring to participants in order to protect their privacy (Ferguson & Noel-Morris, 2020). Ethically, being very respectful of the trauma that these individuals live with was an overarching driving force. Most of all respect for the participants and the knowledge that this research is for their benefit, not that of the secondary researchers, was a major ethical consideration (Ferguson & Noel-Morris, 2020).

We anonymized the data by using numbers instead of names to identify participants. The most important thing to remember while considering ethical considerations is attention to privacy (Ferguson & Noel-Morris, 2020). To this end, the survey data was accepted from the research partner via secure email, to avoid any potential data leaks (Ferguson & Noel-Morris, 2020). Once the research project is completed, all data collected from the Gatehouse will be purged from all devices and servers, to further ensure that there are no data leaks (Ferguson & Noel-Morris, 2020).

A constant ethical concept in our research was respect for the concept of triggers. We were highly respectful and aware of the fact that persons living with trauma can be easily triggered and harm can be done. We also followed Humber College's Ethic Policy and TPCPS2 throughout our research project (Ferguson & Noel-Morris, 2020).

## 6.0 Research Context

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The Gatehouse is a community based charitable organization that provides much-needed support, resources, and community to survivors of childhood sexual abuse (Ferguson & Noel-Morris, 2020). It is located in Etobicoke (Toronto), Ontario, about 15 minutes away from downtown Toronto. It runs a variety of creative programs including peer support groups, art therapy, wellness workshops, conferences, and the investigation support program. However, due to the COVID-19 pandemic, the Gatehouse has had to adapt and have moved much of their programming online (Ferguson & Noel-Morris, 2020).

The context for this research project found the student research team working in a virtual environment due to the restrictions put in place in response to the COVID-19 pandemic. The research conducted was a secondary type of research, that involved the review and in-depth analysis of previously distributed and conducted surveys, that were provided to the target population via the internet (Disability Rights Fund, n.d.). The target population for this research project are adult survivors of childhood sexual abuse (CSA) who live with residual trauma caused by the abuse they suffered as children.

These individuals are clients of the partner organization, which is called “The Gatehouse”. The Gatehouse’s mission follows a Participatory Action Research (PAR) framework, seeing the survivors themselves informing and facilitating the peer support counseling sessions provided by this organization (Horodeckyj, 2020). The aim of the session is to use peer support to help survivors work through key areas of their trauma, in order to improve their life conditions ((Horodeckyj, 2020). Another key objective of this

organization is to provide services to clients that do not create situations that may lead to their revictimization. This organization strictly follows the “Do No Harm” principles and theory and couples this with PAR theory while providing services (Horodeckyj, 2020).

Our research team is using random sampling methods to analyze the effects of the online peer support sessions that comprise the bulk of the data that has been generated from the surveys that we are analyzing. As a research team, we have identified this as the most respectful way to analyze the provided data in order to protect the community that will benefit the most from the findings, and thus build trust within that community.

## 7.0 Student Research Team Identities

### Peter

As a mature student researcher, I find myself situated well to conduct this research, having participated in projects that required complex and in-depth data analysis seen through a qualitative lens, previously in my academic career. I bring with me to this project many years of field experience and life experience, as well as a personal appreciation for the lifelong effects of childhood traumas. Furthermore, the secondary research that I am engaged in allows me to analyze data without worrying about ethical pitfalls that may have arisen with the research had it been conducted through primary means. This style of research situated me in a good position to have a positive impact on the stakeholders that may benefit from the results of my research, with little risk of causing harm to at risk members of the target demographic. Whereas I am not specifically an insider to this community I do feel a deep connection to the frustration and struggles that the traumas of early life leave on one's future. This connection led me in my analysis of the ups and downs experienced by CSA survivors while trying to utilize a compassionate outlet now found in the digital online world.

### Mary

As a student researcher, and an outsider to the target demographic of this research project, I am cognizant that I have not experienced what survivors of childhood sexual abuse have. I am aware that many people in the society in which I live have experienced dire circumstances brought on by abuse and continue to live with the trauma that results from this abuse. Through this research project, I am increasingly able to

appreciate the experiences of the community that I am researching, and hopefully able to shed light on findings that will benefit this community. The learnings that we are generating in the areas of triggers and coping mechanisms that the target community is experiencing, will allow me to do outreach aimed toward these communities in the future as a community development worker. The learnings on coping mechanisms and triggers gained from this research project that may affect survivors of childhood sexual abuse and will better inform the pathways that we suggest to organizations to better address how to deal with the lasting effects of trauma.

## 8.0 Key Findings

### Introduction

We have developed three key themes that have been used to categorize survey participants. These primary three themes are Compliant, Neutral and Non-Compliant participants, and their implementation has served us well in our categorization and analysis of the data (Eysenbach, et al., 2004). As such, compliant participants are defined as those who gave a majority of positive and thankful responses to survey questions. Neutral participants were defined as those who gave answers that did not allow the researchers to clearly determine their level of satisfaction. Non-compliant participants came to be defined as participants that made their displeasure with the peer support openly known and gave negative answers to many of the survey questions.

The three themes were used to gauge not only the types of triggers and coping mechanism but in which ways the thematic participants used them. They also lead us to see underlying themes such as potential deceptive behavior and the concept of external factors that limited survey participation (Eysenbach, et al., 2004). Overall, the theme of contentment by a majority of the participants seemed to reveal itself. The relatively small level of discontent did not take away from the general theme of participants finding the sessions a useful tool in their personal quests to manage their trauma. Thus, statistically we found the data we analyzed to show that approximately 75% of the participants were categorized as Compliant, 15% as Neutral and 10% as Non-compliant.



## Compliant Participants

Our analysis of the data shows that the majority of the participants had a positive experience using the online format. They indicated that their interaction with facilitators was largely positive and healthy. They appreciated the topics of conversation and found them helpful. The feedback on improvement from the compliant participants, seemed to be geared toward a collaborative sense of improvement of the process overall. So, the subtheme for this category of participant revealed itself to be one of teamwork and collaboration. These positive aspects of the Compliant participants reactions were overwhelmingly identifiable. Compliant participants made up 75% of the overall participants in the survey process. In the Compliant category 60% had only positive feedback, with the additional 40% providing criticism; this criticism however was aimed at improving the peer support session.

Participants' comments included "There was an unexpected intimacy, and no worries about travel times etc. leaving me free to focus on the content" and "I could be in the comfort of my own home while talking about difficult things", which further cements the benefits of online peer-support.

## Improvement Areas

The compliant participants were critical, but the criticism offered by them was aimed at improvement of the process as a whole. These participants did not blame the process but detailed their appreciation for it and their want for more in-depth interactions, because they enjoyed where the session went in their journey to mitigate their trauma.

## Triggers

We found that the major triggers experienced by the compliant participants were the feeling of disconnection that resulted from the change in format. They were initially uncomfortable with the new process and some indicated that it made their interaction more difficult. The feeling that they were not being listened to and were not part of the larger group as much as they wanted seemed to cause these participants to be triggered, albeit in a subtle way. Thus, their responses to questions that made them feel triggers highlighted their need for enhanced respect on key issues.

## Coping Mechanisms

However, in this category the participants quickly adapted to the new format and should use coping mechanisms such as appearance, where they invested in the process in order to get used to it more quickly. Thus, they demonstrated that they coped by doubling down on their investment in the new process as a way of mitigating the possibility of being retraumatized (Eysenbach et al., 2004).

Participants' comments included "I felt that the comfort of my own home allowed me to fully engage the program. I didn't have to drive home after each session" which aligned with our assessment that being at home was a significant coping mechanism for some participants.

## Neutral Participants

A secondary subset of participants was neutral in responses which indicates that they were non-compliant in their level of participation. This means that they preferred to

provide answers that were noncommittal and did not indicate satisfaction or dissatisfaction.

### Non-Compliant Participants

The third segment of participants were openly dissatisfied with the support and survey process, and their answers openly acknowledged this fact, and we identified them as non-compliant. This portion of participants was the smallest portion, indicating that not that many participants were truly dissatisfied. Thus, the findings show that most participants benefited from the process, but there was a segment that was not only dissatisfied but also reported negative effects of the process (Eysenbach et al., 2004). These negative experiences indicate the possibility that roughly 15- to 20 percent of the participants having experiences that may have led to traumatization.

### Triggers

The triggers for the neutral and non-compliant participants, also largely seemed to be that of isolation. Once again, we saw participants feeling that they did not have as deep a connection to the process as they would have liked. This sense of being alone even while surrounded by others, caused neutral participants to treat and appear to not participate fully in the survey process. In addition, both categories seemed to show some discomfort with the sharing process (Malmo & Laidlaw, 2010). It is possible that the sharing of details in the online format was triggering especially at first because some of these individuals were not comfortable revealing details of their traumatic events over the internet. Specifically, for the neutral participants it is hard to tell whether they were just generally uncommunicative, or they were triggered by the situation. This is obviously due

to their low level of responsiveness. These types of triggers were also identified in our research sources, and are something that need to be examined further in the online delivery of service, specifically as to how do we help people feel supported when they aren't feeling safe (Malmos & Laidlaw, 2010).

### Coping Mechanisms

The coping mechanism for neutral participants seemed to be one of withdrawal, and this is a maladaptive coping mechanism. The non-compliant participants however did not tend to withdraw in order to cope, they tended to be slightly more inflammatory and eager in redirection to cope (Futa et al., 2003). There was an element of blame in some of the comments from the non-compliant participants. Again, it must be noted that the non-compliant participants were the smallest category.

Furthermore, our findings indicate that potentially 25% or so of the participants gave a non-committal of neutral answers, which opens up the possibility of triggers being experienced. Although with these individuals it is hard to know if therefore unresponsiveness was due to participation in the online sessions or was due to unrelated personal experiences stemming from the participants offline life.

### Online Service Delivery

Through the analysis of the data provided the findings as to the impacts of the newly administered online formats by this organization is fairly straightforward. After an initial stage of acclimation, the participants are largely able to utilize the online tools to access the technology that allows them to access the support that they experienced in the real world.

Further themes that showed themselves to be important to participants were the need for more in-depth discussion, especially about past events from childhood (Bran et al., 2017). It appears that some participants did not feel listened to in the online format as much as they did in person at the Gatehouse's physical location. These concerns often came from the Compliant participants, and were mentioned almost in passing, but definitely should be addressed.

In addition, some clients had very specific suggestions on how to improve online service delivery from suggestions of creating specific manuals for online sessions, instead of using the in-person manuals to agenda planning and structure of speaking sessions.

#### Hybrid Option

To this, our final theme is that of the possibility of a hybrid model being implemented at the Gatehouse. This peer support model would see the organization offering both in person and online peer support services on an ongoing basis. This will likely be one of our recommendations but is also a theme that we have seen emerge in the survey data. Some of the participants have already loosely suggested this pathway forward.

## 9.0 Contributions of this Research/Recommendations (to partner agency)

The Gatehouse has contributed greatly to this research project at every stage, primarily with the equitable sharing to the essential data that informed the research. The research supervisor from this organization, Maria Barcelos, was also a source of guidance and information in our research process. Due to the ethical limitations required due to the vulnerable sector being studied, and the physical limitations necessitated by the COVID-19 Pandemic restrictions, our project seemed limited in scope from the onset. However, the research partners' guidance detailed to us how the project could be of great value to them despite these limiting factors. It was the partner that initially suggested the secondary type of data analysis. This recommendation came after in-depth consultations with us and in partnership we saw the way forward and agreed that Maria's recommendation was the way forward.

The agency partner also provided us with supplementary information along the way that was very useful to our research. The Gatehouse has already started the process of facilitating their clients greater understanding of the online peer support process, and the materials generated for this purpose were extremely helpful. On Top of that, a preliminary analysis by Maria herself of session participant satisfaction from July-August of 2020 was provided to us. This paper was also a guiding light to pathways that we chose to explore. Further depth of knowledge was gained by the review of a report written by a Gatehouse board member named Stefan. This report was essential in understanding the pre pandemic effectiveness of the peer support sessions offered by the partner (Horodeckyj, 2020). Thus, we are able to compare satisfaction for a normal environment to that of the online pandemic restricted environment.

As to the recommendations overall that we are making to the research partner, there are three. The first recommendation is, although the consultation process as to pressing concerns for individual peer support group participants has been initiated, this area needs to be expanded. Prerecorded tutorials need to be part of the facilitation process, as an enhancement to the facilitation process, not just as supplementary materials that participants read on their own if they want to (Horodeckyj, 2020). Learning how to navigate the online environment in order to better access peer support services online may be an organic way of improving the service and the experience of the participants.

The second recommendation is quite revolutionary in our opinion, it involves the creation of a hybrid model of online service delivery. After pandemic restrictions are lifted, we think it would serve the Gatehouse well to offer in person and online peer support services on an ongoing basis. The increased accessibility that this will provide to the clients of this organization might indeed be a game changer. They will now not feel the pressure to travel to the gatehouse for a session, if that had been an issue for them in the past (Horodeckyj, 2020). Conversely, they will not need to adapt to an unfamiliar online format if that in turn makes them uncomfortable and can still attend in person. The increased options of this model that we are suggesting is in keeping with the principle of this organization, as it respects the trauma levels of the participants and gives them options. Further still, this new model may be an important new standard in this sector, as increased accessibility of service is a general aim of peer support and therapy delivery.

The third recommendation is that the research partner employ the concept of “problem parking lots” where participants can table personal concerns that they have,

that they would like to receive more focus. Once the area of focus has been identified by the facilitator, smaller breakout groups can be employed to address specific issues. The breakout groups, which are made possible by the zoom platform technology, could be utilized but only at the strict discretion of the group facilitator. The level of group bonding and the overall level of trust within the group must be assessed by the facilitator before the larger group is separated into smaller focus-oriented groups. Building appropriate trust levels should be a prerequisite to the deployment of breakout groups. Caution would need to be applied while using this method in order to avoid triggering participants while exploring sensitive topics, and thus causing additional trauma.



## 10.0 Limitations of research

The project faced multiple limitations, such as the remote nature of the research that was adopted due to COVID-19 Pandemic restrictions. Without direct access to the organization, its work, and its clients, we experienced intermittent communications with the partner, as we only communicated via zoom and email. While we experienced limited communications, the partner did always reach out and a helpful meeting took place. This is still a limitation to the student research team because in the latter half of the project, meetings are conducted exclusively on the partners schedule, and not aligned to our recommended times and dates, which does have an impact on our work plan, but we appreciate that the Partner is leading an organization in the middle of a pandemic. While a limitation, the overall experience was positive and gave us a further taste of what it's like to work in a community organization during a pandemic when the very nature of work had undergone substantial change almost overnight.

In addition, the essential personal element in both Participatory Action Research and in Community Development work is lacking in the secondary nature of the research. Our project primarily used secondary research because we had little to no contact with the actual subjects of the research. That being said this limitation will drive the research team to dig deeper and read between the lines while reviewing the secondary data.

Another limitation of the research is the sensitive nature of the work that the Gatehouse does. Their clients are survivors of abuse and live with trauma, and thus we were limited to the information and data contained within the surveys shared by the partner. We had to avoid pushing primary research and direct contact with clients, which would have risked the research project becoming a trigger itself.

Finally, another emergent limitation was discovered was the similarity in some of the thematic data. It proved to be a tricky endeavor to differentiate between neutral participants and non-compliant participants. Thus, at the end of the day we are limited in what our recommendations to the partner might be to best serve these individuals in the future. If the participants are displeased, is it because of the process or is the underlying personal or environmental factor that lies outside the scope of the survey questions? Furthermore, for the compliant participants, if they are being placating to the process to appear agreeable and are not sharing displeasure, how will we determine this. Perhaps at the end of the day these things are not to be determined, through this project and general good practice and respect building recommendations will have reciprocal effects that will alleviate some of the unseen underlying and external factors.

## 11.0 Directions for future research

In terms of directions for future research, there are several suggestions that we could make to the agency partner. As a starting point, future researchers could examine issues that we could not address, such as whether clients would prefer a permanent switch to an online format for peer support sessions. It had been noted that several of the participants acknowledged that not having to travel to the Gatehouse was not only time saving but also potentially a source of comfort. It is a scenario that could be assessed in the future by and with the partner. Although the physical location of the Gatehouse is part of its allure, having a permanent online option might serve this organization well in reaching a greater number of survivors of CSA who cannot make it to the physical location. This might allow the gatehouse to offer services across Ontario, across Canada and perhaps the world!

If we had infinite time and COVID-19 was not a concern, as a research team we would like to do more person to person in depth interviews and perhaps some focus groups to answer several nagging questions. One, being that of the compliant participants, were they just playing along? Did they answer favorably to most questions in order to not rock the boat and make the best of the situation? Certainly not all of the participants in this category were being deceptive, but it would be informative to dig deeper and through interviews and focus groups, to get closer to the truth. This extra research would also involve much more stringent ethical standards which would also involve more time to implement and be approved.

Another question to answer, if we had a broadened timeline, would we be able to determine the mitigating factors for neutral and non-compliant participants? Again,

through the implementation of focus groups and in-depth person to person interviews, underlying causes for dissatisfaction might come to light. We as researchers, would like to be able to differentiate between actual displeasure with the process of online session and external factors experienced by individual participants. It is entirely possible and some of those that took the survey were having a bad day when surveyed and actually appreciated the session but just couldn't or didn't feel comfortable articling their feelings. More research on this factor might also reveal broader triggers for those living with trauma from CSA as well.

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## Appendix A

### The Gatehouse Online Peer Support Programs Feedback Survey

The purpose of this survey is to gather your insight on your experience with The Gatehouse online peer support groups. This will help us improve our online services for other survivors seeking support through The Gatehouse. This survey is brief, anonymous and voluntary.

#### \* Required

1. Please indicate which program you completed online \*
  - Phase 1
  - Phase 2
  - Self-care [5 Weeks]
  - Estrangement to Reconciliation
  - Partners only bi-monthly workshop
  - Other:
2. Please rate your overall experience with the online peer support group ((1= Poor, 5 = Excellent) \*
3. What did you like about being in the online peer support group using zoom?
  - a. Or What did you like best about the online peer support model?
    - i. The facilitator
    - ii. Ability to seek support at home
    - iii. TBD
    - iv. TBD
    - v. Other
4. What did you dislike about the online group experience?
  - a. What did you like least about the online peer support model?
    - i. Lack of anonymity
    - ii. The facilitator
    - iii. Online platform
    - iv. TBD
    - v. TBD
5. How can we improve the online peer support experience? \*
6. Overall, please rate how helpful the online group(s) program was to your own healing journey (1= Poor, 5 = Excellent) \*
7. Please elaborate
8. What topic of online group program do you feel was the most helpful for you? \*

9. What topic of online group program do you feel was the most challenging for you?

\*

10. Can you please identify any cultural settings that may have impacted your participation?

11. Any other comments you would like to add

Note: Yellow questions were proposed by Humber research students