Interruptions of Risky Online Behavior De-escalate Violent Conflict

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Introduction

- E-Responder was developed as a partnership between community psychologists and a non-partisan, non-profit organization to address youths’ risky online behavior, bridging virtual and actual spaces (e.g., Cohen, 2014; Rizzo 2013).
- E-Responder draws on research from clinical (e.g., Linehan, 2014) and community (e.g., Watts, Griffith & Abdul-Adil, 1999), psychology to:
  - Proactively address violent norms
  - Leverage youths’ strengths
  - Prevent the escalation of online provocation in to real-world violence
- E-Responder trains staff to assess online risk, provide effective interventions, and model digital citizenship.

Present Study

RQ1: Is there a relationship between perceived risk and selected delivery mechanisms (i.e., online, in person, or both)?

HYP1: High-risk posts are more likely to elicit in-person interventions. Medium and low risk posts are more likely to elicit online interventions.

RQ2: Are some delivery mechanisms more effective than others in addressing youths' risky online behavior?

HYP2: Interventions involving in-person interactions are more effective in addressing youths’ risky online behavior.

Methods

- Violence Prevention Professionals (VPPs) at three community-based organizations received training to identify, assess, and respond to youths’ risky posts via the Interruption Toolkit.
- During the six week intervention period 26 staff members reported 145 instances of youth risky behavior online.
- Staff also reported risk level (i.e., low, medium, high), intervention modality (i.e., in-person; online; both), and outcomes (i.e., violence prevention; healthy grieving; feelings of safety; emotion management techniques).

Results

- There was no significant impact of perceived risk level on the selected intervention modality ($X^2 = .243, p>.05$).
- Choice of intervention modality did not impact the likelihood of positive outcomes ($X^2 = .36-4.53, p>.05$).
- Positive outcomes of violence prevention, feelings of safety, and utilization of emotion management skills were not significantly more likely to be associated with any one risk level ($X^2 = .104-.419, p>.05$).
- The positive outcome of healthy grieving/utilization of social support was significantly more likely to be associated with low-risk posts ($X^2 = .038, p<.05$).

Discussion & Conclusion

- Counter to our hypotheses, risk level did not impact the likelihood of intervention modality and positive outcomes were no more likely to be associated with in-person versus online (or both) interventions.
- The outcome of healthy grieving/utilization of social support was more likely to be associated with low-risk posts. Additional analyses is needed to determine why this was the case.
- Our results may reflect the extent of the integration of virtual communications in youths’ lives. Indeed, youth who grow up with social media may not differentiate between online and in-person interactions, as previous generations have.